

Report of the Surgeon-General / British Guiana.

Contributors

British Guiana. Medical Department.

Publication/Creation

Georgetown, Demerera : Govt. Printer, [1937]

Persistent URL

<https://wellcomecollection.org/works/mufytmha>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>



The Royal Society Institute
Library

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



British Guiana.

REPORT

OF THE

SURGEON-GENERAL

FOR THE YEAR

1937.

Printed by the Authority of His Excellency the Governor.

GEORGETOWN, DEMERARA.

PRINTED AND LITHO BY THE GOVERNMENT OF BRITISH GUIANA.

1938.



22501468015

*With the Compliments of
The Director of Medical Services.*

*Georgetown, Demerara,
British Guiana.*

With the Compliments of
The Director of Medical Services.

Department of Health,
British Empire.



British Guiana.

REPORT
OF THE
SURGEON-GENERAL
FOR THE YEAR
1937.

Printed by the Authority of His Excellency the Governor.

GEORGETOWN, DEMERARA :

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

1939.

No. 17,084.

1937

STURGEON-GENERAL

FOR THE YEAR

1937

REPORT OF THE SURGEON-GENERAL

WELLCOME
LIBRARY

+
Ann Rep

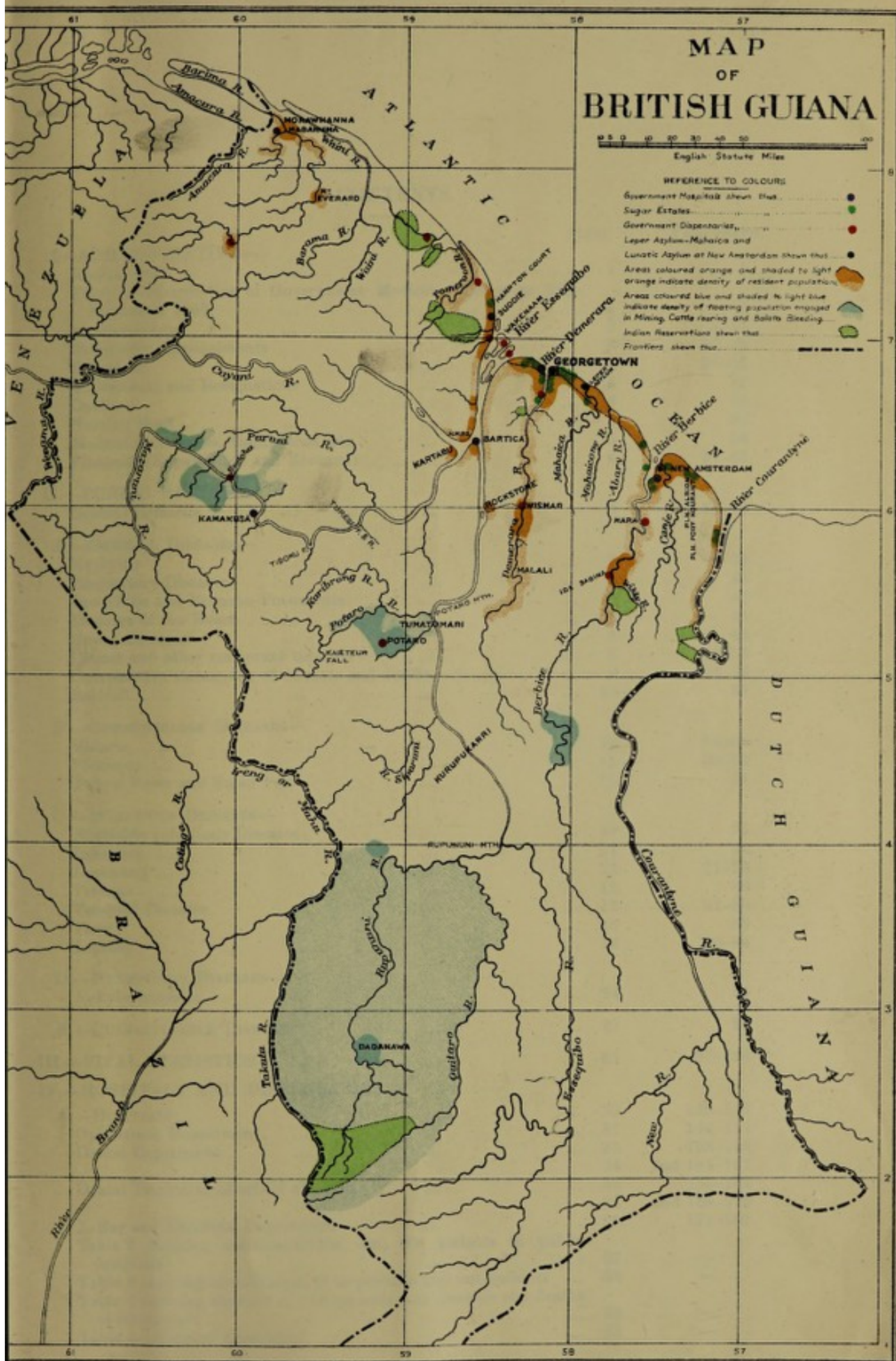
W 128
.666
B 86
1937

MAP OF BRITISH GUIANA

0 10 20 30 40 50
English Statute Miles

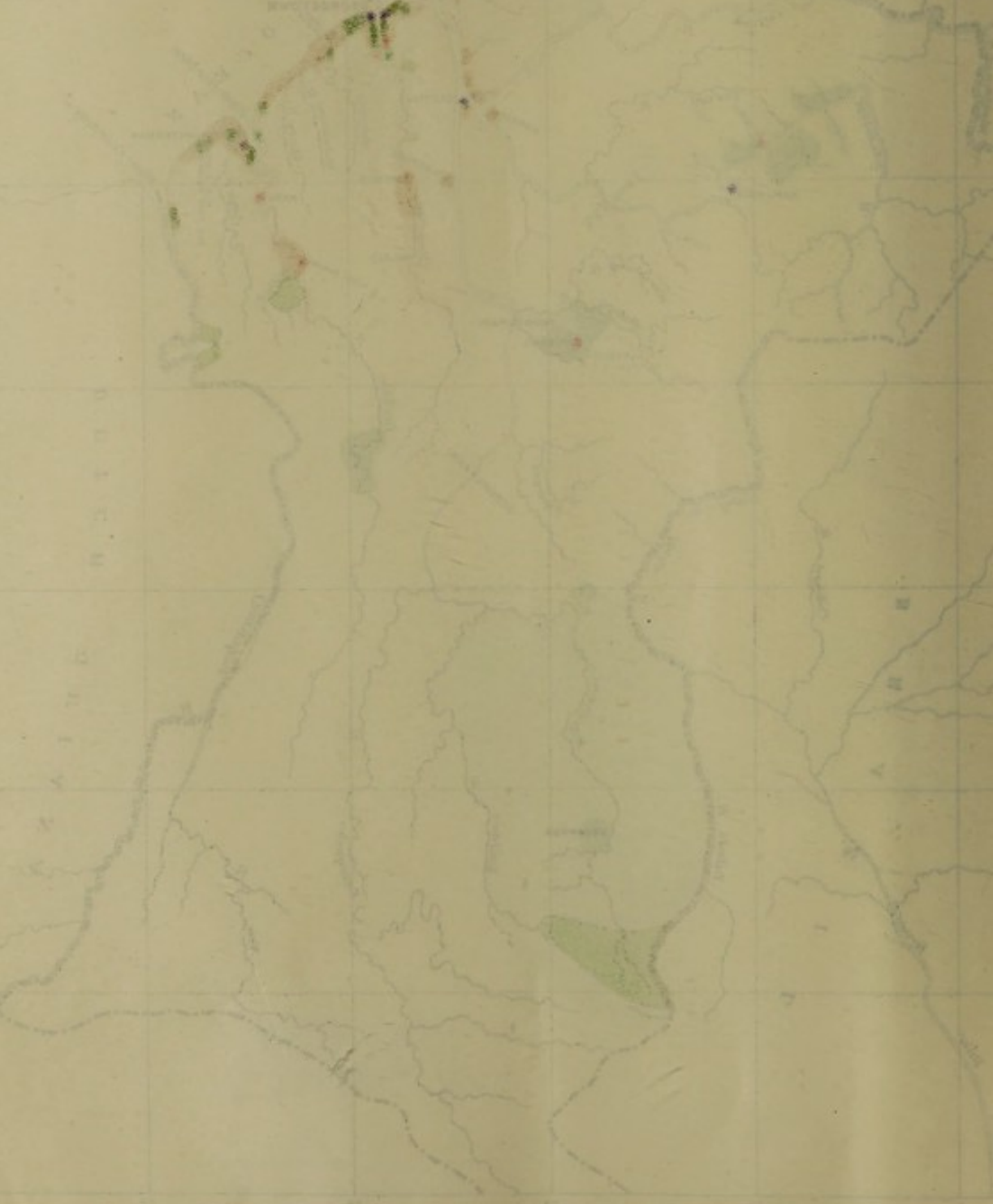
REFERENCE TO COLOURS

- Government Hospitals shown thus: ●
- Sugar Estates: ■
- Government Dispensaries: ●
- Lepet Asylum-Mahaica and Lunatic Asylum at New Amsterdam shown thus: ●
- Areas coloured orange and shaded to light orange indicate density of resident population.
- Areas coloured blue and shaded to light blue indicate density of floating population engaged in Mining, Cattle rearing and Balata Bleeding.
- Indian Reservations shown thus: ■
- Frontiers shown thus: ---



MAP
OF
BRITISH GUIN

Scale of Miles
0 10 20 30 40 50 60 70 80 90 100
Legend
British Colonies
Foreign Colonies
Unsettled Land
Water
Rivers
Mountains
Islands
Coastline
Latitude and Longitude
Scale of Degrees
0 10 20 30 40 50 60 70 80 90 100



CONTENTS.

	PAGE.	PARAGRAPH.
I.—ADMINISTRATIVE—		
Medical Staff	1	1
Table I—Distribution of Government Medical Officers on 31st December, 1937	1	2
Appointments	3	3-15
Temporary Appointments	3	16-29
Transfers	4	30-32
Retirements and Resignations	5	33
Deaths	5	34
Nursing Staff	5	35
Medical Ordinances, Regulations, etc.	5	36
Financial (Expenditure and Revenue)	6	37-38
II.—PUBLIC HEALTH—		
General Remarks	6	39-44
A.—GENERAL DISEASES—		
Nephritis	7	45
Respiratory Diseases	8	46
Bronchitis and Broncho-Pneumonia	8	47
Diseases of the Heart	8	48
Bowel Diseases	8	49
Cancer and other malignant tumours	8	50-53
Comparative statements of diseases and deaths	9	54-56
Rainfall	10	57
B.—COMMUNICABLE DISEASES—		
Malaria	10	58-68
Filariasis	12	69-73
Yellow Fever and Small Pox	12	74
C.—INFECTIOUS DISEASES—		
Notifiable Infectious Diseases	12	75
Influenza	12	76
Dysentery	12	77-79
Tetanus	12	80
Venereal Diseases	12	81-88
Yaws	18	89
Leprosy	18	90-94
D.—HELMINTHIC DISEASES—		
Ankylostomiasis	24	95
E.—QUARANTINABLE DISEASES	25	96
III.—VITAL STATISTICS	25	97-124
IV.—HOSPITALS AND DISPENSARIES—		
A.—HOSPITALS	30	125-145
Ophthalmic Department	32	146-152
Dental Department	33	153-156
... ..	34	and 164-167
Dental Treatment of school children	33	157-163
... ..	34	and 168-170
X-Ray and Electrical Department	35	171-183
Table 2 showing accommodation, etc., for patients in public hospitals	37	—
Table 3 showing classification of in-patients and out-patients	38	—
Table 4 showing diseases of out-patients and diseases and deaths of in-patients	39	—
Table 5—Surgical Operations	53	—

	PAGE.	PARAGRAPH.
B.—THE MENTAL HOSPITAL ...	53	184-195
C.—PUBLIC DISPENSARIES ...	54	196-197
V.—PRISONS ...	55	198-202
VI.—ALMS HOUSE ...	55	203-211
VII.—INDUSTRIAL SCHOOL, ONDERNEEMING ...	56	212-220
VIII.—SUGAR ESTATES ...	57	221-238
IX.—MINING—MAZARUNI DIAMOND FIELDS ...	58	234-241
X.—HINTERLAND SETTLEMENTS ...	59	242-244
XI.—MATERNITY AND CHILD WELFARE ...	59	245-258
XII.—HYGIENE AND SANITATION—		
Central Board of Health ...	62	259-276
Administration ...	64	277-278
Leave of Absence ...	65	279
Ordinances ...	65	280
Notifiable Diseases—		
General Remarks ...	65	281-285
Tuberculosis ...	65	286-293
Enteric Fever ...	66	294-295
Diphtheria ...	67	296-297
Chicken-pox ...	68	298-299
Ophthalmia Neonatorum ...	68	300
Other notifiable diseases ...	68	301
General Preventive Measures—		
Details of work of Sanitary Inspectors ...	68	302-305
Buildings ...	69	306
Drainage ...	69	307-308
Trades and Industries ...	69	309-310
Vaccination ...	70	311
Special Preventive Measures—		
Milk Testing ...	70	312-316
Bonification ...	70	317-320
Nutrition ...	71	321
Laboratory Work ...	71	322-326
XIII.—PORT HEALTH WORK AND ADMINISTRATION ...	73	327-345
XIV.—METEOROLOGICAL ...	75	346-348
XV.—SCIENTIFIC ...	75	349

APPENDICES.

	PAGE.
APPENDIX A.—Details of Work done by Sanitary Inspectors ...	72
APPENDIX I.—Report of the Government Bacteriologist for the year 1937 ...	76

MEDICAL DEPARTMENT,
GEORGETOWN, DEMERARA,
1st March, 1939.

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 1937, together with the returns, etc., appended thereto.

I have the honour to be,

Sir,

Your obedient Servant,

NORMAN M. MACLENNAN,
Director of Medical Services.

The Honourable
THE COLONIAL SECRETARY.

BRITISH GUIANA.

ANNUAL MEDICAL REPORT FOR THE YEAR ENDING 31st
DECEMBER, 1937.

I.—ADMINISTRATIVE.

1. The Medical Staff as authorised by the Estimate for 1937, 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 Assistant Surgeon, Public Hospital, Georgetown.
 - 1 Medical Superintendent, Mental Hospital.
 - 1 Medical Superintendent, Leprosy Hospital.
 - 1 Ophthalmologist.
 - 25 Government Medical Officers.
 - 1 District Surgeon.
 - 2 Temporary Assistant Medical Officers.

2. The distribution of the staff on the 31st December, 1937, is shewn in Table I.

*The title was changed to that of the Director of Medical Services by Ordinance No. 11 of 1938.

TABLE 1.

Distribution of Government Medical Officers on the 31st December, 1937.

(1) Sergeon-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) Superintending Medical Officers.
Vacant (1).	(i) Government Medical Officer of Health and Port Health Officer, Georgetown—Dr. E. N. V. Wase-Bailey. (2) Assistant Government Medical Officer of Health and Port Health Officer, New Amsterdam—Dr. P. A. T. Smith. (3) Assistant Government Medical Officer of Health and Port Health Officer, Georgetown—Dr. O. M. Francis.	Vacant (4).	(i) Surgeon Specialist and Resident Surgeon, Public Hospital, Georgetown—Mr. J. D. Grierson, F.R.C.S. (ii) Assistant Surgeon, Public Hospital, Georgetown—Mr. D. I. C. Finlayson, F.R.C.S. (iii) Medical Superintendent, Mental Hospital—Dr. A. W. H. Smith. (iv) Medical Superintendent, Leprosy Hospital—Dr. F. G. Rose, M.B.E. (v) Ophthalmologist—Dr. J. A. Brown. (vi) Prison and Police Surgeon, and Medical Officer, No. 1 Dispensary and Alms House, Georgetown—Dr. D. J. Talbot.	Honorary Radiologist—Dr. F. G. Rose, M.B.E.	(i) Dr. J. Gla. Resident in charge of Medical Institutions.	Resident Surgeon, Public Hospital, New Amsterdam, Barbados.	(i) Dr. E. G. H. Payne, (3) Dr. S. C. Letten-court-Games, (6) Dr. G. W. Mearns. (iv) Dr. S. T. M. Sang. (v) Dr. H. Ho. (vi) Dr. G. Ramdeholl (7). (vii) Dr. N. J. Abbenetia. (viii) Dr. N. J. Dias, (3 vacancies).	(i) Dr. E. W. Rees. (ii) Dr. W. D. Pollard. (iii) Dr. W. W. Besson.	(i) Dr. G. E. Castro Ramdeholl. (ii) Dr. J. R. R. Buxton. (iii) Dr. L. R. Sharpley. (iv) Dr. R. N. Coxier. (v) Dr. J. Nedd. (vi) Dr. G. M. Kerry. (vii) Dr. G. T. G. Mahaica. (viii) Dr. G. A. Grandoul. (ix) Dr. C. R. Skeldon. (x) Dr. F. A. Via Mahaleony.	Resident Surgeon, Public Hospital, Suddie District and On-derneming Industrial School. Resident Surgeon, Public Hospital, Barbados and Medical Officer, Barbados District. Resident Surgeon, Public Hospital, Maharuma, and Medical Officer, North West District. Cane-Highbury. Port Mourant. West Coast, Demerara. West Bank, Demerara. Peter's Hall. Cotton Tree. Skeldon.	Dr. L. S. Jatkara. Dr. M. O. Luck.

(1) Dr. E. N. V. Wase-Bailey (Acting).

(2) Is also Surgeon-General's Deputy.

(3) Is also Honorary Medical Officer of Health for the town of New Amsterdam.

(4) Dr. E. G. H. Payne (Acting).

(5) Medical Officer in charge of Venereal Diseases Clinic, Public Hospital, Georgetown.

(6) Senior Physician, Public Hospital, Georgetown.

(7) Is also Visiting Medical Officer, Anna Regina, Pomeroon, and Wakenham Dispensaries.

Appointments.

3. Dr. P. A. T. Sneath was appointed First Assistant Government Medical Officer of Health as from 12th March, 1937. He arrived in the Colony and assumed duty on 26th March, 1937. On 1st July 1937, he was appointed Health Officer for the Port of New Amsterdam, Berbice, and on 27th September, 1937, Honorary Visiting Physician, Public Hospital, Berbice.

4. Dr. O. M. Francis, Government Medical Officer, was appointed Second Assistant Government Medical Officer of Health as from 1st January, 1937.

5. Dr. A. W. H. Smith, was appointed Medical Superintendent of the Mental Hospital, Berbice, as from 26th July, 1937. He arrived in the Colony on 8th August, and assumed superintendency of the hospital on 10th August, 1937.

6. Mr. D. I. C. Finlayson, F.R.C.S., was appointed to the new post of Assistant Surgeon, Public Hospital, Georgetown, as from 31st December, 1937.

7. Dr. F. A. Viapree, subsidised Medical Officer, Mahaicony District, was appointed District Surgeon, Mahaicony, as from 1st January, 1937.

8. Drs. L. S. Jaikaran and M. O. Luck, Supernumerary Medical Officers, were appointed Temporary Assistant Medical Officers, Public Hospital, Georgetown, as from 1st January, 1937.

9. Dr. G. M. Gonsalves was appointed Dental Surgeon, Public Hospital, Berbice, and Dental Surgeon to primary schools, New Amsterdam, Berbice, as from 1st October, 1937, *vice* Dr. L. S. Meikle, deceased.

10. Consequent on the transfer of Mr. E. Dalton to the Medical Department, Gold Coast, Mr. V. G. Connett, Assistant Government Radiographer, was appointed Government Radiographer as from 3rd November, 1937.

11. Mr. C. D. Delph was appointed Probationer, Medical Department, as from 21st June, 1937, and assigned duty in the Surgeon-General's Office.

12. Mr. J. O. Morgan, temporary Technical Assistant Bacteriological Department, was appointed permanently as from 1st January, 1937.

13. Mr. L. S. Harry was appointed Issuer, Public Hospital, Berbice, as from 8th June, 1937, *vice* Mr. Y. Mohamed, who was transferred to the Mental Hospital, Berbice.

14. Mr. E. Sandiford, Assistant Nurse, Public Hospital, Georgetown, was appointed to the new post of Teacher-Dispenser-Cattle Trail Clerk, Rupununi, as from 1st September, 1937.

15. Misses O. D'Agrella and M. Roberts were appointed telephone operators at the Public Hospital, Georgetown, as from 6th April and 1st December, 1937, respectively, *vice* Miss E. Johnson, resigned, and Miss G. Savory, transferred to the Central Exchange of the Postal Department.

Temporary Appointments.

16. During the absence on leave of Dr. J. A. Henderson, as from 12th June, 1937, and consequent upon his transfer to St. Vincent as from 11th December, Dr. B. N. V. Wase-Bailey, Government Medical Officer of Health, acted as Surgeon-General from 12th June to 31st December, 1937, in addition to his substantive duties.

17. Dr. G. A. Grandsault acted as Medical Superintendent, Mental Hospital, Berbice, as from 1st January, to 9th August, 1937.

18. Dr. E. G. H. Payne, Government Medical Officer, acted as Government

Bacteriologist and Pathologist in addition to his own duties as from 5th June to 31st December, 1937, *vice* Dr. G. H. Steven who went on leave prior to retirement.

19. Dr. S. C. Bettencourt-Gomes, Senior Physician, Public Hospital, Georgetown, acted as Resident Surgeon, and Dr. G. W. Mearns, Senior Surgeon, Public Hospital, Georgetown, as Surgeon Specialist, Public Hospital, Georgetown, as from 24th May to 26th October, 1937, in addition to their substantive duties, during the absence on leave of Mr. J. D. Grierson, F.R.C.S., Resident Surgeon and Surgeon Specialist, Public Hospital, Georgetown.

20. Dr. H. Ho, Government Medical Officer, acted as Government Ophthalmologist as from 28th March to 15th October, 1937, *vice* Dr. J. A. Browne, who was on leave of absence.

21. Dr. W. D. Pollard, Government Medical Officer, acted as Resident Surgeon, Public Hospital, Bartica, as from 23rd March to 31st December, 1937, *vice* Dr. H. Ho.

22. Dr. E. W. Reece, Government Medical Officer, was appointed to act as Resident Surgeon, Public Hospital, Suddie, as from 1st December, 1937, *vice* Dr. G. M. Kerry, Government Medical Officer, who was transferred to the Peter's Hall District.

23. Dr. L. S. Jaikaran, Temporary Assistant Medical Officer, acted as Resident Surgeon, Public Hospital, Mabaruma, from 25th November to 31st December, 1937.

24. Mr. V. G. Connett, Assistant Government Radiographer, acted as Government Radiographer, as from 12th June to 2nd November, 1937, during Mr. E. Dalton's absence on leave.

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

Dr. L. S. Jaikaran, from 1st January to 31st December; Dr. H. M. Hugh, from 1st January to 30th November; Dr. L. H. Wharton from 1st January to 10th May, from 1st to 10th June, and again from 1st July to 30th November; Dr. C. C. Nicholson from 1st to 9th January and from 31st March to 31st December; Dr. R. Singh from 19th March to 31st December; Dr. J. Bissessar from 22nd March to 20th June, and from 1st to 12th August; Dr. A. S. Chiekrie from 15th July to 3rd August; and Dr. Q. B. De Freitas, M.B.E., from 18th May to 30th June, 1937.

26. Dr. J. W. D. Ferdinand acted as a Temporary Assistant Medical Officer from 1st January to 31st December, 1937, *vice* Dr. L. S. Jaikaran, who acted as a Government Medical Officer throughout the year.

27. Mr. E. Madhoo, second class dispenser, was seconded for service with the British Guiana-Brazil Boundary Commission as from 1st September, 1937.

28. Miss O. D'Agrella was appointed to act as telephone operator, Public Hospital, Georgetown, as from 6th January to 5th April, 1937, during the absence on leave of Miss E. Johnson.

29. Miss G. Lewis acted as a temporary probationer in the Surgeon-General's Office from 1st January, 1937, to 30th June, and again from 1st September to 31st December, 1937.

Transfers.

30. Dr. J. A. Henderson, Surgeon-General, was transferred to St. Vincent as Senior Medical Officer as from 11th December, 1937.

31. Mr. E. Dalton, Government Radiographer, was transferred to the Medical Department, Gold Coast, as from 3rd November, 1937.

32. Miss G. Savory, telephone operator, Public Hospital, Georgetown, was transferred to the Central Exchange of the Postal Department as from 1st November, 1937.

Retirements and Resignations.

33. Dr. G. H. Steven, Government Bacteriologist and Pathologist, retired on pension as from 27th October, 1937, on account of superannuation.

Deaths.

34. Dr. L. S. Meikle, Dental Surgeon, Public Hospital, Berbice, died on 6th February, 1937.

Nursing Staff.

35. 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 M. Hepenstall,
Mrs. J. McClymont Type, and
Miss A. Killops.

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

Ordinances, Regulations, etc.

36. The following Ordinance was passed during the year :—

The Dangerous Drugs Ordinance, 1937—An Ordinance to regulate the importation, exportation, production, manufacture, sale and use of Opium and of certain other dangerous drugs and to make further and better provision for the control of the external trade in dangerous drugs.

The following Regulations were made during the year :—

(a) The Nurses (Registration) (Amendment) Regulations, 1937—

Regulations amending the regulations for the registration of nurses, 1924, in respect of the fee payable for registration.

(b) The Dangerous Drugs Regulations, 1937—Regulations made under section 9 of the Dangerous Drugs Ordinance, 1937, for controlling the manufacture, sale, possession and distribution of dangerous drugs, to which Part IV of that Ordinance applies.

(c) The Dangerous Drugs (Licensing Conditions) Regulations, 1937—

Regulations setting out the conditions under which dangerous drugs licences or authorities may be issued.

(d) The Medical Board (Election) Regulations, 1937—Regulations prescribing the manner in which elections for filling vacancies on the Medical Board of British Guiana are to be held.

The following Orders in Council were issued during the year—

(a) Order in Council under section 10 (3) of the Dangerous Drugs Ordinance, 1937, as to the application of Part IV of the Ordinance.

(b) Order in Council under section 10 (4) of the Dangerous Drugs Ordinance, 1937, excluding certain preparations containing morphine, cocaine, etc., from the provisions of Part IV of the Ordinance.

(c) Order in Council under section 11 (3) of the Dangerous Drugs Ordinance, 1937, applying Part IV of the Ordinance to methylmorphine (commonly known as codeine), ethylmorphine (commonly known as dionin) and their respective salts.

The following Proclamation was issued during the year :—

Proclamation bringing into operation the Dangerous Drugs Ordinance, 1937, on the 1st day of January, 1938.

The following Government Notice under the provisions of section 22 of the Leprosy Ordinance, 1931, was published during the year :—

Notice describing the places where persons suffering from Leprosy certified as persons of unsound mind may be detained in the Leprosy Hospital.

Financial.

37. The following is a comparative statement of revenue and expenditure for the years, 1935, 1936 and 1937.

(a) Revenue—Medical Department.

1935.	1936.	1937.
\$39,679.03 (includes \$2,068.85 for rent of quarters occupied by Medical Officers).	\$40,700.83 (includes \$2,535.32 for rent of quarters occupied by Medical Officers).	\$38,048.40 (includes \$2,286.52 for rent of quarters occupied by Medical Officers).

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

1935.	1936.	1937.
\$569,067.53	\$564,307.02	\$554,089.95.

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

1935.	1936.	1937.
10.9%	10.3%	8.4%

II.—PUBLIC HEALTH.

GENERAL REMARKS.

39. *The state of the Public Health.*—As judged by the Vital Statistics for the year 1937, the state of the public health was well maintained, although the figures in some respects were slightly adverse as compared with those of the previous year. Whilst the number of births still exceeded 11,000, there were some 500 less than in 1936 and the deaths rose to 7,367 as against 6,800. The birth-rate was 2 per thousand and lower and the death-rate 1.5 per thousand higher than in the previous year.

The number of deaths of infants under one year of age was slightly less, but the infantile mortality rate was 1 per thousand higher, as must be expected in terms of the reduced number of births. The number of still-births, as recorded, has shown little variation during the past decade. Further comments on the Vital Statistics will be found under that heading later in the report.

40. *Tuberculosis.*—From the grant of £15,330 from the Colonial Development Fund, a sum of \$4,500 was utilised to bonify the proposed site at Best, West Coast, Demerara. In the report for 1936 a full statement was given as to the reasons for the choice of the site, which being Colony land, did not require to be purchased. Owing, however, to the burning of earth to be used for the levelling of roads, the surface of the land had in places been lowered considerably. It was in fact necessary to raise the level over certain areas to the extent of 2½—3 feet. The difficulty of obtaining earth within reasonable distance considerably enhanced the cost, but the work was completed in December, 1937, and the land now has withstood continuous and heavy rains. At the time of writing, the old building has been pulled down and the erection of the first of the new buildings is nearing completion. The plan includes provision of a main block for acute and chronic cases and two smaller blocks for male and female convalescent cases. In addition, there will be quarters for the doctor, the matron and the nurses, a recreation room, specially to be devoted to indoor recreation for the patients, the administration block, kitchen and laundry and the watchman's lodge. Full facilities have been provided in the Estimates for the free transport of visitors across the river.

Provision has also been made for a Third Assistant Government Medical Officer of Health who will also serve as Tuberculosis Officer, residing in the quarters provided.

41. *Venereal Diseases*.—The Venereal Disease Clinic at the Public Hospital, Georgetown, has continued and to some extent extended its activities during the year under review. There is at the moment under consideration preparation of a scheme of extension of activity in connection with the social diseases throughout the colony, both in the villages and on the plantations. Such an extension will warrant the appointment of a whole-time Assistant Venereal Diseases Officer in order to permit of tours of inspection and of organising and controlling outlying clinics. In the Public Hospitals of New Amsterdam and Suddie, and to a less extent at Bartica, limited provision has also been made, but it is hoped that funds will soon be made available for the expansion of this work.

42. *Maternity and Child Welfare*.—The allocation of a sum originally standing at \$3,800, but now a little larger with accrued interest to the Infant Welfare and Maternity League, being the amount subscribed by persons throughout the Colony to the King George V Silver Jubilee Fund, is being expended in the provision of couch cabinets, and these are now being distributed to as many branch clinics as possible. This provision for privacy of medical examination of mothers and for the storage of equipment will meet a real need which has existed for many years.

The activity of the 60 branch clinics of the League has been well maintained throughout the year and has been recorded separately in the Annual Report of the League. Re-organisation, financial and as regards personnel, has also been effected. The sub-committee of the League is still considering how best closer co-operation between League midwives and private registered midwives may be achieved with a view to bringing all practising midwives under the League's auspices.

43. *Nutrition*.—The Nutrition Committee which was appointed in July, 1936, completed its deliberations and submitted its Report to the Honourable Colonial Secretary on 10th February, 1937. The report was published as a Sessional Paper (No. 3 of 1937). Whilst reference to that report is invited, it may be stated here that it includes statements on the following subjects:—the soil, water and food products, the analysis of foodstuffs, the prevailing racial and dietetic habits, the educational and economic aspects, with an appendix briefly reviewing the state of the Colony as regards health, agriculture, etc.

Briefly, the recommendations of the Committee may be summarised into three heads as follows:—

- (1) Preliminary investigation and enquiry, involving the appointment of a medical officer and of a health visitor, with clerical assistance, and the collection of all available data;
- (2) experimentation to test out the methods arising from (1); and
- (3) the practical application on a Colony-wide scale of those methods of improvement which by experimentation have been found to be possible.

The Committee is still engaged upon the first stage, but has also commenced a scheme for the experimental distribution of milk to selected groups of school children of the African and East Indian races.

44. *Housing and District Planning*.—Paragraphs 50-52 of the report for 1936 still stand. Upon such a matter and with no existing major scheme because of financial reasons, progress must inevitably be slow. Further reference to this subject is made later in the report.

A.—General Diseases.

45. *Nephritis*.—The total number of deaths was 626 which gave a rate of 1·8 per 1,000 in 1937 compared with an average of 588 deaths and a mean rate of 1·7

during the years 1927-1936. 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 :—

Year.				Cases.	Deaths.	Case Mortality.
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%
1936	...	...	...	462	113	24.4%
1937	...	...	...	556	111	19.8%

46. *Respiratory Diseases*—Pneumonia (Lobar and undefined pneumonia) was responsible for 385 deaths throughout the colony with a rate of 1.1 per 1,000 compared with 339 deaths with a rate of 1.01 per 1,000 in 1936, and 369 and 1.1 in 1935.

47. *Bronchitis and Broncho Pneumonia* caused 549 deaths which is equivalent to a ratio of 1.6 per 1,000. During the previous ten years the number of deaths averaged 594 with a mean rate of 1.8 per 1,000.

48. *Diseases of the Heart*.—There were 406 deaths registered in the Colony from all forms of heart diseases (excluding diseases of the arterial, venous and lymphatic systems). 401 cases were treated in public hospitals with 132 deaths.

49. *Bowel Diseases (excluding the Enterics and Dysenteries)*.—The number of deaths registered in 1937 was 369 as compared with 318 in 1936. The average number of deaths during the previous ten years was 413 while the mean rate per 1,000 was 1.3 compared with 1.4 in 1936.

50. *Cancer and other malignant tumours*.—The total number of deaths from cancer in the Colony during 1937 is given by the Registrar General as 147 as against 110 in 1936. The number of deaths and the death-rate per 1,000 from cancer from 1928 to 1937 are as follows :—

Year.	No. of Deaths.	Rate per 1,000 of Population.
1928	67	.21
1929	76	.24
1930	89	.28
1931	87	.27
1932	112	.35
1933	86	.26
1934	113	.35
1935	113	.34
1936	110	.33
1937	147	.43

51. The average annual number of deaths during this decade was 100, representing a mean annual rate of .31 per 1,000 of the population.

52. 150 cases (new and old) of malignant diseases with 42 deaths were treated in public hospitals.

53. The following table gives the different forms of malignant growths (new cases) recorded in public hospitals together with the racial incidence.

	Carcinoma.		Sarcoma.		Epithelioma.		Rodent Ulcer.		Endothelioma.		Unclassified.		TOTAL.	
	1936	1937	1936	1937	1936	1937	1936	1937	1936	1937	1936	1937	1936	1937
European (other than Portuguese)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
European (Portuguese)	4	2	...	1	...	1	...	1	...	...	...	1	4	6
East Indian	31	20	2	2	1	2	...	...	...	...	...	1	34	25
African	59	53	12	7	1	1	1	...	...	...	...	...	63	61
Mixed	15	11	1	...	...	...	...	...	...	...	1	...	17	11
Chinese	12	...	2	1	...	...	...	...	...	...	...	...	4	1
Aboriginal Indian	...	1	...	...	...	...	...	...	...	...	...	...	...	1
	111	87	7	11	2	4	1	1	...	...	1	2	122	105

54. The following table furnishes a comparative statement of diseases treated, with deaths in Government hospitals during the years 1933, 1934, 1935, 1936 and 1937.

	1933.		1934.		1935.		1936.		1937.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Malaria	2,509	167	2,364	154	2,535	161	2,359	125	2,169	125
Blackwater Fever	9	2	10	3	10	3	10	2	8	2
Dysentery	135	20	183	32	109	14	73	12	129	23
Enteric Fever	96	30	136	41	149	44	314	85	254	42
Diarrhoea and Enteritis and Colitis	329	80	460	159	255	39	211	45	407	67
Filariasis (and Filarial Bubo)	271	19	244	13	268	19	283	14	281	12
Heart Disease (all forms)	249	135	403	145	413	143	417	142	401	132
Nephritis (including Uraemia)	459	150	538	159	549	111	462	113	556	111
Pneumonia	177	118	136	92	162	100	188	99	216	140
Broncho-pneumonia	108	52	92	57	83	49	62	38	73	47
Bronchitis	706	103	792	118	753	82	590	66	584	40
Tuberculosis (including Phthisis)	538	165	456	135	487	146	480	143	530	197

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

	1933.	1934.	1935.	1936.	1937.
Malaria and Undefined Fevers	1,140	1,203	694	754	755—Malaria Fever. 327—Undefined Fevers.
Blackwater Fever	6	13	8	7	8
Dysentery	118	235	72	60	113
Enteric Fever (including Typhoid and Paratyphoid Fevers)	68	85	69	115	65
Enteritis (including Diarrhoea)	456	595	290	318	399
Filariasis (including Filarial Bubo)	73	38	43	65	32
Heart Disease (all forms)	359	343	379	379	406
Nephritis (including Uraemia)	517	573	539	584	626
Pneumonia	441	362	369	359	385
Broncho-pneumonia	271	194	222	193	231
Bronchitis	415	448	419	345	318
Tuberculosis (including Phthisis)	289	253	274	261	248

56. The diseases responsible for the highest number of deaths for the whole Colony during the years 1933, 1934, 1935, 1936 and 1937, arranged in quarterly periods, are shown in the following table:

Diseases.	March Quarter.					June Quarter.					Sept. Quarter.					Decr. Quarter.					Total.				
	1933	1934	1935	1936	1937	1933	1934	1935	1936	1937	1933	1934	1935	1936	1937	1933	1934	1935	1936	1937	1933	1934	1935	1936	1937
Malaria and Undefined Fevers	232	421	...	...	...	226	257	...	...	...	369	225	...	...	...	353	366	...	...	...	1,140	1,260	...	...	...
Malaria	...	...	191	176	196	...	...	138	169	154	...	...	156	203	171	...	...	209	206	234	...	...	694	754	755
Undefined Fevers	...	...	61	72	74	...	...	58	66	69	...	...	82	81	81	...	...	59	58	103	...	...	260	277	327
Pneumonia and Bronchitis	380	415	247	245	246	219	320	227	270	251	201	245	212	232	250	169	198	193	176	1,127	1,004	1,010	877	934	...
Kidney Diseases	157	186	157	157	181	111	137	141	137	148	117	120	125	141	149	143	142	127	151	152	528	585	550	583	630
Diseases of early Infancy (including Premature Birth, Infantile Debility, etc.)	229	302	297	166	162	118	143	120	134	115	170	166	116	162	188	203	165	164	169	175	711	716	607	631	640
Bowel complaints (including Dysentery, Diarrhoea, Enteritis, etc.)	179	309	121	110	146	132	261	98	110	109	135	120	108	107	107	206	134	90	129	190	646	914	417	466	582
Phthisis and other forms of Tuberculosis	104	68	79	59	68	58	75	75	58	79	70	48	61	70	92	57	62	59	74	59	289	253	274	261	298
Diseases of the Circulatory System	99	128	116	123	138	106	118	98	102	108	99	84	131	122	128	133	95	100	105	107	437	423	445	452	481
Diseases of the Nervous and Sense Organs	98	123	98	105	77	101	107	93	79	119	78	85	80	81	80	109	97	98	93	100	386	412	369	358	385

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

	1933.	1934.	1935.	1936.	1937.
1st Quarter	18.00	33.90	20.35	18.01	13.62
2nd Quarter	32.50	14.73	27.68	40.36	35.67
3rd Quarter	24.43	15.31	27.24	13.47	26.91
4th Quarter	41.62	17.60	11.63	32.25	16.86
Total	116.55	81.64	86.35	104.09	92.16

B.—Communicable Diseases.

MOSQUITO OR INSECT-BORNE.

58. *Malaria*.—The statistical data concerning the incidence of, and mortality from malaria are obtained from the hospitals and dispensaries and from the Registrar General. A total of 2,169 cases were treated (of which 2,116 represented new admissions) as in-patients to the public hospitals, whilst 16,769 persons were treated as out-patients for this disease in the public hospitals and dispensaries. Of the 2,169 in-patients, 1,708 were unclassified as to type, there being 150 benign tertian, one quartan, 246 chronic, and 64 sub-tertian, with 8 cases of blackwater fever. Of the deaths, 4 were stated to be from benign tertian, 10 from sub-tertian, 17 from chronic malaria, 2 from blackwater, and 94 as unclassified malaria.

59. The Registrar General reports 755 deaths from malaria throughout the Colony, together with 327 deaths from undefined fever. Prior to 1935 no differentiation was recorded. Taking these figures together (as 1,082) for the purposes of comparison with previous years, the average annual number of deaths from malaria for the past quinquennium (1933—1937) was 1,082 as against 1,146 for the previous five years (1928—1932). The average annual population of the Colony for the two quinquennia was 328,517 and 312,276 respectively.

60. Malaria fever still remains the Colony's most important disease and annually causes the death of more than 750 persons. Formerly this figure stood much higher but it is possible that routine sanitary activity along the coastlands has borne fruit over the years, as expenditure upon any major preventive scheme has not been found possible.

61. It is hoped that the services of a malariologist may be made available through the generosity of the Rockefeller Foundation. What is really required is an exact survey of coastal and up-river areas with a view to ascertaining those

species of the anopheline mosquito which are primarily responsible, the obtaining of infectivity rates and the mapping of endemic areas.

62. It is generally known that the usual sequelae of malaria are prevalent throughout the Colony, and of these nephritis, enteritis, neuritis and respiratory conditions are the most outstanding. If this be so, and if malaria fever is eliminated save perhaps in certain remoter areas, it would appear that British Guiana might well become one of the healthiest colonies in the West Indies.

63. 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 1928-1937 :—

Year.	Total In-Patients.	Cases Malaria including Black-water Fever.	Deaths Malaria including Black-water Fever.	Case Mortality.	Rainfall (Inches).
1928	20,126	2,667	156	6.0%	96.48
1929	19,577	2,394	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	19,965	2,374	157	6.6%	81.04
1935	20,528	2,545	164	6.4%	86.35
1936	21,026	2,369	127	5.3%	104.09
1937	20,298	2,177	127	5.8%	92.16

64. 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.
1933	58,308	10,987	18.8
1934	61,640	10,672	17.3
1935	64,803	12,052	18.5
1936	64,449	8,867	16.2
1937	57,792	9,312	16.1

65. The total amount of quinine products issued to Government hospitals, dispensaries and departments and to schools and mission stations was :—

Description.	Amount issued.	Cost.
Quinine Sulphate	351 lbs.	\$2,632 00
Quinine Bihydrochloride	48 lbs.	510 72
Quinine Bihydrochloride Ampoules (10 gr. ampoules 6 in each box)	632 boxes	122 68
Totaguina Tablets—gr. i	4 lbs.	20 16
Totaguina Tablets—gr. iii	13 lbs.	36 40
Totaguina Tablets—gr. v	433 lbs.	1,116 24

66. In addition the amount of anti-malaria specifics (synthetic) issued was :—

Description.	Amount Issued.	Cost.
Atebrin Tablets (300 tablets in each bottle)	133 bottles	\$ 720 00
Atebrin Ampoules	101 boxes	59 50
Plasmoquine Simplex Tablets	1,800 tablets	75 80
Quino-plasmoquine Tablets	10,300 tablets	145 00

67. 8 deaths were registered in the whole Colony as due to blackwater fever as compared with 7 in 1936. 8 cases were treated in public hospitals with 2 deaths as against 10 cases and 2 deaths in 1936.

68. The districts in which those cases most probably contracted the disease were Georgetown; Buxton, East Coast, Demerara; Lower Canje-Highury and Cotton Tree, Berbice.

69. *Filariasis*.—The deaths registered throughout the whole Colony were 32. Of these only 24 were certified by registered medical practitioners. Of the 32, 6 were European (Portuguese), 3 East Indian, 21 Black, and 2 of mixed races. No less than 65.6 per cent. of the deaths therefore occurred amongst Africans who represent only 38.8 per cent. of the total population of the Colony.

70. Of the 32 deaths, 4 occurred amongst males and 28 amongst females.

71. In the public hospitals of the Colony 602 persons were recorded as suffering from filariasis in the out-patient departments, of whom 172 were males and 430 females. Of in-patients there were 281 cases with 12 deaths. Of these 246 cases and 12 deaths were in respect of the Public Hospital at Georgetown. The preponderance of cases and deaths at this hospital does not necessarily mean that they originate in the city, but with the onset of the septicaemia many cases are referred to the central hospital.

72. 5 cases of filarial bubo are recorded as having been treated as out-patients in the Potaro Hospital.

73. As regards elephantiasis only 10 male and 12 female cases are recorded as out-patients in all the hospitals for the year, with 21 in-patients and no deaths.

74. There were no cases of yellow fever or small-pox.

C.—Infectious Diseases.

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

76. *Influenza*.—25 cases were treated in public hospitals with 2 deaths. The deaths registered as due to the same disease throughout the Colony were 56.

77. *Dysentery, including amoebic, bacillary and other forms*.—The deaths registered throughout the Colony numbered 113, representing a death-rate of .3 per 1,000 of the population. During the two quinquennial periods 1928—1932 and 1933—1937 there were recorded 627 and 598 deaths respectively.

78. Taking the out-patients at all the public hospitals (though the figures are not very reliable) recorded as suffering from all forms of dysentery, it will be found that there were 726 cases during the quinquennium 1928—1932, and only 526 from 1933 to 1937. Of all cases during the decade 903 were male and 349 females.

79. As regards in-patients of all public hospitals, the same quinquennial periods showed 780 cases with 86 deaths as against 629 cases with 101 deaths, respectively. The case mortality for the two quinquennial periods was 11 per cent. for the earlier and 16 per cent. for the latter period.

80. *Tetanus*.—31 cases were treated in public hospitals with 13 deaths, compared with 30 cases and 14 deaths in 1936.

81. *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.	Gonorrhoea and its Com- plications.	Granuloma Venereum.
	Primary.	Secondary.	Tertiary.	Hereditary.	Stage not Indicated.			
1928	157	28	418	88	1	170	372	145
1929	228	31	352	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	95	35	654	62	3	46	696	83
1935	130	16	433	41	2	38	657	69
1936	68	17	460	46	...	47	624	69
1937	67	22	429	41	...	59	646	85

82. The number of Novarsenobillon and other injections given for syphilis at the public hospitals was 26,721 compared with 21,050 in 1936.

83. 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 1937 :—

(i)—PUBLIC HOSPITALS.*

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chaneroid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year	...	...	...	...	...	...	...	...	...	...	...	...	7	7	14	7	6	13	...	...	...	...	...	...
1 to under 5 yrs.	...	...	...	...	...	...	...	...	...	...	...	...	3	7	10	1	7	8	...	...	...	...	...	...
5 " 10	...	...	...	...	...	...	...	...	...	...	...	...	...	7	7	2	4	6	...	...	...	...	...	...
10 " 20	...	...	...	...	...	...	...	...	...	...	...	...	...	12	18	32	25	57	4	16	50	1	4	5
20 " 30	26	5	31	4	6	10	57	67	124	3	2	5	180	50	230	72	48	120	25	6	32	20	18	38
30 " 40	9	9	18	4	1	5	84	56	140	1	...	...	1	90	10	100	60	22	82	15	2	17	12	9
40 " 60	13	...	13	5	...	...	105	59	164	...	...	...	4	2	48	79	12	91	9	...	9	15	8	23
60 years and over	2	...	2	...	...	...	20	10	30	...	...	...	...	4	...	4	11	2	...	2	4	1	5	...
Total	58	16	74	15	9	24	273	206	479	20	35	55	362	104	466	226	98	324	53	12	65	54	42	96

*NOTE.—The totals in this table differ from those in the table above in that cases of double infection are here included.

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

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chaneroid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	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 yrs.
5 " 10
10 " 20
20 " 30
30 " 40
40 " 60
60 years and over
Total	5	...	5	...	...	...	...	...	...	6	3	9

84. 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 1937 :—

(i) PUBLIC HOSPITALS.

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chaneroid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year	...	...	...	...	...	...	...	...	...	...	...	...	3	3	6	...	...	...	...	...	...	...	...	...
1 to under 5	...	...	...	...	...	...	...	...	...	...	...	...	1	6	7	1	5	6	...	...	...	...	...	...
5 " 10	...	...	...	...	...	...	...	...	...	...	...	...	...	7	1	...	...	...	...	...	...	...	...	...
10 " 20	15	12	27	6	1	7	10	33	43	10	12	22	22	32	23	11	10	10	20	4	4	8	3	3
20 " 30	79	12	91	19	4	23	71	148	219	4	2	6	350	39	389	101	17	118	18	6	24	15	10	25
30 " 40	35	6	41	9	4	13	92	97	189	1	...	...	1	193	22	217	167	10	117	9	1	10	4	6
40 " 60	12	...	12	13	4	17	199	63	163	2	...	...	2	69	7	67	58	5	63	10	...	10	6	19
60 years and over	1	...	1	...	...	...	27	4	31	...	...	...	5	1	6	8	2	19	...	...	...	1	...	1
Total	142	30	172	47	14	61	301	347	648	23	37	60	711	98	809	384	44	328	41	11	52	29	16	45

(ii) GOVERNMENT DISPENSARIES.

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chancreoid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1 to under 5 yrs.	1	2	3	...	...	...	...	...	...
5 " 10	4	4	...	...	...	...	...	...	...
10 " 20	...	2	2	1	...	1	...	...	...	...	...	...	...	...	...	16	8	24	...	1	...	1	1	1
20 " 30	...	2	1	3	4	3	7	8	8	16	...	...	...	...	...	78	10	88	6	2	8	6	1	7
30 " 40	...	3	...	3	4	4	8	...	2	2	...	...	...	...	...	56	10	66	9	...	9	2	...	2
40 " 60	...	1	...	1	6	2	8	4	3	7	2	...	...	...	...	22	7	29	6	...	6	1	...	1
60 years and over	1	...	1	...	1	...	...	...	...
Total	...	6	4	10	15	9	24	12	13	25	2	...	2	174	41	215	22	2	24	10	1	11	2	4

(iii)—GEORGETOWN AND NEW AMSTERDAM PRISONS.

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chancreoid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	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	6	...	6	...	5	...	5	...	...
10 " 20	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	14	...	14	8	...	8	21	...	21
20 " 30	...	7	...	7	11	...	11	...	1	1	...	...	...	...	...	13	...	13	3	...	3	7	...	7
30 " 40	...	9	...	9	6	...	6	...	...	...	...	...	...	...	...	13	...	13	3	...	3	7	...	7
40 " 60	...	3	...	3	1	...	1	...	...	...	...	...	...	...	...	2	...	2	1	...	1	...	...	...
60 years and over
Total	...	20	...	20	18	...	18	...	1	1	...	...	35	...	35	12	...	12	33	...	33	7	...	7

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

	1935.	1936.	1937.
Gonorrhoea ...	215	136	178
Chancreoid ...	7	8	8
Syphilis (including tertiary) ...	109	107	171
Granuloma Venereum and Pudendi ...	...	...	3

86. Classified in age-incidence periods, the inpatients treated on sugar estates during the year were as follows :—

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chancreoid.			(d) Granuloma Pudendi.		
	Primary.				Secondary.				Tertiary.				Hereditary.											
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year	...	1	1	...	...	...	...	...	...	4	5	9	3	...	3	...	...	...	...	...	...	...	...	...
1-under 5 years	1	1	2	1	...	1	...	...	...	...	...	...	...	...	...
5-under 10	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
10-under 20	...	1	...	1	1	2	...	...	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
20-under 30	...	5	4	9	...	2	2	1	2	8	...	...	...	...	...	14	17	31	9	4	13	1	...	1
30-under 40	...	3	2	5	2	2	4	5	5	10	...	...	...	...	...	16	5	21	6	4	10	...	...	1
40-under 60	...	4	1	5	4	2	6	1	3	4	...	...	...	...	...	3	...	3	4	...	4	1	...	1
60 years and over	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	...	13	8	21	7	7	14	7	11	18	8	6	14	45	29	74	20	10	30	3	...	3	...	2

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

Age.	(a) SYPHILIS.												(b) Acute Gonorrhoea.			Chronic Gonorrhoea.			(c) Chancroid.			(d) Granuloma Pudendi.		
	Primary.			Secondary.			Tertiary.			Hereditary.														
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1-under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5-under 10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10-under 20	7	3	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20-under 30	22	10	32	2	7	9	2	...	2	...	...	...	19	5	24	6	1	7	2	...	2	1	...	1
30-under 40	6	7	13	6	7	13	1	...	1	...	...	...	15	4	19	6	1	7	...	...	...	...	...	...
40-under 60	2	2	4	5	5	10	7	1	4	...	...	...	5	...	5	2	1	3	2	...	2	...	...	...
60 years and over	...	...	...	2	...	2	1	...	1	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...
Total	37	22	59	15	22	37	7	1	8	...	...	...	44	12	56	14	4	18	5	...	5	1	...	1

88. Below are extracts from the annual report for the year 1937 of Dr. E. G. H. Payne, Medical Officer in charge of the venereal diseases clinic at the Public Hospital, Georgetown :—

"The staff consisted of

- 1 medical officer.
- 1 male nurse with status of charge nurse (whole-time).
- 1 female nurse (whole-time).
- 2 male nurses (part-time).
- 2 female nurses (part-time).

"Clinics.—Consultative sessions for men and women were held as hitherto. Male cases were seen on Tuesdays, Wednesdays, Fridays and Saturdays. Female cases were seen on Mondays and Thursdays. On each of these days, the sessions began at 1 o'clock p.m.

"Intermediate Treatment.—Nurses administered this treatment daily to male and female cases. It was found possible to provide this facility for men between the hours of 6.30 a.m. and 5.30 p.m. Female cases continued their daily treatment from 6.30 a.m. to 11.30 a.m.

"Pathological examinations.—Patients for Wasserman reaction were referred to the Government Bacteriological Department, where Harrison's No. 1 method was used exclusively. Smears for presence of Gonococci, etc., were also referred to the Bacteriological Department for microscopical examination.

"Elsewhere, in the statistical tables, is a statement relative to examinations carried out in the pathological section of the clinic. These examinations were limited to the diagnosis of primary syphilis by means of the dark-ground method, and the diagnosis of gonorrhoea by the smear method. It is regretted, however, that the absence of a medical assistant limited the scope of this work severely, and it should be mentioned also that the Bacteriological Department, frequently in the past as in the year under review, has protested about the amount of work sent in by this department. It has been necessary from time to time to curtail greatly the number of specimens for examination which is so necessary during treatment of cases of gonorrhoea. I take this opportunity once again to refer to the Gonococcal Complement Fixation test. It is regretted that the Bacteriological Department has not yet found it possible to implement this recommendation.

"Disease incidence—

Syphilis.—The total number of new cases of early syphilis was slightly higher than that of the year 1936. The number represents 22.5% of the total number of admissions for syphilis in all its stages.

"The ratio of this number of cases of early syphilis, *i.e.*, primary and secondary cases, to cases of acute gonorrhoea was 1 to 3.3.

"*Gonorrhœa*.—The number of new cases of acute gonorrhœa was approximately the same as in the previous year, but there was a drop of nearly 50% in the number of cases of chronic gonorrhœa admitted. It is difficult to comment satisfactorily on this latter feature. Bearing in mind the high defaulting incidence we suffer, it may well be that a large amount of chronic gonorrhœa goes untreated.

"*Chancroid and Granuloma*.—There was a reduction in the number of these cases.

"*Undiagnosed cases*.—The number of these cases is again regrettably high. Among these cases were many in an infective condition when they defaulted. It is customary not to diagnose under two months observation genital ulcers which are Wasserman negative. In some cases no more than two attendances are made per individual. In another group are cases of Leucorrhœa, many from the ante-natal centre, Georgetown, and others who have consulted of their own accord. Many of these cases demand long observation for the purpose of conducting smear examinations and cultural examinations. They have to fall in the category of undiagnosed cases, because of early defaulting mainly.

"*Defaulting Incidence*.—As hitherto, this incidence continues high. My views as to the cause of this incidence and my recommendations for its reduction remain unchanged.

"*The Child Welfare and Ante-Natal Clinic, Georgetown*.—The close co-operation between this centre and the Venereal Diseases Department has been maintained. That is to say, we continue to receive regularly a number of cases from this centre for treatment. It will be seen in the statistical report that 113 expectant mothers with latent syphilis were referred for treatment. Of this number 70 only attended, thus disclosing an initial default of 38% nearly. Of these 70 mothers who did attend, 53 defaulted before completion of a single or unit course of treatment. Thus, there was a total defaulting incidence of 86%. I have stressed this feature, for with the services of the nurses attached to the centre an intensive follow-up scheme could easily be maintained. It is admitted, however, that these women, or some of them, find waiting at the clinic somewhat tedious.

"It was possible to work throughout the year in the newly erected clinic. Although some alterations have been made in the interior arrangements with a view to securing further ventilation and light, it is still considerably hot in the clinic, which is conducted during the hottest period of the day. It is hoped that the ward housing tuberculosis patients, almost immediately abutting this department, will be demolished at an early date.

"It is also hoped that a third examination table may be considered for the year 1939."

APPENDIX A.

TABLE I.—NEW CASES (MALE AND FEMALE) ADMITTED TO THE VENEREAL DISEASES CLINIC DURING THE YEAR 1937.

	Sy. 1.	Sy. 2	Sy. 3.	Syphilis Hered.	Acute Gonorrhœa.	Chronic Gonorrhœa.	Chancroid.	Granuloma.	N.V.D.	Un- diagnosed
	121	43	523	41	533	176	20	22	85	557
Comparative figures for 1936.	126	27	640	70	564	316	68	13	121	540

TABLE II.—TOTAL ATTENDANCES OF CASES (OLD AND NEW)—MALE AND FEMALE—25,676.

	Syphilis.	Gonorrhœa.	Chancroid.	Granuloma.	N.V.D.	Undiagnosed.
Half year to June	6,710	3,171	154	180	107	2,096
Half year to December	7,173	3,463	151	239	86	2,126

TABLE III.—NUMBER OF TREATMENTS GIVEN WITH—

	Intravenous Arseno-Benzene Co.	Bismuth Preparations.	Tartar Emetic.	G. C. and mixed Vaccines.	Others.*
Half year to June ...	4,259	5,069	407	414	384
Half year to December ...	4,449	5,185	463	446	446
Total ...	8,708	10,254	810	860	830

* Including injections of Sulphostab, Contramine, Manganese Butyrate, S.U.P. 36. Trypaflavine, Soluseptavine, Bisoxylonacine, Calcium Gluconate, and Ametox.

TABLE IV.—DISMISSALS FROM CLINIC.

	Cured.	Non Venereal disease.
Male ...	54	85
Female ...	2	73
Total ...	16	158

TABLE IV (a)—DEFAULTERS—MALE.

	Under 3 months.	Before comple- tion of 2 courses of treatment.
Sy. 1 ...	19	...
Sy. 2 ...	5	...
Sy. 3 ...	58	...

(b)	Under 1 month.	Under 3 months.	Apparently cured—Tests not completed.
Ae. G. ...	98	44	} 55
Ch. G. ...	19	15	

(c)—DEFAULTERS—FEMALE.

	Under 3 months.	Before comple- tion of 2 course of injections
Sy. 1 ...	7	...
Sy. 2 ...	...	...
Sy. 3 ...	101	228
Ae. G. ...	9	...
Ch. G. ...	7	...

TABLE IV. (d)—CASES REFERRED FROM CHILD WELFARE CENTRE.

	Total number referred.	Total number attended.	Number of attendances.	Defaulted under 3 months.
Sy. 3 ...	113	79	43	48
Leucorrhoea for investigation ...	...	43	...	12

TABLE V.—MISCELLANEOUS.

Undiagnosed cases—Number with penile ulcers 63 (defaulted before completion of tests).
Cases—First infection—Gonorrhoea—133 males.

TOTAL NUMBER OF INTERMEDIATE TREATMENTS GIVEN.

Males ...	28,345
Females ...	15,188
Total ...	43,533

Total number of persons who attended the clinic:—

Male and Female—3,297.

TABLE VI.—PATHOLOGICAL EXAMINATIONS MADE IN THE VENEREAL DISEASES DEPARTMENT.

Dark ground examinations for presence of *S. pallida*—46.
Smears for presence of Gonococci, etc—143.

89. *Yaws*.—11 cases were treated in public hospitals compared with 10 cases in 1936. There were no deaths. 22 cases were treated in the out-patient departments as against 157 in 1936.

90. *Leprosy*.—The number of new admissions to the Leprosarium was 32, 20 males and 12 females. There were 24 deaths—18 males and 6 females, giving a death-rate of 4·8 per cent. of the total number of inmates.

91. Two more Sisters of Mercy from the United States assumed the charge of the Lady Denham Home, bringing the total number up to ten. These Sisters continue to render invaluable services to the Institution and their presence and their devotion have had a mark effect on the conduct of the patients.

92. The programme of maintenance and reconstruction works was continued during the year by the Public Works Department. Much difficulty is still experienced in finding room for acute cases in the Institution, the total capacity of the male and female infirmaries being only 75 beds out of an average total of 380 cases.

93. The following are extracts from the annual report for the year 1937 of 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*.—The roads are now in fair condition. The grounds, on the whole have been well kept, especially the cricket ground and tennis lawns. Some portions are, however, still in need of bushing and levelling.

"*Water Supply*.—There was no lack of potable water during the year, owing to the artesian well supply on which we are dependent in the dry seasons.

"*Sanitation*.—Sceptic tanks have now been installed in most places and only in the administrative block and part of the female compound is dependence still placed on the pail system for the disposal of excreta.

"Mosquito and flies have made their seasonal visitations but have shown some reduction in numbers.

"The grounds in general and the wards have been kept clean and there has been no outbreak of acute infectious disease, nor any deaths from malaria.

"*Dietary*.—Every effort was made to secure a sufficient and well-balanced diet, with success, if we may judge by the increase in weight of patients which is the usual result of admission to the hospital.

"The cooking of the food, however, leaves something to be desired except in the Children's Homes from which no complaints were received on this score.

"The bread which is obtained from the Prison Bakery proved at times so unsatisfactory that biscuits had to be issued instead. Representations were made to the proper authorities, and we look forward to some improvement in the future.

"The milk supply also was unsatisfactory and many patients ask for condensed milk in consequence.

"*The Patients*.—(a) Discipline. The behaviour has been on the whole excellent.

"There were 7 births during the year, one being the result of illicit intercourse.

"There were 2 absconders.

"(b) *Occupation*.—The usual minor repairs of buildings, painting, weeding of the grounds, making of boots, shoes, slippers and clothing for the patients were done by the attendant and patient artisans and casual weeders.

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

"Patients also assisted in maintaining cleanliness in the grounds and wards, dressing ulcers, and giving treatment in the Electro-therapeutic department.

(c) *Sports and Pastimes*.—Cricket and tennis were played as usual, the cricket team enjoying a most successful season, in which they played 26 matches against outside teams, with the loss of only 3.

"The usual dances and entertainments were organised, the wireless receiving set and the "talkie" programmes were in great demand

"The Guide troops and Brownie Packs under the leadership of Mrs. F. G. Rose, Commissioner of Guides on the East Coast, Demerara, maintained all their activities.

"During the year a beautiful Standard was given to the Guides by the Hindhead Division of the County of Surrey Guides, England, and was formally presented to them by Mrs. G. R. Reid in the presence of Mrs. M. B. Laing, Colony Commissioner.

"(d) *Religious Observances*.—The Rev. Canon Salmon visited and ministered to those of the Anglican Communion during the year; the Rev. H. Pendlebury, S. J., acted as Catholic Chaplain, while the Revs. C. Biles and J. B. Brooms ministered to the Presbyterian and Wesleyan Congregations respectively. Regular services were held also by the Seventh Day Adventist Sect.

"(e) *Visitors*.—Official visits were paid by His Excellency the Officer Administering the Government, the Hon. E. J. Waddington, C.M.G., O.B.E., accompanied by his A.D.C.; Mr. Alexander Patterson, His Majesty's Commissioner of Prisons in England and Wales; the Surgeon-General, the Hon. Dr. J. A. Henderson and the acting Surgeon-General, the Hon. Dr. B. N. V. Wase-Bailey; Dr. Sneath, Assistant Government Medical Officer of Health; the District Engineer, East Coast, Demerara, Mr. R. B. Craig; the County Inspector of Police, Mr. T. H. Whittingham, and the Board of Official Visitors, comprising Mrs. S. H. Bayley, Mrs. C. W. H. Collier, the Rt. Rev. the Bishop of Guiana, the Very Rev. J. L. Morrison, S.J., the Ven. Archdeacon Kissack, the Rev. Canon Rowe and Mr. A. Groves.

"The Leprosy Board, comprising the Medical Superintendent as Chairman, the Government Bacteriologist, the Government Medical Officer of Health, Drs. F. T. Wills and S. C. Bettencourt-Gomes, held three meetings for the purpose of confirming admissions and examining discharged cases.

"Other visitors included the Rt. Rev. E. A. Parry, late Archbishop of the West Indies; the Rt. Rev. Bishop Weld, S.J.; His Honour the Chief Justice, Sir Bernard Crean, Kt.; Mrs. L. J. Rowe and the following from abroad:—

Mr. Theodore J. Waldeck and Dr. F. J. Fox of New York, U.S.A.

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

"A sum of \$138.04 was collected by Mrs. F. G. Rose from various firms and individuals out of which Christmas gifts for all the patients were provided.

"(g) *School*.—There were 32 scholars on the register, the average attendance being 27.2.

"The school was unofficially inspected by Messrs. G. W. Forsythe and J. I. Inasi, head teachers of De Hoop and Unity Canadian Mission Schools, respectively.

"(h) *The Children*.—There are 12 girls and 11 boys in the Bishop Galton Home and 9 girls and 9 boys at present in the Lady Denham Home.

"The children in both homes are kept fully occupied and those in the Lady Denham are being trained in the cultivation of the soil as well as in other pursuits.

"(i) *Treatment*.—The treatment continues to yield satisfactory results.

"919 prescriptions were written for male and 528 for female out-patients from the cottages, while 115 males and 62 females were treated as in-patients during the year.

"79 operations were performed on the male side and 67 on the female, their nature being as follows :—

Sequestrotomy	...	...	22
Excision of Nodules	...	...	40
Amputations—			
Leg	...	1	
Foot	...	1	
Finger	...	6	
Toe	...	5	13
		—	
Circumcision	...	...	3
Transplantation of nerve	...	...	5
Incision and Curettement	...	...	17
Incision and drainage	...	...	10
Removal of Gland	...	...	4
Excision of infected Olecranon Bursa	...	...	2
Skin-graft	...	...	2
Plastic operation, upper eyelids	...	...	1
Tonsillectomy	...	...	3
Curettage and removal of necrosed bone	...	...	9
Ostectomy	...	...	4
Transplantation of tendon in foot	...	...	1
Tarsorrhaphy	...	...	3
Hysterectomy	...	...	1
Suturing of wound	...	...	1
Kondeleon's operation	...	...	1
Haemorrhoidectomy	...	...	1
Repair of Amputation stump	...	...	1
Lateral Canthorrhaphy	...	...	1
Sub-mucous Resection	...	...	1
			—
Total	...	...	146

"12 operations were performed under a general anaesthetic, the rest with the aid of spinal or local anaesthesia, or without anaesthesia.

"The supply of instruments and of beds was again replenished during the year.

"2 visits were paid by the Government Ophthalmologist (acting) to advise as to the treatment of various ocular conditions.

"299 sessions were held in the Electro-therapeutic department, and 4,701 treatments were administered to 61 male and 36 female patients.

"Galvanism, faradism, diathermy and ultra-violet radiations were used.

"The following laboratory investigations were made :—

Nasal smears	...	136
Examination of urine	...	90
Blood for malaria parasite and blood counts	...	74
Skin smears	...	46
Examination of faeces	...	37
Sputum for tuberculosis	...	24
Pathological sections	...	3
Ascitic fluid	...	1
Throat swab for K-L-B	...	1
		—
Total	...	412

"At the end of 1937 there were 835 cases of leprosy including active, quiescent and arrested, known to the authorities and believed to be alive.

"Of these 382 were inmates of the Leprosy Hospital at Mahaica, 453 being out-patients and discharged patients attending for treatment or examination or both at the various clinics.

"112 persons eluded observation during the year.

"108 patients were discharged as quiescent during the year and there were 46 admissions of persons suffering from leprosy.

"10 arrested cases relapsed.

"The following were the types of cases admitted:—

Cutaneous.	Neural.	Neuro-dermal.	Mixed.
12	30	2	2

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

Cutaneous.	Neural.	Neuro dermal.	Total.
2	31	1	34

"24 deaths of persons suffering from leprosy occurred in the Leprosy Hospital, the causes of death being as follows:—

Neural Leprosy ; Bronchitis ...	...	...	2
Neural Leprosy ; Cirrhosis of liver ...	...	...	1
Neural Leprosy ; Pulmonary Tuberculosis ...	...	...	1
Cutaneous Leprosy ; Toxaemia ...	...	...	1
Neural Leprosy ; Asthma ...	...	...	1
Neural Leprosy ; Carcinoma of Lungs ...	...	...	1
Neural Leprosy ; Exhaustion ...	...	...	1
Neural Leprosy ; Cerebral Haemorrhage ...	...	...	1
Neural Leprosy ; Anaemia ...	...	...	1
Neural Leprosy ; Cardiac failure ...	...	...	1
Neural Leprosy ; Senility ...	...	...	2
Mixed Leprosy ; Senility ...	...	...	1
Cutaneous Leprosy ; Exhaustion ...	...	...	2
Neural Leprosy ; Lobular Pneumonia ...	...	...	1
Neural Leprosy ; Acute Nephritis ...	...	...	3
Neural Leprosy ; Delayed Chloroform Poisoning ...	...	...	1
Neural Leprosy ; Chronic Nephritis ...	...	...	1
Mixed Leprosy ; Cerebral Haemorrhage ...	...	...	1
Neural Leprosy ; Uterine Fibroids-Post-Operative Shock ...	...	...	1

24

"*Out-patients clinics.*—50 visits were paid to the out-patients clinics in Georgetown, 12 to that in New Amsterdam, 12 to the Corentyne Coast, 12 to the West Bank, Demerara and West Coast, Demerara, and 12 to Essequibo, including Wakenaam, Suddie and Charity on the Pomeroon River.

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

Clinic.	Number of Sittings.	Number of Patients.	Number of Attend- ances of Patients.
1. Georgetown ...	50	163	1,175
2. Mahaica ...	143	75	408
3. New Amsterdam ...	12	112	331
4. No. 63, Corentyne Coast ...	12	167	614
5. Essequibo —(including Wakenaam, Leguan, Suddie and Charity), West Coast and West Bank, Demerara ...	12	25	121
Total ...	229	542	2,649

"*British Empire Leprosy Relief Association.*—The foundation stone of the Lady Denham Home was laid by Lady Northcote on 10th May, 1937, and the buildings formally opened by Lady Jackson on 6th December, 1937.

"The Home is now working satisfactorily.

"The Entertainment Committee provided as usual for the cinema programmes and the purchase of cricket, football and tennis gear, dominoes, gramophone needles, playing cards, etc., for the use of the patients.

"The Executive Committee held nine meetings. There was no meeting of the Central Committee.

"The following article was contributed to the Medical Press :—

Intra-dermal Injections in Cutaneous Leprosy. (Sonderabdruck Aus Der Festschrift Nocht, 1937) (Institut für Schiffs Und Tropenkrankheiten In Hamburg).

"Financial.—The following is the total expenditure of the Leprosy Hospital for the past 5 years :—

"Year.	Gross Expenditure.	Revenue.	Nett cost of upkeep.
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
1936 ...	45,688 06	416 99	45,271 07
1937 ...	50,625 42	686 21	49,939 21

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

	Attendants.	Patients.	Total.
"Carpenters ...	\$ 169 66	\$ 79 70	\$ 249 36
Tailors ...	151 16	302 78	453 94
Shoemakers ...	19 08	298 38	317 46
Seamstresses ...	6 96	75 68	82 64
Total ...	\$ 346 86	\$ 756 54	\$ 1,103 40

"14,292 pieces were washed in the laundry"

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

(1) TABLE SHOWING NUMBER OF PATIENTS TREATED AND PERCENTAGE MORTALITY, 1937.

	M.	F.	T.
Number of patients on 31st December, 1936	234	140	374
New admissions, 1937	31	15	46*
Re-admitted once in 1937	35	35	70
Re-admitted twice in 1937	5	5	10
Re-admitted thrice in 1937	...	2	2
Total number treated in Leprosy Hospital, 1937	305	197	502
Died in Leprosy Hospital, 1937	18	6	24
Daily average number treated	237.0	142.9	379.9
Death rate	5.9	3.04	4.8
Highest number of patients, 1937	248	154	402
Lowest number of patients, 1937	230	135	365

* Of these only 32 were fresh cases of Leprosy, 14 being out-patients in previous years.

(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.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
...	1	1	9	4	39	16	37	12	4	2	...	...	111	76	33	29	234	140	374
...	...	...	3	...	6	...	7	...	...	...	...	...	12	7	3	1	31	15	46
...	...	...	3	...	8	11	12	8	...	...	...	...	11	14	1	2	35	35	70
...	...	...	...	...	2	3	2	2	...	...	...	...	1	...	...	...	6	5	10
...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	2	2
...	1	1	15	4	55	39	58	31	4	2	...	...	135	97	37	32	305	197	502
...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	2	...	2
...	...	...	2	...	5	3	7	3	...	...	...	...	13	8	...	2	28	16	44
...	...	...	...	...	11	7	10	3	...	...	...	...	3	8	...	2	24	20	44
...	...	...	...	...	2	2	2	6	...	...	...	...	1	...	...	...	5	8	13
...	
...	...	...	...	...	6	2	2	...	...	...	...	...	5	3	5	...	16	6	24
...	1	1	13	3	31	16	35	19	4	2	...	...	112	78	31	23	223	147	375
Total remaining on 31st December, 1937																				

(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 Essequibo.	M.	F.	T.	Form of Leprosy.	M.	F.	T.
Georgetown ...	80	49	129	New Amsterdam ...	7	2	9	North Essequibo ...	4	4	8	Cutaneous ...	95	63	158
East Coast, Demerara ...	32	25	58	East Coast, Berbice ...	24	7	31	South Essequibo ...	5	3	8	Neural ...	111	73	184
West Coast, Demerara ...	20	11	31	West Coast, Berbice ...	6	6	12	Pomeroon ...	12	1	13	Mixed Leprosy ...	21	11	32
East Bank, Demerara ...	5	10	15	East Bank, Berbice ...	7	12	19					Non Leper ...	1	...	1
West Bank, Demerara ...	6	5	11	West Bank, Berbice ...	6	1	7								
Demerara River ...	6	5	11	Canje ...	5	6	11								
				Berbice River ...	3	1	4								
Total ...	149	104	253		58	35	93		21	8	29		228	147	375

Occupation.	M.	F.	T.
Labourers ...	136	65	201
Scholars ...	48	23	71
Domestics ...	...	23	23
Housewives ...	...	17	17
Farmers ...	9	2	11
Seamstresses ...	...	9	9
Carpenters ...	5	...	5
Teachers ...	4	...	4
Tailors ...	3	...	3
Chauffeurs ...	3	...	3
Shoemakers ...	2	...	2
Bookbinders ...	2	...	2
Electricians ...	2	...	2
Cooks ...	1	1	2
Porters ...	2	...	2
Vagrants ...	1	1	2
Clerks ...	2	...	2
Hucksters ...	...	2	2
Laundresses ...	...	2	2
Salesman ...	1	1	2
Boiler Maker ...	1	...	1
Cartman ...	1	...	1
Woodcutter ...	1	...	1
Printer ...	1	...	1
Dispenser ...	1	...	1
Baker ...	1	...	1
Telegraphist ...	1	...	1
Basket Maker ...	...	1	1
Total ...	228	147	375

(4) TABLE SHOWING CLASSIFICATION OF PATIENTS ACCORDING TO AGE, 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.									
1 to 5 years	2	...	...	...	...	1	...	1	2	2	4
6 to 10	5	2	...	...	...	5	5	1	5	11	23
11 to 20	1	...	1	1	...	...	3	5	1	1	...	17	6	5	5	28	46
21 to 30	6	1	...	...	11	6	1	...	...	34	17	14	7	65	97
31 to 40	...	1	3	...	...	1	10	4	2	...	...	22	19	7	5	44	74
41 to 50	2	...	15	3	3	3	...	...	...	14	15	3	4	37	62
51 to 60	1	1	11	7	3	...	...	...	...	12	8	1	1	28	45
61 to 70	5	5	...	...	1	...	...	5	3	...	...	10	19
71 to 80	2	2	...	1	2	5
Total	1	1	13	3	31	16	37	20	4	2	...	111	76	31	29	238	375

D.—Helmenthic Disease.

ANKYLOSTOMIASIS.

95. 83 cases were treated in public hospitals with 2 deaths compared with 113 cases and 3 deaths in 1936. 80 cases were treated in out-patient departments as against 103 in 1936. The deaths registered as due to the same disease throughout the Colony were 4 compared with 4 in 1936.

E.—Quarantinable Diseases.

96. There were no cases of plague, cholera, yellow fever, small-pox or typhus during the year.

III.—VITAL STATISTICS.

97. The population on the 31st December, 1937, as estimated by the Registrar General, was 337,039 (168,289 males and 168,750 females).

98. There were 11,227 births and 7,367 deaths. The natural increase of population was therefore 3,860.

99. The number of immigrants (9,931) exceeded the number of emigrants (9,650) by 281.

100. The actual increase in the population for the year was 4,141 as against 4,679 persons for 1936.

101. 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 1928 to 1937:—

Year.	Population.	Births.	Deaths.	Birth rate.	Death rate.	Deaths of Infants under 1 year.	Infantile Death-rate per 1,000 Births.	Still-births.
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	1,431	146	703
1930	312,489	10,438	7,174	33.4	23.0	1,325	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	321,360	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
1936	332,898	11,736	6,800	35.3	20.4	1,414	120	645
1937	337,039	11,227	7,367	33.3	21.9	1,359	121	655

102. *Births.*—11,227 births (5,659 males and 5,568 females) were registered. This is equivalent to a birth-rate 33.3 per 1,000 of the population.

103. The number of still-births recorded was 655, which was in proportion of 6.8 to every 100 children born alive. The average for the years, 1927 to 1936, was 668 being 6.5 per cent of the average number of registered live births for the same period.

104. *Deaths.*—7,367 deaths (3,768 males and 3,599 females) were registered, giving a general death-rate of 21.9 per 1,000 of the population. The average death-rate for the last five years was 22.2, while that for the previous quinquennial period was 24.4 per 1,000.

105. The statement below is a return of deaths occurring in the whole Colony during each quarter of the year for the last five years.

	1933.	1934.	1935.	1936.	1937.
1st Quarter	2,420	2,891	1,821	1,772	1,908
2nd Quarter	1,625	1,894	1,676	1,557	1,724
3rd Quarter	1,752	1,494	1,665	1,723	1,815
4th Quarter	2,051	1,701	1,690	1,748	1,920

106. *Infantile Mortality.*—The number of deaths under one year of age was 1,359, which equalled a rate of 121 per 1,000 registered births.

107. The number of infant deaths in the principal groups during 1935, 1936 and 1937 was as follows :—

	1935.	1936.	1937.
Congenital debility, etc. ...	385	422	408
Malaria ...	138	199	148
Undefined Fevers ...	82	96	106
Pneumonia and Bronchitis ...	182	153	163
Bowel complaints (including Dysentery, Diarrhoea and Enteritis) ...	151	164	151

108. *Maternal Mortality*.—The statistics (per 1,000 live births) for the years 1935, 1936 and 1937 were as follows :—

	1935.	1936.	1937.
The whole Colony ...	11.0	13.6	12.7
Public Hospitals ...	42.6	54.2	42.8
Infant Welfare and Maternity League ...	7.1	4.5	6.4
Sugar estates ...	8.1	12.8	9.2

109. The following return is taken from the Registrar General's detailed return of causes of deaths for the years 1935, 1936 and 1937 :—

The Puerperal State—

<i>Causes of Deaths.</i>		<i>Deaths.</i>		
		1935.	1936.	1937.
Accidents of pregnancy ...	...	22	9	7
Other accidents of labour ...	...	13	17	23
Puerperal hæmorrhage ...	...	10	40	36
Puerperal sepsis ...	...	25	27	15
Puerperal albuminuria and convulsions ...	...	21	39	36
Puerperal phlegmasia alba dolens, embolism and sudden deaths ...	...	5	2	1
Other causes ...	...	28	26	25
Total ...	...	124	160	143

110. 580 cases of diseases of puerperal state were treated in public hospitals with 62 deaths, a case fatality rate of 10.7%. In 1936 there were 594 cases and 61 deaths, showing a case fatality rate of 10.3%.

111. The number of normal confinements conducted in public hospitals during 1937 was 1,336, including 31 remaining from the previous year.

City of Georgetown.

112. 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	64,200	67,448
Number of Births	1,801	2,108
Birth-rate	28.0	31.3
Number of Deaths	1,302	1,396
Death-rate per thousand	20.2	20.7
Infantile Mortality per thousand	109	103
Deaths from typhoid and para-typhoid fevers	9	9
Deaths from malaria	68	74
Deaths from undefined fever	...	12

*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.

113. The estimated population was 9,650. The number of births registered was 338, *i.e.*, a birth-rate of 35.0 per thousand compared with 313 or a rate of 32.9 per thousand in 1936.

114. There were 210 deaths, *i.e.*, a death-rate of 21.8 per thousand compared with 170 deaths or a rate of 17.9 per thousand in 1936.

115. The infant mortality was 104 per thousand compared with 112 per thousand in 1936.

116. Malaria fever was the cause of 9 deaths compared with 18 in 1936. Undefined fever was the cause of 2 deaths.

117. There were two deaths from typhoid and para-typhoid fevers compared with 1 in 1936.

118. The following tables give the vital statistics for each registration district in the Colony for the year 1937, and return of vital statistics for Georgetown and New Amsterdam for the years, 1937, 1936, and 1935:—

RETURN OF VITAL STATISTICS FOR EACH REGISTRATION DISTRICT IN THE COLONY FOR THE YEARS 1937, 1936, 1935.

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.

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.
								Typhoid and Paratyphoid Fevers.	Intestinal Disorders over one year.	All Renal Diseases.	All Respiratory Diseases.	Malarial Fever.	Undefined Fevers.	Phthisis and other forms of Tuberculosis.	Intestinal Disorders under one year.					
Skeldon	15,853	604	250	38.1	15.8	3	13	17	25	19	8	1	3	30	51	84				
Port Mourant	26,163	1,070	527	40.9	20.1	4	24	33	60	39	1	5	8	38	100	93				
Lower Canje	11,060	347	233	31.4	21.1	5	17	24	31	22	6	6	6	19	36	109				
Upper Canje	691	21	20	30.4	28.9	...	1	1	1	2	6	...	...	3	3	143		
New Amsterdam	9,650	338	210	35.0	21.8	2	17	15	19	9	2	8	4	40	35	104				
Highbury	2,616	79	99	30.2	37.8	...	7	9	15	10	7	4	1	5	19	127				
Mara and Upper Berbice River	2,742	79	58	28.8	21.2	...	8	5	7	6	6	...	1	1	8	101				
Cotton Tree	14,234	516	238	36.3	16.7	1	19	11	29	24	7	14	6	25	40	78				
Mahaicony	11,813	387	172	32.8	14.6	1	6	6	25	23	16	1	5	18	30	78				
Mahaica	13,545	532	310	39.3	22.9	3	15	23	35	36	12	15	11	25	54	102				
Buxton	22,245	786	523	35.3	23.5	11	25	27	81	76	13	15	25	58	124	158				
Plaisance	23,849	796	572	33.2	23.9	5	43	38	84	55	12	19	18	35	131	165				
Georgetown	67,448	2,108	1,396	31.3	20.7	9	59	123	138	74	12	110	23	148	217	103				
Peter's Hall	19,637	581	526	29.6	26.8	3	36	63	78	61	20	21	6	38	100	172				
Demerara River	8,325	251	162	30.2	19.6	1	8	14	25	12	24	5	1	15	36	143				
Belle Vue	14,169	442	349	31.2	23.2	1	17	64	45	44	25	29	9	22	69	156				
Leonora	13,519	445	287	32.9	21.2	5	8	23	42	39	9	7	6	21	59	133				
Philadelphia-Leguan	14,531	525	337	36.1	26.6	3	25	36	65	61	13	9	6	37	78	149				
Up. Essequibo River	994	2	29	2.0	29.2	...	1	1	3	2	3	...	...	1	...	...		
Bartica	4,801	86	111	17.9	23.1	1	8	5	22	19	4	11	...	6	12	140				
Up. Mararuni River	2,176	5	48	2.3	22.1	...	4	...	7	...	8	...	...	...	3	600	
Wakenaam	4,032	145	102	36.0	25.3	1	7	10	15	9	10	5	4	10	23	159				
Suddie	8,131	272	229	33.5	28.2	3	8	35	30	34	11	3	...	32	46	169				
Anna Regina	11,265	203	257	26.9	21.0	3	11	31	21	27	23	...	6	16	32	106				
Pomeroy	5,979	247	111	41.3	18.6	...	4	9	10	3	32	4	1	6	23	93				
North West	7,554	280	201	34.4	26.6	...	11	4	21	49	37	6	1	6	39	150				
Males	168,289	5,659	3,768	33.6	22.4	37	211	298	606	359	165	155	72	350	746	132				
Females	168,750	5,568	3,599	33.0	21.3	28	190	332	328	396	162	143	79	305	613	110				
Persons	337,039	11,227	7,367	33.3	21.9	65	401	630	934	755	327	298	151	655	1,359	121				
For Year 1934	332,898	11,736	6,800	35.3	20.4	115	292	589	877	754	277	261	164	645	1,414	120				
For Year 1935	328,219	11,262	6,762	34.3	20.6	69	266	556	1010	694	260	274	151	658	1,372	122				

RETURN OF VITAL STATISTICS FOR GEORGETOWN AND NEW AMSTERDAM FOR THE YEARS, 1937, 1936, 1935.

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.

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 Paratyphoid Fevers.	Intestinal Disorders over 1 year.	All Renal Diseases.	All Respiratory Diseases.	Malarial Fever.	Undefined Fever.	Phthisis and other forms of Tuberculosis.	Intestinal Disorders under 1 year.			
Georgetown, 1937 ...	67,448	2,108	1,396	31.3	20.7	9	59	123	138	74	12	110	23	148	217	103
Georgetown, 1936 ...	66,601	2,018	1,232	30.3	18.5	39	33	118	135	55	8	79	13	159	222	110
Georgetown, 1935 ...	65,938	2,041	1,297	31.0	19.7	6	48	110	144	89	11	86	15	159	209	102
New Amsterdam, 1937	9,650	338	210	35.0	21.8	2	17	15	19	9	2	8	4	40	35	104
New Amsterdam, 1936	9,514	313	170	32.9	17.9	1	5	15	14	18	2	6	9	43	35	112
New Amsterdam, 1935	9,379	345	188	36.8	20.0	7	6	10	23	11	3	10	2	46	42	122

COMMENTS ON THE VITAL STATISTICS.

119. With an estimated population of 337,039, there was an increase of 1.28% (4,141 persons) which is less than the increase in 1936 of 1.43% (4,679 persons). This is accounted for by a reduction in the crude birth rate which was 33.3 per 1,000 population in 1937, in contrast to 35.3 per 1,000 population in 1936, and an increased crude death rate of 21.9 per 1,000 population in contrast with a rate of 20.4 in 1936. In 1936, the Colony lost 257 persons, the excess of inemigrants over immigrants, whereas during the year under review the reverse occurred wherein immigrants exceeded emigrants by a total of 281 persons.

120. The annual fluctuations of the sex distribution of an estimated population has little significance without reference to trends over a number of years and is better associated with an analysis of births and deaths. For purposes of continuity it may be noted that the sex distribution of the calculated population continued to show a similar disparity in 1937, when there was a proportion of 997 males per 1,000 females compared with the proportional distribution rate for 1936, which was 998 males per 1,000 females.

121. While the crude birth rate of this Colony in 1937 (33.3 per 1,000 population) was more than twice the birth rate for England and Wales for the period 1931-35 (15.0 per 1,000 population) and the crude death rate in this Colony for 1937 was 21.9 per 1,000 population whereas in England and Wales for the same quinquennium stated above the death rate was 12.0 per 1,000 population, it should be noted that the infant mortality rate of 121 per 1,000 living births in 1937 was very nearly twice that of England and Wales for 1931-35 (62 per 1,000 live births). It must be recognised that this rate has shown probably the most significant reduction of any lethal factor in the Colony and that the infant population of England and Wales is not affected by malaria and what is here described as undefined fevers. The fact is that the diagnosis—Congenital Debility and Premature Birth—accounts for very nearly half the infant deaths, and that the pregnant women and the newborn infants in the Colony are either not receiving or not taking advantage of the facilities that are available to them. These implications are amply borne out so far as the maternal factor is concerned wherein the public hospitals appear to be called upon to deal with advanced pathological conditions involving a mortality rate of 42.8 mothers per 1,000 living births.

122. Since the experience of the Infant Welfare and Maternity League represents a comparatively small group, the significance of the rate assigned to that voluntary agency relative to the other larger groups must necessarily be considered with some reserve. Although the maternal mortality rate amongst members of the Infant Welfare and Maternity League (6.4 per mille) is approximately a half that of the Colony as a whole (12.7 per mille) and considerably less than amongst parturient women on the Sugar Estates (9.2 per mille) it is evident that too great a wastage of maternal life occurs in childbirth.

123. The crude rates to which reference is here directed do not profitably bear further general comment without studied consideration of the reasons that contribute to the state which they signify. The medical certification of causes of death covers about 71% of all the deaths reported in the Colony, and the standard of that certification could bear considerable modernizing. For these reasons, the disease-specific factors that are concerned in the mortality of the Colony require detailed enquiry. The Acute Respiratory Infections and Malaria, no doubt are responsible for the largest proportion of deaths in British Guiana. The importance of the latter is so generally known that its diagnosis without laboratory confirmation and by the layman is perhaps too frequently accepted. On the other hand, it is not certain that the atypical manifestations are not frequently responsible for obscuring the recognition of the causative factor.

124. The crude figures here given indicate a wastage of life that doubtless is less than it was, but it must be acknowledged that much remains to be undertaken

and accomplished before it is justifiable to view what is indicated in the vital statistics of this Colony with complacency. The faults and blame, if such may be contemplated with justification, are possibly due to having "more irons in the fire" than can be efficiently handled. Further, there is reason to believe that while the truism "prevention is better than cure" may receive philosophic acceptance, the public have not yet realised that prevention is not dispensed in bottles, or is necessarily the result of spending money, but rather that it requires the active participation of those who hope to benefit from it.

IV.—HOSPITALS AND DISPENSARIES.

A.—The Public Hospitals.

125. The public hospitals in the Colony (7) provide 938 beds. The nominal bed strength of estate hospitals was 1,567 while "Colonna House" (a private Nursing Home in Georgetown) at present provides for about 50 cases.

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

	1935.	1936.	1937.
Public Hospital, Georgetown ...	572	587	588
Public Hospital, New Amsterdam...	150	136	146
Public Hospital, Suddie ...	79	64	56
Public Hospital, Bartica...	16	22	24
Public Hospital, Mabaruma ...	24	18	22

127. Provision for extension of the male side of the Bartica Hospital has been included in the draft estimates for 1938, and it is hoped that this will largely relieve the congestion which has obtained during the year. As funds become available, it may be possible later to provide also for the extension of the female wing. The necessity for this increased accommodation has come about largely as a result of markedly increased activity in the gold fields of which Bartica provides the base to a Government hospital.

128. It has not been found possible to include provision for a separate infirmary to relieve the congestion that has been existing in the infirmary of the Alms House and also generally at the Public Hospital, Georgetown. It is largely because of the congestion in the former institution that chronic cases cannot be transferred from the latter hospital, thus creating the necessity for floor beds.

129. In the report of the Medical Re-organisation Committee it is recommended that the present dispensary at the Public Hospital, Georgetown, be discontinued and that a new dispensary be opened elsewhere in the City. There is also a need for the re-organisation of the present out-patient and casualty department at the Public Hospital, Georgetown. These questions are so closely interlaced that it has not yet been found possible for the Committee's recommendations to be implemented.

130. Following upon a detailed inspection of the Public Hospital, Georgetown, expressly from the point of view of existing sanitary accommodation and the disposal of refuse, an initial sum of \$3,000 was placed upon the estimates for 1938 to modernise the apparatus and equipment. It is hoped that the balance of the sum recommended for improvements will be made available in the ensuing year.

131. Provision was also made for a first instalment of \$20,000 for the construction of a new maternity wing, the total estimate of which was \$59,000.

132. The present bed strength at the Public Hospital, Georgetown, is 622, including all wards of which some, necessarily, such as the infectious disease ward, will not always be fully occupied.

133. The total number of patients admitted to Government hospitals was 19,494 as compared with 20,251 in 1936 and 19,701 in 1935.

134. 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 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 ...	13,250	11,927	438	149
Public Hospital, New Amsterdam ...	3,119	2,827	92	36
Public Hospital, Suddie ...	1,962	1,930	7	6
Public Hospital, Bartica ...	609	588	6	3
Public Hospital, Maharuma ...	491	446	21	1
Public Hospital, Kamakusa ...	44	44	...	...
Public Hospital, Potaro ...	19	19	...	...
Total ...	19,494	17,781	564	195

135. The number of patients who sought treatment at the out-patient departments of public hospitals is as follows:—

1933	...	58,308
1934	...	61,640
1935	...	64,803
1936	...	54,439
1937	...	57,792

Two classes of patients are treated at the out-patient department—"poverty" patients, who are required to pay 24 cents (1/-), and "pauper" patients, who receive free treatment.

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

Diseases.	Cases.	Deaths.
Malaria (including Blackwater Fever)	2,177	125
Dysentery	129	23
Enteric Fever	254	42
Bowel Diseases	407	67
Pneumonia (all forms)	319	187
Tuberculosis (all forms)	530	197
Bronchitis	584	40
Nephritis	556	111
Diseases of the Heart (all forms)	401	132
Venereal Diseases	1,349	71
The Puerperal State	1,916	62

137. 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 47. The total number of admissions was 1,134 and the number of surgical operations performed was 964, of which over 500 were major operations.

138. The training of nurses was continued at the Government hospitals in Georgetown, New Amsterdam, and Suddie. The annual examination for the Government graduate nurses' certificate was held in June, 1937. The following were the results of the examinations:—

Training School.	First Professional Examination.		Final Examination.	
	Entered.	Passed.	Entered.	Passed.
Georgetown Hospital	15	9	18	17
New Amsterdam Hospital	4	4	6	5
Suddie Hospital	...	...	2	...

139. In addition, 32 pupil midwives were presented for the midwifery examination and 20 passed.

140. 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.

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

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

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

144. The number of in-patients treated was 20,298 as compared with 21,026 in 1936.

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

	1935. Cents.	1936. Cents.	1937. Cents.
Public Hospital, Georgetown ...	62.0	61.7	61.6
Public Hospital, New Amsterdam ...	83.6	72.2	61.7
Public Hospital, Suddie ...	65.3	85.6	94.7
Public Hospital, Bartica ...	80.1	75.6	70.1
Public Hospital, Mabaruma ...	74.3	94.2	74.1

OPHTHALMIC DEPARTMENT.

146. The staff consists of :—

Government Ophthalmologist.

One nurse in charge (whole time).

One assistant nurse and several part-time nurses.

One clerk.

147. 5,452 patients were treated during the year as against 4,588 for the previous year. The following table shows the distribution :—

Public Hospital.	IN-DOOR PATIENTS.						OUT-DOOR PATIENTS.					
	Paying.			Pauper.			Paying.			Pauper.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Georgetown ...	34	21	55	180	138	318	645	577	1,222	2,008	1,455	3,463
New Amsterdam ...	...	...	...	6	4	10	87	59	146	87	91	178
Suddie ...	...	...	...	3	...	3	11	10	21	14	22	36
Total ...	34	21	55	189	142	331	743	646	1,389	2,109	1,568	3,677

148. The following major and minor surgical operations were performed :—

	Public Hospital, Georgetown.	Public Hospital, New Amsterdam.	Public Hospital, Suddie.
Senile Cataract	133	...	...
After Cataract	8	...	...
Congenital Cataract	3	...	...
Panophthalmitis	21	...	...
Pterygium	32	4	...
Glaucoma	10	...	...
Entropion	2	...	...
Foreign bodies of Cornea	...	5	...
Rupture of Cornea	2	...	...
Dacryocystitis	5	...	...
Dilatation of Lacrymal Sac	...	1	...
Phthisis Bulbi	1	...	...
Papilloma of Eyelid	2	...	...
Cyst of Eyelid	1	...	...
Sinus of Eyelid	1	...	...
Sarcoma of Choroid	1	...	...
Tarsal Cyst	1	3	...
Squint	1	...	...
Symblepharon	1	...	...
Total	225	13	...

149. In addition, 177 minor operations were performed at the out-patient department of the Public Hospital, Georgetown.

150. The number of cases refracted and received prescriptions for glasses was 367.

151. 21 new cases of Trachoma were treated during the year.

152. The revenue derived from all sources was \$1,258.91 as compared with 1,274.61 in 1936.

DENTAL DEPARTMENT.

Public Hospital, Georgetown.

153. The staff consists of :—

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

154. The clinic was opened to the public daily in the afternoon, except on Sundays and Public Holidays.

155. The number of out-patients was 7,329 as compared with 6,859 in 1936. 1,765 were pauper cases (1,795 males, 2,970 females) and 2,564 poverty cases (1,332 males and 1,232 females).

156. The revenue collected amounted to \$369.72 compared with \$360.24 for the previous year.

157. *Dental Treatment of School Children.*—A sum of \$1,440 was voted on the 1937 Estimates: \$960 for the dental treatment of children attending primary schools in Georgetown, and \$480 for children in New Amsterdam. The clinics were conducted by Dr. H. Whyte Cameron and Dr. J. L. S. Murray, Dental Surgeons in Georgetown, and Dr. G. M. Gonsalves in New Amsterdam. The schools assigned to Dr. Cameron were St. Stephen's (Scotch) and Werk-en-Rust (Methodist), while Dr. Murray was given charge of Christ Church (Anglican). Dr. Gonsalves was given charge of All Saints (Anglican), All Saints (Scotch) and Roman Catholic (boys).

158. In Georgetown the two dental surgeons held clinics every school day throughout the year. 1,069 children (609 boys and 460 girls) from 12 schools received treatment at these clinics.

159. Treatment was either complete or that which is given in cases of emergency. The former category in addition to extractions, prophylactic treatment and various types of fillings, included dental abscess and root canal treatment. Each dental surgeon devoted his attention to one school at a time and on its completion proceeded to another school. 458 children (277 boys and 181 girls) from three schools received complete treatment. The schools were Christ Church, Church of England, St. Stephen's, Church of Scotland, and Werk-en-Rust Methodist.

160. Emergency treatment consisted mainly of extraction. The arrangement is that the head teacher of any school may send cases to either dental surgeon during clinic hours. 611 children (332 boys and 279 girls) were treated from the following schools—Bourda Roman Catholic, Ursuline Convent Roman Catholic, St. Philip's Church of England, St. Andrew's Church of Scotland, Freeburg Church of England, Smith's Congregational, St. Mary's Roman Catholic, Lodge Congregational and St. Sidwell's Church of England.

161. The reports from Dr. Whyte Cameron and Dr. Murray, School Dentists indicate that the School Dental Scheme still continues to be highly appreciated both by pupils and parents.

162. The work done as follows :—

By Dr. Cameron—

Prophylactic treatment	...	...	232
Extractions	...	...	272
Amalgam fillings	...	...	119
Cement fillings	...	...	28

By Dr. Murray—

Prophylactic treatment	...	...	65
Extractions	...	...	234
Amalgam fillings	...	...	221
Porcelain fillings	...	...	26
Cement fillings	...	...	1
Root canal fillings	...	...	1
Gutta Percha fillings	...	...	4
Root canal treatment and temporary fillings	...	...	17
Abscess attendances	...	...	25

163. 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 and the parents.

Public Hospital, New Amsterdam.

164. The clinic at this hospital is conducted by Dr. G. M. Gonsalves, dental surgeon, as part-time dental surgeon, assisted by a junior nurse.

165. The clinic was held thrice weekly.

166. The number of patients treated was 1,463.

167. The revenue collected amounted to \$179.16.

168. The dental treatment of children attending primary schools in New Amsterdam was begun in October, 1937, by Dr. G. M. Gonsalves. The schools treated were All Saints (Church of England), All Saints (Church of Scotland) and Roman Catholic (Boys), and 126 children (55 boys and 71 girls) were attended to.

169. The work done was as follows :—

Extractions	...	...	155
Amalgam fillings—			
Large	...	...	70
Medium	...	...	16
Small	...	...	34
Root canal treatment	...	...	6
Emergency extractions	...	...	14

170. The children, with few exceptions, highly appreciated the treatment.

X-RAY AND ELECTRICAL DEPARTMENT.

Public Hospital, Georgetown.

171. The staff of the department consists of :—

Radiographer.
Assistant Radiographer.
Two nurses.

172. Mr. E. Dalton, Radiographer, left the Colony on 12th June on leave and was subsequently transferred to West Africa.

173. Mr. V. G. Connett, assistant Radiographer, was appointed Radiographer, *vice* Mr. Dalton, as from 3rd November, 1937.

174. All work was this year carried out in the new department which greatly added to the efficiency of working.

175. The work of the 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 cases sent from its dispensaries.

176. The total number of examinations made was 3,434, of these 371 were made at the request of private practitioners and district Government Medical Officers. 792 cases were examined for the Tuberculosis Society and 48 cases for the Infant Welfare Centre.

177. The total number of radiosopic examinations was 1,213. The following table gives some indication of the type of examinations made :—

Barium Meals	...	...	880 (157 cases).
Barium Enemas	...	...	17
Chests	...	...	1,389
Urinary Tracts	...	...	34
Gall Bladders	...	...	118
Teeth	...	...	27
Miscellaneous	...	...	1,143

178. *X-Ray Treatment.*—There was a decrease of 20 in the number of patients who attended for treatment in comparison with the previous year. 28 patients received 97 treatments in all. Of these 20 were sent by private practitioners and Government Medical Officers in districts. The conditions treated were as follows :—

Keloids	...	...	...	...	2
Rodent Ulcers	...	...	...	...	6
Enlarged Spleen	...	...	...	...	2
Epithelioma	...	...	...	...	1
Malignant Tumours	...	...	...	...	1
Carcinoma	...	...	...	...	2
Myelogenous Leukæmia	...	...	...	...	1
Ringworm	...	...	...	...	1
Filariasis	...	...	...	...	1
Dermatitis	...	...	...	...	10
Fungoid Growths	...	...	...	...	1

179. *Electrical Treatment*.—166 patients were treated during the year being 67 less than the previous year. In all 4,484 treatments were given.

180. The revenue collected during the year was \$1,221.96 as against \$1,377.46 in 1936.

Public Hospital, New Amsterdam

181. The nature of the radiographic examinations was as follows :—

Chests	...	...	...	50
Dental Films	...	...	...	1
Miscellaneous	...	...	...	340
				<hr/>
				391
				<hr/>

182. One case was treated by X-rays.

183. The revenue collected was \$58.95 as against \$34.50 for 1936.

TABLE 2.

PUBLIC HOSPITALS.

	Georgetown.			New Amsterdam.			Suddie.			Bartica.			Mabaruma.			Kamatusa.			Pétaro.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Accommodation ...	345	277	622	92	69	161	45	47	92	10	9	19	15	15	30	8	...	8	6	...	6
Patients remaining in Hospital—1st January, 1937 ...	333	247	580	82	49	131	17	23	50	10	8	18	10	18	23	2	...	2	...	...	...
Patients admitted during the year ...	7,386	5,864	13,250	1,766	1,333	3,119	1,043	919	1,962	415	194	609	261	230	491	43	...	44	19	...	19
Total ...	7,719	6,111	13,830	1,848	1,402	3,250	1,070	942	2,012	425	202	627	271	243	514	45	1	46	19	...	19
Patients discharged—cured ...	959	1,369	2,328	427	466	893	330	354	684	214	112	326	42	57	99	7	...	7	1	...	1
" " relieved ...	4,324	3,038	7,362	984	617	1,601	568	340	908	144	66	210	168	143	313	31	...	31	12	...	12
" " not relieved ...	783	766	1,549	143	140	283	28	47	75	6	1	7	10	2	12	6	...	7	2	...	2
" " not sick ...	109	137	246	42	61	103	18	72	90	...	...	1	4	17	21	...	...	...	...	...	...
" " died ...	675	538	1,211	168	118	286	90	96	186	46	16	62	38	13	46	1	...	1	3	...	3
Patients remaining in Hospital—31st December, 1937 ...	312	242	554	84	60	144	36	33	69	15	6	21	14	9	23	...	...	...	...	...	...
Total Patients treated ...	7,719	6,111	13,830	1,848	1,402	3,250	1,070	942	2,012	425	202	627	271	243	514	45	1	46	19	...	19
The daily average number in Hospital during 1937 ...	332	256	588	87	59	146	29	26	55	18	6	24	16	12	22	0.62	0.62	0.64	0.65	...	0.65
Average stay in days of patients discharged during 1937 ...	15	14	15	18.6	16	17.5	9.2	8.5	8.9	15.1	11.8	14.03	17.8	13.9	15.9	5.1	4	5	5.19	...	5.19
Average stay in days of patients remaining on 31st December, 1937 ...	78	47	65	32.9	25.1	30.1	9.7	1.3	11.4	40.5	10	31.76	41.8	13.1	30.6	...	...	...	...	...	...
Average stay in days of patients died ...	19	19.1	19.1	10.4	11.1	10.7	4	4.5	4.3	12.6	4.12	10.13	11.9	5.4	10	0.17	...	0.17	3.33	...	3.33
Percentage of Mortality on number treated ...	8.7	8.8	8.8	9.1	8.4	8.8	8.4	10.2	10.8	10.8	7.9	9.9	12.2	5.3	8.2	2.2	...	2.17	15.8	...	15.8
Number of Out-Patients (exclusive of attendances for repeat medicines) ...	10,798	13,682	23,840	2,574	3,354	5,928	572	779	1,351	468	418	886	145	130	275	69	9	69	31	...	67

TABLE 3.

IN-PATIENTS DEPARTMENT, PUBLIC HOSPITALS, FROM 1st JANUARY TO 31st DECEMBER, 1937.

Glass of Patients Treated.	Georgetown.	New Amsterdam.	Suddie.	Bartica.	Mabaruma.	Kamakusa.	Potaro.
Seamen	45	...	...	...	...	...	...
Pay Patients	1,823	391	106	146	43	5	15
Policemen	203	20	6	1	3	1	...
<i>Race :</i>							
Europeans (other than Portuguese)...	175	31	13	2	3	1	...
Europeans (Portuguese)	527	20	23	12	5	...	...
Mixed	1,587	176	148	172	154	5	2
East Indians	4,660	1,436	1,195	75	69	7	...
Blacks	6,085	1,549	536	238	77	30	16
Chinese	110	15	2	...	3	...	...
Aboriginal Indians	106	23	95	108	203	3	1
Total	13,250*	3,250	2,012	627	514	46	19

*Exclusive of 589 patients remaining in hospital on 31st December, 1936.

OUT-PATIENTS DEPARTMENT.—PUBLIC HOSPITALS.

	George-town.	New Am-sterdam.	Suddie.	Bartica.	Maba-ruma.	Kama-kusa.	Potaro.
Number of Out-Patients attended to with Pauper Certificates	22,136	7,974	4,894	2,614	1,430	...	...
Number of Out-Patients attended to with Poverty Certificates	8,623	2,905	1,975	1,471	121	...	...
Number of Out-Patients and casualties without Certificates	2,223	2,820	...	...	15	1,145	...
Number of Out-Patients treated during the year (exclusive of repeats)	32,982	13,699	4,618	3,199	1,591	1,076	627
Number of Government Employees attended to as Out-Patients	1,314	343	23	25	25	36	32
Number of Prescriptions dispensed for In-Patients	98,418	23,128	2,028	1,235	3,032	46	32
Number of Prescriptions dispensed for Out-Patients	54,943	17,295	5,969	6,543	1,863	1,145	891

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 1937.

[illegible]

TABLE 4.—(Continued).
HOSPITALS—GEORGETOWN, NEW AMSTERDAM, SUDDIE, BARTICA, NORTH-WESTERN DISTRICT, KAMAKUSA AND POTARO
Return of Diseases (Out-Patients) and of Deaths (In Patients) for the Year 1937.

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.	C.	D.
XIV.—Affections produced by External Causes—(Contd.)																																
184. Wounds (by cutting or stabbing instruments)	18	1	...	61	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
185. Wounds (by fall)	4	...	...	16	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
186. Wounds (rupture of internal organs)
187. Wounds (by machinery)	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
188. Wounds (crushing, e.g., railway accidents, &c.)
189. Contusions—injuries inflicted by animals, &c.
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
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.—Dismemberment
B.—Sprain
C.—Fracture
202. Other external injuries
203. Deaths by Violence of unknown cause.
Total	1,136	836	876	27	272	147	365	5	19	22	163	1	56	13	56	1	17	1	4	...	1,548	1,023	1,499	34	...	...	...	...	...	...	...	...
XV.—Ill-Defined Diseases.																																
204. Sudden Death (cause unknown)
205. A.—Diseases not already specified or ill-defined—
(a) Asites	1	2	1	...	12	4	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Oedema	9	32	3	...	9	51	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 1937.

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.	C.	D.
XV.— <i>Ill-Defined Diseases.</i> —(Contd.).																																
203. —A.—Diseases not already specified or ill-defined—(Contd.)																																
(c) Asthenia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(d) Shock	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(e) Hyperpyrexia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(f) Debility (excluding 169 & 164(b))	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
B.—Malnourishing	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	175	348	221	46	204	229	40	15	3	8	61	6	42	31	22	1	86	132	14	1	35	6	3	...	61	29	...	...	669	783	361	63
XVI.																																
A.—Ophthalmic Department (Out-patients)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
B.—Dental Department (O.P.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
C.—Casualties (O.P.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
D.—Not Sick	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
E.—Undiagnosed	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	3,763	5,006	612	...	1,216	1,529	110	...	36	30	90	...	1	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total, of Sections I.—XVI.	15,043	17,339	13,830	1,214	5,315	8,384	3,200	286	2,081	2,537	2,012	186	1,867	1,332	627	62	746	840	514	46	992	84	46	1	459	108	19	3	26,503	31,280	20,278	1,798
Attendances—Repeat Medicines	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
GRAND TOTAL	25,801	31,021	13,830	1,214	7,889	11,738	3,200	286	2,653	3,316	2,012	186	2,835	1,750	627	62	891	975	514	46	1,062	93	46	1	495	199	19	3	41,116	49,002	20,238	1,798

* Included under 133A and B, 184, 185, 187, 201A-C, 202, and 203 (f).

TABLE 5.

RETURN OF SURGICAL OPERATIONS.

Operations.	Public Hospital, Georgetown.		Public Hospital, New Amsterdam.		Public Hospital, Suddie.		Public Hospital, Bartica.		Public Hospital, Mahabuma.		Public Hospital, Kamakusa.		Public Hospital, Potaro.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Head and Neck	150	12	38	...	...	...	...	...	1	...	...	...	...	...
Upper Extremity	74	12	63	...	4	...	...	...	1	1	...	...	...	...
Lower Extremity	160	8	83	...	4	...	3	...	3	...	...	...	...	...
Thorax	23	...	7	...	...	...	...	...	1	...	...	...	...	...
Abdomen	458	21	97	3	10	...	...	...	3	...	...	...	...	...
Back and Vertebrae	8	...	6	...	...	...	...	...	...	...	...	...	...	...
Genito-Urinary System	328	11	106	1	13	1	6	...	3	...	...	...	...	...
Total	1,201	44	399	4	31	1	9	...	12	1	...	...	...	...

B.—The Mental Hospital.

184. The following information is derived from the annual report of the Medical Superintendent of the Mental Hospital.

185. The daily average number of patients was 725 (males 400, females 325) compared with 720 in 1936. There were 95 admissions (males 46, females 49) as against 97 in 1936. With the 730 patients (392 males, 338 females) remaining on January 1st, a total of 825 cases were treated during the year. The admissions from the three counties were :—

County.	Males.	Females.	Total.
Demerara	28	33	61
Berbice	16	13	29
Essequibo	2	3	5
Total	46	49	95

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

Country.	Males.	Females.	Total.
British Guiana	41	44	85
India	3	2	5
Barbados	...	1	1
Dutch Guiana	1	1	2
Trinidad	...	1	1
St. Lucia	1	...	1
Total	46	49	95

187. There were 26 discharges (males 18, females 8) compared with 24 in 1936, and the total number of patients under treatment at the end of the year was 23 less than at the end of 1936.

188. The number of deaths was 92 (22 males and 70 females) contrasted with 49 in 1936, and the mortality rate was 11.1 per cent as against 6.1 per cent. the previous year.

189. The principal causes of death were general debility, diarrhoea, pneumonia, pulmonary tuberculosis, syphilis and nephritis. The condition causing the highest mortality was general debility. Pulmonary tuberculosis and the malaria fevers were not unduly in evidence as causes of deaths. Syphilis accounted for five deaths.

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

191. The expenditure for the year was \$66,870.37 compared with \$61,294.66 in 1936, and the revenue \$1,948.14 compared with \$1,921.69 in 1936.

192. The per caput cost per diem was 23.7 cents as against 24.5 in 1936.

193. About 47 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 \$27,928.00

194. 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	14	Trusted.
		B and C and Single Rooms ...	82	99 (20 sleeping in Annexe).	Dangerous and refractory.
		D Lower ...	71	69	Chronic Creole.
		D Upper ...	74	58	Chronic East Indian.
		E Lower ...	38	39	Quiet East Indian.
		E Upper ...	41	35	Quiet East Indian.
		G Male Infirmary	55	52	Sick and infirm.
		Criminal Annexe ...	33	32* 398	Criminal.
Female	347	Victoria "A" ...	67	59	Chronic Creole.
		Victoria "B" ...	66	63	Chronic East Indian.
		Single Rooms ...	52	40	Dangerous and dirty.
		Central Block ...	81	56	Doubtful and dirty.
		Female Infirmary	54	65	Sick and infirm.
		Dorcas (cottage) ...	27	26 147	
				399	

* Includes 20 patients from B. and C. sleeping in the Annexe.

195. Structural improvements, alterations and additions were effected in the various blocks and quarters. The new block was completed and painted in October but has not yet been commissioned as the sanitary and lighting arrangements are incomplete.

C.—Public Dispensaries.

196. In addition to the out-patient dispensaries attached to the public hospital 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 sicknurses and dispensers, situated in the more remote, yet populous river districts, and in the diamond and gold bearing areas. 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.

197. 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, Georgetown	484	608	1,092	17	...	17	3,087	8,245	11,332	\$ 2,146 29	\$ 262 32
Demerara River (Christianburg)	852	172	1,024	52	14	66	563	127	690	950 23	450 96
Canal No. 2 Polder	929	50	979	...	...	...	74	2	76	1,071 44	237 12
Canal No. 1 Polder	797	37	834	...	...	...	30	1	31	...	197 76
Berblace River (Ida Sabina)	176	...	176	...	...	...	1,073	11	1,084	1,170 94	93 38
Mara	146	46	192	20	7	27	212	170	382	1,369 12	80 81
Leguan	1,721	51	1,772	28	2	30	305	28	333	778 36	† 482 96
Parika	58	6	64	26	...	26	21	12	33	...	...
Wakenaam	1,285	5	1,290	55	3	58	947	12	959	1,016 49	324 88
Essequibo River (Supenaam)	1,147	181	1,328	2	1	3	914	208	1,122	1,503 79	413 94
Anna Regina	600	36	636	53	14	67	6,124	1,173	7,297	938 52	180 48
Pemeroon River (Charity)	918	20	938	15	...	15	2,569	83	2,652	1,506 17	339 04
Meruca River (Acquero)	23	...	23	...	...	...	3,870	563	4,433	1,255 62	10 62
Enschu	113	4	117	7	...	7	1,045	64	1,109	\$ 834 80	106 00

* Supplies are obtained from Canal No. 2 Polder.

† Includes revenue for Parika Dispensary.

‡ Supplies are obtained from Leguan Dispensary.

§ Salary, etc., of Dispenser.—Supplies are obtained from the Public Hospital, Kamakusa.

V.—PRISONS.

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

199. The daily average number of prisoners in the Georgetown prison and the daily average number in the prison hospital were 206.6 and 5.6 respectively. 100 prisoners were admitted to the prison hospital during the year, of whom 2 were transferred to the Public Hospital, Georgetown. 25 males and 7 females were referred to Stipendiary Magistrates for medical observation. Of these 12 were certified as being of unsound mind and 2 as feeble-minded. There was 1 execution.

200. The following table shows the hospitalization, etc., of prisoners in the New Amsterdam prison :—

Prison.	Average daily number of prisoners.	Average daily number in prison hospital.	Total number of admissions.	Number of death.	Number transferred to Public Hospital.	Number transferred to Mental Hospital.
New Amsterdam...	48	3	11	...	2	...

201. The principal diseases treated were malaria, venereal diseases, influenza, asthma, diarrhoea and ulcers. The total number of out-patient attendances was 10,358, compared with 7,611 in 1936.

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

VI.—THE ALMS HOUSE.

203. Accommodation is provided for 808 inmates—514 males and 294 females. The number of inmates on the 1st January, 1937, was 544 males and 335 females. The number admitted during the year was 592—409 males and 183 females, while the daily average was 873.

204. There are five infirmary wards providing accommodation for 316 patients. 1,254 cases were treated in the infirmary wards—868 males and 386 females. The daily average number of infirmary patients was 219 males and 176 females. The principal diseases treated were—chronic nephritis, diseases of the heart, chronic bronchitis and hemiplegia.

205. 107 minor operations were performed during the year—76 males and 31 females.

206. There were no inoculations against typhoid fever.

207. 138 injections given during the year were—

Tartar emetic	...	3
Fouadin	...	135

208. The total number of deaths was 284—161 males and 123 females, the death-rate being 19.3 per cent. of the total number of inmates compared with 17.6 per cent. in 1936.

209. The number of inmates remaining in the institution on the 31st December, 1937, was 856—535 males and 321 females, the chief causes of detention being Bright's disease, senility, ulcers, blindness, hemiplegia and heart disease.

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

Year.	Total Deaths.	Total persons in Almshouse during the year.	Death-rate per cent.	Number of cases of Diarrhoea.	Number of cases of Dysentery.	Number of deaths from Diarrhoea and Dysentery.
1928	338	1,608	21.02	260	53	46
1929	286	1,429	20.01	148	69	38
1930	293	1,379	14.7	54	19	6
1931	219	1,272	17.2	52	6	4
1932	241	1,318	18.2	20	3	7
1933	282	1,307	21.5	116	13	16
1934	269	1,389	19.4	50	7	9
1935	223	1,444	15.4	32	2	2
1936	268	1,519	17.6	9	4	3
1937	284	1,471	19.3	20	...	3

211. *General Remarks.*—The wards, offices and grounds were kept in good condition throughout the year and the sanitary arrangements were satisfactory.

VII—THE INDUSTRIAL SCHOOL, ONDERNEEMING.

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

213. The general health of the boys was satisfactory.

214. The following table shows the statistical figures for the years 1935, 1936 and 1937 :—

	1935.	1936.	1937.
Daily average number of boys in school	... 87	80	77
Daily average number of boys sick	... 1.4	1.7	.8
Percentage of sick to daily average number of boys	... 1.6	2.2	1.1

215. There were 73 admissions to the infirmary during the year with no deaths : most of these cases suffered from minor ailments such as dermatitis, otorrhoea and superficial wounds. The number of cases sent to the Public Hospital, Suddie, was 12 ; most of these cases were treated for abscesses and wounds. Prophylactic treatment with anti-tetanic serum for minor injuries was given in 26 cases.

216. 18 boys were admitted to, and 38 boys were discharged from the institution during the year. No boys died during the year.

217. There were 19 cases of malaria, with recurrence in two cases.

218. There were no vaccinations during the year as the boys have all been vaccinated against small-pox.

219. Routine examination for "helminth" infection was done during December and of all boys then in the institution, only two showed infection and this was slight treatment was given to these.

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

VIII.—SUGAR ESTATES.

221. There was no change during the year in the arrangements for the medical and sanitary care of sugar plantations.

222. On a majority of the plantations members of the staff and their families are attended by private practitioners, whilst the Government Medical Officer of the district is in charge of the hospital, the labourers and the sanitation of the compound.

223. Twenty-three out of thirty-one plantations provide and maintain hospitals and dispensaries for their labourers.

224. The total number of births was 2,379 as against 2,650 in 1936. The infant mortality figure was 111.3 as against 95.4 in 1936. There were 1,343 deaths as compared with 1,262 in 1936. The principal causes of death were:—

Causes of death.	Number of deaths.
1. Malaria	...142
2. Chronic Bronchitis	... 57
3. Broncho Pneumonia	... 57
4. Diarrhoea and Enteritis	... 54
5. Bright's Disease	... 46
6. Lobar Pneumonia	... 40
7. Infantile debility, Icterus, and Sclerema	... 32
8. Asthma	... 29
9. Acute Nephritis	... 28
10. Premature birth	... 27
11. Acute Bronchitis	... 26
12. Dysentery	... 20
13. Enteric Fever	... 19
14. Influenza	... 18

225. The following is a short summary of the improvements effected during the year:—

HOSPITAL.	IMPROVEMENTS COMPLETED.
Port Mourant	...Artesian well water piped and distributed.
Albion	...A pure piped chlorinated water supply from the Canje Creek.
Enmore	...Erection of new 5-room ranges.
Lusignan	...An artesian well sunk.
La Bonne Intention	...An artesian well sunk.
Wales	...Re-arrangement of male, female and maternity wards of hospital and provision of 6 cots for children.

226. The total number of patients admitted to estate hospitals was 24,285 as compared with 21,316 in 1936. There were 851 deaths as against 875 in 1936. 6,336 patients were treated at the dispensaries of these hospitals as against 6,173 in 1936.

227. *Malaria*.—10,419 cases were treated in hospitals with 142 deaths. The average annual figures for the previous five years were 7,453 cases and 109 deaths.

228. The distribution in counties during 1937 was :—

County.	Cases Malaria.	Deaths Malaria.
Berbice	3,379	54
Demerara	7,040	88

229. *Bowel Diseases.*—The following table shows the number of cases and deaths from enteric fever and "other intestinal diseases" including dysentery and enteritis, during the years 1933–1937 :—

Year.	Enteric Fever.		Other Intestinal Diseases.	
	Cases.	Deaths.	Cases.	Deaths.
1933	136	30	1,007	70
1934	156	28	1,251	87
1935	123	20	960	60
1936	142	18	808	49
1937	150	19	1,164	82

230. The number of reported cases of all forms of pneumonia was 360 with 117 deaths.

231. *Drainage bonification and housing.*—Greater stress is annually being laid on the importance of adequate drainage and the preparation of the land for building purposes—clearing, raising and levelling—prior to the actual erection of labourers' cottages or ranges. The procedure adopted is in conformity with the Public Health Ordinance. A plan is first prepared shewing the proposed lay-out, means of access to the area or lots and the method of drainage of the land. After approval by the Central Board of Health the works specified on the plan are thereafter executed, and a second certificate is given. The usual building application form is then submitted.

232. Estate yards proper were originally laid out for building purposes under the Immigration Ordinance and a general policy with respect to estate ranges has been adopted by the Central Board of Health.

233. A central medical research laboratory was opened in Georgetown during the month of August by certain of the Sugar Producers in the Colony, under the direction of Dr. G. Giglioli, who has considerable administrative and investigative experience in the medical and sanitary problems connected with the two major productive industries of this Colony. It is realised by the sugar industry here that many medical and sanitary problems arise on their plantations which adversely affect their resident populations, and as such must be looked upon as a handicap to the economics of the industry. For the purpose of ascertaining the relative importance of these problems and undertaking their control, the estates under the control of Messrs. Booker Brothers McConnell and Company, Limited, and Messrs. Curtis, Campbell and Company, Limited, have participated in this joint undertaking covering a population of 48,844 persons. It is anticipated that other estates will later be included in the scheme which promises to become a most important element in the control and reduction of preventable illness amongst the residents on the sugar estates concerned. Without doubt the experience derived from this venture should be of benefit to the health of the Colony at large, and as such it is probably the most outstanding advance in public health effort during the current year.

IX.—MINING—MAZARUNI DIAMOND FIELDS.

234. The resident staff consists of :—

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

235. The hospital of eight beds, with 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.

236. The average population of the district during the year was 3,998.

237. The general health throughout the area was fair. Malaria was still the chief cause of illness, the worst locality being Enachu and its environs.

238. There were no epidemics and there was an absence of "deficiency diseases"—the entire district being provided with fresh vegetables, eggs, fresh cows' milk and beef, lemons, limes and certain fruits.

239. The treatment of cases of venereal diseases entering the district and of those infected within the district is still palliative only. All infected persons are advised to travel to the Public Hospitals, Bartica and Georgetown, for effective treatment.

240. The number of births registered was five, all being Aboriginal Indians residing in the Kamarang-Roraima District.

241. The number of deaths registered during the year was 36 compared with 37 in 1936. The causes were malaria fever 7, Alcoholism 2, pneumonia 4, dysentery 3, other causes 6, unknown 14.

X.—HINTERLAND SETTLEMENTS.

242. Free medicines were supplied to a number of Aboriginal Indian Stations at a cost of \$94.44. Recognition is given to the willing and free medical attention paid to the inhabitants of these hinterland areas, particularly at mission stations, by those in charge who, in the course of years have acquired a very practical and valuable knowledge of elementary therapy, both medical and surgical, and in whom the native places a trust and confidence perhaps not otherwise obtainable.

243. Periodical visits are made by the Government Medical Officer, Skeldon, to a settlement at Orealla up the Corentyne River.

244. The Commission determining the boundary between British Guiana and Brazil has its own appointed doctor who supervises the health of the officers and the labouring personnel.

In order to afford some measure of medical aid to residents in the Rupununi, a Government dispensary was established at Kurupukari in September, 1937, and a dispenser stationed at this point with a suitable supply of drugs and medical comforts. This dispenser also teaches in a primary school established at this post and performs duty as cattle-trail clerk. During school holidays, he is expected to undertake short tours on first aid duty to the settlements in this area.

XI.—MATERNITY AND CHILD WELFARE.

245. During the year the activities of the Infant Welfare and Maternity League which has been in existence for twenty-three years were maintained throughout the Colony.

246. As in the previous year a subvention of \$12,804 was granted by Government. From these funds were subsidised seven health visitors and forty-one nurse-midwives stationed in the more populous centres of the Colony and in remote river and creek areas.

247. Clinics were conducted by Government Medical Officers and in remote areas by Government dispensers at 60 centres, exclusive of estates. Expectant mothers were given advice and supervision, infants were examined and others

educated in the hygiene of infancy. Ante-natal treatment and the treatment of sick infants were also carried out at these centres.

248. The Sub-Committee appointed to deal with the readjustment and generally the question of re-organisation of the League in certain directions continued their deliberations. Their Second Interim Report was submitted briefly reviewing the work previously undertaken and approved by the Central Committee in the form of their First Interim Report and thereafter including recommendations for certain revision in the salaries and subsidies of Health Visitors and League midwives and in relation to other items of expenditure. Proposals, however, have not yet been submitted on the major subject of the present unsatisfactory position between private registered midwives and League nurses. Nevertheless, in this connection there must be borne in mind the general policy of the League which has continued throughout the years, namely, the gradual increase in the appointment of Health Visitors and proportionate reduction in the number of subsidised nurse-midwives.

249. Whilst the activities of the Infant Welfare and Maternity League are published separately, the following extracts may conveniently be quoted here:—

“The amount handed over to the League in connection with the King George V Silver Jubilee Fund was \$3,946.43. It was agreed that the most suitable direction in which the money could be expended was in the provision of as many couch-cabinets as possible to be distributed at the various clinics throughout the Colony.

“In view of the fact that in the majority of instances the clinics were held either in the village office or in a schoolroom, there existed little privacy for the examination of patients, and space in which to look up equipment, etc., was very limited.

“A quarter-sized model couch-cabinet was made and the design of the folding cot was such that it could easily be set up by the nurse-midwife of the clinic. Owing, however, to a later rise in the price of steel, that design had somewhat drastically to be modified and a standard folding Simmons spring cot had to be decided upon.

“A complete couch-cabinet, together with a screen cloth and fittings, was finally agreed upon.

“As regards Georgetown, New Amsterdam, Suddie and Bartica, such couch-cabinets were not required at those clinics. At the request of the clinic authorities in Georgetown, the equipment of a room for baby-weighing is being provided and a sum of \$200 has been allocated to that end. In the case of the New Amsterdam, Suddie, Bartica and Mabaruma clinics, assistance is being given towards the equipping of the examination room.

“A name-plate inscribed with silver paint “King George V Silver Jubilee” upon a polished wood background will be attached to each couch-cabinet and will be fixed over the door of the Georgetown, New Amsterdam, Suddie, Bartica and Mabaruma clinic rooms.”

250. Maternity and Child Welfare work on sugar plantations has continued to make progress. The clinics are conducted by Government Medical Officers and estate medical officers, nurses and midwives, 22 estate hospitals, namely Skeldon, Albion, Port Mourant, Rose Hall, 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 DeKinderen, are now provided with maternity wards.

251. The infant mortality for the Colony was 121 per thousand births. The average rate of this mortality for the previous 10 years was 143.

252. The number of confinements attended by the League nurses during the year was 2,445, and the number of live births 2,356. There were 89 still-births.

253. Still-births in the Colony totalled 655 which is in proportion of 5.8 to every 100 children born alive.

254. The maternal mortality for the Colony was 12.7. The figures for sugar plantations and the Child Welfare and Maternity League were 9.2 and 6.4 respectively.

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

256. The accommodation in the public hospitals and maternity returns for 1937 are as follows :—

		Number of Beds.	Deliveries.	Deaths (Maternal).	No. of Births.	No. of Still-births.
Public Hospital, Georgetown	...	46	1,064	36	927	96
do. Berbice	...	8	227	11	208	31
do. Suddie	...	12	75	6	67	19
do. Mabaruma	...	2	32	...	31	1
do. Bartica	...	*	16	...	13	3

* There are 9 beds in the female ward which are available for maternity cases.

257. The total number of births registered in the Georgetown registration district and in the city of Georgetown was 2,108 and 1,801 respectively. Of this number 927 occurred in the Public Hospital, Georgetown.

258. Returns in respect of the Maternity and Child Welfare League in 60 centres :—

District.	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.
Lodge	Dr. J. E. R. Ramdeholl	11	94	34	26	14	4
Kitty	do.	26	1,065	260	180	187	50
Plaisance	do.	24	224	102	66	40	18
Beterverwagting	do.	26	439	63	153	41	3
Buxton	do.	23	246	97	76	26	4
Paradise	Dr. G. T. G. Boyce	12	138	104	96	11	...
Golden Grove	do.	12	248	185	144	17	3
Victoria	do.	12	144	71	55	10	1
Ann's Grove	do.	12	148	32	58	...	...
Unity	do.	12	80	21	27	...	...
Mabaica	do.	10	146	41	84	4	...
Supply	do.	12	62	44	29	11	...
De Kinderen	Dr. F. A. Viapree	12	76	...	42	2	1
Mabaicony	do.	11	102	2	52	14	5
Airy Hall	do.	12	113	...	15	2	...
Belladrum	do.	24	238	...	50	66	...
No. 8 Village	Dr. E. W. Reece	20	156	45	15	77	7
No. 28 Village	Dr. C. C. Nicholson	11	57	24	18	8	...
Roignol	do.	23	115	35	51	91	28
Sheet Anchor	Dr. G. E. Carto	12	151	...	28	205	154
Adelphi	do.	17	117	51	47	38	24
Highbury	do.	19	124	29	45	35	16
Sandvoort	do.	13	69	16	47	84	82
Mara	Dr. N. J. Abbenetts	11	58	32	54	18	11
Upper Berbice River	Govt. Dispenser Nauth	63	207	84	113	61	14
New Amsterdam	Dr. G. E. Carto	51	884	46	324	1,035	807
Fyrish	Dr. N. J. Abbenetts	11	135	...	24	37	4
Rose Hall	Dr. L. R. Sharples	11	309	2	50	160	21
Bloomfield	Dr. N. J. Dias	11	586	1	61	89	8
Limsir	do.	12	462	...	42	28	4
Nos. 47 and 51 Villages	Dr. C. R. Subryan	7	85	4	...	21	...
No. 64 Village	do.	19	184	19	42	135	5
Nos. 78 and 79 Villages	do.	11	295	26	90	229	34
Crabwood Creek	do.	8	95	52	44	32	5
La Penitence	Dr. J. Bissessar	26	858	106	268	127	25
Agricola	Dr. W. D. Pollard	25	325	159	158	9	3
Grove	do.	26	122	15	48	31	9
Vreed-en-Hoop	Dr. J. Nedd	12	211	58	54	101	17
Bagotville	do.	11	162	56	57	55	12
No. 1 Canal Polder	do.	19	62	22	44	11	4
Good Intent	do.	30	203	56	47	47	3
Windsor Forest	Dr. R. N. Coxler	20	69	10	9	...	...
Den Amstel	do.	24	157	47	40	36	4
Hague	do.	12	60	9	18	...	...
Parika	do.	12	39	6	11	1	...
Leguan	do.	12	157	71	53	69	44
Marienville	Govt. Dispenser Simon	24	363	92	162	68	39
Zaclandia	do.	24	138	130	64	48	30
Aurora	Dr. G. M. Kerry	22	62	5	39	17	6
Suddie	do.	21	299	46	100	15	6
Riverstown	do.	23	226	35	116	12	7
Queenstown	Dr. S. T. M. Sang	23	154	44	72	29	18
Anna Regina	do.	23	550	161	277	62	42
Danielstown	do.	22	96	66	63	27	15
Charity	do.	24	164	132	80	76	53
Moruca	Govt. Dispenser V. P. Rodney	26	456	250	224	45	13
Bartica	Dr. W. D. Pollard	25	495	318	117	42	8
Morawhanna	Dr. W. W. Benson	20	130	58	47	4	...
Total		1,091	13,091	3,465	4,416	3,780	1,676

XII.—HYGIENE AND SANITATION.

CENTRAL BOARD OF HEALTH.

ANNUAL STATEMENT FOR 1937.

259. The personnel of the Board, as appointed by His Excellency the Governor, was, on 1st January, 1937, as follows :—

The Surgeon-General (Chairman).
 His Worship the Mayor of Georgetown.
 His Worship the Mayor of New Amsterdam.
 Hon. E. A. Luckhoo, O.B.E.

Hon. M. B. G. Austin, O.B.E.

Hon. J. I. de Aguiar.

The Government Veterinary Surgeon.

Mr. F. H. Allen.

Mr. C. Shankland.

Mr. C. H. Palmer.

Dr. A. J. Craigen.

Dr. T. T. Nichols with the

Government Medical Officer of Health as Chief Executive Officer, and

Mr. C. H. Harewood, Secretary to the Board.

260. Hon. J. A. Henderson, Surgeon-General, departed from the Colony on 12th June and Dr. B. N. V. Wase-Bailey, Government Medical Officer of Health, acted as Surgeon-General and Chairman of the Board as from that date until the close of the year.

261. Dr. O. M. Francis, who had been seconded in 1936, was appointed to the post of second Assistant Government Medical Officer of Health as from 1st January.

262. Dr. P. A. T. Sneath arrived in the Colony and assumed duty as first Assistant Government Medical Officer of Health on the 26th March.

263. The following members obtained leave of absence during the periods stated :—

Hon. E. A. Luckhoo,

Mayor of New Amsterdam—from 18th April to 27th June.

Hon. M. B. G. Austin —from 20th April to 19th November.

Mr. C. Shankland —from 9th May to 15th November.

Dr. A. J. Craigen —from 20th May to 15th October.

264. The period of appointment of the following members was terminated and their re-appointment was effected on the 29th October :—

Hon. E. A. Luckhoo.

Hon. M. B. G. Austin.

Hon. J. I. de Aguiar.

Dr. T. T. Nichols.

265. Twelve ordinary monthly meetings were held during the year.

266. *General Sanitary Measures.*—Seven hundred and eighty-four Building Applications were dealt with by the Board in its capacity as the Local Sanitary Authority of Rural Sanitary Districts under Section 13 (2).

267. Plans submitted for approval for the laying out of land for building purposes under Section 135 (1) numbered 87. Certificates under Section 135 (4) were issued in respect of forty-nine.

268. As regards trades and industries the following applications were dealt with :—Offensive Trades (Section 95); Coconut Oil, 17; Tanneries, 1; Soap, 1; Other Trades and Industries; Rice Mills (Rice Factories Ord. No. 26 of 1933), 205.

269. Other applications considered included permission for the establishment of eight schools (Section 60 (1)), two burial grounds (Section 64 (1)) and two slaughter houses (Section 105).

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

271. *Outbreak of Typhoid.*—An epidemic of typhoid fever which commenced in Georgetown and its environs during the last quarter of 1936 abated during the

first three weeks of January, the Board being kept fully informed of the action being taken by the City and Government Health Departments.

272. *The Winkel Village.*—Negotiations in regard to the position of this village in its relation to the town of New Amsterdam had been carried out at intervals for a period of some forty years and it was gratifying to record that the Town Council of New Amsterdam had now definitely recognised that the area in question was a part of the town in terms of the boundaries defined in the Ordinance concerned. The Council had expressed the hope that the sanitary conditions of the area would under the special circumstances first be put in order by Government and Government has accepted this principle.

273. *Laying out of lands for building purposes.*—The question of the importance of the proper laying out of lands for building purposes, and more especially in the County of Berbice where particular problems had been presented, was discussed at meetings of the Board when plans in relation thereto and as submitted by the Assistant Government Medical Officer of Health for Berbice were under consideration. These discussions led to the appointment of a committee of three, consisting of Mr. C. Shankland, Convener, Mr. F. H. Allen and Mr. C. H. Palmer, to enquire into the position with regard to existing occupied un-laid out areas in Berbice.

274. *Financial.*—Expenditure in connection with approved sanitary works, bonification, disinfection and other sanitary activities of the Board continued to be met through the votes of the Health Department as printed in the estimates.

275. *Nutrition Committee.*—The Board was kept fully informed of the work of the Standing Committee on Nutrition and in particular the progress made in relation to the Milk Distribution Scheme to selected school children.

276. *Legal.*—Discussion continued in respect of draft regulations on the following subjects:—

Burial Grounds, Spirit Shops, and Schools, the first two mentioned being approved by the Board, whilst the draft School Regulations still remain under consideration.

P. A. T. SNEATH,
Government Medical Officer of Health (Acting).
Chief Executive Officer of the Board.

277. This 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.

278. The authorised staff of the Department in 1937 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—P.A.T. Sneath, M.D., D.P.H. (Toronto).

O. M. Francis, M.D., C.M. (McGill), D.T.M. & H. (Eng.) D.P.H. (Lond.).

Head Clerk (Class III)—C. H. Harewood.

Second Clerk (Class III)—C. W. Joseph.

Third Clerk (Class III)—Miss E. Lewis.

Fourth Clerk—(Probationer)—Miss I. Clarke.

Dr. P. A. T. Sneath was appointed first Assistant Government Medical Officer of Health as from 12th March, 1937. He arrived in the Colony and assumed duty on 26th March, 1937.

Dr. O. M. Francis was appointed second Assistant Government Medical Officer of Health as from 1st January, 1937.

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., F.R. San. I.

Essequibo—F. A. Illoo.

In addition there are—

- 4 Class II Sanitary Inspectors,
- 20 Class III Sanitary Inspectors, and
- 8 Class IV Sanitary Inspectors.

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

LEAVE OF ABSENCE.

279. Dr. J. A. Henderson, Surgeon-General, proceeded on long leave of absence from the Colony as from June 12th. Consequently, the Government Medical Officer of Health was appointed to act in his place in addition to performing his substantive duties, this being the position to the close of the year under review.

2.—ORDINANCES.

280. No new ordinances were passed during the year.

3.—NOTIFIABLE DISEASES.

281. The notifiable diseases are small-pox, 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.

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

283. No cases of small-pox, alastrim, yellow fever, typhus, cholera or plague occurred during the year.

284. A total number of 56 cases of Infantile Paralysis was notified during the year. These cases occurred between June and October.

285. The total number of cases notified of the remaining diseases for the whole Colony was 841 as compared with 1,065 in 1936. The deaths registered as due to the above diseases were 391 as against 411 in the previous year.

286. (i) *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.
1928	102	76	190	225	292	301	357	122
1929	97	61	230	215	327	276	368	127
1930	122	85	209	217	331	302	383	143
1931	140	78	242	209	382	287	453	164
1932	147	608	276	1,147	423	1,755	550	2,111
1933	123	83	262	266	385	289	540	167
1934	130	85	187	168	317	253	456	135
1935	111	81	234	193	345	274	487	146
1936	114	76	199	185	313	261	480	143
1937	125	603	106	431	200	1,082	192	994
	325	1,635	298	1,375	530	2,493	107	788
Total	1,211	827	2,229	2,034	3,440	2,861	4,694	1,514
Average (10-year) Case Mortality	68.3%		91.3%		83.2%		32.9%	

287. It will be seen that for the whole Colony the number of cases was slightly higher than in the previous year but lower than in 1935. The deaths were higher than in either of the two previous years. The death-rate for the whole Colony was 0.88 per 1,000 of the population as compared with 0.83 in 1935 and 0.78 in 1936.

288. There was a slight increase in the number of cases in Georgetown and a slightly higher increase in the number of deaths. The figures were also higher than those for 1935. In the rural areas the figures were slightly higher than those for the previous year but were lower than those for 1935.

289. Comparison of the two quinquennial periods 1928-1932 and 1933-1937 reveals a slight reduction in the number of cases in Georgetown but a slight increase in the number of deaths. In the rest of the Colony there was a slight reduction in both cases and deaths.

290. As in previous years the death-rate for the Black and Mixed races is much higher than for the East Indian, whilst the former constitutes the main bulk of the population of the City.

291. 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.

292. 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) tuberculin testing of dispensary patients; (iv) X-ray screening and photography; (v) collapse therapy and (vi) sanatorium treatment for incipient and convalescent cases at Best Hospital, West Coast, Demerara.

293. The site for the new Tuberculosis Hospital has been prepared and building operations will soon commence. The site includes that of the present Best Hospital and the area adjacent to it on the north and east. Plans have been completed for a 90 bed hospital for patients in all stages of the disease, and in which the modern methods of treatment will be available.

294. (ii) *Enteric Fever (including Typhoid and the Para-typhoids).*—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.
1928 ...	55	14	169	44	224	58	114	31
1929 ...	43	11	167	33	209	44	91	24
1930 ...	24	7	220	46	244	53	124	29
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	5	262	64	288	69	149	44
1936 ...	178	40	334	75	512	115	134	85
1937 ...	33	9	296	56	329	65	254	42
Total ...	458	117	2,347	538	2,805	655	1,274	373
Average (10-year) Case Mortality ...	25.5%		22.9%		23.3%		29.3%	

295. The epidemic of Typhoid Fever which had broken out in the last quarter of 1936 rapidly subsided in the year under review, and it will be seen that the number of cases for the whole Colony was slightly higher than in 1935 and in previous years, although the deaths were slightly less. It is regretted that the source of the epidemic has not been able to be ascertained, and it remains for the Health Departments concerned to continue the general sanitary activities normally devoted towards the reduction in the incidence of this disease.

296. *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.
1928 ...	21	9	14	11	35	20	16	9
1929 ...	18	4	8	6	26	10	15	6
1930 ...	18	4	20	7	38	11	21	7
1931 ...	19	2	17	7	36	9	13	6
1932 ...	32	5	11	5	43	10	30	5
1933 ...	21	2	9	3	30	7	17	7
1934 ...	31	3	15	5	46	6	34	4
1935 ...	22	2	12	5	34	7	19	5
1936 ...	19	4	9	6	28	10	21	8
1937 ...	9	3	7	3	16	6	19	6
Total ...	210	38	122	58	332	96	205	63
Average (10-year) Case Mortality.	18.1%		47.5%		28.9%		30.7%	

297. It will be observed that only 16 cases with 6 deaths were notified during the year under review as against 28 and 10 respectively for the preceding year in respect of the whole Colony. A comparison between the quinquennial period 1928-32 and that for 1933-37 shows a distinct reduction both in frequency and severity. A further feature of the above figures is the difference in the case mortality given for the city of Georgetown and that for the remainder of the Colony as averaged for the past ten years, and these when compared with the case mortality of in-patients in the public hospitals collectively show the advantage of accessibility to early treatment and the administration of anti-diphtheric serum.

298. *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.
1928 ...	7	1	44	...	51	1	11	...
1929 ...	9	...	41	...	50	...	14	...
1930 ...	25	...	49	...	74	...	22	...
1931 ...	52	...	18	...	70	...	55	...
1932 ...	55	148	41	193	96	1	43	148
1933 ...	30	...	90	...	120	...	34	...
1934 ...	29	...	14	...	43	...	25	...
1935 ...	35	...	29	...	64	...	23	...
1936 ...	22	...	23	...	45	...	26	...
1937 ...	19	135	11	167	30	302	20	128
Total ...	283	1	360	1	643	2	273	...
Average (10-year) Case Mortality.	0.4%		0.3%		0.3%		0.0%	

299. The mildness and comparative infrequency of this disease is apparent from the figures and those for 1937 as regards cases are the lowest for the whole Colony as also for the Colony exclusive of the city of Georgetown during the past decade.

300. *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		13		50	
1934 ...	55		29		75	
1935 ...	61		33		94	
1936 ...	60		29		89	
1937 ...	57		29		86	
Total ...	341		175		516	

301. Of the remaining notifiable diseases the following cases occurred :—

	Notification commenced.	1933.	1934.	1935.	1936.	1937.
Infantile Paralysis ...	Aug. 1933	...	2	...	...	56
Erysipelas ...	Nov. 1934	...	3	12	14	8
Scarlet Fever ...	Nov. 1934	...	...	...	...	...
Anthrax ...	Nov. 1934	...	...	...	...	...
Puerperal Fever & Puerperal Septicæmia ...	Nov. 1934	...	5	44	35	36
Trachoma ...	Sept. 1935	...	...	7	28	9

4. GENERAL PREVENTIVE MEASURES.

302. The usual Tables showing in detail the work of the District Sanitary Inspectors are appended.

303. Of specified sanitary improvements carried out there were 63,444 as compared with 68,509 in the previous year. Cases taken to Court numbered 425; of these 36 were withdrawn, 1 dismissed and 4 struck out, the number of convictions being 384.

304. *Routine Departmental Activity*—Again stress must be laid upon the fact of the steadily increasing special duties of Sanitary Inspectors and the consequential reflection upon the time remaining to them for the routine inspection of premises. Whilst the principle of a gradual increase in the sanitary staff has been accepted, it is not as yet possible to reduce the areas of the existing thirty-one districts to a size compatible with what should obtain in this connection.

305. Originally, a Sanitary Inspector was appointed to a specified village and his activities were limited to the boundaries of that village. With the rapid expansion of housing eastwards and westwards from villages and along the coastlands, the Department was faced with the necessity for extending those districts in such manner as to link up the spaces intervening between them and this has meant a larger increase in work. It has also meant considerable increase in the mileage to be travelled by Sanitary Inspectors who at present are restricted to the use of push bicycles, in the number of premises to be inspected and the assistance given to property owners in the laying out of land and in the preparation of building plans. In respect of the last mentioned it should be recalled that in very many instances the owner or householder is unable either to read or write, and the filling in of the building application form and the drawing of the scale plan have to be done entirely by the Sanitary Inspector.

306. *Buildings*—The policy of the Department continues to be aimed towards the establishment of some order out of the chaotic state into which buildings and the laying out of land for building purposes had in the past fallen. Reference to the report for 1936 in which the position is more fully stated will here suffice, but it might be stated generally that considerable progress has been made, particularly in the County of Berbice, where the position as regards the laying out of land was particularly bad. It would appear that at last many of the Local Sanitary Authorities in that county are coming to the realisation that it is in their own interest that in this connection they should put themselves in order. It must, however, be recorded here that the struggle to achieve a degree of order has been a long and arduous one and spread over many years, and it is desirable also to place on record the Department's gratification at the patience and assiduity of the resident Sanitary Inspectors concerned.

307. *Drainage*.—As stated in the previous Annual Report, the importance of adequate drainage along the coastlands of the Colony can hardly be over-estimated. The most prominent disease in the Colony, *i.e.* malaria fever, must for its prevention depend first and foremost on effective main drainage of the land. Again, where the type of latrine in village and rural areas remains that of the dry pit system, the height of the subsoil level of the water becomes of first importance. Within comparatively recent years the introduction by Estate Authorities of powerful pumps at intervals along the coastlands of estates has had the effect of enabling such lots to be utilised for building purposes, whereas front lands were formerly flooded with water from aback; now buildings are rapidly going up on land that, as a whole, is fairly well drained and laid out.

308. It is hoped, however, that it may be possible in the near future radically to tackle the drainage question throughout the coastlands of the Colony as a major scheme which, if for no other reason, would be well worth while from the standpoint of the prevention of malaria.

309. *Trades and Industries*.—Control of the establishment of offensive trades has been maintained throughout the year, the greatest number of applications dealt

with still being requisitions for the establishment of factories for the manufacture of coconut oil.

310. The usual inspection of rice factories was carried out during the last quarter of the year. It has not yet been found possible to bring into force regulations governing trades and industries, enabling power for which exists in the Public Health Ordinance, No. 15 of 1934. Indeed, generally, the question of drafting regulations is combined to some extent with what has been stated above in relation to overburdening and shortage of the sanitary staff, as the effectual carrying out of such regulations must still further increase their duties, and whilst not a few of such regulations are in draft, they have not further been proceeded with partly upon these grounds.

311. *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 :

	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.
Total Vaccinations ...	6,668	6,700	4,864	5,179	6,209	4,880	6,045	34,534	8,325	6,795
Total verified successful ...	5,311	5,854	4,777	4,778	5,834	4,636	5,691	32,006	8,002	5,541
Per cent. verified successful ...	88.6	89.6	98.2	92.3	94.0	95.0	94.1	92.7	96.1	86.6

5—SPECIAL PREVENTIVE MEASURES.

312. *Milk Testing*.—The testing of samples of milk was continued more or less throughout the year, the object being to ascertain over a large number of samples, the quality of milk being produced in the Colony. Preliminary analysis has shewn marked and steady deterioration in the milk as collected directly from the cow into sterilised receptacles and that as retailed to the consumer.

313. The whole question of the milk supplies of the Colony is now under examination and also the position as regards contractual supplies to medical and other Government institutions.

314. The Milk Committee appointed in July, 1936, submitted a full report on the question of the milk supplies for the city of Georgetown, but its major recommendations for the improvement of control by the establishment of milk depots both in the city and in certain village areas, have not been able to be implemented on the grounds of cost. The great difficulty in the control of milk supplies in this Colony lies fundamentally in the absence of large farms where milk production is the primary object. As a consequence, milk is obtained through several middlemen, each collecting a few pints or gallons from a very large number of small producers owning on an average about three or four cows. It will be appreciated that the control of milk under such circumstances is well nigh impossible.

315. Inspection of cattle-byres by Sanitary Inspectors is regularly carried out and requirements in accordance with the existing by-laws on the subject are enforced as far as possible. In certain areas the extreme poverty of the people makes this very hard of achievement.

316. Whilst drastic action at this juncture which would have the effect of throwing out of employment many hundreds of these small producers hardly seems warranted, the production of wholesome and controlled milk supplies must nevertheless remain a problem to be solved at the earliest possible date.

317. *Bonification*.—Bonification of the Thomas Lands to the north of Georgetown was continued during the year.

318. At a cost of \$4,500, being part of the Colonial Development Fund Grant,

an area of some five acres in extent and lying adjacent to the Quarantine Station at Best, West Coast, Demerara, was bonified preparatory to the erection of the new Tuberculosis Hospital.

319. A further small area near the town of New Amsterdam was also bonified.

320. It is hoped that next year a much larger sum will be made available to put in similar order many Government premises which are of such a size that it is not reasonably possible for the occupier himself to put them in order. Thereafter, maintenance should be comparatively inexpensive.

321. *Nutrition.*—The Nutrition Committee, of which the Government Medical Officer of Health was Chairman, completed its deliberations early in the year and the report was published as a Sessional Paper (No. 3 of 1937) and the sum of \$4,200 was placed on the Draft Estimates for 1938 in accordance with the recommendations of the Committee for the first year's preliminary inquiries and investigation and for the starting of an experimental scheme of milk distribution to selected groups of school children.

6.—LABORATORY WORK.

322. A total number of 70 specimens of milk was taken for bacteriological examinations and submitted to the Government Bacteriologist.

323. Of this number, 15 specimens were taken direct from cows, 15 from producers, 20 from middlemen and 20 from retailers. Reductase tests were made on 70 samples of milk. Sedimentation tests were made on 52 samples and the discs filed for reference.

324. 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 in the laboratory, the remainder being occupied in undertaking the duties of a Sanitary Inspector supervising the work of bonification of the Thomas Lands and preparing plans for the lay-out of building areas in the Colony.

325. Twelve specimens of water were examined for the presence of coliform organisms. In nine specimens they were absent from 50 cc; in one present in 1 cc; and in two present in 0.1 cc.

326. It has been decided that following upon the arrival of the new Government Bacteriologist and Pathologist, the analysis of water and other purely bacteriological work should cease to be carried out in the Health Department's laboratory and that in future all such work would be carried out by the Bacteriologist.

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.
102,074	8,097	425	384	36	2	1	\$308.77

TABLE II.

Lots weeded.	Drains weeded.	Drains dug.	Trenches cleaned.	Ponds cleaned.	Water Receptacles screened.
10,634	6,976	1,312	1,002	438	1,277

TABLE III.

Latrines erected.	Latrines removed and re-erected.	Latrines repaired.	Latrines limewashed.	Cesspits emptied.	Cesspits oiled.
1,418	1,066	2,584	2,308	107	31,271

TABLE IV.

	1936.	1937.
Inspection of provision shops ...	7,160	6,386
Provision shops cleaned by order ...	1,323	1,450
Provision shops certified ...	120	85
Inspection of bakeries ...	1,716	1,532
Bakeries cleaned by order ...	451	400
Bakeries certified ...	10	8
Samples of foodstuffs examined ...	169,045	164,926
Samples of foodstuffs condemned ...	682	748
Inspection of butcheries ...	5,308	5,397
Carcasses inspected ...	9,619	9,884

TABLE V.

Milk Sampling, Inspection of Cowpens, etc.	1936.	1937.
Cattle-pens certified as sources of milk supply...	1,173	658
Licences issued for the sale of milk ...	1,124	1,088
Persons prosecuted for selling milk unlawfully ...	25	15
Persons prosecuted for selling adulterated milk ...	117	144
Inspection of cattle-pens ...	5,616	3,852
Cattle-pens cleaned by order ...	1,093	730

TABLE VI.

	1936.	1937.
RESULTS OF MILK SAMPLING—		
Samples taken ...	1,544	1,710
Samples genuine ...	1,422	1,561
Samples adulterated ...	117	147
Amount of fines ...	\$ 840.35	\$ 1,107.60

TABLE VII.

PERCENTAGE OF ADULTERATED MILK SAMPLES—		
East Coast, Demerara ...	7.1%	9.4%
West Coast, Demerara ...	8.4%	6.3%
East Bank, Demerara ...	12.1%	9.6%
West Bank, Demerara ...	8.1%	4.9%
Demerara River ...	6.9%	22.0%
Essequibo ...	5.5%	6.4%

303. Of specified sanitary improvements carried out there were 63,414 as compared with 68,509 in the previous year. Cases taken to Court numbered 425; of these 36 were withdrawn, 1 dismissed and 4 struck out, the number of convictions being 384.

304. *Routine Departmental Activity*—Again stress must be laid upon the fact of the steadily increasing special duties of Sanitary Inspectors and the consequential reflection upon the time remaining to them for the routine inspection of premises. Whilst the principle of a gradual increase in the sanitary staff has been accepted, it is not as yet possible to reduce the areas of the existing thirty-one districts to a size compatible with what should obtain in this connection.

305. Originally, a Sanitary Inspector was appointed to a specified village and his activities were limited to the boundaries of that village. With the rapid expansion of housing eastwards and westwards from villages and along the coastlands, the Department was faced with the necessity for extending those districts in such manner as to link up the spaces intervening between them and this has meant a larger increase in work. It has also meant considerable increase in the mileage to be travelled by Sanitary Inspectors who at present are restricted to the use of push bicycles, in the number of premises to be inspected and the assistance given to property owners in the laying out of land and in the preparation of building plans. In respect of the last mentioned it should be recalled that in very many instances the owner or householder is unable either to read or write, and the filling in of the building application form and the drawing of the scale plan have to be done entirely by the Sanitary Inspector.

306. *Buildings*—The policy of the Department continues to be aimed towards the establishment of some order out of the chaotic state into which buildings and the laying out of land for building purposes had in the past fallen. Reference to the report for 1936 in which the position is more fully stated will here suffice, but it might be stated generally that considerable progress has been made, particularly in the County of Berbice, where the position as regards the laying out of land was particularly bad. It would appear that at last many of the Local Sanitary Authorities in that county are coming to the realisation that it is in their own interest that in this connection they should put themselves in order. It must, however, be recorded here that the struggle to achieve a degree of order has been a long and arduous one and spread over many years, and it is desirable also to place on record the Department's gratification at the patience and assiduity of the resident Sanitary Inspectors concerned.

307. *Drainage*.—As stated in the previous Annual Report, the importance of adequate drainage along the coastlands of the Colony can hardly be over-estimated. The most prominent disease in the Colony, *i.e.* malaria fever, must for its prevention depend first and foremost on effective main drainage of the land. Again, where the type of latrine in village and rural areas remains that of the dry pit system, the height of the subsoil level of the water becomes of first importance. Within comparatively recent years the introduction by Estate Authorities of powerful pumps at intervals along the coastlands of estates has had the effect of enabling such lots to be utilised for building purposes, whereas front lands were formerly flooded with water from aback; now buildings are rapidly going up on land that, as a whole, is fairly well drained and laid out.

308. It is hoped, however, that it may be possible in the near future radically to tackle the drainage question throughout the coastlands of the Colony as a major scheme which, if for no other reason, would be well worth while from the standpoint of the prevention of malaria.

309. *Trades and Industries*.—Control of the establishment of offensive trades has been maintained throughout the year, the greatest number of applications dealt

with still being requisitions for the establishment of factories for the manufacture of coconut oil.

310. The usual inspection of rice factories was carried out during the last quarter of the year. It has not yet been found possible to bring into force regulations governing trades and industries, enabling power for which exists in the Public Health Ordinance, No. 15 of 1934. Indeed, generally, the question of drafting regulations is combined to some extent with what has been stated above in relation to overburdening and shortage of the sanitary staff, as the effectual carrying out of such regulations must still further increase their duties, and whilst not a few of such regulations are in draft, they have not further been proceeded with partly upon these grounds.

311. *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 :

	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.
Total Vaccinations ...	6,668	6,500	4,864	5,179	6,200	4,880	6,045	34,534	8,325	6,395
Total verified successful ...	5,911	5,824	4,777	4,778	5,834	4,636	5,691	32,006	8,002	5,541
Per cent. verified successful ...	88.6	89.6	98.2	92.3	94.0	95.0	94.1	92.7	96.1	86.6

5—SPECIAL PREVENTIVE MEASURES.

312. *Milk Testing*.—The testing of samples of milk was continued more or less throughout the year, the object being to ascertain over a large number of samples, the quality of milk being produced in the Colony. Preliminary analysis has shewn marked and steady deterioration in the milk as collected directly from the cow into sterilised receptacles and that as retailed to the consumer.

313. The whole question of the milk supplies of the Colony is now under examination and also the position as regards contractual supplies to medical and other Government institutions.

314. The Milk Committee appointed in July, 1936, submitted a full report on the question of the milk supplies for the city of Georgetown, but its major recommendations for the improvement of control by the establishment of milk depots both in the city and in certain village areas, have not been able to be implemented on the grounds of cost. The great difficulty in the control of milk supplies in this Colony lies fundamentally in the absence of large farms where milk production is the primary object. As a consequence, milk is obtained through several middlemen, each collecting a few pints or gallons from a very large number of small producers owning on an average about three or four cows. It will be appreciated that the control of milk under such circumstances is well nigh impossible.

315. Inspection of cattle-byres by Sanitary Inspectors is regularly carried out and requirements in accordance with the existing by-laws on the subject are enforced as far as possible. In certain areas the extreme poverty of the people makes this very hard of achievement.

316. Whilst drastic action at this juncture which would have the effect of throwing out of employment many hundreds of these small producers hardly seems warranted, the production of wholesome and controlled milk supplies must nevertheless remain a problem to be solved at the earliest possible date.

317. *Bonification*.—Bonification of the Thomas Lands to the north of Georgetown was continued during the year.

318. At a cost of \$4,500, being part of the Colonial Development Fund Grant,

an area of some five acres in extent and lying adjacent to the Quarantine Station at Best, West Coast, Demerara, was bonified preparatory to the erection of the new Tuberculosis Hospital.

319. A further small area near the town of New Amsterdam was also bonified.

320. It is hoped that next year a much larger sum will be made available to put in similar order many Government premises which are of such a size that it is not reasonably possible for the occupier himself to put them in order. Thereafter, maintenance should be comparatively inexpensive.

321. *Nutrition.*—The Nutrition Committee, of which the Government Medical Officer of Health was Chairman, completed its deliberations early in the year and the report was published as a Sessional Paper (No. 3 of 1937) and the sum of \$4,200 was placed on the Draft Estimates for 1938 in accordance with the recommendations of the Committee for the first year's preliminary inquiries and investigation and for the starting of an experimental scheme of milk distribution to selected groups of school children.

6.—LABORATORY WORK.

322. A total number of 70 specimens of milk was taken for bacteriological examinations and submitted to the Government Bacteriologist.

323. Of this number, 15 specimens were taken direct from cows, 15 from producers, 20 from middlemen and 20 from retailers. Reductase tests were made on 70 samples of milk. Sedimentation tests were made on 52 samples and the discs filed for reference.

324. 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 in the laboratory, the remainder being occupied in undertaking the duties of a Sanitary Inspector supervising the work of bonification of the Thomas Lands and preparing plans for the lay-out of building areas in the Colony.

325. Twelve specimens of water were examined for the presence of coliform organisms. In nine specimens they were absent from 50 cc; in one present in 1 cc; and in two present in 0.1 cc.

326. It has been decided that following upon the arrival of the new Government Bacteriologist and Pathologist, the analysis of water and other purely bacteriological work should cease to be carried out in the Health Department's laboratory and that in future all such work would be carried out by the Bacteriologist.

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.
102,074	8,097	425	384	36	2	1	\$308.77

TABLE II.

Lots weeded.	Drains weeded.	Drains dug.	Trenches cleaned.	Ponds cleaned.	Water Receptacles screened.
10,634	6,976	1,312	1,002	438	1,277

TABLE III.

Latrines erected.	Latrines removed and re-erected.	Latrines repaired.	Latrines limewashed.	Cesspits emptied.	Cesspits oiled.
1,418	1,066	2,584	2,308	107	31,271

TABLE IV.

	1936.	1937.
Inspection of provision shops ...	7,160	6,386
Provision shops cleaned by order ...	1,323	1,450
Provision shops certified ...	120	85
Inspection of bakeries ...	1,716	1,532
Bakeries cleaned by order ...	451	400
Bakeries certified ...	10	8
Samples of foodstuffs examined ...	169,045	164,926
Samples of foodstuffs condemned ...	682	748
Inspection of butcheries ...	5,308	5,397
Carcasses inspected ...	9,619	9,884

TABLE V.

Milk Sampling, Inspection of Cowpens, etc.	1936.	1937.
Cattle-pens certified as sources of milk supply...	1,173	658
Licences issued for the sale of milk ...	1,124	1,088
Persons prosecuted for selling milk unlawfully ...	25	15
Persons prosecuted for selling adulterated milk ...	117	144
Inspection of cattle-pens ...	5,516	3,852
Cattle-pens cleaned by order ...	1,093	730

TABLE VI.

	1936.	1937.
RESULTS OF MILK SAMPLING—		
Samples taken ...	1,544	1,710
Samples genuine ...	1,422	1,561
Samples adulterated ...	117	147
Amount of fines ...	\$ 840.35	\$ 1,107.69

TABLE VII.

PERCENTAGE OF ADULTERATED MILK SAMPLES—		
East Coast, Demerara ...	7.1%	9.4%
West Coast, Demerara ...	8.4%	6.3%
East Bank, Demerara ...	12.1%	9.6%
West Bank, Demerara ...	8.1%	4.9%
Demerara River ...	6.9%	22.0%
Essequibo ...	5.6%	6.4%

PORT HEALTH WORK AND ADMINISTRATION.

PORT OF GEORGETOWN.

327. The Surgesn 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 Officer	...	...	O. M. Francis, M.D., C.M. (McGill) L.M.S (Nova Scotia), D.T.M. & H. (Eng.) D.P.H. (Lond).
Port Sanitary Inspectors	...	...	S. D. Singh, Sanitary Inspector, Class III. (Certificate, Royal Sanitary Institute for Sanitary Inspectors, and Certificate of Tropical Hygiene) to 15th April, 1937. B. Profit, Sanitary Inspector. Class II Certificate, Royal Sanitary Institute for Sanitary Inspectors.
Engineer	...	...	W. Spooner.

328. During the year the visiting of vessels and granting of pratique were performed by the Deputy Port Health Officer, Dr. O. M. Francis.

329. 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, Small Pox, Cholera and Typhus Fever.
- (b) Against the ports of New Orleans, Mobile and Tampa (U.S.A.) for Typhus Fever.
- (c) In the case of ships coming from St. Thomas, St. Croix, Porto Rico and Santo Domingo, arrangements are in force to ensure the notification of any occurrence of quarantinable disease in these ports.

330. *Vessels visited by Port Health Officers.*—During the year 139 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 (Revisit).	Total.
January	...	6	...	...	...
February	...	8	1	...	...
March	...	10	2	1	...	
April	...	14	2	...	...
May	...	13	...	...	...
June	...	12	1	...	...
July	...	12	2	1	...	
August	1	12	2	...	...
September	...	9	...	...	...
October	...	11	...	...	...
November	...	8	1	...	...
December	1	8	1	...	...
Total	2	123	12	2	...	\$ 588 00

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

For Small-Pox	...	...	...	...	65
For Cholera	...	...	...	...	Nil.
For Yellow Fever	...	...	...	...	Nil.
For Plague	...	...	...	...	Nil.
For Typhus	...	...	...	...	Nil.

332. Vessels consigned to the Demerara Bauxite Company, McKenzie, Demerara River, with crews were placed under surveillance by the Port Health Officer,

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

333. *Vessels visited by the Port Sanitary Inspector.*—The total number of vessels visited are as under :—

<i>Steamers.</i>		<i>Sailing Vessels.</i>	
Ocean Steamers ...	170	Schooners ...	147
Coasting Steamers	34	Other Craft ..	151
	<hr/> 204		<hr/> 298

334. The total number of visits paid to vessels are as follows :—

<i>Steamers.</i>		<i>Sailing Vessels.</i>	
Ocean Steamers ...	281	Schooners ...	364
Coasting Steamers ...	209	Other Craft ...	189
	<hr/> 490		<hr/> 553

335. The above visits include routine inspection of Government Steamers.

336. *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.

337. *Care of Merchant Seamen.*—45 sick seamen were sent to the Public Hospital, Georgetown, for treatment during the year from ocean-going vessels.

338. *Vessels Fumigated and Disinfected by the Port Health Authorities.*—No vessel was fumigated during the year.

339. Plague precautions were enforced on vessels lying alongside the Port of Georgetown or at McKenzie, Demerara River.

340. *Disinfection and Fumigation Machines.*—

(1) *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.

(2) *Washington Lyon Steam Disinfector at the Quarantine Station, Best, West Coast, Demerara.*—This machine was not employed for fumigation purposes during the year. It is in good working order.

341. *Trapping and Examination of Rats.*—Four rats were trapped during the year and post-mortem examinations made. No disease was found.

342. *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.

343. *Remarks.*—Cablegrams were interchanged as heretofore between the Health Officers of this and other Convention ports, giving notice to passengers under surveillance on board vessels about to sail.

344. The total amount of revenue accruing to Government from sanitary measures in the Port of Georgetown in 1937 is \$588.00.

345. No shrimping was carried out in the prohibited area of the Port of Georgetown.

XIV.—METEOROLOGICAL.

346. The rainfall during the year, as registered at the Botanic Gardens (Georgetown) was 92.16 inches as against 104.09 in 1936, and the mean percentage of humidity was 81.6 inches, the same as in 1936.

347. The mean of the four recording stations in Georgetown was 89.34 inches as against 97.27 in 1936.

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

Month.	TEMPERATURE.						RAINFALL.		WIND.	
	Solar Maxi- mum.	Mini- mum on Grass.	Shade Maxi- mum.	Shade Mini- mum.	Range.	Mean.	Amount in Inches.	Per cent of Humi- dity.	General Direc- tion.	Average Force. Velocity M.P.H.
January ...	142.7	75.7	83.6	76.0	16.0	79.8	11.41	84.7	N.E.	8.13
February ...	149.1	72.4	84.5	75.7	15.0	80.1	9.95	77.9	N.E.	7.77
March ...	149.4	72.8	85.0	76.5	14.5	80.7	1.26	77.2	N.E.	8.74
April ...	147.0	73.5	85.5	76.3	15.0	80.9	5.44	78.8	N.E.	8.38
May ...	142.7	74.3	84.5	76.9	11.0	80.7	12.43	83.9	N.E.	7.96
June ...	143.5	73.6	84.9	75.6	15.0	80.2	17.80	85.7	N.E.	5.45
July ...	143.0	73.1	84.8	75.1	15.0	79.9	15.63	84.7	N.E.	4.61
August ...	145.0	73.6	86.1	75.8	16.0	80.9	7.22	83.5	N.E.	4.80
September ...	149.5	73.7	88.2	76.4	19.5	82.3	3.16	79.8	N.E.	5.54
October ...	149.8	73.5	88.9	76.5	16.5	82.7	3.10	79.6	N.E.	5.69
November ...	150.2	73.9	84.3	76.7	15.0	80.5	4.10	81.2	N.E.	5.91
December ...	146.0	73.3	86.1	76.2	19.0	81.1	9.66	82.2	N.E.	6.06
Mean ...	146.5	73.6	85.5	76.1	...	80.8	92.16	81.6	...	6.59

Georgetown—Registered Mean Rainfall for the year 1937 = 89.34 inches.

XV.—SCIENTIFIC.

349. The annual report of the Government Bacteriologist for 1937 appears as Appendix 1.

B. N. V. WASE-BAILEY,
Surgeon-General (Acting).

APPENDIX I.

GOVERNMENT BACTERIOLOGICAL LABORATORY—ANNUAL REPORT FOR THE YEAR 1937.

1.—STAFF.

Bacteriologist and Pathologist	...Geo. H. Steven, M.B., Ch. B. (Edin.)
Technical Assistants	...Mr. I. Singh. ...Mr. E. A. Singh. ...Mr. J. O. Morgan.
Probationer	...Mr. M. N. Fernandes.
Laboratory Attendant	...Matilda Duncan.

2.—LEAVE.

The following officers were on leave of absence during the year :

Dr. Geo. H. Steven from 3rd June to 26th October, 1937.

Mr. I. Singh from 22nd February to 21st May, 1937.

Mr. M. N. Fernandes from 10th October to 9th January, 1938.

3.—RETIREMENT.

Dr. Geo. H. Steven, Government Bacteriologist and Pathologist, retired on 26th October, 1937.

During the absence on leave of Dr. Steven and after his retirement, the duties of Bacteriologist and Pathologist were performed by Dr. E. G. Hamilton Payne.

4.—BACTERIOLOGICAL AND SEROLOGICAL WORK.

The total number of specimens examined during the year was 14,480 of which 6,460 were Wasserman Reactions and 8,020 General.

In 1936, 15,970 specimens were examined, 5,996 being Wasserman Reactions and 9,974 General.

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

(a) Microscopic and Chemical—

Blood films for Malaria Parasites	...	1,053	
Blood smears for Microfilariae	...	73	
Blood for Total and Differential Counts	...	493	
Cerebro-Spinal fluids for Globulin and cell counts	...	20	
Faeces for Helminths and Amoebae	...	791	
Fractional Test Meals	...	7	
Nasal smears for Mycobacteria Lepre	...	18	
Pus for Organisms	...	57	
Smears for Gonococci and Spirochaetes	...	2,340	
Sputum for Mycobacterium Tuberculosis	...	736	
Tissue Sections	...	42	
Urine for Microscopic and Chemical Examinations	...	336	
Varia	...	99	6,065

(b) Cultural—

Autogenous Vaccines	...	34	
Blood	...	304	
Cerebro-Spinal Fluid	...	6	
Faeces	...	689	
Milk	...	70	
Pus	...	61	
Throat Swabs for Corynebacteria Diphtheria	...	99	
Urine	...	54	
Water	...	20	1,337

Carried forward ... 7,402

	Brought forward	...	...	...	7,402
(c) Pathological and Biochemical—					
Blood Urea Estimations	...	...	...	152	
Blood Sugar Estimations	...	...	...	73	
Faeces for Occult Blood	...	...	...	6	
Urea Concentration Tests	...	...	...	52	
Van Den Bergh Reactions	...	...	...	7	
Widal Reactions	...	...	...	328	
Wasserman Reactions—					
Cerebro-Spinal Fluids	...	...	14		
Blood	...	...	6,446	6,460	7,078
Total	...	...	...	...	14,480

There were also 16 medico-legal examinations for Spermatozoa.

5.—SOURCES OF SPECIMENS.

About 84% of the specimens examined was received from the Public Hospital, Georgetown, and the various clinics and out-patients departments attached.

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

Public Hospital, Georgetown, and Clinics	...	...	12,205
Public Hospital, New Amsterdam, Berbice	...	...	414
Best Hospital	...	...	96
Other Government Institutions	...	...	299
Districts under Government Medical Officers	...	...	322
Municipal Infant Welfare Clinics	...	...	690
Private Practitioners	...	...	454
Total	...	...	14,480

6.—REMARKS ON VARIOUS DISEASES INVESTIGATED.

(a) *Helminths*.—797 specimens of faeces were examined microscopically and of these 193 contained Helminthic Ova (24%). The following is a list of the various types found.

Ova of *Anchylostoma Duodenale* were found in 149, 77.2% of positives.

do. <i>Ascaris Lumbricoides</i>	do. do. in 29, 15%	of do.
do. <i>Trichuris trichiura</i>	do. do. in 14, 7.3%	of do.
do. <i>Oxyuris Vermicularis</i>	do. do. in 1, .5%	of do.

(b) *Dysentery, Amoebic*.—*Entamoeba Histolytica* was found in 18 of the 797 faeces specimens examined.

(c) *Enteric and Dysenteric (Bacillary) Group*.—328 Widal examinations were made during the year and of these 142 (43%) were positive.

107 positive to *Bacterium Typhosum*.

11 do. to do. *Paratyphosum A*.

11 do. to do. do. *B*.

3 do. to do. do. *C*.

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

304 blood cultures were made and in 26 of these *Bacterium Typhosum* was isolated.

549 faeces cultures were made, *Bacterium Typhosum* being found in 60.

140 faeces cultures were made for *Bacterium Dysenterium*, of which 2 were positive (*B. Flexner* type).

(d) *Malaria*.—1,053 blood films were examined for *Plasmodia* which were found in 204 cases (19%).

<i>Plasmodium Vivax</i>	...	...	154
do. <i>Falciparum</i>	...	...	48
do. <i>Malariae</i>	...	...	2

(e) *Nephritis*—Full examinations of urine were made in 209 cases. Of these 111 (53%) contained Albumen in larger quantities than 0.05%.

152 blood urea estimations were made.

53 (34.8%) contained between 50 and 100 milligrams of urea per 100 ccs.

20 (13%) contained over 100 milligrams of urea per 100 ccs.

(f) *Tuberculosis*—736 sputa were examined and of these 191 (26%) were found to contain *Mycobacterium Tuberculosis*.

These figures include periodical examinations of Best Hospital patients (96) and Tuberculosis Clinic patients (104).

(g) *Venereal Diseases*.—Syphilis. 6,446 sera and 14 Cerebro-Spinal Fluids were examined by Harrison's method of the Wasserman Reaction—a total of 6,460. Of these 1,656 sera and 4 Cerebro-Spinal Fluids were positive and 108 sera were returned as weak positives, most of these being from patients under treatment.

2,333 smears were examined for Gonococci and 7 for Spirochaetes.

(h) *Diphtheria*—99 pharyngeal swabs were examined and the *Corynebacterium Diphtheria* was found in 9.

(i) *Leprosy*—In 2 of the 18 swabs examined, *Mycobacterium Lepae* was proved positive.

7.—VACCINES.

Stock Vaccines of T.A.B., *Streptococcus Haemolyticus*, *Staphylococcus Aureus* and *Albus*, and *Gonococcus* were routinely prepared and issued to Medical Practitioners.

3,700 ccs. of T.A.B. were made and distributed in addition to 4,800 ccs. of *Streptococcus Haemolyticus*, 2,500 ccs. *Staphylococcus Aureus*, 2,500 ccs. *Staphylococcus Albus*, and 3,800 ccs. of *Gonococcus Vaccine*.

Mixed *Streptococcus* and *Staphylococcus* Vaccines are given to filarial patients. The number attending the Laboratory weekly averages about 35.

Mixed *Gonococcus Vaccine* is issued to various clinics.

34. Autogenous Vaccines were prepared during the year.

8.—WATER EXAMINATIONS.

Examinations were made during the year of water from the following sources :

- a. Public Hospital's Pure Water Supply.
- b. Sea water sent from Public Works Department.
- c. Well water from Wakenaam.
- d. Water from Pln. Albion.

a, c, and d were all found to be bacteriologically pure.

b was examined for objectional micro-organisms which were not found, the predominant Bacterium being *Bacterium Aerogenes*.

9.—MILK EXAMINATIONS.

In connection with the investigation into the Bacteriological condition of the milk supply of Georgetown which was started by the Government Medical of Health in 1936, 70 specimens were examined during 1937.

The samples were divided into the same groups as previously, viz :

1. Milked directly from the cow into sterile bottles.
2. Taken from the Producer's cans which he passes on to the Middlemen.
3. From the cans of the Middlemen. This comprises milk from several Producers.
4. From the cans of the Retailer. Milk which may come from one or more Middlemen.

The tests were also the same :

Agar Count, Estimation of *Coli Aerogenes* Content, and Keeping Quality Test.

The following table gives the results of the examinations :

GROUP.	1	2	3	4
Certified Milk ...	9	2	1	...
Grade "A" ...	4	1	1	6
Below Grade "A" ...	...	4	1	1
Not classified ...	2	8	17	13
Totals ...	15	15	20	20

10.—PATHOLOGICAL.

162 Post mortem examinations were made during the year and the following gives the causes of death :

1. Injuries, etc.—

Fracture of Skull ...	7	
Burns ...	1	
Ruptured Spleen ...	1	
Gas Gangrene ...	2	
Spinal Concussion ...	1	12

2. General Diseases—

Enteric Fever ...	7	
Malaria ...	12	
Syphilis, Congenital ...	6	
Diphtheria ...	2	
Leukaemia ...	1	
Toxaemia ...	1	
Pyæmic Abscesses ...	1	
Eclampsia ...	1	
Septic Dermatitis ...	1	
Dysentery ...	1	33

3. Tumours—

Carcinoma of Liver ...	1	
Carcinoma of Diaphragm and Liver ...	1	
do. of Pancreas ...	1	
do. of Oesophagus ...	1	
do. and Sarcoma of Ovaries ...	1	
do. do. do. of Stomach ...	4	9

4. Diseases of Respiratory System—

Chronic Phthisis ...	1	
Broncho-Pneumonia ...	5	
Lobar Pneumonia ...	11	
Tuberculosis of Lung ...	13	
Oedema Glottidis ...	1	
Chronic Pleurisy ...	1	
Pyo-Pneumothorax ...	1	33

5. Circulatory System—

Aneurysm ...	2	
Arterio Sclerosis ...	2	
Myocarditis and Heart Failure ...	17	
Pericarditis ...	2	23

6. Excretory System—

Malignant Diseases of Suprarenal ...	1	
Nephritis, Chronic Interstitial ...	2	
do. do. Parenchymatous ...	2	
do. Acute ...	4	
do. Pyelo ...	1	
do. Chronic ...	1	11

Carried forward ... 121

	Brought forward	...	...	121
7. Digestive System—				
Gastric Enteritis	...	...	...	1
Hernia, Strangulated	...	...	...	1
Gastric Ulcer	...	...	...	3
Peritonitis	...	...	...	4
Tuberculosis of Bowel	...	...	...	4
Acute Gastritis	...	...	...	1
Tuberculosis of Mesenteric Glands	...	...	...	4
Entero Colitis	...	...	...	1
Chronic Colitis	...	...	...	1
Mesenteric Thrombosis	...	...	...	1
				21
8. Generative System—				
Placenta Praevia	...	...	...	1
Multiple Uterine Fibroids	...	...	...	1
Oophoritis	...	...	...	1
Abortion	...	...	...	1
Pyosalpynx	...	...	...	3
Prolonged Labour, Exhaustion	...	...	...	1
				8
9. Nervous System—				
Cerebral Haemorrhage	...	...	...	3
Septic Meningitis	...	...	...	4
Meningitis	...	...	...	3
Oedema of Meninges	...	...	...	1
Hydrocephalus	...	...	...	1
				12
				—
	Total	...	...	162

11.—NEW BUILDINGS.

During the year a new laboratory was erected in the southern block of the Public Hospital, Georgetown. Due to lack of internal fittings this building is not yet in use.

E. G. HAMILTON PAYNE,
Acting Government Bacteriologist and Pathologist.



