Report of the Surgeon-General / British Guiana.

C.S.O. No. 71/4.

British Guiana.

REPORT

OF THE

SURGEON-GENERAL,

FOR THE YEAR

1935.

Printed by the Authority of His Excellency the Governor.

GEORGETOWN, DEMERARA:
"THE ARGOSY" COMPANY, LIMITED, PRINTERS TO THE GOVERNMENT OF BRITISH GUIANA.

1937.

No. 16,791.

C.S.O. No. 71/4.

British Guiana.

REPORT

OF THE

SURGEON-GENERAL,

FOR THE YEAR

1935.

Printed by the Authority of His Excellency the Governor.

GEORGETOWN, DEMERARA:

"THE ARGOSY" COMPANY, LIMITED, PRINTERS TO THE GOVERNMENT OF BRITISH GUIANA.

1937.

No. 16,701.

CONTENTS.

APPENDICES.

SURGEON-GENERAL'S OFFICE,
GEORGETOWN, DEMERARA,
28th November, 1936.

SIR,

I have the honour to submit, for the information of His Excellency the Governor and the Legislative Council and for transmission to the Right Honourable the Secretary of State for the Colonies, the medical report on the health and sanitary conditions of British Guiana for the year 1935, together with the returns, etc., appended thereto.

I have the honour to be

Sir,

Your obedient Servant,

J. A. HENDERSON,
Surgeon-General.

The Honourable
THE COLONIAL SECRETARY.

BRITISH GUIANA.

ANNUAL MEDICAL REPORT FOR THE YEAR ENDING 31ST DECEMBER, 1935.

I.—ADMINISTRATIVE.

1. The Medical Staff as authorised by the Estimates 1935 consists of :—
   1 Surgeon-General.
   1 Government Medical Officer of Health.
   2 Assistant Government Medical Officers of Health.
   1 Bacteriologist and Pathologist.
   1 Surgeon Specialist and Resident Surgeon, Public Hospital, Georgetown.
   1 Medical Superintendent, Leprosy Hospital.
   1 Ophthalmologist.
   27 Government Medical Officers.
   1 Subsidised Medical Officer.
   2 Supernumerary Medical Officers.

2. The distribution of the staff on the 31st December, 1935, is shewn in Table I.

TABLE 1.

Distribution of Government Medical Officers on the 31st December, 1935.

(1) Surgeon General.	(2) Government Public Health Department.	(3) Government Bacteriologist and Pathologist.	(4) Special Medical Appointments.	(5) X-Ray and Electrical Treatment Department.	(6) Officers in charge of Medical Institutions.	(7) Name of Institution and position of Medical Officer.	(8) Medical Officers attached to Institutions.	(9) Officers in charge of Institutions and Districts.	(10) Officers in charge of Medical Districts.	(11) Names of Institutions and Districts.	(12) Supernumerary Medical Officers.
Dr. J. A. Henderson.	(i) Government Medical Officer of Health and Port Health Officer, Georgetown—Dr. B. N. V. Wase-Bailey (1). (ii) Assistant Government Medical Officer of Health and Port Health Officer, New Amsterdam—Vacant (2). (iii) Assistant Government Medical Officer of Health and Deputy Port Health Officer, Georgetown—Dr. E. Cochrane	Dr. G. H. Steven.	(i) Surgeon Specialist and Resident Surgeon, Public Hospital, Georgetown—Mr. J. D. Grierson, F.R.C.S. (ii) Medical Superintendent, Leprosy Hospital—Dr. F. G. Rose, M.B.E. (iii) Ophthalmologist—Dr. J. A. Browne. (iv) Prison and Police Surgeon, and Medical Officer, No. 1 Dispensary and Alms House, Georgetown—Dr. D. J. Taitt.	Honorary Radiologist—Dr. F. G. Rose, M.B.E.	(i) Dr. J. Glavina (ii) Dr. C. E. S. Mitchell.	Resident Surgeon, Public Hospital, New Amsterdam, Berbice. Medical Superintendent, Mental Hospital.	(i) Dr. G. A. Grandsoult. (ii) Dr. O. M. Francis (iii) Dr. E. G. H. Payne. (3) (iv) Dr. S. C. Bettencourt-Gomes. (4) (v) Dr. G. W. Mearns (5) (vi) Dr. W. D. Pollard. (vii) Dr. W. W. Besson. (viii) Dr. S. T. M. Sang. (6) (ix) Dr. C. Ramdeholl. (x) Dr. N. J. Abbensetts. (xi) Dr. A. W. Dunn (7) (xii) Dr. N. J. Dias.	(i) Dr. G. M. Kerry. (ii) Dr. H. Ho. (iii) Dr. A. T. D. Whitfield.	(i) Dr. Q. B. de Freitas. (ii) Dr. G. E. Carto (iii) Dr. J. E. R. Ramdeholl. (iv) Dr. L. R. Sharples. (v) Dr. R. N. Cozier (vi) Dr. J. Nedd ... (vii) Dr. G. T. G. Boyce. (viii) Dr. E. W. Reece (ix) Dr. C. R. Subryan. (x) Dr. F. A. Vispree (subsidised Medical Officer).	Resident Surgeon, Public Hospital, Suddie, Medical Officer, Suddie District and Ondernecming Industrial School. (Acting). Resident Surgeon, Public Hospital, Bartica and Medical Officer, Bartica District. Resident Surgeon, Public Hospital, Mabaruma, and Medical Officer, North West District. Peter's Hall. Canje-Highbury Buxton. Port Mourant. West Coast, Demerara. West Bank, Demerara. Mahaica. Cotton Tree. Skeldon. Mahaicony.	Dr. M. O. Luck. Dr. C. F. Roza.

(1) Is also Surgeon-General's Deputy.
(2) Is also Honorary Medical Officer of Health for the town of New Amsterdam.
(3) Medical Officer in charge of Venereal Diseases Clinic, Public Hospital, Georgetown.
(4) Senior Physician, Public Hospital, Georgetown.
(5) Senior Surgeon, Public Hospital, Georgetown.
(6) Is also Visiting Medical Officer, Anna Regina, Pomeroon, and Wakenaam Dispensaries.
(7) Seconded for duty with the British Guiana-Brazil Boundary Commission.

Appointments.

3. Dr. N. J. Dias was appointed Government Medical Officer as from 3rd May, 1935. He arrived in the Colony and assumed duty on 21st May, 1935.

4. Dr. M. O. Luck was appointed a supernumerary Medical Officer from 30th April, 1935, and Dr. C. F. Roza, from 1st May, 1935.

5. Miss P. McKoy was appointed Matron, Mental Hospital, Berbice, from 13th June, 1935, and Miss L. Williams, Night Matron, Public Hospital, Berbice, from the same date.

6. Mr. R. L. Morgan, Probationer, Bacteriological Department, was appointed a Class III. Clerk, Surgeon-General's Office, as from 1st September, 1935.

7. Mr. W. O. Dow was appointed Probationer, Public Hospital, Berbice, as from 11th February, 1935.

8. Mr. M. N. Fernandes and Miss B. A. Farnum were appointed Probationers as from 1st September, 1935; the latter was assigned to the Surgeon-General's Office; the former to the Bacteriological Department.

9. Mr. W. A. Jaundoo was appointed Issuer, Leprosy Hospital, Mahaica, from 1st January, 1935.

Temporary Appointments.

10. During the absence on leave of Dr. J. A. Henderson, Dr. Q. B. de Freitas, Government Medical Officer, acted as Surgeon-General from 29th June to 1st December, 1935.

11. Dr. O. M. Francis, Government Medical Officer, acted as Assistant Government Medical Officer of Health from 13th November, 1935, in the absence on leave of Dr. E. Cochrane.

12. Mr. S. Sandiford, Class II. Clerk, acted as Chief Clerk from 27th April to 31st December, 1935, during Mr. J. R. Farnum's absence on leave.

13. The following acted as Government Medical Officers during the year, viz:—

Dr. J. A. Nicholson, from 1st January to 26th August; Dr. A. B. Foo, from 1st January to 22nd October; Dr. C. F. Roza, from 26th February to 1st April; Dr. M. O. Luck, from 11th to 30th April; Dr. J. W. D. Ferdinand, from 13th April to 31st July; Dr. C. C. Nicholson, from 5th May to 25th July, and Dr. F. M. Kerry, from 14th May to 23rd May and from 29th May to 22nd August, 1935.

14. Miss G. Lewis acted as temporary Probationer, Surgeon-General's Office, from 1st January to 31st December, 1935, and Mr. W. T. Ching acted in a similar capacity at the Mental Hospital, Berbice, from 12th June to 31st December, 1935, *vice* Mr. C. W. Joseph, Class III. Clerk, who was seconded for service in the Surgeon-General's Office.

15. Mr. W. S. Bayley was appointed to act as Vaccination Officer, Georgetown, from 1st January, 1935.

16. Mr. R. Adhin acted as Laboratory Assistant, Leprosy Hospital, Mahaica, during the absence on leave of Mr. J. P. Singh, from 17th August to 31st December, 1935.

Retirements and Resignations.

17. Miss L. de Freitas, Matron, retired on pension on 12th June, 1935, on account of superannuation.

18. Mr. W. Sylvester, Vaccination Officer, Georgetown, retired on 31st January, 1935, on account of superannuation. He was granted a retiring allowance.

Deaths.

19. There were no deaths during the year.

Nursing Staff.

20. Six European Nurses are attached to hospitals as under :—

(*a*) Public Hospital, Georgetown—
Superintendent of Nurses—Miss N. M. C. Horrocks.
Divisional Sisters—Miss F. F. N. James, Miss E. Steele, Miss V. E. Effer and Miss D. M. Cook.

(*b*) Public Hospital, New Amsterdam, Berbice—
Superintendent of Nurses—Miss A. B. Howe.

21. Miss I. C. Ferguson, Superintendent of Nurses, Public Hospital, Georgetown, was granted two months and twenty days leave from 20th April, 1935, prior to resignation, and returned to England.

22. Miss N. M. C. Horrocks was re-engaged as Superintedent of Nurses, Public Hospital, Berbice, from 5th April, 1935, and acted from that date as Nurse Superintendent, Public Hospital, Georgetown. On the 9th July, 1935, she was appointed Nurse Superintendent, Public Hospital, Georgetown, *vice* Miss I. C. Ferguson.

23. Miss M. Sharp and Miss H. Prescott, Divisional Sisters, attached to the Public Hospital, Georgetown, were each granted three months and twenty-eight days leave from 28th April, 1935, and returned to England.

24. Miss F. F. N. James was appointed from 3rd May, 1935. She arrived in the Colony and assumed duty on 21st May, 1935.

25. Miss E. Steele was appointed on 31st May, 1935. She arrived in the Colony and assumed duty on 20th June, 1935.

26. Miss V. E. Effer was appointed on 26th July, 1935. She arrived in the Colony and assumed duty on 15th August, 1935.

27. Miss A. B. Howe was appointed on 17th October, 1935. She arrived in the Colony and assumed duty on 7th November, 1935.

28. Miss D. M. Cook was appointed on 12th December, 1935. She arrived in the Colony on 2nd January, 1936, and assumed duty the same day.

29. Miss E. Telles, Matron, Public Hospital, Berbice, acted as Superintendent of Nurses of that Institution from 1st January to 20th November, 1935.

Ordinances, Regulations, etc.

30. The following Orders in Council were issued during the year :—

(*a*) Order in Council varying the provisions of sub-paragraph (6) of paragraph 2 of Schedule VI. to the Hospital Fees Regulations with respect to the maintenance charge in hospitals of Prisons officers and clerks, their wives and families.

(*b*) Order in Council altering the fees payable to public vaccinators and vaccination officers.

Financial.

31. The following is a comparative statement of revenue and expenditure for the years 1933, 1934 and 1935.

(a) Revenue—Medical Department.

1933.	1934.	1935.
$43,088.08 (includes $2,219.50 for rent of Quarters occupied by Medical Officers).	$36,321.31 (includes $1,881 for rent of Quarters occupied by Medical Officers).	$39,679.03 (includes $2,068.85 for rent of Quarters occupied by Medical Officers).

(*b*) *Expenditure—Medical Department including Public Health Department.*

1933.	1934.	1935.
$554,625.51	$567,732.40	$569,067.53

32. The percentage of actual expenditure on Medical and Public Health Services to actual revenue of the Colony was :

1933	1934.	1935.
10.8%	11.1%	10.9%

33. On 27th September, 1934, His Excellency the Officer Administering the Government appointed a committee consisting of the Honourable Colonial Secretary as Chairman with the following members :—

The Surgeon-General, (*ex officio*),
The Hon. E. G. Woolford, K.C.,
The Hon. J. Gonsalves,
The Hon. M. B. G. Austin,
Dr. W. H. Wharton,
Dr. R. T. Bayley and
Dr. Q. B. de Freitas

to enquire into the administration and general organisation of the medical services of the colony and to advise as to what steps should be taken to improve it. After meeting on 46 occasions, the committee completed their report on 21st April, 1936, which has been published as Legislative Council Paper No. 9 of 1936.

II.—Public Health.

GENERAL REMARKS.

34. The state of public health during 1935 was well maintained throughout the colony. It is satisfactory to report that the general death rate 20.6 per 1,000 and the infant mortality rate 122 per 1,000 births were the lowest on record. The birth rate was the highest yet recorded—34.3 per 1,000 of the population.

35. There was an outbreak of Alastrim in the North West District which originated near the border of British Guiana and Venezuela. The first cases were notified at the beginning of May and the incidence continued until the end of June but it remained confined to eight areas in that district. The recognised preventive measures were effected by the Central Board of Health, and the opportunity was taken to carry out a vaccination and re-vaccination campaign throughout the greater part of the colony. In all there were 56 cases with 1 death.

36. It was the first year of operation of the Central Board of Health and its main functions were the control of infectious diseases, anti-malaria measures, the furtherance of general sanitary provisions, the care of water supplies and the supervision of conditions under which house construction advanced.

37. With regard to the grant from the Colonial Development Fund for the construction of a new Venereal Diseases Clinic (£3,125) and Tuberculosis Hospital (£15,330), the building for the treatment of the social diseases provided with new and up-to-date equipment was all but completed at the end of the year. Certain difficulties however have been experienced in connection with the selection of a site for the Tuberculosis Hospital, which must not be too remote from Georgetown, but it is anticipated that these will be overcome in the near future.

A.—*General Diseases.*

38. *Nephritis*—The total number of deaths was 539 which gave a rate of 1·6 per 1,000 in 1935 compared with an average of 594 deaths and a mean rate of 1·8 during the years 1925-1934. The following table shows the number of in-patients with acute and chronic nephritis together with deaths and case mortality in public hospitals of the colony for the last ten years :—

	Cases.	Deaths.	Case Mortality.
1926	763	190	24·9%
1927	794	206	25·9%
1928	495	161	32·5%
1929	484	143	29·5%
1930	449	111	24·7%
1931	473	124	26·2%
1932	486	135	27·7%
1933	459	150	32·7%
1934	538	159	29·5%
1935	549	111	20·2%

39. *Respiratory Diseases*—Pneumonia was responsible for 369 deaths throughout the colony with a rate of 1·1 per 1,000 compared with 362 deaths with a rate of 1·1 per 1,000 in 1934 and the figures 441 and 1·3 rsspectively in 1933.

40. *Bronchitis and Broncho-Pneumonia*—caused 641 deaths which is equivalent to a ratio of 1·9 per 1,000. During the previous ten years the number of deaths averaged 579 with a mean rate of 1·8 per 1,000.

41. *Diseases of the Heart*—There were 379 deaths registered in the colony from all forms of heart diseases (excluding diseases of the arterial, venous and lymphatic systems). 413 cases were treated in public hospitals with 143 deaths.

42. *Bowel Diseases* (*excluding the Enterics and the Dysenteries*)—Comparing the total number of deaths registered in 1935, 280, with those in respect of 1934, 595, a considerable decrease is apparent. The year 1934, however, showed increased incidence and mortality in this group of diseases. The average number of deaths during the previous ten years was 475 while the mean rate per 1,000 was 1·4 compared with ·8 in 1935.

43. *Cancer and other malignant tumours*—The total number of deaths from cancer in the colony during 1935 is given by the Registrar General as 113 which is the same figure as that for 1934. The number of deaths and the death rate per 1,000 from cancer from 1925 to 1935 is as follows :—

Year.	No. of Deaths.	Rate per 1,000 of Population.
1925 ...	64	.21
1926 ...	64	.20
1927 ...	81	.26
1928 ...	67	.21
1929 ...	76	.24
1930 ...	89	.28
1931 ...	87	.27
1932 ...	112	.35
1933 ...	86	.26
1934 ...	113	.34
1935 ...	113	.34

with an average number of deaths in the preceding decade of 84 and a mean rate per 1,000 of ·26. Malignant diseases were responsible for 127 cases and 38 deaths in the public general hospitals.

44. The following table gives the different forms of malignant growths recorded in public general hospitals together with the racial incidence :—

	Carcinoma.		Sarcoma.		Epithelioma.		Rodent Ulcer.		Endothelioma.		Unclassified.		Total.	
	1934	1935	1934	1935	1934	1935	1934	1935	1934	1935	1934	1935	1934	1935
European (other than Portuguese)	1	1	...	...	...	...	...	...	...	...	...	...	1	1
European (Portuguese) ...	5	7	...	...	...	...	1	1	...	...	...	...	6	8
East Indian	22	23	3	2	...	...	...	...	...	...	...	5	25	30
African	63	59	2	3	2	2	...	...	..	...	...	8	67	72
Mixed	8	12	2	...	2	...	...	...	...	...	1	...	13	12
Chinese	...	3	...	1	...	...	...	...	...	...	...	...	...	4
	99	105	7	6	4	2	1	1	...	...	1	13	112	127

45. The following table furnishes a comparative statement of diseases treated with deaths in Government Hospitals during the years 1931, 1932, 1933, 1934 and 1935 :—

	1931.		1932.		1933.		1934.		1935.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Malaria	1,847	112	2,509	137	2,509	167	2,364	154	2,535	161
Blackwater Fever	7	3	16	6	9	2	10	3	10	3
Dysentery	173	21	105	8	135	20	183	32	109	14
Enteric Fever	94	23	82	24	96	30	136	41	149	44
Diarrhœa and Enteritis and Colitis ...	287	63	307	67	359	80	460	150	255	39
Filariasis (and Filarial Bubo) ...	226	9	224	12	271	19	244	13	268	19
Heart Disease (all forms) ...	437	167	299	127	249	135	403	145	413	143
Nephritis (including Uraemia) ...	473	124	483	135	459	150	538	159	549	111
Pneumonia	155	89	108	54	177	118	136	92	162	100
Broncho-pneumonia	109	51	79	46	108	52	92	57	83	49
Bronchitis	867	76	716	88	706	103	792	118	753	82
Tuberculosis (including Phthisis) ...	453	164	550	170	538	165	456	135	487	146

46. The deaths registered as due to the same diseases throughout the colony for the same period are as follows :—

	1931.	1932.	1933.	1934.	1935.
Malaria and Undefined Fevers	834	1,034	1,140	1,203	694—Malaria Fever. 260—Undefined Fevers.
Blackwater Fever...	12	8	6	13	8
Dysentery	128	68	118	235	72
Enteric Fever	52	46	68	85	69
Enteritis (including Diarrhœa)	397	332	456	595	280
Filariasis (including Filarial Bubo) ...	43	52	73	38	43
Heart Disease (all forms)	383	336	359	343	379
Nephritis (including Uraemia)	487	491	517	573	539
Pneumonia	360	298	441	362	369
Broncho-pneumonia	203	210	271	194	222
Bronchitis	379	353	415	448	419
Tuberculosis (including Phthisis) ...	287	320	289	253	274

47. The diseases responsible for the highest number of deaths for the whole Colony during the years 1931, 1932, 1933, 1934 and 1935, arranged in quarterly periods, are shown in the following table :—

Diseases.	March Quarter.					June Quarter.					Sept. Quarter.					Decr. Quarter.					Total.				
	1931	1932	1933	1934	1935	1931	1932	1933	1934	1935	1931	1932	1933	1934	1935	1931	1932	1933	1934	1935	1931	1932	1933	1934	1935
Malaria and Undefined Fevers	218	224	252	421	...	148	191	226	257	...	253	281	309	225	...	215	338	353	300	...	834	1,034	1,140	1,203	...
Malaria	...	...	...	...	191	...	...	...	...	138	...	...	...	...	156	...	...	...	...	209	...	...	...	...	694
Undefined Fevers ...	...	...	...	...	61	...	...	...	...	58	...	...	...	...	82	...	...	...	...	59	...	...	...	...	260
Pneumonia and Bronchitis ...	317	208	389	415	247	141	193	246	219	320	210	200	251	201	245	274	260	250	169	198	942	861	1,127	1,004	1,010
Kidney Diseases ...	137	114	157	186	157	111	125	111	137	141	124	127	117	120	125	119	135	143	142	127	491	501	528	585	550
Diseases of early Infancy (including Premature Birth, Infantile Debility, etc.) ...	169	157	220	302	207	111	101	118	143	120	110	154	170	106	116	180	229	203	165	164	570	641	711	716	607
Bowel complaints (including Dysentery, Diarrhœa, Enteritis, etc.) ...	189	108	179	399	121	122	92	132	261	98	118	103	135	120	108	165	155	200	134	90	594	458	646	914	417
Phthisis and other forms of Tuberculosis ...	71	83	104	68	79	72	81	58	75	75	78	80	70	48	61	66	76	57	62	59	287	320	289	253	274
Diseases of the Circulatory System ...	116	96	99	128	116	86	88	106	118	98	113	95	99	84	131	106	117	133	95	100	421	396	437	425	445
Diseases of the Nervous and Sense Organs ...	108	90	98	123	98	109	90	101	107	93	94	122	78	85	80	96	85	109	97	98	407	388	386	412	369

48. The Director of Agriculture has kindly supplied the following information regarding the quarterly rainfall at the Botanic Gardens, Georgetown ;—

	1931.	1932.	1933.	1934.	1935.
1st Quarter ...	6·30	16·14	18·09	33·90	20·35
2nd Quarter ...	24·23	41·67	32·50	14·83	27·08
3rd Quarter ...	23·29	13·96	24·43	15·31	27·29
4th Quarter ...	15·44	18·74	41·62	17·00	11·63
Total ...	69·26	90·51	116·55	81·04	86·35

B.—*Communicable Diseases.*

MOSQUITO OR INSECT-BORNE.

49. *Malaria.*—The available data concerning the incidence of malaria which is as yet confined to statistics from the Registrar General, hospitals and dispensaries and reports from District Medical Officers indicate that the prevalence of this disease during 1935 was what is to be expected under present conditions in a normal year.

50. 2,472 cases were admitted as in-patients to the public hospitals and 19,375 cases were treated at out-patient departments of Government hospitals and dispensaries. In addition many cases received treatment by medical officers and dispensers at estate hospitals and dispensaries.

51. The Registrar General reports 694 deaths from malaria throughout the colony. The mortality among in-patients of Government hospitals was 164 (including deaths from blackwater fever) as compared with 140, the average for the previous ten years.

52. Below is given a table showing the total number of in-patients treated in public hospitals, the number of cases of malaria and deaths together with the case mortality, and the annual rainfall as taken at the Botanic Gardens (Georgetown) for the ten years 1926–1935 :—

Year.	Total In-Patients.	Cases Malaria including Blackwater Fever.	Deaths Malaria including Blackwater Fever.	Case Mortality.	Rainfall (Inches).
1926	18,481	1,308	107	8.2%	80.32
1927	20,671	3,188	184	5.8%	118.63
1928	20,126	2,607	156	6.0%	96.48
1929	19,577	2,304	167	7.2%	71.62
1930	19,637	2,236	133	5.9%	84.87
1931	18,276	1,854	115	6.2%	69.26
1932	19,015	2,525	143	5.7%	90.51
1933	19,754	2,518	169	6.7%	116.55
1934	19,935	2,374	157	6.6%	81.04
1935	20,528	2,545	164	6.4%	86.35

53. Percentage of malaria cases among out-patients who were treated at public hospitals :—

Year.	Total number of Out-Patients.	Number of Patients treated for Malaria (including Blackwater Fever).	Percentage of Malaria Patients.
1931	66,637	10,525	15.7
1932	53,245	10,567	19.8
1933	58,308	10,987	18.8
1934	61,640	10,672	17.3
1935	64,803	12,032	18.5

54. The total amount of quinine issued to Government hospitals, dispensaries, mission stations and schools during 1935 was 918 pounds at a cost of $5,495.80.

55. Anti-malaria measures are described in Section XII.—5—Special Preventive Measures. Bonification work was continued on the lands to the north and east of Georgetown. The Town Council of New Amsterdam have maintained the reclamation work which was commenced on the foreshore in 1933. The levelling, filling in and drainage carried out at the Penal Settlement, Mazaruni, in 1932 and since maintained by prison labour supervised by the health officer of this area have proved effective in controlling malaria. In regard to sugar plantations special mention should be made of the valuable work done by Dr. Giglioli in effecting improvements at Blairmont, Bath and Providence estates.

56. The necessity for a malaria survey has been recognised for several years and lack of money alone accounts for one not having yet been systematically undertaken. On the representation of the department, however, the Committee

appointed to enquire into the administration and general organization of the medical services of the colony has recommended that such a survey should be carried out as soon as possible.

57. Eight deaths were registered in the whole colony as due to blackwater fever as compared with thirteen in 1934. The number of cases treated and deaths in public hospitals was the same as for the previous year—namely 10 and 3 respectively.

58. The districts in which those cases most probably contracted the disease were East Coast, East Bank and West Coast, Demerara, and North West District.

59. *Filariasis and Filarial Bubo.*—The deaths registered in the whole colony were 43. The average number of deaths for the previous ten years was 49 per annum. 268 cases were treated in public hospitals with 19 deaths.

60. There were no cases of yellow fever.

C.—*Infectious Diseases.*

61. A report on notifiable infectious diseases is given in Section XII.

62. *Influenza.*—134 cases were treated in public hospitals with no deaths. The deaths registered as due to the same disease throughout the colony were 61.

63. *Dysentery, including amoebic, bacillary and other forms.*—The deaths registered in the colony numbered 72 giving a death rate of .2 per thousand compared with .4, the average rate per annum during the previous ten years. 109 cases were treated in public hospitals, with 14 deaths, compared with 183 cases and 32 deaths in 1934.

64. *Tetanus.*—31 cases were treated in public hospitals, with 24 deaths, compared with 32 cases and 8 deaths in 1934.

65. *Venereal Diseases.*—The following table gives the number of cases of venereal diseases treated as in-patients in public hospitals for the last ten years :—

	Syphilis.					Soft Chancre.	Gonorrhœa and its Complications.	Granuloma Venereum.
	Primary.	Secondary.	Tertiary.	Hereditary.	Stage not Indicated.			
1926 ...	128	93	361	22	*	51	224	*
1927 ...	246	16	597	39	...	6	195	123
1928 ...	157	38	418	88	1	170	372	145
1929 ...	228	31	392	67	9	120	616	130
1930 ...	271	44	471	37	31	38	626	111
1931 ...	214	121	782	123	68	12	526	57
1932 ...	75	46	651	89	12	38	647	71
1933 ...	159	51	604	107	7	60	645	63
1934 ...	96	35	664	62	3	46	696	88
1935 ...	139	16	433	41	2	38	657	69

Note:—*Included in other figures in case of Syphilis. Not specially mentioned in case of Granuloma Venereum, and classed under other general headings not listed.

66. The number of Novarsenobillon and other injections given for syphilis at the public hospitals was 16,179 compared with 22,368 in 1934.

67. As previously mentioned in this report the new building for the out-door treatment of cases of venereal diseases was practically completed at the end of the year. This clinic provided with modern equipment will constitute a further improvement in the Georgetown hospital. Its extended functions, however, will demand in the very near future increase of medical and nursing staffs.

68. The tables below furnish statements, classified in age-incidence periods, of in-patients treated for venereal diseases in public hospitals, prisons and the Alms House during the year 1935 :—

(i)—PUBLIC HOSPITALS.*

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.†											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	..	...	...	8	3	11	7	8	15	...	...	...	...	...	...
1 to under 5 ...	...	2	2	...	...	...	5	1	6	3	6	9	...	...	...	...	...	...
5 ,, 10 ...	1	...	1	...	..	...	3	6	9	4	10	14	...	...	...	...	...	...
10 ,, 20 ...	8	9	17	1	1	2	23	23	46	35	48	83	2	2	4	2	1	3
20 ,, 30 ...	36	23	59	5	8	13	64	78	142	231	65	296	18	1	19	13	9	22
30 ,, 40 ...	12	21	33	5	4	9	97	66	163	164	25	189	9	2	11	14	6	20
40 ,, 60 ...	9	3	12	3	...	3	104	59	163	132	6	138	5	...	5	12	10	22
60 years and over...	...	3	3	...	...	...	20	4	24	16	...	16	2	...	2	...	1	1
Total ...	66	61	127	14	13	27	324	240	564	592	168	760	36	5	41	41	27	68

* NOTE.—The totals in this table differ from those in the table above in that cases of double infection are here included.
† Includes "Hereditary" and "Stage not indicated."

(ii)—GEORGETOWN AND NEW AMSTERDAM PRISONS AND ALMS HOUSE.

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.†											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...
1 to under 5 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 ,, 20 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
20 ,, 30 ...	...	...	...	...	...	...	...	...	...	5	...	5	...	...	...	1	1	2
30 ,, 40 ...	...	...	...	2	...	2	1	...	1	2	...	2	...	...	...	4	...	4
40 ,, 60 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
60 years and over ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ...	...	...	...	2	...	2	1	...	1	7	...	7	...	...	...	5	3	8

† Includes "Hereditary" and "Stage not indicated."

69. The following table shows the number of out-patient attendances at public hospitals and Government dispensaries for the past three years :—

	1933.		1934.		1935.	
	Public Hospitals.	Government Dispensaries.	Public Hospitals.	Government Dispensaries.	Public Hospitals.	Government Dispensaries.
Gonorrhœa and its complications ...	6,726	817	5,889	468	5,834	292
Chancroid ...	471	6	259	5	98	2
Syphilis (including Tertiary)	17,517	113	15,443	56	11,161	80
Granuloma Venereum and Pudendi ...	306	7	361	1	281	1

70. The tables below furnish statements, classified in age-incidence periods, of out-patients (new cases) treated at public hospitals, Government dispensaries and prisons during the year 1935 :—

(i) PUBLIC HOSPITALS.

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.*											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	2	8	10	...	...	...	...	...	...	...	...	...
1 to under 5 ...	5	3	8	...	1	1	1	6	7	...	...	...	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	2	5	7	6	8	14	...	...	...	...	...	...
10 ,, 20 ...	16	12	28	6	5	11	29	39	68	144	58	202	2	1	3	4	...	4
20 ,, 30 ...	66	16	82	15	8	23	96	122	218	404	87	491	10	3	13	10	2	12
30 ,, 40 ...	17	3	20	19	4	23	109	99	208	213	32	245	7	1	8	6	3	9
40 ,, 60 ...	10	1	11	6	...	6	109	49	158	90	2	92	2	...	2	3	3	6
60 and over ...	...	...	...	...	...	...	8	7	15	10	...	10	...	...	...	1	...	1
Total ...	114	35	149	46	18	64	356	335	691	867	187	1,054	21	5	26	24	8	32

*Includes "Hereditary" and "Stage not indicated."

(ii) GOVERNMENT DISPENSARIES.

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.*											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	2	1	3	...	2	2	...	...	...	...	...	...
1 to under 5 ...	...	...	..	...	...	...	1	1	2	...	1	1	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	...	...	...	2	...	2	...	...	...	...	...	...
10 ,, 20 ...	1	...	1	1	...	1	...	...	...	20	9	29	...	...	...	...	...	...
20 ,, 30 ...	6	3	9	5	..	5	1	2	3	106	26	132	3	...	3	1	...	1
30 ,, 40 ...	6	...	6	5	...	5	20	10	30	65	18	83	2	...	2	...	...	...
40 ,, 60 ...	1	1	2	1	1	2	2	4	6	11	10	21	...	...	...	...	...	...
60 years and over ...	...	1	1	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...
Total ...	14	5	19	12	1	13	26	18	44	204	66	270	5	..	5	1	...	1

*Includes "Hereditary" and "Stage not indicated."

(iii)—GEORGETOWN AND NEW AMSTERDAM PRISONS.

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.*											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1 to under 5 ...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	..	...
10 ,, 20 ...	2	...	2	...	...	...	...	...	...	4	...	4	2	...	2	..	..	...
20 ,, 30 ...	10	...	10	...	...	...	1	1	2	28	3	31	13	...	13	1	...	1
30 ,, 40 ...	2	...	2	...	...	...	...	...	...	6	...	6	5	...	5	2	...	2
40 ,, 60 ...	1	...	1	...	...	...	2	...	2	8	...	8	...	...	...	1	...	1
60 years and over ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ...	15	...	15	...	...	...	3	1	4	46	3	49	20	...	20	4	...	4

*Includes "Hereditary" and "Stage not indicated."

71. The number of cases of venereal diseases treated on sugar estates for the past three years was :—

	1933.	1934.	1935.
Gonorrhoea ...	177	223	215
Chancroid ...	7	9	7
Syphilis (including tertiary) ...	42	91	109
Granuloma Venereum and Pudendi ...	0	0	0

72. Classified in age-incidence periods the in-patients treated on sugar estates during the year were as follows :—

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.*											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	1	2	3	...	1	1	...	...	...	...	...	...
1 to under 5 ...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 ,, 20 ...	4	...	4	...	...	...	3	1	4	17	15	32	...	...	...	...	...	...
20 ,, 30 ...	5	1	6	2	1	3	...	3	3	32	18	50	3	...	3	...	...	...
30 ,, 40 ...	1	1	2	1	4	5	3	4	7	23	8	31	...	...	...	...	...	...
40 ,, 60 ...	2	...	2	3	...	3	1	4	5	13	2	15	2	...	2	...	...	...
60 years and over ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...
Total ...	13	2	15	6	5	11	8	14	22	85	44	129	6	...	6	...	...	...

* Includes "Hereditary" and "Stage not indicated."

73. The table below shows the out-patients (new cases) treated on sugar estates during the year classified in age-incidence periods :—

Age.	Syphilis.									Gonorrhœa and its complications.			Chancroid.			Granuloma Venereum and Pudendi.		
	Primary.			Secondary.			Tertiary or Chronic.*											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year ...	...	...	...	...	...	...	...	...	..	...	...	...	...	..	...	...	...	...
1 to under 5 ...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...
5 ,, 10 ...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...
10 ,, 20 ...	3	1	4	3	7	10	1	1	2	6	2	8	...	...	...	...	...	...
20 ,, 30 ...	10	3	13	3	4	7	1	6	7	25	16	41	...	...	...	...	...	...
30 ,, 40 ...	4	2	6	...	4	4	...	...	...	16	7	23	1	...	1	...	...	...
40 ,, 60 ...	...	...	...	1	...	1	2	4	6	10	4	14	...	...	...	...	...	...
60 years and over ...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...
Total ...	17	6	23	7	15	22	4	12	16	57	29	86	1	..	1	...	...	...

* Includes "Hereditary" and "Stage not indicated'."

74. Below are extracts from the annual report of Dr. E. G. H. Payne, Medical Officer in charge of the venereal diseases clinics at the Public Hospital, Georgetown :—

"The staff consisted of
1 medical officer.
1 senior male nurse.
1 senior female nurse.
2 part-time male nurses.
1 part-time female assistant nurse.

"I continued in office during the year until the end of May when I "left the colony on furlough. During my absence, Dr. L. S Jaikaran "was in charge of the clinic and continued in this capacity until the end "of the year.

"*Syphilis.*—The number of admissions for primary syphilis—81, fell "below that for any of the previous four years. In 1931 the highest "number of admissions was recorded—201. In 1934 the figure had "fallen to 103.

"The total number of new admissions for syphilis in all its stages— "568—was much below that recorded in any of the previous four years. "In 1931 the admissions under this head totalled 1,630, since when "the numbers have steadily decreased.

"New cases of early syphilis—primary and secondary—represented "14.26% of the total number of new admissions for syphilis.

"The ratio of early syphilis to early gonorrhoea was 1 to 4.5. This "is a normal ratio which requires no elaboration.

"*Gonorrhoea.*—There was a fall in the number of admissions as "compared with those for the years 1932 to 1934. During this three-"year period the total number of admissions dropped from 980 to 700. "The total number of admissions during 1935 was 660.

"The number of new cases of acute gonorrhoea represented 71.6% "of the total number of cases of gonorrhoea admitted to the clinics.

"*Chancroid and Granuloma Pudendi.*—A reduction in the number "of cases of these infections was observed.

"*Cases returned non-venereal disease.*—In this category were several "cases of catarrhal leucorrhoeas, and non-specific skin infections.

"*Cases returned undiagnosed.*—Among these cases were patients "whose attendances were insufficient to allow a diagnosis to be made. "A large number were suspicious cases of venereal infection. It is a "great pity that these cases default before they are discharged from the "clinic. Many of them were cases from the country districts and it "would appear that difficulty in finding travelling expenses contributes "to the various reasons for defaulting.

"*Defaulting.*—The incidence unfortunately continues to be high. "I have commented in my previous reports for the years 1933 and 1934 "on this high incidence and have there suggested reasons therefor. My "views are unchanged. It does appear necessary to have some kind of "'follow-up' scheme. Furthermore long period of waiting on the part "of patients should be avoided and there should be provided more "sessions at hours convenient to patients, and a larger medical staff.

"*Ante-natal and Infant Welfare Centre, Georgetown.*—Close co-"operation continues. The centre referred 89 cases of latent syphilis in "pregnant mothers and others attending the King George V. Welfare "Centre. It will be seen that 52 cases attended in order to receive "treatment. This is the lowest number of cases that have been referred "from this centre. There has been actually a drop of about 50 per "cent. as compared with the figures for the last two years. This centre "continues to refer a large number of cases of leucorrhoeas for diagnosis "and treatment.

"*Intermediate Treatment.*—In my statistics, I have included the "number of male and female attendances for intermediate treatment. "This treatment is given by the nurses attached to the clinic. "It was found necessary to add one female nurse to the staff providing "service for these treatments. During the latter part of the year there-"fore two female nurses were engaged in providing this treatment. I "strongly recommend that these nurses be attached to the clinic for "whole-time service. This is a very important branch of the clinic "services, which should have the fullest nursing strength possible."

APPENDIX A.

TABLE I.—NEW CASES (MALE AND FEMALE) ADMITTED TO THE VENEREAL DISEASES CLINIC DURING THE YEAR 1935.

	Sy. 1.	Sy. 2.	Sy. 3.	Acute Gonorrhoea.	Chronic Gonorrhoea.	Chancroid.	Granuloma Pudendi.	Hereditary Syphilis.
	81	25	412	473	187	24	17	50
Comparative figures for year 1934 ...	103	39	684	511	189	44	22	78

TABLE Ia.—OLD CASES TREATED IN THE VENEREAL DISEASES CLINIC DURING THE YEAR 1935 (MALE AND FEMALE).

	Sy. 1.	Sy. 2.	Sy. 3.	Acute Gonorrhoea.	Chronic Gonorrhoea.	Chancroid.	Granuloma Pudendi.	Hereditary Syphilis.
	128	52	838	366	232	35	39	105

TABLE II.—TOTAL ATTENDANCES OF CASES (OLD AND NEW)—MALE AND FEMALE—20,081.

Half year	Sy. 1.	Sy. 2.	Sy. 3.	Acute Gonorrhœa.	Chronic Gonorrhœa.	Chancroid.	Granuloma Pudendi.	N.V.D.	Undiagnosed.
To 30th June ...	546	294	4,765	1,256	733	98	190	120	2,238
To 31st December.	453	162	4,013	1,891	1,143	92	136	121	1,830
Total ...	999	456	8,778	3,147	1,876	190	326	241	4,068

TABLE III.—NUMBER OF TREATMENTS GIVEN WITH—

	Arseno-Benzene Compounds.	Bismuth Preparations.	Tartar Emetic.	Mixed Vaccines.	Others.
Half year to June	3,160	2,309	345	290	168
Half year to December	2,653	3,529	183	1,389	166
Total	5,813	5,838	528	1,679	334

TABLE IV.

	New.	Old.	Total.
No. Cases Non-Venereal ...	114	29	143
No. Cases Undiagnosed ...	874	208	1,082
Total ...	988	237	1,225

TABLE V.—TOTAL NUMBER OF INTERMEDIATE TREATMENTS GIVEN:—

Male ...	20,229
Female ...	19,825
Total ...	40,054

TABLE VI.—DISMISSALS FROM CLINIC (ALL CASES).

	Cured.	Non-venereal Disease.
Male ...	15	42
Female ...	5	72
Total ...	20	114

TABLE VII.—(a).

Defaulters—Male.	Under 3 months.	Before completion of 2 courses.
Sy. 1. ...	43	206
Sy. 2. ...	12	...
Sy. 3. ...	110	...

TABLE VII.—(b).

Acute gonorrhœa under one month	182
Acute gonorrhœa and chronic gonorrhœa defaulted apparently cured, but before all tests of case completed	53

TABLE VII.—(c).

Defaulters—Female.	Under 3 months.	Before completion of 2 courses.
Sy. 3—Cases referred from Ante-natal Centre	21	146
Sy. 3—Cases other than Ante-natal Centre.	53	...

TABLE VIII.

CASES REFERRED FROM MATERNITY AND ANTE-NATAL CENTRE, GEORGETOWN.

Total No. referred	89
Total No. attended	52

TABLE IX.

ACTUAL NUMBER OF PATIENTS TREATED AT V.D. CLINIC (GEORGETOWN) WITH DISTRICT CENSUS (MALES AND FEMALES).

Diseases.		Georgetown.	Lower E.C., Demerara.	Upper E.C., Demerara.	West Coast, Demerara.	East Bank, Demerara.	West Bank, Demerara.	Berbice.	Essequebo.	Demerara River	Total.	
Syphilis 1	M.	36	14	1	4	15	5	1	3	3	82	
	F.	22	3	...	2	6	2	...	...	...	35	117
Syphilis 2	M.	17	6	1	2	10	1	...	...	1	38	
	F.	10	1	..	1	1	...	..	...	...	12	50
Syphilis 3	M.	133	77	1	18	46	18	2	6	1	302	
	F.	311	63	2	14	65	21	1	1	2	480	782
Hereditary syphilis	M.	16	17	...	6	7	1	...	...	...	47	
	F.	42	17	...	1	7	2	...	...	...	69	116
Acute gonorrhœa	M.	283	113	5	25	67	12	5	6	7	523	
	F.	37	15	...	...	9	1	...	...	...	62	585
Chronic gonorrhœa	M.	74	43	3	18	30	8	3	3	2	184	
	F.	24	18	...	3	8	1	...	1	1	66	250
Syphilis 1 and gonorrhœa	M.	26	8	...	5	4	1	1	1	...	46	
	F.	3	1	...	1	3	1	...	...	...	9	55
Syphilis 2 and gonorrhœa	M.	5	1	...	...	...	...	...	...	...	6	
	F.	1	...	...	...	...	...	...	...	...	1	7
Syphilis 3 and gonorrhœa	M.	43	19	3	5	20	4	1	3	4	102	
	F.	16	2	...	2	4	1	...	...	...	25	127
Hereditary syphilis & gonorrhœa	M.	...	1	...	...	...	...	...	...	...	1	
	F.	2	...	...	...	...	...	...	...	...	2	3
Granuloma	M.	5	3	...	1	3	2	2	...	1	17	
	F.	3	3	...	...	2	1	...	...	...	9	26
Chancroid	M.	9	4	1	1	4	1	...	1	...	21	
	F.	4	...	...	1	3	...	...	...	...	8	29
Syphilis and granuloma	M.	5	1	...	...	3	1	...	...	...	10	
	F.	1	2	...	...	...	...	...	...	...	3	13
Gonorrhœa and granuloma	M.	...	...	...	...	...	...	1	...	..	1	
	F.	...	...	...	...	...	...	...	...	...	...	1
Syphilis and chancroid	M.	3	2	...	1	1	1	...	...	...	8	
	F.	3	...	...	...	1	...	...	...	...	4	12
Gonorrhœa and chancroid	M.	4	...	...	..	1	...	...	...	...	5	
	F.	...	...	...	...	...	...	...	...	...	...	5
Undiagnosed	M.	148	70	5	22	53	31	6	5	4	344	
	F.	370	113	8	17	70	17	4	5	3	607	951
Non-Venereal disease	M.	21	7	1	...	13	1	...	1	4	48	
	F.	47	23	2	1	14	2	...	...	...	89	137
Total	...	1,734	647	33	150	470	136	27	36	33	...	3,266

75. *Yaws.*—19 cases were treated in public hospitals compared with 7 cases in 1934. There were no deaths. 263 cases were treated in the out-patient departments as against 243 in 1934.

76. *Leprosy.*—The number of new admissions to the Leprosarium was 49, 31 males and 18 females, exclusive of patients who were re-admitted on account of inability to exist outside the institution owing to economic conditions (not because of recurrence of leprosy). There were 15 deaths—13 males and 2 females, giving a death rate of 3.4 per cent. of the total number of inmates.

77. Six Sisters of the Czecho-Slovakian Order of the Immaculate Conception returned to Czecho-Slovakia on 11th September, 1935, and three on 27th October, 1935. I gladly take this opportunity of expressing my high appreciation of the devotion with which these Sisters performed their onerous and sometimes unpleasant duties, and of placing on record the great assistance they rendered in the administration of the hospital.

78. Eight Sisters of Mercy from the United States succeeded the Czecho-Slovakian Sisters and have shown themselves fully capable of filling the places of those who have left.

79. Following a programme of maintenance and reconstruction works, which was drawn up at the middle of the year, substantial improvements to some of the buildings costing $6,320 have been made by the Public Works Department. It is hoped to continue these works year by year until the blocks have been modernized, re-sanitation throughout has been effected, and a new hospital with accommodation for about 40 beds has been constructed.

80. The following are extracts from the annual report for the year 1935 furnished to the Surgeon-General by Dr. F. G. Rose, M.B.E., B.A., M.D., (Camb.), M.R.C.P., (Lond.), D.M.R. & E. (Camb.), Medical Superintendent, Leprosy Hospital :—

"*Grounds.*—Most of the roads have now been rebuilt to some extent, "but we have not yet been able to obtain a supply of shell for re-surfacing. "Those in the female compound are still in very bad condition.

"The cricket and football grounds and the tennis lawns have been "kept in fair condition, but the labour supply at my disposal is insufficient "to keep the grounds permanently bushed.

"The Hydnocarpus Anthelmintica trees fruited during the year.

"It has been found necessary at regular intervals to admit water from "the adjoining Mahaica Creek to flush the trenches, and the permeation of "the soil with brackish water appears, according to reports made to me, to "have much impaired the fertility of the soil, with adverse effects upon the "cultivation.

"I have at the moment under consideration a scheme for obtaining "'sweet' water from the Shanks Canal.

"*Water Supply.*—The pipe-borne supply of water from the artesian "well at Clonbrook has proved of inestimable value, but the system should "be extended to the north and south blocks of the male compound.

"During the day this water becomes very hot (owing to the superficial "position of the pipes) and for this reason appears to be unsuitable for "watering cultivations of green vegetables.

"Some of the vats and gutters have been repaired and there was no "lack of rain water during the year.

"The want of bathrooms is much felt in the cottages, those of the "male south block particularly.

"*Sanitation*—The mosquito nuisance abated somewhat towards the "end of the year, but is still with us, and for a short period we suffered "from a severe visitation of flies.

"No work has yet been done on the re-grading of the concrete gutters "on the female side. These have to be swept clean daily with brooms.

"There is some prospect of the obnoxious pail-system of disposal of "excreta being replaced by septic tanks. This will be a great and much "needed improvement.

"*Patients.*—The behaviour on the whole was good, better in fact than "has been the case at any time within my experience of the Leprosy "Hospital.

"There were eight births during the year, seven mothers having been "admitted pregnant, and only one being due to illicit intercourse within "the institution.

"One patient absconded during the year and has not yet been "recovered.

"*Occupation.*—Minor repairs of buildings, painting of parts of the "male hospital and infirmary, etc., weeding of the grounds, making of "boots, shoes and slippers and clothing for the use of the patients were "done as usual by the patients themselves under the supervision of the "Chief Attendant and artisan attendants.

"The want of new sewing machines in the shoemaker and tailor shops "was much felt but has now been partially fulfilled.

"Many patients as usual engaged in farming, poultry-rearing, etc.

"Patients also assist in maintaining cleanliness in the wards, dressing "ulcers, giving injections and local applications and administering treat- "ment in the electro-therapeutic department.

"*Sports and Pastimes*—Cricket and football were played as usual, "the usual dances and entertainments were organized and the weekly "cinema was much appreciated.

"A 'Talkie' apparatus was obtained by the Entertainment Com- "mittee through Messrs. Booker Bros. and regular programmes obtained "from the Rialto Theatre began to be shown from July 4th, 1935.

"A radio-gramophone was also procured from a donation kindly "bestowed by a visitor from abroad.

"The wireless receiving set is, however, again out of commission, and "it seems doubtful whether it can again be restored to useful service.

"The Guide troops and Brownie packs under the leadership of Mrs. "F. G. Rose, Guide Commissioner for the East Coast, were active "throughout the year.

"The Scout troops, though deprived of the services of a Scoutmaster, "maintained their activities to a limited degree, with the assistance of "Mrs. Rose.

"*Religious Observances*—The Rev. L. J. Chybnalle visited and minis- "tered to the Anglican communion on twenty-six occasions during the "year. The Rev. H. Pendlebury, S.J., acted as Catholic Chaplin, while "the Revs. C. Biles and J. B. Broomes ministered to the Presbyterian and "Wesleyan patients respectively.

"Services were also held by the Seventh Day Adventists and other "sects.

"*Visitors*—Official visits were paid by His Excellency the Governor, "Sir Geoffry Stafford Northcote, K.C.M.G., accompanied by Commander "J. R. M. M. Crichton, Private Secretary; the Surgeon-General, Dr. J. "A. Henderson; the acting Surgeon-General, Dr. Q. B. de Freitas; the "Director of Public Works, the Honourable J. C. Craig; the Board of "Official Visitors, comprising Mesdames M. B. Laing, S. H. Bayley and "E. Cochrane; the Rt. Rev. the Bishop of Guiana, the Very Rev. Fr. "Morrison, S.J., the Rev. J. B. Brindley and Mr. A. Groves, and by "Dr. E. Cochrane, Assistant Government Medical Officer of Health. The "Leprosy Board, comprising the Medical Superintendent as Chairman, "the Government Bacteriologist, the Government Medical Officer of Health, "the Medical Officer of Health for Georgetown, Dr. F. T. Wills, Dr. J. E. "R. Ramdeholl and Dr. S. Bettencourt-Gomes held several sittings for the "purpose of confirming admissions and discharges and considering various "matters on which they were required to advise Government.

"Mr. R. S. Ducker of the Education Department visited the school, "which was also inspected by the two neighbouring head teachers, Messrs. "G. W. Forsythe and J. Inasi.

"Other visitors included—

Lady Northcote, wife of His Excellency the Governor.
His Lordship Bishop Weld, S.J.
Mr. and Mrs. W. Collier, and the following from abroad:—
The Rev. Fr. Cooksey, S.J., Barbados.
Filn Delhorujne, Holland.
Mrs. E. P. Denny, England.
Sir Cyril Cobb, K.B.E., M.P., England.
Dr. D. Potter, Clark University, Mass., U.S.A.
Dr. C. M. Pomerat, Clark University, Mass., U.S.A.
Mr. H. C. Collier, Montreal, Canada.
Dr. and Mrs. A. D. Wright, U.S.A.

"*Gifts.*—Many gifts of books, newspapers, toys, etc., were received "and distributed.

"A sum of $132 (besides gifts of toys, etc.) was collected by Mrs. F. "G. Rose from various firms and individuals out of which Christmas gifts "for all the patients were provided for the Annual Christmas Tree on "December 31st.

"Toys and sweets were provided for all the children by Lady "Northcote, who herself graced the proceedings and distributed the toys "in the Lady Rodwell Cinema Hall.

"*School.*—There were thirty-one scholars on the register, the average "attendance for the year being 26.7. Towards the end of the year we "obtained a supply of material for making desks and benches, a long-felt "want, the fulfilment of which will be an inestimable boon. The school "also obtained a small supply of books and was very favourably reported "on both by the Inspector of Schools and the two visiting reporters.

"*The Children.*—The Bishop Galton Home has proved of great value, "the only drawback at present being the insufficiency of accommodation "many of the children being now fit to be placed on parole.

"It is hoped that the erection of the Lady Denham Home in the near "future will relieve the situation.

"*Treatment.*—The treatment continues to give excellent results.

"802 prescriptions were written for male and 446 for female patients "resident in the cottages, while 110 males and 84 females were treated in "hospital as in-patients during the year.

"60 operations were performed on the male side and 43 on the "female, their nature being as follows :—

Excision of Nodules			23
Curettage and removal of necrosed bone			16
Amputations : Finger	7		
Foot	5		
Toe	2		
Leg	1	...	15
Paring of lobes of ears			14
Plastic Operations : Upper Eyelids ...	6		
Lateral Canthorrhapy ...	5		
Face	1		
Nose	1	...	13
Circumcision			8
Transplantation Ulnar nerve			5
Peri-arterial Sympathectomy			2
Strangulated Inguinal Hernia			1
Excision of Olecranon Bursa			1
Cholecystostomy			1
Paraphimosis			1
Iridectomy			1
Excision of Fibroma of Breast			1
Cauterization of inferior turbinate			1
Total			103

"Only two operations were performed under a general anaesthetic, "the rest with the aid of spinal or local anaesthesia.

"Two visits were paid by the Government Ophthalmologist to advise "as to treatment of various ocular conditions associated with leprosy.

"1,151 sessions were held in the electro-therapeutic department for "the treatment of 28 male and 15 female patients.

"The following laboratory investigations were made :—

Examination of smears for M. Leprae—

Skin	...	...	52
Nasal Mucosa ...		...	719
Examination of stools for Ankylostome Ova.		...	22
Examination of sputum for Tuberculosis		...	8
Examination of Blood for Malarial Parasites		...	7

"At the end of the year 1935, there were 738 cases of leprosy known "to the authorities and believed to be alive.

"Of these 336 were inmates of the Mahaica Leprosy Hospital, 402 "being out-patients attending for treatment or examination or both at the "various clinics. 268 were regarded as arrested and 149 as quiescent, "321 being cases in which there was still some evidence of activity of the "disease.

"88 cases eluded observation during the year, 23 being classified as "arrested and 47 as quiescent when last examined.

"55 of these cases were last seen 2 years ago, the rest have not been "seen or heard of for periods of from 3 to 8 years.

"Of the total of 738 cases, 517 received treatment regularly through-"out the year.

"33 patients were discharged as quiescent during the year and there "were 41 new admissions.

"11 quiescent cases became interrupted and 6 arrested cases relapsed "during 1935.

"Table I. shows the number of new admissions to the Leprosy Hos-"pital in ten-yearly periods from 1858 to 1927, and for the 8 years from "1928 to 1935.

TABLE I.

" Years.	Number of new admissions.
1858—1867 ...	...172
1868—1877 ...	...598
1878—1887 ...	...578
1888—1897 ...	...871
1898—1907 ...	...850
1908—1917 ...	...837
1918—1927 ...	...612
1928—1935 (eight years)	...485

"Table II. shows the fall in the death-rate among persons suffering "from leprosy throughout the colony from year to year.

TABLE II.

Year.	Percentage Death-rate among Patients suffering from Leprosy.	Death-rate among whole Population.
1924 ...	13.00	2.56
1925 ...	10.00	2.42
1926 ...	8.78	2.55
1927 ...	5.78	2.60
1928 ...	6.14	2.79
1929 ...	5.18	2.35
1930 ...	3.94	2.50
1931 ...	4.85	2.18
1932 ...	2.70	2.11
1933 ...	2.82	2.44
1934 ...	2.51	2.47
1935 ...	2.71	2.06

"The following were the types of cases admitted during the year :—

Cutaneous.		Neural.		Mixed.	
C1	2	N1	8	C1N1	1
C2	9	N2	13	C2N2	2
		N3	3	C3N2	1
				N2C1	1
				N3C1	1
	11		24		6

"32 new out-patients were seen, classified as follows :—

N1	...	...23
N2	...	... 7
C1	...	... 1
C1N1	...	... 1
	Total	32

"During the year 102 visits were paid to the out-patients' clinic in "Georgetown, 12 to New Amsterdam, 13 to the Corentyne Coast and 24 "to Essequebo, including Wakenaam, Leguan, Suddie and Charity on the "Pomeroon River.

"The following were the number of patients seen and attendances "made :—

Clinic.	Number of Sittings.	Number of Patients.	Number of Attendances of Patients.
Georgetown	102	220	1,307
Mahaica	52	103	395
New Amsterdam	12	76	339
No. 63, Corentyne Coast ...	13	46	240
Essequibo —(Including Wakenaam Leguan, Suddie and Charity ...	24	31	106
	203	476	2,387

"14 deaths took place within the Leprosy Hospital, the causes being "as follows :—

Cutaneous Leprosy, Toxæmia	...	...	2
Neural Leprosy, Acute Nephritis	...	...	2
Neural Leprosy, Toxæmia	...	...	1
Cutaneous Leprosy, Uræmia	...	...	1
Cutaneous Leprosy, Acute Cerebral Malaria		...	1
Cutaneous Leprosy, Acute Suppurative Cholecystitis		...	1
Mixed Leprosy, Chronic Nephritis	...	...	1
Cutaneous Leprosy, Chronic Nephritis	...	...	1
Neural Leprosy, Chronic Nephritis	...	...	1
Cutaneous Leprosy, Lobar Pneumonia	...	...	1
Neural Leprosy, Exhaustion	...	...	1
Neural Leprosy, Chronic Bronchitis and Asthma		...	1

"There was one still-birth.

"*British Empire Leprosy Relief Association.*—The Lady Denham "Home Scheme was reviewed by the Executive Committee and the "Leprosy Board and a revised scheme submitted for the approval of the "present Association, from which a reply is now awaited.

"*Out-Patients.*—The Medical Superintendent met the Chairman and "Secretary of the Poor Law Commissioners and a revised scheme for the "allocation of doles to discharged patients was drawn up, which should "prove of great advantage.

"*Report.*—A report to the Medical and Sanitary Advisory Committee "of the Colonial Office was submitted by the Medical Superintendent "during the year.

"*Financial.*—The following is the total expenditure on the Leprosy "Hospital during the past 6 years :—

" Year.	Gross Expenditure.	Revenue.	Nett cost of upkeep.
1930	$ 37,766 14	$ 1,048 34	$ 36,717 80
1931	32,319 04	1,182 95	31,136 09
1932	36,385 49	974 41	35,411 08
1933	37,048 55	503 53	36,545 02
1934	42,285 19	516 11	41,769 08
1935	41,027 15	468 49	40,558 66

"The following is the estimated value of the work done by the "artisans during the year :—

	Attendants.	Patients.	Total.
" Carpenters ...	$ 174 08	$ 101 50	$ 275 58
Tailors ...	141 66	356 75	498 41
Shoemakers ...	144 84	326 76	471 60
Seamstresses ...	6 40	88 52	94 92
Total ...	$ 466 98	$ 873 53	$ 1,340 51

"10,855 pieces were washed in the laundry.

81. The statistical returns of the Leprosy Hospital for the year are as follows :—

(1) TABLE SHOWING NUMBER OF PATIENTS TREATED AND PERCENTAGE MORTALITY, 1935.

	M.	F.	T.
Number of patients on 31st December, 1934 ...	190	126	315
New admissions, 1935	31	18	49*
Re-admitted once in 1935... ...	36	25	61
Re-admitted twice in 1935	2	5	7
Re-admitted thrice in 1935	2	...	2
Re-admitted four times in 1935	1	...	1
Total number treated in Leprosy Hospital, 1935 ...	262	173	435
Died in Leprosy Hospital, 1935	13	2	15
Daily average number treated	198.5	128.2	326.7
Death rate	4.9	1.1	3.4
Highest number of patients, 1935	204	134	338
Lowest number of patients, 1935	188	124	312

*Includes 8 births in the Hospital.

(2)—TABLE SHOWING NUMBER OF ADMISSIONS, DISCHARGES, DEATHS, ETC., CLASSIFIED ACCORDING TO RACE AND SEX.

	Europeans.				East Indians.				Chinese.		Aboriginal Indians.		Black.		Mixed Races.		Total.		Grand Total.
	Other than Portuguese.		Portuguese.		East Indian Immigrants.		B. G. East Indians.												
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Remaining on 31st December, 1934 ...	1	...	9	3	34	11	28	14	3	3	...	...	86	70	29	24	190	125	315
New admissions in 1935 ...	...	...	1	...	4	2	8	4	2	...	...	...	12	7	4	5	31	18	49
Re-admitted once in 1935 ...	...	...	2	1	10	2	12	9	...	1	...	...	9	10	3	2	36	25	61
Re-admitted twice in 1935 ...	...	...	...	...	...	...	1	3	...	...	...	...	...	...2	1	...	2	5	7
Re-admitted thrice in 1935 ...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	2	...	2
Re-admitted four times in 1935 ...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
	1	...	12	4	49	15	50	30	5	4	...	...	108	89	37	31	262	173	435
Absconded during 1935 ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1
New discharges in 1935 ...	...	...	1	...	9	...	4	5	...	...	...	...	7	8	1	1	22	14	36
Re-discharged once in 1935 ...	...	...	1	...	4	6	8	6	...	1	...	...	3	3	...	3	16	19	35
Re-discharged twice in 1935 ...	...	...	...	...	1	...	1	3	...	...	...	...	2	2	1	...	5	5	10
Re-discharged thrice in 1935 ...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	...	2
Deaths during 1935 ...	...	...	...	...	2	...	2	...	...	1	...	...	6	1	3	...	13	2	15
	...	...	2	...	17	6	17	14	...	2	...	...	18	14	5	4	59	40	99
Total remaining on 31st December, 1935 ...	1	...	10	4	32	9	33	16	5	2	...	...	90	75	32	27	203	133	336

(3) TABLE SHOWING CLASSIFICATION OF PATIENTS ACCORDING TO DISTRICT, FORM OF LEPROSY AND OCCUPATION.

County of Demerara.	M.	F.	T.	County of Berbice.	M.	F.	T.	County of Essequebo.	M.	F.	T.	Form of Leprosy.	M.	F.	T.
Georgetown ...	76	43	119	New Amsterdam ...	3	3	6	North Essequebo ...	5	3	8	Cutaneous ...	82	64	146
East Coast, Demerara.	31	25	56	East Coast, Berbice ...	19	10	29	Pomeroon River ...	3	6	9	Neural ...	108	65	173
West Coast, Demerara	14	12	26	West Coast, Berbice ...	4	2	6	South Essequebo ...	3	2	5	Mixed ...	13	3	16
East Bank, Demerara..	10	9	19	East Bank, Berbice ...	6	7	13	North West District...	1	...	1	Non Leper ...	...	1	1
West Bank, Demerara.	11	1	12	West Bank, Berbice ...	3	2	5								
Demerara River ...	8	4	12	Canje ...	3	4	7								
				Berbice River ...	3	...	3								
Total ...	150	94	244		41	28	69		12	11	23		203	133	336

Occupation.	M.	F.	T.
Labourers	141	31	172
Scholars	29	19	48
Housewives...	...	38	38
Seamstresses	...	21	21
Domestic Servants	...	20	20
Farmers	13	1	14
Clerks	2	...	2
Bookbinders	2	...	2
Washers	...	2	2
Cartman	1	...	1
Chauffeur	1	...	1
Cook	...	1	1
Schoolmaster	1	...	1
Seaman	1	...	1
Boiler Maker	1	...	1
Printer	1	...	1
Mechanic	1	...	1
Vagrant	1	...	1
Salesman	1	...	1
Carpenter	1	...	1
Tailor	1	...	1
Milk vendor	1	...	1
Electrican	1	...	...
Baker	1	...	1
Druggist	1	...	1
Shoemaker	1	...	1
Total	203	133	336

(4) TABLE SHOWING CLASSIFICATION OF PATIENTS ACCORDING TO AGE, RACE, AND SEX.

	Europeans.				East Indians.				Chinese.		Aboriginal Indians.		Mixed.		Black.		Total.		Grand Total.
	Other than Portuguese.		Portuguese.		East Indian Immigrants.		B.G. East Indians.												
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1 to 5 years	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1	1	2	3
6 to 10 ,, ...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	1	2	2	3	5
11 to 20 ,, ...	...	...	3	2	...	...	2	4	...	1	...	...	8	6	17	13	30	26	56
21 to 30 ,, ...	...	...	2	1	...	...	7	4	2	...	...	...	13	12	23	19	47	36	83
31 to 40 ,, ...	...	...	2	...	...	...	10	4	2	...	...	...	5	6	14	16	33	26	59
41 to 50 ,, ...	1	...	2	1	16	2	12	2	...	...	...	...	5	2	18	12	54	19	73
51 to 60 ,, ...	...	...	1	...	13	7	1	...	1	...	...	...	1	1	11	9	28	17	45
61 to 70 ,, ...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	2	2	5	2	7
71 to 80 ,, ..	...	...	...	...	...	...	...	...	...	1	...	...	...	...	3	1	3	2	5
Total ...	1	...	10	4	32	9	33	16	5	2	..	...	32	27	90	75	203	133	336

D.—Helminthic Diseases.

ANKYLOSTOMIASIS.

82. 91 cases were treated in public hospitals with 7 deaths compared with 90 cases and 8 deaths in 1934. 50 cases were treated in out-patient departments as against 212 cases in 1934. The deaths registered as due to the same disease throughout the colony were 9 compared with 22 in 1934.

E.—Quarantinable Diseases.

83. There were no cases of plague, cholera, yellow fever or typhus during the year.

84. An outbreak of alastrim is referred to in Sections II. and XII. of this report.

III.—Vital Statistics.

85. The population on the 31st December, 1935, as estimated by the Registrar General, was 328,219 (164,046 males and 164,173 females).

86. There were 11,262 births and 6,762 deaths. The natural increase of population was therefore 4,500.

87. The number of immigrants (7,705) exceeded the number of emigrants (7,157) by 548.

88. The actual increase in the population for the year was 5,048 as against 1,911 persons for 1934.

89. The following table which is derived from the report of the Registrar General shows the population, the number of births and deaths, the birth-rate and death-rate per 1,000 of the estimated population, the deaths of children under one year of age, the infantile death-rate per 1,000 births, and the number of still-births from 1925 to 1935:—

(1) Year.	(2) Population.	(3) Births.	(4) Deaths.	(5) Birth rate.	(6) Death rate.	(7) Deaths of Children under 1 year.	(8) Infantile Death rate per 1,000 Births.	(9) Still-births.
1925 ...	304,412	10,197	7,352	33·5	24·2	1,582	155	787
1926 ...	306,844	10,653	7,837	34·7	25·5	1,696	159	736
1927 ...	308,473	10,041	8,024	32·6	26·0	1,589	158	777
1928 ...	307,784	8,702	8,575	28·3	27·9	1,607	185	731
1929 ...	309,676	9,824	7,281	31·7	23·5	1,434	146	703
1930 ...	312,489	10,438	7,174	33·4	23·0	1,529	146	697
1931 ...	313,619	9,853	6,848	31·4	21·8	1,373	139	621
1932 ...	317,813	10,825	6,694	34·1	21·1	1,503	139	651
1933 ...	321,260	10,461	7,848	32·6	24·4	1,613	154	627
1934 ...	323,171	9 301	7,980	28·8	24·7	1,567	168	578
1935 ...	328,219	11,262	6,762	34·3	20·6	1,372	122	658

90. *Births.*—11,262 births (5,657 males and 5,605 females) were registered. This is the highest number recorded for the colony and is equivalent to a birth-rate of 34.3 per 1,000 of the population.

91. The number of still-births recorded was 658, which was in proportion of 5.8 to every 100 children born alive. The average for the ten years, 1925 to 1934, was 690.8 being 6.7 per cent. of the average number of registered live births for the same period.

92. *Deaths.*—6,762 deaths (3,563 males and 3,199 females) were registered giving a general death-rate of 20.6 per 1,000 of the population, the lowest yet recorded for British Guiana. The average death-rate for the last five years was 22.5 while that for the previous quinquennial period was 25.2 per 1,000.

93. The statement below is a return of deaths occurring in the whole colony during each quarter of the year for the last five years:—

	1931.	1932.	1933.	1934.	1935.
1st Quarter ...	2,055	1,596	2,420	2,891	1,821
2nd Quarter ...	1,390	1,432	1,625	1,894	1,676
3rd Quarter ...	1,673	1,665	1,752	1,494	1,665
4th Quarter ...	1,730	2,001	2,051	1,701	1,600

94. *Infantile Mortality.*—The number of deaths under one year of age was 1,372 which equalled a rate of 122 per 1,000 registered births—distinctly the lowest figure recorded for the colony. The previous lowest record was in 1931 and 1932 when it stood at 139 in each year.

95. The number of deaths in the five principal groups during 1933, 1934 and 1935 was as follows:—

	1933.	1934.	1935.
Congenital debility, etc. ...	447	461	385
Fever (Malaria and unqualified) ...	296	278	...
Malaria	...	...	138
Undefined Fever	...	...	82
Premature Birth, etc.	236	255	222
Pneumonia and Bronchitis	237	147	182
Bowel complaints (including Dysentery, Diarrhoea and Enteritis) ...	192	236	151

96. *Maternal Mortality.*—The statistics (per 1,000 live births) for the years 1933, 1934 and 1935 were as follows:—

	1933.	1934.	1935.
The whole colony	12.1	13.1	11.0
Public Hospitals	47.3	35.9	42.6
Infant Welfare and Maternity League	4.7	7.0	7.1
Sugar Estates	15.8	15.9	8.1*

NOTE.—*This figure should be accepted with some reserve. Further enquiry is being made into the classification of the maternal mortality on sugar estates.

97. The following return is taken from the Registrar-General's detailed return of causes of deaths for the years 1933, 1934 and 1935:—

The Puerperal State—

Causes of Death.	Deaths.		
	1933.	1934.	1935.
Accidents of pregnancy	22	19	22
Other accidents of labour	6	8	13
Puerperal haemorrhage	14	14	10
Puerperal sepsis	15	18	25
Puerperal albuminuria and convulsions ...	24	21	21
Puerperal phlegmasia alba dolens, embolism and sudden deaths	1	3	5
Other causes ...	45	39	28
Total ...	127	122	124

98. 552 cases of diseases of puerperal state were treated in public hospitals with 51 deaths. In 1934 there were 455 cases and 42 deaths.

99. The number of normal confinements managed in public hospitals was 1,267 including 33 remaining from the previous year.

City of Georgetown.

100. Below is given a table derived from the Registrar General's report showing in parallel columns separate statistics for the Municipal area and for the

Georgetown Registration District which includes certain districts outside the municipal boundaries :—

	City of Georgetown.	
	Municipal Area	Registration Area.*
Estimated Population	63,453	65,938
No. of Births	1,797	2,041
Birth-rate	28.3	31.0
No. of Deaths	1,217	1,297
Death-rate per thousand	19.1	19.7
Infantile Mortality per thousand	106	102
Deaths from typhoid and para-typhoid fevers	5	6
Deaths from malaria	79	89
Deaths from undefined fever	...	...

*The deaths of persons in the Hospitals and other Public Institutions in Georgetown have in each case been returned as occurring in the district from which the patients came.

Town of New Amsterdam.

101. The estimated population was 9,379. The number of births registered was 345, *i.e.* a birth-rate of 36.8 per thousand compared with 282 or a rate of 30.6 per thousand in 1934.

102. There were 188 deaths, *i.e.* a death-rate of 20.0 per thousand compared with 213 deaths or a rate of 23.1 per thousand in 1934.

103. The infant mortality was 122 per thousand compared with 163 per thousand in 1934.

104. Malaria fever was the cause of 11 deaths compared with 13 in 1934. Undefined fever was the cause of 3 deaths.

105. There were 7 deaths from typhoid and para-typhoid fevers compared with 4 for 1934.

106. The following tables give the vital statistics for each registration district in the colony for the year 1935 and return of vital statistics for Georgetown and New Amsterdam for the years 1935, 1934 and 1933 :—

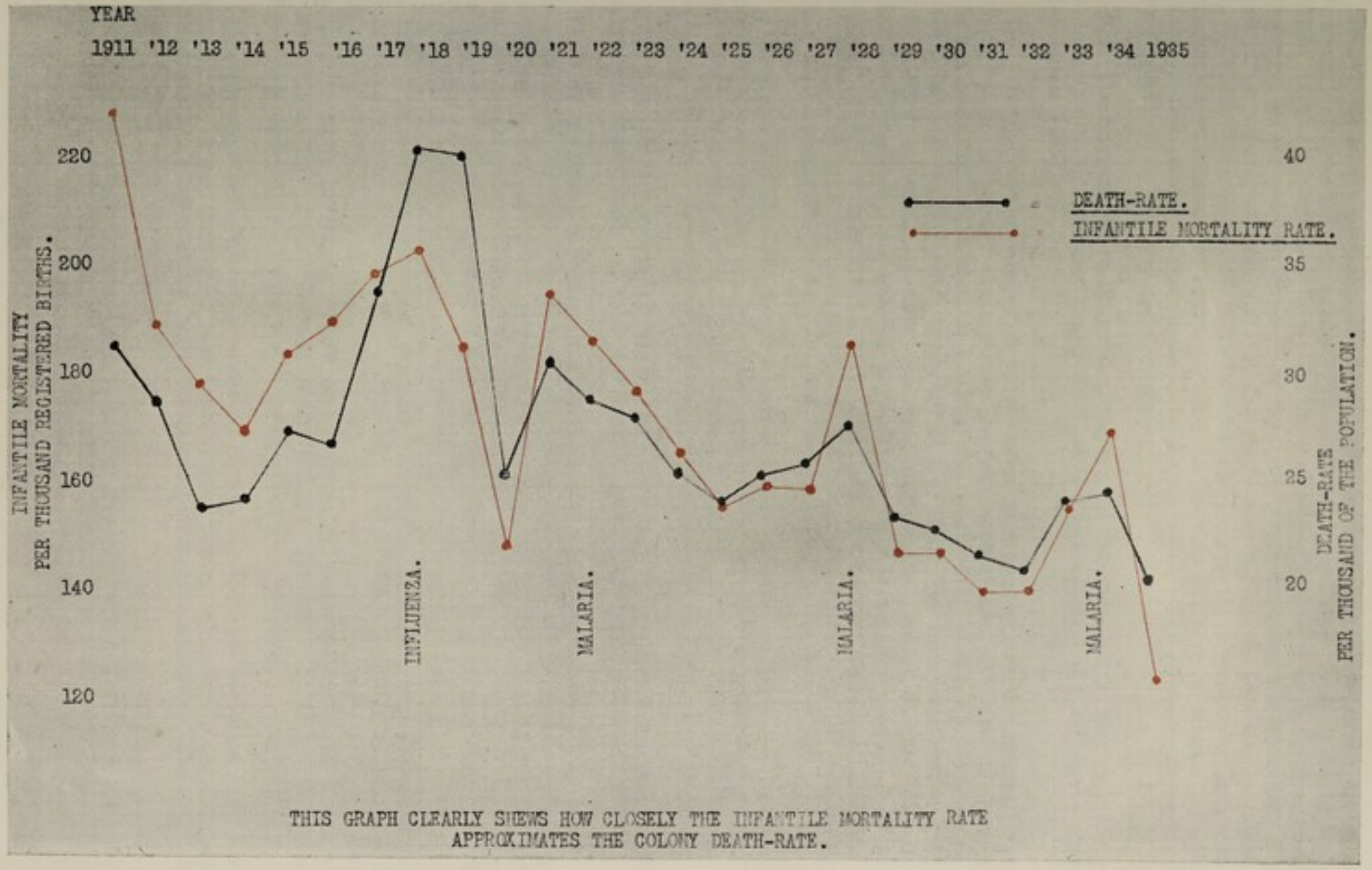
RETURN OF VITAL STATISTICS FOR EACH REGISTRATION DISTRICT IN THE COLONY FOR THE YEARS 1935, 1934, 1933.

District.	Estimated Population.	Births.	Deaths.	Annual rate per 1,000 living.		No. of deaths due to							Still-Births.	No. of deaths of children under one year of age.	Deaths of children under one year of age to 1,000 registered births.
				Births.	Deaths.	Typhoid and Para-typhoid Fevers.	Intestinal Disorders over one year.	All Renal Diseases.	All Respiratory Diseases.	Malarial & undefined Fevers.	Phthisis and other forms of Tuber-culosis.	Intestinal Disorders under one year.			
Skeldon ...	15,035	634	172	42·2	11·4	2	7	20	28	20	3	10	41	49	77
Port Mourant ...	24,746	961	354	38·8	14·3	2	10	25	62	35	9	12	42	70	73
Lower Canje ...	10,818	308	198	28·5	18·3	...	13	23	37	27	7	9	11	31	101
Upper Canje ...	691	25	14	36·2	20·3	...	...	...	1	1	...	2	1	5	200
New Amsterdam ...	9,379	345	188	36·8	20·0	7	6	10	23	14	10	2	46	42	122
Highbury ...	2,642	75	81	28·4	30·7	...	4	5	19	12	3	2	6	15	200
Mara and Upper Berbice River ...	2,705	93	68	34·4	25·1	...	3	3	13	8	1	...	5	11	118
Cotton Tree ...	13,651	521	244	38·2	17·9	...	10	17	28	33	4	14	19	61	117
Mahaicony ...	11,406	443	146	38·8	12·8	...	8	3	15	30	6	5	17	34	77
Mahaica ...	13,092	468	315	35·7	24·1	3	6	27	50	44	9	11	21	80	171
Buxton ...	21,592	758	519	35·1	24·0	13	13	43	114	62	13	7	54	110	145
Plaisance ...	23,308	869	582	37·3	25·0	7	20	52	95	80	21	11	39	132	152
Georgetown ...	65,936	2,041	1,297	31·0	19·7	6	48	110	144	100	86	15	159	209	102
Peter's Hall ...	19,366	598	513	30·9	26·5	7	20	44	90	47	25	14	29	114	191
Demerara River ...	8,157	219	134	26·8	16·4	...	3	8	18	26	16	2	8	30	137
Belle Vue ...	14,002	432	384	30·9	27·4	2	17	44	49	69	22	5	23	64	148
Leonora ...	13,165	560	283	42·5	21·5	7	10	13	39	71	10	11	28	62	111
Philadelphia-Leguan	14,277	496	380	34·7	26·6	6	22	32	74	70	5	7	35	73	147
Up. Essequibo River	1,049	5	26	4·8	24·8	...	1	1	4	7	2	...	...	3	600
Bartica ...	4,788	100	68	20·9	14·2	...	5	1	12	15	1	...	5	11	110
Up. Mazaruni River..	2,237	2	19	·9	8·5	...	2	1	3	5	...	...	1	1	500
Wakenaam ...	3,942	108	107	27·4	27·1	2	6	17	10	12	5	1	10	19	176
Suddie ...	8,003	295	202	36·9	25·2	2	12	24	29	38	6	5	22	48	163
Anna Regina ...	11,068	375	224	33·9	20·2	3	12	21	32	50	3	4	22	48	128
Pomeroon ...	5,721	262	104	45·8	18·2	...	4	4	5	32	1	1	3	29	111
North West ...	7,441	269	140	36·2	18·8	...	5	2	18	46	6	...	5	21	78
Males ...	164,046	5,657	3,563	34·5	21·7	44	143	288	619	485	147	78	370	726	128
Females ...	164,173	5,605	3,190	34·1	19·5	25	124	262	391	469	127	72	288	645	115
Persons ...	328,219	11,262	6,762	34·3	20·6	69	267	550	1010	954	274	150	658	1 372	122
For Year 1934 ...	323,171	9,301	7,980	28·8	24·7	85	678	585	1004	1203	253	236	578	1,567	168
For Year 1933 ...	321,260	10,461	7,848	32·6	24.4	68	454	528	1127	1140	229	192	627	1,613	154

RETURN OF VITAL STATISTICS FOR GEORGETOWN AND NEW AMSTERDAM FOR THE YEARS 1935, 1934, 1933.

District.	Estimated Population.	Births.	Deaths.	Annual rate per 1,000 living.		No. of deaths due to							Still-Births.	No. of deaths of children under 1 year of age.	Deaths of children under one year of age to 1,000 registered births.
				Births.	Deaths.	Typhoid and Para-typhoid Fevers.	Intestinal Disorders over 1 year.	All Renal Diseases.	All Respiratory Diseases.	Malarial & undefined Fevers.	Phthisis and other forms of Tubercu-losis.	Intestinal Disorders under 1 year.			
Georgetown, 1935 ...	65,938	2,041	1,297	31·0	19·7	6	48	110	144	100	86	15	159	209	102
Georgetown, 1934 ...	64,931	1,902	1,461	29·3	22·5	14	107	98	154	108	92	31	127	275	145
Georgetown, 1933 ...	64,207	1,861	1,331	29·0	20·7	10	74	82	161	81	90	24	113	236	127
New Amsterdam, 1935	9,379	345	188	36·8	20·0	7	6	10	23	14	10	2	46	42	122
New Amsterdam, 1934	9,206	282	213	30·6	23·1	4	16	15	19	13	8	6	40	46	163
New Amsterdam, 1933	9,119	280	215	30·7	23·6	4	10	10	30	21	12	10	38	36	129

NOTE.—The deaths of persons in the Hospitals and other Public Institutions have in each case been returned as occurring in the District from which the patients came.



THIS GRAPH CLEARLY SHEWS HOW CLOSELY THE INFANTILE MORTALITY RATE APPROXIMATES THE COLONY DEATH-RATE.

GENERAL COMMENTS ON THE VITAL STATISTICS.

107. Prior to the cessation of the indenture system of immigrants the males in the population exceeded the females. The last immigrant ship from India arrived in 1917. In 1911 the females exceeded the males for the first time in the history of the colony. In the ensuing three years the males again exceeded the females by 97, 172 and 265 persons respectively. In the year under review the position has again been reversed, there being 127 more females than males. It is probable that, with a few possible exceptions, in course of time the position will become similar to that obtaining in the countries uninfluenced by immigration. The above figures are, of course, influenced by arrivals and departures.

108. The marked rise in the natural increase of the population was gratifying as compared with the previous year. In 1934 the figures stood at 1,321, in the year under review 4,500.

109. The figures for births and deaths are also exceptionally favourable. For the first time in the history of the colony (records commence 1869) the number of births has exceeded eleven thousand, whilst the death-rate (20.6) is the lowest ever recorded, the previous lowest figure being 21.1 in 1932. The high birth-rate of 34.3 has only been exceeded on four occasions during the present century and by fractional differences. As regards deaths, an interesting comparison may be observed between the years 1877 and 1935. In the former year the population stood at 228,000 odd and the number of deaths was 8,677. In the year under review, with a population of 328,000 odd the number of deaths was 6,762.

110. A third, if smaller, record occurred in the number of deaths of children under one year of age, the figures standing at 1,372. In 1931 the figure was 1,373. In 1870, with a population of 209,000 exactly the figure stood at 1,365—which, incidentally, was itself the lowest figure recorded during the ensuing sixty years.

111. The infantile mortality rate of 122 was lower by seventeen per thousand than any previously recorded rate, it being 139 in both the years 1931 and 1932.

112. As the graph will show, the death-rate of the colony appears very largely to be determined by the infantile mortality rate. In 1918 the influenza epidemic, affecting as it did the adult population more than the infants, is clearly evidenced whilst the ensuing three malarial epidemics of 1921-22, 1927-28 and 1933-34 show equally clearly how intimately infants under one year of age are associated with that disease.

113. The average infantile mortality rates for the past six quinquennial periods have been as follows: 220 (1906-10), 190 (1911-15), 189 (1916-20), 176 (1921-25), 159 (1926-30) and 144 (1931-35), thus revealing a steady and appreciable improvement in infant health and welfare, and consequently in the health of the mother, and this in turn reflects directly upon the generally higher hygienic and sanitary standards of living which yearly must be prevailing.

114. As regards the maternal mortality figures considerable variation has been observed. It is not impossible that the source of this variation lies in the different classification being adopted by institutional and private practitioners. The question is further being investigated.

115. No special outbreak of any infectious diseases occurred which might have affected the mortality figures, but an interesting feature is revealed with respect to the deaths which occurred during the last quarter of the year. The usual rise in the number did not occur and in fact it was actually less. It is possible that meteorological factors influencing chest conditions may have been associated.

116. As regards the vital statistics for the Registration District of Georgetown the year under review for the first time showed an excess of births over deaths, the

figures being 2,041 and 2,024 respectively, and the excess 17. It is hoped that this favourable aspect will not only be maintained but gradually strengthened.

117. Unfortunately the Town of New Amsterdam still returns an excess of deaths over births, the figures being 392 deaths with 345 births, an unfavourable excess of 47. There is still much to be desired in the general sanitary state of the town and it is hoped that every endeavour possible will be made in the ensuing years to reverse this position. Chief among the requirements must be placed improvement in the town drainage and the filling up and grading of low lying areas both within and immediately without the town. There appears to be no valid reason other than on financial grounds, why the vital statistics of the second town of the Colony should not equal, if not surpass, those for the capital city.

118. Turning to the infantile mortality rate it is found that where that for Georgetown for the year under review was 102 per 1,000 registered births, the return for New Amsterdam was 122. Whilst it must be admitted that facilities in the city are greater for preventive and curative work, and that the city is properly sewered, the figure for New Amsterdam remains unduly high. Whereas in New Amsterdam the principal cause of death was "Diseases of Early Infancy" (31 deaths), (Pneumonia and Bronchitis (23), and Malarial and Undefined Fevers (14) falling to second and third places respectively), in the city of Georgetown "Diseases of Early Infancy" occupies only the fourth place (91) in statistical importance.

119. Taken as a whole, the vital statistics of the colony for the year under review reveal the continued and favourable effects of persistent endeavour on the part of the authorities concerned towards the amelioration of the public health and in the gradual raising of the standards of sanitation and of cleaner living in the community.

IV.—Hospitals and Dispensaries.

120. The public hospitals in the colony (7) provide 931 beds. The nominal bed strength of estate hospitals was 1,540 while "Colonna House" (a private hospital in Georgetown) can accommodate 48 cases.

121. The daily average number of patients in the Government hospitals (excluding Potaro and Kamakusa) was ;—

	1933.	1934.	1935.
Public Hospital, Georgetown ...	541	593	572
Public Hospital, New Amsterdam...	143	146	150
Public Hospital, Suddie ...	74	72	79
Public Hospital, Bartica ...	14	17	17
Public Hospital, Mabaruma ...	29	22	24

It will be noted that these figures show a tendency to increase which will require to be met by extension of certain hospital buildings.

122. The total number of patients admitted to Government hospitals was 19,791 as compared with 19,143 in 1934, 19,038 in 1933 and 18,290 in 1932—again a steady increase.

123. The table below shows the number of new admissions to hospital during the year and furnishes approximate figures of admissions of the same patients on one occasion or more occasions. The total thus furnishes in truer perspective the

actual amount of sickness occurring in the colony and treated at the public hospitals :—

IN-PATIENTS.

Hospital.	Total admissions during year.	Persons admitted on one occasion (approx.)	Persons admitted on two occasions.	Persons admitted on more than two occasions (approx.)
Public Hospital, Georgetown ...	13,183	11,791	504	128
Public Hospital, New Amsterdam	2,744	2,485	101	19
Public Hospital, Suddie ...	2,654	2,534	42	12
Public Hospital, Bartica ...	603	550	25	1
Public Hospital, Mabaruma ..	501	453	18	4
Public Hospital, Kamakusa ...	47	45	1	...
Public Hospital, Potaro ...	59	59	...	...
Total	19,791	17,917	691	164

124. Similar increases are observed in the number of patients who sought treatment at the out-patient departments of public hospitals. The figures are as follows :—

1931	...	...	66,637
1932	...	...	53,245
1933	...	...	58,308
1934	...	...	61,640
1935	...	...	64,803

125. It is anticipated that part of this increase will more than likely be permanent and necessitate extension of hospital buildings.

126. The principal diseases treated in Government hospitals were :—

Diseases.			Cases.	Deaths.
Malaria (including Blackwater Fever)		...	2,545	164
Dysentery	...	...	109	14
Enteric Fever	...	...	149	44
Bowel Diseases	...	...	255	39
Pnuemonia (all forms)	...	...	245	149
Tuberculosis (all forms)	...	...	487	146
Bronchitis	...	...	753	82
Nephritis	...	...	549	111
Diseases of the Heart (all forms)		...	413	143
Venereal Diseases	...	...	1,386	51
The Puerperal State	...	...	1,819	51

127. The Committee appointed to enquire into the administration and general organisation of the medical services of the colony visited the principal public hospitals and examined particularly the question of the need for increased accommodation for patients and staff.

128. During the year repairs and renovations were continued at the Georgetown hospital and included improvements in the surgical block, the resident surgeon's and medical officers' quarters and asphalting of all pathways while the water supply was amplified and a new clinic for venereal diseases—a grant from the Colonial Development Fund—and more satisfactory offices for the steward's department were constructed. The building which houses the X-ray apparatus is inadequate not only from the point of view of insufficient accommodation but from the more important aspect of safety to all concerned. A new department will be built in 1936.

129. The Berbice hospital at New Amsterdam has felt the strain of an increasing number of patients and steps will require to be taken in the very near future to provide appropriate accommodation for floor bed cases. It was originally intended to extend this hospital in a westerly direction. The scheme should now be gradually

completed, making proper provision for cases of tuberculosis and other infectious diseases. In order to house temporarily cases of leprosy and of mental diseases until arrangements are made for transfer to the institution concerned, two small buildings were erected on suitable sites within the hospital precincts.

130. About twenty years ago the accommodation of the Bartica hospital was reduced from 35 to 14 beds. The present accommodation is 19 beds. The more recent development of industries at Mazaruni and in the interior are demanding a larger hospital, and general enlargement of buildings especially for male patients with provision of electric light is contemplated next year. The number of admissions in 1935 was 603 as compared with 487 in 1934.

131. At the Public Hospital, Suddie, several minor improvements were effected in the course of the year. Here, the more urgent needs are better accommodation for paying patients and in respect of the out-patient department and pharmacy.

132. As soon as credit becomes available the outstanding requirements in connection with Mabaruma Hospital—amplification of water supply, provision of electric light, and extension of nurses' quarters—will be completed.

133. The private hospital in Georgetown under the management of Dr. Craigen, Dr. Romiti and Dr. Coia continued to provide valuable medical and surgical assistance especially to those of the community requiring such treatment who are normally taken care of in nursing homes. The daily average number of beds occupied was 45. The total admissions were 976 and 650 surgical operations were performed including 430 of a major nature.

134. The training of nurses continued at the Government hospitals in Georgetown, New Amsterdam and Suddie. The annual examination for the Government graduate nurses' certificate was held in October, 1935. The following were the results of the examinations :—

Training School.	First Professional Examination.	Final Examination.
Georgetown Hospital ...	21	8
New Amsterdam Hospital ...	5	5
Suddie Hospital ...	...	1

135. In addition 36 pupil midwives were presented for the midwifery examination and 15 passed.

136. Table 2 shows the accommodation, number of patients and deaths, average stay, percentage of mortality on number treated and number of out-patients in each hospital.

137. Table 3 gives the classes of in-patients and out-patients treated and the number of prescriptions dispensed.

138. Table 4 gives in detail the diseases of out-patients and in-patients treated.

139. Table 5 is a return of the surgical operations performed.

140. The number of in-patients treated was 20,528 as compared with 19,935 in 1934.

141. The cost per caput per diem of patients treated, exclusive of medical officers' salaries, was :—

	1933. Cents.	1934. Cents.	1935. Cents.
Public Hospital, Georgetown ...	66.9	62.0	62.0
Public Hospital, New Amsterdam ...	70.2	70.5	83.6
Public Hospital, Suddie ...	70.7	72.5	65.3
Public Hospital, Bartica ...	83.6	74.2	80.1
Public Hospital, Mabaruma ...	54.8	79.7	74.3

Ophthalmic Department.

142. The staff consists of :—

Government Ophthalmologist.
One nurse in charge (whole time).
One assistant nurse and several part-time nurses.
One clerk.

143. The total number of cases treated during the year was 4,699 as against 4,046 for the previous year. The following table shows the distribution :—

Public Hospital.	In-Patients.						Out-Patients.					
	Paying.			Pauper.			Paying.			Pauper.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Georgetown	42	11	53	165	121	286	775	611	1,386	1,405	1,152	2,557
New Amsterdam ...	1	...	1	4	3	7	83	98	181	89	64	153
Suddie	...	...	...	3	3	6	10	8	18	37	14	51
Total	43	11	54	172	127	299	868	717	1,585	1,531	1,230	2,761

144. The following surgical operations were performed :—

	Public Hospital, Georgetown.	Public Hospital, New Amsterdam.	Public Hospital, Suddie.
Senile Cataract ...	140	...	...
After Cataract ...	6	...	...
Congenital Cataract ..	5	...	...
Chronic Iritis ...	3	...	...
Discission of Lens ...	1	...	...
Pterygium ...	18	2	1
Glaucoma ...	3	...	...
Entropion ...	4	...	...
Rupture of Cornea ...	4	...	...
Dacryocystitis ...	4	...	...
Prolapse of Iris ...	6	...	...
Leucoma of Cornea ...	4	...	...
Papilloma of Conjunctiva ...	2	...	...
Symblepharon ...	1	...	...
Epithelioma of Conjunctiva ...	1	...	...
Orbital Abscess ...	2	...	...
Narrow Socket ...	1	...	...
Tarsal Cyst ...	1	4	1
Tumour of Eyelid ..	...	2	...
Total ...	206	8	2

145. In addition 167 minor operations were performed at the out-patient department of the Public Hospital, Georgetown.

146. The number of cases refracted and prescribed glasses was 274.

147. Several cases were treated at the Leprosy Hospital.

148. 23 cases of trachoma were diagnosed and treated. This disease is now notifiable.

149. The revenue derived from all sources was $1,132.17 as compared with $1,063.42 in 1934.

Dental Department—Georgetown Hospital.

150. The staff consists of :—

Dental Surgeon (Part-time).
Clerk.
Assistant nurse.

151. The number of out-patients was 7,964 as compared with 7,235 in 1934. 5,050 were pauper cases (1,775 males, 3,275 females) and 2,914 poverty cases (1,498 males, and 1,416 females).

152. The revenue collected amounted to $416.28 compared with $500.28 for the previous year.

153. *Dental Treatment of School Children.*—A sum of $960 was voted on the 1935 Estimate for the dental treatment of children attending primary schools in Georgetown. The clinics were conducted as in the previous year by Dr. H. Whyte Cameron and Dr. J. L. S. Murray, Dental Surgeons. The schools assigned to Dr. Cameron were St. Philip's (Anglican) and St. Mary's (Roman Catholic), while Dr. Murray was given charge of Bourda (Roman Catholic).

154. The work done was as follows :—

By Dr. Cameron—	
Prophylactic treatment	329
Extractions	571
Amalgam fillings	194
Cement fillings	38
Gutta Percha fillings	22
By Dr. Murray—	
Prophylaxis	98
Extractions	464
Amalgam fillings	231
Porcelain fillings	1
Gutta Percha fillings	2
Pulp cappings	2
Hæmorrhage and socket attendance ...	1
Abscess attendances	7

155. The children attended to were accompanied by a teacher or a monitor. The treatment was well received on the whole by the children, and the dental surgeons were afforded the whole-hearted co-operation of the headmasters.

X-Ray and Electrical Department.

156. *Public Hospital, Georgetown.*—The staff of the department consists of ;—

Government Radiographer.
Assistant Government Radiographer.
Two nurses.

157. The work of this department still continues to increase. The Tuberculosis Society continued to make use of the department and a period of one hour has been reserved on Friday afternoons for dealing with their cases.

158. The total number of radiographic examinations made was 3,342, an increase of 470 on the total number for 1934. 149 cases were sent by private practitioners and district Government medical officers, 807 from the Tuberculosis Clinic, 40 from the King George V. Municipal Welfare Centre and 2,346 from the Public Hospital, Georgetown. The examinations are classified hereunder :—

Alimentary Tract (Barium Meals, etc.) ...	408
Colon (Barium Enemas)	11
Chests	1,270
Urinary Tracts	35
Gall Bladders	179
Teeth	42
Miscellaneous (Fractures, etc.)	1,397
Total	3,342

159. The number of radioscopic examinations made during the year was 1,373 as against 1,120 in 1934.

160. *X-Ray Treatment.*—43 cases were treated and 208 exposures made against 40 cases and 181 exposures in 1934. 18 were sent by private practitioners and Government medical officers in districts and 25 were from the Public Hospital, Georgetown. The nature of the cases was as follows :—

Keloids	...	...	2
Rodent Ulcers	...	...	8
Splenomegaly	...	...	3
Myeloma	...	...	1
Bursitis	...	...	1
Hyperidrosis	...	...	1
Cancer of Breast	...	...	3
Ringworm	...	...	2
Pruritus Vulvae	...	...	1
Tumours	...	...	3
Myelogenous Leukaemia	...	...	4
Warts ...	...	...	4
Dermatitis	...	...	2
Acne Vulgaris	...	...	2
Malignant Growths	...	...	1
Psoriasis	...	...	1
Fungroids	...	...	1
Eczema	...	...	1
Interstitial Keratitis	...	...	1
Uterine Haemorrhage	...	...	1
			43

161. *Electrical Treatment.*—The work done in this section shows a slight decrease. There were 202 patients and 6,635 treatments were given. 25 were sent by private practitioners and Government medical officers in districts.

162. The revenue collected during the year was $1,206.41 as against $1,143.08 in 1934.

163. *Public Hospital, New Amsterdam.*—The nature of the radiographic examinations was as follows :—

Chests	...	...	7
Dental Films	...	...	5
Miscellaneous	...	...	160
			172

164. No cases were treated by X-rays.

165. The revenue collected was $58.50 as against $47.30 for 1934.

TABLE 2.

PUBLIC HOSPITALS.

	Georgetown.			New Amsterdam.			Suddie.			Bartica.			Mabaruma.			Kamakusa.			Potaro.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Accommodation	346	269	615	92	69	161	45	47	92	10	9	19	15	15	30	8	...	8	6	...	6
Patients remaining in Hospital—1st January, 1935	287	218	505	71	52	123	49	33	82	7	5	12	9	6	15	...	...	...	...	...	...
Patients admitted during the year ...	7,315	5,868	13,183	1,545	1,199	2,744	1,398	1,256	2,654	458	145	603	274	227	501	42	5	47	59	...	59
Total	7,602	6,086	13,688	1,616	1,251	2,867	1,447	1,289	2,736	465	150	615	283	233	516	42	5	47	59	...	59
Patients discharged—cured	1,026	1,449	2,475	376	400	776	248	260	508	200	68	268	24	31	55	11	...	11	3	...	3
,, ,, relieved ...	5,053	3,081	8,134	865	543	1,408	958	798	1,756	191	60	251	209	164	373	22	4	26	52	...	52
,, ,, not relieved ...	500	765	1,265	105	100	205	52	44	96	46	7	53	14	4	18	7	1	8	...	...	...
,, ,, not sick ...	57	71	128	22	49	71	20	63	83	...	6	6	1	11	12	...	...	...	...	...	...
,, ,, died ...	656	509	1,165	154	114	268	128	85	213	16	6	22	22	16	38	2	...	2	4	...	4
Patients remaining in Hospital—31st December, 1935	310	211	521	94	45	139	41	39	80	12	3	15	13	7	20	...	...	...	...	...	...
Total Patients treated ...	7,602	6,086	13,688	1,616	1,251	2,867	1,447	1,289	2,736	465	150	615	283	233	516	42	5	47	59	...	59
The daily average number in Hospital during 1935	321·3	250·2	571·9	93·5	56·6	150·1	44	35·4	79·4	13·2	4·1	17·2	11·7	11·8	23·6	0·8	0·3	0·8	0·1	...	0·1
Average stay in days of patients discharged during the year 1935 ...	16·2	14·8	15·6	21·9	17·9	20·2	10·6	9·3	10·0	10·9	10·4	10·8	13.5	14·0	13·6	7·1	2·4	6·6	6	...	6·
Average stay in days of patients remaining on 31st December, 1935 ...	54·1	35·4	48	40·8	21·4	34·5	21·0	12·4	16·7	11·2	3·0	9·5	22·7	11·6	18·7	...	...	...	...	...	...
Average stay in days of patients died	14.4	16·8	15·4	18·2	12·3	15·7	7·6	8·7	8·2	4·9	6·8	5·5	11·2	7·3	9·7	1·9	...	1·9	4·5	...	4·5
Percentage of Mortality on number treated	8·6	8·4	8·5	9·5	9·1	9·3	8·8	6·6	7·7	3.4	4·0	3·6	7·8	6·9	7·4	4·8	...	4·3	6·8	...	6·8
Number of Out-Patients (exclusive of attendances for repeat medicines) ...	18,110	17,518	35,628	4,827	6,632	11,459	3,740	4,411	8,151	1,920	1,571	3,491	2,269	2,303	4,572	648	48	696	681	125	806

Table 3.

IN-PATIENTS DEPARTMENT, PUBLIC HOSPITALS, FROM 1st JANUARY TO 31st DECEMBER, 1935.

Class of Patients Treated.	Georgetown.	New Amsterdam.	Suddie.	Bartica.	North West District.	Kamakusa.	Potaro.
Seamen	31	...	...	...	...	...	...
Pay Patients	1,747	347	137	111	64	15	...
Policemen	252	47	16	...	2	2	...
Race:							
Europeans (other than Portuguese)...	119	17	5	1	5	1	...
Europeans (Portuguese)	550	17	56	10	11	...	...
Mixed	1,169	214	169	147	150	10	7
Blacks	6,971	1,450	674	290	72	30	49
East Indians	4,165	1,144	1,755	84	88	1	...
Chinese	104	17	1	3	2	...	...
Aboriginal Indians	105	8	76	80	188	5	3
Total	15,213*	2,867	2,736	615	516	47	59

*Exclusive of 505 patients remaining in hospital on 31st December, 1934.

OUT-PATIENT DEPARTMENT.—PUBLIC HOSPITALS.

	Georgetown.	New Amsterdam.	Suddie.	Bartica.	North West District.	Kamakusa.	Potaro.
Number of Out-Patients attended to with Pauper Certificates	19,983	5,592	7,088	1,289	4,642	...	...
Number of Out-Patients attended to with Poverty Certificates	14,219	4,793	1,048	2,202	167	...	...
Number of Out-Patients and casualties without Certificates	1,426	1,074	15	...	...	773	173
Number of Out-Patients treated during the year (exclusive of repeats)	35,628	11,459	8,151	3,491	4,572	696	806
Number of Government Employees attended to as Out-Patients	1,762	309	46	26	9	54	21
Number of Prescriptions dispensed for In-Patients	105,195	24,331	3,789	920	4,706	62	59
Number of Prescriptions dispensed for Out-Patients	48,268	16,433	11,291	7,171	5,508	773	855

TABLE 4.

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
I.—*Epidemic, Endemic, and Infectious Diseases.*																																
1. Enteric Group—																																
(a) Typhoid Fever	1	1	93	30	...	...	37	10	...	...	17	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	147	43
(b) Paratyphoid A	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(c) Paratyphoid B	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
(d) Paratyphoid C	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(e) Type not defined	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
2. Typhus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3. Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4. Undulant Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5. Malaria—																																
(a) Benign Tertian	91	30	260	9	...	...	139	...	...	...	...	...	5	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	96	32	390	9
(b) Quartan	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...
(c) Sub-Tertian	10	1	29	...	...	...	29	11	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	10	1	59	12
(d) Chronic Malaria	178	50	227	38	77	71	54	1	...	...	...	...	31	19	13	...	8	12	8	1	...	...	...	...	...	...	...	...	294	152	302	40
(e) Blackwater	...	...	7	2	...	...	1	...	...	...	...	...	2	...	1	...	...	...	1	1	...	...	...	...	...	...	...	...	2	...	10	3
(f) Unclassified	2,369	1,798	1,075	39	1,288	1,493	69	3	849	1,192	361	43	591	419	91	4	522	618	133	7	79	50	8	1	189	38	35	...	5,887	5,578	1,772	97
6. Small-Pox—																																
Alastrim	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	2	1	...	...
7. Measles	...	...	5	...	...	...	...	...	2	...	...	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	1	5	...
8. Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
9. Whooping-Cough	99	163	28	4	33	24	3	...	22	13	4	1	7	19	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10. Diphtheria	...	1	15	2	...	...	2	2	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	171	219	37	6
11. Influenza	44	48	77	...	65	73	36	...	42	63	29	...	2	3	2	...	6	2	...	...	47	9	1	...	2	1	...	...	...	1	19	5
12. Miliary Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	248	199	134	...
13. Mumps	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
14. Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
15. Epidemic Diarrhœa	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
16. Dysenteric Group—																																
(a) Amœbic	...	1	31	2	...	...	4	1	...	...	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	1	38	3
(b) Bacillary	1	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	2	1
(c) Unclassified	31	22	31	7	9	7	5	...	10	17	4	2	7	...	20	1	2	3	7	...	...	...	...	...	...	...	2	...	59	49	69	10
17. Plague	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
18. Yellow Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
19. Spirochætosis ictero-hæmorrhagica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20. Leprosy—																																
(a) Nodular	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...
(b) Anæsthetic	...	1	20	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	20	1
(c) Mixed	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
21. Erysipelas	1	...	5	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	6	1
22. Acute Poliomyelitis	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
23. Encephalitis Lethargica	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...

TABLE 4—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
I.—*Epidemic, Endemic and Infectious Diseases—(Contd.)*																																
24. Epidemic Cerebro-Spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25. Other Epidemic Diseases—																																
(a) Rubeola (German Measles)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Varicella (Chicken Pox)	...	1	...	21	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	23	...
(c) Dengue	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(d) Epidemic Dropsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(e) Yaws	...	5	5	4	...	...	1	...	14	7	8	...	1	...	1	...	140	90	4	...	...	...	...	...	1	...	1	...	161	102	19	...
26. Glanders	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
27. Anthrax	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
28. Rabies	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
29. Tetanus	...	...	...	19	17	...	...	8	5	...	...	3	1	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...
30. Mycosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	31	24
31. Tuberculosis—																																
Pulmonary and Laryngeal	...	82	17	393	119	3	1	41	12	19	6	11	1	5	5	10	...	2	3	8	3	...	...	...	...	...	...	...	...	...	102	32	463	136
32. Tuberculosis of the Meninges or Central Nervous System	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
33. Tuberculosis of the Intestines or Peritoneum	...	...	...	11	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
34. Tuberculosis of the Vertebral Column	...	1	1	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	11	9
35. Tuberculosis of Bones and Joints	...	...	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	7	...
36. Tuberculosis of other Organs—																																
(a) Skin or Subcutaneous Tissue (Lupus)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...
(b) Bones	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(c) Lymphatic System	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(d) Genito-Urinary	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(e) Other Organs	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
37. Tuberculosis disseminated—																																
(a) Acute	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Chronic	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...
38. Syphilis—																																
(a) Primary	...	61	20	65	...	29	9	5	...	15	5	52	...	11	...	6	...	3	1	2	...	...	...	...	...	...	1	...	...	...	111	35	130	...
(b) Secondary	...	22	3	8	...	2	...	1	...	6	11	4	...	6	2	2	...	10	3	1	...	...	...	...	...	...	...	...	...	...	46	15	16	...
(c) Tertiary	...	202	210	382	24	33	36	31	5	76	45	6	2	13	6	2	1	2	5	5	...	...	...	...	...	...	...	...	...	...	326	302	433	32
(d) Hereditary	...	23	27	32	9	5	4	2	1	...	...	5	2	2	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	30	33	41	12
(e) Period not indicated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	2	...
39. Soft Chancre	...	19	5	31	...	...	...	6	...	...	...	1	...	...	...	...	...	...	...	...	...	...	2	...	...	...	3	...	...	...	22	5	36	...

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P. H., Georgetown.				P.H., New Amsterdam				P. H., Suddie.				P. H., Bartica.				P. H., N.W.D.				P. H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
I.—*Epidemic, Endemic and Infectious Diseases—(Contd.)*																																
40. A. Gonorrhœa and its complications	554	107	498	1	98	29	42	...	97	11	38	...	65	11	19	...	14	11	6	...	17	...	5	...	18	...	...	...	863	169	608	1
B. Gonorrhœal Ophthalmia	...	...	17	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	17	1
C. Gonorrhœal Arthritis	...	...	16	...	...	...	13	...	...	...	...	...	4	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	4	...	32	...
D. Granuloma Venereum	15	4	58	4	9	3	9	1	...	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	25	7	69	5
41. Septicæmia	...	..	7	7	...	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	9
42. Other Infectious Diseases—Trypanosomiasis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	3,811	2,517	3,483	327	1,642	1,750	535	56	1,184	1,370	546	55	768	489	182	8	711	748	181	14	146	29	16	1	214	39	40	1	8,476	6,942	4,983	462
II.—*General Diseases not mentioned above.*																																
43. Cancer or other malignant Tumours of the Buccal Cavity	1	...	7	2	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	8	3
44. Cancer or other malignant Tumours of the Stomach or Liver	6	1	18	8	...	...	1	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	1	21	9
45. Cancer or other malignant Tumours of the Peritoneum, Intestines, Rectum	...	...	8	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	1
46. Cancer or other malignant Tumours of the Female Genital Organs	...	6	61	12	...	...	7	2	...	...	2	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	6	72	14
47. Cancer or other malignant Tumours of the Breast	...	2	7	2	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	7	2
48. Cancer or other malignant Tumours of the Skin	...	...	5	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	1
49. Cancer or other malignant Tumours of Organs not specified	2	1	21	7	...	...	...	...	...	...	1	1	...	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	2	1	26	8
50. Tumours non-malignant	9	14	49	1	...	...	11	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	14	60	1
51. Acute Rheumatism	...	...	2	...	...	...	3	...	5	14	...	...	...	...	...	...	1	1	...	...	11	...	...	...	8	4	...	...	25	19	5	...
52. Chronic Rheumatism	58	40	5	...	11	14	2	...	51	52	...	...	73	34	7	...	48	32	5	...	...	...	1	...	2	1	...	...	243	173	20	...
53. Scurvy (including Barlow's disease)	...	...	...	...	...	...	1	1	...	...	4	1	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	8	2
54. Pellagra	...	1	1	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	...
55. Beri-Beri	1	...	10	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	10	...
56. Rickets	4	1	1	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1	5	...
57. Diabetes (not including Insipidus)	8	35	53	11	7	5	12	5	..	...	4	...	...	3	...	...	...	...	1	1	...	...	...	...	1	...	...	...	16	43	70	17
58. Anæmia—																																
(a) Pernicious	...	3	11	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	...	...	2	...	...	...	...	...	...	...	...	3	11	...
(b) Other Anæmias and Chlorosis	59	112	28	2	41	86	24	4	33	47	2	...	3	2	3	...	...	...	...	...	...	...	...	...	...	...	...	...	138	252	57	6
59. Diseases of the Pituitary Body	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
II.—*General Diseases not mentioned above—(Contd.)*																																
60. Diseases of the Thyroid Gland—																																
(a) Exophthalmic Goitre	1	2	...	..	4	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	3	1	...
(b) Other Diseases of the Thyroid Gland—Myxoedema	3	8	5	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	8	6	1
61. Diseases of the Para-Thyroid Glands	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
62. Diseases of the Thymus	...	...	...	...	...	...	..	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
63. Diseases of the Supra-renal Glands	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
64. Diseases of the Spleen	6	...	7	3	2	2	1	...	3	1	...	...	...	...	...	...	...	...	..	..	...	...	...	...	...	...	...	...	11	3	8	3
65. Leuksemia—																																
(a) Leukaemia	...	...	4	1	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1
(b) Hodgkin's Disease	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...
66. Alcoholism	...	...	28	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	28	...
67. Chronic poisoning by mineral substances (lead, mercury, etc.)	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
68. Chronic poisoning by organic substances (Morphia, Cocaine, etc.)	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
69. Other General Diseases—																																
(a) Auto-intoxication	...	...	...	...	...	...	11	8	...	...	2	1	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	15	10
(b) Purpura Haemorrhagica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(c) Haemophilia	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...
(d) Diabetes Insipidus	..	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	..	...	...
Total	159	226	227	52	66	108	82	21	93	115	18	4	76	39	11	...	49	38	17	2	13	...	1	...	11	5	...	...	467	531	456	79
III.—*Affections of the Nervous System and Organs of the Senses.*																																
70. Encephalitis (not including Encephalitis Lethargica)	...	...	1	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
71. Meningitis (not including 24 or 32)	...	...	11	10	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	13	12
72. Tabes Dorsalis	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...
73. Other affections of the Spinal Cord	...	...	2	...	...	...	4	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	6	...
74. Apoplexy—																																
(a) Haemorrhage	4	6	41	20	...	...	...	...	...	...	7	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	6	48	22
(b) Embolism	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1
(c) Thrombosis	...	...	6	2	1	1	1	1	...	...	...	...	...	...	...	...	..	...	1	...	...	...	...	...	...	...	...	...	1	1	8	3
(d) Unclassified	...	...	...	...	1	...	...	...	1	10	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	10	2	...
75. Paralysis—																																
(a) Hemiplegia	26	46	79	3	8	6	8	2	1	3	6	...	...	...	1	...	...	2	2	...	2	...	1	...	...	...	...	...	47	59	97	5
(b) Other Paralyses	15	12	26	2	18	8	9	...	3	1	5	...	4	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	40	23	40	2

TABLE 4—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
III.—*Affections of the Nervous System and Organs of the Senses.*—(Contd.)																																
76. General Paralysis of the Insane ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
77A. Manis and Melancholia ...	...	1	8	...	...	2	5	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	14	...
B. Delusional Insanity ...	...	...	...	...	...	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...
C. Other forms of Mental Alienation ...	27	56	184	2	1	1	19	...	3	...	1	...	2	...	1	...	...	...	...	...	1	...	1	...	...	...	...	...	34	57	206	2
78. Epilepsy ...	35	27	38	...	11	8	7	...	5	14	6	...	6	4	1	...	1	1	...	...	3	...	...	...	...	...	...	...	61	54	52	...
79. Eclampsia, Convulsions (non-puerperal) 5 years or over ...	...	...	...	...	...	...	2	...	1	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	1	3	...
80. Infantile Convulsions (non-malarial) ...	...	...	...	...	...	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	4	3	...
81. Chorea ...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...
82. A.—Hysteria ...	1	7	21	...	...	1	1	...	...	...	2	...	...	1	1	...	...	...	1	...	...	...	...	...	...	...	...	...	1	9	26	...
B.—Neuritis ...	19	28	6	1	6	3	...	...	5	4	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	30	35	12	1
C.—Neurasthenia ...	10	16	28	...	...	...	2	...	1	1	2	...	2	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	13	22	32	...
D.—Neuralgia ...	80	160	4	...	4	9	1	...	12	31	13	...	4	3	1	...	5	34	1	...	3	...	...	...	4	3	...	...	112	240	20	...
83. Cerebral Softening (including Abscess of Brain) ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
84. Other Affections of the Nervous System	23	42	17	...	42	99	6	...	5	2	3	...	6	9	...	...	...	1	...	...	2	...	...	...	9	3	...	...	87	156	26	...
85. Affections of the Organs of Vision—																																
(a) Cataract ...	206	139	183	...	1	3	2	...	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	210	142	185	...
(b) Conjunctivitis ...	134	111	26	...	18	13	2	...	20	11	12	...	15	20	2	...	21	31	6	...	1	...	...	...	4	...	...	...	213	186	49	...
(c) Corneal Ulcer ...	70	33	53	...	5	2	6	...	...	2	...	...	...	2	1	...	4	...	2	...	...	...	...	...	...	...	...	...	79	39	62	...
(d) Glaucoma ...	22	19	12	...	6	2	1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	28	21	15	...
(e) Iritis ...	61	24	15	...	3	4	2	...	4	2	1	...	1	...	...	...	...	...	1	...	4	...	...	...	...	...	...	...	73	30	19	...
(f) Keratitis ...	39	37	14	...	6	4	3	...	4	...	1	...	...	...	...	...	...	1	2	...	...	...	...	...	...	...	...	...	49	42	20	...
(g) Ophthalmia ...	20	20	2	...	...	...	7	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1	...	...	21	21	10	...
(h) Optic Neuritis ...	4	35	6	...	1	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	1	...	50	37	8	...
(i) Pterygium ...	28	26	23	...	2	4	3	...	3	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	33	41	26	...
(j) Other Affections of the Eye ...	1,165	897	114	...	108	151	18	...	5	3	12	...	8	6	2	...	...	2	2	...	...	...	...	...	1	...	1	...	1,287	1,059	149	...
86. Affections of the Ear or Mastoid Sinus...	118	103	57	...	27	37	14	...	10	18	13	...	5	5	1	...	9	4	3	...	3	...	...	...	2	...	...	...	174	167	88	...
Total ...	2,160	1,856	978	40	271	363	131	4	85	163	98	4	53	57	13	...	42	78	21	...	19	...	2	..	26	7	2	...	2,656	2,464	1,245	48
IV.—*Affections of the Circulatory System.*																																
87. Pericarditis ...	...	...	4	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	3	...	4	4
88. Endocarditis—																																
(a) Acute ...	...	...	2	2	...	...	...	...	10	8	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	8	10	2
(b) Chronic ...	12	4	51	21	...	...	...	...	...	...	8	...	...	...	...	...	4	1	4	2	...	...	...	...	...	...	...	...	16	5	63	23
(c) Unclassified ..	34	25	12	3	...	...	1	...	12	4	36	3	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	47	30	49	6
89. Angina Pectoris ...	1	...	1	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	1	...

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths.
IV.—Affections of the Circulatory System.—(Contd.)																																
90. Other Diseases of the Heart—																																
A.—Valvular																																
(a) Mitral ...	5	2	21	9	1	..	2	...	2	2	...	...	14	4	8	...	2	1	1	...	...	...	...	...	...	...	...	...	24	9	32	9
(b) Aortic ...	17	5	12	6	10	15	3	2	1	...	...	...	3	4	1	...	4	1	9	2	...	...	...	...	...	...	...	...	35	25	25	10
(c) Tricuspid ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...
(d) Pulmonary ...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
B.—Myocarditis ...	51	23	120	59	15	11	27	8	8	5	11	3	5	4	6	1	1	...	2	2	...	...	...	...	...	...	...	...	80	43	162	73
C.—Unclassified ...	49	68	28	7	29	42	12	8	7	20	21	...	4	8	4	1	10	2	...	...	...	...	...	...	3	...	...	...	102	140	65	16
91. Diseases of the Arteries—																																
(a) Aneurism ...	6	1	37	7	2	1	2	...	...	1	5	1	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8	6	44	8
(b) Arterio-sclerosis ...	29	28	16	6	15	13	4	1	2	1	1	...	7	10	2	...	8	...	1	...	...	...	...	...	1	3	...	...	62	55	24	7
(c) Other Diseases ...	12	8	12	1	...	...	2	1	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	8	14	2
92. Embolism or Thrombosis (non-cerebral)	1	...	...	...	..	...	.	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...
93. Diseases of the veins—																																
(a) Haemorrhoids ...	226	47	124	...	13	6	46	...	16	3	8	...	3	5	4	...	...	1	...	...	2	...	...	...	...	...	...	...	260	62	182	...
(b) Varicose Veins ...	2	8	2	...	...	4	...	...	...	3	2	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	4	15	4	...
(c) Phlebitis ...	...	1	4	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	1	7	1
94. Diseases of the Lymphatic System—																																
(a) Filariasis ...	71	210	231	17	15	58	10	1	24	52	18	1	19	15	6	...	2	5	2	...	6	...	...	...	9	1	...	...	146	341	297	19
(b) Filarial Bubo ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
(c) Elephantiasis ...	10	3	14	...	...	...	1	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	3	17	...
(d) Lymphangitis, lymphadenitis (non-filarial) ...	109	45	44	...	48	36	16	.	2	...	7	1	...	...	8	...	2	...	2	...	2	...	...	...	2	...	...	...	169	81	77	1
(e) Unclassified ...	...	...	...	...	1	...	11	...	...	...	21	...	24	6	...	...	...	...	1	...	...	...	...	...	...	...	...	...	25	6	33	...
95. Haemorrhage of undetermined cause ..	...	...	...	...	...	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1
96. Other affections of the Circulatory System	1	...	...	...	2	2	2	2	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	2	2	2
Total ...	636	478	735	143	151	189	136	24	86	102	153	9	81	60	39	2	33	11	24	6	15	...	...	...	16	4	...	...	1,018	844	1,087	184
V.—Affections of the Respiratory System—																																
97. Diseases of the Nasal Passages—																																
(a) Adenoids ...	1	...	...	...	1	...	1	...	3	...	1	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	7	...	2	...
(b) Polypus ...	12	22	8	...	1	...	2	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	13	23	10	...
(c) Rhinitis ...	27	55	9	...	6	9	1	...	8	7	4	...	2	2	...	...	2	1	...	...	...	...	...	...	1	...	...	...	46	74	10	...
(d) Coryza ...	31	14	3	...	3	3	2	...	...	...	...	...	70	53	1	...	8	8	...	...	...	...	...	...	6	...	...	...	98	77	12	...
(e) Other diseases of nasal passages ...	19	24	48	...	2	5	4	...	4	9	5	...	5	7	...	...	1	...	2	...	...	...	...	...	2	...	...	...	33	45	59	...
98. Affections of the Larynx—																																
Laryngitis ...	28	25	6	2	6	10	1	...	7	6	18	1	3	7	...	...	...	2	...	...	...	...	...	...	4	...	...	...	48	50	28	3

TABLE 4—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P. H., Georgetown.				P.H., New Amsterdam				P. H., Suddie.				P. H., Bartica.				P. H., N.W.D.				P. H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients		In-Patients		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
V.—*Affections of the Respiratory System.*—(*Contd.*)																																
99. Bronchitis—																																
(a) Acute	6	1	22	...	2	3	46	17	103	109	12	...	5	3	3	...	...	...	...	...	1	...	...	...	6	...	...	...	123	116	83	17
(b) Chronic	261	106	310	51	424	452	92	10	256	139	30	...	104	86	13	...	58	78	1	...	20	...	...	...	5	...	...	...	1,128	855	446	61
(c) Undifferentiated	1,258	872	154	3	179	194	9	...	228	227	54	1	...	...	...	...	354	357	7	...	55	2	...	...	...	...	...	...	2,074	1,652	224	4
100. Broncho-pneumonia	4	1	49	27	...	...	18	12	...	...	14	10	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	4	1	83	49
101. Pneumonia—																																
(a) Lobar	1	1	58	34	...	...	7	5	...	...	17	14	...	...	8	1	...	...	4	2	...	...	...	...	...	...	...	...	1	1	94	56
(b) Unclassified	1	...	22	22	...	1	...	...	...	...	19	9	4	...	4	2	...	...	13	8	1	...	2	1	...	...	2	2	6	1	68	44
102. A. Pleurisy	18	11	27	...	11	7	7	...	1	3	8	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	30	21	43	1
B. Empyema	...	...	3	...	...	...	1	...	...	...	3	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...			8	...
103. Congestion of the Lungs	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	..	2	...
104. Gangrene of the Lungs	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
105. Asthma	214	57	143	12	98	52	41	4	370	215	70	6	18	8	8	1	100	40	16	...	5	...	...	...	2	...	...	...	807	372	278	23
106. Pulmonary Emphysema	...	...	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1
107A. Asphyxia	...	...	1	1	...	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	1
B. Other affections of the Lungs	12	13	16	8	4	8	8	...	4	1	5	...	...	...	...	...	2	2	...	...	7	...	...	...	19	5	1	...	48	29	30	8
Total	1,873	1,205	891	161	737	743	240	48	984	707	267	43	211	166	38	4	527	489	47	10	89	2	2	1	45	5	3	2	4,466	3,317	1,488	269
VI.—*Diseases of the Digestive System.*																																
108A. Diseases of Teeth or Gums—Caries, Pyorrhœa, &c.	131	198	46	...	57	60	12	...	4	12	...	...	50	29	1	...	71	77	...	...	31	1	...	...	37	3	...	...	381	389	59	...
B. Stomatitis	44	41	24	...	...	...	...	...	8	12	4	1	1	1	...	...	2	..	1	...	1	...	...	...	6	...	...	...	62	54	29	1
C. Glossitis, &c.	3	...	...	...	7	6	...	...	2	2	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	8	5	...
D. Other affections of the Mouth	6	3	2	...	24	24	4	...	1	7	13	...	2	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	35	34	22	...
109. Affections of the Pharynx or Tonsils—																																
(a) Tonsillitis	72	121	149	1	24	20	12	...	2	14	8	...	13	11	1	...	3	10	...	...	2	...	...	...	2	...	...	...	118	176	170	1
(b) Pharyngitis	51	44	10	...	10	23	6	1	4	5	1	1	3	2	1	...	...	3	...	...	8	1	...	...	2	1	...	...	78	78	24	2
110. Affections of the Oesophagus	4	2	6	1	...	...	...	...	...	...	3	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	4	3	9	1
111A. Ulcer of the Stomach—																																
(a) Gastric	21	8	5	2	...	1	4	1	5	3	9	...	2	...	...	...	3	...	5	1	...	...	1	...	...	...	...	...	31	12	21	4
(b) Pyloric	...	1	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	4	1
B. Ulcer of the Duodenum	94	42	77	7	1	...	1	1	8	...	1	...	3	...	3	...	...	...	...	...	1	...	...	...	...	...	...	...	107	42	82	8
112. Other affections of the Stomach—																																
(a) Gastritis	37	29	18	2	17	37	11	...	15	53	9	...	7	6	2	...	6	7	8	...	2	...	...	...	4	1	1	...	88	133	49	
(b) Dyspepsia	115	473	26	...	38	127	10	...	52	85	18	...	55	72	3	...	68	102	9	...	9	...	...	...	25	3	...	...	362	862	66	...
(c) Other affections of the Stomach	12	24	1	...	66	156	9	...	7	14	17	5	...	...	1	...	...	2	...	...	22	2	...	...	13	3	...	...	120	201	28	5

TABLE 4—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the Year 1935.

DISEASES.	P.H., Georgetown.				P.H., NewAmsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
VI.–Diseases of the Digestive System—(Continued)																																
113A. Diarrhœa and Enteritis—Under two years	69	43	10	4	45	38	11	2	...	...	31	2	5	5	...	...	13	21	1	...	...	...	...	...	...	...	...	...	132	107	53	8
B. Diarrhœa and Enteritis—Two years and over	78	65	101	16	39	24	32	9	...	...	43	6	17	5	8	...	11	10	3	...	...	...	...	...	...	...	...	...	143	104	187	31
C. Unclassified Diarrhœa and Enteritis	...	...	...	...	...	...	...	...	51	45	...	...	...	...	...	...	...	...	...	...	19	...	...	...	...	...	...	...	70	45	...	...
114A. Colitis	...	2	1	...	4	2	1	...	...	3	4	...	13	8	5	...	...	4	2	...	2	...	...	...	2	...	2	...	21	19	15	...
B. Ulceration	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
C. Sprue	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
115. Ancylostomiasis	27	4	73	7	5	1	1	...	5	6	16	..	1	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	39	11	91	7
116. Diseases due to Intestinal Parasites—																																
(a) Cestoda (Taenia)	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	..	...	...	...	...	...	1	...	...
(b) Trematoda (Flukes)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(c) Nematoda (other than Ancylostoma)—																																
Ascaris	3	1	17	1	19	21	4	...	...	...	1	...	3	2	...	...	204	228	4	...	...	.	...	...	...	.	...	...	229	252	26	1
Trichocephalus dispar	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Trichina	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dracunculus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Strongylus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Oxyuris	...	...	...	...	3	3	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	4	...	...
(d) Coccidia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(e) Other Parasites	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
(f) Unclassified	118	82	14	...	...	...	...	...	96	147	...	...	33	39	1	...	...	...	...	...	2	...	...	...	...	...	...	...	249	268	15	...
117. Appendicitis—																																
(a) Acute	1	...	12	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	14	2
(b) Sub-acute and chronic	2	...	14	...	1	...	4	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	3	...	19	...
(c) Unclassified	2	1	37	...	2	...	10	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	2	...	...	...	6	1	48	1
118. Hernia	59	8	239	5	1	...	36	3	...	1	10	...	1	...	2	1	1	...	1	...	1	...	...	...	...	...	...	...	63	9	308	9
119. A. Affections of the Anus, Fistula, &c	24	12	37	...	3	7	9	...	1	...	3	...	1	...	2	...	1	...	1	...	...	...	...	...	...	...	...	...	30	19	52	...
B.—Other affections of the Intestines—																																
(a) Enteroptosis	...	...	52	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	52	...
(b) Constipation	249	767	...	...	73	163	17	...	27	62	10	...	138	199	4	...	36	31	3	...	20	1	...	...	4	2	...	...	547	1,225	34	...
(c) Other affections	5	18	72	12	1	5	6	2	...	...	31	5	...	...	...	...	...	...	2	...	5	...	...	...	9	1	...	...	20	24	111	19
120. Acute Yellow Atrophy of the Liver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
121.—Hydatid of the Liver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
122. Cirrhosis of the Liver—																																
(a) Alcoholic	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Other forms	5	3	28	10	...	1	2	...	6	5	3	2	1	...	2	...	...	...	...	...	...	...	...	1	...	...	...	...	12	9	35	12
123. Biliary Calculus	4	5	65	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	5	65	5

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam.				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
VI.—*Diseases of the Digestive System*—(Continued).																																
124. Other affections of the Liver—																																
(a) Abscess	...	...	2	2	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3
(b) Hepatitis	3	2	23	1	6	9	7	1	13	15	5	...	...	1	1	...	4	2	1	...	4	...	1	...	...	...	...	...	36	29	38	
(c) Cholecystitis	11	15	70	1	...	...	2	...	5	1	..	...	1	1	3	...	...	...	1	...	...	...	...	...	...	...	...	...	17	17	76	1
(d) Jaundice	29	22	9	4	9	10	1	...	3	4	4	...	2	1	2	...	...	...	...	...	1	...	...	...	...	...	1	...	44	38	16	4
125. Diseases of the Pancreas	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
126. Peritonitis (of unknown cause)	1	...	7	7	...	...	1	1	...	...	5	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	13	10
127. Other affections of the Digestive System	34	63	15	...	...	1	3	...	11	20	3	...	...	...	...	...	1	1	2	...	22	...	...	...	12	...	...	...	84	85	23	...
Total	1,314	2,099	1,286	91	455	740	279	23	326	516	268	24	353	383	44	1	426	498	48	1	152	5	2	...	119	15	3	...	3,145	4,256	1,870	140
VII.—*Diseases of the Genito-Urinary System (non-Venereal)*—																																
128. Nephritis—																																
(a) Acute	...	...	17	2	...	...	...	...	...	...	7	...	...	2	2	...	1	2	1	...	...	...	.	...	4	...	...	...	5	4	22	2
(b) Chronic (129)	61	21	23	64	...	...	19	10	...	...	58	...	21	26	8	...	1	...	2	...	...	...	...	...	...	...	...	...	83	47	322	74
(c) Uraemia	1	...	10	7	...	...	5	4	...	...	21	2	1	...	...	...	...	...	2	...	...	...	...	...	...	...	...	1	2	...	37	14
(d) Unclassified	109	162	44	2	64	42	33	1	51	99	86	16	...	...	3	2	...	...	2	...	7	...	...	...	...	...	...	...	241	303	168	21
130. A. Chyluria (Non-filarial)	5	7	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	7	4	...
B. Schistosomiasis	...	...	...		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
131. Other affections of the Kidneys—Pyelitis, etc.	3	49	48	5	...	...	1	...	...	...	3	...	...	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	3	40	55	5
132. Urinary Calculus	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...
133. Diseases of the Bladder—Cystitis	44	31	19	7	13	16	14	1	...	...	7	...	11	14	6	...	1	5	1	...	...	...	..	...	1	...	...	...	70	66	47	8
134. A. Diseases of the Urethra—																																
(a) Stricture	19	9	56	5	16	...	10	...	10	1	5	...	1	...	1	...	...	...	...	...	3	...	...	...	...	...	...	...	49	10	72	5
(b) Other	111	21	9	...	53	10	26	...	10	2	15	...	...	...	4	1	7	2	3	...	...	...	...	...	...	...	...	...	181	35	57	1
B. Other Diseases of the Genito-Urinary System	31	35	21	1	52	58	15	4	8	3	8	...	9	12	3	...	...	...	...	...	2	1	...	...	...	...	...	...	105	109	53	5
135. Diseases of the Prostate—																																
(a) Hypertrophy	9	...	29	6	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	...	32	6
(b) Prostatitis	...	...	2	1	...	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	1
136. Diseases (non-venereal) of the Genital Organs of Man—																																
(a) Epididymitis	...	...	3	...	6	...	1	...	...	...	3	...	3	...	1	...	..	...	1	...	...	...	...	...	...	...	...	...	9	...	9	...
(b) Orchitis	69	...	19	1	35	...	6	...	...	..	5	...	8	...	1	...	...	...	1	...	8	...	...	...	10	...	.	...	130	...	32	1
(c) Hydrocele	196	...	167	...	9	...	37	...	11	...	18	1	12	...	1	...	1	...	...	...	...	...	...	...	1	...	...	...	220	...	223	1
(d) Ulcer of Penis	13	...	7	..	9	...	10	...	...	...	3	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	28	...	20	...
(e) Phimosis and Paraphimosis	47	...	100	...	3	...	22	...	2	...	12	...	...	...	3	...	...	...	...	...	...	..	...	...	...	...	1	...	52	...	138	...
(f) Other	19	...	65	4	13	...	11	...	...	...	9	...	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	35	...	88	

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the year 1935.

Diseases.	P.H., Georgetown.				P.H., New Amsterdam				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
VII.—Diseases of the Genito-Urinary System (non-Venereal)—Continued.																																
137. Cysts or other non-malignant Tumours of the Ovaries	...	...	13	1	...	...	1	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	18	1
138. Salpingitis	...	11	166	7	...	5	3	...	...	4	6	...	...	10	3	...	...	1	2	...	...	...	...	...	...	...	...	...	31	180	7
139. Uterine Tumours (non-malignant)	...	14	86	8	...	...	5	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	14	92	8
140. Uterine Hæmorrhage (non-puerperal)	...	10	4	...	...	2	2	...	...	...	...	...	...	13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	25	6	...
141. A. Metritis	...	...	43	1	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	46	1
B. Other affections of the Female Genital Organs—																																
(a) Displacements of the Uterus	...	6	45	...	...	2	...	...	...	1	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	46	...
(b) Amenorrhœa	...	81	...	...	...	106	...	...	...	11	8	...	...	19	...	...	...	3	...	...	...	...	...	...	...	...	...	...	220	8	...
(c) Dysmenorrhœa	...	51	13	...	...	35	8	...	...	1	3	...	...	33	3	...	...	5	1	...	...	1	...	...	...	...	...	...	126	28	...
(d) Leucorrhœa	...	457	21	...	...	126	17	...	...	166	29	...	...	39	2	...	...	6	3	...	...	...	3	...	...	3	...	...	796	75	...
(e) Other Affections	...	106	110	4	...	129	25	...	...	18	10	...	...	19	2	...	...	16	6	...	...	...	...	...	...	5	...	...	293	153	4
142. Diseases of the Breast (Non-puerperal)—																																
(a) Mastitis	...	21	6	...	...	20	3	1	...	2	3	...	...	5	...	...	...	2	...	...	...	...	...	...	...	1	...	...	51	12	1
(b) Abscess of Breast	...	6	34	...	...	1	9	...	...	3	4	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	10	49	...
Total	740	1,089	1,398	126	273	552	285	21	92	311	338	19	65	193	48	3	11	42	27	...	20	2	3	...	16	9	2	1	1,217	2,188	2,101	170
VIII.—Puerperal State.—																																
143. A.—Accidents of Pregnancy—																																
(a) Abortion	...	28	130	...	...	10	16	2	...	2	18	1	...	2	8	...	...	1	3	...	...	...	...	...	...	2	...	...	45	175	3
(b) Ectopic Gestation	...	...	11	2	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	2
(c) Pregnancy (non-delivery)	...	97	260	...	...	228	28	...	...	...	...	...	...	39	...	...	...	7	1	...	...	...	...	...	...	...	...	...	371	279	...
(d) Other Accidents of Pregnancy	...	...	2	2	...	5	18	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	5	21	3
B. Normal Labour	...	...	931	...	...	...	216	...	...	...	89	...	...	...	13	...	...	...	18	...	...	...	...	...	...	1	...	...	1	1,267	...
C.—Accidents of Parturition—																																
(a) Sequelæ of Labour (149)	...	...	...	...	...	...	...	...	...	...	2	2	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	4	2
(b) Other Accidents of Parturition (145	...	8	5	...	...	6	6	...	...	6	...	...	...	...	...	...	...	...	3	1	...	...	...	...	...	...	...	...	...	23	14
D.—Accidents of the Puerperium—																																
(a) Puerperal Hæmorrhage (144)	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
(b) Puerperal Septicæmia (146)	...	...	13	12	...	...	...	...	...	...	1	1	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	15	14
(c) Phlegmasia Dolens (147)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(d) Puerperal Eclampsia (148)	...	1	15	10	...	...	3	3	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	19	13
(e) Puerperal Affections of the Breast (150)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(f) Other Accidents of the Puerperium	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	
Total	...	126	1,369	31	...	243	292	12	...	2	117	6	...	43	23	...	...	8	27	2	...	...	...	...	...	3	...	...	425	1,819	51	

TABLE 4—(Continued.)

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the Year 1935.

DISEASES.	P.H., Georgetown				P.H., New Amsterdam				P.H., Suddie				P.H., Bartica				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases	Deaths
IX.—Affections of the Skin and Cellular Tissues—																																
151. Gangrene ...	2	1	24	7	...	...	10	1	...	...	5	1	...	...	2	1	...	2	...	...	...	...	...	...	...	...	...	...	2	3	41	10
152. Carbuncle ...	3	4	12	1	...	1	1	...	1	...	5	...	1	1	2	...	...	...	2	...	...	...	...	...	1	...	...	...	6	6	22	1
152a. Sinus ...	6	2	21	...	3	3	21	...	...	...	6	...	...	...	...	...	14	7	17	...	...	...	...	...	...	...	...	...	23	11	65	...
153. A. Abscess ...	381	233	65	10	16	20	117	...	20	7	145	1	21	9	36	...	...	...	...	...	12	...	4	...	5	1	...	...	455	276	392	11
B. Whitlow ...	2	7	7	...	...	2	4	...	...	1	1	...	...	...	...	...	1	2	4	...	1	...	...	...	...	...	...	...	4	12	16	...
C. Cellulitis ...	41	24	72	4	47	55	76	3	9	6	14	...	7	6	8	...	2	...	...	...	2	...	...	...	...	...	...	...	108	91	130	7
54. A. Tinea ...	28	17	3	...	1	1	1	...	14	11	1	...	3	2	1	...	...	...	...	...	1	...	...	...	...	...	...	...	47	31	6	...
B.—Scabies ...	49	41	28	...	67	31	8	...	34	17	14	...	...	...	...	...	16	12	...	...	2	...	...	...	...	...	...	...	168	101	10	...
155. Other Diseases of the Skin—																																
(a) Erythema ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1	...
(b) Urticaria ...	...	...	1	...	...	...	...	...	2	2	4	...	1	...	...	...	1	2	...	...	...	...	...	...	...	...	...	...	4	3	5	...
(c) Eczema ...	119	127	23	...	3	4	1	...	33	26	3	...	22	12	3	...	23	15	1	...	3	...	...	...	...	...	...	...	203	184	31	...
(d) Herpes ...	4	1	15	...	...	...	...	...	5	4	4	...	3	...	...	...	...	...	...	...	...	...	...	...	7	1	...	...	19	6	19	...
(e) Psoriasis ...	1	1	...	...	...	...	1	...	3	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1	2	...
(f) Myiasis ...	...	...	1	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...
(g) Chigoes ...	1	...	1	...	...	1	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	6	...
(h) Ulcers ...	304	176	354	4	93	45	85	...	231	145	138	4	38	4	14	...	114	78	20	...	30	3	...	...	37	5	1	...	897	457	612	8
(i) Other Skin Affections ...	218	105	82	...	72	90	56	...	21	30	26	...	33	28	2	...	60	55	7	...	5	...	...	...	6	3	3	...	416	372	176	...
Total ...	1,160	799	1 294	26	302	232	341	4	423	254	376	6	129	63	68	1	231	175	51	...	56	3	4	...	56	10	4	...	2,357	1 556	2,138	37
X.—Diseases of Bones and Organs of Locomotion (other than Tuberculosis)—																																
156. Diseases of Bones—																																
Osteitis and Osteomyelitis ...	3	6	56	2	...	...	8	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	6	66	2
157. Diseases of Joints—																																
(a) Arthritis ...	380	153	154	...	18	25	16	...	37	42	6	...	3	4	3	...	12	12	3	...	...	...	...	...	2	...	...	...	452	236	182	...
(b) Synovitis ...	8	14	24	...	40	40	19	...	3	7	5	...	4	2	...	...	...	...	1	...	2	...	...	...	2	...	...	...	59	63	49	...
158. Other Diseases of Bones or Organs of Locomotion ...	446	468	60	...	316	466	57	...	189	368	1	..	3	4	2	...	40	26	6	...	27	...	1	...	44	1	1	...	1,065	1,333	128	...
Total ...	837	641	294	2	374	531	100	...	229	417	14	...	10	10	5	...	52	38	10	...	29	...	1	...	48	1	1	...	1,579	1,638	425	2
XI.—Malformations—																																
159. Malformations:—																																
(a) Hydrocephalus ...	...	...	3	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	2
(b) Hypospadias ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(c) Spina Bifida, &c. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(d) Unclassified ...	8	3	25	2	1	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	3	28	2
Total ...	8	3	28	4	1	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	3	31	4

TABLE 4—(Continued.)

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the Year 1935.

DISEASES.	P.H., Georgetown				P.H., New Amsterdam.				P.H., Suddie				P.H., Bartica				P.H., N.W.D.				P.H., Kamakusa				P.H., Potaro.				Totals.			
	Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases	Deaths
XII.—*Diseases of Infancy*—																																
160. Congenital Debility	...	...	34	23	2	4	16	15	...	...	5	4	...	1	1	...	...	1	5	1	...	...	...	...	...	...	...	...	2	6	61	43
161. Premature Birth	...	...	32	29	...	...	14	13	...	...	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	49	45
162. Other Affections of Infancy	...	1	11	7	...	...	1	...	...	1	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	6	14	8
163. Infant Neglect (infants of three months or over)	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	...	1	77	59	2	4	31	28	...	1	10	8	...	1	1	...	...	1	5	1	...	...	...	...	...	...	...	...	3	12	124	96
XIII.—*Affections of Old Age*—																																
164. Senility—																																
(a) Senile Dementia	...	...	10	4	...	...	...	...	1	8	3	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	13	14	5
(b) Senile Debility	...	...	72	21	9	23	22	6	142	433	14	...	2	3	3	1	3	3	1	...	...	...	...	...	...	...	...	...	156	462	112	28
Total	...	...	82	25	9	23	22	6	143	441	17	...	2	3	3	1	3	3	2	1	...	...	...	...	...	...	...	...	157	475	126	33
XIV.—*Affections produced by External Causes*—																																
165. Suicide by Poisoning	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
166. Corrosive Poisoning (intentional)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
167. Suicide by Gas Poisoning	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
168. Suicide by hanging or strangulation	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
169. Suicide by drowning	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
170. Suicide by firearms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
171. Suicide by cutting or stabbing instruments	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
172. Suicide by jumping from a height	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	..	...	...
173. Suicide by crushing	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	..	...
174. Other suicides	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
175. Food Poisoning—																																
(a) Botulism	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Other	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	4	...
176. Attacks of poisonous animals—																																
(a) Snake bite	...	4	6	...	...	...	3	...	2	...	1	...	1	...	7	...	1	...	2	1	1	...	...	...	1	...	2	...	10	2	21	1
(b) Insect bite	...	4	5	...	...	1	...	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	6	5	...
(c) Unclassified	...	16	3	...	1	...	2	...	...	...	...	...	3	...	6	...	...	...	...	...	1	...	...	...	...	...	...	...	21	13	11	...
177. Other accidental poisonings	...	1	17	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	19	7	51	4
178. Burns (by fire)	...	19	30	4	...	...	7	...	...	...	13	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	6	...	55	5
179. Burns (other than by fire)	...	4	44	5	...	...	9	...	...	...	1	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
180. Suffocation (accidental)	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
181. Poisoning by gas (accidental)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
182. Drowning (accidental)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
183. Wounds (by firearms, war excepted)	...	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	...	...	1	...	...	...	...	...	...	...	5	...

TABLE 4.—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the Year 1935.

DISEASES.	P.H. Georgetown.				P.H., New Amsterdam.				P.H., Suddie.				P.H. Bartica.				P.H., N.W.D.				P.H. Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
XIV.—*Affections produced by External Causes*—(Contd.)																																
184. Wounds (by cutting or stabbing instruments) ...	6	...	47	2	2	1	47	...	...	...	40	...	55	15	60	...	25	10	18	...	19	1	8	...	8	1	1	...	115	28	216	2
185. Wounds (by fall) ...	29	27	3	1	...	...	...	...	...	1	15	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	31	28	18	1
186. Wounds (rupture of internal organs) ...	...	...	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	3	3
187. Wounds (by machinery) ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
188. Wounds (crushing, e.g., railway accidents, &c.) ...	...	...	2	1	...	...	...	...	19	11	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	..	1	...	19	11	5	1
189. Contusions—injuries inflicted by animals, &c. ...	...	...	...	...	1	...	2	...	15	8	79	...	...	...	...	...	6	3	...	...	...	...	...	...	...	...	...	...	22	11	81	...
190. Wounds inflicted on active service ...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
191. Executions of civilians by belligerents. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
192. A.—Over fatigue ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
B.—Hunger or Thirst ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
193. Exposure to Cold, Frost-bite, &c. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
194. Exposure to Heat—																																
(a) Heatstroke ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Sunstroke ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
195. Lightning stroke ...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
196. Electric Shock ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
197. Murder by Firearms ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
198. Murder by Cutting or Stabbing Instruments ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
199. Murder by other means ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
200. Infanticide (Murder of an infant under one year) ...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
201. A.—Dislocation ...	4	4	13	...	1	...	9	...	...	...	15	...	...	...	2	...	1	1	...	...	...	...	...	...	...	...	...	...	6	5	39	...
B.—Sprain ...	93	38	32	...	11	7	10	...	1	3	12	...	17	8	1	...	...	...	...	...	1	1	...	...	...	...	...	...	123	57	55	...
C.—Fracture ...	70	47	339	19	9	10	72	3	3	3	31	...	6	...	18	...	1	...	5	...	...	...	3	...	1	..	..	..	90	60	468	22
202. Other external injuries ...	1,268	520	439	...	149	152	165	1	10	6	68	1	23	11	15	2	17	13	9	...	29	2	...	...	23	10	...	...	1,510	714	696	4
203. Deaths by Violence of unknown cause ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ...	1,520	664	980	38	174	171	327	4	51	32	275	1	109	34	114	2	53	27	36	1	42	4	15	...	35	11	4	...	1,984	943	1,751	46
XV.—Ill-Defined Diseases.																																
204. Sudden Death (cause unknown) ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
205. A.—Diseases not already specified or ill-defined—																																
(a) Ascites ...	...	1	...	...	1	...	3	...	1	5	8	3	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	2	6	11	3
(b) Œdema ...	38	45	2	...	18	28	4	2	5	8	9	5	1	2	...	...	1	6	...	...	2	...	...	...	...	...	...	...	65	89	15	7

TABLE 4—(Continued).

HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO.

Return of Diseases (Out-Patients) and of Diseases and Deaths (In-Patients) for the Year 1935.

DISEASES.	P.H., Georgetown.				P.H., New Amsterdam.				P.H., Suddie.				P.H., Bartica.				P.H., N.W.D.				P.H., Kamakusa.				P.H., Potaro.				Totals.			
	Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients.		In-Patients.		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients		In-Patients		Out-Patients.		In-Patients.	
	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	C.	D.	M.	F.	Cases.	Deaths
XV.—Ill-Defined Diseases.—(Contd.).																																
205. —A.—Diseases not already specified or ill-defined—(Contd.)																																
(e) Asthenia ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
(d) Shock ...	2	...	8	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	3	...	8	...
(e) Hyperpyrexia ...	1	1	...	...	...	...	...	...	...	...	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	8	...
(f) Debility (excluding 160 & 164(b)) ...	177	370	192	40	120	194	44	15	...	..	130	26	60	25	20	...	93	99	8	...	41	1	1	...	95	16	...	...	586	705	395	81
F.—Malingering ...	1	1	3	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	3	...
Total ...	219	418	205	40	139	222	51	17	6	13	156	34	61	27	20	...	95	105	8	...	43	1	1	...	95	16	...	...	658	802	441	91
XVI.																																
A.—Ophthalmic Department (Out-patients) ...	Included under 85 (a)—(j)				...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
B.—Dental Department (O.P.) ...	3,273	4,691	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3,273	4,691	...	...
C.—Casualties (O.P.) ...	...*	...*	..	...	231	741	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	231	741	...	..
D.—Not Sick ...	14	13	139	...	...	...	72	...	...	...	83	...	2	3	6	...	7	9	12	...	...	...	...	...	...	...	...	...	23	25	302	...
E.—Undiagnosed ...	385	683	141	...	...	...	...	...	38	27	...	...	...	...	...	...	29	33	...	...	24	2	...	...	...	...	...	...	476	745	141	...
Total ...	3,672	5,387	29	...	231	741	72	..	38	27	83	...	2	3	6	...	36	42	12	..	24	2	...	...	...	...	...	...	4,003	6,202	443	...
Totals, Sections I.—XVI. ...	18,110	17,518	13,688	1,165	4,827	6,632	2,867	268	3,740	4,411	2,736	213	1920	1571	615	22	2209	2303	516	38	648	48	47	2	681	125	59	4	32,195	32,608	20,528	1,712
Attendances for Repeat Medicines ...	9,581	9,907	...	...	2,332	3,174	...	...	1,410	1,730	...	...	280	343	...	...	133	113	...	...	71	6	...	...	24	15	...	...	13,841	15,288	...	...
GRAND TOTAL	27,691	27,425	13,688	1,165	7,159	9,806	2,867	268	5,150	6,141	2,736	213	2200	1914	615	22	2402	2416	515	38	719	54	47	2	715	140	59	4	46,036	47,896	20,528	1,712

* Classified under 153A and B, 184, 185, 187, 201A-C, 202, and 205 (f).

Table 5.

RETURN OF SURGICAL OPERATIONS.

Operations.	Public Hospital, Georgetown.		Public Hospital, New Amsterdam.		Public Hospital, Suddie.		Public Hospital, Bartica.		Public Hospital, Mabaruma.		Public Hospital, Kamakusa.		Public Hospital, Potaro.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Head and Neck ...	179	5	54	...	19	...	1	...	1	...	...	...	...	...
Upper Extremity	96	4	56	...	7	...	4	...	6	...	...	...	...	...
Lower Extremity	161	15	97	1	12	...	13	...	17	...	...	...	...	...
Thorax ...	21	...	6	...	...	...	...	...	4	.	...	...	...	...
Abdomen ...	720	42	94	...	40	1	2	1	5	...	...	...	...	...
Back and Vertebrae	9	1	2	...	...	...	...	...	1	...	...	...	...	...
Genito-Urinary System	430	7	115	3	22	...	11	...	5	...	..	...	...	...
	1,616	74	424	4	100	1	31	1	39	...	...	...	...	...

Public Dispensaries.

166. In addition to the out-patient dispensaries attached to the public hospitals in Georgetown, New Amsterdam, Suddie, Bartica, Mabaruma, Kamakusa and Potaro, and the Government public dispensary at Charles Street, Georgetown, there are thirteen Government dispensaries in the charge of qualified sick-nurses and dispensers, situated in the more remote and populous river districts and in the diamond and goldfields. In the majority of these outlying dispensaries, the work done by the nurse-dispenser is supervised by the Government medical officer of the adjoining district.

167. In the near future it is proposed to train as sanitary inspectors the nurse-dispensers stationed in such districts as Berbice River and Enachu where no sanitary inspectors exist. This will bring about not only recognition of those officers under the Health Laws but a higher standard of sanitation in those areas which is most desirable.

168. The following table gives the number of cases treated, with expenditure and revenue :—

Dispensary.	Paying Patients.			Police Patients.			Pauper Patients.			Expenditure.	Revenue.
	New Cases.	Repeats.	Total.	New Cases.	Repeats.	Total.	New Cases.	Repeats.	Total.		
No. 1 Charles Street ...	977	1,882	2,859	4	9	13	3,955	7,637	11,592	$ 1,422 58	$ 686 91
Leguan	1,346	35	1,381	61	10	71	265	21	286	901 49	382 98
Demerara River (Christianburg)	1,062	97	1,159	42	4	46	1,871	224	2,095	1,158 05	432 66
Berbice River (Ida Sabina)	91	...	91	...	...	...	370	27	397	1,207 84	34 24
Pomeroon River (Charity)	768	42	810	16	...	16	3,322	145	3,467	1,633 63	313 13
Essequebo (Supenaam)	766	217	983	...	...	...	591	247	838	1,677 63	281 52
Mercca River (Acquero)	6	...	6	...	...	...	2,276	109	2,385	1,308 91	1 20
Canal No. 2 Polder ...	831	62	893	...	...	...	68	3	71	1,023 32	215 52
Canal No. 1 Polder ...	547	12	559	...	...	...	56	5	61	*	133 44
Mara	126	30	156	7	3	10	192	41	233	1,441 64	161 74
Enachu	129	17	146	15	...	15	954	222	1,176	†795 39	141 00
Wakenaam	1,491	5	1,496	67	...	67	498	3	501	977 28	414 08
Anna Regina	626	10	636	48	2	50	5,598	928	6,526	1,136 12	146 88
Parika	426	31	457	...	...	...	106	30	136	‡	110 40

*Supplies are obtained from Canal No. 2 Polder Dispensary.
†Salary, etc., of Dispenser. Supplies are obtained from Public Hospital, Kamakusa.
‡Supplies are obtained from Leguan Dispensary.

169. Free medicines are supplied to a number of Aboriginal Indian Stations at a cost of $247.18.

V.—The Mental Hospital.

170. The following information is derived from the annual report of the medical superintendent of the Mental Hospital :—

171. The daily average number of patients was 701 (males 375, females 326) compared with 712 in 1934. There were 91 admissions (males 42, females 49) as against 97 in 1934. With the 689 patients (369 males, 320 females) remaining on January 1st a total of 780 cases were treated during the year. The admissions from the three counties were :—

County.	Males.	Females.	Total.
Demerara	21	36	57
Berbice	17	11	28
Essequebo	4	2	6
Total	42	49	91

172. The admissions classified as to the countries of origin were :—

Country.	Males.	Females.	Total.
British Guiana	37	38	75
India	2	2	4
Barbados	2	2	4
Dutch Guiana...	...	1	1
Trinidad	1	...	1
Grenada	...	2	2
St. Lucia	...	3	3
Fiji	...	1	1
Total	42	49	91

173. The causes of unsoundness of mind in the cases admitted were :—

Causes.	Males.	Females.	Total.
Poverty and want ..	11	16	27
Domestic worries ...	10	15	25
Recurrence ...	9	2	11
Old Age ...	5	...	5
Parturition ...	...	1	1
Religious excitement ...	...	3	3
Syphilis ...	3	2	5
Adolescence ...	1	2	3
Congenital ...	2	6	8
Heredity ...	...	1	1
Filariasis ...	1	...	1
Irregular life ...	...	1	1
Total ...	42	49	91

174. The causes of unsoundness of mind and the number under the various headings remain fairly constant. Domestic worries with poverty and want accounted for 57 per cent. of the total admissions. Recurrence is fairly high—12 per cent. Syphilis as a cause remains the same as last year.

175. The chief types of unsoundness of mind were delusional insanity (27) melancholia (15), mania (7), epileptic insanity (1), amentia and congenital imbecility (8) and dementia of various forms including senile dementia (14).

176. There were 22 discharges (males 14, females 8) compared with 35 in 1934, and the total number of patients under treatment at the end of the year was 17 more than at the end of 1934.

177. The number of patients who recovered was 22, representing 13 less than during the previous year. Out of 42 males and 49 females admitted, 4 males and 5 females were discharged, *i.e.*, equivalent to 9.8 per cent. of recoveries as against 16.49 per cent. in 1934.

178. The number of deaths was 52 (22 males and 30 females), contrasted with 101 in 1934 and the mortality rate was 6.6 per cent. as against 12.2 per cent. in 1934. Of the 91 admissions 10 died within one year of admission—5 males and 5 females, *i.e.*, 10.9 per cent. of the total admissions.

179. The principal causes of death were pneumonia, general debility, pulmonary tuberculosis, cerebral hæmorrhage, chronic bronchitis and chronic nephritis. The mortality for the year under review was just half of what it was in 1934. The disease causing the highest mortality was pneumonia. Pulmonary Tuberculosis, a common asylum disease, was again in evidence although not to such a great extent as last year. The mortality therefrom was higher amongst females than males. Cerebral conditions continued to be a fairly prominent cause. Dysentery and malarial fevers were not unduly in evidence as causes of death. Syphilis accounts for only one death.

180. The chief diseases treated were malaria, pneumonia, pulmonary tuberculosis and other lung diseases, filariasis, diarrhoea, dysentery, Bright's disease and general debility.

181. The expenditure for the year was $66,639.37 compared with $66,187.29 in 1934, and the revenue $2,190.52 compared with $1,937.44 in 1934.

182. The per caput cost per diem was 26.0 cents as against 24.7 in 1934.

183. Over 56 per cent. of the patients were engaged in some form of occupation and the value of their labour in such occupations as baking, gardening, tailoring, shoemaking, washing, printing, carpentry, woodcutting, etc., was estimated at $28,560.00.

184. The table below furnishes the accommodation in the various wards of the hospital with classification as to type of patient.

Division.	No.	Name of Block.	Accommodation.		Class of Patients.
			Authorised.	Actual Number of Patients.	
Male ...	417	"A"	23	20	Trusted.
		B and C and Single Rooms ...	82*	77 (18 sleeping in Annexe).	Dangerous and refractory.
		D Lower	71	64	Chronic Creole.
		D Upper	74	63	Chronic East Indian.
		E Lower	38	36	Quiet East Indian.
		E Upper	41	39	Quiet East Indian.
		G Male Infirmary ...	55	48	Sick and infirm.
		Criminal Annexe ..	33*	27 374 and 1 boy in Female Infirmary.	Criminal.
Female ..	323	Victoria "A" ...	67	68	Chronic Creole.
		Victoria "B" ...	66	74	Chronic East Indian.
		Single Rooms ...	28	27	Dangerous and dirty.
		Central Block ...	81	86	Doubtful and dirty.
		Female Infirmary ...	54	55	Sick and infirm.
		Dorcas (cottage) ...	27	22 332†	Convalescent and trusted.
			749	706	

* 18 patients from B. and C. sleeping in the Annexe.
† One male patient (boy) included here.

185. Structural improvements, alterations and additions were effected in the various blocks and quarters.

186. Accommodation generally throughout the mental hospital is inadequate, more particularly is this the case in the female division, where the number of patients continues to encroach on the number of male cases. Both refractory blocks are overcrowded, and there is urgent need for more single rooms for patients of both sexes.

VI.—Prisons.

187. The general health of prisoners in the Georgetown, New Amsterdam and Mazaruni prisons continued to be satisfactory and no abuormal incidence of sickness occurred.

188. The daily average number of prisoners in the Georgetown prison and the daily average number in the prison hospital was 232 and 5.1, respectively. 159 were admitted to the prison hospital during the year of whom 8 were transferred to the public hospital, Georgetown. 13 males and 11 females were referred by Stipendiary Magistrates for medical observation. 12 of these cases were sane, 9 insane and 3 feeble-minded. There were 5 executions.

189. The following table shows the hospitalization, etc., of prisoners in the other prisons :—

Prison.	Average daily number of prisoners.	Average daily number in prison hospital.	Total number of admissions.	Number of deaths.	Number transferred to Public Hospitals.	Number transferred to Mental Hospital.
New Amsterdam...	71	0.63	11	1	3	...
Mazaruni ...	40	...	...	...	9	...

190. The principal diseases treated were malaria, venereal diseases, influenza, heart disease, asthma and ulcers. The total number of out-patient attendances was 7,232 compared with 3,417 in 1934.

191. The sanitary condition of buildings, latrines and grounds was satisfactorily maintained.

VII.—Mining—Mazaruni Diamond Fields.

192. The resident staff consists of :—

1 Senior Dispenser.
2 Junior Dispensers.
1 Mechanic for motor engine.
2 Boathands.
1 Scavenger.

193. The hospital of eight beds, with a dispensary, is situated at the headquarters station, Kamakusa. An out-station dispensary under the charge of a dispenser is maintained at Enachu. The senior and junior dispensers continued to make routine inspections of their districts.

194. The population of the district during the year varied from 1,958 to 3,063.

195. The general health throughout the area has been satisfactory. A mild epidemic of influenza occurred during July which necessitated the establishment of a temporary hospital at Kurupung, the most thickly populated area in the district.

196. 25 new cases of venereal diseases were treated in the course of the year.

197. The number of deaths registered during the year was 19 compared with 35 in 1934. The causes were malaria 2, undefined fevers 3, Bright's disease 1, pneumonia 3, drowning 3, dysentery 1, enteritis 1, other causes 5.

198. The rainfall in the district was 120.24 inches compared with 141.83 inches in 1934.

199. Sanitation has been fairly well maintained and with persuasion nuisances were usually abated. When the nurse-dispensers in this area are also trained sanitary inspectors, which it is proposed to effect in the near future, further improvements in all branches of sanitation should take place.

VIII.—Sugar Estates.

200. Arrangements for the medical and sanitary care of sugar plantations remained the same as during the previous year. While in the majority of sugar estates members of the staff and their families are looked after by private practitioners appointed by the proprietors, the Government medical officer of the district is in charge of the hospital, the labourers and the sanitation of the compound except in the case of the estates of Messrs. S. Davson & Co., Ltd., who employ their own medical officer.

201. General health conditions were satisfactory on the whole. There were 2,210 births registered as against 1,631 in 1934. The infant mortality figure fell from 167.3 in 1934 to 132.1 in 1935. 1,066 deaths were registered as compared with 1,116 in 1934, a decrease of 50. The ten principal causes of death (at all ages) were :—

Causes of death	Number of deaths.
1. Lobar Pneumonia	91
2. Malaria	87
3. Chronic Bronchitis	60
4. Broncho-Pneumonia	50
5. Bright's Disease	43
6. Diarrhœa and Enteritis	38
7. Premature Birth	36
8. Acute Bronchitis	35
9. Infantile Debility, Icterus and Sclerema ...	30
10. Asthma	27

202. Twenty-three out of thirty-one plantations provide and maintain hospitals and dispensaries for their labour forces. An endeavour has been and is being made in the majority of cases to renovate or to re-build where necessary the wards, the pharmacy, the kitchen and to improve latrines, bathrooms and the sanitation of the hospital compound. Likewise improvements are gradually being effected in respect of medical appliances and equipment in general. The following statement summarizes the more important advances made in these directions throughout the year :—

Hospital.	Improvements completed.
Pln. Skeldon	...Internal walls white-washed, provision of new cupboards for registers, renovation of instrument cabinet, increased cupboard accommodation in the kitchen and repairs to latrines.
Pln. Rosehall	...Provision of 2 septic tanks, new water closets and cast iron soil pipes for the male and female wards : construction of a small incinerator.
Pln. Providence (Berbice)	...Replacement of old latrine system by modern water closets, concrete floors in bathrooms and provision of shower baths ; better drainage for the hospital compound. (Renovations and repainting had been completed in 1934).
Pln. Blairmont	...Male ward wing reconstructed and general repairs and refitting of hospital completed, including mosquito screens, concrete automatic flush latrines and baths. Wooden beds replaced throughout by iron spring beds. Aseptic furniture and fittings for operation and labour rooms. Water sterilizer. Dispenser's quarters removed and rebuilt, provided with flush latrine and septic tank. Bonification of the hospital compound.
Pln. Bath	...Replacement of wooden by iron spring beds ; cots provided with mosquito nets.
Pln. Non Pareil	...Considerable improvements such as enlargement of maternity wards, concrete floors to bathrooms and latrines and new septic tanks had been completed before 1935).
Pln Ogle	...Maternity wards improved and painted : painting of the dispensary.
Pln. Providence (Demerara)	...Interior of hospital painted throughout : repairs to latrines.

Hospital.	Improvements completed.
Pln. Diamond	...Whole interior of hospital painted and general repairs to the whole building.
Pln. Versailles	...Construction of maternity ward, painting of pharmacy, out-patient department and of hospital beds; filling in and levelling of area under hospital.
Pln. Wales	...New cots for maternity ward.
Pln. Leonora	...Hospital compound levelled, graded and concrete drains laid.
Pln. De Kinderen	...Provision of a new hospital.

203. For several years managers of sugar plantations with hospitals have admitted to the wards persons from the neighbourhood who are not employed on the estate. Although entitled to a daily rate of 50 cents for each such patient until transferred to the nearest Government hospital, managers almost invariably treat these cases free of charge. This helpful and generous co-operation has been of great assistance to the department in the hospitalization of emergency cases.

204. The total number of patients admitted to estate hospitals was 19,775 as compared with 20,049 in 1934 and 21,651 in 1933. 753 deaths occurred which is 146 less than the mean for the two previous years. 6,558 patients sought treatment at the dispensaries of those hospitals. The figures for 1934 and 1933 were 4,892 and 3,822 respectively.

205. *Malaria.*—7,563 cases were treated in hospitals with 87 deaths. The average figures for the previous five years were 6,172 cases and 97 deaths. The distribution in counties during 1935 was :—

County.	Cases Malaria.	Deaths Malaria.
Berbice ...	5,892	57
Demerara ...	1,671	30

206. Continued attention to anti-mosquito measures combined with general improvement in the welfare and housing of those communities should in due course materially reduce the incidence and severity of this disease.

207. *Bowel Diseases.*—A comparison of cases of and deaths from enteric fever and "other intestinal diseases" including dysentery and enteritis in the colony estates during 1935 with corresponding figures for the previous five years is given below :—

Year.	Enteric Fever.		Other Intestinal Diseases.	
	Cases.	Deaths.	Cases.	Deaths.
1935	123	20	969	50
1934	156	28	1,251	87
1933	126	30	1,007	70
1932	105	16	709	57
1931	142	18	825	63
1930	97	15	1,100	61

208. The number of reported cases of all forms of pneumonia totalled 447 with 155 deaths.

209. *Drainage and bonification.*—Noticeable advances have been made by certain sugar estates during the year under review particularly in the preparation of the ground preparatory to the erection of new dwelling houses. Formerly houses, whether cottages or ranges, went up on land far from suitable as building sites. Stress in the past has been laid more on the type of building to be constructed than on the preliminary bonification of the land.

210. Estate proprietors are gradually coming more and more to realise the advantages of measures directed to preventing the occurrence of malaria fever as

against the comparatively expensive methods of quinine treatment and hospitalization.

211. The old medical requirements specified a trench on each side of a range. Hence in the case of rows of ranges two trenches were dug between each row. Whilst this was partly, no doubt, demanded so as to increase the available earth supply for raising the level of the actual building sites it in effect paved the way for bringing the breeding of the malarial mosquito to the very doors of the dwellings. By simply raising the ranges and cottages off the ground and placing them on pillars and providing them with properly constructed floors the difficulty as to dampness and pneumonia has been removed. But unfortunately in so many estates the drains remain.

212. Continued re-digging and cleaning of trenches has resulted over the years in many of them being much wider and deeper than the volume of water required. The advantages of drains (other than main drains) which are shallow and saucer shaped and just sufficient to carry off storm water must be apparent. Within a day or so of a shower the drain is dry. Evaporation is greatly increased by reason of the shallowness and shape which permits of full access of wind and sun, and the possibility of mosquito breeding is thereby markedly reduced.

213. Furthermore the mud removed at each succeeding digging and re-grading has been left piled along the banks, thus raising a barrier for the adjacent surface water, and sometimes even completely enclosing a portion of land which remains in a semi-swamped condition. A little additional labour might have resulted in the surplus mud being deposited in central low-lying areas until gradually the land is graded from the higher centre to the lower periphery and mosquito breeding over that land is absolutely prevented. It is in these simple ways that, it may be said with confidence, the incidence of malaria fever on sugar estates may be lowered and with not only a resulting decrease in the cost of quininisation, but with a generally higher occupational ability of the labourers.

214. Properly organised and systematic treatment of the land in the direction of the bonification of all areas where water tends to remain and where breeding can occur, and especially throughout estate yards, is urgently needed and it is hoped that the authorities concerned will embody such works in their programme for the ensuing year, as an integral part of housing expenditure.

215. *Housing.*—The extension of the one or two familied cottage principle was continued generally by estate proprietors during the year, whilst in certain instances improved types of ranges were erected where limitations of space would not permit of an exclusive cottage system. The possibility of re-inforced concrete ranges is being investigated by one estate.

216. The importance of adequate spacing of the cottages is stressed with a view to avoiding congestion and to permit of a suitable lot of land being available to each occupier should the sugar estate at any future time go out of cultivation as such. The design of the cottages varies a little on the different estates, but generally consists of two rooms with an added half open gallery at the back to provide the kitchen accommodation.

217. *Septic tanks.*—Estates continued to be encouraged to adopt this system of disposal wherever housing schemes were in progress. Where, however, a well flushed side line trench is available, the over-trench system has not been prohibited. Latrines placed over small, ill-flushed or semi-dry branch drains and constituting almost a permanent nuisance have now practically been eliminated from estates.

218. *Miscellaneous.*—The necessity for maintaining a generally higher level of cleanliness, especially in the yards of shops situated in estates has been stressed.

219. Proprietors are requested to prevent the planting of high growing fruit or vegetable produce and the erection of frame works for creepers adjacent to or in the vicinity of dwelling-houses, and preferably to permit of no horticultural pursuits by the occupiers in the yards proper. It is gratifying to see that this is very largely carried out, thus markedly lessening attraction for mosquitoes and increasing the advantages of external ventilation.

220. Stricter control over the lay-out and construction of cow-byres is being enforced, particularly in relation to their distance from dwelling houses, and the water supply to the byres.

221. The extension of the artesian supplies by piped distribution along the public road of many country areas will be of great benefit to occupiers of the frontlands of certain estates. One estate is contemplating the establishment of an air pressure sand filter plant for a pure water supply for its labourers. It is hoped that other estates will follow this excellent lead.

222. Considerable improvement in the vital statistics has been revealed in recent years on a few of the more progressive estates and, indeed, the death-rate is closely approximating that of England and Wales in the case of two or three.

IX.—Alms House.

223. Accommodation is provided for 808 inmates—514 males and 294 females. The number of inmates on the 1st January, 1935, was 839—534 males and 305 females. The number admitted during the year was 605—432 males and 173 females, while the daily average was 855.

224. 1,234 cases were treated in the infirmary wards—895 males and 339 females. The daily average number in the infirmary wards was 365, 216 males and 149 females. The principal diseases treated were—chronic nephritis, hemiplegia and diseases of the heart.

225. 89 minor operations were performed throughout the year—66 males and 23 females.

226. The deaths numbered 223—136 males and 87 females, the death-rate being 15.4 per cent. of the total number of inmates compared with 19.4 per cent. in 1934, and 21.5 per cent. in 1933.

227. The number of inmates remaining in the institution on the 31st December, 1935, was 853—530 males and 323 females, the chief causes of detention being senility, blindness, debility, hemiplegia and ulcers.

228. The following table shows the admissions, deaths, etc., for the last ten years :—

(1) Year.	(2) Total Deaths.	(3) Total persons in Alms House during the year.	(4) Death-rate per cent.	(5) Number of cases of Diarrhœa.	(6) Number of cases of Dysentery.	(7) Number of deaths from Diarrhœa and Dysentery.
1926 ...	375	1,829	20·5	359	40	74
1927 ...	324	1,591	20·4	224	40	31
1928 ...	338	1,608	21·02	260	53	46
1929 ...	286	1,429	20·01	148	69	38
1930 ...	203	1,379	14·7	54	10	6
1931 ...	219	1,272	17·2	52	6	4
1932 ...	241	1,318	18·2	29	3	7
1933 ...	282	1,307	21·5	116	13	16
1934 ...	269	1,389	19.4	59	7	9
1935 ...	223	1,444	15·4	32	2	2

229. *General Remarks.*—This institution continues to suffer from overcrowding, the daily average number of inmates exceeding the authorized accommodation by 47. A small dressing room attached to one of the female infirmary wards was built in August.

230. The wards, offices and grounds were kept in good condition throughout the year and the sanitary arrangements were satisfactory.

X.—Onderneeming Industrial School.

231. The following information is derived from the report of the medical officer which is published with that of the superintendent.

232. On the whole the general health of the boys was satisfactory.

233. The following table shows the statistical figures for the years 1933, 1934 and 1935:—

	1933.	1934.	1935.
Daily average number of boys in school ...	109	93	87
Daily average number of boys sick ...	1.6	1.9	1.4
Percentage of sick to daily average number of boys	1.48	2.11	1.64

234. There were 125 admissions to the infirmary during the year with no deaths. 10 boys were treated at the public hospital, Suddie—2 for malaria, 1 for filariasis, 1 for bronchitis, 4 for abscesses, 1 for tonsillitis and 1 for cellulitis. 9 boys received prophylactic doses of anti-tetanic serum after minor injuries.

235. 24 boys were admitted to the institution throughout the year. 5 were treated for malaria, at periods of one month, four months, five months, six months and ten months after admission.

236. There were 39 cases of malaria. Of these, 30 had one attack, 8 two attacks, and 1 three attacks.

237. 42 boys were vaccinated against smallpox.

238. The sanitary arrangements are satisfactory and sanitation was well maintained. The grounds and drains were kept in good order.

XI.—Maternity and Child Welfare.

239. The activities of the Infant Welfare and Maternity League which has been in existence for twenty-one years were well maintained throughout the colony.

240. A subvention of $12,804 was granted by the Government. From these funds seven health visitors were employed and forty-one nurse-midwives. The district Government medical officer is in charge of the clinic which is a centre where expectant mothers are given advice and supervision, infants are examined and mothers are educated in the hygiene of infancy. Ante-natal treatment and the treatment of sick infants are carried out at these centres, some cases being referred to the nearest Government dispensary. There are now 59 clinics under the control of the League.

241. During the year a sub-committee of the League was appointed to consider its financial position and the re-organization of the district service. The policy of the League is gradually to withdraw nurse-midwives from districts where there are a sufficient number of resident private registered midwives and to replace them as funds permit by health visitors. It is believed that this course of action will tend to eliminate the antagonism at present existing between the League and private registered midwives and to improve generally maternal and child welfare work in the Colony.

242. At several of the centres the lack of suitable accommodation continues to be a distinct drawback. The office of the local village council or one of the schools in many cases constitutes the clinic and credit available at present does not permit of the purchase of the necessary furniture and equipment.

243. Funds for providing milk and other relief for needy mothers and infants were maintained by some of the local branches while the Inspectors of Midwives

are authorized to expend a small sum in this connection with respect to districts without local committees.

244. The work in the upper Berbice River district was seriously handicapped at the outset in that a section of the residents did not appreciate the services of a trained midwife. The New Amsterdam and Districts Branch however did their utmost to overcome the difficulties which attended the work, the greatest of which was lack of accommodation for the nurse. By local subscription and gifts of material and money from friends and sympathizers a building was erected on the Government compound at Ida Sabina, providing accommodation for the nurse and three beds for patients. The Committee asked Government to accept this home as a Jubilee gift in commemoration of His Gracious Majesty George V. Government acceded to this request and also contributed the sum of $50 towards equipment. The President and members of the New Amsterdam and Districts Branch are to be cordially congratulated on the able manner in which they achieved the establishment of this home which enabled the work in that area to proceed towards the end of the year.

245. There can be no doubt that the keen interest manifested by the Committees of the League and of the affiliated units on sugar plantations, the work on the part of nurse-midwives, health visitors, county inspectors of midwives and medical officers and the co-operation of members and of the people are all combining to bring about not only a reduction in maternal and infant mortality, but the production of healthier mothers and babies.

246. Maternity and Child Welfare work on sugar plantations which was commenced about five years ago by managers, assisted by their wives and other ladies on the estates, has continued to make good progress. The clinics are conducted by Government medical officers and estate medical officers, nurses and midwives. 22 estate hospitals, namely, Skeldon, Albion, Port Mourant, Rosehall, Providence (Berbice), Blairmont, Bath, Cane Grove, Non Pareil, Enmore, Lusignan, La Bonne Intention, Vryheid's Lust, Ogle, Providence (Demerara), Farm, Diamond, Wales, Versailles, Leonora, Uitvlugt and De Kinderen, are now provided with maternity wards.

247. The infant mortality for the colony was 122 per thousand births—the lowest on record. The average rate of this mortality for the previous 10 years was 154.

248. The number of confinements attended by League nurses during the year was 2,616, and the number of live births 2,521. There were 95 still-births.

249. Still-births in the colony totalled 658 which is in proportion of 5.8 to every 100 children born alive.

250. The maternal mortality for the colony was 11. The figures for sugar plantations and the Child Welfare and Maternity League were 8.1 and 7.1 respectively.

251. There are maternity wards in each of the five principal hospitals o Georgetown, New Amsterdam, Suddie, Mabaruma and Bartica.

252. The accommodation in the public hospitals and maternity returns for 1935 are as follows:—

	Number of Beds.	Deliveries.	Deaths (Maternal).	No. of Births.	No. of Still-births.
Public Hospital, Georgetown ...	26	957	2)	841	86
do. Berbice ...	8	229	12	196	38
do. Suddie ...	12	93	5	81	16
do. Mabaruma ...	2	16	1	17	2
do. Bartica ...	9	15	2	13	1

253. The total number of births registered in the Georgetown registration district and in the city of Georgetown was 2,041 and 1,797 respectively. Of this number 841 occurred in the public hospital, Georgetown.

254. Returns in respect of the Maternity and Child Welfare League in 59 centres :—

Clinic Centre.	Government Medical Officer.	No. of Clinics.	No. Attendances of Infants.		No. Infants Treated.	Expectant Mothers.	
			Under 1 year.	Over 1 year.		No. Attendances.	No. Treated.
Kitty ...	Dr. J. E. R. Ramdeholl ...	24	912	136	243	165	68
Plaisance ...	do. ...	24	253	136	50	30	11
Beterverwagting ...	do. ...	25	589	222	236	64	14
Buxton ...	do. ...	25	295	110	92	26	8
Paradise ...	Dr. G. T. G. Boyce ...	12	83	70	70	25	7
Golden Grove ...	do. ...	12	160	55	75	18	5
Victoria ...	do. ...	12	194	80	196	31	12
Ann's Grove ...	do. ...	13	125	29	47	3	...
Unity ...	do. ...	12	78	11	40	3	...
Mahaica ...	do. ...	12	108	39	27	40	7
Supply ...	do. ...	12	61	20	25	21	10
De Kinderen ...	Dr. F. A. Viapree ...	12	89	2	4	...	...
Mahaicony ...	do. ...	12	166	2	62	17	4
Airy Hall ...	do. ...	12	89	...	24	6	...
Belladrum ...	Dr. J. A. Nicholson ...	19	300	20	56	103	7
No. 28 Village ...	Dr. E. W. Reece ...	12	47	46	22	35	2
Hopetown ...	do. ...	9	42	...	7	1	...
No. 8 Village ...	do. ...	24	176	21	46	41	4
Rosignol ...	do. ...	24	186	15	87	118	21
Sheet Anchor ...	Dr. G. E. Carto ...	12	157	14	51	210	153
Adelphi ...	do. ...	22	159	35	59	85	52
Highbury ...	do. ...	21	146	24	58	28	10
Sandvoorte ...	do. ...	12	120	43	42	54	55
New Amsterdam ...	Dr. W. Besson ...	49	983	118	264	955	803
Mara ...	do. ...	12	76	25	22	18	5
Upper Berbice River ...	Dispenser Steele ...	12	41	14	8	12	3
Fyrish ...	Dr. L. R. Sharples ...	12	378	...	22	86	3
Rose Hall ...	do. ...	12	244	10	31	150	32
Bloomfield ...	do. ...	10	361	...	54	104	9
Limlair ...	do. ...	11	504	5	59	56	2
Nos. 47 and 51 Villages ...	Dr. C. R. Subryan ...	8	70	11	3	9	...
Kiltern Lodge ...	do. ...	2	8	5	3	1	1
Nos. 78 and 79 Villages ...	do. ...	8	240	22	56	278	11
La Penitence ...	Dr. Q. B. deFreitas ...	26	880	138	220	242	39
Agricola ...	do. ...	25	310	160	173	41	20
Grove ...	do. ...	24	169	50	73	74	22
Pouderoyen ...	Dr. J. Nedd ...	11	145	47	62	61	7
Bagotville ...	do. ...	11	175	53	85	63	11
No. 1 Canal ...	do. ...	22	122	14	49	37	4
Good Intent ...	do. ...	21	134	27	37	30	11
Windsor Forest ...	Drs. R. N. Cozier, A. B. Foo and N. J. Abbensetts	24	66	15	6	16	...
Den Amstel ...	do. ...	24	134	46	39	28	...
Hague ...	do. ...	21	84	10	18	...	...
Parika ...	do. ...	12	87	15	23	...	...
Leguan ...	do. ...	15	135	64	27	52	13
Marionville ...	Dispenser W. A. Mitchell	22	138	81	101	28	10
Zeelandia ...	do. ...	23	84	65	59	27	15
Aurora ...	Drs. G. M. Kerry and S. T. M. Sang ...	25	112	16	66	23	14
Riverstown ...	do. ...	24	186	17	78	22	16
Suddie ...	do. ...	24	281	23	81	39	19
Queenstown ...	do. ...	23	130	28	85	61	13
Anna Regina ...	do. ...	23	824	178	412	107	74
Danielstown ...	Drs. S. T. M. Sang, J. Ferdinand and A. B. Foo	20	136	55	68	16	2
Charity ...	do. ...	24	133	27	26	84	12
Moruca ...	Dispenser M. B. C. Trotman ...	22	287	98	81	44	2
Morawhanna ...	Dr. A. T. D. Whitfield ...	19	152	24	19	2	...
Bartica ...	Drs. J. A. Nicholson, N. J. Abbensetts and V. V. Hoakai ...	25	431	318	137	11	4
Total ...		1,020	12,772	2,918	4,987	3,901	1,627

XII.—Hygiene and Sanitation.

Central Board of Health.

Annual Statement for 1935.

255. Following upon the proclamation of the Public Health Ordinance in November, 1934, the Central Board of Health was constituted in terms of Section 3 and we held our first meeting on 17th December, 1934. We deem it convenient to include in the Annual Report for 1935 this first December (1934) meeting.

256. The personnel, as appointed by His Excellency the Governor, was as follows :—

The Surgeon-General (Chairman)	—Section 3 (2).
The Hon. E. A. Luckhoo	—Para. (a) of Section 3 (2).
The Hon. F. J. Seaford	—Para. (b) of Section 3 (2).
The Director of Public Works	—Para. (c) of Section 3 (2).
The Hon. J. I. De Aguiar	—Para. (a) of Section 3 (2).
His Worship the Mayor of Georgetown	—Section 3 (2).
His Worship the Mayor of New Amsterdam	—Section 3 (2).
The Government Veterinary Surgeon	—Para. (c) of Section 3 (2).
Mr. C. Shankland (representing the Georgetown Town Council)	do.
Mr. W. H. Richards (representing the Sugar Producers' Association)	do.
Dr. A. J. Craigen	do.
Mr. J. W. Jackson	do.

with the Government Medical Officer of Health as Chief Executive Officer and Mr. C. H. Harewood, Secretary to the Board.

257. We held thirteen meetings monthly from December, 1934, to December, 1935, and in addition, in view of the outbreak of alastrim, an extraordinary meeting was convened in May, the usual monthly meeting being postponed until early in June.

258. The Government Medical Officer of Health was absent on leave at the time of the establishment of the Board and until his return to the Colony in March, 1935, the acting Government Medical Officers of Health, Dr. J. H. Pottinger and Dr. E. Cochrane, attended the meetings.

259. Despite the reduction by three in membership consequent upon the dissolution of the Legislative Council, the necessary quorum of six members was obtained for the monthly meetings of August, September and October.

260. In terms of Section 4 of the Ordinance, His Excellency the Governor appointed, on our recommendation, Mr. C. H. Harewood of the Government Public Health Department to be the Secretary.

261. *General Sanitary Measures.*—Building applications were first submitted for confirmation at the meeting held on 4th June, 1935. From that date until the close of the year we dealt with 408 applications as the Local Sanitary Authority of Rural Sanitary Districts under Section 13 (2).

262. As regards trades and industries the following applications were dealt with :—Offensive Trades (Sec. 95) : Coconut Oil, 37 ; Soap, 3 ; Chemical or acid making, 1 ; Other Trades and Industries : Rice Mills (as from 4.6.35)—(Rice Factories Ordinance No. 26 of 1933, Sec. 3)—40 ; Markets and Slaughter Houses (Sec. 105), 2.

263. Other applications considered included permission for the establishment of four schools (Sec. 60 (1) ; four burial grounds (Sec. 64 (1)) ; and twenty-two applications for the laying out of land for building purposes (Sec. 135 (1)).

264. A pure water supply scheme was submitted by Messrs. Curtis Campbell & Co., Ltd. on behalf of the Manager of Pln. Albion, Berbice, and was approved. The proposal involved the erection of an air-scoured pressure filter with alumina and soda precipitation, settling, chlorination and elevated storage tanks, in view of the uncertainty in the existing artesian supply the output from which had recently become markedly reduced.

265. In addition to some of the more important items mentioned above, a number of miscellaneous matters were dealt with.

266. In order to bring before the public important new provisions of the Ordinance, posters and pamphlets were prepared early in the year and distributed in village districts.

267. *Outbreak of Alastrim.*—Early in May the outbreak of alastrim in the North West District engaged our attention over a series of meetings, one being called extraordinarily.

268. We were regularly kept informed of action being taken by the Quarantine Authority under the Quarantine Ordinance, Chapetr 99.

269. Before a meeting could be convened to take the necessary action under Section 21 of the Ordinance the Surgeon-General in view of the emergency informed us that he had requested and obtained the consent of His Excellency the Governor to act under Section 20.

270. The North West District was placed under quarantine, the countries adhering to the West Indian Intercolonial Sanitary Convention duly being notified in terms of the Quarantine Ordinance; additional medical and other staff was sent to the district; the necessary isolation stations were provided; mass vaccination was undertaken both in the district and throughout the Colony; all coastal shipping and inland water craft were controlled and inspected and crews vaccinated; periodical statements were issued to the Press and the Consuls of foreign powers kept informed; and all other necessary measures taken for preventing the spread of the disease.

271. It was a gratifying feature that the outbreak did not spread to Georgetown or other parts of the Colony.

272. *Proposed Tuberculosis Hospital.*—The site for the proposed Tuberculosis Hospital, a grant for which had been approved by the Colonial Development Committee was considered at length. Of the six sites originally examined we recommended the Police Stud Farm as being the most suitable from the medical point of view and that of the patient. We later understood that this site could not be accepted as it would involve closure of the Stud Farm, there being no other site available for it.

273. A detailed memorandum explanatory of the advantages or disadvantages of alternative sites together with comparative estimates of initial and maintenance costs of a hospital in each of the sites was prepared by the Government Medical Officer of Health and circulated.

274. Government finally requested us to consider and approve of proposals submitted to the Secretary of State which incorporated consideration of a new site and buildings.

275. *Financial.*—Our financial position was discussed fully and we recommended to Government that an initial sum of $500.00 be placed on the 1935 Estimates to be drawn upon if and when necessary. His Excellency the Governor finally informed us through the Honourable the Colonial Secretary to the effect that so long as the present financial stringency continues it would be necessary for the Board to operate by the use of the staff and funds of the Government Public Health Department; and that as regards the necessity for loans for sanitary improvements in rural areas, of which we are constituted as the Local Sanitary Authority, we should apply to Government when these were desired.

276. The question was raised as to the remuneration of country members of the Board and it was decided to request Government to grant the same privileges to members generally as obtained, for example with the Sea Defence Board with respect to travelling and subsistence allowances in accordance with the prevailing

regulations. Whilst the matter is still pending we have been informed that Government is reviewing collectively the position of the Central Board of Health and other similar Boards as regards this matter.

277. *Legal.*—In connection with legal matters arising under the Ordinance we were advised by Government that the services of the Law Officers should be applied for in the usual way.

278. An important point discussed was the position with regard to Section 212, Chapter 84, which had been repealed but had not been re-enacted in the Public Health Ordinance.

279. We were satisfied that the matter was not primarily one of Public Health and that it had been anticipated that the then proposed new Bill covering the remaining clauses of Chapter 84 would have included it. We have been advised that the Honourable the Attorney-General has decided as to the necessity for a bill to be drafted to re-enact the section under the Local Government Ordinance.

280. With reference to Section 149 of the Ordinance we agreed as to the desirability for utilising the powers presented therein and a short memorandum on the matter was circulated to the Local Sanitary Authorities of village and country districts, together with a printed copy of the authorisation form proposed. With respect to Rural Sanitary Districts similar forms were duly prepared and approved with directions that they should be forwarded to the Sanitary Inspectors concerned.

281. The following regulations have been drafted and submitted to us by the Government Medical Officer of Health and, after consideration, amendment and approval, have been forwarded to Government:—

(a) Epidemic Diseases Regulations (under Section 20 (1)). These regulations were drafted primarily to meet conditions arising as a result of the outbreak of alastrim in the North West district we having been advised by the Law Officers that existing powers under earlier by-laws or regulations were inadequate or doubtful.

(b) Burial Grounds Regulations (under Section 65 (d)). These regulations have been proceeded with early owing to the unsatisfactory state of burials and burial grounds in the village, country and rural areas to which the regulations apply.

(c) Spirit Shops Regulations (under Section 145). The drafting of these regulations was expedited upon instructions having been received from His Excellency the Governor. They are restricted in application to village, country and rural districts.

282. Four other sets of regulations which had been placed before us earlier in the year were deferred on the request of the Government Medical Officer of Health who desired to give them further study, as they had been drafted and submitted whilst he was on leave of absence.

283. In terms of Section 19 (2) we declared by Resolution that as from the 16th day of September, 1935, "Trachoma" be an infectious disease within the meaning of Part III. of the Ordinance.

284. Under the powers conferred upon us by Section 95 of the Ordinance we declared by Resolution which was published in the *Official Gazette* of Saturday, 30th November, 1935, that soap-making or refining and coconut oil boiling or refining be offensive trades.

285. The question of the laying out of land under Section 135 of the Ordinance and the desirability that the provisions in that Section should have been restricted to the laying out of land for building purposes and not "for any purpose whatever," was discussed. The Government Medical Officer of Health explained that he had been in communication with the Secretary of the Local Government Board who also

was raising the point with that Board, and that in the original draft bill placed before the Legislative Council the clause had so been restricted, but that it had been amended by reverting to the wording of Section 27, Chapter 84, whilst the bill was before the Select Committee. We agreed that amendment was desirable so as to restrict the clause to the laying out of land for building purposes; and further that it should provide for the submission of plans in duplicate.

286. Under provisions of Section 5 (1) of the Ordinance we provided ourselves with a common seal for judicial use.

B. N. V. WASE-BAILEY,
Government Medical Officer of Health and
Chief Executive Officer of the Board.

287. The ensuing report refers to the Colony in general and with the exception of certain figures for comparative purposes, excludes the municipal areas of Georgetown and New Amsterdam.

1.—ADMINISTRATIVE.

Staff.

288. The authorised staff of the Department in 1935 was as follows:—

(i) *Headquarters Staff*—

Government Medical Officer of Health—B. N. V. Wase-Bailey, M.D. (Edin.), D.P.H., D.T.M. & H. (Eng.).

Assistant Government Medical Officers of Health:—
J. H. Pottinger, M.B., Ch.B., D.P.H., D.T.M. & H. (Liv.).
E. Cochrane, M.B., Ch.B. (Glas.), D.P.H. (Lond.).

Head Clerk (Class III.)—C. H. Harewood.
Second Clerk (Class III.)—Miss E. Lewis.
Third Clerk (Probationer)—Miss I. Clarke.

In addition there are two disinfecting assistants who act as photographers, draughtsmen, and messengers and carry out duties in connection with experimental and field work.

(ii) *Sanitary Staff*—

County Sanitary Inspectors.

Berbice—F. J. July, M.R. San. I.
Demerara—H. A. Moonsawmy, F.R.E.S., M.R. San. I.
Essequebo—Supervised by County Sanitary Inspector, Demerara.

In addition there are—
4 Class II. Sanitary Inspectors.
20 Class III. Sanitary Inspectors, and
6 Class IV. Assistant Sanitary Inspectors.

289. All hold the Local Certificate in Hygiene and Sanitation, and four Class II. fourteen Class III., and four Class IV. Sanitary Inspectors hold in addition the Certificate of the Royal Sanitary Institute.

Leave of Absence and Seconding for Duty.

290. Dr. B.N.V. Wase-Bailey, Government Medical Officer of Health, returned from leave on 27th March, Dr. J. H. Pottinger, Assistant Government Medical Officer of Health, Berbice, acted as Government Medical Officer of Health during the absence of Dr. Wase-Bailey. Dr. Pottinger left the Colony on leave prior to transfer to the Palestine Service on the 23rd March.

291. Dr. O. M. Francis was seconded from the medical staff to act as an Assistant Government Medical Officer of Health on 13th November.

2.—Ordinances.

292. No new Ordinances were passed during the year.

3.—Notifiable Diseases.

293. The notifiable diseases are smallpox, alastrim, yellow fever, plague, typhus, cholera, typhoid fever, diphtheria, erysipelas, scarlet fever, chicken-pox, tuberculosis (all forms), anthrax, puerperal fever, puerperal septicaemia, infantile paralysis, cerebro-spinal fever, ophthalmia neonatorum and trachoma.

294. Of the above diseases the following became notifiable on the passing into law in November of the Public Health Ordinance, No. 15 of 1934—typhus, erysipelas, scarlet fever, anthrax, puerperal fever, puerperal septicæmia and cerebro-spinal fever. Trachoma was made a notifiable disease in September, 1935.

295. No cases of yellow fever, typhus, cholera or plague occurred during the year.

296. The total number of cases notified of the remaining diseases for the whole Colony was 888 as compared with 804 in 1934. The deaths registered as due to the same diseases were 351 as against 365 in the previous year.

297. *Alastrim.*—An outbreak of alastrim occurred in the North West District of the Colony extending from the end of April to the end of June. The countries adhering to the West Indian Intercolonial Sanitary Convention were promptly notified by telegram, and thereafter periodically by telegram or letter, in accordance with the requirements of the Convention Regulations. A total of 56 cases were notified, there being one death—that of an infant. The district was declared to be under quarantine as from May 1.

298. *Clinical Data.*—Clinically, the epidemic must be considered a mild one. In the more severe cases there was fever and malaise at the onset, the temperature averaging 100°—102°F. After two or three days a papular eruption appeared rapidly becoming vesicular and finally papular. There was no umbilication and no loculation of vesicles. The mild cases, comprising the great majority, were characterised by few pustules, usually on the trunk, little fever and very little systemic disturbance.

299. The distribution of the rash was varied, in the severe cases being most marked on the face, chest, back and arms, with a few only on the abdomen and leg.

300. After about a week the pustules commenced to dry up and form crusts which separated after about the third or fourth week, leaving scars. No special treatment was required other than general nursing and a liberal diet. Many of the cases were convalescent when first discovered. As to age incidence and racial distribution, there were many more children than adults infected, and cases were observed from infancy up to ten years. With the exception of one doubtful case, the epidemic was restricted entirely to Aboriginal Indians or to those with a large admixture of Aboriginal Indian blood (boviander).

301. The source of infection was probably Venezuela. A number of convalescent cases was discovered in the Indian encampment in the creeks at the head of the Koriabo river within a few miles of the border. Communication by water exists between these creeks and the Aruka river *via* Aruau creek and the Yarikita portage.

302. Whilst the diagnosis of alastrim was given to this epidemic, a peculiar feature in a few instances must leave an element of doubt as to the precise nature of the disease in that, although a few individuals were vaccinated successfully, they later became infected—within one month of vaccination. In the vast majority of cases, however, vaccination definitely acted as a preventative.

303. *Measures taken in the North West District.*—As soon as possible an additional senior Government Medical Officer (Dr. Q. B. deFreitas), together with a

dispenser and a sanitary inspector, were despatched to the district for the purpose of relieving the Resident Surgeon and the Medical Officer. Dr. de Freitas duly confirmed the diagnosis. Whilst *en route* to Mabaruma, Dr. de Freitas discovered one case in an Indian camp between the Moruca mouth and Acquero, and this case was duly isolated at Acquero and left in charge of the resident dispenser.

304. With regard to the fortnightly steamer from Georgetown, all passengers and crew were vaccinated on arrival at Morawhanna; no unvaccinated persons were allowed on board; the crew were not permitted to land and all returning passengers were vaccinated and warned that they would be under surveillance for the required period at their point of destination.

305. An isolated Aboriginal Indian dwelling at Mabaruma Hill was taken down to serve as a nucleus for an isolation centre. Three large palm-thatched benabs were later erected together with a small hut for the accommodation of the nursing staff, and the necessary kitchen and sanitary accommodation were provided. The district nurse of the Infant Welfare and Maternity League at Morawhanna was engaged to supervise this station, subordinate assistants being recruited from many local Indians. At a later date an experienced nurse was also despatched from Goorgetown. Pending the arrival of a new unit of camp cots, utensils, etc. from Georgetown, cots were obtained from Mabaruma Hospital and from Hossorora experimental station. Bedding, utensils and rations were also supplied from the Public Hospital, Mabaruma.

306. *Vaccination.*—An extensive campaign of vaccination was instituted throughout the North West District. On the 15th May, Dr. Nicholson was despatched from Georgetown to take charge of the Public Hospital, Mabaruma, and the isolation camp, leaving the Government Medical Officer, Dr. Whitfield, to tour the district, conducting grant to grant inspections and vaccination of all individuals therein. He was assisted throughout by the additional dispenser and sanitary inspector. Checking of all vaccinations was carried out as far as was possible, but the continual movements of the Indians rendered this task a difficult one. All the schools in the district were visited and the children vaccinated. Three schools were closed for a period. The Aboriginal Indians submitted readily to vaccination and no opposition was encountered amongst the East Indians in the district. The black race resident in Morawhanna, however, although repeatedly warned, refused to be vaccinated. A point of interest in connection with the vaccination was that the English lymph in the collapsible tubes yielded a higher percentage of successful vaccinations than did the American lymph which had in the first instance to be obtained as there was insufficient of the former in the Colony at the time of the commencement of the outbreak.

307. Special constables were posted at Yarikita portage to discourage persons from crossing the portage either coming from or going to Venezuela, at the Barima end of the Mabaruma road to prevent all unvaccinated persons from passing between Morawhanna and Mabaruma, and at the isolation camp.

308. Where possible or expedient infected huts or benabs were destroyed by fire, compensation being paid.

309. Owing to the natural isolation of many of the camps it was considered unnecessary to transfer the Indians to the isolation station, periodic inspections being made.

310. *Statistical.*—The isolation camp was opened on May 7th with eleven cases of alastrim. Some 40 cases were there treated, it being closed on July 20th. The average stay in the camp per patient was six weeks. 3,553 persons submitted to vaccination. Of these 2,809 were checked, resulting in 2,420 successful vaccitions (86. 15%) and 389 unsuccessful, 744 remaining unchecked. One case of vaccinia was recorded in an infant.

311. At Georgetown all necessary measures for the control of shipping proceeding to and from the North West District were carried out. Passengers proceeding to the district were advised that they would not be permitted to land unless vaccinated, and the majority submitted to it before departing. A strict check was kept, with the assistance of the Police Department, of all vessels arriving from the North West District, and from the Pomeroon river, owing to the possibility of persons taking an overland route and reaching Charity on the Essequebo Coast. Police stations along this coast were also instructed to keep a look out for arrivals, who were proceeding to villages along this coast at Charity, the north western end point of the road.

312. All passengers arriving in Georgetown were placed under surveillance for the required period, unvaccinated persons being vaccinated.

313. Encouragement was given for all persons in Georgetown, and indeed elsewhere in the Colony, to be vaccinated, additional public vaccinators and vaccination officers being appointed.

314. One case only of suspected alastrim was reported in Georgetown, but the diagnosis was unable to be confirmed.

315. The total number of vaccinations performed during the epidemic period was 28,634, of which 19,041 were verified as successful.

316. Repairs and extensions were made to the Quarantine Hospital at Best, West Coast, Demerara, the additional accommodation being in respect of third class cases, so as fully to be prepared should the epidemic appear in the city or elsewhere. It was a gratifying feature that the measures instituted resulted in restricting the epidemic entirely to the North West District.

317. *Tuberculosis* (*all forms*).—Below is a table showing the cases notified and deaths registered in the city of Georgetown, the remainder of the colony and the colony as a whole, for the past ten years. These are compared with the cases and deaths of in-patients of the public hospitals, the average ten-year case mortality also being given :—

TUBERCULOSIS (ALL FORMS).

CASES NOTIFIED AND DEATHS REGISTERED.

	City of Georgetown.		Remainder of Colony.		Whole Colony.		Public Hospitals In-Patients.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1926	124	100	195	226	319	326	371	133
1927	116	93	173	252	289	345	388	139
1928	102	76	190	225	292	301	357	122
1929	97	61	230	215	327	276	368	127
1930	122 561	85 415	209 997	217 1,135	331 1,558	302 1,550	383 1,867	143 664
1931	140	78	242	209	382	287	453	164
1932	147	96	276	224	423	320	550	170
1933	123	83	262	206	385	289	540	167
1934	130	85	187	168	317	253	456	135
1935	111 651	81 423	234 1,201	193 1,000	345 1,832	274 1,423	487 2,486	146 782
Total ...	1,212	838	2,198	2,135	3,410	2,973	4,353	1,446
Average (10-year) Case Mortality ...	69.1%		97.1%		87.2%		33.2%	

318. It will be seen that the figures for the whole Colony for 1935 are slightly higher, both as regards cases and deaths, than those of the previous year. The death-rate for the Colony was 0.83 per 1,000 of the population as compared with 0.78 in 1934. These figures are, however, lower than in 1933 when the rate was 0.90 per 1,000.

319. There was a slight decrease in the figures for Georgetown, the increase recorded this year having occurred in the rural areas.

320. Comparison of the two quinquennial periods, 1926-1930 and 1931-1935, reveals a comparative rise in the number of cases and deaths during the latter period in Georgetown, whilst in the rest of the Colony more cases and less deaths have been recorded for the same five years.

321. The need for a Tuberculosis Hospital is reflected in the quinquennial rise in the number both of cases and deaths.

322. As in previous years the death-rate for the black and mixed races is considerably higher than for the East Indians, whilst the former constitute the main bulk of the population of the city.

323. The high average ten-year case mortality, particularly for the "remainder of the colony," is no doubt partly due to the non-notification of cases in the early stages of the disease.

324. The British Guiana Society for the Prevention and Treatment of Tuberculosis continued its activities as in former years. These activities take the form of (i) The visiting of patients in their homes by Health Visitors; (ii) Dispensary examination and treatment by Honorary Visiting Physicians; (iii) X-Ray photography and screening (iv) Collapse therapy; and (v) Sanatorium treatment for incipient and convalescent cases at Best Hospital, West Coast, Demerara.

325. *Enteric Fever (including Typhoid and the Paratyphoids).*—Below is a table showing the cases notified and deaths registered in the city of Georgetown, the remainder of the Colony and the Colony as a whole for the past ten years. These are compared with the cases and deaths of in-patients of the public hospitals, the average ten-year case mortality also being given :—

TYPHOID FEVER (INCLUDING ENTERIC AND PARATYPHOID).

CASES NOTIFIED AND DEATHS REGISTERED.

	City of Georgetown.				Remainder of Colony.				Whole Colony.				Public Hospitals In-Patients.			
	Cases.		Deaths.		Cases.		Deaths.		Cases.		Deaths		Cases.		Deaths.	
1926	103		16		297		86		400		102		235		58	
1927	67		16		196		74		263		90		143		49	
1928	55		14		169		44		224		58		114		31	
1929	43		11		157		33		200		44		91		24	
1930	24	292	7	64	220	1,039	46	283	244	1,331	53	347	124	707	29	191
1931	18		5		232		47		250		52		94		23	
1932	20		8		177		38		197		46		82		24	
1933	30		11		216		57		246		68		96		30	
1934	31		7		284		78		315		85		136		41	
1935	26	125	5	36	262	1,171	64	284	288	1,296	69	320	149	557	44	162
Total ...	417		100		2,210		567		2,627		667		1,264		353	
Average (10-year) Case Mortality ...	24·0%				25·7%				25·4%				27·9%			

326. A comparison between the two quinquennial periods 1926-1930 and 1931-1935 shows, in the case of Georgetown, a marked reduction both in case incidence and deaths, which no doubt may largely be attributed to the sewering of the City. The position with respect to rural areas appears to remain much about the same although with a steadily increasing population an absolute reduction is in fact taking place.

327. *Diphtheria.*—Below is a table showing the cases notified and deaths registered in the city of Georgetown, the remainder of the Colony, and the Colony as a whole for the past ten years. These are compared with the cases and deaths

of in-patients of the public hospitals, the average ten-year case mortality also being given :—

DIPHTHERIA.

CASES NOTIFIED AND DEATHS REGISTERED.

	City of Georgetown.		Remainder of Colony.		Whole Colony.		Public Hospitals In-Patients.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1926	28	8	7	...	35	8	22	3
1927	13	2	17	13	30	15	21	11
1928	21	9	14	11	35	20	16	9
1929	18	4	8	6	26	10	15	6
1930	18 98	4 27	20 66	7 37	38 164	11 64	21 93	7 36
1931	19	2	17	7	36	9	13	6
1932	32	5	11	5	43	10	30	5
1933	21	2	9	5	30	7	17	7
1934	31	3	15	3	46	6	34	4
1935	12 123	2 14	12 64	5 25	24 189	7 39	19 113	5 27
Total ...	223	41	130	62	353	103	208	63
Average (10-year) Case Mortality.	18·4%		47·7%		29·2%		30·3%	

328. As regards the two quinquennial periods 1926-1930 and 1931-1935 an interesting feature is the marked reduction, amounting roughly to one-half in the case of Georgetown and to one-third in the remainder of the Colony, of the case mortality of this disease.

329. The comparative prevalence of the disease in Georgetown as against its incidence in village and rural areas throughout the rest of the Colony will be observed, as also the fairly low case mortality for Georgetown where the public hospital is available for immediate treatment.

330. *Chicken Pox.*—Below is a table showing the cases notified and deaths registered in the City of Georgetown, the remainder of the Colony and the Colony as a whole for the past ten years. These are compared with the cases and deaths of in-patients of the public hospitals, the average ten-year case mortality also being given :—

CHICKEN POX.

CASES NOTIFIED AND DEATHS REGISTERED.

	City of Georgetown.		Remainder of Colony.		Whole Colony.		Public Hospitals In-Patients.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1926	29	...	90	...	119	...	18	...
1927	14	...	17	...	31	...	5	...
1928	7	1	44	...	51	1	11	...
1929	9	...	41	...	50	...	14	...
1930	25 84	... 1	49 241	... ...	74 325	... 1	22 70	... ...
1931	52	...	18	...	70	...	55	...
1932	55	...	41	1	96	1	43	...
1933	30	...	90	...	120	...	34	...
1934	29	...	14	...	43	...	25	...
1935	35 201	... ...	29 192	... 1	64 393	... 1	23 180	1 1
Total ...	285	1	433	1	718	2	250	1
Average (10-year) Case Mortality.	0.4%		0.2%		0.3%		0.4%	

331. *Ophthalmia Neonatorum.*—Below is a table showing the cases notified in the city of Georgetown, the remainder of the Colony and the Colony as a whole since this disease was made notifiable :—

OPHTHALMIA NEONATORUM.

CASES NOTIFIED.

(Notification commenced November, 1930).

	City of Georgetown.	Remainder of Colony.	Whole Colony.
	Cases.	Cases.	Cases.
1930 (Nov.-Dec.) ...	3	5	8
1931	36	12	48
1932	37	29	66
1933	32	18	50
1934	55	20	75
1935	61	33	94
Total ...	224	117	341

332. Of the remaining notifiable diseases, the following cases occurred :—

(i). INFANTILE PARALYSIS.

CASES NOTIFIED.

(Notification commenced August, 1933).

	City of Georgetown.	Remainder of Colony.	Whole Colony.
	Cases.	Cases.	Cases.
1933 (Aug.-Dec.) ...	...	...	...
1934	...	2	2
1935	...	...	...
Total ...	...	2	2

(ii.) PUERPERAL FEVER.

CASES NOTIFIED.

(Notification commenced November, 1934).

	City of Georgetown.	Remainder of Colony.	Whole Colony.
	Cases.	Cases.	Cases.
1934 (Nov.-Dec.) ...	...	2	2
1935	9	20	29
Total ...	9	22	31

(iii.) PUERPERAL SEPTICÆMIA.

CASES NOTIFIED.

(Notification commenced November, 1934).

	City of Georgetown.	Remainder of Colony.	Whole Colony.
	Cases.	Cases.	Cases.
1934 (Nov.-Dec.) ...	...	3	3
1935	4	11	15
Total ...	4	14	18

(iv.) ERYSIPELAS.

CASES NOTIFIED.

(Notification commenced November, 1934).

	City of Georgetown.	Remainder of Colony.	Whole Colony.
	Cases.	Cases.	Cases.
1934 (Nov.-Dec.) ...	...	3	3
1935	3	9	12
Total ...	3	12	15

4.—General Preventive Measures.

333. The usual tables showing in detail the work of the District Sanitary Inspectors are appended.

334. Of specified sanitary improvements carried out there were 60,448 as compared with 53,130 in the previous year. Cases taken to Court numbered 485; of these 19 were withdrawn, the number of convictions obtained being 465.

335. *Latrine Erection.*—Lot-owners in village and country districts, and to a large extent also Rural Sanitary Districts, may now be said to be equipped with the improved type of pit latrine as recommended by the department and described in the Report for 1934. There remains the need of periodic inspection to ensure maintenance, repairs and renewals. On certain lots the heavy congestion of the dwelling houses in the front half does not permit of the erection of latrines except at the unoccupied end, which is unsatisfactory as it entails those living in the front of the lot having to walk a long distance. The position can only be rectified with the proper laying out of the lands for building purposes.

336. The Department continues to advocate the adoption of the septic tank system of sewage disposal whenever the owner can afford one, and not a few owners of better class houses have installed these tanks during the year. Where numbers of labourers are employed, such as on sugar estates, this system has been found particularly suitable and Estates' Authorities are more and more appreciating the advantages of this system over the old over-trench latrine system.

337. *Lot Inspection.*—Routine inspection of lots by district Sanitary Inspectors was continued throughout the year. The need for a reduction in the extent in some of the areas at present covered by a resident Inspector still remains. With, year by year, special duties being added by other Ordinances—such as the Rice Factories and Copra Products Ordinances—involving visits, inspection and sampling, this routine inspection has suffered. Thus in the year 1927, 158,645 lots were inspected, whilst in the year under review the figure was 133,254. Similarly, inspections of cow-byres, trades and industrial premises, and, in fact, nearly all normal and routine duties have shown a reduction. The only solution to this lies in the appointment of additional Sanitary Officers.

338. There still remain extensive areas along the coastlands—for example, from Mahaicony to Rosignol and from Liverpool to Nos. 78/79 villages—without any resident officers, and where sanitation must remain more or less in its primitive state, until appointments are made. It is hoped that the financial state of the Colony will permit of this as soon as possible as it is important that *inter alia* the buildings should be controlled and erected on properly laid out land.

339. *Refuse Disposal.*—No special arrangements exist at present in village, country and rural sanitary districts for the proper disposal of refuse, and, until such time as Local Sanitary Authorities are able to provide or to contract for systematic collection and disposal of house refuse, the policy continued by the Department must remain that of encouraging burying or burning by individual occupiers.

340. The Department not infrequently advises Government Departments, Local Sanitary Authorities and lot owners as to the most suitable sanitary type and size of bin desirable.

341. *Food Inspection and Sampling.*—Shops are regularly visited, foodstuffs inspected, and unsound food taken before a Justice of the Peace for condemnation.

342. Milk samples were taken at irregular intervals in the different districts and forwarded to the Government Analyst for examination. The results are stated in the appended tables. It is regrettable that the Government Analyst has found that the percentage of adulterated milk has risen from 5.5% in 1934 to 6.2% in the year under review. The severity or otherwise of the fine inflicted probably has a direct bearing on the incidence and degree of adulteration.

343. The fact that the percentage of adulteration of samples of milk taken during special raids on Sundays, Public Holidays and after official hours is so much higher (7.7%) warrants an increase in activity at these times. Proportionate remuneration should, however, be granted to the Sanitary Inspectors for such overtime duties.

344. The Milk Committee, which was appointed by His Excellency, Sir Edward Denham, on 17th June, 1933, continued its deliberations throughout the year with the exception of the period covered by the epidemic of alastrim. The terms of reference were "To consider and report on matters relating to the City's Milk Supply, and to make recommendations for revising the existing by-laws."

345. Routine ante and post mortem examinations at slaughter houses were carried out by Sanitary Inspectors wherever such existed as also wherever slaughtering occurred. The chief causes for condemnation of carcases and portions of carcases were tuberculosis and parasitic infection of individual organs. The number of carcases inspected was 8,119 of which 71 were wholly condemned and 3,983 portions of one or another were found unsound and destroyed.

346. *Buildings.*—For the past five years the Department has endeavoured to put into force the laws on the subject of buildings and the laying out of land for building purposes which have been on the statute books of the Colony since 1911 and 1907, respectively. Prior to 1930, except in a comparatively small way as regards buildings, the provisions have been largely in abeyance. The Public Health Ordinance of 1934 in sec. 135 virtually re-incorporated sec. 27 of the Local Government Ordinance, and the building by-laws made under the latter Ordinance are still in force pending the making of regulations under the new Ordinance.

347. A considerable proportion of the work of Sanitary Inspectors in their districts is in consequence now taken up in dealing with building applications. In the majority of cases the officer has himself to fill in the application form and draw the sketch plan, after first having to take all the necessary measurements on the lot in question.

348. With the stress now laid on the importance of first ensuring that the land is properly laid out for building purposes much additional work has been placed on the shoulders of Sanitary Inspectors and at Head Office. Credit is due to the Sanitary Inspectors for the satisfactory manner in which they have carried out these heavy duties which involve many hours of work in the evenings, and to the office staff which has not been increased. It is hoped, however, that provision will be made for an additional clerk on the ensuing year's estimates.

349. *Water Supplies.*—The Pure Water Supply Commissioners continued their activities throughout the year, more particularly in the direction of piped distribution of artesian supplies. A reduction in the incidence of water borne diseases may confidently be expected with the increased consumption of pure

water. With the improved Everite strainer now employed it is hoped that the flow will continue steadily. Closer co-operation between the Pure Water Supply Commissioners and the Department is desirable.

350. Not a few areas in the Colony, especially where there are second and third depth lots, are still dependent upon pond water. Extension of piped artesian well water to these areas is needed.

351. *Disinfection.*—On the receipt of the notification form from the district Medical Officer of any of the notifiable diseases (with the exception of Ophthalmia Neonatorum) the Sanitary Inspector of the district concerned is immediately informed and measures for the disinfection of the premises are promptly carried out, advice being given to those connected with the case.

352. *Vaccination.*—Public vaccinators appointed in various parts of the Colony continued to vaccinate cases brought to them. Vaccination Officers are under the control of the Surgeon-General and are appointed for the purpose. The following table shows the number of vaccinations performed :—

	1926.	1927.	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.
Total Vaccinations	6,862	4,241	6,668	6,500	4,864	5,179	6,200	4,889	6,045	*34,534
Total verified successful ...	6,208	3,610	5,911	5,824	4,777	4,778	5,834	4,636	5,691	32,006
Per cent. verified successful ...	90.4	85.1	88.6	89.6	98.2	92.3	94.0	95.0	94.1	92.7

5.—Special Preventive Measures.

353. *Anti-Malarial Measures.*—The policy of bonifying the Thomas Lands to the north and east of Georgetown was continued throughout the year with the limited departmental vote available.

354. The preservation of this "breathing" area for the city population is of great importance. Situated as it is the city can only extend in the one direction—eastwards, and the time does not appear to be far distant when these lands will fall more or less centrally in the city. As each area has been completed it has rapidly been taken up by recreational clubs.

355. The usual anti-malarial grant from the departmental vote "Approved Sanitary Works" was made to the Mayor and Town Council of New Amsterdam, and was devoted to the concreting of another length of drain.

356. *Model Dry Pit Latrines.*—Financial assistance was given in a few instances towards the erection of these latrines under the Department's supervision, more especially in connection with schools in country districts, and assistance was given in many instances to private individuals and Estates' Authorities in the direction of the preparation of plans for septic tanks, etc.

357. The gradual realisation of the advantages of an up-to-date septic tank system of disposal by Estates' Authorities is gratifying. Further education of the resident estate population in their daily use, as contrasted with the older over-trench system, is required.

358. *Water Receptacles.*—The departmental type of mosquito-proof water receptacle, details of which were given in this report for 1933, continued to be distributed at a reduced price to poorer householders, and their value has again been manifested during the year. Particularly is this so because there is no necessity for continued inspection by the Sanitary Inspector as obtained with the old type, more particularly in connection with the maintenance of the mosquito gauze screen.

*The greatly increased number of vaccinations performed during the year under review was directly occasioned by the preventive measures undertaken as a consequence of the epidemic of alastrim in the North-West district of the Colony, which has fully been detailed earlier in this report.

359. *Education and Propaganda.*—(*a*) A course of lectures in connection with the local examination for Sanitary Inspectors' certificates was given in August, the examination being held later in the year.

(*b*) Lectures were also delivered for the Royal Sanitary Institute certificates in the subjects of Sanitary Inspectors and Health Visitors, and Tropical Hygiene and Meat and Food for Sanitary Inspectors, the examination being held in November. Opportunity was also taken to hold a conference of the British West Indies Board of Examiners of the Institute.

(*c*) Three special "Health Weeks" were observed in important centres in village and rural districts during the course of the year. On these occasions the Health "Caravan," equipped with a generating plant and the material for the demonstrations, proceeds to the centre in question, and Sanitary Inspectors prepare the demonstrations in a suitable school-room. During the early afternoon session as many children as possible from neighbouring schools attend and are instructed by the demonstrators. The general public is thereafter admitted until 5 p.m.

The evening is devoted to lectures on two or three subjects of especial importance to the district concerned, such as the Production of Pure Milk, Village Sanitation and Malaria, and are accompanied by lantern slides, episcopic drawings and cinematographic films, the power being obtained from the generating plant. The public walk many miles to attend these lectures. Attendance has, in fact, always been "to capacity." The Department's "Health Series" of booklets and pamphlets on health and sanitary subjects continue to be distributed *gratis* to adults attending the lectures, the booklet dealing with the Production of Pure Milk being printed also in Hindi.

7.—LABORATORY WORK.

Summary of work done for 1935.

360. Twenty-six specimens of sputa were examined for tubercle bacilli and one case was found to be positive.

361. Four specimens of urine were examined.

362. Specimens for health exhibitions were prepared during the year.

363. Only routine work was able to be attempted during the year owing to the fact that the laboratory assistant was only able to devote a portion of his time to the laboratory, the remainder being occupied in undertaking the duties of a Sanitary Inspector in a district adjacent to the city, and in supervising the work of bonification of the Thomas Lands.

B. N. V. WASE-BAILEY,
Government Medical Officer of Health.

Appendix A.

TABLE I.

Inspections of lots.	Notices served.	Prosecutions.	Convictions.	Withdrawn.	Dismissed.	Struck out.	Amount of fines.
133,254	9,478	485	465	19	1	...	$431.05

TABLE II.

Lots weeded.	Drains weeded.	Drains dug.	Trenches cleaned.	Ponds cleaned	Water Receptacles screened.
11,035	7,011	1,572	1,289	606	1,538

TABLE III.

Latrines erected.	Latrines removed and re-erected.	Latrines repaired.	Latrines limewashed.	Cesspits emptied.	Cesspits oiled.
2,288	1,810	2,722	2,559	635	24,093

TABLE IV.

	1934.	1935.
Inspection of provision shops	7,825	7,327
Provision shops cleaned by order	751	1,203
Provision shops certified	120	89
Inspection of bakeries	1,847	1,849
Bakeries cleaned by order	310	527
Bakeries certified	46	52
Samples of foodstuffs examined	189,350	188,862
Samples of foodstuffs condemned	696	768
Inspection of butcheries	4,164	4,334
Carcases inspected	7,533	8,119

TABLE V.

Milk Sampling, Inspection of Cowpens, etc.	1934.	1935.
Cattle-pens certified as sources of milk supply... ...	472	584
Licences issued for the sale of milk	952	1,246
Persons medically examined as to fitness for handling milk or milk vessels.	1	...
Persons prosecuted for selling milk unlawfully ...	60	39
Persons prosecuted for selling adulterated milk ...	107	95
Inspection of cattle-pens	4,376	6,026
Cattle-pens cleaned by order	892	1,264

TABLE VI.

Results of Milk Sampling—		
Samples taken	1,700	1,670
Samples genuine	1,590	1,569
Samples adulterated	107	96
Amount of fines	$ 810.40	$ 785.40

TABLE VII.

Percentage of Adulterated Milk Samples—		
East Coast, Demerara	4.7%	5.0%
West Coast, Demerara	8.6%	1.4%
East Bank, Demerara	10.9%	3.9%
West Bank, Demerara	7.8%	0.0%
Demerara River	6.2%	0.0%
Essequebo	7.4%	6.6%

XIII.—Port Health Work and Administration.

PORT OF GEORGETOWN.

364. The Surgeon General is the Quarantine Authority for the Colony. The Staff is as follows :—

Health Officer ...	...	B. N. V. Wase-Bailey, M.D., (Edin.); D.P.H., D.T.M. & H. (Eng.).
Deputy Health Officers	...	J. H. Pottinger, M.B., Ch. B., D.P.H., D.T.M. & H. (Liv.)
		E. Cochrane, M.B., Ch. B., (Glasgow), D.P.H. (Lon.)
Port Sanitary Inspector	...	J. H. Matthews, San. Ins. Class III. (Local Certificate in Hygiene and Sanitation).
Engineer	...	W. Spooner.

365. During the year the visiting of vessels and granting of pratique were performed by the Deputy Port Health Officer, Dr. E. Cochrane, and in his absence by Dr. J. Bisessar and O. M. Francis.

366. Quarantine was maintained during the year as follows :—

(a) Permanently against all South and Central American Ports (except British, French and Dutch) for yellow fever, plague, smallpox and cholera.

(b) At different times and for varying periods against Colon, Hayti, Cuba, Tampa, Florida (U.S.A) and Guatemala for smallpox; St. Martin for alastrim and the Azores for plague.

(c) In the case of ships coming from St. Thomas, St. Croix, Porto Rico and San Domingo arrangements are in force to ensure the notification of any occurrence of quarantinable diseases in these ports.

367. *Vessels visited by the Port Health Officer.*—During the year 90 vessels were visited by the Port Health Officer under the Quarantine Ordinance tabulated as under with fees chargeable in each case :—

Month.	Gratis.	$4.00.	$6.50.	$9.00.	$2.00 (Re-visit).
January ...	1	8	1	...	...
February ...	...	4	...	1	...
March ...	...	8	...	1	...
April ...	...	5	...	...	...
May ...	...	7	1	...	...
June ...	...	7	...	...	...
July ...	...	7	1	...	...
August ...	...	7	...	...	...
September ...	...	7	...	...	...
October ...	...	6	2	...	...
November ...	...	7	...	...	...
December ...	...	8	1	...	...
Total (90) ...	1	81	6	2	...

368. Passengers were placed under surveillance by the Port Health Officer as follows :—

For Smallpox	...	...	4
For Cholera	...	...	—
For Yellow Fever	...	...	—
For Plague	...	...	—

369. Vessels consigned to the Demerara Bauxite Company, Mackenzie, Demerara River, with crews placed under surveillance by the Port Health Officer, were allowed to proceed to their destination. In each case the Medical Officer of the Bauxite Company was instructed to keep all members of the crew of each vessel

uuder surveillance until the quarantine period had expired and to report at the expiration of the period.

VESSELS VISITED BY THE PORT SANITARY INSPECTOR.

370. The total number of vessels visited was as under:—

Steamers.		*Sailing Vessels.*	
Ocean Steamers ...	98	Schooners ...	126
Coasting Steamers ...	29	Other Craft ...	40
	127		160

371. The total number of visits paid to vessels was as follows:—

Steamers.		*Sailing Vessels.*	
Ocean Steamers ...	340	Schooners ...	579
Coasting Steamers ...	493	Other Craft ...	164
	833		743

372. The above visits include routine inspection of Government steamers.

373. *Notices served on Masters of vessels lying in Port.*—During the year no written notices were served on masters of vessels by the Port Sanitary Inspector. Nuisances occurring on board vessels were abated according to verbal instructions issued.

374. *Vessels Fumigated and Disinfected by the Port Health Authorities.*—No fumigation was carried out during the year.

375. Plague precautions were enforced on vessels lying alongside the quay of Georgetown or at Mackenzie, Demerara River.

CARE OF MERCHANT SEAMEN.

376. Thirty-one (31) sick seamen were sent to the Public Hospital, Georgetown, for treatment during the year from ocean-going vessels.

DISINFECTION AND FUMIGATING MACHINES.

377. *Clayton Fumigator at the Public Hospital, Georgetown.*—This machine was not employed for fumigation purposes during the year but was subjected to a quarterly test and gave satisfaction on each occasion. New hose is required for this machine.

378. *Washington Lyon Steam Disinfector at the Quarantine Station, Best, West Coast, Demerara.*—This machine was subjected to a quarterly test during the year and worked satisfactorily on each occasion. Several charges of bedding were sterilized for the Tuberculosis Hospital.

379. *Clayton Rat Gassing Machine.*—This machine was used during the year in carrying out experiments for the control of ants breeding in bonified areas and causing "ant heaps."

380. *Trapping and Examination of Rats.*—During the second quarter of the year the trapping of rats was carried out in the Port by the Port Health Officer assisted by the Port Sanitary Inspector with subsequent examination in the laboratory attached to the Department. No signs of plague were found in any of those examined. The number of rat traps was 5.

381. *Quarantine Station, Best, West Coast, Demerara.*—Regular attention has been directed to the keeping of this station compound in a sanitary condition, including the weeding of grass, bushing and the maintenance of proper drainage.

382. General repairs, adaptation of the ground floor to provide third-class quarters and the conversion of the small infectious diseases' hospital into nurses' quarters were effected in preparation for the possible spread of the epidemic of alastrim from the North West district of the Colony. This has fully been reported in the " Hygiene and Sanitation " section of the Annual Report.

Remarks.

383. Cablegrams were interchanged as heretofore between the Health Officer of this and other Convention Ports giving notice of passengers under surveillance on board vessels about to sail.

384. The total revenue accruing to Government from sanitary services in the Port of Georgetown in 1935 amounted to $381.00.

B. N. V. WASE-BAILEY,
Health Officer,
Port of Georgetown.

XIV.—Meteorological.

385. The rainfall during the year, as registered at the Botanic Gardens (Georgetown) was 86.35 inches as against 81.04 in 1934, and the mean percentage of humidity was 80.9, the same as in the previous year.

386. The mean of the four recording stations in Georgetown was 82.55 inches as against 77.62 in 1934.

387. The following is the meteorological return for the year which was kindly supplied by the Director of Agriculture :—

Month.	Temperature.						Rainfall.		Winds.	
	Solar Maximum.	Minimum on Grass.	Shade Maximum.	Shade Minimum.	Range.	Mean.	Amount in Inches.	Degree of Humidity.	General Direction.	Average Force. Velocity
January	146·4	71·9	83·9	75·9	13·5	79·9	5·94	81·2	N.E.	4·47
February	147·1	71·8	83·6	74·8	13·0	79·2	10·59	81·6	N.E.	7·37
March	148·9	72·4	84·1	75·9	13·0	80·0	3·82	80·2	N.E.	9·05
April	148·7	72·1	85·1	75·9	14·0	80·5	1·15	76·8	N.E.	8·19
May	142·9	72·7	85·4	76·3	15·0	80·8	11·56	80·2	N.E.	7·61
June	143·0	73·1	84·0	75·5	14·5	79·7	14·37	86·2	N.E.	6·22
July	145·9	73·2	85·2	75·5	14·5	80·3	8·12	83·3	N.E.	5·93
August	148·1	73·2	85·7	75·3	16·0	80·5	1·78	83·4	N.E.	5·63
September	147·4	73·7	86·8	76·5	18·5	81·6	5·39	78·9	N.E.	6·96
October	150·2	73·5	86·7	76·8	15·0	81·7	3·31	81·2	N.E.	6·00
November	148·9	72·9	87·6	76·4	16·0	82·0	3·72	79·9	N.E.	5·45
December	148·3	72·9	85·4	75·9	16·0	80·6	4·60	78·9	N.E.	7·55
Mean	147·1	72·8	85·3	75·9	...	80·6	86·35	80·9	...	6·65

Georgetown—Registered Mean Rainfall for the year 1935=82.55.

XV.—Recommendations.

388. The recommendations mentioned in the report of the Surgeon-General for the year 1934 have received or are receiving the attention of the Government. Reference is also made thereto in the report of the committee appointed to enquire into the administration and general organization of the medical service of the colony.

XVI.—Scientific.

389. The annual report of the Government Bacteriologist for 1935 appears as Appendix 1.

J. A. HENDERSON,
Surgeon-General.

APPENDIX I.

ANNUAL REPORT OF THE GOVERNMENT BACTERIOLOGICAL AND PATHOLOGICAL LABORATORY.

1935.

1.—Staff.

Bacteriologist and Pathologist	...G. H. Steven, M.B., Ch.B. (Edin).
Laboratory Assistants	...Messrs. I. Singh and E. A. Singh.
Probationer	...Mr. R. L. Morgan till 18th November.
...	...Mr. M. N. Fernandes appointed 16th December.
Volunteer Assistant	...Mr. J. Morgan.
Laboratory Attendant	...Matilda Duncan.

2.—Leave.

The following officers were on leave of absence during the year :—
Mr. I. Singh from 4th February to 3rd May, 1935.
Mr. E. A. Singh from 5th June to 23rd September.

3.—Bacteriological and Serological Work :—

The number of specimens examined during the year was 14,836 of which 5,915 were Wasserman Reactions.

In 1934 the figures were 8,254 general and 6,022 Wasserman Reactions, making a total of 14,276.

The following is a classified list of the examinations made :—

(a) *Microsopic and Chemical*—				
Throat Swabs for Corynebacteria Diphtheriae			164	
Sputa for Tuberculosis			1102	
Nasal Smears for Mycobacteria Leprae			31	
Faeces for Helminths and Amoebae			809	
Blood Films for Malaria Parasites			1619	
Blood Smears for Microfilariae			65	
Blood for Total and Differential Counts			671	
Smears for Gonococci and Spirochaetes			2551	
Pus for Organisms			38	
Urine for Microscopic and Chemical Examinations			246	
Tissues for Sections			43	
Cerebro-Spinal fluids for Globulin and Cell Count			15	
Varia			63	7417
(b) *Cultural*—				
Urine Cultures			100	
Blood Cultures			291	
Pus Cultures			157	
Water Examinations			8	
Faeces Cultures			255	
Cerebro-Spinal Fluid Cultures			15	
Autogenous Vaccines			26	852
(c) *Pathological and Biochemical*—				
Widal Reactions			349	
Blood Urea Estimations			225	
Blood Sugar Estimations			54	
Urea Concentration Tests			22	
Vandenbergh Reactions			2	
Wasserman Reactions—				
Cerebro-Spinal Fluid	24		...	
Blood	5891		5,915	6,567
		Total		14,836

There were also several medico-legal examinations of suspected blood stains.

The anti-serum is prepared in the laboratory and during the year sera for the detection of human, horse, and ox blood were prepared and successfully used.

4.—Source of Specimens :—

About 91% of the specimens examined was received from the Public Hospital, Georgetown, and the various clinics and out-patient departments attached.

The following is a summary of the source of specimens :—

Public Hospital Georgetown, and Clinics	...	12,656
do do New Amsterdam, Berbice	...	289
Best Hospital	...	168
Other Government Institutions ...	...	210
Districts under Government Medical Officers	...	346
Municipal Infant Welfare Clinics ...	...	640
Private Practitioners	...	527
Total	...	14,836

5.—Remarks on Various Diseases Investigated.

(i) *Helminths.*—809 specimens of faeces were examined for Ova and Amoebae during the year. Helminthic Ova were found in 186 specimens (23%) and Dysenteric Amoebae in 4—

Ova of Anchylostoma Duodenalis	were	found in	147	18%
do Ascaris Lumbricoides	do	do	24	3%
do Oxyuris Vermicularis	do	do	2	0.2%
do Trichuris Trichiura	do	do	13	1.5%
do Amoebae of Dysentery	do	do	4	0.5%

The great majority, over 95%, of these cases comes from the Public Hospital, Georgetown, but the patients come from all parts of the county of Demerara.

Below are the figures from the year 1927, the first complete year in which there was a Bacteriologist.

Year.	Number of Cases examined.	No. in which Ova were found.	Percentage.
1927	731	200	27
1928	1,617	458	28
1929	820	224	27
1930	1,210	346	28.5
1931	980	323	33
1932	882	231	25
1933	603	141	24
1934	770	156	20
1935	809	186	23
Total ...	8,422	2,252	26

In the 5 years 1931 to 1935, the numbers examined, the positives, and percentages, are all lower than those of the previous 4 years. This is possibly the result of the Georgetown Sewerage Scheme. But it is not possible to ascertain the number of patients in the last 4 years who came from Georgetown and the country respectively.

For the first 5 years 1927 to 1931 the percentage of positives in 5,358 patients was 29. In the last 4 years the percentage of positives in 3,064 cases was 23.

2. *Enteric Group of Diseases.*—349 Widal examinations were made during the year and of these 106 were positive.

90 to Bacterium Typhosum.
8 to Bacterium Poratyphosum A.
4 to Bacterium Paratyphosum B.
4 to Bacterium Paratyphosum C.

Bacterium Paratyphosum C reactions were in each case combined with one or other of the group.

Standard " H " cultures prepared in the Research Laboratory of Oxford University were used.

The following table shows the results for the 10 years 1926 to 1935 inclusive.

Year.	Total Examinations.	Total Positive.	Percentage.
1926	125	34	27
1927	225	79	35
1928	223	56	25
1929	184	53	29
1930	237	88	37
1931	255	72	28
1932	198	47	23
1933	251	78	31
1934	350	126	36
1935	349	106	30
Total	2,397	739	30

Blood Cultures were made in most of the Widal cases when this was possible, about 280 bloods being examined. In 22 of these Bacterium Typhosum was grown.

Faeces Cultures were again the exception. It is rather difficult to understand this indifference on the part of clinicians to the importance of faeces culture both as a confirmation of the Widal or blood culture and especially as a prevention against too early dismissal from hospital.

Bacteriological investigation of typhoid is fairly extensive in the hospital and Georgetown and a few neighbouring districts; but is practically absent in the greater part of the Colony.

3. *Dysentery.*—In the 809 faeces examined for ova &c., the presence of Amoeba Histolytica was detected in 4.

Faeces from suspected dysentery cases were cultured in Brilliant Green Agar.

The total number of faeces cultures made during the year was 255. Bacterium Dysenterium was not isolated in any. Bacterium Typhosum was isolated in 3 cases only.

4. *Malaria.*—1,619 blood films were examined for Plasmodium which was found in 411 cases. By far the commonest parasite was Plasmodium Vivax which was found in 369 specimens.

Plasmodium Falciparum was present in 41 cases.

do Malariae do do in 1 case only.

This examination is not satisfactory. The films are made by the nursing staff and a great number of them are too badly made for examination.

5. *Nephritis.*—Full examinations of urine were made in 246 cases. Of these 59 contained albumen in larger amounts than 0.05% (24%).

The figures for 1934 were 382 examinations, 95 of which contained over 0.05% of albumen (24.8%).

225 blood urea estimations were made.

52, 23%, contained between 50 and 100 milligrams of urea per 100 c.c.

69, 30%, over 100 milligrams per 100 c.c.

The figures in the previous year were 197.

26.9 between 50 and 100 milligrams per 100 c.c. of urine.

18.8% over 100 milligrams per 100 c.c. of urine.

The majority of the cases were East Indians and especially workers in rice cultivation.

6. *Tuberculosis.*—1,082 sputa were examined during the year and of these 211 or 20% were found to contain Mycobacteria Tuberculosa.

In 1934, 881 sputa were examined of which 146 were positive (16%).

These figures include periodical examination of Best Hospital patients but not those attending the tuberculosis clinics.

7. *Venereal Diseases.*—Investigation in these diseases forms the largest part of the work of the laboratory. A great deal of examination is thrown on the laboratory which should be done by the clinics. I refer to the re-examinations of treated gonorrhoea cases where, in my opinion, it is not possible, except by photography, for the Bacteriologist to convey his impression as to the progress of the patient and his freedom from the disease to the clinician. Lack of the opportunity and pressure of work has thrown this work on the Bacteriologist but with the establishment of a new clinic building, fully equipped, this work should, in his own interest and that of the patient, be undertaken by the clinician.

8. *Syphilis.*—5,891 sera and 24 cerebro-spinal fluids were examined by Harrison's method of the Wasserman Reaction, a total of 5,915. Of these, 1,409 sera and 7 cerebro-spinal fluids were positive.

157 sera were returned as weak positive, most of which were from patients undergoing treatment

Organised work in venereal diseases was started in 1926 when the clinic was instituted.

The following table gives the number of cases examined during the decade :—

WASSERMAN REACTIONS.

Year ...	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
No. of Examinations ...	2,091	3,464	3,710	3,636	3,912	5,687	6,479	6,759	6,022	5,915
Positive ...	1,254	1,487	1,325	1,739	1,378	1,973	2,176	2,350	1,884	1,416
Percentage Positive ...	60	43	36	38	35	35	33	35	31	24
Weak Positive ...	400	597	...	386	753	806	423	332	507	157
Percentage Weak Positive	19	17	...	16	20	14	6	5	8	3
Negative ...	437	1,380	2,385	1,879	1,781	2,928	3,878	4,077	3,631	4,342
Percentage Negative ...	21	40	64	51	45	51	61	60	61	73
GONORRHŒA EXAMINATIONS ...	148	42	395	389	436	1,241	1,565	2,330	1 744	2,851

The results in the table of Wasserman Reactions are interesting. The method of examination has been the same and the technicians also. Of 47,544 specimens examined 16,973 have been positive—a percentage of 36.

The last quinquenimo includes the cases sent by the antenatal clinic which amounted in 1935 to about 800 of which rather less than 25% were positive.

The source of most of the Wasserman cases is the venereal disease clinic, the antenatal-clinic and Public Hospital, Georgetown. A few sera are received weekly from New Amsterdam and occasionally from Suddie and Bartica hospitals.

Pathological.—

240 post mortem examinations were made during the year and the following gives the causes of death :—

1. *General Diseases—*			
Ankylostomiasis	3		
Enteric Fever	7		
Filariasis (Abdominal Glands.)	2		
Malaria	24		
Premature Births and Malnutrition	3		
Syphilis Congenital	1		
do Tertiary	1		
Tetanus	2		
Toxaemia	2		45
2. *Injuries—*			
Fractures of Spine	2		
do Skull	6		
do Humerus	1		
do Femur	2		
do Ribs	2		
do Pelvis	1		
Burns	2		
Corrosive Poisoning	1		
Rupture of Liver	2		
do Spleen	2		
Multiple Cutlass Wounds	2		23
3. *Tumours—*			
Cancer of Lung	1		
do Liver, Stomach and Pancreas ...	5		
do Pleura	1		
Sarcoma. (Mediastinal Glands.)	1		8
4. *Diseases of Respiratory System—*			
Bronchiectasis	1		
Bronchitis and Asthma	1		
Broncho-Pneumonia	6		
Croup	2		
Gangrene of Lung	1		
Haemorrhage into Lung	2		
Infarct of Lung	1		
Lobar Pneumonia	9		
Tuberculosis of Lung	15		38

5. *Circulatory System*—			
Aneurysm. (Aorta)	3		
Arterio Sclerosis	9		
Leucocythaemia	1		
Myocarditis and Heart Failure	33		
Pericarditis	1		
Ulcerative Endocarditis	2		
Post Operative Syncope	3		
Abscess of Spleen	1		53
6. *Excretory System*—			
Cystitis	1		
Chronic Interstitial Nephritis	6		
Parenchymatous Nephritis, Chronic	6		
Acute Nephritis	5		
Pyelo Nephritis	3		21
7. *Digestive System*—			
Cholecystitis & Gall Stones...	4		
Cirrhosis of Liver	5		
Duodenal Ulcers	2		
Hernia. (Strangulated)	2		
Gangrene of Bowel	3		
Gastro Suteritis. Acute	2		
do. do. Chronic	1		
Gastric Ulcer	4		
Intussusception	2		
Liver Abscess. Multiple	1		
Peritonitis	3		
Tuberculosis of Bowel	11		40
8. *Generative System*—			
Ectopic Gestation	1		
Anaemia of Pregnancy	1		
Sophoritis & Peritonitis	1		
Rupture of Uterus	1		
Retained Placenta	1		5
9. *Nervous System*—			
Cerebræ Hæmorrhage...	5		
Septic Meningitis	1		
Tubercular Meningitis	1		7
Total ...			240

Vaccines—

During the year 4 litres of T.A.B. Vaccine were made and distributed in addition to 5½ litres of Streptococcal, 2½ litres of Staphylococcal and 2 litres Gonococcal and 2 litres of Bact. Coli stock Vaccines.

Mixed Streptococcal and Staphylococcal Vaccines are given to filarial patients. The number attending the laboratory averages over 40 per week. The Vaccine undoubtedly has effect in diminishing fever attacks and the patients feel better.

Mixed Gonococcal Vaccine is issued to various clinics when available, but owing to the difficulty experienced in maintaining subcultures of Gonococci the supply was somewhat irregular during the year.

In addition 1½ litres of autogenous vaccines were made.

All media are made in the laboratory and during the year 71 litres were made of 14 different formulæ.

The amount of work devolving on the laboratory is greater than what can properly be accomplished by the staff and in the building.

The building is the basement room of the 3 storied nurses quarters and was assigned to Dr. Wise in 1905 and is practically unchanged since that time. The thirty years that have elapsed since the inauguration of a laboratory have been marked by the great increase in routine seralogical and biochemical work demanded by the hospital and V.D. Clinics.

The Staff has not been increased since 1921 when the volume of routine work was only 30% of what was done last year.

This inadequacy of both building and staff has resulted in the complete stoppage of any work on organised lines as was possible in the earlier years of the laboratory's existence.

GEO. H. STEVEN, M.B. Ch.B.,
Government Bacteriologist aud Pathologist.

27th February, 1936.