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Contributors

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MINISTRY OF THE INTERIOR, EGYPT

Department of Public Health

Annual Report on the Work of the Department of Public Health for 1932

Government Press, Bulâq, Cairo, 1935

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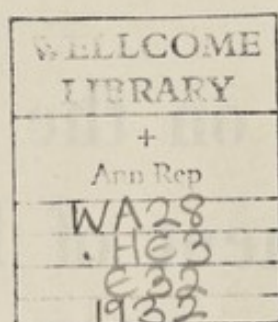
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NOTICE

In addition to this general Report the Department of Public Health publishes reports on the work of each of the following Sections :—

- (1) Lunacy Division.
- (2) Ophthalmic Section.
- (3) Public Health Laboratories.
- (4) Anti-Malaria Commission.
- (5) Giza Memorial Ophthalmic Laboratory.
- (6) Researches Institute and Endemic Diseases Hospital.
- (7) Endemic Diseases Section.
- (8) Reports and Notes of the Public Health Laboratories (non-periodical).



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MINISTRY OF THE INTERIOR, EGYPT

Department of Public Health

ANNUAL REPORT FOR 1932

INTRODUCTION

It is the policy of the Department, since it was first constituted, to publish annual general reports in which it reviews the health condition of the country during the year, and states the activities it has displayed towards the improvement of this condition, and the measures it proposes to take in future for safeguarding the country against epidemics and for ameliorating the health condition therein. These reports have not only the advantage of demonstrating the phases of the condition of health, but also furnish the investigators with the data required for comparing this condition during the year under review with that of the previous years so as to be able to judge the extent of the progress attained by the Health Authorities towards raising the standard of hygiene in the country, and to face the needs of the population as regards prophylaxis and treatment.

General Health Condition

The birth-rate was 41.1 per thousand, as compared with 43.2 during the last year. This decrease may be attributed to the reduction of marriage incidence in view of the present financial crisis. The death-rate was 27.6 per thousand, as against 25.9 last year. Infantile mortality was 175 per thousand births, as compared with 160 last year, this may be due to the aggravation of the financial depression and its ill effects on the mode of living and consequently on the condition of health; and to the prevalence of fatal diseases as a result of poverty.

TABLE No. 1.—SHOWING BIRTHS AND DEATHS IN EGYPT FROM 1901 TO 1932

Year	Birth-rate per 1,000 of population		Death-rate per 1,000 of population		Infantile Mortality per 1,000 births	
	Egypt	Urban Districts	Egypt	Urban Districts	Egypt	Urban Districts
1901-1905*... ..	—	45.5	—	37.0	—	282
1906-1910*... ..	45.9	49.4	27.0	39.1	—	296
1911-1915*... ..	44.6	47.8	27.9	37.8	—	281
1916-1920	40.0	41.4	31.7	40.0	—	257
1921-1925	42.9	49.4	25.3	32.5	144	229
1926	43.2	50.0	26.2	33.1	146	217
1927	44.0	43.3	25.2	27.2	152	222
1928	43.3	42.3	26.2	30.3	151	237
1929	43.7	44.4	27.3	28.3	159	214
1930	44.6	45.3	24.4	25.8	151	198
1931	43.2	45.5	25.9	29.3	160	217
1932	41.1	45.4	27.6	27.1	175	202

* These are for Egyptians only, as the Law of Births and Deaths did not become applicable to foreigners except from 1912.

The epidemic wave of *Cerebro-Spinal Fever*, which spread over Egypt at the end of the year 1931, persisted in its aggravated condition, until it reached its climax in March, 1932. Then it began to decrease rapidly, until the end of September 1932. The total number of cases was 4,508, of whom 2,568 died (a death-rate of 56.9%).

The most infected localities were the provinces of Lower Egypt, Cairo Governorate, and Minya Province in Upper Egypt.

It was not unexpected that the financial depression, which caused poverty to the majority of the inhabitants, should result in the prevalence of some diseases, because malnutrition and poverty, with the consequent lack of cleanliness, and the neglect of the rules of hygiene, reduce the immunity of man against the disease and favour the breeding of insects living on the human body because of uncleanness. These insects convey many diseases to man, who becomes their victim.

These facts much favoured the prevalence of *Typhus*, especially in the provinces of Lower Egypt, where the relatively lower temperature in winter resulted in overcrowding in habitations, and therefore this disease was being transmitted rapidly from one person to another.

The number of Typhus cases in 1932 was 2,298, as against 265 in 1931. However, in 1932, it was not in a severe form, as among the cases only 399 died (a death-rate of 17%), as compared with 21.5 per cent last year.

At the end of 1932, *Smallpox* appeared at Alexandria in a severe epidemic form, and thence it was conveyed to the adjacent Provinces. The number of cases was 606 of which 510 in Alexandria alone.

The Department spared no effort in combating this epidemic and, in connection with this campaign, assisted the Municipality by detailing Medical Officers and supplying equipment. Moreover, the Department, on its part, undertook the vaccination of all the inhabitants of the provinces adjoining Alexandria, to which it was feared that the disease would be conveyed. Also general vaccination was carried out in all localities where actual cases of the disease occurred.

Meanwhile, Egypt was not the only country where the disease prevailed, as Smallpox had prevailed in an epidemic form in many other countries, as proved by the following data extracted from the Monthly Epidemiological Report of the Health Section, League of Nations (September to October 1932):—

"The most important focus of virulent Smallpox in America was Mexico. Mild Smallpox was still responsible for thousands of cases in the United States and Canada.

In Europe, Smallpox was in the severe form and on the increase in the Soviet Union. A very mild form of the disease existed in England in 1931, but it began to diminish at the end of that year, and in the beginning of 1932. Smallpox, in the severe form, was prevailing in Portugal, and in mild form in Spain, and a certain number of cases occurred in France.

Smallpox had prevailed in all Continents.

In the Spring of 1932, it has swept over French Indo-China, the Chinese Coast, Korea and Japan.

In Africa, it was very active and very prevalent in Nyasaland, Nigeria and Sierra Leone."

Among the causes of its prevalence in Egypt was the unavoidable delay in undertaking general vaccination which the Department had decided to carry out in 1931, in pursuance of its policy to vaccinate all the inhabitants of Egypt once every 5 years, the last general vaccination having been carried out in the year 1926. In 1931, the Department had just started, as usual, the process of vaccination, and had actually vaccinated all the population of the provinces of Aswân and Guirga. In so doing, the Department had adopted an elaborate scheme whereby the population of one Mudiria would be vaccinated, leaving that of the adjoining province unvaccinated. Then the population of the Mudirias thus left were vaccinated, so that if cases occurred in one Mudiria, during the process of vaccination, the disease would be limited to this Mudiria and would not be conveyed to the neighbouring provinces. But unfortunately, owing to the financial circumstances prevailing, the Department was bound to discontinue this procedure.

The number of cases of *Plague* this year was much less than in the previous years, as only 134 cases occurred, as against 573 last year. Besides the measures usually taken for combating this disease (*i.e.* isolation, disinfection, observation and inoculation of the contacts with the prophylactic vaccine), the Department, in order to produce a rapid immunization of the contacts, inoculated each of the adult contacts with ten cubic centimetres of the anti-plague serum, at the same time as they were given the first injection of the anti-plague vaccine.

Among the other diseases which prevailed in an epidemic form in 1932, was *Measles*, of which there were 19,649 cases. The table of cases of this disease from 1924 to 1932 shows that its prevalence continues for two consecutive years, and then drops in the third year after having attacked all the children in the ages susceptible to infection, then it prevails once more when other children reach the age of susceptibility. The disease itself is not fatal, unless it is accompanied by complications, the most important of which being Pneumonia and Enteritis. Therefore, the Department is always endeavouring to lessen the danger of the complications by making extensive propaganda, during the outbreak of measles in any locality, regarding the symptoms of the disease, the methods of treatment, and the nursing of children during sickness, so that these complications could be eliminated. Abundant quantities of medicinal solutions are being issued gratis to the mothers for administering them to their sick children, thus helping, as far as possible, to reduce the occurrence of these complications. These efforts have attained a satisfactory result, but there is still much scope for more efforts to be directed towards overcoming the superstitions of mothers in the treatment and nursing of their measles-stricken children. There is scope for Literary men, preachers, educated individuals and members of various Benevolent and Moral Associations all over Egypt to help to attain this object.

There was a marked decrease in the number of cases of *Diphtheria* reported this year, which was 1,990, as against 2,165 last year. The Department has encouraged by every possible means the inhabitants to avail themselves of the vaccination of their children with the prophylactic anatoxin. The first Aid Societies and the Benevolent Clinics in the provinces have rendered valuable service in this connection, as they have vaccinated a great number of children against Diphtheria. No complications of importance, due to vaccination, were noticed, with the exception of some slight local reaction which disappeared after a short time.

No epidemics of *Malaria* broke out in 1932, with the exception of 23 cases at Damanhour Bandar, and 26 cases at Mansoura Bandar. In the former bandar, mosquitoes were chiefly breeding in some Birkas (ponds) and swamps within the bandar; immediate steps were therefore taken to destroy the larvæ in these breeding places, pending the arrival at a decision as to filling them or draining their water. At Mansoura, some drains containing stagnant water were found in the boundaries of the bandar, where mosquitoes were breeding. Drains which could be dispensed with were filled in and the remaining drains were treated with disinfectants. 2,343 patients attended the Khanka Malaria Station, this year, among whom 91 proved to be Malaria Cases (of whom 75 with benign tertian malaria, and the remaining 16 malignant). At the end of 1932, this station was attached to the Researches Institute for the purpose of carrying out technical researches on the species of mosquitoes conveying the germs of malaria, and on their breeding places, as well as on the effect of the various drugs used in the treatment of Malaria and in the destruction of the larvæ.

In June 1932, the Malaria Station at Fayoum was closed down, the number of patients attending there being very few and the number of cases having greatly decreased.

During the year, Ministerial Arrêtés were issued, applying the Malaria Law to some villages of the Markazes of Shebin El Kanater, Imbaba, Zifta, and Talkha, in view of the occurrence of some malarial cases therein, as well as to Port-Said.

The Fever Hospital at Beni-Suef and the New Fever Hospital at Alexandria were handed over to the Department, thus bringing the total of the number of Fever Hospitals up to 13; the number of patients treated at same being 12,392, as against 9,205 in 1931.

In addition, the Mit Ghamr Municipality is constructing an isolation shelter to accommodate 24 patients, and will be handed over to the Department when completed.

SAFEGUARDING THE COUNTRY AGAINST DISEASES IMPORTED FROM ABROAD

Cholera occurred in Bombay, India, this year. Plague appeared at intervals at Beirut; some suspected cases of cholera occurred at Koh Bezman, in Persia. The Department has been informed of these through the International Quarantine Board, Alexandria. Owing to the geographical situation of Egypt, and the risk of conveying the disease thereto, it being the only route of navigation between the East and Europe, especially as transport by aeroplane shortened the duration of the journey, strict measures were taken to prevent the conveyance of the diseases thereto or their transmission therefrom. The result of these measures was satisfactory, as no cases of these diseases occurred in Egypt, in spite of the great number of passengers arriving. The number arriving to Egypt *via* the Ports was 40,216 of whom 40,206 were observed (*i.e.* a percentage of 99.97), and the number of those arriving *via* Kantara was 23,988 of whom 23,978 were observed (*i.e.* 99.95%). The number of the Egyptian pilgrims this year was 2,174, all of whom were observed; no epidemic cases occurred among them. Fourteen pilgrims fell sick (1 with influenza, 1 malaria and the rest with ordinary diseases). In view of the small number of pilgrims this year, the Department sent one Medical Mission only to accompany the pilgrims.

The Department has co-operated, to a great extent, with the Office International d'Hygiène Publique, Paris, in the researches carried out *re* the carriers of the cholera vibrio. The stools of all pilgrims, before departure and after return, were analysed with a view to know if any of them has the cholera vibrio or the germ of any similar disease. The result in both cases was negative for all pilgrims.

MATERNITY AND CHILD WELFARE

The activities of the Welfare Centres have very much increased this year. The number of cases of births attended by these Centres in 1932 amounted to 30,013 as against 24,692 in 1931. The old pregnant women who attended this year were 171,785, as against 131,339 last year. The new pregnant women who attended this year were 38,575, as against 34,379 last year. The number of children who attended at the Centres was 516,238, as against 339,835 last year and the number of sick children who attended for treatment was 140,941 as against 109,718 last year. This great increase was not due to an increase in the number of the Units, as, owing to the financial crisis, no new Centres were constructed in 1932, with the exception of the Children Dispensary at Damanhour, belonging to the Behera Provincial Council, which was converted into a Child Welfare Centre, and which was inaugurated in June 1933. A Child Welfare Centre is now being constructed at Damietta and is expected to be inaugurated in 1933. The Beni Suef Provincial Council decided to convert the two Children Dispensaries at Beba and Wasta into a Child Welfare Centre at Beba. The Mit Ghamr Municipality constructed a Children Clinic at the General Hospital's Buildings. It was completed at the end of 1932 and is expected to be inaugurated in 1933.

The Department carries out Health Propaganda. The Centres give the ladies who attend lectures on the care of the children and the best methods of bringing up a healthy child so that the offspring would be free from diseases. The lectures which were given on the epidemic of Cerebro-Spinal Fever that had broken out in Egypt this year, as already referred to, were successful. No cases of this disease occurred within the circumscription of the Children Welfare Centres, either among the Staff of the Centres or among the persons frequenting them.

The Child Welfare Inspectresses carry out the inspection of Dayas all over the country (about twice yearly). Dayas who prove to be unfit for further service, either for old age or for sickness, are being referred to the Medical Commission prior to striking their names off the Register of Midwives. 108 Dayas were struck off the Register this year; and 93 Dayas died.

The Dayas Schools, which are all annexed to the Children Welfare Centres, carry out the instruction of a number of Dayas every year, and train them on Midwifery and on modern methods including cleanliness and sterilization. The number of Dayas who were registered in the Midwives' Register this year was 264.

Endemic Diseases

ANKYLOSTOMA AND BILHARZIA

No new units were constructed during this year. The new patients who attended these Branches in 1932 were 627,172 as against 664,303 in 1931, i.e. a decrease of 5 per cent. This decrease is attributed to the campaign directed against the parasitological diseases, which resulted in a relative reduction in the number of cases of these diseases.

These Units have inspected 25,743 students in various localities in Egypt, of whom 4,659 were cases of these two diseases and were treated.

Dr. J. Walker Tomb, Director of the Endemic Diseases Section, in collaboration with Dr. M. Mostafa Hilmy Eff., Inspector at the same Section, have written an article on "*The toxicity of carbon tetrachloride and its allied halogen compounds*," in which it is concluded, as the result of study and clinical observations, that :—

(1) Carbon Tetrachloride and its closely allied Halogen derivatives of the aliphatic hydrocarbons are capable, in therapeutic doses, of causing fatal intoxication accompanied by acute degeneration of the liver.

(2) *Immediate* poisoning by carbon tetrachloride in therapeutic doses is generally associated with disease of the liver or with other clinical contra-indication.

(3) Fatalities from Carbon Tetrachloride intoxication occur much more frequently amongst children and adolescents than among adults, probably due to insufficiency of calcium reserves in the young.

(4) *Delayed* poisoning by carbon tetrachloride in therapeutic doses is generally due to non-elimination of the drug from the intestinal tract, in or without association with contra-indications. It can be obviated where the liver is healthy by rapid and free evacuation of the drug.

(5) Fatal intoxication by carbon tetrachloride in Egypt has been found to be closely associated with ascariasis.

Ascariasis in such cases would appear to act in two ways :

(a) By causing a mechanical obstruction to the action of the saline purgative, and increased absorption of the drug where worms are numerous in the intestine.

(b) By diminishing the natural resistance to the drug in cases where clinical contra-indications already exist, either through toxins produced by the worms or to the unsatisfactory economic conditions and consequent low state of general nutrition which ascariasis implies.

(6) Where intoxication by carbon tetrachloride has manifested itself, intensive treatment by intravenous injections of calcium gluconate (Sandoz) is capable of saving life, provided that the drug has been thoroughly evacuated from the intestinal canal.

(7) The traces of carbon disulphide found in medicinal carbon tetrachloride are of no toxicological significance.

(8) Carbon tetrachloride may be reasonably safe and effective general anthelmintic provided that :

(a) The drug is quickly and efficiently removed from the intestinal tract by means of a saline purgative.

(b) The patient is not suffering from any severe constitutional infection, is well nourished, is not starved as a preliminary to treatment, has a healthy liver and possesses adequate reserves of glycogen and calcium.

LEPROSY

Four Leprosy Sub-Clinics were inaugurated in 1932 (two attached to Sohag Leprosy Clinic and the other two attached to Zagazig Clinic). This is a provisional step towards the execution of the project of the travelling Leprosy Clinics in Motor Ambulances, fitted with the necessary treatment instruments, so as to facilitate the treatment of lepers in their own villages, as experience in all countries has shown that attendance in Leprosy Clinics drops after the 1st year of the inauguration of the clinic. It is expected that the utilization of these ambulances for this purpose will commence at the beginning of the next financial year.

Final arrangements have been made for the completion of the *Leprosy Hospital at Abou-Zaabal*, and it is anticipated that the Hospital will be inaugurated by the beginning of the next financial year. When this has been done, infective lepers will be isolated and treated there until such time as they become bacteriologically negative and non-dangerous to the community.

Legislative measures are also under preparation for the segregation of all infective cases of Leprosy.

The alterations carried out in the Leprosy Hospital, Cairo, have allowed an immediate increase in accommodation from 30 to 55 beds, with a further possible increase up to 100, if required.

The number of new patients who attended at the Leprosy Units was 1,287, as against 1,472 last year, i.e. a decrease of 12 per cent. This decrease was due to the fact that many lepers who do not recover during the first year of their treatment discontinue attending at the Units. This phenomenon has been observed all over the World, the treatment of this disease being of prolonged character. This fact led the lepers, not yet under treatment, to refrain from presenting themselves for treatment. It is hoped, however, with more intensive treatment which is now being adopted, together with the propaganda carried out by the Health Authorities throughout the country, a considerable improvement in attendance may be secured.

CHEST DISEASES

The policy adopted in the Chest Diseases Dispensaries, since they were first constituted, was to accept all patients suffering from diseases of the respiratory system, for treatment, whether tuberculous or not. But as the number of tuberculous attending increased, treatment for the last few months of the year, as a temporary measure, was confined to the positive cases (tuberculous), and the other chest diseases cases (non-tuberculous) were referred to the general hospitals for treatment. This accounts for the decrease in attendance this year, as the number of patients attending was 20,519, while last year it was 22,014, i.e. a decrease of 6 per cent.

The X-Rays outfit already installed in the two Chest Diseases Dispensaries at Cairo have been brought into operation. The installation of the X-Rays apparatus at the Chest Diseases Dispensary, Mansoura, is almost complete, and will be in operation shortly.

The Department has requested the Benevolent Societies and Local Bodies to afford some help by providing the necessitous tuberculous patients with free food. The Ex-Mudir of Dakahlia (H.E. Haroun Selim Abu-Sahly Pasha), in response to this request, kindly arranged to issue free food from the Popular (Soup) Kitchens to the necessitous tuberculous patients attending the Chest Diseases Dispensary at Mansoura, as well as to their families. Such patients can now afford to take the rest necessary to increase the chances of their recovery.

Similarly H.E. the Governor of Cairo has been approached to grant such assistance to the tuberculous patients attending the Chest Diseases Units at Cairo. Also a request has been made to H.E. the President of the Mohamedan Benevolent Society to kindly grant a sum of money annually towards the provision of food to necessitous patients treated at the Chest Diseases Dispensaries.

It is hoped that the scope of this co-operation will be extended so as to include the majority of the tuberculous patients treated at the said dispensaries.

TUBERCULIN

Of 309 pulmonary tuberculosis cases treated with tuberculin in the Chest Diseases Dispensaries throughout the year, 147 (47·5%) have put on weight, 82 (or 26·5%) remained stationary, while the remainder (26%) decreased in weight.

OPHTHALMIC DISEASES

During the year, three new ophthalmic branches have been inaugurated at the General Hospitals of Rosetta, Faqûs, and Girga, thus bringing the total of Ophthalmic Units up to 52 (38 permanent and 14 travelling). The extension of the In-Patient Section of the Ophthalmic Hospital at Beni Suef has been completed, and utilised for the accommodation of more patients. The Department has included in its Budget for the next financial year credits necessary for an Ophthalmic Hospital at Samallout (which is to be constructed and equipped at the expense of the Minya Provincial Council, and to be run by the Department) ; for three Ophthalmic Branches to be constructed at Markaz Hospitals and for one Travelling Ophthalmic Hospital to accommodate 20 in-patients. The extension of the Ophthalmic Branch of the Demerdash General Hospital is under the consideration of the Department, in view of the inadequacy of its present accommodation to the number of patients being treated, which is constantly on the increase.

The number of new out-patients treated was 714,551, as against 634,088 in 1931 (*i.e.* an increase of 13%) ; the number of in-patients was 23,128, as compared with 22,188 last year, and the number of operations performed was 242,365, as against 220,823 last year (*i.e.* an increase of 10%).

Blindness.—The number of patients who were found blind in one or both eyes, excluding cataract cases, was 48,165 or 6·5 per cent of all patients examined at the Ophthalmic Hospitals. The principal cause of blindness is Ophthalmiae (causing 80% of blind cases), its percentage to the total of microbes being 47 per cent.

39·71 per cent of the patients treated at the Clinics were of the ages between one and fifteen years. This fact shows that the mass of the population recognises the importance of seeking ophthalmic treatment for infants, children and youths.

It is with satisfaction that the Department mentions this fact which is a result of its continuous efforts in this field for a quarter of a century.

Ophthalmic Medical Officers, as a rule, carry out the eye examination of all the pupils of the Government Primary Schools. 10,618 pupils were examined in 1932, of whom 97 per cent were found to be suffering from Trachoma. This higher percentage is due to examining the conjunctiva of pupils with a Magnifier (Zeiss type), by means of which the Medical Officer could see the fine trachoma follicles, which could not otherwise be seen by the naked eye.

The total accommodation of all Ophthalmic Hospitals was for 1,210 patients, *i.e.* an increase of 48 over that of last year. The Department is still carrying out the instruction of new Doctors in clinical and practical ophthalmology. The number of such Doctors who have undergone this post-graduate course in April was 22, and in October 21.

The Ophthalmic Units at Mansourah, Beni-Suef, Zagazig, Shebîn el Kom, Benha, Qena and Demerdash Hospital (Abbassia) have been supplied with Slit Lamps and Corneal Microscopes.

MENTAL DISEASES

Owing to economic conditions, the programme for the extension of accommodation by building new mental hospitals and the enlargement of the existing ones, has had to be curtailed in conformity with other Departments, and the only scheme now in prospect is the improvement of the water and electrical supply at Khanka Mental Hospital which had reached its extreme limit, and in fact no extension could be done there until this was accomplished.

The very high admission rate to accommodation was maintained, the numbers last year were unduly swollen owing to the 500 odd voluntary drug addicts admitted whereas this year there are only 74.

There were 1,705 new admissions this year, as compared with 1,728 in 1931 (drug addicts excluded).

SKIN AND VENEREAL DISEASES

Two Skin and Venereal Diseases Clinics were inaugurated this year; one at Cairo (Gamalia Quarter) and the other at Minya, thus bringing the number of such clinics up to 16. The number of new patients who attended these clinics during 1932 for treatment amounted to 43,219 and the number of their visits was 365,192. The number of prostitutes treated at the Hospitals allotted for their treatment, namely Hod el Marsoud (Cairo), Gabbari (Alexandria) and Suez, was 3,850.

GENERAL TREATMENT INSTITUTIONS

A Markaz Hospital was inaugurated at each of the Markazes of Kafr el Dawar, Sherbin, Minia el Qamh, El Fashn and Deshna, and a village Hospital at each of the villages of: El Qorein and Abu Hammad (Zagazig Markaz), Beni-Mohamed and El Maabda (Abnoub Markaz), Seffaq and El Galawia (Akhmim Markaz), Naqqada (Qous Markaz), El Ballass (Qena Markaz), El Seba'iya and El Bussiliya (Edfu Markaz), Kafr Dawood (Kom Hamada Markaz), Daraw (Aswân Markaz); thus the number of such Hospitals in Egypt amounted to 19 Hospitals in the chief towns of Provinces and Governorates, 42 Hospitals in Markazes, and 46 Village Hospitals.

There is an increase of 633 beds, the total of which is now 5,561 (not including V.D. Hospitals), as against 4,928 last year.

The number of in-patients treated in the Hospitals was 110,626, as against 95,765 in 1931, and the number of out-patients treated was 2,058,404 as against 1,649,526 in 1931; the number of times of their attendance was 4,617,699; the number of patients treated in the Village Hospitals and the out-patient clinics was 542,830 as against 376,391 in 1931.

44,839 operations were performed in the in-patient sections and 35,792 in out-patient sections of Hospitals, as compared with 36,542 and 20,608 respectively, in 1931.

The number of X-Rays examinations amounted to 50,434, as against 25,150 in 1931.

The average patient stayed in hospital for 15.4 days, with an average daily expenditure of 222 millimes per patient, as against 14.9 days and 228 millimes daily, respectively, in 1931.

The total expenditure for the upkeep of Hospitals was L.E. 355,025 and the number of patients who recovered after treatment was 51,815 (48.5%), the number of patients whose condition of sickness improved was 44,612 (41.7%), and the number of hospital patients who died was 6,148 (5.7%).

In view of the construction of the above-mentioned Markaz and Village Hospitals, 19 Pharmacies of those attached to Health Offices were closed, the remainder being 28 pharmacies, as compared with 47 last year.

The Department has authorized 21 new Pharmacies (non-Government), 18 of which are owned by local subjects and three pharmacies by foreigners; so, the number of existing Pharmacies is now 437, of which 334 are owned by local subjects and 103 owned by foreigners.

There was an increase of one pharmacy (at Zeitoun) in the number of pharmacies provided with night service, which is now six. These pharmacies have dispensed 2,994 prescriptions, in addition to specialities and patent medicines issued without prescriptions.

The number of persons added to the Register of traders in poisonous substances for treatment purposes was 55, and 22 for agents; the installation of 33 new drugstores was approved. Three agents were struck off the Register, and thirteen drugstores were closed. Thus the number of agents in the country is now 160, and the number of drugstores 107.

The Department authorized 20 stores for the sale of simple drugs (three at Cairo, 7 at Alexandria, 9 in the Provinces and one in Governorates). 36 stores were closed, thus reducing the number of these stores to 216.

In 1932, the number added to the Register of persons who prepare and sell local specialities was 69, thus bringing the number of such preparations registered by the Department up to 319.

The number of students of the School of Pharmacy attached to the Faculty of Medicine (Egypt), who were allowed to be trained in the pharmacies, was 13, and those attached to Schools of Pharmacy abroad was 11, the total being 24.

103 Contravention cases were brought by the Department before the Courts, 7 for illegal trading in simple drugs, 24 for illegal trading in poisonous drugs, 6 for trading in adulterated drugs, 5 for illegal practice of pharmacy, 7 for trading in unregistered specialities, and 11 cases against pharmacists who contravened the Law. Also two cases of delict were brought up, one case for adulterated drugs and the other for contravening the Law on Trading in Stupefacients.

In 58 Contraventions, sentences of fines, closure or simple imprisonment were passed.

TECHNICAL RESEARCHES

In 1932, the total number of specimens analysed in the Central Laboratories, Cairo, and the Provincial Laboratories was 249,256, as compared with 179,139 in 1931.

The Bacteriological Laboratory at Fayoum has been inaugurated and commenced duties in March 1932. This Laboratory carries out the researches required by the Department's Units and by the Individuals in Beni-Suef and Fayoum Provinces.

The Bacteriological Mission, sent to China in December 1931, returned to Egypt in January 1932, as it was not able to stay there owing to the State of War between China and Japan. On the return of this Mission, the Chinese Government approached the Egyptian Government, so that the latter might offer the Mobile Bacteriological Laboratory to China. This request was accepted and the Laboratory was transported back in October 1932.

The serious outbreak of Smallpox at Alexandria necessitated the organization of a general vaccination campaign, and a considerable quantity of calf lymph vaccine had to be manufactured.

The new Antirabic Institute and Hospital were inaugurated in April 1932, by H.M. the King. An address was given by H.E. the Under Secretary of State, in His Majesty's presence, in which reference was made to the history of the Institute and to the services it rendered to the country, as well as the excellent results attained in the treatment of its patients.

The routine duties performed by the Bacteriological Section were very much, but in spite of this it was possible to carry out certain investigations on typhus fever, dysentery and enterics, and to introduce some new methods of laboratory diagnosis.

An agar culture of *B. Typhosus*, which had remained sealed for 17 years, was found, on examination, to be still viable.

The complement fixation test is being tried out on cases of leprosy.

During the prevalence of Cerebro-Spinal Fever from January to June, 1932, some 104 strains of the meningococcus were isolated and tested serologically against meningococcus type of sera. It was found that 96 per cent of these strains belonged to Group I while only 2.8 per cent to Group II.

The clinical and laboratory investigation of 1,500 natives of Lower Egypt, for Undulant Fever, has demonstrated that, although 16 per cent of these have agglutinins for *M. melitensis* and *Br. abortus* of low titre in their blood sera, only some 0.6 per cent possess agglutinins of significant titre.

Some 42 autogenous vaccines were prepared during the year for the treatment of some patients in various Cairo Hospitals.

Preliminary steps for the preparation of formal-toxoid for immunization against diphtheria have now been completed, and preparation of toxoid has commenced on a large scale.

The chlorination of filtered water had been extended during the year, and several additional water installations have adopted this policy. The results of chlorination of water in Cairo, Maadi, Giza and Helwan waterworks have been very satisfactory, for out of 227 samples examined from these stations, 94·2 per cent were within the standards laid down by the Department for chlorinated water.

The Researches Section is still continuing its researches on the diseases due to worms of the stomach and parasites; on the means of their conveyance and the change they cause to the human body, and on the effect of the various drugs on them.

This Section has found a skin reaction test for Bilharzia and tried it in 132 persons who proved to be infected with Bilharzia, of whom 128 gave positive immediate skin reaction and 2 cases showed delayed reaction after 24 hours.

The Section has carried out a search on the efficiency of various drugs in the treatment of malaria cases and of cases with worms of the stomach.

Members of the Institute are delegated from time to time to conduct studies in different localities in Egypt. During this year, four such studies were carried out, *viz.* :—

(1) A parasitological study in a village near Cairo, Kafr Qatati, especially as regards filariasis and its transmission. The mosquito intermediate host was identified for the first time in Egypt.

(2) Study in another filariasis centre in the Delta, Kom-el-Nour, to collaborate the results found in the first survey.

(3) The study of a suspected focus of skin Leishmania in the Delta.

(4) Parasitic infections in two Egyptian Oases: Baharia and Farafra, were investigated. It was found that Schistosomiasis infection was rife in Baharia, but absent in Farafra.

The clinical duties of the Institute are being carried out in both the in-patient and out-patient sections of the Endemic Diseases Hospital attached to the Institute.

The results of the researches of the Institute are published in current medical periodicals, principally in Egypt, England, France and Germany. Twelve such articles were published on various subjects.

H.M. the King has inaugurated the Institute in April, 1932. H.E. Dr. Mohamed Shahin Pasha, Under Secretary of State, D.P.H., delivered an address before His Majesty outlining the history of the Institute. It was stated that the buildings had cost L.E. 9,550 and the equipment L.E. 1,725. This address, to which detailed statistics, showing the extent of advancement in the way of sanitation and treatment during His Majesty's flourishing reign, was printed.

MEMORIAL OPHTHALMIC LABORATORY, GIZA

Researches have been extended during the year 1932, and a successful year was concluded.

Post-graduate education.—The usual post-graduate courses in Ophthalmology were given and the necessary examinations held. On the whole the candidates acquitted themselves with credit.

Pathological Section.—Approximately the same number of routine pathological specimens were submitted for examination. Many cases of unusual interest were met with during the year.

Clinical Section.—Many interesting cases were sent for complete investigation.

Research Section.—Researches were principally directed towards the study of the problem of Trachoma, and related etiological and therapeutic problems. Research on the treatment of spring catarrh and xerotic patches also received consideration.

(For full details, please see the 7th Annual Report of the Memorial Ophthalmic Laboratory).

THE INSTITUTE OF HYGIENE

(*School of Sanitary Moawens*)

During the year 1932, 19 students have graduated from the Institute, as against 18 students last year. The number of Moawens graduated from the Institute up till September 1932 has therefore amounted to 48 Sanitary Moawens, who have been nominated at the Governorates and Mudirias all over Egypt.

The duties of the Moawens are not limited to the inspection of Etablissements Insalubres, but they are called upon to assist the Medical Officers of Markazes in the inspection of food stuffs in order to ascertain their suitability for human consumption, besides other administrative duties *re* the application of the Laws and Regulations in force.

In order to raise the standard of the Sanitary Moawens who have already been in the Department's service before the creation of the Institute, they were instructed to undergo the same examination as the students, and most of the Moawens have now passed it with success.

MEDICAL PROFESSIONS AND MISSIONS

The number of practitioners registered on the Register of Doctors practising in Egypt this year was 163, as against 207 in 1931; the number of Vet. Doctors 11 (24 last year); the number of Dentists 28 (47 last year); the number of Pharmacists 14 (27 last year); and the number of Mowallidas 34 (70 last year). There is a marked decrease in the number of practitioners of the medical professions in 1932, which, in fact, is not because of the diminution of the number of graduates from colleges in 1932, but is due to the fact that a great number of those registered in 1931 had graduated before that year, but did not apply for registration until 1931.

48 Doctors sat for the Examination, and 35 passed with success, of whom 25 were Egyptians; eight pharmacists, and four passed, of whom three were Egyptians; and 25 Dentists, and 12 passed, of whom eight were Egyptians. 264 Dayas and 4 barbers were registered in 1932. 1 Nurse was registered, and also 5 Male Nurses who completed their course of study of Nursing either at Kasr el Aini Hospital, Cairo, or at the Alexandria Government Hospital.

The Department is compiling a new edition of the Official Tables of Practitioners of the various medical professions practising in Egypt, up till the end of 1932. In this connection, a census was made regarding the number of Doctors in each Governorate and Mudiria and the number of the inhabitants per doctor. It was found that the largest number of population per doctor was in Qena Mudiria, then Fayoum and Guerga, and the smallest number in Cairo Governorate, then Suez, Alexandria and the Canal Governorates respectively.

In 1932 no missions were sent abroad by the Department, which found it sufficient to delegate four of its M.O.'s to attend the course of Diploma of Hygiene and Trop. Medicine at the Egyptian Medical Faculty.

BOARD OF HEALTH

The Board held one meeting on February 11, 1932, to consider the measures to be taken for preventing the spread of Cerebro-Spinal Fever. This subject had previously been discussed at the meeting of March 14, 1931, but in view of the fact that cases of this disease have considerably increased during the month of January 1932, H.E. the President of the Board thought it advisable to submit this question a second time to the Board, in order to give their opinion. In this meeting, the Board approved of the measures taken by the Department against the disease and of the method of treatment, and also approved of the Department's decision to resume disinfection, the cleansing and lime-washing of habitations, and other measures of general cleanliness taken by the Department in combating epidemics during previous years.

According to the Board's recommendation, the Department has prepared a pamphlet addressed to non-Government Medical Practitioners advising them to send all cases of Cerebro-Spinal Fever coming under their observation to the Fever Hospitals as soon as they suspect them for same, and to leave their diagnosis to the competent Authority.

Another pamphlet was prepared containing special instructions to Medical Practitioners *re* treatment and lumbar puncture.

NEW INSTITUTIONS IN 1932

- 2 Fever Hospitals (1 at Beni-Suef and 1 at Alexandria).
- 1 Children Dispensary at Damanhour, converted into a Child Welfare Centre.
- 4 Leprosy Sub-Clinics.
- 1 Extension of the Leprosy Hospital at Cairo.
- 3 Ophthalmic annexes at Markaz Hospitals.
- 1 Extension of Ophthalmic Hospital, Beni-Suef.
- 5 Markaz Hospitals.
- 12 Village Hospitals.
- 1 Antirabic Institute and Hospital.
- 1 Researches Institute and Endemic Diseases Hospital.
- 31 Total.

The corresponding number of new Institutions last year was 46. There is no doubt that this decrease was due to the aggravation of the financial depression and the consequent economy that should be exercised in the construction of new Institutions for Prophylaxis or treatment. However, in spite of this fact, the activities of the Department have distinctly and greatly increased in all the Units.

SANITARY LEGISLATION

During this year, the following Laws and Arrêtés were issued :—

- (1) Ministerial Arrêté dated April 21, 1932, prohibiting the sale of medical preparations containing poisonous substances except with medical prescriptions.
- (2) Ministerial Arrêté dated June 2, 1932, deleting some preparations from the table of stupefacient drugs (published in the Official Journal No. 56 of 30th June, 1932).
- (3) Law No. 17 of 1932, amending Decree-Law No. 66 of 1928, *re* practising medicine in Egypt.
- (4) Arrêté dated November 29, 1932, amending the constitution of the Board of Examiners of Dentists who hold foreign diplomas and who wish to practise Dentistry in Egypt.
- (5) Arrêté dated September 15, 1932, *re* qualifications to be possessed by Doctors holding foreign diplomas but who studied abroad under the supervision of the Egyptian Government, so as to be exempted from sitting for the state examination referred to under Article 4 of the Decree-Law No. 66 of 1928.

The following project laws were prepared, pending their issue :—

- (1) Law amending the Decree-Law No. 14 of 1929 *re* practising Pharmacy and trading in poisonous substances.
- (2) Arrêté *re* qualifications to be possessed by Pharmacists holding foreign diplomas but who studied abroad under the supervision of the Egyptian Government, so as to be exempted from passing the State Examination provided for under Art. 4 of the Decree-Law No. 14 of 1928.

- (3) Arrêté regulating the procedure to be adopted by the Higher Council of Pharmacists.
- (4) Law on Chemists, Bacteriologists and Laboratories.
- (5) Law *re* practise of Veterinary Medicine.
- (6) Law on Mowallidas and the minor Medical Professions.

International Hygiene and Congresses

Since the beginning of this Century, several International Sanitary Congresses were held, among which was the International Congress held in Paris in 1903. The result of the latter was the approval of the formation of an International Sanitary Office. This which was actually constituted in 1907, is an International Health Foundation, where Office, meetings of the Official Delegates of the Participating Countries are held twice a year. The purpose of its formation is to collect all sanitary information and circulate it among the countries, especially information of practical value. Besides, it prepares International Sanitary Conventions, when required.

After the Great War, the said Office amended the International Sanitary Convention of 1912, which had been signed by Egypt, and brought forth the Convention of 1926. Although Egypt has not yet signed the latter Convention, yet it applies its provisions as regards International Health questions. The Under Secretary of State, Ministry of the Interior (Health Administration), represents the Egyptian Government on the said Office, as mentioned in last year's Report.

Since 1909, the said Office, in addition to its Annual Report, has been issuing a monthly Bulletin, in which all the researches and articles presented by the Delegates of the Nations are published; Egypt has contributed much in this work, and during the two Sessions of 1932 it has presented researches regarding the following subjects:—

(1) Note on Deratisation of ships, and on the issue of a certificate *re* deratisation or exemption therefrom.

(2) Note on Medical Officers of ships in the time of the Ancient Egyptians, by Dr. Gorgi Sobhi.

(3) Note on prophylactic vaccination against Cerebro-Spinal Fever, by the Principal Medical Officer, Egyptian Army.

(4) Note on the application of the International Agreement signed at Bruxelles in 1924 *re* facilities for venereal diseases treatment of the crew of commercial steamers.

(5) An article on the treatment of 189 cases of Cerebro-Spinal Fever during the period January 2 to April 2, at Mansoura Fever Hospital.

Among the most important activities of the said Office, this year, was the drafting of the International Convention for Aerial Navigation, and its submission to the various countries, aerial navigation being now an ordinary means of transport, and is of increasing importance from day to day. The risk of travelling by aeroplane has been reduced to a minimum, besides, it has the advantage of higher speed over the other means. It is because of this speed that the new international legislation has been formulated in order to eliminate the transmission of infectious diseases from one country to another. As the position of Egypt, as regards international transport, is of universal importance, it is essential that the international aerial relations be clearly defined from a health point of view, for safeguarding the country against the conveyance of fatal diseases such as Cholera, taking into consideration that the international commercial relations should not be obstructed and that no complaints be raised by the other countries against the sanitary measures taken by it which these countries may consider as severe. For the above reasons, when the said Convention was submitted to the Department, it was studied from all points of view, especially as the position of Egypt is of extreme importance for aerial navigation, because of its geographical situation, and of its clear weather all the year round, and also because it is a junction for several air routes. The Department

has communicated its remarks to the International Office which discussed them in one of its meetings, when the Delegate of Egypt explained the Egyptian point of view, especially as regards germ carriers. It is expected that this Convention will be signed by all the Nations during the next year.

The relations between Egypt and the international sanitary authorities is not only limited to this Office. The Department is continuously in touch with the International Health Committee of the League of Nations, assisting it in its international researches such as information and statistics forwarded by the Department regarding malaria in Egypt and the quantities of quinine consumed in its treatment. Meanwhile, the Department receives from this Committee its monthly epidemiological bulletin, Annual Report and various other bulletins issued regarding certain researches such as those on the death of mothers, and on the white slave traffic in women and children.

Whenever possible the Department cooperates in the International Congresses to which it is being invited, especially in such Congresses from which it is expected that the Delegate conveys new data of interest to this country or which help in solving some international health problem, or when a research, or a new scheme laid down by the Department is required to be submitted or explained to these scientific international bodies, for their information.

In 1932, the Department has been invited to attend fifteen international meetings and Congresses. The following are the most important ones in which the Department cooperated:—

(1) Meeting of the General Assembly of the International Union against Venereal Diseases (of which Egypt is a member), held at Paris on May 8, 1932; H.E. Dr. Mohamed Shahin Pasha, Under Secretary of State, Ministry of Interior (Health Administration), represented the Egyptian Government.

(2) The Eighth International Congress of the Anti-Tuberculosis Union (of which Egypt is a member), held during the period from 6th to 9th September. The Egyptian Government was represented on this Congress by Dr. Zimmerli, Director of the Fouad Sanatorium, Helwan, and Dr. Ismail Shukri, M.O. at the Sanatorium.

(3) The International Congress of Hygiene of countries lying on the Mediterranean Sea, was held at the Medical College, Marseilles, during the period from 20th to 25th September. Dr. Mohamed Zaki Shaffei, Technical Secretary of the Department, represented the Government; he submitted his report to the Department on his return.

The Rockefeller Foundation has kindly invited H.E. the Under Secretary of State to call on some of its Institutions in the U.S.A. So, H.E. started on a two months' leave from August 20, 1932, and called on several Educational and Research Institutes and Health Institutions. This visit had two great results, in addition to the scientific and technical effects, *i.e.* propaganda for Egypt from the health point of view, and the personal impression on H.E. for the courtesy he was met with and his great appreciation of the useful scientific and humane projects undertaken by this Great Foundation.

In addition, the Department replies to all the queries, on health matters, addressed to it by other countries or their Scientists. The Department also prepares the articles required by the Government to be published in Foreign papers and magazines abroad regarding the sanitary advancement in Egypt, or on any other matter within its competence.

From the above, it is concluded that there is an intimate relation now between Egypt and the other countries by reason of the participation of Egypt in the most important International Health Organizations and of the exchange of the valuable publications, information and results of researches. The Department takes advantage of the information it obtains from other Nations, and circulates it to its various Sections. This work is entrusted to its Technical Secretariat. The Department intends to issue a periodical technical bulletin to include the most important of foreign information and researches, in addition to its own.

Civil Status of the Population in Chief Towns of Mudiiriyas and Governorates

Tables Nos. 2, 3 and 4 include the statistics collected on the incidence of marriage and divorce in the Governorates and chief towns of Mudiirias during the period from July 1, 1931, to the end of June 1932. On comparing these statistics with those of the corresponding period (from July 1, 1930 to the end of June 1931), it is observed that the number of marriage incidence and its proportion to the population are markedly much less than in the previous period in nearly all categories. This may be attributed to the effect of the aggravation of the financial depression on the life of the people. This presumption is proved, to a certain extent, by the fact that the number of husbands married for the first time was nearly equal to that in the foregoing period, which was 13,731, while the number of females married for the first time decreased from 13,153 to 12,874, that is to say that a great many husbands have married divorced females, or widows, because usually such marriages do not necessitate much expense.

As regards age, it is noticed that the number of married men has diminished in all age categories, except in the categories of (30 to 39 years), and (40 to 49 years), in which it increased, and so is the case in married females.

As regards religion, it is remarked that the greatest number of marriages among Mohammedans and Orthodox Copts was in the females of less than 20 years of age, while among the other religions it was in the age category of 20 to 29 years.

As regards the divorce incidence, this has also decreased in comparison with the corresponding period, but its proportion to marriage incidence is still high. It is also noticed that the most incidence in cases of divorce was due to the wives, such cases were 3,156 among Mohammedans, while divorces due to the husbands were 2,096; the most important reason of the former was the neglect of husbands' interests, and of the latter was poverty chiefly due to the present financial circumstances.

It is important to discover the reasons of divorce which sever the relation of the married couple, and the development of this relation consequent upon the development in education and the general advancement, but unfortunately the statistics in question could not be obtained except for the last two years. In future, such statistics will truly reflect authentic facts on the formation of the family in Egypt.

TABLE NO. 2.—CASES OF DIVORCE ACCORDING TO: (1) DURATION OF MARRIAGE ;
(Mohammedans) in Governorates

LOCALITIES	Total number of marriage certificates	Total number of divorce cases	Percentage to marriage certificates	Duration of marriage period							Causes				
				Less than one year	1-4	5-9	10-14	15-19	20-24	25 year and upwards	Husband				
											Neglecting the wife	Ill-treatment	Poverty	Marrying another wife	Other causes ⁽¹⁾
Governorates :															
Total 1931	21,629	11,712	54.1	4719	4430	1497	574	195	165	132	185	274	499	177	181
Total 1932	20,955	10,753	51.3	4166	4115	1437	582	177	140	136	245	340	624	169	240
Lower Egypt Ban-															
dars : Total 1931	3,799	1,946	51.2	856	695	248	64	20	41	22	95	52	86	49	22
Total 1932	3,889	1,854	47.6	772	683	228	101	29	23	18	78	63	89	65	67
Upper Egypt Ban-															
dars : Total 1931	3,347	1,459	43.6	509	570	247	75	37	12	9	44	39	55	23	8
Total 1932	3,055	1,291	42.2	414	548	206	82	24	8	9	23	22	34	24	13
GRAND { 1931	28,775	15,117	52.5	6084	5695	1992	713	252	218	213	324	365	640	189	221
TOTAL { 1932	27,899	13,898	49.8	5352	5346	1871	765	230	171	163	346	425	747	258	320

COMPARATIVE STATEMENT ON THE CASES OF DIVORCE IN THE THREE RELIGIONS
(In Governorates and

RELIGION	Total number of marriage certificates	Total number of divorce cases	Percentage of marriage certificates	Duration of marriage period							Causes				
				Less than one year	1-4	5-9	10-14	15-19	20-24	25 years and upwards	Husband				
											Neglecting the wife	Ill-treatment	Poverty	Marrying another wife	Other causes ⁽¹⁾
Mohammedans:															
Total 1932 ...	27899	13898	49.8	5352	5346	1871	765	230	171	163	346	425	747	258	320
Christians:															
Orthodoxes ...	1485	122	8.2	26	29	28	29	6	2	2	2	27	2	—	1
Protestants ...	35	4	11.4	—	3	1	—	—	—	—	—	—	1	—	—
Jews	429	63	14.7	8	28	15	5	3	4	—	—	4	4	—	1
Grand Total for 1932 ...	29848	14087	47.2	5386	5406	1915	799	239	177	165	348	456	754	258	322

⁽¹⁾ Including intoxication, narcotics, gambling, hatred, old age and illness.
⁽²⁾ Illness and old age.

⁽³⁾ Including dispute, hatred and bad association.
⁽⁴⁾ " " dispute and the offspring of one of the couple

(2) CAUSES OF DIVORCE ; (3) NUMBER OF CHILDREN LEFT

and chief towns of Provinces :—

of Divorce										Cases of divorce distributed according to the number of children borne during marriage							
Wife							Both Husband and Wife										
Neglecting the husband	Bad conduct	No offspring	Hatred	Disobedience	Dishonesty	Other causes ⁽²⁾	Neglecting matrimonial advantages	Violation to conditions	Character disagreement ⁽²⁾	Other causes ⁽⁴⁾	None	One child	Two children	Three children	Four children	Five children	More than five
2733	108	296	—	82	77	30	309	1040	5586	195	8379	1676	771	418	203	76	159
1870	172	246	68	117	29	25	216	183	6125	84	7581	1621	733	393	178	124	123
435	41	29	—	10	5	—	71	98	885	68	1439	253	119	57	32	18	28
262	58	32	29	21	2	4	30	4	1019	31	1339	260	120	56	38	18	23
213	16	23	—	6	2	1	179	40	784	26	951	251	115	62	25	28	27
180	9	14	10	6	—	2	100	2	838	14	851	244	94	49	27	10	16
3381	165	348	—	98	84	31	559	1178	7255	289	10769	2180	1005	537	260	152	214
2312	239	292	107	144	31	31	346	189	7982	129	9771	2125	947	498	243	152	162

ACCORDING TO: (1) DURATION OF MARRIAGE ; (2) CAUSES OF DIVORCE ; (3) NUMBER OF CHILDREN LEFT

Mudiria Bandars only)

of Divorce										Cases of divorce distributed according to the number of children borne during marriage							
Wife							Both Husband and Wife										
Neglecting the husband	Bad conduct	No offspring	Hatred	Disobedience	Dishonesty	Other causes ⁽²⁾	Neglecting matrimonial advantages	Violation to conditions	Character disagreement ⁽²⁾	Other causes ⁽⁴⁾	None	One child	Two children	Three children	Four children	Five children	More than five
2312	239	292	107	144	31	31	346	189	7982	129	9771	2125	947	498	243	152	162
—	10	—	1	3	11	4	—	1	37	23	84	20	10	4	2	1	1
—	—	—	—	—	1	—	—	—	—	2	4	—	—	—	—	—	—
—	3	—	1	3	—	1	—	—	45	1	43	8	7	2	2	1	—
2312	252	292	109	150	43	36	346	190	8064	155	9902	2553	964	504	247	154	163

TABLE No. 3. — DISTRIBUTION OF MARRIED MEN AND WOMEN FOR THE YEAR COMMENCING FROM JULY 1, 1931 TILL END OF JUNE 1932,
ACCORDING TO: (1) CIVIL STATE; (2) AGE OF MOHAMMEDANS ONLY IN GOVERNORATES AND PROVINCES CAPITALS

Localities	Estimated Population till 1-7-1932	Total Number of Marriage Certificates	Civil State						Age																
			Married men			Married women			Married men			Married women													
			Not previously married	Divorced	Widowers	Married persons having			Not previously married	Divorced	Widows	Total number of persons married : Males and Females	Married rate per 1000 population	Less than 20 years	20-29	30-39	40-49	50-59	60 and upwards						
						One wife	Two wives	Three wives																	
Governorates { 1931 { 1932	1,642,400 1,694,600	21,629 20,955	10,504 10,429	8,046 7,343	1107 1092	1867 2024	95 62	10 5	9,847 9,610	10,631 10,187	1,151 1,158	43,258 41,910	26.3 24.7	766 661	11,427 10,571	6152 6433	2201 2243	793 742	290 305	8959 8189	8535 8153	3015 3393	922 1003	177 192	21 25
Lower Egypt (Ban- dars) :																									
Total 1931 ... Total 1932 ...	302,600 310,000	3,799 3,889	1,755 1,862	1,237 1,225	270 277	496 507	40 17	1 1	1,725 1,789	1,813 1,828	261 272	7,598 7,778	25.1 25.09	190 146	1,961 1,995	1015 1084	400 426	145 178	88 60	1455 1432	1543 1539	554 654	193 192	43 63	11 9
Upper Egypt (Ban- dars) :																									
Total 1931 .. Total 1932 ...	252,700 257,500	3,347 3,055	1,490 1,440	1,125 1,020	281 242	409 333	42 19	— 1	1,581 1,475	1,559 1,406	207 174	6,694 6,110	26.5 23.7	181 132	1,651 1,436	899 900	388 381	162 158	66 48	1544 1263	1133 1147	480 475	124 139	38 26	8 5
Grand Total { 1931 { 1932	2,197,700 2,262,100	28,775 27,899	13,749 13,731	10,408 9,588	1658 1611	2772 2864	177 98	11 7	13,153 12,874	14,003 13,421	1,619 1,604	57,550 55,798	26.2 24.6	1137 939	15,039 14,002	8066 8417	2989 3050	1100 1078	444 413	11958 10884	11231 10839	4049 4522	1239 1334	258 281	40 39

TABLE NO. 4.—SHOWING A COMPARATIVE DISTRIBUTION FOR THE THREE RELIGIONS OF MARRIED MEN AND WOMEN DURING SIX MONTHS FROM JANUARY 1, 1932 TILL END OF JUNE 1932, ACCORDING TO : (1) CIVIL STATE ; (2) AGE FOR ALL GOVERNORATES AND PROVINCES CAPITALS ONLY

RELIGION	Estimated Population till 1-7-1932	Total Number of Marriage Certificates	Civil State								Age														
			Married men				Married women				Married men			Married women											
			Not previously married	Divorced	Widowers	Married persons having	Not previously married	Divorced	Widows	Total number of married persons : Males and Females	Married rate per 1000 population	Less than 20 years	20-29	30-39	40-49	50-59	60 and upwards								
Mohammedans : Total 1932 ...	2,262,100	27,899	13731	9588	1611	2864	98	7	12874	13421	1604	55798	24.6	939	14002	8417	3050	1078	413	10884	10839	4522	1334	281	39
Christians :—																									
Orthodox	352,300	1,485	1325	32	128	—	—	—	1377	21	87	2970	8.4	44	853	460	97	28	3	715	657	89	20	2	2
Catholics	53,800	175	161	—	14	—	—	—	163	—	12	350	6.5	2	94	55	19	5	—	52	93	26	4	—	—
Protestants... ..	19,400	35	32	—	3	—	—	—	34	—	1	7	3.6	2	20	12	1	—	—	12	21	2	—	—	—
Jews	64,800	429	366	27	36	—	—	—	382	31	16	858	13.2	3	257	122	35	8	4	113	266	34	14	2	—
GRAND TOTAL (¹) ...	2,752,400	30,023	15615	9647	1792	2864	98	7	14830	13473	1720	60046	21.8	990	15226	9066	3202	1119	420	11776	11876	4673	1372	285	41

(¹) Including foreigners whose marriage certificates were registered at the Local Patriarchates.

CHAPTER I. PUBLIC HEALTH

A.—POPULATION

The estimated mid-year population of the country in 1932 was 15,626,200, with an increase of 244,400 than last year.

B.—BIRTHS AND DEATHS

(1) *Births.*

The number of births registered in the whole country during the year 1932 amounted to 642,597 at a rate of 41.1 per thousand population as compared with 43.2 per thousand in last year. This year's birth-rate was the lowest since 1920.

The highest birth-rate was, as in several previous years, at Giza Province, *i.e.* 52.3 per thousand population.

The lowest birth-rate was at Behera Province, *i.e.* 34.2 per thousand population; the same rate as last year.

The number of births in towns and bandars (chief towns) reached 122,807, a rate of 45.4 per thousand population. The highest birth-rate was at Shubra-el-Kheima locality (83.4 per thousand) and the lowest was at Kom Ombu (13.7 per thousand).

The birth-rate in Upper Egypt was still higher than in Lower Egypt being 41.5 in the former and 40.0 per thousand in the latter.

(2) *Deaths.*

The total number of deaths all over Egypt during the year 1932 was 431,148, a rate of 27.6 as compared to 25.9 per thousand population in last year; this increase is attributed to the spread of some infectious diseases imported to Egypt from abroad, and to the prevalence of other diseases in an epidemic form; namely: cerebro-spinal fever, small-pox and typhus. The financial stringency and the subsequent destitution of the inhabitants lead to the spread of the said diseases.

The highest death-rate was 34.5 per thousand population at Giza Province, where there was as well the highest birth-rate, which may account for the increase of deaths.

The increase in the number of births may have lead to less care of the children, thus exposing them to fatal diseases.

The lowest death rate was at Port-Said as it did not exceed 20.5 per thousand population. In the last year, the highest rate was at Giza Province and the lowest at Qena Province.

The total number of deaths occurring this year in towns and bandars (chief towns) was 73,363, a rate of 27.1 per thousand population, showing a remarkable decrease in comparison with that of last year as it reached 29.3 per thousand. The highest rate was 57.7 per thousand at Kom Hamada and the lowest was, as last year, at Port-Fouad where it did not exceed 7.2 per thousand.

Tables Nos. 5 and 10 show births and deaths statistics all over Egypt.

(3) *Diseases causing death.*

Table No. 6 shows the most important diseases causing deaths in the various localities of Egypt where Health Offices exist, and the death-rate of each disease to the total deaths.

This table shows that the most prevalent diseases are diarrhoea, enteritis, bronchitis, senility and the infectious diseases. Most of these diseases caused the death of a large number of persons either in the beginning or the end of life, *i.e.* infants and old aged persons. Diarrhoea, enteritis and bronchitis are of the infantile disease and are relatively responsible for the greatest number of deaths. Although the effect of these diseases may be reduced to a great extent as a result of the activities of the Department towards maternity and childhood welfare in their various stages, raising the standard of hygiene

of all classes of the nation, and combating venereal diseases which seriously affect the health and life of children, yet there are other natural and social factors which cannot be overcome at once, and which will continue to cause many deaths before a state of elevation is reached when the eradication of such diseases is rendered possible.

(4) *Age and sex distribution of deaths.*

Table No. 7 shows the number and percentage of deaths amongst the different ages. It shows that the majority of deaths occur amongst young age. Almost 50 per cent of the deaths took place amongst children under two years of age. This percentage falls gradually with the increase of age. It also shows that up till 75 years of age, the number of deaths amongst the males is greater than that of the females. After that age, the death rate amongst the females appears to be higher than that of the males, but this percentage is in fact normal as regards the whole population, if we remember that the number of women living after 75 years exceeds the number of men, the latter having died in earlier ages.

(5) *Infantile mortality.*

During the year 1932, 112,492 infants died in Egypt, *i.e.* a rate of 175 per thousand births as compared with 106,419 deaths (160 per thousand births) in last year. Of these deaths, 41,954 occurred in localities where Health Offices exist, a rate of 212 per thousand births. The highest infantile mortality in Governorates and Provinces was at Suez (235 per thousand births), then comes Cairo and Alexandria. The lowest death-rate was at Behera Province (129 per thousand births), where was recorded the lowest birth-rate during this year. This may account for the low infantile mortality. The highest death-rate in the towns and localities where Health Offices exist was at Port-Fouad (406 per thousand births), where there was also the lowest death-rate in general. This town, being recently constructed, and the family life not having been stabilized as yet, there are few births, and the death-rate therefore appears to be higher than reality.

The lowest death-rate in towns and bandars where Health Offices exist was 106 per thousand population at Abou Kebir.

The most important diseases causing infantile mortality were enteritis, diseases of growth and diseases of the respiratory system. See table No. 8.

Table No. 9 shows age and sex distribution of infantile mortality in localities where Public Health Offices exist. This table shows that the majority of infantile mortality occurs in the first three months of age.

TABLE NO. 5.—BIRTHS AND DEATHS ALL OVER EGYPT IN 1932

	Estimated Population. Middle of 1932.	Births.		Deaths.		Infantile mortality.	
		Number.	Rate.	Number.	Rate.	Number.	Rate.
<i>Governorates:—</i>							
(1) Urban (cities only) ...	2,062,200	90,557	43.9	51,275	24.9	17,649	195
(2) Urban and Rural ...	2,202,800	95,991	43.6	54,719	24.8	18,535	193
<i>Lower Egypt:—</i>							
(1) Urban (bandars only).*	331,100	15,860	47.9	10,420	31.5	2,972	187
(2) Urban and Rural ...	7,198,100	288,159	40.0	201,556	28.0	46,799	162
<i>Upper Egypt:—</i>							
(1) Urban (bandars only).*	313,800	16,390	52.2	11,668	37.1	4,197	256
(2) Urban and Rural ...	6,225,300	258,447	41.5	174,873	28.1	47,158	182
<i>Egypt:—</i>							
(1) Urban (cities and bandars) ...	2,707,100	122,807	45.4	73,363	27.1	24,818	202
(2) Total (all over Egypt).	15,626,200	642,597	41.1	431,148	27.6	112,492	175

* Mudiria Capitals.

TABLE No. 6.—DISEASES CAUSING DEATHS IN TOWNS WHERE PUBLIC HEALTH OFFICES EXIST, 1932.

Disease.	Total Number of Deaths.	Rate of Deaths per 1000 of Total Number of Deaths
Infectious diseases, notifiable exclusive of diseases shown hereunder and marked (X)...	6,274	48.5
Pulmonary tuberculosis (X)	1,651	12.7
Other tuberculous diseases	574	4.4
Syphilis	430	3.3
Malaria (X)	16	0.1
Dysentery (X)	426	3.3
Pneumonia (acute, chronic and nonchronic)	4,856	37.5
Bronchitis	9,853	76.1
Other respiratory system diseases including broncho-pneumonia and capillary bronchitis	9,415	72.7
Heart diseases	4,061	31.4
Other diseases of the circulatory system ...	1,069	8.3
Diseases of urinary and genital systems (other than venereal)	4,601	35.5
Diseases of puerperium and delivery (other than puerperal septicaemia)	539	4.2
Diseases of diarrhoea and enteritis	43,805	338.3
Senility	9,653	74.6
Accidental deaths including suicide	4,400	34.0
Other causes	27,840	215.0
Total deaths	129,463	1000.0

Rate per 1=0.007724.

TABLE No. 7.—DEATHS IN TOWNS WHERE P.H. OFFICES EXIST DISTRIBUTED ACCORDING TO AGE AND SEX DURING 1932.

Age	Number of Deaths			Percentage to Total of Deaths
	Males	Females	Total	
Less than 1 year	22,359	19,595	41,954	32.4
1-2 years	10,677	10,644	21,321	16.5
2-5 "	8,397	8,470	16,867	13.0
5-10 "	2,196	1,944	4,140	3.2
10-15 "	1,256	907	2,163	1.7
15-25 "	2,546	1,895	4,441	3.4
25-35 "	2,977	2,426	5,403	4.2
35-45 "	3,053	2,044	5,097	3.9
45-55 "	3,178	1,968	5,146	4.0
55-65 "	3,076	1,923	4,999	3.9
65-75 "	3,231	2,608	5,839	4.5
75-85 "	2,597	3,051	5,648	4.4
85-95 "	1,721	2,473	4,194	3.2
95 " and upwards	807	1,422	2,229	1.7
Unknown	12	10	22	0.0
Total... ..	68,083	61,380	129,463	100.0

Percentage per 1=0.000772.

TABLE No. 8.—DISEASES DISTRIBUTION OF THE INFANTILE MORTALITY
IN LOCALITIES WHERE PUBLIC HEALTH OFFICES EXIST, 1932.

Disease	Number of Deaths	Rate per 1000 to Total Births	Rate per 1000 to Total of Infantile Mortality
Measles	368	1·8	8·8
Syphilis	276	1·4	6·6
Diseases of growth and atrophy*... ..	11,246	56·9	268·0
Diseases of the respiratory system	6,323	32·0	150·7
Enteritis	20,955	106·0	499·5
Other causes	2,786	14·1	66·4
TOTAL	41,954	212·2	1,000·0

* Including infantile convulsion, congenital debility, premature delivery, delivery results, and other infantile diseases.

Births=197,733

Percentage=0·005,057

Rate per one to Infantile mortality=0·023,835.

TABLE No. 9.—AGE AND SEX DISTRIBUTION OF INFANTILE MORTALITY IN LOCALITIES
WHERE PUBLIC HEALTH OFFICES EXIST, 1932.

Age Groups	Males	Females	Total	Death-rate per hundred births.	Death-rate per hundred deaths
0-1 month	4,669	3,490	8,159	49·5	75·6
1-2 months	1,510	1,391	2,901	17·6	26·9
2-3 "	1,364	1,332	2,696	16·4	25·0
0-3 "	7,543	6,213	13,756	27·8	42·5
3-4 "	1,515	1,375	2,890	17·5	26·8
4-5 "	1,701	1,541	3,242	19·7	30·1
5-6 "	1,801	1,508	3,309	20·1	30·7
3-6 "	5,017	4,424	9,441	19·1	29·2
6-7 "	2,244	2,083	4,327	26·3	40·1
7-8 "	1,743	1,553	3,296	20·0	30·6
8-9 "	2,128	1,975	4,103	24·9	38·0
6-9 "	6,115	5,611	11,726	23·7	36·2
9-10 "	1,520	1,381	2,901	17·6	26·9
10-11 "	1,439	1,292	2,731	16·6	25·3
11-12 "	725	674	1,399	8·5	13·0
9-12 "	3,684	3,346	7,030	14·2	21·7
Total	22,359	19,595	41,954	21·2	32·4

Births=197,733

Deaths=129463

Percentage=0,006069

Percentage=0,009269

	Governorate or Mudi- ria (Province)	Rate per 1000
The highest birth rate at	Giza	52.3
The lowest birth rate at	Behera	34.2
The highest death rate at	Giza	34.5
The lowest death rate at	Port-Said	20.5

	Towns and Bandars (chief towns) where Health Offices exist	Rate per 1000
The highest birth rate at	Shoubra el Kheima	83.4
The lowest birth rate at	Kom Ombo ...	13.7
The highest death rate at	Kom Hamada ...	57.7
The lowest death rate at	Port-Fouad ...	7.2

INFANTILE MORTALITY

The highest infantile mortality was 235 per 1000 at Suez Governorate.

The lowest „ „ „ 129 „ „ at Behera Province.

LOCALITIES WHERE HEALTH OFFICES EXIST

The highest infantile mortality was 406 per 1000 at Port-Fouad

The lowest „ „ 106 „ „ at Abu Kebir

CHAPTER II

GENERAL SANITATION

I.—Etablissement Insalubres, Incommodes et Dangereux.

(1) *Applications for New Permits.*

The number of applications submitted for new permits for établissements insalubres of the first class (including public markets and cattle markets) during the year 1932 was 678, as compared to 984, 1061, 1031, 797 and 792 in the years 1927, 1928, 1929, 1930 and 1931 respectively.

This number does not include applications submitted for establishments in both Dakahlia and Gharbia Provinces from March 27, 1932 till the end of the year; as since that date these applications are being considered by the Central Committee (two members of which are a Health Inspector and a Sanitary Engineer) constituted in the Ministry of Interior, as an experiment, for the purpose of facilitating the procedures taken for issuing Rokhsas (permits) of new establishments as early as possible.

(2) *Licensed establishments actually working:*

Attached table No. 13 shows the number of establishments of the 3 classes licensed in each Mudiria and Governorate in the year 1932. The total number of these establishments is 77,309, as compared to 76,345 in 1931.

(3) *Ministerial Arrêtés issued for the improvement of the Sanitary Condition of Etablissements Insalubres.*

The Department continued to follow the scheme of issuing Ministerial Arrêtés for the purpose of improving the condition of the old licensed establishments in order to be similar to the new licensed ones from a sanitary point of view.

Considering the present financial crisis, the Department has confined the issue of Ministerial Arrêtés to the establishments of important industries which are in need of immediate improvements; owners of such establishments have also been granted an ample time to execute the necessary conditions.

The number of Ministerial Arrêtés issued during the year 1932 was 269 against 432 last year. Table No. 14 shows the number of Ministerial Arrêtés issued for the établissements insalubres in each Province and Governorate. Special attention has been paid by the Department for improving the sanitary condition of certain categories of establishments where (a) food stuffs and drinks are prepared or sold, (b) where a great number of labourers are employed, (c) and those that may cause nuisance to neighbouring inhabitants on account of the nature of work carried out therein.

The following particulars show certain categories of the establishments in question as well as their number and the conditions imposed for their improvement:—

(a) *Bakeries.*—The Department has issued Ministerial Arrêtés for improving the sanitary condition of 28 bakeries, imposing same conditions as those laid down in the previous years.

(b) *Aerated Water Factories.*—Five Ministerial Arrêtés have been issued imposing the same conditions as those of last year.

(c) *Butchers Shops.*—The Department continued to have Ministerial Arrêtés issued for improving the sanitary condition of the old licensed butchers shops. Such improvement has been applied to shops in some bandars in addition to those existing in Governorates and chief towns of Provinces. The number of Ministerial Arrêtés has reached 103 imposing the same conditions as those laid down in the years 1930 and 1931. As soon as the present financial stringency terminates, the conditions referred to above will be applied to establishments in all other Bandars.

(d) *Wholesale Fish Markets.*—The number of Ministerial Arrêtés issued for these establishments was four, imposing the same conditions as last year.

(e) *Schools and Kuttabs*.—The number of Ministerial Arrêtés issued for Schools and Kuttabs was 15, imposing the same conditions as last year with the addition of one for the installation of fountain jets to push water upwards for drinking instead of the ordinary taps. These fountain jets are to be installed in Schools and Kuttabs where a great number of pupils are educated.

(f) *Sweet-Meats and Pastry Factories*.—Ministerial Arrêtés issued for these establishments are 5, imposing the same conditions as last year.

(g) *Rice Husking and Corn Mills*.—The Department has issued Ministerial Arrêtés for 10 establishments of this kind imposing the following sanitary conditions :—

- (1) Walls to be lined with burnt bricks, from inside, from the floor to the ceiling and limewashed, etc. This condition was imposed on some of the above-mentioned establishments only.
- (2) The grinding room to be separated from the rice husking room in all establishments.
- (3) Providing a sanitary system for the disposal of waste water from the condensing machine.
- (4) Erecting sanitary waterclosets for the use of labourers in establishments where a great number of labourers is employed. A potable water supply is also to be provided.
- (5) Erection of stables, attached to the corn mills, for animals ; such stables should be provided with sanitary conditions.

(h) *Milk Dairies*.—The Department has laid down all possible modern sanitary conditions in order that the public should be safeguarded against any contamination of milk or its products. These conditions are as follows :—

- (1) Covering lower parts of walls with porcelain tiles (glazed) to a sufficient height.
- (2) Milk vessels to be washed with boiling water.
- (3) Installation of a potable water supply.
- (4) Installation of a sanitary drainage system for the disposal of waste water.
- (5) To assign one room for the reception of milk, another for washing utensils and a third for manufacture.
- (6) Wire gauze passages to be made inside doors.
- (7) Provision of cupboards in which milk utensils are to be kept.
- (8) Covering tables with marble.

(i) *Stables and Folds (Zaribas)*.—Most of the Ministerial Arrêtés issued concern establishments existing in Alexandria. The number of Arrêtés issued is 52. The important conditions imposed are :—

- (1) Cleanliness of buildings.
- (2) Floors to be made sloping to open channels leading to public sewers or cesspits.
- (3) Special depositories for dumping cattle manure to be provided in order to avoid spreading same on the roofs of establishments or in the public roads.
- (4) Installation of a potable water supply.
- (5) Cleanliness of the floor by continual washing.

As regards Zaribas, a separate room has been assigned for milking, and another for storing the milk. Both are provided with the sanitary conditions.

(j) *Cotton Ginning Factories*.—Owing to the fact that a great number of labourers employed in these factories is exposed to dust blown in the wards, the Department continued to pay special attention for improving the means of ventilation and removal of dust from the wards. The Department, however, issued Arrêtés imposing the same conditions of last year on some of these establishments. These conditions are as follows :—

- (1) Installation of a potable water supply as well as fountain jets.
- (2) Erection of sanitary latrines and urinals.
- (3) Provison of douches and wash-hand basins for labourers.
- (4) Erection of special latrines and wash-hand basins for women employed in these factories.
- (5) Cupboards for keeping clothes of labourers, as well as first-aid cupboards, are also to be provided,

(6) Refuse and waste water are to be disposed of in a sanitary way. As regards ventilation of ginning wards and removing dust from same, the Department is endeavouring to improve the miserable state existing in factories found to be in need of such improvement.

(k) *Brick Factories and Lime Kilns*.—The Department has taken great care to mitigate the nuisance caused by the old licensed factories approaching habitations. Ministerial Arrêtés for seven of these factories imposing the same conditions, as in the last 2 years, have been issued. In order to avoid issuing Ministerial Arrêtés in future to improve the sanitary condition of these establishments, the Department insists that before issuing permits, for this kind of establishments, special sites in towns and villages (south-eastern direction) should be selected for this purposes, provided that factories and kilns of each town should exist in one site, far enough from habitations.

As a precautionary measure, the applicant is also asked to give a declaration to the effect that he accepts the condition of cancelling the permit without any responsibility on the part of the Government, in case the habitations approach the site of the establishment with a less distance than that prescribed in the permit.

(l) *Other Establishments*.—There are some other establishments for which the Department issued Ministerial Arrêtés to improve their condition. It must also be added that, although Law No. 13 of the year 1904 is not applicable to the Markets managed in Egypt by the Egyptian Markets Company Ltd. in virtue of the concession granted to them by the Government, yet the Public Health Authorities inspect these markets from time to time and ask the Company to introduce the necessary sanitary conditions, such as the condition relative to the water supply in the market. This condition has actually been executed in some of these markets.

(4) *Sanitary Overseers for the inspection of Etablissements Insalubres.*

Before the Institute of Hygiene was founded in 1929, the number of overseers appointed for the inspection of Etablissements Insalubres was few. One overseer was only assigned to each Mudiria, while others had two. Consequently, the inspection on the Etablissements Insalubres all over the country was not properly carried out.

Since the foundation of the above Institute, 48 candidates have graduated till September 1932, and appointed in the vacant posts inserted in the Budget. One overseer was attached to every Health Office in Cairo City as well as in Suez, Ismailia, and Damietta Towns, as shown in the attached list.

In order to improve the standard of technical knowledge of the Overseers appointed before the foundation of the Institute, they had to undergo the same examination as the candidates of the Institute. Most of them have successfully passed the examination. It is worth mentioning here that the duties of these overseers are not only confined to inspecting the establishments, but also to assist the Health Medical Officers in examining food stuffs with a view to ascertaining their fitness for human consumption, and in certain administrative work regarding the execution of Sanitary Laws and Regulations in force.

(5) *Slaughterhouses and Slaughtering Sites.*

During the year 1932 the Department has approved of the sites of 6 new slaughterhouses, which are to be erected at the expense of Municipalities, Local Commissions and Village Councils in the following towns:—

Sheblanga (Benha Markaz).

Sakiet Mekki (Slaughterhouse for Giza Bandar).

Sanabo (Deirout Markaz).

Rodah (Mallawi Markaz).

Deirmawass (Deirout Markaz).

Bardis (Baliana Markaz).

The Department, invariably, recommends the erection of slaughterhouses in towns and villages where Local or Village Councils exist. In order to ensure the supply of fresh meat fit for human consumption, a committee, composed of delegates of the Department of Public Health, Veterinary Section and Municipalities Section, was formed to examine the limit of each slaughterhouse in existence, in order to incorporate the neighbouring villages within its circumscription, so that the inhabitants will have the advantage of slaughtering their cattle after being medically examined, instead of using an open site for slaughtering not under medical control.

Until such time when the inhabitants of each village can conveniently slaughter their cattle in a slaughterhouse, the Department is continually selecting slaughtering sites in the localities far from slaughterhouses, which the butchers reach with great difficulty. The following table No. 11 shows the villages in which slaughtering sites have been selected:—

TABLE No. 11

Name of Locality	Markaz	Name of Locality	Markaz
Geziret Seïoud el Kebliah ...	Fakous	Elsaadieen	Minia el Kamh.
Shoubra el Nakhla	Belbeis	Zahr Shurb	„ „
Eltellein	Minia el Kamh ...	Shubra Negoum ...	Quesna.
El Senafein el Kebliā	„ „ ...	Mit Bashar	Minia el Kamh
Sannahwa	„ „ ...		

(6) *Ministerial Arrêtés Issued for Certain Modifications to be Inserted in the Schedule of Etablissements Insalubres in the Year 1932.*

Addition of New Establishments to the Schedule.—On June 30, 1932, a Ministerial Arrêté was issued adding ice-selling establishments to the Second Class under Category “A” in the Schedule.

Modifications regarding the Headings of some kinds of Establishments in the Schedule.—A Ministerial Arrêté was issued on April 12, 1932, for the substitution of the heading “Macaroni and Flour Depots” for “Flour Depots” included in the 2nd Class under Category “B.”

TABLE No. 12.—SHOWING NUMBER OF OVERSEERS ATTACHED TO EACH MUDIRIEH OR GOVERNORATE AT THE PRESENT TIME

Mudirieh or Governorate	Number of Overseers
Cairo	20
Port Said	1
Ismailia	1
Suez	1
Damietta	1
Kaliubiya	3
Sharkiya	4
Dakahliya	6
Gharbiya	10*
Minoufiya	3
Behera	5
Giza	2
Faiyûm	3
Beni Suef	3
Minya	3
Asyût	5
Girga	4
Qena	4
Aswân	2
Central Administration (D.P.H.)	2
TOTAL	83

* One of them for food inspection.

TABLE No. 13.—SHOWING NUMBER OF ETABLISSEMENTS INSALUBRES LICENSED AND ACTUALLY WORKING IN EACH GOVERNORATE OR MUDIRIEH UP TO END OF THE YEAR 1932

Governorate or Mudirieh	1st Class Establishments	2nd Class Establishments (a)	2nd Class Establishments (b)	3rd Class Establishments (a)	3rd Class Establishments (b)	Total
Cairo	1,881	9,930	1,410	2,081	674	15,976
Alexandria	1,545	5,713	1,302	978	820	10,358
Damietta	247	675	93	39	87	1,141
Canal	335	1,057	90	176	109	1,767
Suez	98	422	67	56	46	689
Qaliubiya	96	2,024	154	196	34	2,504
Menoufiya	178	4,116	229	258	33	4,814
Gharbiya	859	5,443	480	620	166	7,568
Behera	307	2,838	176	166	127	3,614
Sharqiya	361	2,667	168	180	55	3,431
Daqahliya	598	3,286	299	295	114	4,592
Giza	130	2,595	187	308	35	3,255
Fayoum	112	2,097	120	168	26	2,523
Beni-Suef	80	1,538	86	159	23	1,886
Minya	203	2,902	126	285	87	3,603
Asyût	247	3,163	218	402	53	4,083
Girga	149	1,794	149	211	25	2,328
Qena	149	1,805	83	217	29	2,283
Aswân	75	703	12	84	20	894
TOTAL	7,650	54,768	5,449	6,879	2,563	77,309

TABLE No. 14.—MINISTERIAL ARRÊTÉS ISSUED FOR THE IMPROVEMENT OF THE SANITARY CONDITION OF ETABLISSEMENTS INSALUBRES IN EACH GOVERNORATE OR MUDIRIEH DURING THE YEAR 1932

Governorate or Mudirieh	Number of Arrêtés
Cairo	31
Alexandria	122
Canal	—
Suez... ..	1
Damietta	—
Gharbiya... ..	4
Behera	24
Menoufiya	3
Daqahliya	20
Sharqiya	3
Qaliubiya	—
Giza	1
Faiyûm	12
Beni Suef	2
Minya	1
Asyût	5
Girga	23
Qena	—
Aswân	17
TOTAL	269

2.—Water

Filtered Water Installations have been installed at :—

Shebin el Kom, Menouf, Dierout, Girga, Rosetta, Beni Mazar, Maghagha, Edkou and Atf.

Artesian Water Plants were installed at :—

Geziret Shandawil, Kossieh, Ashmoun and Bilbeis.

The Department approved the sanitary sites proposed for the erection of Water Plants for purifying water at the under-mentioned localities :—

Tokh, Kafr el Dawar and Sahel Seleem.

A free water tap was installed at Haret el Saida, Cairo City.

3.—Food Stuffs

All food stuffs exposed for sale are examined by the Health Officers who are authorised to take samples of food suspected to be unfit for human consumption. These samples are forwarded to the Laboratories of the Department for analysis.

The samples which were examined during this year are mentioned under table No. 15.

TABLE No. 15.—SHOWING THE NUMBER OF SAMPLES OF FOOD STUFFS EXAMINED
BY PUBLIC HEALTH LABORATORIES DURING 1932

Kind of Sample	Year 1931	Year 1932
Natural butter	399	510
Artificial butter	6	1
Aerated water and alcoholic spirits	23	24
Cocoanut oil	5	2
Cotton seed oil	99	15
Other oils fit for human con- sumption	148	14
Milk... ..	6,171	18
Condensed milk	46	7
Cheese	23	9
Preserved food	868	1,374
Bread, Biscuits and Flour	120	49
Coffee and tea	170	206
Other articles	27	130

TABLE No. 16.—SHOWING THE QUANTITY AND NUMBER OF FOOD STUFFS WHICH WERE DESTROYED
IN 1932 IN ALL EGYPT BEING UNFIT FOR HUMAN CONSUMPTION.

	Meat and Fish		Fruits and Vegetables		Milk and its products		Other kinds	
	Preserved in tins	Fresh	Preserved in tins	Fresh	Preserved in tins	Fresh	Preserved in tins	Fresh
		Okes		Okes		Okes		Okes
1932	18,746	1128,288	7,406	2252,347	142	16,200	965	314,273
1931	14,039	1,009	6,528	4,673	776	2,001	236	33

4.—Fencing Waste Lands

Arrêtés have been issued for the application of the Arrêté, issued by the Ministry of the Interior dated June 15, 1893, concerning the fencing of waste lands, to Wasta Bandar, Beni Suef Province; Delta Barrage, Qalyûbiya Province and Manzala, Daqahliya Province.

5.—Cleanliness of Streets

An Arrêté was issued by Daqahliya Province for the application of the Arrêté, dated June 7, 1913, concerning the cleanliness of streets and squares, to Dekernes Bandar, Daqahliya Province.

6.—Application of Vidange Regulations

The Vidange Regulations issued on November 8, 1886, were applied to Kalioub Bandar, Qalioubia Province, Hehia Bandar, Sharkia Province, and Kafr el Sheikh Bandar, Gharbia Province.

7.—Sewage Depositories

Sites, suitable from a sanitary point of view, were selected for dumping faecal matter at Kalioub, Hehia and Tokh Bandars.

8.—Mosques

A.—PRIVATE MOSQUES.

The following is a statement concerning the improvement of the ablution and drainage systems of private old mosques dealt with in the year 1932 throughout the country, as compared with the year 1931 :—

TABLE No. 17

	1931	1932
Number opened after repairs	98	87
„ closed for want of repair	397	356
„ under repair	181	88
Plans of new private mosques duly approved	14	5

B.—MOSQUES BELONGING TO MINISTRY OF WAKFS.

A sum of L.E. 5,000 has been provided in 1932-1933 Budget for the sanitation work of mosques belonging to Ministry of Wakfs. This sum represents the Government's share of the cost of such work, a part of which has already been carried out, and the other part is still under execution.

The following is a statement showing the work done in connection with these mosques in the year 1932 as compared with the year 1931 :—

TABLE No. 18

	1931	1932
Plans and estimates of sanitary installations approved	113	68
Sanitary work under completion in ablutionary systems	8	4
Ablutionary systems of mosques closed for want of repair	9	—
Sanitary work completed in ablutionary systems	9	6

9.—Birkas

TABLE No. 19

	1931	1932
Birkas inspected	191	109
„ belonging to individuals	140	79
„ „ „ the Government	51	30
„ filled in according to Birkas Law ...	45	34

(a) *Birkas filled in by the General Committee, Ministry of the Interior:—*

TABLE No. 20

YEAR	Number	Area	Cost	
		Sq. m.	L.E.	M.
1931	105	399,754	23,645	181
1932	94	888,144	1,504	317

(b) *Birkas sold by the State Domains Administration under condition of their being filled in:—*

TABLE No. 21

Province	1931				1932			
	Number of Birkas	Area			Number of Birkas	Area		
		F.	K.	S.		F.	K.	S.
Sharqiya	3	1	23	8	9	3	5	11.5
Gharbiya	5	7	21	7.5	1	—	1	—
Giza	5	—	11	14	6	—	15	21
Asyût	2	1	20	12.75	2	—	7	8
Minya	12	—	21	4	1	—	1	4
Girga	1	—	1	16	2	—	7	10
Beni-Suef	—	—	—	—	1	—	13	16
Daqahliya	1	—	5	4	—	—	—	—
Behera	20	35	11	9	—	—	—	—
Qalioubia	2	—	17	12	—	—	—	—
TOTAL	51	49	8	20.25	22	5	3	22.5

F. = Feddan (acre). K. = Kirat (1/24 of a feddan). S. = Sahm (1/24 of a kirat).

10.—Cemeteries

The following list shows a resumé of the work done in 1932 as regards the cemeteries in the country:—

TABLE No. 22

	In 1931 No.	In 1932 No.
(1) New cemeteries created	10	16
Cemeteries enlarged	2	18
Cemeteries delimited	128	189
Cemeteries in which inhumation has been permitted	1	36
(2) Special tombs authorized	5	3
(3) Old cemeteries disaffected:—		
(a) Cemeteries from which remains have been removed	59	46
(b) Cemeteries from which remains are proposed to be removed	509	151
(4) Encroachments on cemeteries' lands	205	148

11.—Health Propaganda

During this year Health Propaganda followed the same plan laid down last year, *i.e.* division of work into Urban Propaganda for towns with main electric supply, and Rural Propaganda for villages without main electric supply.

The field of work for urban propaganda covered most of the big towns. Often the meetings were held in each town for 2, 3 or sometimes 4 days to meet the requirements of the immense attendance and success. Usually the meetings used to be so full, which necessitated holding two or three meetings each day.

One point signified urban propaganda this year: this is the wide spread anti-venereal propaganda. The city of Damanhour had the largest share of this work, following the decision of cancelling Public Prostitution in that town. The work started with an anti-venereal propaganda for a week in this town. Special separate meetings were held both for men and for women; and the attendance amounted to thousands. Lectures illustrated by the display of cinema films were given, and these were followed by giving the proper advice and distributing the appropriate pamphlets.

At the end of the week, a rural propaganda car was sent to visit all the villages in the near vicinity of Damanhour for a period of one month. At the end of this month of rural work, the meetings were again held in the town for another week. In this way the work involved the town and its surroundings, and it no doubt left a deep impression on the minds of the majority of the people.

As to Rural Propaganda during 1932, it comprised the whole of Lower Egypt and Upper Egypt as far South as Assiut Province. In each province a rural car was sent for a period of one month, but often this period had to be extended for another fortnight, to meet the numerous applications for extension sent by different organisations. The attendance was always very great, and on the whole Rural Propaganda work during this year was a real success.

The Propaganda Section is making two copies of a collection of local films, showing the immense advance in Public Health work during the last few years. These films deal with Bilharzia, Ankylostoma, Malaria, Ophthalmic and Child Welfare Sections. One copy of this collection will be sent to the Egyptian Consulates in Europe; and the other to Chicago Exhibition in U.S.A., for propaganda work abroad.

The number of films amounted to 43 this year as against 40 last year. Besides, three copies of some of the films were bought so that each of the two cinema cars will have a copy, while the third copy serves for urban propaganda.

The number of pamphlets is now 27 as against 26 last year. The fortnightly lectures delivered by Health Officers were quite regular during this period. They dealt with various important health as well as medical problems. It is to be noted that during the visits of the cinema cars, Medical Officers get the chance to make their meetings more attractive by displaying cinema films.

Pamphlets were distributed all over the country in enormous amounts. During this period about half a million pamphlets were distributed.

TABLE NO. 23.—LECTURES DELIVERED DURING THE YEAR 1932

Province	No. of Markazes	No. of Villages	No. of Lectures
Sharkiya	6	22	20
Behera... ..	10	17	47
Dakahliya	8	45	45
Minya	4	9	10
Asyût	13	35	35
TOTAL	41	128	157

TABLE NO. 24.—LIST OF FILMS IN POSSESSION OF PROPAGANDA OFFICE.

No.	Name of Film	No. of Reels	No. of Metres
1	Fly Danger	1	350
2	Mother's Milk best for babies	1	195
3	The might of Pure Milk	1	370
4	One Scar of Many (Vaccine against Small-Pox)	1	192
5	The Peril of the habit of spitting (Peril du Crachat)... ..	1	360
6	In his father's footsteps (Spread of Typhoids)	1	405
7	Ankylostoma	1	69
8	" (Kaliub Hospital)	1	130
9	Malaria	3	1,000
10	The end of the Road	5	1,465
11	The Gift of Life	4	950
12	Venereal Diseases	3	700
13	Public Health Twine at Work	1	420
14	The Future Mother's (La future Mama)	8	2,080
15	The Rat Menace	1	300
16	Malaria (Edku)	2	700
17	The Leaflet (Care of Teeth)	1	310
18	Who was to blame	3	1,150
19	Ophthalmic Section—Giza Ophthalmic Hospital	2	1,000
20	Leprosy	2	805
21	The Fat Chance	1	100
22	The Infectious Diseases	1	180
23	Child Welfare Centre at Darb el Ahmar	1	850
24	Sun Babies... ..	1	270
25	Big gains for little babies	1	180
26	Well born	2	200
27	A bottle battle	1	120
28	The best Fed Baby	1	75
29	The A B C of food	1	300
30	Milk Mischief	1	300
31	Campement d'el Tor	4	1,200
32	Health and Disease Armies	1	200
33	Infection Carriers	1	250
34	The Care of Teeth	2	500
35	Health of Infants	2	100
36	" " Children	2	280
37	Care of Children from 6 months till two years of age	—	—
38	" " " " 4 till 8 years of age	—	—
39	Healing hands	5	—

CHAPTER III

INFECTIOUS DISEASES CONTROL

GENERAL

Interior of the Country

The most widely spread Infectious Diseases during 1932 were, according to the notifications received by the Department, Cerebro-Spinal Meningitis, Typhoid and Paratyphoid Fever, Typhus Fever, Small-pox, Plague, and Scarlet Fever of Part I of the Schedule of Infectious Diseases attached to the infectious diseases law, then Measles, Influenza, Whooping Cough, Tuberculosis of the Respiratory organs, Dysentery, Diphtheria and Erysipelas of Part II of the said Schedule.

The following table No. 25 shows the number of cases of infectious diseases which occurred during 1932, compared with those of 1931 and 1930 :—

This table shows first the diseases of Part I of the Schedule, then those of Part II.

TABLE NO. 25.—SHOWING NUMBER OF INFECTIOUS DISEASES OCCURRING IN 1930, 1931 AND 1932.

NOTIFIABLE INFECTIOUS DISEASES	CASES			DEATHS		
	1930	1931	1932	1930	1931	1932
Plague	336	573	134	108	203	60
Typhus	288	265	2,298	74	57	399
Small-Pox	14	10	606	—	—	142
Anthrax	6	8	21	2	7	9
Relapsing Fever	—	—	1	—	—	—
Typhoid—Paratyph. Fever	3,136	2,845	3,653	703	718	827
Cerebro-Spinal Meningitis	99	871	4,508	58	511	2,568
Encephalitis Lethargica	7	9	11	4	7	3
Acute Polio-encephalitis	2	6	—	1	4	—
Acute Poliomyelitis	7	7	13	5	4	6
Scarlet Fever	121	130	102	3	4	5
Diphtheria	2,073	2,165	1,990	856	894	887
Measles	4,470	10,709	19,649	1,112	3,507	6,270
Whooping Cough	3,080	2,264	3,305	427	126	310
Mumps	1,174	849	796	27	23	33
Undulant Fever	8	3	10	1	1	4
Leprosy	141	169	119	57	56	65
Tetanus	540	577	532	304	331	349
Pulmonary Tuberculosis	3,065	2,992	3,580	1,991	1,916	2,033
Chicken-Pox	1,020	1,072	740	16	16	22
Influenza	5,762	5,900	5,731	289	301	411
Puerperal Fever	658	562	604	466	423	488
Dysentery (Bacillary and Amoebic)	2,203	1,968	2,117	552	543	501
Erysipelas	1,457	2,663	1,996	300	508	722
Malaria	924	1,230	1,343	25	22	23
Dengue	4	4	—	1	—	—

CEREBRO-SPINAL FEVER

It was mentioned in last year's report that this disease began to take a serious turn in the country by the end of autumn and the beginning of winter. The epidemic persisted in this aggravated condition from the first of January and reached its climax in March when 1913 cases occurred. After April, the cases began to decrease rapidly. Thus 337 cases occurred in May as against 827 in April. In June 161 cases occurred, 63 in July, 42 in August and 31 in September as may be seen from the following return (Table No. 26) showing the number of cases which occurred in the country during the months of the year.

TABLE No. 26.—SHOWING DISTRIBUTION OF CASES OF CEREBRO-SPINAL FEVER ON MONTHS OF 1932

Months							Cases	Deaths	Death Percentage
									%
January	...	...	...	...	...	...	189	71	37·5
February	...	...	...	...	...	...	805	310	38·5
March	...	...	...	...	...	...	1,913	1,011	52·8
April	...	...	...	...	...	...	827	508	61·4
May	...	...	...	...	...	...	337	321	91·3
June	...	...	...	...	...	...	161	129	80·1
July	...	...	...	...	...	...	63	49	77·7
August	...	...	...	...	...	...	42	39	92·8
September	...	...	...	...	...	...	31	26	83·8
October	...	...	...	...	...	...	37	26	70·2
November	...	...	...	...	...	...	31	20	64·5
December	...	...	...	...	...	...	72	58	80·5
TOTAL							4,508	2,568	56·9

The following table (No. 27) shows the number of cases of this disease distributed on the weeks of the year. The cases began to increase since the 7th week, ending February 18, when 251 cases occurred, then in the eighth week ending February 25, 388 cases were recorded and in the 9th week ending March 4, 343 cases were recorded. In the tenth week ending March 11, 614 cases occurred and this is the highest limit reached by the disease in 1932. Since then, the disease began to decrease gradually. Thus in the 11th week ending March 18, 414 cases were recorded. In the 12th week ending March 25, 302 cases were recorded and in the following week ending April 1, 246 cases and so on.

TABLE No. 27.—CASES AND DEATHS DISTRIBUTED ON THE WEEKS OF THE YEAR 1932

Week	Cases	Deaths	Week	Cases	Deaths	Week	Cases	Deaths	Week	Cases	Deaths
1	27	7	14	244	161	27	24	15	40	9	6
2	33	12	15	183	141	28	16	12	41	6	7
3	65	24	16	151	123	29	10	14	42	12	9
4	64	28	17	147	78	30	13	8	43	6	9
5	66	32	18	111	79	31	5	9	44	7	9
6	99	37	19	90	64	32	13	8	45	6	3
7	251	89	20	85	64	33	7	12	46	9	5
8	388	152	21	90	52	34	8	6	47	9	3
9	343	200	22	61	62	35	9	4	48	13	12
10	614	270	23	64	43	36	10	9	49	14	12
11	414	225	24	34	32	37	5	6	50	15	11
12	303	180	25	30	34	38	10	4	51	10	9
13	246	136	26	33	20	39	6	7	52	20	14
TOTAL									4,508	2,568	

Table No. 28 shows the number of cases which occurred throughout the year in each Governorate or Mudiria, the population of the Governorate or Mudiria and the rate of cases per hundred thousand of population. It proves that Cairo was the most infected town as out of every 100,000 persons 102 fell sick with this disease. Kaliubia comes next, then Daqahlia, Frontier Districts, Gharbia, Sharkia, Menoufia and Minya.

The statistics given in the previous lists show that the disease had seasonal waves and reached its climax by the end of winter and the beginning of spring. It fell by the end of spring, all through the summer and till the beginning of autumn then began to rise again by the end of autumn.

TABLE No 28.—DISTRIBUTION OF CASES OF CEREBRO-SPINAL FEVER AMONGST GOVERNORATES AND MUDIRIAS AND RATE PER 100,000 OF POPULATION

Governorate or Province	Population	Number of cases	Rate per 100,000 of population
Cairo	1,064,567	1,090	102.38
Alexandria	573,063	142	24.77
Frontier Districts and Governorates	339,895	182	53.55
Behera Province	976,965	139	14.22
Dakahlia Province	1,080,613	600	55.51
Gharbiya Province	1,791,985	614	34.26
Minûfiya Province	1,105,191	325	29.40
Kalyûbiya Province	558,876	504	90.18
Sharkiya Province	1,016,912	306	30.09
Giza Province	591,391	85	14.37
Beni Suef Province	508,166	90	17.71
Faiyûm Province	554,040	37	6.67
Minya Province	839,690	197	23.46
Asyût Province	1,078,600	123	11.40
Guirga Province	968,383	31	3.20
Qena Province	902,170	28	3.10
Aswân Province	267,357	15	5.61
TOTAL	14,217,864	4,508	31.70

Reasons that led to the Spread of the Disease.

The Department is of opinion that the spread of the disease is due to the fall of the temperature below its annual average, a fact which led to an increase in the naso-pharyngeal attacks with less immunity especially amongst weak persons. This also caused the irritation of latent micro-organisms in carriers.

The fact that the temperature has fallen below the normal degree has resulted in neglecting ventilation of houses, and led to a state of overcrowding. This overcrowding allowed carriers to get in close contact with healthy individuals, thus exposing them to infection.

Deaths.

The number of deaths recorded during this year was 2,568 from amongst 4,508 cases; i.e. 56 per cent deaths. This includes 478 deaths occurring out of isolation places, viz before discovering and diagnosing their illness.

The number of cases admitted into Fever Hospitals, Village Shelters and Cordons during the year amounted to 4,030, of which 2,090 died, i.e. 51.8 per cent.

In the preceding years, the death rate varied between 61 per cent, and 84 per cent (from 1922-1927). From 1927-1931, this ratio varied from 62 per cent to 58.6 per cent.

Death rate amongst the various ages is shown in table No. 29 herebelow :—

TABLE NO. 29.—SHOWING THE RATIO OF DEATHS TO CASES OF CEREBRO-SPINAL FEVER DISTRIBUTED ACCORDING TO VARIOUS AGES IN GOVERNORATES AND MUDIRIAS.

Governorates and Mudirias	Up to 10 years		11-20 years		21-30 years		31-40 years		41-50 years		50 years		Total	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Governorates ...	85	42	38	26	27	13	5	4	6	5	3	3	164	93
Lower Egypt ...	813	431	885	425	469	269	167	93	76	44	47	32	2,457	1,294
Upper Egypt ...	176	122	187	93	39	23	17	13	9	5	16	14	432	282
TOTAL ...	1,074	595	1,110	544	535	305	189	110	91	54	66	49	3,064	1,657
Death Rate to Cases	55.4%		49.1%		56.80%		57.5%		59.3%		74.2%		54%	

N.B.—This statistical table does not include the cases and deaths recorded in Cairo and Alexandria as separate reports are published dealing with the state of public health in these two cities ; Cairo report being appended to this report (*vide* appendix No. VI) and a summary of Alexandria report is also inserted therein (*vide* Appendix No. VII).

A glance at the above-mentioned table No. 28 shows that the death-rate was highest amongst persons over 50 years as it reached 74.2 per cent, then among those from 41-50 years, being 59.3 per cent ; those from 31-40 come next, then those from 21-30 and those up to 10 years of their age. The lowest rate is amongst young adults, *i.e.* from 11-20 years, being 49.1 per cent.

Occupations.

The incidence of cerebro-spinal fever was highest amongst Farmers who live in poor, dark and unhealthy lodgings, then amongst those without occupations, most of whom were children and female farmers who spent the greater part of their time in the houses, then followed the scholars and labourers by reason of overcrowding in classes and factories.

It was least amongst door-keepers, scavengers, drummers and carters. These categories, by reason of their occupations, spend their time outside the dwellings, in the sun and air, and the disease incidence amongst them was, therefore, very remarkably low.

Deformities.

The following table No. 30 shows the deformities caused to patients who recovered :

Governorates and Mudirias	Deafness	Nervous System	Vision	Heart and General Weakness	Imbecility, Dumbness and Mental Dementia	Total
Governorates ...	12	1	3	—	1	17
Lower Egypt ...	41	20	18	12	6	97
Upper Egypt ...	10	7	2	—	—	19
TOTAL ...	63	28	23	12	7	133

The majority of deformities was in hearing, then follows the nervous system, the vision, heart diseases, general debility and finally the mental state.

Treatment.

In addition to thorough nursing, which is of extreme importance, the following procedure has been adopted:—

(1) Early lumbar puncture to the patient and repeating it to eliminate depression and to assist in discharging the cerebro-spinal fluid.

(2) Subsequent to the first lumbar puncture, the patient used to be given, inside the lumbar, a quantity of anti-meningococci serum less than the fluid discharged. This was to be repeated once every 24 hours until the Medical Officer is ascertained that the patient has been cured and the cerebro-spinal fluid becomes clear. This was not to be neglected in case of relapse.

(3) Lumbar puncture was to be done, even when the serum was not available during puncturing.

(4) The serum was usually given inside the cerebro-spinal channel. Some Medical Officers have tried intravenous injections of the serum with satisfactory results. The serum could even be given intravenously to children in quantities varying from 100 c.c., to 150 c.c., but thorough care and discretion should be exercised.

(5) As to the treatment of the symptoms, Adrenaline has some effect on resisting the shock in fulminating cases; Morphine or Heroine were given in the medical doses as soon as diagnosis had been established; and camphor was given as a stimulant.

(6) Owing to the fact that the disease is dangerous and the mortality is high, the Department has repeatedly drawn the attention of the Medical Officers to the necessity of doing the only recognised specific treatment, early, *viz.* by the serum, and at the same time taking the most effective measures. Detailed instructions with regard to making the lumbar puncture, and the best methods to do it, were issued. Prolonged instructions as to using the serum were also issued.

(7) The vaccine has been used in the numerous slow convalescing cases, subsequent to either the acute, severe or chronic stages; the result was encouraging.

It used to be given subcutaneously in the external part of the forearm.

The doses for adults were as follows:—

In acute cases, an initial dose of 5,000,000 microbes was given, 10,000,000 for sub-acute cases and 20,000,000 for chronic ones.

This dose was to be doubled every third day until 500,000,000 were given, then repeated once every 5 days until the patient was completely cured.

The treatment composed of 6-12 injections.

Doses given to children were as follows:—

Up to 6 years $\frac{1}{4}$ of the dose to adults.

6 to 12 years $\frac{1}{2}$ of the dose to adults.

12 to 16 „ $\frac{2}{3}$ of the dose to adults.

(8) Some cases in Dakahlia Province were treated by puncturing only without giving the serum; the death rate in these cases was nearly equal to those treated by the serum, but the treatment and convalescence were noticed to be longer.

(9) In Minya, besides the treatment with puncturing and giving the serum, one gramme of Urotropine was injected 3 times daily. Bromore and Chloral were employed as a sedative. Injections of Adrenaline, Caffein or Camphor were given to the patients after giving the serum, as a stimulant and to raise the blood pressure.

Measures taken for controlling and combating the disease.

In addition to the measures laid down in the Infectious Diseases Handbook, the following precautions were taken:—

(1) Double vaccination of the contacts, 1st dose for adults 500,000,000 microbes and 2nd dose 1,000,000,000 microbes, 10 days later. For children, the dose varied from 100 million to 300 million microbes according to their ages.

(2) The issue of gargles to contacts to be used twice or three times daily. This gargle was 1/5000 solution of potassium permanganate.

(3) Putting 2 or 3 drops of 1/250 trypanflavine solution in the nose of the contacts, twice daily.

(4) In case of scholars, the Headmasters of the schools concerned were warned to stop them from attending their schools during the observation period; they were prohibited as well from returning until it was ascertained that they were not microbe carriers by taking swabs from their naso-pharynx for examination and the result proving negative.

(5) Spoilt hypochlorite of lime in which chlorine is less than 15 per cent was employed instead of quick lime for disinfection in some localities; the public Health Inspector, Menoufia, informed the Department that no new cases of the disease were reported in these localities. This may be attributed to the effect of chlorine gas, arising from the hypochlorite of lime, on the microbes. This problem is still under investigation.

(6) In every locality where the disease appeared and an Arrêté issued declaring it to be infected, thorough search was made by the assistance of the administrative Officials, for the isolation of the patients and disinfection of their houses; general cleanliness was then done in accordance with the following procedure:—

Evacuation of the house from all furniture, clothes and bedding and exposing these to the sun for 4 or 5 days; if found harbouring insects, they were to be steamed.

The house was well ventilated for a sufficient time. Openings were made in dark rooms; the house was afterwards thoroughly cleaned, the refuse burnt and the interior of filthy houses whitewashed with quick lime. Quick lime was issued freely by the Department to the poor, for whitewashing, under the supervision of the Department's staff.

(7) Special measures were adopted with regard to carriers discovered either amongst contacts or convalescents. They were advised to spend most of their time in the open air and under sunshine and were given a local antiseptic. This antiseptic was very dilute, otherwise the mucous membrane of the naso-pharynx would be harmed and the condition of the carrier would be prolonged instead of being shortened.

The Department employed for this purpose dilute carbolic acid solution, iodine carbolic solution, potassium permanganate, zinc sulphate or formaline.

Should the condition of the convalescent carrier persists and it is considered necessary to discharge him from isolation, the Health Office concerned is notified to take swabs from his naso-pharynx, from time to time, and at the same time to warn his family to take the necessary measures against infection, and to hand him a copy of the pamphlet of instructions printed especially for carriers.

A special record has been kept in each Health Office for carriers and the result of their observation.

(8) Special pamphlets for distribution amongst the inhabitants were printed, showing the symptoms of the disease, modes of its spread, and methods of prophylaxis and at the same time requesting them to give the necessary assistance by the notification of cases.

(9) A special booklet on the epidemiology of the disease, its symptoms, treatment, etc., was printed and distributed to all practitioners authorized to practise in Egypt.

(10) The Department insisted upon the Medical Officers taking specimens of the cerebro-spinal fluid, from suspected deaths, as well as from deaths in infected localities.

(11) The Principal Medical Officer of the Egyptian Army was requested to vaccinate all new recruits and army men returning from their leaves, twice against the disease.

The Prisons Department was also requested to carry out double vaccination to new prisoners.

The Ministry of Education was requested to furnish weekly statements showing absent scholars and period of absence. The Ministry of Justice was approached to take steps to prevent overcrowding in tribunals and to limit the audience in the sittings to the number of the seats furnished, besides opening the windows.

Egyptian State Railways, Railway Companies, Tram Companies and General Omnibus Companies, were requested to prevent overcrowding in their wagons and cars and to issue no tickets more than the number of seats and also to keep the windows open.

Theatres, Cinemas and other places of amusement were requested to make necessary ventilation and to see that the spectators did not exceed the number of seats.

(12) Lectures were delivered by the Medical Officers of the Department to the public, dealing with the advices and instructions to be adopted in combating the disease. The cooperation of Men of Religion was also obtained in this respect.

(13) Public markets in infected localities were closed.

TYPHOID AND PARATYPHOID FEVER (ENTERICA).

The number of cases recorded during the year was 3,653 of which 827 died, *i.e.* a death rate of 22·6 per cent, as against 2,845 cases with 718 deaths, *i.e.* 25·2 per cent death rate in the preceding year.

Of the total number of cases 1,644 were reported in Cairo, *i.e.* half the total number in the whole country.

In Alexandria 585 cases were reported.

The following statement shows the distribution of the cases throughout Egypt:—

Governorates including Frontier Districts	...	...	...	2,422
Lower Egypt	...	...	...	836
Upper Egypt	...	...	...	395
TOTAL...	...	...	...	<u>3,653</u>

The majority of the cases occurred in the Governorates and in Lower Egypt, and the minority in Upper Egypt.

Table No. 31 shows the distribution of the cases during the weeks of the year.

TABLE No. 31.—CASES AND DEATHS OF TYPHOID NOTIFIED IN EGYPT, IN PERIODS OF FOUR WEEKS DURING 1932.

Governorates and Provinces	1-4		5-8		9-12		13-16		17-20		21-24		25-28		29-32		33-36		37-40		41-44		45-48		49-52		TOTAL		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	
Cairo	46	23	36	11	41	16	45	16	94	27	141	25	234	57	247	67	254	62	164	54	142	37	106	25	94	18	1,644	438	
Alexandria	16	5	18	5	23	1	23	6	23	3	56	3	62	11	64	12	85	12	63	13	65	5	52	7	35	10	585	93	
Ismailiya	1	—	2	—	5	1	—	—	1	1	2	—	2	1	3	2	3	—	4	—	1	1	1	—	—	—	—	25	6
Port-Said	2	1	21	1	10	7	2	—	4	—	2	—	2	—	4	1	4	1	3	—	4	2	1	—	3	—	62	13	
Damietta	—	—	—	—	1	—	—	—	2	—	1	—	—	—	2	2	11	1	4	1	2	1	1	—	—	—	24	5	
Suez...	1	—	5	—	2	—	—	—	—	1	5	1	1	2	4	2	15	4	8	1	4	1	3	2	5	2	53	16	
Frontier Districts	—	—	—	—	11	1	11	9	—	—	1	—	—	—	1	—	1	—	1	—	1	—	—	—	—	2	—	29	10
Behera	3	—	7	—	7	—	11	2	8	2	12	1	23	3	17	2	7	—	6	2	5	—	3	1	2	1	111	14	
Dakahlia...	2	—	5	2	3	3	17	—	21	5	16	3	8	—	8	1	15	3	13	2	7	—	6	1	8	2	129	22	
Gharbiya	4	2	10	1	26	5	38	12	38	5	30	2	30	12	26	7	13	5	7	4	6	2	10	1	10	3	258	61	
Menûfiya	3	—	1	—	8	2	8	2	5	1	7	1	4	1	7	1	10	1	10	1	19	—	4	—	10	—	96	10	
Kalubia	4	—	2	1	14	—	7	1	—	1	3	1	8	3	8	3	22	2	15	3	22	2	14	2	8	5	127	24	
Sharqiya	8	1	3	1	11	—	2	—	7	2	8	1	8	—	6	3	11	2	16	1	16	2	4	1	15	6	115	20	
Giza	1	—	3	—	6	—	1	1	5	2	8	3	7	1	4	2	7	4	8	3	7	—	7	1	3	1	67	18	
Beni-Suef	—	—	—	—	1	—	—	—	1	—	—	—	2	—	—	—	1	1	—	—	5	—	3	—	—	—	13	1	
Faiyûm	—	—	1	—	8	3	—	—	—	—	1	—	2	2	2	1	6	2	2	2	2	1	—	—	1	—	25	11	
Minya	3	—	1	—	5	1	6	—	9	4	7	1	3	—	10	3	13	3	9	5	9	—	9	—	5	3	89	20	
Asyût	2	—	1	—	6	3	5	5	4	—	8	2	4	2	6	2	9	—	5	1	12	3	12	4	9	1	83	23	
Girga	—	—	1	—	—	—	7	—	3	1	2	—	2	1	—	—	2	—	1	—	6	2	4	—	—	—	28	4	
Qena	1	—	2	—	4	2	3	1	19	3	4	—	1	1	3	1	—	1	7	2	11	—	6	—	3	—	64	11	
Aswân	1	1	5	—	1	—	1	1	1	—	5	2	—	—	1	1	3	—	3	1	2	—	2	—	1	1	26	7	

The increase in the number of cases than in the previous year is due to the great affluence of people frequenting the medical institutions of the Government for treatment. This helped in the discovery of many cases ; and it was the result of sending patients to the Government Institutes and of the efforts afforded in their treatment that the death rate this year was less than that of last year.

The Department as usual continued to carry out vaccination of all contacts twice with prophylactic vaccine and encouraged the public by every means to present themselves for vaccination to be immunized against this disease.

The Prisons Department vaccinated a large number of prisoners and the Army vaccinated 5,304 of its men. The number of persons vaccinated during the year throughout the country was 150,862 persons.

TYPHUS

2,298 cases were recorded during the year with 399 deaths as against 265 cases with 57 deaths last year. The death rate this year was 17 per cent as against 21·5 per cent last year.

The majority of cases, namely 2,006 occurred in Behera, Dakahlia and Gharbia provinces. 59 cases occurred in Menoufia and Sharkia Provinces. Kaliubia Province was entirely free from the disease.

If we excluded Kena Province, where 33 cases occurred, Upper Egypt may be considered free from the disease as only three cases occurred in Girga, 2 in Assiut and a single case in each of Beni-Suef and Fayoum Provinces.

Excluding Alexandria Governorate, where 23 cases occurred, only sporadic cases occurred in the remaining Governorates as shown hereunder :—

Governorate	No. of Cases
Cairo	1
Port Said	5
Suez	4
Damietta	2

There is no doubt that the increase in the number of cases is due to the present financial depression which caused poverty to the majority of the inhabitants who neglected the cleanliness of their clothes and bodies. This lack of cleanliness lead to the breeding of lice on their clothes and bodies thus causing the spread of the disease, especially amongst the low classes who neglect cleanliness except in time of affluence.

The Department was aware of this state. Patients were isolated during the first stage of the disease and all necessary measures were taken ; and it was the result of these measures that the death rate was markedly reduced.

This disease, besides being an epidemic, is a social problem that cannot be solved except by combating poverty, ignorance and dirtiness. It is hoped that the number of cases will be reduced as soon as this financial depression is over and the financial condition of the farmers is improved, thus enabling them to direct their attention to the cleanliness of their clothes, bodies and dwellings.

Table No. 32 shows the number of cases and deaths which occurred during the year distributed amongst Governorates and Provinces of the country, recorded quarterly.

TABLE No. 32.—CASES AND DEATHS OF TYPHUS FEVER NOTIFIED IN GOVERNORATES AND PROVINCES IN PERIODS OF THREE MONTHS DURING 1932.

GOVERNORATES AND PROVINCES	First quarter 1st April		Second quarter 1st June		Third quarter 30th September		Fourth quarter 31st December		General Total	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Cairo	1	2	—	—	—	—	—	—	1	2
Alexandria	1	1	21	4	1	1	—	—	23	6
Ismailia	—	—	—	—	—	—	—	—	—	—
Port Said	—	—	1	—	2	—	2	—	5	—
Port Fouad	—	—	—	—	—	—	—	—	—	—
Damietta	—	—	—	—	2	—	—	—	2	—
Suez	4	—	—	—	—	—	—	—	4	—
Southern Desert	—	—	—	—	—	—	—	—	—	—
Western Desert	5	—	12	—	—	—	—	—	17	—
Sinai	—	—	1	—	—	—	—	—	1	—
Behera	420	37	285	52	132	28	38	6	875	123
Daqahliya	—	—	392	58	54	15	25	3	471	76
Gharbiya	490	73	210	60	57	18	3	1	760	152
Minûfiya	13	5	28	8	5	5	—	—	46	18
Qalyûbiya	—	—	—	—	—	—	—	—	—	—
Sharqiya	—	—	—	—	1	—	52	13	53	13
Aswân	—	—	—	—	—	—	—	—	—	—
Asyût	—	—	1	—	—	—	1	—	2	—
Beni-Suef	—	—	—	—	1	—	—	—	1	—
Faiyûm	—	—	—	—	1	—	—	—	1	—
Girga	—	—	3	2	—	—	—	—	3	2
Giza	—	—	—	—	—	—	—	—	—	—
Minya	—	—	—	—	—	—	—	—	—	—
Qena	4	2	27	5	1	—	1	—	33	7
TOTAL	938	120	981	189	257	67	122	23	2,298	399

SMALL POX

The disease appeared during the year in some villages of Menoufia Province and in Suez and Cairo Governorates. At the end of the year, it took an epidemic form in Alexandria and from there the disease was conveyed to the interior of the country.

The number of cases recorded during the year was 606 distributed as follows:—

TABLE No. 33.

Locality	No. of cases
Alexandria Governorate	510
Cairo	6
Canal Governorate including Ismailia	4
Suez Governorate... ..	29
Frontier Districts... ..	8
Behera Province	4
Gharbia „	30
Menoufia „	15
	606

The above list shows clearly that Damietta Governorate and the provinces of Kaliubia, Dakahlia and Sharkia in Lower Egypt and all provinces of Upper Egypt were absolutely free from the disease.

The progress of the disease in Alexandria during the first six months of the year did not indicate that it would take a ravaging form. Only one case occurred in March 25, a second case occurred in May 10, a third in June 8, and a fourth in July 10. After that date the number of cases began to increase reaching 269 up to December 20. After that date it took a dangerous epidemic character—241 cases being recorded during the period from December 20 to 31, 1932. This critical state called upon the Department of Public Health to assist Alexandria Municipality in combating the epidemic by undertaking a great part of the work.

A large number of the Department's Medical Officers were detailed to assist in carrying out general vaccination against small-pox to all the inhabitants of the Governorate in order to complete the operation in the least possible time. The Department also issued to the Municipality all equipment required for combating the disease. It is hoped that this epidemic will be suppressed during the 1st quarter of the year 1933.

Owing to the fact that the disease was conveyed from Alexandria to the interior of the country, the Department decided to undertake general vaccination to all the inhabitants of the provinces to which the disease was conveyed. The result of this vaccination will be inserted in next year's report. It has also been decided to vaccinate all the inhabitants of Cairo Governorate.

As to the cases which occurred in Suez, it is probable that the infection was imported from abroad.

PLAGUE

The number of cases of plague recorded this year was much less than that of last year. Total number of cases recorded was 134 with 60 deaths giving a death rate of 44·7 per cent as against 573 cases with 203 deaths giving a death rate of 35·4 per cent in last year.

The decrease in the number of cases which occurred this year gives an idea of the efforts of the Department in combating the disease and of the rapid and strict measures taken on the appearance of every case.

The high mortality this year is due to the occurrence of many deaths outside the isolation cordons and hospitals; the number of these deaths amounted to 26, *i.e.* about half the total number of the deaths.

Of the total number of cases, 112 were bubonic, 19 septicæmic and 3 pneumonic occurred at Nagé El Sheikh Hassan, Deirout Markaz, Assiut Province.

The following table shows the number of cases and deaths which occurred, distributed amongst the Governorates and Provinces of the country, and the percentage of deaths to cases:—

TABLE No. 34

Governorate or Province	No. of cases	No. of deaths	Percentage of deaths to cases
			%
Alexandria	34	19	55·88
Behera	20	6	30
Gharbiya	4	1	25
Minúfiya	13	9	69·2
Qaliyûbiya	1	1	100
Giza... ..	3	2	66·66
Beni Suef	43	11	25·67
Minya	9	5	55·55
Asyût	6	5	83·33
Qena	1	1	100
TOTAL	134	60	44·7

The following table shows the number of rats sent to the Laboratories of the International Quarantine Board at Alexandria, Port Said and Suez during 1932, their species and number of fleas detected:—

TABLE No. 35

District	No. of rats caught and their species			No. of fleas detected		
	R. Norv.	R. Rat	Acomys	R. Norv.	R. Rat	Acomys
Alexandria	6,966	2,079	41	2,450	1,568	—
Post Said	6,641	374	—	10,545	756	—
Suez... ..	2,479	213	250	5,308	368	—

Besides the measures usually taken for combating the disease, *viz.* isolation of patients, observation of contacts and disinfection of patients' houses and their neighbourings, the Department vaccinated all the inhabitants of the infected villages with Anti-plague vaccine. Total number of persons vaccinated was 192,197.

To secure a rapid immunization of the inhabitants of villages in which cases occurred, the Department inoculated all contacts with 10 c.c of Anti-plague serum to adults and at the same time they were given the 1st injection of the Anti-plague vaccine. A week later, they were given the 2nd injection of the vaccine which is double the 1st.

The Department organized a vigorous campaign against rats in the infected regions. 27,609 rats were captured in the whole country and destroyed.

SCARLET FEVER

The number of cases recorded this year was less than that of last year. Total number of cases reported was 102 as against 130 cases last year.

Most of these cases occurred amongst foreigners.

MEASLES

The number of cases of measles recorded this year is by far greater than that of last year. 19,649 cases have been reported this year with 6,270 deaths giving a death rate of 31.9 per cent as against 10,709 cases with 3,507 deaths and a death rate of 32.65 per cent during 1931.

Although the death rate this year is lower than that of last year, yet it is still high taking into consideration the fact that measles is not a fatal disease, if mothers were to nurse their children properly and not to expose them to complications which cause most of the deaths and to avoid overcrowding in unhealthy quarters.

The following table shows the number of cases occurring in Egypt in the last nine years :—

TABLE No. 36

Year	No. of cases
1924	3,606
1925	12,970
1926	21,860
1927	3,995
1928	14,823
1929	22,365
1930	4,470
1931	10,709
1932	19,649

INFLUENZA

The number of cases reported this year was less than that of last year. Most of the cases recorded were of a mild character and no pulmonary complications of any importance occurred.

Total number of cases recorded this year was 5,731 with 411 deaths giving a death rate of 7.1 per cent, as against 5,900 cases with 301 deaths and a death rate of 5.1 per cent during 1931.

DIPHTHERIA

There was a marked decrease in the number of cases reported this year. The case-rate was 1,990 of which 887 cases ended with death giving a death rate of 44.6 per cent as against 2,165 cases with 894 deaths and a death rate of 41.29 per cent during 1931.

The Department encouraged the public by all means to present their children, whose ages varied from 2 to 12 years, for their vaccination with the prophylactic anatoxin in order to immunize them against this fatal disease.

The following table shows the number of children vaccinated during the year:—

TABLE NO. 37

Number of children vaccinated			Number of cases detected amongst the children vaccinated		
1st injection	2nd injection	3rd injection	After the 1st injection	After the 2nd injection	After the 3rd injection
15,915	11,473	15,944*	8	2	1

The above table clearly shows that the number of cases occurring amongst children who were given the 2nd and 3rd injections was very few. No important complications resulted from vaccination with the exception of slight local reaction to a few number of them. This reaction usually disappeared after a short time.

Owing to the fact that the inhabitants have shown no keenness in presenting their children for inoculation, the Department has prepared a project of a Ministerial Arrêté adding diphtheria to the Schedule of the Infectious Diseases attached to Décret-Loi No. 109 of 1931, by which compulsory prophylactic vaccination is carried out.

The Department hopes that this arrêté will be issued at the beginning of the coming year thus giving the Department the legal power to carry out compulsory vaccination to all children in the infected districts.

MALARIA

During the year, 1,343 cases have been recorded with 23 deaths giving a death rate of 1.71 per cent as against 1,230 cases with 22 deaths and a death rate of 1.78% in last year.

The following table shows the number of Malaria cases and deaths during 1932 and 1931:—

TABLE NO. 38.—SHOWING MALARIA CASES AND DEATHS.

Governorate or Mudiria	1932		1931	
	Cases	Deaths	Cases	Deaths
Cairo	62	—	37	4
Alexandria	232	2	98	2
Ismailia	36	7	33	—
Port Said	15	—	14	2
Damietta	1	—	7	—
Suez... ..	89	2	106	2
Southern Desert	16	2	14	—
Western Desert	81	1	53	—
Sinai	55	1	38	—
Behera Province	49	1	24	1
Daqahliya Province	50	2	20	—
Gharbiya Province	152	—	38	4
Minûfiya Province	107	1	15	—
Qaliyûbiya Province	173	1	154	2
Sharkiya Province	53	—	30	1
Giza Province	11	1	2	—
Beni Suef Province	13	—	2	—
Faiyûm Province	99	2	515	1
Minya Province	21	—	10	—
Asyût Province	20	—	14	1
Girga Province	5	—	4	1
Qena Province	3	—	1	1
Aswân Province	—	—	1	—
TOTAL	1,343	23	1,230	22

* The increase in the number of children given the 3rd injection over those given the 1st is due to the fact that some children were inoculated the 1st and 2nd injections in the previous year.

No epidemics occurred during the year.

23 cases occurred at Damanhour Bandar and 26 at Mansura Bandar. Investigations were duly made at these two bandars and it appeared that at Damanhour Bandar, mosquitoes were breeding in birkas, some drains in the vicinity and disused sakias and wells within the circumscription of the Bandar. These breeding places were noted and provisional measures, such as clearing, stocking with fish and dusting with Paris Green, were taken. The Anti-Malaria Commission was also requested to allot a sum in its budget for repairing these drains.

At Mansura, some cases were reported from the outskirts of the bandar near stagnant mosquito-breeding drains. Disused drains were filled up by the Municipality and permanent drains were treated by disinfectants.

All patients were treated and quinine was distributed in the infected localities.

Researches.

Malaria researches were made in 155 villages in the various provinces by splenic index for children from 2-10 years of age. The highest percentage was 12 per cent in Lower Egypt at Behera, with the exception of El Khesous Village, Shebin El Kanater District in the Gebel El Asfar area, in which the splenic index was 25 per cent. Malaria is endemic in this area and a malaria station is situated there for investigation.

In Upper Egypt, the highest rate was 7 per cent.

Malaria Research Stations.

There were two stations in the country, one at Khanka, and the other at Fayoum. 2,343 patients attended Khanka Station as against 1,332 in the preceding year. The increase is due to the fact that the Station has been in that area for a long time and became well-known to the inhabitants of this district. 91 cases of malaria were detected amongst the attending cases, of which 75 were benign and the remaining 16 cases were malignant. This station was attached to the Researches Institute and Endemic Diseases Hospital at the end of the year for the purpose of carrying out technical investigations on the types of mosquitoes prevalent there including the Malaria carrier. Also to investigate the effects of the various drugs now used in the treatment of malaria cases.

The station at Fayoum was added to Khanka Station in June 1932, owing to the fact that patients who attended the station were very few. The number of malaria cases had markedly decreased, not having exceeded 56 patients from the beginning of the year until the end of May 1932.

Application of Malaria Law.

During the year, arrêtés were issued applying Malaria Law to the following districts :—

Village	Markaz
Sendawa	Shebin el Kanater.
Kerdassa... ..	Embaba.
Kafr el Dib	Zifta.
Sherenkash	Talkha.
Port Said	—

FEVER HOSPITALS

It was stated in last year's report that the building of Beni Suef Fever Hospital was not handed over to the Department. This hospital has since been delivered to the Department and provided with the necessary equipment. It was inaugurated on March 24, 1932.

The building of the Fever Hospital at Alexandria was completed at the commencement of the year. It was opened for patients on April 4, 1932. The old Fever Hospital block at Shatby was cancelled as soon as the new Fever Hospital was opened.

Thus the number of Fever Hospitals in the country is 13 ; 12,392 patients were treated therein during the year, as against 9,205 in 1931.

Mit Ghamr Municipality (Dakahlia Province) has built an isolation shelter with an accommodation of 24 beds for the treatment of patients suffering from infectious diseases within the circumscription of the Markaz. It is expected at the beginning of next year that the said Municipality will hand over this shelter to the Department to equip and maintain it.

In last year's report it was stated that a travelling dispensary was established at Embaba village for the treatment of children suffering from infectious diseases in some of the villages of Giza Mudiria. In view of the fact that the sanitary condition in these villages had improved, the number of children attending the dispensary considerably decreased. The dispensary was consequently closed as from July 1, 1932.

The number of children treated in this dispensary from January 1 up to the date of closure was 863 from whom the following bacteriological specimens were taken :—

316	specimens for	Vidal reaction.
314	„	for Malaria.
52	„	for Amoebic Dysentery.
52	„	for Bacillary „

The following infectious diseases were detected amongst new patients :—

3	Typhoid Fever.
4	Paratyphoid Fever.
65	Whooping Cough.
1	Chicken pox.
2	Diphtheria.
1	Measles.

76 TOTAL.

TABLE NO. 39.—SHOWING NUMBER OF CASES TREATED IN

	Plague		Typhus		Small-Pox		Anth-rax		Typhoid Fever		Para Typhoid		C.S.M. Fever		Scarlet Fever		Diphtheria		Measles		Whoop- ing Cough		Mumps	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Abbasiya F.H. ...	3	1	—	—	9	1	—	—	743	141	109	12	1165	520	18	—	322	94	58	5	19	2	97	1
Alexandria F.H. ...	24	10	21	5	434	45	—	—	105	17	6	—	44	25	1	1	43	21	19	1	4	—	31	1
Tanta F.H. ...	17	1	30	9	—	—	2	—	64	11	16	2	241	99	—	—	9	6	3	—	2	—	5	—
Shibin el Kom F.H. ...	3	—	15	3	7	—	1	—	48	1	—	—	151	69	—	—	15	4	—	—	—	—	—	—
Damanhour F.H. ...	1	1	107	16	2	—	—	—	41	3	5	—	78	39	—	—	—	—	7	1	—	—	10	—
Zagazig F.H. ...	—	—	60	10	—	—	—	—	71	8	32	2	273	147	—	—	22	11	15	—	6	1	8	2
Mansoura F.H. ...	—	—	25	1	—	—	—	—	34	2	7	—	260	126	—	—	29	15	4	—	1	—	9	1
Port Said F.H. ...	—	—	6	—	2	—	—	—	22	5	8	1	102	57	—	—	18	9	9	—	1	1	7	—
Suez F.H. ...	—	—	—	—	52	7	—	—	43	12	8	2	24	11	—	—	32	8	28	8	3	—	7	—
Beni Suef F.H. ...	20	2	1	—	—	—	—	—	7	—	4	—	12	7	—	—	4	2	6	—	—	—	3	—
Minia F.H. ...	1	—	—	—	—	—	—	—	42	10	10	—	21	13	—	—	3	1	2	—	2	—	—	—
Asyût F.H. ...	—	—	1	—	—	—	—	—	45	7	8	1	57	31	—	—	21	13	56	9	—	—	2	—
Qena F.H. ...	—	—	—	—	—	—	—	—	12	1	3	—	14	6	—	—	18	13	—	—	—	—	1	—
TOTAL ...	69	15	266	44	486	53	3	—	1277	218	216	20	2442	1150	19	1	536	197	217	24	38	3	180	5
Death Percentage	21.7%		16.5%		10.9%		—		17%		9.3%		47%		5.3%		36.7%		11.5%		8%		3%	

THE FEVER HOSPITALS DURING 1932.

Tetanus		Pulmonary Tuberculosis		Chicken pox		Influenza		Puerperal fever		Dysentery		Erysipelas		Malaria		Acute Polioencephalitis and Myelitis		Encephalitis Lethargica		Undulant fever		Leprosy		Relapsing fever	
Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
19	9	52	19	40	—	1039	—	16	6	46	5	346	38	91	—	—	—	1	1	—	—	—	—	—	—
26	19	11	—	114	4	435	2	1	—	85	1	91	6	197	—	—	—	—	—	—	—	—	—	—	—
15	9	4	1	—	—	77	1	—	—	—	—	144	17	46	—	—	—	—	—	1	1	—	—	—	—
17	5	1	1	2	—	45	—	2	2	3	1	60	12	25	—	1	1	—	—	—	—	—	—	—	—
13	5	—	—	—	—	131	3	—	—	—	—	43	3	30	—	—	—	—	—	—	—	—	—	—	—
17	6	2	—	1	—	403	19	8	2	11	2	288	59	44	—	1	—	—	—	—	—	—	—	—	—
11	6	5	—	—	—	121	—	2	1	4	—	74	7	52	—	2	1	—	—	—	—	—	—	—	—
5	2	23	5	6	—	84	—	2	—	4	1	20	—	10	—	—	—	—	—	—	—	—	—	—	—
—	—	3	1	—	—	111	4	7	1	23	1	21	2	79	1	1	1	—	—	—	—	1	—	—	—
6	4	2	1	—	—	14	1	—	—	1	—	9	1	7	—	—	—	—	—	—	—	—	—	1	—
10	4	11	4	—	—	27	—	1	—	14	—	13	1	9	—	—	—	1	—	—	—	—	—	—	—
6	3	1	—	7	—	52	1	3	—	17	3	17	4	7	—	—	—	—	—	1	—	—	—	—	—
1	1	6	—	—	—	20	2	—	—	—	—	6	1	1	—	—	—	—	—	—	—	—	—	—	—
146	73	121	32	170	4	2559	33	42	12	208	14	1132	151	598	1	5	3	2	1	2	1	1	—	—	—
50%		26.4%		2.4%		1.3%		28.5%		6.7%		13.5%		0.106%		60%		50%		50%		—		—	

TABLE NO. 40.— SHOWING TOTAL NUMBER OF CASES ADMITTED TO THE FEVER HOSPITALS DURING 1932

Total number of cases	...	...	...	...	...	...	10,736
„ „ „ under observation	...	...	...	...	...	...	776
„ „ „ accompanying	...	...	...	...	...	...	324
„ „ „ non infectious cases	...	...	...	...	...	...	556
GENERAL TOTAL							12,392
Total number of deaths	...	...	...	...	...	...	2,055
„ „ „ occurred amongst persons	...	...	...	...	...	...	
under observation	...	...	...	...	...	...	77
Total number of non infectious cases	...	...	...	...	...	...	14
GENERAL TOTAL							2,146

SAFEGUARDING THE COUNTRY AGAINST IMPORTED INFECTIOUS DISEASES FROM ABROAD

In order to safeguard the country against importation of infectious diseases by passengers coming by land, sea or air routes, such passengers are put under observation. Special care is given to the observation of pilgrims returning from Holy lands.

PILGRIMAGE

2,174 Egyptian pilgrims proceeded to the Hedjaz this year, of whom 3 died in the Hedjaz, 2 at Tor and the rest returned to Egypt and were all observed for the legal period. Amongst the returning pilgrims 14 suffered from the following diseases :—

<i>Infectious diseases.</i>	No.
Influenza	1
Benign Tertian Malaria ...	1
<i>Non-Infectious Diseases.</i>	
Gastro-Enteritis	6
Acute Bronchitis	2
Diarrhœa	1
Gastritis	1
Colitis	1
Enteritis	1

The usual instructions regarding the inoculation of pilgrims against cholera and typhoid and their vaccination against small-pox before their departure from Egypt were issued by the Department.

The instructions regarding the control of pilgrims after their return from the Hedjaz have also been carried out.

In view of the fact that the number of pilgrims was small this year as compared with previous years, and owing to the financial stringency, the Department sent only one dispensary together with the sufficient number of medical staff, supplied with the necessary equipment and drugs. This dispensary carried out its work at Mecca and accompanied the pilgrims to Arafat and Mena.

After the pilgrimage rites have ended, the mission returned to Mecca where it resumed its work during the stay of the Egyptian pilgrims there. It then returned to Egypt.

2,188 patients were treated in the Out-patients' Section of the dispensary. In addition to these, 1,045 frequented the dispensary; of this number 125 were Egyptian pilgrims and the rest from other nationalities. No in-patients were treated in the dispensary.

Special attention has been given as usual to the control of the routes of the Eastern Desert and the Red Sea Coasts for the purpose of intercepting pilgrims coming by these routes and preventing them from escaping the sanitary control.

As no cases of plague or cholera have occurred in the Hedjaz during the pilgrimage season and the sanitary condition of the pilgrims who arrived at Tor was satisfactory, the Quarantine Board declared the pilgrimage as net.

SANITARY CONTROL

The number of passengers who arrived at the Egyptian ports was 40,216: of this number 40,206 were observed, *i.e.* 99·97 per cent. Those who arrived *via* Kantara were 23,988: of this number 23,978 were observed, *i.e.* 99·95 per cent.

Owing to the appearance of cholera at Bombay in India during this year, the special measures which were taken in 1930 against the arrivals from that town have been enforced this year. These measures are mentioned in detail in the Annual Report of 1930.

Owing to the frequent appearance of plague this year at Beyrouth at different intervals, the necessary instructions were issued to Port Health Offices, as soon as cases of this disease were notified to the Department, to carefully examine passengers arriving from the said town and make annotations on their observation lists to the effect that they should be put under strict observation.

The Department was also notified by the International Quarantine Board of the occurrence of a suspected cholera case at Koh Bezman in Persia. Instructions were therefore promptly issued to Port Health Offices to carefully examine passengers arriving from the said district.

CHAPTER IV.

HEALTH INSPECTORATE'S SECTION

1.—GENERAL

Reference was made in last year's report as to the continual increase in the work of this Section since the abolition of the "Health Department" and the incorporation of the Frontier Districts Medical Section into this Section in June 1931.

The instructions given to the Staff on the Frontier Districts Units by the Assistant Director of this Section on his tours of inspection have resulted in a marked improvement in the standard of public health in these remote regions.

A brief note on the work accomplished by the Frontier Units is set apart hereafter.

As a result of the strenuous efforts exercised by the Divisional Health Inspectors in the supervision of the technical and administrative work in the localities falling within their circumscription, the repeated inspection of these localities and the instructions given by them to the employees thereof, a noticeable improvement in the running of the work and the state of public health has been effected.

The duties of these Divisional Inspectors are incessantly augmenting because the Health Offices are continually on the increase as a result of the policy adopted by the Department regarding the sub-division of large districts. It is hoped that the Department will be able to double its efforts towards the execution of this policy when the financial situation so permits.

In addition to the above, Divisional Health Inspectors are charged with the inspection of the work of village hospitals including the investigation of complaints made against the staff of such hospitals. They also supervise the measures employed in combating infectious diseases.

Owing to the continual increase in the work of public health, due to the spread of education and civilisation amongst the people, the Department intends to increase the number of Divisional Health Inspectors, now four in number, as soon as financial circumstances permit.

The Department is taking every possible measure to dispense with the services of sanitary barbers gradually, thus charging the Medical Officers of Health with the examination of deaths and anti-small-pox vaccination.

In order to facilitate the immediate notification of deaths and infectious diseases so that necessary precautions may be taken at the earliest possible time, telephone apparatuses have been installed in all Health Offices where no such apparatuses existed.

2.—MEDICO-LEGAL SERVICES

During this year the Medical Officers of the Health Section have examined a considerable number of accidental and criminal cases amounting to 20,693 and 69,467 respectively as compared with 20,456 and 70,309 during last year.

3.—PROSTITUTES

The Department has endeavoured to guarantee an accurate weekly medical examination of prostitutes. Prostitutes suspected of having, at any time, conveyed infection to other persons are subjected to careful examination. Table No. 41 shows the number of registered prostitutes, the diseases they suffer from and the number of medical examinations they have undergone.

In view of a decision of the Council of Ministers, a Commission has been appointed under the presidency of His Excellency the Under Secretary of State, Public Health Administration, to examine the problem of abolishing licensed prostitution from Egypt. This Commission meets from time to time for this purpose. It may be of interest to mention in this connection, that some Municipalities, Damanhour Municipality in particular, have already abolished prostitution within their circumscription.

The total number of prostitutes this year amounted to 4,110 on whom 110,660 medical examinations were carried out, as compared with 4,055 prostitutes and 117,006 examinations during last year.

TABLE NO. 41.—SHOWING THE NUMBER OF PROSTITUTES IN EGYPT, THEIR DISEASES AND NUMBER OF MEDICAL EXAMINATIONS CARRIED OUT.

LOCALITY	Noumber of Registered Prostitutes.	Number of Medical Examinations	Diseases		
			Syphilis	Gonorrhoea	Other Diseases
<i>Governorates :—</i>					
Alexandria	875	24,385	281	695	25
Canal	376	11,821	30	132	5
Suez	55	3,161	21	96	—
Damietta	4	200	—	—	—
Cairo	1,174	33,674	46	388	36
<i>Lower Egypt :—</i>					
Gharbiya	249	7,271	88	392	5
Daqahliya	151	6,162	106	221	1
Behera... ..	10	233	—	—	—
Sharqiya	92	780	3	21	2
Qaliyûbiya	44	1,451	2	45	4
Minûfiya	27	386	1	6	—
<i>Upper Egypt :—</i>					
Giza	23	860	—	—	—
Faiyûm	66	48	10	29	1
Beni Suef	77	52	5	19	—
Minya	144	4,082	5	119	30
Asyût	222	7,313	36	85	7
Girga	193	3,787	43	54	4
Qena	221	2,702	5	96	3
Aswân	107	2,292	14	66	3
TOTAL	4,110	110,660	696	2,466	126

4.—SERVICES RENDERED BY THE MEDICAL OFFICERS OF HEALTH SECTION

The Medical Officers of this Section, besides the innumerable services rendered by them to the schools and other similar institutions in the form of medical examination of pupils and employees, give particular attention to the sanitary state of other communities in remote places such as the medical observation of labourers at Kurour locality.

5.—LEASES

This Section undertakes the leases of premises required for the various Health Offices. In order to economise the rents of such premises, the Department is moving such Offices to Government premises whenever available.

6.—FRONTIER DISTRICTS MEDICAL SERVICE

(a) *Infectious Diseases.*

The state of public health in the Frontier Districts was satisfactory in general with the exception of: (1) Dakhla Oases where 393 cases of measles and 54 cases of typhoid fever took place. (2) Baharieh Oases where 457 cases of measles were detected, and (3) Kantara East and Matrouh where few cases of measles were notified.

It is worth mentioning with pleasure that these districts were not infected with cerebro-spinal fever. Two cases at Kharga and one case at Kantara East were all that was notified.

The total number of cases of malaria was 536, measles 1,018, typhoid 66 and small-pox 8 compared with 286, 942, 300 and 11 respectively during last year. The increase in the cases of malaria is attributed to the migration of large numbers of malaria infected beduins from Tripoli to Siwa Oases.

(b) *Births and Deaths.*

There were 4,885 births and 3,173 deaths amongst a population of 95,000, i.e. a birth rate of 51.5 per thousand population and a death rate of 33 per thousand population as compared with 54 and 27.5 per thousand population during last year.

(c) *Hospitals, Health Offices and Out-patient Clinics.*

The total number of the visits of patients to the In and Out-patients Departments of the Frontier Districts Hospitals and Health Offices amounted to 176,966 as compared with 145,170 during last year. The increase is attributed to the fact that beduins have recognised the value of the treatment at these hospitals. The number of operations performed amounted to 1,747 as compared with 1,549 during the previous year. This is again attributed to the beduins preferring surgical operations to their primitive methods of treatment of various diseases and accidents.

The Department paid particular attention to the combating of endemic and eye diseases. Specialists are being delegated whenever necessary, for treating patients and giving the necessary advice to inhabitants of these regions.

The majority of the Frontier Districts Medical Officers have been provided with motor cars for the purpose of carrying out careful inspection of the districts falling within their circumscription and enabling them to be always on the alert for combating both infectious and non-infectious diseases.

The Department has also decided to gradually train the Medical Officers of this Service on Ophthalmic and Medico-legal work.

Table No. 42 gives the statistics of births, deaths, vaccinations and infectious diseases in the Frontier Districts during 1932.

TABLE NO. 42. — BIRTHS, DEATHS, INFECTIOUS DISEASES AND VACCINATIONS CARRIED OUT IN THE FRONTIER DISTRICTS DURING 1932.

District	No. of Population	Births	Deaths	Vaccinations			Malaria	Influenza	Dysentery	Typhoid	Small Pox	Whooping Cough	Measles	Cerebro-Spinal Fever
				Suc.	Unsuc.	Total								
Amiriya	13,209	667	368	613	8	621	7	19	4	4	4	7	25	—
Dab'a	3,333	197	119	156	13	169	—	14	—	—	—	2	14	—
Matrouh	10,330	416	375	408	3	411	—	52	46	—	—	11	53	—
Sidi Barrani	7,609	408	303	400	5	405	—	7	—	—	—	9	—	—
Selloum	4,227	178	168	146	4	150	—	2	30	—	1	42	13	—
Sewa	3,549	189	222	90	15	105	348	—	34	1	—	25	—	—
Bahariya	6,324	282	284	198	6	204	82	35	—	—	—	—	457	—
Kharga	8,584	500	266	329	92	421	14	—	33	—	—	—	3	2
Dakhla	17,116	996	520	723	136	859	29	—	1	54	—	—	393	—
Kantara East	6,583	298	142	292	41	333	11	7	29	4	2	—	47	1
Arish	7,000	511	257	423	37	460	11	19	97	3	1	97	5	—
Tor	2,013	36	42	24	2	26	24	—	—	—	—	—	—	—
Kosseir	2,650	113	62	108	4	112	9	59	42	—	—	1	8	—
Safage	420	16	3	13	—	13	1	50	50	—	—	—	—	—
Hurgada	2,000	78	42	74	—	74	—	—	—	—	—	—	—	—
TOTAL	94,947	4,885	3,173	3,997	366	4,363	536	264	366	66	8	194	1,018	3

CHAPTER V

CHILD WELFARE

The number of attendances at the Child Welfare Centres has greatly increased this year in comparison with last year, in spite of the fact that no new centres were inaugurated owing to the present financial crisis. In the introduction of this report, statistics were inserted showing the increase in the work of this section.

TABLE NO. 43.—SHOWING THE WORK DONE AT THE CHILD WELFARE CENTRES DURING 1931 AND 1932.

Cases	1931 27 centres	1932 28 centres
Old pregnant	131,339	171,785
New pregnant	34,379	38,575
Pregnants suffering from gonorrhoea	15	7
Blood specimens taken	34,817	40,605
Children attended the centres	339,835	516,238
Children attended the out-patient departments	109,718	140,941
Circumcision operations	1,433	1,324
Infants vaccinated against small-pox	19,157	20,429
" " " diphtheria	10,228	8,681
Lectures given by Medical Officers	3,679	3,947
" " Mowallidas*	5,015	5,567
" " female health visitors on nutrition	4,872	5,263
" " female health visitors on clothes and how to cut them out	4,785	5,182
" " female health visitors on infantile and pregnancy diseases	4,935	5,355
" " female health visitors on cleanliness and hygiene of children and mothers	5,489	5,266
Medical Officers' visits to sick pregnant	328	410
" " " confined women	2,107	1,799
" " " children	809	269
Mowallidas'* visits to pregnant in the 9th month	16,183	19,172
" " puerperals	169,919	207,650
" " other visits	17,313	19,262
House visits by Female Health Visitors to pregnant	18,472	21,548
" " " " " children	25,912	30,587
Other	27,357	22,825
Confinements undertaken by Mowallidas*	11,169	14,510
" " Assistant Mowallidas*	13,275	15,240
" " Medical Officers	248	263
Total number of confinements	24,692	30,013
Confinements undertaken from outside (not registered)	3,208	2,931
Cases of confinement sent to hospitals	460	566
Confinements before arrival of C.W.C. staff	1,854	2,313
Registered pregnant not confined by C.W.Cs.	1,056	811
Still-births at full term	354	429
Premature still-births (in the 7th month)	320	214
" " " (after the 7th month)	102	131
Mothers deaths caused by delivery	12	7
Infantile deaths under one year of age	1,106	1,620
" " in the first month of age	374	394
Cases of puerperal fever	14	29
Urine samples taken	113,731	142,326
Samples taken before delivery found to contain albumen	5,203	5,700
" " " glucose	638	480
Contributions to mothers and children "Milk" kilos	13,446.5	25,492
" " " ready made clothes No.	1,584	967
" " " "Cloth" metres	4,349.5	2,076

* Higher class Midwives.

SEA-SIDE SANATORIA

As the cases of bone tuberculosis admitted to Alexandria Sanatorium spend a long time under treatment and the children admitted there are consequently kept for long periods, only 32 children and three accompanying parents were admitted in 1932.

The number of new out-patients amounted to 8,473 and that of old cases to 15,544, a total of 24,017, as compared with 5,364, 6,888, and 12,252 respectively in 1931.

The Port-Said Sanatorium is expected to begin work in 1933, as all arrangements are made for its inauguration in that year.

FOUNDLINGS HOMES

A.—Cairo Foundlings Home

Foundlings admitted in 1932	...	...	...	...	...	...	...	91
„ remaining from previous year	...	...	...	...	...	...	...	133
								— 224
Died	...	...	...	...	...	...	...	69
Adopted (including three children handed over to their parents)								22
Remaining till the end of the year 1932	...	...	...	...	...	...	...	133
								— 244
With wet nurses	...	...	...	...	...	...	...	106
At wards	...	...	...	...	...	...	...	27
								— 133

B.—Alexandria Hospital Foundlings Home

Foundlings admitted in 1932	...	...	...	...	...	...	...	58
„ remaining from previous year	...	...	...	...	...	...	...	42
								— 100
Died	...	...	...	...	...	...	...	37
Adopted	...	...	...	...	...	...	...	1
Remaining (all at wards)	...	...	...	...	...	...	...	62
								— 100

N.B.—A special report is issued on the work of the Kasr el Aini Foundlings Home.

CHILDREN DISPENSARIES

The Damanhour Children Dispensary belonging to Behera Provincial Council has been converted into a Child Welfare Centre during 1932. The number of such dispensaries was thus reduced to four.

In view of the valuable services rendered by the Child Welfare Centres, it is hoped that the remaining dispensaries will in future be converted into such centres.

Statistics showing the work of these dispensaries are shown hereafter (see Table No. 44).

TABLE NO. 44.—SHOWING THE CASES TREATED AT CHILDREN DISPENSARIES BELONGING TO PROVINCIAL COUNCILS DURING 1931 AND 1932.

Dispensary	Number of out-patient attendances		Number of days work	
	1931	1932	1931	1932
Damanhûr	36,313	9,350	299	93
Shebin el Kom	33,287	38,809	300	301
Beba	37,158	20,795	299	196
Wasta	44,458	28,186	299	196
Port Said	46,253	26,847	258	296

DAYAS (*Midwives*) SCHOOLS

A number of dayas are graduated every year after training at Dayas Schools. Their course of training embodies the modern methods of midwifery including the practice of cleanliness and sterilization, etc., in order to get the cases of puerperal fever reduced to the least possible number, and to substitute this well trained category of dayas for the old fashioned and aged ones. The number of dayas graduated this year and authorized to practice midwifery amounted to 264.

Having noticed that a certain number of the 20 candidates trained at Tanta Dayas School every session of 6 months, experience much inconvenience in proceeding to the said School from distant localities in the wide stretched province of Gharbieh, it was decided to open two new schools one at Mehalla-el-Kubra and the other at Kafr-el-Zayat. The number of candidates was distributed on the three schools namely: 10 were admitted into Tanta and the other ten in the two new schools, thus giving better chance to the candidates for more training in the near-by school than if they were all admitted into one school. It was, therefore, arranged that candidates of Mehalla el Kubra, Kafr el Sheikh, Sherbeen and Talkha districts were to be attached to Mehalla el Kubra School, those living at Kafr el Zayat, Fouah and Dessuk were to be admitted into Kafr el Zayat School and the candidates of the other localities of the Province were to be trained at Tanta Dayas School. These, as well as all other dayas schools, were annexed to the Child Welfare Centres concerned.

INSPECTION OF DAYAS' WORK

The Dayas Inspectresses do their best in inspecting the work of all dayas throughout Egypt twice a year. If a daya is found to be of such an old age that she is unable to carry out her work satisfactorily or in case she is found suffering from a disabling disease, arrangements are made for her examination by the Medical Commission for the withdrawal of her licence. The number of dayas whose licences were cancelled for such reasons was 108. During the year 1932, 93 dayas died.

CHILDREN SECTIONS

The number of Children Sections attached to general hospitals is still four, as in last year. Statistics of the work of these sections are shown hereafter (see Table No. 45)

TABLE NO. 45.—SHOWING THE OUT-PATIENT ATTENDANCE AT CHILDREN SECTIONS
IN GENERAL HOSPITALS.

	Out-patient attendances	
	1931	1932
Alexandria Children Section	10,170	17,075
Benha Children Section	18,127	17,152
Asyût Children Section	18,964	22,281

CHAPTER VI SOCIAL HYGIENE

(1) VENEREAL DISEASES

Hospitals and Clinics of Venereal Diseases.

Two new skin and venereal diseases clinics were opened this year and the number of these clinics has therefore become 16. The number of hospitals, where venereal diseases cases are treated is still three, namely: Hod-el-Marsoud (Cairo), Gabbari (Alexandria) and Suez annex of the General Hospital. The number of beds available for treatment in these hospitals amounted to 423.

The number of out-patients who attended the skin and venereal diseases clinics during 1932, amounted to 43,219 and the total number of their visits was 365,192.

3,850 women were treated at Hod-el-Marsoud and Gabbari Hospitals during the year. They are classified according to their diseases as follows:—

TABLE NO. 46

Name of hospital	Remaining from 1931	Admitted during 1932	Total	Venereal diseases	Gonorrhoea	Total
Hod-el-Marsoud	195	2,046	2,241	1,008	1,545	2,553 *
Gabbari	85	1,524	1,609	585	435	1,020 †

* 507 Syphilis and Gonorrhoea.

† 435 Skin diseases cases.

The following table shows the number of cases treated in the various hospitals as well as in the skin and venereal diseases clinics:—

TABLE NO. 47

	In-patients			Outpatients		
	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total
General and District Hospitals	1,056	1,753	2,809	11,143	6,411	17,545
Venereal Diseases Hospitals	1,593	1,980	3,573	—	—	—
Skin and Venereal Diseases Clinics	—	—	—	33,169	14,777	37,946
TOTAL	2,649	3,733	6,382	34,303	21,188	55,491

Hereunder are statistics showing the number of new and old patients who attended the skin and venereal diseases clinics during the last three years:—

TABLE NO. 48

Year	New cases	Old cases
1930...	29,101	231,228
1931...	30,445	259,248
1932...	43,219	365,192

(2) CHEST DISEASES

New Units.

The building of the Chest Diseases Dispensary at Mansoura, referred to in the previous year's report, has been deferred owing to the financial stringency. In the meantime, the Department continues to occupy rented premises.

X-Ray Outfits.

The X-Ray outfits installed in the two chest diseases dispensaries at Cairo were completed and brought into use during the year. Both installations are now working satisfactorily. The installation of the X-Ray apparatus at the chest diseases dispensary, Mansoura, is almost complete and it is expected to be brought into use in the immediate future.

Treatment.

In the chest diseases dispensaries, treatment was previously given to all patients suffering from diseases of the respiratory system, both tuberculous and non-tuberculous; but as the number of the tuberculous on the registers increased, treatment for the last few months of the year was confined to the tuberculous only, the non-tuberculous being referred to the general hospitals for treatment.

The number of new cases examined at the dispensaries during the year amounted to 20,519 as compared with 22,014 in 1931, a decrease of 6 per cent. 838 cases out of this number were found to be suffering from pulmonary tuberculosis, a percentage of 4.08 against 2.6 per cent last year. 17 cases out of 807 contacts were found positive for the disease. The number of house visits paid by the nurses during the year amounted to 1,696 and that by the Medical Officers to 177.

3.—HELMINTHIASIS: *Ankylostomiasis and Bilharziasis*

Treatment.

Carbon tetrachloride is still used in the treatment of intestinal helminthiasis. The toxicity of this medicine was dealt with in the introduction of this Report.

Distribution of infection among the new patients attending the various branches of the Endemic Diseases Section during the year 1932 :—

(1) *Ankylostoma and Bilharzia Units:*

(a) Number of new patients (urine examination for bilharzia)	620,522
Positive for urinary bilharziasis	357,402 = 57%
(b) Number of new patients (stools examination for bilharziasis)	599,818
Positive for bilharzia mansoni	122,963 = 20%
Positive for bilharzia haematobium	13,900 = 2%
Positive for amoebic dysentery	2,095 = 0.3%
(c) Number of new patients (faeces examination for ankylostomiasis)	599,818
Positive for ankylostomiasis	159,286 = 26%
Positive for ascariasis	306,168 = 51%
Positive for other intestinal parasites	60,086 = 10%
(d) Total cases of bilharziasis	409,364 = 65%
Positive for urine and stools parasites	540,459 = 86%

P.S.—The percentage given in para. (d) above is calculated in relation to number of new patients (627,172).

4.—LEPROSY

New Units inaugurated.

Two sub-clinics were inaugurated in connection with the leprosy clinic of Souhag one at Tahta (6-8-1932) and the other at Girga (8-8-1932).

Two sub-clinics were also similarly inaugurated in connection with the leprosy clinic of Zagazig, one at Kafr Sakr (6-11-1932) and the other at Minya El Kamh (14-11-1932).

The Leprosy Hospital at Abu Zaabal.

Final arrangements have been made for the completion of the leprosy hospital at Abu Zaabal, and it is anticipated that the hospital will be inaugurated by the beginning of the new financial year. When this has been done, infective lepers will be isolated and treated there until such time as they become bacteriologically negative and non-dangerous to the community.

Legislative measures are also under preparation for the segregation of all infective cases.

Increase of Accommodation in Leprosy Hospital, Cairo.

The alterations made in the leprosy hospital, Cairo, have allowed an immediate increase in accommodation from 30 to 55 beds with a further possible increase up to 100 if required.

The treatment of leprosy being of a prolonged character, many lepers who do not recover during the first year of treatment discontinue attending the units. This phenomenon is observed throughout the world.

Chaulmoogra Oil and its Derivatives.

An article on "Chaulmoogra Oil and its Derivatives in the Treatment of Leprosy" has been submitted for publication by Dr. J. Walker Tomb, Director of the Section during the year, in which, attention has been drawn to the pioneer work of the two Egyptian leprologists Tourtoulis Bey, sometime private physician to His Highness the late Sultan Hussein Kamel of Egypt and Engel Bey, sometime Director of Statistics of the Public Health Department of Egypt. The present day treatment of leprosy may be said to consist in the parenteral injection of chaulmoogra oil and of its ethyl esters, and attention has been drawn in the article to the fact that it was Tourtoulis Bey who introduced the method of parenteral injection of chaulmoogra oil in the treatment of leprosy in 1894, while Engel Bey was not only the first to use the total ethyl esters of the oil in this disease, but was also to a large extent responsible for their production in conjunction with Messrs. Bayer & Co., the well known chemical manufacturers of Elberfeld, Germany, in 1907.

New Patients.

Number of new patients	...	...	...	...	...	...	...	...	1,287
Positive for leprosy	...	...	...	...	...	...	...	...	486 = 38%

5.—OPHTHALMIC SECTION

New Units.

Three new Ophthalmic Branches were established during the year at Rosetta, Faqus and Gerga General Hospitals, the number of Ophthalmic Units reaching thereby 52 (38 of which are permanent and 14 travelling), *i.e.* 3 Ophthalmic Units more than last year and 30 Ophthalmic Units more than 1921.

The extension of the building of the In-patients' Section at Beni Suef Ophthalmic Hospital has been completed and utilised for the accommodation of extra in-patients.

TABLE NO. 48 —RETURN OF PULMONARY TUBERCULOSIS TREATED

Unit	Number of New Patients	Number of New Patients suffering																															
		Total	Under 5 years		From 5-10 years		From 10-15 years		From 15-20 years		From 20-25 years		From 25-30 years		From 30-35 years		From 35-40 years		From 40-45 years		From 45-50 years		From 50-55 years		From 55-60 years		Over 60 years		Merchants	Employees	Labourers	Peasants	
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
Sabtieh ...	9,228	242	1	—	4	6	4	6	20	8	43	15	30	16	19	13	14	10	12	2	5	1	5	3	1	1	3	—	17	10	98	13	
Mobtadain ...	7,391	423	4	1	7	11	11	16	56	23	53	24	66	18	29	14	28	12	16	5	8	5	7	3	3	1	1	1	14	29	129	29	
Mansoura ...	3,903	173	—	—	—	—	2	1	21	10	26	10	25	7	18	9	22	6	4	2	2	1	3	—	1	1	1	1	6	5	54	47	
TOTAL ...	20,519	838	5	1	11	17	17	23	97	41	122	49	121	41	66	36	64	28	32	9	15	7	15	6	5	3	5	2	37	44	281	89	

IN CHEST DISEASES DISPENSARIES DURING THE YEAR 1932

from Tuberculosis										Old Cases										Result of Treatment			No. of contacts examined	No. of T. B. contacts	No. of Deaths
Students	No occupation	Diagnosis				Hemoptysis	Cases under observation		Home visits		Total	Chest Diseases		Tuberculosis		Diagnosis				Improved	Stationary	Worse			
		Bact.	X-Rays		By Nurse				By M.O.	Bact.						X-Rays									
												Neg.	Pos.	Neg.	Pos.			M.	F.							M.	F.	Neg.	Pos.	Neg.	Pos.
13	91	48	178	—	64	75	233	546	103	13,476	5,651	5,234	1,433	1,158	—	1,734	—	857	42	20	48	233	9	49	
32	190	1168	211	312	212	48	210	721	—	10,878	3,984	5,076	1,080	738	506	1,014	44	736	65	68	15	411	6	30	
11	50	8	165	—	—	256	96	429	74	6,220	2,141	2,651	1,444	584	294	1,734	—	—	25	128	42	163	2	24	
56	331	1224	554	312	276	379	539	1696	177	39,574	11,776	12,361	3,957	2,480	800	4,482	44	1593	132	216	105	807	17	103	

TABLE NO. 49.—ANNUAL STATISTICS

Unit	Number of Patients			General Remarks										How Infection was					
	New Patients	Negative to Leprosy	Positive to Leprosy	Males	Females	Married	Single	Egyptians	Foreigners	Moslems	Coptic	Other Religious	Denies infection	Admits infection	Foreign contact	Family Contact	Father only	Mother only	Parents
Cairo	412	243	169	135	34	85	84	167	2	159	10	—	106	63	26	37	5	7	—
Zagazig	208	152	56	43	13	18	38	56	—	54	2	—	37	19	13	6	1	—	1
Suhag	191	89	102	96	6	62	40	102	—	84	18	—	68	34	13	21	7	1	—
Tanta	189	96	93	73	20	33	60	93	—	88	5	—	35	58	33	25	9	6	—
Minya	287	221	66	58	8	30	36	65	1	48	18	—	48	18	1	17	4	1	—
TOTAL	1287	801	486	405	81	228	258	483	3	433	53	—	294	192	86	106	26	15	1

Unit	Duration of Disease							Laboratory Findings											
	1 Year	2 Years	3-5	6-10	11-15	16-20	From 21 and upwards	Neg. Bc.	Pos. Bc.	Nose only	Skin only	Nose and Skin	Pos. Wr.	Neg. Wr.	Pos. Kh.	Neg. Kh.	Bilh.	Par.	Alb.
Cairo	23	26	63	42	10	5	—	48	121	30	1	90	37	102	—	—	70	72	96
Zagazig... ..	5	2	13	19	9	6	2	6	50	15	4	31	—	—	—	—	25	36	26
Suhag	12	15	32	29	6	7	1	34	68	26	—	42	—	—	—	—	1	13	7
Tanta	6	19	35	23	6	3	1	14	79	2	5	72	—	—	—	—	51	63	46
Minya	15	5	24	17	3	1	1	15	51	2	2	47	—	—	—	—	5	3	5
TOTAL	61	67	167	130	34	22	5	117	369	75	12	282	37	102	—	—	152	187	180

Unit	Cairo Gov.		Alex. Gov.		Damietta Gov.		Canal Gov.		Suez Gov.		Beheira Prov.		Gharbiya Prov.		Menoufiya Prov.		Dakahlia Prov.		Sharkiya Prov.	
	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence
Cairo	10	43	—	1	6	4	1	1	—	1	5	4	12	8	22	16	18	15	—	—
Zagazig	—	—	—	—	—	—	—	—	—	2	—	—	3	2	2	2	17	18	30	31
Suhag	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Tanta	—	—	—	—	—	—	—	—	—	—	1	1	50	54	31	31	8	7	—	—
Minya	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL	10	43	—	1	6	4	1	1	—	3	6	5	65	64	56	49	43	40	30	31

Unit	Serial No. of New Patients since date of Inauguration
Cairo	1,834
Zagazig	617
Suhag	608
Tanta	541
Minya	568
TOTAL	4,168

OF LEPERS—YEAR 1932

conveyed					Kind of Disease			Age of Patient on admittance							Age on Appearance of Disease												
Husband	Wife	Sons	Brothers	Relations	Skin	Nerve	Mixed	1-10	11-20	21-30	31-40	41-50	51-60	From 61 and upwards	1-5	6-10	11-15	16-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	From 61 and upwards
—	2	1	16	14	47	69	53	7	45	61	31	12	9	4	4	20	30	33	25	17	10	13	4	3	3	4	3
—	—	—	2	2	9	2	45	4	17	17	11	7	—	—	4	12	11	10	6	5	4	3	1	—	—	—	—
—	—	—	14	3	1	48	53	2	19	35	23	15	4	4	2	4	20	13	15	15	11	6	4	6	1	3	2
—	—	1	4	5	5	37	51	8	25	31	17	9	1	2	4	16	18	18	15	2	8	6	2	—	—	2	2
—	—	—	7	5	13	20	33	6	17	21	9	9	3	1	4	4	15	11	13	4	5	1	4	1	—	3	1
—	2	2	43	29	75	176	235	27	123	165	91	52	17	11	18	56	94	85	74	43	38	29	15	10	4	12	8

No. of Patients			Details of Special Treatment												General Treatment		
Number of absence	Number of attendants	Number of Pat. treated	Number of Dressings	Oil H.O.		E.C.C.O.		Anti. Leprone		Youdor Potas.		E.C.O.H.O.		Syphills	Bilh.	Parasites	
				No.	Q.	No.	Q.	No.	Q.	No.	Q.	No.	Q.				No.	Q.
4,275	3,688	14,778	9,289	5,792	10,017	4,959	9,122	3,119	3,119	33	256	—	—	—	867	41	
12,270	5,008	5,059	6,430	1,090	1,880	551	1,096	—	—	1,169	4,045	2,829	5,505	—	546	41	
8,955	4,527	7,083	1,681	2,002	3,932	4,344	3,539	360	360	3,236	10,609	309	579	—	—	—	
15,807	8,408	8,651	3,949	—	—	7,273	13,760	437	544	3,994	6,990	—	—	—	776	159	
5,605	5,362	5,428	3,874	4,692	10,944	426	1,000	—	—	870	5,230	—	—	—	273	5	
46,912	26,993	40,999	25,223	13,576	26,773	17,553	33,517	3,916	4,023	9,302	27,230	3,138	6,084	—	2462	246	

Kaliubia Prov.		Giza Prov.		Beni Suef Prov.		Faiyoun Prov.		Minya Prov.		Assiut Prov.		Girga Prov.		Qena Prov.		Aswan Prov.		Sinai Gov.		West Desert Gov.		South Desert Gov.		Abroad		In-patients
Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	Birth	Residence	
38	34	28	29	1	1	—	—	3	1	8	4	9	4	5	2	1	1	—	—	—	—	—	—	2	—	43
—	—	—	—	1	—	—	—	—	—	12	12	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	78	79	9	9	9	2	2	—	—	—	—	—	—	—	—	—	—
—	—	—	—	1	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—
38	34	28	29	3	1	—	—	38	47	47	36	91	84	18	11	3	3	—	—	—	—	—	—	3	—	43

Number of Negative Patients after Examination	Number of Positive Patients after Examination
1,064	770
412	205
290	312
254	287
427	141
2,453	1,715

Ophthalmic Units proposed for the 1933-1934 Budget.

(1) *An Ophthalmic Hospital at Samalout at the expense of Minia Provincial Council.*

The Minia Provincial Council paid the Department of Public Health the sum of L.E. 5,447 being the cost of the building and equipment required for the accommodation of 21 in-patients. The State Building Department has taken the necessary steps for the execution of the work.

(2) *Three Ophthalmic Branches at General Hospitals.*

(3) *A Travelling Ophthalmic Hospital with an accommodation for 20 in-patients.*

Projects under Consideration.

Extension of the In-patients' Section at Demerdashe General Hospital (Abbassia), owing to its being overcrowded with patients and therefore inadequate with their increasing demands.

The following table No. 50 shows the clinical work performed during 1932 as compared with that of 1931:—

TABLE NO. 50

	1931	1932	Increase in 1932
			%
New Patients... ..	634,088	714,551	13
In-patients	22,188	23,128	4
Operations	220,823	242,365	10
Outpatients attendances	5,023,175	5,711,654	14

Blindness.

The number of patients who were found blind in one or both eyes, excluding cataract cases causing blindness, was 48,165, i.e. a rate of 6.5 per cent of the total number of patients examined at the Ophthalmic Hospitals. This percentage would reach 6.9 per cent if the cataract cases causing blindness were added.

Acute Ophthalmias form 80 per cent of the whole pathological causes of blindness. The gonococcal is still the predominant factor of infection with acute ophthalmias. It forms 47 per cent of the total microbes.

Age of Patients.

Out of 714,551 new patients treated, 42,055 or 5.88 per cent were under the age of one year, 242,742 or 33.83 per cent from one to fifteen years of age and 424,465 or 59.40 per cent from one to thirty years of age. This shows that the inhabitants recognise the importance of ophthalmic treatment of infants, children and youths.

School Clinics.

Ophthalmic examination, inspection and treatment are, at present, carried out at 32 Primary Government Schools.

10,618 pupils were examined, of whom 97 per cent were found to be suffering from trachoma in its various stages. About 39 per cent of these were in the serious stages of the disease (trachoma I and II), this percentage fell to 20 per cent as a result of ophthalmic treatment. The higher percentage was due to examining the conjunctiva of pupils by a Magnifier (Zeiss Type). By this means the examining surgeon could see very fine trachoma follicles which could not be easily seen by the naked eye.

It is worth mentioning here, that the Government schools are the best places where an accurate percentage as to the extent of trachoma amongst pupils, can be obtained. This is due to the fact that the examination and treatment are carried out in a special regular and permanent way on pupils who are always under continual observation of treating doctors.

Pupils of 30 other Primary Schools and Kuttabs belonging to the Provincial Councils in Markazes (Districts), where permanent or travelling ophthalmic hospitals exist, received ophthalmic treatment.

Expenditure.

The upkeep of the Ophthalmic Hospitals, during the year 1932, including the Central Administration and Ophthalmic Clinics at the Primary Schools amounted to L.E. 82,931 which is significant of proper economical management.

The cost of maintenance of one out-patient was 11.38 milliemes per day. The In-patient cost about 24 extra milliemes daily for food.

Accommodation.

The number of beds reached 1,210 with an increase of 48 beds more than last year (of the 48 beds, there are 34 beds at the new units and 14 beds at the Ophthalmic Branch, Alexandria General Hospital).

Post-Graduate Course of Ophthalmology.

During April 1932, the number of Medical Officers who underwent post-graduate instruction in Ophthalmology was 22 ; of these 5 were inspected in the preliminary clinical course, and 2 only passed. Out of 9, inspected in the final clinical course, 8 passed.

During October their number was 21, of whom 8 were inspected in the preliminary clinical course and they all failed ; 3 were inspected in the final clinical and they all passed. Those who failed for the first time were given another chance but those who failed for the second time were transferred to other branches of the Department.

Providing the Ophthalmic Hospitals with up-to-date Appliances.

A Slit Lamp and Corneal Microscope have been supplied to the Ophthalmic Units at Mansourah, Beni Suef, Zagazig, Shebin El Kom, Benha, Qena and Demerdash (Abbassia).

6.—LUNACY DIVISION

Accommodation and New Works.

Owing to economic conditions the programme for the extension of accommodation by building new mental hospitals and the enlargement of the existing ones has had to be curtailed in conformity with other departments, and the only work now in prospect is the improvement of the water and electrical supply at Khanka Mental Hospital which had reached its extreme limit, and in fact no extension could be done there until this was accomplished.

Admissions.

The very high admission rate to accommodation was maintained, the numbers last year were unduly swollen owing to the 500 odd voluntary drug addicts admitted whereas this year they are only 74. These cases would probably have been sent here under certification if they had not been allowed to come voluntarily.

In regard to the recent serious wave of drug addiction we wrote in 1928: "Every new folly, however ridiculous it might be, was taken up with unreasoning enthusiasm but if found harmful it was dropped and relegated to the degenerate and vicious classes," and this seems to be confirmed in the case of drug addiction ; the more sensible have apparently recognised its dangers and the others are severely handicapped by recent repressive legislation. In fact we have been impressed by the recent statements of many habitual criminals and others to the effect that drugs are very difficult to obtain now and that they are "snuffing" other substances, one said he had taken to a mixture of quinine and arsenic. It is hoped that the latter substance does not become popular ; the arsenic eating habit is not unknown in some countries.

Physical Treatment of Patients

The treatment of patients in their physical ailments has been improved by the regular attendance of an eye specialist and a dentist, not only are the patients better cared for in these particulars, but it has increased the confidence of the visitors and they seem to realise that their patients are carefully looked after.

The installation of an X-ray apparatus has not only been a great convenience but has also been a very decided asset in the matter of diagnosis and confirmation of injuries, although we were able formerly to get this work done at the large general hospitals yet only certain cases could be sent and probably obscure injuries and abnormalities were sometimes overlooked. One example of its value is illustrated in the case of a woman who was admitted with a sinus in the upper arm but with no history of injury. A photograph showed that the bone had been fractured and plated at some time and that the plate with its four screws was in situ and had become septic. It was removed very easily.

An ultra-violet rays apparatus is being installed.

The Out-patients Clinic.

The out-patients clinic at Abbassiya Mental Hospital is becoming more and more popular and now equals 7 per cent of the Hospital admissions, and has certainly saved many from becoming inmates. It is somewhat abused by some of the well-to-do but it is possibly because they think they are more likely to get better treatment from those who are always treating mental cases than they could obtain elsewhere.

Admission and Discharge of Patients.

The total number of patients admitted into the mental hospitals during the year 1932 amounted to 1,779 including 74 drug addicts as compared to 2,225 including 497 drug addicts in 1931.

The average daily number of patients in residence at the mental hospitals was 3,391.

Of the patients discharged in 1932, 125 were recovered, 621 relieved, 205 not improved, 87 found not insane, 1 escaped and 393 (i.e. 7.8% of the total cases treated) died.

Lectures.

A series of lectures on mental diseases were delivered by the Director, Lunacy Division, to students of the Faculty of Medicine during the winter.

The Sub-Directors of the two Mental Hospitals give yearly a course of lectures, on the management of the insane, to the nursing staff.

Khanka Farm.

The Farm at Khanka Mental Hospital continues to pay its way. It should be remembered that a mental hospital farm is not, and should not be run as a commercial speculation. Its main object is to provide a place where patients can be kept occupied with a view to their mental improvement to a condition to sustain themselves in their life outside in the event of their possible future discharge.

Economies.

An economy of about L.E. 500 per annum and a decided improvement in the management of the insane have been affected by abolishing all the reserve night staff who were made to sleep in the wards and replacing them by reduction from the day staff. The economy came about by the consequent reduction of the number of "full diets".

The arrangement by which attendants were made to sleep in as reserves was antecedent to 1902. They could not be allowed to sleep in the sections with their keys and were thus handicapped. There was always the excuse that they were asleep at the time of an emergency, and they were largely useless; any evidence required was uncorroborated, it could only be obtained from the one man on duty and was liable to be abused.

TABLE NO. 51.—ADMISSIONS, RE-ADMISSIONS, DISCHARGES AND DEATHS.

	Khanka	Abbassiya			Total	Grand Total
	Males	Males	Females	Total		
In Hospitals on January 1, 1932	1,467	679	1,081	1,760	3,227	3,227
<i>Cases admitted.</i>						
First admission	653	208	392	600	1,253	
Re-admission	201	85	145	230	431	
Voluntary admission	72	20	3	23	95	
TOTAL ADMISSIONS						1,779
TOTAL CASES TREATED IN THE YEAR						5,006
<i>Cases Discharged or Dead.</i>						
Recovered	72	19	34	53	125	
Still insane	391	129	306	435	826	
Not insane	22	59	6	65	87	
Escaped	1	—	—	—	1	
Died	219	35	139	174	393	
TOTAL CASES DISCHARGED OR DEAD						1,432
Remaining in Hospitals on December 31, 1932	1,704	733	1,136	1,869	—	3,574
Average daily number resident	1,567	706	1,109	1,815	—	3,391
Persons admitted	922	248	516	764	—	1,686
Maximum daily number resident	1,714	745	1,147	1,892	—	3,606
Minimum daily number resident	1,436	677	1,057	1,734	—	3,170
ACCOMMODATION	1,200	574	949	1,523	—	2,723

NOTES.—Transfers between the two Hospitals during the year totalled 42 from Abbassiya and 26 from Khanka.

The Voluntary admissions include 74 drug addicts.

Abbassiya Mental Hospital admits all female cases, all criminals for examination and report, and also all private, consular and Cairo cases.

Khanka Mental Hospital admits non-paying male patients and accommodates the criminal lunatics.

TABLE NO. 52.—FORMS OF INSANITY OF PATIENTS ADMITTED.

	Males		Females	Total
	Abbassiya	Khanka		
Mania Depressive	31	96	186	313
Primary Dementia	91	201	171	463
Secondary Dementia	29	48	41	118
General Paralysis	20	38	6	64
Drug Insanity (and 74 drug addicts)	{ 14 3	{ 45 70	{ 1 1	134
Insanity with epilepsy	8	26	12	46
Confusional Insanity	16	83	76	175
Paranoia	9	10	5	24
Weakmindedness, Imbecility and Idiocy	27	236	17	280
Post-febrile Insanity	—	5	—	5
TOTAL	248	858	516	1,622

CHAPTER VII

GENERAL HOSPITALS SECTION

NEW UNITS

The following units were opened this year:—

5 *Markaz Hospitals* at: Kafr El Dawar, Sherbin, Mina-el-Qamh, El Fashn and Dishna.

12 *Village Hospitals* at: El-Korain, Abu-Hammad (Zagazig), Beni-Mohammed, EL Ma'abda (Abnoub), Siflaq, El Galawia (Akhmim), Nakada (Qus), El-Ballas (Qena), El Sibaiya, El Bosailiya (Edfu), Kafr Daoud (Kom-Hamada), Daraw (Aswan).

2 *Veneral Diseases Clinics* at: Gamalieh (Cairo) and Minya.

The following table shows the total number of units existing up till the end of December 1932 :—

TABLE No. 53

Kind of unit	Existing before 1925	New Units opened in each of the years							Total
		1926	1927	1928	1929	1930	1931	1932	
General Hosps. in Mudirias and Governorates Chief Towns ...	18	—	—	—	—	—	1	—	19
Markaz Hospitals	5	2	1	1	1	15	12	5	42
Village Hospitals	—	—	—	—	5	22	7	12	46
Out-patients clinics*	3	1	—	—	—	—	—	—	2
Number of beds	3,043	190	99	224	141	575	703	633	5,984

* Owing to the inauguration of two Markaz Hospitals at Tala and Fashn, the out-patient clinics there were closed.

NEW ESTABLISHMENTS

New Section at Kasr El Aini Hospital.

„ „ „ Alexandria Hospital.

„ „ „ Mehalla El Kobra Hospital.

Markaz Hospital at Shebin-El-Kanater.

Village Hospital at El-Ghorayib (Zifta District).

„ „ at El-Zawamil (Belbeis District).

Conversion of Edfina Village Hospital into a Markaz Hospital.

Starting the building of Tanta New Hospital.

TREATMENT

The following table shows the number of in and out-patients treated at the various hospitals and clinics :—

TABLE No. 54.

Number of patients treated	1930	1931	1932
In-patients	85,631	95,765	110,626
Out-patients	1,148,178	1,649,526	2,058,404
Number of attendances to Out-patients Sections ...	2,523,928	3,623,050	4,617,699
Patients treated in Out-patient Clinics and Village Hospitals	163,125	376,391	542,830
Number of attendances to O.P. Clinics and Village Hospitals	335,495	783,501	1,130,850

A detailed list of Hospitals and patients treated during 1932 is appended to this Chapter.

TABLE No. 55.—OPERATIONS AND X-RAYS EXAMINATIONS

Year	In-patients Operations	Out-patients Operations	Total	X-Rays Examinations
1930	26,764	7,752	34,516	19,018
1931	36,542	20,608	57,150	25,150
1932	44,839	35,792	80,631	50,434

DEATHS

During the year 1932, 110,626 in-patients were treated in hospitals of whom 6,148 died, *i.e.* a rate of 5.55 per cent.

Were it not for the dangerous cases that reached the hospital in a hopeless condition the percentage of deaths would have not reached this figure.

EXPENSES

The expenditure incurred during the year 1932 for the upkeep of hospitals amounted to L.E. 355,025. The total amount of expenses for the last three years is shown hereafter

TABLE No. 56

	1930	1931	1932
Days of treatment	1,306,219	1,426,294	1,595,279
Total Expenses	L.E. 273,440	L.E. 326,336	L.E. 355,025
Expenses per patient per day	Mills. 209	Mills. 228	Mills. 222
Expenses per patient per year	L.E. 76.285 m.	L.E. 83.220 m.	L.E. 81.030 m.
Average number of days stayed by each patient in hospital	15.3 days	14.9 days.	15.4 days

TABLE No. 57.—LIST OF HOSPITALS AND PATIENTS TREATED THEREIN DURING 1932.

Hospital	Number of Beds					In-patients Sections					Out-patients Sections					
	Patients					Optalmic Branches	Officials and others	Total	Patients treated during the year			Discharged			New Cases	Old Cases
	1st Class	2nd Class	Special 3rd Class	Ordinary 3rd Class	Children				Cured	Per cent Relieved	Per cent	Died	Per cent			
*Qasr-el-'Aini...	—	—	—	986	44	—	1,257	15,305	6,882	22,187	—	88	1,768	8	257,808	810,786
*Alexandria ...	3	12	—	500	31	47	636	7,869	4,004	11,873	5,289	44.5	797	6.7	99,488	350,422
*Demerdash ...	—	14	—	69	—	16	135	1,077	908	1,985	1,438	72.5	33	1.6	59,092	122,453
*Assiout ...	—	—	—	163	7	—	189	2,654	1,087	3,741	2,701	72	246	6.8	48,900	78,614
*Tanta ...	1	2	—	170	—	—	177	5,190	1,937	7,127	2,829	38.2	335	4.8	65,82	132,235
*Port Said ...	4	6	—	146	3	—	178	2,460	1,291	3,751	2,170	77.8	183	4.8	52,136	92,700
*Mansourah ...	1	7	—	162	—	—	173	2,134	178	3,312	2,043	61.6	193	5.8	68,711	103,956
*Suez ...	5	9	—	115	2	25	164	1,942	1,185	3,127	2,317	74	102	3.2	23,694	46,192
*Zagazig...	1	3	—	177	—	—	195	2,506	855	3,361	1,528	45.7	175	5.2	51,596	97,617
*Benha ...	—	—	—	100	14	—	115	1,759	580	2,339	1,377	58.8	110	4.7	41,320	61,738
*Damietta ...	2	2	—	72	—	35	125	1,728	1,245	2,973	1,374	46.2	63	2.1	31,311	59,816
*Beni-Suef ...	—	2	—	98	—	—	102	1,288	366	1,654	1,201	72.6	123	7.4	53,976	74,056
*Fayoum ...	1	2	—	97	—	—	102	1,480	566	2,046	1,214	59.3	193	9.4	46,573	83,059
*Souhag ...	—	2	—	93	—	—	101	856	357	1,213	854	70.4	102	8.4	33,570	62,141
*Damanhour ...	—	2	—	103	—	—	106	1,618	490	2,108	861	40.8	168	8.3	32,056	56,159
*Luxor ...	6	6	—	38	—	25	88	760	622	1,382	387	28	46	3.3	21,635	42,344
*Isna ...	—	—	—	51	—	24	83	801	488	1,289	635	19.9	24	1.7	16,684	34,021
*Shebin-el-Kôm ...	1	1	—	92	—	—	95	1,176	550	1,726	1,172	67.9	97	5.6	39,668	84,160
*Qena ...	—	1	—	90	—	—	93	740	355	1,095	695	63	27	2.4	27,969	41,330
*Minya ...	1	1	—	83	—	—	87	1,109	421	1,530	1,173	76.6	62	4.0	30,480	69,289
*Qalioub ...	2	2	—	74	—	—	78	974	471	1,445	761	52.6	62	4.2	28,328	70,290
*Aswân ...	1	2	—	45	—	23	73	891	369	1,260	881	69.9	38	3.0	15,244	42,166
*Tayiba ...	—	—	—	32	—	8	41	854	261	1,115	796	71.3	23	2.0	34,904	56,975
*Mit Ghamr ...	—	—	—	35	—	10	49	833	385	1,218	735	60.3	81	6.6	61,930	134,024
Tahta ...	—	—	—	26	—	—	26	633	218	851	487	57.2	41	4.8	31,052	55,582
El Fikria ...	—	—	—	22	—	13	38	622	313	935	682	72.9	48	5.0	32,172	92,190
Mallawi...	—	—	—	12	—	9	23	603	281	884	555	62.7	69	7.8	29,313	53,569
Barreem ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	23,729	53,204
Maghagha ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	21,398	61,259
Kôm Ombo ...	—	—	—	22	—	—	24	195	44	239	134	56	18	7.5	11,709	25,331
Manzala ...	—	—	—	32	—	—	35	460	152	612	487	79.5	23	3.7	25,040	39,623

Fayous ..	...	30	85	18	4,638	101	277	505	5,654	73,722	33,054	106,776	51,815	48,544,612	41.7	6,148	5.7	2,032,001	4,617,839
Dessouk ..	...	—	—	—	24	—	8	3	35	578	208	786	638	81	87	11	33	4.1	22,757
Beni-Mazar ..	...	—	—	—	24	—	8	4	36	595	344	939	711	75.7	174	18.5	25	2.7	30,049
Rosetta ..	...	—	—	—	32	—	—	3	35	446	93	539	345	64	124	24	38	7	16,387
Edfou ..	...	—	—	—	22	—	10	3	35	374	113	487	309	61.3	146	29	12	2	25,655
Akhmim ..	...	—	—	—	32	—	—	3	35	357	115	472	327	69	108	23.0	15	3.0	9,822
Ashmoun ..	...	—	—	—	32	—	—	3	35	339	117	456	278	61	122	26.0	29	6.4	23,678
Badari ..	...	—	—	—	24	—	8	3	35	382	194	576	359	62.2	162	28	34	5.6	35,985
Sahel Selim ..	...	—	—	—	32	—	—	3	35	348	158	506	405	80.2	49	10.0	27	5.0	23,001
Girga ..	...	—	—	—	32	—	—	3	35	388	232	620	457	73.7	117	19.0	21	3.3	23,672
El Safi ..	...	—	—	—	24	—	8	3	35	423	220	643	440	68.4	141	21.3	40	6.2	25,787
El Wasta ..	...	—	—	—	32	—	—	3	35	408	184	592	262	44.2	269	45.7	38	6.5	17,583
El Delingat ..	...	—	—	—	32	—	—	3	35	593	247	840	591	67.8	192	23.9	27	3.3	24,765
Etsa... ..	...	—	—	—	32	—	—	3	35	466	148	614	411	65.3	167	26.5	26	4.2	18,608
Shubrakheet ..	...	—	—	—	32	—	—	3	35	343	142	485	327	67.5	107	22.0	38	7.5	14,231
Fareskour ..	...	—	—	—	32	—	—	3	35	473	111	584	409	70.0	143	24.0	13	2.0	15,406
Simbellawein ..	...	—	—	—	32	—	—	3	35	500	257	757	558	73.0	164	21.0	17	2.0	37,894
Tala... ..	...	—	—	—	32	—	—	3	35	632	227	859	717	82.0	66	7.0	58	6.0	27,731
Belbeis ..	...	—	—	—	32	—	—	3	35	525	231	756	334	41.5	357	46.3	42	5.5	22,624
Samalout ..	...	—	—	—	32	—	—	3	35	603	195	798	475	59.5	254	31.8	51	6.0	21,255
Dairout ..	...	—	—	—	32	—	—	3	35	392	114	506	247	48.7	192	32.0	37	7.3	12,385
Balyana ..	...	—	—	—	32	—	—	3	35	549	244	793	342	43.0	380	47.7	48	6.0	28,866
Qous ..	...	—	—	—	32	—	—	3	35	700	221	921	650	70.5	211	23.5	38	4.0	23,471
Zawy-t el Naoura...	...	—	—	—	32	—	—	3	35	380	141	521	334	64.0	151	23.9	17	3.2	15,416
Kafr El Dawar ..	...	—	—	—	32	—	—	3	35	441	178	619	290	46.8	260	42.0	35	5.6	19,543
Sherbeen... ..	...	—	—	—	32	—	—	3	35	184	68	252	149	59.1	58	23	20	7.9	15,534
Minia El Kamh ..	...	—	—	—	32	—	—	3	35	254	114	368	227	61.6	109	29.6	12	3.2	23,954
El Fashn ..	...	—	—	—	32	—	—	3	35	451	205	656	514	78.3	93	14.1	22	3.3	20,587
Dishna ..	...	—	—	—	32	—	—	3	35	290	87	377	245	64.9	94	24.8	19	5	20,458
*El Mahallael Kubra	...	—	—	—	47	—	—	3	35	296	84	380	242	36.6	94	24.7	20	5.2	11,868
TOTAL ...	...	30	85	24	5,046	101	277	514	6,077	73,722	36,904	110,626	54,331	49.2	45,575	41.3	6,148	5.5	2,061,974

(LOCK HOSPITALS)

Hod-el-Marsûd ..	...	—	—	—	264	—	—	6	270	—	2,241	2,224	1,055	47	963	43.3	—	—	2,046
Gabbary... ..	...	—	—	—	144	—	—	3	153	—	1,609	1,609	1,461	90.8	—	—	—	—	1,524
GRAND TOTAL ..	...	30	85	24	5,046	101	277	514	6,077	73,722	36,904	110,626	54,331	49.2	45,575	41.3	6,148	5.5	2,061,974

Hospitals marked * are furnished with X-ray apparatus.

TABLE No. 58.—RESUMÉ OF BEDS IN HOSPITALS

Names of Hospitals	1st class	2nd class	3rd Europ.	3rd Egypt.	Children	Oph. Branch	Total Patients	Insp. Rest Houses	House Doctor	Mumar- ridat	Nurses Staff	Total Staff	Grand Total
General Hospitals	30	85	18	3,651	101	235	4,120	23	88	233	65	409	4,529*
Markaz Hospitals	—	—	—	987	—	42	1,029	31	—	65	—	96	1,125†
Lock Hospitals	—	—	6	408	—	—	414	—	—	6	3	9	423
Village Hospitals	—	—	—	184	—	—	184	—	—	—	—	—	184
GRAND TOTAL	30	85	24	5,230	101	277	5,747	54	88	304	68	514	6,261

* Including 235 in Ophthalmic Branches.

† " " " " " "

CHAPTER VIII

PHARMACIES

PRIVATE PHARMACIES

The Department has granted, during the year 1932, 21 permits for opening new private pharmacies, 18 of which owned by local subjects (8 owned by qualified pharmacists and 10 by non-pharmacists) and the remaining 3 pharmacies owned by foreigners (1 owned by a qualified pharmacist and 2 by non-pharmacists). 14 pharmacies were closed, 11 of which owned by local subjects (6 owned by qualified pharmacists and 5 by non-pharmacists) and the 3 pharmacies owned by foreigners (2 by qualified pharmacists and 1 by a non-pharmacist).

The total number of pharmacies existing in the country amounted to 437, of which 334 owned by Egyptians (203 owned by qualified pharmacists and 131 by non-pharmacists) and 103 by foreigners (57 owned by qualified pharmacists and 46 by non-pharmacists).

PHARMACIES ANNEXED TO PUBLIC HEALTH OFFICES

There were 47 small pharmacies, during 1931, attached to District Health Offices for dispensing medicine to patients, in the localities deprived of private pharmacies, hospitals, or clinics. 19 of these small pharmacies were closed down on account of establishing new District and Village Hospitals in some of the localities where these pharmacies had existed. The remaining number of these pharmacies is now 28.

NIGHT SERVICE PHARMACIES

These pharmacies exist in Cairo and are now six in number, one being increased at Zeitoun, and have dispensed 2,994 prescriptions at night during the year 1932 in addition to specialities and patent medicines issued without prescriptions.

MEDICAL PRACTITIONERS WHO PREPARE DRUGS IN THEIR CLINICS FOR THEIR PRIVATE PATIENTS

Nine Medical Practitioners notified the Department this year of preparing drugs for their private patients: 3 at Cairo, 3 at Dakahlieh, 1 at Gharbieh and 2 at Assiout.

The number of such Medical Practitioners thus amounting to 224: 36 at Cairo, 13 at Alexandria and the rest in the Provinces.

POISONOUS DRUG STORES

The Department granted 55 permits for dealing in medicinal poisonous drugs, 22 permits for commissioners, and 33 for drug stores.

Three permits of commissioners and 13 of drug stores were cancelled.

The actual number of commissioners in Egypt at the end of the year was 160 and that of drug stores was 107.

SIMPLE DRUG STORES

The Department granted 20 permits for simple drug stores: 3 at Cairo, 7 at Alexandria, 9 in the Provinces, and one in the Governorates, and 36 permits were cancelled.

The actual number of simple drug stores on the register *ad-hoc* was 216, of which there are 47 at Cairo, 28 at Alexandria, 125 in the Provinces and 16 in the Governorates.

EGYPTIAN SPECIALITIES

The Department has approved of the preparation and sale of 69 Egyptian specialities and refused the registration of nine specialities.

The actual number of Egyptian specialities registered by the Department is 319.

STUDENTS OF PHARMACY

The number of students of Pharmacy graduated at Kasr el Aini Hospital, Cairo, who were authorized by the Department, during the year 1932, to pass the statutory period of training in Pharmacies, amounted to 13, and the number of those graduated at foreign Colleges of Pharmacy and granted this authorization was 11. The total number was thus 24.

PROJECT OF EGYPTIAN PHARMACEUTICAL CODEX (*Pharmacopeia*).

The Committee constituted for the drafting of this codex is still in work.

THE INTERNATIONAL OPIUM CONVENTION

The Department, in compliance with this convention, furnished the League of Nations, in 1932, with the following statistics :—

(1) List of stupefacients confiscated for illicit import or export, shown in the following table No. 59.

(2) List of the stupefacients imported into Egypt and those exported therefrom every three months. The following table No. 60 shows the quantities of such stupefacients dealt with during the year 1932.

(3) List of stupefacients purchased for the use of the Government and those consumed for other purposes.

(4) List of stupefacients in stock at the wholesale stores at the end of 1932.

(5) List of the stupefacients expected to be imported during 1933.

The following five tables show the quantities of stupefacients imported, exported, confiscated, consumed for non-government purposes and those in stock at the wholesale stores at the end of 1932, compared with the quantities of 1931 :—

TABLE No. 59.—STUPEFACIENT DRUGS CONFISCATED FOR ILLICIT IMPORT OR EXPORT
IN 1931 AND 1932

Name of Drug	Quantities confiscated in 1931	Quantities confiscated in 1932
Opium	10,166 kilos.	1,043 kilos
Morphine	2 „	0.5 „
Heroin	66 „	25 „
Cocaine	2 „	3 „
Cannabis Indica	11,384 „	8,725 „

TABLE No. 60.—SHOWING QUANTITIES OF STUPEFACIENTS IMPORTED AND THOSE EXPORTED
IN 1931 AND 1932.

Name of Drug	Quantities imported in 1931	Quantities imported in 1932	Quantities exported in 1931	Quantities exported in 1932
Opium and its preparations	52,622 grms.	144,520 grms.	2,670 grms.	300 grms.
Morphine and its salts	6,857 „	9,254 „	43 „	78 „
Heroin and its salts	88 „	982 „	944 „	5 „
Eucodal	420 „	792 „	—	—
Cocaine and its salts	8,677 „	11,337 „	17 „	15.7 „
Cannabis Indica (tinct. and extract)	3,965 „	2,065 „	23 „	—

TABLE NO. 61.—QUANTITIES OF STUPEFACIENTS IN STOCK AT THE WHOLESALE STORES
AT THE END OF 1931 AND 1932.

Name of Drug	Quantity in stock at the end of 1931	Quantity in stock at the end of 1932
Raw Opium	206 kilos.	206 kilos.
Medicinal Opium	26 "	27,567 grams
Morphine and its salts	5,734 grams	4,841 "
Heroine and its salts	824 "	891 "
Eucodal	180 "	243 "
Cocaine and its salts	6,092 "	3,001 "
Cannabis Indica (tinct. and ex- tract)	9,413 "	9,595 "

TABLE NO. 62.—QUANTITIES OF STUPEFACIENT DRUGS CONSUMED IN 1931 AND 1932
FOR NON-GOVERNMENT PURPOSES.

Name of Drug	Quantities of 1931	Quantities of 1932
Opium and its preparations ...	41 kilos.	42 kilos.
Morphine and its salts... ..	4 "	8 "
Cocaine and its salts	7 "	11 "
Cannabis Indica (tinct. and ex- tract)	6 "	2 "

TABLE NO. 63.—QUANTITIES OF STUPEFACIENT DRUGS EXPECTED TO BE IMPORTED
DURING 1933.

Name of Drug	Quantity
Medicinal Opium and its prepa- rations... ..	135 kilos.
Morphine and its salts	9 "
Cocaine and its salts	13 "
Eucodal	1 "
Cannabis Indica (tinct. and ex- tract)	4 "

PERMITS OF MEDICINAL PLANTS

The Department granted two permits for dealing in medicinal plants. The actual number of the persons authorized is 8.

CONTRAVENTIONS TO LAW

The number of cases of contravention brought by the department before the Courts amounted to 103, of which 7 were for offenders dealing in simple drugs without authorization, 24 for trading in poisonous drugs without permits, 6 for dealing in adulterated drugs, 5 for practising pharmacy without authorization, 7 for trading in unregistered specialities and 11 for pharmacists contravening the Law.

Two persons were committed for trial, one for adulteration of drugs and the other for contravening the Law dealing with stupefacient drugs.

Sentences of fine or closure or simple imprisonment were passed in fifty-eight contraventions.

LAWS AND MINISTERIAL ARRÊTÉS

A Ministerial Arrêté was issued on April 21, 1932, prohibiting the sale of medical specialities containing poisonous substances without prescriptions.

A Ministerial Arrêté was also issued on June 2, 1932 (inserted in the Official Journal No. 56 of June 30, 1932) striking out certain specialities containing stupefacient drugs in quantities more than those specified in Art. 1 of the Law No. 21, of 1928, regulating the trade and use of stupefacients, owing to the fact that the Health Committee, in the League of Nations, after taking the opinion of the Permanent Committee of the International Public Health Office at Paris, considered that these specialities do not constitute the habit of drug addiction.

PROJECT LAW REGULATING THE CHEMICAL AND BACTERIOLOGICAL LABORATORIES

The project of this law, after being examined by the Department, was sent to the Contentieux for revision from a legal point of view. It will then be submitted to the Legislative Committee, Ministry of Justice, to take the necessary procedures for its promulgation.

CONVENTION OF LIMITING THE MANUFACTURE AND REGULATING THE DISTRIBUTION OF STUPEFACIENTS

The Council of Ministers approved in its meeting of December 8, 1932, of Egypt's adherence to this Convention, signed in Geneva on July 13, 1931. It has also approved of submitting to the Parliament a project law enforcing this convention in Egypt.

B.—The following table shows the origin of medical diplomas whose holders were authorized to practice medical professions during 1932 :—

TABLE No. 67

Profession	Egypt	France	Great Britain	Lebanon	Germany	Austria	Switzerland	Greece	Italy	America	Total
Medical Practitioners	101	15	13	10	7	6	5	3	2	1	163
Veterinary Surgeons	9	—	1	—	—	—	—	—	1	—	11
Dental Surgeons	13	7	1	6	—	—	1	—	—	—	28
Pharmacists	10	—	1	2	—	—	1	—	—	—	14
Midwives	33	—	—	—	—	—	—	—	1	—	34

(4) During 1932 the following numbers of medical practitioners, pharmacists and dental surgeons holding foreign diplomas sat for the State Examinations for the purpose of obtaining permits to practise in Egypt. The following table shows the details of the result of the State Examinations held during the said year :—

TABLE No. 68

Kind of Examination	Number of those who sat for the Examination in 1932	EGYPTIANS		FOREIGNERS		TOTAL	
		Succeeded	Failed	Succeeded	Failed	Succeeded	Failed
Medicine	48	25	4	10	9	35	13
Pharmacy	8	3	3	1	1	4	4
Dentistry	25	8	10	4	3	12	13

The following table shows the percentage of success in the State Examinations held during the years 1930, 1931 and 1932 :—

TABLE No. 69

Kind of Examination	1930	1931	1932
	%	%	%
Medicine	76	71	72
Pharmacy	58	35	50
Dentistry	33	35	48

(5) On the occasion of preparing the reprint of the Official Lists of persons authorized to practise their medical professions in Egypt up to December 1932, the Medical Permits Section enumerated the number of medical practitioners according to their distribution in Governorates and Provinces, as well as the number of inhabitants per medical practitioner.

It is to be noticed that 91 medical practitioners were deducted from the total number of those duly registered on account of their being recorded either in the Sudan or abroad.

(6) During 1932, the Department issued permits to the following number of Dayas and Barbers:—

Dayas (Green Permit)	264
Dayas (White Permit)	2
Barbers	4

A certificate in Nursing was also issued to a female nurse and five certificates to male nurses who have completed their training either at Kasr El Ainy Hospital, Cairo, or at Alexandria Government Hospital.

Table showing the number of Egyptian and Foreign Medical Practitioners in Governorates and Provinces and the number of inhabitants per medical practitioner at the end of 1932 :—

TABLE NO. 70

Governorates or Provinces	Medical Practitioners.			Estimated Number of inhabitants till January 1, 1932	Number of inhabitants per Medical Practitioner.
	Egyptians	Foreigners	Total		
Cairo	963	303	1,266	1,179,650	932
Alexandria	150	300	450	638,750	1,419
Canal	31	36	67	170,100	2,539
Suez	14	23	37	44,300	1,197
Damietta	9	1	10	37,750	3,775
Frontier Districts	20	3	23	104,350	4,537
Qalyubia	43	7	50	684,450	13,689
Sharkia	75	13	88	1,083,250	12,310
Daqahlia	56	6	62	1,192,050	19,227
Gharbia	152	34	186	1,935,050	10,403
Menoufia	52	7	59	1,200,800	20,353
Behera	53	12	65	1,074,700	16,534
Guiza	43	4	47	580,750	12,356
Fayoum	21	4	25	605,600	24,224
Beni-Suef	34	4	38	562,550	14,804
Minia	61	7	68	912,200	13,415
Asyut	85	5	90	1,189,300	13,214
Guirga	46	3	49	1,070,900	21,855
Qena	23	8	31	993,100	32,035
Aswan	19	5	24	284,800	11,867
TOTAL	1,950	785	2,735	15,544,400	5,684

CHAPTER X.

THE CENTRAL MEDICAL COMMISSION

During the year 1932, the Central Medical Commission issued 12,777 medical certificates with a decrease of 193 as compared with the figures of the year 1931.

This decrease is attributed to the economic policy followed by the Government as regards new appointments and to the limited number of candidates sent abroad on educational missions this year.

Out of the 12,777 referred to above, 4,940 were for sick leave examination, of which 3,308 were for Cadré and Temporary Officials and 1,632 for Hors Cadre Employees.

The number of patients found suffering from medical diseases and granted sick leave either by the Central Medical Commission or by Cairo District Medical Officers and approved by the Central Medical Commission was 1,289 Cadré and Temporary Officials and 630 Hors Cadre Employees.

The patients suffering from surgical and ophthalmic diseases were 859 Cadré and Temporary Officials and 439 Hors Cadre Employees.

The following table No. 71 shows the percentage of the most prevalent diseases :—

TABLE NO. 71

Diseases	2,148 total number of Permanent and Temporary Employees		799 total number of Hors Cadre Employees	
	No. of patients	Percentage	No. of patients	Percentage
		%		%
Bronchi and Lungs	159	7.4	51	6.4
Stomach and Intestines	161	7.5	55	6.9
Anaemia and General debility	141	6.6	36	4.5
Rheumatism	172	8.0	37	4.6
Various Fevers	128	6.0	51	6.4
Eyes	143	7.0	52	6.5
Different surgical operations	360	16.8	221	27.7
Urethral Diseases including calculi	46	2.1	19	2.4
Fractures	73	3.4	86	10.8

The number of sick officials and employees who were granted sick leaves from one to ten days by Cairo District Medical Officers and by Markazes and Health Outposts Medical Officers in all the Mudirias and Governorates during the year 1932 was 23,521 of whom 17,679, or 75.2 per cent, suffered from medical diseases, 4,090 or 17.4 per cent, suffered from surgical diseases and 1,752 or 7.4 per cent suffered from ophthalmic diseases.

It must be noted that more than half of these patients presented themselves repeatedly for obtaining sick leaves.

The number of patients who were granted sick leave from one to ten days by the Central Medical Commission or by Cairo Districts' Medical Officers and approved by the Central Medical Commission was 708 Cadré and Temporary Officials and 584 Hors Cadre Employees.

The number of patients who were examined by the Central Medical Commission and were not granted sick leave was 82 Cadré and Temporary Officials and 65 Hors Cadre Employees.

The number of patients who were examined by the Provincial and Governorates Medical Commissions and were not granted sick leave was 241 Cadré and Temporary Officials and 584 Hors Cadre Employees.

The number of patients who were granted sick leave from 11 to 30 days and upwards by the Central Medical Commission or by Cairo Districts Medical Officers was 1,440 Cadré and Temporary Officials and 380 Hors Cadre Employees.

The number of patients who were granted sick leave over 30 days till their placement on pension or being invalided by the Central Medical Commission was 34 Cadré and Temporary Officials. The number of Hors Cadre Employees who were pronounced medically unfit for further service was 231.

The number of candidates who were examined for admission into Government Service or for Educational Missions abroad, was 4,672 of which 2,558 were Cadré and Temporary Officials (46 candidates for missions abroad), and the rest 2,068 were Hors Cadre Employees.

The percentage of Cadré and Temporary Officials rejected in the three sessions was 36.3 per cent in proportion to the number examined for admission into the service, *i.e.* the percentage of the successful candidates was 63.7 per cent.

Out of the number of the Cadré and Temporary Officials, 27.8 per cent failed in vision. The cause of failure in most cases was due to Myopia.

The percentage of those rejected or found unfit on account of defects in the urinary system was 1.6 per cent. The main cause was due to albumen or traces thereof.

The percentage of those rejected or found unfit for Service on account of heart diseases was 4.9 per cent. The main cause was due to failure in compensation of the heart resulting from valvular diseases.

The number of applicants for licenses of piloting private aeroplanes who presented themselves before the Central Medical Commission was 47. Forty of them were found fit (39 were declared fit in the first session and one in the second). The remaining seven failed, six in the first session and one in the second.

The Cadré and Temporary Officials who were examined for admission into the Service in the ordinary way with glasses over 6 dioptries and were referred to Ophthalmic experts amounted to 32, of whom 31 were declared fit for Government Service and one was rejected for suffering from fundus chorioretinal atrophy.

The Cadets of the Police School who presented themselves for medical examination were 761, 501 for Officers Section and 260 for Constables Section. The successful Cadets were 314 for the former Section and 143 for the latter. This result has been obtained after re-examining those who failed for the number of times permissible by the Medical Commissions Regulation.

PROVINCIAL AND GOVERNORATE MEDICAL COMMISSIONS

14,232 medical certificates were issued by the Provinces and Governorates Medical Commissions during 1932, as shown in table No. 72 with a decrease of 245 as compared with those of 1931.

Ghaffirs Nizamy

The number of *Ghaffirs Nizamy* who were examined by the Medical Officers of Markazes for admission into the Service or for extension of their voluntary service was 10,942. The percentage of the unsuccessful was 33.5 per cent and the successful 66.5 per cent.

CIRCULARS AND AMENDMENTS

In 1929, the Ministry of Finance issued Circular No. 4 regarding the Temporary Officials and Employees, who have been appointed on Cadré posts but were not confirmed in their appointments on grounds of medical unfitness, with a view to applying to them the provisions of the Circular in question so that they may be confirmed in accordance therewith.

This Circular provides that the Central Medical Commission has to conduct the medical examination of this class of employees and that Alexandria Medical Commission may carry it out within its circumscription in order to decide whether the present state of health of those examined is sufficiently good and will not deter them, in future, from carrying out their duties in the same way they carry it at the time of their medical examination.

The number of such officials who appeared before the Central Medical Commission in 1932 for their medical examination in compliance with the foregoing Financial Circular was 253 of whom 17 were found fit, 222 benefited by the Circular and 14 failed according to its provisions.

The persons who benefited by the Circular in question were found to have failed to pass the standard medical examination for the following reasons :

206 for defective vision, 2 for urinary system diseases, 11 for heart diseases and 3 for other diseases such as paralysis agitans or inguinal hernia.

The failure of those to whom the Circular could not be applied was attributed to severe defective vision, weakness of the heart or to other diseases which make them incapable of carrying out their work in future with the same capacity as they do it now and which (the diseases) may develop by the lapse of time.

An Amendment No. 14 of the Medical Commissions Regulations of 1929 has been made, charging the Medical Commissions with the determination of ages of permanent daily-paid labourers after the necessary inquiries having been made regarding the non-registration of their names in the Births Registers.

The Ministry of Finance has authorized the Medical Board at Khartoum to medically examine the Egyptian Government Officials and employees serving in the Sudan to find out if the provisions of the Financial Circular No. 4 of 1929 referred to above could be applied to them.

The Ministry of Finance has also authorized the London Medical Board to examine the health of a British pensionary, an ex-employee of the Egyptian Government, who applied for the commutation of a portion of his pension.

CHAPTER XI.

SANITARY LEGISLATION

This subject has been fully dealt with in the introduction of this Report (see page 12).

Appendix I

MISSIONS

This subject has been mentioned in detail in the introduction of this report (see page 11).

Appendix II

CENTRAL STORES SECTION

During 1932, this Section has furnished the following units with up-to-date equipment and modern steel furniture so as to be level with modern hospitals :—

- 2 Village hospitals at Zafaraan and Ghurayeb.
- 3 Ophthalmic branches at Girga, Faqus and Rosetta district hospitals.
- 1 Annex and shelter at Beni Suef Ophthalmic Hospital.
- 1 Tanta Chest Diseases dispensary.
- 2 Wards at Tanta Fever Hospital.
- New sections at Kasr el Aini Hospital.

In addition to the equipment of the above units, the maintenance of the units that have been created during recent years (particularly Fouad Sanatorium which has been attached to the Department this year) has caused a great increase in the work of Central Stores.

This Section has resumed the same policy adopted the previous year, *i.e.* :—

(1) The substitution of furniture made of the more durable Swedish wood for all furniture made of ordinary wood.

(2) The substitution of steel or iron furniture for all wooden furniture in hospitals, the former being more durable and therefore more economical ; besides its being easily kept clean and free of microbes.

(3) Articles out of use have been dispensed with, those of one category have been put together and only the most serviceable ones have been put to use.

(4) New pattern samples of modern and easily obtainable articles replaced old ones which are rarely manufactured now-a-days.

(5) Whenever possible, home-made yarn replaced foreign yarn, special care being given to measurements of the former.

(6) An illustrated Catalogue showing designs and details of specifications of instruments, medical appliances and wooden furniture has been prepared for printing at the Government Press.

It is to be observed that orders and contracts decreased during this year as compared with the previous year. But owing to the fall of the Pound Sterling and the fact that tenders were submitted in different foreign currencies and these had to be changed daily into Egyptian currency, in compliance with Finance Regulations, the employees of the Stores Supplies Office experienced great difficulties in performing this work. They had to work late at night in order to be able to notify the results of the adjudications to the merchants concerned the next day.

The same process had to be repeated a second time on making out the contracts and a third time on verifying the invoices, submitted by the merchants, before payment.

On referring these difficulties to the Ministry of Finance, the latter accepted the views of the Department and a circular, to the effect that all tenders to be submitted either in Egyptian currency or Swiss francs, was accordingly issued.

The work performed by Central Stores during 1932 is briefly shown in the following table:—

TABLE No. 74

Kind of work	1931	1932	Increase
Receipt Vouchers	15,608	15,936	328
Issue Vouchers	63,408	76,604	13,196
Correspondence Outwards	91,422	76,418	—
Correspondence Inward and Forms	118,639	118,384	—
Railway Consignments	Parcel 41,524	Consign. 14,740	—
Postal Parcels received	2,800	2,417	—
Postal Parcels despatched	19,375	19,610	235
Claims	1,456	1,730	274
Workshop Labour (Repairs)	116,079	116,324	245
Workshop Labour (New Work)	2,741		
Discs for Ophthalmic Hospitals	579,400	461,071	—

UNITS ESTABLISHED DURING 1932

- 5 District hospitals at Kafr el Dawar, Dishna, Sherbeen, El Fashn and Mina-el-Qamh.
 - 12 Village hospitals at El Korein, Abu Hammad, Beni Mohammed, El Ma'abda, Siflaq, El Galaweia, Nakada, El Ballas, El Sebaiya, El Bosailiya Kibli, Kafr Dawood and Daraw.
 - 2 Out-patient Clinics for Skin and Venereal diseases at Gamalia (Cairo) and El Minia.
 - 4 Leprosy Sub-clinics at Tahta and Girga (annexed to Suhag Leprosy Clinic), Kafr Sakr and Mina-el-Qamh (annexed to Zagazig Leprosy Clinic).
 - 1 Bacteriological Laboratory at Fayoum.
 - 3 Ophthalmic Branches at Rosetta, Faqus and Girga Hospitals.
- Accommodation for 14 extra beds has been provided at the Ophthalmic branch of Alexandria Hospital.

TABLE No. 75.—CONTRACTS AND ORDERS MADE DURING 1932 AS COMPARED TO 1931

	1931	1932	Increase
General adjudications	110	138	28
Local offers	655	555	—
Local orders	1,294	1,287	—
Contracts	746	623	—
Foreign orders	139	131	—
Forms No. 50, C.G.	5,087	4,749	—
Questions submitted to the Contract Board...	752	596	—
Meetings held by the Contract Board	184	176	—
Tenders submitted in the general adjudications	1,052	1,049	—
Agreements	13	13	—
Miscellaneous orders... ..	217	171	—

Appendix III

NEW UNITS ESTABLISHED IN 1932

TABLE No. 76

Units.	No.	Cost of Estab.
		L.E.
Village Hospitals	2	3,560
Ophthalmic Branch in Markaz Hospital ...	3	3,795
Chest Diseases Dispensary	1	3,440
TOTAL	6	10,795

Appendix IV

TABLE No. 77.—DETAILS OF BUDGET GRANTS AND ACTUAL EXPENDITURE

	Budget Grants		Actual Expenditure	
	1931	1932	1931	1932
	L.E.	L.E.	L.E.	L.E.
TITLE I				
SALARIES, WAGES AND ALLOWANCES				
Public Health Dept.	717,778	686,045	680,971	672,296
Kasr El Aini Hosp.	—	32,839	—	30,376
	717,778	718,885	680,971	702,672
TITLE II				
GENERAL EXPENSES				
Public Health Dept.	606,781	566,803	580,304	535,730
Kasr El Aini Hospital	—	64,728	—	62,034
	606,781	631,531	580,304	597,764
TITLE III.				
NEW WORKS				
Public Health Dept.	84,400	30,270	82,145	15,819
Kasr El Aini Hospital	—	7,000	—	6,852
	84,400	37,270	82,145	22,671
GENERAL TOTAL				
TITLE I	717,778	718,885	680,971	702,672
TITLE II	606,781	631,531	580,304	597,764
TITLE III	84,400	37,270	82,145	22,671
	1,408,959	1,387,686	1,343,420	1,323,107
PUBLIC HEALTH DEPARTMENT ...	1,408,959	1,283,119	1,343,420	1,223,845
KASR EL AINI HOSPITAL	—	104,567	—	99,262
	1,408,959	1,387,686	1,343,420	1,323,107

P.S.—Kasr-el-Aini Hospital credits, being attached to the Egyptian University were struck off the Department of Public Health Budget since the Financial year 1932-1933.

Appendix V

DETAILS OF POSTS IN THE VARIOUS SECTIONS

TABLE No. 78

	Central Administration		Health Divisions		Medical Divisions		Lunacy Divisions		Kasr El Aini Hospital		Total.	
	1931	1932	1931	1932	1931	1932	1931	1932	1931	1932	1931	1932
Technical Posts :—												
Permanent	68	68	446	459	746	713	32	32	—	45	1,292	1,317
Temporary	2	2	17	16	57	38	2	2	—	23	78	80
Administrative Posts	17	17	1	1	—	—	5	5	—	—	23	23
Clerical Posts	208	205	355	356	237	222	21	21	—	13	821	817
Hors Cadre Staff ...	222	232	1,102	1,102	3,533	3,277	754	754	—	365	5,611	5,730
	517	524	1,921	1,933	4,573	4,250	814	814	—	446	7,825	7,967

Appendix VI

REPORT OF CAIRO HEALTH INSPECTORATE IN 1932

A.—VITAL STATISTICS

The estimated mid-year population of Cairo in 1932 was 1,196,400. The district distribution is shown in Table No. 79.

Births.—During 1932 there were 52,745 births in Cairo. The annual birth-rate was, therefore, 44·1 per thousand of population as compared with 44·5 in the previous year.

District births and birth-rates are shown in Table No. 79.

Still-births.—1,315 children were born dead. This gives a rate of 24·9 per thousand births.

Deaths.—During 1932 a total of 31,611 deaths occurred in Cairo. 971 of these, however, were deaths of non-residents leaving 30,640 for Cairo proper. The annual death-rate was, therefore, 25·6 per thousand of population as compared with a rate of 28·9 in 1931.

See Table No. 79 for district deaths and death-rates.

See Chart 1, for weekly death-rates.

Infantile Mortality.—10,417 children, under one year of age, died during 1932 giving an infantile mortality of 197 per thousand births for the whole city as compared with 216 in 1931 and 200 in 1930.

Diseases causing Infantile Mortality.

Diarrhoea and Enteritis were responsible for 5,226 deaths or 50·2 per cent. Chest diseases accounted for 1,720 deaths or 16·5 per hundred deaths. Marasmus and general debility caused 532 deaths or 5·1 per cent. 219 deaths were due to infectious diseases giving a rate of 2·1 per cent.

See Charts II and III.

Death Inquiries.—The total number of uncertified deaths during the year 1932 which required to be investigated was 16,972 or 55·4 per cent of the total of Cairo deaths.

TABLE 79 — VITAL STATISTICS OF CAIRO FOR 1932 (RATES PER THOUSAND)

District	Estimated Mid-year Population	Births		Deaths		Infantile Deaths	
		Cases	Rate	Cases	Rate	Cases	Rate
Mouski	27,200	900	33.1	532	19.6	149	16.5
Bab el Sha'riya	84,200	3,707	44.0	2,071	24.6	668	18.5
Ezbekiya	62,900	1,896	30.1	1,119	17.8	328	17.3
'Abdin	82,000	2,359	28.8	1,566	19.1	420	17.8
Sayeda Zeinab	120,800	5,498	45.5	2,904	24.0	999	18.2
Helwan	52,600	2,112	40.1	1,317	25.0	468	22.2
Khalifa	75,200	3,426	45.6	2,173	28.9	737	21.5
Darb el Ahmar	87,300	3,572	40.9	2,116	24.2	698	19.5
Gamaliya	80,700	3,778	46.8	2,124	26.3	700	18.5
Shoubra	170,000	9,337	54.9	4,810	28.3	1,801	19.3
Boulaq	136,800	6,877	50.3	4,108	30.0	1,525	22.2
Old Cairo	48,900	2,675	54.7	1,707	34.9	635	23.7
Waili	167,800	6,608	39.4	4,093	24.4	1,289	19.5
Cairo City 1932	1,196,400	52,745	44.1	30,640	25.6	10,417	19.7
" " 1931	1,160,700	—	44.5	—	28.9	—	21.6
" " 1930	1,122,800	—	44.4	—	25.8	—	20.0
" " 1929	1,107,900	—	43.9	—	26.6	—	21.1
" " 1928	1,099,700	—	41.7	—	32.4	—	25.3
" " 1927	974,300	—	53.0	—	33.3	—	22.1
" " 1926	859,400	—	51.6	—	34.4	—	22.0
" " 1921-1925 (average)	—	—	51.2	—	34.4	—	23.3
" " 1916-1920 "	—	—	42.0	—	40.2	—	27.6
" " 1911-1915 "	—	—	43.8	—	39.0	—	30.4

INFECTIOUS DISEASES

The total number of cases of Infectious Diseases during 1932 was 11,388 which include 759 cases coming from outside Cairo ; so that the total for Cairo proper was 10,629 as compared with 9,790 in 1931. Out of this last total 4,007 belong to the eight principal diseases.

Table No. 80 shows the incidence and death-rates of the most prevalent infectious diseases in Cairo districts during 1932.

Typhoid Fever.—The total number of cases notified during the year was 1,643 as against 1,304 in 1931 and 1,248 in 1930.

The case rate for the year was therefore 137 per hundred thousand of population. There were 1,494 Egyptians and 149 foreigners.

The highest case-rate was in Waili, being 254 per hundred thousand of population. Sayeda comes next with a rate of 185.

The number of deaths from this disease was 437 of which 177 were diagnosed after death. See Figure 1 for case and death-rates in the various districts.

Diphtheria.—The total number of cases recorded during 1932 was 682 as compared with 829 in 1931 and 771 in 1930.

There were 250 deaths of which 81 were diagnosed after death. The case and death-rates were 57 and 20.8 per hundred thousand of population respectively.

The highest case rate occurred in Sayeda Zenab being 92.7 per hundred thousand of population. (See Fig. 2).

Measles.—The total number of cases recorded this year was 528 as compared with 1,122 in 1931.

There were 256 deaths from this disease—236 cases were diagnosed after death. The case and death-rates were 44 and 21 per hundred thousand of population. (See Fig. 3).

Cerebro-Spinal Fever.—The number of cases recorded during this year was more than double the cases notified in 1931. The total was 1,090 as against 474 in 1931.

The number of deaths from this disease was 513.

The case-rate was, therefore, 90 per hundred thousand of population whilst the death-rate was 42.8.

Cases occurred in every district of the City.

The highest case-rate occurred in Bab-esh-Shariya being 117 per hundred thousand of population.

54 cases were diagnosed after death.

There were 1,059 Egyptians and 31 foreigners. (See Fig. 4).

Influenza.—The total number of cases notified during the year was 1,722 as against 2,152 in 1931 and 1,900 in 1930.

The case-rate of the disease for this year was 144 per hundred thousand of population as compared with 185 in 1931 and 169 in 1930.

The number of deaths attributed to this disease was 67.

The number of deaths from all respiratory diseases, excluding pulmonary tuberculosis, was 5,667, out of which 4,102 were due to pneumonia, 67 to pleurisy, 1,130 to bronchitis and 368 to other respiratory diseases.

Of the 4,102 deaths from pneumonia 3,251 were children up to 5 years of age, 216 from 5 to 15, 244 from 15 to 35 and 391 from 35 and over.

Scarlet Fever.—There were 57 cases notified in 1932 and 1 death which occurred in Waili where there were 18 cases.

The highest case-rates were in Abdine and Waili.

Small-pox.—6 cases and 1 death occurred during the year. The total number of vaccinations carried out during 1932 by the District Medical Officers and those of the Inspectorate was 52,568. Of this total 46,569 were primary vaccinations and the remaining were secondary vaccinations.

Besides, the Inspectorate issued lymph to private practitioners, Government Schools, business firms and Government Departments sufficient for 36,230 vaccinations.

Typhus Fever.—There was only 1 case of this disease during the year and it was diagnosed after death.

The total number of contacts who were deloused was one.

There were no cases of Relapsing Fever this year.

Deaths attributed to confinement.—These include deaths from puerperal fever and other deaths resulting from confinement.

The total was 103, of which 57 were caused by puerperal fever.

64 cases of puerperal fever were notified during 1932 out of which 26 were diagnosed after death.

TABLE No. 80 —DISTRICT DISTRIBUTION OF CASES AND DEATHS OF THE MOST PREVALENT INFECTIOUS DISEASES IN 1932

District.	Typhoid		Scarlet Fever		Diphtheria		Measles		Cerebro-Spinal Fever	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Mouski	21	10	—	—	16	3	2	1	26	14
Bab el Sha'riya... ..	118	35	6	—	47	24	26	12	99	51
Ezbekiya	93	24	3	—	36	10	26	8	43	22
'Abdin... ..	132	24	14	—	55	22	37	8	63	33
Sayeda Zeinab	224	68	7	—	112	43	67	31	120	62
Helwan	35	6	1	—	15	3	8	1	22	15
Khalifa	75	16	—	—	33	9	7	—	91	48
Darb el Ahmar	78	22	2	—	40	6	14	8	82	29
Gamaliya	56	11	—	—	26	5	6	—	99	44
Shoubra	200	57	5	—	98	40	163	99	153	60
Boulâq	126	75	—	—	70	37	78	44	86	45
Old Cairo	58	10	1	—	28	13	14	13	37	20
Waili	427	79	18	1	103	25	80	31	169	70
TOTAL—CAIRO CITY...	1,643	437	57	1	682	250	528	256	1,090	513

The District Medical Officers investigated 81·9 per cent of the uncertified deaths and the District Mowallidas 14·7 per cent.

The remaining deaths were in the villages attached to Cairo where sanitary barbers and dayas gave permits of burial.

B.—GOVERNMENT FEVER HOSPITAL

During the year 1932, there were 6,489 admissions to the Government Fever Hospital as compared with 5,917 in 1931 and 4,611 in 1930.

Of these 3,790 were males and 2,699 females.

The numbers of patients admitted each month were :—

439 in January, 749 in February, 932 in March, 496 in April 483 in May, 533 in June, 481 in July, 616 in August, 467 in September, 476 in October, 478 in November and 339 in December.

The admissions consisted of 3 plague, 9 small-pox, 40 chicken-pox, 18 scarlet fever, 743 typhoid, 109 para-typhoid, 1,165 cerebro-spinal fever, 322 diphtheria, 19 whooping cough, 97 mumps, 1,039 influenza, 346 erysipelas, 91 malaria, 19 tetanus, 46 dysentery, 58 measles, 52 tuberculosis and 16 puerperal fever.

The other cases consisted of 458 persons sent to hospital under a mistaken diagnosis of infectious diseases, and 472 sent in under observation in whom no disease of any sort manifested itself.

Of the 6,489 admissions, 338 were first class, 713 second class and the remainder third class.

There were 944 deaths in hospital during 1932. Of these there were 141 caused by typhoid fever, 94 by diphtheria, 9 by tetanus and 520 by cerebro-spinal fever.

In addition there were 180 deaths amongst patients sent in under mistaken diagnosis of infectious diseases and whose condition did not permit of a refusal of admission.

Of the 5,438 third class patients, there were 359 convicts from Cairo prisons. Of these 16 were suffering from typhoid fever, 6 from para-typhoid, 20 from erysipelas, 16 from malaria, 168 from influenza and 14 from cerebro-spinal fever.

There were 17 deaths among the convict patients. Death was due to typhoid 1 and 8 to cerebro-spinal fever.

C.—PASSENGER AND PILGRIM CONTROL SERVICES

(1) *Passenger Control*

During 1932 there were 25,439 passengers who arrived in Cairo from infected countries as compared with 27,302 in 1931 and 35,951 in 1930.

Out of this total 50·5 per cent travelled *via* Qantara, 29·8 per cent *via* Alexandria, 9·5 per cent *via* Port-Said, 6·6 per cent *via* Suez and 3·5 per cent by way of Airships.

All these passengers with the exception of 5, who could not be traced, were observed during the regulation period.

(2) *Pilgrim Service.*

The total number of pilgrims from Cairo this year was 684 of which 658 returned and were subjected to the usual period of observation. One was found sick, suffering from enteritis from which he died.

None of the pilgrims died in the Hedjaz.

Of the 658 pilgrims who returned to Cairo 10 belonged to a former pilgrimage.

SANITARY CONTROL OF PUBLIC WOMEN

The total number of prostitutes on the registers during 1932 was 1,174, of whom 930 were Egyptians and the rest foreigners.

293 names were struck off, for various reasons, during the year, of whom 210 were Egyptians.

The number of new names was 355 of whom 295 were Egyptians.

The total number of examinations carried out during the year was 26,479 for Egyptians and 7,205 for foreigners.

Out of the total of prostitutes, 298 Egyptians and 136 foreigners were found suffering from venereal disease.

The diseases diagnosed are shown in Table No. 81.

308 specimens of blood for the Wassermann test were sent to the Government Laboratories. No less than 106 proved to be positive.

TABLE No. 81.—VENEREAL DISEASES AMONG REGISTERED PROSTITUTES

Venereal Diseases	1932			1931		
	Egyptians	Foreigners	Total	Egyptians	Foreigners	Total
<i>Syphilis</i> :—						
Primary	21	—	21	25	1	26
Secondary	31	1	32	15	6	21
Tertiary	—	1	1	—	—	—
TOTAL	52	2	54	40	7	47
<i>Gonorrhoea</i> :—						
Acute	8	16	24	2	32	34
Chronoic	263	144	407	238	103	341
TOTAL	271	160	431	240	135	375
<i>Chancroids</i>	37	10	47	56	13	69
GRAND TOTAL	360	172	532	336	155	491

Unregistered Women.—The total number of unregistered women who were examined at the request of the Police was 2,623 as against 1,601 in 1931. 870 were found diseased. 256 were suffering from Syphilis, 554 from Gonorrhoea and 60 from Chancroids.

Work done at the Office of the Principal Medical Officer of Police during the year 1932 :—

Number of Policemen examined for sick leave	2,915
Other members of Police examined for sick leave	630
Number of those applying for various professions	3,695
Number of medico-legal examinations including those of Helwan and Heliopolis	22,593
Number of subordinate staff examined for minor posts	238

Hygienic work :—

Number of inspections of Police units	647
Number of those inoculated against typhoid	1,061
Number of those vaccinated against small-pox	210

GENERAL SANITATION

A.—Milk.

The total number of milk samples collected during the year was 3,598 as compared with 4,483 in 1931. Of these 406 were found adulterated making a percentage of 11·3 of the total samples collected as against 12·4 per cent in 1931.

This is a satisfactory result as compared with those of previous years.

Enormous quantities of foodstuffs were destroyed being unfit for human consumption.

B.—Cemeteries.

The approval of the Inspectorate was given regarding the creation of the following cemeteries :—

(1) A cemetery for the Coptic Orthodox of Ein Shams, Ezbet el Nakhl and Mataria in the neighbourhood of Kafr el Gamous Moslem Cemetery.

(2) A cemetery for the Egyptian Evangelical Communities at El Gebel el Ahmar, Abbassia Qism.

C.—Free Water Taps and Gullies.

(1) Free Water Tap No. 53, installed at Kom el Saida, Darb el Ahmar Qism, has been removed to a new site.

(2) A slop water gully was installed at the request of the Inspectorate at Sharia el Khalig el Masri, Sayeda Qism.

A slop water gully at Sharia el Khalig el Masri, Sayeda Qism, was repaired at the request of the Inspectorate.

D.—Mosques.

One water system was connected with the main sewers during the year. Two have been opened for use.

Applications received for connection with the public sewers during 1932 were 7 in number.

E.—Complaints.

The number of complaints received and dealt with regarding questions of general sanitation were 1,030, out of which 287 were complaints concerning the prevalence of mosquitoes, 287 regarding rats, 247 regarding street gullies and 223 regarding the fencing in of lands.

The rat-catching gangs of the Inspectorate caught 10,730 rats from the various Government Offices and private houses.

F.—Anti-Malaria Measures.

Staff.—The number of mulahezeen who were working in the general campaign against mosquitoes in Cairo was 46 in addition to other 5 working as overseers to superintend the work of the gangs. The number of workmen who were working was 150.

In the application of Para. 2, Art. 4 of the Law No. 1 of 1926 many owners of the houses amounting to 3,036 have put the water installations of their houses in a proper sanitary condition.

About 600 judgments are now in the Inspectorate under enforcement.

The judgments were served on the owners of the houses and new delays were usually given for carrying out the conditions.

The work of the gangs has markedly reduced the mosquito pest in Cairo, also the work of these gangs has greatly assisted the Vidange Section of the Inspectorate as all overflowing cesspits were immediately reported upon by the Anti-mosquito Mulahezeen. Other nuisances were also reported by them.

Method of collecting Milk Samples.

The samples are now taken by the District Medical Officers assisted by the Moaweneen el Saha at any hour of the day (in the morning or evening) from milk shops or vendors, once, twice or more per week. The vendors are now feeling the continuous control over them.

Ambulant Vendors.

The Arrêté of the Ministry of the Interior dated January 31, 1915, was enforced since November 1931. The number of applications received by this Inspectorate from the Governorate till the end of December 1932 was 265 and the number of those returned to the Governorate for issuing rukhsas amounted to 115. 76 applications from milk vendors were sent to Giza and Qaliubia Health Offices for investigation and returned to this Inspectorate as being unfit owing to the fact that they have neither sanitary zaribas for keeping milking animals nor storage places for keeping utensils.

It was reported also that the utensils used by these vendors are not in compliance with the requirements of the Inspectorate.

The number of procès verbeaux drawn up by the various Qism Health Offices against unlicensed ambulant vendors was 47.

UNHEALTHY ESTABLISHMENTS

Under the Law No. 13 of August 28, 1904, and the Arrêté of the Ministry of Interior dated August 29, of the same year, the following establishments were licensed after compliance with the sanitary conditions :—

TABLE No. 82

Class	Saha	Zabt	Total
I	202	37	239
II	2,215	12	2,227
III	492	7	499
TOTAL	2,909	56	2,965

Licensed establishments (Saha) already existing in the city and its suburbs up till December 31, 1932, were 1,881 Class I, 11,340 Class II, and 2,755 Class III, total 15,976.

Of those visited during the year, 11,481 were found satisfactory and 4,495 were found unsatisfactory, thus giving a percentage of 71·9 per cent satisfactory and 28·1 per cent unsatisfactory.

The number of visits paid to all already licensed establishments during the year 1932 was 30,704.

The measures taken regarding unsatisfactory establishments were as follows: after the licencees had been notified with the lacking conditions, they were requested to carry them out within a certain time limit. If they failed to carry them out, procès verbeaux of contravention were drawn up against those in whose rukhsas the lacking conditions were inscribed, and Ministerial Arrêtés were issued for those whose rukhsas do not bear such conditions, in compliance with Art. 6 of the Law and Art. 8 of the Arrêté of the Ministry of the Interior annexed to it.

Under the above-mentioned procedure, the number of procès verbeaux drawn up during the year for lacking conditions as well as for establishments exploited without licence was 2,036 and the number of Ministerial Arrêtés issued was 51.

Etablissements Publics.

Under the Law No. 1 of January 9, 1904, 4 theatres, 24 cinemas and 11 establishments of other kinds were inspected during 1932.

Of these by the end of the year, 35 already existing and 4 newly licensed, the latter being 2 cinemas and 2 establishments of other kinds.

The sanitary conditions were found satisfactory in 3 theatres, 17 cinemas and 8 establishments of other kinds and not satisfactory in one theatre, 5 cinemas and one establishment of other kind.

Efforts have been made to improve the sanitary condition of these establishments especially the sanitary accommodation.

THE MOULID EN NABI

The celebration of the Moulid en Nebi lasted 8 days from July 8 to 16, and took place on the Cavalry Exercise Ground of the Egyptian Army at Abbassia.

The sanitary arrangements were made and supervised by Cairo Health Inspectorate.

The number of visitors who attended the celebration was estimated at about 150,000.

Appendix VII

SUMMARY OF THE REPORT OF ALEXANDRIA MUNICIPALITY'S HEALTH SECTION FOR THE YEAR 1932

Area.

On June 30, 1932, the area of Alexandria was 52·20 square kilometres.

Births.

During 1932, the birth-rate was continually on the increase, same as last year. The number of births amounted to 27,952 (including 1,469 foreigners) as compared with 26,909 in 1931, and 25,674 in 1930.

The birth-rate per thousand was as follows:—

Year	Rate per thousand
1930	41·9
1931	42·7
1932	43·2

The population of the city amounted to 533,600 Egyptians and 112,100 foreigners.

Deaths.

The number of deaths was much less in 1932 than in 1931 as it did not exceed 15,499 (including 902 foreigners) as compared with 17,616 last year.

The death-rate per thousand population was:—

Year	Rate per thousand
1930	23·6*
1931	27·9
1932	24·0

* The lowest during several previous years.

Still-births.

The still-births occurring in 1932 were 536 as compared with 459 in last year. The ratio of still-births was as follows:—

Still-birth among Egyptians	520	19·6 per thousand births.
„ „ Foreigners	16	10·9 „ „ „
TOTAL	536	19·1 „ „ „

Still-births rate per thousand population = 1·9.

Infantile mortality.

The infantile mortality has greatly decreased this year than last year, there being 5,482 deaths as against 6,033 in 1931.

The respective infantile mortality during the years 1930, 1931 and 1932 were:

198 per thousand births in 1930.

225 „ „ „ 1931.

196 „ „ „ 1932.

Combating infectious diseases.

Small-pox was the most important infectious disease that prevailed at Alexandria in 1932.*

The first case which took place at Attarin Qism was officially recorded on March 28, 1932, then the disease gradually spread with intervals of dormancy.

The source of infection is still unknown but it was definitely noticed that many cases of the disease diagnosed as chicken-pox, occurred since 1931.

* For further details, the reader is advised to see the special report issued by the Alexandria Municipality (Health Section) dealing with the progress of small-pox epidemic at Alexandria in 1932.

The total number of cases of small-pox amounted to 510 of which 132 ended with death, *i.e.* a rate of 25·8 per cent.

The following table No. 83 shows the progress of the disease during the various months in 1932 since its outbreak :—

TABLE No. 83

Month	Cases	Deaths
March	1	—
April	—	—
May	1	—
June	1	1
July	7	2
August	8	4
September	13	5
October	28	14
November	38	12
December	413	94
TOTAL	510	132

At the end of 1932, the disease was still increasing in an epidemic form. The greatest degree of its incidence was in the Gumruk Kism, then comes next, Manshia, Hadra, Karmouz Mina-el-Bassal, Labban, Moharram Bey and Attarin Qisms.

The least number of cases were detected at Ramleh Qism.

The highest case rate and the severest type of the disease occurred among the young age.

The Department of Public Health participated in the campaign against the disease and supplied Alexandria Municipality with considerable quantities of the equipment necessary for the combat. It has also delegated some of its Medical Officers to take part in the combative work.

The following table No. 84 shows the number of cases and deaths of infectious diseases as well as the percentage of deaths to cases during the years 1930, 1931 and 1932 :—

TABLE No. 84

Disease	1930			1931			1932		
	Cases	Deaths	Percentage	Cases	Deaths	Percentage	Cases	Deaths	Percentage
All Infectious diseases... ..	4,969	914	18·39	5,567	1,376	24·7	5,623	1,250	22·1
Plague	108	58	53·7	46	17	36·9	34	19	55·9
Typhus exanthematous	7	2	28·57	4	2	50	25	5	20·0
Malaria	46	2	4·34	68	2	2·9	234	2	0·8
Typhoid and paratyphoid fevers	684	114	16·6	589	92	15·6	578	94	16·2
Scarlet fever	35	—	—	40	1	2·5	39	2	5·1
Cerebro-spinal meningitis ...	18	9	50	99	55	55·5	141	79	56
Acute poliomyelitis	9	2	22·2	2	—	—	3	—	—
Diphtheria	448	114	25·44	402	113	28·1	404	117	28·9
Measles	44	2	4·54	983	487	49·5	382	117	30·6
Whooping cough	126	6	4·76	260	11	4·02	264	12	4·5
Mumps	187	1	0·53	248	2	0·8	205	3	1·4
Leprosy	26	1	3·8	20	4	20	20	4	20·0
Erysipelas	93	20	21·5	167	17	10·1	197	26	13·2
Tetanus	50	31	62	39	20	51·3	41	32	78·0
Pulmonary tuberculosis	887	409	46	852	426	50	890	456	51·2
Chicken-pox	329	2	0·6	374	3	0·8	332	9	2·7
Influenza	1,417	28	1·26	818	17	2·8	741	16	2·1
Puerperal fever	48	29	60·4	46	19	41·3	44	31	70·4
Dysentery	407	84	20·6	510	88	17·2	536	93	17·3
Relapsing fever	—	—	—	—	—	—	—	—	—
Rabies	—	—	—	—	—	—	1	1	100·0
Small-pox	—	—	—	—	—	—	510	132	25·8

Vaccination, disinfection and rat trapping.

The following table shows the vaccination, disinfection and rat trapping processes carried out during 1932 by Alexandria Municipality:—

Vaccination :

Anti-typhoid	... ..	29,621	Inoculations.
Anti-typhoid lipo-vaccine	... ..	8,390	„
Anti-diphtheric anatoxin	... ..	8,926	„
Anti-diphtheric serum	... ..	564	persons.
Anti-plague	... ..	55,890	inoculations.
Primary vaccination for infants	... ..	26,577	„
Revaccination against small-pox	... ..	389,975	.

Disinfection and rat trapping :

TABLE No. 85

	1931	1932
Rooms lime-washed and disinfected	15,978	62,833
Rats trapped alive	9 040	7,931
Rats caught dead	—	666
Rats examined	—	8,424

UNHEALTHY, INCOMMODE AND DANGEROUS ESTABLISHMENTS

The establishments now existing amounted to :

Class I	... ..	1,592
Class II (A)	... ..	8,048
Class II (B)	... ..	9,584
Class III (A)	... ..	968
Class III (B)	... ..	1,113
TOTAL	... ..	21,305

The new establishments during 1932 amounted to :

Class I	... ..	218
Class II	... ..	1,607
Class III	... ..	278

MUNICIPALITY CLINICS

Child Welfare.

There are two child welfare clinics : one at Gumruk Qism “ Queen Nazli ” and the second at Mina-el-Bassal Qism “ 1st Khedive ”.

The following table shows the amount of work done at each of these two clinics : —

Gumruk (Queen Nazli) :

New patients	... ..	5,233
Old patients	... ..	37,138
House visits	... ..	1,290
Anti-diphtheric inoculations	... ..	968
Infants supplied with milk	... ..	199

Fever Hospital :

Opened in April, 1932. The following table shows the various cases treated and deaths which occurred :

TABLE No. 87

Disease	Cases	Deaths
Plague	24	10
Typhus exanthematous	21	5
Small-pox	434	45
Typhoid fever	111	17
Cerebro-spinal fever	44	25
Scarlet fever	31	1
Diphtheria	43	21
Measles	19	1
Whooping cough	4	—
Mumps	31	1
Tetanus	26	19
Pulmonary Tuberculosis	11	—
Chicken-pox.	114	4
Influenza... ..	435	2
Puerperal fever	1	—
Dysentery amœbic	55	1
Dysentery bacillary	130	—
Erysipelas	91	6
Malaria	197	—
Other diseases	332	29

Samples examined by the Laboratory of the Fever Hospital :

464 : positive.

731 : negative.

Venereal Diseases and Examination of Prostitutes.

The following is the work done by the Venereal Diseases Clinics, Prostitutes Examination Rooms and Lock Hospital, during the year 1932 :—

Venereal Diseases Clinics :

	Venereal clinic No. 1	Venereal clinic No. 2
Patients treated	26,178	1,680
Examinations	8,242	42,983

Prostitutes Examination Rooms :

Prostitutes examined	918
No. of examinations with negative results	22,652
„ „ examinations with positive results	1,242
„ „ Prostitutes arrested by the Police and examined	477

Diseases discovered amongst the arrested women :

Syphilis	86
Gonorrhoea	204
Syphilis and Gonorrhoea	18
Gonorrhoea and other diseases... ..	10
Chancroid	3

Appendix VIII

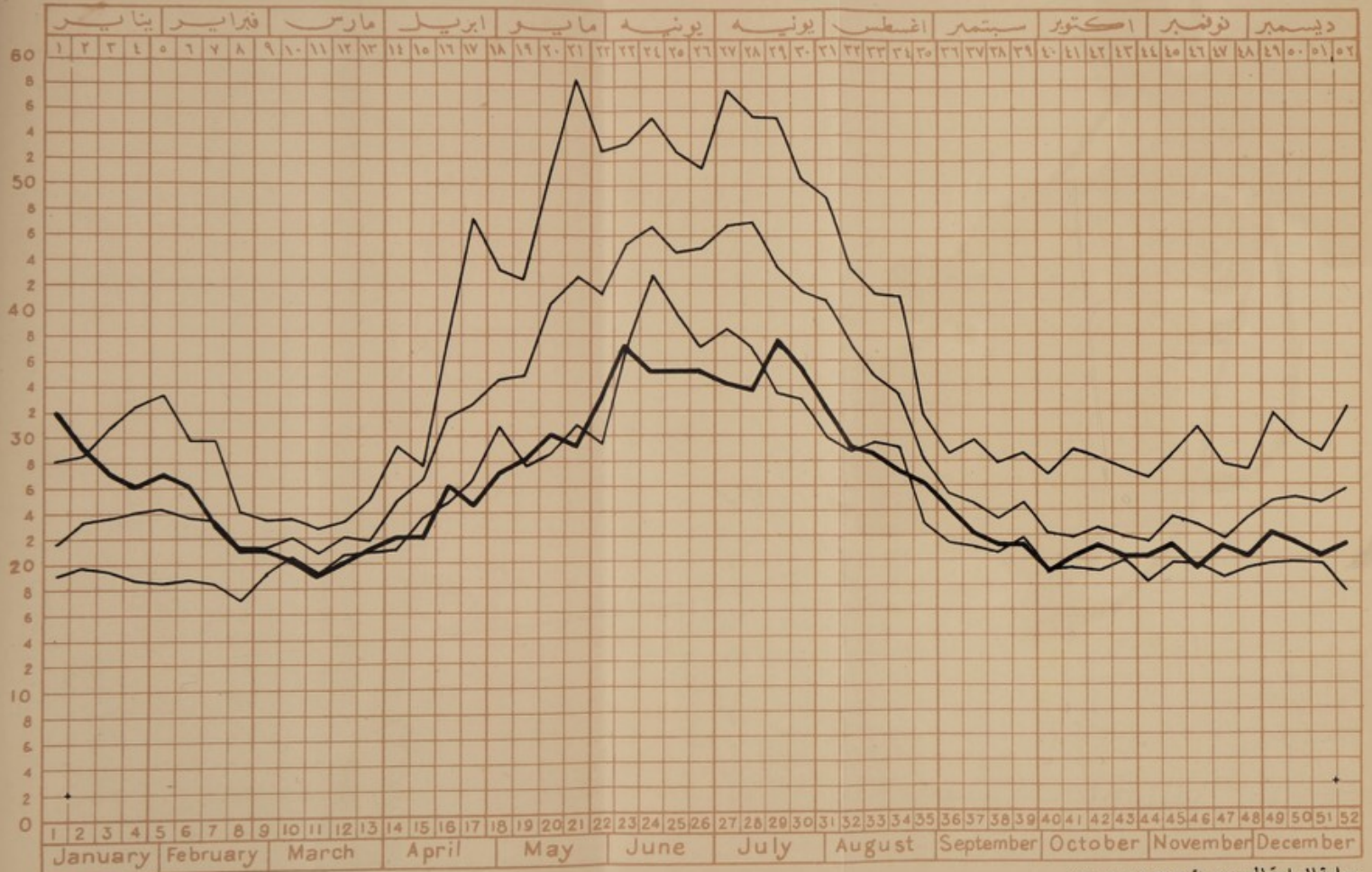
THE PRINCIPAL POSTS IN THE DEPARTMENT OF PUBLIC HEALTH AND NAMES OF THEIR OCCUPANTS.

Name	Post
H.E. MOHAMMED SHAHIN PASHA	Under Secretary of State.
Dr. AHMED HELMY BEY	Assistant U.S.S.
Dr. A. W. BYRNE	Sanitary Expert.
Dr. MOHAMED ZAKI SHAFIE	Technical Secretary.
SECTION I (<i>Sanitation</i>).	
Dr. MOHAMMED EL SIBAIE HASSANEIN	Director.
SECTION II (<i>Hospitals</i>).	
Dr. ABDEL RAHMAN OMAR BEY	Director.
Dr. MAHMOUD FAUZI	Sub-Director.
SECTION III (<i>Ophthalmic</i>).	
Dr. ISSA HAMDY EL MAZNI BEY	Director.
Dr. MOHAMED TEWFIK	Sub-Director.
SECTION IV (<i>Prevention and Control of Epidemic Diseases</i>).	
Dr. ABDEL HALIM MAHFOUZ BEY	Director.
Dr. GEORGE KANELLI	Sub-Director.
LABORATORIES.	
Dr. ALI TEWFIK SHOUSHA BEY	Director Central Laboratories.
Dr. DOUGLAS RIDING	Sub-Director Central Laboratories.
ANTI-RABIC INSTITUTE HOSPITAL.	
Dr. SADEK GIRGUIS MUFTAH BEY	Director.
LUNACY DIVISION.	
Dr. H. W. DUDGEON	Director.
Dr. MOHAMMED FOUAD BEY	Sub-Director.
FOUAD SANATORIUM HELWAN.	
Dr. ABDEL RAOUF HASSAN	Acting Director.
PHARMACIES SECTION.	
Dr. WAHBA NAZMY BEY	Director.
CHILD WELFARE SECTION.	
Dr. ALI FOUAD	Director.
CENTRAL MEDICAL COMMISSION.	
Dr. ABDEL HAMID HAMZA	President.
Dr. ZAKI TEWFIK BEY	Vice-President.
HEALTH INSPECTORATES SECTION.	
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Dr. SELIM SHENOUDA	Divisional Health Inspector, Minia.
Dr. HASSAN HUSNI AFIF	" " " Qena.
Dr. MAHMOUD IBRAHIM	" " " Zagazig.
Dr. FAM BISHAY BEY	" " " Tanta.
Dr. ABDEL AZIZ MOHAMMED EL GHAMRI BEY	Public Health Inspector, Gharbia Province.
Dr. IBRAHIM AMIN MASHALI	Assist. Public Health (I) Inspector, Gharbia Province.
Dr. ISAC KIROLLOS GAID	Assist. Public Health (II) Inspector, Gharbia Province.
Dr. IBRAHIM MUFARRAG BEY	Public Health Inspector, Behera Province.
Dr. MOHAMED ANIS	Assist. Public Health Inspector, Behera Province.

Name	Post
Dr. IBRAHIM LABIB	Public Health Inspector, Assiout Province.
Dr. AHMED ZAKI EL SAYED	Assist. Public Health Inspector, Assiut Province.
Dr. ALFRED NASR GHARZOUZI	Public Health Inspector, Canal Governorate.
Dr. ABDEL HAMID SADEK	Public Health Inspector, Suez Governorate.
Dr. AHMED GAMAL EL DIN EL HIFNY	Public Health Inspector, Daqahlieh Province.
Dr. MOHAMED MOHAMED ABOU EL ELA... ..	Assist. Public Health Inspector, Daqahlieh Province.
Dr. ALI MOHAMED ALI	Public Health Inspector, Menoufieh Province.
Dr. ALI HASSAN EL RAMLI	Assist. Public Health Inspector, Menoufieh Province.
Dr. YOUSSEF EZ EL DIN	Public Health Inspector, Sharqieh Province.
Dr. NASR NABIH	Assist. Public Health Inspector Sharqieh Province.
Dr. ABDEL AZIZ EL BINDARY	Public Health Inspector, Qalioubieh Province.
Dr. MAHMOUD MOHAMED SHALABI	Public Health Inspector, Giza Province.
Dr. ABDEL AZIZ MOHAMED Sharaf	Public Health Inspector, Beni Suef Province.
Dr. HUSSEIN ALI MURTADA	Public Health Inspector, Fayoum Province.
Dr. ABDALLA ZAKI	Public Health Inspector, Minia Province.
Dr. MOHAMED EL HADI HUSSEIN	Assist. Public Health Inspector, Minia Province.
Dr. ISMAIL MOHAMED ISMAIL	Public Health Inspector, Girga Province.
Dr. ABDEL RAHMAN SALEH	Assist. Public Health Inspector, Girga Province.
Dr. NASIF ATIA	Public Health Inspector, Qena Province.
Dr. MOHAMED FARID	Assist. Public Health Inspector, Qena Province.
Dr. MIKHAIL AZIZ	Public Health Inspector, Aswân Province.
Dr. FARID HILMY	Public Health Inspector, Damietta Governorate.
Dr. HAFIZ ZAKI	Principal Medical Officer, Alexandria Police.
CAIRO HEALTH INSPECTORATE.	
Dr. P. G. S. WILLIAMS	Principal Medical Officer.
Dr. A. E. Scott	Assistant Principal Medical Officer.
Dr. MAHMOUD HILMY HUSSEIN	Assistant Principal Medical Officer.
FINANCIAL SECRETARIAT.	
Hanna Antoun Yacoub Bey	Financial Secretary.
FINANCE AND PERSONNEL SECTION.	
Mohamed Farid Eff.	Director.
SECRETARIAT.	
Habib Girgis el Masri Bey	Director.
MEDICAL PERMITS SECTION.	
Abdalla Mikhaïl Eff.	Director.
CENTRAL STORES SECTION	
Gubran Safra Eff.	Director.

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نسب الوفيات الأسبوعية لكل ألف من السكان في الخمس السنوات من سنة ١٩٢٧ إلى سنة ١٩٣١
Weekly Death-rates per 1000 living in quinquennial period 1927 - 1931



S. of E. 1934 (34/315)

ملحة المساحة المصرية سنة ١٩٣٤ (٣٤/٣١٥)

نسبة الوفيات الأسبوعية في سنة ١٩٣٢
Weekly death-rates in 1932.

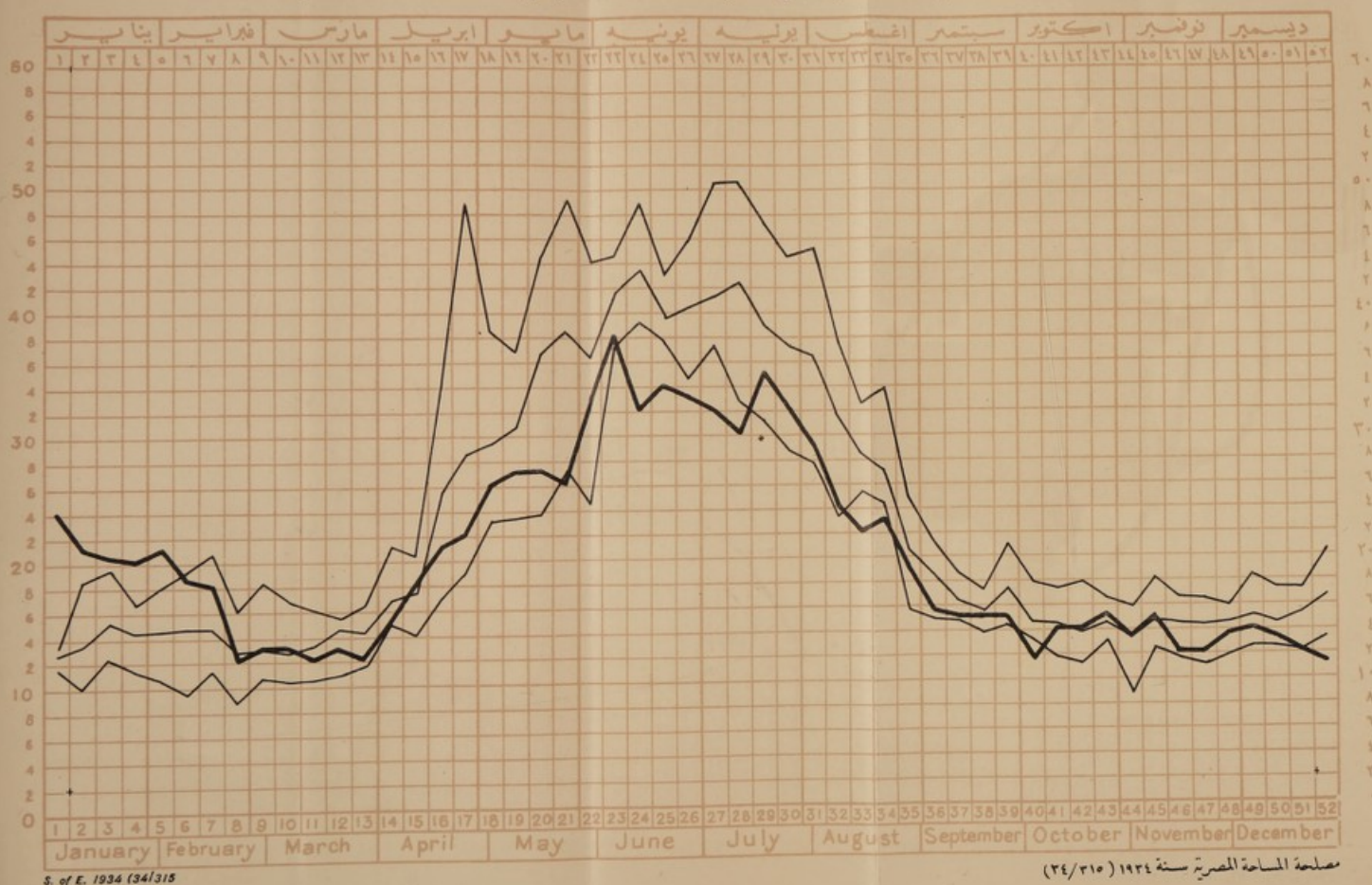
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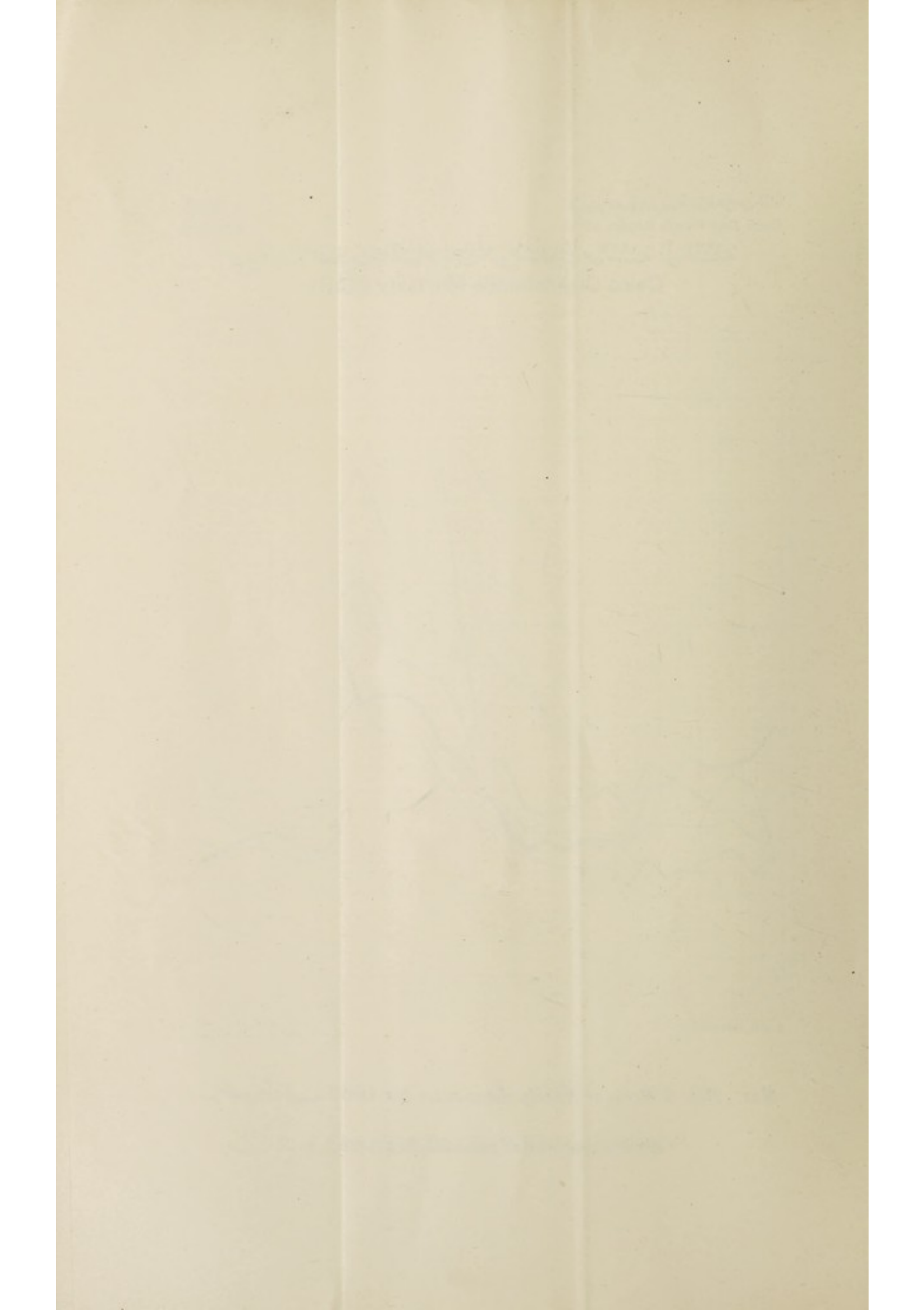
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وفيات الأطفال الذين لا يزيدون عن السنة الأولى من عمرهم التي حدثت بمدينة القاهرة في الخمس سنوات من سنة ١٩٢٧ إلى سنة ١٩٣١
Cairo City Infantile Mortality (Children 0-1) in quinquennial period 1927-1931

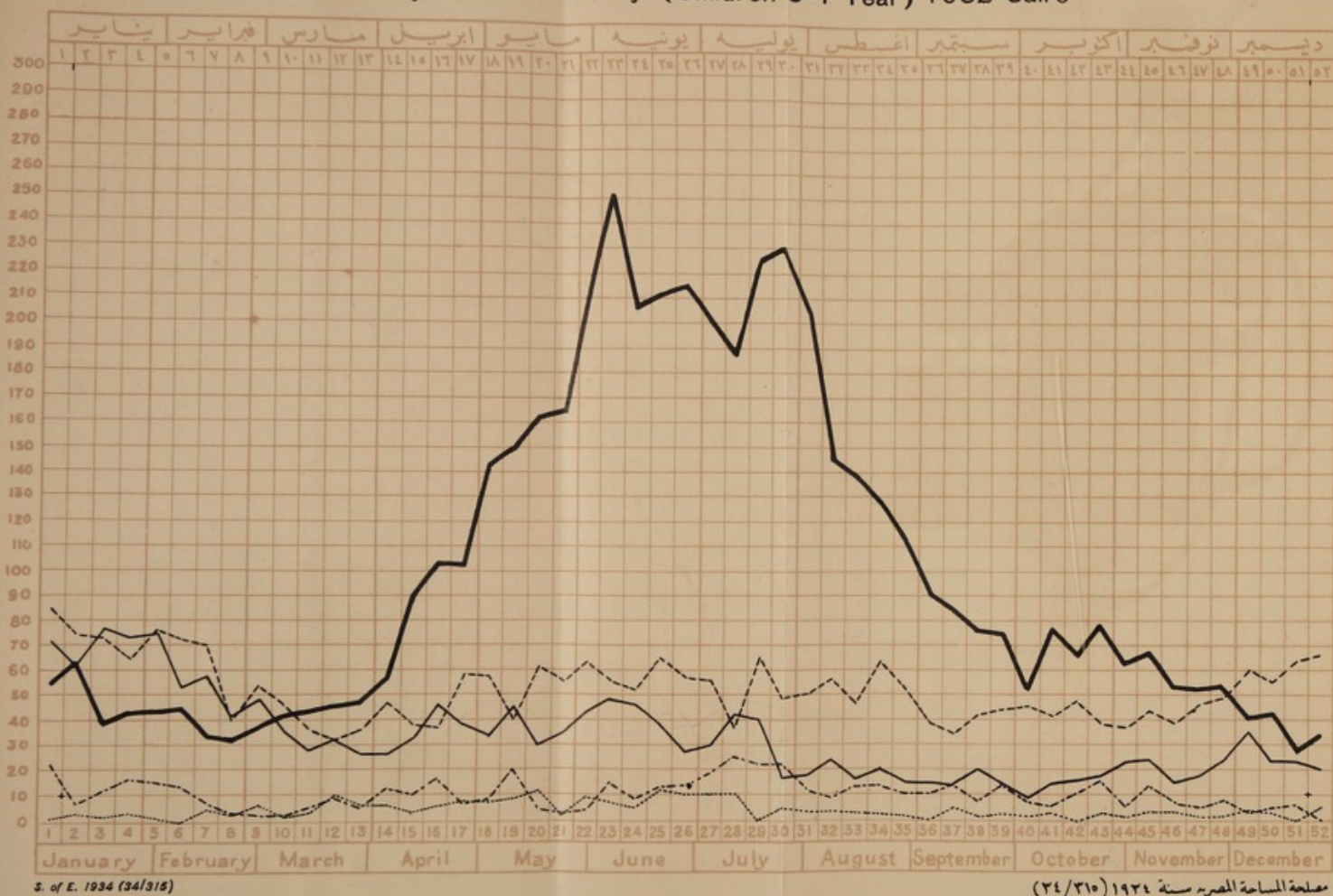


أقصى وأدنى ومتوسط نسبة الوفيات الأسبوعية لكل مائة مولود
Max. , Min. & Mean of Weekly death-rates per 100 Births.

نسبة الوفيات الأسبوعية لكل مائة مولود في سنة ١٩٣٢
Weekly death-rates per 100 Births for 1932.



وفيات الأطفال الأسبوعية للذين لا يزيدون عن السنة الأولى من عمرهم التي حدثت بالقاهرة سنة ١٩٣٢
Weekly Infantile Mortality (Children 0-1 Year) 1932 Cairo



S. of E. 1934 (34/315)

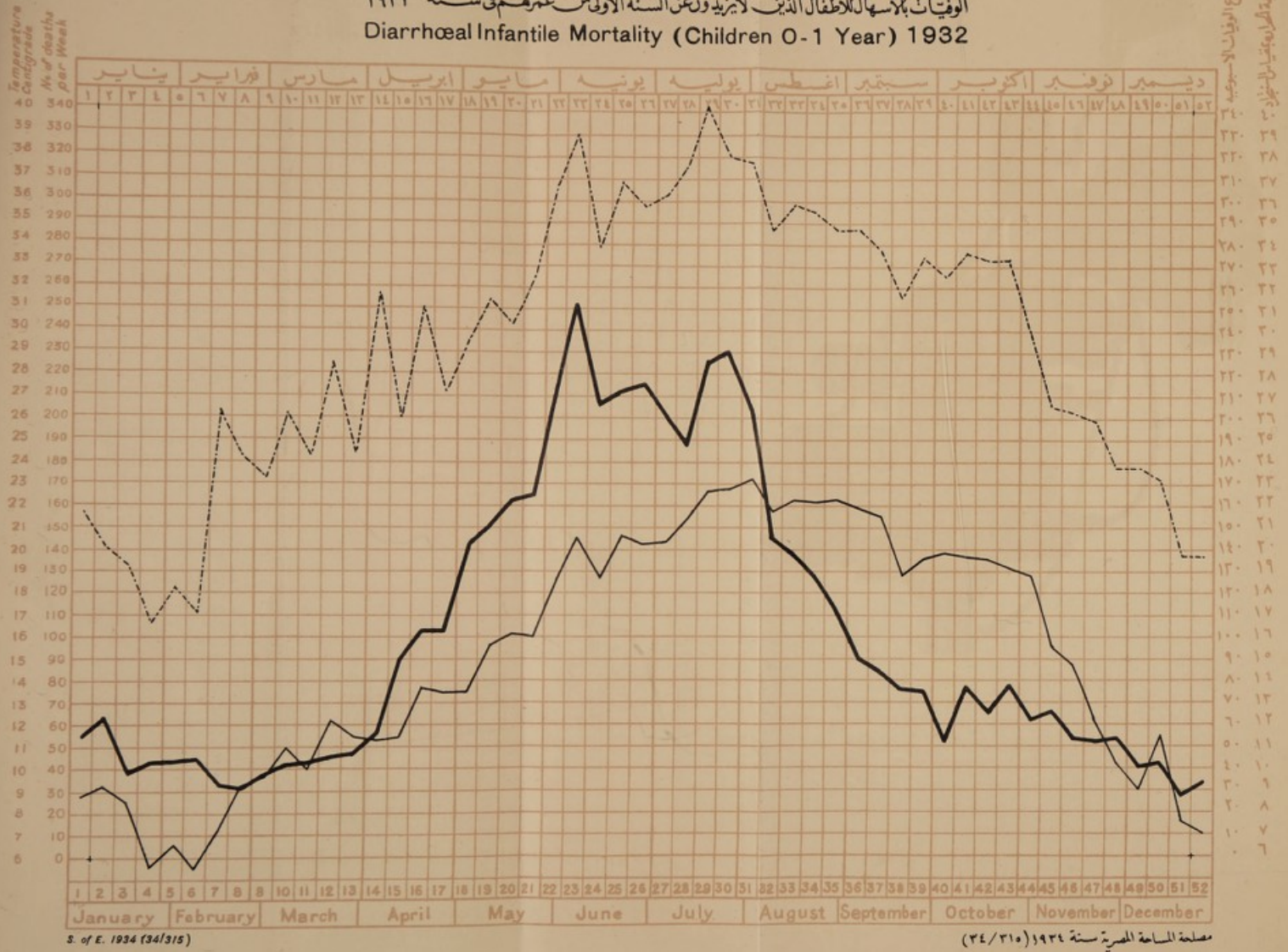
مصلحة المساحة المصرية سنة ١٩٣٤ (٣٤/٣١٥)

Infectious Diseases. الأمراض المعدية Other Diseases. أمراض أخرى Marasmus ضعف أو هزال

Pulmonary أمراض الصدر Diarrhœa & Enteritis الإسهال والنزلة المعوية



الوفيات بالأسهال للأطفال الذين لا يزيدون عن السنة الأولى من عمرهم في سنة ١٩٣٢
Diarrhoeal Infantile Mortality (Children O-1 Year) 1932



Diarrhoea ————— الأسهال

Average Max. Temperature C. - - - - -

متوسط أقصى درجات الحرارة بمقياس سنطيجراد

Minimum Temperature C. —————

أدنى درجات الحرارة بمقياس سنطيجراد

مصلحة المساحة المصرية سنة ١٩٣٤ (٣٤/٣١٥)

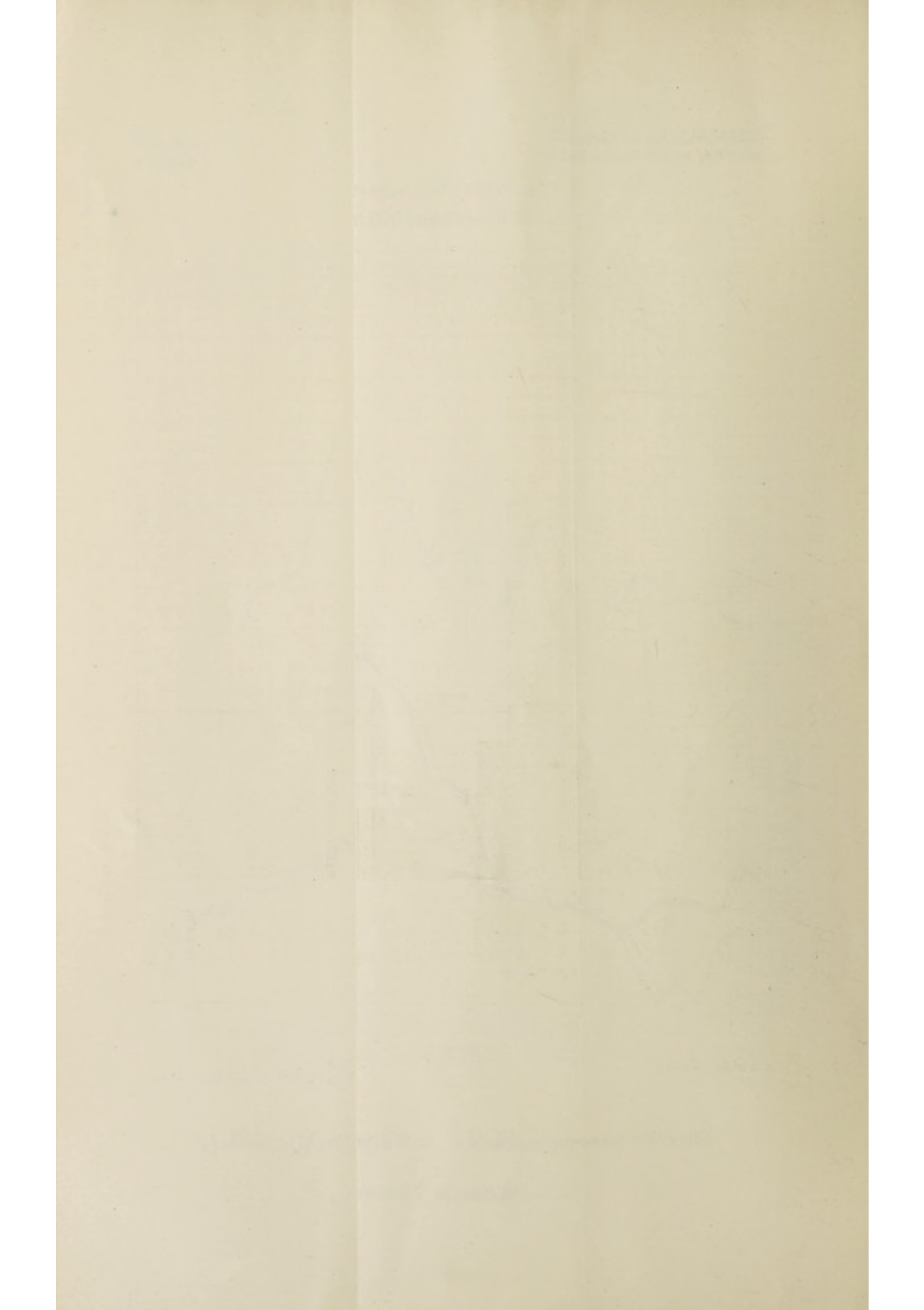
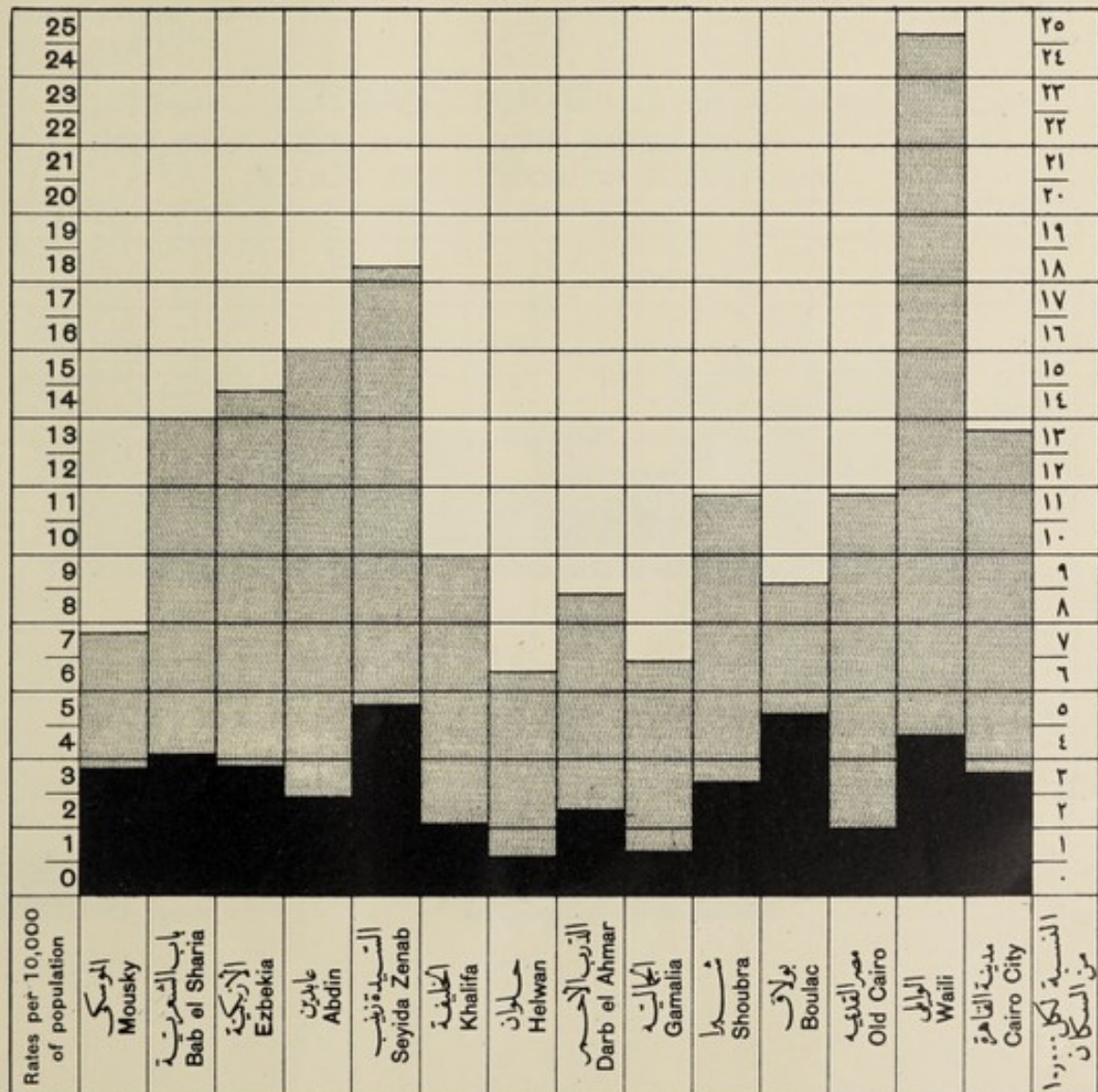


Fig.1
Cairo City Health Report 1932

الشكل رقم ١
تقرير صحة مدينة القاهرة لسنة ١٩٣٢

نسبة اصابات ووفيات الحمى التيفودية باقسام القاهرة في سنة ١٩٣٢ لكل عشرة الاف من السكان
TYPHOID FEVER CASE & DEATH - RATES IN CAIRO DISTRICTS
IN 1932 PER 10,000 OF POPULATION



S. of E. 1934 (34/315)

سنة المراجعة المصرية سنة ١٩٣٢ (٣١٥/٣١٦)

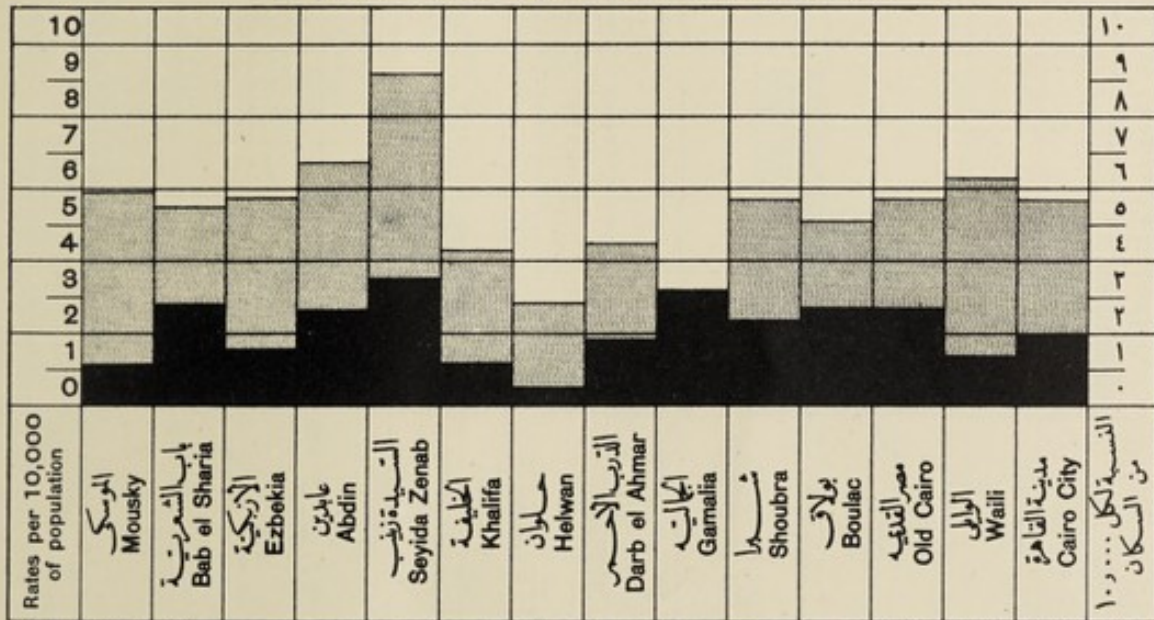
الوفيات
Deaths

الاصابات المبلغ عنها
Cases recorded

Fig. 2
Cairo City Health Report 1932

الشكل رقم ٢
تقرير صحة مدينة القاهرة لسنة ١٩٣٢

نسبة اصابات ووفيات الدفتريا باقسام القاهرة في سنة ١٩٣٢ لكل عشرة الاف من السكان
DIPHTHERIA CASE AND DEATH - RATES IN CAIRO DISTRICTS
IN 1932 PER 10,000 OF POPULATION



S. of E. 1934 (34/315)

مصلحة الصحة العامة سنة ١٩٣٤ (٣٤/٣١٥)

الوفيات
Deaths

الاصابات المبلغ عنها
Cases recorded

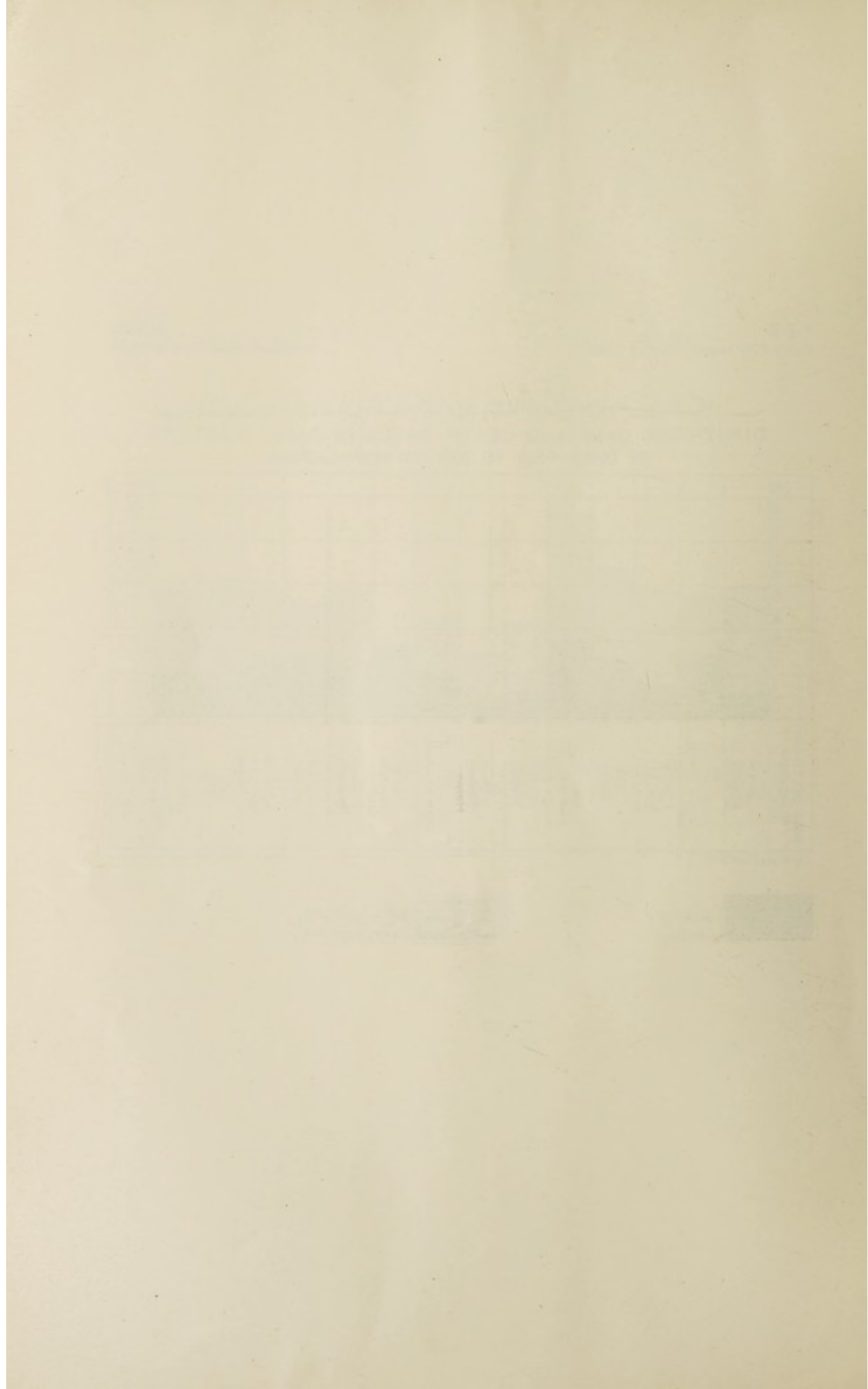
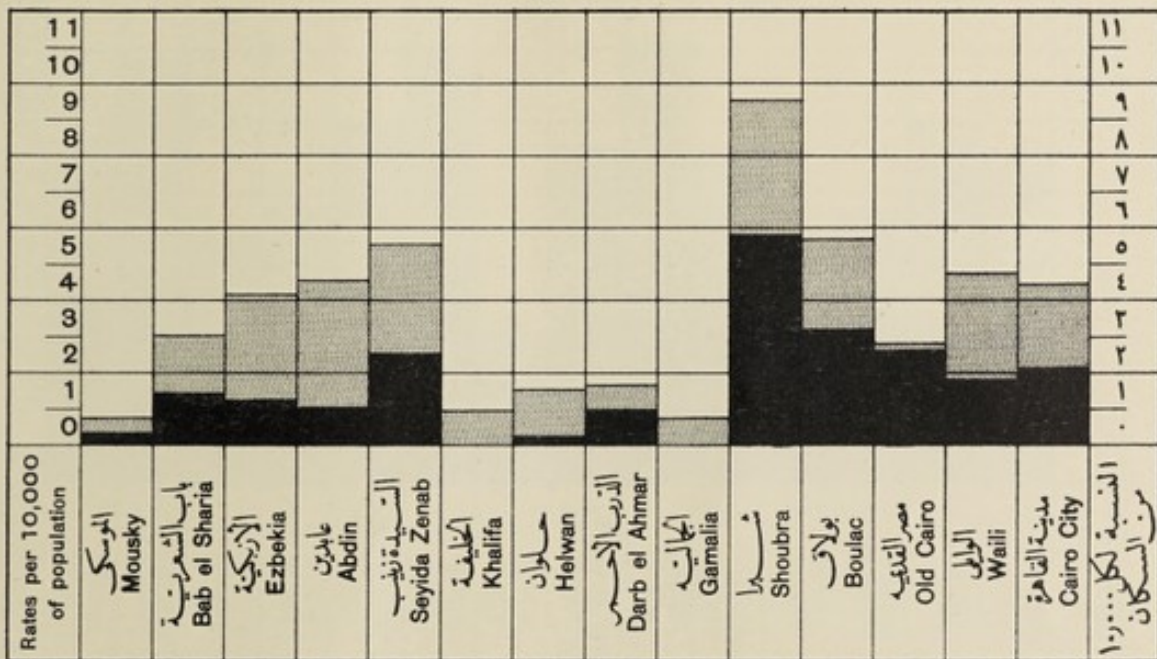


Fig. 3

Cairo City Health Report 1932

الشكل رقم ٣
تقرير صحة مدينة القاهرة سنة ١٩٣٢

نسبة اصابات ووفيات الحصبة باقسام القاهرة في سنة ١٩٣٢ لكل عشرة آلاف من السكان
 MEASLES CASE AND DEATH - RATES IN CAIRO DISTRICTS
 IN 1932 PER 10,000 OF POPULATION



S. of E. 1934 (34/315)

سجل الصحة المصرية سنة ١٩٣٢ (٣٤/٣١٥)

الوفيات
Deaths

الاصابات المبلغ عنها
Cases recorded

THE UNIVERSITY OF CHICAGO

DEPARTMENT OF CHEMISTRY

TABLE I	
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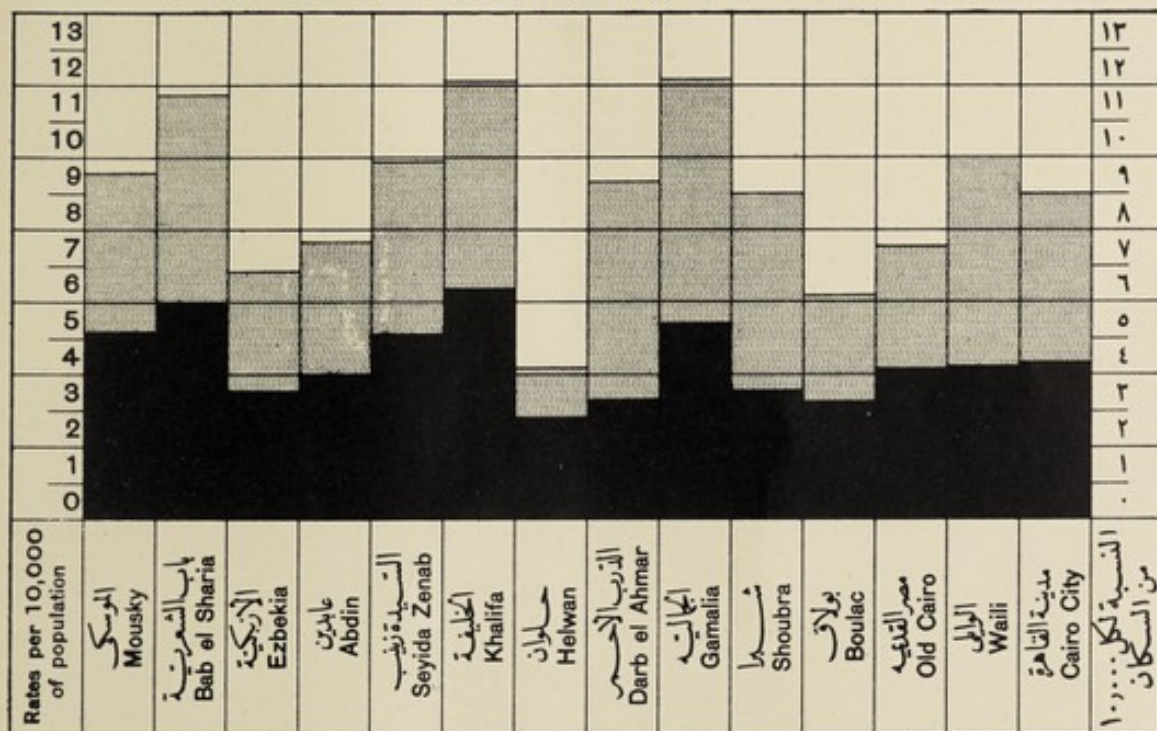
ANALYSIS OF THE DATA

Fig. 4

Cairo City Health Report 1932

الشكل رقم ٤
تقرير صحة مدينة القاهرة سنة ١٩٣٢

نسبة اصابات ووفيات الحمى المخية الشوكية باقسام القاهرة في سنة ١٩٣٢ لكل عشرة آلاف من السكان

CEREBRO SPINAL FEVER CASE AND DEATH - RATES IN CAIRO
DISTRICTS IN 1932 PER 10,000 OF POPULATION

S. of E. 1934 (34/315)

سجل الصحة العامة سنة ١٩٣٢ (٣٤/٣١٥)

الوفيات
Deathsالاصابات المبلغ عنها
Cases recorded



