

## **Annual report of the Sarawak Government Medical Department.**

### **Contributors**

Sarawak. Medical Department.

### **Publication/Creation**

Kuching : G.P.O., [1957]

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S A R A W A K

ANNUAL REPORT



OF THE

MEDICAL DEPARTMENT

FOR THE YEAR

1957

BY

W. GLYN EVANS

M.B., B.Ch., B. Sc. (Wales)

M.R.C.S. (Eng.), L.R.C.P. (London)

DIRECTOR OF MEDICAL SERVICES.

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1957

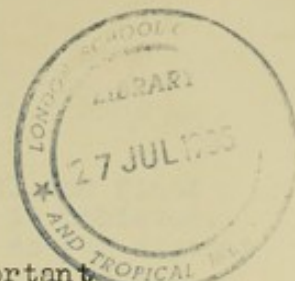


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MEDICAL DEPARTMENT - SARAWAK.

ANNUAL REPORT 1957.



As in previous years quite the most important advance in medical and health things was the anti-malarial work. The target had been set for the year 1957 to cover all the heavily malarial parts of Sarawak; this target was not quite reached although exact plans were formulated by the end of the year to reach it in February 1958, but the programme was on the whole very successful and as an indication of the progress made during the year it can safely be said that there were 120,000 people who would have got malaria during 1957 but who were saved from it by the extension of our work. We were helped as previously by three experts from the W.H.O., two malariologists and one entomologist, but all the other staff and the total expense of the whole project were borne by the Sarawak Government. A complete reorganization of the administration of the work was conducted during the year and there are now three virtually independent teams operating respectively in the First and Second Divisions, Third Division, and the Fourth and Fifth Divisions of Sarawak. There was a very considerable increase in the total number of staff employed and particular mention should be made of two "Superintendents", laymen with no previous special knowledge of anti-malarial or any other medical work. These men were formerly police officers in Malaya but left under the Malayanisation scheme. Special mention should also be made of two new areas of Sarawak not formerly reached by this work, the first being the Kelabit Plateau which was completely sprayed in January assisted by a parachute drop of DDT and other medical supplies by the Royal Air Force. A second visit was paid to this area later in the year and malaria transmission formerly prevalent there has now ceased. The other area not previously reached by the special anti-malaria control project was the second division of Sarawak in one part of which at the year end there remains the only heavily infected part of the country not yet controlled.

The principal vector of malaria in Sarawak is Anopheles leucosphyrus which, because of its habit of not spending much time settled on the walls of rooms, was formerly considered to be unsusceptible to the method of control by residual spray but which we have now found can indeed be controlled by this method. As is always the case when one vector is controlled, others appeared in some places and one which may give us some trouble is barbirostris but laboratory work towards the close of the year showed that barbirostris is not resistant to dieldrin and will therefore almost certainly come under control.

Although there are many pitfalls ahead and it is clear that a great lot of original work has still to be done there is now good reason to be optimistic that the transmission of malaria throughout the whole of Sarawak will be completely prevented ~~throughout the whole of Sarawak will be completely prevented~~ in the course of the next few years after which all that will still be necessary will be a system of surveillance which will of course be a major undertaking but will not be as difficult or expensive as our control project itself. There was a first test of surveillance in the First Division near Kuching in the latter part of the year when an original case of malaria occurred quite unexpectedly in a village that we thought was completely under control. Special teams went into action at once, determined the source of infection, and knocked it out. However good our control becomes within Sarawak there will always be the possibility of imported cases





occurring and perhaps passing the disease on, until the final object of global eradication from the whole world is achieved. A Borneo step towards this ideal which may not be as far distant as we think was the appearance at a Borneo Interterritorial Malaria Conference in November for the first time of representatives from Indonesia with whom we exchanged a great deal of technical information and made arrangements for further cooperation in the future, the object being the eradication of malaria from the whole island of Borneo.

Malaria work was not of course the only advance during the year and many new buildings were completed or in the course of erection towards the year end, notable amongst them being considerable extensions to the hospital at Sibu including a new maternity ward, new childrens ward, new first class ward, new outpatient department and new T.B. ward, also considerable buildings in Kuching, new mental hospital (not quite finished at the year end) for over 200 patients, big extensions to the nurses home, a new block at the General Hospital comprising a midwifery unit and isolation ward for children and a new maternity and child health clinic at Sekama Road. This clinic is of an entirely new design which seems very functional and will probably be copied in other parts of the country. In addition to these buildings in Sibu and Kuching there were also new clinics opened at Song in the third division and Sebuyau in the second division, while at Long San on the Baram in the 4th Division the Roman Catholic Mission opened a maternity home with a Government subsidy. Improvements at the Rajah Sir Charles Brooke Memorial Settlement (lepers) were completed during the year and included amongst other amenities the provision of electric light and an enhanced water supply.

Turning from the maternal to the personal the scheme for the training of "ulu dressers" proved very disappointing and a decision was taken to hold it in abeyance during 1958 pending further consideration. This scheme was conceived following the great success of the midwives' training scheme mentioned below, the idea being to train comparatively ignorant and unschooled young men from distant parts of the country in practical and very simple medical things during a period of about one year in one of our major hospitals after which they could return to their own village or longhouse and take to it simple treatments etc. that would otherwise not be available to their people. The idea was very successful at first but after a few years it became too popular and became in the eyes not only of the country people and of the trainees themselves but also unfortunately amongst some of the administration a cheap and simple substitute for proper medical attention. There arose a great demand for such training from young men seeking a livelihood and also a clamour from some Local Authorities, who felt they wanted more medical attention, to have these ulu dressers posted to them. This seemed to prostitute the whole scheme so it was decided to hold it up for a year or so.

The midwife training programme on the other hand continued as before an unqualified success and at the year end there were a total of 90 girls under training. Some of these training as midwives were properly educated fully trained nurses but the vast majority were comparatively uneducated girls from extremely rural parts of the country who come down to one of the main towns for a little over a year and there learn in an exceedingly practical manner the rudiments of midwifery. They learn how to conduct a normal delivery and how to look after their patients from conception to weaning. They are taught to recognise abnormalities and to call for help when necessary. The writer with considerable





experience of this type of training never ceases to be amazed at the facile way in which these unschooled girls so quickly learn and become exceedingly sensible and practical midwives. When they return to their own villages and longhouses some of them revert to their normal lives although of course their services are available but most are employed as midwives by the Local Authorities who have in some cases established special clinics for them. The midwife training programme is developing along very satisfactory lines indeed.

The training of nurses, male and female, and other medical personnel such as laboratory technicians and dispensers, continued in Sibü and Kuching. The syllabus and curriculum of training have been designed to conform as far as possible with the training of nurses in the U.K. with the idea of one day achieving reciprocity of registration. Very close liaison was maintained with the other British territories in Borneo and also with the Oil Company, which has its own hospitals and nurses' training schools, to maintain as far as possible uniformity and with this object in view examiners for the nurses' examinations were exchanged during the year. Nurses trained by Sarawak Oilfields Ltd., who successfully passed examinations conducted by the joint examiners were given Sarawak Government certificates. Medical training on a considerable scale outside of Sarawak continued as the following table shows:-

Nature of Training	Country	Number of Students.
General Nursing	United Kingdom	5
Dental Nursing	New Zealand	1
Psychiatric Nursing	New Zealand	1
Radiography	United Kingdom	2
Public Health Inspector	United Kingdom	1
	New Zealand	4
Public Health Engineering	Australia	1
Medicine	Singapore	5
	Australia	3
Dentistry	Singapore	1
Dental Mechanic	Malaya	4
Pharmacy	Singapore	3





Inter-territorial liaison in Borneo in addition to that already mentioned in connection with malaria and the training of nursing staff was also maintained and there were frequent exchanges of visits by senior personnel including the Director of Medical Services. At the year end Sarawak agreed to adopt the North Borneo rules for the importation of domestic animals.

With the successful conquest of malaria in sight two other major problems have engaged our attention and they are environmental sanitation especially rural, and tuberculosis. It has been said that the first essential of public health is a good pure water supply and although this has of recent years been largely achieved in the main centres of Sarawak there still remains a great lot to be done in the rural areas. A small sum of money was made available and experiments were conducted during the year to find a cheap and simple means of providing pure water supply to small communities. Instruction was obtained from two different engineering establishments specialising in the provision of small water supplies in the United Kingdom and equipment was ordered from both, each consisting of a 2" galvanised iron pipe inserted into the ground, in the one case by jetting with a high pressure water jet and in the other by hammering with a monkey, and an old fashioned English village pump was fixed to the top of the pipe in each case. Great success was achieved in some places but in others various difficulties were encountered. With some exceptions the mechanical process of inserting the tube was comparatively simple but the difficulties were those of administration of the project and maintenance of the pumps after insertion. The idea was intended mostly for very distant places where expert supervision and organization would not be available. More money has been provided for 1958 and the experiments will continue.

In addition to these attempts to improve rural sanitation the opportunity was taken when accommodation was required upcountry for the malaria teams in the Third Division to build at Nanga Balleh a model longhouse. The most perfect methods of environmental sanitation, that is the processed and piped water supply and water-borne sanitation are not necessarily ideal for our most rural people, Methods must be discovered which are good enough while at the same time practicable for the particular places it is desired to help.

It seems as though the other big problem, tuberculosis, will have to wait a while before a total effort can be made to eradicate it, but this is not to say that nothing is being done. Tuberculosis in Sarawak must be considered more a social disease than an infectious disease and although of course a great deal can be done for individual cases by treatment of various sorts yet a total war against this disease will be conducted as much by a general improvement of living conditions as by doctors and nurses. However considerable progress was made with the purely medical aspects of the problem.

In Kuching a convalescent home for 36 patients was built by the Anti Tuberculosis Association of Sarawak which is intended to take patients between the time of completing active treatment and their return to ordinary life. This should in some measure relieve the pressure on available beds in hospital for the treatment of this disease, but it is felt that it will never be possible to hospitalise all cases and efforts have been concentrated therefore on domiciliary treatment for which purpose one medical officer was sent to



Inter-epidemiological studies in horses in addition to last already mentioned in connection with certain of the findings of nursing staff was also maintained and there were frequent exchanges of visits by certain persons including the Director of Medical Services. At the year end Bureau agreed to adopt the health service rules for the operation of domestic animals.

With the successful support of reports in eight to other major problems have engaged our attention and they are environmental sanitation especially rural, and tuberculosis. It has been said that the first essential of public health is a good pure water supply and although this has not been fully achieved in the main centers of the country there still remains a great lot to be done in this respect. A small amount of money has been available and experiments were conducted during the year to find a cheap and simple means of providing pure water supply in rural communities. Instructions were obtained from the different engineering establishments pertaining to the provision of well water supplies in the United States and equipment was ordered from both, each consisting of a 2" galvanized iron pipe inserted into the ground, in the case of tubing with high pressure water jet and in the other by hammering with a mallet, and the finished shallow well was connected to the top of the pipe in each case. From several sources in some places but in others various difficulties were encountered. With some exceptions the technical progress of installing the tube was comparatively slight but the difficulties were those of maintenance. The tubes are maintained mostly for very short periods where exact supervision and maintenance would not be available. Much money had been provided for 1933 and the experiments will continue.

In addition to these attempts to improve rural sanitation the opportunity was taken when appropriate and practical measures for the maintenance of the Division to hold at least a small number of meetings. The most perfect method of environmental sanitation, that is the processed and piped water supply and water-borne sanitation are not necessarily ideal for our most rural people. Methods must be discovered which are good enough while at the same time practical for the particular areas in which needed to help.

It seems as though the other big problem, tuberculosis will have to wait a while before a total effort can be made to organized it, but this is not to say that nothing is being done. Tuberculosis in horses must be considered as a medical disease than an infectious disease and although of course a great deal can be done for individual cases by treatment of various kinds, yet a total eradication of this disease will be considered as such by a rational improvement of living conditions as by doctors and nurses. However, the national program was made with the purely medical aspects of the problem.

In looking a epidemiological work for 1933 patients were built by the first Tuberculosis Association of Bureau which is intended to take patients between the time of applying active treatment and until they are completely cured. This should in some measure relieve the pressure on available beds in hospitals for the treatment of this disease, but it is felt that it will have to be possible to handle the all cases and efforts have been concentrated therefore on tuberculosis treatment for which response and medical officers are now in

Hongkong to study the special method of ambulatory treatment of this disease being used there. The main emphasis in treatment was to maintain chemotherapy for prolonged periods of at least two years of continuous treatment in various combinations of drugs. Such outpatient treatment was continued from rural dispensaries after patients returned to their home villages from hospital and after an interval of three or six months they would return for X-ray check.

During the year a very complete survey was made amongst the members of the Sarawak constabulary and their families. All police personnel, families and dependents living in the same quarters were X-rayed by mass radiography methods and all doubtful or positive cases were recalled for a large film and further investigations. 646 persons were X-rayed under this scheme and 6 were discovered positive.

Pupils from nearly all schools in Kuching and the vicinity were also x-rayed and it was discovered that in certain schools practically all pupils showed healed primary lesions. The new ruling by Government that all teachers in aided schools should be x-rayed and that teachers found to be suffering from tuberculosis could have prolonged sick leave on full pay resulted in the discovery of 21 active cases of tuberculosis amongst 831 teachers. School children X-rayed were 1800 of whom 9 were discovered with active disease. The Prison Department staff and families were also examined by x-rays and of 121 examinations 8 were discovered to be positive.

Mention has been made of the Anti-Tuberculosis Association of Sarawak, a voluntary body, very active in many parts of the country supported by voluntary contributions and by donations from the Social Welfare Council of which more is written elsewhere in this report. A.T.A.S. is active not only in Kuching but also in the Fourth Division where at Miri there is a tuberculosis hospital of about 50 beds and where a decision was taken during the year to establish tuberculosis convalescent homes in the form of Dayak longhouses at Marudi and Bintulu which venture will be assisted by donations from the A.T.A.S. control fund.

There is a good Government Dental Department with four fully qualified dentists who operate principally in the big outpatient Health Centre in Kuching and at the hospital at Sibü, but who also travel about from time to time to other parts of the country. There is only one fully qualified dentist in private practice, but a very large number of unqualified registered dentists. For many years past there have been large numbers of unqualified and unregistered dentists practising dentistry against the law, nearly all being relatives or close associates of existing registered dentists and helping them in their practices. Legislation was introduced to rectify this anomaly and arrangements were made to conduct examinations of these unregistered but practising dentists and to admit to the registers those who satisfied the examiners. A total of 73 of these people were examined of whom 29 were admitted to the registers.

Two diseases of epidemiological importance deserving mention in this report are endemic goitre and yaws. There is a lot of iodine-deficiency goitre in the hinterland of Sarawak especially in the second and third divisions. Near the coast where people get some sea food of course the disease is absent and in certain places in the interior notably the



...to study the special method of maintaining treatment of this disease being used here. The main emphasis in treatment was to maintain chemotherapy for prolonged periods of at least two years of continuing treatment in various combinations of drugs. Such outpatient treatment was common. As a result, after patients returned to their home villages from hospital and after an interval of time on six months they would return for X-ray check.

During the year a very complete survey was made amongst the members of the Gansu Provincial Government and their families. All police personnel, families and dependents living in the same quarters were X-rayed by mass radiography methods and all doubtful or positive cases were recalled for a large film and further investigations. 600 persons were X-rayed under this scheme and 6 were discovered positive.

Pupils from nearly all schools in Kuching and the vicinity were also X-rayed and it was discovered that in certain schools practically all pupils showed positive reactions. The new ruling by Government that all teachers in aided schools should be X-rayed and that teachers found to be suffering from tuberculosis could have prolonged sick leave on full pay resulted in the discovery of 21 positive cases of tuberculous among 617 teachers. School children X-rayed were 1500 of whom 9 were discovered with active disease. The British Department staff and families were also examined by X-rays and of 101 examinations 8 were discovered to be positive.

Mention has been made of the Anti-Tuberculosis Association of Gansu, a voluntary body, very active in many parts of the country supported by voluntary contributions and by donations from the Social Welfare Council of which there is written evidence in this report. A.T.A.S. is active not only in Kuching but also in the Chengde Division where as there is a tuberculosis hospital of about 50 beds and where a decision was taken during the year to establish tuberculosis dispensary houses in the form of day hospitals at Yantai and Bishui which ventures will be assisted by donations from the A.T.A.S. central fund.

There is a good Government Dental Department with four fully qualified dentists who operate voluntarily in the big provincial Health Centre in Kuching and at the hospital at Shui, but who also travel about from time to time to other parts of the country. There is only one fully qualified dentist in private practice, but a very large number of unqualified registered dentists. For many years past there have been large numbers of unqualified and unregistered dentists practicing dentistry against the law, partly all being relatives or close associates of existing registered dentists and helping them in their practices. Legislation was introduced to rectify this anomaly and arrangements were made for prompt examination of these unregistered but practicing dentists and to limit to the registered class the activities of the examiners. A total of 15 of these people were examined of whom 22 were admitted to the registers.

Two diseases of entomological interest have been mentioned in this report as endemic to the area. There is a lot of leishmaniasis in the districts of Gansu, especially in the second and third divisions. Near the coast where people get more food of course the disease is absent and in certain places in the interior notably the

Kelabit area of the Fourth Division there are salt springs rich in iodine so that people who use this salt do not get the disease either but in the rest of the country endemic goitre is very common. The salt commonly used by these people is very cheap and coarse salt originating from Red Sea ports and from Siam where it is produced from sea water by processes of fractional crystallisation and is therefore deficient in iodine. The possibility was considered but discarded of insisting that all imported salt should contain a sufficient quantity of iodine and instead it was decided to instal machinery for the iodisation of all imported salt after arrival. Details were worked out, money was provided and machinery was on order at the year end but it remains to be seen how it will work.

Mass campaigns in limited geographical areas against yaws have continued and as a good example may be quoted a campaign carried out in the second division in July and August. Two senior medical auxiliaries did a walk lasting nearly three weeks and gave over 2,400 injections of penicillin aluminium monostearate to a total population of 2417 persons. In such difficult country the method employed where we find yaws is not to waste time with blood examinations or exact examination of contacts, but simply to inject the whole population with a curative dose of penicillin. In several places as a check we have examined communities that have received this mass treatment several years ago and we find that the disease does not return.

The foregoing account does not of course survey the whole of medical and health activities of Sarawak for the year 1957 but gives some indication of progress which has been made in spite of many frustrations chief amongst which was the great shortage of senior medical staff, especially doctors.



Keldoff view of the Fourth Division there are only a few  
 able to follow as they go to the use of the country  
 the disease either in the form of the country  
 going is very common. The only country used by these people  
 is very cheap and common and is distinguished from the other  
 and from them where it is produced from sea water by evaporation  
 of fractional crystallization and is therefore different in  
 nature. The possibility was considered but abandoned of  
 insisting that all imported salt should contain a sufficient  
 quantity of iodine and instead it was decided to issue  
 certificates for the production of all imported salt which certify  
 details were worked out, money was provided and machinery was  
 set up at the port and but it remains to be seen how it  
 will work.

Much emphasis is laid on geographical areas and  
 have been considered and as a good example may be given a  
 comparison made in the second division in 1914 and  
 1915. Two other medical examinations had a similar  
 nearly three weeks and have over 2,500 instances of periodic  
 diseases mentioned in a local population of 250,000 persons.  
 In most districts during the winter months when we find  
 very few cases the winter months examination of the  
 examination of patients, but only in large towns  
 patients with a curative form of periodicity. In several  
 places we have examined patients that have  
 received this disease several years ago and we find  
 that the disease does not return.

The following account does not of course cover the  
 whole of medicine and health activities of the work for the  
 year 1917 but gives some indication of the work which has  
 been made in spite of the restrictions which were placed  
 on the great number of major medical staff, especially  
 dentists.

QUALIFIED MEDICAL STAFF AS AT 31.12.57.

NAME AND QUALIFICATIONS	APPOINTMENT	DATE OF APPOINTMENT TO PRESENT POST	DATE OF APPOINTMENT TO THE SERVICE	REMARKS
W. Glyn Evans, M.B., B.Ch. (Wales), B.Sc. (Wales), M.R.C.P. (Eng.) L.R.C.P. (London).	Director of Medical Services	18 . 9 . 1952	7 . 8 . 1929	Transferred from Malaya
R. Dickie, M.B., Ch.B. (Glasgow, 1942) D.T.M. & H. (London, 1948), D.P.H. (Glasgow, 1954)	Deputy Director of Medical Services, Sarawak.	7 . 5 . 1955	6 . 7 . 1943	Transferred from Nigeria
M.T. Read, M.R.C.S., L.R.C.P., D.T., M & H	Deputy Director of Medical Services, Brunei	25 . 5 . 1956	October, 1939	
E.H. Wallace, M.B., Ch.B. (Glasgow)	Ophthalmologist	13 . 10 . 1952	30 . 5 . 1948	
M.A. Rozalla, M.B. (Calcutta), D.P.H.	Medical Officer	22 . 6 . 1953	16 . 12 . 1949	Seconded for duty in Brunei
J.D. Finlayson, M.B., Ch.B. (Glas. 1934)	Medical Officer in-Charge, General Hospital, Kuching.	4 . 1 . 1955	1 . 1 . 1955	
T.M. Kraszewski, M.B., Ch.B. (Polish Medical School, Edin.).	Medical Officer in-Charge, A.T.A.S. Clinic, Kuching.	30 . 5 . 1952	30 . 5 . 1952	
P.P. Gopala Pillai, M.B., B.S. (Madras)	Medical Officer	11 . 5 . 1952	15 . 10 . 1949	On Leave prior to retirement.



NAME	QUALIFICATIONS
Director of Medical Services	M.B., B.S. (Edin.), (M.D.), (Lond.), D.Sc. (Wales), M.R.C.P. (Edin.), M.R.C.P. (Lond.)
Deputy Director of Medical Services	M.B., Ch.B. (Glasgow, 1932), M.T.M. & H. (Lond., 1938), D.P.H. (Glasgow, 1934)
Deputy Director of Medical Services	M.B., Ch.B., M.R.C.P., M.R.C.S., M.A. & H.
Ophthalmologist	M.B., Ch.B. (Glasgow)
Medical Officer	M.B., Ch.B. (Edin.), D.P.H. (Glasgow)
Medical Officer in Charge, General Practice	M.B., Ch.B. (Glas., 1934)
Medical Officer in Charge, General Practice, Oving, Kent	M.B., Ch.B. (Edin. Medical School, 1931)
Medical Officer	M.B., B.S. (Edin.)

NAME AND QUALIFICATIONS	APPOINTMENT	DATE OF APPOINTMENT TO PRESENT POST	DATE OF APPOINTMENT TO THE SERVICE	REMARKS
J.A. Menon, M.E., B.S.	D.M.O. 3rd Division & M.O. i/c. Lau King Howe Hospital, Sibü.	9 . 11 . 1954	23 . 10 . 1954	
T.M.G. Jacques	Medical Officer	11 . 2 . 1954	11 . 2 . 1954	On leave
P.W. Bedford, F.Sc., M.B., Ch.B.	D.M.O. 2nd Division & M.O. i/c., Simanggang Hospital, Simanggang.	29 . 3 . 1956	May , 1953	
Chong Chun Hiar, M.B., B.S. (Univ. of Malaya Singapore).	Medical Officer	22 . 6 . 1954	22 . 6 . 1954	Locally Appointed.
Elsie Yim, M.B., B.S. (Univ. of Malaya, Singapore).	Lady Medical Officer	10 . 2 . 1954	10 . 2 . 1954	On Agreement.
Wong Soon Kai, M.B., B.S. (Univ. of Malaya, Singapore).	Medical Officer, Sibü	11 . 1 . 1955	11 . 1 . 1955	Locally Appointed.
Mark Slade, M.F.C.S., L.R.C.P.	Medical Officer, Sibü	31 . 10 . 1956	28 . 2 . 1942	On Agreement.
H.W.W. Marcus, M.D.S. (Sydney), D.D.S.	Dental Officer	17 . 7 . 1949	17 . 7 . 1949	
Yim Khai Sun, B.D.S. (Univ. of Malaya)	Dental Officer	1 . 5 . 1955	1 . 5 . 1955	Locally Appointed.
G.J. Holmberg, D.D.S. (Univ. of Malaya)	Dental Officer	29 . 3 , 1955	29 . 3 . 1955	- do -
J.N. Marcus, B.D.S. (Sydney)	Dental Officer	24 . 2 . 1956	- 1949	Seconded to Jesselton.
F.D. O'Snaughnessy, M.B.Ch.B.	Medical Officer, Sibü	12. 12. 1957	Jan. 1955	
R.M. Melville, M.B. Ch. B.	L. Medical Officer	27 . 7 . 1957	Jan. 1955	
E.M. Melville, M.B. Ch. B.	Lady Medical Officer	1. 12. 1957	1. 12. 1957	
E.M. Bedford , M.B. Ch.B.	Lady Medical Officer	1. 7. 1956	1. 7. 1956	



APPOINTMENT		NAME AND QUALIFICATION
D.M.O. 3rd Division K.M.C. 1st Div New Hospital, S.		Mason, M.E., B.S.
Medical Officer		J. Jackson
D.M.O. 2nd Division K.M.C. 1st Div Hospital, S.		Bedford, I. Col., M.B., Ch.B.
Medical Officer		G. Gnanapavan, M.B., B.S. (Univ. of Malaya, Singapore)
Medical Officer		A. Yip, M.D., B.S. (Univ. of Malaya, Singapore)
Medical Officer		Gnanapavan, M.B., B.S. (Univ. of Malaya, Singapore)
Medical Officer		Blair, M.H.C.B., I.R.O.T.
Dental Officer		J. Brown, M.B.S. (Sydney), D.D.S.
Dental Officer		Kiet Gan, J.D.S. (Univ. of Malaya)
Dental Officer		Hainberg, D.D.S. (Univ. of Malaya)
Dental Officer		Harris, D.D.S. (Sydney)

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APPENDIX II.

ESTABLISHMENT - SENIOR STAFF

	<u>Approved</u>	<u>Available at 31.12.57.</u>
Director of Medical Services	1	1
Deputy Director of Medical Services	2	2 (one for Brunei)
Surgeon	1	1
Ophthalmologist Specialist	1	1
Medical Officers	16	15
Dental Officers	4	4
Pharmaceutical Chemist	1	1
Sanitary Superintendent	1	1
Travelling Sanitary Superintendent	1	1
Travelling Dispensaries Superintendent	1	1
Superintendent, Leper Settlement	1	1
Superintendent, Mental Hospital	1	1
Matron, Grade I	1	1
Matron, Grade II	2	1 (one for Brunei).
Sister Tutors	3	1
Health Sisters	3	3
Social Welfare Officer	1	1
Nursing Sisters	12	12

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ARTICLE II

EMPLOYMENT - SENIOR STAFF

Available at 12.31.52	Agency	Position
1		Director of Medical Services
2		Deputy Director of Medical Services
1		Surgeon
1		Ophthalmologist Specialist
15		Medical Officers
4		Dental Officers
1		Pharmaceutical Officer
1		Sanitary Epidemiologist
2		Traveling Sanitary Superintendent
1		Traveling Dispensary Superintendent
1		Superintendent, Army Hospital
1		Superintendent, Naval Hospital
1		Station, Grade I
3 (one vacant)		Station, Grade II
1		Station, Grade III
1		Health Station
1		Social Welfare Officer
12		Junior Station

SHIPPING STATISTICS - PORT OF KUCHING

1957

A R R I V A L.

PORT	TRIPS	TONNAGE	CREW	PASSENGERS
Singapore	194	100936.58	9769	3428
Jesselton	2	10027.07	709	-
Hong Kong	26	19174.42	1662	130
Pulo Bukom	9	812.62	122	-
Celebes in Indonesia	5	74.00	39	-
Palembang	8	4392.13	222	-
Sg. Genong	1	593.21	28	-
Pulo Sambulili	1	14.00	14	-
Bangkok	22	18341.24	1073	-
Pulo Serasan	21	129.04	90	-
Kuala Belait	4	558.15	78	-
Labuan	17	3057.11	374	1
Pulo Wangi "angi	1	12.00	7	-
North Borneo	25	15634.21	1009	39
Brunei	7	358.05	95	48
Pladjoe	8	3778.51	218	-
Sambas	2	5.00	10	-
Balek Papan.	1	484.47	26	-
	354	178381.81	15545	3646

D E P A R T U R E S.

PORT	TRIPS	TONNAGE	CREW	PASSENGERS
Singapore	123	83297.23	5241	-
Bangkok	14	11950.59	663	-
Labuan	143	1487.96	-	-
North Borneo	46	31298.98	2007	8
Hong Kong	22	15462.64	1342	4
Brunei	13	642.84	145	-
Kuala Belait	5	432.79	59	-
Pulo Serasan	19	185.91	86	-
Japan	1	56.82	19	-
Pontianak	12	3096.82	314	-
Sg. Gerong	1	593.21	24	-
Pulo Bukom	12	2094.58	220	-
Sambas	1	3.00	5	-
Pulo Madafolo	6	3,75.00	44	-
Pladjoe	7	3317.18	188	-
Pulo Sambulili	1	14.00	14	-
Palembang	1	593.00	25	-
Pulo Wangi Wangi	1	12,00	7	-
Total	428	154614.55	10407	12



TRIP STATISTICS - PORT OF KUALA

1957

ARRIVAL

PORT	TRIPS	TONNAGE	CREW	PASSENGERS
Batavia	1	100.00	10	10
Bombay	1	100.00	10	10
Calcutta	1	100.00	10	10
Canton	1	100.00	10	10
Cebu	1	100.00	10	10
Colon	1	100.00	10	10
Hankow	1	100.00	10	10
Harbin	1	100.00	10	10
Hong Kong	1	100.00	10	10
London	1	100.00	10	10
Manila	1	100.00	10	10
North Borneo	1	100.00	10	10
Penang	1	100.00	10	10
Perth	1	100.00	10	10
Shanghai	1	100.00	10	10
Singapore	1	100.00	10	10
Sourabaya	1	100.00	10	10
Tientsin	1	100.00	10	10
Yokohama	1	100.00	10	10
<b>Total</b>	<b>20</b>	<b>2000.00</b>	<b>200</b>	<b>200</b>

DEPARTURE

PORT	TRIPS	TONNAGE	CREW	PASSENGERS
Batavia	1	100.00	10	10
Bombay	1	100.00	10	10
Calcutta	1	100.00	10	10
Canton	1	100.00	10	10
Cebu	1	100.00	10	10
Colon	1	100.00	10	10
Hankow	1	100.00	10	10
Harbin	1	100.00	10	10
Hong Kong	1	100.00	10	10
London	1	100.00	10	10
Manila	1	100.00	10	10
North Borneo	1	100.00	10	10
Penang	1	100.00	10	10
Perth	1	100.00	10	10
Shanghai	1	100.00	10	10
Singapore	1	100.00	10	10
Sourabaya	1	100.00	10	10
Tientsin	1	100.00	10	10
Yokohama	1	100.00	10	10
<b>Total</b>	<b>20</b>	<b>2000.00</b>	<b>200</b>	<b>200</b>

KUCHING AIRPORT RETURNS

ARRIVAL

PORT	TRIPS	CREW	PASSENGERS
Singapore	424	1270	2653
North Borneo	303	912	3062
Brunei	34	72	54
	761	2254	5769

DEPARTURE

PORT	TRIPS	CREW	PASSENGERS
Singapore	340	1111	2034
North Borneo	320	965	2702
Brunei	64	170	308
Total	724	2246	5044



ARRIVAL AIRPORT

ARRIVAL

PORT	TRIPS	ORIG	FARE
Singapore	151	1270	2653
North Borneo	303	912	2662
Batavia	24	75	24
Total	478	2257	5339

DEPARTURE

PORT	TRIPS	DEST	FARE
Singapore	240	1111	2651
North Borneo	350	962	2702
Batavia	61	170	308
Total	651	2243	5661

APPENDIX IV

GENERAL HOSPITAL

In-patients Returns - 1957.

The total number of admission for the year 1957 was 7,430. The list below shows the number of different races admitted to Hospital during the year.

Races.

Chinese	.....	4,804
Malays	.....	740
Land Dayaks	.....	1,000
Sea Dayaks	.....	568
Indians	.....	121
British	.....	88
Eurasians	.....	24
Indonesians	.....	38
Kayan	.....	9
Melanoes	.....	7
Kelabits	.....	6
Kenyahs	.....	4
Dutch	.....	4
Ceylonese	.....	3
Australian	.....	2
Irish	.....	2
Italian	.....	2
Siamese	.....	2
Japanese	.....	2
Pakistanis	.....	2
Muruts	.....	1
Dusun	.....	1

Births

Total number of births for the year	.....	2,124
Total number of deaths for the year	.....	454

Domiciliary Midwifery

Total number of births for the year	.....	632
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TABLE OF LABORATORY WORK FOR THE YEAR 1957, KUCHING, GENERAL  
HOSPITAL.

Total number of Examinations done	.....	40,750
Bacteriological Work	.....	13,973
Parasitology (including 1,068 Blood Films for Malaria Parasites)	.....	3,563
Blood Grouping	.....	3,325
Histology	.....	2,328
Chemical Analysis	.....	7,837
Medico-Legal	.....	356
Khan Tests	.....	9,368

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LABORATORY WORK FOR THE YEAR 1951, MEMPHIS, TENNESSEE  
HOSPITAL

60,750	Number of examinations done
42,973	Diagnostic work
3,222	Biology (including 1,000 blood films for malaria parasites)
3,322	Grouping
2,222	Chemistry
7,007	Physical Analysis
322	Legal
2,222	Other

HOSPITAL BEDS

1957.

	Number of Category of Beds					REMARKS
	General	Obstetrics	Tuberculosis	Infectious	Mental	
General Hospital Kuching.	177	30	58	28	-	
Mental Hospital, Kuching.	-	-	-	-	220	
Lau King Howe Hospital, Sibn.	105	36	48	4	4 (for observation case only)	
Simanggang Hospi- tal, Simanggang.	50	2	6	7	-	
T.B. Hospital, Miri.	-	-	42	-	-	





STATISTICAL RETURNS OF A.T.A.S. CLINIC

FOR THE YEAR 1957.

The following are figures of attendances of the ATAS Clinic for the year 1957:

1.	Total number of Miniature X-rays taken for the year ..	8057
2.	Total number of Large films taken for the year .....	4672
	(a) No. of patients referred for Large Film .....	902
	(b) No. of new T.B. patients confirmed by Large Film ..	549
	(c) No. of patients discovered with other chest diseases	13
	(d) No. of Large films taken for follow-up .....	2686
	(e) No. of L.F. taken for Outpatient Department .....	1123
3.	Total No sputum sent for examination .....	3450
	(a) No. of new T.B. patients confirmed by laboratory tests .....	237
4.	Total No. of new T.B. patients for the year .....	560
	(a) No. of patients referred for hospital treatment ...	66
	(b) No. of patients referred for treatment to Static Dispensary .....	281
	(c) No. of new T.B. patients from Kuching .....	247
	(d) No. of new TB patients from elsewhere in 1st Division .....	263
	(e) No. of new TB patients from other Divisions .....	45
5.	Total No. of patients treated in ATAS .....	29982
	(a) No. of patients attending for Streptomycin inj.	24938
	(b) No. of patients attending for repeat medicines (PAS & INAH) .....	14599
	(c) No. of patients receiving P.P.	445
6.	Total No. of patients discharged as being cured .....	35
7.	Grand total of all patients attending ATAS For the year	42127

-----

1. Racial incidence of Pulmonary TB for the year 1957.

Chinese	.....	293
Dayaks	.....	133
Malays	.....	120
Indians	.....	10
Others	.....	4
Total	.....	560

2.	Number of Policemen & families X-rayed .....	646
	TB. discovered among them .....	6. (9,25%)

3.	Number of Prison Warders & families X-rayed ....	121
	TB discovered amongst them .....	8 (6,11%).

ANNEX VI

STATISTICAL REPORT OF THE CLINIC

FOR THE YEAR 1937

The following are figures of attendance at the  
TAB Clinic for the year 1937:

1. Total number of patients referred to the clinic for the year .....	1,000
2. Total number of large films taken for the year .....	1,000
(a) No. of patients referred for large films .....	1,000
(b) No. of new T.B. patients confined by large films .....	1,000
(c) No. of patients diagnosed with other chest diseases by large films taken for follow-up .....	1,000
(d) No. of T.B. taken for Outpatient Department .....	1,000
3. Total no. of patients sent for examination .....	1,000
(a) No. of new T.B. patients confined by laboratory tests .....	1,000
4. Total no. of new T.B. patients for the year .....	1,000
(a) No. of patients referred for hospital treatment .....	1,000
(b) No. of patients referred for treatment to State Dispensary .....	1,000
(c) No. of new T.B. patients from other divisions .....	1,000
(d) No. of new T.B. patients from other divisions .....	1,000
(e) No. of new T.B. patients from other divisions .....	1,000
5. Total no. of patients treated in clinic .....	1,000
(a) No. of patients attending for diagnostic test .....	1,000
(b) No. of patients attending for routine medicine (TAB & TBAR) .....	1,000
(c) No. of patients receiving T.B. .....	1,000
6. Total no. of patients discharged as being cured .....	1,000
7. Grand total of all patients attending clinic for the year 1937 .....	1,000

1. Hospital treatment of pulmonary TB for the year 1937.

.....	200	Chronic
.....	150	Subacute
.....	100	Acute
.....	10	Latent
.....	1	Other
.....	560	Total

2. Number of patients a Tubercle X-rayed .....	618
3. Number of Tubercle X-rays & Tubercle X-rays .....	121
4. Number of Tubercle X-rays .....	6 (0.5%)



4.	Number of children X-rayed from various school ..	1800
	TB discovered amongst them .....	9 (5%)
<hr/>		
5.	Number of teachers X-rayed .....	831
	TB discovered amongst them .....	21 (25%)
<hr/>		
6.	Amount of Streptomycin used in the year 1957 .....	24.938 gms.
<hr/>		

1. Number of children X-rayed from various schools .. 1800  
TB discovered among them .. 9

---

2. Number of teachers X-rayed .. 231  
TB discovered among them .. 21

---

3. Amount of streptomycin used in the year 1957 .... 24.5

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APPENDIX VII

DENTAL DEPARTMENT

TOTAL COMBINED CLINICAL WORK FOR THE

YEAR 1957.

	Attenda- nce.	Extrac- tions	Fillings	Dentures	Repairs to Dentures	Periodontal treatment & scalings	X-ray	Other treatment
Govt. Officers & wives.	5274	4041	1024	206	40	48	90	207
Clinic & Hos- pital patients	11264	15283	295	55	8	74	68	135
Pre-School & School children	11823	11972	4738	92	8	445	59	156
TOTAL	28361	31296	6057	353	56	567	217	498

TOTAL CLINICAL WORK IN SIBU.

	Attenda- nce	Extrac- tions	Fillings	Dentures	Repairs to Dentures	Periodontal treatment & scalings	X-ray	Other treatment
Govt. Officers & wives	385	361	117	3	1	35	27	-
Clinic & Hos- pital Patients	2284	3521	137	3	1	23	33	4
Pre-School & School children	2864	3595	387	-	-	34	7	-
TOTAL	5533	7477	641	6	2	92	67	4



ALLEGEDLY

DENTAL DEPARTMENT  
TOTAL QUANTITY OF DENTAL WORK FOR THE  
YEAR 1957

Year	Restoration & Prosthetic Work	Extraction of Teeth	Diagnosis	Orthodontic	Periodontal	Endodontic	Other
1957	48	10	206	108	108	206	206
1956	75	6	25	25	25	25	25
1955	145	5	38	158	158	158	158
1954	207	20	228	228	228	228	228

TOTAL QUANTITY OF DENTAL WORK IN 1957

Year	Restoration & Prosthetic Work	Extraction of Teeth	Diagnosis	Orthodontic	Periodontal	Endodontic	Other
1957	32	1	3	177	177	177	177
1956	22	1	3	107	107	107	107
1955	30	-	-	207	207	207	207
1954	32	2	2	241	241	241	241

SARAWAK MENTAL HOSPITAL  
BED STATE FOR THE YEAR 1957.

No. of patients in Register on 31.12.57	-	271
No. of patients admitted during 1957	-	174
No. of patients discharged during 1957	-	110
No. of patients died during 1957	-	27
No. of patients absconded	-	2
No. of patients on parole as on 31.12.57	-	2
Actual number of patients in hospital on 31.12.57-267		

RACIAL INCIDENCE.

Chinese	-	174
Sea Dayak	-	34
Malay	-	32
Land Dayak	-	10
Melano	-	7
Indonesian	-	3
Indian	-	4
Others	-	3
-----		
Male	-	160
Female	-	107

\*\*\*\*\*

BANAWA MENTAL HOSPITAL  
HAD STATE FOR THE YEAR 1957

271	-	No. of patients in Register on 31.12.57
174	-	No. of patients admitted during 1957
110	-	No. of patients discharged during 1957
27	-	No. of patients died during 1957
2	-	No. of patients abandoned
2	-	No. of patients on parole on 31.12.57
	-	Actual number of patients in hospital on 31.12.57-267

RACIAL INTELLIGENCE

174	-	Chinese
24	-	San Dayak
32	-	Malay
10	-	Land Dayak
7	-	Kelano
2	-	Indonesta
4	-	Indian
3	-	Others
<hr/>		
100	-	Male
107	-	Female



LEPER SETTLEMENT STATISTICS.

1957.

Number on the roll at 1st January, 1958	.....	372
Admitted during the year	.....	92
Discharged Symptom-Free during the year	.....	62
Number of Deaths during the year	.....	9
Number on the roll at 31st December, 1957	.....	393

RACIAL CLASSIFICATIONS

	<u>Adult</u>		<u>Children</u>		<u>Total</u>		<u>Grand Total</u>
	<u>Male</u>	<u>Fem</u>	<u>Male</u>	<u>Fem.</u>	<u>Male</u>	<u>Fem.</u>	
Sea Dayak	89	45	6	2	95	47	142
Land Dayak	21	9	3	1	24	10	34
Kayans	10	4	2	1	12	5	17
Chinese	123	18	3	4	126	22	148
Malay	29	12	1	1	30	13	43
Melanau	4	1	2	1	6	2	8
Javanese	1	-	-	-	1	-	1
<b>Total</b>	<b>277</b>	<b>89</b>	<b>17</b>	<b>10</b>	<b>294</b>	<b>99</b>	<b>393</b>

DIVISIONAL CLASSIFICATION

	<u>1st</u>	<u>2nd</u>	<u>3rd</u>	<u>4th</u>	<u>5th</u>	<u>Brunei</u>	<u>Total</u>
Sea Dayak	2	43	67	28	2	-	142
Land Dayak	34	-	-	-	-	-	34
Kayans	-	-	2	14	-	1	17
Chinese	64	6	56	17	-	5	148
Malay	4	9	21	8	1	-	43
Melanau	-	-	8	-	-	-	8
Javanese	1	-	-	-	-	-	1
<b>Total</b>	<b>105</b>	<b>58</b>	<b>154</b>	<b>67</b>	<b>3</b>	<b>6</b>	<b>393</b>

ANNEX 1A

LEADS RETURNED RECLASSIFIED

1957

Number on the roll at 1st January, 1957 ..... 275  
 Admitted during the year ..... 82  
 Discharged Symptom-Free during the year ..... 82  
 Number of Deaths during the year ..... 3  
 Number on the roll at 31st December, 1957 ..... 272

RACIAL CLASSIFICATION

Race	1957		1956		Total	
	Males	Females	Males	Females	Males	Females
Sea Dyak	50	42	6	2	56	44
Land Dyak	21	3	3	1	24	4
Kayans	10	4	2	1	12	5
Chinese	123	12	3	4	126	16
Malay	23	12	1	1	24	2
Mohammedan	4	1	2	1	6	2
Javanese	1	-	-	-	1	-
<b>Total</b>	<b>217</b>	<b>89</b>	<b>17</b>	<b>10</b>	<b>234</b>	<b>64</b>

DIVISIONAL OBSERVATION

Race	1957		1956		Total	
	Males	Females	Males	Females	Males	Females
Sea Dyak	2	13	67	16	69	29
Land Dyak	31	-	-	-	31	-
Kayans	-	-	2	1	2	1
Chinese	61	6	26	17	87	23
Malay	4	3	21	6	25	9
Mohammedan	-	-	3	-	3	-
Javanese	1	-	-	-	1	-
<b>Total</b>	<b>102</b>	<b>28</b>	<b>124</b>	<b>47</b>	<b>152</b>	<b>52</b>

ADMISSIONS

	<u>Adult</u>		<u>Children</u>		<u>Total</u>		<u>Grand Total.</u>
	<u>Male</u>	<u>Fem.</u>	<u>Male</u>	<u>Fem.</u>	<u>Male</u>	<u>Fem.</u>	
Sea Dayak	29	13	4	-	33	13	46
Land Dayak	2	1	-	-	2	1	3
Kayans	3	1	1	-	4	1	5
Chinese	21	1	2	1	23	2	25
Malay	6	1	1	2	7	3	10
Melanau	1	1	1	-	2	1	3
Javanese	-	-	-	-	-	-	-
<b>Total</b>	<b>62</b>	<b>18</b>	<b>9</b>	<b>3</b>	<b>71</b>	<b>21</b>	<b>92</b>

DISCHARGED

	<u>Adult</u>		<u>Children</u>		<u>Total</u>		<u>Grand Total</u>
	<u>Male</u>	<u>Fem.</u>	<u>Male</u>	<u>Fem.</u>	<u>Male</u>	<u>Fem.</u>	
Sea Dayak	15	4	5	1	20	5	25
Land Dayak	6	1	-	-	6	1	7
Kayans	5	-	-	-	5	-	5
Chinese	16	-	-	-	16	-	16
Malay	6	1	1	-	7	1	8
Javanese	1	-	-	-	1	-	1
<b>Total</b>	<b>49</b>	<b>6</b>	<b>6</b>	<b>1</b>	<b>55</b>	<b>7</b>	<b>62</b>



AMERICANS

	<u>Adults</u>		<u>Children</u>		<u>Total</u>	
	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
Ben Dayak	23	13	4	-	27	13
Land Dayak	2	1	-	-	3	1
Malayans	3	1	1	-	4	1
Chinese	24	1	2	1	26	2
Malay	6	1	1	2	7	2
Indonesians	1	1	1	-	2	1
Javanese	-	-	-	-	-	-
<b>Total</b>	<b>58</b>	<b>18</b>	<b>9</b>	<b>2</b>	<b>67</b>	<b>24</b>

DISPERSED

	<u>Adults</u>		<u>Children</u>		<u>Total</u>	
	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
Ben Dayak	12	4	2	1	14	5
Land Dayak	6	1	-	-	7	1
Malayans	2	-	-	-	2	-
Chinese	16	-	-	-	16	-
Malay	6	1	1	-	7	1
Javanese	1	-	-	-	1	-
<b>Total</b>	<b>33</b>	<b>6</b>	<b>3</b>	<b>1</b>	<b>36</b>	<b>7</b>

AGED GROUPS OF ADMISSIONS

	<u>10/14</u>	<u>15/19</u>	<u>20/24</u>	<u>25/29</u>	<u>30/34</u>	<u>35/39</u>	<u>40/44</u>	<u>45/49</u>	<u>50/54</u>	<u>55/59</u>	<u>60/64</u>	<u>65/69</u>	<u>70+</u>	<u>Total</u>
Sea Dayak	4	1	1	7	5	2	5	9	3	2	3	3	1	46
Land Dayak	-	1	-	-	-	1	1	-	-	-	-	-	-	3
Kayans	1	-	-	2	1	-	1	-	-	-	-	-	-	5
Chinese	3	1	4	2	4	1	3	2	4	-	1	-	-	25
Malay	3	-	1	3	1	1	-	-	-	-	-	-	1	10
Melanau	1	-	1	-	-	-	-	1	-	-	-	-	-	3
Javanese	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>12</b>	<b>3</b>	<b>7</b>	<b>14</b>	<b>11</b>	<b>5</b>	<b>10</b>	<b>12</b>	<b>7</b>	<b>2</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>92</b>

AGED GROUPS OF DISCHARGES

	<u>10/14</u>	<u>15/19</u>	<u>20/24</u>	<u>25/29</u>	<u>30/34</u>	<u>35/39</u>	<u>40/44</u>	<u>45/49</u>	<u>50/54</u>	<u>55/59</u>	<u>60/64</u>	<u>65/69</u>	<u>70+</u>	<u>Total</u>
Sea Dayak	5	3	1	2	1	3	4	2	-	3	1	-	-	25
Land Dayak	-	-	1	1	1	2	-	-	1	1	-	-	-	7
Kayans	-	-	-	-	1	1	1	-	1	1	-	-	-	5
Chinese	-	4	1	3	3	1	1	-	1	-	1	-	1	16
Malay	1	-	-	1	-	1	1	1	1	2	-	-	-	8
Javanese	-	-	-	-	-	-	-	1	-	-	-	-	-	1
<b>Total</b>	<b>6</b>	<b>7</b>	<b>3</b>	<b>7</b>	<b>6</b>	<b>8</b>	<b>7</b>	<b>4</b>	<b>4</b>	<b>7</b>	<b>2</b>	<b>-</b>	<b>1</b>	<b>62</b>

TABLE 1

	1946	1947	1948	1949	1950	1951
Ben Degen	4	1	1	1	2	2
Land Degen	-	1	-	-	-	1
Kovacs	1	-	-	-	1	-
Chinn	3	1	1	1	1	1
Maly	3	-	1	1	1	1
Mohr	1	-	1	-	-	-
Jovanovic	-	-	-	-	-	-
<b>Total</b>	<b>12</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>6</b>	<b>5</b>

TABLE 2

	1946	1947	1948	1949	1950	1951
Ben Degen	3	2	1	1	1	1
Land Degen	-	-	1	1	1	1
Kovacs	-	-	-	-	-	1
Chinn	-	1	1	1	1	1
Maly	1	-	-	-	-	-
Jovanovic	-	-	-	-	-	-
<b>Total</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>5</b>

TABLE 3

	1946	1947	1948	1949	1950	1951
<b>Total</b>	<b>16</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>9</b>	<b>10</b>



CLASSIFICATION OF PATIENTS ADMITTED FROM VARIOUS DIVISIONS.

	<u>1st</u>	<u>2nd</u>	<u>3rd</u>	<u>4th</u>	<u>5th</u>	<u>Brunei</u>	<u>Total</u>
Sea Dayak	1	13	21	11	-	-	46
Land Dayak	3	-	-	-	-	-	3
Kayans	-	-	3	2	-	-	5
Chinese	12	-	11	2	-	-	25
Malay	3	2	2	3	-	-	10
Melanau	-	-	3	-	-	-	3
Javanese	-	-	-	-	-	-	-
<b>Total</b>	<b>19</b>	<b>15</b>	<b>40</b>	<b>18</b>	<b>-</b>	<b>-</b>	<b>92</b>

CLASSIFICATION OF PATIENTS DISCHARGED TO VARIOUS DIVISIONS

	<u>1st</u>	<u>2nd</u>	<u>3rd</u>	<u>4th</u>	<u>5th</u>	<u>Brunei</u>	<u>Total</u>
Sea Dayak	3	-	10	11	5 /	-	25
Land Dayak	7	-	-	-	-	-	7
Kayans	-	-	-	4	1	-	5
Chinese	11	-	3	2	-	-	16
Malay	3	-	4	-	1	-	8
Javanese	1	-	-	-	-	-	1
<b>Total</b>	<b>25</b>	<b>-</b>	<b>17</b>	<b>17</b>	<b>3</b>	<b>-</b>	<b>62</b>

PERIOD UNDER TREATMENT

	<u>2/3</u>	<u>4/5</u>	<u>6/7</u>	<u>8/9</u>	<u>10/11</u>	<u>12/13</u>	<u>14/15</u>	<u>16/17</u>	<u>18/19</u>	<u>20+</u>
Sea Dayak	10	9	1	1	2	-	-	1	-	1
Land Dayak	3	3	1	-	-	-	-	-	-	-
Kayans	4	1	-	-	-	-	-	-	-	-
Chinese	8	4	1	1	1	-	-	-	1	-
Malay	2	1	1	2	1	-	-	1	-	-
Javanese	-	1	-	-	-	-	-	-	-	-
<b>Total</b>	<b>27</b>	<b>19</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>-</b>	<b>-</b>	<b>2</b>	<b>1</b>	<b>1</b>

CLASSIFICATION OF EASTERN ANTIEN FROM VARIOUS DIVISIONS

	1st	2nd	3rd	4th	5th	6th	Total
Gen. Dyer	1	13	21	11	-	-	46
Land Dyer	2	-	-	-	-	-	2
Koyas	-	-	3	2	-	-	5
Chinese	12	-	11	2	-	-	25
Kalay	3	2	2	3	-	-	10
Kolans	-	-	3	-	-	-	3
Javanese	-	-	-	-	-	-	-
<b>Total</b>	<b>19</b>	<b>15</b>	<b>40</b>	<b>18</b>	<b>-</b>	<b>-</b>	<b>92</b>

CLASSIFICATION BY SEXES DIVISIONS TO VARIOUS DIVISIONS

	1st	2nd	3rd	4th	5th	6th	Total
Gen. Dyer	3	-	10	11	2	-	26
Land Dyer	2	-	-	-	-	-	2
Koyas	-	-	-	1	1	-	2
Chinese	11	-	2	2	-	-	15
Kalay	2	-	4	-	1	-	7
Javanese	1	-	-	-	-	-	1
<b>Total</b>	<b>25</b>	<b>-</b>	<b>17</b>	<b>17</b>	<b>3</b>	<b>-</b>	<b>62</b>

RESULTS UNDER TREATMENT

	1st	2nd	3rd	4th	5th	6th	Total
Gen. Dyer	10	3	1	1	2	-	17
Land Dyer	3	1	-	-	-	-	4
Koyas	4	1	-	-	-	-	5
Chinese	8	1	1	1	1	-	12
Kalay	2	1	1	2	1	-	7
Javanese	-	1	-	-	-	-	1
<b>Total</b>	<b>27</b>	<b>10</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>-</b>	<b>49</b>

RECORD OF DEATHS DURING THE YEAR ENDING 31.12.57

Sea Dayak	-	4	Male Adults
Chinese	-	2	" "
Malay	-	2	" "
Land Dayak	-	1	" "

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Total	-	9	Male Adults.
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RECORD OF DEATHS DURING THE YEAR ENDING 31.12.57

4	Male	Adulter	-	Sea Bazar
2	"	"	-	Chinese
2	"	"	-	Malay
1	"	"	-	Land Bazar
<hr/>				
9	Male	Adulter	-	Total
<hr/>				

APPENDIX X

LAU KING HOWE HOSPITAL, SIBU.

1957

Out-patients

Total number of new cases .....	50,010
Total number of repetitions .....	770,013
Total number of attendances .....	127,013

In-patients

Total number of admissions .....	3,954
Total number of male patients .....	1,186
Total number of female patients .....	2,072
Total number of children admitted .....	696

Operations.

Number of major operations performed .....	900
Number of minor operations performed .....	1,954

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APPENDIX X

LAN KING HOVE HOSPITAL, 1937

1937

Out-patient

50,010	.....	Total number of new cases
770,013	.....	Total number of repetitions
107,013	.....	Total number of attendances

In-patient

3,256	.....	Total number of admissions
1,186	.....	Total number of male patients
2,072	.....	Total number of female patients
686	.....	Total number of children admitted

Operations

300	.....	Number of major operations performed
1,324	.....	Number of minor operations performed



APPENDIX XI

SIMANGGANG HOSPITAL

1957.

Out-patients

Total number of new cases	.....	15,247
Total number of repetition	.....	8,698
Total number of attendance	.....	23,945

In-patients

Total number of admissions	.....	1,192
Total number of male patients	.....	499
Total number of female patients	.....	482
Total number of children admitted	.....	211

Operations

Number of major operations performed	.....	59
Number of <sup>ix</sup> major operations performed	.....	153

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APPENDIX XI

STIMMONS HOSPITAL

1937.

Out-patients

.....	.....	Total number of new cases
10,287	.....	Total number of repetition
6,898	.....	Total number of attendance
23,965	.....	

In-patients

.....	.....	Total number of admissions
1,192	.....	Total number of male patients
499	.....	Total number of female patients
455	.....	Total number of children admitted
214	.....	

Operations

.....	.....	Number of major operations performed
59	.....	Number of minor operations performed
153	.....	

ATTENDANCES - 1957.

<u>Places</u>	<u>In-patients</u>	<u>Out-patients</u>
General Hospital, Kuching	7,426	-
Health Centre, Kuching.	-	127,561
Mental Hospital, Kuching	174	-
Lau King Howe Hospital, Sibul.	3,954	127,013
Simanggang Hospital, Simanggang	1,192	23,945
Static Dispensaries	-	274,247
Travelling Dispensaries	-	113,722
Maternity & Child Welfare Clinics	-	80,896

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EXPENDITURE STATEMENT 1957.

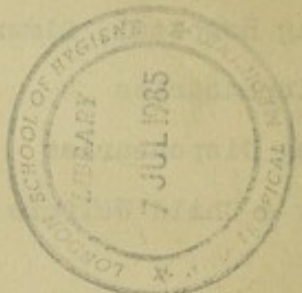
<u>Sub-head</u>	<u>Estimated 1957</u>	<u>Spent 1957</u>	<u>Expenditure 1956</u>
Personal Emoluments	2,887,022.00	**	2,464,718.70
Other Charges, Annually Recurrent	1,988,208.00	**	2,015,169.07
Other Charges, Special Expenditure.	95,050.00	**	72,723.01
<b>TOTAL</b>	<b>4,970,280.00</b>		<b>4,552,610.78</b>

\*\* Figures are not available at the time  
of writing.



ATTACHED FORM - 1957

<u>Particulars</u>	<u>In-Receipts</u>	<u>Balance</u>
	7,430	
	-	
	174	
	2,324	
	1,132	
	-	
	-	
	-	
	-	



RECAPITULATION TABLE

<u>Particulars</u>	<u>Estimated 1957</u>	<u>Actual 1957</u>
	2,400,000.00	2,400,000.00
	1,000,000.00	1,000,000.00
	25,000.00	25,000.00
<b>Total</b>	<b>4,370,000.00</b>	<b>4,370,000.00</b>

\* Figures are not available at the time of writing.