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THE GAMBIA



ANNUAL MEDICAL

AND

SANITARY REPORT

FOR THE YEAR

1938

Price: Five Shillings



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Annual Medical and Sanitary Report for the year ended 31st December, 1938.

I. ADMINISTRATION.

(a) STAFF.

(i) APPOINTMENTS.

Dr. J. L. Lochhead, Medical Officer of Health (Acting), from 1937
to 29th March, 1938.
Dr. M. Clayton-Mitchell, Senior Medical Officer (Acting), from
1937 to 17th June, 1938.
Dr. L. H. Thomas, Senior Medical Officer (Acting), 18th June to
22nd June, 1938.

(ii) Assumption of Duty. Dr. L. H. Thomas, Medical Officer of Health, 30th March, 1938.

(iii) MISCELLANEOUS.

Mr. Uel M. John, Dental Surgeon, arrived in Bathurst on the 8th January, 1938 and returned to Freetown on the 7th April, 1938.

Miss F. A. Lynes, Sister of the Methodist Mission, in charge of the Maternity and Child Welfare Centres, proceeded on leave on 29th April, 1938.

Miss E. Moody, of the Methodist Mission, who was seconded from Nigeria to be Sister-in-Charge of the Maternity and Child Welfare Centres, arrived in the Colony and assumed duty on the 18th August, 1938.

Dr. C. Wilson, Senior Medical Officer, who left Bathurst on the 10th November, to attend the West African Medical Conference at Lagos, Nigeria, returned to the Colony on the 14th December, 1938.

Dr. L. H. Thomas, Medical Officer of Health, was Officer-in-Charge, Medical and Health Services, from the 10th November to the 13th December, 1938.

(iv) NEW APPOINTMENTS.

Nil.

(v) ON LOCAL LEAVE.

Nil.

(vi) PROCEEDED ON LEAVE.

Dr. J. D. Bright-Richards, Medical Officer (Gambia), 7th February, 1938.

Dr. S. H. O. Jones, Medical Officer (Gambia), 4th April, 1938. Mr. E. J. Snell, Senior Sanitary Superintendent, 15th April, 1938. Miss R. B. Tryhorne, Nursing Sister, 29th April, 1938.

Dr. C. Bowesman, Medical Officer, 28th May, 1938.

Dr. M. Clayton-Mitchell, Medical Officer, 18th November, 1938.

Dr. B. J. Green, Medical Officer, 18th November, 1938.

Dr. S. H. O. Jones, Medical Officer (Gambia), 19th December, 1938.

(vii) RESUMPTION OF DUTY.

Dr. C. Bowesman, Medical Officer, 12th January, 1938.
Dr. J. D. Bright-Richards, Medical Officer (Gambia), 21st March, 1938.

Miss A. M. Fraser, Nursing Sister, 7th April, 1938.

Dr. S. H. O. Jones, Medical Officer (Gambia), 10th June, 1938.

Dr. C. Wilson, Senior Medical Officer, 23rd June, 1938.
Miss R. B. Tryhorne, Nursing Sister, 6th October, 1938.

Dr. M. Clayton-Mitchell, Medical Officer, 10th November, 1938.

Dr. C. Bowesman, Medical Officer, 16th December, 1938.

(viii) Transfers.

Dr. G. R. Baxter, Medical Officer of Health, to Fiji, 21st February, 1938.

Dr. L. H. Thomas, Medical Officer of Health, from Nigeria, 19th March, 1938.

(b) List of Ordinances, Rules and Regulations affecting Public Health Enacted during the year, 1938.

Regulation No. 1 of 1938—11th January, 1938. "Public Health (Amendment) Regulations, 1938."

Regulating the sale of Fresh Food as to cleanliness of storage, etc., and making provision for the issue of licences only to Hawkers who have a certificate from the Medical Officer of Health.

Regulation No. 4 of 1938—18th January, 1938. "Public Health (Amendment No. 2) Regulations, 1938."

Regulating the proper use of public latrines.

Rules No. 6 of 1938—22nd March, 1938. "The Midwives (Amendment) Rules, 1938."

Regulating the period for which applicants should undergo a course of theoretical and practical instruction in Midwifery.

Ordinance No. 7 of 1938—25th March, 1938. "The Druggists (Amendment) Ordinance, 1938."

Delegating some of the powers of the Governor to the Senior Medical Officer.

Regulation No. 13 of 1938—13th July, 1938. "Public Health (Amendment) Regulations, 1938."

Regulating that the Medical Officer of Health shall have power to order the removal of all collections of water, rubbish, refuse, closing and filling up of wells etc., etc.

Regulation No. 25 of 1938—21st December, 1938. "The Public Health (Amendment No. 4) Regulations, 1938."

Prohibiting the keeping of sheep, etc., in certain places, except with permission.

(c) FINANCIAL.

Medical and Health Services.

	3	Estimated.	Actu	ial.		De	ficit.	-	Ex	cess.	
Revenue Expenditure Savings	 	2,850 33,264	£ 2,871 31,464 1,799	s. 19 7 13	d. 6 0 0	£	s. 	d.		s. 19	d. 6

Miscellaneous Services.

			Estimated.	Actual,	Deficit.	Excess.
Contributio	ns to Cole	onial	£	£	£	£
Fund		***	200	200	_	_
Savings	***			_	_	

Colony.

			Estimated.	Actual.
Total Revenue	 	 	 £ 236,038	£ 166,794
Total Expenditure	 	 	 241,441	. 263,199

The actual expenditure on Medical and Health Services was11.9 per cent of the total expenditure of the Colony.

				ACT	UAL		
		Revenue.			Expenditure.		
1934	 	£ 2,558	s. 8	d. 1	£ 22,217	s. 5	d.
1935	 	2,677	14	10	32,314	17	5
1936	 	2,756	15	11	30,894	19	9
1937	 Medical Health	1,625 1,717	2 16	3 9	20,484 11,625	2 8	3
1938	 Medical Health	1,262 1,609	18	11 7	20,013 11,451	4 2	11

3. From 1937 onwards the figures for the Medical and Health Services have been shown separately, as it is felt that such a division gives a more illuminating picture than the combination of the expenditure of the two distinct services.

II. PUBLIC HEALTH.

A. GENERAL REMARKS.

- 4. Like 1937 the year 1938 has not been one of expansion. The need for economy coupled with depletion of the staff by death, resignation and dismissal during the year added to the great depletion in 1937 has made expansion in medical matters less possible than ever though by strict economy in the Health services more work and more widely spread work was accomplished than in 1937 with a smaller expenditure of money.
- 5. Progress has however been made in the training of staff and five of the Dresser-Dispensers have now qualified as Dispensers. Our two Second Grade Dispensers died during the year. It has not been possible to promote any one to take their places because it is felt on the grounds of efficiency and inducement to further study that no one should be promoted to Second Grade who has not succeeded in passing the Chemists and Druggists examination. Two of the senior Third Grade Dispensers are trying to pass this examination, and it is hoped that one will pass at the end of 1939.

- 6. It was found on inspection that in the dispensaries, most of which have to work owing to the nature of the country with very little supervision, large stocks of most dangerous drugs were being held and were being prescribed for use by dispensers who, although qualified as such were not sufficiently skilled in medicine or therapeutics to be anything but a grave potential danger to their patients unless their actions were much more strictly controlled. To combat this danger a formulary was prepared similar to that employed in most Native Administration Dispensaries in Nigeria, for use in these Dispensaries and the use of drugs outside of this formulary was prohibited. The stocks of poisons were withdrawn.
- 7. During 1937 two Dispensers were dismissed for extortion. It was now discovered that much more than extortion had been occurring; and that some of the Dispensers were pretending to a skill which they could not possibly have attained. One, who is no longer in the service, was rarely seen without a stethoscope around his neck, whilst another had a large and apparently lucrative private practice which extended it is said far into French Territory, and frequently left his Dispensary and all its patients to the care of the Orderly whilst he did his rounds.
- 8. Immediate steps were taken to put the Medical Department in a position to overcome these evils, and at the same time to make up the reduction of skilled staff which had already occurred. The use of a standard formulary, and the prohibition of any drugs outside of it made it unnecessary to employ comparatively highly skilled Dispensers in these Dispensaries if these were to perform their proper function of acting as Medical Aid stations and Clearing Centres for the more serious illnesses, and it was felt desirable and in this I was strongly supported by the Medical Officer of Health, who served for many years in Nigeria, that a new grade of officer be raised similar to the Native Administration Dispensary Attendants in Nigeria. Such a grade would have the advantage of requiring less training than Dispensers and as the educational standard would not have to be so high, could also be recruited from the people among whom they were to work and for whom they would have more natural sympathy than Dispensers recruited solely from the coastal people.
- 9. The necessity for the inauguration of this quickly trained grade was enhanced by the unexpected deaths of many of the staff, including the two Second Grade Dispensers. Three recruits, all educated in the Armitage School, Georgetown, were enlisted for this grade and will soon be ready to take the places of the more highly qualified Dispensers who are at the moment uneconomically employed in small Dispensaries doing work which can as easily be performed by men with much smaller technical ability and training.
- 10. Hospitals:—The Protectorate Hospital at Bansang was completed during the year, and officially opened by His Excellency the Governor on the 11th April, 1938. It was not quite ready then however and only came into use as a hospital in August, when the staff of the hospital at Georgetown was transferred there. A Dispenser was left behind in Georgetown and a Dispensary established in part of the old hospital buildings. The hospital at Georgetown has now reverted to its original use as a prison.
- Bwiam Hospital continues to do good work and is being slightly enlarged during 1939.

- 12. The Victoria Hospital, Bathurst, is however the main hospital of the Colony. It was erected in 1854. There have been several additions to it since then, but it is a most unsatisfactory building and should be replaced as soon as funds permit by a much more extensive building planned on modern lines. The main portion of the present building could be made into a most satisfactory Medical and Health Office. The housing of both the Medical and Health headquarters under one roof would lead to greater efficiency and economy in clerical effort.
- 13. Dispensaries:—There are now six dispensaries serving the needs of the rural districts. These are at Basse, Georgetown and Kau-ur, under the charge of the Medical Officer at Bansang, at Kaiaff and Kerewan under the care of the Medical Officer at Bwiam, though Kerewan can only be visited by him in the wet season, and Kaiaff in the dry, and at Cape St. Mary. The latter, which is principally there for the R.W.A.F.F., is now supervised by the Senior Medical Officer who lives only a mile and a half away and passes each morning en route to his office.
- 14. Maternity and Child Welfare Clinics:—A weekly Clinic is run at the Cape St. Mary Dispensary and Clinics are maintained in Bathurst and Sukuta. These Clinics are supervised by a Sister lent for the purpose by the Methodist Mission. The Clinic in Sukuta is now in new buildings erected during the year and belonging to the Government.
- 15. Home for the Infirm:—A Destitute Home and Home for the Infirm is maintained near Bathurst.
- 16. Infectious Diseases Hospital:—An excellent Infectious Diseases Hospital is situated about two miles from the Victoria Hospital on an isolated peninsula of the Island. It is fortunately rarely required.
- 17. Mental Home:—There is no Mental Home in the Colony as certified lunatics are sent to the Asylum at Kissy in Freetown. An Observation Home is to be constructed in 1939 as it is felt that using the Prison for the purpose of observing suspected lunatics is unsatisfactory in every way.
- 18. Leper Villages:—There are two villages for lepers in the country. One is Fukinaf near Bwiam. This is supervised by the Medical Officer, Bwiam. The other is Buruko near Georgetown. It is under the care of the Medical Officer, Bansang. The two Seyfolu in whose districts these villages are situated take a very great practical interest in the welfare of their inhabitants and are always most willing to give help in every possible way. A certain amount of difficulty was found in financing Fukinaf so it will be directly under the charge of the Medical Department in 1939.
- Trypanosomiasis: Trypanosomiasis loomed large in last year's report. It is still as important as ever. Dr. Lochhead in his survey of the North Bank Province, published as Appendix III in the 1937 Report, made several recommendations. It has not been felt desirable, however, to advise the carrying out of these except the clearing around villages, until much fuller information is obtained as to whether the disease is on the increase or decrease, the types of glossina spreading the infection and their habitat. An investigation into this, amongst other matters, is to be carried out by Dr. Bowesman in the first half of 1939, and from advance knowledge of his findings by the time this came to be written, it seems most unlikely that any movement of villages at any rate will be recommended. Large numbers of the inhabitants of the area affected are now receiving treatment, but financial difficulties preclude free treatment on a massive scale. It is hoped, however, that the information gained by Dr. Bowesman's survey will be such as will enable us by sanitary measures very greatly to reduce the incidence of the disease in this area.

20. Training of Staff:—Training of staff is difficult when the people qualified to train are few in numbers and have a considerable amount of other work to perform. It is therefore of necessity somewhat haphazard, but during 1938 efforts were made to regularise it as much as possible, with the result that all the Probationers received a full course of lectures in nursing and anatomy, whilst they took it in turn to serve in the Dispensary for a week at a time, where the main object of their training was to make them fully conversant with dispensary methods and such important matters as weights and measures.

All the members of the junior staff with more than two and a half years service were put to work in the dispensary where they received regular lectures in dispensing from the Chief Dispenser and the Second Grade Dispensers. Five of the Dresser-Dispensers have now qualified as Dispensers and four more should do so in 1939 so that shortly it will be possible to use most members of the staff with five years service either in the wards or dispensaries according to necessity. This will lessen the difficulties of posting which occurred when we had a small number of dispensers and a small number of dressers who were not interchangeable in any way.

21. Research:—No research was carried out by this Department during the year and there was no one available for such work. Dr. Waller Todd, however, spent a few weeks here investigating mosquito larvæ. No report of his investigations has yet reached us.

I. GENERAL DISEASES.

22. A return of diseases and deaths for 1938 is given in Table V on pages 31 to 39. The incidence of certain disease groups is shown in diagramatic form elsewhere in this report.

II. COMMUNICABLE DISEASES.

1. Mosquito or Insect Borne.

- 23. Malaria:—Malaria is common to every one in the Gambia. It is markedly seasonal, most of it appearing as the rains finish and the cold weather begins. Most of the malaria is of the sub-tertian type, but of late several cases of quartan have been found microscopically. Clinically, multiple infections generally obscure the position sufficiently to make a differential diagnosis very difficult.
- 24. Trypanosomiasis:—Trypanosomiasis is common in large areas of the country. An investigation into its extent was made in 1937 and a further investigation is being made in 1939.
- 25. Filariasis:—Disease due to Filaria is not exceedingly common, but a few cases of Elephantiasis are seen. Dr. Bowesman experimented with intra-arterial glycerin for this complaint. An account of his work was published in the British Journal of Surgery, Vol. XXVI, No. 101.
- 26. Yellow Fever:—No case of yellow fever was notified or seen. One patient reported to the hospital in a very anæmic condition and said he had started with jaundice four weeks before. He had not been treated by a doctor. Because of this lapse of time between onset and report jaundice was made notifiable, though yellow fever was not suspected in this case, and in any case it was too late to take any steps in the matter. As a matter of interest, however, we had his blood examined by Colonel Peltier of the Pasteur Institute at Dakar on two occasions with a six weeks interval. The increase in protection shown by the tests shows that he was definitely originally a case of yellow fever. No other unusual cases of jaundice occurred either in the area or at the same

period, nor was there any unusual mortality at that time, so it is reasonable to consider that this was an isolated sporadic case, though it is interesting to conjecture what would have happened to the European population of Bathurst were they not all already immunised.

2. Infectious Diseases.

- 27. Influenza:—There was a mild epidemic of this disease during 1938; but there were comparatively few cases as compared with 1937:—312 in 1938, 1,024 in 1937. Details of the main infectious diseases and the steps taken in their prevention are set out in Section III.
- 28. Venereal Diseases and Yaws:—Gonorrhœa past or present is almost universal in the population of Bathurst though it is not quite so common in the Protectorate. The sulphonamides have proved very helpful in dealing with cases, but some form of preventive treatment will have to be instituted before much amelioration of conditions will take place.

It is becoming apparent that yaws is a much commoner widespread disease in the Protectorate than formerly was thought to be the case and in some villages even the florid type is very evident.

3. Helminthic Diseases.

29. Almost every inhabitant of the Gambia harbours intestinal parasites of some sort. In Bathurst ankylostomiasis is the commonest. This will probably not be so in the future as most of the standpipes throughout the town now have adequate soakaways, whilst a very strict watch is being kept on all private latrines. Ascaris is the rural worm of the lower river, whilst tape worms become increasingly common as one proceeds up river.

B. VITAL STATISTICS.

(1) General African Population, Bathurst.

Estimated Population	 	 14,163	
Total Births			
Total Deaths	 		
Total Still Births		 DE CO.	
Deaths under 1 year	***		
Birth rate Death rate			per 1,000 population. per 1,000 population.
Infantile mortality	 		per 1,000 Births.
Still Births			per 1,000 Live Births.

30. Registration is compulsory in Bathurst and is reliable, though the total population is only an estimate. It is however based on a Census taken in 1931 brought up to date. Figures for the Protectorate are only estimations and cannot be accurate nor is it possible to give any useful idea of the births, deaths, or infant mortality rates. The estimated population is 191,009.

(2) General European Population.

This gives a death rate of 60.08 per mille, but as twelve of these deaths occurred to non-residents as the result of an aeroplane accident the real death rate is 8.58 per mille only.

The causes of deaths were :-

- (12) Aeroplane accident.
- (1) Bacillary Dysentery.
- (1) Acute Broncho-pneumonia.

(3) EUROPEAN OFFICIALS.

31. There were thirty-one officials on the sick list as compared with fifty-one in 1937.

TABLE SHOWING THE SICK, INVALIDING, AND DEATH RATES OF EUROPEAN OFFICIALS.

				1936.	1937.	1938.
Total number of Officials resident				69	69	71.
Average number resident			***	59	62	61
Total number on Sick List				37	. 51	31
Total number of days on Sick List				348	420	235
Average daily number on Sick List				0.95	1.15	0.64
Percentage of Daily sick to average n	umber	reside	ent	2.56	1.85	1.05
Average number of days on Sick List	for ea	ch Pat	tient	9.59	8.23	7.58
Average sick time to each resident				5.89	6.08	3.85
Total number invalided				3.00	3.00	2.00
Percentage of Invalidings to total resi	dents			4.34	4.34	2.81
Total deaths				-		-
Percentage of Deaths to total resident	s			-		
" " " average i	number	r resid	ent	-		1
Number of cases of sickness contractor	d away	y from	2			

Causes of Invalidings:—(1) Amoebic Dysentery
(1) Chronic Malaria.

(4) AFRICAN OFFICIALS.

32. On the whole the health of the African Officials was good throughout the year, though this Department lost its two Second Grade Dispensers and two Dressers died, whilst one was invalided.

TABLE SHOWING THE SICK, INVALIDING, AND DEATH RATES OF AFRICAN OFFICIALS.

				1936.	1937.	1938.
Total number of Officials resident				387	391	396
Average number resident				346	341	345
Total number on Sick List				320	415	533
Total number of days on Sick List	***			2,033	2,070	3,548
Average daily number on Sick List				5.56	5.67	9.72
Percentage of Daily Sick to average nu	ımber	residen	t	1.73	1.66	2.81
Average number of days on Sick List f	or eac	h Patier	at	6.35	4.98	6.65
Average sick time to each resident				5.87	5-29	10.28
Total number invalided				2.00	6.00	5.00
Percentage of Invalidings to total resid	ents			0.51	1.53	1.26
Total deaths				_	5.00	8.00
Percentage of Deaths to total residents				_	1.27	2.02
" average number	r resid	ent		_	1.46	2.31
Number of cases of Sickness contracted a	way fr	om resi	dence		_	-

Causes of Invalidings: -(1) Blindness and mental deterioration.

(1) Early Leprosy.

(1) Chronic Pleurisy and Tertiary Syphilis.

Mental derangement.
 Pulmonary Tuberculosis.

Causes of Deaths :-

(3) Myocarditis.

(1) Tetanus.

(2) Lobar Pneumonia.

(1) Mitral stenosis--Acute Broncho-pneumonia.

(1) Perineal Abscess--Debility Toxaemia.

MORBIDITY IN THE R.W.A.F.F., GAMBIA COMPANY.

Average daily strength					 139
Total number on sick list					 134
Total number of days on sick list	***			***	 2,173
Average daily sick	***				 5.97
Total number of deaths Death rate per thousand					 7.12
Number invalided during the y	oor		***		 Nil
Number invalided during the y	CCEL	***	111	2.11	 TATE.

MORBIDITY IN THE POLICE.

		***			****		131.3
Total number on sick list		***				***	164.0
Total number of days on sick	list					***	856.0
							5.7
Total number of deaths				***	***	***	1.0
Death rate per thousand					***		7.6
Total number invalided			=				5.0

III. HYGIENE AND SANITATION.

A. GENERAL REVIEW OF WORK DONE.

(1) Preventive Measures.

- 33. An anti-mosquito gang has been formed and trained. During the wet season a long list of potential mosquito breeding areas has been mapped. Where possible these have been dealt with by filling or drainage. Others have been dealt with appropriately and inspected regularly. One of the great difficulties is the considerable number and extent of small underground channels existing, because the main drains run down the centre of the roads. Until these can be dealt with permanently, regular flushing and oiling is being carried out.
- 34. Crab holes remain a permanent difficulty and no economic method has yet been evolved to deal with them effectively. Experimental tests have shown that fumigation with so², and filling with sand is effective in 52% cases, and filling with mixture of sand and Paris Green in 58% cases. Further experiments are being carried out.
- 35. Anti adult mosquito measures have been carried out in the Police Lines and in all cases where complaints are made, and in all premises where cases of malaria or jaundice are notified as occurring.
- 36. Drainage remains a difficult problem. The new pumps at Box Bar acquitted themselves well and prevented any long standing collections of water developing. The earth drain in Box Bar leading to the pumps, however, required a lot of attention owing to crab holes,

foot marks, etc., which retained water long enough to allow of breeding. Control of anti-silver fish gutters was taken over by Health Department during the year. This has worked well. Grass clearing was maintained during the rains.

- 37. An autoscythe was tried and proved fairly satisfactory. The only difficulty has been in training African labour to use it properly. With experience gained last rains it is hoped that next year it will be fully effective.
- 38. Malaria:—Cases notified 1,122. In Bathurst arrangements are being made to follow up these cases. Sale of quinine is being pushed in the Protectorate. Owing to the physical features of the Gambia, anti-larval measures cannot be a remedy in the Protectorate and for the present quinine treatment offers the best line of attack to assist development of immunity in natives and to decrease the carrier rate.
- 39. Yellow Fever:—All Europeans are inoculated. No cases occurred. Jaundice has now been made a notifiable disease.
 - 40. Filariasis: Is fortunately not a pressing problem.
- 41. Trypanosomiasis:—Treatment of cases was main line of attack. A further survey particularly in relation to the varieties of Tsetse, is being planned next year.
- Plague:—No cases reported. 9,692 rats were caught in 1938.
 1,762 rats were examined. No cases of infection with B pestis were discovered.
 - 43. Small Pox:-No epidemic occurred. Total vaccinations 1,809.
- 44. Dysentery:—In Bathurst, Regulations prohibiting keeping of sheep and goats without special permission were passed.

In Protectorate simple rural sanitation is being developed with installation of incinerators and a simple type of septic latrine.

- 45. Pulmonary Tuberculosis:-119 cases with 10 deaths.
- 46. Tetanus: Total cases 28 with 9 deaths.
- 47. Tetanus Neonatorum :- 1 case with no death.

The ante-natal clinic, and the prohibition of keeping cattle and horses in Bathurst is having the desired effect of decreasing incidence of this disease.

48. Helminthic Diseases:—Ankylostomiasis is very common. A scheme of development of Rural Sanitation was approved by government. The training of personnel for this scheme is in progress. Developments should follow rapidly when the scheme gets under way in 1940. In the meantime simple rural sanitation is being developed in those areas where Sanitary Inspectors are now stationed.

49.	Leprosy:—Number of cases under treatment	 167
	Number of cases at Bathurst, Home for	
	the Infirm	 7
	Number of cases at Fukinaf	 79
	Number of cases at Buruko	 81

2. General Measures of Sanitation.

- 50. The disposal of sewage at Malfa creek remains unsatisfactory. An experiment of treating the bucket contents in tanks, under the action of creek water, has proved satisfactory on a small scale. Plans are being drawn up in conjunction with the Public Works Department for further experiments for developing an economic method free from nuisance.
- 51. A new type of simple septic tank latrine was experimented with and results were good. This type is being adapted to the requirements of wharf towns and rural districts to replace the temporary types now in use as soon as they become irreparable. So far two of the new type have been constructed at Basse.
- 52. A Sanitary Night Service was initiated at Jawara and at Cape St. Mary. Total number of public latrines in use at Bathurst 22. Total number of pails removed by sanitary night service lorries 18,498.

Revenue from Sanitary Night Service = £612 19s. 9d.

Bathurst and Cape St. Mary = £576 9s. 9d.

Jawarra = £ 36 10s. 0d.

53. Scavenging:—The people are now co-operating well in removal of rubbish to the public bins.

There are 26 public dust bins.

- 9,138 lorry loads of refuse were carried to disposal area.
- 54. Refuse Disposal:—A new incinerator and drying shed is in course of construction. Reclamation of the low lying ground at Malfa creek with the burnt refuse is proceeding satisfactorily.
- 55. Water Supply:—Continues very satisfactory. It is hoped to arrange for periodic bacterial tests with the Sir Alfred Jones Laboratory in Freetown. The new main pipes have been laid.
- 56. Drainage in Bathurst:—This remains an important and difficult problem. It is unfortunate that the promulgation of a complete reclamation scheme should have prevented repairs to the present drainage system. The present drains have sunk in many places and badly need regrading. The brick work in some of the worst parts has been repointed or re-surfaced by the Public Works Department but constant inspection, sweeping and oiling are necessary throughout the system to control mosquito breeding.
- 57. Shallow earth drains were dug where necessary, and were an improvement on the previous drains which had been filled in last year.
- 58. The Rainfall was about average, namely 46.93 inches for the year. The pump at Box Bar worked extremely well and even 3½" rain in three hours before mid-day coincident with a very high spring tide which flooded the Box Bar basin, was cleared by the late evening. The Half Die area remains unsatisfactory. Sinking and washing out of compounds has occurred which makes adequate drainage slow, and although the pumps were effective in clearing Half Die basin, drainage to the basin was slow and ineffective in many areas. During the rains this area is not healthy for human habitation.

59. Clearance of Bush, Grass, etc.:—The town of Bathurst was cleared of grass etc., during the rains as usual. Experiments with a

motor scythe were encouraging.

House to house inspection :-

Number of houses inspected	 ***	 3,912
Number of cases of larvæ found	 	 33
Larval index for the year	 	 0.843

Court proceeding :-

	No. of Cases	Fines	
Larval offences	33	£ s.	d. 0
Nuisances and other offences Nuisance abatement notices served	105 295	16 13	0

Disinfection and Fumigation:—Seventeen houses were disinfected after notification of Pulmonary Tuberculosis.

(3) School Hygiene.

- 61. Close co-operation existed during the year between the members of the Education and Medical Departments on the subject of the hygiene of schools, and every effort was made to make teachers and pupils hygiene minded. The schools, Scouts and similar organisations took prominent parts in Health Week, and every school was represented in one way or other, whilst the Scouts in addition to giving a demonstration also kindly acted as ushers and door keepers at the various meetings.
- 62. A cinema display of Health films kindly lent by the Director of Medical Services, Nigeria, was arranged for school children and received a most enthusiastic showing from an audience of about 1,000.
- 63. The school children are inspected yearly and recommendations made as to treatment or correction of faults. A follow up however was not possible. A new system of card index registration has been introduced with the co-operation of the Director of Education, and it should now be a simple matter to follow any pupil from Kindergarten till the end of his scholastic career. Special cards were designed for this purpose.
- 64. More emphasis is being laid on Physical Training in school curricula but the standard of instruction and supervision is still very poor. It is expected that some improvement will be registered when teachers at present in training at the Teacher Training School join school staffs since an up-to-date course in physical training is now included in the Training School syllabus. Though financial considerations now preclude it, it would probably be most beneficial if a boy who is good at the actual physical movements and at the same time possessed of good intelligence might be selected for special training in England and then appointed as Inspector of Physical Training or as joint instructor to all schools. At the same time there appears to be little appreciation of the benefits to be derived from fresh air and sunlight, and cases have even been seen of boys wearing coats in addition to shirts whilst playing in organised games under the supervision of teachers. The teachers who Many of the allow such can have little knowledge of personal hygiene. children are also encouraged to wear sun helmets thus lessening the resistance which they have inherited and probably condemning them to this unwieldy type of headwear for the rest of their lives.

FIGURES OF SCHOOLS INSPECTION.

Number on Registers ...1,789

Inspected ... 1,383

				10					
Glands.	. 88.60 13.80 13.00	219						15-83	
Scabies.	11123	20						7	
Tonsils.	82228	132						15-6	
Eyes.	1-16070	6						0.65	
Skin.	104 14	38						2.74	
Ulcers.	1000	16						1-15	
Keratitis.	1-11-	C.S.					Keratitis.	0-14	
Anæmia.	42 33 44	273				cted 77:30	Anæmia.	19-74	
Teeth.	25.5 49 49 49 49	162				Percentage inspected	Teeth.	11-71	
Ring worm.	11131-	19				Perce	Ringworm.	1.37	
Spleen.	111111111111111111111111111111111111111	235	ž	Inspected	234 212 353 424 160	1,383	Spleen.	16-99	
Un-Vac.	32 61 66 18	234	2000	Register	271 257 573 235	1,789	Un-Vac.	16-92	
Name of School.	St. Augustine's St. Joseph's Convent St. Mary's Dobson and Stanley Mohammedan	Total			St. Augustine's St. Joseph's Convent St. Mary's Dobson and Stanley Mohammedan	Total		Percentage of number inspected.	

IV. LABOUR CONDITIONS.

- 65. During progress of housing survey, questions were put regarding child labour. No evidence was obtained of children being employed other than in giving normal assistance to their family. Unemployment in Bathurst, due to financial conditions in the Colony, has re-acted unfavourably on housing conditions. It is hard to press the people to make necessary repairs when money for material is not available.
- 66. The dependence of the Gambia on the groundnut crop emphasizes the seasonal fluctuation of employment, and the small increase, in the wet season, of public work in the Sanitary and Public Works Departments, does only a little to assist employment in the rains. It is particularly unfortunate that the period of unemployment coincides with the unhealthy season and with the season when food prices are at their highest; with the result that malaria, malnutrition and unemployment combine to reinforce each other's bad effects on the peoples' well-being.
- 67. Bathurst would be a happier place if part of its population could be transferred to more rural conditions. Possibly the development of the Kombo as an air-port may encourage such a migration and plans were drawn up envisaging this possibility with a view to ensuring that any such developments should proceed on planned lines, so as to avoid any development of further slum conditions which would bring untold trouble in its wake. These plans of developing model villages are under consideration.

V. Housing and Town Planning.

68. A complete housing survey in Bathurst was commenced and should be completed early in 1939. A set of Building Regulations to control buildings and lay-outs of important towns in the Protectorate was drawn up. These are still under consideration. It is hoped that when these are approved they will lead to great improvement in the wharf towns in the Protectorate.

VI. FOOD IN RELATION TO HEALTH AND DISEASE.

- 69. The Medical Officer of Health has been specially charged to interest himself in problems of human nutrition.
- 70. A committee, appointed by the Senior Medical Officer, reported on Hospital diets and drew up a recommended scale.
- 71. A particularly encouraging feature in the Gambia is the interest developing in market gardening. This year showed a considerable increase in market garden produce coming to Bathurst. The Horticultural show held in Bathurst by the Horticultural Society has performed excellent work and has stimulated the development of market produce of a high quality. Also in the Protectorate vegetables are being grown for local consumption on an increasing scale. The average quality also is high.

 Revenue :—Bathurst Market
 ...
 ...
 £996
 0s. 10d.

 Animals slaughtered
 ...
 ...
 ...
 3,265.

72. An interruption in the cattle trade from Senegal caused a temporary reduction in animals slaughtered. This was partly compensated for by increased supply of local cattle from the Kombo.

- 73. The excellent work carried on by the Veterinary Department in immunising cattle to rinderpest should encourage the local trade. Improved methods for transport of cattle from Barra to avoid the present cruelty involved are under consideration.
- 74. The Slaughter House functioned satisfactorily. The cold store chamber at the market has amply justified the foresight of those who installed it. It has proved invaluable and is deservedly popular. The quality of the meat has been good. No objections have been raised by any section of the community to the cold storage of meat and only the price has prevented a greater increase in the quantity of meat sold.

It is hoped to improve the standard of butchering and quartering during the next year, but the process of altering hereditary methods is always a slow one.

- 75. Assistance was given to the Commissioners in drawing up plans for the laying out of new markets in the Protectorate. The natives in the Gambia are not market minded; but the new improved lay-outs are beginning to attract the people.
 - 76. Proofed meat safes were installed at Bakau and Bwiam.

B. MEASURES TAKEN TO SPREAD KNOWLEDGE OF HYGIENE AND SANITATION.

- 77. A skeleton compound was erected for the purpose of demonstrations. Before the rains demonstrations of the dangers of mosquitoes were given daily for ten days. Lectures were given in the vernacular. Over 800 persons attended the demonstrations, including school children, garden boys, servants and many representatives from the different wards. The ward heads proved very helpful in advertising these demonstrations.
- 78. A similar demonstration on the danger of flies was given daily throughout Health Week. Health Week was this year for the first time organised by the Medical Department. It is gratifying that all the Missions, schools, Boy Scouts and other voluntary organisations gave a very full measure of co-operation. One of the most popular features was a cinema display of Health films which were kindly lent by the Director of Medical Services, Nigeria, for the occasion. A local film, showing the work of the Sanitary Department and incorporating a moral story contrasting two compound owners, was completed by the end of the year, but not in time for display during Health Week. On its one showing this year it met with considerable success and it is hoped that this aid to propaganda will be further developed in the future.

C. TRAINING OF SANITARY PERSONNEL.

- 79. A course of lectures and practical demonstrations were given to Sanitary staff. This included a course of lectures kindly given by the Technical Office Assistant, Public Works Department, on plans and building regulations.
- 80. A start was made in training selected youths in the antimosquito squad with a view to their promotion as Sanitary Assistants for the proposed Sanitary developments in the Protectorate. It is hoped that a sufficient number will have been selected and trained so as to start an efficient Rural Sanitary squad in 1940. One girl was selected to be trained as a visitor, who it is hoped will get into closer touch with the women who do so much of the work in the compounds, and so to improve the living conditions of the people in Bathurst.

D. RECOMMENDATIONS FOR FUTURE WORK.

- 81. In view of the probable development of an air-port at Cape St. Mary, sanitary control of this area will have to be strengthened, Development of model villages is essential to avoid formation of slum conditions. A careful survey and lay-out must be prepared of this area.
- 82. A medical survey in certain areas of the Protectorate is to take place next year, paying special attention to the incidence of leprosy, trypanosomiasis, yaws, and schistosomiasis.
- 83. Continuation and intensification of propaganda on the same lines as were developed this year.
- 84. Continuation of experiments directed to improve sewage disposal in Bathurst.
- 85. Development of local markets will continue with provision of slaughter slabs, fly proofed meat cages and clean stalls for sale of foodstuffs.
- 86. It is hoped to extend rural sanitation with provision of incinerators and simple septic tank latrines to fresh areas, such as Essau, Kinta Kunda, Sukuta, Jessadi, Kudang and Fatoto.
- 87. Barra which is of great importance as one of the main routes to Bathurst must be brought under permanent sanitary control by stationing there a Sanitary Inspector.

IV. PORT HEALTH WORK AND ADMINISTRATION.

- 88. 213 ships were boarded during the year. All deck passengers were examined.
- 89. 150 aeroplanes or seaplanes landed. All had clean bills of health. All planes were sprayed on arrival and before departure with Pyrethrum extract.
 - 90. There were no quarantine periods.

L. H. THOMAS, Medical Officer of Health.

V. MATERNITY AND CHILD WELFARE.

91. The people appear to have a growing interest in this work and most numbers have increased.

The numbers are:—Bathurst, combined Leman Street and New street attendances:—

Year.	Weighing Clinic.	General Clinic.	Ante-Natal Clinic.	Live Births.	Still Births.	No. on Waiting List at end of year.
1937	4,157	4,526	1,313	126	15	60
1938	4,293	4,078	1,580	172	24	54

Total number of patients admitted to Ward ... 176. Cases admitted for Confinement and Puerperium ... 125.

92. The other fifty-one patients were Ante-Natal, Post-Natal, or Gynæcological patients.

There have been five maternal deaths. Three from Puerperal Sepsis. None of these patients was a Clinic patient but all were delivered by African midwives. One patient died from heart failure, the remaining one from dysentery (Ante-Natal patient).

- 93. There have been no cases of eclampsia.
- 94. Number of babies on Clinic Registers = 433.

The number of babies under one year old who have died while under Clinic supervision is twenty-one as far as can be traced. (Five babies over one year).

There have been no cases of tetanus.

- 95. We treated one case of Opthalmia Neonatorum which recovered. It was an African midwife's case.
- 96. Eleven minor operations have been performed by the doctor in charge of Clinics during the year.
 - 97. Baby Day was held in Health Week and was very successful.
 - 98. The standard of nursing shows gradual improvement.
 - 99. One Nurse sat and passed her efficiency bar examination.
- 100. Six Nurses sat the pupil midwives examination—four passed and two failed.
- 101. One Nurse on permanent staff resigned and a Pupil Nurse was appointed in her place.
 - 102. Three Pupil Nurses left. Their period of training completed.
 - 103. Four new Nurses are on trial.

Receipts for the year = £132 16s. 1d.

SUKUTA CLINIC.

104. The people show a continued interest and walk many miles to seek advice.

Numbers for the year are :-

Year.	Weighing Clinic.	General Clinic	Ante-Natal Clinic.	Number of Births.	No. on Waiting List at the end of year.
1937	1,713	2,374	53	5	2
1938	2,635	3,312	32	11	4

Number of babies on register 498.

CLINIC AT CAPE ST. MARY.

105. Work at Cape St. Mary was started in November and seems to be fulfilling a great need.

The work is carried on in the Government Dispensary.

The youngest daughter of the Commissioner is one of the children on the roll.

Numbers for November and December, 1938:-

32 Ante-natal patients = Total attendances ... 47.

90 Babies on Register = Total attendances ... 208.

VI. HOSPITALS AND DISPENSARIES.

- A. HOSPITALS AND HOSPITAL STATISTICS.
- 106. Bansang Hospital was completed and opened.
- 107. A bush type waiting room and dressing rooms were added to the Bwiam Hospital.
- 108. The following table shows the Hospitals which have been maintained and the facilities which exist:—

HOSPITAL STATISTICS

	Total cases treated.		193		809'08		3,983		7,484	32,268
NTS.		Total.	143		19,368		3,632		7,280	30,422
OUT-PATIENTS.	Cases Treated	Female.	15		929'9		1,492		3,523	11,702
	Cases	Male.	E		12,712		2,140		3,757	18,720
	Remaining	at end of 1938.	1		38		. 59	7	6	92
NTS.	Total	Total.	15		1,240		351		204	1,846
IN-PATIENTS.	Admissions	Female.	10		292	n'n	25		75	444
	Adm	Male.	95		816		279		129	1,402
	Remaining at and of	1937.	1		#6		56		10	11
Number of		Cots.	1		က		4		1	1
Numi		Beds.	6		22		04		11	116
	Name.		EUROPEAN HOSPITAL BATHURST	VICTORIA HOSPITAL	BATHURST	PROTECTORATE HOSPITAL	BANSANG (including figures for Georgetown).	PROTECTORATE HOSPITAL	ВWІАМ	Total

B. DISPENSARIES.

109. There are six Dispensaries, Kaiaff, Georgetown, Basse, Kau-ur, Kerewan and Cape St. Mary.

The following table indicates the main diseases treated during 1938:—

				627
Tuberculosis				9
Gonorrhœa				879
Syphilis				39
				526
				9
				5
				286
	***		***	67
_				
Goitre	***			29
Rheumatism			1	,453
				193
				100
Epilepsy				1
Neuralgia				65
				410
				163
222		1000	-	-
	**		***	41
				58
Hæmorrhoids				21
m:-				
				047
				847
				13
				20
		***		57
Coryza				2
				05
	Donto	1 Camir		35
	Denta	Carie	98	255
				486
				934
Diarrhœa		***		184
	hœa			68
	- 44			508
Jaundice				2
Herniae				18
				465
Taenia				19
ystem :				
governo.				
				0
Nephritis				8
Nephritis Orchitis				44
Nephritis Orchitis Hydrocele				44 20
Nephritis Orchitis Hydrocele Stricture				44 20 29
Nephritis Orchitis Hydrocele Stricture Cystitis				44 20 29 50
Nephritis Orchitis Hydrocele Stricture				44 20 29
	Tuberculosis Gonorrhœa Syphilis Malaria Influenza Whooping Cou Trypanosomias Leprosy Goitre Rheumatism Anæmia Epilepsy Neuralgia Conjunctivitis Otitis M:— Heart Disease Adenitis Hæmorrhoids m:— Bronchitis Asthma Pneumonia Pleurisy Coryza Tonsillitis Stomatitis and Gastritis Constipation Diarrhœa Infantile Diarr Colitis Jaundice Herniae es:— Ascaris Taenia	Tuberculosis Gonorrhœa Syphilis Malaria Influenza Whooping Cough Trypanosomiasis Leprosy Goitre Rheumatism Anæmia Neuralgia Conjunctivitis Otitis Mi :— Heart Disease Adenitis Hæmorrhoids Hæmorrhoids Tonsillitis Pneumonia Pleurisy Coryza Tonsillitis Constipation Diarrhæa Infantile Diarrhæa Colitis Jaundice Jaundice Herniae es:— Ascaris Taenia Taenia	Tuberculosis Gonorrhœa Syphilis Malaria Influenza Whooping Cough Trypanosomiasis Leprosy Goitre Rheumatism Anæmia Conjunctivitis Otitis M:— Heart Disease Adenitis Hæmorrhoids M:— Bronchitis Asthma Pneumonia Pleurisy Coryza Tonsillitis Stomatitis and Dental Carie Gastritis Constipation Diarrhœa Infantile Diarrhœa Colitis Jaundice Herniae Es:— Ascaris Taenia Taenia	Yaws Tuberculosis Gonorrhœa Syphilis Malaria Influenza Whooping Cough Trypanosomiasis Leprosy Goitre Rheumatism Anæmia Conjunctivitis Otitis m:— Heart Disease Adenitis Hæmorrhoids m:— Bronchitis Asthma Pneumonia Pleurisy Coryza Tonsillitis Stomatitis and Dental Caries Gastritis Constipation Diarrhœa Infantile Diarrhœa Colitis Jaundice Herniae Fes:— Ascaris Taenia Taenia

Puer	peral	State	

z we. per at Blate.					
	Normal Labour				1
	Abortion				13
Skin and Cellular	Tissues :-				
	Ulcers				289
	Tinea		***	***	92
	Scabies	***			190
	Elephantiasis	***	***	•••	5
	Whitlow				68
	Cellulitis		***	***	100
	Furunculosis				
	rurunculosis				37
Diseases of Infanc	cy:—				
	Marasmus				1
Bones and Joints	:				
	4-11-11				
					177
	Sprain	***	***		44
	Fracture			***	7
Due to External Co	auses:-				
	Burns				35
	*				233
	Injuries				200
Ill-Defined Causes	:-				
	Ascites				20
	_				
C.	DENTAL REPORT				

110. Mr. Uel M. John, Dentist in Freetown, Sierra Leone, attends in Bathurst for three months each year. During 1938 work was carried out as follows:—

Government C	officials	inspe	cted	***			111
School Childre	en insp	ected		***			1,620
			7	OTAL			1,731
							-
Fillings							395
Root Fillings							12
Dressings							150
Extractions		***	***		***		135
Repairs to De	ntures					***	5
Pyorrhoea							5
Scalings							75

D. SURGICAL OPERATIONS, 1938.

111. The following is a summary of the operations performed in Government Institutions during the year under review:—

MAJOR OPERATIONS.

	Operation.		SIL	139	Number performed.	Deaths.
١.	TUMOURS AND CYSTS.					
	Excision, benign tumours and				13	_
	Excision, malignant tumour	8			3	-
	Amputation of breast for ma	ngnant t	umours			-
	Exploratory laparatomy for Other operations for malignar				3	=
3.	DISEASES OF DUCTLESS GLANDS					
	Thyroidectomy				-	-
	Splenectomy	***		***	1	-
	Other operations	***			_	-
	DISEASES OF ORGANS OF VISION					
	For entropium or ectropium	*			1	-
	For Cataract:—(a) Needling					-
	(b) Extraction				-	
	Enucleation of globe				-	
	Other operations	***			-	-
).	DISEASES OF THE AUDITORY SYS	STEM.				
	Mastoid operations				_	_
	Other operations	***			1	-
ū.	DISEASES OF CIRCULATORY SYST	EM.				
	For aneurysm				_	
	For hæmorrhoids				-	_
	For varicose veins				-	-
	For variocele For gangrene				-	-
	Other operations				_	
	DISEASES OF LYMPHATIC SYSTEM					
		•				
	Excision of glands Curettage or drainage		***		1	1000
	For elephantiasis:—	***	***	***		
	(a) Amputation of scrotu				23	44
	(b) Amputation of other					-
	(c) Kondoleon or similar	operatio	ns		-	-
ł.	DISEASES OF NASAL PASSAGE.			-		
	Turbinectomy					The same of
	Removal of polyp				2	0000
	Antrotomy				_	1
	Other operations	***			-	-
I.	DISEASES OF ORGANS OF RESPIE	RATION.		1		
	Trachectomy				_	100
	For empyema				-	-
				-		
		forward				

MAJOR OPERATIONS—continued.

	Operation.			Number performed.	Deaths.
	Brought forw	ard	***	47	-
	DISEASES OF DIGESTIVE TRACT.			Part Branch	
	Curettage for adenoids				
	Tonsilectomy			-	
	For gastric or duodenal ulcer:-				
	(a) Suture for perforation		***	_	-
	(b) Gastro-enterostomy (c) Partial gastractomy		***	- 0	-
	Appendicectomy			ĩ	
	Appendix abscess, drainage				
	Caecostomy			-	_
	Enterostomy or colostomy		* ***	_	-
	Enterectomy				-
	Radical cure of hernia		***	144	_
	For strangulated hernia For fistular in ano			7	
	For ischio-rectal abscess			î	_
	Exploratory laparatomy				_
	Other operations		***	-	_
100	DISEASES OF LIVER AND BILLIARY PAS	SSAGES.			
	For abscess of liver:—				
	(a) Aspiration				-
	(b) Drainage			_	
	Cholecystotomy or cholecystostomy				_
	Other operations				
	DISEASES OF MALE GENITO-URINARY	System.			
	For vesical or urethral calculus				_
	Cystostomy			3	_
	Prostatectomy Dilatation of stricture of urethra			16	_
	Urethrotomy			-	
	Circumcision			47	-
	Orchidectomy			5	-
	For undescended testis		***		-
	Radical cure of hydrocele			37	-
	Other operations		***	-	_
	DISEASES OF FEMALE GENITO-URINARY	Y SYSTEM		MAN WAY	
	Hysterectomy			2	
	Enucleation of uterine fibroids			-	-
	Hysteropexy			-	-
	Curettage for endometritis			4	_
	For recto-vesical or recto-vaginal fis			3	
	Perineorranhy		***		
	Perineorraphy Other operations				
	Other operations			E5. (00. (777)	
	Other operations Obstetrical Operations.			E. 9 . T.	
	Other operations Obstetrical Operations. For abortion			医学工	-
	Other operations Obstetrical Operations. For abortion For ectopic gestation			E. P - I	=
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction			E 7 - I	Ξ
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version				=
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version				
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version Craniotomy				
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version Craniotomy Caesarian section				
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version Craniotomy Caesarian section For retained placenta				
	Other operations Obstetrical Operations. For abortion For ectopic gestation Forceps extraction Podalic version Craniotomy Caesarian section For retained placenta				

MAJOR OPERATIONS-continued.

	Operation	1.				Number performed.	Deaths.
	Bro	ught f	forward			321	
٧.	Affection of Skin and Sui	BCUTA	NEOUS T	ISSUE	s.		
	Carbuncle For ulcer:—					1	-
	(a) Curettage					2	
	(b) Excision					2	_
	(c) Skin grafting (d) Amputation	***	•••		***	2 2 1 8	
			***			0	
	DISEASES OF BONES AND JOIN	NTS.					
	Sequestrectomy			***		5	-
	Osteotomy					-	_
	Excision of joints						The state of the s
	Amputation					_	
	Other operations					5	-
	DISEASES OF OTHER ORGAN	S OF	Locomo	TION.	33		
	For suppurative teno-sync						1-10-11
	For ganglion					3	_
	For deep muscular abscess					5	-
	Other operations			***		11	-
	CONGENITAL MALFORMATION.				111		
						_	1
			***			-	-
	***	***			***	-	-
	***	***	***	***	***		1
	Injuries.						
	Suture and repairs of exte	ensive	wounds			8	_
	Amputation					_	_
	Plating of fractures Extractions of foreign boo	lion				_	-
	Trephining	iies				9	
	Nerve or tendon suture					_	
	Other operations					-	-
	OPERATIONS NOT CLASSIFIED	ABOVE	8.				
	Reduction of dislocations		200		-	1	
	Setting of fractures					19	
	GROSS TOTAL M.	AJOR (OPERATIO	ONS		401	-
							and the same of the same of
	MINOR OPERA	ATIO	NS.				
	Operation.					Number performed.	Deaths.
		· Constitution of the cons		7,1	-	portormed.	
	Incision of abscess or whi	tlow				71	_
	Removal of superficial tur Extractions of teeth					-	_
	Repair to minor injuries					79	-
	Other minor operations					6	
				77.61			
	TOTAL MINOR (Dern	TIONS			200	The same

VII. PRISONS AND ASYLUMS.

112. The following figures show the general health and death rate of prisoners during the year.

Average daily number				 71.3
Total number on sick list Average daily number on sick	list	***	***	 189.0
Total number of deaths				 6.00
Death rate per thousand				 31.74

The causes of deaths were :-

Trypanosomiasis	 	 	 2
Pneumonia	 	 	 3
Chronic Dysentery	 	 	 1

LUNACY.

113. Certified lunatics are sent to Kissy Asylum in Freetown, Sierra Leone.

Three lunatics were certified and sent there during the year.

Lunatics under observation are detained in Bathurst Prison. One died of trypanosomiasis whilst under observation.

An Observation Home for lunatics is to be constructed in 1939.

VIII. METEOROLOGY.

114. There is now a Meteorological Officer in the Colony so this section will be discontinued next year.

The meteorological returns taken at Bathurst for the year are :-

					Bathurst.
1.	Highest shade	Maximum	 		 98° in March and November.
2.	Lowest		 		 88° ,, April.
3.	Highest shade	Minimum	 		 68° ,, June and October.
4.	Lowest		 		 40° " February.
5.	Greatest Range			***	 34° ., February and March.
6.	Lowest				 16° ,, August.
7.	Total Rainfall		 		 39.37 inches.
8.	Most Rain fell				 13.89
9.	Highest degree				 80% in August.
0.	Lowest	" "	 		 45% " January.

IX. RECOMMENDATIONS FOR FUTURE WORK AND REPORT ON ACTION TAKEN ON RECOMMENDATIONS MADE IN 1937.

115. A. Bathurst—The main recommendations for Bathurst are new African and European Hospitals. Preventive medicine is more important than curative but there is no real approach to good sanitation and hygiene except through

propaganda and the main element of this is successful individual treatment when necessary. Belief in our sanitation follows faith in our system of medicine, and this cannot be really efficient in inadequate insanitary buildings.

116.

The need for a new European Hospital will become urgent should Bathurst become the great air port which it apparently is becoming. An unfortunate accident to a German plane resulted in twelve deaths. Had all these people fortunately only been injured our European Hospital could not have contained them.

- 117. B. Protectorate—The need of the Protectorate is better sanitation. To this end a scheme of propaganda demonstration and supervision has been devised and has received the approval of Government. Much of the preliminary work has been done, and it is hoped that it will be possible to start work on it in 1940. In 1939 most of the work will be confined to consolidation of what sanitation there is, and the furtherance of the preparations for this scheme.
- 118. It is recommended that Building Regulations for the Protectorate be promulgated. The draft Regulations have already been prepared but have not yet received sanction.
- Particular recommendations will be found at the end of Section III, HYGIENE AND SANITATION.
- A. Bathurst—No special recommendations were made in 1937.
- 121. B. Protectorate—(a) Health Propaganda—More Sanitary
 Inspectors were posted in the Protectorate. A scheme for the improvement of sanitation in the Protectorate was devised (see above) and much preliminary work has been carried out.
 - (b) Trypanosomiasis—It was not found possible to detail a Medical Officer for special work in connection with this during 1938. One is being sent out on special duty in 1939.
 - (c) Yaws-As for trypanosomiasis.
 - (d) Training of Staff—More attention was paid to the training of staff both on the Medical and Health sides, and the training was made less irregular than previously.

123.

122.

124.

C. WILSON, Senior Medical Officer.

RETURNS.

TABLE I.

AUTHORISED ESTABLISHMENT OF THE DEPARTMENT.

(a) European Staff. Senior Medical Officer.

MEDICAL SERVICE.

Four Medical Officers. One Senior Nursing Sister. Two Nursing Sisters.

HEALTH SERVICE.

Medical Officer of Health. Senior Sanitary Superintendent. Sanitary Superintendent.

(b) AFRICAN STAFF.

MEDICAL SERVICE.

Two Medical Officers. One Chief Dispenser and Storekeeper. Two Second Grade Dispensers. Ten 3rd Grade Dispensers. One Second Grade Dresser. Eleven 3rd Grade Dressers. Fourteen 3rd Grade Dresser-Dispensers. Two Medical Probationers. One Hospital Warden. Six 3rd Grade Nurses. Two Probationer Nurses. Four Cooks. Two Assistant Cooks. Eighteen Hospital Orderlies. One Attendant, Home for Infirm. One Female Attendant, Home for Infirm. One Motor Driver. One Engine Driver and Electrician.

* MATERNITY AND CHILD WELFARE.

Five 3rd Grade Nurses. Six Pupil Nurses. Five Labourers.

CLERICAL STAFF.

One Chief Clerk. Two 3rd Grade Clerks. One Messenger.

HEALTH SERVICE.

Eighteen 3rd Grade Sanitary Inspectors. Two 3rd Grade Vaccinators. One Market Clerk. One Assistant Market Clerk. One Keeper of Cemetry. One Attendant, Infectious Diseases Hospital. Six Motor Drivers. One 3rd Grade Storekeeper.

CLERICAL STAFF.

Two 3rd Grade Clerks. One Messenger.

TABLE II.

FINANCIAL.

See page 4.

TABLE III.

RETURN OF STATISTICS OF POPULATION FOR THE YEAR.

	Europeans and Whites,	Africans.	
,, births during the year 1938 ,, deaths ,, 1938 ,, immigrants ,, 1938 ,, emigrants ,, 1938 ,, inhabitants in 1938		14,069 429 363 — 14,163 94	Bathurst.

^{*}This includes 12 deaths which occurred as a result of an aeroplane accident.

TABLE IV. METEOROLOGICAL RETURNS FOR THE YEAR 1938.

			Темреі	RATURE.			RAIN	PALL,	Wi	NDS.	
	Solar Maxi- mum.	Mini- mum on Grass.	Shade Maxi- mum.	Shade Mini- mum.	Range.	Mean.	Amount in Inches.	Degree of Hu- midity.	General Direc- tion.	Average Force.	Remarks
anuary	_	-	89	57	21	70.7		40%	Var.	_	
ebruary	_	_	97	58	32	72.7	-	55%	**	-	
March	-	-	101	61	- 35	77.2	-	53%	N	-	
April	-	-	103	54	35	78.7	-	59%	N		
day	-	-	101	55	46	79-6	-0:40	60%	Var.	-	
une	-	-	97	70	25	70:4	30:0	64%	NW	-	
uly	-		94	68	19	80.4	10.92	68%	Var.		
August			92	60	20	79.6	16.32	68%	**		
September	-	-	92	67	23	80.5	13.53	76%	**	-	
etober	-	-	93	69	17	81.1	5.66	72%	**	1	
November	_	-	94	66	24	80.6	0.02	54%	**	- 1	
December	-	-	91	58	27	75.2	-	49%	**	-	
			-				46-93	_		-	

TABLE V.

RETURN OF DISEASES AND DEATHS FOR THE YEAR 1938.

		IN-PA	TIENTS.			OUT-PATIENTS.				
Pi		ng spings of		TOTAL.		TD-1-1	25.27			
Diseases.		spirit nd 237.	Admis	sions.		Total	spiti odo 38.	Male.	Female.	
		Remaining in Hospitals at end of 1957.			Deaths.	treated.	Remaining in Hospitals at end of 1938.	22000	T cinate.	
I.—Infectious and Parasition Diseases.	c									
1a. Typhoid fever										
2a. Paratyphoid A	***			***	***			***	***	
2b. Paratyphoid B	ot defined		***	1		1				
2c. Enteric fever, type n 3. Typhus fever	iot denned			5	4	5		1	***	
4. Relapsing fever		***	***				***	***	***	
5. Undulant fever		***	***	***	27.5	***	***	***	***	
Smallpox—										
6α. Variola major	***		***	***	***			***	***	
6b. Variola minor			***	***				7	4	
7. Measles 8. Scarlet fever										
9. Whooping cough			***					4	2	
10. Diphtheria			***	29	***	29	***	184	99	
11. Influenza	***						***	104	***	
12. Cholera 13a. Amœbia dysentery	***	1		8		9		36	11	
13b. Bacillary dysentery				17	1	17		43	16	
13c. Dysentery-type un	specified			1	1	1		5	2	
14a Bubonic plague										
14b. Pneumonic plague 14c. Septicæmic plague	***									
15. Erysipelas				4	1	4		4		
16. Acute poliomyelitis			***	1	1	1		***		
17. Encephalitis letharg					***					
18. Cerebro-spinal fever 19. Glanders				***						
20. Anthrax				***	***					
21. Rabies			***	18	9	18	ï	8	2	
22. Tetanus		***	***	10		4.0			~	
Tuberculosis of—				10	10	99		62	35	
23. Respiratory system 24. Central nervous sys	tem	3		19				0.2		
25. Intestines and perito				4	3	4		1		
26. Vertebral column										
27. Other bones and joi		1		5	2	6		2	2	
28. Skin and subcutane 29. Lymphatic system	ous tissues			1	1	1		1		
30. Genito-urinary system								1		
31. Other organs		***				***				
32. Disseminated tuberd			***	5		5		119	50	
33. Leprosy 34a. Primary syphilis				8		8		172	43	
34b. Secondary syphilis		***		3		3		22	7	
34c. Tertiary syphilis				7	2	7		17	14	-
34d. Congenital syphilis 35a. Gonorrhea				26	2	26		419	98	
35b. Generrhea with cor				***				***	***	
35c. Gonorchœal arthritis	8			5		5	1	99	25	
35d. Gonorrheal ophthal			***	1		1		26	1	
35f. Soft chancre 35g. Venereal Bubo										
35. Other venereal disea										-
36a. Septicæmia				***						
36b. Pyæmia			***		***					
36c. Gas gangrene		***								
Carried forwa	ard	5		169	39	174	2	1,235	411	

Table V.—Return of Diseases and Deaths for the Year 1938—continued.

					IN-PA	TIENTS.			OU	T-PATIE	NTS.
	Discours		rals of		TOTAL.		mili	20 m 30 m			1
	Diseases.		spirition of the control of the cont	Admis	ssions.		Total	spit 38.	Male.	P1-	
			Remaining in Hospitals at end of 1937.			Deaths.	treated.	Remaining in Hospitals at end of 1938.	Maie.	Fem ale.	-
-	Brought forward		5		169	39	174	2	1,235	411	
T Inc	ections and Parasitic										
1.—Inje	Diseases—contd.										
	Yellow fever		***	***	ï	***	ï			***	
	Fertian malaria Quartan malaria								2	***	
	Subtertian malaria		1		118	1	119		388	243	
	Malaria—type unspecified				2	1	2	***	282	86	
	Blackwater fever		***	***	***	***	***				
	Leishmaniasis		***	***	***	***	***				100
396.	Spirochætosis icterohæme	TT-			1		1		1 3		
20- 5	hagica	***	12		125	49	137	4	789	717	
	Frypanosomiasis Yaws	***	1		13	1	14		571	717 601	
	Other protozoal diseases								314	March Street	
	Ankylostomiasis				12		12	1	41	25	
	Hydatid cysts				***		***				
42a.	Ascariasis		1	***	11	1	12		427	415	
	Dracontiasis		***	***	2 3	***	2		***	***	
	Filariasis	***		***		***	3	1	59	36	
	Filariasis Onchocerciasis	***		***					1		
	Onchocerciasis Schistosomiasis				3		3		39	9	
	Tæniasis (Tape worm)				5		5		41	18	
	Other helminthiasis				***		***		2		
43a.	Actinomycosis					***	***				
436.	Other mycosis (madura-fo	oot)									
	etc	***	****		***						
	Sequelæ of vaccination German measles							***	5	5	
	Chicken-pox										
	Mumps			***							
	Dengue										
441.	Glandular fever		***	***	***	***		***			
44g.	Other infectious and parasi	tie					1 30			P. Commission	
	diseases										
II.—Ca	uncer and other Tumours.										
(Cancer of—				1					1 3	
45.	Buccal cavity and pharynx							1 24			
	Oesephagus										
	Stomach and duodenum				3	2	3				
	Rectum			***	1		1	***			
2 2 2	Liver Paragraph	***		***							
467.	Pancreas Other digestive organs	***	****	***							
47.	Respiratory organs			***	***	***					
48.	Uterus								***		
49	Other female genital organi				1		1				
50.	Breast							***	***		
51.	Male genito-urinary organs				***			***			
52. 53.	Other opens				5		5		10	15	
54a.	Other organs Dermoid cyst	***	1		1	1	2		3	1	
546.	Fibroid, uterine	***	***	***	1		1				
54c.	Lipoma				18	3	18	ï	14		
54d.	Other non-malignant tumo	urs					10			5	
55.	Tumours of undetermine	d		111111111111111111111111111111111111111		10000			***		
	nature										
	Carried forward		-	-			-		-		
	Carried forward	***	21		495	98	516	9	3,908	2,587	

Table V.—Return of Diseases and Deaths for the Year 1938.—continued.

			IN-PAT	TENTS.			OT	TDATE	Name
		1				-	OUT-PATIENTS.		
Diseases.	Remaining in Hospitals at end of 1937.		TOTA	L.	Total	Remaining in Hospitals at end of 1938.			
	pita	Adm	issions.		Cases Treated.	Cosp end	Male,	Female.	
	Ren Hos			Deaths.	Freated.	Ren in B			
Brought forward	21		495	98	516	9	3,908	2,587	
III.—Rheumatism, Diseases of Nutri- tion and of Endocrine Glands and other General Diseases.									
56. Rheumatic fever			***						
57a. Chronic rheumatism 57b. Rheumatoid arthritis, Osteo-	2	***	21	***	23	1	1,806	1,186	
arthritis etc									
58. Gout							***		
59. Diabetes mellitus			1		1				
60a. Scurvy	***	***	1	***	1	***		***	
60b. Hypovitaminosis A 61a. Beri-Beri			5	2			***		
61b. Epidemic dropsy					5		3	1	
62. Pellagra					***				
63. Rickets							2		
65. Diseases of the pituitary gland		***				***			
66a. Simple goitre 66b. Exophthalmic goitre		***	***			***	200		
66c. Other diseases of thyroid and	100	1	***	***	***	***	22	58	
parathyroids			***				10	7	
67. Diseases of the thymus									
68. Diseases of the adrenals	***			***					
69. Other general diseases		***	2	***	2	1			
IV.—Diseases of the Blood and Blood Forming Organs.									
70a. Purpura				***					
70b. Hæmophilia	***	***		***	***		***		
71a. Pernicious amemia 71b. Anæmia—other types	***	***	3	***				***	
71b. Anæmia—other types 72a. Leukæmia					3		91	85	
72b. Lymphadenoma		***							
73. Diseases of the spleen (splenomegaly, etc.)	***		2		2		21	9	
74. Other diseases of the blood and blood forming organs		.;.							
V.—Chronic Poisoning.					1				
75. Alcholism (acute or chronic) 76. Chronic Poisoning by other		***				***			
organic substances (cocaine, morphine, etc.)									
VI.—Diseases of the Nervous System and Sense Organs.									
78. Encephalitis, cerebral abscess, etc. (not including encephalitis									
79. Meningitis (not including tubercular or cerebro-spinal									
meningitis; see 18) 80. Tabes dorsalis (Locomotora-			2	1	2	***	***		
81. Other diseases of spinal cord (not including acute poliom-									
yelitis see 16) 82a Cerebral hæmorrhage,	1		1	1	2				
Apoplexy									
Carried forward	24		533	102	557	11	5,863	3,933	

Table V.—Return of Diseases and Deaths for the Year 1938.—continued.

		1		IN-PA	TIENTS.			OUT-PATIENTS.		
	Diseases.	Mark S		TOTAL	L.	Total	tals 1			
	Diseases.	Remaining in Hospitals at end of	Admi	ssions.		Cases	Remaining in Hospitals at end of 1938.	Male.	Female.	
		Rem in H			Deaths.	Treated.	Rem in H at			
	Brought forward	24		533	102	557	11	5,863	3,933	
VI.—1	Diseases of the Nervous syste nd Sense Organs—continued	m						.,,,,,,		
826.	0 1 1 1 1			***						
82c. 82d.	Cerebral thrombosis Hemiplegia and other paraly	sis		2	2	2				
	of unstated origin	2		8	2	10		11	5	100
83. 84a.	General paralysis of the insa Dimentia præcox			2		2		2		
846.	Depende									
84c.	The state of the s			8		8		2	2	
85. 86.	Epilepsy Infantile convulsions (und	er		2		2		6	2	
2.51	for many of and							2		120
87a.	Chorea							200		1
87b. 87c.	Discombant Laslamola			4		4		689	589	
87d.	A									
87e.				5	1	5	***		1	
87f. 87g.	Psychasthenia. Neurastheni Other diseases of the nervoi			8	***	8				
	environ. The			2		2		111	71	
88a.				111		10				1
88b. 88c.	Patronian Patronian	1		11		12	***	370	244	100
88d.	Dunance of naturation									100
88e.								22		
88f. 88g.	Voustitie			8		8	1	54	23	1
884.	Diamorina									
881.				1	***	1		10	6	1000
88j. 88k.	Ulcer of the cornea, Staphyl ma. Lukoma Other diseases of the eye ar						***			
	0200000			11		11		63	28	
89a.	Otitis			1		1		73	45	
89b. 89c.	Other discusses of the									
89d.	Was in san									
VII.—	Diseases of the Circulatory System.		-						1	
90.	Dariaswlitia			3		3				
91.	Acute endocarditis			2	2	2		9 -	ï	
92.	Chronic endocarditis. Valvu	lar		29	18	29	***		-	
93.	Myocardial degeneration.			1 100			***	2		
94.	Diseases of the conorary arteries. Angina pectoris			26	6	26		49	42	
0.5	Conorary thrombosis, etc.									
95a. 95b.	Disordered action of the heart Other diseases of the heart	irt				ï		***		
96.	Aneurysm			1			1	5	1	
97.	Arterio-Sclerosis			4		4.				
98.	Gangrene Other diseases of the arteries	2				2				
100a.	Hæmerrheids			2		2		35	10	
.600	Varix. Varicose veins. Varico	0-			***			00	10	
	Carried forward	29		67.3	133	702	13	7,356	5,003	7

Table V.—Return of Diseases and Deaths for the Year 1938—continued.

			IN-P.	ATIENT	S.	-	OUT	-PATIE	NTS
			Тотак						1
Dizeases.	ning dof	E		1	Total	pita of			
	Remaining in Hospitals at end of	S Admi	ssions.	Deaths.	cases treated.	Remaining in Hospitals at end of 1938.	Male.	Female.	
Brought forward	2	9	673	133	702	13	7,356	5,003	-
VII.—Diseases of the Circulatory System—continued.									1-3
100c, Phlebitis			1		1				
1302 Other Person of males			***						
			3	1	3			***	
101b. Adenitis and other diseases of the lymphatic system	9334		32		32		1 3		
102. Abnormalities of blood					100		0	***	
pressure, hyperpiesia, etc.			***						
			***	***	***	***			
103b. Other diseases of the circulating system			2	1	2				
VIII.—Diseases of the Respiratory System.	1								
			5		5		461	153	
104b. Other diseases of the nose			***						
104c. Diseases of the accessory nasal sinuses									
104d Nasal Dalumna									
104e. Gangosa			***						
			3		3		23	9	1 1150
105b. Other diseases of the Larynx 106a. Acute Bronchitis			44	- 1	44		2,561	1 100	
10ch Chennia Passabitie		33 13300	6	Î	6		977	1,120 749	
106c. Bronchiectasis			172	***					
			45 82	33	49	***	32	9	
110g Plansier			22	1	83 22	2	50 43	7	
110h Emprano		1999					10	16	
111a. Hypostatic congestion of									
lungs 111b. Embolism of lung			1	1	1		***		
119a Aathma			8		9	***	34	23	
119h Har fores				***				~0	
113. Pulmonary emphysema .					***			***	
114a. Gangrene or abscess of lung. 114b. Other diseases of the			***	***	***				
Desninstone Swaters			2	_1	2				
X.—Diseases of the Digestive System.									
115a. Dental Caries. Alveolar		3-1-	1		10,531				
115h Promison			4		4		340	108	
115c Stomatitie		13333	ï		ï	***	101	76	
115d. Tonsillitis. Pharyngitis Quins			14	2	14		106	56	
115e Adamoide					7				
cavity, Pharyx, etc.									
116. Diseases of the cesophagus .			1 0	***	1 0				
117h Illow of the duadenmen			2	"i	2	***			
118a Gasteitia			36		36		123	116	
118b. Dyspepsia			6	,	6		1,085	989	
118c. Other diseases of the Stomac	h			***					
110 Infantila diamban									
119. Infantile diarrhœa (under two years of age)			5	***	5		100	108	

Table V.—Return of Diseases and Deaths for the Year 1938—continued.

				IN-PA	TIENTS.			OUT-PATIENTS.		
		s s s		TOTAL.			20.5			
	Diseases.	Etto.	Admi	ssions.		Total	init.	12000	4	
		Hos en 193	Admi	88101181	Deaths.	treated.	Hos enc	Male.	Female.	
		Remaining in Hospitals at end of 1937.				ireateu.	Remaining in Hospitals at end of 1938.			
	Brought forward	35		999	187	1,034	15	13,401	8,542	
X,—D	iseases of the Digestive System—continued.								10000	
20a.	Sprue	***				***				
206.	Colitis	***		9		9		11	10	
	Gastro-enteritis		***	56	4	56		223	199	
	Diarrhœa Appendicitis			5		5		4	133	
	Appendicitis	9		176	4	185	9	250	54	
	Strangulated hernia									
	Intestinal obstruction			***		***				
	Constipation			28		28		1,240	1,493	
236.	Diverticultis	***		6		6				
	Fistula in ano		***					25	6	
	Ischio-Rectal abscess Other diseases of the intestines			4	2	4		3	ï	
	Cirrhosis of the liver			4	3	4		1		
25a.	Acute yellow atrophy of the		1924					-		
	liver									
	Hepatitis	***	***	1	***	1		4	1	
	Abscess of the liver			2		2				
25d.	Other diseases of the liver			***						
	Biliary calculi		***					4	***	
	Catarrhal jaundice Cholecystitis								2	
	Cholecystius Other diseases of the gall		***			0.00			~	
	bladder and ducts		***	***	***		***		***	
128.	Diseases of the pancreas					**:				
	Peritonitis	2		6	2	8		1		
(m-Venereal Diseases of the Genito-Urinary System and Annexa.									
130.	Acute nephritis	***		8	3	8		51	22	
131.	Chronic nephritis			16	3	16	1	30	16	
	Pyelitis									
	Other diseases of the kidney and annexa Calculi of the bladder and			6		6		6	3	
134a.	nreter									1
1346.	Calculi of the bladder									
135a.	Cystitis			6	1	6		96	139	
1356.	Other diseases of the bladder			6		6 26		7		
136a.	Stricture of the urethra	2		24			1	52		
1366.	Urethral fistula									
136c. 136d.	Perineal abscess Other diseases of the urethra									
137a.	Hypertrophy of the prostate									
1376.	Prostatitis			1		1		9		
137c.	Other diseases of the prostate									
138a.	Phimosis			10	";	20		***		1 -
1386.	Epididymitis Orchitis	1		19	1 3	35	2	145		
138c.	Other non-vanoreal diseases			90	1 0	1	1	145		
138d.	Other non-venereal diseases of the male genital organs			8		8		28		
138e.	Granuloma venereum			7		7	1			
139a.	Diseases of the ovary									
	Salpingitis and other diseases		1	1	1					-
1396.		1	***	10		11			74	
	of the Fallopian tube									
139b. 139c.	Pelvic cellulitis, abscess, etc								6	

TABLE V .- RETURN OF DISEASES AND DEATHS FOR THE YEAR 1938-continued,

			IN-PA	TIENTS			OUT	PATIENT	rs.
	als Jo		TOTAL	La	Total	als of			
Diseases.	nd night	Admi	ssions.		Cases	simi sepit send 338.	Male.	Female.	
	Remaining in Hospitals at end of 1937.			Deaths.	Treated.	Remaining in Hospitals at end of 1938.			
			1,442	213	1.100	30	15,667	10.509	•
Brought forward	50	***	1,110	210	1,492	-00	15,001	10,502	
X.—Non-Venereal Diseases of the Genito-Urinary system and Annexa—contd.									
139d. Displacement of uterus		***	6		6			153	
139¢. Dysmenorrhœa			2		2				
139f. Endometritis, Cervicitis 139g. Menorrhagia			2		2				
139h. Mastitis. Abscess and other			6	,				90	
diseases of the breast			0	1	6		***	29	
139i. Other diseases of the female genital organs	***								
X1.—Diseases of Pregnancy, Child Birth and the Puerperal State.									
140. Post-abortive sepsis							***		
141a. Abortion 141b. Ante-partum harmorrhage			7		7			65	
142. Ectopic gestation			1						
143. Hydatid mole and other	1000			100000	1			***	
accidents of pregnancy								19	
144a. Placenta prævia 144b. Other puerperal hæmorrhage				***					
145. Puerperal sepsis			3		3				
146. Puerperal albuminuria. Eclampsia								2	
147. Other toxamias of pregnancy			3		3				
148a. Puerperal phlegmasia alba							1000		
148b. Puerperal embolism									
149a. Difficult labour									
149b. Retained placenta		***	***	***					
149c. Other accidents of child births 150a. Puerperal insanity			6		6	1			
150b. Puerperal diseases of the breas								1	
150c. Normal labour			1		1				
XII.—Diseases of the Skin and Cellular Tissues.									
151. Carbuncle boil			50	1	6	***	42	38	
152a. Cellulitis 152b. Acute abscess	2		50	3	50 53	3	55 77	21 41	
152c. Whitlow			5		5	1	84	47	
153a. Ainhum									
153b. Chigoes 153c. Eczema Dermatitis			8				210	140	
153d. Elephantiasis	4		15	ï	19	2	78	18	
153e. Herpes							18	5	
153f. Impetigo		***					8	14	
153g. Keloid 153h. Myasis									
153i. Pediculosis									
153j. Psoriasis	***						205	125	
153k, Scabies 153t, Tinea	***	***	ī		2		385	135	
153m. Ulcer	2	***	40		42	2	452	116	
153n. Urticaria			1		1		9		1 - 1
153o. Other diseases of the skin and						-			
Consist forward	5.0		1 660	990	1 718	19	17 195	11 279	
Carried forward	58	***	1,660	220	1,718	42	17,135	11,372	The same of

Table V.—Return of Diseases and Deaths for the Year 1938—continued.

		1			IN-PA	TIENTS.			OU	T-PATIE	NTS.
			e total.			Total 450					
Diseases.		1	Remaining in Hospitals at end of 1937.	Admissions.		Deaths	Cases Treated.	Remaining in Hospitals at end of 1938.	Male.	Female.	
			Rer in H			Deutas	Treateu.	Ren in H			
	Brought forward		58		1,660	220	1,718	42	17,135	11,372	
LIII.	Diseases of the Bones and Organs of Locomotion.	d		-	1						
54a.	0. 10.1		1		4	1	5	3	19	5	
546.	Periostitis										
155 156a.					14		14		57	26	
56b.				***	4		4		10	9	
56c.	Other diseases of joint-loose cartilage, ankylosis, etc.				11		11		179	85	
56d.	Abscess of muscle										
56e. 56t.	*										
56g.	Other diseases of other organ of locomotion										
XIV.—	-Congenital Mal/ormations.		4						The same	1	
157a.										1	
576.	Spina bifida. Meningocele Malformations of the hear										
57c. 57d.	A.F.										
57f. 57g.	Imperforate anus Other congenital malformatic	ons									
57h.	WW.			***						***	
xv.—.	Diseases of Ear Infancy.				1						
158.	Congenital debility				3	1	3				
59.	Yorkson at Mark										
6la.	Yelesandan							***			
161b. 161c.		to					***	***			
1016.	Other diseases peculiar t early intancy				4	2	4				
XIV	-Old Age.						3			,	
162a.	Senile dementia				3					1	
162b.	Other forms of senile decay —Affections due to Violence.	000									
165a. 165b.	Suicide Attempted suicide										
172.	Infanticide								***		
173. 176a.	Homicide Snake bite				1		1				
1766.	Insect bite or sting										
177. 178.	Food poisoning Accidental gas poisoning									1	
179.	Other acute accidental				1 1200			-			
181a.	poisoning		2		22	5	24	ï	50	34	
181b.	Burns by fire Other burns or scalds		1		4		5		17	7	
182.	Accidental mechanical					1 1000			1 123	100	
183.	Suffication Accidental drowning						***				
184.	Accidental injury by firear		***		7	1	7		4		
Injur							1	1	-		
185.	By cutting or piercing instruments				32	1	32	1	35	5	
186a.			3		20		23				
	Carried forward		65		1.789	231	1,854	47	17.506	11.547	-

Table V.—Return of Diseases and Deaths for the Year 1938—continued,

-	1	No. of Contrast	IN-PA	TIENTS.			OUT	-PATIENTS.	
	2073		TOTAL.		m 50-75				
Diseases.	spita ad of 37.	Admissions.			Total Cases	ining spital	Male.	Female.	
	Remaining in Hospitals at end of 1937.		1	Deaths.	Treated.	Remaining in Hospitals atend of 1938.			
	-								-
Brought forward	65		1,789	231	1,854	47	17,506	11,547	
186b. Dué to motor accidents 188. By non-venomous animals			2		2	1	2		
189. Hunger or thirst (starvation			6	1	6		5		
privation) 191a. Heat stroke	***		2		2				
191b. Sunstroke 192. Injuries by lightning			***						
193. Injuries by electricity									
194b. Sprain			5		5	ï	152	41	
194c. Fracture		***	19	1	22		24	4	
injuries			6		9	3	1,013	103	
198. Execution									
XVIII—Ill-Defined Diseases.									
200a. Asthenia			2		2	1	4	6	
200b. Goundou 200c. Malingering			7		7		6	ï	
200d. Pyrexia of uncertain origin 200e. Shock					***				
200 f. Hyperpyrexia			1		1		2		
Diseases not included above.									
201. Anti-rabic prophylaxis 210. Transferred cases already			3		3	1			
diagnosed by Medical Officer				-					
on other station									
	1								
					-				
		100							
	361								
					-				
	1		-	-		1-1,		-	
						1	1		
							-		
Total cases of Diseases treated .	. 71		1,846	233	1,917	54	18,720	11,702	

APPENDIX I

LABORATORY REPORT ON ROUTINE WORK. BATHURST.

The following examinations were made:-

Examinations of	Sputa					275
27	Gland Juice	(for	Ггурапоsо	mias	sis)	770
"	Bloods					745
,,	Urines					1,374
,,	Fæces					842
,.	Urethral Sr	nears				1
	Vaginal Sm	nears				2

DISEASE GROUPS TREATED IN GOVERNMENT HOSPITALS TOTAL CASES 32,243.

	Ratio Per 1,000 Cases.
Digestive SystemIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	215.8
Respiratory SystemIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	200.8
Epidemic and Infectious Diseases. IIIIIIIIIII	139.1
Nervous SystemIIIIIIII	76.8
Skin AffectionsIIIIIII	69.6
External CausesIIIIII	50.4
Genito-Urinary SystemIIIII	35.7
Bones and Organs of Locomotion!!	12.5
Circulatory System	6-3

EPIDEMIC, ENDEMIC AND INFECTIOUS DISEASES TOTAL CASES 4,455.

		Ratio Per 100 Cases.
Trypanosomiasis		11111136.3
Malaria	1111111111111111111111111111111111	24.9
Yaws	1111111111111111111111111111111111	24.1
Gonorrhoea		14.3
Influenza		6.9
Syphilis		6.3
Leprosy		3.8
Tuberculosis	11111	3.2
Dysentery		3.1



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