

Annual report of the Medical Officer of Health / City Council of Pretoria.

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CITY COUNCIL OF PRETORIA



77TH ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR ENDING
31 DECEMBER 1980



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INTRODUCTORY LETTER

The Director-General : Department of Health and Welfare
 Private Bag X63
 PRETORIA
 0001

HIS WORSHIP THE MAYOR AND MEMBERS
 OF THE CITY COUNCIL OF PRETORIA

Gentlemen

ANNUAL REPORT, 1980

In terms of section 23(b) of the Health Act I have the pleasure of submitting to you the seventy-seventh annual report of the Medical Officer of Health of the City of Pretoria.

During the latter report of 1980 an outbreak of cholera occurred in a Black homeland in Eastern Transvaal and subsequently spread up to the boundaries of Pretoria. Although there were a few "imported" cases among the Black population of Pretoria, cholera, which is spread by water, constitutes no threat to cities such as Pretoria where purified water is supplied and an effective sewerage system exists.

Tuberculosis still remains the greatest public health problem in the community and the increase in the number of cases notified may, in my opinion, be ascribed to a more intensive campaign to trace cases. The problem as far as tuberculosis is concerned, is that cases now notified may have contracted the disease ten or twenty years ago or longer and that certain organisms may have remained dormant in lesions that were apparently healed.

In regard to births among the Black population use is made of the figures for births notified to the Health Department in terms of section 165 of the Local Government Ordinance, no 17 of 1939. The reason for this is that only a small portion of the number of births of Black babies is registered and that difficulties have been experienced with the permanent residential addresses of mothers of Black babies of whom births had indeed been registered.

I wish to make use of the opportunity to thank you, Mr Director-General of Health, and Welfare and your personnel for your co-operation during the past year. To you, Mr Mayor, the Chairman and members of the Management Committee and members of the Council, I wish to express this Department's appreciation of the manner in which you gave the Department your wholehearted support and co-operation in the course of the year.

I gratefully acknowledged the helpful manner in which the Municipal Language Bureau dealt with all that had to be translated. I also thank the undermentioned persons, not attached to this Department, for the particulars supplied in regard to the following matters forming part of this report and for the pleasant spirit in which these were furnished: The Director of the Weather Bureau (Pretoria) for climatic data; the Department of Statistics for certain population figures; the City Treasurer for values of rateable properties; the City Engineer and the Chief Chemist for water consumption, refuse removal services and a report on sewage purification; the District Manager, Central Transvaal Administration Board for housing and population figures for Blacks.

I also wish to make use of this opportunity to thank the staff of the Health Department very much for the service they rendered to the Pretoria community. I can assure them that it is highly appreciated. Furthermore, I want to say to the public of Pretoria: Thank you very much for your co-operation.

In the report which follows it has been endeavoured to portray the activities of the Department during 1980. The figures between brackets in the tables are those in respect of 1979.

Yours faithfully

J P A VENTER
MEDICAL OFFICER OF HEALTH

/sh

In terms of section 23(b) of the Health Act I have the pleasure of submitting to you the twenty-seventh annual report of the Medical Officer of Health of the City of Pretoria.

During the latter part of 1980 an outbreak of cholera occurred in a Black township in Eastern Transvaal and subsequently spread up to the borders of Pretoria. Although there were a few 'imported' cases among the Black population of Pretoria, cholera, which is caused by water, constitutes a threat to other areas where polluted water is supplied and an effective sewage system exists.

Tuberculosis still remains the greatest public health problem in the community and the focus of many notified cases. In my opinion, as recorded in a more intensive campaign to treat cases. The problem as far as tuberculosis is concerned, is that cases are notified and have contracted the disease ten or twenty years ago or longer and that certain organs may have remained dormant in lesions that were apparently healed.

In regard to birth among the Black population use is made of the figures for births notified to the Health Department in terms of section 125 of the Local Government Ordinance, no 71 of 1958. The reason for this is that only a small portion of the number of births of Black babies is registered and that difficulties have been experienced with the current residential addresses of fathers of Black babies of whom births had indeed been registered.

I wish to make use of the opportunity to thank you, Mr Director-General of Health, and fellow and your personnel for your co-operation during the past year. To you, Mr Mayor, the Chairman and members of the Management Committee and members of the Council, I wish to express this Department's appreciation of the manner in which you gave the Department your undivided support and co-operation in the course of the year.

I gratefully acknowledge the helpful manner in which the Municipal Engineering Service dealt with all that had to be done. I also thank the undersigned persons, not attached to this Department, for the assistance supplied in regard to the following matters forming part of this report and for the pleasure of which these were furnished: the Director of the Weather Bureau (Pretoria) for climatic data; the Department of Statistics for certain population figures; the City Engineer for values of refuse properties; the City Engineer, Mr. J. J. van der Merwe, for water consumption; refuse removal services and a report on sewage purification; the District Engineer, Central Transvaal Administration Board for housing and population figures for Blacks.

Value of agricultural property

GENERAL INFORMATION AND VITAL STATISTICS

Land	2 55 000 3
Improvements	2 35 151 500
Total	4 90 151 500

CLIMATE AND OTHER DATA

VITAL STATISTICS

CLIMATE DATA

POPULATION

White	25 000	25 000
Coloured	25 000	25 000
Indian	25 000	25 000
Chinese	25 000	25 000
Other	25 000	25 000

The population of the City of Pretoria is estimated to be 100,000 in 1927. The population of the City of Pretoria in 1926 was 95,000. The population of the City of Pretoria in 1925 was 90,000. The population of the City of Pretoria in 1924 was 85,000. The population of the City of Pretoria in 1923 was 80,000. The population of the City of Pretoria in 1922 was 75,000. The population of the City of Pretoria in 1921 was 70,000. The population of the City of Pretoria in 1920 was 65,000. The population of the City of Pretoria in 1919 was 60,000. The population of the City of Pretoria in 1918 was 55,000. The population of the City of Pretoria in 1917 was 50,000. The population of the City of Pretoria in 1916 was 45,000. The population of the City of Pretoria in 1915 was 40,000. The population of the City of Pretoria in 1914 was 35,000. The population of the City of Pretoria in 1913 was 30,000. The population of the City of Pretoria in 1912 was 25,000. The population of the City of Pretoria in 1911 was 20,000. The population of the City of Pretoria in 1910 was 15,000. The population of the City of Pretoria in 1909 was 10,000. The population of the City of Pretoria in 1908 was 5,000. The population of the City of Pretoria in 1907 was 0,000. The population of the City of Pretoria in 1906 was 0,000. The population of the City of Pretoria in 1905 was 0,000. The population of the City of Pretoria in 1904 was 0,000. The population of the City of Pretoria in 1903 was 0,000. The population of the City of Pretoria in 1902 was 0,000. The population of the City of Pretoria in 1901 was 0,000. The population of the City of Pretoria in 1900 was 0,000.

CITY COUNCIL OF PRETORIA

SEVENTY-SEVENTH ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

BIRTHS

The following table shows the number of births registered in the City of Pretoria during the year 1927.

	White	Coloured	Indian	Chinese	Other	Total
Local births	100	100	100	100	100	500
Births where mother not resident in Pretoria	100	100	100	100	100	500
Stillbirths (included in local births)	100	100	100	100	100	500
Total	200	200	200	200	200	1000

GENERAL INFORMATION AND VITAL STATISTICS

CLIMATIC AND OTHER DATA

CLIMATIC DATA

Latitude	:	25 degrees, 45 minutes south
Longitude	:	28 degrees, 11 minutes east
Mean altitude	:	1 326 metres
Temperature	:	(Statistics kindly supplied by the Director, Weather Bureau, Pretoria)
Air temperature	:	1980

	Mean max. °C	Mean min. °C	Highest reading of max. °C	Highest reading of min. °C	Mean relative humidity at		Rainfall	
					8 a.m. %	2 p.m. %	mm	days
January	27,6	17,1	33,8	11,5	74	52	208,7	15
February	26,8	16,4	29,7	13,5	79	58	89,0	15
March	26,9	15,9	30,1	12,0	77	49	45,4	5
April	25,5	6,3	29,5	6,3	68	35	0,4	1
May	23,0	7,5	27,0	3,5	70	31	0,2	1
June	19,0	3,9	22,5	0,0	72	34	0,0	0
July	19,3	3,6	24,0	0,1	72	31	0,0	0
August	22,0	7,8	26,2	1,5	69	32	0,0	0
September	23,1	7,1	29,7	7,1	69	43	54,7	7
October	28,5	14,4	33,5	10,1	62	35	18,4	3
November	26,3	15,4	31,2	12,0	69	50	187,7	15
December	28,1	16,8	31,9	11,9	72	50	60,9	13

EXTENT OF MUNICIPAL AREA

Pretoria and its suburbs, townlands included, are 56 980 hectare in extent. The city lies on and between three parallel quartzite ridges running east and west, the soil in the valleys in between consisting largely of shale.

VALUE OF RATEABLE PROPERTIES AS AT 31 DECEMBER 1980

The rates as at 31.12.1980 are 2,664 cents per rand per year on the value of the land.

Value of rateable property

Land	R 1 264 184 272
Improvements	R 2 174 973 470
Total	R 3 439 157 742

Value of unrateable and exempted property

Land	R 477 224 316
Improvements	R 622 734 700
Total	R 1 099 959 016

Value of agricultural property

Land	R 66 043 800
Improvements	R 30 951 900
Total	R 96 995 700

VITAL STATISTICS

POPULATION

White	386 000
Black	322 000
Asian	20 000
Coloured	20 000

The population figures for Whites, Coloured and Asians are an estimate of the population figures as at 31 December 1980.

The estimate of the Black population on 31 December 1980 which includes Atteridgeville, Mamelodi, Saulsville Hostel, Mamelodi Hostel and the White areas which fall within the jurisdiction of the Pretoria Municipality, has been furnished by the District Manager Administration Board for Central Transvaal.

The principal vital statistics for the year under review, corrected for outward transfers, are:

	White	Asian	Coloured	Black	Total Non-Whites	All races
				Registered	Registered	Registered
				Notified	Notified	Notified
Population	386,000	20,000	20,000	322,000	362,000	748,000
Birth rates	16,46	16,70	18,70	20,17	19,90	18,11
Death rates	6,51	1,95	5,50	5,34	5,17	5,86
Infantile mortality per 1 000 live births	10,08	11,98	53,48	53,13	51,24	31,96
Percentage illegitimate births	5,37	2,99	33,96	52,57	49,31	28,72
Death rate from tuberculosis (pulmonary) per 1 000 of population	0,03	0,15	0,25	0,36	0,35	0,19
Death rate from tuberculosis, all forms, per 1 000 of population	0,03	0,15	0,25	0,39	0,37	0,20

BIRTHS

The following births were registered in Pretoria during the year:

	White	Asian	Coloured	Black	Total Non-Whites	All races
				Registered	Registered	Registered
				Notified	Notified	Notified
Local births	5348	334	374	6494	7202	13550
	(6388)	(354)	(355)	(2017)	(9564)	(9114)
Births where mothers not residents of Pretoria	1663	48	16	2367	2431	4034
	(1782)	(66)	(49)	(453)	(568)	(2350)
Illegitimate births (included in local births)	341	10	127	3414	3551	3892
	(315)	(12)	(134)	(1125)	(1271)	(1536)
Stillbirths	27	2	3	91	96	123
	(44)	(2)	(3)	(138)	(143)	(187)

BIRTH RATES

White	16,46 (16,77)
Asian	16,70 (16,86)
Coloured	18,70 (18,68)
Black	20,17 (7,97 registered 35,0 notified)
All Non-Whites	19,90 (9,30 registered 32,64 notified)
All races	18,11 (13,52 registered 23,67 notified)

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

White	9,94 (10,5)
Asian	14,75 (15,24)
Coloured	13,10 (12,95)

The rates for Black population are not given because of the inaccurate notification of Black births.

DEATHS

	White	Asian	Coloured	Black	Total Non-Whites	All races
Local deaths (all ages)	2512 (2386)	39 (34)	112 (107)	1721 (1592)	1872 (1733)	4384 (4119)
Deaths of persons not being local residents	978 (917)	5 (4)	70 (38)	1457 (1222)	1532 (1264)	2510 (2181)

The "non-local" deaths occurred at:

	H.F. Verwoerd- and other hospitals	Mental hospital	Leper institution	Prison	Visitors
White	726 (631)	12 (22)	0 (0)	0 (4)	240 (260)
Non-White	989 (871)	16 (25)	0 (1)	125 (123)	402 (244)

DEATH RATES

White	6,51 (6,26)
Asian	5,34 (6,29)
Coloured	1,95 (1,62)
Black	5,60 (5,63)
All Non-Whites	5,17 (5,92)
Total, all races	5,86 (6,11)

INFANTILE MORTALITY

	White	Asian	Coloured	Black	Total Non-Whites	All races
Local deaths	64 (126)	4 (3)	20 (14)	345 (388)	369 (405)	433 (531)
Deaths of infants whose mothers had come to the city for confinement, or infants who died of disease from which they suffered when brought here	56 (62)	0 (1)	3 (2)	206 (270)	209 (273)	265 (335)
Total	120 (188)	4 (4)	23 (16)	551 (658)	578 (578)	698 (866)

INFANTILE MORTALITY RATES

White	10,08 (19,72)
Black	53,13 (192,36 registered 43,82 notified)
Coloured	53,48 (8,45)
Asian	11,98 (39,55)
All Non-Whites	51,24 (148,57 registered 42,36 notified)
All races	31,96 (58,26) registered 33,29 notified)

TABLE OF INFANTILE MORTALITY RATE FOR ALL RACES SINCE 1926

Year	White	Asian	Coloured	Black	All Non-Whites	Total all races
1926 - 1927	48,48			385,51	315,31	137,49
1936 - 1937	52,66			450,24	269,49	99,42
1946 - 1947	25,90			235,16	178,27	53,78
1951 - 1952	30,26			136,86	133,91	80,53
1956	21,31			170,25	164,25	96,37
1961	26,08			112,42	110,61	80,80
1966	25,89			126,06	123,06	76,54
1971	21,59	45,93	109,7	189,80	173,30	73,33
1973	21,83	29,76	70,38	151,30	132,66	59,77
1974	19,84	19,11	36,70	123,07	111,43	58,36
1975	16,64	15,58	32,26	96,89	86,25	44,45
1976	13,95	35,39	31,44	100,32	90,83	45,24
1977	14,19	16,02	29,41	92,17	81,57	40,64
1978	12,18	5,65	20,65	92,26	77,98	36,88
1979	19,72	8,45	39,55	192,36 registered 43,82 notified	148,57 registered 42,36 notified	58,26 registered 33,29 notified
1980	10,08	11,98	53,48	53,13	51,24	31,96

The rates for Asians and Coloureds are too low to be significant in calculating the proportion.

THE CAUSES OF INFANTILE MORTALITY AMONG WHITES WERE AS FOLLOWS

In the following tables, where causes of death are given, the code numbers, which appear in parenthesis, correspond with those published in the Manual on the Statistical Classification of Diseases, Injuries and Causes of Death issued by the Department of Statistics. (Based on the International Classification of Diseases, I.C.D., Eight Revision, 1965.)

	1980
Congenital malformation ((740-759)	3
Gastro-enteritis and colitis, except ulcerative, age four weeks and over (558)	2
Pneumonia and Bronchitis (480-486)	5
Infective and parasitic diseases (1-136)	0
Immaturity, unqualified (765)	11
Certain diseases of early infancy (760-779)	26
Atelectasis (776)	1
Other causes	20
Total : White Infantile Deaths	68

THE CAUSES OF INFANTILE MORTALITY AMONG NON-WHITES WERE AS FOLLOWS

	1980			
	Asian	Coloured	Black	Total
Certain diseases of early infancy (760-779)	0	5	107	112
Congenital malformations (750-759)	1	0	4	5
Gastro-enteritis and colitis, except ulcerative, age four weeks and over (550-558)	0	1	45	46
Pneumonia and Bronchitis (480-486)	1	1	47	49
Infective and parasitic diseases (1-136)	0	0	35	35
Other causes	1	5	45	51
Immaturity, unqualified (765)	1	8	54	63
Other avitaminoses and nutritional deficiency states (260-269)	0	0	8	8
Postnatal asphyxia and atelectasis (776)	0	0	0	0
Total : Non-White Infantile Deaths	4	20	345	369

The table hereunder indicates the number of Non-White births and infantile deaths during the year under review in the various Non-White residential areas:

BLACK

Eastern area		Western area		White area	
Births	Deaths	Births	Deaths	Births	Deaths
3465	199	2023	121	1006	25
(981)	(191)	(877)	(160)	(158)	(37)

ASIAN

Laudium		White area	
Births	Deaths	Births	Deaths
327	4	7	0
(353)	(14)	(1)	(0)

COLOURED

Eersterust		White area	
Births	Deaths	Births	Deaths
362	20	12	0
(345)	(3)	(10)	(0)

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

WHITE

24 Deaths were recorded in this age group :

Septicaemia (038)	1
Lymphosarcoma (200)	1
Diabetes Mellitus (250)	1
Nutritional Marasmus (261)	1
Meningitis (320)	1
Other conditions of brain (348)	1
Cardiac dysrhythmias (427)	1
Other myocardial insufficiency (428)	1
Intracerebral haemorrhage (431)	1
Acute sinusitis (461)	1
Other ill-defined and unknown causes of morbidity and mortality (796)	2
Motor vehicle traffic accident of unspecified nature (819)	1
Misadventure at the time of operation or later complications (878)	1
Ingestion of foreign body (912)	1
Effects of injury, undetermined whether accidentally or purposely inflicted (980)	9
Total	24

BLACK

95 Deaths were recorded in this age group :

Pulmonary Tuberculosis (011)	1
Tuberculosis of meninges and central nervous system (013)	1
Septicaemia (038)	1
Measles (055)	1
Viral Hepatitis (070)	1
Kwashiorkor (260)	3
Nutritional marasmus (261)	5
Disorders of fluid, electrolyte and acidbase balance (276)	1
Other deficiency anaemias (281)	1
Meningitis of unspecified cause (322)	1
Other and unspecified disorders of the nervous system (349)	1
Heart Failure (428)	1
Ill-defined descriptions and complications of heart disease (429)	1
Other venous embolism and thrombosis (453)	1
Pneumonia due to other specified organism (483)	1
Pneumonia in infectious diseases classified elsewhere (484)	1
Bronchopneumonia, organism unspecified (485)	17
Pneumonia, organism unspecified (486)	2
Bronchitis, not specified as acute or chronic (490)	2
Other diseases of lung (518)	1
Other non-infective gastro-enteritis and colitis (558)	20
Other disorders of liver (573)	2
Gastro-intestinal haemorrhage (578)	1
Other and ill-defined conditions originating in the perinatal period (779)	1
Sudden death, cause unknown (798)	26
Accident caused by unspecified fire	1
Total	95

ASIAN

One Death was recorded in this age group,
Meningitis of unspecified cause (322)

1

COLOURED

2 Deaths were recorded in this age group:

Bronchopneumonia, unspecified (485)
Other congenital anomalies of digestive system (751)
Motor vehicle traffic accident of unspecified nature (819)

Total

1

0

1

2

PRINCIPAL CAUSES OF DEATH IN PERSONS FIVE YEARS AND OLDER

The principal causes of death were:

	Whites	Non-Whites
Neoplasm (140-239)	333	143
Disease of the circulatory system (393-429)	672	159
Pneumonia and Bronchitis (466, 480-493)	108	109
Influenza (470-474)	0	3
Typhoid fever (001)	0	6
Pulmonary tuberculosis (011)	9	38
Tuberculosis, other forms (010-019) (except 011)	9	1
Diabetes mellitus (250)	24	41
Vascular lesions affecting central nervous system (430-438)	182	116
Nephritis and nephrosis and other diseases of urinary system (580-599)	90	35
Diseases of arteries and diseases of the veins and other diseases of circulatory system (440-458)	241	12
Diseases of liver, gallbladder, and pancreas (570-578)	57	45
Complications of pregnancy, and delivery (630-678)	0	24
Senility and ill-defined diseases (790-794)	0	8
Suicide and self-inflicted injury (E950-E959, E979)	10	3
Accidents (E800-E929)	124	41
Murder (E960-969)	4	3
Infective and parasitic diseases (090-136)	0	2
Other causes	557	618
Total	2420	1407

DETAILS OF CAUSES OF DEATH : PERSONS FIVE YEARS AND OLDER

1. NEOPLASMS (140-239)

WHITE : 333 Death rate 0.86 per 1 000 population

White : Part of body affected :

Malignant neoplasm of lip (140)	1
Malignant neoplasm of tongue (141)	3
Malignant neoplasm of floor of mouth (144)	3
Malignant neoplasm of hypopharynx (148)	4
Malignant neoplasm of oesophagus (150)	2
Malignant neoplasm of stomach (151)	27
Malignant neoplasm of large intestine, except rectum (153)	19
Malignant neoplasm of rectum and rectosigmoid junction (154)	19
Malignant neoplasm of liver and intrahepatic bile ducts, specified as primary (155)	8
Malignant neoplasm of pancreas (157)	16
Malignant neoplasm of larynx (161)	7
Malignant neoplasm of bronchus and lung (162)	54
Malignant neoplasm of respiratory system (165)	1
Malignant neoplasm of bone (170)	1
Malignant melanoma of skin (172)	4
Malignant neoplasm of breast (174)	35
Malignant neoplasm of male breast (175)	1
Malignant neoplasm of uterus (179)	3
Malignant neoplasm of cervix uteri (180)	6
Malignant neoplasm of ovary fallopian tube and broad ligament (183)	9
Malignant neoplasm of other and unspecified female genital organs (184)	1
Malignant neoplasm of prostate (185)	8
Malignant neoplasm of bladder (188)	14
Malignant neoplasm of other and unspecified urinary organs (189)	2
Malignant neoplasm of brain (191)	16
Malignant neoplasm of thyroid gland (193)	2
Malignant neoplasm of other, ill-defined sites (195)	3
Secondary malignant neoplasm of respiratory and digestive systems (197)	1
Malignant neoplasm without specification of site (199)	15
Lympho sarcoma (200)	1
Hodgkin's disease (201)	4
Other malignant neoplasm of lymphoid and histiocytic tissue (202)	6
Multiple myeloma (203)	5
Lymphatic leukaemia (204)	6
Myeloid Leukaemia (205)	17
Leukaemia of unspecified cell type (208)	9
Total	333

Age of death :

Under 40 years	40-49	50-59	60-69	70-79	80 and over	Total
23	29	65	97	75	44	333

NON-WHITE

Part of body affected :

Black

Malignant neoplasm of floor of mouth (144)	1
Malignant neoplasm of oesophagus (150)	32
Malignant neoplasm of stomach (151)	10
Malignant neoplasm of large intestine, except rectum (153)	1
Malignant neoplasm of rectum and rectosigmoid junction (154)	4
Malignant neoplasm of liver and intrahepatic bile ducts, specified as primary (155)	9
Malignant neoplasm of pancreas (157)	1
Malignant neoplasm of ill-defined sites within the digestive organs (159)	1
Malignant neoplasm of larynx (161)	2
Malignant neoplasm of bronchus and lung (162)	17
Malignant neoplasm of bone and articular cartilage (170)	1
Malignant neoplasm of female breast (174)	6
Malignant neoplasm of uterus, part unspecified (179)	1
Malignant neoplasm of cervix uteri (180)	10
Malignant neoplasm of body of uterus (182)	1
Malignant neoplasm of ovary and other uterine adnexa (183)	3
Malignant neoplasm of prostate (185)	1
Malignant neoplasm of bladder (188)	2
Malignant neoplasm of kidney and other unspecified urinary organs (189)	1
Malignant neoplasm of brain (191)	4
Malignant neoplasm of thyroid gland (193)	1
Malignant neoplasm of respiratory and digestive systems (197)	1
Malignant neoplasm without specification of site (199)	8
Lymphosarcoma and reticulosarcoma (200)	2
Hodgkin's disease (201)	1
Other malignant, neoplasm of lymphoid and histiocytic tissue (202)	3
Multiple myeloma and immunoproliferative neoplasms (203)	2
Lymphoid leukaemia (204)	1
Myeloid, Leukaemia (205)	1
Neoplasm of unspecified nature (239)	2
Total	130

Asian

Malignant neoplasm of larynx (161)	1
Leukaemia of unspecified cell type (208)	1
Total	2

Coloured

Malignant neoplasm of stomach (151)	1
Malignant neoplasm of colon (153)	2
Malignant neoplasm of larynx (161)	1
Malignant neoplasm of bronchus and lung (162)	3
Malignant neoplasm of cervix uteri (180)	1
Malignant neoplasm of bladder (188)	1
Malignant neoplasm without specification of site (199)	1
Leukaemia of unspecified cell type (208)	1
Total	11

2. DISEASES OF THE CIRCULATORY SYSTEM(390-429)

Death rate per 1 000 White population :1,74 (0,84)

White : 672

Non-White : 159

(Black : 127 Asian : 8 Coloured : 24)

3. DISEASES OF THE RESPIRATORY SYSTEM (466, 480-493)

White : 108

Non-White : 109

(Black : 98 Asian : 4 Coloured : 7)

4. INFLUENZA (470-474)

White : 0

Non-White : 3

(Black : 3)

5. TYPHOID FEVER (001)

White : 0

Non-White : 6

(Black : 6)

6. TUBERCULOSIS (10-19)

White : 9

Non-White : 1

(Black : 1)

7. DIABETES MELLITUS (250)

White : 24

Non-White : 41

(Black : 39 Asian : 2)

8. VASCULAR LESIONS AFFECTING CENTRAL NERVOUS SYSTEM (430-438)

White : 182

Non-White : 116

(Black : 107 Asian : 1 Coloured : 8)

9. DISEASES OF THE GENITO-URINARY SYSTEM (580-599)

White : 90

Non-White : 35

(Black : 29 Asian : 1 Coloured : 5)

10. DISEASES OF ARTERIES, VEINS AND OTHER DISEASES OF CIRCULATORY SYSTEM (440-458)

White : 241

Non-White : 12

(Black : 10 Asian : 1 Coloured : 1)

11. DISEASES OF LIVER, GALLBLADDER AND PANCREAS (570-578)

White : 57

Non-White : 45

(Black : 41 Coloured : 4)

12. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (630-678)

White : 0
Non-White: 24

(Black : 23 Asian : 1)

13. SENILITY AND ILL-DEFINED DISEASES (790-794)

White : 0
Non-White : 8

(Black : 6 Asian : 1 Coloured : 1)

14. SUICIDE AND SELF-INFLICTED INJURY (E950-E959, E979)

White : 10
Non-White : 3

(Black : 3)

15. MURDER (E960-E969)

White : 4
Non-White : 3

(Black : 3)

	White	Black	Asian	Coloured
Assault by hanging and strangulation (E963)	0	1	0	0
Homicide and injuries purposely inflicted by other persons (965)	2	0	0	0
Assault by other and unspecified means (968)	2	0	0	0
Legal Execution (E978)	0	2	0	0
Total	4	3	0	0

16. ACCIDENTS (E800-E929)

White : 124
Non-White : 41

(Black : 25 Asian : 10 Coloured : 6)

	White	Black	Asian	Coloured
Railway accidents (800-807)	5	2	0	0
Motor vehicle traffic accident of unspecified nature (819)	70	12	6	8
Vehicle collision with pedestrian (E814)	1	4	0	0
Pedal cycle accident (E826)	1	0	0	0
Other road vehicle accidents (E829)	15	0	0	0
Other and unspecified fall (887)	1	1	0	0
Alcohol poisoning (E860)	2	0	0	0
Accidental poisoning (E869)	1	0	0	0
Abnormal reaction of patient at the time of the operation (E878)	13	0	0	1
Fall from scaffolding (E881)	1	0	0	0
Fracture, cause unspecified (E887)	1	1	0	0
Unspecified fall (E888)	3	0	0	1
Suffocation (E911)	1	0	0	0
Mechanical suffocation (E913)	2	0	0	0
Other unspecified misadventures during medical care (E876)	0	1	0	0
Caused by electric current (E925)	1	0	0	0
Late effects of accidental injury (E929)	6	2	0	0
Conflagration in other and unspecified building or structure (E891)	0	1	0	0
Accident caused by unspecified fire (E899)	0	1	0	0
Total	124	25	6	10

INFECTIOUS AND OTHER NOTIFIABLE DISEASES

A new list of medical conditions notifiable throughout the country, came into force with the publication of Government Notice R1802 of 24 August 1979.

Excluding tuberculosis, 354 cases of infectious or other notifiable diseases were reported to the Department. This figure represents an decrease in comparison with that for last year when it was 406. The cases of measles notified, probably reflects only a very small portion of the incidence.

Due to the fact that measles, which at present happens to be an extremely common disease, became notifiable with the publication of the new list, there is a marked increase in the number of cases notified.

The following table shows the number of notifications of the various infectious diseases, local and imported:

	Whites	Non-Whites	Total
Measles	76 (140)	118 (32)	194 (172)
Typhoid fever	4 (4)	25 (12)	29 (16)
Polioyelitis	0 (0)	0 (2)	0 (2)
Smallpox	0 (0)	0 (0)	0 (0)
Diphtheria	0 (0)	2 (1)	2 (1)
Malaria	3 (4)	1 (1)	4 (5)
Meningococcus meningitis	8 (1)	2 (0)	10 (1)
Infectious hepatitis	42 (174)	4 (3)	46 (177)
Staphylococcus infection	2 (0)	0 (0)	2 (0)
Other infectious or notifiable diseases	57 (6)	10 (1)	67 (7)
Total	192 (354)	162 (52)	354 (406)

In the report which follows, the figures in brackets, unless otherwise stated, are those for the previous year.

TYPHOID FEVER

	Whites	Non-Whites	Total
Local cases	3 (1)	12 (7)	15 (8)
Imported cases	1 (3)	13 (5)	14 (8)
Incidence rate per 100 000 population (local cases only)	0,78 (0,26)	+ (2,39)	+ (1,19)
Death in local cases	0 (0)	0 (0)	0 (0)
Deaths in imported cases	0 (0)	2 (0)	2 (0)

+ figures not available

Local cases

The Non-White cases were all Black

Typhoid carriers

The Department regularly examines dairy employees, employees at the municipal waterworks and other Non-Whites employed in the handling of foodstuffs as well as persons who were in contact with a case of typhoid fever, for the carrier state.

The number of persons so examined, with the results of the bacteriological examinations, is shown in the following schedule:

	No. of persons tested	Blood found Vi-positive	Stool found positive	Urine found positive
Typhoid fever investigations	144 (58)	1 (0)	3 (1)	1 (0)
Prospective employees at dairies	26 (52)	0 (0)	0 (0)	0 (0)
Other food handlers	381 (354)	0 (2)	0 (0)	0 (0)
Total	551 (426)	1 (2)	3 (1)	1 (0)

Phage typing

Phage typing of *S. typhi* is an important step in the process of investigation when efforts are made to link a known carrier with an outbreak of typhoid fever. This function is still being carried out by the South African Institute for Medical Research, Milner Park, Johannesburg.

This Department undertakes to collect the typhoid cultures from the Institute for Pathology and to send them to the S.A. Institute for Medical Research for phage typing.

During the year 40 such cultures were sent, with the following results:

	Specimens
Phage type A	12
Degraded Vi strain	6
Untypable strain	9
<i>S. Typhi</i> not isolated	1
Phage type L10	0
Phage type F6	0
Results outstanding	12

Imported cases

Two Black cases died. Some of the patients contracted the disease elsewhere, but resided with friends or relatives in Pretoria for a period before their discovery and admission to hospital.

POLIOMYELITIS

One imported case were notified during the year. The patient was a Black child.

	Whites	Non-Whites	Total
Local cases	0 (0)	0 (1)	0 (1)
Imported cases	0 (0)	1 (1)	1 (1)

Immunization against poliomyelitis

The Department conduct regular immunization clinics for the administration of oral poliomyelitis vaccine at various centres in the city, for both Whites and Non-Whites. The vaccine is also issued to private practitioners, who are still making use of this service for administration to their patients.

DIPHTHERIA

The following cases were reported during the year:

	Whites	Non-Whites	Total
Local cases	0 (0)	2 (0)	2 (0)
Imported cases	0 (0)	0 (1)	0 (1)
Incidence rate per 100 000 population (local cases only)	0,0 (0,0)	0,27 (0,0)	0,27 (0,0)
Death in local cases	0 (0)	1 (0)	1 (0)

Local cases

Two (0) cases were reported during the year. One was a Black child of 7 years from Mamelodi. She was isolated and treated at Kalafong Hospital. One was an Asian child of 1 year from Laudium. He was isolated and treated at the H.F. Verwoerd Hospital. The black child died.

Imported cases

No (1) cases were reported during the year.

Immunization

Frequent appeals are made to the public, both White and Non-White, through the Press and also the "News Letter" of the City Council, as well as orally at clinics and on visits to the public, urging them to have their children immunized against the disease.

The number of persons inoculated against diphtheria at the Department's White and Non-White clinics over the past ten years, together with the number of cases occurring each year and the incidence rates for the same period, are reflected in the following table:

Year	W H I T E S			N O N - W H I T E S		
	Number immunized	Number of cases	Incidence rate per 100 000 population	Number immunized	Number of cases	Incidence rate per 100 000 population
1970	5 533	4	1,4	4 605	5	2,2
1971	6 474	7	2,4	4 177	3	1,2
1972	6 393	0	0,0	5 041	7	2,8
1973	5 826	0	0,0	4 983	5	2,0
1974	5 494	0	0,0	5 383	6	2,38
1975	5 595	0	0,0	5 596	6	2,32
1976	5 123	0	0,0	4 855	0	0,0
1977	5 588	0	0,0	5 185	0	0,0
1978	5 202	1	0,26	4 885	0	0,0
1979	4 970	0	0,0	5 489	0	0,0
1980	5 124	0	0,0	4 984	2	0,27

MALARIA

During the year 4 residents of Pretoria, 3 Whites and 1 Black man, contracted the disease during visits to malarious areas.

Two (4) cases were admitted to hospitals for treatment and recovered. Two case was treated at home and recovered.

The public does not always heed the frequent warnings to take anti-malaria tablets when visiting malarious areas. In all 4(5) cases Plasmodium falciparum was identified in the blood smears.

MENINGOCOCCAL MENINGITIS

The following cases were reported during the year:

	Whites	Non-Whites	Total
Local cases	7 (1)	2 (0)	9 (1)
Imported cases	1 (0)	0 (0)	1 (0)

Local cases

Nine (1) cases were notified. Two boys who were 13 and 2 years of age respectively, died.

The Department gives prophylactic treatment to all close contacts of a case. No secondary cases were reported from amongst these contacts.

Imported cases

One imported case was notified.

INFECTIOUS HEPATITIS

The number of cases reported were as follows:

	Whites	Non-Whites	Total
Local cases	38 (168)	3 (3)	41 (171)
Imported cases	4 (6)	1 (0)	5 (6)

It is believed that many cases are never reported as members of the staff frequently discover further unreported cases during their investigations.

The age groups of the cases notified, are shown in the following table:

	0-1 yr	1-4 yrs	5-9 yrs	10-19 yrs	20-39 yrs	40 yrs and over	Total
Local	0 (0)	3 (20)	4 (36)	17 (65)	14 (38)	3 (12)	41 (171)
Imported	0 (0)	1 (0)	0 (0)	1 (2)	3 (3)	0 (1)	5 (6)
Total	0 (0)	4 (20)	4 (36)	18 (67)	17 (41)	3 (13)	46 (177)

Forty three (162) cases were treated at home and three (9) were treated in various hospitals in the city. Five (45) secondary infections were reported.

Imported cases

Five (6) imported cases were notified. The patients contracted the disease elsewhere, but were resident in Pretoria at the time of notification.

MEASLES

On account of the fact that measles is a highly infectious disease with a high morbidity, and because of the various complications resulting from it, representations have been made to the State Department of Health over a long period for supplying local authorities with measles vaccine. As from 1976, the State Department of Health started making a freeze-dried live measles vaccine available to local authorities.

Measles became a notifiable medical condition in terms of Government Notice R1802 of 24 August 1979. Although it is accepted that the majority cases were not notified, the following cases were notified during 1980:

Whites	Non-Whites	Total
76 (140)	118 (32)	194 (172)

STAPHYLOCOCCAL INFECTIONS (in mothers and new-born babies)

Two (0) cases were reported during the year.

The distribution of cases, together with the number of confinements in each maternity home or group and the percentage of mothers and babies who showed signs of infection after parturition are shown in the following table:

	No. of infections	No. of confinements	Percentage of confinements infected
WHITES			
Hospital A	1	3 047	0,03 %
Hospital B	0	2 027	0,0 %
Hospital C	1	2 097	0,05 %
Hospital D	0	602	0,0 %
Midwives	0	0	0,0 %
Hospital I	0	865	0,0 %
Total	2	8 638	0,02 %
NON-Whites			
Hospital E	0	3 371	0,0 %
Hospital F	0	1 835	0,0 %
Hospital G	0	3 847	0,0 %
Hospital H	0	703	0,0 %
Midwives	0	126	0,0 %
Private Nursing Homes	0	0	0,0 %
Total		9 882	0,0 %

OTHER NOTIFIABLE DISEASES REPORTED

	Local cases		Imported cases	
	Whites	Non-Whites	Whites	Non-Whites
Erysipelas	0 (0)	0 (1)	0 (0)	0 (0)
Encephalitis	0 (0)	0 (0)	0 (0)	0 (0)
Typhus fever (Murine)	0 (2)	0 (0)	0 (0)	0 (0)
Lead poisoning	0 (0)	0 (0)	0 (0)	0 (0)
Insecticidal poisoning	2 (0)	0 (0)	0 (0)	0 (0)
Bronchial carcinoma	55 (4)	10 (0)	0 (0)	0 (0)

INFECTIOUS-DISEASES HOSPITAL

This hospital, an institution with 90 beds, was the property of the City Council of Pretoria and is situated in the grounds of the H.F. Verwoerd Hospital.

As a result of the decline in the incidence of certain infectious diseases, especially diphtheria and poliomyelitis quite a number of beds that were used for isolation purposes have become superfluous. Two wards of this hospital, with a total of 62 beds, were leased to the Transvaal Department of Hospital Services with the result that 28 beds were available for cases suffering from infectious diseases.

During 1977 the buildings were expropriated by the Transvaal Provincial Administration, but the 28 beds are still available for the treatment by the City Health Department of White patients suffering from infectious diseases.

Asian and Coloured patients are admitted to a section of the H.F. Verwoerd Hospital and Black people to the hospital at Ga-Rankuwa.

FINANCIAL ARRANGEMENTS

The H.F. Verwoerd Hospital supplies all nursing staff, dispensing requirements, X-ray facilities, rations, linen and laundering, steam, light and water, and also bears certain specified costs of maintenance of buildings and equipment.

The City Council in return pays a fixed sum per patient per day for those patients for which it accepts financial responsibility.

In addition, by mutual agreement, the Specialist Staff of the H.F. Verwoerd Hospital is available for consultation at the Infectious-diseases Hospital, while the City Council's Medical Officers provide a twenty-four hour infectious-diseases consultation service which is used and appreciated particularly by the staff of the Casualty and Admissions Sections of the H.F. Verwoerd Hospital.

AREAS SERVED

These include the Pretoria municipal area, its peri-urban areas and the Northern and North-western Transvaal, but patients are accepted from any other area which happens to be having difficulty in accommodating its own patients during, for example, an epidemic.

AMBULANCE ARRANGEMENTS

The Pretoria City Council provides its own infectious-diseases ambulance service, while other local authorities send their patients in by rail, taxi or ambulance as the occasion demands.

INFECTIOUS-DISEASES HOSPITAL : STATISTICS

Comparative figures are given in brackets and relate to the twelve-month period 1 January 1980 to 31 December 1980.

TOTAL ADMISSIONS

53 (158) patients were admitted.

Area distribution

White

Pretoria

46 (97)

Other areas

7 (61)

ACUTE ANTERIOR POLIOMYELITIS

No (0) cases were admitted during 1900.

DIPHTHERIA

No (0) cases were admitted during 1900.

TYPHOID FEVER

Three (8) cases were admitted during 1980. One came from Pretoria and two came from outside the Pretoria Municipal area.

TUBERCULOSIS

Cases of pulmonary tuberculosis are accepted in the Isolation Hospital for only a few days whilst arrangements are made for their admission to a sanatorium or until they can be referred to tuberculosis clinics.

Twenty seven (21) patients were admitted.

Area distribution	Pretoria	Other areas
White	25 (16)	2 (5)

There were 0 (1) deaths.

TUBERCULAR MENINGITIS

No (1) cases were admitted.

Note : For hospitalization of tuberculosis generally, see section under "Tuberculosis".

MEASLES

A total of 18 (33) cases were admitted.

Area distribution	Pretoria	Other areas
White	17 (47)	1 (36)

There were no (0) deaths.

The majority of patients suffered from broncho-pneumonia as the main complication, but there was one case with otitis media and two with gastro-enteritis.

MENINGOCOCCAL MENINGITIS

Four (5) cases were admitted.

Area distribution	Pretoria	Other areas
White	3 (2)	1 (3)
There were two (1) deaths.		

ERYSIPELAS

No (0) patients were admitted.

The following table summarizes the number of cases treated and distribution:

Disease	Whites	
	Pretoria	Other areas
Infective hepatitis	0 (2)	0 (0)
Acute anterior poliomyelitis	0 (0)	0 (0)
Diphtheria	0 (0)	0 (0)
Typhoid fever	1 (3)	2 (5)
Paratyphoid B	0 (1)	0 (0)
Tuberculosis	25 (16)	2 (5)
Tubercular meningitis	0 (1)	0 (0)
Measles	17 (47)	1 (36)
Meningococcal meningitis	3 (2)	1 (3)
Leprosy	0 (0)	0 (0)
Virus meningitis	0 (1)	0 (0)
Total	46 (97)	6 (61)

IMMUNIZATION

Because the immunization of the population against certain communicable diseases is one of the most important measures which may be taken in preventive medicine, the Department conduct regular clinic sessions for the immunization of children. These sessions are conducted for both Whites and Non-Whites in all residential areas throughout the City, and certain immunizations are conducted at the schools.

The Department at present provides immunization against diphtheria, whooping-cough, tetanus, poliomyelitis, tuberculosis and measles. Certain women and girls are also immunized against rubella (German measles).

The immunizations performed in the course of the year are reflected in the following tables:

IMMUNIZATION AGAINST POLIOMYELITIS

The number of doses of oral vaccine administered to the various races in the respective age groups is shown in the following table: (The number of third doses given indicates the number of persons who have received the complete course.)

Age group	White	Asian	Coloured	Black	Total
Under 1 year	14 039 (15 633)	960 (1 240)	1 117 (1 245)	14 037 (13 913)	30 753 (32 031)
1 - 6 years	5 003 (3 728)	491 (469)	561 (663)	3 268 (3 858)	9 323 (8 718)
7 - 10 years	585 (113)	0 (0)	12 (2)	16 (1)	613 (116)
11 - 19 years	114 (16)	0 (0)	3 (0)	0 (0)	117 (16)
20 years and over	33 (18)	0 (0)	0 (0)	0 (0)	33 (18)
Pregnant women	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Immigrants	11 (19)	0 (0)	0 (0)	0 (0)	11 (19)
Total	19 785 (19 527)	1 451 (1 709)	1 693 (1 910)	17 321 (17 776)	40 250 (40 922)
Third doses	4 644 (5 242)	335 (379)	397 (446)	4 102 (4 516)	9 478 (10 583)
Fourth doses	4 983 (2 921)	459 (592)	580 (550)	4 557 (3 313)	10 579 (7 376)

IMMUNIZATION AGAINST TUBERCULOSIS WITH B.C.G.

	White	Coloured	Asian	Black	Total
Young babies (0 - 3 months)	6 388 (6 952)	275 (305)	209 (147)	6 958 (7 112)	13 830 (14 531)
Other	11 635 (11 815)	1 492 (847)	731 (806)	15 660 (13 038)	29 518 (27 506)
Total	18 023 (18 767)	1 767 (1 152)	940 (953)	22 618 (20 150)	43 348 (42 037)

IMMUNIZATION AGAINST DIPHTHERIA, TETANUS AND WHOOPING COUGH

DIPHTHERIA-PERTUSSES AND TETANUS

	White	Coloured	Asian	Black	Total
First dose	5 677 (5 349)	424 (449)	369 (389)	5 578 (4 962)	12 048 (11 149)
Second dose	5 075 (4 705)	416 (383)	348 (339)	4 803 (5 116)	10 642 (10 543)
Third dose	2 556 (4 504)	399 (365)	345 (178)	4 243 (4 192)	7 543 (9 239)
Booster dose	53 (56)	0 (0)	0 (0)	0 (0)	53 (56)
Total	13 361 (14 614)	1 239 (1 197)	1 062 (906)	14 624 (14 270)	30 286 (30 987)

DIPHTHERIA - TETANUS

	White	Coloured	Asian	Black	Total
First dose	314 (454)	45 (38)	18 (17)	409 (991)	786 (1 500)
Second dose	260 (368)	33 (29)	7 (7)	338 (955)	638 (1 359)
Third dose	333 (466)	29 (44)	18 (18)	338 (692)	718 (1 220)
Booster dose	8 474 (8 078)	706 (616)	714 (663)	2 972 (2 510)	12 866 (11 867)
Total	9 381 (9 366)	813 (727)	757 (705)	4 857 (5 138)	15 008 (15 946)

DIPHTHERIA (ADV)

	White	Coloured	Asian	Black	Total
First dose	9 (2)	0 (0)	0 (0)	0 (0)	9 (2)
Second dose	21 (1)	3 (0)	0 (0)	0 (0)	24 (1)
Booster dose	1 040 (416)	4 (5)	0 (0)	0 (0)	1 044 (421)
Total	1 070 (419)	7 (5)	0 (0)	0 (0)	1 077 (424)

TETANUS TOXOID

	White	Coloured	Asian	Black	Total
First dose	57 (60)	0 (0)	0 (0)	803 (1 430)	860 (1 490)
Second dose	162 (192)	0 (0)	0 (0)	683 (764)	845 (956)
Third dose	83 (74)	0 (0)	0 (0)	405 (510)	488 (584)
Booster dose	11 (31)	0 (0)	0 (0)	110 (124)	121 (155)
Total	313 (357)	0 (0)	0 (0)	2 001 (2 828)	2 314 (3 185)

IMMUNIZATION AGAINST MEASLES

During the past year the following immunizations against measles were performed:

	White	Coloured	Asian	Black	Total
6 months - 1 year	1 944 (1 467)	289 (245)	209 (265)	3 286 (2 709)	5 728 (4 686)
1 year - 2 years	1 231 (1 567)	129 (176)	86 (249)	707 (1 232)	2 153 (3 224)
Over 2 years	507 (555)	95 (0)	18 (13)	257 (342)	877 (910)
Total	3 682 (3 589)	513 (421)	313 (527)	4 250 (4 283)	8 758 (8 820)

IMMUNIZATION AGAINST RUBELLA (GERMAN MEASLES)

Rubella or German measles is a very mild contagious disease with a high incidence among young adults. The problem is, however, that should a woman contract the disease during the first trimester of pregnancy, there exists a very strong possibility of her baby being born with congenital abnormalities. With a view to preventing these problems, the Council resolved a few years ago to immunize all the standard five girls in provincial schools in Pretoria against rubella with a freeze-dried live vaccine. This immunization is performed at the schools every year. During 1980 3 479 girls were immunized against rubella at 97 schools in Pretoria.

Because of the danger posed by rubella during early pregnancy, routine tests are performed at the Pretoria Maternity Hospital to establish whether or not women who are admitted for their confinement, are immune to rubella. If they are not immune, these women are then immunized so as to prevent them from contracting the disease during a subsequent pregnancy. During 1980 350 women were immunized here against rubella.

TUBERCULOSIS

During the year, 1334 notifications of this disease were received. This shows an increase of 273 cases compared with the year 1979 when 1061 cases were notified. (1978, 953 cases and 1977, 1007 cases.)

The efforts of the various sections in case finding, immunization and control of this disease have continued unabated.

Details of statistics and control measures will be found in the report which follows.

VITAL STATISTICS

Table A which follows, shows the total number of notifications for the year classified in the various races, and sexes, together with incidence rates for local cases in each group. In table B and B1 comparative figures of notifications for the years 1960 to 1980 are given. (See pages, 26, 27 and 28.)

AGE GROUPS

Tables C and C1 show the number of cases in the various age groups for Whites and Non-Whites for the years 1972 to 1980 respectively, together with the percentage of the total number of cases reported in each group for the year.

TABLE C

WHITE CASES - LOCAL AND IMPORTED (ALL FORMS)

	AGE GROUPS													
	0-1 yr		1-4 yrs		5-9 yrs		10-19 yrs		20-39 yrs		40 yrs & over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1972	0	0	3	3	2	1	1	1	8	8	21	13	35	26
1973	0	0	0	1	1	0	1	1	9	10	25	17	36	29
1974	1	0	1	1	1	2	1	0	10	7	27	13	41	23
1975	1	0	1	1	3	1	1	1	11	11	24	15	41	29
1976	2	0	2	3	2	3	1	2	9	9	24	18	40	35
1977	0	1	1	2	3	3	5	1	13	13	47	17	69	37
1978	1	0	4	0	0	0	1	1	6	11	14	17	26	29
1979	0	0	7	5	0	0	1	3	10	10	20	17	38	35
1980	1	0	4	4	7	6	3	5	8	8	19	12	42	35

PERCENTAGE OF TOTAL TUBERCULOSIS NOTIFICATIONS

	0-1 yr	1-4 yrs	5-9 yrs	10-19 yrs	20-39 yrs	40 years & over
1972	-	9,8 %	4,9 %	3,3 %	26,2 %	55,7 %
1973	-	1,5 %	1,5 %	3,1 %	29,2 %	64,6 %
1974	1,6 %	3,1 %	4,7 %	0,02 %	26,6 %	62,5 %
1975	1,4 %	2,8 %	5,7 %	2,8 %	31,4 %	55,7 %
1976	2,0 %	5,0 %	5,0 %	4,0 %	24,0 %	56,0 %
1977	0,94 %	2,63 %	5,66 %	5,66 %	24,53 %	60,38 %
1978	1,82 %	7,27 %	0,0 %	3,64 %	30,91 %	56,36 %
1979	0,0 %	16,44 %	0,0 %	5,48 %	27,40 %	50,68 %
1980	1,30 %	10,39 %	16,88 %	10,39 %	20,78 %	40,26 %

COMPARATIVE TABLE OF NOTIFICATIONS AND INCIDENCE OF TUBERCULOSIS FOR THE YEARS 1960 - 1980
NON WHITES - NEW CASES

TABLE B1

	Incidence rate per 1 000 population (local cases)																																						
	Local cases												Imported cases																										
	Pulmonary tuberculosis				All forms				Total	Pulmonary tuberculosis				All forms				Total	Pulmonary tuberculosis				All forms				Total	Pulmonary tuberculosis				All forms				Total			
	M	F	Total	Population	M	F	Total	Population		M	F	Total	Population	M	F	Total	Population		M	F	Total	Population	M	F	Total	Population		M	F	Total	Population								
1960	268	151	419	47	51	98	315	202	77	63	140	10	11	21	87	74	1,382	779	2,161	242	263	505	1,624	1,402	193 950														
1961	329	193	522	98	96	194	427	289	92	85	177	19	15	34	111	100	1,645	965	2,61	49	48	97	2,135	1,445	199 940														
1962	378	228	606	102	70	152	460	298	149	83	232	21	14	35	170	97	1,836	1,07	2,943	398	34	378	2,234	1,447	205 900														
1963	355	206	561	69	81	150	424	287	48	39	87	8	17	25	156	56	1,711	993	2,704	333	39	723	2,044	1,383	207 450														
1964	393	166	559	111	106	117	504	272	28	36	64	4	7	11	32	43	1,723	755	2,478	519	501	1,020	2,243	1,256	211 800														
1965	389	182	571	176	234	410	565	416	47	32	79	13	13	26	60	45	NOT AVAILABLE																						
1966	487	182	669	209	162	371	696	344	48	40	88	9	9	18	57	49	2,134	816	3,000	937	726	1,664	3,121	1,543	223 000														
1967	382	183	565	156	168	324	538	351	39	29	68	7	5	12	46	34	1,704	816	2,519	695	749	1,444	2,399	1,565	224 300														
1968	382	182	564	160	196	356	542	378	35	30	65	11	5	16	46	35	1,718	819	2,537	720	882	1,601	2,438	1,700	222 300														
1969	354	176	530	213	216	429	567	392	37	26	63	7	6	13	44	32	1,577	784	2,362	949	962	1,912	2,527	1,747	224 418														
1970	351	158	509	188	196	384	539	354	54	30	84	8	10	18	62	40	1,53	689	2,22	82	854	1,675	2,35	1,543	229 857														
1971	340	130	470	84	81	165	424	211	39	32	71	3	4	7	42	36	1,345	514	1,859	332	320	652	1,677	834	252 842														
1972	348	166	514	58	65	123	406	231	47	36	83	6	3	9	53	39	1,450	691	2,142	241	270	512	1,692	962	239 900														
1973	361	143	504	51	65	116	412	208	47	33	80	7	8	15	54	41	1,471	583	2,054	208	265	473	1,679	848	245 400														
1974	405	182	587	19	15	34	424	197	58	47	105	1	3	4	59	50	1,60	72	2,33	07	05	13	1,68	78	251 800														
1975	451	175	626	13	9	22	464	184	42	28	70	1	2	3	43	30	1,75	68	2,42	05	03	09	1,80	71	258 200														
1976	542	237	779	15	19	34	557	256	33	25	58	0	1	1	33	26	2,05	90	2,95	06	07	13	2,11	97	264 000														
1977	410	173	583	130	122	252	540	295	29	30	59	3	4	7	32	34	1,52	64	2,17	48	45	94	2,01	1,10	269 000														
1978	437	172	609	109	103	212	546	275	35	34	69	4	4	8	39	38	1,56	61	2,18	39	37	76	1,95	98	280 000														
1979	404	177	581	178	180	358	582	357	26	14	40	7	2	9	33	16	1,38	60	1,98	61	61	1,22	1,99	1,22	293 000														
1980	499	156	655	281	253	534	780	409	37	10	47	8	8	16	45	18	1,38	43	1,81	78	70	1,48	2,15	1,13	362 000														

TABLE C1

NON-WHITE CASES - LOCAL AND IMPORTED (ALL FORMS)

	AGE GROUPS												Total	
	0-1 yr		1-4 yrs		5-9 yrs		10-19 yrs		20-39 yrs		40 yrs and over			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1972	6	13	47	38	22	19	24	34	146	107	213	60	458	271
1973	9	14	41	49	21	23	13	19	166	86	216	58	466	249
1974	10	7	31	26	15	19	14	21	174	123	239	51	483	247
1975	16	10	37	35	15	12	10	22	191	82	238	53	507	214
1976	18	15	67	49	52	40	18	23	172	97	263	58	590	282
1977	5	9	67	60	55	45	16	23	196	131	233	61	572	329
1978	8	3	60	69	49	32	18	26	191	117	259	66	585	313
1979	10	10	78	89	79	57	24	32	198	117	228	66	617	371
1980	28	31	141	105	82	100	38	27	217	92	319	72	825	427

PERCENTAGE OF TOTAL TUBERCULOSIS NOTIFICATIONS (NON-WHITES)

	0-1 yr	1-4 yrs	5-9 yrs	10-19 yrs	20-39 yrs	40 yrs and over
1972	2,6 %	11,7 %	5,6 %	7,9 %	34,7 %	37,4 %
1973	3,2 %	12,6 %	6,2 %	4,5 %	35,2 %	38,3 %
1974	2,3 %	7,8 %	4,7 %	4,8 %	40,7 %	39,7 %
1975	2,2 %	9,4 %	3,9 %	4,3 %	37,3 %	47,4 %
1976	3,8 %	13,3 %	10,6 %	4,7 %	30,9 %	36,8 %
1977	1,6 %	14,1 %	11,1 %	4,3 %	36,3 %	32,6 %
1978	1,3 %	14,0 %	8,5 %	4,8 %	34,1 %	37,4 %
1979	2,0 %	17,9 %	13,8 %	5,7 %	31,9 %	29,8 %
1980	4,7 %	19,6 %	14,6 %	5,1 %	24,6 %	31,2 %

FORMS OF TUBERCULOSIS

The various forms in which the disease manifested itself during the year are shown in the following table D.

TABLE D

	LOCAL			IMPORTED			Grand Total
	Whites	Non-Whites	Total	Whites	Non-Whites	Total	
(a) Pulmonary tuberculosis	35	667	702	3	47	50	752
(b) Primary complex	25	489	514	0	10	10	524
(c) Miliary Tuberculosis	1	10	11	0	1	1	12
(d) Tuberculous meningitis	0	5	5	0	1	1	6
(e) Tuberculous peritonitis	0	3	3	1	0	1	4
(f) Tuberculous pericarditis	0	0	0	0	0	0	0
(g) Tuberculosis of the glands	2	4	6	0	4	4	10
(h) Tuberculosis of the hip	0	0	0	0	0	0	0
(i) Tuberculosis of the sex organs	0	2	2	0	0	0	2
(j) Tuberculosis of the vertebrae	1	2	3	0	0	0	3
(k) Tuberculosis of the kidney	2	3	5	0	0	0	5
(l) Tuberculosis of the urinary system	8	1	9	0	0	0	9
(m) Tuberculosis of the pleura	2	0	2	1	0	1	3
(n) Tuberculosis of the Bone	1	1	2	0	0	0	2
(o) Tuberculous Lymphadenitis	0	2	2	0	0	0	2
Total	77	1189	1266	5	63	68	1334

SOURCES OF NOTIFICATION

The source from which notifications were received are shown in the following table E. The majority of cases are still discovered and notified by our own tuberculosis clinics.

TABLE E

	LOCAL		IMPORTED		Total
	White	Non-Whites	Whites	Non-Whites	
Tuberculosis clinics	70	739	5	20	834
H.F. Verwoerd Hospital	1	2	0	0	3
Kalafong Hospital	0	403	0	40	443
Isolation Hospital	5	0	0	0	5
Registrar of Births and Deaths	0	22	0	2	24
Private Practitioners	1	0	0	0	1
Other sources	0	23	0	1	24
Total	77	1189	5	63	1334

HOSPITALIZATION

The following table F shows the number of cases admitted to sanatoria and their distributions to the various hospitals.

TABLE F

Institution	Whites			Non-Whites			Grand Total
	M	F	Total	M	F	Total	
Knights Chest Hospital	0	0	0	41	16	57	57 (38)
S.A.N.T.A. Settlement, Pretoria	0	0	0	96	27	123	123 (137)
Rietfontein Hospital	0	0	0	54	13	67	67 (78)
East Rand S.A.N.T.A.	0	0	0	0	1	1	1 (4)
Total	0	0	0	191	57	248	248 (257)

CONTACT SPREAD

The number of cases who gave histories of being contacts of known cases of tuberculosis or of having tuberculosis in their families are shown in the following table.

Contacts of known cases	Familial history	Contact and familial history	Total
27 (13)	569 (451)	0 (0)	596 (464)

1. CLINIC ATTENDANCES

A. Data regarding patients and suspected cases under control and under treatment, and their clinic attendances.

	Number of patients under control end of December 1980	Total number of patients under control (1979 - 1980)	Total number of suspects under control end of December 1980	Total number of suspects controlled (1979 - 1980)	Monthly number who received daily injections (1979 - 1980)	Total number who received injections daily (1979 - 1980)	Monthly number who had to take tablets daily	Total number who took tablets (1979 - 1980)
1. Clinic for Whites	221	251	100	124	19	150	168	207
2. Proes Street Clinic								
(a) Black people working in the City	1 671	1 678	157	508	132	137	1 171	1 481
(b) Asians	4	4	0	0	2	7	2	2
(c) Coloureds	14	17	1	2	14	14	10	14
3. Laudium Clinic (Asians)	48	58	12	29	5	16	24	53
4. Eersterust Clinic (Coloureds)	322	322	105	160	13	88	185	226
5. Mamelodi East Clinic	640	647	190	205	69	431	402	436
6. Mamelodi West Clinic	652	678	245	257	73	557	355	405
7. Saulsville Clinic	348	432	56	74	33	229	119	212
8. Atteridgeville Clinic	422	443	64	84	43	294	238	273
TOTAL	1980 4 342 1979 3 798 1978 3 543 1977 4 408 1976 5 370 1975 7 644 1974 7 726 1973 8 356 1972 7 881 1971 9 059 1970 8 904 1969 8 294 1968 7 560	4 530 4 112 3 798 5 625 8 308 8 298 8 229 8 374 9 288 9 320 10 127 8 886 8 488	930 1 059 753 1 115 3 669 5 598 6 618 7 435 6 919 6 816 7 550 7 408 5 090	1 443 1 404 999 3 296 5 967 7 248 7 682 7 890 8 138 7 988 7 291 8 287 5 606	403 269 285 277 226 266 228 340 339 274 226 194 200	1 923 1 500 1 557 1 520 869 392 453 581 509 505 1 264 334 399	2 674 3 055 2 860 3 363 3 573 4 523 3 795 3 160 3 858 3 543 3 223 2 610 2 417	3 309 4 223 5 878 3 836 5 945 4 932 5 490 5 515 5 024 4 497 4 218 3 884 3 631

B. PROES STREET CLINIC

This clinic controls practically exclusively patients who are being treated while they are employed. The following table gives an exposition of the patients treated in this way:

	1975		1976		1977		1978		1979		1980	
	Cases	Suspected cases	Cases	Suspected cases	Cases	Suspected cases	Cases	Suspected cases	Cases	Suspected cases	Cases	Suspected cases
Black people working in the city	2 347	2 253	2 371	2 255	1 683	1 754	1 471	240	1 520	385	1 678	508

Excellent cooperation is obtained from local authorities around Pretoria and cases are referred to and from in order not to interrupt their treatment.

C. INFLUX CONTROL CLINIC

At Influx Control, all Black people looking for work are subjected to an X-ray examination of the chest. The Influx Control Clinic refers all the cases and suspected cases of pulmonary tuberculosis discovered in this way to the Proes Street Clinic, nearby.

II. X-RAY SERVICES

A total of 74 339 X-rays were taken this year for diagnostic and control purposes, as follows:

	1980	1979	1978	1977	1976	1975
(a) Mobile X-ray units (100 mm)	51 937	29 584	28 972	28 461	30 540	34 675
(b) Influx Control (100 mm)	21 712	25 749	17 445	25 076	31 648	34 954
(c) H.F. Verwoerd Hospital	40	57	20	24	473	1 050
(d) Westfort Hospital	650	601	828	719		
Total	74 339	56 896	48 265	54 280	62 661	70 679

A detailed exposition of the X-rays taken is as follows:

A. MOBILE X-RAY UNITS

The Health Department has two mobile X-ray units.

1. White cases - contacts and suspected cases at clinics	2 716
2. Whites who came voluntarily for X-ray photo's	1 195
3. Whites at businesses and factories	6 851
4. Whites employed by the City Council of Pretoria	0
5. Medical students	181
6. Non-White cases - contacts and suspected cases at clinics:	
(a) Black	16 316
(b) Coloured	2 624
(c) Asian	780
7. Non-Whites who reported voluntarily for an X-ray photo:	
(a) Black	2 810
(b) Coloured	468
(c) Asian	375
8. Non-Whites at businesses and factories	16 673
9. Non-Whites employed by the City Council of Pretoria	0
10. Tshepong (S.A.N.T.A. Settlement, Pretoria)	948

Total 51 937 for mobile units plus 690 referred for large plates.

B. STATIONARY UNIT AT INFLUX CONTROL

A detailed exposition of the plates that were taken, is as follows:

1. Prospective workers	18 951
2. Non-Whites employed by the City Council of Pretoria who attended the outpatients' clinic in Proes Street	1 883
3. X-rays taken on behalf of	
(a) State Department of Health (Regional Tuberculosis Officer, Southern Transvaal)	0
(b) Transvaal Board for the Development of Peri-Urban Areas	0
(c) Voortrekkerhoogte (Department of Defence)	59
(d) Department of Prisons	129
(e) S.A. Police	496
(f) S.A. Police College	0
(g) Ucor	194
TOTAL	21 712
C. (a) H.F. VERWOERD HOSPITAL : LARGE PLATES	40
(b) WESTFORT HOSPITAL : LARGE PLATES	650

Only persons who cannot be X-rayed by the mobile X-ray units (for example babies, cripples, etc.) are referred to the H.F. Verwoerd Hospital or the Westfort Hospital for the taking of large plates. All our X-ray control work is done by means of 100 mm plates.

D. EXPOSITION OF X-RAY PLATES TAKEN OF CASES, CONTACTS AND SUSPECTED CASES AT THE VARIOUS TUBERCULOSIS CLINICS

(See page 35.)

E. CONTACTS

Of the total of 7 599 contacts X-rayed during 1980, 408 (i.e. 5,36 %) had pulmonary tuberculosis. (1979 : 4,14 %, 1978 : 2,33 %, 1977 : 3,43 %, 1976 : 3,39 %, 1975 : 1,36 %)

F. X-RAY CAMPAIGNS AT BUSINESSES, FACTORIES, ETC.

This year 6 851 (4 624) Whites and 16 673 (5 472) Non-Whites were X-rayed at 65 (102) businesses, factories, etc.

The taking of X-rays at businesses, factories, etc., is definitely of value. Not only are new cases discovered and old cases again brought under control, but important educational work is done at the same time.

D. EXPOSITION OF X-RAY PLATES TAKEN OF CASES, CONTACTS AND SUSPECTED CASES AT THE VARIOUS TUBERCULOSIS CLINICS

	CASES				CONTACTS				SUSPECTED CASES								
	Known cases				New				Old								
	Nor- mal	Impro- ved	Static	Date- rio- rated	Nor- mal	Case	Sus- pect	Nor- mal	Nor- mal	Case	Sus- pect	Nor- mal	Nor- mal	Case	Suspect	Not I.B.	
1. Clinic for Whites	162	241	239	29	765	10	16	167	2	6	152	10	31	130	2	64	23
2. Proes Street Clinic																	
(a) Black people working in the City	415	536	890	112	275	7	3	63	2	1	34	8	6	66	0	145	0
(b) Asians	2	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
(c) Coloureds	5	4	12	0	0	0	0	0	0	0	3	0	1	0	0	3	0
3. Laudium Clinics (Asians)	70	36	24	2	121	2	8	47	1	0	4	1	0	22	1	6	1
4. Earsterust Clinic (Coloureds)	234	136	141	13	698	42	34	81	4	1	399	98	44	91	9	102	0
5. Mamelodi East Clinic	292	477	438	77	730	98	48	851	21	37	22	16	19	54	5	24	5
6. Mamelodi West Clinic	344	323	559	81	723	84	43	368	23	12	238	21	18	85	3	66	5
7. Saulsville Clinic	191	154	367	40	400	41	34	597	22	41	3	1	12	63	4	49	1
8. Attaridgeville Clinic	319	194	318	38	468	35	14	528	14	11	4	1	4	85	3	39	0
TOTAL	2 034	2 103	2 990	392	4 180	319	200	2 702	89	109	859	156	135	596	27	498	35

GRAND TOTAL : 17 424

G. PERSONS WHO REPORTED VOLUNTARILY FOR AN X-RAY EXAMINATION

1 195 Whites, 375 Asians, 468 Coloureds and 2 810 Black people reported voluntarily for an X-ray examination. The results were as follows:

	Total	Normal	Cases	Suspect
White	1 195	1 172	3	20
Asian	375	365	4	7
Coloured	468	358	54	56
Black	2 810	2 478	177	155

H. CASES DISCOVERED AS A RESULT OF X-RAY EXAMINATION

Of the 1 266 new cases of tuberculosis reported during the year, 1 253 were discovered by means of X-rays of the chest and this is equal to 1,88 % (1979 : 2,262 %, 1978 : 1,005 %, 1977 : 1,132 %, 1976 : 1,51 %, 1975 : 1,14 %) of a total of 66 820 X-rays which were taken with the purpose of discovering cases of tuberculosis. This figure of 66 820 does not include routine X-rays of known cases.

III. TUBERCULIN TEST

A total of 38 396 Tuberculin tests were done during the year. Of the number 30 836 persons returned after a week for the reading of the tests.

The table on page 36 represents the results of all the Tuberculin tests conducted by the Department during the year.

IV. BCG ADMINISTERED

The following is an exposition of the groups to whom BCG was administered.

(a) New born babies (maternity homes)

White	5 573)	
Black	6 942)	Total 12 987
Asian	208)	
Coloured	264)	

(b) Pre-school children (including nursery schools)

White	575)	
Black	3 928)	Total 5 478
Asian	380)	
Coloured	595)	

(c) School children

White	10 570)	
Black	12 170)	Total 23 708
Asian	324)	
Coloured	644)	

(d) Other persons (contacts, employees at certain businesses, etc.)

White	1 309)	
Black	1 905)	Total 3 484
Asian	17)	
Coloured	253)	

TUBERCULIN TESTS CARRIED OUT BY THE DEPARTMENT DURING 1980

Age group	Total	No previous BCG		Previous BCG	
		Positive	Negative	Positive	Negative
3 months to 5 years	White	3	150	13	186
	Black	38	501	84	2 708
	Asian	1	2	3	70
	Coloured	0	0	10	415
6 to 10 years	White	28	1 310	79	4 465
	Black	190	1 245	306	1 789
	Asian	0	177	2	217
	Coloured	10	182	19	338
11 to 15 years	White	129	1 348	390	1 930
	Black	146	794	454	2 273
	Asian	0	1	9	110
	Coloured	34	106	79	178
16 to 20 years	White	95	563	233	813
	Black	65	242	250	714
	Asian	1	110	6	13
	Coloured	9	6	28	70
21 years and over	White	209	708	245	534
	Black	648	1 199	468	760
	Asian	8	25	5	24
	Coloured	104	117	5	37
TOTAL	38 396	1 718	8 786	2 688	17 644

Altogether, therefore

	1980	1979	1978	1977	1976	1975	1974	1973
White	18 027	14 443	12 340	15 808	18 333	18 868	17 610	17 768
Black	24 945	20 834	32 934	9 513	13 060	17 133	23 263	20 201
Asian	929	1 038	1 041	841	822	1 168	1 484	1 554
Coloured	1 756	2 124	1 423	1 026	841	982	2 337	1 542
Grand Total	45 657	38 439	47 738	29 165	33 056	38 151	44 694	41 065

V. SPUTUMS

	Total	Negative	Positive	Negative to positive	Positive to negative	Persistent-ly positive
1. White	435	383	52	4	7	4
2. Proes Street Clinic						
(a) Black people working in the City	2 020	1 894	126	48	60	27
(b) Asian	7	6	1	0	0	0
(c) Coloured	21	21	0	0	0	0
3. Laudium Clinic (Asian)	64	61	3	1	2	0
4. Eersterust Clinic (Coloured)	355	338	17	3	0	0
5. Mamelodi East Clinic	1 021	950	65	19	47	4
6. Mamelodi West Clinic	1 826	1 739	87	47	19	3
7. Saulsville Clinic	498	468	30	9	5	4
8. Atteridgeville Clinic	862	824	38	19	15	10
Total :	1980		7 109			

VI. RATIONS

	Municipal rations	Milk
Black : Number of patients	122	548
Asian : Number of patients	0	15
Coloured : Number of patients	13	133
Total :	135	696

VII. VISITS TO HOMES

1. Whites

The Sister in charge of the Tuberculosis Clinic for Whites paid a total of 559 visits to patients during the year to give them injections and tablets at home. In addition she paid 168 visits with the purpose of summoning patients to the Clinic or to ascertain what had happened to patients, etc.

Sisters also paid 283 visits to schools and 158 to firms.

2. Non-Whites

The following is an exposition of the visits which were paid to tuberculosis patients at home or at their work:

Black people

(a) White Sisters	:	Injections at work	:	5 866
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These are cases of Black tuberculotics who work and where the White employers are visited by a White Sister for the purpose of administering injections and other treatment.

(b) Black Nurses	:	5 363 Home visits
		No school visits

(c) Black Messengers	:	10 321
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Asians

(a) White Sisters	:	Injections at work	:	0
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(b) Nurse alone	:	916
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(c) Messengers	:	264
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Coloureds

(a) White Sisters	:	Injections at work	:	0
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(b) Nurse alone	:	1 537
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(c) Messengers	:	478
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The visits which the Black, Asian and Coloured Nurses pay to the homes of tuberculotics are with the purpose of investigating the home circumstances of patients, to do health educational work, to persuade difficult patients to undergo treatment, to see to it that contacts or patients take their medicine, etc.

The work of the messengers is mainly to deliver letters at the homes of tuberculotics summoning them to the Clinic.

VIII. VISITS TO EMPLOYERS

Systematic visits to businesses and factories were continued this year with the purpose of doing health education work and at the same time to ascertain the following:

Is the employer prepared to:

1. re-employ the tuberculosic?
2. send the patient every day, or 3 times a week, to the clinic for injections?
3. issue tablets, which are provided, to the patient?
4. have injections given at work in instances where the business or factory employs a nurse?
5. at intervals and without financial loss to send the patient for doctors' or X-ray clinics to the Clinic?

All the information obtained in this way is recorded. Copies thereof are available to all the clinics and enable the doctor to arrange the most suitable treatment for every patient.

Tuberculosis will only be effectively combated if health education can be undertaken on a larger scale to reach the family itself and in particular, with our large number of Non-White tuberculosics, the employers. It will only be possible to implement fully the Government Health Department's new approach to treat patients in a reasonably good physical condition either at home or at work, if adequate health education could reach the employer and his cooperation is ensured. In Pretoria it has definitely been found that the reason why employers did not always cooperate in combating tuberculosis, was not unwillingness, but in fact ignorance as to the symptoms and treatment of tuberculosis.

The visits to businesses and factories are invaluable. Not only are we now experiencing excellent cooperation by employers, but we are now able to hospitalize much fewer patients than we did in 1970.

Number of patients admitted to hospitals

(1972 : 279, 1973 : 238, 1974 : 231, 1975 : 212, 1976 : 308, 1977 : 212, 1978 : 275, 1979 : 257, 1980 : 337)

IX. TSHEPONG - SOUTH AFRICAN NATIONAL TUBERCULOSIS ASSOCIATION SETTLEMENT AT PRETORIA

There are 135 beds available for tuberculosics in the Settlement. Complete medical coverage is provided by two Medical Officers of the Health Department of the City Council.

The hospital is visited twice a week by one of the Medical Officers and during these visits all problem cases are seen, complaints heard and assistance given with social problems. Further, all new cases are submitted to a thorough medical examination and the doctor decides on treatment, duration of stay, etc. Once a week X-ray plates are read of patients who reported for follow-up X-rays. During the session patients are transferred to out-clinics.

The following report gives an indication of the amount of work being done:

Period : January 1980 - December 1980

Number of patients in the Settlement on 1 January 1980 (Pretoria Municipality : 56 (61), Peri-Urban : 9 (17), other areas : 56 (46))	121 (124)
Number of patients in the Settlement on 31 December 1980 (Pretoria Municipality : 29 (56), Peri-Urban : 7 (9), other areas : 75 (56))	111 (121)
Number of patients admitted during the year : 1.1.80 to 31.12.80 (Pretoria Municipality : 173 (234), Peri-Urban : 31 (43), other areas : 250 (190))	454 (467)
Number of patients discharged during the year : 1.1.80 to 31.12.80 (Pretoria Municipality : 204 (239), Peri-Urban : 33 (51), other areas : 242 (180))	479 (470)

Those discharged can be classified as follows:

Transferred to Kalafong hospital for other treatment	5 (14)
Returned home - improved	397 (390)
For disciplinary reasons	10 (3)
Deceased	6 (8)
Absconded	13 (20)
Transferred to other tuberculosis hospitals due to deterioration	53 (38)
The number of patient-days for the year amounted to	42 042 (40 875)

The Head Office of S.A.N.T.A. made the services of a Black Health Educator available to the local branch of this Association. He renders valuable services, and since his appointment, the patients are, generally speaking, more cooperative. Successful use is also made of his services at certain doctors' clinics.

DEATHS

The number of deaths that occurred in tuberculosis patients during the the year are reflected in the following table:

	White	Non-White	Total
Cases notified during 1980 and who also died during 1980	5 (8)	84 (57)	89 (65)
Cases notified prior to 1980 but who died during 1980	10 (9)	66 (78)	76 (87)
Total	15 (17)	150 (135)	165 (152)

The mortality in the various races and sexes together with the mortality rates per 1 000 population, is shown in the following table G. (See page 41.)

The stages at which death occurred in the cases of tuberculosis who were notified and who died during the year were as follows:

	Whites		Non-Whites		Total	Percentage	Total Death
	M	F	M	F			
Deaths prior to notification	0 (1)	0 (0)	24 (5)	5 (5)	29 (11)	32,58%	(16,9%)
Died within 1 month of notification	2 (3)	0 (0)	33 (22)	5 (8)	40 (33)	44,94%	(50,8%)
Died within 1-3 months of notification	1 (1)	0 (1)	7 (9)	5 (2)	13 (13)	14,61%	(20,0%)
Died within 3-6 months of notification	0 (2)	0 (0)	0 (3)	0 (3)	0 (8)	0,0%	(12,3%)
Died within 6-12 months of notification	2 (0)	0 (0)	3 (0)	2 (0)	7 (0)	7,87%	(0,0%)
Total	5 (7)	0 (1)	67 (39)	17 (18)	89 (65)		

TABLE 6

MORTALITY 1980 (OLD AND NEW CASES)

Sex	Local cases				Imported cases				Local and imported cases				Mortality rate per 1 000 population (local cases only)			
	Pulmonary		Other		Pulmonary		Other		Pulmonary		Other		Pulmonary		Other	
	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms	tubercu- losis	forms
Whites	M 11	1	12	1	1	0	1	0	12	1	13	0,03	0,003	0,033	0,003	0,033
	F 2	0	2	0	0	0	0	0	2	0	2	0,005	0,0	0,005	0,0	0,005
TOTAL	13	1	14	1	1	0	1	0	14	1	15	0,033	0,003	0,038	0,003	0,038
Coloured	M 4	0	4	0	0	0	0	0	4	0	4	0,20	0	0,20	0	0,20
	F 1	0	1	0	0	0	0	0	1	0	1	0,05	0	0,05	0	0,05
TOTAL	5	0	5	0	0	0	0	0	5	0	5	0,25	0	0,25	0	0,25
Asian	M 3	0	3	0	0	0	0	0	3	0	3	0,15	0	0,15	0	0,15
	F 0	0	0	0	0	0	0	0	0	0	0	0,00	0	0,00	0	0,00
TOTAL	3	0	3	0	0	0	0	0	3	0	3	0,15	0	0,15	0	0,15
Black	M 99	4	103	7	9	2	9	2	106	6	112	0,31	0,01	0,32	0,01	0,32
	F 20	3	23	3	3	0	3	0	23	3	26	0,06	0,009	0,07	0,009	0,07
TOTAL	119	7	126	10	12	2	12	2	129	9	138	0,37	0,02	0,39	0,02	0,39
All Non-Whites	M 106	4	110	7	9	2	9	2	113	6	119	0,29	0,01	0,30	0,01	0,30
	F 21	3	24	3	3	0	3	0	24	3	27	0,06	0,008	0,07	0,008	0,07
TOTAL	127	7	134	10	12	2	12	2	137	9	146	0,35	0,02	0,37	0,02	0,37
All races	M 117	5	122	8	10	2	10	2	125	7	132	0,16	0,007	0,16	0,007	0,16
	F 23	3	26	3	3	0	3	0	26	3	29	0,03	0,004	0,03	0,004	0,03
TOTAL	140	8	148	11	13	2	13	2	151	10	161	0,19	0,011	0,20	0,011	0,20

DEATHS IN AGE GROUPS

	0-1 year		1-5 years		6-10 years		11-15 years		16-20 years		21-30 years		31-40 years		41-50 years		50 yrs & over		Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
White	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	11	1	13
Non-White	0	1	0	2	0	0	1	1	0	0	11	5	20	5	28	3	58	10	119
TOTAL	0	1	0	2	0	0	1	1	0	0	11	6	20	5	30	3	69	11	132

VENEREAL DISEASES

SERVICES FOR WHITES

The clinics for venereal diseases are held in the Special Diseases Clinic building situated in the grounds of the H.F. Verwoerd Hospital.

Four sessions a week are held for males and females, including a session in the late afternoon.

The staff, who also carry out other duties, consist of a Medical Officer and a Sister. All sessions for Whites are conducted by the Medical Officer who also conducts the venereal diseases clinic at Proes Street.

The following table shows the number of cases attending during the year:

Diagnosis	New cases		Attendances - new and old cases combined :	
	Male	Female	Male	Female
Sero-negative Primary Syphilis	1 (3)	0 (1)	1 (12)	0 (1)
Sero-positive Primary Syphilis	1 (6)	0 (0)	5 (19)	0 (3)
Secondary Syphilis	1 (2)	0 (2)	3 (6)	1 (1)
Tertiary Syphilis	0 (3)	0 (1)	0 (4)	0 (2)
Latent Syphilis	1 (3)	2 (1)	4 (20)	7 (25)
Neuro-Syphilis	0 (0)	0 (0)	0 (0)	0 (0)
Congenital Syphilis (under one year)	0 (0)	0 (0)	0 (0)	0 (0)
Congenital Syphilis (over one year)	0 (0)	0 (0)	0 (0)	0 (0)
Total Syphilis	4 (17)	2 (5)	13 (61)	8 (32)
Gonorrhoea	17 (18)	1 (1)	52 (56)	3 (2)
Ulcer molle	0 (0)	0 (0)	0 (0)	0 (0)
Vulvo vaginitis	0 (0)	0 (0)	0 (0)	0 (0)
Venereal warts	2 (3)	1 (2)	5 (4)	4 (4)
Non-specific urethritis	28 (26)	0 (1)	170 (199)	4 (5)
Non-venereal	45 (35)	34 (11)	126 (154)	91 (65)
Lymphogranuloma venereum	1 (0)	0 (0)	4 (0)	0 (0)
GRAND TOTAL	97 (99)	38 (20)	370 (474)	110 (108)

SERVICES FOR NON-WHITES

The clinics for Non-Whites are held at various centres. The main clinics, by far the largest, are conducted at the municipal clinic in Proes Street. Sessions are also held at Atteridgeville, Mamelodi and Eersterust Polyclinics.

The staff at the Proes Street Clinic consists of a Medical Officer, a White Sister, two Non-White Sisters and two Non-White orderlies, all of whom also assist at other clinics.

The Medical Officer in charge of the Proes Street Sick Parade Clinic conducts all four sessions at the Central Clinic, while the sessions at the other centres are conducted by other Medical Officers of the Department. There is thus a total of seven sessions a week for Non-Whites in Pretoria, and three centres in the Non-White residential areas, at which patients may present themselves daily for treatment (excluding Saturdays and Sundays). Sessions last approximately two hours.

Tracing of contacts of Non-Whites attending the Central Clinic which caters to a large extent for domestic servants removed from their normal family circle, is sometimes difficult because of the casual nature of the association, the number of exposures with different partners, and the difficulty of obtaining any sort of an address. An appreciable number of patients however, respond to our request to advise their contacts themselves to attend clinics.

At the Polyclinics in the Black residential areas we have been more successful, primarily because some of the factors mentioned in the preceding paragraph do not operate to the same extent in these areas.

Absenteeism or interruption of a course of treatment is not a great problem, as a Black person, once he has started the treatment, is mostly only too willing to report until cured. When he does become an absentee, it is often by force of circumstances, not by choice.

The following tables show the number of patients who attended the various clinics during the year under review.

CENTRAL OR MAIN CLINIC :

Diagnosis	New cases		Attendances - new and old cases combined :	
	Male	Female	Male	Female
Sero-negative Primary Syphilis	60 (27)	7 (2)	138 (63)	27 (4)
Sero-positive Primary Syphilis	68 (185)	6 (57)	158 (297)	17 (83)
Secondary Syphilis	46 (96)	24 (42)	93 (233)	82 (182)
Tertiary Syphilis	0 (0)	0 (1)	0 (2)	1 (2)
Latent Syphilis	48 (174)	70 (259)	145 (977)	187 (1 104)
Neuro-Syphilis	0 (0)	0 (0)	0 (0)	0 (0)
Congenital Syphilis (under one year)	1 (3)	3 (2)	1 (7)	6 (3)
Congenital Syphilis (over one year)	0 (1)	0 (0)	0 (1)	0 (0)
Total Syphilis	223 (486)	110 (363)	535 (1 580)	320 (1 378)
Gonorrhoea	573 (623)	32 (82)	1 439 (2 870)	78 (197)
G.C. Vulvo vaginitis	0 (3)	0 (0)	0 (4)	0 (0)
Ulcer molle	37 (0)	3 (2)	116 (0)	5 (4)
Lymphogranuloma venereum	44 (6)	2 (0)	117 (9)	8 (0)
Venereal warts	24 (19)	13 (17)	60 (47)	33 (49)
Non-venereal	496 (677)	658 (1 142)	1 019 (2 059)	1 453 (2 803)
Non-specific urethritis	407 (294)	0 (0)	998 (396)	0 (0)
GRAND TOTAL	1 804 (2 108)	818 (1 606)	4 284 (6 965)	1 897 (4 431)

	Male	Female
Number of cases suffering from two or more venereal diseases	70	5
Number of cases discharged on probation	1 291	459
Number of cases discharged as finally cured	879	458

NAMELODI POLYCLINIC :

Diagnosis	New cases		Attendances - new and old cases combined :	
	Male	Female	Male	Female
Sero-negative Primary Syphilis	6 (3)	5 (8)	16 (8)	12 (37)
Sero-positive Primary Syphilis	66 (51)	62 (49)	134 (178)	137 (104)
Secondary Syphilis	21 (63)	61 (137)	51 (83)	136 (261)
Tertiary Syphilis	0 (0)	0 (0)	0 (0)	0 (0)
Latent Syphilis	73 (46)	85 (51)	196 (287)	203 (174)
Congenital Syphilis (under one year)	7 (2)	21 (2)	14 (4)	41 (6)
Congenital Syphilis (over one year)	0 (0)	0 (0)	0 (0)	0 (2)
Total Syphilis	173 (165)	234 (247)	411 (560)	529 (584)
Gonorrhoea	117 (1)	21 (0)	306 (2)	38 (1)
Non-venereal	116 (49)	148 (54)	248 (345)	301 (155)
Venereal warts	2 (7)	5 (2)	5 (9)	12 (19)
Non-specific urethritis	49 (47)	0 (9)	122 (516)	0 (10)
Ulcer molle	2 (0)	1 (0)	5 (0)	2 (0)
GRAND TOTAL	459 (269)	409 (312)	1 097 (1 432)	882 (769)

	Male	Female
Number of cases suffering from two or more venereal diseases	18	9
Number of cases discharged on probation	158	121
Number of cases discharged as finally cured	188	121

ATTERIDGEVILLE CLINIC :

Diagnosis	New cases		Attendances - new and old cases combined :	
	Male	Female	Male	Female
Sero-negative Primary Syphilis	37 (6)	20 (6)	95 (37)	83 (31)
Sero-positive Primary Syphilis	16 (9)	13 (8)	62 (24)	43 (87)
Secondary Syphilis	3 (7)	4 (16)	12 (32)	15 (107)
Tertiary Syphilis	0 (2)	0 (0)	3 (4)	4 (4)
Latent Syphilis	28 (15)	54 (76)	103 (432)	207 (973)
Neuro-Syphilis	0 (0)	0 (1)	0 (0)	0 (2)
Congenital Syphilis (under one year)	16 (45)	11 (36)	65 (673)	64 (411)
Congenital Syphilis (over one year)	0 (1)	3 (4)	0 (11)	14 (16)
Total Syphilis	100 (85)	105 (147)	340 (1 213)	430 (1 631)
Gonorrhoea	169 (77)	65 (35)	586 (431)	223 (181)
Lymphogranuloma venereum	0 (0)	0 (0)	0 (0)	0 (0)
Venereal warts	1 (2)	2 (2)	2 (4)	3 (6)
Non-venereal	87 (31)	88 (61)	224 (132)	233 (186)
Non-specific urethritis	40 (3)	0 (1)	94 (9)	0 (17)
Ulcer molle	1 (0)	0 (0)	3 (0)	0 (0)
GRAND TOTAL	398 (198)	260 (246)	1 249 (1 789)	889 (2 021)

	Male	Female
Number of cases suffering from two or more venereal diseases	12	6
Number of cases discharged on probation	313	233
Number of cases discharged as fully cured	356	240

EERSTERUST CLINIC :

Diagnosis	New cases		Attendances - new and old cases combined :	
	Male	Female	Male	Female
Sero-negative Primary Syphilis	4 (3)	0 (7)	14 (5)	9 (11)
Sero-positive Primary Syphilis	15 (19)	16 (69)	66 (54)	162 (244)
Secondary Syphilis	0 (9)	0 (19)	5 (9)	15 (126)
Tertiary Syphilis	0 (0)	0 (0)	0 (0)	3 (0)
Latent Syphilis	12 (18)	20 (47)	47 (42)	162 (394)
Congenital Syphilis (under one year)	2 (2)	2 (3)	10 (14)	13 (19)
Congenital Syphilis (over one year)	0 (0)	0 (2)	0 (0)	0 (7)
Neuro-Syphilis	1 (0)	0 (0)	3 (0)	0 (0)
Total Syphilis	34 (51)	38 (147)	145 (124)	354 (801)
Gonorrhoea	2 (0)	0 (0)	5 (0)	0 (0)
Venereal warts	0 (1)	0 (1)	0 (2)	0 (2)
Non-venereal	2 (9)	0 (3)	3 (32)	5 (36)
Non-specific urethritis	0 (2)	0 (0)	0 (4)	0 (0)
GRAND TOTAL	38 (63)	38 (151)	153 (162)	359 (839)

	Male	Female
Number of cases suffering from two or more venereal diseases	0	0
Number of cases discharged on probation	16	38
Number of cases discharged as fully cured	3	5

ANTE-NATAL TREATMENT OF SYPHILIS

Serological tests for Syphilis are done on all women attending the Municipal ante-natal clinics. Normally, those requiring treatment receive it at the ante-natal clinics, unless there are special circumstances, diagnostic or other, which demand their being referred to the venereal diseases clinics.

After confinement, these cases and their infants are followed up at the Venereal Diseases Clinics.

The following tables show the number of ante-natal cases treated for Syphilis at the various clinics:

	Stage of Pregnancy		
	1-3 months	4-6 months	7-9 months
WHITE			
No. of pregnant women submitted to serological tests	189 (147)	172 (126)	56 (19)
No. of positive or doubtful reactors	16 (0)	6 (0)	0 (0)
No. of those who had previously received treatment (at any clinic)	0 (0)	1 (0)	0 (0)
No. undergoing a first course of treatment during pregnancy	3 (0)	1 (0)	0 (0)

	Stage of Pregnancy		
	1 - 3 months	4 - 6 months	7 - 9 months
NON-WHITE			
ATTERIDGEVILLE CLINIC			
No. of pregnant women submitted to serological test	80 (114)	429 (479)	229 (209)
No. of positive or doubtful reactors	35 (19)	96 (97)	41 (48)
No. of those who had previously received treatment (at any clinic)	1 (4)	12 (8)	6 (4)
No. undergoing a first course of treatment during pregnancy	8 (11)	44 (46)	17 (20)
MAMELODI CLINIC			
No. of pregnant women submitted to serological test	391 (297)	2 011 (1 560)	454 (804)
No. of positive or doubtful reactors	110 (101)	512 (220)	116 (173)
No. of those who had previously received treatment (at any clinic)	6 (11)	54 (46)	21 (17)
No. undergoing a first course of treatment during pregnancy	55 (47)	428 (251)	73 (101)
PROES STREET CLINIC			
No. of pregnant women submitted to serological test	73 (121)	940 (791)	183 (342)
No. of positive or doubtful reactors	7 (16)	49 (145)	15 (97)
No. of those who had previously received treatment (at any clinic)	0 (0)	0 (1)	0 (0)
No. undergoing a first course of treatment during pregnancy	10 (16)	49 (143)	27 (49)
SAULSVILLE CLINIC			
No. of pregnant women submitted to serological test	101 (91)	697 (597)	397 (671)
No. of positive or doubtful reactors	25 (28)	149 (106)	68 (113)
No. of those who had previously received treatment (at any clinic)	2 (0)	12 (2)	13 (9)
No. undergoing a first course of treatment during pregnancy	9 (11)	91 (67)	39 (87)
LAUDIUM CLINIC			
No. of pregnant women submitted to serological test	113 (91)	165 (146)	39 (72)
No. of positive or doubtful reactors	9 (1)	2 (2)	2 (0)
No. of those who had previously received treatment (at any clinic)	0 (0)	0 (0)	0 (0)
No. undergoing a first course of treatment during pregnancy	2 (1)	2 (2)	1 (0)
EERSTERUST CLINIC			
No. of pregnant women submitted to serological test	105 (60)	273 (234)	49 (41)
No. of positive or doubtful reactors	13 (8)	30 (26)	8 (3)
No. of those who had previously received treatment (at any clinic)	2 (2)	5 (3)	1 (0)
No. undergoing a first course of treatment during pregnancy	5 (6)	15 (15)	5 (1)

MATERNAL AND CHILD CARE SERVICES

The following tables give a statistical exposition of the work done by the Maternal and Child Care Services Section.

WHITE

Home visits by Health Visitors

First visits	Subsequent visits	Number of sick babies visited	Total visits
6 069 (5 934)	13 346 (10 345)	26 (18)	19 415 (16 279)

Details of clinic attendances

	First attendance	Re-attendance	Seen by doctor	
			First attendance	Re-attendance
Central (Tuesday)	64 (108)	222 (352)	67 (112)	233 (353)
Central (Wednesday)	276 (286)	1 278 (1 411)		
Central (Friday)	120 (174)	373 (803)		
Blond Street (At Harry Nelson)	60 (77)	260 (271)		
Pretoria West	112 (180)	723 (921)	29 (75)	90 (102)
Danville (Tuesday)	225 (193)	525 (186)	61 (0)	102 (0)
Danville (Wednesday)	216 (255)	627 (768)	0 (108)	0 (107)
Gezina	70 (78)	565 (474)		
Villieria (Wednesday)	186 (107)	963 (669)	49 (43)	42 (25)
Villieria (Thursday)	52 (55)	364 (520)		
Wonderboom South	104 (64)	650 (499)		
Mayville	44 (75)	247 (601)		
Capital Park	69 (59)	576 (457)		
Hatfield	41 (50)	253 (472)		
New Muckleneuk	67 (73)	520 (641)		
Sunnyside (Tuesday)	194 (179)	1 217 (1 073)		
Sunnyside (Wednesday)	163 (188)	1 181 (991)		
Riviera	34 (56)	257 (365)		
Salvokop	1 (17)	3 (147)		
Arcadia (Tuesday)	123 (82)	772 (933)		
Hercules	144 (150)	917 (881)	50 (82)	258 (273)
Booyens	71 (62)	339 (488)		
Mountain View	46 (56)	376 (293)		
Pretoria Gardens	41 (44)	462 (434)		
Rietfontein North	31 (56)	298 (309)		
Voortrekker Road	44 (33)	334 (234)		
Pieterneef Street	82 (54)	600 (525)		
Brooklyn	57 (69)	353 (510)		
Pretoria North	237 (209)	1 883 (1 778)		
Sinoville	227 (205)	1 288 (1 328)		
East Lynne	178 (202)	1 500 (1 558)	127 (106)	108 (39)
Valhalla	117 (110)	708 (808)		
Silverton	237 (221)	1 424 (973)		
Constantia Park	429 (284)	1 787 (1 459)		
Total	4 162 (4 012)	23 815 (24 132)	383 (526)	833 (899)

Ante-natal clinic attendances

	Danville	East Lynne	Cantral	Hercules	Pretoria North
Number of new cases	55 (56)	78 (43)	145 (128)	69 (65)	53 (41)
Total attendances	250 (215)	324 (216)	661 (520)	329 (279)	224 (193)
Number of post-natal cases	0 (0)	0 (3)	76 (51)	0 (2)	31 (29)
Dental clinic	4 (0)	3 (0)	14 (10)	4 (11)	0 (0)
Number of cases that attended the Dental clinic	25 (21)				

Midwifery supervision

Number of visits to maternity homes	1 (12)
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NON-WHITE

Home Visits

	Atteridgeville Black	Saulsville Black	Laudium Asian	Eersterust Coloured
First visits to newly born infants	927 (940)	1 170 (1 066)	387 (350)	423 (357)
Subsequent visits	3 897 (3 710)	7 897 (6 125)	2 386 (2 334)	2 159 (2 329)
Visits to sick children	46 (9)	71 (1)	0 (0)	45 (0)
Number of sick children visited	9 (9)	9 (1)	0 (1)	1 (0)
First visits to newly born infants	3 317 (2 847)			
Subsequent visits	2 093 (1 518)			
Visits to sick children	263 (20)			
Number of sick children visited	43 (20)			

Child Care Clinic attendances

	Atteridgeville Black	Saulsville Black	Laudium Asian	Eersterust Coloured
First attendances	900 (972)	1 262 (1 365)	475 (436)	444 (486)
Re-attendances	16 147 (14 523)	17 505 (15 842)	3 785 (4 533)	6 186 (7 298)
Examined by doctor	6 242 (6 183)	7 166 (6 976)	2 340 (2 503)	3 619 (4 268)
First attendances	4 241 (3 999)			
Re-attendances	36 394 (36 671)			
Examined by doctor	16 566 (17 369)			

Ante-natal Clinics

	Proes Street Black	Atteridgeville Black	Saulsville Black
Number of new cases	1 269 (1 194)	733 (839)	1 200 (1 210)
Number of attendances	3 943 (3 209)	3 627 (3 992)	6 392 (7 039)
	Mamelodi Black	Laudium Asian	Earsterust Coloured
Number of new cases	3 050 (3 072)	323 (295)	418 (338)
Number of attendances	13 241 (14 235)	1 389 (1 271)	2 947 (2 513)

Confinements by midwives

	Atteridgeville	Saulsville	Mamelodi	
	39 (77)	86 (135)	0 (0)	
Immunization	White	Black	Asian	Coloureds
Number of cases immunized against diphtheria	5 124	4 283	363	425
Number of cases immunized against whooping cough	4 791	3 945	345	399

CYTOLOGICAL EXAMINATION OF CERVICAL SMEARS

Cytological examination of cervical smears of women of a certain age group forms an important link in preventive medicine. Not only is it possible to diagnose various infectious conditions, but malignancy can be discovered at such an early stage, that it can be cured by a small surgical operation with the result that the mother is often able to be with her family for many more years.

As in the case with the skin, the surface cells of the mucuous membranes of the cervix and vagina are constantly discarded and replaced by new cells formed in the basal membrane of the mucuous membrane and pushed up. Cells that exfoliate in this way, retain the characteristics of the site from which they have exfoliated. If, for example they exfoliate from an area which is inflamed, they will show signs of inflammation, and if they originate from a place which is busy undergoing malignant change, they will show the characteristics of the malignant change. By means of a microscopic examination, after special staining, of smears containing these cells, the pathologist is able to make a diagnosis of the condition of the organs where these cells have exfoliated. The study of exfoliative cytology has now advanced to such a stage that the pathologist is able, after merely examining the smear, to ascertain with reasonable certainty the degree of malignancy and whether a radical operation or merely a smaller operation, as for example a conus biopsy, is necessary.

This prediction is based on the percentage abnormal nuclei as against the percentage malignant cells.

The table on page 50 gives a summary of the various disease conditions which the pathologist may observe from the cervical smears and also how this is interpreted and what action he would recommend at the various degrees of malignancy.

Those falling in groups 2(b) to 4 according to the above classifications are regarded as POSITIVE. These patients are referred to the Gynaecology Out-patients Department of the H.F. Verwoerd Hospital as urgent cases. To those falling in groups 1 to 2(a) appropriate treatment is given, if necessary, and follow-up smears are taken.

The cytologist always furnishes a recommendation with his report and it is important to follow the recommendation because it may be urgently necessary that a hysterectomy be performed instead of merely a conus biopsy or follow-up smears only.

Vaginal smears, which do not enter the picture here, are done mainly with the purpose of determining the hormonal status of the patient because this may play a role in habitual miscarriage or with the post-menopausal woman.

The Health Department of the City Council of Pretoria commenced taking smears for cytological examination on 14 February 1967.

A. It is possible to diagnose the following infections by means of a cytological examination:

1. Micrococci and bacilli
2. *Candida albicans*
3. *Trichomonas vaginalis*
4. *Leptothrix*

B. Pre-malignant and malignant conditions:

Observed on smear	Possible cause	Interpretation and recommendation
1. Dyscariosis (anomalies in the nucleus)	(a) Inflammation (b) Follic acid deficiency (c) Malignancy	Treat and again take smears Treat and again take smears No dysplastic cells observed as yet, but malignancy <u>can</u> be the cause of the dyscariosis. Repeat smears after 3 or 6 months.
2. Dysplasia (Abnormal-growing cells)	Stage (a) Slight: Many dyscariotic cells, no squamous carcinoma cells. (b) Moderate: $\frac{2}{3}$ dyscariotic cells, $\frac{1}{3}$ squamous carcinoma cells. (c) Pronounced: $\frac{1}{2}$ dyscariotic cells, $\frac{1}{2}$ squamous carcinoma cells. (d) Carcinoma-in-situ: $\frac{1}{3}$ dyscariotic cells, $\frac{2}{3}$ squamous carcinoma cells.	Interpretation Often still recovers if the cause, e.g. infection, follic acid deficiency, etc., is removed. Early malignancy affecting lower $\frac{1}{3}$ of mucous membrane layer. Early malignancy affecting lower $\frac{2}{3}$ of mucous membrane layer. Early malignancy affecting the full thickness of the mucous membrane layer, but not infiltrating.
3. Squamous carcinoma (Infiltration)	Interpretation The malignancy has penetrated the basal membrane and may have spread into the surrounding tissue.	Recommendation Confirm diagnosis by means of a small biopsy of the lesion. Conus biopsy and follow-up smears are sufficient.
4. Adeno carcinoma	A malignancy of the gland tissue.	Confirm diagnosis by means of a small biopsy of the lesion. hysterectomy.
5. Within normal limits.		

Smears are taken of the following persons:

1. Family Planning Clinics

Smears are taken of all new patients, White as well as Non-White. Smears are also taken of all patients who come for follow-up examination.

2. Ante-natal Clinics

(a) White

Smears are taken of all women of thirty years or older who report here. Where there are any suspicious symptoms, smears are also taken of younger women.

(b) Non-White

Because of the very large number of women who attend the clinics, it is not possible to take a smear of everyone as a routine measure. Smears are, however, taken of all patients who report for a post-natal examination and who are thirty years or older, as well as of younger patients where there are any suspicious symptoms. Attention is paid in particular to those who intimate that they require family planning advice.

The reports of the pathologist in fact showed that the taking of smears of this younger group with suspicious symptoms was justified.

RESULTS OF SMEARS

During the year smears were taken of 12 920 (12 583) women of whom 3 433 (3 255) were White patients.

The following tables give a summary of the cases where abnormalities were found.

A total of 1 572 (2 119) Non-White cases were recommended for follow-up examinations because abnormal cells had been found.

Clinic	Recommended for follow-up	Three-monthly	Six-monthly	Annually
Atteridgeville	223 (390)	3 (3)	4 (10)	217 (377)
Saulsville	280 (446)	4 (2)	1 (6)	272 (438)
Mamelodi	899 (992)	1 (5)	18 (25)	880 (962)
Eersterust	114 (163)	0 (5)	2 (3)	112 (155)
Laudium	56 (128)	0 (0)	1 (4)	55 (124)
Total	1 572 (2 119)	8 (15)	26 (48)	1 536 (2 056)

During the year there was a total of 259 (230) cases whose smears showed macrocytic changes and in respect of whom the pathologist requested repetition of the smears after treatment with folic acid.

A total of 87 (92) cases came for treatment and the smears showed improvement.

WHITES : 1980

PARTICULARS OF CASES WITH ABNORMAL CELLS				
Number with abnormal cells and %	Number for three-monthly re-examination	Number for six-monthly re-examination	Number for annual re-examination	Number for treatment and repetition
308 (499) 8.97 % (15.33 %)	0 (0)	10 (9)	260 (421)	38 (61)

PARTICULARS OF POSITIVE CASES

WHITES : 1980

Number examined	Number positive and %	Age		Number referred	Conusbiopsy	Follow-up smears only at hospital or clinic	Hysterec-tomy
		Under 30 yrs	Over 30 yrs				
3 433 (3 255)	1 (6) 0.03 % (0.18 %)	0	1	1	0	0	0 (Awaiting reply)

NON-WHITES : 1980

Clinic	Number examined	Number positive and %	Age		Number referred	Conus- biopsy	Follow-up smears only at hospital or clinic	Hysterec- tomy
			Under 30 yrs	Over 30 yrs				
Atteridgeville	1 394 (1 485)	1 (2) 0.07 % (0.13 %)	0 (1)	1 (1)	1 (2)	1 (2)	1 (0)	0 (0)
Saulsville	1 598 (1 672)	0 (4) 0.0 % (0.24 %)	0 (2)	0 (2)	0 (4)	0 (3)	0 (1)	0 (1)
Mamelodi	4 838 (4 711)	10 (5) 0.21 % (0.11 %)	2 (0)	8 (5)	10 (4)	9 (1)	4 (0)	5 (0)
Eersterust	1 001 (847)	0 (2) 0.0 % (0.24 %)	1 (0)	0 (2)	1 (2)	1 (2)	1 (0)	0 (0)
Laudium	656 (613)	0 (2) 0.0 % (0.33 %)	0 (0)	0 (2)	0 (2)	0 (2)	0 (0)	0 (0)
TOTAL	9 487 (9 328)	12 (15) 0.13 % (0.16 %)						
GRAND TOTAL WHITE AND NON-WHITE	12 920 (13 583)							

The following table gives an exposition of these cases

	Number with macrocytic changes	Number treated and repeated
Atteridgeville	33 (32)	12 (16)
Saulsville	54 (55)	20 (26)
Mamelodi	151 (123)	43 (38)
Eersterust	12 (16)	7 (8)
Laudium	9 (4)	5 (4)
Total	259 (230)	87 (92)

Although it is felt that the taking of cervical smears of women is an obvious task, there are two problems in respect of Non-White women for which there is apparently no self-evident and satisfactory solution.

These problems are:

1. The number of women who have to come for a follow-up examination and who fail to do so in spite of home visits by our nursing staff to encourage them to come. The numbers, especially this year, give a good explanation why the staff feel frustrated and unhappy about the results.

2. The large percentage of drop-out cases with a positive smear, who are referred to the hospital and in respect of whom no report is received from the hospital. This problem has been discussed repeatedly with the hospital staff. From these discussions it appears that a certain number never attend the hospital and we cannot trace them again.

We are nevertheless convinced that the above problems are not sufficient reason to discontinue the service.

FAMILY PLANNING

The following table reflects the attendance at our various family planning clinics during the past year:

	White	Black	Asian	Coloured
1. Number of new patients reported	1 961 (1 923)	4 275 (4 698)	254 (270)	403 (365)
2. Methods and drugs				
(a) Lippes loop				
Number of new acceptors	5 (1)	187 (403)	2 (5)	22 (3)
Number of old acceptors	21 (25)	224 (331)	15 (8)	34 (24)
Number expelled	1 (2)	217 (253)	0 (1)	6 (7)
Number removed	2 (7)	99 (98)	8 (5)	3 (10)
Number re-inserted	1 (1)	49 (123)	1 (1)	2 (2)
(b) Multi-load				
Number of new acceptors	104 (60)	938 (996)	20 (23)	11 (3)
Number of old acceptors	418 (235)	556 (471)	61 (71)	27 (10)
Number expelled	18 (17)	372 (655)	8 (6)	1 (4)
Number removed	107 (110)	256 (220)	29 (20)	9 (13)
Number re-inserted	26 (13)	234 (350)	7 (10)	0 (7)
(c) Tablets				
Number of new acceptors	430 (389)	534 (640)	70 (59)	111 (66)
Number of old acceptors	4 820 (4 892)	6 765 (8 147)	1 127 (1 130)	905 (989)

	White	Black	Asian	Coloured
(d) Injections				
Number of new acceptors	160 (216)	1 004 (718)	11 (59)	147 (107)
Number of old acceptors				
First I.M.I.	426 (470)	1 340 (842)	57 (28)	143 (119)
Second I.M.I.	394 (471)	1 278 (1 041)	23 (31)	144 (134)
Third I.M.I.	377 (309)	989 (855)	24 (30)	82 (93)
Fourth I.M.I.	292 (266)	830 (695)	15 (28)	82 (61)
Repeated i.e. fifth, sixth, etc	2 069 (1 917)	3 643 (3 568)	158 (153)	239 (193)
Total number of old acceptors	3 558 (3 433)	8 080 (7 001)	267 (270)	695 (600)
Total number of I.M.I.	3 718 (3 649)	9 084 (7 719)	278 (329)	842 (707)
Grand total injections for all races		13 922 (12 404)		
3. Number of re-visits	20 415 (20 468)	40 699 (41 694)	4 093 (4 223)	5 971 (5 799)
Grand total first visits for all races		6 893 (7 256)		
Grand total re-visits for all races		71 178 (72 184)		
Grand total first and re-visits for all races		78 071 (79 440)		

STAPHYLOCOCCAL INFECTIONS

The incidence of staphylococcal infection in private maternity homes is described fully elsewhere in this report under Notifiable Diseases.

As in the past, the Inspectress of Midwives continued this year with the taking of quarterly slides for bacteriological examination in this regard from private maternity homes, of which there are two for Whites and two for Non-Whites in the city.

The staff persevered with education in respect of strict hygiene measures as well as the application thereof. Results from bacteriological examinations this year again confirmed that to date this is the most effective method to control the incidence of staphylococcal infections.

Good co-operation was once again received from the four institutions, particularly in regard to the application of strict hygiene measures. The result was a distinct decrease in the incidence of infection.

The great problem at one institution, which makes control extremely difficult, is the large number of confinements it has to handle. This means that there is early discharge of its patients from the institution, resulting in a continual rapid change in the patient population. Although it appears to be a practically impossible task to find a solution in respect of control of infection here, it is gratifying that this institution nevertheless succeeded in reducing the incidence of infection.

SUBSIDIZED PVM MIXTURE AND SKIMMED MILK POWDER SCHEME

The following is an exposition of the quantities of PVM mixture and skimmed milk powder issued at the under-mentioned clinics during the year 1980 :

	PVM mixture	Skimmed milk powder
Mamelodi	25,6 kg (56,4 kg)	307,0 kg (689,5 kg)
Eersterust	64,0 kg (32,0 kg)	53,0 kg (28,5 kg)
Atteridgeville	98,0 kg (38,0 kg)	107,5 kg (68,0 kg)
Saulsville	100,0 kg (58,4 kg)	191,0 kg (91,5 kg)
Laudium	0,8 kg (0,8 kg)	- (-)
Total	288,4 kg (185,6 kg)	658,5 kg (877,5 kg)

The table on pages 55 and 56 shows the attendance figures at the clinics during the past year.

ADMINISTERING OF ORAL POLIOMYELITIS VACCINE TO PREGNANT WOMEN

The following table gives an exposition of the patients who were immunized this year:

	Harry Nelson Clinic	Willa Volschenk Clinic	Danville Clinic	Pretoria North Clinic	East Lynne Clinic	Total
First dose	0 (0)	1 (0)	0 (0)	0 (0)	0 (0)	1 (0)
Second dose	0 (0)	0 (2)	0 (1)	0 (0)	0 (2)	0 (5)
Third dose	0 (0)	0 (2)	0 (0)	0 (0)	0 (2)	0 (4)
Previously immunized	137 (131)	67 (70)	39 (40)	48 (33)	72 (38)	363 (312)

At present Non-White pregnant women are not immunized against poliomyelitis at the municipal ante-natal clinics as a routine measure. Any patient who requests this, would receive it immediately. If at any time it should appear that this policy should be revised, this would be done at once.

HEARING TESTS FOR POSSIBLE DEAFNESS

Since the beginning of the year 1973 efforts have been made to trace possible cases of deafness in babies and young children by means of rough hearing tests.

The procedure is as follows:

(a) Every health visitor carried out the tests on revisiting the baby at home. Because revisits take place every three months, if possible, the ages of these babies varied from four to six months.

(b) If during the first visit she heard from the mother that it appears to her that the baby is not aware of sounds, she made a point of getting the baby either to the clinic doctor or to the family's private doctor.

(c) Where, during revisits, she found children in the age group of 18 months to 2 years who did not yet show such an extent of use of language as may be expected of that age group, these children were also referred to either the clinic doctor or the family's private doctor.

(d) In some instances there is nobody at home during a home visit. Fortunately such mothers come to the baby clinic some time or other for advice where the health visitor then examines the children in a similar way as during a home visit to ascertain whether there is possibly defective hearing.

(e) When a possible hearing defect was discovered, such children were by agreement referred to the Transoranje School for the Deaf for audiometric examination.

(f) The hearing of babies of 6 months and younger are preferably tested by electrical response audiometry. Such cases are referred to the Speech, Voice and Hearing Clinic of the University of Pretoria.

During the year a total of 6 207 (5 710) babies above the age of four months as well as pre-school children were subjected to rough hearing tests by the health visitors.

Of these children 7 (5) were referred for further examination either at the Transoranje School for the Deaf or at the Speech, Voice and Hearing Clinic for the University of Pretoria.

In most cases the mother herself was worried because the baby did not react to sounds, or she expressed concern in respect of the child's speech.

PARTICULARS OF AUDIOMETRIC EXAMINATION AT THE TRANSORANJE SCHOOL FOR THE DEAF OR AT THE SPEECH, VOICE AND HEARING CLINIC, UNIVERSITY OF PRETORIA : 1980

Age			Number referred
0	-	1 year	3 (0)
1	-	2 years	0 (0)
2	-	3 years	0 (1)
3	-	4 years	2 (2)
4	-	5 years	0 (2)
5	-	6 years	2 (0)

CHILD GUIDANCE CLINIC

For the total growth and development of the child, it is necessary to provide in its physical, social, educational and emotional needs.

Early discovery and treatment of emotional disturbances in the child are just as important for its eventual health, as they are in the case of physical deviations.

With the modern concept of community health services the psychic care of the child (and this includes the whole family) ought to be an integral part of child-care services.

Although we have been aware of this for many years, the necessary service could not be provided because of the lack of staff specially trained therefore.

Fortunately the State Health Department recently commenced with the extension of psychiatric community services by making use of staff on the staff establishment of its institutions for the care of mentally disturbed patients.

Generally speaking, the importance of preventive psychiatry is being realized more and more today. Such a service is, inter alia, concerned with the early observation and treatment of emotional problems in the baby and young child in his family relationship.

Dr Luiz, formerly Superintendent of Weskoppies Hospital, saw the health visitor connected with a Maternal and Child Care Section as an important link in such a service. The health visitor is the person who even as early as the first fourteen days of a child's life meets the family concerned in the area in which she works. She is, therefore, at an early stage able to observe problems.

Extension of preventive psychiatric services could, therefore, take place successfully in cooperation with Maternal and Child Care Sections of local authorities.

As a result of negotiations between the then Superintendent of Weskoppies Hospital and the Medical Officer of Health of the City Council of Pretoria, such a service came into being by the establishment of a child guidance clinic in August 1973.

The necessary offices and space, as well as a playroom, provided for this purpose in Muntoria are particularly suitable.

The specially trained staff rendering the service are on the staff establishment of Weskoppies Hospital and the other members of the team are municipal medical officers and health visitors.

MEDICAL INSPECTION SERVICE : NURSERY SCHOOLS AND CRèches

At the request of a group of parents, the Council in 1970 instituted a medical inspection service for children in nursery schools and crèches within the Pretoria municipal area.

The object of this service is to regularly examine children medically in nursery schools and crèches and to draw the attention of parents to any deviations which are found. No treatment is given and the parents are requested to take the children to their private medical practitioners or some other existing organization, for any further examination or treatment which may be necessary.

One Part-time Medical Officer and one Part-time Health Visitor continued this service in 1980. The number of institutions increase annually, and it was possible to visit 68 of the 79 registered institutions, where a total of 4 373 children were examined, 3 072 for the first time, while 1 301 children were re-examined. One or more conspicuous deviations were found in 2 442 children - with a total of 3 451 deviations.

The sight of 1 682 children was tested, of whom 20 with possible visual deviations were referred to an ophthalmologist for further examination.

Hearing screening-tests were given to 100 children, of whom 25 with possible hearing loss were referred for further examination. This hearing screening-test is a time-consuming procedure, and the hearing of selected children only is tested.

Children with congenital or hereditary deviations are, still being reported to the Genetics Division of the Department of Health, Welfare and Pensions, with a view to genetic counselling. During 1980, 41 children with a variety of deviations were reported.

Excellent cooperation is still being received from the Child Referral Centre, to which many children with various problems could be referred.

We are continually on the look-out for factors that possibly may influence a child's progress at school, such as perception problems, lack of concentration ability and poor muscle coordination. These children are then referred to remedial clinics. Very good cooperation is received from the clinics and 15 children were referred to them during 1980. In all these cases reports are received from the clinic.

A total of 2 561 letters were addressed to parents - 1 617 with reminders that children had not been fully immunized against diphtheria and tetanus. Special attention is also given to immunization against measles.

This important preventive service to the pre-school child continues to be greatly appreciated by parents as well as institution staff, and numerous telephone calls and letters of thanks are received.

THE COMBATING OF AIR POLLUTION

Law enforcement

1. Smoke-control zone order

The entire area of jurisdiction of the City Council of Pretoria, excepting the Black residential areas, has been a smoke-control zone since 1 July 1979. The public's cooperation in the enforcement thereof has been good throughout. The greatest problem still remains the burning of refuse in the open air. Manual laborers who burn refuse or cook food on open fires during temporary occupation of premises, sidewalks or road construction sites have provoked many complaints and they also hardly ever respond to exhortations and warnings.

1.1 Regulations for smoke control

Only 4 applications for the installation of fuel-burning appliances were received and approved in terms of the Regulations. There were, however, a number of conversions to electricity for which the approval of this Department is not required. As a result of the steep rise in the oil price, more and more enquiries have recently been received from businesses that wish to convert to coal. Here the policy has as far as possible been maintained that businesses situated on industrial sites have readily been allowed to use coal, while businesses not situated on industrial sites have been encouraged rather to convert to electricity. Coal burning is only permitted if the appliance complies in all respects with the requirements of this Department. It is also ensured by regular inspections that appliances are kept in good condition at all times.

1.2 Regulations governing the control of noxious or offensive gases emitted by diesel-driven vehicles

Altogether 124 notices were issued to owners of diesel vehicles that exceeded the smoke emission limit. A further 26 notices were also served on suspected offenders after the exhaust smoke of the vehicles had been visually estimated. With few exceptions all the notices were complied with. Where prosecution is instituted in terms of the said Regulations it takes place not on account of the fact that the smoke emission limit is exceeded, but because the offender has ignored a notice in terms of the Atmospheric Pollution Prevention Act, 1965.

A survey conducted during this year of diesel vehicles passing the measuring points showed the following: 87 vehicles of a certain American European make (AMEU) produced a mean reading of the exhaust gas density, as measured with the Hartridge meter, of 66,6 and a standard deviation of 37,6 %. It so happened that the exhaust gas density of almost just as many vehicles, namely 88, of a certain Japanese make (JAPA) was measured, with a mean reading of 54,3 and a standard deviation of 36,3 %.

If the abovementioned standard deviations are an indication of the influence of wear and maintenance (and also other factors), these influences and their effect on the engines of both the AMEU vehicles and the JAPA vehicles are very nearly the same (37,6 % against 36,3 %). Consequently these two groups of makes of vehicles are to a large extent comparable.

As a result of the abovementioned assumptions it may be reasoned that as the mean exhaust gas density reading of 66,6 of the AMEU vehicles is very close to the reading of 70 that, in terms of Act 45 of 1965, may not be exceeded, this make of vehicle quite probably tends more to aggravate the pollution problem than the JAPA vehicles, of which the mean reading is 54,3.

2. Staff

Changes that took place in the staff position are that the vacant post of Chief Officer (Air Pollution Control) was filled again and that the post of Inspector (Air Pollution), which became vacant on account of the death of an official, could be filled immediately again.

3. Inspections

The number of inspections carried out by the inspectorate during the course of the year totalled about 6 355, which may be divided into the undermentioned groups:

3.1 Complaints

Altogether 284 complaints were received and successfully handled. Of these 182 dealt with the burning of refuse. The remaining 102 were in connection with various matters such as smoke emissions from fuel-burning appliances, odours, dust and ventilation. Seventy-five notices were served on offenders in terms of the Smoke Control Regulations.

3.2 Trade licences

Altogether 447 applications for trade licences were referred to this Section. Only in instances where there were fuel-burning appliances or kitchen ventilation systems on the premises, requirements were stipulated.

3.3 Building plans

Altogether 573 building plans were checked for compliance with the requirements for "exempted" appliances according to the Pretoria Smoke-control Zone Order and also the Smoke Control Regulations and for compliance of mechanical ventilation and air conditioning with Council requirements. Quite a number of spray-painting premises for motor cars were established in this period and requirements for ventilation by means of large fans to keep the concentration of xylene within the OSHA concentration limit had to be enforced.

Measurements of xylene concentration are also taken in existing spray-painting premises.

4. Conferences, seminars, lectures, papers, meetings and instruction

This year a meeting of the smoke-control officers of the Transvaal region was held at Ermelo on 17 April 1980 and this was attended by the Chief Officer.

A lecture on the measurement of trace elements in the atmosphere by means of the PIXE method at the CSIR on 12 September 1980 was attended by the Chief Officer.

The Medical Officer of Health, the Chief Officer and the Senior Inspector attended a conference about the role of chimneys in air pollution control, held at UNISA on 20 November 1980.

Enquiries from the public about Act 45 of 1965, the Regulations and the Smoke-control Zone Order were answered by telephone, letter or the news media, and these took up considerable time.

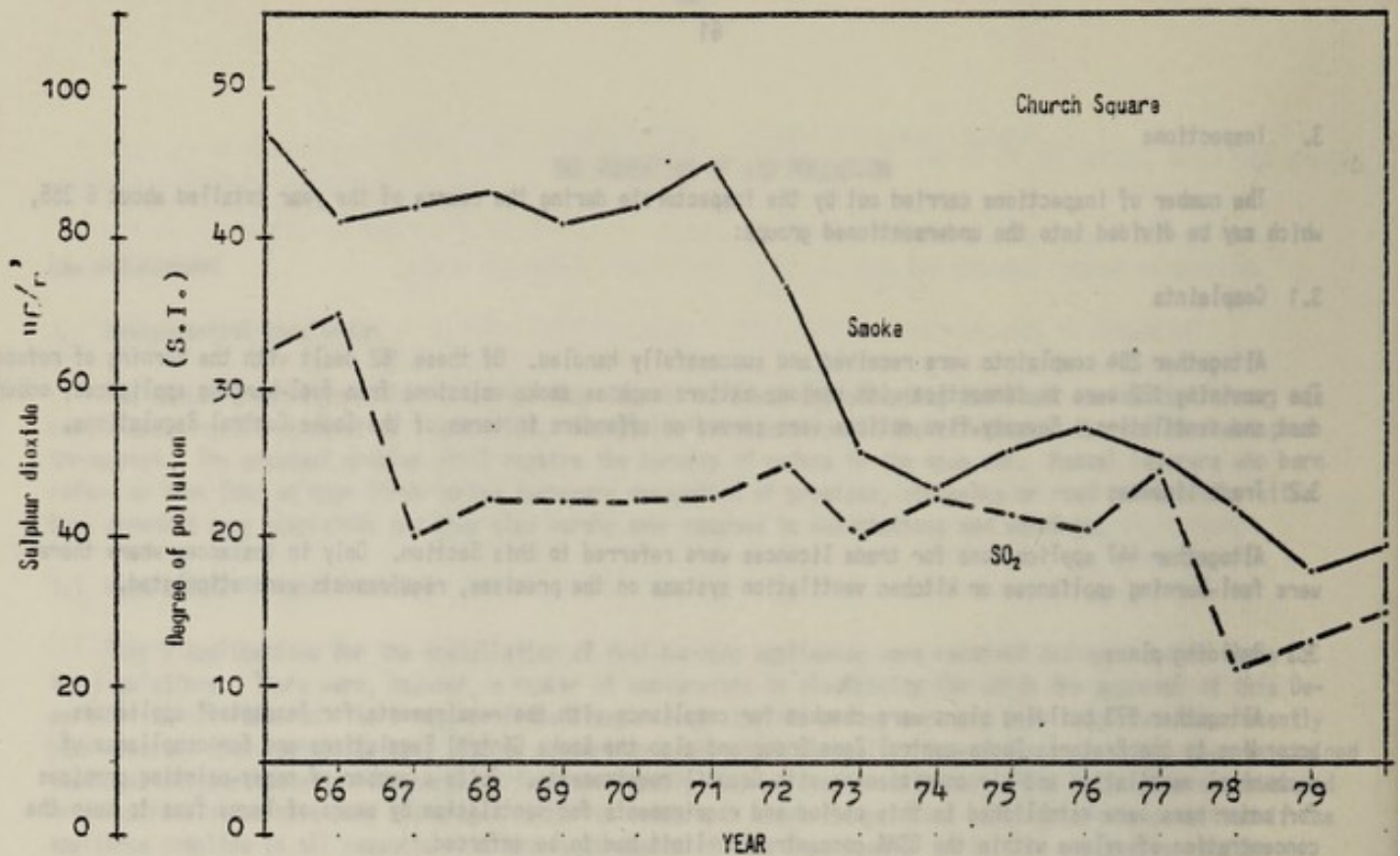
5. Measurements of air pollution, OSHA concentration limits and effective temperature

The measurement of air pollution at all previous measuring points continued as in the past. The major results are summarized in graphs 1 to 6.

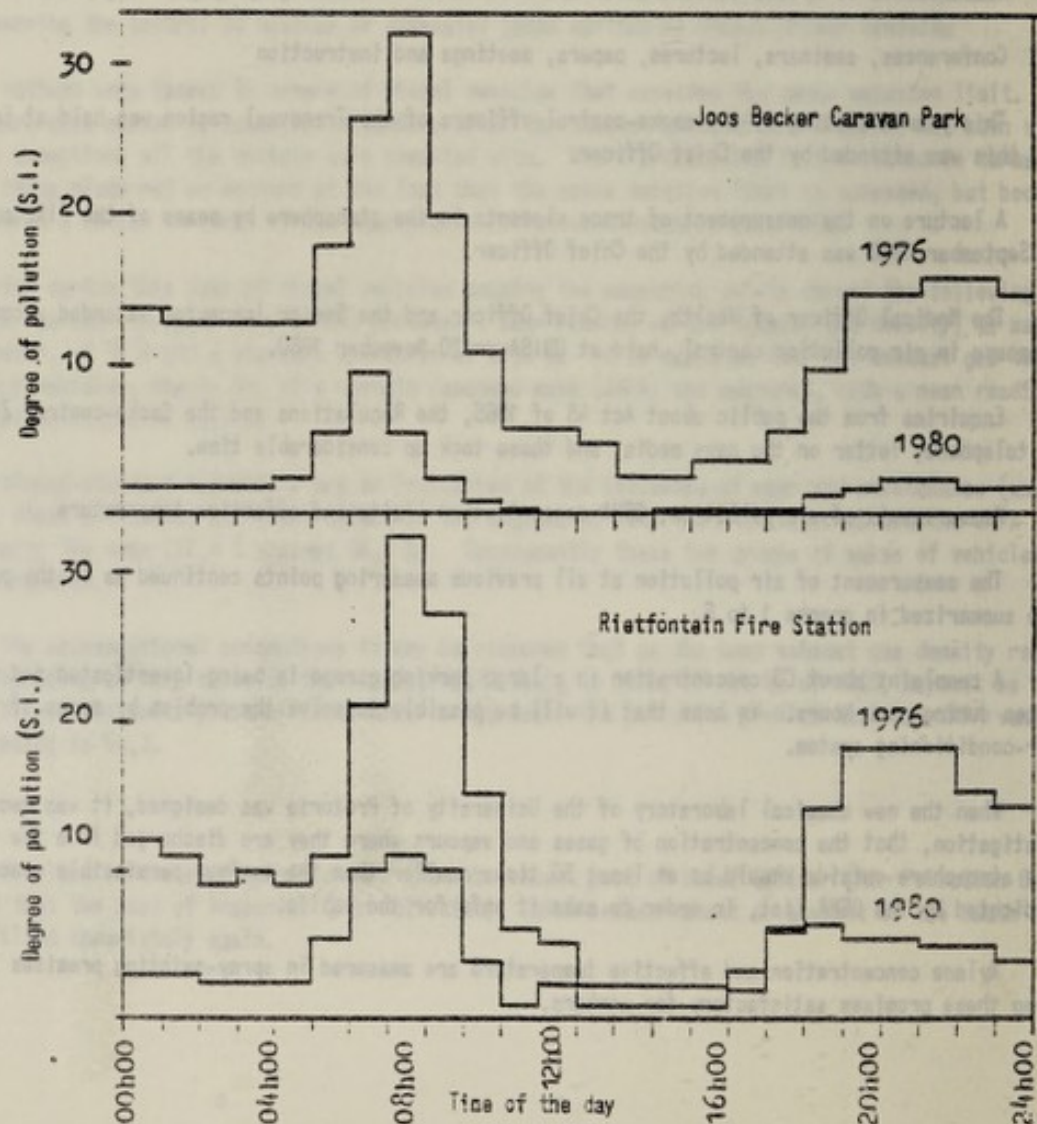
A complaint about CO concentration in a large parking garage is being investigated and measurements are being taken during peak hours. We hope that it will be possible to solve the problem by means of improvements to the air-conditioning system.

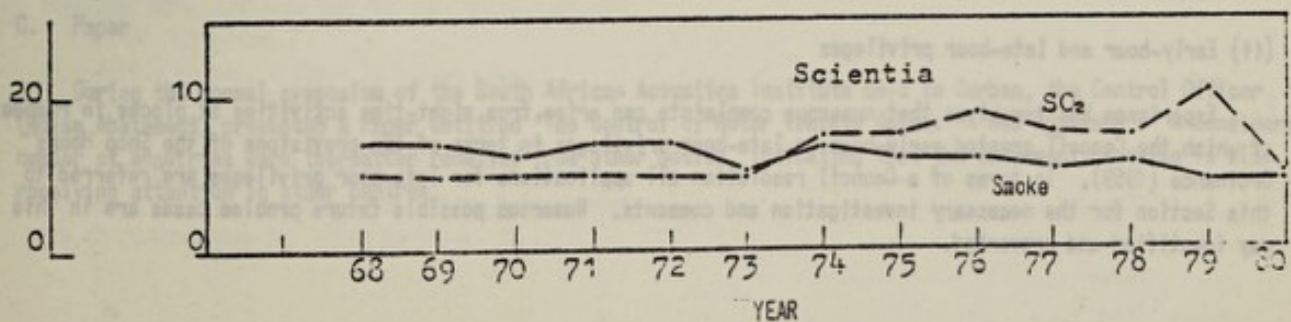
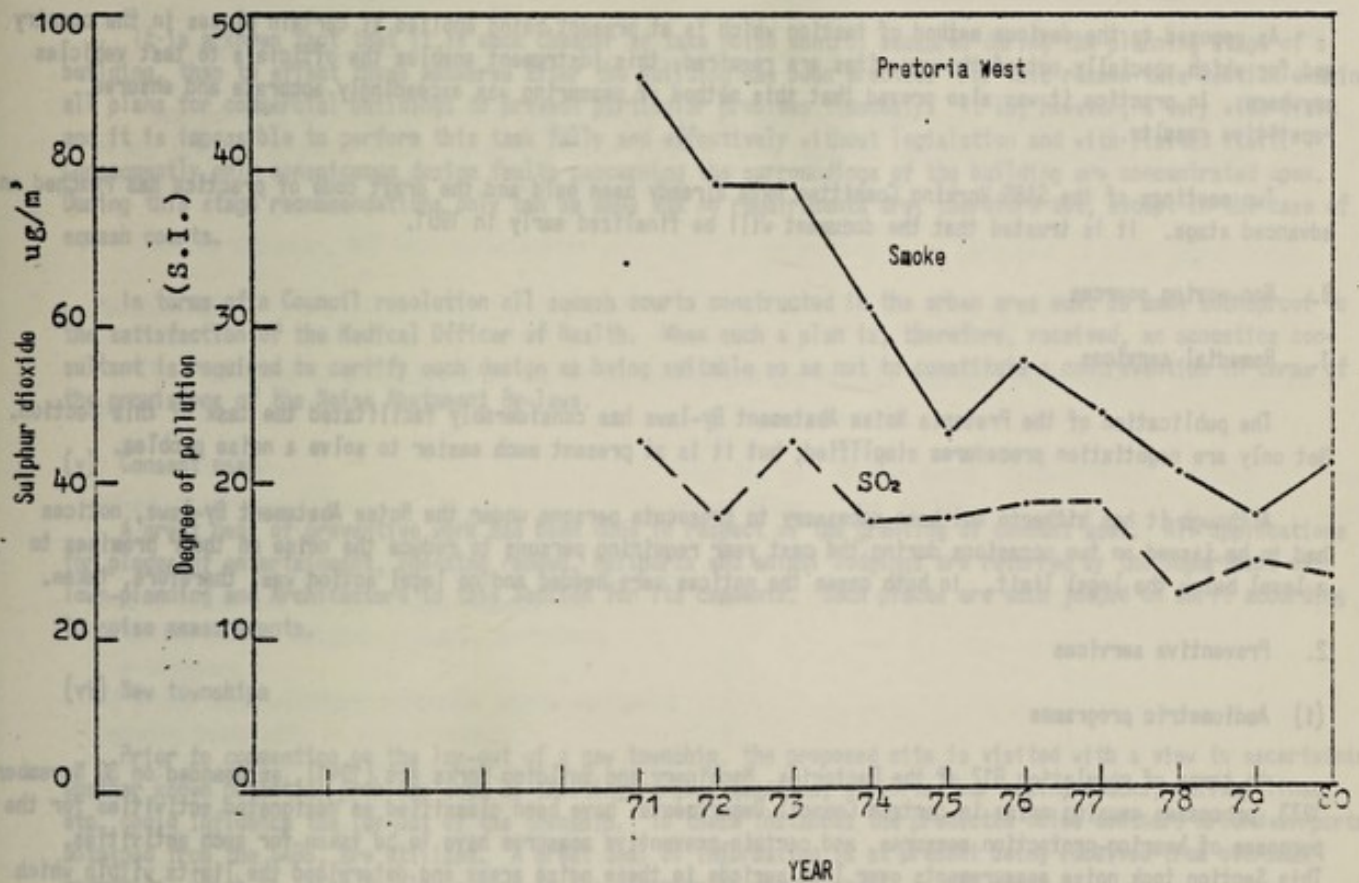
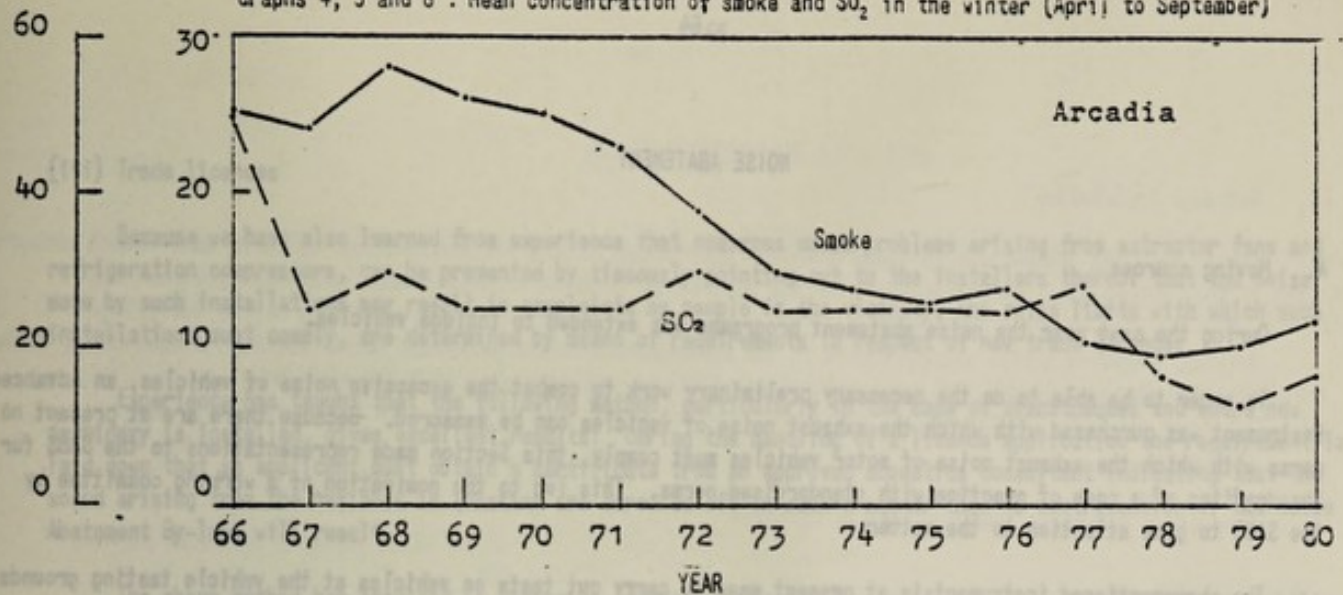
When the new chemical laboratory of the University of Pretoria was designed, it was recommended, after investigation, that the concentration of gases and vapours where they are discharged from the fume chambers into the atmosphere outside should be at least 50 times smaller than the maximum permissible concentration limits indicated by the OSHA list, in order to make it safe for the public.

Xylene concentration and effective temperature are measured in spray-painting premises in order to make and keep these premises satisfactory for workers.

Graph 1 : Mean concentration of smoke and SO₂ in the winter (April to September)

Graphs 2 and 3 : Mean hourly smoke concentrations



Graphs 4, 5 and 6 : Mean concentration of smoke and SO_2 in the winter (April to September)

NOISE ABATEMENT

A. Moving sources

During the past year the noise abatement programme was extended to include vehicles.

In order to be able to do the necessary preliminary work to combat the excessive noise of vehicles, an advanced instrument was purchased with which the exhaust noise of vehicles can be measured. Because there are at present no norms with which the exhaust noise of motor vehicles must comply, this Section made representations to the SABS for the drafting of a code of practice with standardised norms. This led to the nomination of a working committee by the SABS to give attention to the matter.

The above-mentioned instrument is at present used to carry out tests on vehicles at the vehicle testing grounds at Waltloo. Through the mediation of the SABS the cooperation of motor vehicle manufacturers was obtained to carry out tests on new vehicles as well. Several manufacturers reacted positively in this connection, and over 1 000 new and used motor vehicles have already been tested.

As opposed to the devious method of testing which is at present being applied at certain places in the country and for which specially out-of-the-way sites are required, this instrument enables the officials to test vehicles anywhere. In practice it was also proved that this method of measuring was exceedingly accurate and ensured repetitive results.

Two meetings of the SABS Working Committee have already been held and the draft code of practice has reached an advanced stage. It is trusted that the document will be finalized early in 1981.

B. Non-moving sources

1. Remedial services

The publication of the Pretoria Noise Abatement By-laws has considerably facilitated the task of this Section. Not only are negotiation procedures simplified, but it is at present much easier to solve a noise problem.

Although it has hitherto not been necessary to prosecute persons under the Noise Abatement By-laws, notices had to be issued on two occasions during the past year requiring persons to reduce the noise on their premises to a level below the legal limit. In both cases the notices were heeded and no legal action was, therefore, taken.

2. Preventive services

(i) Audiometric programme

In terms of regulation B17 of the Factories, Machinery and Building Works Act (1941), as amended on 30 November 1973, processes causing noise in certain Council Departments, have been classified as designated activities for the purposes of hearing-protection measures, and certain preventive measures have to be taken for such activities. This Section took noise measurements over long periods in these noise areas and determined the limits within which hearing-protection measures must be applied, which link up with the audiometric programme of this Department.

(ii) Early-hour and late-hour privileges

Experience has taught us that numerous complaints can arise from night-time activities at places in respect of which the Council granted early-hour or late-hour privileges in terms of the provisions of the Shop Hours Ordinance (1959). In terms of a Council resolution all applications for late-hour privileges are referred to this Section for the necessary investigation and comments. Numerous possible future problem cases are in this way identified and prevented.

(iii) Trade licences

Because we have also learned from experience that numerous noise problems arising from extractor fans and refrigeration compressors, can be prevented by timeously pointing out to the installers thereof that the noise made by such installations may result in complaints by people in the vicinity, the noise limits with which such installations must comply, are determined by means of requirements in respect of new trade licences.

Experience has taught that the following method, particularly in the case of discotheques and where new machinery is installed, gives excellent results: During the handling of a licence application the requirement is laid down that an applicant must obtain a certificate from an approved acoustics consultant indicating that the sound arising from the business in question are screened off in such a manner that no contravention of the Noise Abatement By-laws will result.

The above method has resulted in screening-off being affected in a professional manner, whereby unsightliness and other problems are eliminated.

(iv) Building plans

It is a known fact that it is much cheaper to take noise control measures during the planning stage of a building, than to effect those measures after the building has been erected. For this reason this Section examines all plans for commercial buildings to prevent particular problems timeously. It is, however, a very wide field and it is impossible to perform this task fully and effectively without legislation and with limited staff. Consequently only conspicuous design faults concerning the surroundings of the building are concentrated upon. During this stage recommendations only can be made and no requirements are, therefore set, except in the case of squash courts.

In terms of a Council resolution all squash courts constructed in the urban area must be made soundproof to the satisfaction of the Medical Officer of Health. When such a plan is, therefore, received, an acoustics consultant is required to certify such design as being suitable so as not to constitute a contravention in terms of the provisions of the Noise Abatement By-laws.

(v) Consent uses

A great deal of preventive work has been done in respect of the granting of consent uses. All applications for places of entertainment, shooting ranges, heliports and animal lodgings are referred by the Department of Town-planning and Architecture to this Section for its comments. Such places are each judged on merit according to noise measurements.

(vi) New townships

Prior to commenting on the lay-out of a new township, the proposed site is visited with a view to ascertaining whether known potential problems such as shooting ranges, quarries, airports, car racing tracks, railway lines, etc, could influence the lay-out of the township. In these instances the predicted noise contours around airports, obtained from the SABS, are utilized. A great deal of information is at present being received from overseas countries, which is going to play a part in the planning of future areas.

C. Paper

During the annual symposium of the South African Acoustics Institute held in Durban, the Control Officer (Noise Abatement) presented a Paper entitled "The Control of Motor Vehicle Noise: A New Approach". A considerable number of enquiries were thereafter received from other bodies, indicating that the abatement of noise is also receiving attention in other centres.

D. National legislation

During 1980 the Government published a White Paper formulating a national policy regarding environment conservation. This, *inter alia*, makes provision for the control of noise on a national basis.

Arising therefrom a bill was published in the Government Gazette on 25 July 1980. The bill, *inter alia*, makes provision for the promulgation of noise-control regulations, applying also to motor vehicles.

E. Statistics

Inspection visits to premises were as follows:

Trade licences	368
Complaints	53
Consent use	126
Late-hour concessions	17
Noise measurements under Noise Abatement By-laws	12
Building plans	19

HEALTH INSPECTORATE ACTIVITIES

In line with the Department's policy, all complaints and other matters upon which reports have been required, have received immediate attention no matter how trivial the matter may have seemed to be at the time of receipt. Expeditious action was taken in regard to matters falling within the Department's powers, whilst those affecting others were referred to the Departments concerned.

The pages which follow outline in some detail the work performed by the various Sections which form the Health Inspectorate.

MATTERS REFERRED TO OTHER DEPARTMENTS

During the course of their duties Health Inspectors frequently come across matters which require attention not only from a health point of view but in addition, require action to be taken by some other Department of the Council as well. Note is also taken of many deficiencies or defects which concern other Departments but which, as such, have no bearing on public health.

Included among such deficiencies are the following, to quote but a few:

Unauthorized or dangerous structures, defective and dangerous electrical installations, hazardous conditions on any Council property including pavements or streets, fire hazards, unlicensed businesses or trades, sewer or drainage defects, leaky water mains, and many others.

During the year, 492 such deficiencies were notified in writing or by telephone to other Departments.

PROSECUTIONS

The following is an analysis of the prosecutions, and the results thereof, instituted by the Department during 1980:

Nature of offence	Total No. of prosecutions	Number found not guilty	Number found guilty	Number withdrawn	Fines imposed
Dirty and unsatisfactory conditions on food premises	8		8	1	R 230
Food or drink not fit for human consumption	5		5		R 330
Defective and/or chipped crockery, containers or wrappers	3		3		R 50
Dirty and unsatisfactory apparatus and/or equipment	1		1		R 20
Exposing foodstuffs to contamination	3		3		R 60
Failing to provide satisfactory protective clothing	1		1		R 10
Clothing not in change-rooms or lockers	1		1		R 30
No or insufficient lockers for employees	1		1		R 10
Failing to provide soap, nail brush or towelling	3		3		R 50
Failing to provide racks or shelves	3		3		R 60
Food and other articles not for sale kept elsewhere than in store-room	1		1		R 30
Importation of meat without it having been submitted for reinspection	1		1		R 50
Ineffective storage of bulk goods	1		1		R 50
No or unsatisfactory canopy, filters, fan, flue	2		2		R 40
Excess micro organisms and E. coli type 1 in sherbet	1		1		R 50
Use of change-rooms for other purposes	1		1		R 30

Nature of offence	Total No. of prosecutions	Number found not guilty	Number found guilty	Number withdrawn	Fines imposed
Insufficient and/or unsatisfactory food-handling tables or working surfaces	1		1		R 10
Insufficient refuse receptacles	2		2		R 40
Failing to comply with a notice	4		4		R 80
Failing to provide suitable builder's latrines	2		1	1	R 20
Offensive smells	1	1			R 0
Keeping of poultry not in accordance with regulations	1		1		R 20
Sulphur dioxide in excess of 450 mg/kg in boerewors	1		1		R 50
Total	48	1	46	1	R1 320

LICENSED PREMISES

The following is a list of premises and the number of each type which were licensed during the year. The premises of new licencees were inspected prior to licensing and where necessary appropriate action was taken to remedy any unsatisfactory conditions.

Accommodation establishment	1 003
Auctioneer	57
Baker	110
Barber or hairdresser	353
Butcher	260
Café keeper	763
Caterer	7
Chemist and druggist	195
Cobbler	63
Commercial traveller	42
Crèche or nursery school	70
Motoring driving school	7
Dairy	4
Dairy-farm	5
Dealer in aerated or mineral water	156
Dealer in bones and used goods	85
Dealer in fireworks	53
Dealer in household, patent and proprietary medicines	795
Dealer in motor vehicles	141
Dealer or speculator in livestock or produce	1
Debt collector and tracer	15
Disinfector or fumigator	8
Eating-house keeper	36
Fishmonger and fishfrier	23
Food manufacturer	37
Fruit, vegetable and plant dealer	174
Funeral undertaker	15
General dealer	4 723
Hawker	166
Hiring service	29
Kennel or pet's boarding establishment or salon	15
Launderer or dry-cleaner	123
Laundry or dry-cleaning receiving depot	91
Livery stable or riding-school keeper	2

Private investigator	16
Salesman	316
Mail-order or other order undertaking	163
Milk shop	79
Miller	5
Motor garage	560
Motor vehicle attendant	4
Offensive trades	31
Parkade	59
Passenger transport undertaking	16
Pawnbroker	14
Physical culture, health or beauty centre	61
Place of entertainment	109
Restaurant keeper	94
Special licence	224
Street photographer	3
Vending machine keeper	8
Warehouse	11
Workshop	337
Total	11 737

BUILDING PLANS

The following is a summary of the plans examined during the year:

First submission	Second submission	Preliminary plans	By architects	Non-White areas	Total
7 341 (6 498)	1 916 (1 601)	41 (27)	4 (0)	673 (542)	9 975 (8 668)

The following table summarizes the inspections carried out and the action taken by the District Health Inspectors:

Nuisances dealt with	12 1/4
Notices served	5 017
Intimations given	7 157
Notices complied with	3 117
Nuisances abated	10 274
Nuisances re-inspected	3 492
Complaints dealt with	2 770
Licence applications	3 955
Milk shops	7
Butcher shops	447
Fishmongers	12
Bakehouses	18
Restaurants and tea-rooms	1 667
Accommodation establishments (without meals)	196
Grocery and provision stores	1 143
Fruit and vegetable stores	473
Factories	166
Hairdresser saloons	215
Miscellaneous inspections	705
Matters referred to other departments	492
House-to-house inspections	42
After hour inspections	24
Total	15 824

PEST CONTROL BY DISTRICT HEALTH INSPECTORS

The following is a summary of the work performed by the District Health Inspectors in regard to rodent, mosquito and fly control:

RODENTS

1. Complaints investigated	676
2. Premises inspected and advice given	1 192
3. Notices and intimations to use traps or poison	755
4. Notices served requiring rodent-proofing of premises	193
5. Notices served under 3 and 4 above, complied with	337
6. Existing buildings made rodent-proof	71
7. New rodent-proof buildings completed	25
8. Accumulation of rubbish or lumber, etc., likely to harbour rodents cleaned up and/or removed	609
9. Number of rodents seen killed or reported killed	202
10. Rat-proof animal food bins provided	35
11. Matters referred to Pest Control	5
12. Matters concerning rodent control referred to other Departments	0
13. Prosecutions for failure to comply with notices	4

MOSQUITOES

1. Complaints investigated	65
2. Inspections made	91
3. Notices and intimations given	52
4. Notices served under 3 above, complied with	18
5. Breeding places eliminated	34
6. Advice given re mosquito control	51
7. Type of mosquitoes found	Culex
8. Prosecution for failure to comply with regulations	0

FLIES

1. Complaints investigated	147
2. Inspections made	198
3. Notices and intimations given	136
4. Notices served under 3 above, complied with	51
5. Breeding places eliminated	80
6. Advice given re fly control	42

FOOD SECTION

This Section is responsible for ensuring the hygienic production, handling and distribution of foodstuffs throughout the city and in the Non-White areas falling under the jurisdiction of the Pretoria City Council. Frequent visits to, and inspections of, all types of premises engaged in the food trade were made.

The tables at the end of this section of the report indicate the types of food of which samples were taken and the results of their bacteriological and/or chemical analysis. Samples of perishable foodstuffs form the bulk of those taken. When any sample of food was found to be below standard, the seller was either warned or prosecuted.

During the year a large quantity of foodstuffs was either surrendered to the Department, or seized as unfit for human consumption, and condemned and destroyed. The excellent co-operation between the food vendors and the Department was maintained.

Health Inspectors were in daily attendance at the Produce Market where large quantities of foodstuffs were seized and condemned as unfit for human consumption.

A total of 87 consignments of foodstuff (other than those seized on the Produce Market) was surrendered and the following were condemned as unfit for human consumption and were destroyed:

Fresh meat	3 159,2	kg
Meat (canned)	882	tins
Meat products	3 255,4	kg
Fish (canned)	4 686	tins
Fresh fish	215	kg
Cheese	242,38	kg
Margarine	911	kg
Offal	10 388	kg
Frozen pies	17	
Sweets (bars)	22	bars
Sweets	119,18	kg
Poultry	36,39	kg
Nuts	2,5	kg
Vinegar	4,25	litres
Biscuits	30,52	kg
Baking fat	108,63	kg
Pasta	31,62	kg
Milk (canned)	11	tins
Milk powder	4	kg
Butter	107,5	kg
Fruit juices	53,32	litres
Oil	4,75	litres
Soup mixtures	0,39	kg
Cereals	5,12	kg
Jelly and pudding	21,28	kg
Condiments	65,59	kg
Jan	268	tins
Vegetables	1129	tins
Fruit	2 540	tins
Soup	40	tins
Beverages	1,76	kg
Bread spreads	18,16	kg
Yeast	20	kg
Cake mixtures	0,5	kg
Unlabelled tins	141	
Eggs	180	doz
Cakes	17,20	kg
Ice cream	16 200	litres

In addition to the abovementioned 279 consignments of mixed foodstuffs were submitted to this Department for destruction. These consignments, which were submitted by various firms, consisted of a variety of foodstuffs packed in all sorts of containers. Most of the food was unfit for human consumption but a certain percentage was regarded by its owners as unsaleable.

Only a general covering certificate, without item specification, was issued to the firms after destruction of these goods.

In addition to the abovementioned, 5 consignments of mixed foodstuffs were seized by Health Inspectors in the course of their normal inspections and the following were condemned as unfit for human consumption and were destroyed:

Fresh meat	221,2 kg
Meat products	91 kg
Fish (canned)	86 tins
Fruit	19 tins
Vegetables	656 tins
Meat (canned)	1 tin
Dried fruit	4,45 kg
Unlabelled tins	105

Food and Water Sampling

The following food samples were taken for chemical analysis and bacteriological examination:

Chemical analysis

Nature of article	Number of samples	Number satisfactory	Number unsatisfactory
Ice cream	88	85	3
Boerewors	170	160	10
Minced meat	169	167	2

Bacteriological examination

Nature of article	Number of samples	Number satisfactory	Number unsatisfactory
Ice cream and sherbet	221	185	36
Sea foods	66	66	0

Since October 1973, specimens of prawns which have their origin in Mozambique and since August 1980, specimens of prawns which have their origin in Australia and Taiwan have been regularly submitted to the South African Institute for Medical Research, Johannesburg, to be examined for contamination by *Vibrio cholerae*.

So far no specimens have been found to be contaminated with *Vibrio cholerae*.

Fifty-one warnings were issued and two prosecutions were instituted in connection with samples which did not conform to the Foodstuffs, Cosmetics and Disinfectants Act and other regulations dealing with foodstuffs.

Municipal Water Supplies

Samples for bacteriological analysis of public water supplies both at their sources and at different points throughout the reticulation systems, were taken regularly. In addition, the water in all the Council's swimming-baths and paddling-pools was regularly sampled and tested to ensure the efficient functioning of the purification plants.

The stream, which flows into the Rietvlei Dam, is carefully watched to guard against gross pollution of the dam.

The number of samples taken at different points were as follows:

Taps in City	Satisfactory	Unsatisfactory	Total
Various areas in City	94	10	104
Other Municipal Supplies			
(a) Municipal swimming-baths	35	1	36
(b) Municipal paddling-pools	8	0	8
(c) Rooiwal (sewerage works, power station and township)	11	1	12
(d) Erasmia (boreholes)	5	1	6
(e) Rietvlei waterworks	8	4	12
(f) Valhalla boreholes	5	0	5
(g) Fountains	7	0	7
Rand Water Board			
Taken from main supply	12	0	12
Private boreholes (for public use)	18	9	27
Private swimming-baths (to which the public have access)	15	4	19

NATIONAL FRESH PRODUCE MARKET

Due to the increase in volume of the produce handled on the market, it became necessary that a more detailed and intensive inspection of the produce be carried out. To cope with this additional work and to ensure that all consignments are properly inspected and that only sound produce is offered for sale, it became necessary to allocate three full-time Health Inspectors for duty on the market.

Two routine daily inspections of all produce are carried out. The first inspection commences at 06h00 and the second at 10h00.

Additional inspections of any particular consignments, if necessary, are also carried out.

The removal of all seized produce from the market hall is done under the supervision of a Health Inspector.

The following quantities of foodstuffs were condemned and destroyed during the year:

Fruit and vegetables

Banana boxes	1 846
Trays	7 778
Crates	4 007
Pockets	90 372
Boxes	93 815
Sugar bags	36 062
Bundles	21
Punnets	9 988
Cartons	41 618
Plastic bags	7
Watermelons	2 474

Game : Antelope (Number examined) 77 (number condemned 6)

Game birds : Number examined 245 (number condemned 58)

RE-EXAMINATION OF MEAT

Meat which is imported into Pretoria over such long distances as to warrant re-examination on arrival here, was formerly examined at the municipal abattoir. Since control of the abattoir was taken over by the Abattoir Commission this function of re-examination of meat, where necessary, had now devolved upon the City Health Department.

During the year, the following quantities of meat which were brought to the City from South-West Africa, Botswana, Cape Town, Bloemfontein, Kimberley, Durban, Port Elizabeth and Welkom were re-examined.

	Number of carcasses	Number of sides or portions
Beef	8 456	940
Mutton	11 308	
Pork	296	
Veal	529	
Factory meat	308 481,8 kg	
Bovine organs		
Ox tongues	40 663 kg	
Ox offal		
Ox tails		

A total of 170 consignments of meat were re-examined. An amount of R5 764,26 was received for the above-mentioned inspections.

Statistical report of inspections

The following analysis reflects the work performed by the Food Section during the year:

Ice cream depots inspected	21
Nuisances re-inspected	138
Complaints dealt with	60
Complaints in regard of food poisoning investigated	15
Licence applications dealt with	112
Butcher shops inspected	6
Fishmongers - wholesale inspected	5
Bakehouses and confectioners inspected	111
Bakers-, restaurants and tearooms inspected	71
Caterers inspected	36
Mineral water factories inspected	8
Fruit and vegetable store inspected	96
Food factories - miscellaneous inspected	42
Hotels and boarding houses inspected	69
Delivery vehicles inspected	4
Wholesalers in meat and meat products inspected	10
Matters referred to other Departments	11
Inspections at the Produce Market	303
Imported meat inspections	170
Food and water samples taken	962
Saturday inspections of food stalls	124
Total inspections for the year	2 374
General	
Nuisances dealt with	811
Notices served	199
Intimations given	612
Notices complied with	98
Nuisances abated	710

PEST CONTROL SECTION

MOSQUITO CONTROL

The activities of this Section consist of the removal of weeds and grass on the edges of spruits, dams, irrigation furrows, the filling in of dongas in which rainwater could stagnate as well as the treatment of all stagnant water with various mosquito-larvacides. The area is approximately 56 980 hectares in extent. Thirty-two Black labourers under White supervision carry out this important task. As far as is practicable all work is done according to a pre-planned programme and all potential breeding places of mosquitoes are visited and sprayed at least once in eight days.

Ten Black workers are detailed to do the spraying. They transport spraying apparatus and a supply of spray on their bicycles and they move mainly through the veld and along footpaths to reach spruits, furrows, dams and other places where there is usually standing water.

The spraying season was continued on 2 January 1980 and work was maintained until the end of May when it was stopped for 3 months because of the cold weather conditions when mosquito breeding is limited to a minimum.

At the beginning of September spraying was resumed and continued until December. During the 3 months when no spraying is done, these workers join the other Black labourers engaged on the cleaning of spruits, dams, furrows, etc.

During the first half of the year mosquitoes were not a nuisance. After the rainy season started, more complaints about mosquitoes were gradually received, especially from private premises. Intensive control measures were applied and advice was given to private persons regarding mosquito control.

No malaria carrying mosquitoes, *A. gambia* or *A. funestus*, were found within the Pretoria area. Adult *A. maculipennis* and *Aedes aegypti* mosquitoes were found here and there in areas such as Kilner Park, Silverton and East Lynne.

During the December school holiday and the period when construction work comes to a temporary standstill in December, the mosquito nuisance once again reached a zenith. Numerous breeding places were found in unused swimming-baths, fish-ponds, empty tins and old motor tyres on private properties while the residents were away on holiday. As a result control measures even had to be applied on private properties. Considerable mosquito breeding also occurred at uncompleted buildings in basements, lift shafts and excavations. These places also had to be treated while the responsible persons were away on holiday.

During the first five months of the year until May 31 and again as from 1 September to 31 December 28,5 litres larvacide concentrate were used against mosquito larvae. This larvacide is diluted to a concentration of 1 : 600 and was found to be very economical and effective. No oil was used in the process of spraying.

As a result of the use of the abovementioned larvacide it was found that the natural life - such as tadpoles, which were destroyed by DDT compound - had now been restored and largely contributed to the eradication of mosquito larvae. These natural enemies of mosquito larvae contribute considerably to more effective mosquito control.

As more land is required by the Railways Administration near Capital Park, some of the leases with vegetable farmers on agricultural holdings - portions of the farm Eloff Estates No. 192 - are being terminated, and the Administration is taking over all mosquito control work on these holdings.

The spruit passing through the University Experimental Farm as well as eight irrigation dams of vegetable farmers were visited bi-weekly, per agreement, and control measures carried out.

The market gardeners and other organizations concerned gave full co-operation and the work was carried out satisfactorily.

RODENT CONTROL

Intensive control measures are carried out on all municipal properties, inter alia "Munitoria", the power stations at Pretoria West and Rooiwal, at the sewage works Daspoort, Rooiwal and Bavianspoort, at the Rietvlei Water Works, the Fountains Valley and all municipal buildings in the Non-White areas of Saulsville, Atteridgeville, Mamelodi and Laudium as well as at all municipal parks and recreation grounds and the sundry properties which the Council has purchased with a view to future development of the city.

Field work was done on Meintjeskop, Klapperkop and Monumentkoppie. Minor rodent activity was found here. Control measures were carried out and on investigation later on it was found that the said areas were reasonably rodent-free. One hundred and forty five complaints in connection with rodents on municipal properties were investigated during the year, 4 126 inspections were carried out and 5 833 units of bait were set out. 1 745 Dead rodents were found and destroyed.

Complaints about rodents on private premises are mainly investigated by the District Health Inspectors and they give advice to the complainants. There is, however, close co-operation between the District Health Inspectors and the Pest Control Section and reciprocal assistance is given. 676 Complaints were investigated during the year. 1 192 inspections were carried out and the residents of the premises were given the necessary advice and in some instances even active assistance was given. 755 Oral or written warnings were given to persons to take control measures. In general the public gave their wholehearted cooperation but in 8 instances it was necessary to take legal steps against persons who, after repeated warnings, failed to comply with the notices. 202 Rodents were destroyed on private properties. The actual number will, however, exceed this figure since many dead rodents could for obvious reasons not be found.

During the year 71 existing buildings were made rodentproof, while 25 new buildings which comply with the rodent regulations, were erected. 91 Persons or organizations wishing to demolish buildings and to whom a demolition permit had already been granted, made application for the required rodent-free certificate. After inspection of the premises and after the buildings had been found to be rodent-free, the certificates were issued. Where rodents were in fact found, it was required that control measures first be satisfactorily taken prior to demolition commencing.

CONTROL OF COCKROACHES, FLIES, BED-BUGS, FLEAS, FISH-MOTHS, ANTS, CARPET-BEETLES, PAPER MITES, CRICKETS, TICKS, SPIDERS, ETC

As a routine measure, municipal properties were visited and where any signs of certain of the abovementioned insects were found, the necessary control measures were taken and continued until there were no further signs of infestation.

324 Municipal buildings or parts thereof were treated with insecticides during the year. 147 Complaints received from persons on private properties were investigated and advice given. 199 inspections were carried out and 136 oral or written warnings given to persons to take effective control measures.

Laudable cooperation was obtained from the public and no legal steps in this regard were necessary.

BILHARZIA

The Rietvlei Dam was visited quarterly and all spruets, dams and irrigation canals within the urban area were investigated to determine whether Bilharzia-vector snails were present. No Bilharzia-vector snails were found, but a sharp eye is being kept on the situation.

PEST CONTROL IN "MUNITORIA"

A Pest Controller on a full-time basis in this building has succeeded in keeping insect and rodent infestation to a minimum. In addition to routine checks and measures any complaints which were received were investigated immediately and where necessary appropriate remedial measures were taken.

Bait for mice and rats is also continually set out by the Pest Controller at strategic places in the building and watched.

A statistical analysis of the activities of this Section is given in the following tables:

MOSQUITO CONTROL

Complaints dealt with and advice given	145
Inspection of dams cleared of weeds	236
Inspection of dams sprayed	126
Inspection of irrigation-furrows cleared	465
Inspection of furrows sprayed	160
Miscellaneous inspections	134
Insecticidal spraying	1 174
Total inspections for the year	2 440

RODENT CONTROL

Complaints dealt with and advice given	240
Miscellaneous inspections	219
Inspections of municipal premises	4 436
Rodent-clearance inspections	91
Total inspections for the year	4 986

Poison baits set on municipal premises	5 845
Number of baits taken	4 399
Number of rodents destroyed on municipal premises	1 745

SLUM CLEARANCE

Although there is still a considerable increase in the City's population, the Department nevertheless succeeded in limiting undesirable housing conditions, which often arise in a city growing so rapidly, to a minimum.

The establishment of new townships decidedly contributed towards the alleviation of the demand for houses, but in spite thereof there is a need for houses for the middle income group and in particular for persons in the lower income group, especially for those with large families. The high prices at which building sites are offered as well as the already high and ever increasing building costs are disturbing factors with the result that it is not possible to provide in the housing need of these families.

Because of the aforesaid shortage of houses there was a noticeable increase in the number of families sharing houses with other families or residing with them, and others who of necessity had to make use of outbuildings. This state of affairs is mainly due to economic factors which compel families to seek accommodation at rentals they can afford.

House-ownership should, however, not be restricted to the more privileged group of the population. It is, therefore, of importance to be able to state that the Council has for the past years followed a healthy policy by introducing and encouraging house-ownership schemes to the advantage of families in the lower income group. Also in this regard the high building costs and the price of land limit a wider application of this policy.

Less serious slum conditions resulted because of overcrowding, inadequate cooking, washing and ablution facilities and the improper segregation of the sexes and are also mainly attributable to the housing shortage. Notices were served on owners or occupiers where contraventions of the Slums Regulations occurred. There was, however, no reason for concern because most of the notices were complied with. More drastic steps were necessary in only a few exceptional cases.

"City renewal" and the expansion of the City's industrial and commercial area have resulted in poor dwellings on certain sites being demolished to make place for modern elegant buildings.

In certain suburbs where town-planning had been modified, there are still a considerable number of houses now surrounded by commercial and industrial sites. The result is that the peaceful residential atmosphere which previously existed there has now been disturbed and is gradually being replaced by noise which is part of and connected with the industries now established in or still extending to the said areas. This increase in noise in areas still partially used for residential purposes, is certainly one of the most troublesome disturbances for the residents in such a changed vicinity and contributes considerably to the deterioration of the residential area. Active steps should be taken in this regard to resettle such residents in areas where there is a peaceful residential atmosphere.

Pretoria is definitely not a city with a high percentage of slum dwellings but it has, just as any other developing city, its problems in connection with housing and city renewal. It is a transitional stage which cannot be rectified over-night. It is for this reason that no large scale "slum clearance" was undertaken and that a kind of amended form of clearance was undertaken by ensuring that residents of poor residential sites have reasonably suitable accommodation.

Owners of dwellings which need extensive repairs and redecoration but which nevertheless cannot be considered as major slums, are apparently experiencing difficulty in obtaining the necessary funds to repair and redecorate such buildings so as to comply with the requirements of legislation.

Seen in the light of allegations often made, it must again be emphasized that the external appearance of many of the buildings is particularly misleading because they appear dilapidated and neglected. Most of these buildings are, however, in a reasonably habitable condition and can definitely not be regarded as slums. To clear these obsolete buildings in the centre of the city and in the suburbs where they exist, simply amounts to "city renewal", which should definitely not be confused with "slum clearance".

The poor external appearance of buildings is a matter over which this Department can exercise no control.

As a result of action by the Slums Section and also on their own initiative, many owners wished to demolish old buildings and to erect houses, flats or commercial buildings. Applications for demolition permits, were, in fact, submitted, but some of these applications were refused, with the result that the sites could not be developed. The reason for the refusal of such applications by the Department of Community Development and State Auxiliary Services usually to be found in the fact that the occupiers could not obtain other residential accommodation.

Slum premises are usually occupied by poorer families who find it difficult to obtain other suitable housing. This Department, therefore, always takes the individual circumstances into consideration before resorting to more drastic steps. A considerable number of the properties in the various suburbs of the urban area that are regarded as slum dwellings were acquired by the present occupiers under a hire-purchase agreement with one purpose only, namely to provide a form of housing for their families. Most of these purchasers do not have the funds, and are also unable to obtain funds in other ways, to improve the buildings on the sites.

As in the past owners of dwellings regarded as slum dwellings cooperated reasonably well and after action by the Section dealing with slum clearance, some of the dwellings were demolished or converted for business use or repaired to such an extent as to comply with housing requirements.

In addition to inspections of private dwellings, other residential buildings and the investigation of complaints about slum conditions, this Section also reports on properties purchased or expropriated by the Council in connection with the various projects planned by the Council. All applications to demolish dwelling units in terms of the provisions of the Housing Act or to use them for other purposes, are investigated by this Section and the applications together with reports are either submitted to the Department of Community Development and State Auxiliary Services or the Council for consideration.

Detailed statistics in connection with dwellings which may be regarded as slum dwellings and occupied outbuildings in the White residential areas appear on pages 80 and 81.

DISTRIBUTION AND INCIDENCE OF PROPERTIES WHICH MAY BE REGARDED AS MAJOR SLUMS AND OF OCCUPIED OUTBUILDINGS IN WHITE RESIDENTIAL AREAS

A. PROPERTIES WHICH MAY BE REGARDED AS MAJOR SLUMS: (See page 81.)

B. OCCUPIED OUTBUILDINGS

Suburb	Occupied during		Vacated during		Occupied 31 December	
	1979	1980	1979	1980	1979	1980
Hatfield	-	1	-	1	-	-
Eloffsdal	-	2	-	2	-	-
East Lynne	1	3	-	2	1	1
Erasmia	1	1	-	1	1	-
Sunnyside	1	-	1	-	-	-
Capital Park	3	2	2	1	1	1
Mayville	1	2	1	2	-	-
Pretoria North	3	7	-	6	3	1
Rietfontein	1	1	-	-	1	1
Villieria	5	4	-	1	5	3
Wolmer	2	1	2	1	-	-
Wonderboom Agricultural Holdings	-	1	-	1	-	-
Wonderboom South	-	1	-	1	-	-
Silverton	2	-	2	-	-	-
Mountain View	7	1	6	1	1	-
Waverley	-	1	-	1	-	-
Nicomar	1	-	1	-	-	-
Pretoria West	8	3	5	2	3	1
Daspoort	5	3	5	2	-	1
Lynnwood Glen	-	1	-	-	-	1
Booyens	3	-	3	-	-	-
Claremont	4	3	3	2	1	1
Pretoria Gardens	-	1	-	1	-	-
Willow Park	-	1	-	-	-	1
Jan Niemand Park	4	-	4	-	-	-
Danville	3	4	2	4	1	-
Total	55	44	37	32	18	12

During the year thirteen caravans, two tents and an asbestos structure were used for living purposes by families. In most cases it was discontinued after notices were served.

COURT PROCEEDINGS

As in previous years and in accordance with this Department's general policy, we continued to seek the public's cooperation rather than to resort to court proceedings.

The Department was nevertheless compelled, after warning in writing had been served on owners in terms of the Slums Act, 1979, and no satisfactory efforts were made to abate nuisances existing on premises, to submit these cases to the Slum Clearance Court.

A. PROPERTIES WHICH MAY BE REGARDED AS MAJOR SLUMS

Suburb	Repaired		Converted		Demolished		Number of slums cleared		Occupied		Unoccupied		Number of known major slums	
	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980
Arcadia	1	-	-	-	2	-	3	-	-	-	-	-	-	-
Brooklyn	-	-	-	-	-	-	-	-	1	1	-	-	1	1
Booysons	-	-	-	-	-	1	-	1	1	-	-	-	1	-
Derdepoort 326 JR	-	-	-	-	-	1	1	1	-	-	1	-	1	-
East Lynne	1	1	-	-	-	1	1	2	2	-	3	5	5	5
Farsterust Extension 2	-	-	-	-	-	-	-	-	-	-	1	-	1	-
Parktown	-	-	-	-	1	-	1	-	-	-	-	-	-	-
Despatch	-	-	1	-	1	-	2	-	-	-	-	-	-	-
Silverton	-	-	-	-	1	-	1	-	-	-	3	3	3	3
Sunnyside	-	-	-	-	1	-	1	-	1	1	-	-	1	1
Molwer	4	2	-	-	-	5	4	7	20	15	2	4	22	19
Wonderboom Agricultural Holdings	-	-	-	-	-	-	-	-	5	4	3	4	8	8
Gezina	-	-	-	-	2	-	2	-	-	-	-	-	-	-
Mayville	-	-	-	-	1	-	1	-	-	-	-	-	-	-
Pretoria North	-	-	-	-	1	-	1	-	1	1	-	1	1	2
Rietfontein	-	-	-	-	1	-	1	-	1	1	-	-	1	1
Pretoria West	-	-	1	-	1	2	2	2	1	2	2	-	3	2
Goedehoop	-	-	-	-	5	2	5	2	5	5	2	1	7	6
Pretoria Central	-	-	1	-	3	1	4	1	-	-	1	-	1	-
Claremont	-	-	-	-	-	-	-	-	1	1	-	1	1	2
Daspoort	-	-	-	-	1	1	1	1	2	2	-	1	2	3
Mountain View	-	-	-	-	1	-	1	-	-	-	-	-	-	-
Daspoort Estate	-	-	-	-	-	1	-	1	1	2	-	-	1	2
Wonderboom South	1	-	-	-	-	-	1	-	1	1	-	1	1	2
Total	7	3	3	-	22	14	32	17	43	36	18	21	61	57

During the year seven cases were referred to a Slum Clearance Court with the following results:

Four dwellings, comprising four, six, three and four livingrooms, respectively, had to be demolished. At the time of the Court hearing, three of these dwellings were occupied and one was unoccupied.

One case in respect of a dwelling situated in Wolmer, was postponed and the building was later demolished.

One case in respect of a dwelling situated in Pretoria central, was scratched from the roll on condition that the owners immediately apply for a demolition permit which was promptly done and the building was partly demolished by 31 December 1980.

One case in respect of a dwelling situated in Wolmer was withdrawn as a result of satisfactory structural repairs having been carried out.

The Slum Clearance Court also rescinded three previous Slum declarations, after the owners had complied with all the necessary legal requirements.

No court proceedings in terms of the provisions of the local Slums Regulations were instituted during the year.

DEMOLITION AND CONVERSION OF RESIDENTIAL PREMISES

There was an increase in the number of applications received for demolition of premises during the year. As a result of action by this Department the owners of six (6) residential units decided to demolish the improvements on their properties. In most cases, new buildings were subsequently erected.

During the year ninety four residential units as well as the following buildings were demolished:

A hotel and annex comprising 110 livingrooms. A boarding house comprising 40 livingrooms. A block of flats comprising 31 livingrooms. A building (originally a boarding house) comprising 16 livingrooms. A residential building comprising 39 livingrooms.

Seventeen applications were received to demolish dwellings regarded as slum dwellings, or to use them for other purposes. All these applications have been approved by the Department of Community Development and State Auxiliary Services.

Details of applications received for the demolition of dwellings and to utilize premises for business use are reflected in the following table:

Applications referred to the Department of Community Development and State Auxiliary Services:

	Number of dwelling-units	Number of living-rooms involved	Applications approved	Applications refused	Authority pending
Demolitions	152	884	120	5	27
Conversions	31	137	28	1	2
Total	183	1 021	148	6	29

Applications submitted to the Council for consideration:

	Number of dwelling-units (more than 5 livingrooms each)	Number of living-rooms involved	Authority granted	Authority refused	Authority pending
Conversions	4	25	4	0	0

This Department does not have particulars of residential buildings demolished by the Government or the Provincial Administration because they are not subject to the provisions of the Housing Act as regards the obtaining of demolition permits.

Demolition permits are not required for business buildings, but it is insisted upon that certificates be obtained that such buildings are rodent free before demolition may commence.

Analysis of applications received for the demolition of dwellings or the conversion thereof for business use and the reasons given:

A. DEMOLITIONS

Number of applications received (living-units)	Proposed development
1	Old age home
33	Houses
12	Unknown
3	Road construction scheme
21	Business premises and offices
68	Flats
3	Factories and storerooms
1	Bus shed
1	Consulting rooms
8	Parking
1	Workshop
Total 152	

B. CONVERSIONS

Number of applications received (living-units)	Proposed future use
1	Class rooms
2	Outbuildings
1	Crèche
7	Business
22	Offices and storerooms
1	Clinic
1	Consulting rooms
Total 35	

STATISTICS ON SLUMS PREVENTION AND CLEARANCE WORK

Details of work undertaken during the year:

Type of inspection	Number of premises
Private dwellings	48
Occupied outbuildings and re-inspections	120
Demolition of dwelling-units (before and after permits were granted)	622
Conversion of dwelling-units (before and after permits were granted)	47
Complaints investigated	178
Re-inspection of premises	646
Miscellaneous inspections	32
Total	1 700

Details of action taken after the above inspections and investigations, are as follows:

Notices served	
Dwellings regarded as slum dwellings and occupied outbuildings	104
Overcrowding	41
Structural (repairs and renovation)	37
Bathing, wash-up and cooking facilities	5
Total	187
Oral warnings and advice given	425
Letters sent (notifications, extensions, details of work required, etc.)	452
Matters referred to other Departments	229
Interviews	509
Total number of contraventions dealt with	612
Total number of notifications and notices complied with	437

CRÈCHES, NURSERY SCHOOLS, AFTER-SCHOOL CENTRES, OLD PEOPLE'S HOMES AND OTHER INSTITUTIONS

During the year many enquiries were received from persons desirous of establishing places in Pretoria where babies and children of pre-school age could be cared for.

Despite a number of new crèches and nursery schools having come into existence during 1980 the demand for such places of care continues to exceed the number available. As a result many of the existing establishments take in more children than the floor area and facilities permit and constant vigilance is therefore necessary in regard to this aspect of the work.

On the whole, excellent cooperation is received from the various establishments who provide a much needed service to the community and are usually only too willing to raise the standard of care of pre-school children in Pretoria.

Close cooperation is still being maintained with the Department of Health, Welfare and Pensions as well as the Transvaal Education Department with regard to the registration of the various institutions.

The conditions, standards and requirements which have to be complied with, are determined by the said two Departments and this Department. The Standard Health By-laws for Crèches and Crèches-cum-nursery schools for White children published under Administrator's Notice 273 dated 1 March 1972, are applicable in the municipal area of Pretoria.

Crèches, Nursery Schools and After-School Centres:

Altogether 19 crèches, 13 crèches-cum-nursery schools, 53 nursery schools and 21 after-school centres are situated in the municipal area of Pretoria.

The number of children accommodated in the various institutions is as follows:

Type of Institution	Number	Number of children
Crèches-cum-nursery schools	13	1 516
Crèches	19	850
Nursery schools	53	4 192
After-school centres	21	1 615
Total	106	8 173

Homes for the Aged:

There are 36 homes for the aged in the urban area of Pretoria where a total of 2 996 aged people are cared for.

In addition 1 590 aged people are accommodated under group housing in 1 088 residential units where they live independently, but are ensured of special care and community services.

There is still an increasing need of accommodation for both strong as well as physically and/or mentally enfeebled aged people especially because of the fact that the number of aged people are increasing and that a large percentage of them now find themselves in the cities.

All homes for the aged are registered by the Department of Health, Social Welfare and Pensions after the issue of a certificate by this Department that the premises with their service systems and facilities comply with the local health requirements.

Other Institutions:

Control has been exercised over health conditions at institutions such as children's homes, youth centres, centres for retarded and cerebral palsied children, centres for alcoholics, a home for released prisoners and homes for unmarried mothers.

Details of work undertaken during the year:

Type of inspection	Number of premises
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Old age homes:

New premises	5
Re-inspections	67
Complaints investigated	9
Consent-use (applications)	4
Unauthorized premises	0
Conversions (applications)	0
Total	85

Nursery Schools:

New premises	2
Re-inspections	109
Complaints investigated	1
Consent-use (applications)	4
Conversion/Demolition applications	0
Unauthorized premises	4
Total	120

Crèches:

New premises	3
Re-inspections	41
Complaints investigated	8
Consent-use (applications)	0
Unauthorized premises	25
Conversion/Demolition applications	1
Total	78

Nursery schools-cum-crèches:

New premises	8
Re-inspections	57
Consent-use (applications)	0
Complaints investigated	0
Conversion/Demolition applications	3
Unauthorized premises	3
Total	71

After-school centres:

New premises	7
Re-inspections	16
Complaints investigated	0
Unauthorized premises	0
Consent-use (applications)	0
Total	23

Total number of inspections

Details of action taken after the above inspections and investigations, are as follows:

Total number of notifications and notices complied with	146
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NON-WHITE AREAS

The personnel of this Section is as follows:

Black Health Inspector	6
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NON-WHITE TOWNSHIPS

Atteridgeville/Saulsville

Large numbers of this community are employed in the nearby industrial areas. Use is made mainly of the convenient train service for transport. There are three railway stops in this area.

The cooperation in connection with health matters is most satisfactory.

Mamelodi

A large number of the residents of this township work in the central city area and the eastern suburbs, although the majority of them are employed by the large number of industries in the vicinity of the township.

NON-WHITE AREAS

The personnel of this Section is as follows:

Divisional Health Inspectors	(2)
Coloured Health Inspector	(1)
Principal Health Inspector	(2)
Black Health Inspectors	(5)

NON-WHITE TOWNSHIPS

MAMELODI, ATTERIDGEVILLE AND SAULSVILLE

These communities are composed of different ethnic groups. The inhabitants are mainly employed in the near-by industrial areas as well as in the urban areas.

Transport from and to these areas is provided by a convenient train service together with a bus service of which the departure points have proved to be sufficient.

The co-operation of the controlling authority, namely the Administration Board for Central Transvaal, as well as other authorities concerned with health matters, is very satisfactory.

The inhabitants are effecting quite a lot of additions to their dwellings themselves; thus the problems of overcrowding are relieved to some extent.

In these areas all essential services such as water supply, sanitary facilities, rubbish removal, health services, electricity, telephone services, schools and other institutions have been provided.

In Atteridgeville a well-equipped hotel and bar have been erected for the convenience of the inhabitants and these are well patronized by the local residents as well as visitors.

Sports stadiums, community halls, two swimming-baths in each area and a bowling-green in Atteridgeville are available for the inhabitants to practise the said kinds of sport.

All essential types of business have also been provided in these areas to serve the immediate needs of the community.

EERSTERUST

The members of this community, who maintain a very high standard of living, are mainly employed in the city as well as in the local industrial areas. Transport is largely provided by a bus service, which may possibly be improved to some extent, as well as taxis, private vehicles and a train service.

The rising standard of living of the inhabitants has contributed to an accelerated growth in this area.

All essential services, such as water supply, sanitary facilities, rubbish removal services, health services, electricity, telephone services, schools and other institutions, have been provided in this area.

Large extensions on the north side of the area are well advanced and all the essential facilities will be supplied there. Upon completion of these extensions the acute housing need will be alleviated considerably.

Stadiums, a swimming-bath of olympic standard, a bowling-green, tennis courts and community halls for the various sports activities practised by the inhabitants, have been provided.

A convenient well-planned recreation resort is situated in the north-western portion of Earsterust and is made good use of by the inhabitants.

Various and essential types of businesses are also provided in this area, which supply the immediate needs of the community. The dwellings are generally neat and many of them have well-kept gardens.

The community of this area is served by its own Management Committee, which meets monthly to discuss matters concerning the community.

LAUDIUM

This community, which is composed of different religious groups, lives in this popular and progressive township. Some of the grandest dwellings and most progressive businesses in the municipal area have been erected here.

Additional extensions are still in the planning stage and some have already been completed. Claudius, which previously was a White area, has now been incorporated into this area. The layout of erven and the provision of essential facilities have already reached an advanced stage. An area to the north of Laudium, known as the "Dairy farms", is still in the planning stage. When all the extensions have been completed great relief will be effected in respect of the planning need experienced in this area.

A newly erected and well-equipped hospital, not taken into use as yet, has been erected in this area and will serve the needs of the community. A "Technikon" which will be completed soon, and a number of blocks of flats, are under construction.

The high living standard of the inhabitants contributes to an accelerated growth in this area and a number of industries and business complexes have been erected which are well supported by the local residents as well as other inhabitants of the urban area.

Licensed restaurants and a well-equipped hotel and bar have been erected and are well patronized by the local inhabitants and visitors.

All essential services exist in this area, such as water supply, sanitary facilities, rubbish removal, health services, electricity, telephone services, schools and institutions.

Sports fields, community halls and a swimming-bath of Olympic standard have been provided and a bowling-green is under construction.

The beautiful dwellings and neat gardens reflect the progressiveness of this community.

The community is served by its own local Management Committee which meets monthly to discuss matters concerning the community.

ASIAN BAZAAR

The resettlement of the business and the replanning of this area have already reached an advanced stage. This is being undertaken by the Department of Community Development and State Auxiliary Services in collaboration with the City Council of Pretoria, the Provincial Administration and the Committee for the Resettlement and Replanning of the Asian Bazaar.

This area is mainly served by the Asian Community of Pretoria.

Quite a number of new business complexes, operated by the Asian Community, have already been erected by the Department of Community Development and State Auxiliary Services.

STATISTICAL RETURNS FOR ALL NON-WHITE AREAS

A. Summary of inspections made during the year in Non-White areas:

Nuisances dealt with	13 890
Notices complied with	485
Intimations complied with	13 590
Notices served	300
Intimations given	13 590
Re-inspections	15 180
Complaints investigated	360
Licence applications	980
Premises where animals/poultry are kept	100
Butcher shops	850
Fish mongers and poulterers	50
General Dealers (food)	2 395
General Dealers (not food)	480
Restaurants, tea-rooms and eating-houses	2 167
Fresh Produce Dealers	520
Milk Depots and Milk Shops	260
Hawkers' storerooms	580
Fresh produce and ice-cream carts	420
Delivery vehicles (meat, milk, fish, bread)	735
Bioscopes and public halls	150
House inspections	3 798
Hairdressers	160
Wash-houses and laundries	30
Factories and workshops	100
Builders' temporary latrines	70
Occupied outbuildings	250
Visits after hours	15
Black hostels	110
Total	29 760

Matters reported for attention of other Departments:

Choked drains/defective water fittings	180
Unauthorized structures	240
Structural defects to buildings	90
Other matters	40
Total	550

B. The following is a summary of the work done in regard to Pest Control in the Non-White areas:

Rodents:

1. Complaints investigated	200
2. Premises inspected and advice given	545
3. Notices and intimations to use traps or poison	498
4. Notices served requiring premises to be made rodent-free	89
5. Notices served under 3 and 4 above, complied with	320
6. Accumulation of rubbish or lumber likely to harbour rodents, cleaned up or removed	529
7. Number of rodents seen killed or reported killed	220

Mosquitoes:

1. Complaints investigated	20
2. Inspections made	50
3. Notices and intimations given	30
4. Notices served under 3 above, complied with	15
5. Breeding places eliminated	35
6. Advice given re mosquito control	35
7. Type of mosquitoes found	Culex

Flies:

1. Complaints investigated	15
2. Inspections made	30
3. Notices and intimations given	10
4. Notices served under 3 above, complied with	4
5. Breeding places eliminated	10
6. Advice given re fly control	20

C. General information : New townships only:

	Atteridgeville	Mamelodi	Laudium	Eersterust
Population				
1. Residential	81 491	107 404	20 000	20 000
2. Hostel	15 603	15 302	NIL	NIL

Dwelling houses

1. Occupied	10 200	13 846	2 914	2 413
2. Vacant	-	-	-	-
3. Under construction	-	-	150	-

	Atteridgeville	Mamelodi	Laudium	Eersterust
Places of worship	54	60	6	12
Schools	31	45	6	6
Beerhalls	2	5	-	-
Rehabilitation Centre for Retarded Children	-	-	1	-
Bars (liquor)	2	2	2	1
Bottle stores (liquor)	3	4	1	1
Garages	3	3	2	2
Crèches	5	5	1	1
Hostels	1	3	0	0
Administrative blocks	4	2	1	1
Old People's Homes	1	1	-	1
Cinemas	1	1	1	1
Community centres/halls	4	2	5	4
Flats	-	-	750	-
Nurseries	-	1	-	-

D. Building plans

Six-Hundred and Seventy Three building plans for alterations, additions and new buildings in the Non-White areas were examined during the year.

E. Prosecutions

Nature of offence	Total number of prosecutions	Number found guilty	Number found not guilty	Number withdrawn	Number cautioned and discharged	Fines imposed
Dirty conditions on business premises	1 (2)	1 (1)	0 (0)	0 (0)	0 (0)	R50 (0)

F. Licenced premises

	Atteridgeville	Mamelodi	Laudium	Asian Bazaar	Eersterust
Bakers and confectioners	0	0	2	0	0
Billiard saloons	0	0	0	0	1
Butchers	14	14	5	10	4
Coal agencies	5	11	0	0	2
Cobblers	3	4	0	29	1
Cycle dealers	1	3	0	10	6
Dry-cleaning factories and laundries	2	0	2	4	1
Fresh produce dealers	45	50	23	164	22
Fish mongers	0	0	9	19	0
Factories	0	0	13	1	0
General dealers (excluding provisions)	20	24	60	280	15
Hairdressers	3	3	3	20	0
Hawkers/pedlars	35	44	135	30	40
Herbalists	-	3	1	0	0
Milk depots	4	3	2	0	1
Mineral water dealers	23	25	10	26	7
Eating-houses	8	8	0	0	2
Provision dealers	46	45	28	150	30
Theaters	1	1	1	3	1
Tailors/dressmakers	3	3	0	30	0
Undertakers	1	4	0	0	0
Workshops/motor spares	2	8	4	20	2
Restaurants/tea-rooms	16	20	16	70	12
Second-hand dealers	4	9	0	5	2
Ice cream vendors	7	8	7	10	7
Milk shops	12	8	13	30	7
Dry-cleaning receiving depots	9	6	6	19	5
Patent medicine dealers	12	20	15	69	18
General dealer (photographic equipment)	0	1	2	4	0
Plumber	0	1	0	0	0

DAIRY AND VETERINARY CONTROL

Health control of the City's fresh milk supplies is carried out by the Department's Milk Control Section. The objective of the Section is to achieve and maintain quality control over the City's fresh milk supplies, thus ensuring the successful production, presentation and marketing of a wholesome and highly essential food commodity.

Milk, because of its nutritive qualities, is particularly subject to microbiological spoilage, and it may, in addition, serve as a vehicle for pathogenic organisms. To avoid contamination by pathogens and spoilage, it is firstly necessary to ensure that the cow unit is healthy and capable of producing a wholesome product, and secondly to ensure that, once produced, the quality of the product is preserved. To this end the services of both Veterinarians and hygienists are needed in an integrated and coordinated programme.

All activities operate within the framework of specific legislation at Central and Local Governmental level. The Food, Cosmetics and Disinfectants Act, 1972, and the Pretoria Municipal Milk By-laws are of salient importance.

The Milk By-laws provide for the compulsory pasteurization of milk and for the production and distribution of certified milk and cream. Milk supplies were drawn from 333 farm dairies, three of which were certified milk-producer-distributors. The remaining 330 producers consigned their milk in bulk carriers to one or another of the four pasteurization plants. Of the 333 herds 319 were machine milked.

One of these pasteurization plants is owned and operated by the Department of Defence and is situated at Voortrekkerhoogte and therefore does not fall within the municipal area of jurisdiction. The three other pasteurization companies have, by mutual agreement, created three zones of distribution related to their respective factory sites, thus facilitating the greater speed and ease of distribution and a minimising distribution cost. Certified milk distribution is almost exclusively confined to the City's eastern suburbs.

The Dairy Control Board maintained a quality payment scheme based on milk fat and protein content. The price received by producers per kilogram of milk fat, is the same as that being paid by butter factories for the mass of milk fat present in their monthly milk supplies. After payment in respect of milk fat has been brought into account, the remaining amount in the milk-sales fund is divided amongst all producers in proportion to the total protein content of the milk supplies by each during a specific month. The price for milk fat therefore remains constant, whereas the payment for protein fluctuates in proportion to increases or decreases in surplus. The high price offered to producers for protein served as an inducement to pay more attention to the protein content of milk. It is generally accepted that protein is the most valuable and nutritious component of milk. In addition, producers received a bonus payment of 1,25 cents per litre for milk with a resazurin reading of 4,5 or better.

The staff establishment of the Section comprises a Chief Veterinary Officer, a Principal Veterinary Officer, a Divisional Health Inspector, a Supervising Health Inspector, 2 Health Inspectors, and a qualified Laboratory Technologist. This task force is involved in an all-embracing health and hygiene programme, so as to render maximum coverage to all aspects of milk production, handling, transportation, processing, packaging, distribution and sale. This coverage extends to the 330 odd farm dairies - some of which are up to 300 km distant, which entails a great deal of travelling and frequent over-night stays.

1. DETAILS OF LICENCEES AND PERMITHOLDERS DEALT WITH

	New	Transferred	Discontinued	Increase or decrease
Producers	21 (30)	-	48 (27)	-27 (-3)
Producer-distributors	0 (2)	-	0 (0)	0 (0)
Distributors	3 (3)	-	0 (0)	0 (0)
Total	24 (35)	-	48 (27)	-27 (-3)

2. SITUATION OF DAIRY PREMISES

	In municipi- pal area	1-16 km	17-40 km	Within		121-160 km	161-240 km	241-320 km	Total
				41-80 km	81-120 km				
Producers	4 (4)	0 (0)	21 (21)	67 (67)	79 (82)	49 (49)	88 (99)	25 (27)	333 (359)
Producer-distributors	0 (0)	3 (3)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	3 (3)
Distributors	79 (79)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	79 (79)
Total	83 (83)	3 (3)	21 (21)	67 (67)	79 (82)	49 (49)	88 (99)	25 (27)	415 (441)

Most of the farms beyond a 40 km radius are situated and concentrated in an agricultural area east and south-east of the city. This area forms part of the Highveld of the Transvaal and is well known on account of its high average rainfall and intensive crop production.

3. TYPES OF DAIRY PREMISES

I. Milk parlour

- (i) Abreast 20 (22)
- (ii) Tandem side gate 217 (227)
- (iii) Tandem walk-trough 10 (17)
- (iv) Herringbone type 11 (4)
- (v) Roto-type 1 (1)

II. Conventional cowshed with

- (a) Fixed vacuum line system/can/bucket 31 (27)
- (b) Portable bucket type system 1 (1)
- (c) Milk pipeline system 28 (39)
- (d) Hand milking 14 (16)
- Total 333 (359)

III. Producers using refrigerated bulk tanks 333 (359)

4. TRANSPORTATION AND DISTRIBUTION OF MILK

(a) Transportation

Apart from the direct deliveries from producer-distributors to consumers, only bulk consignments were received.

Private contractors are responsible for collecting and delivering all bulk farm milk to the pasteurization installations. Bulk milk road tankers are effectively cleansed and disinfected at the receiving depots after delivery of their contents and contractors are, in addition, required to maintain the tankers in a hygienic condition whether in use or not.

(b) Distribution

The distribution of processed milk, "certified raw milk" and some other processed milk products within the city, is carried out by means of a variety of vehicles. Milk is delivered to consumers in milk cans, capped bottles or single-service plastic or carton containers. Distribution usually take place from the main pasteurization and processing installations to strategically situated milk depots from where further distribution to smaller milk shops and depots in the residential areas is undertaken. Only pasteurized or sterilized milk or milk products (except "certified" raw milk and cream) may be distributed for consumption within the City.

5. AVERAGE DAILY PRODUCTION AND CONSUMPTION OF MILK (IN LITRES)

(a) Production

(i) Producers	210 983 (222 985) litres
(ii) Certified raw milk	2 102 (1 904) litres
Total	213 085 (224 889) litres

(b) Consumption

(i) Pasteurized milk	174 237 (165 298) litres
(ii) Certified raw milk	2 102 (1 904) litres
Total	176 339 (167 202) litres

NOTE

The average daily quantity of milk consumed increased by approximately 9 137 litres as compared with the previous year. The exact daily quantity of milk consumed within the city is, however, difficult to estimate, as the figures also include milk consumed in an adjoining town as well as that in industrial areas situated outside the city's boundaries. Large quantities of locally manufactured milk products such as cultured milk, ice-cream, yoghurt, cottage cheese, skim-milk, etc. are also consumed within the city and sold for consumption further afield.

6. REJECTION OF MILK

A total of approximately 31 310 litres of milk was rejected upon arrival on account of souring. This quantity is less than that for the previous year, when 50 240 litres were rejected for a similar reason. Delay in transportation was the chief cause of souring.

7. PERSONNEL EMPLOYED IN THE DAIRY TRADE (approximate figures)

	Whites	Non-Whites	Total
Producers	347 (371)	956 (1 124)	1 303 (1 495)
Producer-distributors	4 (3)	16 (17)	20 (20)
Distributors	197 (212)	997 (1 065)	1 194 (1 277)
Total	548 (586)	1 969 (2 206)	2 517 (2 792)

8. TYPHOID TESTING OF DAIRY EMPLOYEES

All employees of the producer-distributors (supplying "certified raw milk") were tested, with negative results. Details regarding typhoid-testing of prospective employees in the dairy trade, in general, are given in the section of this report dealing with "Infectious and Other Notifiable Diseases". Milkborne outbreaks due to typhoid have not occurred within the city for the past 30 years or more.

9. INSPECTIONS AND OTHER DUTIES

The staff of the Dairy Section carried out regular inspections of all dairy premises within and outside the city. Other members of the Health Inspectorate also assisted with inspections of milk shops and distributing depots within the city and Non-White townships.

The primary aim of inspections is to ensure that only safe, palatable and wholesome milk and milk products are available to the consumer, as well as to assist, advise and educate producers, producer-distributors, distributors and all persons handling milk and milk products in regard to matters of health and hygiene. The inspections are further aimed at the scientific improvement of the dairy industry as a whole, e.g. advising producers, producer-distributors and distributors in regard to the erection of dairy premises, installation of milking machines, bulk farm tanks, other equipment, etc.

In addition to the above, various members of the staff of this Section assisted with other duties, by:

- (a) Serving on a technical committee appointed by the Council of the South African Bureau of Standards for the purpose of preparing standard specifications for the cleansing and sterilization of dairy equipment.
- (b) Giving practical training and tuition in milk hygiene and control to Veterinary and Health Inspector students.
- (c) Acting as external examiner to Veterinary students in the subject of Veterinary Food Hygiene, as well as to students at the College for Advanced Technical Education.

Particulars of inspections carried out are as follows:

(a) Inspection of farm dairies

(i) Existing premises	1 102 (786)
(ii) New premises	68 (72)
Notices served	231 (182)

Note : The contraventions were mostly due to producers failing to keep their dairy premises and appliances in a hygienic and sanitary condition. Oral and written advice is given in connection with such contraventions.

One producer's milk delivery was temporarily suspended on account of the presence of a thermoresistant inhibitory substance.

(b) Inspection of milk depots and dairies	119 (127)
Notices served	67 (36)

Note : Inspections were mostly of a routine nature, but complaints concerning milk being delivered in dirty containers, milk received in a sour or off-flavoured condition, visible dirt in milk, stacking of crates and milk containers on sidewalks, were also investigated.

(c) Road tankers

The supervision and inspection of bulk milk transporters is a major aspect of milk quality control. The total annual distance covered by these road tankers transporting the milk from the production points to Pretoria is calculated to be approximately 2,5 million km.

The Municipal Milk By-laws lay down minimum structural and hygiene standards for these vehicles, and it is the responsibility of the hauliers to maintain these standards. This maintenance is extremely onerous because of the poor condition of the farm roads, the excessive wear and tear stress these specialized carriers are subjected to and their vulnerability to accidental damage.

Inspection of road tankers

	Satisfactory	Unsatisfactory
(i) Number of inspections		
95 (150)	44 (24)	51 (126)
(ii) Road tanker registration certificate issued	7 (7)	
(iii) Prosecutions of hauliers	2 (2)	

(d) Herd inspections by Veterinarians

The aim of these inspections is mainly to ensure the production of a safe and wholesome milk supply from disease-free herds. The latter are examined for the presence of diseases and conditions which may adversely affect the quality, quantity and safety of the milk. Attention is also directed to compliance with general hygienic requirements by the producer. In addition they are advised on matters such as treatment, prevention and control of animal diseases, parasitic infestations, animal management, erection of dairy premises, the zoonoses, etc. Special advice is given regarding the bacteriological quality and chemical composition of milk.

10. LABORATORY CONTROL OF MILK

The staff of this Section, is responsible for most of the routine laboratory work on milk control. Chemical analysis of milk is, however, performed by the Chemical Laboratory of the City Engineer's Department whilst certain bacteriological examinations are performed by the Institute of Pathology of the University of Pretoria. The Resazurin, Presumptive E. coli, phosphatase and thermoresistant inhibitory substances tests are performed in the Department's own laboratory. The results of all laboratory tests performed during the year are tabulated below.

1. Tests performed by the Department's milk laboratory

(a) Bacteriological analysis

(i) Methylene blue test (2, 4 and 7 hours)

	No. of samples tested	No. of samples satisfactory	No. of samples unsatisfactory
Tankers	3 017 (343)	2 547 (222)	470 (37)
Producers (raw milk)	276 (237)	260 (167)	16 (47)
Pasteurized milk	2 099 (366)	1 850 (364)	249 (0)
Certified raw milk	153 (253)	150 (245)	3 (8)
Total	5 545 (1 199)	4 807 (998)	738 (92)

(ii) Coliform test

	No. of samples tested	No. of samples negative	No. of samples positive
Pasteurized milk	2 123 (1 371)	2 948 (927)	825 (444)

(iii) Thermoresistant Inhibitory Substances

	No. of samples tested	No. of samples negative	No. of samples positive
Producers (raw milk)	360 (442)	347 (421)	13 (21)
Pasteurized milk	1 140 (1 235)	1 111 (1 157)	29 (78)
Road tankers (raw milk)	3 110 (2 230)	2 981 (2 126)	129 (104)
Certified raw milk	183 (61)	181 (59)	2 (2)
Total	4 793 (3 968)	4 620 (3 763)	173 (205)

(b) Chemical analysis

(i) Phosphatase test

	No. of samples satisfactory	No. of samples unsatisfactory
Pasteurized milk	2 690 (2 002)	27 (8)

11. Tests performed by the
(performed under the pro-

vis, Cosmetics and Disinfectants Act 54 of 1972)

(a) Raw milk

(i) Producers

Number of samples	332 (390)
Number of samples	295 (347)
Number of samples	37 (64)

Analysis of unsatisfactory

Deficient in milk fat	28 (43)
Deficient in milk-solids-not-	9 (21)
Adulterated - added water	0 (0)

(ii) Certified raw milk

Number of samples	93 (56)
Number of samples	81 (51)
Number of samples	12 (5)

Analysis of unsatisfactory

Deficient in milk fat	12 (5)
Deficient in milk-solids-not-	0 (0)
Adulterated - added water	0 (0)

(b) Pasteurized milk

Number of samples analysed	154 (383)
Number of samples satisfactory	119 (349)
Number of samples unsatisfactory	35 (45)

Analysis of unsatisfactory samples

Deficient in milk fat	19 (11)
Deficient in milk-solids-not-	16 (34)
Adulterated - added water	0 (0)

111. Bacteriological examinations

Pathology of the University of Pretoria

(a) Raw milk

	No. of samples tested	E. coli				4 and 7 hour methylene blue test	
		No. of samples satisfactory	No. of samples satisfactory	No. of samples unsatisfactory	No. of samples unsatisfactory	No. of samples satisfactory	No. of samples unsatisfactory
(i) Producers	364 (432)	321 (286)	43 (146)	303 (351)	61 (81)		
(ii) Certified raw milk	111 (63)	98 (35)	13 (33)	108 (67)	3 (1)		

(b) Pasteurized milk

	Total bacteria		E. coli		Two hour methylene blue		Coliform organisms	
	No. of samples tested	No. of samples satisfactory	No. of samples satisfactory	No. of samples unsatisfactory	No. of samples satisfactory	No. of samples unsatisfactory	No. of samples satisfactory	No. of samples unsatisfactory
Distributors	144(420)	131 (352)	13 (68)	144 (333)	0 (87)	142 (264)	2 (156)	123 (261) 21 (159)

Note : All producers and distributors, from whose concerns unsatisfactory samples were obtained, were warned.

IV. Serological and other tests

(i) Bovine Brucellosis

All herds supply "certified raw milk" to the city were serologically tested during the year, with negative results.

(ii) Bovine Tuberculosis (Tuberculin test)

The three "certified raw milk" herds were tested during the year with negative results.

In addition 247 (163) other herds, particulars of which are tabulated below, were tested:

Number of herds tested	247 (163)
Number of animals tested	39 465 (30 281)
Number of animals negative	39 321 (30 238)
Number of animals positive	92 (2)
Number of animals suspicious	52 (41)

Most of the positive and suspect reactors were disposed of to abattoirs for slaughter, whilst the rest were allowed to be kept under strict quarantine regulations imposed by the Department of Veterinary Field Services. All tests performed on the herds were carried out by the State or through private veterinary practitioners on behalf of the State.

All herds belonging to producers delivering milk to Pretoria are expected to be T.B. tested and T.B. free by the end of 1981.

(iii) Mastitis tests

Mastitis still remains one of the major problems in dairy herds, both from an economic and public health point of view. Producers of fresh milk are regularly advised about preventive and control measures, as well as the dangers of the indiscriminate use of the various anti-bacterial remedies which are so readily available to the farming community. The Department purchased an electronic counter during the year and a routine somatic cell count is conducted on all milk samples.

	Number of samples tested	Number of samples satisfactory	Number of samples unsatisfactory
Producers	345 (275)	334 (254)	11 (21)
"Certified" producers	156 (31)	149 (31)	7 (0)
Total	501 (306)	483 (285)	18 (21)

CONTRIBUTION BY THE CITY ENGINEER

SEWAGE WORKS

DASPOORT

Screening and detritus

956 m³ of screenings and 198 m³ of detritus were removed from the sewage during the year. The screenings were incinerated by using sludge gas in a specially designed incinerator. Detritus was ploughed under daily into land made available for the purpose. This represents an average of 4,1 m³ of screenings and 0,8 m³ of detritus per 100 Ml of sewage.

Animal incineration

The total number of animals incinerated during the year was:

Dogs	3 370
Cats	1 579
Sheep and others	981
Total	5 930

Digested sludge

During the year a total of 23 410 m³ of dried sludge was removed from the drying beds and dewatered with the centrifuges. A small amount of digested sludge was irrigated on lands for drying and disposal. (See Table IV.)

Effluent to Pretoria West Power Station

Approximately 7 500 Ml of sand-filtered and chlorinated effluent was pumped to the Power Station during the year, representing a daily average of 20,40 Ml. Approximately 200 Ml was pumped to the Zoological Gardens during the year. (See Table I.)

Incineration of condemned food

The diesel-fired incinerator was adapted to enable it to make use of digestorgas as fuel. During the year 107 tons of condemned food and 4 tons of paper were destroyed.

ROOIWAL

Screenings and detritus : West Works

229 m³ of screenings and 258 m³ of detritus were removed from the sewage during the year. This represents an average of 1,6 m³ of screenings and 1,8 m³ of detritus per 100 Ml of sewage.

East Works

110 m³ of screenings and 111 m³ of sand and grit were removed from the sewage during the year. This represents an average of 0,6 m³ of screenings and 0,6 m³ of detritus per 100 Ml of sewage.

Digested sludge

All digested sludge at both works was pumped to a sludge storage dam and irrigated on prepared lands for drying and ploughing into the ground. Some 70 ha of land is in use. (See Table IV.)

Effluent to Rooiwal Power Station

Approximately 7 300 Ml of chlorinated maturation-pond effluent gravitated from the two separate series of ponds to the Power Station for use as cooling water. (Analytical results in Table V.)

Poplar plantation

During the year a total of 6 000 Ml of purified sewage effluent was pumped from the two works to the irrigation dam. This figure is a rough estimate due to meter failure.

Sale of timber during the year realised approximately R12 500.

BAVIAANSPOORT

Screenings and detritus

561 m³ of screenings and 89 m³ of detritus were removed from the sewage during the year. This represents an average of 14,0 m³ of screenings and 2,2 m³ of detritus per 100 Ml of sewage.

Digested sludge

All digested sludge is pumped directly from the digesters to a holding dam, from where it is irrigated and ploughed into suitable lands. (See Table IV.)

Activated sludge surplus from the new and altered works is pumped to an aerated holding dam for disposal to land by irrigation and ploughing.

The old 6 Ml/day plant was not in commission during most of the year because the new 16 Ml/day plant was found to be quite adequate to treat the effluent.

Final effluent

This is discharged into the Pienaars River after chlorination. (See Table III.)

Sewage, river and dam analysis

Representative samples of sewage, sludge, river water and dam water were analysed regularly during the year, some of them bacteriologically as well as chemically, to maintain efficient operation of the sewage treatment units and to observe any pollution or changing conditions in the sewers and dams. Analytical results are set out in Tables I, II and III.

Industrial effluent

The effluent from industries constitute approximately 10 % of the total volume of effluent to the three sewage plants, but it is responsible for approximately 25 % of the load of effluent to be treated.

Materials which cannot be oxidised by the normal purification processes are discharged regularly by industry, and control by the laboratory has to be constantly maintained.

Smaller industries and garages represent about 80 % of the total number of industries and are sampled eight times per year; during the year some 1 530 samples were analysed, which accounted for an income of about R500 000.

Industries in the Rosslyn complex contribute to the Rooiwal sewage network, and their sewage is intensively sampled for strength. The income from this area is approximately R120 000 per annum.

Staff

The staff of the chemical laboratory was as follows on 1 January 1980 :

+ N.P. Nicolle	B. Sc., M.S.A. Chem. Inst., F. Inst. W.P.C.	Chief Chemist
E.A. Gerke	B. Sc., A.M. Inst. W.P.C.	Assistant Chief Chemist
+ N.C. Thirion	B. Sc., M.B.A., Affil. Inst. W.P.C.	Assistant Chief Chemist
S.D. Roets	B. Sc., Honns., A.M. Inst. W.P.C.	Chemist
L. Bradenhann	B. Sc.	Chemist
J.H. Marais	B. Sc.	Chemist
A.J. van der Walt	B. Sc.	Chemist
F.V. Weele	Nat. Dip. (Analytical Chem.)	Chem. Assistant
H. Kollmann	Nat. Dip. (Analytical Chem.)	Chem. Assistant
M.J.L. van der Meer	Nat. Dip. (Analytical Chem.)	Chem. Assistant
I.D. Böhmer	Nat. Dip. (Med. Tech.)	Chem. Assistant
E.D. Erasmus	Nat. Dip. (Analytical Chem.)	Chem. Assistant
C.M. Fouché	Nat. Dip. (Analytical Chem.)	Chem. Assistant

+The above two persons are appointed as Analysts in terms of Section 12(1) of the Food, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972).

AVERAGE RESULTS OF ANALYSIS OF SETTLED SEWAGE AND FINAL EFFLUENT FROM THE DIFFERENT UNITS AT DASPOURT

TABLE I

UNITS	1-4	5 & 6	7 & 8	9	10	11	SAND FILTERS
Results in mg/l							
Average daily flow (megalitres)	9,4	-	-	-	-	-	20,4
Loading (filters) g PV/m ² /day	-	19,9	-	-	-	-	-
Loading (aeration unit)	-	-	-	0,17	0,19	0,23	-
kg BOD/kg MLSS per day	-	5,9	-	-	-	-	-
Potassium permanganate value (4 hours)	29,1	32,8	27,4	10,7	7,5	7,4	6,0
Chemical oxygen demand	371	422	358	439	68	67	43
5-day biochemical oxygen demand	195	216	177	26,0	13,9	10,7	6,6
Ammonia as N	29,1	28,9	27,9	1,3	3,0	3,3	4,2
Dissolved solids (105 °C)	-	453	-	421	435	438	443
Suspended solids	-	13,4	-	74,1	27,3	27,0	6,8
Anionic detergents	3,4	0,7	3,9	0,5	0,6	0,6	0,5
Phosphate as P	8,7	7,9	8,5	4,2	4,7	4,6	4,8
Nitrate as N	-	10,3	-	8,6	8,0	9,6	9,7
Faecal E. Coli per 100 ml	-	1 365 000	-	629 000	330 000	286 000	65

TABLE 11
AVERAGE RESULTS OF ANALYSIS OF SETTLED SEWAGE AND FINAL EFFLUENT FROM THE DIFFERENT UNITS AT ROOIHVAL, 1979

UNITS	1	2	3	4	5	6	7
	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation	3,6 m bio- filters, Dort- mund single fil- tation
Results in mg/litre							
Average daily flow (megalitres/day)	12,1	11,7	11,9	9,9	11,2	11,4	9,2
Loading O.A. g/m ² /day	23,9	23,2	22,6	20,6	23,4	26,0	20,6
Potassium value (4 hours)	30,7	30,9	29,7	7,1	6,7	35,6	35,7
5-day biochemical oxygen demand	169	150	170	11,3	8,2	151	150
Chemical oxygen demand	411	370	389	54	52	370	361
Ammonia as N	24,4	25,0	25,1	2,5	2,4	33,1	33,3
Nitrate as N	7,4	7,3	9,7	15,4	17,6	15,8	16,4
Dissolved solids (105 °C)	553	557	584	655	732	702	693
Suspended solids	21,0	18,5	18,1	19,1	16,1	19,1	17,7
Anionic detergents	7,1	7,4	7,2	0,8	0,7	7,4	7,1
Phosphate as P	8,1	7,5	7,9	7,6	7,5	7,3	7,3
Faecal C. Coli per 100 ml	1 257 000	1 257 000	1 257 000	1 156 000	1 156 000	1 156 000	1 156 000

TABLE III

AVERAGE RESULTS OF ANALYSIS OF SETTLED SEWAGE AND FINAL EFFLUENT FROM THE UNITS AT BAVIAANSPPOORT, 1979

Results in mg/l	Old plant		New plant	
	Surface aeration activated sludge		Activated sludge Bardenpho	
Average daily flow (megalitres per day)	8,7		-	
Aeration kg BOD/kg MLSS per day	-		0,06	
Permanganate value (4 hours)	38,9		9,1	
5-day Biochemical oxygen demand	249		11,4	
Chemical oxygen demand	506		77	
Ammonia as N	55,5		6,4	
Nitrate as N	-		9,1	
Dissolved solids (105°C)	-		519	
Suspended solids	165		29,0	
Anionic detergents	7,4		0,9	
Phosphate as P	14,5		10,9	
Faecal E. Coli per 100 ml	-		915 000	

TABEL IV

AVERAGE RESULTS OF SLUDGE ANALYSIS, 1980

	DASPOORT		ROOIWAL WEST		ROOIWAL EAST		BAVIAANSPOORT	
	Raw sludge	Digested sludge	Raw sludge	Digested sludge	Raw sludge	Digested sludge	Raw sludge	Digested sludge
Daily average volume pumped (litres)	5,60	7,24	5,88	7,09	5,99	7,12	5,00	6,80
pH	5,70	6,90	4,63	4,99	5,05	4,23	7,50	8,90
% Ash of solids	22,0	34,6	22,1	38,9	20,6	37,0	27,1	36,8
Volatile acids mg/l	1 161	263	1 083	128	1 205	169	2 216	1 845
Ammonia as N mg/l	156	728	163	677	229	716	256	870
Alkalinity as CaCO ₃ mg/l	846	3 422	673	2 755	813	2 871	1 254	3 351
Antic detergent (% mass/mass dry weight)	1,20	1,67	1,05	1,93	1,14	1,75	1,7	2,1
Zinc as Zn mg/l	42,2	116	106	84,5	113	127	78,4	96,5
Chromium as Cr mg/l	5,31	9,02	29,4	40,1	192	356	3,90	4,89
Nickel as Ni mg/l	1,11	2,22	2,45	4,00	2,44	2,31	2,94	3,59
Copper as Cu mg/l	26,3	51,7	29,6	39,3	32,5	38,9	4,87	5,82

TABLE V

AVERAGE RESULTS FOR THE ROOTIAL MATURATION PONDS, 1979

Results in mg/l where applicable

	Humus tank effluent	North Pond	South Pond
Dissolved solids (105°C)	565	541	543
Suspended solids	19.2	5.9	4.2
Chlorides as Cl	88	83	84
pH	7.52	7.55	7.59
Ammonia as N	6.6	5.5	5.6
Nitrite as N	0.29	0.21	0.16
Nitrate as N	8.1	4.4	4.9
Permanganate value (4 hours)	9.3	6.3	6.1
5-day Biochemical oxygen demand	12.4	9.3	8.3
Chemical oxygen demand	72	50	46
Phosphate as P	7.9	8.2	8.2
Anionic detergents	1.0	0.7	0.7
Faecal E. Coli per 100 ml	1 257 000	20 479	12 875

TABLE VI

SEWAGE FLOW

The monthly sewage flow and rainfall figures were as follows:

1980	DASPOORT		ROOIWAL WEST		ROOIWAL EAST		BAVIAANSPOORT	
	Daily average flow Megalitres	Rainfall mm	Daily average flow Megalitres	Rainfall mm	Daily average flow Megalitres	Rainfall mm	Daily average flow Megalitres	Rainfall mm
January	75,57	235,4	44,29	139,4	56,94	13,27	185,5	
February	75,53	102,8	44,83	109,0	61,61	16,41	144,4	
March	69,96	47,0	39,83	17,7	46,40	11,80	68,5	
April	63,62	1,5	41,41	3,0	35,20	9,37	3,6	
May	57,29	0,2	39,54	0,6	40,81	9,18	0,2	
June	46,12	0,0	42,51	0,0	47,51	9,52	0,0	
July	54,25	0,0	37,89	0,0	44,98	8,96	0,0	
August	63,41	0,0	33,26	0,0	40,90	9,27	0,0	
September	65,81	54,0	35,26	54,5	40,47	10,05	62,4	
October	59,48	15,9	36,96	15,5	38,65	9,78	19,8	
November	67,85	211,0	42,13	169,1	52,36	12,28	202,3	
December	69,56	85,9	36,71	60,1	44,40	12,48	81,9	
Year	64,04	753,7	39,55	568,9	45,85	11,03	768,6	

In comparison with the flow figures of 1979, there was a decrease in flow of 1,12 Megalitres per day at Daspoort and of 0,47 Megalitres per day at Baviaanspoort whilst there was an increase of 14,08 Megalitres per day at Rooiwal.

NURSING STAFF (continue)

STAFF ACTIVITIES DURING THE YEAR 1980

MEDICAL PERSONNEL

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	No. of posts abolished during the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Medical Officer of Health	1	1	0	0	1	1	
Deputy Medical Officer of Health	1	1	2	0	3	3	
Assistant Medical Officer of Health	2	2	0	2	0	0	
Chief Medical Officer	0	0	3	0	3	3	
Medical Officer/Senior/ Principal	11	8	0	3	8	7	
Medical Officer(mornings only)	3	3	0	0	3	3	
Temporary Clinical Assis- tant	2	0	0	0	2	0	

Although the amendment to the salary structure, which made provision for Medical Officers/Senior Medical Officers to progress to Principal Medical Officers on the recommendation of the Medical Officer of Health, resulted in an improvement, the salary structure of medical staff in the Council's service still compares unfavourably with that of other organizations.

A start was made during the past year on the erection of a Day Hospital in Mamelodi, which will probably be completed during 1981. As soon as it is commissioned, it should alleviate the pressure on doctors in Mamelodi. (Elsewhere in this report you will find more particulars about the out-patient service being rendered in Mamelodi.) Because of vacancies this Department still has to avail itself of the services of doctors who assist on a session basis.

In addition to their normal duties, the doctors are also responsible for medical examinations after hours of members of the local Civil Defence Corps.

VETERINARY OFFICERS

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created dur- ing the year	Establishment as at 31 Dec. 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Principal Veterinary Officer	1	1	0	1	1	
Senior Veterinary Officer	1	1	0	1	1	

Car/Van Driver

Caretaker (Female)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

Caretaker (Male)

AIR POLLUTION CONTROL STAFF

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No of posts created du- ring the year	Establishment as at 31 Dec. 1980	No of posts filled on 31 Dec. 1980	Remarks
Chief Officer (Air Pollution Control)	1	1	0	1	1	
Senior Inspector (Air Pollution)	1	1	0	1	1	
Inspector (Air Pollution)	4	4	0	4	4	
Assistant (Air Pollution) (Black)	2	1	0	1	1	(one post was abolished)

NOISE ABATEMENT STAFF

Control Officer (Noise Abatement)	1	1	0	1	1	
Inspector (Noise Abatement)	2	2	2	2	2	

HEALTH INSPECTORS

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Chief Health Inspector	1	1	0	1	1	
Assistant Chief Health Inspec- tor	2	2	0	2	2	
Divisional Health Inspector	8	8	0	8	8	
Supervising Health Inspector	8	8	0	8	8	
Health Inspector	28	19	0	28	17	
Health Inspector (Coloured)	2	1	0	2	1	
Senior Health Inspector (Black)	2	2	0	2	2	
Health Inspector (Black)	8	5	0	8	5	

Very serious problems are still being experienced in connection with the recruiting and retaining of Health Inspectors, with the result that it becomes more difficult to supervise effectively and more and more time has to be devoted to complaints instead of the carrying out of routine inspections. Licensing alone places a very heavy burden on the inspectorate. While effective supervision of the manufacture and handling of food provided to the public, is one of the corner-stones of preventive community health service, the publishing under Government Notice R2795 of 14 December 1979 of the regulations on the handling of food, in which provision is made for the preparation in private dwellings of food to be sold to the public, was an unhappy event, because a city like Pretoria simply does not have the personnel for effective supervision in this regard also.

NURSING STAFF

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Chief Health Visitor	1	1	0	1	1	
Supervising Health Visitor	6	6	0	6	6	
Health Visitor/Senior	27	27	0	27	27	
Clinic Sister	11	11	0	11	11	
Part-time Health Visitor (mornings only)	1	1	0	1	1	
Part-time Clinic Sister (mornings only)	1	1	0	1	1	
Health Visitor (Asian)	1	1	0	1	1	

NURSING STAFF (continues)

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Health Visitor (Coloured)	1	1	0	1	1	
Nurse (Asian)	4	4	0	4	4	
Nurse (Coloured)	6	6	0	6	6	
Senior Health Visitor (Black)	3	3	0	3	3	
Health Visitor (Black)	9	9	0	9	9	
Nurse (Black)	36	36	0	36	36	
Nurse/Midwife (Black)	5	5	0	5	5	
Midwife (Black)	9	9	0	9	9	
Nursing Assistant (Black)	5	5	0	5	5	

ADMINISTRATIVE STAFF

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Senior Assistant	1	1	0	1	1	
Administrative Control Officer	0	0	1	1	1	
Principal Administrative Officer	1	1	0	1	1	
Senior Administrative Officer	1	1	0	1	1	
Administrative Officer	3	2	0	3	2	
Senior Woman Assistant	1	1	0	1	1	
Senior Typist	1	1	0	1	1	
Personal Assistant	1	1	0	1	1	
Typist	4	4	0	4	4	

LABORATORY ASSISTANT

	Establishment as at 1 Jan. 1980	No. of posts filled on 1 Jan. 1980	No. of posts created du- ring the year	Establishment as at 31 Dec. 1980	No. of posts filled on 31 Dec. 1980	Remarks
Laboratory Assistant	1	1	0	1	1	

PEST CONTROLLERS

Senior Pest Controller	1	1	0	1	1	
Pest Controller	6	5	0	6	6	
General Labourer (Black)	32	28	0	32	28	

CLINIC ORDERLIES, CLINIC CLERKS AND ASSISTANTS (X-RAY SERVICES) (BLACK)

Clinic Orderly (Black)	4	2	0	4	2	
Senior Clinic Clerk (Black)	1	1	0	1	1	
Clinic Clerk (Black)	9	8	0	9	9	
Assistant (X-ray services)(Black)	3	3	0	3	3	

WAGE STAFF

Car/Van Driver	1	1	0	1	1	
Caretaker (Female)	1	1	0	1	1	
Watchman (6 day week)	3	3	0	3	3	
Caretaker (7 day week)	4	4	0	4	4	
Labourer at public toilet facilities (Black)	17	15	9	26	18	
Labourer (Black)	21	20	0	21	20	

STAFF OF THE PUBLIC HEALTH DEPARTMENT AS AT 31 DECEMBER 1980

J.P.A. VENTER, M.B., Ch.B., D.P.H., D.I.H.	Medical Officer of Health
J.F. VAN DER MERWE, B. Comm., M.B., Ch.B., D.P.H., D.I.H.	Deputy Medical Officer of Health
J.P. MYNHARDT, M.B., Ch.B., D.P.H., D.I.H.	Deputy Medical Officer of Health
C.E. VILJOEN, M.B., Ch.B.	Deputy Medical Officer of Health
A.A.E. DE KLERK, M.B., Ch.B.	Chief Medical Officer
F.C.A. SMITH, B.Sc., M.B., Ch.B., D.P.H., D.I.H.	Chief Medical Officer
C. GEFFEN, M.B., Ch.B.	Chief Medical Officer
R.D. GAULDIE, M.B., Ch.B.	Medical Officer/Senior/Principal
M.E.B. LAWRENCE, M.B., Ch.B.	Medical Officer/Senior/Principal
J.F. DE VILLIERS, M.B., Ch.B.	Medical Officer/Senior/Principal
H. DE JONGH VAN ARKEL, M.B., Ch.B.	Medical Officer/Senior/Principal
M.M. MCGREGOR, L.M. RCP, L.M. RCS (Irel)	Medical Officer/Senior/Principal
Z. MOOMAL, M.B., Ch.B.	Medical Officer/Senior/Principal
J.L. MAAGA, M.B., Ch.B.	Medical Officer/Senior/Principal
E.F. COETZER, M.B., Ch.B., D.P.H.	Part-time Medical Officer, Nursery Schools and Crèches
R.A. DE V. VERMEULEN, M.B., Ch.B.	Part-time Medical Officer, Clinics
M.E. HORN, M.B., Ch.B.	Part-time Medical Officer, Family Planning

VETERINARY SURGEONS

S.V. O'BRIEN, B.V. Sc.(Hon.), D.V.P.H.	Chief Veterinary Officer
J.D. PRINSLOO, B.V. Sc.	Veterinary Officer/Senior/Principal

AIR POLLUTION CONTROL

A.C.P. DREYER, Pr. Eng. BSc Eng., Hons. B.A., M.B.A.	Chief Officer (Air Pollution Control)
B. DIEPERING	Senior Inspector (Air Pollution)
M.C. KUKKUK	Inspector (Air Pollution)
J.W.G. VAN ROOYEN	Inspector (Air Pollution)
C.J. VAN HEERDEN	Inspector (Air Pollution)
N.P. ERASMUS	Inspector (Air Pollution)

NOISE ABATEMENT

J.J.J. DE BEER, Nat. Teachers Dipl., Nat. Dipl. for Technicians	Control Officer (Noise Abatement)
J.A. SMALL	Inspector (Noise Abatement)
T.P.E. COETZEE	Inspector (Noise Abatement)

HEALTH INSPECTORIAL STAFF

M.J.C. RAUTENBACH, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.	Chief Health Inspector
S.J. GOUWS, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.	Assistant Chief Health Inspector
D.S. VAN COLLER, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.	Assistant Chief Health Inspector

DIVISIONAL HEALTH INSPECTORS

J.P. V.D. LAAN COETZEE, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education
 D.W. DE VILLIERS, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education
 Q.E. MARNEWICK, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education
 J.G. MARNEWICK, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.
 C.J. SMITH, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.,
 G.S. BRIDGENS, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Fact. Insp.
 H.A. VISAGIE, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education,
 V. LOGAN, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education,

SUPERVISING HEALTH INSPECTORS

A.D. HODGKINSON, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education,
 H.G. DIEDRICKS, Nat. Dipl., for Health Inspectors, Nat. Dipl. in Health Education, Cert. Trop. Hyg.
 C.J.H. ESTERHUYSE, Certs. R.S.H., Trop. Hyg., Meat and Other Foods, Nat. Dipl. in Health Education
 M. DE WET, Nat. Dipl. for Health Inspectors, Cert. Trop. Hyg., Nat. Dipl. in Health Education
 J. REUTER, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education
 C.S. ROOS, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education
 J.H. VON WELL, Certs. R.S.H., Meat and Other Foods, Trop. Hyg., Nat. Dipl. in Health Education, M. Inst. P.H.
 H.P. BOTHA, Nat. Dipl. for Health Inspectors, Nat. Dipl. in Health Education, Cert. Trop. Hyg.

HEALTH INSPECTORS/SENIOR/PRINCIPAL

G.C. OOSTHUIZEN, Nat. Dipl. in Public Health
 C.J. HUGO, Nat. Dipl. for Health Inspectors
 D.B. DE MEILLON, Certt. R.S.H., Meat and Other Foods
 D.H. VOSLOO, Nat. Dipl. for Health Inspectors
 H.S. VENTER, Nat. Dipl. for Health Inspectors, Nat. Dipl. in Health Education, Cert. Trop. Hyg.
 F. VAN DER WESTHUIZEN, Nat. Dipl. for Health Inspectors
 C.F. ERASMUS, Nat. Dipl. in Public Health
 H.B. PIETERS, Nat. Dipl. for Health Inspectors, Nat. Dipl. in Health Education
 C.G. VAN BLERK, Nat. Dipl. for Health Inspectors

G.H. KOTZE, Nat. Dipl. for Health Inspectors
 D.A. OLIVIER, Nat. Dipl. for Health Inspectors, Cert. Trop. Hyg., Nat. Dipl. in Health Education
 A.J. STAPEL, Nat. Dipl. in Public Health
 N.K. STRYDOM, Nat. Dipl. for Health Inspectors
 M.N. BEUKES, Nat. Dipl. for Health Inspectors
 C.T. MEYER, Nat. Dipl. for Health Inspectors
 I. VAN DER WALT, Nat. Dipl. for Health Inspectors
 F.K. VERDOORN, Certs. R.S.H., Meat and Other Foods, Trop. Hyg.

NON-WHITE HEALTH INSPECTORS

Coloured Health Inspector:

R.T. MOSES, Nat. Dipl. for Health Inspectors

Senior Black Health Inspectors:

S.T. MAPUTLA, Certs. R.S.H., Trop. Hyg.

T.G. MABITSI, Cert. R.S.H.

Black Health Inspectors:

N.M. SELE, Nat. Dipl. for Health Inspectors

M.J. CHIDI, Cert. R.S.H.

J.T. LION, Nat. Dipl. for Health Inspectors

I.Z. MAGAGULA, Nat. Dipl. for Health Inspectors

M.B. RADEBE, Nat. Dipl. for Health Inspectors

ADMINISTRATIVE STAFF

Senior Assistant:

R.I. BOTHA

Administrative Control Officer:

Z.A. BOTHA

Principal Administrative Officer:

C. TRENT

Senior Administrative Officer:

Vacant

Administrative Officers:

MRS. L. DE KLERK

MRS. A. BOCHLING

Senior Radiological Technician:

D.C.P. DE VOS

Radiological Technicians:

C.F.G. Diedericks

A.J.C. KOCH

F.J. STEYN

J.L. GEEL

Senior Typist:

MRS. M. SCHOMANN

Typists:

MRS. R.J. SALZWEDEL

MRS. C.C. VAN VUUREN

MRS. C.J.W. LOMBAARD

MISS. A.J. GROBLER

MRS. V. NEL

Senior Woman Assistant:

MRS. M.S. FAASEN

Women Assistants:

MRS. M.E. DE WIT

MRS. H.S. BEZUIDENHOUT

MISS. L.A. KLATZKIN

MRS. A. BEKKER

LABORATORY ASSISTANT

MISS. M. DU PREEZ

PEST CONTROLLERS

Senior Pest Controller:

A.L. NEL

PEST CONTROLLERS:

L.L.R. MARSBURG, L.J. VAN DER SCHYFF, J.J. ELS, J.A. LOTRIET, G.C. RYNNERS, H.P. HOLTZHAUSEN together with 32 Non-Whites

NURSING STAFF

P.M. McGEER, Certs. S.A. Nursing Council (Gen. & Midwife.), R.S.H., Health Visitor and School Nurse, Mothercraft, Nat. Dip. in Health Education Chief Health Visitor

SUPERVISING HEALTH VISITORS

M.S. MINNAAR, (White areas), Certs. S.A. Nursing Council (Gen. & Midwife.), R.S.H., Health Visitor and School Nurse, Mothercraft

- D.G. MORGAN, (Non-White areas), Certs. S.A. Nursing Council (Gen. & Midwife), Mothercraft, R.S.H., Health Visitor and School Nurse, Nat. Dipl. in Health Education
- I.N. VAN DYK, (Non-White areas), Certs. S.A. Nursing Council (Gen. & Midwife.), R.S.H., Health Visitor and School Nurse
- J.G. VAN WYNGAARD (Tuberculosis), Certs. S.A. Nursing Council (Gen. & Midwife.), R.S.H., Health Visitor and School Nurse
- J.E. VAN DEVENTER (Family Planning), Certs. S.A. Nursing Council (Gen. & Midwife.), R.S.H., Health Visitor and School Nurse, Ward Admin.
- S.B.M. CHANNON, (Training), Certs. S.A. Nursing Council (Gen. & Midwife), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education

WHITE HEALTH VISITORS/SENIOR

- A.M. VAN ZYL, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- M. VISSER, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- J.R. LUYT, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- M.G.A. STOLS, Certs. S.A. Nursing Council (Gen. & Midwif.) Dipl. Community Health Nursing
- E. BASSET, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- M.J. LOUW, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing
- S.M.J. LOMBARD, Certs. S.A. Nursing Council (Gen. & Midwif.), Health Visitor and School Nurse, Mothercraft
- D.C. GILBERT, Certs. S.A. Nursing Council (Gen. & Midwif.), Health Visitor and School Nurse
- C.C. STEYN, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Health Education
- C.M. VAN ZYL, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- M. MARAIS, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- M.M. LOUW, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- M.C. ALLISON, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- L.L. DE VILLIERS, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- H.C.E.M. STEYN, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- D.R. MÜLLER, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
- F. WESTFALL, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- M.A. COETZEE, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- D.J. MONTEIRO, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
- B.M. LIEBENBERG, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- F.O. DE VETTEN, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing, Nat. Dipl. in Health Education
- A.E.C. ESTERHUYSEN, Certs. S.A. Nursing Council (Gen. & Midwif. & Psychiatry), Nat. Dipl. in Public Health Nursing
- E.H. GREYLING, Certs. S.A. Nursing Council (Gen. & Midwif.), + Psyg., Dipl. Community Health Nursing
- M. VENTER, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing
- C. VAN STRAATEN, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing
- S.J. POTGIETER, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing
- S.R. BURGER, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing

PART-TIME HEALTH VISITOR (NURSERY SCHOOL & CRèches)

- V. DE VILLIERS, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse

WHITE CLINIC SISTERS

C.H. VAN NIEKERK, Certs. S.A. Nursing Council (Gen. & Midwif.)
 C.G.M. V.D. GRIJP, Certs. S.A. Nursing Council (Gen. & Midwif.)
 S. DU PREEZ, Certs. S.A. Nursing Council (Gen. & Midwif.)
 M.J.C. ADENDORFF, Certs. S.A. Nursing Council (Gen. & Midwif.)
 A.M.B. HIDE, Certs. S.A. Nursing Council (Gen. & Midwif.)
 F. BOSANQUET, Certs. S.A. Nursing Council (Gen. & Midwif.)
 E.J. STRYDOM, Certs. S.A. Nursing Council (Gen. & Midwif.)
 M.S. OPPERMAN, Certs. S.A. Nursing Council (Gen. & Midwif.)
 M.J.H. BUITENDAG, Certs. S.A. Nursing Council (Gen. & Midwif.)
 L.D. SCHEEPERS, Certs. S.A. Nursing Council (Gen. & Midwif. & Psychiatry)
 E.M. GOOSEN, Certs. S.A. Nursing Council (Gen. & Midwif.)

PART-TIME WHITE CLINIC SISTER

G.E. CARSTENS, Cert. S.A. Nursing Council (Gen.)

NON-WHITE SENIOR HEALTH VISITORS

H. SESOKO, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 S. MOFOLO, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 J.M. SELEPE, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse, Mothercraft

NON-WHITE HEALTH VISITORS

K. MOUNT, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 A. MOHAMED, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing
 S. HUMA, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 M.W. LEEUW, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 F. MATHAPO, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 F.E. SIBIYA, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 E.J.M. SHIHLANE, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 M.T. MASOKA, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 V.T. KHOSA, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 J.R. MTOMBENI, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
 L.P. MOELETSI, Certs. S.A. Nursing Council (Gen. & Midwif.), Nat. Dipl. in Public Health Nursing

NON-WHITE NURSES

- F. MANAMELA, Certs. S.A. Nursing Council (Midwif. & Aux. Nursing)
- F. MAPHALLA, Cert. S.A. Nursing Council (Gen.)
- D. CHIBA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- S. NAIDOO, Certs. S.A. Nursing Council (Gen. & Midwif.), Health Visitor
- L.G. MEJE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- I.M. PUOANE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- R.M. MASIPA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.N. LEDIGA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- C. MAKURUNTSI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- S.N. SHIBAMBO, Cert. S.A. Nursing Council (Gen.)
- M. MATOME, Certs. S.A. Nursing Council (Gen. & Midwif.)
- P.I. MAPLE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- N.M. POOPEDI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E.V. PULE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E.K. PHETO, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E. MOOLASE, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
- M.H. MAMOOPA, Certs. S.A. Nursing Council (Gen. & Midwif.), R.S.H., Health Visitor and School Nurse
- C.H.L. PITSE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.M. MOTLOI, Cert. S.A. Nursing Council (Gen.)
- G.B. LIMBANE, Cert. S.A. Nursing Council (Gen.)
- H. RATLHAGANE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- R.H. MODIRI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- L.N. MOROLO, Certs. S.A. Nursing Council (Gen. & Midwif.)
- A.R. KUTUMELA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- D.M. KHATRI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.M. MOHIDEEN, Certs. S.A. Nursing Council (Gen. & Midwif.) Dipl. Community Health Nursing
- Y.L. COGLIN, Certs. S.A. Nursing Council (Gen. & Midwif.)
- S. MAMEREGANE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.J. MATSEI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.F. MALEKA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E.E.M. MOILA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E.S. VERMEULEN, Certs. S.A. Nursing Council (Gen. & Midwif.)
- Z. DEZAI, Certs. S.A. Nursing Council (Gen. & Midwif.)
- J.M. BUTHANE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.L. MASHILO, Certs. S.A. Nursing Council (Gen. & Midwif.)
- S.G. RAMBOA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- C.M. MONANYANE, Certs. S.A. Nursing Council (Gen. & Midwif.)

- Y.M. KOLA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- J.J. PAULSEN, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.M. MAKGALEMELE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- L.H. MARUPING, Certs. S.A. Nursing Council (Gen. & Midwif.)
- E.N. NGQAKA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- V.N. MALELE, Certs. S.A. Nursing Council (Gen. & Midwif.), Health Visitor
- T.V. KGANANE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.M. MAHLANGU, Certs. S.A. Nursing Council (Gen. & Midwif.)
- F.N. MADISENG, Certs. S.A. Nursing Council (Gen. & Midwif.)
- P. MAMITSE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- J.M. KGOPE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- B.N. MOKONE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- T.P. MMUTLE, Certs. S.A. Nursing Council (Gen. & Midwif.)
- M.E. VILAKAZI, Certs. S.A. Nursing Council (Gen. & Midwif.)

NON-WHITE MIDWIVES

- N.E. SEMA, Certs. S.A. Nursing Council (Gen. & Midwif.), Dipl. Community Health Nursing
- G.E. MAKGOLO, Cert. S.A. Nursing Council (Midwif.)
- E. DAU, Cert. S.A. Nursing Council (Midwif.)
- R.E. BALOYI, Cert. S.A. Nursing Council (Midwif.)
- M.C. MOROE, Cert. S.A. Nursing Council (Midwif.)
- V. MONARE, Certs. S.A. Nursing Council (Midwif.)
- M.M. BOKABA, Certs. S.A. Nursing Council (Gen. & Midwif.)
- V.M. MASINGI, Cert. S.A. Nursing Council (Midwif.)
- M.T. THEMBO, Certs. S.A. Nursing Council (Midwif. & Gen.)

NON-WHITE NURSING ASSISTANTS

- M.P. RAMASEHLA, Cert. S.A. Nursing Council (Enrolled Nursing Assistant)
- A.J. LETSOALO, Certs. S.A. Nursing Council (Midwif. & Aux Nursing)
- Z.P. NTULI, Cert. S.A. Nursing Council (Enrolled Nursing Assistant)
- M.R. MOKOME, Cert. S.A. Nursing Council (Aux. Nursing)
- M.E. MASHANGOANE, Cert. S.A. Nursing Council (Aux. Nursing)

NON-WHITE CLINIC ORDERLIES

H. SATHEKGE

C.M. PHAGO

NON-WHITE CLINIC CLERKS

B.R. MANYUOLA, Senior Clinic Clerk

J. DIBAKWANE

S.S. MATSEKE

P.E. MATLAKALA (Female)

R.S. MASHAO (Female)

N.R. MAKOE (Female)

F.W. MASILO (Female)

H.A.W. MATLAISANE

M.W. MABATSOA

R.K. NGWENYA (Female)

BLACK ASSISTANT (AIR POLLUTION CONTROL)

M.A. MALUADI

NON-WHITE X-RAY ASSISTANTS

S. RAMOSHABA

F.S. MTIMKULU

P.M. MOLEBALOA

PUBLIC CONVENIENCE ATTENDANTS

SEVEN WHITES

EIGHTEEN NON-WHITES

CARETAKER

MRS C.P. DE KLERK

CAR/VAN DRIVER

P.S. LUIS

REGISTERED BIRTHS (ALL RACES) FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 1

	WHITE				BLACK				ASIAN				COLOURED			
	Legitimate		Illegitimate		Legitimate		Illegitimate		Legitimate		Illegitimate		Legitimate		Illegitimate	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
January	234	220	13	20	132		329		12	19	1	0	16	8	5	6
February	242	215	21	7	201		288		15	12	0	1	9	9	7	4
March	322	283	18	12	273		311		13	16	0	0	10	16	5	8
April	251	260	7	10	240		219		15	16	0	0	11	10	9	5
May	221	235	13	20	145		363		11	13	0	0	9	11	4	9
June	296	281	22	15	297		272		17	13	0	0	9	10	11	6
July	246	208	10	15	280		260		12	13	1	1	15	5	6	2
August	229	220	17	14	261		315		10	15	0	1	9	9	4	5
September	305	290	14	12	295		332		16	12	0	0	11	15	4	3
October	261	249	16	7	256		297		14	13	0	0	6	13	4	5
November	228	242	9	12	222		292		9	10	0	1	7	12	1	8
December	247	222	20	17	478		136		12	16	3	1	7	10	2	4
TOTAL	3082	2925	180	161	3080		3414		156	168	5	5	119	128	62	65

STILLBIRTHS (LOCAL RESIDENTS)

BIRTHS TO NON-RESIDENTS

	WHITE				NON-WHITE				WHITE				NON-WHITE			
	M		F		M		F		M		F		M		F	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
January	1	2	1	8	1	1	1	8	60	57	87	88	60	57	87	88
February	1	1	0	1	1	0	1	1	63	84	90	93	63	84	90	93
March	1	1	4	0	1	4	0	0	91	78	98	93	91	78	98	93
April	1	2	4	4	1	2	4	4	80	63	97	86	80	63	97	86
May	2	0	2	1	2	0	2	1	61	60	107	91	61	60	107	91
June	1	2	3	1	1	2	3	1	67	80	102	102	67	80	102	102
July	2	1	3	6	2	1	3	6	63	73	96	96	63	73	96	96
August	1	0	2	0	1	0	2	0	62	52	107	109	62	52	107	109
September	1	1	9	5	1	1	9	5	78	92	114	114	78	92	114	114
October	1	1	12	7	1	1	12	7	67	67	88	109	67	67	88	109
November	2	1	4	5	2	1	4	5	61	66	99	114	61	66	99	114
December	0	1	7	7	0	1	7	7	69	69	125	126	69	69	125	126
TOTAL	14	13	51	45					822	841	1210	1221	822	841	1210	1221

BLACK	Total																							
	Under 24 hours		1 week and up to under 1 month		1 month and up to under 3 months		3 months and up to under 6 months		6 months and up to under 12 months		Total infant-tile mortality		1 year and up to under 2 years		2 years and up to under 3 years		3 years and up to under 4 years		4 years and up to under 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		
Peritonitis	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Other disorders of liver	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1		
Gastro-intestinal haemorrhage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0		
Other disorders of prostate	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Anencephalus and similar anomalies	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Other congenital anomalies of nervous system	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Other congenital anomalies of heart	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Other unspecified congenital anomalies	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1		
Newborn affected by complications of placenta	1	1	5	4	0	0	0	0	0	0	6	5	0	0	0	0	0	0	0	0	6	5		
Newborn affected by other complications of delivery	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1		
Premature	4	9	14	16	3	8	0	0	0	0	21	33	0	0	0	0	0	0	0	0	21	33		
Birth trauma	0	1	1	2	0	0	0	1	0	0	0	1	4	0	0	0	0	0	0	0	1	4		
Intra-uterine hypoxia and birth asphyxia	1	2	0	1	0	0	0	0	0	0	1	3	0	0	0	0	0	0	0	0	1	3		
Respiratory distress syndrome	4	3	10	3	0	0	0	0	0	0	14	6	0	0	0	0	0	0	0	0	14	6		
Other respiratory conditions of newborn	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	1		
Fetal and neonatal haemorrhage	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	1		
Other perinatal jaundice	0	1	0	1	0	0	0	1	0	0	0	3	0	0	0	0	0	0	0	0	3	0		
Ill-defined conditions originating in perinatal period	0	0	0	1	0	0	0	2	0	1	0	1	4	0	0	1	0	0	0	0	2	4		
Other non-specific abnormal findings	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
Sudden death, cause unknown	0	0	1	4	4	2	10	9	12	10	11	38	36	7	10	3	3	1	0	0	2	49		
Accident caused by unspecified fire	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0		
Ingestion of food causing obstruction of respiratory tract or suffocation	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0		
TOTAL	13	19	51	42	22	20	27	33	32	26	26	34	171	174	37	30	9	9	3	2	0	5	220	

TABLE NO. 5

DEATHS OF PERSONS FIVE YEARS OF AGE AND OVER WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 31 DECEMBER 1980

WHITE	5-9 years		10-14 years		15-19 years		20-24 years		25-29 years		30-39 years		40-49 years		50-59 years		60-69 years		70-79 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	0	0	1	0	1	0	0	0	0	0	1	0	2	2	0	0	1	5	1	2	2	1	2	12	9	
Neoplasms	0	1	0	0	1	0	1	1	0	0	0	5	2	7	18	28	32	51	34	34	31	15	24	142	143	
Endocrine, nutritional and metabolic diseases	2	1	1	0	1	0	1	1	1	1	1	0	4	2	2	2	3	7	5	4	7	1	3	21	27	
Diseases of blood and blood forming organs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	1		
Diseases of nervous system and sense organs	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	2	2	1	1	0	1	5	6	
Diseases of circulatory system	0	0	1	0	1	2	2	1	2	1	2	1	29	4	36	17	94	60	146	112	151	155	91	190	553	542
Diseases of respiratory system	0	0	1	1	0	1	2	1	1	1	1	3	1	5	5	20	11	44	28	71	46	46	92	193	187	
Diseases of digestive system	0	0	0	0	0	1	0	0	1	1	1	5	2	6	8	16	3	9	5	8	7	3	5	48	32	
Mental disorders	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0	8	8	10	5	10	15	3	28	32	58	
Congenital anomalies	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	
Accidents, poisonings and violence	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	
Symptoms and ill-defined conditions	1	2	4	1	18	5	28	1	21	4	19	5	20	12	19	2	15	7	11	3	1	5	157	47		
Diseases of the musculoskeletal system and connective tissue	0	0	0	0	0	0	0	0	2	1	6	1	11	4	22	5	28	13	23	19	15	17	107	60		
Endocrine, Nutritional and Metabolic diseases and immunity disorders	0	0	0	0	1	0	0	1	0	0	2	0	2	1	3	3	2	3	3	6	2	6	15	20		
TOTAL	4	5	8	2	23	9	33	6	28	11	72	21	91	67	213	130	320	215	318	293	178	373	1288	1132		

TOTAL

1132

DEATHS OF PERSONS FIVE YEARS OF AGE AND OVER WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 6

BLACK	5-9		10-14		15-19		20-29		30-39		40-49		50-59		60-69		70 and over		Total	
	years		years		years		years		years		years		years		years		years			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Infectious and parasitic diseases	2	1	5	0	1	0	4	4	9	2	9	3	7	1	12	4	2	2	51	17
Neoplasms	0	1	0	1	0	2	3	2	7	6	15	8	19	14	23	10	11	8	78	52
Endocrine, nutritional and metabolic diseases	0	1	0	0	0	0	0	1	2	0	4	2	3	5	6	13	3	9	18	31
Diseases of blood and blood forming organs	0	1	0	0	0	1	0	0	1	0	1	1	0	0	1	0	0	0	3	3
Diseases of nervous system and sense organs	0	0	2	1	2	0	3	2	2	0	1	1	11	1	2	1	0	0	23	6
Diseases of circulatory system	0	2	2	3	0	5	4	5	5	7	27	11	31	30	62	18	18	34	149	115
Diseases of respiratory system	0	1	0	0	1	0	3	2	6	2	13	2	27	5	18	11	17	18	85	41
Diseases of digestive system	1	0	0	0	0	1	3	2	5	4	9	1	10	3	10	6	4	6	42	23
Diseases of the genito-urinary system	0	0	0	0	1	0	2	1	2	1	5	4	3	0	3	3	2	3	18	12
Diseases of the musculoskeletal system and connective system	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0
Complications of pregnancy, childbirth and the puerperium	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Accidents, poisonings and violence	1	1	0	0	2	1	19	3	13	2	3	1	4	2	3	1	2	0	47	11
Symptoms and ill-defined conditions	0	5	2	4	5	2	22	9	19	7	43	22	56	29	62	34	66	66	275	178
Congenital anomalies	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Certain conditions originating in the perinatal period	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
TOTAL	6	13	11	9	12	12	63	33	72	31	130	56	171	90	202	101	125	146	792	491

DEATHS OF PERSONS FIVE YEARS OF AGE AND OVER WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 7

COLOURED	5-9		10-14		15-19		20-24		25-29		30-39		40-49		50-59		60-69		70-79		Over 80		Total		
	years		years		years		years		years		years		years		years		years		years		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	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2	1
Neoplasms	0	0	0	1	0	0	0	0	0	0	0	0	0	1	2	0	2	2	2	1	0	0	0	6	5
Diseases of the nervous system and sense organs	0	0	0	0	0	1	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
Diseases of circulatory system	0	0	0	0	0	0	0	0	1	0	0	0	2	0	5	3	2	2	5	8	2	3	17	16	
Diseases of respiratory system	0	0	0	0	0	0	0	0	0	1	1	1	1	0	2	0	0	0	2	0	1	1	7	3	
Diseases of digestive system	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	1	0	1	0	0	0	4	1	
Diseases of the genito-urinary system	0	0	0	0	1	0	0	0	0	0	0	1	0	0	3	0	0	0	0	0	0	0	4	1	
Symptoms and ill-defined conditions	0	0	0	0	0	0	1	0	0	0	1	0	0	1	2	0	0	0	0	0	1	1	5	2	
Accidents, poisonings and violence	0	0	0	0	0	0	0	0	4	0	0	2	2	1	2	1	1	0	0	0	0	0	9	4	
TOTAL	0	0	0	1	2	1	1	0	7	2	2	4	5	4	17	4	6	5	11	9	4	5	55	35	

DEATHS OF PERSONS FIVE YEARS OF AGE AND OVER WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 8

ASIAN	5-9		10-14		15-19		20-24		25-29		30-39		40-49		50-59		60-69		70-79		Over 80		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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Neoplasms	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	2	0
Endocrine, nutritional and metabolic diseases	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	1	1	1
Diseases of circulatory system	0	0	0	0	0	0	0	0	0	0	1	0	1	1	2	0	3	0	1	0	1	0	9	1
Diseases of respiratory system	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	1	0	0	1	3	2
Diseases of digestive system	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0
Diseases of the genito-urinary system	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Symptoms and ill-defined conditions	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	0
Accidents, poisonings and violence	2	0	0	0	1	0	2	0	1	0	2	0	0	0	2	0	0	1	0	0	0	0	10	1
TOTAL	3	0	0	0	1	0	2	0	2	0	5	0	2	3	4	0	6	2	2	0	1	1	28	6

TABLE NO. 9

INFANTILE MORTALITY : WHITE : CAUSE OF DEATH AND MORTALITY RATES FOR THE YEAR ENDED 31 DECEMBER 1980

	Atolec-tasis		Malnu-trition		Infec-tious dis-eases		Diarr-hoeal dis-eases		Bronchitis and pneu-monia		Con-genital causes		Other causes		Prenatal-tunity		Injury at birth		Total deaths		Total births		Mortality rates per 1 000 live births		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	
Central area	1	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	1	4	1	272	235	14,70	4,26	9,86
North-western Suburbs	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	1	1	2	2	192	169	10,42	11,83	11,08
North-eastern Suburbs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	161	154	6,21	6,49	6,34
Western root	0	0	0	0	0	0	1	0	0	0	1	0	1	2	1	2	2	2	6	6	260	254	23,07	23,62	23,35
Central root	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	1	0	2	1	4	491	406	2,04	9,85	5,58
Eastern root	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	1	1	4	1	162	177	24,69	5,65	14,75
Western Suburbs	0	0	0	0	0	0	0	0	1	0	0	0	3	1	2	2	2	0	8	4	386	375	20,73	10,67	15,77
Eastern Suburbs	0	0	0	0	0	0	0	0	1	0	0	0	3	4	1	1	5	3	10	8	1057	1025	9,46	7,80	8,65
Southern Suburbs	0	0	0	0	0	0	0	0	1	0	0	1	1	0	0	0	0	2	2	3	281	291	7,11	10,31	8,74
TOTAL	M 1	F 0	0	0	0	0	1	1	4	2	1	1	12	8	5	13	13	38	3262	3086	11,65	9,72	10,71		

NOTIFICATION OF NOTIFIABLE DISEASES : LOCAL CASES : ALL RACES : FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 10

	0-1 year		1-4 years		5-9 years		10-19 years		20-39 years		40 years and over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
WHITE														
Broncho-carcinoma	0	0	0	0	0	0	0	0	0	0	43	12	43	12
Typhoid fever	0	0	0	0	0	0	1	0	1	1	0	0	2	1
Diphtheria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Meningococcal meningitis	1	0	1	2	0	0	3	0	0	0	0	0	5	2
Polio-myelitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Infective hepatitis	0	0	1	2	2	2	7	7	5	1	2	1	17	21
Encephalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Erysipelas	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ophthalmia neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Typhus fever (Murine)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Insecticidal poisoning	0	0	0	0	0	0	0	0	1	1	0	0	1	1
Measles	4	4	20	16	8	15	0	3	1	0	0	0	33	38
TOTAL	5	4	22	20	10	17	11	10	8	11	45	13	101	75
NON-WHITE														
Broncho-carcinoma	0	0	0	0	0	0	0	0	0	0	8	2	8	2
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Typhoid fever	1	0	0	0	1	1	2	2	0	3	0	2	4	8
Diphtheria	1	0	0	0	0	1	0	0	0	0	0	0	1	1
Meningococcal meningitis	0	0	0	1	0	0	0	1	0	0	0	0	0	2
Polio-myelitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Infective hepatitis	0	0	0	0	0	0	2	1	0	0	0	0	2	1
Encephalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	1	0	1	0
Ophthalmia neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Erysipelas	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperal sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Typhus fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lead poisoning	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Measles	13	9	30	25	10	19	4	7	0	0	0	0	57	60
TOTAL	15	9	30	26	11	21	8	11	0	3	9	4	73	74

NOTIFICATION OF DISEASES : IMPORTED CASES : ALL RACES : FOR THE YEAR ENDED 31 DECEMBER 1980

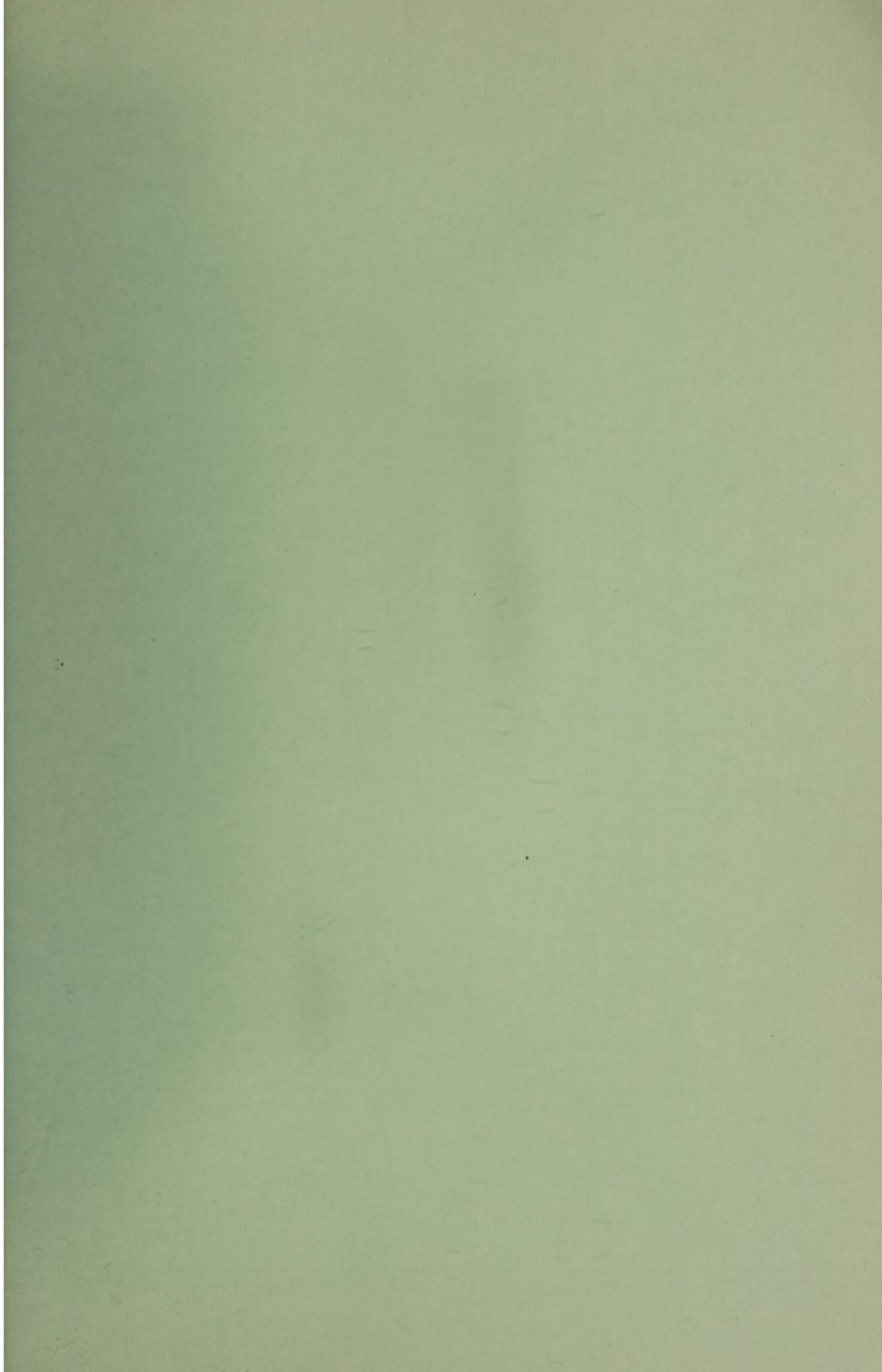
TABLE NO. 11

	0-1 year		1-4 years		5-9 years		10-19 years		20-39 years		40 years and over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
WHITE														
Typhoid fever	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Encephalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	1	0	1	0	1	0	3	0
Infective hepatitis	0	0	0	0	0	0	0	1	3	0	0	0	3	1
Meningococcal meningitis	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Measles	0	0	0	1	3	1	0	0	0	0	0	0	3	2
Typhus fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	0	0	1	3	1	3	1	4	0	1	0	11	3
NON-WHITE														
Diphtheria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Typhoid fever	0	0	0	0	0	0	3	2	2	1	1	4	6	7
Malaria	0	0	0	0	0	0	0	0	1	0	0	0	1	0
Polio myelitis	0	0	0	0	1	0	0	0	0	0	0	0	1	0
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Infective hepatitis	0	0	1	0	0	0	0	0	0	0	0	0	1	0
Measles	0	0	0	1	1	1	0	0	0	0	0	0	1	2
TOTAL	0	0	1	1	2	1	3	2	3	1	1	4	10	9

INCIDENCE OF NOTIFIABLE DISEASES FOR THE YEAR ENDED 31 DECEMBER 1980

TABLE NO. 12

			typhoid fever	Malaria	Diphtheria	typhus fever	Infective hepatitis	Polio-myelitis	Measles	Non-innocuous meningitis	Tuberculosis	Leprosy	Erysipelas	Puerperal sepsis	Insecticide poisoning	Broncho-carcinoma
January	White	Resident	0	0	0	0	3	0	10	0	12	0	0	0	0	0
		Imported	0	2	0	0	1	0	0	0	0	0	0	0	0	0
	Non-White	Resident	1	0	0	0	0	0	5	0	106	0	0	0	0	0
		Imported	3	0	0	0	0	0	0	0	4	0	0	0	0	0
February	White	Resident	0	0	0	0	4	0	3	0	4	0	0	0	0	6
		Imported	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-White	Resident	4	0	1	0	0	0	0	0	109	0	0	0	0	0
		Imported	0	0	0	0	0	0	0	0	6	0	0	0	0	0
March	White	Resident	0	0	0	0	3	0	4	1	10	0	0	0	0	4
		Imported	0	0	0	0	0	0	2	0	2	0	0	0	0	0
	Non-White	Resident	0	0	0	0	0	0	1	0	109	0	0	0	0	2
		Imported	0	1	0	0	0	0	0	0	5	0	0	0	0	0
April	White	Resident	0	0	0	0	0	0	3	0	6	0	0	0	0	1
		Imported	0	0	0	0	1	0	1	0	1	0	0	0	0	0
	Non-White	Resident	0	0	0	0	3	0	2	0	78	0	0	0	0	0
		Imported	1	0	0	0	0	1	0	0	7	0	0	0	0	0
May	White	Resident	2	0	0	0	7	0	1	2	8	0	0	0	2	4
		Imported	1	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-White	Resident	1	0	0	0	0	0	8	0	120	0	0	0	0	0
		Imported	0	0	0	0	0	0	0	0	8	0	0	0	0	0
June	White	Resident	0	0	0	0	4	0	3	0	3	0	0	0	0	9
		Imported	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-White	Resident	0	0	0	0	0	0	6	0	84	0	0	0	0	0
		Imported	0	0	0	0	1	0	1	0	3	0	0	0	0	0
July	White	Resident	0	0	0	0	1	0	3	1	5	0	0	0	0	5
		Imported	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-White	Resident	4	0	0	0	0	0	10	1	94	0	0	0	0	0
		Imported	0	0	0	0	0	0	0	0	4	0	0	0	0	0
August	White	Resident	0	0	0	0	5	0	6	0	5	0	0	0	0	6
		Imported	0	0	0	0	1	0	0	0	0	0	0	0	0	0
	Non-White	Resident	0	0	0	0	0	0	29	0	81	0	0	0	0	4
		Imported	0	0	0	0	0	0	1	0	7	0	0	0	0	0
September	White	Resident	0	0	0	0	6	0	15	2	3	0	0	0	0	7
		Imported	0	0	0	0	1	0	0	0	0	0	0	0	0	0
	Non-White	Resident	0	0	0	0	0	0	31	1	114	0	0	0	0	2
		Imported	0	0	0	0	0	0	0	0	4	0	0	0	0	0
October	White	Resident	0	0	0	0	2	0	12	0	9	0	0	0	0	3
		Imported	0	0	0	0	0	0	1	0	1	0	0	0	0	0
	Non-White	Resident	0	0	1	0	0	0	14	0	99	0	0	0	0	1
		Imported	5	1	0	0	0	0	0	0	7	0	0	0	0	0
November	White	Resident	0	0	0	0	0	0	8	1	5	0	0	0	0	6
		Imported	0	0	0	0	0	0	1	0	0	0	0	0	0	0
	Non-White	Resident	1	0	0	0	0	0	6	0	100	0	0	0	0	0
		Imported	3	0	0	0	0	0	0	0	5	0	0	0	0	0
December	White	Resident	1	0	0	0	3	0	3	0	7	0	0	0	0	4
		Imported	0	1	0	0	0	0	0	0	1	0	0	0	0	0
	Non-White	Resident	1	0	0	0	0	0	5	0	95	0	0	0	0	1
		Imported	1	0	0	0	0	0	1	0	3	0	0	0	0	0



CITY COUNCIL OF PRETORIA



*With the Compliments
of the
Medical Officer of Health*

P.O. BOX 234
PRETORIA

PRETORIA
234 BOX

STADSRAAD VAN PRETORIA



*Met Komplimente
van die
Stadsgesondheidhoof*

POSBUS 234
PRETORIA

P.O. BOX 234
PRETORIA

INHOUDSOPGAVE

Bladsy

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STADSRAAD VAN PRETORIA

Bladsy

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3	Kantoor van die Landbouers Tweede
4	Kantoor van die Landbouers Derde
5	Kantoor van die Landbouers Vierde
6	Kantoor van die Landbouers Vyfde
7	Kantoor van die Landbouers Sesde
8	Kantoor van die Landbouers Sewende
9	Kantoor van die Landbouers Aftende
10	Kantoor van die Landbouers Negende
11	Kantoor van die Landbouers Tiende
12	Kantoor van die Landbouers Elfde
13	Kantoor van die Landbouers Twaalfde
14	Kantoor van die Landbouers Dertigste
15	Kantoor van die Landbouers Vier-en-twintigste
16	Kantoor van die Landbouers Dertienste
17	Kantoor van die Landbouers Twaalfde
18	Kantoor van die Landbouers Elfde
19	Kantoor van die Landbouers Tienste
20	Kantoor van die Landbouers Negende
21	Kantoor van die Landbouers Aftende
22	Kantoor van die Landbouers Sewende
23	Kantoor van die Landbouers Sesde
24	Kantoor van die Landbouers Vyfde
25	Kantoor van die Landbouers Vierde
26	Kantoor van die Landbouers Derde
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99	Kantoor van die Landbouers Tweede
100	Kantoor van die Landbouers Eerste

INLEIDINGSBRIEF

Die Direkteur-generaal : Departement van Gesondheid, en Welsyn
 Privaatsak X63
 PRETORIA
 0001

SY EDELAGBARE DIE BURGEMEESTER EN
 LEDE VAN DIE STADSRAAD VAN PRETORIA

Meneer

JAARVERSLAG, 1980

Ek het die genoë om ingevolge artikel 23(b) van die Wet op Gesondheid die sewe-en-sewentigste jaarverslag van die Stad Pretoria aan u voor te lê.

Gedurende die laaste deel van 1980 het cholera in 'n Swart tuisland in Oos-Transvaal uitgebreek en daarna tot teen die grense van Pretoria versprei. Alhoewel daar 'n paar "ingevoerde" gevalle onder die Swart bevolking van Pretoria voorgekom het, hou cholera, wat deur water versprei word, geen bedreiging vir stede soos Pretoria, waar gesuiwerde water voorsien word en daar 'n doeltreffende rioolstelsel bestaan, in nie.

Tuberkulose bly nog steeds die grootste volksgesondheidsprobleem in die gemeenskap en die styging in die getal aangemelde gevalle kan na my mening toegeskryf word aan 'n meer intensiewe veldtog om gevalle op te spoor. Die probleem wat tuberkulose betref, is dat gevalle wat nou aangemeld word, die siekte moontlik tien of selfs twintig jaar of langer gelede opgedoen het en dat sekere organismes in letsels wat oënskynlik genees het, dormant gebly het.

Daar word wat geboortes onder die Swart bevolking betref, slegs van die syfers van geboortes wat ingevolge artikel 165 van die Ordonnansie op Plaaslike Bestuur, nr 17 van 1939, by die Gesondheidsafdeling aangemeld is, gebruik gemaak. Die rede hiervoor is dat slegs 'n klein gedeelte van die getal geboortes van Swart babas geregistreer word en dat daar moeilikhede ondervind is met die permanente woonadres van moeders van Swart babas van wie die geboorte wel geregistreer is.

Ek wil graag van die geleentheid gebruik maak om u, meneer die Direkteur-generaal van Gesondheid, en Welsyn en u personeel te bedank vir u samewerking gedurende die afgelope jaar. Aan u, meneer die Burgemeester, die Voorsitter en lede van die Bestuurskomitee en lede van die Raad, wil ek graag hierdie Afdeling se waardering betuig vir die wyse waarop u deur die loop van die jaar u heelhartige steun en samewerking aan die Afdeling verleen het.

Ek wil graag my dank en erkentlikheid betuig vir die hulpvaardige wyse waarop die Munisipale Taalburo alles wat vertaal moes word, behartig het. Ek is ook dank verskuldig aan die volgende persone wat nie aan hierdie Afdeling verbonde is nie, vir die besonderhede wat hulle aangaande ondergenoemde sake voorsien het, wat deel van hierdie verslag uitmaak en die aangename gees waarin dit gedoen is : die Direkteur van die Weerburo (Pretoria) vir klimatologiese gegewens; die Departement van Statistiek vir sekere bevolkingsyfers ; die Stadstoesourier vir waardes van belasbare eiendom ; die Stadsingenieur en die Hoofskeikundige vir waterverbruik, vullisverwyderingsdienste en 'n verslag oor rioolwatersuiwering; die Distriksbestuurder, Administrasieraad vir Sentraal-Transvaal vir Behuising- en bevolkingsyfers vir Swart mense.

Ek wil verder die geleentheid gebruik om aan die personeel van die Gesondheidsafdeling baie dankie te sê vir die diens wat hulle aan die gemeenskap van Pretoria gelewer het. Ek kan hulle verseker dat dit hoog op prys gestel word. Ek wil verder ook aan die publiek van Pretoria sê: Baie dankie vir u samewerking.

In die verslag wat hier volg, word daar gepoog om 'n beeld van die werksaamhede van die Afdeling gedurende 1980 te gee. Die syfers tussen hakies in die tabelle is die syfers ten opsigte van 1979.

Die uwe

J P A VENTER
STADSGESONDHEIDSHOOF

/sh

STADSRAAD VAN PRETORIA

SEWE-EN-SEWENTIGSTE JAARVERSLAG

VAN DIE

STADSGESONDHEIDSHOOF

ALGEMENE INLIGTING EN LEMENSSTATISTIEKE

KLIMAAT EN ANDER GEGEWENS

DIE KLIMAAT

Breedtegraad	:	25 grade, 45 minute suid
Lengtegraad	:	28 grade, 11 minute oos
Gemiddelde hoogte	:	1 326 meter
Temperatuur	:	(Statistieke vriendelik verskaf deur die Direkteur, Weerburo, Pretoria)
Lugtemperatuur	:	1980

	Gem. maks. °C	Gem. min. °C	Hoogste lesing van maks. °C	Laagste lesing van min. °C	Gemiddelde relatiewe vogtigheid om 8 vm. 2 nm. % %	Reënval mm dae
Januarie	27,6	17,1	33,8	11,5	74 52	208,7 15
Februarie	26,8	16,4	29,7	13,5	79 58	89,0 15
Maart	26,9	15,9	30,1	12,0	77 49	45,4 5
April	25,5	6,3	29,5	6,3	68 35	0,4 1
Mei	23,0	7,5	27,0	3,5	70 31	0,2 1
Junie	19,0	3,9	22,6	0,0	72 34	0,0 0
Julie	19,3	3,6	24,0	0,1	72 31	0,0 0
Augustus	22,0	7,8	26,2	1,5	69 32	0,0 0
September	23,1	7,1	29,7	7,1	69 43	54,7 7
Oktober	28,5	14,4	33,5	10,1	62 35	18,4 3
November	26,3	15,4	31,2	12,0	69 50	187,7 15
Desember	28,1	16,8	31,9	11,9	72 50	60,9 13

GROOTTE VAN DIE MUNISIPALE GEBIED

Pretoria en voorstede, met inbegrip van dorpsgrond, beslaan 56 980 hektaar. Die stad lê op en tussen drie parallellopende reekse kwartsietrante wat oos en wes strek, met valleie tussenin wat hoofsaaklik skaliagrond bevat.

WAARDE VAN BELASBARE EIENDOMME SOOS OP 31 DESEMBER 1980

Die tariewe soos op 31.12.1980 is 2,664 sent per rand per jaar op die waarde van die grond.

Waarde van belasbare eiendomme

Grond	R1 264 184 272
Verbeterings	R2 174 973 470
Totaal	R3 439 157 742

Waarde van onbelasbare en vrygestelde eiendomme

Grond	R 477 224 316
Verbeterings	R 622 734 700
Totaal	R1 099 959 016

Waarde van landbougrond

Grond	R	66 043 800
Verbeterings	R	30 951 900
Totaal	R	96 995 700

BEVOLKINGSTATISTIEK

BEVOLKING

Blank	386,000
Swart	322,000
Asiër	20,000
Kleurling	20,000

Die bevolkingsgetalle vir Blankes, Kleurlinge en Indiërs is 'n raming van die bevolkingsgetalle soos op 31 Desember 1980.

Die raming van die Swartbevolking op 31 Desember 1980 wat in Atteridgeville, Mamelodi, Saulsville, Mamelodihostel en die Blanke gebiede wat binne die jurisdiksie van die Munisipaliteit Pretoria val, insluit, is deur die Distriksbestuurder Administrasieraad vir Sentraal-Transvaal verskaf.

Die vernaamste bevolkingstatistieke vir die verslagjaar, met korreksies vir gevalle wat elders tuis behoort, is soos volg:

	Blank	Asiër	Kleur- ling	Swart Geregi- streer & meld	Alle Nieblankes Geregi- streer & meld	Alle rasse Geregi- streer & meld
Bevolking	386,000	20,000	20,000	322,000	362,000	748,000
Geboortesyfers	16,46	16,70	18,70	20,17	19,90	18,11
Sterftesyfers	6,51	1,95	5,60	5,34	5,17	5,86
Kindersterftes per 1 000 lewendgeborenes	10,08	11,98	53,48	53,13	51,24	31,96
Persentasie buite-egtelike kin- ders tot lewendgeborenes	5,37	2,99	33,96	52,57	49,31	28,72
Sterftes aan Tuberkulose (pul- monêre) per 1 000 van bevolking	0,03	0,15	0,25	0,36	0,35	0,19
Sterftes aan Tuberkulose, alle soorte, per 1 000 van bevolking	0,03	0,15	0,25	0,39	0,37	0,20

GEBOROTES

Die volgende geboortes is gedurende die jaar in Pretoria geregistreer:

	Blank	Asiër	Kleur- ling	Swart Geregi- streer & meld	Alle Nieblankes Geregi- streer & meld	Alle rasse Geregi- streer & meld
Plaaslikes	6348 (6388)	334 (354)	374 (355)	6494 (2017-3855)	7202 (2726-9564)	13550 (9114-15952)
Waar moeders nie Pretoriase inwoners is nie	1663 (1782)	48 (66)	16 (49)	2367 (453)	2431 (568)	4094 (2350)
Buite-egtelike kinders (by plaaslikes inbegrepe)	341 (315)	10 (12)	127 (134)	3414 (1125)	3551 (1271)	3892 (1586)
Doodgeborenes	27 (44)	2 (2)	3 (3)	91 (138)	96 (143)	123 (187)

GEBORTESYFERS

Blank	16,46 (16,77)
Asiër	16,70 (16,86)
Kleurling	18,70 (18,68)
Swart	20,17 (7,97 geregistreer 35,0 aangemeld)
Alle Nieblankes	19,90 (9,30 geregistreer 32,64 aangemeld)
Alle rasse	18,11 (13,52 geregistreer 23,67 aangemeld)

Hier volg die syfers van die natuurlike aanwas, dit wil sê die oorskryding van sterftes deur geboortes in verhouding tot die bevolking.

Blankes	9,94 (10,5)
Asiërs	14,75 (15,24)
Kleurlinge	13,10 (12,95)

Die syfers vir die Swartmense word nie aangegee nie omdat hulle geboorteaanmelding baie onnaukeurig is.

STERFTES

	Blank	Asiër	Kleur- ling	Swart	Totaal Nieblankes	Alle rasse
Plaaslike sterftes (alle ouderdomme)	2 512 (2 386)	39 (34)	112 (107)	1 721 (1 592)	1 872 (1 733)	4 384 (4 119)
Sterftes van persone wat nie plaaslike inwoners is nie	978 (917)	5 (4)	70 (38)	1 457 (1 222)	1 532 (1 264)	2 510 (2 181)

Die "nie-plaaslike" sterftes het voorgekom te:

	H.F. Vervoerd- en ander hospitale	Hospitaal vir Sielsiekes	Inrigting vir Melaatses	Gevangenis	Besoekers
Blankes	726 (631)	12 (22)	0 (0)	0 (4)	240 (260)
Nieblankes	989 (871)	16 (25)	0 (1)	125 (123)	402 (244)

STERFTESYFER

Blank	6,51 (6,26)
Asiër	1,95 (1,62)
Kleurling	5,60 (5,63)
Swart	5,34 (6,29)
Alle Nieblankes	5,17 (5,92)
Totaal, alle rasse	5,86 (6,11)

KINDERSTERFTES

	Blank	Asiër	Kleur- ling	Swart	Totaal Nieblankes	Alle rasse
Plaaslike sterftes	68 (126)	4 (3)	20 (14)	345 (388)	369 (405)	437 (531)
Sterftes van kinders wie se moeders vir bevalling na die stad gekom het of wat dood is aan siekte waaraan hulle gely het toe hulle hierheen gebring is	56 (62)	0 (1)	3 (2)	206 (270)	209 (273)	265 (335)
Totaal	120 (188)	4 (4)	23 (16)	551 (658)	578 (678)	698 (866)

KINDERSTERFTESYFERS

Blank	10,71 (19,72)
Swart	53,13 (192,36 geregistreer 43,82 aangemeld)
Kleurling	53,48 (39,55)
Asiër	11,98 (8,45)
Alle Nieblankes	51,24 (148,57 geregistreer 42,36 aangemeld)
Alle rasse	31,96 (58,26 geregistreer 33,29 aangemeld)

TABEL VAN KINDERSTERFTESYFERS VIR ALLE RASSE SEDERT 1926

Jaar	Blank	Asiër	Kleurling	Swart	Alle Nieblankes	Alle rasse
1926 - 1927	48,48			385,51	315,31	137,49
1936 - 1937	52,66			450,24	269,49	99,42
1946 - 1947	25,90			235,16	178,27	53,78
1951 - 1952	30,26			136,86	133,91	80,53
1956	21,31			170,25	164,25	96,37
1961	26,08			112,42	110,61	80,80
1966	25,89			126,06	123,06	76,54
1971	21,59	45,93	109,7	189,80	173,30	73,77
1973	21,83	29,76	70,38	151,30	132,66	59,77
1974	19,84	19,11	36,70	123,07	111,43	58,36
1975	16,64	15,58	32,26	96,89	86,25	44,45
1976	13,95	35,39	31,44	100,32	90,83	45,24
1977	14,19	16,02	29,41	92,17	81,57	40,64
1978	12,18	5,65	20,65	92,26	77,98	36,88
1979	19,72	8,45	39,55	192,36 (ge- registreer)	148,57 (geregi- streer)	58,26 (geregistreer)
				43,82 (aan- gemeld)	42,36 (aange- meld)	33,29 (aangemeld)
1980	10,71	11,98	53,48	53,13	51,24	32,25

Vir Asiërs en Kleurlinge is die getalle te gering om die berekening van die verhouding werklik betroubaar te maak.

KINDERSTERFTES BY BLANKES VEROORSAAK DEUR

In die tabelle hierna, waar oorsake van dood aangegee word, stem die kodenommers, wat tussen hakies staan, ooreen met dié in die Handleiding oor die Statistiese Indeling van Siektes, Beserings en Oorsake van Dood, wat deur die Departement van Statistiek uitgegee word. (Gebaseer op die Internasionale Indeling van Siektes, I.C.D., Agste Hersiening, 1965.)

	1980
Aangebore oorsake (740-759)	3
Diareesiektes (558)	2
Brongitis en pneumonie (480-486)	5
Aansteeklike siektes (1-136)	0
Vroeggeboorte (765)	11
Atalektase (776)	1
Ander oorsake	20
Bepaalde toestande wat in perinatale tydperk ontstaan (760-779)	26
Totaal : Blankekindsterftes	68

KINDERSTERFTES BY NIEBLANKES IS VEROORSAAK DEUR

	1980			
	Asiër	Kleurlinge	Swart	Totaal
Aangebore oorsake (740-759)	1	0	4	5
Diareesiektes (550-558)	0	1	45	46
Brongitis en pneumonie (440-486)	1	1	47	49
Aansteeklike siektes	0	0	35	35
Ander oorsake	1	5	45	51
Vroeggeboorte (765)	1	8	54	63
Sekere siektes uit die vroegste kinderjare (760-779)	0	5	107	112
Wanvoeding (260-269)	0	0	8	8
Atalektase (776)	0	0	0	0
Totaal : Nieblankekindsterftes	4	20	345	369

Hierna verskyn die tabel met die getalle Nieblankegeboortes en -kindsterftes gedurende die verslagjaar in die verskillende woongebiede vir Nieblankes:

SWART

Oostelike gebiede		Weselike gebiede		Blankegebied	
Geboortes	Sterftes	Geboortes	Sterftes	Geboortes	Sterftes
3465	199	2023	121	1006	25
(981)	(191)	(877)	(160)	(158)	(37)

ASIËR

Laudium		Blankegebied	
Geboortes	Sterftes	Geboortes	Sterftes
327	4	7	0
(353)	(14)	(1)	(0)

KLEURLING

Eersterust		Blankegebied	
Geboortes	Sterftes	Geboortes	Sterftes
362	20	12	0
(345)	(3)	(10)	(0)

OORSAKE VAN DOOD TUSSEN 1 EN JONGER AS 5 JAAR VIR DIE VERSKILLENDE RASSE

BLANK

24 sterftes is in dié ouderdomsgroep aangeteken:

Sepsis (038)	1
Linfosarkoom (200)	1
Diabetes Mellitus (250)	1
Voedingsmarasmus (261)	1
Meningitis (320)	1
Ander toestande van die brein (348)	1
Kardiale disritmie (427)	1
Ander miokard-insufficiënsie (428)	1
Intraserebrale Bloeding (431)	1
Akute sinusontsteking (461)	1
Ander swak omskrewe en onbekende oorsake van morbiditeit en mortaliteit (796)	2
Motorvoertuig-verkeersongeluk van onomskrewe aard (819)	1
Teenspoed by tye van operasie of latere komplikasies (E878)	1
Inname van vreemde voorwerp (E 912)	1
Besering nie vasgestel of per ongeluk of doelbewus veroorsaak (980)	9
Totaal	24

SWART

95 sterftes is in dié ouderdomsgroep aangeteken:

Long Tuberkulose (011)	1
Tuberkulose van die meninges en die sentrale senuweestelsel (013)	1
Sepsis (038)	1
Masels (055)	1
Virus Hepatitis (070)	1
Kwasjiorkor (260)	3
Voedings marasmus (261)	5
Steurings van vloeistof, elektroliet en suur alkalie balans (276)	1
Anemie weens ander tekort (281)	1
Meningitis van onomskrewe oorsaak (322)	1
Ander en onomskrewe aandoenings van senuweestelsel (349)	1
Hartversaking (428)	1
Swakomskrewe beskrywing van komplikasies van hartsiekte (429)	1
Ander veneuse embolic en trombose (453)	1
Pneumonie te wyte aan ongespesifiseerde organismes (483)	1
Pneumonie in aansteeklike siektes wat elders geklassifiseer is (484)	1
Brongo Pneumonie organisme onomskrewe (485)	17
Pneumonie organisme ongespesifiseerd (486)	2
Bronchitis nie gespesifiseerd, as akute of chronies nie (490)	2
Ander siektes van long (518)	1
Ander nie-infektiewe gastro-entritis en kolitis (558)	20
Ander aandoenings van lewer (573)	2
Gastro-intestinale bloeding (578)	1
Ander en swakomskrewe toestande wat in peritinaal tydperk ontstaan (779)	1
Skielike dood, oorsaak onbekend (798)	26
Ongeluk veroorsaak deur onomskrewe vuur (E 899)	1
Totaal	95

ASIER

Een sterfgeval is in hierdie ouderdomsgroep aangeteken naamlik :
Meningitis van onomskrewe oorsaak (322)

KLEURLING

2 sterftes is in dié ouderdomsgroep aangeteken:

Brongopneumonie, onomskrewe (485)
Motorvoertuig-verkeersongeluk van onomskrewe aard (819)

Totaal

VERNAAMSTE DOODOORSAKE BY PERSONE VAN 5 JAAR EN OUER

Die vernaamste doodoorsaak was:

	Blank	Nieblank
Neoplasieë (140-239)	333	143
Siektes van die Bloedsomloopstelsel (390-429)	672	159
Brongitis en pneumonie (alle vorme) (466, 480-493)	108	109
Influenza (470-474)	0	3
Tifoidkoors (001)	0	6
Tuberkulose (van die long) (011)	9	38
Tuberkulose (10-19)	9	1
Diabetes mellitus (suikersiekte) (250)	24	41
Bloedvatletelsels wat die sentrale senuweestelsel beïnvloed (430-438)	182	116
Nefritis en nefrose en ander siektes van die urinestelsel (580-599)	90	35
Siektes van die slagare (440-458)	241	12
Siektes van die lever, galblaas en pankreas (570-578)	57	45
Siektes van swangerskap en kraamtydperk (630-678)	0	24
Ouderdom (790-794)	0	8
Selfmoord (E950-E959, E979)	10	3
Ongelukke (E800-E929)	124	41
Moord (E960-E969)	4	3
Ander aansteeklike siektes (090-136)	0	2
Ander oorsake	557	618
Totaal	2420	1407

BESONDERHEDE VAN DOODOORSAKE : VYF JAAR EN OUER

1. NEOPLASIEë (140-239)

BLANK : 333 Sterftesyfer 0,86 per 1 000 van bevolking

Blank : Liggaamsdeel aangetas :

Maligne Neoplasie van lip (140)	1
Maligne neoplasie van tong (141)	3
Maligne neoplasie van vloer van mond (144)	3
Maligne neoplasie van onderkeelholte (148)	4
Maligne neoplasie van slukderm (150)	2
Maligne neoplasie van maag (151)	27
Maligne neoplasie van dikderm, behalve rektum (153)	19
Maligne neoplasie van rektum en rektumsigmoïedaansluiting (154)	19
Maligne neoplasie van lever en galbuis binne die lever as primêr omskryf (155)	8
Maligne neoplasie van pankreas (157)	16
Maligne neoplasie van strottehoof (161)	7
Maligne neoplasie van brongus en long (162)	54
Maligne neoplasie van asemhalingstelsel (165)	1
Maligne neoplasie van die been (170)	1
Maligne Melanoom van huid (172)	4
Maligne neoplasie van bors (174)	35
Maligne neoplasie van manlike bors (175)	1
Maligne neoplasie van uterus (179)	3
Maligne neoplasie van cervix uteri (180)	6
Maligne neoplasie van ovarium, eierleier en breë baarmoederband (183)	9
Maligne neoplasie van prostaat (185)	8
Maligne neoplasie van ander en onomskrewe vroulike geslagsorgane (184)	1
Maligne neoplasie van blaas (188)	14
Maligne neoplasie van ander en onomskrewe urienweë (189)	2
Maligne neoplasie van brein (191)	16
Maligne neoplasie van skildklier (193)	2
Maligne neoplasie van swakomskrewe liggings (195)	3
Sekondêre Maligne neoplasie van asemhaling en spysverteringstelsel (197)	1
Maligne neoplasie sonder omskrywing van plek (199)	15
Linfosarkoom (200)	1
Kwaadaardige limfgranuloom (201)	5
Ander Maligne neoplasie van limf en histiosietweefsel (202)	6
Verspreide miëlom (203)	5
Linfatiese leukemie (204)	6
Miëlotoïede leukemie (205)	17
Leukemie van ongespesifiseerde sel tipe (208)	9

Totaal

333

Leeftyd by afsterwe :

Onder 40 jaar	40-49	50-59	60-69	70-79	80 en bo	Totaal
23	29	65	97	75	44	333

NIEBLANK

Liggaamsdeel aangetas :

Swart

Maligne neoplasie van vloer van mond (144)	1
Maligne neoplasie van slukderm (150)	32
Maligne neoplasie van maag (151)	10
Maligne neoplasie van dikderm, behalve rektum (153)	1
Maligne neoplasie van rektum en rektumsigmoidaan sluiting (154)	4
Maligne neoplasie van lever en galbuis binne die lever, as primêr omskryf (155)	9
Maligne neoplasie van pankreas (157)	1
Maligne neoplasie van swakomskrewe ligginge van spysverteringsorgane (159)	1
Maligne neoplasie van strottehoof (161)	2
Maligne neoplasie van brongus en long (162)	17
Maligne neoplasie van been en artikulêre kraakbeen (170)	1
Maligne neoplasie van vroulike bors (174)	6
Maligne neoplasie van uterus, ongespesifiseerde gedeelte (179)	1
Maligne neoplasie van cervix uteri (180)	10
Maligne neoplasie van corpus uteri (182)	1
Maligne neoplasie van ovarium en ander uterine adneks (183)	3
Maligne neoplasie van prostaas (185)	1
Maligne neoplasie van blaas (188)	2
Maligne neoplasie van nier en ander onomskrewe urienweë organe (189)	1
Maligne neoplasie van brein (191)	4
Maligne neoplasie van skildklier (193)	1
Maligne neoplasie van asemhaling- en spysverteringstelsel (197)	1
Maligne neoplasie sonder omskrywing van plek (199)	8
Limfosarkoom en retikulosarkoom (200)	2
Kwaadaardige limfgranuloom (201)	1
Ander maligne neoplasie van limf- en histiosieweefsel (202)	3
Verspreide miltloosheid en immunoprolifereerende neoplasma (203)	2
Limfatiese leukemie (204)	1
Miltloofede leukemie (205)	1
Neoplasie van onomskrewe aard	2
Totaal	130

Asiër

Maligne neoplasie van strottehoof (161)	1
Leukemie van ongespesifiseerde sel tipe (208)	1
Totaal	2

Kleurling

Maligne neoplasie van maag (151)	1
Maligne neoplasie van dikderm (153)	2
Maligne neoplasie van strottehoof (155)	1
Maligne neoplasie van brongus en long (162)	3
Maligne neoplasie van cervix uteri (180)	1
Maligne neoplasie van blaas (188)	1
Maligne neoplasie sonder omskrywing van plek (199)	1
Leukemie van ongespesifiseerde sel tipe (208)	1
Totaal	11

2. HARTKWALE (390-429)

Sterftesifer per 1 000 van Blanke bevolking : 1,74 (0,84)

Blank : 672

Nieblank : 159

(Swart : 127 Asiër : 8 Kleurling : 24)

3. BRONGITIS EN PNEUMONIE (466, 480-493)

Blank : 108

Nieblank : 109

(Swart : 98 Asiër : 4)

4. INFLUENZA (470-474)

Blank : 0

Nieblank : 3

5. TIFOTDKOORS (001)

Blank : 0

Nieblank : 6

(Swart : 6)

6. TUBERKULOSE (10-19)

Blank : 9

Nieblank : 1

(Swart : 1)

7. SUIKERSIEKTE (250)

Blank : 24

Nieblank : 41

(Swart : 39 Asiër : 2)

8. BEROERTE (430-438)

Blank : 182

Nieblank : 116

(Swart : 107 Asiër : 1 Kleurling : 8)

9. SIEKTES VAN DIE NIERE (580-599)

Blank : 90

Nieblank : 35

(Swart : 29 Asiër : 1 Kleurling : 5)

10. SIEKTES VAN DIE SLAGARE (440-458)

Blank : 241

Nieblank : 12

(Swart : 10 Asiër : 1 Kleurling : 1)

11. SIEKTES VAN DIE LEWER EN GALBLAAS (570-578)

Blank : 57

Nieblank : 45

(Swart : 41 Kleurling : 4)

12. SIEKTES VAN SWANGERSKAP EN DIE KRAAMTYPERK (630-678)

Blank : 0

Nieblank : 24

(Swart : 23 Asiër : 1)

13. OUDEROOM (790-794)

Blank : 0

Nieblank : 8

(Swart : 6 Asiër : 1)

14. SELFMOORD (E950-E959, E979)

Blank : 10

Nieblank : 3

(Swart : 3)

15. MOORD (E960-E969)

Blank : 4

Nieblank : 3

(Swart : 3)

	Blank	Swart	Asiër	Kleurling
Aanranding deur middel van ophang en verwurging (E963)	0	1	0	0
Manslag en besering wat opsetlik deur ander persone toegedien is (E965)	2	0	0	0
Aanranding op ander en onomskrewe wyse (968)	2	0	0	0
Wetlike teregstelling (E978)	0	2	0	0
Totaal	4	3	0	0

16. ONGELUKKE (E800-E929)

Blank : 124

Nieblank : 41

(Swart : 25 Asiër : 6 Kleurling : 10)

	Blank	Swart	Asiër	Kleurling
Spoorwegongelukke (800-807)	5	2	0	0
Motorvoertuig-verkeersongeluk van onomskrewe aard (819)	70	12	6	8
Deur motor raakgery (E814)	1	4	0	0
Trapfiets ongeluk (E826)	1	0	0	0
Ander padvoertuigongelukke (E829)	15	0	0	0
Ander en onomskrewe val (887)	1	1	0	0
Alkoholvergiftiging (E860)	2	0	0	0
Toevallige vergiftiging (E869)	1	0	0	0
Abnormale reaksie van pasiënt tydens of na operasie (E878)	13	0	0	1
Val van stellasie (E881)	1	0	0	0
Fraktuur - ongespesifiseerde oorsaak (E887)	1	1	0	0
Onomskrewe val (E888)	3	0	0	1
Verstikking (E911)	1	0	0	0
Meganiese versmoring (E913)	2	0	0	0
Ongespesifiseerde taenspoed tydens mediese sorg (E976)	0	1	0	0
Deur elektriese stroom veroorsaak (E925)	1	0	0	0
Uasleep van besering per ongeluk opgedoen (E929)	6	2	0	0
Vuur in ander en onomskrewe gebou of konstruksie (E391)	0	1	0	0
Ongeluk veroorsaak deur onomskrewe vuur (E399)	0	1	0	0
Totaal	124	25	6	10

AANSTEELIKE EN ANDER AANMELDBARE SIEKTES

'n Nuwe lys van mediese toestande wat dwarsdeur die land aanmeldbaar is, het met die publikasie van Goewermentskennisgewing R1802 van 24 Augustus 1979, in werking getree.

Met die uitsondering van tuberkulose, is 354 gevalle van aansteeklike of ander aanmeldbare siektes by die Afdeling aangemeld. Hierdie syfer verteenwoordig 'n vermindering in vergelyking met dié van verlede jaar toe dit 406 was.

Weens die feit dat masels, wat tans 'n baie algemene siekte is, met die publikasie van die nuwe lys aanmeldbaar geword het, is daar 'n aanmerklike styging in die getal gevalle aangemeld. Die gevalle van masels wat aangemeld word, verteenwoordig waarskynlik 'n baie klein persentasie van die voorkoms.

Die volgende tabel toon die getal aanmeldings van die verskillende siektes, plaaslik en ingevoer:

	Blankes	Nieblankes	Totaal
Masels	76 (140)	118 (32)	194 (172)
Tifofedkoors	4 (4)	25 (12)	29 (16)
Polionielitis	0 (0)	0 (2)	0 (2)
Pokkies	0 (0)	0 (0)	0 (0)
Difterie	0 (0)	2 (1)	2 (1)
Malaria	3 (4)	1 (1)	4 (5)
Meningokokale meningitis	8 (1)	2 (0)	10 (1)
Aansteeklike hepatitis	42 (174)	4 (3)	46 (177)
Staphylococcusinfeksie	2 (0)	0 (0)	2 (0)
Ander aansteeklike of aanmeldbare siektes	57 (6)	10 (1)	67 (7)
Totaal	192 (354)	162 (52)	354 (406)

In die verslag wat volg, is die syfers tussen hakies, tensy anders vermeld word, dié vir die vorige jaar.

TIFOTEDKOORS

	Blankes	Nieblankes	Totaal
Plaaslike gevalle	3 (1)	12 (7)	15 (8)
Ingevoerde gevalle	1 (3)	13 (5)	14 (8)
Voorkomssyfer per 100 000 van die bevolking (slegs plaaslike gevalle)	0,78 (0,26)	+ (2,39)	+ (1,19)
Sterftes onder plaaslike gevalle	0 (0)	0 (0)	0 (0)
Sterftes onder ingevoerde gevalle	0 (0)	2 (0)	2 (0)

+ Syfers nie beskikbaar nie

Plaaslike gevalle

Die Nieblankegevalle was almal Swartmense.

Tifofeddraers

Die Afdeling ondersoek gereeld melkerywerkers, werknemers by die munisipale waterwerke en ander Nieblankes wat met die hantering van voedsel gemoeid is, asook persone wat met 'n tifofedgeval in aanraking was, vir die draertoestand.

Die getal persone wat aldus ondersoek is, asook die resultate van die bakteriologiese ondersoeke, word in die volgende tabel aangetoon:

	Getal persone getoets	Bloed Vi-positief bevind	Ontlasting positief bevind	Urien positief bevind
Tifoïedondersoeke	144 (58)	1 (0)	3 (1)	1 (0)
Voornemende melkerywerknemers	26 (62)	0 (0)	0 (0)	0 (0)
Ander voedselhanteerders	381 (364)	0 (2)	0 (0)	0 (0)
Totaal	551 (426)	1 (2)	3 (1)	1 (0)

Faagtipering

Faagtipering van *S. typhi* is 'n belangrike stap in die ondersoekproses wanneer pogings aangewend word om 'n bekende draer aan 'n uitbreking van tifoïedkoors te koppel. Hierdie funksie word deur die Suid-Afrikaanse Instituut vir Mediese Navorsing, Milnerpark, Johannesburg behartig.

Hierdie Afdeling onderneem om die tifoïedkulture by die Instituut vir Patologie af te haal en om hulle vir faagtipering na die S.A. Instituut vir Mediese Navorsing te stuur.

Gedurende die jaar is 40 sodanige kulture gestuur, met die volgende resultate:

	Monsters
Faagtype A	12
Degradeerde Vi-stam	6
Ontipeerbare stam	9
<i>S. Typhi</i> nie geïsoleer nie	1
Faagtype L10	0
Faagtype F6	0
Resultate uitstaande	12

Ingevoerde gevalle

Hierdie gevalle was almal Swartmense. Sommige pasiënte het die siekte elders opgedoen, maar by vriende of familieledes in Pretoria 'n ruk lank gewoon voordat hulle ontdek en in die hospitaal opgeneem is. Twee van hierdie pasiënte is oorlede.

POLIOMIELITIS

Een ingevoerde geval is gedurende die jaar aangemeld. Die pasiënt was 'n Swart kind.

	Blankes	Nieblankes	Totaal
Plaaslike gevalle	0 (0)	0 (1)	0 (1)
Ingevoerde gevalle	0 (0)	1 (1)	1 (1)

Immunisering teen poliomiëlitis

Gereelde immuniseringsklinieke vir die toediening van poliomiëlitisslukentstof word by verskillende plekke in die stad vir Blankes en Nieblankes deur die Afdeling gehou. Die entstof word ook aan private praktisyns vir toediening aan hulle pasiënte verskaf en hulle maak steeds van hierdie diens gebruik.

DIFTERIE

Die volgende gevalle is gedurende die jaar aangemeld:

	Blankes	Nieblankes	Totaal
Plaaslike gevalle	0 (0)	2 (0)	2 (0)
Ingevoerde gevalle	0 (0)	0 (1)	0 (1)
Voorkomssyfer per 100 000 van die bevolking (slegs plaaslike gevalle)	0,0 (0,0)	0,27 (0,0)	0,27 (0,0)
Sterftes onder plaaslike gevalle	0 (0)	1 (0)	1 (0)

Plaaslike gevalle

Twee (0) gevalle is gedurende die jaar aangemeld

Een was 'n Swart kind van 7 jaar van Mamelodi. Sy is in Kalafong hospitaal geïsoleer en behandel. Een was 'n Asiër kind van een jaar van Laudium. Hy is in die H.F. Vervoerd-hospitaal geïsoleer en behandel. Die Swart kind is oorlede.

Ingevoerde gevalle

Geen (1) ingevoerde gevalle is gedurende die jaar aangemeld nie.

Immunisering

Daar word dikwels deur die Pers en ook die Stadsraad se Nuusbrief, asook mondelings by klinieke en op besoeke tuis, 'n beroep op die publiek, Blankes sowel as Nieblankes, gedoen om hulle kinders teen die siekte te laat immuniseer.

Die getal persone wat oor die afgelope tien jaar by die Afdeling se Blanke- en Nieblankeklinieke teen difterie ingeënt is, tesame met die getal gevalle wat elke jaar voorgekom het en die voorkomssyfer vir dieselfde tydperk, word in die volgende tabel aangedui:

Jaar	B L A N K E S			N I E B L A N K E S		
	Getal geïmu- niseer	Getal gevalle	Voorkomssyfer per 100 000 van die bevolking	Getal geïmu- niseer	Getal gevalle	Voorkomssyfer per 100 000 van die bevolking
1970	5 533	4	1,4	4 605	5	2,2
1971	6 474	7	2,4	4 177	3	1,2
1972	6 393	0	0,0	5 041	7	2,8
1973	5 826	0	0,0	4 983	5	2,0
1974	5 494	0	0,0	5 383	6	2,38
1975	5 590	0	0,0	5 596	6	2,32
1976	5 124	0	0,0	4 855	0	0,0
1977	5 588	0	0,0	5 185	0	0,0
1978	5 202	1	0,26	4 885	0	0,0
1979	4 970	0	0,0	5 489	0	0,0
1980	5 124	0	0,0	4 984	2	0,27

MALARIA

Gedurende die jaar het 4 inwoners van Pretoria, 3 Blankes en 1 Swartman, die siekte opgedoen tydens besoeke aan malariagebiede.

Twee (4) gevalle is vir behandeling in hospitale opgeneem en het herstel. Twee gevalle is tuis behandel en het herstel.

Die publiek slaan nie altyd ag op die herhaalde waarskuwings wat gegee word om anti-malariatablette te neem wanneer hulle gebiede waar hierdie siekte voorkom, besoek nie. In al 4 (5) gevalle is Plasmodium falciparum in die bloedsmerre geïdentifiseer.

MENINGOKOKKALE MENINGITIS

Die volgende gevalle is gedurende die jaar aangemeld:

	Blankes	Nieblankes	Totaal
Plaaslike gevalle	7 (1)	2 (0)	9 (1)
ingevoerde gevalle	1 (0)	0 (0)	1 (0)
Plaaslike gevalle			

Neg (1) gevalle is aangemeld. Twee seuns van 13 jaar en 2 jaar onderskeidelik, is oorlede.

Die Afdeling behandel al die noue kontakte van h geval profilakties. Geen sekondêre gevalle is onder hierdie kontakte aangemeld nie.

Ingevoerde gevalle

Een ingevoerde geval is aangemeld.

AANSTEEKLIKE HEPATITIS

Die getal gevalle wat aangemeld is, is soos volg:

	Blankes	Nieblankes	Totaal
Plaaslike gevalle	38 (168)	3 (3)	41 (171)
Ingevoerde gevalle	4 (6)	1 (0)	5 (6)

Daar word aanvaar dat baie gevalle nooit aangemeld word nie, daar lede van die personeel dikwels verdere onaangemelde gevalle gedurende hulle ondersoeke ontdek.

Die ouderdomsgroepe van gevalle wat aangemeld is, word in die volgende tabel aangedui:

	0-1 jaar	1-4 jaar	5-9 jaar	10-19 jaar	20-39 jaar	40 jaar en ouer	Totaal
Plaaslik	0 (0)	3 (20)	4 (36)	17 (65)	14 (38)	3 (12)	41 (171)
Ingevoer	0 (0)	1 (0)	0 (0)	1 (2)	3 (3)	0 (1)	5 (6)
Totaal	0 (0)	4 (20)	4 (36)	18 (67)	17 (41)	3 (13)	46 (177)

Drie-en-veertig (162) van die gevalle is tuis behandel en drie (9) is in verskillende hospitale in die stad vir behandeling opgeneem. Vyf (45) sekondêre infeksies is aangemeld.

Ingevoerde gevalle

Vyf (6) ingevoerde gevalle is aangemeld. Die pasiënte het die siekte elders opgedoen, maar was in Pretoria woonagtig tydens aanmelding.

MASELS

Weens die feit dat masels 'n hoogs aansteeklike siekte, met 'n hoë morbiditeit is en dat baie komplikasies van masels ondervind word, is daar vir 'n lang tyd reeds vertoë tot die Staatsdepartement van Gesondheid gerig om masel-entstof aan plaaslike owerhede te voorsien. Die Staatsdepartement van Gesondheid het vanaf 1976 begin om 'n gevries-droogde levende maselentstof aan plaaslike owerhede beskikbaar te stel.

Masels het ingevolge Goewermentskennisgewing R1802 van 24 Augustus 1979 'n aanmeldbare mediese toestand geword. Alhoewel daar aanvaar word dat meeste gevalle nog nie aangemeld word nie, is die volgende gevalle gedurende 1980 aangemeld:

Blankes	Nieblankes	Totaal
76 (140)	118 (32)	194 (172)

STAPHYLOCOCCUS INFEKSIE (by moeders en pasgebore babas)

Gedurende die jaar is twee (0) gevalle aangemeld.

Die verspreiding van gevalle tesame met die getal bevallings in elke kraaminrigting of groep en die persentasie moeders en babas wat na die bevalling tekens van infeksie getoon het, word in die volgende tabelle aangedui:

	Getal infeksies	Getal bevallings	Persentasie bevallings wat infeksie opgedoen het
BLANKES			
Hospitaal A	1	3 047	0,03 %
Hospitaal B	0	2 027	0,0 %
Hospitaal C	1	2 097	0,05 %
Hospitaal D	0	602	0,0 %
Vroedvroue	0	0	0,0 %
Hospitaal I	0	865	0,0 %
Totaal	2	8 638	0,02 %

NIEBLANKES

Hospitaal E	0	3 371	0,0 %
Hospitaal F	0	1 835	0,0 %
Hospitaal G	0	3 847	0,0 %
Hospitaal H	0	703	0,0 %
Vroedvroue	0	126	0,0 %
Private Verpleeginrigtings	0	0	0,0 %
Totaal	0	9 882	0,0 %

ANDER AANMELDBARE SIEKTES AANGEMELD

	Plaaslike gevalle		Ingevoerde gevalle	
	Blankes	Nieblankes	Blankes	Nieblankes
Erisipelas	0 (0)	0 (1)	0 (0)	0 (0)
Enkefalitis	0 (0)	0 (0)	0 (0)	0 (0)
Vlektifus (Murine)	0 (2)	0 (0)	0 (0)	0 (0)
Loodvergiftiging	0 (0)	0 (0)	0 (0)	0 (0)
Insekdodervergiftiging	2 (0)	0 (0)	0 (0)	0 (0)
Brongiale karsinoom	55 (4)	10 (0)	0 (0)	0 (0)

HOSPITAAL VIR AANSTEEKLIKE SIEKTES

Hierdie hospitaal, 'n inrigting met 90 beddens, het aan die Stadsraad van Pretoria behoort en is op die terrein van die H.F. Verwoerd-hospitaal geleë.

As gevolg van die afname in die voorkoms van sekere aansteeklike siektes die afgelope paar jaar, veral difterie en poliomiëelitis, het 'n hele aantal beddens wat vir afsonderingsdoeleindes gebruik was, oortollig geword. Twee afdelings van die hospitaal met altesaam 62 beddens was aan die Transvaalse Departement van Hospitaaldienste verhuur, met die gevolg dat dit 28 beddens beskikbaar gelaat het vir gevalle wat aan aansteeklike siektes ly.

Die geboue is gedurende 1977 deur die Transvaalse Provinsiale Administrasie onteien, maar die 28 beddens word nog steeds aan die Gesondheidsafdeling van die Stadsraad beskikbaar gestel vir die behandeling van Blanke pasiënte met aansteeklike siektes.

Asiër- en Kleurlingpasiënte word in 'n deel van die H.F. Verwoerd-hospitaal, en Swartpasiënte in die Ga-Rankuwa-hospitaal opgeneem.

GELDELIKE REËLINGS

Die H.F. Verwoerd-hospitaal voorsien al die verplegingspersoneel, aptekersbenodigdhede, X-straalgeriewe, rantsoene, linneware en wasgeriewe, stoom, elektrisiteit en water en dra ook sekere gespesifiseerde koste aan onderhoud van die geboue en toerusting.

Hiervoor betaal die Stadsraad 'n vasgestelde bedrag per pasiënt per dag vir dié pasiënte vir wie hy geldelike aanspreeklikheid aanvaar.

Daar word ook onderling gereël dat die spesialisepersoneel van die H.F. Verwoerd-hospitaal vir raadpleging by die Hospitaal vir Aansteeklike Siektes beskikbaar is, terwyl die Stadsraad se Geneeskundige Beambtes 'n dag-en-nag-raadplegingsdiens vir aansteeklike siektes voorsien, wat veral deur die personeel van die Ongevalla- en die Opname-afdeling van die H.F. Verwoerd-hospitaal gebruik en gewaardeer word.

GEBIEDE WAT BEDIEN WORD

Hieronder ressorteer die Pretoriase munisipale gebied, sy buitestedelike gebiede en Noord- en Noordwes-Transvaal. Pasiënte uit enige ander gebied, waar daar moeilikheid ondervind word om pasiënte te huisves, soos byvoorbeeld tydens epidemies, word egter ook opgeneem.

AMBULANSREËLINGS

Die Pretoriase Stadsraad voorsien sy eie ambulansdiens vir aansteeklike siektes, terwyl ander plaaslike owerhede hul pasiënte per trein, huurmotor of ambulans instuur, na gelang van omstandighede.

HOSPITAAL VIR AANSTEEKLIKE SIEKTES : STATISTIEK

Vergelykende syfers word tussen hakies verstrekk en het betrekking op die tydperk van 12 maande wat op 1 Januarie 1980 begin en 31 Desember 1980 geëindig het.

TOTALE GETAL PASIËNTE OPGENEEM

53 (158) pasiënte is opgeneem.

Gebiedsverspreiding

Pretoria

Ander gebiede

Blankes

46 (97)

7 (61)

AKUTE ANTERIOR POLIOMYELITIS

Geen (0) gevalle is gedurende 1980 opgeneem nie.

DIFTERIE

Geen (0) gevalle is gedurende 1980 opgeneem nie.

TIFOID

Drie (8) gevalle is gedurende 1980 opgeneem. Een was van Pretoria en twee was van buite die Pretoriase munisipale gebied afkomstig.

LONGTUBERKULOSE

Gevalle van longtuberkulose word net 'n paar dae lank in die Afsonderingshospitaal opgeneem terwyl reëlins vir hulle opname in 'n sanatorium getref word of totdat hulle na tuberkuloseklinieke verwys kan word.

27 (21) pasiënte is opgeneem.

Gebiedsverspreiding

Pretoria

Ander gebiede

Blankes

25 (16)

2 (5)

Daar was geen (1) sterfgevalle nie.

TUBERKULOSE MENINGITIS

Daar was geen (1) gevalle opgeneem nie.

Opmerking : Vir hospitalisasie van tuberkulosegevalle oor die algemeen, kyk die gedeelte oor "Tuberkulose".

MASELS

Altesaam 18 (83) gevalle is opgeneem.

Gebiedsverspreiding

Pretoria

Ander gebiede

Blankes

17 (47)

1 (36)

Daar was geen (0) sterftes nie.

Die meeste pasiënte het aan brongopneumonie gely as die hoofkomplikasie, maar daar was een geval met otitis media en twee met gastro-enteritis.

MENINGOKOKKALE MENINGITIS

Vier (5) gevalle is opgeneem.

Gebiedsverspreiding

Blankes

Pretoria

3 (2)

Ander gebiede

1 (3)

Daar was twee (1) sterftes.

ERISIPELAS

Geen (0) pasiënte is opgeneem nie.

In die volgende tabel word die getal behandelde gevalle en verspreiding opgesom:

Siekte	Blankes	
	Pretoria	Ander gebiede
Infektiewe hepatitis	0 (2)	0 (0)
Akute anterior poliomiëlitis	0 (0)	0 (0)
Difterie	0 (0)	0 (0)
Tifoid	1 (3)	2 (5)
Paratifoid B	0 (1)	0 (0)
Tuberkulose	25 (16)	2 (5)
Tuberkuloseuse meningitis	0 (1)	0 (0)
Masels	17 (47)	1 (36)
Meningokokkale meningitis	3 (2)	1 (3)
Leprose	0 (0)	0 (0)
Virus meningitis	0 (1)	0 (0)
Totaal	46 (97)	6 (51)

IMMUNISERING

Omdat die immunisering van die bevolking teen sekere oordraagbare siektes een van die belangrikste maatreëls is wat in voorkomende geneeskunde getref kan word, hou die Afdeling gereelde klinieksessies vir die immunisering van kinders. Hierdie sessies word vir beide Blankes en Nieblankes in al die woonbuurtes oor die hele Stad gehou en sekere immuniserings word by die skole gedoen.

Die Afdeling verskaf tans immunisering teen difterie, kinkhoes, tetanus, poliomiëlitis, tuberkulose en masels. Sekere vroue en dogters word ook teen rubella (Duitse masels) geïmmuniseer.

Die immuniserings wat in die loop van die jaar gedoen is, word in die volgende tabelle aangegee.

IMMUNISERING TEEN POLIOMIELITIS

Die getal dosisse slukentstof wat aan die verskillende rasse in die onderskeie ouderdomsgroepe toegedien is, word in die volgende tabel verstrekk: (Die getal toegediende derde dosisse is 'n aanduiding van die getal persone wat die volledige reeks ontvang het.)

Ouderdomsgroep	Blank	Asiër	Kleurling	Swart	Totaal
Onder 1 jaar	14 039 (15 633)	960 (1 240)	1 117 (1 245)	14 037 (13 913)	30 753 (32 031)
1 - 6 jaar	5 003 (3 728)	491 (469)	561 (663)	3 268 (3 858)	9 323 (8 718)
7 - 10 jaar	585 (113)	0 (0)	12 (2)	16 (1)	613 (116)
11 - 19 jaar	114 (16)	0 (0)	3 (0)	0 (0)	117 (16)
20 jaar en ouer	33 (18)	0 (0)	0 (0)	0 (0)	33 (18)
Swanger vroue	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Immigrante	11 (19)	0 (0)	0 (0)	0 (0)	11 (19)
Totaal	19 785 (19 527)	1 451 (1 709)	1 693 (1 910)	17 321 (17 776)	40 250 (40 922)
Derde dosisse	4 644 (5 242)	335 (379)	397 (446)	4 102 (4 516)	9 478 (10 583)
Vierde dosisse	4 983 (2 921)	459 (592)	580 (550)	4 557 (3 313)	10 579 (7 376)

IMMUNISERING TEEN TUBERKULOSE MET B.C.G.

	Blank	Kleurling	Asiër	Swart	Totaal
Jong babas (0 - 3 maande)	6 388 (6 952)	275 (305)	209 (147)	6 958 (7 112)	13 830 (14 531)
Ander	11 635 (11 815)	1 492 (847)	731 (806)	15 660 (13 038)	29 518 (27 506)
Totaal	18 023 (18 767)	1 767 (1 152)	940 (953)	22 618 (20 150)	43 348 (42 037)

IMMUNISERING TEEN DIFTERIE, TETANUS EN KINKHOES

DIFTERIE-PERTUSSIS EN TETANUS

	Blank	Kleurling	Asiër	Swart	Totaal
Eerste dosis	5 677 (5 349)	424 (449)	369 (389)	5 578 (4 962)	12 048 (11 149)
Tweede dosis	5 075 (4 705)	416 (383)	348 (339)	4 803 (5 116)	10 642 (10 543)
Derde dosis	2 556 (4 504)	399 (365)	345 (178)	4 243 (4 192)	7 543 (9 239)
Skraagdosis	53 (56)	0 (0)	0 (0)	0 (0)	53 (56)
Totaal	13 361 (14 614)	1 239 (1 197)	1 062 (906)	14 624 (14 270)	30 286 (30 987)

DIFTERIE - TETANUS

	Blank	Kleurling	Asiër	Swart	Totaal
Eerste dosis	314 (454)	45 (38)	18 (17)	409 (991)	786 (1 500)
Tweede dosis	260 (368)	33 (29)	7 (7)	338 (955)	638 (1 359)
Derde dosis	333 (466)	29 (44)	18 (18)	338 (692)	718 (1 220)
Skraagdosis	8 474 (8 078)	706 (616)	714 (663)	2 972 (2 510)	12 866 (11 867)
Totaal	9 381 (9 366)	813 (727)	757 (705)	4 857 (5 138)	15 008 (15 946)

DIFTERIE (ADV)

	Blank	Kleurling	Asiër	Swart	Totaal
Eerste dosis	9 (2)	0 (0)	0 (0)	0 (0)	9 (2)
Tweede dosis	21 (1)	3 (0)	0 (0)	0 (0)	24 (1)
Skraagdosis	1 040 (416)	4 (5)	0 (0)	0 (0)	1 044 (421)
Totaal	1 070 (419)	7 (5)	0 (0)	0 (0)	1 077 (424)

TETANUS TOKSOTED

	Blank	Kleurling	Asiër	Swart	Totaal
Eerste dosis	57 (60)	0 (0)	0 (0)	803 (1 430)	860 (1 490)
Tweede dosis	162 (192)	0 (0)	0 (0)	683 (764)	845 (956)
Derde dosis	83 (74)	0 (0)	0 (0)	405 (510)	488 (584)
Skraagdosis	11 (31)	0 (0)	0 (0)	110 (124)	121 (155)
Totaal	313 (357)	0 (0)	0 (0)	2 001 (2 828)	2 314 (3 185)

IMMUNISERING TEEN MASELS

Gedurende die afgelope jaar is die volgende immuniserings teen maseles gedoen:

	Blank	Kleurling	Asiër	Swart	Totaal
6 maande - 1 jaar	1 944 (1 467)	289 (245)	209 (265)	3 286 (2 709)	5 728 (4 686)
1 jaar - 2 jaar	1 231 (1 567)	129 (176)	86 (249)	707 (1 232)	2 153 (3 224)
Bo 2 jaar	507 (555)	95 (0)	18 (13)	257 (342)	877 (910)
Totaal	3 682 (3 589)	513 (421)	313 (527)	4 250 (4 283)	8 758 (8 820)

IMMUNISERING TEEN RUBELLA (DUISE MASELS)

Rubella of Duitse masels is 'n baie ligte aansteeklike siekte wat dikwels by jong volwassenes voorkom. Die probleem is egter dat indien 'n vrou die siekte gedurende die eerste trimester van swangerskap sou opdoen, daar 'n sterk moontlikheid bestaan dat haar baba met kongenitale afwykings gebore kan word. Ten einde hierdie probleme te voorkom, het die Raad 'n paar jaar gelede besluit om jaarliks al die dogters in standaard vyf in provinsiale skole in Pretoria met 'n gevriesdroogde lewende entstof teen rubella te immuniseer. Hierdie immunisering vind jaarliks by die skole plaas. Gedurende 1980 is 3 479 dogters by 97 skole in Pretoria teen rubella geïmmuniseer.

Omdat rubella so gevaarlik gedurende vroeë swangerskap kan wees, word daar by die Pretoriase Kraam-hospitaal roetine-toetse gedoen om te bepaal of vroue wat vir hulle bevalling daar opgeneem word, wel immuun teen rubella is. Indien nie, word hierdie vroue dan geïmmuniseer sodat hulle die siekte nie moontlik gedurende 'n latere swangerskap kan opdoen nie. Gedurende 1980 is 350 vroue hier teen rubella geïmmuniseer.

TUBERKULOSE

Gedurende die jaar is 1334 aanmeldings van hierdie siekte ontvang. Dit toon 'n toename van 273 gevalle vergeleke met die jaar 1979 toe 1061 gevalle aangemeld is. (1978 : 953 gevalle en 1977 : 1007 gevalle).

Die pogings van die verskillende seksies in verband met opsoring van gevalle, immunisering en beheer van hierdie siekte het onverpoos voortgeduur.

Besonderhede van statistieke en beheermaatreëls verskyn in die verslag wat volg.

STATISTIEK

Die volgende tabel A toon die totale getal aanmeldings vir die jaar aan, geklassifiseer volgens die verskillende rasse en geslagte tesame met die voorkomssyfers vir plaaslike gevalle in elke groep. In tabelle B en B1 word vergelykende syfers vir die jare 1960 tot 1979 aangegee. (Kyk bladsye 26, 27 en 28).

OUDERDOMSGROEPE

Tabelle C en C1 toon die getal gevalle in die verskillende ouderdomsgroepe vir onderskeidelik Blankes en Nieblankes, tesame met die persentasie van die totale getal gevalle vir die jare 1972 tot 1980 wat in elke groep aangemeld is.

TABEL C

BLANKE GEVALLE - PLAASLIK EN INGEVOER (AL DIE SOORTE)

	OUDERDOMSGROEPE													
	0-1 jaar		1-4 jaar		5-9 jaar		10-19 jaar		20-39 jaar		40 jaar en ouer		Totaal	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
1972	0	0	3	3	2	1	1	1	8	8	21	13	35	26
1973	0	0	0	1	1	0	1	1	9	10	25	17	36	29
1974	1	0	1	1	1	2	1	0	10	7	27	13	41	23
1975	1	0	1	1	3	1	1	1	11	11	24	15	41	29
1976	2	0	2	3	2	3	1	2	9	9	24	18	40	35
1977	0	1	1	2	3	3	5	1	13	13	47	17	69	37
1978	1	0	4	0	0	0	1	1	6	11	14	17	26	29
1979	0	0	7	5	0	0	1	3	10	10	20	17	38	35
1980	1	0	4	4	7	6	3	5	8	8	19	12	42	35

PERSENTASIE VAN TOTALE TUBERKULOSE - AANMELDINGS

	0-1 jaar	1-4 jaar	5-9 jaar	10-19 jaar	20-39 jaar	40 jaar en ouer
1972	-	9,8 %	4,9 %	3,3 %	25,2 %	55,7 %
1973	-	1,5 %	1,5 %	3,1 %	29,2 %	64,6 %
1974	1,6 %	3,1 %	4,7 %	0,02 %	26,6 %	62,5 %
1975	1,4 %	2,8 %	5,7 %	2,8 %	31,4 %	55,7 %
1976	2,0 %	5,0 %	5,0 %	4,0 %	24,0 %	56,0 %
1977	0,94 %	2,83 %	5,66 %	5,66 %	24,53 %	60,38 %
1978	1,82 %	7,27 %	0,0 %	3,64 %	30,91 %	56,36 %
1979	0,0 %	16,44 %	0,0 %	5,48 %	27,40 %	50,68 %
1980	1,30 %	10,39 %	16,88 %	10,39 %	20,78 %	40,26 %

TABEL A

AANMELDINGS VIR DIE JAAR 1980

Ras	Plaaslike gevalle				Ingevoerde gevalle				Plaaslike en ingevoerde gevalle				Voorkoassier per 1 000 van die bevolking (net plaaslike gevalle)			
	Pulmonêre tuberku-lose		Ander soorte		Pulmonêre tuberku-lose		Ander soorte		Pulmonêre tuberku-lose		Ander soorte		Pulmonêre tuberku-lose		Ander soorte	
	Geslag	Al die	Al die	soorte	Al die	Al die	soorte	soorte	Al die	Al die	soorte	soorte	Al die	Al die	soorte	Bevolking
Blank	M	23	19	42	1	1	2	24	20	44	0,06	0,05	0,11			
	V	12	23	35	2	1	3	14	24	38	0,03	0,06	0,09			
	TOTAAL	35	42	77	3	2	5	38	44	82	0,09	0,11	0,20			386 000
Kleurling	M	16	86	102	1	4	5	17	90	107	0,80	4,30	5,10			
	V	10	58	68	0	0	0	10	58	68	0,50	2,90	3,40			
	TOTAAL	26	144	170	1	4	5	27	148	175	1,30	7,20	8,50			20 000
Asiër	M	6	8	14	0	0	0	6	8	14	0,30	0,40	0,70			
	V	2	9	11	0	0	0	2	9	11	0,10	0,45	0,55			
	TOTAAL	8	17	25	0	0	0	8	17	25	0,40	0,85	1,25			20 000
Swart	M	477	187	664	36	4	40	513	191	704	1,48	0,58	2,06			
	V	144	186	330	10	8	18	154	194	348	0,45	0,58	1,02			
	TOTAAL	621	373	994	46	12	58	667	385	1052	1,93	1,16	3,09			322 000
Al die Niblanke	M	499	281	780	37	8	45	536	289	825	1,38	0,78	2,15			
	V	156	253	409	10	8	18	166	261	427	0,43	0,70	1,13			
	TOTAAL	655	534	1189	47	16	63	702	550	1252	1,81	1,48	3,28			362 000
Al die rasse	M	522	300	822	38	9	47	560	309	869	0,70	0,40	1,10			
	V	168	276	444	12	9	21	180	285	465	0,22	0,37	0,59			
	TOTAAL	690	576	1266	50	18	68	740	594	1334	0,92	0,77	1,69			748 000

TABEL C1

NIEBLANKE GEVALLE - PLAASLIK EN INGEVOER (AL DIE SOORTE)

OUDERDOMSGROEPE

	0-1 jaar		1-4 jaar		5-9 jaar		10-19 jaar		20-39 jaar		40 jaar en ouer		Totaal	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
1972	6	13	47	38	22	19	24	34	146	107	213	60	458	271
1973	9	14	41	49	21	23	13	19	166	86	216	58	466	249
1974	10	7	31	26	15	19	14	21	174	123	239	51	483	247
1975	16	10	37	35	15	12	10	22	191	82	238	53	507	214
1976	18	15	67	49	52	40	18	23	172	97	263	58	590	282
1977	5	9	67	60	55	45	16	23	196	131	233	61	572	329
1978	8	3	60	69	49	32	18	26	191	117	259	66	585	313
1979	10	10	78	89	79	57	24	32	198	117	228	66	617	371
1980	28	31	141	105	82	100	38	27	217	92	319	72	825	427

PERSENTASIE VAN TOTALE TUBERKULOSE-AANMELDINGS (ALLE RASSE)

	0-1 jaar	1-4 jaar	5-9 jaar	10-19 jaar	20-39 jaar	40 jaar en ouer
1972	2,6 %	11,7 %	5,6 %	7,9 %	34,7 %	37,4 %
1973	3,2 %	12,6 %	6,2 %	4,5 %	35,2 %	38,3 %
1974	2,3 %	7,8 %	4,7 %	4,8 %	40,7 %	39,7 %
1975	2,2 %	9,4 %	3,9 %	4,3 %	37,3 %	47,4 %
1976	3,8 %	13,3 %	10,6 %	4,7 %	30,9 %	36,8 %
1977	1,6 %	14,1 %	11,1 %	4,3 %	36,3 %	32,6 %
1978	1,3 %	14,0 %	8,5 %	4,8 %	34,1 %	37,4 %
1979	2,0 %	17,9 %	13,8 %	5,7 %	31,9 %	29,8 %
1980	4,71 %	19,65 %	14,64 %	5,19 %	24,68 %	31,23 %

SOORTE TUBERKULOSE

Die verskillende soorte van tuberkulose waarin die siekte homself gedurende die afgelope jaar voorgedoen het, word in die volgende tabel D aangetoon.

TABEL D

PLAASLIK

INGEVOER

	PLAASLIK			INGEVOER			Groot-totaal
	Blank	Nieblank	Totaal	Blank	Nieblank	Totaal	
(a) Longtuberkulose	35	667	702	3	47	50	752
(b) Primêre kompleks	25	489	514	0	10	10	524
(c) Miliêre Tuberkulose	1	10	11	0	1	1	12
(d) Tuberkuloseuse meningitis	0	5	5	0	1	1	6
(e) Tuberkuloseuse peritonitis	0	3	3	1	0	1	4
(f) Tuberkuloseuse perikarditis	0	0	0	0	0	0	0
(g) Tuberkulose van die klier	2	4	6	0	4	4	10
(h) Tuberkulose van die heup	0	0	0	0	0	0	0
(i) Tuberkulose van die geslagsorgane	0	2	2	0	0	0	2
(j) Tuberkulose van die rugwervels	1	2	3	0	0	0	3
(k) Tuberkulose van die niere	2	3	5	0	0	0	5
(l) Tuberkulose van die urinêre sisteem	3	1	9	0	0	0	9
(m) Tuberkulose van die pleura	2	0	2	1	0	1	3
(n) Tuberkulose van die been	1	1	2	0	0	0	2
(o) Tuberkuloseuse Lymphadinites	0	2	2	0	0	0	2
Totaal	77	1189	1266	5	63	68	1334

AANMELDINGSBRONNE

In die volgende tabel E word die bronne waaruit aanmeldings ontvang is, aangetoon. Die meerderheid gevalle word steeds deur ons eie tuberkuloseklinieke ontdek en aangemeld.

TABEL E

	PLAASLIK		INGEVOER		Totaal
	Blankes	Nieblankes	Blankes	Nieblankes	
Tuberkuloseklinieke	70	739	5	20	834
H.F. Verwoerd-hospitaal	1	2	0	0	3
Kalafong-hospitaal	0	403	0	40	443
Afsonderingshospitaal	5	0	0	0	5
Registrateur van Geboortes en Sterfgevälle	0	22	0	2	24
Private praktisyne	1	0	0	0	1
Ander bronne	0	23	0	1	24
Totaal	77	1 189	5	63	1 334

HOSPITALISASIE

Die getal gevalle wat in sanatoriums opgeneem is en hulle verspreiding in die verskillende hospitale word in die volgende tabel F aangetoon.

TABEL F

Inrigting	Blankes			Nieblankes			Groot-totaal
	M	V	Totaal	M	V	Totaal	
Knights-borshospitaal	0	0	0	41	16	57	57 (38
S.A.N.T.V.-nedersetting, Pretoria	0	0	0	96	27	123	123 (137)
Rietfontein-hospitaal	0	0	0	54	13	67	67 (78)
Oos Rand S.A.N.T.V.	0	0	0	0	1	1	1 (4)
Totaal	0	0	0	191	57	248	248 (257)

VERSPREIDING DEUR MIDDEL VAN KONTAK

Die volgende tabel toon die getal gevalle aan wat geskiedenis van kontak met bekende gevalle of van tuberkulose in hulle families, of albei, aangegee het:

Kontak met bekende gevalle	Familiëgeskiedenis	Kontak en familiëgeskiedenis	Totaal
27 (13)	569 (451)	0 (0)	596 (464)

1. KLINIEKBYWONING

A. KLINIEKBYWONING VAN PASIËNTE EN VERDAGTE GEVALLE (Kyk bladsy 31.)

I. KLINIEKBYWONING

A. Gegevens insake pasiënte en verdagte gevalle onder beheer en op behandeling en hulle kliniekbywoning

	Gesamte pasiënte onder beheer einde Desember 1980	Totale gesamte pasiënte beheer (1979-1980)	Gesamte ver- dagtes onder beheer einde Desember 1980	Totale ge- dagtes ver- beheer (1979-1980)	Gesamte wat daaglikse in- spuitings ont- vang per maand	Totale gesamte wat daaglikse inspuitings ont- vang (1979-1980)	Gesamte wat tablette moet inneem per maand	Totale gesamte wat tablette inneem (1979-1980)
1. Blankekliniek	221	251	100	124	19	150	168	207
2. Proesstraatkliniek								
(a) Swartse in die stad werksaam	1 671	1 678	157	508	132	137	1 171	1 481
(b) Asiërs	4	4	0	0	2	7	2	2
(c) Kleurlinge	14	17	1	2	14	14	10	14
3. Landiunkliniek (Asiërs)	48	58	12	29	5	16	24	53
4. Eerstestruktuurne (Kleurlinge)	322	322	105	160	13	88	185	226
5. Mamelodi-Oos-kliniek	640	647	190	205	69	431	402	436
6. Mamelodi-Wes-kliniek	652	678	245	257	73	557	355	405
7. Saulsvilliekliniek	348	432	56	74	33	229	119	212
8. Atteridgevillekliniek	422	443	64	84	43	294	238	273
TOTAL								
1980	4 342	4 530	930	1 443	403	1 923	2 674	3 309
1979	3 798	4 112	1 059	1 404	269	1 500	3 055	4 223
1978	3 543	3 798	753	999	285	1 557	2 860	5 878
1977	4 408	5 625	1 115	3 296	277	1 520	3 363	3 836
1976	5 370	8 308	3 669	5 967	226	869	3 573	5 945
1975	7 644	8 298	5 598	7 248	266	392	4 523	4 932
1974	7 726	8 229	6 618	7 682	228	453	3 795	5 490
1973	8 356	8 374	7 435	7 890	340	581	3 160	5 515
1972	7 881	9 288	6 919	8 138	339	509	3 858	5 024
1971	9 059	9 320	6 816	7 988	274	505	3 543	4 497
1970	8 904	10 127	7 550	7 291	226	1 264	3 223	4 218
1969	8 294	8 886	7 408	8 287	194	334	2 610	3 884
1968	7 560	8 488	5 090	5 606	200	399	2 417	3 631

B. PROESSTRAATKLINIEK

Hierdie kliniek beheer byna uitsluitlik pasiënte wat behandel word terwyl hulle werk. Die volgende tabel gee 'n uiteensetting van die pasiënte wat so behandel word:

	1975		1976		1977		1978		1979		1980	
	Ge- valle	Verdag- te ge- valle	Ge- valle	Verdag- te ge- valle	Ge- valle	Verdag- te ge- valle	Ge- valle	Verdag- te ge- valle	Ge- valle	Verdag- te ge- valle	Ge- valle	Verdag- te ge- valle
Swartmense in die stad werksaam	2 347	2 253	2 371	2 255	1 683	1 754	1 471	240	1 520	385	1 678	508

Uitstekende samewerking word van plaaslike owerhede rondom Pretoria verkry en gevalle word oor en weer verwys ten einde hulle behandeling nie te onderbreek nie.

C. TOESTROMINGSBEHEERKLINIEK

By Toestromingsbeheer word alle Swartmense wat werk soek aan 'n X-straalondersoek van die borskas onderwerp. Die gevalle en verdagte gevalle van longtuberkulose wat so ontdek word, word deur die Toestromingsbeheerkliniek na die nabygeleë Proesstraatkliniek verwys.

II. X-STRAALDIENSTE

Altesaam 74 339 X-straalopnames is vanjaar vir diagnostiese en kontroledoeleindes gemaak, en wel soos volg:

	1980	1979	1978	1977	1976	1975
(a) Mobiele X-straal eenhede (100 mm)	51 937	29 584	28 972	28 461	30 540	34 675
(b) Toestromingsbeheer (100 mm)	21 712	25 749	17 445	25 076	31 648	34 954
(c) H.F. Vervoerd-hospitaal	40	57	20	24	473	1 050
(d) Westfort-hospitaal	650	601	828	719		
Totaal	74 339	56 896	48 265	54 280	62 661	70 679

'n Volledige uiteensetting van die X-straalopnames is soos volg:

A. MOBIELE X-STRAALEENHEDE

Die Gesondheidsafdeling beskik oor twee mobiele X-straal eenhede.

1. Blanke gevalle - kontakte en verdagte gevalle by klinieke	2 716
2. Blankes wat vrywillig gekom het vir 'n X-straalfoto	1 195
3. Blankes by besighede en fabriek	6 851
4. Blankes in diens van die Stadsraad van Pretoria	0
5. Mediese studente	181
6. Nieblanke gevalle - kontakte en verdagte gevalle by klinieke:	
(a) Swart	16 316
(b) Kleurling	2 624
(c) Asiër	780
7. Nieblankes wat hulle vrywillig aangemeld het vir 'n X-straalfoto:	
(a) Swart	2 810
(b) Kleurling	468
(c) Asiër	375
8. Nieblankes by besighede en fabriek	16 673
9. Nieblankes in diens van die Stadsraad van Pretoria	0
10. Tshepong (S.A.H.T.V.-nederstelling, Pretoria)	948

Altesaam 51 937 deur mobiele eenhede plus 690 wat vir die neem van groot plate verwys is.

B. VASTE EENHEID BY TOESTROMINGSBEHEER

'n Volledige uiteensetting van die plate wat geneem is, is soos volg:

1. Voornemende werkers	18 951
2. Nieblankes in diens van die Stadsraad van Pretoria wat die buitepatiënt klinieke te Proesstraat bygewoon het	1 883
3. X-straalopnames geneem namens	
(a) Staatsdepartement van Gesondheid (Streekstuberkulosebeampte, Suid-Transvaal)	0
(b) Transvaalse Raad vir die Ontwikkeling van Buitestadellike Gebiede	0
(c) Voortrekkerhoogte (Departement van Verdediging)	59
(d) Departement van Gevangnisse	129
(e) S.A. Polisie	496
(f) S.A. Polisiekollege	0
(g) Ukor	194
TOTAAL	21 712
C. (a) H.F. VERWOERD-HOSPITAAL : GROOT PLATE	40
(b) WESTFORT-HOSPITAAL : GROOT PLATE	650

Slegs persone van wie X-straalfoto's nie deur die mobiele X-straaleenheid geneem kan word nie (byvoorbeeld babas, gebreklukes, ens.) word vir die neem van groot plate na die H.F. Verwoerd- of Westfort-hospitaal verwys. Al ons X-straalkontrolewerk word deur middel van 100 mm-opnames gedoen.

D. UITEENSETTING VAN X-STRALE WAT VAN GEVALLE, KONTAKTE EN VERDAGTE GEVALLE BY DIE VERSKILLENDE TUBERKULOSE-KLINIEKE GENEEM IS

(Kyk bladsy 34.)

E. KONTAKTE

Van die altesaam 7.599 kontakte van wie X-straalplate gedurende 1980 geneem is, het 408 (d.w.s. 5,36 %) longtuberkulose gehad. (1979 : 4,14 %, 1978 : 2,33 %, 1977 : 3,43 %, 1976 : 3,39 %, 1975 : 1,36 %)

F. X-STRAALVELDOTGTE BY BESIGHEDE, FABRIEKE, ENS.

Daar is vanjaar van 6 851 (4 624) Blankes en 16 673 (5 472) Nieblankes by 65 (102) besighede, fabriekes ens., X-straalplate geneem.

Die neem van X-strale by besighede, fabriekes, ens. is beslis van waarde. Nie alleen word nuwe gevalle ontdek en ou gevalle weer onder kontrole gebring nie, maar daar word ook belangrike voorligtingswerk gedoen.

D. UITENSETTING VAN X-STRAALPLATE WAT VAN GEVALLE, KONTAKTE EN VERDAGTE GEVALLE BY DIE VERSKILLENDE TUBERKULOSEKLINIEKE GENEEM IS

	GEVALLE				KONTAKTE				VERDAGTES																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
	Bekende gevalle				Nuwes				Ouës				Nuwes				Ouës																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	Nor- maal	Ver- teer	Sta- ties	Ver- sleg	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag	Nor- maal	Ver- dag

GR001TOTAAL : 17 424

G. PERSONE WAT HULLE VRYWILLIG VIR 'N X-STRAALONDERSOEK AANGEMELD HET

1 195 Blankes, 375 Asiërs, 468 Kleurlinge en 2 810 Swartmense het hulle vrywillig vir 'n X-straalondersoek aangemeld. Die uitslag was soos volg:

	Totaal	Normaal	Gevalle	Verdag
Blank	1 195	1 172	3	20
Asiër	375	365	4	7
Kleurling	468	358	54	56
Swart	2 810	2 478	177	155

H. GEVALLE ONTDEK AS GEVOLG VAN X-STRAALONDERSOEK

Van die 1 266 nuwe gevalle van longtuberkulose wat gedurende die jaar aangemeld is, is 1 253 deur middel van X-straalopnames van die borskas ontdek en dit is gelyk aan 1,88 % (1979 : 2,262 %, 1978 : 1,005 %, 1977 : 1,132 %, 1976 : 1,51 %, 1975 : 1,14 %) van altesaam 66 820 X-straalplate wat geneem is met die doel om gevalle van tuberkulose te ontdek. Hierdie syfer van 66 820 sluit nie roetine-opnames van bekende gevalle in nie.

III. TUBERKULIENTOETSE

Altesaam 38 396 Tuberkulientoetse is gedurende die jaar gedoen. Van hierdie getal het 30 836 persone na 'n week teruggekeer vir die lees van die toetse.

Die tabel op bladsy 36 verteenwoordig die resultate van al die Tuberkulientoetse wat gedurende die jaar deur die Afdeling gedoen is.

IV. BCG TOEGEDIEN

Hieronder volg 'n uiteensetting van die groepe aan wie BCG toegedien is.

(a) Pasgeborenes (kraaminrigtings)

Blank	5 573	
Swart	6 942	
Asiër	208	Totaal 12 987
Kleurling	264	

(b) Voorskoolse kinders (insluitende kleuterskole)

Blank	575	
Swart	3 928	
Asiër	380	Totaal 5 478
Kleurling	595	

(c) Skoolkinders

Blank	10 570	
Swart	12 170	
Asiër	324	Totaal 23 708
Kleurling	644	

(d) Ander persone (kontakte, werknemers by sekere besighede, ens.)

Blank	1 309	
Swart	1 905	
Asiër	17	Totaal 3 484
Kleurling	253	

TUBERKULIENTOETSE WAT GEDURENDE 1980 DEUR DIE AFDELING GEDOEN IS

Ouderdomsgroep	Totaal	Geen vorige B.C.G. nie		Vorige B.C.G.	
		Positief	Negatief	Positief	Negatief
3 maande tot 5 jaar :	Blank	3	150	13	186
	Swart	38	501	84	2 708
	Aziër	1	2	3	70
	Kleurling	0	0	10	415
6 tot 10 jaar :	Blank	28	1 310	79	4 465
	Swart	190	1 245	306	1 789
	Aziër	0	177	2	217
	Kleurling	10	182	19	338
11 tot 15 jaar :	Blank	129	1 348	390	1 930
	Swart	146	794	454	2 273
	Aziër	0	1	9	110
	Kleurling	34	106	79	178
16 tot 20 jaar :	Blank	95	563	233	813
	Swart	65	242	250	714
	Aziër	1	110	6	13
	Kleurling	9	6	28	70
21 jaar en ouer :	Blank	209	708	245	534
	Swart	648	1 199	468	760
	Aziër	8	25	5	24
	Kleurling	104	117	5	37
TOTAAL	38 396	1 718	8 786	2 688	17 644

Ous altesame

	1980	1979	1978	1977	1976	1975	1974	1973
Blank	18 027	14 443	12 340	15 808	18 333	18 868	17 610	17 768
Swart	24 945	20 834	32 934	9 513	13 060	17 133	23 263	20 201
Asiër	929	1 038	1 041	841	822	1 168	1 484	1 554
Kleurling	1 756	2 124	1 423	1 026	841	982	2 337	1 542
Groototaal	45 657	38 439	47 738	29 165	33 056	38 151	44 694	41 065

V. SPUTUMS

	Totaal	Negatief	Positief	Negatief na positief	Positief na negatief	Hardnekkig positief
1. Blank	435	383	52	4	7	4
2. Proesstraatkliniek						
a. Swartmense in die stad werksaam	2 020	1 894	126	48	60	27
b. Asiër	7	6	1	0	0	0
c. Kleurling	21	21	0	0	0	0
3. Laudiumkliniek (Asiër)	64	61	3	1	2	0
4. Eersterustkliniek (Kleurling)	355	338	17	3	0	0
5. Mamelodi-Oos-kliniek	1 021	956	65	19	47	4
6. Mamelodi-Wes-kliniek	1 826	1 739	87	47	19	3
7. Saulsvillekliniek	498	468	30	9	5	4
8. Atteridgevillekliniek	862	824	38	19	15	10
Totaal : 1980 :	7 109					

VI. RANTSOENE

	Munisipale rantsoene	Melk
Swart :	Getal pasiënte 122	548
Asiër :	Getal pasiënte 0	15
Kleurling :	Getal pasiënte 13	133
Totaal	135	696

VII. HUISBESOEKE

1. Blankes

Die Suster in beheer van die Blanketuberkulosekliniek het gedurende die jaar altesaam 559 besoeke aan pasiënte gebring om aan hulle inspuittings en tablette tuis toe te dien. Hierbenewens het sy 168 besoeke afgelê met die doel om pasiënte te ontbied of om vas te stel wat van pasiënte geword het, ens.

Susters het 282 besoeke aan skole gebring en 158 firmas besoek.

2. Nieblankes

Hieronder volg 'n uiteensetting van die besoeke wat by tuberkulosepatiënte tuis of by die werk afgelê is :

Swartmense

(a) Blanke Susters : Insputings by werk : 5 866

Dit is gevalle van Swart tuberkuloselyers wat werk en waar besoek by die Blanke werkgewers afgelê word met die doel om insputings en ander behandeling toe te dien.

(b) Swartverpleegsters : 5 363 Huisbesoeke
Geen besoeke by skole

(c) Swartbodes : 10 321

Asiërs

(a) Blanke Susters : Insputings by werk : 0

(b) Verpleegster alleen : 916

(c) Bode : 264

Kleurlinge

(a) Blanke Susters : Insputings by werk : 0

(b) Verpleegster alleen : 1 537

(c) Bode : 478

Die besoeke wat die Swart-, Asiër- en Kleurlingverpleegsters by die huise van tuberkuloselyers aflê, is met die doel om die huislike omstandighede van pasiënte te ondersoek, gesondheidsvoorligtingswerk te doen, moeilike pasiënte te oorrede om hulle behandeling te ondergaan, toe te sien dat kontakte of pasiënte hulle middels inneem, ens.

Die werk van die bodes is hoofsaaklik om briewe, waardeur pasiënte na die kliniek ontbied word, by die huise van tuberkuloselyers af te lewer.

VIII.BESOEKE AAN WERKGEWERS

Daar is vanjaar voortgegaan met sistematiese besoeke aan besighede en fabriek met die doel om gesondheidsvoorligtingswerk te doen en om terselfdertyd die volgende vas te stel:

Is die werkgewer bereid om:

1. die tuberkuloselyer weer in diens te neem?
2. die pasiënt daaglik, of 3 maal per week, na die kliniek vir insputings te stuur?
3. self tablette, wat voorsien word, aan die pasiënt uit te deel?
4. insputings by die werk te laat toedien in gevalle waar die besigheid of fabriek self 'n verpleegster in diens het?
5. die pasiënt met tussenpose en sonder finansiële verlies, na die kliniek te stuur vir dokters- of X-straal-klinieke?

Alle inligting wat so verkry word, word aangeteken en afskrifte daarvan word aan alle klinieke beskikbaar gestel sodat die geneesheer in staat is om die geskikte behandeling vir elke pasiënt te reël.

Tuberkulose sal eers doeltreffend bestry kan word as gesondheidsvoorligting op groter skaal aangepak kan word om die gesin self en veral, met ons groot getalle Nieblanke lyers, die werkgewers te bereik. Die nuwe benadering van die Staatsgesondheidsdepartement sal dan eers ten volle uitgevoer kan word as voldoende gesondheidsvoorligting die werkgewer kan bereik en sy samewerking verseker kan word. Daar is beslis in Pretoria bevind dat die rede waarom werkgewers nie altyd saamgewerk het in die bestryding van tuberkulose nie, nie onwilligheid was nie, maar wel onkunde insake die siektebeeld en behandeling van tuberkulose.

Die besoeke aan besighede en fabriek is van onskatbare waarde. Nie alleen ondervind ons nou uitstekende samewerking deur werkgewers nie, maar is ons nou in staat om veel minder pasiënte te hospitaliseer as in 1970.

Getal pasiënte opgeneem in hospitale

(1972 : 279, 1973 : 238, 1974 : 231, 1975 : 212, 1976 : 308, 1977 : 212, 1978 : 275, 1979 : 257, 1980 : 337)

IX. TSHEPONG - SUID-AFRIKAANSE NASIONALE TUBERKULOSEVERENIGING SE NEDERSETTING TE PRETORIA

Daar is 135 beddens vir tuberkuloselyers in die Nedersetting beskikbaar. Die mediese dekking word in sy geheel verskaf deur twee Geneeskundige Beampes van die Stadsraad se Gesondheidsafdeling.

Die hospitaal word twee maal per week deur een van die Geneeskundige Beampes besoek, en tydens die besoeke word alle probleemgevälle gesien, klagtes aangehoor en hulp verleen met maatskaplike probleme. Verder word alle nuwe gevälle aan 'n deeglike mediese ondersoek onderwerp en die dokter besluit oor behandeling, duur van verblyf, ens. Een maal 'n week word daar ook X-straalfoto's gelees van pasiënte wat hulle vir opvolgplate aangemeld het. Tydens die sessie word pasiënte na buiteklinieke oorgeplaas.

Die volgende verslag gee 'n aanduiding van die hoeveelheid werk wat verrig word:

Tydperk : Januarie 1980 - Desember 1980

Getal pasiënte in die Nedersetting op 1 Januarie 1980 121 (124)
(Pretoriase Munisipaliteit : 56 (61), Buitestedelik : 9 (17), ander gebiede : 56 (46))

Getal pasiënte in die Nedersetting op 31 Desember 1980 111 (121)
(Pretoriase Munisipaliteit : 29 (56), Buitestedelik : 7 (9), ander gebiede : 75 (56))

Getal pasiënte gedurende die jaar opgeneem : 1.1.80 tot 31.12.80 454 (467)
(Pretoriase Munisipaliteit : 173 (234), Buitestedelik : 31 (43), ander gebiede : 250 (190))

Getal pasiënte gedurende die jaar ontslaan : 1.1.80 tot 31.12.80 479 (470)
(Pretoriase Munisipaliteit : 204 (239), Buitestedelik : 33 (51), ander gebiede : 242 (180))

Dié wat ontslaan is, kan soos volg ingedeel word:

Oorgeplaas na Kalafong-hospitaal vir ander behandeling	5 (14)
Huis toe - verbeter	397 (390)
Om dissiplinêre redes	10 (3)
Oorlede	6 (8)
Gedros	13 (20)
Oorgeplaas na ander tuberkulose-hospitale as gevolg van verslegting van toestand	53 (38)
Die getal pasiënt-dae vir die jaar was	42 042 (40 875)

S.A.N.T.V. se hoofkantoor het die dienste van 'n Swart gesondheidsvoorligter aan die plaaslike tak van hierdie Vereniging beskikbaar gestel. Hy verrig waardevolle diens, en sedert sy aanstelling is die pasiënte in die algemeen gesproke saamwerkend. Daar word ook met welslae by sekere doktersklinieke van sy dienste gebruik gemaak.

STERFTES

Die getal sterftes wat gedurende die jaar onder tuberkulosepasiënte voorgekom het, word in die volgende tabel aangedui:

	Blankes	Nieblankes	Totaal
Gevalle wat gedurende 1980 aangemeld is en ook gedurende 1980 gesterf het	5 (8)	84 (57)	89 (65)
Gevalle wat voor 1980 aangemeld is, maar wat gedurende 1980 gesterf het	10 (9)	66 (78)	76 (87)
Totaal	15 (17)	150 (135)	165 (152)

Die sterftesyfers van die verskillende rasse en geslagte asook die sterftesyfer per 1 000 van die bevolking word in die volgende tabel 6 aangedui. (Kyk bladsy 41.)

Die stadia waarin sterfte voorgekom het in die gevalle van tuberkulose wat gedurende die jaar aangemeld en oorlede is, was soos volg:

	Blankes		Nieblankes		Totaal	% totale sterftes
	M	V	M	V		
Sterftes voor aanmelding	0 (1)	0 (0)	24 (5)	5 (5)	29 (11)	32,58% (16,9%)
Gesterf binne 1 maand na aanmelding	2 (3)	0 (0)	33 (22)	5 (8)	40 (33)	44,94% (50,8%)
Gesterf binne 1-3 maande na aanmelding	1 (1)	0 (1)	7 (9)	5 (2)	13 (13)	14,61% (20,0%)
Gesterf binne 3-6 maande na aanmelding	0 (2)	0 (0)	0 (3)	0 (3)	0 (8)	0,0% (12,3%)
Gesterf binne 6-12 maande na aanmelding	2 (0)	0 (0)	3 (0)	2 (0)	7 (0)	7,87% (0,0%)
Totaal	5 (7)	0 (1)	67 (39)	17 (18)	89 (65)	

TABEL 6

STERFTES 1980 (OU EN NIEME GEVALLE)

	Plaaslike gevalle				Ingevoerde gevalle				Plaaslike en ingevoerde gevalle bevolking (plaaslike gevalle)				Sterftes per 1 000 van die			
	Pulmonêre		Ander		Pulmonêre		Ander		Pulmonêre		Ander		Pulmonêre		Ander	
	Geslag	tuber- kulose	Al die soorte	Al die soorte	tuber- kulose	Al die soorte	tuber- kulose	Al die soorte	tuber- kulose	Al die soorte	tuber- kulose	Al die soorte	tuber- kulose	Al die soorte	tuber- kulose	Al die soorte
Blankes	M	11	1	12	1	0	1	12	1	13	0,03	0,003	0,033	0,003	0,0	0,005
	V	2	0	2	0	0	0	2	0	2	0,005	0,0	0,005	0,0	0,005	0,005
TOTAAL		13	1	14	1	0	1	14	1	15	0,033	0,003	0,038	0,003	0,0	0,010
Kleurlinge	M	4	0	4	0	0	0	4	0	4	0,20	0	0,20	0	0,20	0,20
	V	1	0	1	0	0	0	1	0	1	0,05	0	0,05	0	0,05	0,05
TOTAAL		5	0	5	0	0	0	5	0	5	0,25	0	0,25	0	0,25	0,25
Asiërs	M	3	0	3	0	0	0	3	0	3	0,15	0	0,15	0	0,15	0,15
	V	0	0	0	0	0	0	0	0	0	0,00	0	0,00	0	0,00	0,00
TOTAAL		3	0	3	0	0	0	3	0	3	0,15	0	0,15	0	0,15	0,15
Suurt	M	99	4	103	7	2	9	106	6	112	0,31	0,01	0,32	0,01	0,32	0,32
	V	20	3	23	3	0	3	23	3	26	0,06	0,009	0,07	0,009	0,07	0,07
TOTAAL		119	7	126	10	2	12	129	9	138	0,37	0,03	0,39	0,03	0,39	0,39
Alle Nieblankes ...	M	106	4	110	7	2	9	113	6	119	0,29	0,01	0,30	0,01	0,30	0,30
	V	21	3	24	3	0	3	24	3	27	0,06	0,008	0,07	0,008	0,07	0,07
TOTAAL		127	7	134	10	2	12	137	9	146	0,35	0,02	0,37	0,02	0,37	0,37
Alle rasse	M	117	5	122	8	2	10	125	7	132	0,16	0,007	0,16	0,007	0,16	0,16
	V	23	3	26	3	0	3	26	3	29	0,03	0,004	0,04	0,004	0,04	0,04
TOTAAL		140	8	148	11	2	13	151	10	161	0,19	0,011	0,21	0,011	0,21	0,21

STERFTES IN OUDERDSGROEPE

	0 - 1 jaar		1-5 jaar		6-10 jaar		11-15 jaar		16-20 jaar		21-30 jaar		31-40 jaar		41-50 jaar		50 jaar en ouer		Totaal
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M V
Blankes	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2	0	11	1	13 2
Nieblankes	0	1	0	2	0	0	1	1	1	0	11	5	20	5	28	3	58	10	119 27
TOTAAL	0	1	0	2	0	0	1	1	1	0	11	6	20	5	30	3	69	11	132 29

VENERIESE SIKTES

DIENTE AAN BLANKES

Die klinieke vir veneriese siektes word in die Kliniekgebou vir Besondere Siektes op die terrein van die H.F. Verwoerd-hospitaal gehou.

Daar word vier sessies per week vir mans en vrouens gehou, insluitende 'n sessie in die laat namiddag.

Die personeel, wat ook ander pligte uitvoer, bestaan uit 'n Geneeskundige Beampte en 'n Suster. Alle sessies vir Blankes word waargeneem deur die Geneeskundige Beampte wat ook die veneriese klinieke te Proesstraat behartig.

Die volgende tabel toon die getal gevalle wat die kliniek in die loop van die jaar besoek het:

Diagnose	Nuwe gevalle		Bywoning - nuwe en ou gevalle gesamentlik :	
	Mans	Vroue	Mans	Vroue
Seronegatiewe primêre sifilis	1 (3)	0 (1)	1 (12)	0 (1)
Seropositiewe primêre sifilis	1 (6)	0 (0)	5 (19)	0 (3)
Sekondêre sifilis	1 (2)	0 (2)	3 (6)	1 (1)
Tersiêre sifilis	0 (3)	0 (1)	0 (4)	0 (2)
Latente sifilis	1 (3)	2 (1)	4 (20)	7 (25)
Neurosifilis	0 (0)	0 (0)	0 (0)	0 (0)
Aangebore sifilis (onder 1 jaar)	0 (0)	0 (0)	0 (0)	0 (0)
Aangebore sifilis (bo 1 jaar)	0 (0)	0 (0)	0 (0)	0 (0)
Totaal Sifilisgevalle	4 (17)	2 (5)	13 (61)	8 (32)
Gonorrœe	17 (18)	1 (1)	52 (56)	3 (2)
Ulcus molle	0 (0)	0 (0)	0 (0)	0 (0)
Vulvovaginitis	0 (0)	0 (0)	0 (0)	0 (0)
Veneriese vratte	2 (3)	1 (2)	5 (4)	4 (4)
Nie-spesifieke urethritis	28 (26)	0 (1)	170 (199)	4 (5)
Nie-veneries	45 (35)	34 (11)	126 (154)	91 (65)
Linfogranulosa Venereum	1 (0)	0 (0)	4 (0)	0 (0)
GROOTTOTAAL	97 (99)	38 (20)	370 (474)	110 (108)

DIENTE AAN NIEBLANKES

Die klinieke vir Nieblankes word by verskeie sentrums gehou. Die hoofkliniek, verreweg die grootste, word by die munisipale kliniek te Proesstraat gehou. Sessies word ook by die Poliklinieke in Atteridgeville, Mamelodi en by Eersterust gehou.

Die personeel van die Hoofkliniek bestaan uit 'n Geneeskundige Beampte, 'n Blanke Suster, twee Nieblanke Susters en twee Nieblanke helpers. Al die amptenare is ook by ander klinieke behulpsaam.

Die Geneeskundige Beampte wat die Siektaparade te Proesstraatkliniek behartig, neem al vier die sessies by die Hoofkliniek waar, terwyl die sessies by die ander sentrums deur ander geneeshere van die Afdeling waar-geneem word. Daar is dus altesaam sewe sessies per week vir Nieblankes in Pretoria en drie sentrums in Nieblankewoongebiede waar pasiënte hulle elke dag (behalwe Saterdag en Sondag) vir behandeling kan aanmeld. Die sessies duur ongeveer twee uur.

Die opsporing van kontakgevalle van Nieblankes wat die Sentrale Kliniek besoek, wat hoofsaaklik bedoel is vir huisbadiendes wat weg van hulle normale gesinskring lewe, is soms moeilik vanweë die toevallige aard van die omgang, die aantal kere wat gevalle met verskillende persone omgang gehad het en die moeilikheid wat ondervind word om 'n adres van enige aard te verkry. 'n Aansienlike aantal pasiënte reageer egter op ons versoek om die kontakte aan te raai om self ook die klinieke by te woon.

By die Poliklinieke in die Swartwoongebiede het ons meer welslae behaal, hoofsaaklik omdat sommige van die faktore wat in die vorige paragraaf vermeld is, nie in dieselfde mate in hierdie gebiede aanwesig is nie.

Afwesigheid of onderbreking van behandeling skep nie 'n groot probleem nie omdat die Swartman, sodra hy eers met die behandeling begin het, meestal al te gewillig is om hom aan te meld totdat hy genees is. As hy nie meer opdaag nie, is dit meestal weens omstandighede en nie uit vrye keuse nie.

Die volgende tabelle dui die getal pasiënte aan wat gedurende die verslagjaar die verskillende klinieke besoek het.

SENTRALE OF HOOFKLINIEK :

Diagnose	Nuwe gevalle		Bywoning - nuwe en ou gevalle gesamentlik :	
	Mans	Vroue	Mans	Vroue
Seronegatië primêre sifilis	60 (27)	7 (2)	138 (63)	27 (4)
Seropositiewe primêre sifilis	68 (185)	6 (57)	158 (297)	17 (83)
Sekondêre sifilis	46 (96)	24 (42)	93 (233)	82 (182)
Tersiêre sifilis	0 (0)	0 (1)	0 (2)	1 (2)
Latente sifilis	48 (174)	70 (259)	145 (977)	187 (1 104)
Neurosifilis	0 (0)	0 (0)	0 (0)	0 (0)
Aangebore sifilis (onder 1 jaar)	1 (3)	3 (2)	1 (7)	6 (3)
Aangebore sifilis (bo 1 jaar)	0 (1)	0 (0)	0 (1)	0 (0)
Totale Sifilisgevalle	223 (486)	110 (363)	535 (1 580)	320 (1 378)
Gonorrée	573 (623)	32 (82)	1 439 (2 870)	78 (197)
G.C.-vulvovaginitis	0 (3)	0 (0)	0 (4)	0 (0)
Ulcus molle	37 (0)	3 (2)	116 (0)	5 (4)
Linfogranuloma venereum	44 (6)	2 (0)	117 (9)	8 (0)
Veneriese vratte	24 (19)	13 (17)	60 (47)	33 (49)
Nie-veneries	496 (677)	658 (1 142)	1 019 (2 059)	1 453 (2 803)
Nie-spesifieke urethritis	407 (294)	0 (0)	998 (396)	0 (0)
GROOTTOTAAL	1 804 (2 108)	818 (1 606)	4 284 (6 965)	1 897 (4 431)
			Mans	Vroue
Getal gevalle wat aan twee of meer veneriese siektes ly			70	5
Getal gevalle wat op proef ontslaan is			1 291	459
Getal gevalle wat as volkome genees ontslaan is			879	458

POLIKLINIEK : MAMELODI :

Diagnose	Nuwe gevalle		Bywoning - nuwe en ou gevalle gesamentlik :	
	Mans	Vroue	Mans	Vroue
Seronegatiëve primêre sifilis	6 (3)	5 (8)	16 (8)	12 (37)
Seropositiewe primêre sifilis	66 (51)	62 (49)	134 (178)	137 (104)
Sekondêre sifilis	21 (63)	61 (137)	51 (83)	136 (261)
Tersiêre sifilis	0 (0)	0 (0)	0 (0)	0 (0)
Latente sifilis	73 (46)	85 (51)	196 (287)	203 (174)
Aangebore sifilis (onder 1 jaar)	7 (2)	21 (2)	14 (4)	41 (6)
Aangebore sifilis (bo 1 jaar)	0 (0)	0 (0)	0 (0)	0 (2)
Totale Sifilisgevalle	173 (165)	234 (247)	411 (560)	529 (584)
Gonorrëe	117 (1)	21 (0)	306 (2)	38 (1)
Nie-veneries	116 (49)	148 (54)	248 (345)	301 (155)
Veneriese vratte	2 (7)	5 (2)	5 (9)	12 (19)
Nie-spesifieke urethritis	49 (47)	0 (9)	122 (516)	0 (10)
Ulcus molle	2 (0)	1 (0)	5 (0)	2 (0)
GROOTTOTAAL	459 (269)	409 (312)	1 097 (1 432)	382 (769)

	Mans	Vroue
Getal gevalle wat aan twee of meer veneriese siektes ly	18	9
Getal gevalle wat op proef ontslaan is	158	121
Getal gevalle wat as volkome genees ontslaan is	180	121

KLINIEK : ATTERIDGEVILLE :

Diagnose	Nuwe gevalle		Bywoning - nuwe en ou gevalle gesamentlik :	
	Mans	Vroue	Mans	Vroue
Seronegatiëve primêre sifilis	37 (6)	20 (6)	95 (37)	83 (31)
Seropositiewe primêre sifilis	16 (9)	13 (8)	62 (24)	43 (87)
Sekondêre sifilis	3 (7)	4 (16)	12 (32)	15 (107)
Tersiêre sifilis	0 (2)	0 (0)	3 (4)	4 (4)
Latente sifilis	28 (15)	54 (76)	103 (432)	207 (973)
Neurosifilis	0 (0)	0 (1)	0 (0)	0 (2)
Aangebore sifilis (onder 1 jaar)	16 (45)	11 (36)	65 (673)	64 (411)
Aangebore sifilis (bo 1 jaar)	0 (1)	3 (4)	0 (11)	14 (16)
Totale Sifilisgevalle	100 (85)	105 (147)	340 (1 213)	430 (1 631)
Gonorrëe	169 (77)	65 (35)	586 (431)	223 (181)
Linfogranuloma venereum	0 (0)	0 (0)	0 (0)	0 (0)
Veneriese vratte	1 (2)	2 (2)	2 (4)	3 (6)
Nie-veneries	87 (31)	80 (61)	224 (132)	233 (186)
Nie-spesifieke urethritis	40 (3)	0 (1)	94 (9)	0 (17)
Ulcus molle	1 (0)	0 (0)	3 (0)	0 (0)
GROOTTOTAAL	398 (198)	260 (246)	1 249 (1 789)	889 (2 021)

	Mans	Vroue
Getal gevalle wat aan twee of meer veneriese siektes ly	12	6
Getal gevalle wat op proef ontslaan is	313	233
Getal gevalle wat as volkome genees ontslaan is	356	240

KLINIEK : EERSTERUST :

Diagnose	Nuwe gevalle		Bywoning - nuwe en ou gevalle gesamentlik :	
	Mans	Vroue	Mans	Vroue
Seronegatiewe primêre sifilis	4 (3)	0 (7)	14 (5)	9 (11)
Seropositiewe primêre sifilis	15 (19)	16 (69)	66 (54)	162 (244)
Sekondêre sifilis	0 (9)	0 (19)	5 (9)	15 (126)
Tersiêre sifilis	0 (0)	0 (0)	0 (0)	3 (0)
Latente sifilis	12 (18)	20 (47)	47 (42)	162 (394)
Aangebore sifilis (onder 1 jaar)	2 (2)	2 (3)	10 (14)	13 (19)
Aangebore sifilis (bo 1 jaar)	0 (0)	0 (2)	0 (0)	0 (7)
Neurosifilis	1 (0)	0 (0)	3 (0)	0 (0)
Totale Sifilisgevalle	34 (51)	38 (147)	145 (124)	354 (801)
Gonorrœe	2 (0)	0 (0)	5 (0)	0 (0)
Veneriese vratte	0 (1)	0 (1)	0 (2)	0 (2)
Nie-veneries	2 (9)	0 (3)	3 (32)	5 (36)
Nie-spesifieke urethritis	0 (2)	0 (0)	0 (4)	0 (0)
GROOTTOTAAL	38 (63)	38 (151)	153 (162)	359 (839)

	Mans	Vroue
Getal gevalle wat aan twee of meer veneriese siektes ly	0	0
Getal gevalle wat op proef ontslaan is	16	38
Getal gevalle wat as volkome genees ontslaan is	3	5

VOORGEBOORTE-SIFILISBEHANDELING

Alle vroue wat die munisipale klinieke vir voorgeboortesorg besoek, word serologies vir sifilis getoets. Normaalweg word diegene wat dit nodig het, by die klinieke behandel tensy spesiale omstandighede, hetsy diagnosties of andersins, dit vereis dat hulle na die klinieke vir veneriese siektes moet gaan.

Na die bevalling word die behandeling van hierdie gevalle en hul babas by die klinieke vir veneriese siektes voortgesit.

Die volgende besonderhede toon die getal voorgeboortelike gevalle aan wat by die verskillende klinieke teen sifilis behandel is:

	Stadium van swangerskap		
	1-3 maande	4-6 maande	7-9 maande
BLANK			
Getal swanger vroue wat serologies getoets is	189 (147)	172 (126)	56 (19)
Getal wie se reaksies positief of twyfelagtig was	16 (0)	6 (0)	0 (0)
Getal wat voorheen (by enige kliniek) behandel is	0 (0)	1 (0)	0 (0)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	3 (0)	1 (0)	0 (0)

Stadium van swangerskap

1 - 3 maande

4 - 6 maande

7 - 9 maande

NIEBLANK

ATTERIDGEVILLEKLINIEK

Getal swanger vroue wat serologies getoets is	80 (114)	429 (479)	229 (209)
Getal wie se reaksies positief of twyfelagtig was	35 (19)	96 (97)	41 (48)
Getal wat voorheen (by enige kliniek) behandel is	1 (4)	12 (8)	6 (4)
Getal wat eerste reeks behandeling tydens swangerskap ontvang	8 (11)	44 (46)	17 (20)

NAMELODIKLINIEK

Getal swanger vroue wat serologies getoets is	391 (297)	2 011 (1 560)	454 (804)
Getal wie se reaksies positief of twyfelagtig was	110 (101)	512 (220)	116 (173)
Getal wat voorheen (by enige kliniek) behandel is	6 (11)	54 (46)	21 (17)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	55 (47)	428 (251)	73 (101)

PROESSTRAATKLINIEK

Getal swanger vroue wat serologies getoets is	73 (121)	940 (791)	183 (342)
Getal wie se reaksies positief of twyfelagtig was	7 (16)	49 (145)	15 (97)
Getal wat voorheen (by enige kliniek) behandel is	0 (0)	0 (1)	0 (0)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	10 (16)	49 (143)	27 (49)

SAULSVILLEKLINIEK

Getal swanger vroue wat serologies getoets is	101 (91)	697 (597)	397 (671)
Getal wie se reaksies positief of twyfelagtig was	25 (28)	149 (106)	68 (113)
Getal wat voorheen (by enige kliniek) behandel is	2 (0)	12 (2)	13 (9)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	9 (11)	91 (67)	39 (87)

LAUDIUMKLINIEK

Getal swanger vroue wat serologies getoets is	113 (91)	165 (146)	39 (72)
Getal wie se reaksies positief of twyfelagtig was	9 (1)	2 (2)	2 (0)
Getal wat voorheen (by enige kliniek) behandel is	0 (0)	0 (0)	0 (0)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	2 (1)	2 (2)	1 (0)

EERSTERUSTKLINIEK

Getal swanger vroue wat serologies getoets is	105 (60)	273 (234)	49 (41)
Getal wie se reaksies positief of twyfelagtig was	13 (8)	30 (26)	8 (3)
Getal wat voorheen (by enige kliniek) behandel is	2 (2)	5 (3)	1 (0)
Getal wat die eerste reeks behandeling tydens swangerskap ontvang	5 (6)	15 (15)	5 (1)

MOEDER- EN KINDERSORGODIENSTE

Die volgende tabelle gee 'n uiteensetting van die werk wat deur die Moeder- en Kindersorgdiensesaksie verrig is.

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Huisbesoeke deur Gesondheidsbesoeksters

Eerste besoeke	Daaropvolgende besoeke	Getal siek babas besoek	Totale besoeke
6 069 (5 934)	13 346 (10 345)	26 (18)	19 415 (16 279)

Besonderhede van kliniekbywonings by Kindersorgklinieke

	Eerste bywoning	Herbywoning	Deur geneesheer ondersoek	
			Eerste bywoning	Herbywoning
Sentraal (Dinsdag)	64 (108)	222 (352)	67 (112)	233 (353)
Sentraal (Woensdag)	276 (206)	1 278 (1 411)		
Sentraal (Vrydag)	120 (174)	373 (803)		
Bloedstraat (By Harry Nelson)	60 (77)	260 (271)		
Pretoria-Wes	112 (180)	723 (921)	29 (75)	90 (102)
Danville (Dinsdag)	225 (193)	525 (106)	61 (0)	102 (0)
Danville (Woensdag)	216 (255)	627 (768)	0 (108)	0 (107)
Gesina	70 (78)	565 (474)		
Villieria (Woensdag)	186 (107)	963 (669)	49 (43)	42 (25)
Villieria (Donderdag)	52 (55)	364 (520)		
Wonderboomswid	104 (64)	650 (499)		
Mayville	44 (75)	247 (601)		
Capital Park	69 (59)	576 (457)		
Hatfield	41 (50)	253 (472)		
New Muckleneuk	67 (73)	520 (641)		
Sunnyside (Dinsdag)	194 (179)	1 217 (1 073)		
Sunnyside (Woensdag)	163 (188)	1 181 (991)		
Riviera	34 (56)	257 (365)		
Salvokop	1 (17)	3 (147)		
Arcadia (Dinsdag)	123 (82)	772 (933)		
Hercules	144 (150)	917 (881)	50 (82)	258 (273)
Booysens	71 (62)	339 (488)		
Mountain View	46 (56)	376 (293)		
Pretoria Tuine	41 (44)	462 (434)		
Rietfontein-Noord	31 (56)	298 (309)		
Voortrekkersweg	44 (33)	334 (234)		
Pierneefstraat	82 (54)	600 (525)		
Brooklyn	57 (69)	353 (510)		
Pretoria-Noord	237 (209)	1 883 (1 778)		
Sinoville	227 (205)	1 288 (1 328)		
East Lynne	178 (202)	1 500 (1 558)	127 (106)	108 (39)
Valhalla	117 (110)	708 (808)		
Silverton	237 (221)	1 424 (973)		
Constantia Park	429 (284)	1 787 (1 459)		
Totaal	4 162 (4 012)	23 015 (24 132)	383 (526)	833 (899)

Bywonings van voorbevallingsklinieke

	Denville	East Lynne	Santraal	Hercules	Pretoria-Noord
Getaf nuwe gevalle	55 (56)	78 (43)	145 (128)	69 (65)	53 (41)
Totale bywonings	250 (215)	324 (216)	661 (520)	329 (279)	224 (193)
Getaf nabevallingsgevalle	0 (0)	0 (3)	76 (51)	0 (2)	31 (29)
Tandklinieke	4 (0)	3 (0)	14 (10)	4 (11)	0 (0)
Getaf gevalle wat die Tandkliniek bygewoon het			25 (21)		

Kraamtoesig

Getaf besoeke aan kraaminrigtings	1 (12)
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Huisbesoeke

	Atteridgeville Swart	Saulsville Swart	
Eerste besoeke aan pasgeborenes	927 (940)	1 170 (1 066)	
Daaropvolgende besoeke	3 897 (3 710)	7 897 (6 125)	
Besoeke aan siek kinders	46 (9)	71 (1)	
Getaf siek kinders besoek	9 (9)	9 (1)	
	Mamelodi Swart	Laudium Asiër	Eersterust Kleurling
Eerste besoeke aan pasgeborenes	3 317 (2 847)	387 (350)	423 (357)
Daaropvolgende besoeke	2 093 (1 518)	2 386 (2 334)	2 159 (2 329)
Besoeke aan siek kinders	263 (20)	0 (0)	45 (0)
Getaf siek kinders besoek	43 (20)	0 (1)	1 (0)

Bywoning van kindersorgklinieke

	Atteridgeville Swart	Saulsville Swart	
Eerste bywoning	900 (972)	1 262 (1 365)	
Herhaalde bywonings	16 147 (14 523)	17 505 (15 842)	
Deur geneesheer ondersoek	6 242 (6 183)	7 166 (6 976)	
	Mamelodi Swart	Laudium Asiër	Eersterust Kleurling
Eerste bywoning	4 241 (3 999)	475 (436)	444 (486)
Herhaalde bywonings	36 394 (36 671)	3 785 (4 533)	6 186 (7 298)
Deur geneesheer ondersoek	16 566 (17 369)	2 340 (2 503)	3 619 (4 268)

Voorbevallingsklinieke

	Proesstraat Swart	Atteridgeville Swart	Saulsville Swart
Getal nuwe gevalle	1 269 (1 194)	733 (839)	1 200 (1 210)
Getal bywonings	3 943 (3 209)	3 627 (3 992)	6 392 (7 039)
	Mamelodi Swart	Laudium Asiër	Earsterust Kleurling
Getal nuwe gevalle	3 050 (3 072)	323 (295)	418 (338)
Getal bywonings	13 241 (14 235)	1 389 (1 271)	2 947 (2 513)

Bevallings deur vroedvroue waargeneem

	Atteridgeville	Saulsville	Mamelodi	
	39 (77)	86 (135)	0 (0)	
Immuniserings	Blank	Swart	Asiër	Kleurling
Getal gevalle teen difterie geïmmuniseer	5 124	4 283	363	425
Getal gevalle teen kinkhoes geïmmuniseer	4 791	3 945	345	399

SITOLOGIESE ONDERSOEKE VAN SERVIKALE SMERE

Sitologiese ondersoeke van servikale smere van vrouens van 'n sekere ouderdomsgroep vorm 'n belangrike skakel in voorkomende geneeskunde. Nie alleen kan verskillende infektiewe toestande gediagnoseer word nie, maar maligniteit kan in so 'n vroeë stadium ontdek word dat die kwaadaardigheid deur middel van 'n geringe chirurgiese ingreep genees kan word met die gevolg dat die moeder dikwels nog baie jare lank vir haar gesin behoue bly.

Net soos in die geval van die vel, word die oppervlakselle van die slymvliese van die serviks en vagina gedurig afgestoot en vervang deur nuwes wat in die basaalmembraan van die slymvlies gevorm en opwaarts gestoot word. Selle wat so afskilfer, behou die eienskappe van die plek vanwaar hulle afskilfer het. Indien hulle byvoorbeeld afskilfer van 'n gebied wat ontsteek is, sal hulle die tekens van die ontsteking toon, en indien hulle van 'n plek wat besig is om kwaadaardige verandering te ondergaan, afkomstig is, sal hulle die kenmerke van die kwaadaardige verandering toon. Deur middel van 'n mikroskopiese ondersoek, na spesiale kleuring, van smere wat hierdie selle bevat, kan die patoloog 'n diagnose maak van die gesondheidstoestand van die organe vanwaar hierdie selle afskilfer het. Die studie van afskilfer-sitologie het nou so ver gevorder dat die patoloog na slegs 'n ondersoek van die smeer met redelike sekerheid kan vasstel wat die graad van maligniteit is en of daar 'n radikale operasie of slegs 'n kleiner ingreep soos byvoorbeeld 'n konusbiopsie nodig is.

Hierdie voorspelling word op die persentasie abnormale kerne teenoor die persentasie maligne selle gegrond.

Die tabel op bladsy 52 gee 'n opsomming van die verskillende siektetoestande wat die patoloog op die servikale smere kan waarneem, asook hoe dit vertolk word en watter optrede hy by die verskillende grade van maligniteit sal aanbeveel.

As POSITIEF word diegene beskou wat volgens bovermelde klassifikasie in groepe 2(b) tot 4 val. Dié pasiënte word as spoedgevalle na die Ginekologie-buitepasiënte-afdeling van die H.F. Verwoerd-hospitaal verwys. Aan diegene wat in groepe 1 tot 2(a) val, word toepaslike behandeling gegee, indien dit nodig is, en opvolgsmere word geneem.

Die sitoloog verstrek altyd 'n aanbeveling tesame met sy verslag en dit is belangrik om die aanbeveling te volg omdat dit dringend nodig kan wees dat 'n histerektomie gedoen moet word in plaas van slegs 'n konusbiopsie of net opvolgsmere.

Vaginale smere, wat nie hier ter sprake is nie, word hoofsaaklik gedoen met die doel om die hormonale status van die pasiënt te bepaal, omdat dit 'n rol kan speel by habituele miskraam of by die postmenopousale vrou.

Die Gesondheidsafdeling van die Stadsraad van Pretoria het op 14 Februarie 1967 begin met die neem van smere vir sitologiese ondersoek.

A. Die volgende infekties kan deur middel van 'n sitologiese ondersoek gediagnoseer word:				
1. Mikrokokke en basille	3. Trichomonas vaginalis			
2. Candida albicans	4. Leptothrix			
B. Pre-maligne en maligne toestande:				
Maargenoem op smeer	Moontlike oorsaak	Vertolking en aanbeveling		
1. Diskariose (Afwykings in die kern)	(a) Ontsteking (b) Folliculitis (c) Maligniteit	Behandel en neem weer smeer Behandel en neem weer smeer Nog geen displasiese selle waargeneem nie, maar <u>maligniteit</u> <u>kan die oorsaak van die diskariose wees. Herhaal smeer na 3 of 6 maande.</u>		
2. Displasie (Abnormaal groeiende selle)	Stadium (a) Gering: Baie diskartotiese selle, geen plaveiselkarsinoom selle nie. (b) Matig: 2/3 diskartotiese selle, 1/3 plaveiselkarsinoom selle. (c) Uitgesproke: 1/2 diskartotiese selle, 1/2 plaveiselkarsinoom selle. (d) Karsinoom-in-situ: 1/3 diskartotiese selle, 2/3 plaveiselkarsinoom selle.	Vertolking Herstel dikwels nog as die oorsaak, soos byvoorbeeld infeksie, folien- suur gebrek, ens., verwyder word. Vroeë maligniteit wat onderste $\frac{1}{3}$ van slymvlieslaag aantas. Vroeë maligniteit wat onderste $\frac{2}{3}$ van slymvlieslaag aantas. Vroeë maligniteit wat volle dikte van slymvlieslaag aantas, maar nie infiltreer nie. Aanbeveling Bevestig diagnose deur middel van klein biopsie van letsel.	Aanbeveling Behandel moontlike oorsaak. Driemaandelikse smeer. Konusbiopsie en opvolgsmeer is voldoende. Konusbiopsie en opvolgsmeer is voldoende. Konusbiopsie en opvolgsmeer is voldoende. Histerektomie. Histerektomie.	
3. Plaveiselkarsinoom (Infiltrasie)	Vertolking Die maligniteit het deur die basaal- membraan gedring en mag al in die om- liggende weefsel in versprei het.			
4. Adenokarsinoom	Die maligniteit van die kliervoefsel.			
5. Binne normale perke.				

Smere word van die volgende persone geneem:

1. Gesinsbeplanningsklinieke

Smere word van alle nuwe pasiënte, Blank sowel as Nieblank, geneem. Daar word ook verder smere van alle pasiënte wat vir opvolgondersoeke kom, geneem.

2. Voorbevallingsklinieke

(a) Blank

Daar word smere van alle vroue van dertig jaar en ouer wat hulle hier aanmeld, geneem. Waar daar enige verdagte simptome is, word daar ook smere by jonger vroue geneem.

(b) Nieblank

Weens die geweldige groot aantal vroue wat die klinieke bywoon, is dit nie moontlik om 'n smeer van elkeen as 'n roetine-maatreël te neem nie. Daar word egter smere van alle pasiënte wat hulle vir 'n nabevallingsondersoek aanmeld en dertig jaar of ouer is, geneem, sowel as van jonger pasiënte waar daar enige verdagte simptome is. Daar word veral aandag geskenk aan diegene wat te kenne gee dat hulle gesinsbeplanningsadvies verlang.

Die verslae van die patoloog het dan ook getoon dat die neem van smere by hierdie jonger groep met verdagte simptome geregverdig was.

RESULTATE VAN SMERE

Gedurende die jaar is daar smere van 12 920 (12 583) vroue geneem van wie 3 433 (3 255) Blanke pasiënte was.

Die volgende tabelle gee 'n opsomming van die gevalle waar afwykings wel gevind is.

Altesaam 1 572 (2 119) Nieblanke gevalle was vir opvolgondersoeke aanbeveel weens abnormale selle wat gevind is.

Kliniek	Aanbeveel vir opvolging	Oriemaandeliks	Sesmaandeliks	Jaarliks
Atteridgeville	223 (390)	3 (3)	4 (10)	217 (377)
Saulsville	280 (446)	4 (2)	1 (6)	272 (438)
Mamelodi	899 (992)	1 (5)	18 (25)	880 (962)
Eersterust	114 (163)	0 (5)	2 (3)	112 (155)
Laudium	56 (128)	0 (0)	1 (4)	55 (124)
Totaal	1 572 (2 119)	8 (15)	26 (48)	1 536 (2 056)

Gedurende die jaar was daar 'n totaal van 259 (230) gevalle wie se smere makrositêre veranderinge getoon het en ten opsigte van wie die patoloog herhaling van die smere versoek het na behandeling met foliensuur.

'n Totaal van 87 (92) gevalle het vir behandeling gekom en die smere het verbetering aangetoon.

BLANKES : 1980

BESONDERHEDE VAN GEVALLE MET ABNORMALE SELLE

Getal met abnormale selle en %	Getal vir drieaandelikse herondersoek	Getal vir sesaandelikse herondersoek	Getal vir jaarlikse herondersoek	Getal vir behandeling en herhaling
308 (499) 8,97 % (15,33 %)	0 (8)	10 (9)	260 (421)	38 (61)

BLANKES : 1980

BESONDERHEDE VAN POSITIEWE GEVALLE

Getal ondersoek	Getal positief en %	Ouderdom		Slegs opvolgsmere by		Histerektomie
		Onder 30 jaar	Bo 30 jaar	Konusbiopsie	hospitaal of kliniek	
3 433 (3 255)	1 (6) 0,03 % (0,18 %)	0	1	0	0	0 (vag op verslag)

NIEBLANKES : 1980

Kliniek	Getal ondersoek	Getal positief en %	Ouderdom		Getal verwy	Konusbiopsie	Slegs opvolgsmere by		Histerektomie
			Onder 30 jaar	Bo 30 jaar			hospitaal	of kliniek	
Atteridgeville	1 394 (1 485)	1 (2) 0,07 % (0,13 %)	0 (1)	1 (1)	1 (2)	1 (2)	1 (0)	1 (0)	0 (0)
Saulsville	1 598 (1 672)	0 (4) 0,0 % (0,24 %)	0 (2)	0 (2)	0 (4)	0 (3)	0 (1)	0 (1)	0 (1)
Mamelodi	4 838 (4 711)	10 (5) 0,21 % (0,11 %)	2 (0)	8 (5)	10 (4)	9 (1)	4 (0)	4 (0)	5 (0)
Forsterust	1 001 (847)	0 (2) 0,0 % (0,24 %)	1 (0)	0 (2)	1 (2)	1 (2)	1 (0)	1 (0)	0 (0)
Landium	656 (613)	0 (2) 0,0 % (0,33 %)	0 (0)	0 (2)	0 (2)	0 (2)	0 (0)	0 (0)	0 (0)
TOTAAL	9 487 (9 328)	12 (15) 0,13 % (0,16 %)							

GRUOTTOTAAL BLANK

EN NIEBLANK 12 920 (13 583)

Die onderstaande tabel gee 'n uiteensetting van hierdie gevalle

	Getal met makrositêre veranderinge	Getal behandel en herhaal
Atteridgeville	33 (32)	12 (16)
Saulsville	54 (55)	20 (26)
Mamelodi	151 (123)	43 (38)
Eersterust	12 (16)	7 (8)
Laudium	9 (4)	5 (4)
Totaal	259 (230)	87 (92)

Hoewel daar gemeen word dat die neem van servikale smere by vroue 'n aangewese taak is, bestaan daar twee probleme ten opsigte van Nieblanke vroue waarvoor daar nie 'n voor-die-hand-liggende en bevredigende oplossing skyn te wees nie.

Hierdie probleme is die volgende:

1. Die aantal vroue wat vir 'n opvolgondersoek moet kom en in gebreke bly om dit te doen ten spyte van tuisbesoeke deur ons verpleegpersoneel om hulle aan te moedig om te kom. Die getalle, veral hierdie jaar, gee 'n goeie verduideliking waarom die personeel gefrustreerd en ongelukkig voel oor die resultate.
2. Die groot persentasie uitvalgevalle met 'n positiewe smeer, wat na die hospitaal verwys word en ten opsigte van wie dan geen verslag van die hospitaal ontvang word nie. Hierdie probleem is herhaaldelik met die hospitaalpersoneel bespreek. Uit hierdie besprekings blyk dit dat 'n sekere persentasie die hospitaal nooit besoek nie en ons kan hulle ook nie weer opspoor nie.

Desnieteenstaande is ons oortuig dat bogenoemde probleme nie genoeg rede is om die diens te staak nie.

GESINSBEPLANNING

Die volgende tabel gee 'n weergawe van bywoning by ons verskillende gesinsbeplanningsklinieke gedurende die afgelope jaar:

	Blank	Swart	Asiër	Kleurling
1. Getal nuwe pasiënte aangemeld	1 961 (1 923)	4 275 (4 698)	254 (270)	403 (365)
2. Metodes en middels gebruik				
(a) Lippos-lus				
Getal nuwe aanvaarders	5 (1)	187 (403)	2 (5)	22 (3)
Getal ou aanvaarders	21 (25)	224 (331)	15 (8)	34 (24)
Getal uitgestoot	1 (2)	217 (253)	0 (1)	6 (7)
Getal verwyder	2 (7)	99 (98)	8 (5)	3 (10)
Getal heringeplaas	1 (1)	49 (123)	1 (1)	2 (2)
(b) Multi-load				
Getal nuwe aanvaarders	104 (60)	938 (996)	20 (23)	11 (3)
Getal ou aanvaarders	418 (235)	556 (471)	61 (71)	27 (10)
Getal uitgestoot	18 (17)	372 (655)	8 (6)	1 (4)
Getal verwyder	107 (110)	256 (220)	29 (20)	9 (13)
Getal heringeplaas	26 (13)	234 (350)	7 (10)	0 (7)
(c) Tablette				
Getal nuwe aanvaarders	430 (389)	534 (640)	70 (59)	111 (66)
Getal ou aanvaarders	4 820 (4 892)	6 765 (8 147)	1 127 (1 130)	905 (989)

	Blank	Swart	Asiër	Kleurling
(d) Inspuitings				
Getal nuwe aanvaarders	160 (216)	1 004 (718)	11 (59)	147 (107)
Getal ou aanvaarders				
Eerste l.M.l.	426 (470)	1 340 (842)	57 (28)	143 (119)
Tweede l.M.l.	394 (471)	1 278 (1 041)	23 (31)	144 (134)
Derde l.M.l.	377 (309)	989 (855)	24 (30)	82 (93)
Vierde l.M.l.	292 (266)	830 (695)	15 (28)	82 (61)
Herhaalde l.M.l. d.w.s.				
vyfde, sesde, ens.	2 069 (1 917)	3 643 (3 568)	158 (153)	239 (193)
Totale getal ou aanvaarders	3 558 (3 433)	8 080 (7 001)	267 (270)	695 (600)
Totale getal l.M.l.	3 718 (3 649)	9 084 (7 719)	278 (329)	842 (707)
Groototaal inspuitings vir alle rasse		13 922 (12 404)		
3. Getal herbesoeke	20 415 (20 468)	40 699 (41 694)	4 093 (4 223)	5 971 (5 799)
Groototaal eerste besoeke vir alle rasse		6 893 (7 256)		
Groototaal herbesoeke vir alle rasse		71 178 (72 184)		
Groototaal eerste en herbesoeke vir alle rasse		78 071 (79 440)		

STAPHYLOCOCCUSINFEKSIES

Die voorkoms van staphylococcusbesmetting by private kraaminrigtings word elders in hierdie verslag onder Aanmeldbare Siektes volledig behandel.

Soos in die verlede het die Inspektise van Vroedvroue hierdie jaar voortgegaan met die neem van kwartaal-likse plaatjies vir bakteriologiese ondersoeke in hierdie verband by private kraaminrigtings, waarvan daar twee vir Blankes en twee vir Nieblankes in die Stad is.

Daar is volgehou met voorligting ten opsigte van, sowel as die toepassing van, streng higiënemaatreëls. Resultate van bakteriologiese ondersoeke het hierdie jaar weer eens bevestig dat dit tot dusver die doeltreffendste wyse is om die voorkoms van staphylococcusbesmetting te beheer.

Goeie samewerking is weer eens van die vier inrigtings ontvang, veral met betrekking tot die toepassing van streng higiënemaatreëls. Die gevolg daarvan was 'n duidelike afname in die voorkoms van besmetting.

Die groot probleem by een inrigting, wat kontrole moeilik maak, is dat hy groot getalle bevallings moet hanteer. Dit beteken dat hulle pasiënte vroeg uit die inrigting moet ontslaan en 'n aanhoudend vinnige wisseling van die pasiëntbevolking het. Hoewel dit feitlik 'n onbegonne taak skyn te wees om 'n oplossing ten opsigte van kontrole hier te vind, is dit verblydend dat hierdie inrigting nogtans daarin geslaag het om die voorkoms van besmetting te verminder.

GESUBSIDIEERDE PVM-MENGSEL EN AFGEROOMDE MELKPOEIERSKEMA

Die volgende tabel gee 'n uiteensetting van die hoeveelhede PVM-mengsel en afgeroomde melkpoeier wat by die ondervermelde klinieke uitgereik is gedurende die jaar 1980 :

	PVM-mengsel	Afgeroomde melkpoeier
Mamelodi	25,6 kg (56,4 kg)	307,0 kg (689,5 kg)
Eersterust	64,0 kg (32,0 kg)	53,0 kg (28,5 kg)
Atteridgeville	98,0 kg (38,0 kg)	107,5 kg (68,0 kg)
Saulsville	100,0 kg (58,4 kg)	191,0 kg (91,5 kg)
Laudium	0,8 kg (0,8 kg)	- (-)
Totaal	288,4 kg (185,6 kg)	658,5 kg (877,5 kg)

Die tabel op bladsye 55 en 56 gee 'n beeld van die bywoningsgetalle gedurende die afgelope jaar.

TOEDIENING VAN POLIOSLUKSTOF AAN SWANGER VROUE

Die volgende tabel gee 'n uiteensetting van die pasiënte wat vanjaar geïmmuniseer is:

	Harry Nelson- kliniek	Willa Volschenk- kliniek	Danville- kliniek	Pretoria-Noord- kliniek	East Lynne kliniek	Totaal
Eerste dosis	0 (0)	1 (0)	0 (0)	0 (0)	0 (0)	1 (0)
Tweede dosis	0 (0)	0 (2)	0 (1)	0 (0)	0 (2)	0 (5)
Derde dosis	0 (0)	0 (2)	0 (0)	0 (0)	0 (2)	0 (4)
Reeds geïmmuniseer	137 (131)	67 (70)	39 (40)	48 (33)	72 (38)	363 (312)

Tans word Nieblanke swanger vroue nie as 'n roetine-maatreël by die munisipale voorbevallingsklinieke teen polio-miëlitis geïmmuniseer nie. Enige pasiënt wat daarom sou vra, sou dit dadelik ontvang. Indien dit op enige tydstip sou blyk dat hierdie beleid in harsiening geneem behoort te word, sal dit dadelik gebeur.

GEHOORTOETSE VIR MOONTLIKE DOOFHEID

Vanaf die begin van die jaar 1973 word daar gepoog om deur middel van elementêre gehoortoetse, moontlike gevalle van doofheid by babas en jong kinders op te spoor.

Die optrade is soos volg:

- Elke gesondheidsbesoekster het met die herbesoek van 'n baba tuis, die toetse gedoen. Omdat herbesoeke, indien moontlik, elke drie maande geskied, het die ouderdomme van hierdie babas gewissel tussen vier en ses maande.
- Indien sy tydens 'n eerste besoek van die moeder verneem het dat dit vir die moeder lyk asof die baba nie van geluide bewus is nie, het sy 'n punt daarvan gemaak om die baba of by die kliniekdokter of by die gesin se private geneesheer te kry.
- Waar sy met herbesoeke kinders in die ouderdomsgroep van 18 maande tot 2 jaar gevind het wat nog nie so 'n mate van taalgebruik openbaar het as wat van daardie ouderdomsgroep verwag kan word nie, is hierdie kinders ook of na die kliniekdokter of na die gesin se private geneesheer verwys.
- In sommige gevalle is daar niemand tuis ten tyde van 'n huisbesoek nie. Gelukkig kom sulke moeders een of ander tyd na die babakliniek vir advies waar die gesondheidsbesoeksters dan die kinders op 'n soortgelyke wyse as tydens 'n huisbesoek ondersoek om vas te stel of daar moontlik gebrekkige gehoor waar te neem is.
- Wanneer daar 'n moontlike gehoorgebrek ontdek is, is sulke kinders volgens ooreenkoms na die Transoranje Skool vir Doves verwys vir audiometriese ondersoeke.
- Die gehoor van babas van 6 maande en jonger word verkieslik deur elektriese respons-oudiometrie getoets. Sulke gevalle word na die Spraak-, Stem- en Gehoorkliniek van die Universiteit van Pretoria verwys.

Gedurende die jaar is altesaam 6 207 (5 710) babas bo die ouderdom van vier maande sowel as voorskoolse kinders deur die Gesondheidsbesoeksters aan growwe gehoortoetsing onderwerp.

Van hierdie kinders is 7 (5) vir verdere ondersoeke, of by die Transoranje Skool vir Doves of by die Spraak-, Stem- en Gehoorkliniek by die Universiteit van Pretoria, verwys.

In meeste van die gevalle was dit die moeder self wat bekommerd was omdat die baba nie op geluide gereageer het nie, of wat bekommerd was uitgespreek het ten opsigte van die kind se spraak.

BESONDERHEDE VAN OUDIMETRIESE ONDERSOEK BY DIE TRANSORANJE SKOOL VIR DOWES OF BY DIE SPRAAK-, STEM- EN GEHOOR-KLINIEK, UNIVERSITEIT VAN PRETORIA : 1980.

Ouderdom	Getal verwys
0 - 1 jaar	3 (0)
1 - 2 jaar	0 (0)
2 - 3 jaar	0 (1)
3 - 4 jaar	2 (2)
4 - 5 jaar	0 (2)
5 - 6 jaar	2 (0)

KINDERLEIDINGKLINIEK

Vir die totale groei en ontwikkeling van die kind is dit nodig om in sy fisiese, maatskaplike, opvoedkundige en emosionele behoeftes te voorsien.

Vroeë ontdekking en behandeling van emosionele stoornisse by die kind is net so belangrik vir sy uiteindelijke gesondheid, as wat dit in die geval van fisiese afwykings is.

Met die nuwe begrip van gemeenskapsgesondheidsdienste behoort die psigiese versorging van die kind (en dit sluit die hele gesin in) 'n integrerende deel te wees van kindersorgdienste.

Hoewel ons baie jare lank hiervan bewus was, kon die nodige diens nie voorsien word nie weens gebrek aan personeel wat spesiaal daarvoor opgelei is.

Gelukkig het die Staatsdepartement van Gesondheid in die jongste tyd begin met die uitbreiding van psigiatrisie gemeenskapsdienste deur gebruik te maak van personeel op die diensstaat van sy inrigtings vir die versorging van geestelik verstaarde pasiënte.

Die belangrikheid van voorkomende psigiatrie het ook deesdae, in die algemeen gesproke, meer inslag gevind. Onder andere het so 'n diens te make met die vroeë waarneming en behandeling van emosionele probleme by die baba en jong kind in sy gesinsverband.

Dr. Luiz, voormalige Superintendant van Weskoppies-hospitaal, het die gesondheidsbesoekster wat ingeskakel is by 'n Moeder- en Kindersorgseksie gesien as 'n belangrike skakel in so 'n diens. Die gesondheidsbesoekster is dié persoon wat reeds so vroeg as in die eerste veertien dae van 'n kind se lewe kennis maak met die betrokke gesin in die gebied waar sy werk. Sy is dus in staat om probleme alreeds vroeg waar te neem.

Uitbreiding van voorkomende psigiatrisie dienste kan dus uitstekend plaasvind in samewerking met Moeder- en Kindersorgseksies van plaaslike owerhede.

As gevolg van onderhandelings tussen die destydse Superintendant van Weskoppies-hospitaal en die Stads-gesondheidshoof van die Stadsraad van Pretoria, het so 'n diens in die Gesondheidsafdeling in Augustus 1973 tot stand gekom deur die stigting van 'n kinderleidingkliniek.

Die nodige kantore en ruimte sowel as 'n speelkamer wat vir hierdie doel in Muntoria voorsien is, is besonder geskik daarvoor.

Die spesiaal opgeleide personeel wat die diens lewer, is op die diensstaat van Weskoppies-hospitaal en die ander lede van die span is munisipale mediese beamptes en gesondheidsbesoeksters.

MEDIESE INSPEKSIEDIENS : KLEUTERSKOLE EN CRÈCHES

Die Raad het in 1970 op versoek van 'n groep ouers 'n mediese inspeksiediens vir kinders in kleuterskole en crèches binne die munisipale gebied van Pretoria ingestel.

Die doel van hierdie diens is om kinders in kleuterskole en crèches gereeld medies te ondersoek en die ouers se aandag te vestig op afwykings wat gevind word. Geen behandeling word toegepas nie, en die ouers word versoek om die kinders vir die verdere ondersoek en behandeling wat nodig kan wees na hulle private geneeshere of 'n ander bestaande instansie te neem.

Een deeltydse Mediese Beampte en een Deeltydse Gesondheidsbesoekster het hierdie diens in 1980 voortgesit. Die getal inrigtings was jaarliks aan, en 68 van die 79 geregistreerde inrigtings kon besoek word, waar altesaam 4 373 kinders ondersoek is, 3 072 vir die eerste keer, terwyl 1 301 kinders herondersoek is. By 2 442 kinders is een of meer opvallende afwyking gevind - met altesaam 3 451 afwykings.

Die gesigsvermoë van 1 682 kinders is getoets, van wie 20 met moontlike visuele afwykings vir verdere ondersoek na 'n oogarts verwys is.

Gehoorsiftingsstoets is op 100 kinders gedoen, van wie 25 met moontlike gehoorverlies vir verdere ondersoek verwys is. Hierdie gehoorsiftingsstoets is 'n tydrovende prosedure, en net uitgesoekte kinders se gehoor word getoets.

Kinders met aangebore of oorerflike afwykings word, met die oog op genetiese raadgewing, steeds by die Afdeling Genetika van die Departement van Gesondheid, Welsyn en Pensioene aangemeld. Gedurende 1980 is 41 kinders met 'n verskeidenheid afwykings aangemeld.

Uitstekende samewerking word steeds van die Kinderverwysingsentrum ontvang, waarheen talle kinders met verskillende probleme verwys kon word.

Daar word voortdurend gelet op faktore wat moontlik 'n kind se vordering op skool kan beïnvloed, soos probleme met persepsie, gebrek aan konsentrasievermoë en swak spierkoördinasie. Hierdie kinders word dan na remediërende klinieke verwys. Baie goeie samewerking word van die klinieke ontvang en gedurende 1980 is 15 kinders na hulle verwys. In al hierdie gevalle is verslae van die kliniek ontvang.

Altesaam 2 561 briewe is aan ouers gerig - 1 617 met aanmanings dat kinders onvolledig teen witseerkeel en tetanus geïmmuniseer is. Spesiale aandag word ook aan immunisering teen masels gegee.

Hierdie belangrike voorkomende diens aan die voorskoolse kind word steeds hoog gewaardeer deur beide ouers en inrigtingspersoneel, en talle telefoonoproepe en briewe van dank word ontvang.

DIE BESTRYDING VAN LUGBESOEDELING

Wetstoepassing

1. Rookbeheerstreeksbevel

Die hele regsgebied van die Stadsraad van Pretoria, met uitsluiting van die Swart woongebiede, is vanaf 1 Julie 1979 reeds 'n rookbeheerstreek. Die samewerking van die publiek in die toepassing hiervan was deurentyd goed. Die grootste probleem bly steeds die verbranding van afval in die opelug. Handarbeiders wat rommel verbrand of op oop vure kook tydens tydelike okkupasie van persele, sypaadjies of padbouterreine, het baie klagtes uitgelok en hulle reageer ook byna nooit op aanmanings en waarskuwings nie.

1.1 Regulasies vir rookbeheer

Slegs 4 aansoeke om die installering van brandstofverbruikende toestelle is kragtens die Regulasies ontvang en goedgekeur. Daar was egter 'n aantal oorsake van elektrisiteit, waarvoor die goedkeuring van hierdie Afdeling nie vereis word nie. As gevolg van die geweldige styging in die olieprys die afgelope tyd, word meer en meer navrae van besighede ontvang wat na steenkool wil oorskakel. Hier is die beleid sover moontlik gehandhaaf dat besighede wat op nywerheidspersele geleë is, geradik toegeelaat is om steenkool te gebruik, terwyl besighede wat nie op nywerheidspersele geleë is nie, aangemoedig word om eerder na elektrisiteit oor te skakel. Steenkoolverbranding word slegs toegelaat indien die toestel in alle opsigte aan die vereistes van hierdie Afdeling voldoen. Daar word deur middel van gereelde inspeksies ook toegesien dat toestelle te alle tye in 'n goeie toestand gehou word.

1.2 Regulasies oor die beheer van skadelike of hinderlike gas wat deur dieselaangedrewe voertuie uitgelat word

Altesaam 124 kennisgewings is uitgereik aan eienaars van diesellootse wat die rookuitlaatperk oorskry het. 'n Verdere 26 kennisgewings is ook aan vermeende oortreders bestel nadat die voertuie se uitlaatrook visueel geskat is. Met enkele uitsonderings is daar aan al die kennisgewings voldoen. Waar vervolging kragtens genoemde Regulasies ingestel word, geskied dit nie op grond daarvan dat die rookuitlaatperk oorskry word nie, maar omdat 'n oortreder 'n kennisgewing kragtens die Wet op Voorkoming van Lugbesoedeling, 1965, geïgnoreer het.

'n Opname wat gedurende hierdie jaar gemaak is van diesellootse wat by die metingspunte verbybeweeg het, het die volgende getoon: 87 voertuie van 'n sekere Amerikaanse Europese fabrikaat (AMEU) se uitlaatgasdigtheid is met die Hartridge-meter gemeet met 'n gemiddelde aflesing van 66,6 en 'n standaardafwyking van 37,6 %.

Toevallig is byna net soveel voertuie, naamlik 88, van 'n sekere Japanse fabrikaat (JAPA) se uitlaatgasdigtheid gemeet met 'n gemiddelde aflesing van 54,3 en 'n standaardafwyking van 36,3 %.

Indien bogenoemde standaardafwykings 'n aanduiding van die invloed van slytasie en instandhouding (en ook ander faktore) is, was hierdie invloede en hulle inwerking op die enjins van beide die AMEU-voertuie en die JAPA-voertuie baie na aan dieselfde (37,6 % teenoor 36,3 %). Gevolglik is hierdie twee fabrikaatgroepe voertuie in 'n groot mate vergelykbaar.

As gevolg van bogenoemde aannames kan dan geredeneer word dat aangesien die AMEU-voertuie se gemiddelde uitlaatgasdigtheidsaflesing van 66,6 baie na aan die aflesing van 70 lê wat volgens Wet 45 van 1965 nie oorskry mag word nie, is hierdie fabrikaat voertuie heel waarskynlik baie meer daartoe geneig om die besoedelingsprobleem te vererger as die JAPA-voertuie waarvan die gemiddelde aflesing maar 54,3 % is.

2. Personeel

Veranderings wat in die personeelposisie ingetree het, is dat die vakante pos Hooftampte (Lugbesoedelingsbeheer) weer gevul is en dat die pos van Inspekteur (Lugbesoedeling) wat weens die afsterwe van 'n amptenaar vakant geraak het, dadelik weer gevul kon word.

3. Inspeksies

Die getal inspeksies wat die inspektoraat deur die loop van die jaar gedoen het, beloop sowat 6 355, wat in ondergemelde groepe verdeel kan word:

3.1 Klagtes

Altesaam 284 klagtes is ontvang, wat almal met welslae gehanteer is. Van die klagtes het 182 oor afvalverbranding gehandel. Die oorblywende 102 was in verband met verskeie ander sake soos rookuitlate uit brandstofverbruikende toestelle, reuke, stof en ventilasie. Vyf-en-sewentig kennisgewings is kragtens die Regulasies vir Rookbeheer aan oortreders bestel.

3.2 Handelslisensies

Altesaam 447 aansoeke om handelslisensies is na hierdie Seksie verwys. Slegs in gevalle waar daar brandstofverbruikende toestelle of kombuisventilasiesistels op die persele was, is vereistes gestel.

3.3 Bouplanne

Altesaam 573 bouplanne is nagegaan vir voldoening aan die vereistes vir "vrygestelde" toestelle volgens Pretoriase Rookbeheerstreeksbevel en ook die Regulasies vir Rookbeheer en vir voldoening van meganiese ventilasie en lugversorging aan Raadsvereistes. Daar is heelwat spuitlokale vir motorkarre in Pretoria in hierdie tydperk opgerig en vereistes vir ventilasie deur middel van relatief groot waaiers om die xileenkonsentrasie binne die OSHA-konsentrasieperk te hou, moes afgedwing word. Meting van xileenkonsentrasie word ook in reeds bestaande spuitlokale gedoen.

4. Konferensies, seminare, lesings, referate, vergaderings en voorligting

'n Vergadering van die rookbeheerbeamptes vir die Transvaalse streek is vanjaar op 17 April 1980 te Ermelo gehou en is deur die Hoofbeampte bygewoon.

'n Lesing oor die meting van spoorelemente in die atmosfeer deur middel van 'n metode genaamd PIXE is op 12 September 1980 by die WNNR deur die Hoofbeampte bygewoon.

Die Stadsgesondheidshoof, die Hoofbeampte en die Senior Inspekteur het 'n konferensie oor skoorstene se plek in lugbesoedlingsbeheer wat op 20 November 1980 by UNISA gehou is, bygewoon.

Navrae van die publiek oor Wet 45 van 1965, die Regulasies en die Rookbeheerstreeksbevel per telefoon, brief en deur die nuusmedia is beantwoord en het aansienlike tyd in beslag geneem.

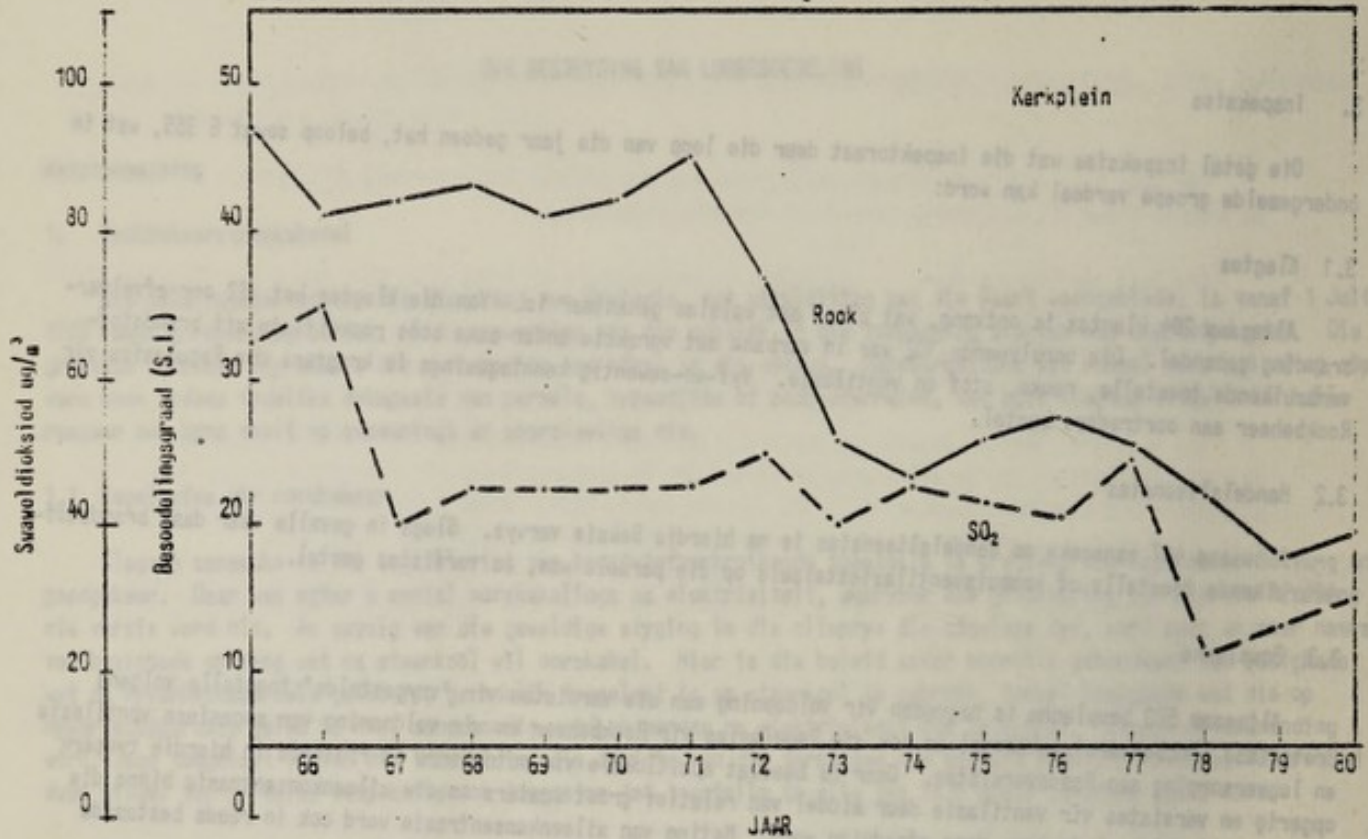
5. Metings van lugbesoedeling, OSHA-konsentrasieperke en effektiewe temperatuur

Die meet van lugbesoedeling het, soos in die verlede, op al die vorige meetpunte voortgegaan. Die belangrikste resultate word in grafieke 1 tot 6 saamgevat.

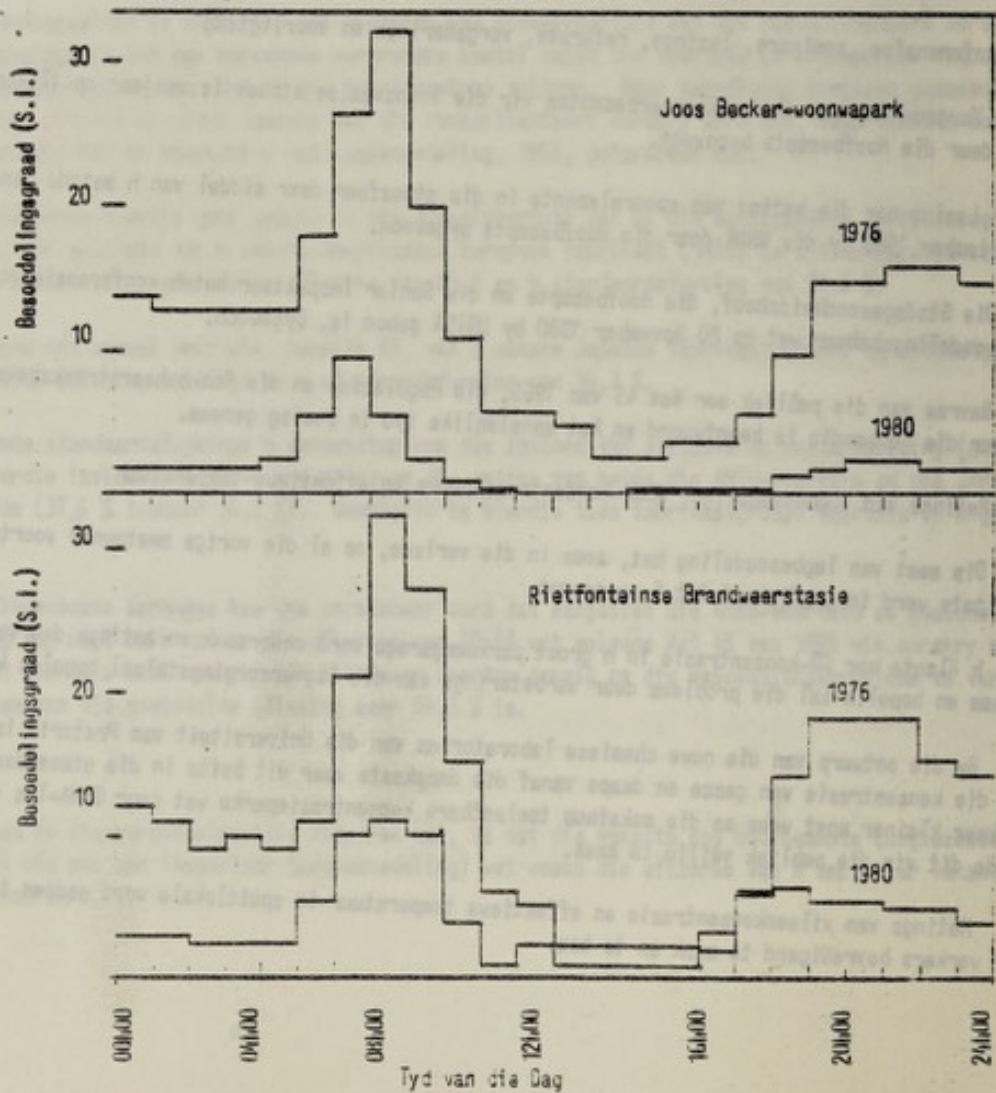
'n Klagte oor CO-konsentrasie in 'n groot parkeergarage word ondersoek en metings daarvan word gedurende spitsstye geneem en hopelik sal die probleem deur verbeterings aan die lugversorgingstelsel opgelos kan word.

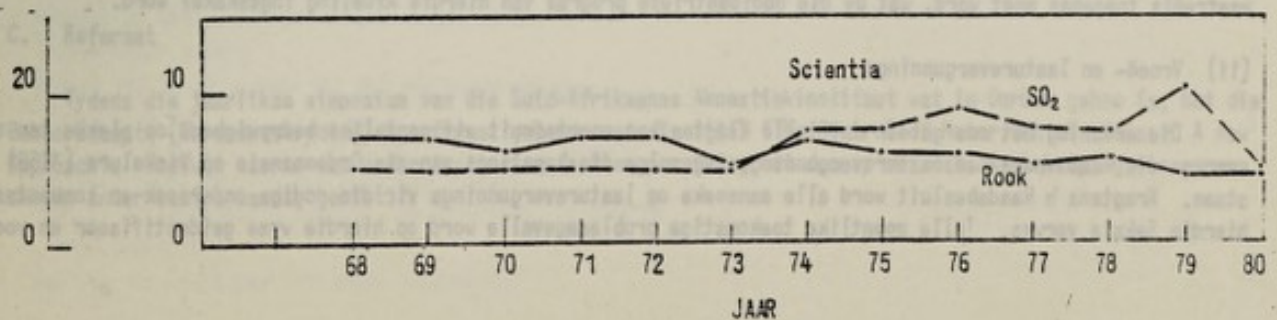
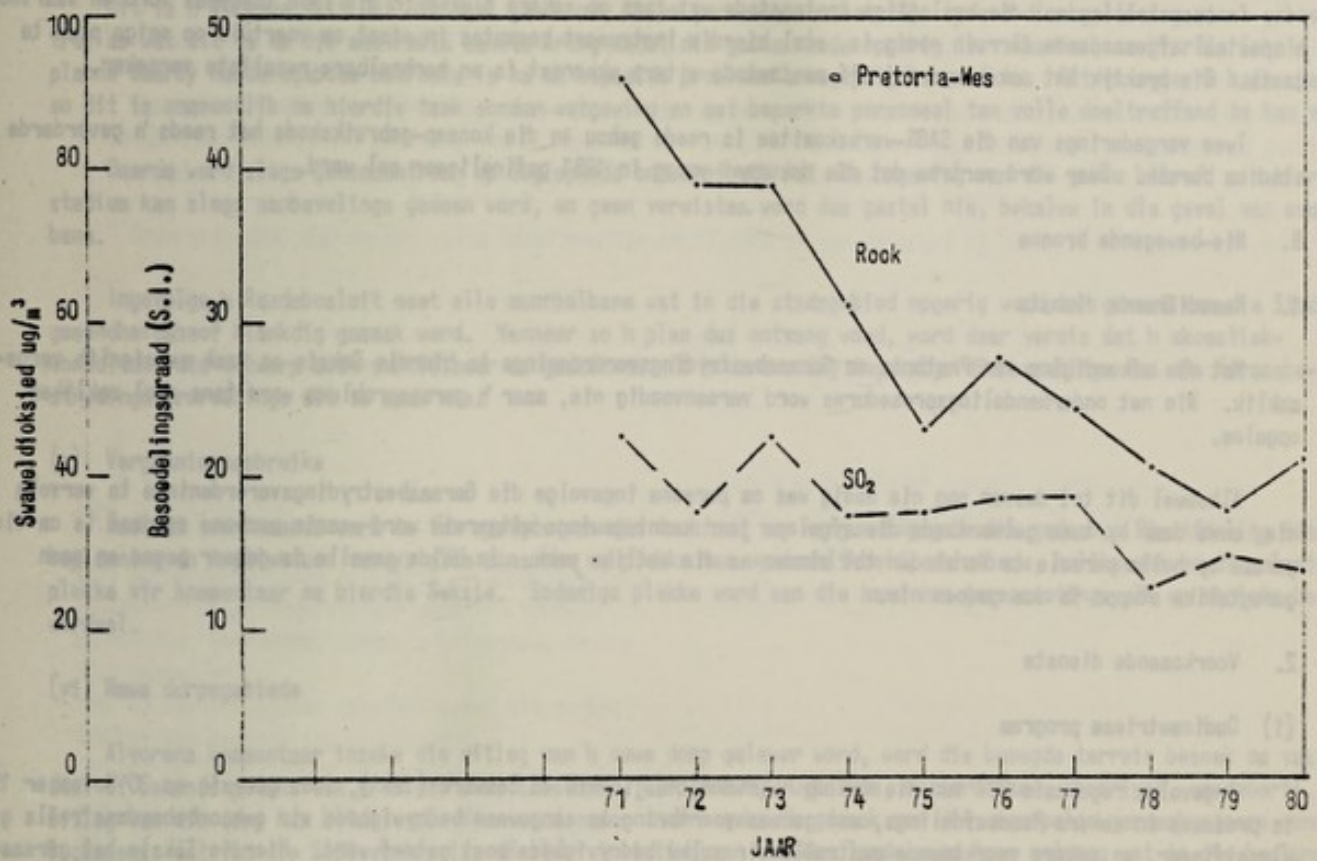
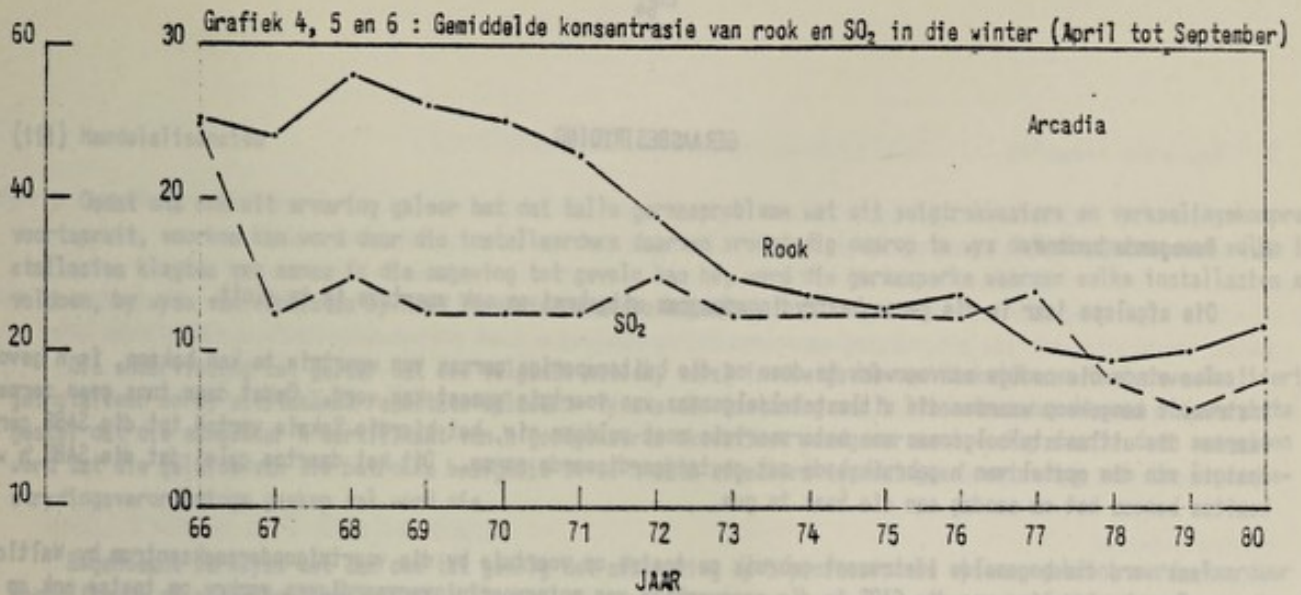
By die ontwerp van die nuwe chemiese laboratorium van die Universiteit van Pretoria is na 'n ondersoek aanbeveel dat die konsentrasie van gasse en dampe vanaf die dampkaste waar dit buite in die atmosfeer vrygelaat word, ten minste 50 keer kleiner moet wees as die maksimum toelaatbare konsentrasieperke wat deur OSHA-lys daarvoor aangegee word ten einde dit vir die publiek veilig te maak.

Metings van xileenkonsentrasie en effektiewe temperatuur in spuitlokale word gedoen ten einde hierdie lokale vir werkers bevredigend te maak en te hou.

Grafiek 1 : Gemiddelde konsentrasie van rook en SO₂ in die winter (April tot September)

Grafieke 2 en 3 : Gemiddelde uurlikse rookkonsentrasies





GERAASBESTRYDING

A. Bewegende bronne

Die afgelope jaar is die geraasbestrydingsprogram uitgebrei om ook voertuie in te sluit.

Ten einde die nodige aanvoorwerk te doen om die buitensporige geraas van voertuie te kan bekamp, is 'n gevorderde instrument aangekoop waarmee die uitlaatstelselgeraas van voertuie gemeet kan word. Omdat daar tans geen norme is waaraan die uitlaatstelselgeraas van motorvoertuie moet voldoen nie, het hierdie Seksie versoek tot die SABS gerig ten opsigte van die opstel van 'n gebruikskode met gestandaardiseerde norme. Dit het daartoe gelei dat die SABS 'n werkskomitee benoem het om aandag aan die saak te gee.

Tans word die bogenelde instrument gebruik om toetse op voertuie by die voertuigondersoeksentrum by Waltloo te doen. Deur bemiddeling van die SABS is die samewerking van motorvoertuigvervaardigers verkry om toetse ook op nuwe voertuie te doen. Verskeie vervaardigers het positief in hierdie verband gereageer, en meer as 1 000 nuwe en gebruikte motorvoertuie is tans reeds getoets.

In teenstelling met die omslagtige toetsmetode wat tans op sekere plekke in die land toegepas word en waarvoor 'n spesiaal afgesonderde terrein nodig is, stel hierdie instrument beaamtas in staat om voertuie op enige plek te toets. Die praktyk het ook bewys dat dié meetmetode uiters akkuraat is en herhaalbare resultate verseker.

Twee vergaderings van die SABS-werkskomitee is reeds gehou en die konsep-gebruikskode het reeds 'n gevorderde stadium bereik. Daar word vertrou dat die dokument vroeg in 1981 gefinaliseer sal word.

B. Nie-bewegende bronne

1. Remediërende dienste

Met die afkondiging van Pretoria se Geraasbestrydingsverordeninge is hierdie Seksie se taak aansienlik vergemaklik. Nie net onderhandelingsprosedures word vereenvoudig nie, maar 'n geraasprobleem word tans veel makliker opgelos.

Alhoewel dit tot dusver nog nie nodig was om persone ingevolge die Geraasbestrydingsverordeninge te vervolg nie, moes daar by twee geleenthede die afgelope jaar kennisgewings uitgereik word waarin persone aangesê is om die geraas op hulle persele te verminder tot minder as die wetlike perk. In beide gevalle is gehoor gegee en geen geregtelike stappe is dus gedoen nie.

2. Voorkomende dienste

(i) Oudiometriesse program

Ingevolge regulasie B17 van die Wet op Fabriek, Masjinerie en Bouwerk (1941), soos gewysig op 30 November 1973, is prosesse in sekere Raadsafdelings, wat geraas voortbring as aangewese bedrywighede vir gehoorbehoudmaatreëls geklassifiseer, en sekere voorkomende maatreëls vir sulke bedrywighede moet getref word. Hierdie Seksie het geraasmetings oor lang tydperke in hierdie geraasgebiede gedoen en het die grense bepaal waarbinne gehoorbeskermsmaatreëls toegepas moet word, wat by die oudiometriesse program van hierdie Afdeling ingeskakel word.

(ii) Vroeë- en laaturevergunnings

Die ervaring het ons geleer dat talle klagtes kan voortspruit uit nagtelike bedrywighede op plekke ten opsigte waarvan die Raad vroeë- en laaturevergunnings ingevolge die bepalinge van die Ordonnansie op Winkelure (1959) toestaan. Kragtens 'n Raadsbesluit word alle aansoeke om laaturevergunnings vir die nodige ondersoek en kommentaar na hierdie Seksie verwys. Talle moontlike toekomstige probleemgevalle word op hierdie wyse geïdentifiseer en voorkom.

(iii) Handelslisensies

Omdat ons ook uit ervaring geleer het dat talle geraasprobleme wat uit suigtrekwaaiers en verkoelingskompressors voortspruit, voorkom kan word deur die installeerders daarvan vroegtydig daarop te wys dat die geraas van sulke installasies klagtes van mense in die omgewing tot gevolg kan hê, word die geraasperke waaraan sulke installasies moet voldoen, by wyse van vereistes by nuwe lisensie-aansoeke bepaal.

Die ondervinding het geleer dat die volgende metode, veral in die geval van diskoteke en waar nuwe masjinerie geïnstalleer word, uitstekende resultate oplewer: Tydens die hantering van 'n lisensie-aansoek word die vereiste gestel dat die aansoeker 'n sertifikaat van 'n goedgekeurde akoestiese raadgewer moet verkry waarin daar aangetoon word dat die geluide van die betrokke besigheid in so 'n mate afgeskerm is, dat geen oortreding van die Geraasbestrydingsverordeninge geskep sal word nie.

Bogenoemde werkwyse het dan ook tot gevolg dat afskerming op 'n professionele wyse aangebring word, waardeur onooglikhede en ander probleme uitgeskakel word.

(iv) Bouplanne

Dit is 'n bekende feit dat dit veel goedkoper is om geraasbeheermaatreëls tydens die beplanning van 'n gebou te tref as wat dit is om die maatreëls aan te bring nadat die gebou reeds opgerig is. Daarom gaan hierdie Seksie alle planne waarby handelsgeboue betrokke is na om bepaalde probleme vroegtydig te voorkom. Dit is egter 'n baie wye veld en dit is onmoontlik om hierdie taak sonder wetgewing en met beperkte personeel ten volle doeltreffend te kan verrig.

Daarom word slegs gekonsentreer op ooglopende ontwerpoute wat die omgewing van die gebou betref. In hierdie stadium kan slegs aanbevelings gedoen word, en geen vereistes word dus gestel nie, behalwe in die geval van muurbalbane.

Ingevolge 'n Raadsbesluit moet alle muurbalbane wat in die stadsgebied opgerig word ten genoë van die Stads-gesondheidshoof klankdig gemaak word. Wanneer so 'n plan dus ontvang word, word daar vereis dat 'n akoestiek-konsultant die ontwerp moet sertifiseer as geskik om nie 'n oortreding ingevolge die bepalings van die Geraasbestrydingsverordeninge uit te maak nie.

(v) Vergunningsgebruike

Heelwat voorkomende werk is ten opsigte van die toestaan van vergunningsgebruike gedoen. Die Afdeling Stadsbeplanning en Argitektuur verwys alle aansoeke om plekke van vermaaklikheid, skietbane, helihawens en dierelosiesplekke vir kommentaar na hierdie Seksie. Sodanige plekke word aan die hand van geraasmetings elk op meriete beoordeel.

(vi) Nuwe dorpsgebiede

Alvorens kommentaar insake die uitleg van 'n nuwe dorp gelewer word, word die beoogde terrein besoek om vas te stel of bekende potensiële probleme soos skietbane, klipgroewe, lughawens, motorrenbane, spoorlyne, ensovoorts, die uitleg van die dorp kan beïnvloed. Hier word onder andere gebruik gemaak van die voorspelde geraaskontoere rondom lughawens, wat van die SABS verkry is. Heelwat inligting van oorsese lande word tans ontvang wat in die beplanning van toekomstige gebiede 'n rol gaan speel.

C. Referaat

Tydens die jaarlikse simposium van die Suid-Afrikaanse Akoestiekinstituut wat in Durban gehou is, het die Beheerbeampte (Geraasbestryding) 'n referaat gelewer met die titel "The Control of Motor Vehicle Noise: A new Approach". Heelwat navrae van ander instansies is hierop ontvang wat daarop dui dat die bekamping van geraas ook in ander sentra aandag geniet.

D. Nasionale wetgewing

Gedurende 1980 het die Regering 'n Mitskrif gepubliseer wat 'n nasionale beleid insake omgewingsbewaring formuleer. Hierin word onder andere voorsiening gemaak vir die beheer van geraas op 'n nasionale basis.

Voortspruitend hieruit is 'n Konsepwet op 25 Julie 1980 in die Staatskoerant gepubliseer. Die konsepwet maak onder andere voorsiening vir die afkondiging van geraasbeheerregulasies, wat ook op motorvoertuie betrekking het.

E. Statistiek

Inspeksiebesoeke aan persele was soos volg:

Handelslisensies	368
Klagtes	53
Vergunningsgebruik	126
Laat-ure-vergunnings	17
Geraasmetings ingevolge Geraasbestrydingsverordeninge	12
Bouplanne	19

WERKSAAMHEDE VAN DIE GESONDHEIDSINSPEKTORAAT

Soos dit nog altyd die Afdeling se beleid was, het alle klagtes en ander aangeleenthede ten opsigte waarvan verslae verlang is, onmiddellik aandag ontvang ongeag hoe beuselagtig die aangeleentheid ten tyde van ontvangs mag voorgekom het. Daar is vinnig opgetree in verband met aangeleenthede wat binne die Afdeling se bevoegdheid val, terwyl dié wat ander geraak het, na die betrokke Afdelings verwys is.

Die bladsye wat volg, gee die werk wat deur die verskillende Seksies wat die Gesondheidsinspektoraat uitmaak, uitgevoer is, taamlik breedvoerig weer.

AANGELEENTHEDE NA ANDER AFDELINGS VERWYS

In die loop van hulle pligte kry Gesondheidsinspekteurs dikwels te doen met aangeleenthede wat aandag verg, nie net uit 'n gesondheidsoogpunt nie, maar wat ook optrede deur 'n ander Afdeling van die Raad vereis. Kennis word ook geneem van talle tekortkominge of gebreke wat ander Afdelings raak maar wat as sodanig niks met openbare gesondheid te make het nie.

Onder sulke tekortkominge is daar, om slegs 'n paar te noem, die volgende:

Ongemagtigde of gevaarlike strukture, gebrekkige en gevaarlike elektriese installasies, gevaarlike toestande op enige Raadseigendom met inbegrip van sypaadjies of strate, brandgevare, ongelisensieerde besighede of bedrywe, riolerings- of dreineringsgebreke, hoofwaterpype wat lek, en talle ander.

Gedurende die jaar is 492 sulke tekortkominge skriftelik of per telefoon by ander Afdelings aangemeld.

VERVOLGINGS

Hier volg 'n ontleding van die vervolgings wat die Afdeling gedurende 1980 ingestel het, en die resultate daarvan:

Aard van oortreding	Totale getal vervolgings	Getal onskuldig bevind	Getal skuldig bevind	Terug-getrek	Boetes
Vuil en onbevredigende toestande op voedselpersone	8		8		R 230
Voedsel of drank ongeskik vir menslike gebruik	5		5		R 330
Gebrekkige, gekraakte, gebarsde breekgoed, houers of pakkapier	3		3		R 50
Vuil en onbevredigende apparaat en/of uitrusting	1		1		R 20
Voedsel aan besoedeling blootgestel	3		3		R 60
Versuim om bevredigende beskermende klerasie te voorsien	1		1		R 10
Klerasie nie in kleekamer of sluitkassies geberg nie	1		1		R 30
Geen of onvoldoende sluitkassies vir werknemers	1		1		R 10
Versuim om seep, naelborsel of handdoek te voorsien	3		3		R 50
Versuim om rakke of stuplanke te voorsien	3		3		R 60
Voedsel en ander artikels nie te koop, elders as in stoorkamer geberg	1		1		R 30
Invoer van vleis sonder dat dit vir herinspeksie aangebied is	1		1		R 50
Oormaat mikro-organismes en E. coli tipe 1 in sorbet	1		1		R 50
Onbevredigende berging van grootmaat goedere	1		1		R 50
Geen of onbevredigende dampkap, filtreerders, suigwaaier, skoorsteenpyp	2		2		R 40
Gebruik van kleekamer vir ander doeleindes	1		1		R 30

Aard van oortreding	Totale getal vervolgings	Getal onskul- dig bevind	Getal skul- dig bevind	Terug- getrek	Boetes
Onvoldoende voedselvoorbereidingstafels of werkoppervlakke	1		1		R 10
Onvoldoende vullishouers	2		2		R 40
Versuim om aan 'n kennisgewing te voldoen	4		4		R 80
Versuim om bevredigende boudatrinnes te voorsien	2		1	1	R 20
Aanstootlike reuke	1	1			R 0
Aanhou van pluiafee in stryd met Verordeninge	1		1		R 20
Meer as 450 mg/kg swaeldioksied in boerewors	1		1		R 50
Totaal	48	1	46	1	R1 320

GELISENSIEERDE PERSELE

Hier volg 'n lys van persele en die getal van elke tipe wat gedurende die jaar gelisensteer is. Die persele van nuwe lisensiehouers is voor lisensiëring geïnspekteer en waar dit nodig was, is daar paslik opgetree om onbevredigende toestande reg te stel.

Aanstootlike bedrywe	31
Afslae	57
Algemene handelaar	4 723
Apteker	195
Bakker	110
Barbier of haarkapper	353
Begrafnisondernemer	15
Eethuisher	36
Motorbestuurskool	7
Handelaar in bene en gebruikte goedere	85
Handelaar in huishoudelike, patente- en eiendomsmedisyne	795
Handelaar in motorvoertuie	141
Handelaar of spekulant in lewende hawe of produkte	1
Handelaar in spuit- of mineraalwater	156
Handelaar in vuurwerke	53
Handelsreisiger	42
Hondehok of troeteldierlosiesinrigting of -salon	15
Huurstal- of ryskoolhouer	2
Kafeehouer	763
Kinderbewaarploas of kleuterskool	70
Liggaamsontwikkeling-, gesondheid- of skoonheidsentrum	61
Melkery	4
Melkplaa	5
Melkwinkel	79
Meulenaar	5
Motorgarage	560
Motorvoertuigoppasser	4
Ontsmetter of beroker	8
Pakhuis	11
Pandjieshouer	14
Parkade	59
Passasiersvervoeronderneming	16
Pos- of ander bestellingsonderneming	163
Restauranthouer	94
Privaatondersoeker	16

Verkoopsman	316
Skoenmaker	63
Skuldinvorderaar en -opspoorder	15
Slagter	260
Smous	166
Spesiale lisensie	224
Spysenier	7
Straatfotograaf	3
Verblyfsonderneming	1 003
Verhuurdiens	29
Verkoopsoutomaathouer	8
Vermaaklikheidsplek	109
Vishandelaar en -bakker	23
Voedselvervaardiger	37
Vrugte-, groente- en plantehandelaar	174
Wasser of droogskoonmaker	123
Wassery- of droogskoonmakeryontvangsdepot	91
Merkwinkel	337
Totaal	11 737

BOUPLANNE

Hier volg 'n opsomming van die planne wat gedurende die jaar ondersoek is:

Eerstekeer voorgelê	Tweede voorlegging	Voorlopige planne	Deur Argitekta	Nieblanke- gebiede	Totaal
7 341 (6 498)	1 916 (1 601)	41 (27)	4 (0)	673 (542)	9 975 (8 668)

Die volgende tabel is 'n opsomming van die inspeksies wat uitgevoer is en die stappe wat deur die Distriks-gesondheidsinspekteurs gedoen is:

Oorlaste waarmee gehandel is	12 174
Kennisgewings bestel	5 017
Aanseggings gegee	7 157
Kennisgewings nagekom	3 117
Oorlaste weggeruim	10 274
Oorlaste weer geïnspekteer	3 492
Klagtes waarmee gehandel is	2 770
Lisensie-aansoeke	3 955
Melkwinkels	7
Slaghuisse	447
Vishandelaars	12
Bakkerye	18
Restaurante en teekamers	1 667
Verblyfsondernemings (sonder etes)	196
Kruideniers- en lewensmiddelenwinkels	1 143
Vrugte- en groentewinkels	473
Fabriek	166
Haarkappersalonne	215
Diverse inspeksies	705
Aangeleenthede wat na ander Afdelings verwys is	492
Huis-tot-huis inspeksies	42
Na-uurse inspeksies	24
Totale inspeksies	15 824

PLAAGBEHEER DEUR DISTRIKSGESONDHEIDSINSPEKTEURS

Hieronder volg 'n opsomming van die werk in verband met knaagdier-, muskiet- en vlieëbeheer deur die Distriks-gesondheidsinspekteurs:

KNAAGDIERE

1. Klagtes ondersoek	676
2. Persone geïnspekteer en raad gegee	1 192
3. Kennisgewings en aanseggings om valle of gif te gebruik	755
4. Kennisgewings wat vereis dat persone ontoeganklik vir knaagdiere gemaak word	193
5. Kennisgewings bestel ooreenkomstig 3 en 4 hierbo, waaraan voldoen is	337
6. Bestaande geboue wat ontoeganklik vir knaagdiere gemaak is	71
7. Nuwe geboue wat ontoeganklik vir knaagdiere is, voltooi	25
8. Ophopings van vullis of hout, ens. waarin knaagdiere moontlik kan skuil, opgeruim en/of verwyder	609
9. Getal knaagdiere dood gesien of as dood gerapporteer	202
10. Rotdigte diervoedselhousers verskaf	35
11. Sake na Plaagbeheer verwys	5
12. Sake in verband met knaagdierbeheer na ander Afdelings verwys	0
13. Vervolgings vir nie-nakoming van kennisgewings	4

MUSKIETE

1. Klagtes ondersoek	65
2. Inspeksies uitgevoer	91
3. Kennisgewings bestel en aanseggings gegee	52
4. Kennisgewings ooreenkomstig (3) hierbo bestel, waaraan voldoen is	18
5. Broeiplekke uitgeskakel	34
6. Raad betreffende muskietbeheer gegee	51
7. Soort muskiete gevind	Culex
8. Vervolging vir nie-nakoming van regulasies	0

VLIEË

1. Klagtes ondersoek	147
2. Inspeksies uitgevoer	198
3. Kennisgewings bestel en aanseggings gegee	136
4. Kennisgewings ooreenkomstig (3) hierbo bestel, waaraan voldoen is	51
5. Broeiplekke uitgeskakel	30
6. Wenke betreffende vlieëbeheer gegee	42

VOEDSELSEKSIE

Hierdie Seksie is daarvoor verantwoordelik om die higiëniese produsering, hantering en verspreiding van eetware in die Stad en die Nieblankegebiede wat binne die regsgebied van die Stadsraad van Pretoria val, te verseker. Alle tipes persone wat met die voedselhandel te make het, is dikwels besoek en inspeksies is uitgevoer.

Die tabelle aan die einde van hierdie deel van die verslag gee 'n uiteensetting van die soorte voedsel waarvan monsters geneem is en die resultate van die bakteriologiese en/of skeikundige ontleding daarvan. Die meeste monsters is van bederfbare eetware. As 'n voedselmonster benede standaard bevind is, is die verkoper of gewaarsku of vervolgd.

Gedurende die jaar is groot hoeveelhede eetware of aan die Afdeling oorhandig of daar is daarop beslag gelê omdat dit ongeskik was vir menslike verbruik en dit is afgekeur en vernietig. Die uitstekende samewerking tussen die voedselverkopers en die Afdeling is gehandhaaf.

Gesondheidsinspekteurs het daaglik die vroeë-oggendmark bygewoon waar daar op groot hoeveelhede eetware beslag gelê is en wat as ongeskik vir menslike gebruik afgekeur is.

Altesaam 87 besendings eetware (behalwe dié waarop by die Produktemark beslag gelê is), is oorhandig en die ondergenoemde eetware is as ongeskik vir menslike gebruik afgekeur en vernietig:

Vars vleis	3 159,2 kg
Vleis (in blikke)	882 blikke
Vleisprodukte	3 255,4 kg
Vars vis	215 kg
Vis (in blikke)	4 686 blikke
Kaas	242,38 kg
Margarien	911 kg
Afval	10 388 kg
Bevrore pastaie	17
Lakkergoed in staffies	22 staffies
Lakkergoed	119,18 kg
Pluimvee	36,39 kg
Neute	2,5 kg
Asyn	4,25 liter
Beskuitjies	30,52 kg
Bakvet	108,63 kg
Pasta	31,62 kg
Melk (in blikke)	11 blikke
Melkpoeier	4 kg
Botter	107,5 kg
Vrugtesappe	53,32 liter
Olie	4,75 liter
Sopmengsels	0,39 kg
Graankosse	5,12 kg
Jellie en poeding	21,28 kg
Souse	65,59 kg
Konfy	268 blikke
Groente	1 129 blikke
Vrugte	2 540 blikke
Sop	40 blikke
Dranke	1,76 kg
Broodsmere	18,16 kg
Suurdeeg	20 kg
Koekmengsels	0,5 kg
Blikke sonder etikette	141
Eiers	180 dosyn
Koek	17,20 kg
Roomys	16 200 liter

Benedens die bovermelde, is 279 besendings gemengde voedselware na hierdie Afdeling gestuur om vernietig te word. Hierdie besendings wat deur verskeie firmas ingestuur is, het uit 'n verskeidenheid voedselsoorte wat in allerhande houers verpak was, bestaan. Die meeste van dié voedsel was ongeskik vir menslike gebruik, maar 'n sekere persentasie daarvan is deur die eienaars as onverkoopbaar beskou.

Nadat die voedsel vernietig is, is daar aan die firmas 'n algemene dekkingsertifikaat, sonder vermelding van items, daarvoor uitgereik.

Behalwe die bovermelde, is daar op 5 besendings gemengde voedselware beslag gelê deur Gesondheidsinspektors gedurende hul normale inspeksies en die ondergenoemde eetware is as ongeskik vir menslike gebruik afgekeur en vernietig:

Vars vleis	221,2	kg
Vleisprodukte	91	kg
Vis	86	blikke
Vrugte	19	blikke
Groente	656	blikke
Vleis	1	blik
Gedroogde vrugte	4,45	kg
Blikke sonder etikette	105	

Voedsel- en Watermonsters

Die volgende voedselmonsters is vir skeikundige ontleding en bakteriologiese ondersoek geneem:

Skeikundige ontleding

Aard van artikel	Getal monsters	Getal bevredigend	Getal onbevredigend
Roomys	88	85	3
Boerevors	170	160	10
Maalvleis	169	167	2

Bakteriologiese ondersoek

Aard van artikel	Getal monsters	Getal bevredigend	Getal onbevredigend
Roomys en sorbet	221	185	36
Saevoedsel	66	66	0

Sedert Oktober 1973 word monsters van garnale wat van Mosambiek afkomstig is en sedert Augustus 1980 word monsters van garnale wat van Australië en Taiwan afkomstig is, geneem en na die Suid-Afrikaanse Instituut vir Mediese Navorsing, Johannesburg, gestuur om daar ondersoek te word vir besmetting met *Vibrio cholerae*.

Tot dusver is nog geen monsters gevind wat met *Vibrio cholerae* besmet was nie.

Een-an-veftig waarskuwings is gegee en twee vervolgings is ingestel in verband met monsters wat nie aan die vereistes van die Wet op Voedingsmiddels, Skoonheidsmiddels en Ontsmettingsmiddels en ander regulasies wat op voedsel van toepassing is, voldoen het nie.

Munisipale waterbronne

Gereelde monsters van openbare watervoorrade is by hulle bronne en ook by verskillende plekke oor die hele verspreidingsnetwerk, vir bakteriologiese ontleding geneem. Daarbenewens is daar van die water in al die Raad se swembaddens en plasdammetjies gereeld monsters geneem en is dit getoets om die doeltreffende werking van die suiveringstelsels te verseker.

Die spruit wat in die Rietvleidam vloei, word noukeurig dopgehou om teen grootskaalse besoedeling van die dam te waak.

Die aantal monsters wat op verskillende plekke geneem is, is soos volg:

Krane in Stad	Bevredigend	Onbevredigend	Totaal
In verskillende dele van die Stad	94	10	104
Ander munisipale waterbronne			
(a) Munisipale swembaddens	35	1	36
(b) Munisipale plasdammetjies	8	0	8
(c) Rooiwal (rioolwerke, kragentrale en dorp)	11	1	12
(d) Erasmia (boorgate)	5	1	6
(e) Rietvleiwatwerke	8	4	12
(f) Valhalla (boorgate)	5	0	5
(g) Fonteine	7	0	7
Randwateraad			
Uit hooftoevoerpylyn	12	0	12
Privaat boorgate (vir openbare gebruik)	18	9	27
Private swembaddens (waartoe die publiek toegang het)	15	4	19

NASIONALE VARSPRODUKTEMARK

Meens die toename in volume van produkte gehanteer op die mark, het dit nodig geword om 'n meer omvattende en intensiewe inspeksie van die produkte uit te voer. Om tred te hou met hierdie addisionele werk en om te verseker dat alle besendings deeglik geïnspekteer word en dat slags gesonde produkte te koop aangebied word, was dit nodig om drie voltydse Gesondheidsinspekteurs vir diens op die mark toe te wys.

Twee roetine daaglikse inspeksies van alle produkte word uitgevoer. Die eerste inspeksie begin om 06h00 en die tweede om 10h00.

Addisionele inspeksies van enige besondere besendings, indien nodig, word ook uitgevoer.

Die verwydering uit die marksaal van alle produkte waarop beslag gelê is, geskied onder toesig van 'n Gesondheidsinspekteur.

Die volgende hoeveelhede voedsel is gedurende die jaar afgekeur en vernietig:

Vrugte en groente	
Piesang kartonne	1 846
Platkissies	7 778
Kratte	4 007
Sakkies	90 372
Kissies	93 815
Suikersakke	36 062
Bondels	21
Bakkies	9 988
Kartonne	41 618
Plastieksakke	7
Waatlemoene	2 474
Graansakke	12
Wildsbokke : Getal ondersoek	77 (getal afgekeur 6)
Wildvoëls : Getal ondersoek	245 (getal afgekeur 58)

HERONDERSOEK VAN VLEIS

Vleis wat oor sulke lang afstande na Pretoria ingevoer word om herondersoek by aankoms daarvan te regverdig, is vantavore by die munisipale slagplaas ondersoek. Sedert die beheer van die slagplaas deur die Abattoirkommissie oorgeneem is, het hierdie funksie van herondersoek van vleis, waar dit nodig is op die Stadsgesondheidsafdeling teruggeval.

Gedurende die jaar is die volgende hoeveelhede vleis afkomstig van Suidwes-Afrika, Botswana, Kaapstad, Bloemfontein, Kimberley, Durban, Port Elizabeth en Welkom herondersoek:

	Getal karkasse	Getal helftes of gedeeltes
Beesvleis	8 456	940
Skaapvleis	11 308	
Varkvleis	296	
Kalfsvleis	529	
Fabrieksvleis	308 481,8 kg	
Beesorgane		
Beestonge		
Beesafval	40 663 kg	
Beessterta		

Altesaam 170 besendings vleis is herondersoek. 'n Bedrag van R5 764,26 is vir die bogenoemde inspeksies ontvang.

Statistiese verslag van inspeksies

Hier volg 'n weergawe van die werk wat gedurende die jaar deur die Voedselaksie gedoen is:

Oorlaste weer geïnspekteer	138
Klagtes waarmee gehandel is	60
Klagtes in verband met voedselvergiftiging ondersoek	15
Lisensie-aansoeke oes gehandel	112
Inspeksie van roomysdepots	21
Inspeksie van slaghuise	6
Inspeksie van vishandelaars - groothandel	5
Inspeksie van bakkerie en banketbakkers	111
Inspeksie van bakkers-, restaurante en teekamers	71
Inspeksie van spyseniers	36
Inspeksie van koel drankfabrieke	8
Inspeksie van vrugte- en groentewinkels	96
Inspeksie van voedsel-fabrieke - algemeen	42
Inspeksie van hotelle en losieshuise	69
Inspeksie van afleweringvoertuie	4
Inspeksie van groothandelaars in vleis en vleisprodukte	10
Aangeleenthede na ander Afdelings verwys	11
Inspeksie by die produktemark	303
Ingaveerde vleis inspeksies	170
Voedsel- en watermonsters geneem	962
Saterdag inspeksies van voedselstalletjies	124
Totale inspeksies vir die jaar	2 374
Algemeen	
Oorlaste waarmee gehandel is	811
Kennisgewings bestel	199
Aansegings gegee	612
Kennisgewings nagekom	98
Oorlaste weggeruim	710

PLAAGBEHEERSEKSIË

MUSKIETBESTRYDING

Die werksaamhede van hierdie Seksie behels die verwydering van onkruid en gras langs die walle van spruite, damme en besproeiingsvore, die opvul van dongas waarin reënwater kan staan asook die behandeling van alle staande water met verskillende muskietlarwedodermiddels. Die gebied strek oor 'n oppervlak van nagenoeg 56 980 hektaar. Twee-en-dertig Swartarbeiders onder die toesig van Blankes verrig hierdie belangrike taak. Alle werksaamhede word, sover prakties moontlik, volgens 'n voorafbeplande program uitgevoer en alle potensiële broeiplekke vir muskiete word minstens een maal binne die bestek van agt dae besoek en bespuit.

Tien Swartwerkers is vir die spuitwerk afgesonder. Hulle vervoer die spuitapparaat en 'n voorraad spuitstof op hul fietse en beweeg hoofsaaklik deur die veld en langs voetpaadjies om by spruite, vore, damme en ander plekke waar water gewoonlik staan, te kom.

Die spuitseisoen is op 2 Januarie 1980 voortgesit en daar is met die werk volgehou tot einde Mei waarna dit 3 maande lank gestaak is weens die koue weersomstandighede wanneer muskietbroeiery tot 'n minimum beperk is.

Aan die begin van September is die spuitwerk hervat en daarmee is volgehou tot 31 Desember. Gedurende die 3 maande wanneer daar nie gespuit word nie, word hierdie werkers by die ander Swartarbeiders, wat gemoeid is met die skoonmaak van spruite, damme, vore, ens., ingeskakel.

Min las is van muskiete gedurende die eerste helfte van die jaar ondervind. Nadat die reënseisoen begin het, is geleidelik meer klagtes oor muskiete ontvang, veral vanaf private persele. Intensiewe bestrydingsmaatreëls is toegepas en raad aangaande muskietbestryding is aan private persone gegee.

Geen malariadraende muskiete, *A. gambia* of *A. funestus*, is binne die Pretoriase gebied aangetref nie. Volwasse *A. maculipennis*- en *Aedes aegypti*-muskiete is hier en daar in gebiede soos Kilner Park, Silverton en East Lynne aangetref.

Gedurende die Desember skoolvakansie en die tydperk wanneer bouwerk tydelik gestaak word in Desember, het die muskietelas weer eens 'n hoogtepunt bereik. Talle broeiplekke is in ongebruikte swembaddens, visdammetjies, leë blikke en ou motorbande op private eiendomme aangetref, terwyl die bewoners met vakansie weg was. Dit het tot gevolg gehad dat bestrydingsmaatreëls selfs op private eiendomme toegepas moes word. Daar het ook heelwat muskietbroeiery by onvoltooide geboue in kelderverdiepings, hyserskagte en uitgrawings voorgekom. Hierdie plekke moes ook behandel word terwyl die verantwoordelike persone weg was met vakansie.

Gedurende die eerste vyf maande van die jaar tot 31 Mei en weer van 1 September tot 31 Desember is 28,5 liter larvasiedkonsentraat teen muskietlarwes gebruik. Hierdie larvasied word verdun tot 'n konsentrasie van 1 : 600 en daar is gevind dat dit baie ekonomies en doeltreffend is. Geen olie is in die spuitproses gebruik nie.

As gevolg van die gebruik van bogenoemde larvasied, is gevind dat die natuurlike lewe - soos paddavissies, wat deur DDT-middels vernietig was, nou herstel. Hierdie natuurlike vyande van muskietlarwes dra baie daartoe by om die beheer van muskiete doeltreffender te maak.

Namate die Spoorwegadministrasie meer grond nodig het by Capital Park, word van die huurkontrakte met groenteboere op landbouhoeves - gedeeltes van die plaas Eloff Estates nr. 192 - opgesê en neem die Administrasie self die beheer van muskietbestryding daar oor.

Die spruit wat deur die Universiteitsproefplaas vloei, asook agt groenteboere se damme, is volgens ooreenkoms tweewekliks besoek en bestrydingsmaatreëls is toegepas.

Die groenteboere en ander betrokke instansies het hul volle samewerking verleen en die werk is bevredigend uitgevoer.

KNAAGDIERBESTRYDING

Bestrydingsmaatreëls word intensief toegepas op alle munisipale eiendomme insluitend "Munitoria", die krag-sentrales te Pretoria-Mes en Rooiwal, by die rioolwerke te Daspoort, Rooiwal en Baviaanspoort, by die Rietvlei-waterwerke, die Fonteinedal en alle munisipale geboue in die Nieblankegebiede van Saulsville, Atteridgeville, Mamelodi, Eersterust en Laudium, asook by alle munisipale parke en ontspanningsterreine en diverse eiendomme wat deur die Raad aangekoop is met die oog op toekomstige ontwikkeling van die Stad.

Veldwerk is op Meintjeskop, Klapperkop en Monumentkoppie uitgevoer. Geringe knaagdieraktiwiteit is hier aangetref. Bestrydingsmaatreëls is toegepas en by latere ondersoek is gevind dat die genoemde omgewings redelik vry van knaagdiere was. Honderd-vyf-en-veertig klagtes in verband met knaagdiere op munisipale eiendomme is gedurende die jaar ondersoek, 4 126 inspeksies is uitgevoer en 5 833 eenhede lokaas is geplaas. 1 745 Dooie knaagdiere is gevind en vernietig.

Klagtes oor knaagdiere op private persele word hoofsaaklik deur die Distriksgesondheidsinspekteurs ondersoek en die klaers word deur hulle van raad bedien. Daar bestaan egter noue samewerking tussen die Distriksgesondheidsinspekteurs en die Plaagbeheerseksie en wedersydse hulp word verleen. 676 Klagtes is gedurende die jaar ondersoek. 1 192 Inspeksies is uitgevoer en die bewoners van die persele is van die nodige advies bedien en in sommige gevalle is selfs aktief hulp verleen. 755 Skriftelike of mondelinge waarskuwings om bestrydingsmaatreëls toe te pas, is aan persone gerig. Oor die algemeen het die publiek hul heelhartige samewerking gegee, maar in agt gevalle was dit nodig om geregtelike stappe teen persone wat na herhaalde waarskuwings versuim het om aan kennisgewings te voldoen, in te stel. 202 Knaagdiere is op private eiendomme vernietig. Die werklike getal sal egter hierdie syfer oorskry aangesien baie dooie knaagdiere om vanselfsprekende redes nie gevind kon word nie.

Gedurende die jaar is 71 bestaande geboue ontoeganklik vir knaagdiere gemaak, terwyl 25 nuwe geboue wat aan die knaagdierregulasies voldoen, opgerig is. 91 Persone of instansies wat geboue wou sloop en aan wie 'n sloping-permit reeds toegeken was, het aansoek gedoen om die vereiste knaagdiervrysertifikaat. Nadat die persele geïnspekteer is en die geboue vry van knaagdiere bevind is, is die sertifikate uitgereik. Waar daar wel knaagdiere gevind is, is daar vereis dat bestrydingsmaatreëls eers bevredigend toegepas word voordat 'n aanvang met die sloping gemaak word.

BESTRYDING VAN KAKKERLAKKE, VLEË, WEELUISE, VLOOIE, VISMOTTE, MIERE, TAPYTKEWERS, PAPIERMYTE, KRIEKE, BOSLUISE, SPINNEKOPPE, ENS.

By wyse van roetine is alle munisipale eiendomme besoek en waar enige tekens van sekere van bogenoemde insekte gevind is, is die nodige bestrydingsmaatreëls toegepas en is daarmee volgehou totdat geen verdere tekens van besmetting bespeur is nie.

324 Munisipale geboue of gedeeltes daarvan is gedurende die jaar met insekdodermiddels behandel. 147 Klagtes wat van persone op private eiendomme ontvang is, is ondersoek en hulle is van raad bedien. 198 Inspeksies is uitgevoer en 136 mondelinge of skriftelike waarskuwings is aan persone gerig.

Lofwaardige samewerking is van die publiek ontvang en geen geregtelike stappe in hierdie verband was nodig nie.

BILHARZIA

Die Rietvleidam is kwartaalliks besoek en alle spruite, damme en besproeiingskanale binne die stadsgebied is ondersoek om te bepaal of daar Bilharziadraende slakke teenwoordig is. Geen Bilharziadraende slakke is gevind nie, maar die situasie word steeds fyn dopgehou.

PLAAGBEHEER IN "MUNITORIA"

'n Voltydse Plaagbestryder in hierdie gebou sorg daarvoor dat insek- en knaagdierbesmetting tot 'n minimum beperk bly. Benewens roetine-ondersoeke en -maatreëls, is enige klagtes wat ontvang is, dadelik ondersoek en waar dit nodig was, is die nodige regstellende maatreëls toegepas.

Lokaas vir muise en rotte word ook voortdurend deur hierdie Plaagbestryder op strategiese plekke in die gebou geplaas en dopgehou.

'n Statistiese uiteensetting van die werksaamhede van hierdie Seksie verskyn in die tabelle hieronder.

MUSKIETBEHEER

Klagtes waarmee gehandel is en advies gegee	145
Inspeksie van damme waar onkruid verwyder is	236
Inspeksie van damme wat bespuit is	126
Inspeksie van besproeiingsvore wat skoongemaak is	465
Inspeksie van vore wat bespuit is	160
Diverse inspeksies	134
Bespuiting teen insekte	1 174
Totaal	2 440

KNAAGDIERBEHEER

Klagtes waarmee gehandel is en raad gegee	240
Diverse inspeksies	219
Inspeksie van munisipale persele	4 436
Knaagdieropruimingsinspeksies	91
Totale inspeksies vir die jaar	4 986
Gifaas op munisipale persele gestel	5 845
Getal aaslokvalle geneem	4 399
Getal knaagdiere op munisipale persele vernietig	1 745

SLUMOPRUIMING

Alhoewel daar steeds 'n aansienlike toename in die bevolking van die Stad is, het die Afdeling nogtans daarin kon slaag om ongewenste behuisingstoestande, wat dikwels in so 'n vinnig groeiende stad ontstaan, tot 'n minimum te beperk.

Die stigting van nuwe dorpsgebiede het beslis daartoe bygedra om die aanvraag na huise te verlig, maar desondanks bestaan daar 'n behoefte aan wonings vir die middelinkomstegroep en meer in besonder vir persone in die laerinkomstegroep, veral dié met groot gesinne. Die hoë prys waarteen boupersone aangebied word sowel as die alreeds hoë en steeds stygende boukoste, is faktore wat kommer wek met die gevolg dat daar nie in die woningbehoefte van hierdie gesinne voorsien kan word nie.

Wens die voornoemde woningtekort was daar 'n merkbare toename in die aantal gesinne wat wonings met ander gesinne deel of by hulle inwoon en ander wat noodgedwonge van buitegeboue gebruik moes maak. Hierdie toedrag van sake is hoofsaaklik te wyte aan ekonomiese faktore wat gesinne dwing om huisvesting te soek teen huurgelde wat hulle kan bekostig.

Huisbesit behoort egter nie tot die meer bevoorregte groep van die bevolking beperk te wees nie. Dit is dus van belang om te kan meld dat die Raad reeds die afgelope jare 'n gesonde beleid gevolg het deur huisbesittings van stapel te stuur en dit aan te moedig tot voordeel van gesinne in die laerinkomstegroep. Ook hier beperk die hoë boukoste en die prys van grond 'n wyer toepassing van hierdie beleid.

Minder ernstige slumtoestande het ontstaan as gevolg van oorbewoning, ontoereikende kook-, was- en reinigingsgeriewe en die onbehoorlike segregasie van geslagte en dit kan ook hoofsaaklik toegeskryf word aan 'n woningtekort. Kennisgewings is aan eienaars of bewoners waar oortredings van die Slumregulasies voorgekom het, bestel. Daar was egter nie rede vir besorgdheid nie omdat die meeste kennisgewings nagekom is. Drastiese stappe was slegs in 'n paar uitsonderlike gevalle nodig.

"Stadshernuwing" en die uitbreiding van die Stad se nywerheids- en sakegebied het tot gevolg gehad dat swak wonings op sekere persele gesloop is om plek te maak vir moderne sierlike geboue.

In sekere voorstede waar dorpsbeplanning gewysig is, bestaan daar nog heelwat wonings wat nou oaring word deur sake- en nywerheidspersele. Die gevolg hiervan is dat die rustige woonatmosfeer wat vroeër daar geheers het, nou versteur is en geleidelik vervang word deur geraas wat eie en verbonde is aan die bedrywe wat nou in genoemde buurtes tot stand gebring is of nog steeds daarheen uitbrei. Hierdie toename in geraas in omgewings wat nog gedeeltelik vir woondoeleindes gebruik word, is sekerlik een van die hinderlikste steurnisse vir die inwoners in so 'n veranderde omgewing en dra in geen geringe mate daartoe by dat die woonomgewing agteruitgaan nie. Daadwerklike stappe behoort in hierdie verband gedoen te word om sulke bewoners te hervestig in gebiede waar 'n rustige woonatmosfeer heers.

Pretoria is beslis nie 'n stad met 'n hoë persentasie slumwoningen nie maar hy het, net soos enige ander ontwikkelende stad, sy probleme met behuising en stadshernuwing. Dit is 'n oorgangstadium wat nie oornag reggestel kan word nie. Dit is om hierdie rede dat geen grootskaalse "slumopruiming" onderneem is nie en daar eerder oorgegaan is tot 'n gewysigde vorm van opruiming deur sorg te dra dat bewoners van swak woonpersele, redelik geskikte akkommodasie het.

Eienaars van wonings wat reeds heelwat strukturele herstelwerk en versiering nodig het, maar wat nogtans nie as erge slums beskou kan word nie, ondervind blykbaar nou ook probleme om die nodige fondse te verkry om die geboue sodanig te herstel en te versier dat hulle aan die vereistes kan voldoen.

In die ouer voorstede en in die middestad bestaan daar nog 'n verskeidenheid woongeboue wat ouderdom en voorkoms betref. In sy geheel geneem, wissel die toestand van woongeboue in die hele stadsgebied van baie goed tot redelik, met wonings hier en daar, in sekere voorstede, wat swak vertoon en ander wat as slumwoningen beskou kan word.

Gesien in die lig van bewerings wat dikwels gemaak word, moet daar by herhaling beklemtoon word dat die uiterlike voorkoms van baie van die geboue besonder misleidend is omdat hulle verweer en verwaarloos lyk. Die meeste van hierdie geboue is egter in 'n redelik bewoonbare toestand en kan beslis nie as slums beskou word nie. Om hierdie verouderde geboue in die middestad en in die voorstede waar hulle bestaan, op te ruim, kom eenvoudig net neer op "stadshernuwling", wat beslis nie met "slumopruiing" verwar moet word nie.

Die swak uiterlike voorkoms van geboue is 'n aangeleentheid waarvoor hierdie Afdeling geen beheer kan uitoefen nie.

As gevolg van optrede deur die Slumseksie en ook op eie inisiatief, wou heelwat eienaars van die ou wonings sloop en daarna wonings, woonstelle of besigheidsgeboue oprig. Aansoeke om slopingpermitte is dan ook ingedien, maar sekere van hierdie aansoeke is geweier met die gevolg dat die terreine nie ontwikkel kon word nie. Die rede vir die afkeuring van sulke aansoeke deur die Departement van Gemeenskapsontwikkeling en Overheidshulpdienste is gewoonlik te vinde in die feit dat die bewoners nie ander woonakkommodasie kon bekom nie.

Slumpersels word gewoonlik deur armer gesinne wat dit moeilik vind om ander geskikte huisvesting te bekom, bewoon. Gevolglik neem hierdie Afdeling altyd die individuele omstandighede in aanmerking alvorens daar meer drasties opgetree word. Heelwat van die eiendomme in die verskillende voorstede van die stadsgebied wat as slumwoningen beskou word, is deur die huidige okkuppeerders per huurkoop-ooreenkoms aangeskaf met slegs een doel, naamlik om 'n vorm van behuising aan hul gesinne te gee. Die meeste van hierdie kopers het nie die fondse, en kan ook nie andersins fondse bekom, om die geboue op die persele te verbeter nie.

Eienaars van wonings wat na mening as slumwoningen beskou word, het soos in die verlede, redelike goeie samewerking verleen en daar is, na optrede deur die Seksie wat belas is met slumopruiing, van die wonings gesloop of omgeskep vir besigheidsgebruik of sodanig herstel dat hulle aan behuisingsvereistes voldoen het.

Benevens inspeksies van private wonings, ander woongeboue en die ondersoek van klagtes oor slumtoestande, rapporteer hierdie Seksie ook oor eiendomme wat die Raad aankoop of onteien in verband met die verskillende projekte wat die Raad beplan. Alle aansoeke om wooneenhede ingevolge die bepalings van die Behuisingswet te sloop of vir ander doeleindes te gebruik, word deur hierdie Seksie ondersoek en die aansoeke word tesame met verslae aan of die Departement van Gemeenskapsontwikkeling en Overheidshulpdienste of aan die Raad vir oorweging voorgelê.

Gedetailleerde statistiese opgawes rakende wonings wat as slumwoningen beskou kan word en oor geokkuppeerde buitegeboue in die Blankewoongebiede word verstrek op bladsye 80 en 81.

VERSPREIDING EN VOORKOMSSYFER VAN EIENDOMME WAT AS ERGE SLUMS BESKOU KAN WORD EN VAN GEOKKUPEERDE BUITEGEBOUW IN BLANKWOONGEBIEDE

A. EIENDOMME WAT AS ERGE SLUMS BESKOU KAN WORD: (Kyk bladsy 81.)

B. GEOKKUPEERDE BUITEGEBOUW

Voorstad	Bewoon gedurende		Ontruim gedurende		Bewoon 31 Desember	
	1979	1980	1979	1980	1979	1980
Hatfield	-	1	-	1	-	-
Elloffsdal	-	2	-	2	-	-
East Lynne	1	3	-	2	1	1
Erasmia	1	1	-	1	1	-
Sunnyside	1	-	1	-	-	-
Capital Park	3	2	2	1	1	1
Mayville	1	2	1	2	-	-
Pretoria-Noord	3	7	-	6	3	1
Rietfontein	1	1	-	-	1	1
Villieria	5	4	-	1	5	3
Molmer	2	1	2	1	-	-
Wonderboom-Landbouhoeves	-	1	-	1	-	-
Wonderboom-Suid	-	1	-	1	-	-
Silverton	2	-	2	-	-	-
Mountain View	7	1	6	1	1	-
Waverley	-	1	-	1	-	-
Nicomar	1	-	1	-	-	-
Pretoria-Wes	8	3	5	2	3	1
Daspoort	5	3	5	2	-	1
Lynnwood Glen	-	1	-	-	-	1
Booyens	3	-	3	-	-	-
Claremont	4	3	3	2	1	1
Pretoria Gardens	-	1	-	1	-	-
Willow Park	-	1	-	-	-	1
Jan Niebrandpark	4	-	4	-	-	-
Danville	3	4	2	4	1	-
Totaal	55	44	37	32	18	12

Gedurende die jaar is dertien woonwaens, twee tente en 'n asbesstruktuur deur gesinne vir woondoeleindes gebruik. In meeste gevalle is die gebruik hiervan egter gestaak nadat kennisgewings bestel is.

HOFGEDINGE

Soos in vorige jare en in ooreenstemming met die algemene beleid van hierdie Afdeling is daar voortgegaan om die samewerking van die publiek te verkry eerder as om hofgedinge in te stel.

Die Afdeling was nietemin verplig om, nadat skriftelike waarskuwings kragtens die Slumswet, 1979, aan sekere eienaars bestel was en daar nie bevredigende pogings aangewend was om die misstande wat op die persele bestaan het, uit die weg te ruim nie, dié sake by die Slumopruiwingshof aanhangig te maak.

A. EIENDOMME WAT AS ERGE SLUMS BESKOU KAN WORD

Voorstad	Herstel	Gesloop				Gatal slums opgeruim				Bevoon				Onbevoon				Totaal bekende erge slums			
		1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980
Arcadia	1	-	-	2	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Brooklyn	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	1	1	-	-
Booyens	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	1	1	-	-
Derdepoort 326 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-
East Lynne	1	-	-	-	-	1	-	-	-	2	2	-	-	3	-	-	-	5	5	-	-
Forsterust - uitbreiding 2	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-
Parktown	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Despatch	-	-	-	1	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Silverton	-	-	-	1	-	1	-	-	-	-	-	-	-	3	-	-	-	3	3	-	-
Sunnyside	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-
Molwer	4	-	-	-	-	5	-	-	-	7	20	-	-	2	-	-	-	22	19	-	-
Wonderboom-Landbouhoeves	-	-	-	-	-	-	-	-	-	-	5	-	-	3	-	-	-	8	8	-	-
Wonderboom-Suid	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	2	-	-
Gezina	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mayville	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pretoria-Noord	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	1	2	-	-
Rietfontein	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	-	-
Pretoria-Wes	-	-	-	1	-	2	-	-	-	2	1	-	-	2	-	-	-	3	3	-	-
Goedehoop	-	-	-	5	-	5	-	-	-	5	5	-	-	2	-	-	-	7	6	-	-
Pretoria-Sentraal	-	-	-	3	-	4	-	-	-	1	-	-	-	1	-	-	-	1	1	-	-
Claremont	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	2	-	-
Daspoort	-	-	-	1	-	1	-	-	-	2	2	-	-	-	-	-	-	2	3	-	-
Mountain View	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Daspoort Estate	-	-	-	-	-	1	-	-	-	1	2	-	-	-	-	-	-	-	-	-	-
TOTAAL	7	3	3	22	-	32	14	43	36	18	21	61	57	7	3	3	22	14	32	17	43

Gedurende die jaar is sewe sake na die Slumopruimingshof verwys. Die uitslag was soos volg:

Vier wonings bestaande uit vier, ses, drie en vier woonvertrekke onderskeidelik, moes gesloop word. Ten tyde van die verhoor, was drie wonings bewoon en een was onbewoon.

Een saak ten opsigte van 'n woning geleë in Wolmer, is uitgestel en die woning is later gesloop nadat die nodige magtiging daartoe verkry is.

Een saak ten opsigte van 'n woning geleë in Pretoria-sentraal, is van die rol geskrap op voorwaarde dat die eienaars onmiddellik aansoek doen om 'n slopingspermit, wat hulle wel gedoen het en die gebou was op 31 Desember 1980 gedeeltelik gesloop.

Een saak ten opsigte van 'n woning geleë in Wolmer, is teruggetrek aangesien herstelwerk aan die woning bevredigend gevorder het.

Die Slumopruimingshof het in drie gevalle vorige slumverklarings opgehef nadat die eienaars die nodige wetlike verpligtinge nagekom het.

Geen hofgedinge is gedurende die jaar ingevolge bepalinge van die plaaslike Slumregulasies ingestel nie.

SLOPING EN OMSKAKELING VAN WOONEENHEDE

Die aantal aansoeke om slopingspermitte het gedurende die jaar gestyg. As gevolg van optrede deur hierdie Afdeling, het die eienaars van ses wooneenhede besluit om die verbeteringe op die eiendomme te sloop waarna daar in die meeste gevalle nuwe geboue opgerig is.

Gedurende die jaar is 94 selfstandige wooneenhede sowel as die volgende geboue gesloop:

'n Hotel en bygebou bestaande uit 110 woonkamers. 'n Losieshuis bestaande uit 40 woonkamers. 'n Woonstel-blok bestaande uit 31 woonkamers. 'n Gebou (oorspronklik 'n losieshuis) bestaande uit 16 woonkamers. 'n Woongebou bestaande uit 39 woonkamers.

Sewentien aansoeke is ontvang om wonings wat as slumwoningen beskou is, te sloop of om dit vir ander doeleindes te gebruik. Hierdie aansoeke is almal goedgekeur deur die Departement van Gemeenskapsontwikkeling en Overheidshulpdienste.

Besonderhede van aansoeke wat ontvang is om wooneenhede te sloop of om persele vir besigheidsgebruik aan te wend, word in die volgende tabel verstrekk:

Aansoeke vir oorweging na die Departement van Gemeenskapsontwikkeling en Overheidshulpdienste verwys:

	Getal woon- eenhede	Getal woonver- trekke betrokke	Aansoeke toegestaan	Aansoeke geweier	Magtiging hangende
Slopings	152	884	120	5	27
Omskakelings	31	137	28	1	2
Totaal	183	1 021	148	6	29

Aansoeke vir oorweging aan die Raad voorgelê:

	Getal wooneenhede (meer as 5 woonvertrekke elk)	Getal woonver- trekke betrokke	Magtiging verleen	Magtiging geweier	Magtiging hangende
Omskakelings	4	25	4	0	0

Hierdie Afdeling beskik nie oor besonderhede van woongeboue wat deur die Staat of die Provinsiale Administrasie gesloop word nie omdat hulle nie onderworpe is aan die bepalings van die Behuisingswet vir sover dit die verkryging van slopingspermitte betref nie.

Slopingspermitte word nie vir besigheidsgeboue vereis nie, maar daar word daarop aangedring dat sertifikate verkry moet word dat sulke geboue vry van knaagdiere is voordat met die sloping daarvan begin mag word.

Ontleding van aansoeke wat ontvang is om wonings te sloop of om te skakel vir besigheidsgebruik en die redes daarvoor:

A. SLOPING

Getal aansoeke ontvang (wooneenhede)

1
33
12
3
21
68
3
1
1
8
1

Totaal 152

Beoogde ontwikkeling

Onetehuis
Wonings
Onbekend
Padbouskema
Besighede en kantore
Woonstelle
Fabrieke en stoorkamers
Busloods
Spreekkamer
Parkering
Werkwinkel

B. OMSKAKELINGS

Getal aansoeke ontvang (wooneenhede)

1
1
7
22
1
2
1

Totaal 35

Beoogde toekomstige gebruik

Klaskamers
Crèche
Besighede
Kantore en pakkamers
Kliniek
Buitegebou
Spreekkamers

STATISTIEKE OOR SLUMVOORKOMING EN -OPRUIMINGSWERK

Besonderhede van werk wat gedurende die jaar onderneem is:

Soort inspeksie

Private wonings
Geokkupeerde buitegeboue en herinspeksies
Sloping van wooneenhede (voor en nadat permitte toegestaan is)
Omskepping van wooneenhede (voor en nadat permitte toegestaan is)
Klagtes ondersoek
Herinspeksie van persele
Diverse inspeksies

Totaal

Getal persele

48
120
622
47
178
646
32
1 700

Besonderhede van optrede na bogenoemde inspeksies en ondersoeke is soos volg:

Kennisgewings bestel

Wonings wat as slumwonings beskou is en bewoonde buitegeboue	104
Oorbewoning	41
Strukturele herstelwerk en opknapping	37
Bad-, opwas- en kookgeriewe	5
Totaal	187
Mondelinge waarskuwings en advies	425
Briewe gerig (aanmanings, uitstel, besonderhede van werk vereis ens)	452
Aangeleenthede na ander Afdelings verwys	229
Onderhoude	509
Totale getal oortredings waarmee gehandel is	612
Totale getal kennisgewings en aanmanings waaraan voldoen is	437

KINDERBEWAARHUISE, KLEUTERSKOLE, NASKOOLSENTRA, OUETEHUISE EN ANDER INRIGTINGS

Heelwat navrae is gedurende die jaar ontvang van persone wat versorgingsoorde vir babas en kinders van voorskoolse ouderdom wou daarstel.

Alhoewel 'n aantal nuwe kinderbewaarhuise en kleuterskole gedurende 1980 tot stand gekom het, bly die behoefte aan sulke inrigtings steeds groter as die aantal beskikbaar. As gevolg hiervan neem baie van die bestaande inrigtings meer kinders in as wat die vloeroppervlak en geriewe toelaat en voortdurende waaksaamheid wat hierdie aspek van die werk betref, is dus noodsaaklik.

Oor die algemeen word uitstekende samewerking van die onderskeie inrigtings verkry. Hierdie inrigtings lewer 'n uiters noodsaaklike diens aan die gemeenskap en is gewoonlik meer as gewillig om die standaard van versorging van voorskoolse kinders in Pretoria te verhoog.

Daar word steeds ten nouste met die Departement van Gesondheid en Welsyn sowel as die Transvaalse Onderwysdepartement saamgewerk met betrekking tot die registrasie van die verskillende inrigtings.

Die voorwaardes, standaarde en vereistes waaraan daar voldoen moet word, word deur die genoemde twee Departemente en hierdie Afdeling bepaal. Die Standaardgesondheidsverordeninge vir kinderbewaarhuise en kinderbewaarhuise-cum-kleuterskole vir Blanke kinders afgekondig by Administrateurskennisgewing 273 van 1 Maart 1972, is van toepassing in die munisipale gebied van Pretoria.

Kinderbewartuise, Kinderbewartuise-cum-kleuterskole, Kleuterskole en Naskoolsentra:

Altesaam 19 kinderbewartuise, 13 kinderbewartuise-cum-kleuterskole, 53 kleuterskole en 21 naskoolsentrums is in die munisipale gebied van Pretoria geleë.

Die getal kinders wat in die verskillende inrigtings gehuisves word, is soos volg:

Soort Inrigting	Aantal	Getal Kinders
Kinderbewartuise-cum-kleuterskole	13	1 516
Kinderbewartuise	19	850
Kleuterskole	53	4 192
Naskoolsentra	21	1 615
Totaal	106	8 173

Ouetehuisse:

Daar is 36 ouetehuisse in die stadsgebied van Pretoria waar 'n totaal van 2 996 bejaarde persone versorg word.

Daarbenewens word daar 1 590 bejaardes in 1 088 wooneenhede onder groepsbehuising gehuisves waar hulle selfstandig woon, maar tog versaker is van spesiale versorging en gemeenskapsdienste.

Daar is steeds 'n groeiende behoefte aan huisvesting vir sowel sterk as liggaamlik- en/of geestelikverswakte bejaardes veral weens die feit dat die aantal bejaardes toeneem en dat 'n groot persentasie van hulle hulle nou in die Stad bevind.

Alle ouetehuisse word deur die Departement van Volkswelsyn en Pensioene geregistreer na uitreiking van 'n sertifikaat deur hierdie Afdeling dat die perseel met sy diensstelsels en geriewe aan die plaaslike gesondheidsvereistes voldoen.

Ander Inrigtings:

Daar is ook beheer uitgeoefen oor die gesondheidstoestande by inrigtings soos jeugsentra, sentra vir vertraagde en serebraalgestremde kinders, sentra vir alkoholiste, 'n tehuis vir ontslane gevangenes en tihuise vir ongehude moede.

Besonderhede van werk wat gedurende die jaar onderneem is:

Soort inspeksie	Getal persele
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Ouetehuisse:

Nuwe persele	5
Herinspeksies	67
Klagtes ondersoek	9
Toestemmingsgebruik (aansoek om)	4
Ongemagtigde persele	0
Omskakelingsaansoeke	0
Totaal	85

Kleuterskole:

Nuwe persele	2
Herinspeksies	109
Klagtes ondersoek	1
Toestemmingsgebruik (aansoek om)	4
Omskakelings/slopingaansoeke	0
Ongemagtigde persele	4
Totaal	120

Kinderbewaarhuise:

Nuwe persele	3
Herinspeksies	41
Klagtes ondersoek	8
Toestemmingsgebruik (aansoek om)	0
Ongemagtigde persele	25
Omskakelings/slopingaansoeke	1
Totaal	78

Kleuterskole-cum-kinderbewaarhuise:

Nuwe persele	8
Herinspeksies	57
Toestemmingsgebruik (aansoek om)	0
Klagtes	0
Omskakelings/slopingaansoeke	3
Ongemagtigde persele	3
Totaal	71

Naskoolsentra:

Nuwe persele	7
Herinspeksies	16
Klagtes	0
Ongemagtigde persele	0
Toestemmingsgebruik (aansoek om)	0
Totaal	23

Soort inspeksie	Getal persele
-----------------	---------------

Ander inrigtings:	
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Nuwe persele	5
Herinspeksies	21
Klagtes	2

Totaal	28
--------	----

Woonpersele:	16
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Totale getal inspeksies	421
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Besonderhede van optrede na bogenoemde inspeksies en ondersoeke is soos volg:

Kennisgewings bestel	32
Mondelinge waarskuwings en advies	186
Briewe gerig (besonderhede van werk vereis, aanmanings, ens.)	48

Totaal	266
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Onderhoude	260
Aangeleenthede na ander Afdelings en Staatsdepartemente verwys	75
Totale getal kennisgewings en aanmanings waaraan voldoen is	146

NIEBLANKEGEBIEDE

Die personeel verbonde aan hierdie Seksie is soos volg:

Afdelingsgesondheidsinspekteurs	2
Kleurlinggesondheidsinspekteur	1
Eerste Gesondheidsinspekteur	2
Swart Gesondheidsinspekteurs	5

NIEBLANKEDORPSGEBIEDE

MANELODI, ATTERIDGEVILLE EN SAULSVILLE

Hierdie gemeenskappe is uit verskillende etniese groepe saangestel. Die inwoners is hoofsaaklik werksaam in die naby geleë nywerheidsgebiede asook in die stadsgebied. Vervoer vanaf en na hierdie gebiede word voorsien deur 'n gerieflike treindiens asook 'n busdiens waarvan die vertrekpunte vanaf hierdie gebiede voldoende blyk te wees.

Die saamewerking van die beherende owerheid, naamlik die Administrasieraad vir Sentraal-Transvaal, asook ander instansies aangaande gesondheidsaangeleenthede is baie bevredigend.

Heelwat aanbousels word deur die bewoners self aan hul wonings aangebring; sodoende word die probleme van oorbevolking in 'n sekere mate verlig.

Alle noodsaaklike dienste is in hierdie gebiede voorsien, soos watervoorziening, sanitêre geriewe, vullisverwydering, gesondheidsdienste, elektrisiteit, telefoondienste, skole en ander inrigtings.

In Atteridgeville is 'n goed toegeruste hotel en kroeg vir die gerief van die inwoners opgerig, wat goed deur die plaaslike inwoners asook besoekers ondersteun word.

Sportstadions, gemeenskapsale, twee swembaddens in elke gebied en 'n rolbalbaan in Atteridgeville is vir die beoefening van die genoemde sportsoorte deur die inwoners beskikbaar.

Alle noodsaaklike tipes besighede wat aan die onmiddellike behoeftes van die gemeenskappe voldoen, is ook in hierdie gebiede voorsien.

Hierdie gemeenskappe word deur hulle eie gemeenskapsrade bedien, wat maandeliks vergaderings hou om sake rakende die onderskeie gemeenskappe te bespreek.

EERSTERUST

Hierdie gemeenskap wat 'n besondere hoë lewenstandaard handhaaf, is hoofsaaklik werksaam in die stad asook in die plaaslike nywerheidsgebiede. Vervoer word hoofsaaklik voorsien deur 'n busdiens, waar daar moontlik 'n mate van verbetering kan wees, asook deur taxi's, private voertuie en 'n treindiens.

Die stygende lewenstandaarde van die inwoners het tot 'n versnelde groei in hierdie gebied bygedra.

Alle noodsaaklike dienste is in hierdie gebied voorsien, soos watervoorziening, sanitêre geriewe, vullisverwyderingsdienste, gesondheidsdienste, elektrisiteit, telefoondienste, skole en ander inrigtings.

Groot uitbreidings aan die noordekant van die gebied het reeds ver gevorder en al die noodsaaklike geriewe sal daar voorsien word. By die voltooiing van hierdie uitbreidings sal die knellende woningnood aansienlik verlig.

Stadions, 'n swembad van Olimpiese standaard, 'n rolbalbaan, tennisbane en gemeenskapsale vir die onderskeie sport-aktiviteite wat deur die inwoners beoefen word, is voorsien.

'n Gerieflike goed beplande ontspanningsoord is aan die noordwestelike gedeelte van Eersterust geleë, wat terdeë deur die inwoners benut word.

Alle verskillende en noodsaaklike tipes besighede is ook in hierdie gebied voorsien, wat aan die onmiddellike behoeftes van die gemeenskap voldoen. Die wonings is oor die algemeen netjies en 'n groot aantal spog met goed versorgde tuine.

Die gemeenskap van hierdie gebied word bedien deur hulle eie Bestuurskomitee, wat maandelikse vergaderings hou om sake rakende die gemeenskap te bespreek.

LAUDIUM

Hierdie gemeenskap wat uit verskillende godsdienstige groepe saangestel is, woon in hierdie gewilde en vooruitstrewende dorpsgebied. Van die deftigste wonings en vooruitstrewendste besighede in die munisipale gebied is hier opgerig.

Addisionele uitbreidings is nog in die beplanningstadium en sommige is reeds in die gebied voltooi. Claudius wat vroeër 'n Blanke gebied was, is nou by hierdie gebied ingelyf en die uitsit van erwe en die voorsiening van die noodsaaklike geriewe het reeds 'n gevorderde stadium bereik. 'n Gebied aan die noordekant van Laudium wat as die "Melkplase" bekend staan, is nog in die beplanningstadium en wanneer al hierdie uitbreidings voltooi is, sal dit 'n geweldige verligting bied ten opsigte van die beplanningsnood wat in hierdie gebied ondervind word.

'n Nuutgeboude en goed toegeruste hospitaal wat nog nie in gebruik is nie, is in hierdie gebied opgerig wat in die behoeftes van die gemeenskap sal voorsien. 'n "Technikon" wat eersdaags voltooi sal word, asook 'n aantal woonstelgeboue, is in aanbou.

Die hoë lewenstandaard van die inwoners dra by tot 'n versnelde groei in hierdie gebied en 'n aantal nywerhede en besigheidskomplekse is opgerig, wat goed ondersteun word deur die plaaslike inwoners sowel as deur ander inwoners van die Stadsgebied.

Gelisensieerde restaurante asook 'n goed toegeruste hotel en kroeg is opgerig, wat goed deur die plaaslike inwoners en besoekers ondersteun word.

Alle noodsaaklike dienste bestaan in hierdie gebied soos watervoorsiening, sanitêre geriewe, vullisverwydering, gesondheidsdienste, elektrisiteit, telefoondienste, skole en inrigtings.

Sportvelde, gemeenskapsale en 'n swembad van olimpiese standaard is voorsien en 'n rolbalbaan is nog in aanbou.

Die pragtige wonings en netjiese tuine weerspieël die vooruitstrewendheid van hierdie gemeenskap.

Die gemeenskap word bedien deur hulle eie plaaslike Bestuurskomitee wat maandelikse vergaderings hou om sake rakende die gemeenskap te bespreek.

ASIËRBUURT

Die hervestiging van die besighede en die herbeplanning van hierdie gebied het alreeds 'n gevorderde stadium bereik, en word deur die Departement van Gemeenskapsbou en Overheidshulpdienste in samewerking met die Stadsraad van Pretoria, die provinsiale Administrasie en die Komitee vir die Hervestiging en Herbeplanning van die Asiërbuurt behartig.

Hierdie gebied word hoofsaaklik deur die Asiërgemeenskap van Pretoria bedien.

Heelwat nuwe besigheidskomplekse wat deur die Asiërgemeenskap bedryf word, is reeds deur die Departement van Gemeenskapsbou en Overheidshulpdienste opgerig.

STATISTIESE OPGAWES VIR ALLE NIEBLANKEGEBIEDE

A. Opsomming van inspeksies wat gedurende die jaar in Nieblankegebiede gedoen is:

Oorlaste waarmee gehandel is	13 890
Kennisgewings waaraan voldoen is	485
Aansegings waaraan voldoen is	13 590
Kennisgewings bestel	300
Aansegings gegee	13 590
Herinspeksies	15 180
Klagtes ondersoek	360
Lisensie-aansoeke	980
Persele waar diere/pluimvee aangehou word	100
Slaghuisse	850
Vis- en pluimveehandelaars	50
Algemene handelaars (voedsel)	2 395
Algemene handelaars (nie voedsel nie)	480
Restourante, teekamers en eethuise	2 167
Varsproduktehandelaars	520
Melkdepots en melkwinkels	260
Marskramerpakkers	580
Varsprodukte- en roomyskarretjies	420
Afleweringervoertuie (vleis, melk, vis en brood)	735
Bioskope en openbare sale	150
Huisinspeksies	3 798
Haarkappers	160
Washuise en wasserye	30
Fabrieke en werkwinkels	100
Tydlike bouerslatrines	70
Bewoonde buitgeboue	250
Besoeke buite ure	15
Swarthostels	110
Totaal	29 760

Sake wat na ander Afdelings vir aandag verwys is:

Verstopte riole/defektiewe wateraansluitingtoebehoorsels	180
Ongemagtigde geboue	240
Strukturele gebreke aan geboue	90
Ander sake	40
Totaal	550

B. Hier volg 'n opsomming van die werk wat in verband met Plaagbeheer in die Nieblankegebiede gedoen is:

Knaagdiere:

1. Klagtes ondersoek	200
2. Persele geïnspekteer en advies gegee	545
3. Kennisgewings bestel en aansegings gegee om lokvalle of gif te gebruik	498
4. Kennisgewings bestel waarin daar vereis word dat persele knaagdiervry gemaak word	89
5. Kennisgewings bestel ingevolge 3 en 4 hierbo, waaraan voldoen is	320
6. Ophoping van rommel of hout wat moontlik knaagdiere kan huisves, opgeruim of verwyder	529
7. Getal knaagdiere gedood of as dood gerapporteer	220

Muskiete:

1. Klagtes ondersoek	20
2. Inspeksies gedoen	50
3. Kennisgewings bestel en aanseggings gegee	30
4. Kennisgewings bestel ingevolge 3 hierbo, waaraan voldoen is	15
5. Broeiplekke uitgeskakel	35
6. Advies in verband met muskietbeheer gegee	35
7. Soort muskiete gevind	Culex

Vlieë:

1. Klagtes ondersoek	15
2. Inspeksies gedoen	30
3. Kennisgewings bestel en aanseggings gegee	10
4. Kennisgewings onder 3 hierbo bestel, waaraan voldoen is	4
5. Broeiplekke uitgeskakel	10
6. Advies in verband met vlieëbeheer gegee	20

C. Algemene inligting : Slegs nuwe dorpe:

	Atteridgeville	Mamelodi	Laudium	Eersterust
Bevolking				
1. Woonhuise	81 491	107 404	20 000	20 000
2. Hostel	15 603	15 302	0	0

Woonhuise

1. Bewoon	10 200	13 846	2 914	2 413
2. Leeg	0	0	0	0
3. In aanbou	150	0	0	0

	Atteridgeville	Mamelodi	Laudium	Eersterust
Aanbiddingsplekke	54	60	6	12
Skole	31	45	6	6
Biersale	2	5	0	0
Woonstelle	0	0	750	0
Kroeë (sterk drank)	2	2	2	1
Drankwinkels (sterk drank)	3	4	1	0
Garages	3	3	2	2
Crèches	5	5	1	1
Hostels	1	3	0	0
Administratiewe blokke	4	2	1	1
Quetahuise	1	1	0	1
Bioskope	1	1	1	1
Gemeenskapsentrums/-sale	4	2	5	4
Kwekerye	0	1	0	0

D. Bouplanne

Ses honderd drie-en-sewentig bouplanne ten opsigte van veranderings, aanbouings en nuwe geboue in die Nieblanke-gebiede is gedurende die jaar nagegaan.

E. Vervolgings

Aard van oortreding	Totale getal vervolgings	Getal skuldig bevind	Getal onskuldig bevind	Getal teruggetrek	Getal ge-waarsku en ontslaan	Boetes opgelê
Vuil toestand op besigheidsperseel	1 (2)	1 (1)	0 (0)	0 (0)	0 (0)	R50(R10)

F. Gelisensieerde persone

	Atteridgeville	Mamelodi	Laudium	Asiërbuurt	Eersterust
Bakkerie en banketbakkerie	0	0	2	0	0
Biljartsalonne	0	0	0	0	1
Slagters	14	14	5	10	4
Steenkoolagentskappe	5	11	0	0	2
Skoenmakers	3	4	0	29	1
Fietshandelaars	1	3	0	10	6
Droogskoonmaakfabrieke en wasserye	2	0	2	4	0
Varsproduktehandelaars	45	50	23	164	22
Vishandelaars	0	0	9	19	0
Fabrieke	0	0	13	1	0
Algemene handelaars (lewensmiddele uitgesluit)	20	24	60	280	15
Haarkappers	3	3	3	20	0
Marskramers/venters	35	44	135	30	40
Kruiedokters	0	3	1	0	0
Melkdepots	4	3	2	0	1
Koel drankhandelaars	23	25	10	26	7
Eethuise	8	8	0	0	2
Lewensmiddelehandelaars	46	45	28	150	30
Teaters	1	1	1	3	1
Kleremakers	3	3	0	30	0
Begrafnisonderneemers	1	4	0	0	0
Werkwinkels/handelaars in motoronderdele	2	8	4	20	2
Restaurante/teekamers	16	20	16	70	12
Handelaars in tweedehandse goedere	4	9	0	5	2
Roomysverkopers	7	8	7	10	7
Melkwinkels	12	8	13	30	7
Droogskoonmakersontvangdepots	9	6	6	19	5
Handelaars in patente medisyne	12	20	15	69	18
Algemene handelaar (fotografiese toerusting)	0	1	2	4	0
Loodgieter	0	1	0	0	0

SUIWEL- EN VEEARTSENYBEHEER

Die Afdeling se Melkbeheerseksie oefen beheer oor die Stad se varsmelkvoorraad uit. Die doelstelling van die Seksie is om die gehalte van die Stad se varsmelkvoorraad te beheer en te handhaaf, om aldus te verseker dat 'n voedsame en hoogs noodsaaklike voedselkommoditeit met welslae geproduseer, aangebied en bemark word.

Vanweë die voedsame eienskappe van melk, is dit sterk aan mikrobiologiese bedarf onderhevig, en kan dit daarbenewens as 'n draer van patogeniese organismes dien. Ten einde besmetting deur patogene en bederforganismes te voorkom, is dit in die eerste plek nodig om te verseker dat die koel-eenheid gesond is en in staat is om 'n gesonde produk te lewer, en tweedens om te verseker dat die melk, sodra dit geproduseer is, se gehalte behoue sal bly. Vir hierdie doel is die dienste van Veeartse sowel as higiëniste nodig in 'n geïntegreerde en gekoördineerde program.

Alle aktiwiteite geskied binne die raamwerk van spesifieke wetgewing op die vlak van die Sentrale Regering sowel as van die plaaslike bestuur. Die Wet op Voedingsmiddels, Skoonheidsmiddels en Ontsmettingsmiddels, 1972, en die Melkverordeninge van die Munisipaliteit Pretoria is van besondere belang.

Die Melkverordeninge maak voorsiening vir die verpligte pasteurisering van melk en vir die produksie en verspreiding van gesertifiseerde melk en room. Die melkvoorraad is van 333 plaasmelkerye verkry, waarvan drie gesertifiseerde melkprodusent-verspreiders is en die orige 330 produsente hulle melk in grootaathouers by die een of ander van die vier pasteuriseringsinstallasies lewer. Van die 333 kuddes word 319 meganies gemelk.

Die Departement van Verdediging is die eienaar van een van hierdie installasies, wat hy dan ook self bedryf waar dit op Voortrekkerhoogte geleë is, en dit dus nie binne die munisipale regsgebied ressorteer nie. Die ander drie pasteuriseringsmaatskappye het deur onderlinge ooreenkomste drie verspreidingsone met betrekking tot hulle onderskeie fabriekspersonele ingestel, waardeur verspreiding vinniger en makliker afgehandel en die verspreidingskoste laag gehou kan word. Die verspreiding van gesertifiseerde melk is bykans uitsluitlik tot die Stad se oostelike voorstede beperk.

Die Suiwelbeheerraad werk volgens 'n gehaltebetalingskema wat op melkvet- en proteïengehalte gebaseer is. Die prys wat produsente per kilogram melkvet ontvang, is dieselfde as dié wat die botterfabrieke betaal vir die massa van die melkvet wat in hulle maandelikse melkvoorrade voorkom. Nadat die betaling ten opsigte van die melkvet in berekening gebring is, word die oorblywende bedrag in die melkverkoopfonds onder al die produsente verdeel in verhouding tot die totale proteïengehalte van die melk wat elkeen tydens 'n bepaalde maand gelewer het. Die prys vir melkvet bly dus konstant, terwyl die betaling ten opsigte van proteïen in verhouding tot die toe- of afname in surplus skommel. Die hoë prys wat ten opsigte van proteïen aan produseente aangebied word, dien vir hulle as aanspooring om meer aandag aan die proteïengehalte van melk te skenk. Daar word algemeen aanvaar dat proteïen melk se waardevolste en voedsaamste bestanddeel is. Daarbenewens ontvang produsente 'n bonusbetaling van 1,25 sent per liter vir melk met 'n Resazurinlesing van 4,5 of hoër.

Die personeelsterkte van die Seksie bestaan uit 'n Hoof Stadsveearts, 'n Senior Stadsveearts, 'n Afdelings-gesondheidsinspekteur, 'n Toesighoudende Gesondheidsinspekteur, 2 Gesondheidsinspekteurs, en 'n gekwalifiseerde Laboratoriumtegnoloog. Hierdie taakmag is regstreeks by 'n allesomvattende gesondheids- en higiëneprogram ingeskakel, sodat maksimum dekking aan alle aspekte van melkproduksie, -hantering, -vervoer, -verwerking, -verpakking, -verspreiding en -verkoop verleen kan word. Hierdie dekking behels 330 plaasmelkerye, sommige tot so ver soos 300 km van hier af, wat baie ritte en oornagverblyf verg.

1. BESONDERHEDE VAN LISENSIEHOUDERS EN PERMITTE WAARMEE GEHANDEL IS

	Nuut	Oorgedra	Gestaak	Toe- of afname
Produsente	21 (30)	-	48 (27)	-27 (+3)
Produsent-verspreiders	0 (2)	-	0 (0)	0 (0)
Verspreiders	3 (3)	-	0 (0)	0 (0)
Totaal	24 (35)	-	48 (27)	-27 (+3)

2. LIGGING VAN PERSELE

	In mun. gebied	Binne							Totaal
		1-16 km	17-40 km	41-80 km	81-120 km	121-160 km	161-240 km	241-320 km	
Produsente	4 (4)	0 (0)	21 (21)	67 (67)	79 (82)	49 (49)	88 (99)	25 (27)	333 (359)
Produsent-verspreiders	0 (0)	3 (3)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	3 (3)
Verspreiders	79 (79)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	79 (79)
Totaal	83 (83)	3 (3)	21 (21)	67 (67)	79 (82)	49 (49)	88 (99)	25 (27)	415 (441)

Die meeste plase buite 'n omtrek van 40 km is gekonsentreer in 'n landbougebied oos en suidoos van die stad. Hierdie gebied maak 'n deel uit van die Hoëveld van die Transvaal en is goed bekend vanweë sy hoë gemiddelde reënval en intensiewe oesproduksie.

3. SOORT PERSEEL

I. Melkportaal

(i) Skouerstand	20 (22)
(ii) Syhek-tandem	217 (227)
(iii) Agtermekaar deurlopend	10 (17)
(iv) Visgraat	11 (4)
(v) Roto-stelsel	1 (1)

II. Konvensionele koeistal met

(a) Vakuüm pypleidingstelsel/kan/emmer	31 (27)
(b) Vervoerbare emmerstelsel	1 (1)
(c) Melk pypleidingstelsel	28 (39)
(d) Met die hand melk	14 (16)
Totaal	333 (359)

III. Produsente wat verkoelde grootmaat
plaastens gebruik

333 (359)

4. VERVOER EN VERSPREIDING VAN MELK

(a) Vervoer

Afgesien van melk wat direk vanaf die produsent-verspreiders versprei word, word slegs grootmaatbesandings ontvang.

Private kontrakteurs is verantwoordelik vir die versameling en aflewering van melk in grootmaat aan die pasteuriseringsinstallasies. Grootmaatmelktenkwaens word deeglik skoongemaak en ontsaet by die ontvangsdepots na aflewering van hulle inhoud en daarbenewens word van kontrakteurs vereis om die tankwaens in 'n higiëniese toestand te hou, of hulle in gebruik is, al dan nie.

(b) Verspreiding

Die binnestedelike verspreiding van verwerkte melk, "gesertifiseerde rou melk" en sommige ander verwerkte melk-produkte gaskied deur middel van 'n verskeidenheid van voertuie. Melk word aan verbruikers gelewer in melkkanne, verseëde bottels of nie-herbruikbare plastiek- of kartonhouers. Verspreiding gaskied gewoonlik van die hoof-pasteuriserings- en verwerkingsinstallasies af na strategies geleë melkdepots vanwaar verdere verspreiding na kleiner melkwinkels en -depots in die woongebiede onderneem word. Alleenlik melk of melkprodukte (behalwe "gesertifiseerde" rou melk of room) wat gepasteuriseer of gesteriliseer is, word toegelaat om vir verbruik binne die Stad versprei te word.

5. GEMIDDELTE DAAGLIKSE PRODUKSIE EN VERBRUIK VAN MELK (IN LITER)

(a) Produksie

(i) Produsente	210 983 (222 985) liter
(ii) Produsente van gesertifiseerde rou melk	2 102 (1 904) liter

Totaal 213 085 (224 889) liter

(b) Verbruik

(i) Gepasteuriseerde melk	174 237 (165 298) liter
(ii) Gesertifiseerde rou melk	2 102 (1 904) liter

Totaal 176 339 (167 202) liter

OPMERKING

Die gemiddelde daaglikse hoeveelheid melk wat verbruik is, het met sowat 9 137 liter toegeneem in vergelyking met die vorige jaar. Die presiese hoeveelheid melk wat daaglik in die Stad verbruik word, is egter moeilik om te beraam aangesien die syfers ook melk insluit wat in 'n aangrensende stad en ook dié wat in nywerheidsgebiede wat buite die stadsgrense geleë is, verbruik is. Groot hoeveelhede van plaaslik vervaardigde melkprodukte soos bereide melk, roomys, jogurt, dikmelkkaas, afgeroomde melk, ens., word ook in die Stad verbruik of vir verbruik elders verkoop.

6. AFKEURING VAN MELK

Altesaam 31 310 liter melk is by aankoms afgekeur as gevolg van versuring. Hierdie hoeveelheid is minder as dié van die vorige jaar toe 50 240 liter om 'n soortgelyke rede afgekeur is. Vertraging in vervoer was die hoof-oorsaak van versuring.

7. PERSONEEL WAT IN DIE MELKHANDEL IN DIENS IS (beraamde syfers)

	Blankes	Nieblankes	Totaal
Produsente	347 (371)	956 (1 124)	1 303 (1 495)
Produsent-verspreiders	4 (3)	16 (17)	20 (20)
Verspreiders	197 (212)	997 (1 065)	1 194 (1 277)
Totaal	548 (586)	1 969 (2 206)	2 517 (2 792)

8. TIFOTEDOETSING VAN MELKERYPERSONEEL

Alle werknemers van die produsent-verspreiders (wat "gesertifiseerde rou melk" verskaf), is getoets, met negatiewe resultate. Gegewens insake tifoedtoetsing van voornemende werknemers in die melkerybedryf, in die algemeen, word onder "Aansteeklike en Ander Aanmelbare Siektes" in hierdie verslag verskaf. Geen uitbrekings van tifoed wat deur melk versprei is, het die afgelope 30 jaar of langer in die Stad voorgekom nie.

9. INSPEKSIES EN ANDER PLIGTE

Die personeel van die Suiwelseksie het gereelde inspeksies van alle melkerypersele in en buite die Stad uitgevoer. Ander lede van die Gesondheidsinspektoraat het ook gehelp met inspeksie van melkwinkels en verspreidingsdepots in die Stad en Nieblanke woonbuurtes.

Die vernaamste oogmerk met die inspeksies is om te verseker dat slegs veilige, smaaklike en gesonde melk en melkprodukte aan die verbruiker beskikbaar gestel word en ook om produsente, produsent-verspreiders, verspreiders en alle persone wat melk of melkprodukte hanteer, te help, raad te gee en op te lei in sake betreffende gesondheid en higiëne. Met die inspeksies word verder beoog die wetenskaplike verbetering van die suiwelnywerheid as h geheel, byvoorbeeld die gee van raad aan produsente, produsent-verspreiders en verspreiders in verband met die oprigting van melkerypersele, die installering van melkaasjiene, grootmaatplaastens, ander toerusting, ens.

Benewens die bogenelde moes verskillende personeellede van hierdie Seksie behulpsaam wees met die volgende pligte:

- (a) In 'n tegniese komitee dien wat deur die raad van die Suid-Afrikaanse Buro vir Standaarde aangestel is vir die doel van die opstel van standaardspesifikasies vir die reiniging en sterilisering van suiweluitrusting.
- (b) Praktiese opleiding en onderrig in melkhigiëne en -beheer aan Veeartsenykunde- en Gesondheidsinspekteur-studente gee.
- (c) As eksterne eksaminator optree vir Veeartsenykunderstudente in die vak Veterinêre Voedselhigiëne sowel as vir studente by die Kollege vir Gevorderde Tegniese Onderwys.

Besonderhede van inspeksies wat uitgevoer is, is soos volg:

(a) Inspeksie van plaasmelkerye

(i) Bestaande persele	1 102 (786)
(ii) Nuwe persele	68 (72)
Kennisgewings gedien	231 (182)

Opmerking : Die oortredings was meestal die gevolg daarvan dat produsente nagelaat het om hulle melkerye en apparaat in 'n higiëniese en sanitêre toestand te hou. Mondelinge en skriftelike raad word aan die oortreders gegee.

Een produsent se melkaflewering was tydelik opgeskort omdat hitte-bestande inhiberende stowwe in die melk teenwoordig was.

(b) Inspeksie van melkdepots en melkerye	119 (127)
Kennisgewings gedien	67 (36)

Opmerking : Inspeksies was hoofsaaklik van roetine aard, maar klagtes oor melk wat in vuil houers afgelewer is, melk wat suur of rens is, sigbare onsuiverhede in melk, en die opstapel van kratte en melkhouers op sypaadjies, is ook ondersoek.

(c) Tenkvragsmotors

Toesig oor en die inspeksie van grootmaatmelkvragsmotors is 'n belangrike aspek van melkgehaltebeheer. Die totale afstand wat hierdie tenkvragsmotors jaarliks moet aflê om die melk van die produksieplekke af na Pretoria te vervoer, word op ongeveer 2,5 miljoen km bereken.

Die Munisipale Melkverordeninge bepaal minimum strukturele en higiëniese standaarde vir hierdie voertuie, en dit is die verantwoordelikheid van die karweiers om aan hierdie standaarde te voldoen. Hierdie instandhouding word besonder bemoeilik deur die swak toestand van die plaaspaaie, die hoë mate van slytasie van dié gespesialiseerde vragsmotors, en hulle kwesbaarheid deur toevallige beskadiging.

Inspeksies van tenkvragsmotors

(i) Getal inspeksies	Bevredigend	Onbevredigend
95 (150)	44 (24)	51 (126)
(ii) Registrasiesertifikate wat vir tenkvragsmotors uitgereik is		7 (7)
(iii) Karweiers vervolg		2 (2)

(d) Kuddes-inspeksies deur Veeartse

Die doel van hierdie inspeksies is hoofsaaklik om veilige en gesonde melk van siektevrykuddes te verseker. Die kuddes word ondersoek vir die teenwoordigheid van siektes en toestande wat die gehalte, hoeveelheid en veiligheid van die melk nadelig kan raak. Aandag word ook gegee aan die nakoming van algemene higiëniese vereistes deur die produsent. Daarbenewens word hulle geadviseer oor sake soos die behandeling, voorkoming en beheer van dieresiektes, parasitiese infestaties, kuddebeheer, die oprigting van melkerypersonele, die soënos, ens.

Spesiale raad word gegee oor die bakteriologiese gehalte en chemiese samestelling van melk.

10. LABORATORIUMBEHEER VAN MELK

Die personeel van hierdie Seksie is vir die meeste van die roetine-laboratoriumwerk in verband met melkbeheer verantwoordelik. Die skeikundige ontleding van melk word egter deur die Skeikundelaboratorium van die Stads-ingenieursafdeling behartig, terwyl sekere bakteriologiese ondersoeke deur die Instituut vir Patologie van die Universiteit van Pretoria uitgevoer word. Die Resazurintoets, die vermoedelik E. coli-toets, die fosfatase-toets en die toets vir hitte-bestande inhiberende stowwe word in die Afdeling se eie laboratorium uitgevoer. Die resultate van die laboratoriumtoetse wat uitgevoer is, word in tabelvorm hierna aangegee.

1. Ondersoeke deur die melklaboratorium van die Afdeling

(a) Bakteriologiese ontleding

(i) Metileenblou toets (2, 4 en 7 uur)

	Getal monsters getoets	Getal monsters bevredigend	Getal monsters onbevredigend
Tenkens	3 017 (343)	2 547 (222)	470 (37)
Produsente (rou melk)	276 (237)	260 (167)	16 (47)
Gepasteuriseerde melk	2 099 (366)	1 850 (364)	249 (0)
Gesertifiseerde rou melk	153 (253)	150 (245)	3 (8)
Totaal	5 545 (1 199)	4 807 (998)	738 (92)

(ii) Colivorm-toets

	Getal monsters getoets	Getal monsters negatief	Getal monsters positief
Gepasteuriseerde melk	2 123 (1 371)	2 948 (927)	825 (444)

(iii) Toets vir hitte-bestande inhiberende stowwe

	Getal monsters getoets	Getal monsters negatief	Getal monsters positief
Produsente (rou melk)	360 (442)	347 (421)	13 (21)
Gepasteuriseerde melk	1 140 (1 235)	1 111 (1 157)	29 (78)
Tenkwaens (rou melk)	3 110 (2 230)	2 981 (2 126)	129 (104)
Gesertifiseerde rou melk	183 (61)	181 (59)	2 (2)
Totaal	4 793 (3 968)	4 620 (3 763)	173 (205)

(b) Skeikundige ontleding

(i) Fosfatasetoets

	Getal monsters getoets	Getal monsters bevredigend	Getal monsters onbevredigend
Gepasteuriseerde melk	2 717 (2 010)	2 690 (2 002)	27 (8)

II. Ondersoeke deur die skeikundige laboratorium

(uitgevoer ingevolge die Wet op Voedingsmiddels, Skoonheidsmiddels en Ontsmettingsmiddels, Nr 54 van 1972)

(a) Rou melk

(i) Produsente

Getal monsters ontleed	332 (390)
Getal monsters bevredigend	295 (347)
Getal monsters onbevredigend	37 (64)

Ontleding van onbevredigende monsters

Onvoldoende melkvet	28 (43)
Onvoldoende vetvrye vastestowwe	9 (21)
Vervals - water bygevoeg	0 (0)

(ii) Gesertifiseerde rou melk

Getal monsters ontleed	93 (56)
Getal monsters bevredigend	81 (51)
Getal monsters onbevredigend	12 (5)

Ontleding van onbevredigende monsters

Onvoldoende melkvet	12 (5)
Onvoldoende vetvrye vastestowwe	0 (0)
Vervals - water bygevoeg	0 (0)

(b) Gepasteuriseerde melk

Getal monsters ontleed	154 (383)
Getal monsters bevredigend	119 (349)
Getal monsters onbevredigend	35 (45)

Ontleding van onbevredigende monsters

Onvoldoende melkvet	19 (11)
Onvoldoende vetvrye vastestowwe	16 (34)
Vervals - water bygevoeg	0 (0)

III. Bakteriologiese ondersoeke deur die Instituut vir Patologie van die Universiteit van Pretoria

(a) Rou melk

	Totale bakterieë				E. coli			4 en 7 uur metileenblou toets	
	Getal mon- sters ge- toets	Getal mon- sters be- vredigend	Getal mon- sters onbe- vredigend	Getal mon- sters be- vredigend	Getal mon- sters onbe- vredigend	Getal mon- sters be- vredigend	Getal mon- sters onbe- vredigend	Getal mon- sters be- vredigend	Getal mon- sters onbe- vredigend
(i) Produsente	364 (432)	269 (285)	95 (147)	321 (286)	43 (146)	303 (351)	61 (81)		
(ii) Gesertifiseerde rou melk	111 (68)	100 (60)	11 (8)	98 (35)	13 (33)	108 (67)	3 (1)		

(b) Gepasteuriseerde melk

	Totale bakteriese				E. coli	2 uur metilaan blou		Colivorme	
	Getal mon- sters ge-	Getal mon- sters be-	Getal mon- sters onbe-	Getal mon- sters be-	Getal mon- sters onbe-	Getal mon- sters be-	Getal mon- sters onbe-	Getal mon- sters be-	Getal mon- sters onbe-
Verspreiders	144 (420)	131 (352)	13 (68)	144 (333)	0 (87)	142 (264)	2 (156)	123 (261)	21 (159)

Opmerking : Al die produsente en verspreiders van wie se besighede onbevredigende monsters verkry is, is gewaarsku.

IV. Serologiese en ander toetse

(i) Seesbrucellose

Alle kuddes wat "gesertifiseerde rou melk" aan die Stad verskaf, is gedurende die jaar serologies getoets, met negatiewe resultate.

(ii) Beestuberkulose (tuberkuliantoets)

Die drie "gesertifiseerde rou melk"-kuddes is gedurende die jaar getoets, met negatiewe resultate.

Daarbenewens is 247 (163) ander kuddes getoets, waarvan die besonderhede soos volg is:

Getal kuddes getoets	247 (163)
Getal diere getoets	39 465 (30 281)
Getal diere negatief	39 321 (30 238)
Getal diere positief	92 (2)
Getal diere verdag	52 (41)

Die meeste van die positiewe en verdagte reageerders is na slagplase gestuur om geslag te word, terwyl daar toegelaat is dat die res onder streng kwarantynregulasies wat deur die Departement van Veeartsenykundige Velddienste opgelê is, gehou word. Al die toetse wat uitgevoer is op die kuddes is uitgevoer deur die Staat of deur private veeartse wat namens die Staat opgetree het.

Die produsente wat melk aan Pretoria lewer, is veronderstel om hul kuddes vir T.B. te laat toets en T.B. vry te wees teen die einde van 1981.

(iii) Mastitistoets

Mastitis bly steeds een van die hoofprobleme in melkkuddes, beide uit 'n ekonomiese en 'n openbare gesondheids-oogpunt. Daar word gereeld raad aan produsente van vars melk oor voorkomings- en beheermaatreëls gegee, asook oor die gevare van die onoordeelkundige gebruik van die verskillende anti-bakteriese middels wat so gereedlik vir die boerderygemeenskap beskikbaar is. 'n Elektroniese telapparaat is deur hierdie Afdeling gedurende die jaar aangekoop en roetine somatiese seltelling word op alle melkmonsters uitgevoer.

	Getal monsters getoets	Getal monsters bevredigend	Getal monsters onbevredigend
Produsente	345 (275)	334 (254)	11 (21)
"Gesertifiseerde" produsente	156 (31)	149 (31)	7 (0)
Totaal	501 (306)	483 (285)	18 (21)

BYDRAE DEUR DIE STADSINGENIEUR

RIOOLWERKE

DASPOORT

Sifsels en detritus

956 m³ sifsels en 198 m³ detritus is in die loop van die jaar uit die rioolwater verwyder. Die sifsels is verbrand deur slykgas in 'n spesiaal ontwerpte verbrandingsoond te gebruik. Die detritus is daaglik ingeploeg op grond wat vir dié doel beskikbaar gestel is. Dit verteenwoordig 'n gemiddelde van 4,1 m³ sifsels en 0,8 m³ detritus per 100 Ml rioolwater.

Verassing van diere

Die totale getal diere wat in die loop van die jaar veras is, was:

Honde	3 370
Katte	1 579
Skape en ander diere	981
Totaal	5 930

Verteerde slyk

In die loop van die jaar is altesaam 23 410 m³ gedroogde slyk uit die droogbeddings verwyder en met die sentrifuges ontwater. Nog 'n klein hoeveelheid verteerde slyk is oor lande gesproei, vir doeleindes van droging en wegdoening. (Kyk Tabel IV.)

Uitvloeisel na die Pretoria-Wes-kragentrale

Ongeveer 7 500 Ml sandgefiltreerde en gechlloreerde uitvloeisel is in die loop van die jaar na die Kragentrale gepomp, wat 'n daaglikse gemiddelde van 20,49 Ml verteenwoordig. Ongeveer 200 Ml is in die loop van die jaar na die Dieretuin gepomp. (Kyk Tabel I.)

Verbranding van afgekeurde voedsel

Die diesलगestookte verbrandingsoond is verander om ook met vertaendergas te brand. In die loop van die jaar is 107 ton afgekeurde voedsel en 4 ton papier vernietig.

RIOOLWAL

Sifsels en detritus : Westelike Werke

229 m³ sifsels en 258 m³ detritus is in die loop van die jaar uit die rioolwater verwyder. Dit verteenwoordig 1,6 m³ sifsels en 1,8 m³ detritus per 100 Ml rioolwater.

Oostelike Werke

110 m³ sifsels en 111 m³ sand en grint is in die loop van die jaar uit die rioolwater verwyder. Dit verteenwoordig 'n gemiddelde van 0,6 m³ sifsels en 0,6 m³ detritus per 100 Ml rioolwater.

Verteerde slyk

Alle verteerde slyk by albei aanlêe is in 'n slykopgaardam gepomp en op voorbereide lande gesproei waar dit gedroog en in die grond ingeploeg is. Sowat 70 ha grond word hiervoor gebruik. (Kyk Tabel IV.)

Uitvloei na Rooiwalkragsentrale

Ongeveer 7 300 Ml gechlloreerde verouderingsdamuitvloei het uit die twee afsonderlike reekse damme na die Kragssentrale gevloei om as verkoelingswater gebruik te word. (Ontledingsresultate in Tabel V.)

Populierplantasie

In die loop van die jaar is altesaam 6 000 Ml gesuiverde riooluitvloei uit die twee aanlêe na die besproeiingsdam gepomp. Hierdie syfer is 'n ruwe skatting aangesien die meter onklaar is.

Die verkoop van hout het in die loop van die jaar ongeveer R12 500 opgelewer.

BAVIAANSPOORT

Sifsels en detritus

561 m³ sifsels en 89 m³ detritus is in die loop van die jaar uit die rioolwater verwyder. Dit verteenwoordig 'n gemiddelde van 14,0 m³ sifsels en 2,2 m³ detritus per 100 Ml rioolwater.

Verteerde slyk

Alle verteerde slyk word regstreeks uit die verteerders na 'n opgaardam gepomp, vanwaar dit gesproei en in geskikte lande ingeploeg word. (Kyk Tabel IV.)

Geaktiveerdeslyksurplus uit die nuwe en veranderde werke word na 'n belugte opgaardam gepomp vanwaar dit deur sproeiing en inploeging in die grond weggedoen word.

Die ou 6 Ml/dag aanleg was die grootste gedeelte van die jaar nie in werking nie omdat die nuwe 16 Ml/dag aanleg voldoende was om die afvloei te behandel.

Finale uitvloei

Dit word na chlorering in die Pienaarsrivier uitgelaat. (Kyk Tabel III.)

Laboratoriums

Ontledings van riool-, rivier- en damwater

Verteenwoordigende monsters van rioolwater, slyk, rivier- en damwater is gereeld in die loop van die jaar ontleed, party bakteriologies sowel as chemies, om die doeltreffende werking van die rioolwaterbehandelings-eenhede te handhaaf en om enige besoedeling of veranderende toestande in die riole en damme te bespeur. Ontledingsbesonderhede is in Tabelle I, II en III uiteengesit.

Nywerheidsuitvloei

Die afloop van die nywerhede maak sowat 10 % van die totale volume vloei na die drie suiveringswerke uit, maar is verantwoordelik vir sowat 25 % van die lading van die rioolwater wat behandel word.

Die nywerhede laat materiale wat nie deur die gewone suiweringsprosesse geoksideer kan word nie, gereeld uit en die laboratorium moet gedurigdeur beheer uitoefen.

Kleiner nywerhede en garages verteenwoordig sowat 80 % van die totale aantal nywerhede en monsters word agt maal per jaar daarvan geneem. In die loop van die jaar is sowat 1 530 monsters ontleed, wat 'n inkomste van ongeveer R500 000 meegebring het.

Die uitvloeisel van nywerhede wat in die Rosslynkompleks in bedryf is, vloei in die Rooiwal-rioolwater-netwerk in, en monsters van hierdie rioolwater word intensief ten opsigte van sterkte getoets. Die inkomste uit hierdie area bedra ongeveer R120 000 per jaar.

Personeel

Die personeel van die skeikundige laboratorium was op 1 Januarie 1980 die volgende :

+ N.P. Nicolle	B. Sc., L.S.A., Chem. Inst. L. Inst. B.W.B.	Hoofskeikundige
E.A. Garke	B. Sc., A.L. Inst. B.W.B.	Assistent-hoofskeikundige
+ N.C. Thirion	B. Sc., M.B.A., Affil. Inst. B.W.B.	Assistent-hoofskeikundige
S.D. Roets	B. Sc., Hon., A.L. Inst. B.W.B.	Skeikundige
L. Bradenmann	B. Sc.	Skeikundige
J.H. Marais	B. Sc.	Skeikundige
A.J. van der Walt	B. Sc.	Skeikundige
F.V. Weete	Nas. Dip. (Analitiese Chemie)	Skeikundige Assistent
H. Kollmann	Nas. Dip. (Analitiese Chemie)	Skeikundige Assistent
M.J.L. van der Meer	Nas. Dip. (Analitiese Chemie)	Skeikundige Assistent
I.D. Böhm	Nas. Dip. (Med. Tegn.)	Skeikundige Assistent
E.D. Erasmus	Nas. Dip. (Analitiese Chemie)	Skeikundige Assistent
C.M. Fouché	Nas. Dip. (Analitiese Chemie)	Skeikundige Assistent

+ Bogenoemde twee persone is ingevolge artikel 12(1) van die Wet op Voedingsmiddels, Skoonheidsmiddels en Ontsmettingsmiddels, 1972 (Wet 54 van 1972), as Analiste aangestel.

TABEL I

GEMIDDELTE RESULTATE VAN ONTLEDING VAN BESINKTE RIJOLWATER EN FINALE UITVLOEISEL UIT DIE VERSKILLENDE EENIEDE TE DASPOORT

EENIEDE	1 - 4	5 & 6	7 & 8	9	10	11	SAND FILTERS
Resultate in milligram per liter							
Gemiddelde daaglikse vloei in megalliters	9,4	5,9	3,9	44,8	-	-	20,4
Lading (sybelbeddings) g PW/m ² /dag	-	25,5	-	13,3	-	-	-
Lading (belugtingseenheid) kg BSB/kg slykkonsentrasie per dag	-	-	-	-	0,17	-	-
Permanganatawaarde (4 uur)	29,1	32,8	27,4	31,9	10,7	0,23	6,0
Chemiese suurstofbehoefte	371	422	358	439	108	67	43
5 dae se biochemiese suurstofbehoefte	195	216	177	251	26,0	10,7	6,6
Ammoniak as N	29,1	28,9	27,9	25,9	1,3	3,3	4,2
Opgeloste vaste stowwe (gedroog teen 105°C)	-	453	-	-	421	438	443
Suwendende vaste stowwe	-	13,5	-	147	74,1	27,3	6,8
Antoniëse reinigers	3,4	3,8	3,9	4,7	0,5	0,6	0,5
Fosfaat as P	8,7	9,1	8,5	9,3	4,2	4,7	4,8
Nitraat as N	-	12,6	-	-	8,6	9,6	9,7
Fekale E. Coli per 100 ml	-	1 508 500	-	-	629 000	286 000	65
	-	1 365 000	-	977 000	330 000	-	-

TABEL II
GENIDDELDE RESULTATE VAN ONTLEDING VAN BESIKINTE RIJOLWATER EN FINALE UITVLOEISEL VAN DIE VERSKILLENDE EENHEDE TE RUITWAL, 1980

EENHEDE	1	2	3	4	5	6	7
	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie	3,6 m-bio- filters, mund- enkelfil- trasie
Resultate in milligram per liter							
Geniddelde daaglikse vloei (megaliter per dag)	12,1	11,7	11,9	9,9	11,2	11,4	9,2
Lading (syplebeddings) g P _W /m ³ /dag	-	23,2	22,6	20,6	23,4	26,0	20,6
Permganganaatwaarde (4 uur)	30,7	30,9	29,7	33	33,2	35,6	35,7
5 dae se BSB	169	150	170	128	144	151	150
Chemiese suurstofbehoefte	411	370	389	334	344	370	361
Ammoniak as N	24,4	25,0	25,1	30,9	32,6	33,1	33,3
Nitraat as N	-	7,4	9,7	15,4	17,6	15,8	16,4
Opgeloste vaste stowwe (gedroog teen 105 °C)	-	553	584	655	732	702	693
Suivende vaste stowwe	-	21,0	18,1	19,1	16,1	19,1	17,7
Antoniëse reinigers	7,1	1,1	0,9	0,8	0,7	0,7	0,7
Fosfaat as P	8,1	7,5	7,9	7,2	7,5	7,3	7,3
Fekale E. Coli per 100 ml	-	1 257 000	1 257 000	1 156 000	1 156 000	1 156 000	1 156 000

GEMIDDELTE RESULTATE VAN ONTLEDING VAN BESINKTE RIJOLWATER EN FINALE UITVLOEISEL VAN DIE VERSKILLEDE
 EENIIDE TE BAVIAANSPOORT, 1980

TABEL III

Resultate in milligram per liter	Geaktiveerde slykeenheid met oppervlak belugting	Geaktiveerde slykeenheid Bardenfo
Gemiddelde daaglikse vloei (megaliter per dag)	8,7	-
Lading kg BSB/kg slykkonsentrasie per dag	38,9	0,06
Perwanganataatwaarde (4 uur)	249	9,1
5 dae se BSB	506	11,4
Chemiese suurstofhoefto	55,5	77
Ammoniak as N	-	6,4
Nitraat as N	-	9,1
Opgeloste vaste stowwe (gedroog teen 105°C)	165	519
Snevende vaste stowwe	7,4	29,0
Anioniese reinigers	14,5	0,9
Fosfaat as P	-	10,9
Fekale E. Coli per 100 ml	-	915 000

VERBODEN KENNEN VAN VERBODENEN, 1980

1980 JA

CEMIDDELTE RESULTATE VAN SLYKONTLEDING, 1980

TABEL IV

	DASPOORT		ROOIAL WES		ROOIAL OOS		BAVIAANSPOORT	
	Rou slyk	Verteerde slyk	Rou slyk	Verteerde slyk	Rou slyk	Verteerde slyk	Rou slyk	Verteerde slyk
Daaglikse gemiddelde volume gepomp (litter)	5,60	7,24	5,88	7,09	5,99	7,12	5,80	6,80
pH	5,70	6,90	4,63	4,99	5,05	4,23	7,50	8,90
% As van vaste stowwe	22,0	34,6	22,1	38,9	20,6	37,0	27,1	36,8
Vlugtige sure mg/l	1 161	263	1 083	128	1 205	169	2 216	1 845
Amoniak as N mg/l	156	728	163	677	229	716	256	870
Alkaliniteit as CaCO_3 mg/l	846	3 422	673	2 755	813	2 871	1 254	3 351
Antoniëse reinigers (% massa/massa droë basts)	1,20	1,67	1,05	1,93	1,14	1,75	1,7	2,1
Sink as Zn mg/l	42,2	116	106	84,5	113	127	78,4	96,5
Chroom as Cr mg/l	5,31	9,02	29,4	40,1	192	356	3,90	4,89
Nikkel as Ni mg/l	1,11	2,22	2,45	4,00	2,44	2,31	2,94	3,59
Koper as Cu mg/l	26,3	51,7	29,6	39,3	32,5	38,9	4,87	5,82

TABEL V
GEMIDDELTE RESULTATE VIR DIE VEROUERINGSDAMME, ROOIWAL, 1980

Resultate in mg/l waar dit van toepassing is	Humusentkultivoëise	Noordelike damme	Suidelike damme
Opgeloste vaste stowwe (105°C)	565	541	543
Slewende vaste stowwe	19,2	5,9	4,2
Chloried	88	83	84
pH	7,52	7,55	7,59
Ammoniak as N	6,6	5,5	5,6
Nitriet as N	0,29	0,21	0,16
Nitraat as N	8,1	4,4	4,9
4 uur se permanganaatvaarde	9,3	6,3	6,1
5 dae se BSB	12,4	9,3	8,3
Chemiese suurstofbehoefte	72	50	46
Fosfaat as P	7,9	8,2	8,2
Antoniëse reinigers	1,0	0,7	0,7
Fekale E. Coli per 100 ml	1 257 000	20 479	12 875

TABEL VI

RIOOLWATERVLOEI

Die maandelikse rioolwatervloei- en reënvalsyfers was soos volg:

1980	DASPOORT		ROOIWAL WES		ROOIWAL OOS		BAVIAANSPOORT	
	Daaglikse gemiddelde vloei Megaliter	Reënval mm	Daaglikse gemiddelde vloei Megaliter	Reënval mm	Daaglikse gemiddelde vloei Megaliter	Reënval mm	Daaglikse gemiddelde vloei Megaliter	Reënval mm
Januarie	75,57	235,4	44,29	139,4	56,94		13,27	185,5
Februarie	75,53	102,8	44,83	109,0	61,61		16,41	144,4
Maart	69,96	47,0	39,83	17,7	46,40		11,80	68,5
April	63,62	1,5	41,41	3,0	35,20		9,37	3,6
Mei	57,29	0,2	39,54	0,6	40,81		9,18	0,2
Junie	46,12	0,0	42,51	0,0	47,51		9,52	0,0
Julie	54,25	0,0	37,89	0,0	44,98		8,96	0,0
Augustus	63,41	0,0	33,26	0,0	40,90		9,27	0,0
September	65,81	54,0	35,26	54,5	40,47		10,05	62,4
Oktober	59,48	15,9	36,96	15,5	38,65		9,78	19,8
November	67,85	211,0	42,13	169,1	52,36		12,28	202,3
Desember	69,56	85,9	36,71	60,1	44,40		12,48	81,9
Jaar	64,04	753,7	39,55	568,9	45,85		11,03	768,6

In vergelyking met die gemiddelde vloei-syfers vir 1979, was daar 'n afname in vloei by Daspoort van 1,12 Megaliter per dag en by Baviaanspoort ook 'n afname van 0,47 Megaliter per dag, terwyl by Rooival 'n toename van 14,08 Megaliter per dag was.

PERSONEELAKTIVITEITE VIR DIE JAAR 1980

GENEESKUNDIGE PERSONEEL

	Dienstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- gedurende die jaar geskep	Getal poste ge- durende die jaar afgeskaf	Dienstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul
Stadsgesondheidshoof	1	1	0	0	1	1
Adjunk-Stadsgesondheidshoof	1	1	2	0	3	3
Assistent-Stadsgesondheidshoof	2	2	0	2	0	0
Geneeskundige Beampte/Senior/Eerste	11	8	0	3	8	7
Hoof Geneeskundige Beampte	0	0	3	0	3	3
Geneeskundige Beampte (Oggende)	3	3	0	0	3	3
Iydlike Kliniese Assistent	2	0	0	0	2	0

Alhoewel die wysiging in die salarisstruktuur wat daarvoor voorsiening maak dat Geneeskundige Beamptes/Senior Geneeskundige Beamptes nou op die aanbeveling van die Stadsgesondheidshoof tot Eerste Geneeskundige Beamptes kan vorder, 'n verbetering tot gevolg gehad het, vergelyk die salarisstruktuur van geneeskundige personeel in die Raad se diens nog swak met ander instansies.

Daar is gedurende die vorige jaar 'n begin gemaak met die oprigting van 'n Daghospitaal te Mamelodi, wat waarskynlik gedurende 1981 voltooi sal wees. Sodra dit in gebruik geneem word, behoort dit die druk op geneeshere in Mamelodi te verlig. (Elders in hierdie verslag kan u meer besonderhede oor die buitapasientediens wat in Mamelodi gelower word, kry.) As gevolg van vakatures is dit nog steeds vir die Afdeling nodig om van die dienste van geneeshere wat op 'n sessiebasis behulpsaam is, gebruik te maak.

So en behalwe hulle normale pligte, is die geneeshere ook verantwoordelik vir die na-uurse mediese ondersoeke van lede van die plaaslike Burgerlikebeskermingskorps.

VEEARTSE

	Dienstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Dienstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul
Hoofstadsveearts	1	1	0	1	1
Eerste Stadsveearts	1	1	0	1	1

LUGBESOEDELINGSBEHEERPERSONEEL

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Hoofbeampte (Lugbesoedelingsbeheer)	1	1	0	1	1	
Senior Inspekteur (Lugbesoedelingsbe- heer)	1	1	0	1	1	
Inspekteur (Lugbesoedelingsbeheer)	4	4	0	4	4	
Assistent (Lugbesoedelingsbeheer) (Swart)	2	1	0	1	1	(Een pos is afgeskaf)

GERAASBESTRYDINGSPERONEEL

Beheerbeampte (Geraasbestryding)	1	1	0	1	1	
Inspekteur (Geraasbestryding)	2	2	0	2	2	

GESONDHEIDSINSPEKTEURS

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Hoofgesondheidsinspekteur	1	1	0	1	1	
Assistent-Hoofgesondheidsinspekteur	2	2	0	2	2	
Afdelingsgesondheidsinspekteur	8	8	0	8	8	
Toesighoudende Gesondheidsinspekteur	8	8	0	8	8	
Gesondheidsinspekteur	28	19	0	28	17	
Gesondheidsinspekteur (Kleurling)	2	1	0	2	1	
Senior Gesondheidsinspekteur (Swart)	2	2	0	2	2	
Gesondheidsinspekteur (Swart)	8	5	0	8	5	

Daar word steeds baie ernstige probleme ondervind om Gesondheidsinspekteurs te verf an te behou, met die gevolg dat dit al hoe moeiliker word om doeltreffende toesig te hou en daar al meer op klagtes gekonsentreer moet word in plaas van om roetine-inspeksies uit te voer. Lisensiëring alleen plaas alreeds 'n baie swaar las op die inspektoraat. Waar doeltreffende toesig oor die vervaardiging en hantering van voedsel wat aan die publiek voorsien word, een van die hoekstene van 'n voorkomende gemeenskapsgesondheidsdiens is, was die publikasie by die Goewermentskennisgewing R2795 van 14 Desember 1979 van die regulasies aangaande voedselhantering waarin daar vir voorbereiding van voedsel in private wonings vir verkoop aan die publiek voorsiening gemaak word, 'n ongelukkige gebeurtenis omdat 'n stad soos Pretoria net nie die personeel het om hier ook nog doeltreffende toesig te hou nie.

VERPLEEGPERSONEEL

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Hoofgesondheidsbesoekster	1	1	0	1	1	
Toesighoudende Gesondheidsbesoekster	6	6	0	6	6	
Gesondheidsbesoekster/Senior	27	27	0	27	27	
Klinieksuster	11	11	0	11	11	
Deeltydse Gesondheidsbesoekster (oggende)	1	1	0	1	1	
Deeltydse Klinieksuster (oggende)	1	1	0	1	1	
Gesondheidsbesoekster (Asiër)	1	1	0	1	1	
Gesondheidsbesoekster (Kleurling)	1	1	0	1	1	

VERPLEEGPERSONEEL (vervolg)

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Verpleegster (Asiër)	4	4	0	4	4	
Verpleegster (Kleurling)	6	6	0	6	6	
Senior Gesondheidsbesoekster (Swart)	3	3	0	3	3	
Gesondheidsbesoekster (Swart)	9	9	0	9	9	
Verpleegster (Swart)	36	36	0	36	36	
Verpleegster/Vroedvrou (Swart)	5	5	0	5	5	
Vroedvrou (Swart)	9	9	0	9	9	
Verpleegassistent (Swart)	5	5	0	5	5	

ADMINISTRATIEWE PERSONEEL

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Senior Assistent	1	1	0	1	1	
Administratiewe Beheer Beampte	0	0	1	1	1	
Eerste Administratiewe Beampte	1	1	0	1	1	
Senior Administratiewe Beampte	1	1	0	1	1	
Administratiewe Beampte	3	2	0	3	3	
Senior Vroulike Assistent	1	1	0	1	1	
Senior Tikster	1	1	0	1	1	
Persoonlike Assistent	1	1	0	1	1	
Tikster	4	4	0	4	4	

LABORATORIUMASSISTENT

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Laboratoriumassistent	1	1	0	1	1	

PLAAGBESTRYDERS

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Senior Plaagbestryder	1	1	0	1	1	
Plaagbestryder	6	6	0	6	6	
Arbeiders (Swart)	32	28	0	32	32	

KLINIEKHHELPERS, KLINIEKKLERKE EN ASSISTENTE (X-STRAALDIENSTE) (SWART)

	Diensstaat soos op 1 Jan. 1980	Getal poste op 1 Jan. 1980 gevul	Getal poste ge- durende die jaar geskep	Diensstaat soos op 31 Des. 1980	Getal poste op 31 Des. 1980 gevul	Opmerkings
Kliniekhelpers	4	2	0	4	2	
Senior Kliniekklerk (Swart)	1	1	0	1	1	
Kliniekklerk (Swart)	9	8	0	9	9	
Assistent (X-straaldienste) (Swart)	3	3	0	3	3	

Dienstaat	Getal poste	Getal poste ge-	Dienstaat	Getal poste
soos op 1	op 1 Jan.	durende die	soos op 31	op 31 Des.
Jan. 1980	1980 gevul	jaar geskep	Des. 1980	1980 gevul Opmerkings

Motorkar-/Toewadrywer	1	1	0	1	1
Opsigster	1	1	0	1	1
Wagman (6-dag week)	3	3	0	3	3
Opsigter (7-dag week)	4	4	0	4	4
Arbeider by openbare toilette (Swart)	17	15	9	26	18
Arbeider (Swart)	21	20	0	21	20

PERSONEEL VAN DIE GESONDHEIDSAFDELING OP 31 DESEMBER 1980

J.P.A. VENTER, M.B., Ch.B., D.V.G., D.B.G.	Stadsgesondheidshoof
J.F. VAN DER MERWE, B. Comm., M.B., Ch.B., D.V.G., D.B.G.	Adjunk-stadsgesondheidshoof
J.P. MYNHARDT, M.B., Ch.B., D.V.G., D.B.G.	Adjunk-stadsgesondheidshoof
C.E. VILJOEN, M.B., Ch.B.	Adjunk-stadsgesondheidshoof
A.A.E. DE KLERK, M.B., Ch.B.	Hoof Geneeskundige Beampte
F.C.A. SMITH, B.Sc., M.B., Ch.B., D.V.G., D.B.G.	Hoof Geneeskundige Beampte
C. GEFFEN, M.B., Ch.B.	Hoof Geneeskundige Beampte
R.D. GAULDIE, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
M.E.B. LAWRENCE, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
J.F. De Villiers, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
H. DE JONGH VAN ARKEL, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
M.M. McGregor, L.M.R.C.P., L.M.R.C.P., L.M.R.C.S. (Irel)	Geneeskundige Beampte/Senior/Eerste
J.L. MAAGA, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
Z. MOOMAL, M.B., Ch.B.	Geneeskundige Beampte/Senior/Eerste
E.F. COETZER, M.B., Ch.B., D.V.G.	Deeltydse Geneeskundige Beampte, Kleuterskole en Crèches
R.A. DE V. VERMEULEN, M.B., Ch.B.	Deeltydse Geneeskundige Beampte, Klinieke
M.E. HORN, M.B., Ch.B.	Deeltydse Geneeskundige Beampte, Gesinsbeplanning

VEEARTSE

S.V. O'BRIEN, B.V. Sc. (Hon.) D.V.V.G.	Hoof Stadsveearts
J.D. PRINSLOO, B.V. Sc.	Stadsveearts/Senior/Eerste

LUGBESOEDELINGSBEHEER

A.C.P. Dreyer, Pr. Ing. B.Sc.(Ing.) Hons. BA M.B.A.	Hoofbeampte (Lugbesoedulingsbeheer)
B. DIEPERING	Senior Inspekteur (Lugbesoedeling)
M.C. KUKKUK	Inspekteur (Lugbesoedeling)
J.W.G. VAN ROOYEN	Inspekteur (Lugbesoedeling)
C.J. van Heerden	Inspekteur (Lugbesoedeling)
N.P. ERASMUS	Inspekteur (Lugbesoedeling)

GERAASBESTRYDING

J.J.J. DE BEER, Nas. Diploma vir Tegnici, Nas. Onderwysdiploma	Beheerbeampte (Geraasbestryding)
J.A. SHALL	Inspekteur (Geraasbestryding)
T.P.E. COETZEE	Inspekteur (Geraasbestryding)

GESONDEHEIDSINSPEKTEURSPERSONEEL

M.J.C. RAUTENBACH, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Hoofgesondheidsinspekteur
 D.S. VAN COLLER, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Assistent-Hoofgesondheidsinspekteur
 S.J. Gouws, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Assistent-Hoofgesondheidsinspekteur

AFDELINGSGESONDEHEIDSINSPEKTEURS

J.P. VAN DER LAAM COETZEE, Sertt. K.G.G., Trop. Hig., Vleis en ander Voedsel, Nas. Dip. Ges. Voorligting
 D.W. DE VILLIERS, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting
 Q.E. MARNEWICK, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting
 J.G. MARNEWICK, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig.
 C.J. SMITH, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., L. Inst. O.G.
 G.S. BRIDGENS, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Fabr., Insp.
 H.A. VISAGIE, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting, L. Inst. O.G.
 Y. LOGAN, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting, L. Inst. O.G.

TOESIGHOUDENDE GESONDEHEIDSINSPEKTEURS

A.D. HODGKINSON, Sertt. K.G.G., Trop. Hig., Vleis en ander Voedsel, Nas. Dip. Ges. Voorligting
 H.G. DIEDERICKS, Nas. Dip. vir Gesondheidsinspekteurs, Nas. Dip. Ges. Voorligting, Sert. Trop. Hig.
 C.J.H. ESTERHUYSE, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting
 M. DE WET, Nas. Dip. vir Gesondheidsinspekteurs, Sert. Trop. Hig., Nas. Dip. Ges. Voorligting
 J. REUTER, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting
 C.S. ROOS, Sertt. K.G.G., Vleis en ander Voedsel, Trop. Hig., Nas. Dip. Ges. Voorligting
 J.H. VON WELL, Sertt. K.G.G., Trop. Hig., Vleis en ander Voedsel, Nas. Dip. Ges. Voorligting
 H.P. Botha, Nas. Diploma vir Gesondheidsinspekteurs, Nas. Dip. Ges. Voorligting, Sert. Trop. Hig.

GESONDEHEIDSINSPEKTEURS/SENIOR/EERSTE

C.J. HUGO, Nas. Diploma vir Gesondheidsinspekteurs
 F. VAN DER WESTHUIZEN, Nas. Diploma vir Gesondheidsinspekteurs
 C.F. ERASMUS, Nas. Diploma in Openbare Gesondheid
 G.C. OOSTHUIZEN, Nas. Diploma in Openbare Gesondheid
 H.S. VENTER, Nas. Diploma vir Gesondheidsinspekteurs, Nas. Dip. Ges. Voorligting, Sert. Trop. Hig.
 H.B. PIETERS, Nas. Diploma vir Gesondheidsinspekteurs, Nas. Dip. Ges. Voorligting
 C.G. VAN BLERK, Nas. Diploma vir Gesondheidsinspekteurs, B. ADMIN.

D.B. DE MEILLON, Sertt. K.G.G., Vleis en ander Voedsel
 D.H. VOSLOO, Nas. Dip. vir Gesondheidsinspekteurs
 G.H. KOTZE, Nas. Dip. vir Gesondheidsinspekteurs
 D.A. OLIVIER, Nas. Dip. vir Gesondheidsinspekteurs, Sert. Trop. Hig., Nas. Dip. Gesondheidsvoorligting
 A.J. STAPEL, Nas. Diploma in Openbare Gesondheid
 N.K. STRYDOM, Nas. Diploma vir Gesondheidsinspekteurs
 M.N. BEUKES, Nas. Diploma vir Gesondheidsinspekteurs
 C.T. MEYER, Nas. Diploma vir Gesondheidsinspekteurs
 I. VAN DER WALT, Nas. Dip. vir Gesondheidsinspekteurs
 F.K. VERDOORN, Sertt. K.G.G. Vleis en ander Voedsel, Trop. Hig.

NIEBLANKE GESONDHEIDSINSPEKTEURS

Kleurling Gesondheidsinspekteur :

R.T. MOSES, Nas. Diploma vir Gesondheidsinspekteurs

Senior Swart Gesondheidsinspekteurs:

S.T. MAPUTLA, Sertt. K.G.G., Trop. Hig.

T.C. MABITSI, Sert. K.G.G.

Swart Gesondheidsinspekteurs :

N.M. SELE, Nas. Diploma vir Gesondheidsinspekteurs

M.J. CHIDI, Sert. K.G.G.

J.T. LION, Nas. Diploma vir Gesondheidsinspekteurs

I.Z. MAGAGULA, Nas. Diploma vir Gesondheidsinspekteurs

M.B. RADEBE, Nas. Dip. vir Gesondheidsinspekteurs

ADMINISTRATIEWE PERSONEEL

Senior Assistent :

R.I. BOTHA

Administratiewe Beheerbeampte :

Z.A. BOTHA

Eerste Administratiewe Beampte :

C. TRENT

Senior Administratiewe Beampte :

Vakant

Administratiewe Beamptes :

MEV L. DE KLERK

MEV. A. BÜCHLING

Senior Radiologiese Tegnikus :

D.C.P. DE VOS

Radiologiese Tegnici :

C.F.G. DIEDERICKS

A.J.C. KOCH

F.J. STEYN

J.L. GEEL

Senior Tikster :

MEV. M. SCHUMANN

Tiksters :

MEV. R.J. SALZWEDEL

MEV. C.G. VAN VUUREN

MEV. C.J.W. LOMBAARD

MEJ. A.J. GROBLER

MEV. V. NEL

Senior Vroulike Assistent :
Mev M.S. FAASENVroulike Assistent :
MEV. M.E. DE WITT

MEV. H.S. BEZUIDENHOUT

MEJ. L.A. KLATZKIN

MEV. A. BEKKER

EERSTE VEEARTESENYKUNDIGE ASSISTENT

MEJ. M. DU FREEZ

PLAAGBESTRYDERS

Senior Plaagbestryder :

A.L. NEL

Plaagbestryders :

L.L.R. MARSBURG, L.J. VAN DER SCHYFF, J.J. ELS, J.A. LOTRIET, C.R. RYNNERS, H.P. HOLTZHAUSEN *tesame met*
32 Swartmans

VERPLEGINGSPERSONEEL

P.M. McGEER, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster
en Skoolverpleegster, Moederkunde, Nas. Dip. Ges. Voorligting, Hoofgesondheidsbesoekster

TOESIGHOUENDE GESONDHEIDSBESOEKSTERS

M.S. MINNAAR (Blanke gebiede), Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Gesondheidsbesoekster en Skool-
verpleegster, K.G.G., MoederkundeD.G. MORGAN, (Nieblanke gebiede), Sertt. S.A. Verpleegstersraad (Alg. en Verlosk.), Moederkunde, K.G.G. Gesondheids-
besoekster en Skoolverpleegster, Nas. Dip. Ges. VoorligtingI.N. VAN DYK (Nieblanke gebiede), Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster
en Skoolverpleegster, Saal Admin.J.G. VAN WYNGAARD (Tuberkulose), Sertt. S.A. Verpleegstersraad (Alg. en Verlosk.), K.G.G., Gesondheidsbesoekster
en SkoolverpleegsterJ.E. VAN DEVENTER (Gesinsbeplanning), Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster
en Skoolverpleegster, Saal Admin.S.B.M. CHANNON (Opleiding), Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. in O.G., Nas. Dip. Ges.
Voorligting

BLANKE GESONDHEIDSBESOEKSTERS/ SENIOR

- A.M. VAN ZYL, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- M. VISSER, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.
- M.G.A. STOLS, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
- J.R. LUYT, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.
- E. BASSET, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.
- M.J. LOUW, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
- S.M.J. LOMBARD, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Gesondheidsbesoekster en Skoolverpleegster, Moederkunde
- D.C. GILBERT, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Gesondheidsbesoekster en Skoolverpleegster
- C.C. STEYN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- C.M. VAN ZYL, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- M. MARAIS, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- M.M. LOUW, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- M.C. ALLISON, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- L.L. DE VILLIERS, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- H.C.E.M. STEYN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.
- D.R. MÜLLER, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster
- F. WESTFALL, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
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- D.J. MONTEIRO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.
- B.M. LIEBENBERG, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- F.O. DE VETTEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg., Nas. Dip. Ges. Voorligting
- A.E.C. ESTERHUYSEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk. & Psigiatrie), Nas. Dip. Volksgesondheidsverpleg.
- E.H. GREYLING, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), + (Psigiatrie), Dip. Gemeenskapsverpleg.
- M. VENTER, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
- C. VAN STRATEN Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
- S.J. POTGIETER Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
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DEELTYDSE BLANKE GESONDHEIDSBESOEKSTER (KLEUTERSKOLE EN CRÛCHES)

V. DE VILLIERS, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

BLANKE KLINIEKSUSTERS

C.H. VAN NIEKERK, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

C.G.M. V.D. GRIJP, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

S. DU PREEZ, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

M.J.C. ADENDORFF, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

A.M.B. HIDE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

F. BOSANQUET, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

E.J. STRYDOM, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

M.S. OPPERMAN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

M.J.H. BUITENDAG, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

L.D. SCHEEPERS, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk. & Psigiatrie)

E.M. GOOSEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

DEELTYDSE BLANKE KLINIEKSUSTER

G.E. CARSTENS, Sertt. S.A. Verpleegstersraad (Alg.)

NIEBLANKE SENIOR GESONDHEIDSBESOEKSTERS

H. SESOKO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

S. MOFOLO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

J.M. SELEPE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster,
Moederkunde

NIEBLANKE GESONDHEIDSBESOEKSTERS

K. MOUNT, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

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S. HUMA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

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F. MATHAPO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

F.E. SIBIYA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

E.J.M. SHILANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

M.T. MASOKA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

V.T. KHOSA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

J.R. MTOMBENI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster

L.P. MOELETSI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Nas. Dip. Volksgesondheidsverpleg.

NIEBLANKE VERPLEEGSTERS

- F. MANAMELA, Sertt. S.A. Verpleegstersraad (Verlosk. & Hulpverpleging)
- S.G. RAMBOA, Sertt. S.A. Verpleegstersraad (Alg. en Verlosk.)
- F. MAPHALLA, Sert. S.A. Verpleegstersraad (Alg.)
- S. NAIDOO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Gesondheidsbesoekster
- D. CHIBA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- L.G. MEJE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- I.M. PUOANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- R.M. MASIPA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- M.N. LEDIGA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- C. MAKURUNTSI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- S.N. SHIBAMBO, Sert. S.A. Verpleegstersraad (Alg.)
- M. MATOME, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- P.I. MAPLE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- N.M. POOPEDI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- E.V. PULE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- E.K. PHETO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- E. NQOLASE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster
- M.H. MAMOEPA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), K.G.G., Gesondheidsbesoekster en Skoolverpleegster
- C.H.L. PITSE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- W.M. MOTLOI, Sert. S.A. Verpleegstersraad (Alg.)
- G.B. LIMBANE, Sert. S.A. Verpleegstersraad (Alg.)
- H. RATLHAGANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- R.H. MODIRI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- L.N. MOROLO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- A.R. KUTUMELA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- D.M. KHATRI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- M.M. MOHIDEEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.) Dfp. Gemeenskapsverpleg.
- Y.L. COGLIN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- S. MAMEREGANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- M.J. MATSEI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk. & Psigiatrie.)
- M.F. MALEKA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- E.E.M. MOILA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- E.S. VERMEULEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- Z. DEZAI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- J.M. BUTHANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- M.L. MASHILO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
- C.M. MONONYANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

- Y.M. KOLA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 J.J. PAULSEN, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 M.M. MAKGALEMELE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 M.E. VILAKAZI, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 E.N. NGOKA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 V.N. MALELE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Gesondheidsbesoekster, D.V.O.
 T.V. KGANANE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 M.M. MAHLANGU, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 F.N. MADISENG, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 T.P. MMUTLE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 L.H. MARUPING, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 P. MAMITSE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 J.M. KGOPE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 B.N. MOKONE, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

NIEBLANKE VROEDVROU

- N.E. SEMA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.), Dip. Gemeenskapsverpleg.
 G.E. MAKGOLO, Sert. S.A. Verpleegstersraad (Verlosk.)
 E. DAU, Sert. S.A. Verpleegstersraad (Verlosk.)
 R.E. BALOYI, Sert. S.A. Verpleegstersraad (Verlosk.)
 M.C. MOROE, Sert. S.A. Verpleegstersraad (Verlosk.)
 V. MONARE, Sertt. S.A. Verpleegstersraad (Verlosk. & Hulpverpleging)
 M.M. BOKABA, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)
 V.M. MASINGI, Sertt. S.A. Verpleegstersraad (Verlosk.)
 M.T. THEMBO, Sertt. S.A. Verpleegstersraad (Alg. & Verlosk.)

NIEBLANKE VERPLEEGASSISTENTE

- M.P. RAMASEHLA, Sert. S.A. Verpleegstersraad (Hulpverpleging)
 A.J. LETSOALO, Sertt. S.A. Verpleegstersraad (Hulpverpleging & Verlosk.)
 Z.P. NTULI, Sert. S.A. Verpleegstersraad (Hulpverpleging)
 M.R. MOKOME, Sert. S.A. Verpleegstersraad (Hulpverpleging)
 M.E. MASHANGOANE, Sert. S.A. Verpleegstersraad (Hulpverpleging)

KLINIEKHELPER

H. SATHEKGE

C.M. PHAGO

NIEBLANKE KLINIEKKLERKE

B.R. MANYUROLA Senior Kliniekklerk

J. DIBAKWANE

S. S. MATSEKE

P.E. MATLAKALA (Vroulik)

R.S. MASHAO (Vroulik)

N.R. MAKOEBA (Vroulik)

F.W. MASILO (Vroulik)

H.A.W. MATLAISANE

M.W. MABATSOA

R.K. NGWENYA (Vroulik)

SWART ASSISTENT (LUGGESOEDELING)

M.A. MALUADSI

NIEBLANKE X-STRAALASSISTENTE

S. RAMOSHABA

F.S. MTINKULU

P.M. MOLEBALOA

OPPASSERS VAN OPENBARE TOILETGERIEWE

SEWE BLANKES

AGTIEN

NIEBLANKES

OPSIGTER

MEV. C.F. DE KLERK

MOTORKAR/TOEWADRYWER

P.S. LUIS

GEREGISTREERDE GEBORTES (ALLE RASSE) VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEÏNDIG HET TABEL NR. 1

	BLANK				SWART				ASTOR				KLEURLING			
	Egtelik		Buite-egtelik		Egtelik		Buite-egtelik		Egtelik		Buite-egtelik		Egtelik		Buite-egtelik	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V
Januarie	234	220	13	20	132		329		12	19	1	0	16	8	5	6
Februarie	242	215	21	7	201		288		15	12	0	1	9	9	7	4
Maart	322	283	18	12	273		311		13	16	0	0	10	16	5	8
April	251	260	7	10	240		219		15	16	0	0	11	10	9	5
Mei	221	235	13	20	145		363		11	13	0	0	9	11	4	9
Junie	296	281	22	15	297		272		17	13	0	0	9	10	11	6
Julie	246	208	10	15	280		260		12	13	1	1	15	5	6	2
Augustus	229	220	17	14	261		315		10	15	0	1	9	9	4	5
September	305	290	14	12	295		332		16	12	0	0	11	15	4	3
Oktober	261	249	16	7	256		297		14	13	0	0	6	13	4	5
November	228	242	9	12	222		292		9	10	0	1	7	12	1	8
Desember	247	222	20	17	478		136		12	16	3	1	7	10	2	4
TOTAAL	3082	2925	180	161	3080	3414	156	168	5	5	5		119	128	62	65

DODGEBORENES (PLAASLIKE INWONERS)

	BLANK				NIEBLANK				GEBORTES (NIE-INWONERS)			
	Egtelik		Buite-egtelik		Egtelik		Buite-egtelik		Egtelik		Buite-egtelik	
	M	V	M	V	M	V	M	V	M	V	M	V
Januarie	1	2	1	8					60	57	87	88
Februarie	1	1	-	1					63	84	90	93
Maart	1	1	4	-					91	78	98	93
April	1	2	4	4					80	63	97	86
Mei	2	0	2	1					61	60	107	91
Junie	1	2	3	1					67	80	102	102
Julie	2	1	3	6					63	73	96	96
Augustus	1	0	2	-					62	52	107	109
September	1	1	9	5					78	92	114	114
Oktober	1	1	12	7					67	67	88	109
November	2	1	4	5					61	66	99	114
Desember	0	1	7	7					69	69	125	126
TOTAAL	14	13	51	45					822	841	1210	1221

STERFTES VAN KINDERS ONDER 5 JAAR VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEÏNDIG HET TABEL NR. 4

	24 uur		1 week		1 tot 3 tot		6 tot		Totale		1 tot 2 tot		3 tot 4 tot		Totale	
	tot on-der 1		tot on-der 1		tot on-der 3		tot on-der 6		tot on-der 12		tot on-der 2		tot on-der 3		tot on-der 4	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V
ASIER																
Brongo-pneumonie	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Ander siektes van long	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1
Aangebore afwykings	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1
Meningitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Oorvloed, onomskrewe	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1
TOTAAL	0	0	3	0	0	0	0	0	0	1	0	0	0	0	0	5
KLEERLING																
Meningitis	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	1
Brongo-pneumonie onomskrewe	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1
Ander gastro-enteritis en kolitis	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Fetus aangeslag deur komplikasies van plasenta	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Vroeggebore	2	1	3	2	0	0	0	0	0	0	5	0	0	0	0	5
Respiratoriese noodindroom	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Skakelkroon toestande wat in perinatale tydperk ontstaan	1	0	0	1	0	0	0	0	0	1	1	0	0	0	0	1
Natuurlike oorsake	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1
Motorvoertuig-verkeersongeluk van onomskrewe aard	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Besering opsetlik deur leaand aangedoen	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	1
TOTAAL	4	3	3	4	0	4	0	0	1	0	1	1	0	0	0	12

STERFTES VAN PERSONE VAN VYF JAAR EN OUER BINNE DIE MUNISIPALE GEBIED VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEËINDIG HET

TABEL NR. 5

BLANK	5-9		10-14		15-19		20-24		25-29		30-39		40-49		50-59		60-69		70-79		80		Totaal	
	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V	jaar	V		
Aansteeklike en parasitêre siektes	0	0	1	0	1	0	0	0	0	1	0	2	2	0	0	1	5	1	2	2	1	2	12	9
Neoplasië	0	1	0	0	1	0	1	1	0	0	5	2	7	18	28	32	51	34	34	31	15	24	142	143
Endokriene, voeding en metabolisme siektes	2	1	1	0	1	0	1	1	1	1	0	4	2	2	2	3	7	5	4	7	1	3	21	27
Siektes van bloed en bloedvormende organe	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	1
Siektes van die senuweestelsel en sintuig organe	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	2	2	1	1	0	1	5	6
Siektes van die bloedsomloopstelsel	0	0	1	0	1	2	2	1	2	1	29	4	36	17	94	60	146	112	151	155	91	190	553	542
Siektes van die asemhalingstelsel	0	0	1	1	0	1	2	1	1	1	3	1	5	5	20	11	44	28	71	46	46	92	193	187
Siektes van die spysverteringstelsel	0	0	0	0	0	1	0	0	1	1	5	2	6	8	16	3	9	5	8	7	3	5	48	32
Siektes van die geslagsurinerstelsel	0	1	0	0	0	0	0	0	0	1	1	0	0	0	8	8	10	5	10	15	3	28	32	58
Geestesafwykings	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0
Aangebore foute	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0
Ongevalle, vergiftigings en geweld	1	2	4	1	18	5	28	1	21	4	19	5	20	12	19	2	15	7	11	3	1	5	157	47
Simptome en swak omskepte toestande	0	0	0	0	0	0	0	0	2	1	6	1	11	4	22	5	28	13	23	19	15	17	107	60
Endokriene, Nutrisionele en Metaboliese siektes en immuunstoetsaandoenings	0	0	0	0	1	0	0	1	0	0	2	0	2	1	3	3	2	3	3	6	2	6	15	20
TOTAAL	4	5	8	2	23	9	33	6	28	11	72	21	91	67	213	130	320	215	318	293	178	373	1288	1132

TABEL NR. 6

STERFTES VAN PERSONE VAN VYF JAAR EN OUER BINNE DIE MUNISIPALE GEBIED VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEËINDIG HET

SWART	5-9		10-14		15-19		20 - 29		30-39		40-49		50-59		60-69		70 jaar en ouer		Totaal	
	jaar	M V	jaar	M V	jaar	M V	jaar	M V	jaar	M V	jaar	M V	jaar	M V	jaar	M V	jaar	M V	M	V
Aansteeklike en parasitêre siektes		2 1	5 0	1 0	1 0	4 4	4 4	9 2	9 3	7 1	12 4	2 2	2 2	51 17						
Neoplasië		0 1	0 1	0 2	3 3	2 2	7 6	15 8	19 14	23 10	11 8	78 52								
Endokriene, voeding en metabooliese siektes		0 1	0 0	0 0	0 1	0 0	1 1	2 0	4 2	3 5	6 13	3 9	18 31							
Siektes van bloed en bloedsomloopstelsel		0 1	0 0	0 1	0 0	0 0	0 0	1 0	1 1	0 0	1 0	0 0	3 3							
Siektes van die senuweestelsel en senuorgane		0 0	2 1	2 0	3 3	2 2	5 7	27 11	31 30	62 18	18 34	149 115								
Siektes van die bloedsomloopstelsel		0 2	2 3	0 5	4 4	5 5	6 2	13 2	27 5	18 11	17 18	85 41								
Siektes van die asemhalingsstelsel		0 1	0 0	1 0	3 3	2 2	5 4	9 1	10 3	10 6	4 6	42 23								
Siektes van die spysverteringstelsel		1 0	0 0	0 1	3 2	2 2	2 1	5 4	3 0	3 3	2 3	18 12								
Siektes van die geslagsurinerstelsel		0 0	0 0	1 0	2 2	1 0	1 0	0 0	0 0	0 0	0 0	1 0								
Siektes van die spierskeletstelsel en bindweefsel		0 0	0 0	0 0	0 0	0 0	2 2	13 2	3 1	4 2	3 1	2 2	0 2							
Komplikasies van swangerskap, bevalling en die puerperium		0 0	0 0	0 0	0 0	0 0	19 3	13 2	7 4	29 62	34 66	275 178								
Ongevalle, vergiftigings en geweld		1 1	0 0	2 1	22 22	9 0	0 0	0 0	0 0	0 0	0 0	1 0								
Sieptoue en swak onskrewe toestande		0 5	2 4	5 2	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0							
Aangebore afwykings		1 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0							
Bepaalde toestande wat in perinatale tydperk ontstaan		1 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0							
TOTAAL		6 13	11 9	12 12	63 63	33 33	72 31	130 56	171 90	202 101	125 146	792 491								

TABEL NR. 7

STERFTES VAN PERSONE VAN VYF JAAR EN OUER BINNE DIE MUNISIPALE GEBIED VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEËINDIG HET

KLEURLING	5-9		10-14		15-19		20-24		25-29		30-39		40-49		50-59		60-69		70-79		80		Totaal		
	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	jaar	M	V	M	V
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M
Aansteeklike en parasitêre siektes	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0	2	1	1
Meoplasieë	0	0	0	1	0	0	0	0	0	0	0	0	0	1	2	0	2	2	2	1	0	0	6	5	5
Siektes van die sonnegestel en senuigorgane	0	0	0	0	0	1	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	2
Siektes van die bloedsomloopstelsel	0	0	0	0	0	0	0	0	1	0	0	0	2	0	5	3	2	2	5	8	2	3	17	16	16
Siektes van die asemhalingstelsel	0	0	0	0	0	0	0	0	0	1	1	1	1	0	2	0	0	0	2	0	1	1	7	3	3
Siektes van die spysverteringstelsel	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	1	0	1	0	0	0	4	1	1
Siektes van die geslagsurinerse stelsel	0	0	0	0	1	0	0	0	0	0	0	1	0	0	3	0	0	0	0	0	0	0	4	1	1
Slaptoe en swak omskeure toestande	0	0	0	0	0	0	1	0	0	0	1	0	0	1	2	0	0	0	0	0	1	1	5	2	2
Ongevalle, vergiftigings en geweld	0	0	0	0	0	0	0	0	4	0	0	2	2	1	2	1	1	0	0	0	0	0	9	4	4
TOTAAL	0	0	0	1	2	1	1	0	7	2	2	4	5	4	17	4	6	5	11	9	4	5	55	35	35

KLEURLING VAN VYF JAAR EN OUER BINNE DIE MUNISIPALE GEBIED VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEËINDIG HET

TABEL NR. 8

TABEL NR. 9

KINDERSTERFTES : BRANK : OORSAAK VAN DOOD EN STERFTESYFER VIR DIE JAAR WAT OP 31 DESEMBER 1980 GEËINDIG HET

	Aan- steek- like		Bron- gittis en pneu- monie		Aange- bore oorsake		Ander oorsake		Voor- tydige geboor- te		Bese- ring by ge- boorte		Totale sterf- gevälle		Totale ge- boortes		Sterftesyfer per 1 000 le- wend geborenes		Totaal
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	
Sentrale gebied	1	0	0	0	0	0	0	2	0	0	0	1	4	1	272	235	14,70	4,26	9,86
Noord-vestelike Voorstede	0	0	0	0	0	0	0	1	0	0	0	1	2	2	192	169	10,42	11,83	11,08
Noord-oostelike Voorstede	0	0	0	0	0	0	0	0	0	0	0	1	1	1	161	154	6,21	6,49	6,34
Wes-Moot	0	0	0	0	0	0	0	1	2	1	2	2	6	6	260	254	23,07	23,62	23,35
Sentrale-Moot	0	0	0	0	0	0	0	0	1	0	1	0	2	4	491	406	2,04	9,85	5,58
Oos-Moot	0	0	0	0	0	0	0	1	0	1	0	1	4	1	162	177	24,69	5,65	14,75
Westelike Voorstede	0	0	0	0	0	0	0	3	1	2	2	0	8	4	386	375	20,73	10,67	15,77
Oostelike Voorstede	0	0	0	0	0	0	0	3	4	1	1	5	10	8	1057	1025	9,46	7,80	8,65
Suidelike Voorstede	0	0	0	0	0	0	1	1	0	0	0	0	2	3	281	291	7,11	10,31	8,74
TOTAAL	M	V	0	0	0	0	1	12	5	8	13	13	38	30	3262	3086	11,65	9,72	10,71

AANMELDINGS VAN AANMELOBBARE SIEKTES : PLAASLIKE GEVALLE : ALLE RASSE : JAAR WAT OP 31 DESEMBER 1980 GEÏNDIG HET

TABEL NR. 10

BLANK	0-1 jaar		1-4 jaar		5-9 jaar		10-19 jaar		20-39 jaar		40 jaar		Totaal	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
Brongo-karsinoom	0	0	0	0	0	0	0	0	0	0	43	12	43	12
Tifloedkoors	0	0	0	0	0	0	1	0	1	1	0	0	2	1
Difterie	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Meningitis	1	0	1	2	0	0	3	0	0	0	0	0	5	2
Poliomiëlitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Virus hepatitis	0	0	1	2	2	2	7	7	5	9	2	1	17	21
Enkefalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Erisipelas	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ophthalmia neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Melaatsheid	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperale sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Vlektifus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Insektdoder vergiftiging	0	0	0	0	0	0	0	0	1	1	0	0	1	1
Masels	4	4	20	16	8	15	0	3	1	0	0	0	33	38
TOTAAL	5	4	22	20	10	17	11	10	8	11	45	13	101	75
NIEGLANK														
Brongo-karsinoom	0	0	0	0	0	0	0	0	0	0	8	2	8	2
Leprose	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tifloedkoors	1	0	0	0	1	1	2	2	0	3	0	2	4	8
Difterie	1	0	0	0	0	1	0	0	0	0	0	0	1	1
Meningitis	0	0	0	1	0	0	0	1	0	0	0	0	0	2
Poliomiëlitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Virus hepatitis	0	0	0	0	0	0	2	1	0	0	0	0	2	1
Enkefalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	1	0	1	0
Ophthalmia neonatorum	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Erisipelas	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Puerperale sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Vlektifus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Loodvergiftiging	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Masels	13	9	30	25	10	19	4	7	0	0	0	0	57	60
TOTAAL	15	9	30	26	11	21	8	11	0	3	9	4	73	74

TABEL NR. 11

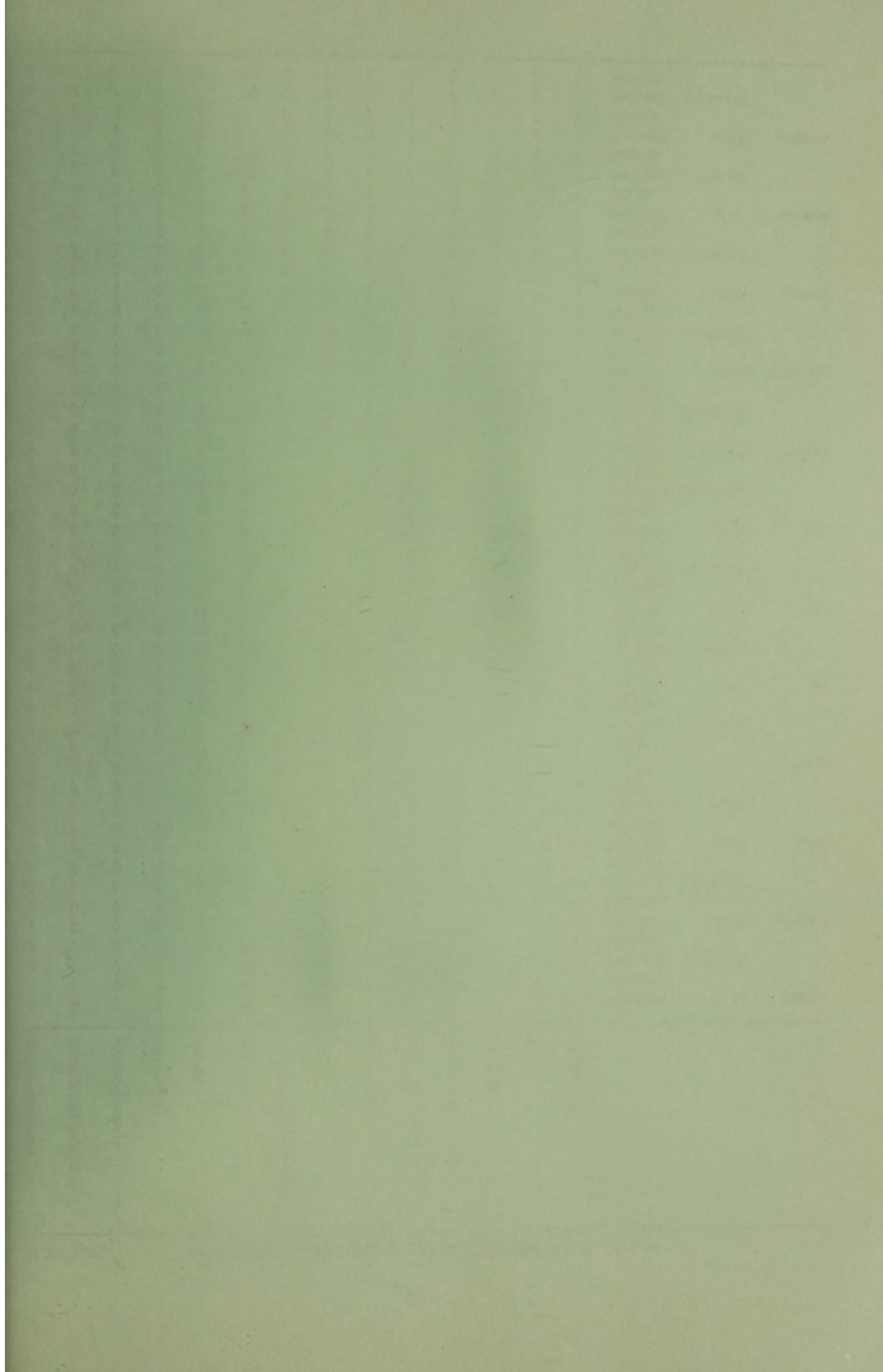
AANMELDINGS VAN SIEKTES : INGEVOERDE GEVALLE : ALLE RASSE : VIR DIE JAAR WAT IN DESEMBER 1980 GEÏNDIG HET

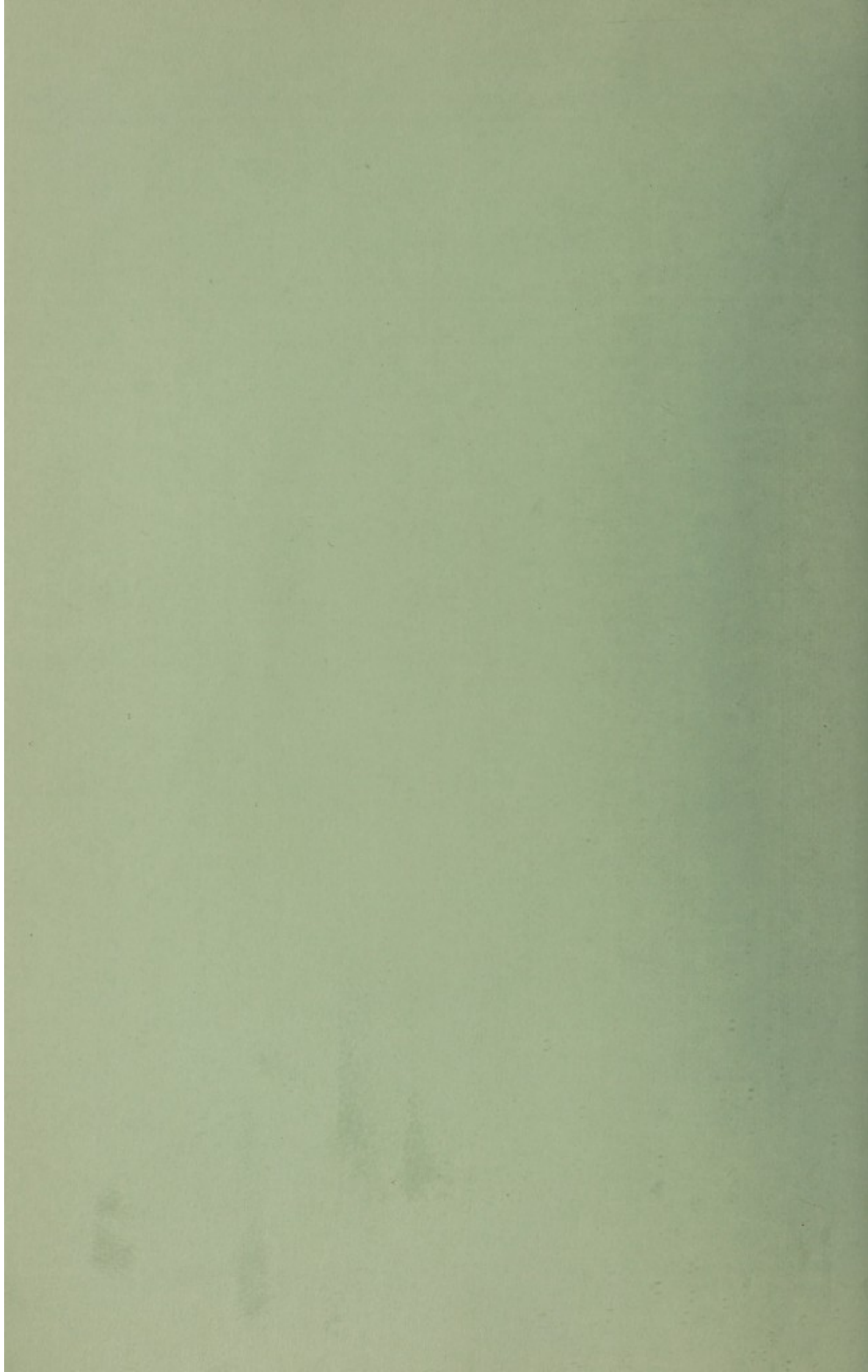
	0-1 jaar		1-4 jaar		5-9 jaar		10-19 jaar		20-39 jaar		40 jaar		Totaal	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
BLANK	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Tifoïdkoors	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Enkefalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	0	0	0	0	0	0	1	0	1	0	1	0	3	0
Virus hepatitis	0	0	0	0	0	0	0	1	3	0	0	0	3	1
Meningitis	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Masels	0	0	0	1	3	1	0	0	0	0	0	0	3	2
Vlektifus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAAL	0	0	0	1	3	1	3	1	4	0	1	0	11	3
NIEBLANK														
Difterie	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tifoïdkoors	0	0	0	0	0	0	3	2	2	1	1	4	6	7
Malaria	0	0	0	0	0	0	0	0	1	0	0	0	1	0
Poliomielitis	0	0	0	0	1	0	0	0	0	0	0	0	1	0
Lepra	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Virus hepatitis	0	0	1	0	0	0	0	0	0	0	0	0	1	0
Masels	0	0	0	1	1	1	0	0	0	0	0	0	1	2
TOTAAL	0	0	1	1	2	1	3	2	3	1	1	4	10	9

VERVOLG VAN TABEL NR. 10 : AANMELDINGS VAN SIEKTES : ALLE RASSE : VIR DIE JAAR WAT IN DESEMBER 1980 GEÏNDIG HET

			Tifoidkoors	Malaria	Difterie	Wetkifus	Virus hepatitis	Polioëntitis	Masels	Meningitis	Tuberkulose	Lepra	Erisipelas	Puerperale sepsis	Insektdoder vergiftiging	Brongse-karsinoom
Januarie	Blank	Inwonend	0	0	0	0	3	0	10	0	112	0	0	0	0	0
		Ingevoer	0	2	0	0	1	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	1	0	0	0	0	0	5	0	106	0	0	0	0	0
		Ingevoer	3	0	0	0	0	0	0	0	4	0	0	0	0	0
Februarie	Blank	Inwonend	0	0	0	0	4	0	3	0	4	0	0	0	0	6
		Ingevoer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	4	0	1	0	0	0	0	0	109	0	0	0	0	0
		Ingevoer	0	0	0	0	0	0	0	0	6	0	0	0	0	0
Maart	Blank	Inwonend	0	0	0	0	3	0	4	1	10	0	0	0	0	4
		Ingevoer	0	0	0	0	0	0	2	0	2	0	0	0	0	0
	Nieblank	Inwonend	0	0	0	0	0	0	1	0	109	0	0	0	0	2
		Ingevoer	0	1	0	0	0	0	0	0	5	0	0	0	0	0
April	Blank	Inwonend	0	0	0	0	0	0	3	0	6	0	0	0	0	1
		Ingevoer	0	0	0	0	1	0	1	0	1	0	0	0	0	0
	Nieblank	Inwonend	0	0	0	0	3	0	2	0	78	0	0	0	0	0
		Ingevoer	1	0	0	0	0	1	0	0	7	0	0	0	0	0
Mei	Blank	Inwonend	2	0	0	0	7	0	1	2	8	0	0	0	2	4
		Ingevoer	1	0	0	0	0	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	1	0	0	0	0	0	8	0	120	0	0	0	0	0
		Ingevoer	0	0	0	0	0	0	0	0	8	0	0	0	0	0
Junie	Blank	Inwonend	0	0	0	0	4	0	3	0	3	0	0	0	0	9
		Ingevoer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	0	0	0	0	0	0	6	0	84	0	0	0	0	0
		Ingevoer	0	0	0	0	1	0	1	0	3	0	0	0	0	0
Julie	Blank	Inwonend	0	0	0	0	1	0	3	1	5	0	0	0	0	5
		Ingevoer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	4	0	0	0	0	0	10	1	94	0	0	0	0	0
		Ingevoer	0	0	0	0	0	0	0	0	4	0	0	0	0	0
Augustus	Blank	Inwonend	0	0	0	0	5	0	6	0	5	0	0	0	0	6
		Ingevoer	0	0	0	0	1	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	0	0	0	0	0	0	29	0	81	0	0	0	0	4
		Ingevoer	0	0	0	0	0	0	1	0	7	0	0	0	0	0
September	Blank	Inwonend	0	0	0	0	6	0	15	2	3	0	0	0	0	7
		Ingevoer	0	0	0	0	1	0	0	0	0	0	0	0	0	0
	Nieblank	Inwonend	0	0	0	0	0	0	31	1	114	0	0	0	0	2
		Ingevoer	0	0	0	0	0	0	0	0	4	0	0	0	0	0
Oktober	Blank	Inwonend	0	0	0	0	2	0	12	0	9	0	0	0	0	3
		Ingevoer	0	0	0	0	0	0	1	0	1	0	0	0	0	0
	Nieblank	Inwonend	0	0	1	0	0	0	14	0	99	0	0	0	0	1
		Ingevoer	5	1	0	0	0	0	0	0	7	0	0	0	0	0
November	Blank	Inwonend	0	0	0	0	0	0	8	1	5	0	0	0	0	6
		Ingevoer	0	0	0	0	0	0	1	0	0	0	0	0	0	0
	Nieblank	Inwonend	1	0	0	0	0	0	6	0	100	0	0	0	0	0
		Ingevoer	3	0	0	0	0	0	0	0	5	0	0	0	0	0
Desember	Blank	Inwonend	1	0	0	0	3	0	3	0	7	0	0	0	0	4
		Ingevoer	0	1	0	0	0	0	0	0	1	0	0	0	0	0
	Nieblank	Inwonend	1	0	0	0	0	0	5	0	95	0	0	0	0	1
		Ingevoer	1	0	0	0	0	0	1	0	3	0	0	0	0	0

Maand	Dag	Totaal	M	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A	G	V	K	L	B	S	D	T	A
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STADSRAAD VAN PRETORIA



77^{STE} JAARVERSLAG

VAN DIE
STADSGESONDHEIDSHOOF
VIR DIE JAAR EINDIGENDE
31 DESEMBER 1980