Report of Council : 34th (1932) / National Association for the Prevention of Tuberculosis (Great Britain).

NATIONAL ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS

REPORT OF COUNCIL 1932

THE CRUSADERS' EMBLEM AND ITS HISTORY

The use of the red cross with the double arms stretches back into Christian usage of the Middle Ages, when it was the emblem of the Second Crusade. It was employed by the celebrated soldier, Godefroy de Bouillion, who placed it triumphantly on his standard at the capture of Jerusalem from the Infidel in 1099, and had it incorporated later in the arms of the House of Lorraine.

The use of this cross as an international emblem in the crusade against Tuberculosis dates from 1902, when it was recognised at the International Conference at Berlin.

Just as the great crusading movements of the Middle Ages unified Europe in the presence of a common enemy, this cross expresses the spirit of all countries of determined warfare upon Tuberculosis, the greatest plague that has ever devastated humanity.

Versions in the detailed form of the cross having crept in during the last thirty years, it has been decided to standardise its shape, and the representation on the cover of this report is that now to be adopted, it is believed, throughout the world.

H.R.H. The Prince of Wales, K.G.
President of the Association.

NATIONAL ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS

REPORT OF COUNCIL

TO THE

Thirty-fourth General Meeting of Members

To be held in

THE ENGINEERS' INSTITUTE
CARDIFF

ON FRIDAY, JULY 14, 1933

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Object, Methods, and Membership of the Association

1. OBJECT.—The prevention of tuberculosis.

2. MEMBERSHIP.—The Association consists of Ordinary and of Life Members The contribution of Ordinary Members is 5s. annually. Those who subscribe annually a sum of not less than one guinea are enrolled as Subscribing Members. Life Members give a donation of five guineas.

3. METHODS.—

I. The education of public opinion and the stimulation of individual initiative by means of—

(*a*) A Central Office for the collection and distribution of information as to modes of diffusion of tuberculosis and measures of prevention.

(*b*) The circulation of pamphlets and leaflets setting forth in plain language the result of scientific investigations of the above points.

(*c*) Public lectures by men approved by the Council. Addresses at congresses and other public gatherings.

(*d*) Co-operation with other societies having for their object the promotion of public health.

(*e*) Co-operation with the Press.

(*f*) Periodical congresses and the issue of an annual report.

(*g*) The promotion of the establishment of open-air sanatoria for tuberculous patients.

II. The influencing of Parliament, County Councils, Health Authorities, Chambers of Agriculture, and other public and voluntary bodies on matters relating to the prevention of tuberculosis.

III. The establishment throughout the Country of local branches of the Association. Secretaries of branches are supplied with all literature at cost price.

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Telegraphic Address: "NAPOTUBER, WESTCENT." *Telephone:* EUSTON 2577.

Burrow Hill Sanatorium Colony, Frimley, Surrey

Resident Medical Superintendent:
A. H. MACPHERSON, L.R.C.P. and S. (Ed.).

Assistant Medical Superintendent:
W. M. MACPHAIL, M.B., CH.B. (Ed.).

Telephone: Deepcut 62.

Stations: Frimley 1¼ m., Farnborough 2½ m.

COUNCIL'S REPORT

To the 34th Annual General Meeting of Members, to be held in the Engineers' Institute, Cardiff, on Friday, July 14, 1933, at 4.30 p.m.

The Council begs to report a year of continued activities, which are dealt with under the different headings.

It is with great regret that the Council has to announce the resignation of the Chairman of Council, the Hon. Sir Arthur Stanley, G.B.E., C.B., M.V.O., who has held the position since 1919, until the spring of 1933. It is fitting to record here its grateful appreciation of the noble service Sir Arthur has rendered as Chairman of the Council, and the affectionate regard in which he is held by all who have been privileged to enjoy his unfailing kindness throughout the many years during which he has guided the deliberations and activities of the National Association.

It was unanimously resolved by the Council to invite Sir Robert Philip to accept nomination as Chairman, in succession to Sir Arthur Stanley. The Council has pleasure in recording Sir Robert's acceptance of the Office.

INQUIRY INTO THE HIGH INCIDENCE OF TUBERCULOSIS ON TYNESIDE

In previous Reports attention has been directed to the investigation undertaken by the National Association into the question of the high incidence of Tuberculosis in the Tyneside area.

Certain facts were set out which suggested that this area might be a fruitful field for research, on statistical lines,

into the accessory factors leading to an excess in the incidence of, and mortality from, tuberculosis. The subject seemed of such importance that the Council appointed a special Medical Commissioner (Dr. F. C. S. Bradbury) to carry out a thorough investigation. Particulars have already been given as to the methods adopted in carrying out the inquiry, and a short statement was made as to the preliminary results.

During the past year Dr. Bradbury completed his examination of the statistical data collected during the investigation. His draft report was carefully considered by a Committee of the Council, who had the advantage of the expert criticism of Dr. A. Bradford Hill from the statistical point of view.

Although Dr. Bradbury is alone responsible for the conclusions expressed on the results of his investigation, the consideration of the draft report by the Committee and by Dr. Bradford Hill enabled him to make useful modifications in the manner of presenting certain findings, and helped to strengthen his arguments in some directions.

The Report has now been issued under the title of "Causal Factors in Tuberculosis," and may be obtained from the Secretary of the National Association for the Prevention of Tuberculosis (2s. post-free). The Council trusts that this publication will be found interesting and also of value to those engaged in the study of tuberculosis and its prevention.

In the complex conditions of modern civilisation it is extraordinarily difficult to isolate completely the individual factors concerned and to assess their relative importance.

Dr. Bradbury, however, has been at great pains, by the employment of modern statistical methods, to separate the various factors from associated conditions as far as practicable. He has thus been able to reach definite conclusions as to the association of certain factors with tuberculosis, and to adduce evidence implicating some of them as contributory causes of tuberculosis. In other cases statistical evidence seemed to show an absence of causal relationship.

It does not necessarily follow that in other districts the relative importance of factors concerned in the production of tuberculosis is the same as in the area which formed the subject of this investigation. None the less, the knowledge gained by this inquiry should be helpful in considering the problem in other areas.

It is evident from the Report that poverty shows a marked association with tuberculosis, and that, in Jarrow, the association of tuberculosis with poverty is of greater significance than its association with any of the other conditions studied. In view of various statements made in the past on this subject, it is significant that Dr. Bradbury's conclusion is that poverty causes tuberculosis rather than that tuberculosis leads to poverty.

The relation of under-nutrition to tuberculosis is important. It is difficult to assess precisely all the bearing of the relationship and separate this from the question of poverty. It seems clear, however, that an adequate and properly balanced diet is one of the chief factors which tends to limit the spread of the disease. In Dr. Bradbury's view the investigation has shown the special importance of an adequate supply of milk in the diet as an aid to the prevention of tuberculosis.

It will be noticed, perhaps with some surprise, that

although a statistical relation exists between insanitary conditions and tuberculosis, insanitation *per se* appears to be a relatively minor factor in the causation of tuberculosis.

In the area under consideration, however, overcrowding and the occupancy of poor types of tenement dwelling seem definitely associated with a high incidence of tuberculosis.

The conclusions of the Report as to the relation of tuberculosis to racial factors have already attracted some attention and comment. The evidence shows that in the area under investigation there is a higher incidence of tuberculosis in families of Irish extraction as compared with English, and this excess cannot be completely explained by differences in environmental conditions.

Dr. Bradbury's observation that the incidence of tuberculosis is definitely less in families containing children who were supervised in infancy at Maternity and Child Welfare Clinics suggests that the opportunity thus afforded of bringing health education into the individual family is of value. The advice given at these centres, possibly supplemented by supply of milk for the children, seems to bear good fruit in lessened incidence of tuberculosis.

The Council trusts that the Report may be widely studied and that it may assist Local Authorities in taking wise measures for the elimination, as far as practicable, of the unsatisfactory conditions shown to be associated with tuberculosis. It is hoped also that it may stimulate the initiation in other areas of intensive investigations into the varying local factors which may be concerned with the incidence of tuberculosis.

The Council desires to express its appreciation of the zeal and ability displayed by Dr. Bradbury in the conduct of this arduous investigation, and to thank the Lancashire County Council from whose service he was temporarily seconded.

EDUCATIONAL CAMPAIGN

The objects of the Association's propaganda work are twofold: firstly to help the public towards practical knowledge of tuberculosis, its cause and its control, and secondly to create a public opinion favourable to what the Health Authorities are trying to achieve. To this end the friendliest co-operation is sought with the various Councils throughout England and Scotland and their Medical Officers.

The Handbook of Tuberculosis Schemes is the only complete published summary of such and constitutes substantial evidence of the extent of the official machinery in this country for combating tuberculosis. The National Association has prepared a new edition which is now ready, price 5s. post-free.

At this time, unfortunately, there is a tendency to limit the Health Service on grounds of national economy. Not unnaturally, perhaps, propaganda work, being the newest and least established side of preventive medicine, is often selected for curtailment. The Council wishes it were understood how small is the actual cost in money of an intensive series of educational meetings as conducted by the Association, and how great the interest which can be aroused. For a few pounds, expended chiefly in advertising, an adequate popular course may be arranged. The Association's special knowledge gathered in many years of practical experience is placed freely at the disposal of all who ask it.

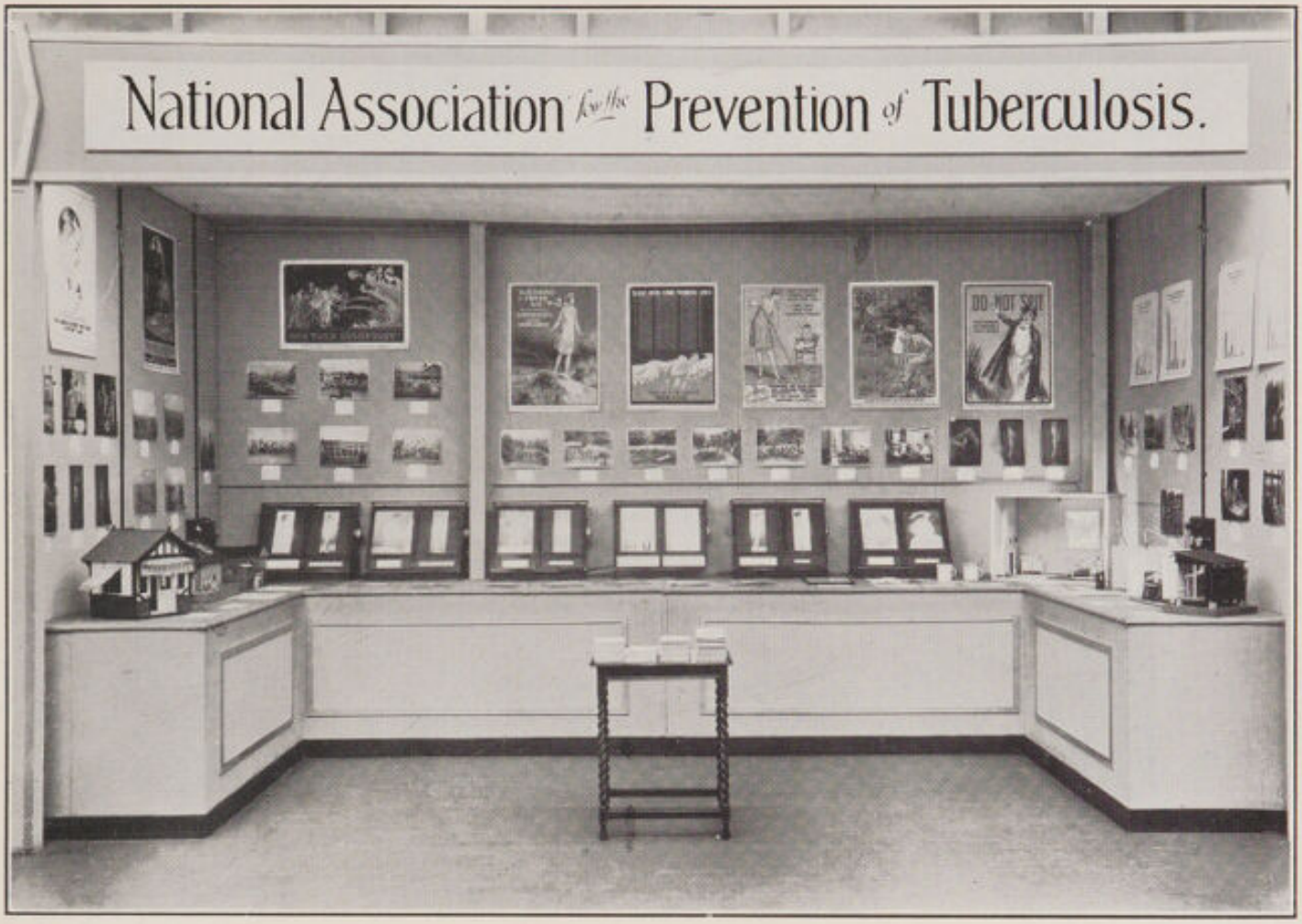
Health Exhibitions as arranged by Local Authorities grow in number throughout the country. The former predominance of purely commercial stalls is being reduced through the action of the Central Council for Health Education. The tuberculosis exhibit, illustrated on page 6, is comprehensive and attractive. It has gained the first prize at several exhibitions.

Group Instruction

The Council believes that the most promising form of education in tuberculosis is through the more intimate channel of groups and societies. A large part of intelligent opinion of the country is to be found in these bodies: Debating, Literary and Scientific, and even Political Associations. Here exists a prepared audience of those who have come to learn. Questions are answered informally, and views exchanged on all sides of the problem of tuberculosis. It is evident from the enthusiasm created from these meetings that new and fruitful interest is created in the subject and many prejudices removed. The best way to alter public opinion is through the educated sections of the community. While not neglecting the broader forms of popular appeal the Association believes that to influence these smaller groups is a most productive form of effort. The kind of contact thus described includes: Teachers' Training Colleges, Toc H Branches, Red Cross and St. John Ambulance Detachments, Women's Institutes, etc.

Pamphlets and Leaflets

To carry on the effect of the spoken word and to reach those who never attend meetings, the value of printed



TUBERCULOSIS EXHIBIT

MEETING IN HYDE PARK

BURROW HILL SANATORIUM COLONY

LESSON IN FRUIT BUDDING

CRICKET TEAM

leaflets is very great. The sales and distribution of these during the year have been much increased. New editions of the various publications are issued from time to time. These are now fourteen in number and cover a considerable range; some give detailed instruction, others more general exhortation. Care has been bestowed so that through agreeable *format* and printing the results shall be as striking and simple as possible.

In leaflets and similar publications for popular use, it is necessary to avoid the kind of statement which, though free from inaccuracies, is lacking in popular appeal. Yet the opposite extreme of dogmatic emphasis may be equally objectionable.

The Association's pamphlets are very carefully considered and it is believed are attractively expressed, while being at the same time in line with modern knowledge of the subject.

The Encouragement of Care Work

The Council is greatly concerned that its object to have "*no uncared-for cases of tuberculosis*" should be achieved universally throughout the country. A number of local Committees are affiliated and it would be advantageous if more local agencies were formed and connected with the National Association. The Medical Commissioner has addressed the Annual Meeting and other gatherings of those interested in forming Care Committees, and he will be glad to meet others in order to explain what is being done in similar areas. Many Care Committees with the assistance of the Association do exceedingly good work in Propaganda.

Affiliation

During the year the Association has been pleased to add the following bodies as affiliated societies, a full list of which appears in Appendix VII:—

Camberwell Tuberculosis Care Committee
Chelmsford and District Tuberculosis Care Association
Grimsby Tuberculosis Care Committee
Middlesbrough Voluntary Care Scheme
Natal Anti-tuberculosis Association.

The advantages gained by becoming affiliated may be re-stated:—

(1) Affiliated societies have the right to use the double red cross sign and are requested to print it on reports, notepaper, etc. A block of the cross is supplied free. It is also requested that societies shall add after their names on reports, paper, etc., the words "affiliated to the National Association for the Prevention of Tuberculosis."

(2) Literature is supplied at cost price.

(3) Individual cases requiring assistance which, owing to any special circumstances, cannot be dealt with adequately by the health authorities or other local agencies, and which are recommended by an affiliated society, receive the special consideration of the Association's Committee.

(4) Affiliated societies have the right to send one representative each to the Association's Annual Conference without payment of a fee.

(5) The Council of the National Association is always ready to give advice or information.

There is no fee for affiliation.

It need hardly be added that the Association is always willing to give advice and guidance in starting Care Committees which form such an important link in the Tuberculosis Scheme.

Knowledge is the irresistible force

All those who are engaged in treating cases of tuberculosis are saddened by the number of tragedies which occur

merely through lack of the kind of knowledge which ought to be general. It is depressing too, to reflect upon the amount of money spent in treatment which fails in its effect, merely because of ignorance and prejudice. One may contemplate with pride what has been achieved by the Tuberculosis Services of this country, and be confident that having behind them an instructed opinion, they will become irresistible.

Nurse Commissioners in Scotland

The co-operation continues with the Queen's Institute of District Nursing, the Scottish Branch of the British Red Cross Society and the Royal Victoria Hospital Tuberculosis Trust, whereby two Nurse Commissioners for Tuberculosis do educational work in the North of Scotland. Five counties, including some of the most isolated parts of the kingdom, are regularly visited by the two Nurses, Miss White and Miss Angus, who meet all the nurses and themselves give simple talks on tuberculosis to various organisations and in schools. This work is the most difficult of its kind. Last winter Miss Angus was detained in the Island of Foula (Shetland), for ten days owing to violent storms. The journey to this island is accomplished in an open boat, and takes at least six hours in each direction.

The Council has renewed its contribution of £200 for this purpose.

The work of the Nurse Commissioners has justified itself and the Association has under consideration a proposal to extend it to other areas.

STATISTICS

Two charts are included in this year's Report, showing the death-rate from tuberculosis in quinquennial periods for England and Wales, 1861-1931, and for Scotland, 1871-1931. The four remaining charts show comparative death-rates from tuberculosis in administrative areas throughout Great Britain for 1931. At the same time it might be of interest to quote the total figures regarding tuberculosis, for Great Britain and Ireland:

YEAR 1931.

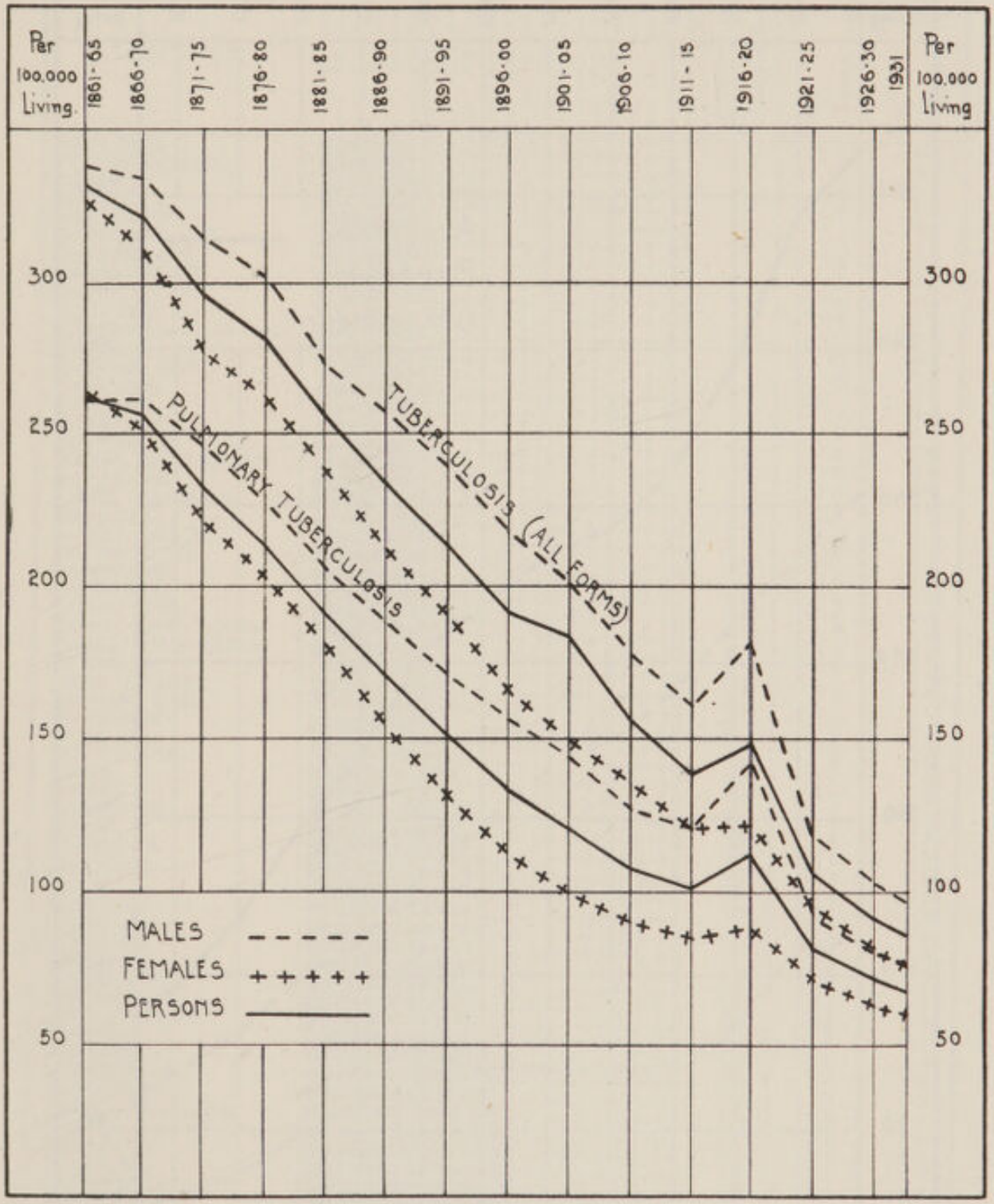
	Number of Deaths from Tuberculosis.			Rate per 100,000 of the Population.		
	Pulmonary	Other forms	Total	Pulmonary	Other forms	Total
ENGLAND AND WALES	29,658	6,160	35,818	68·6	18·3	86·9
SCOTLAND	3,004	1,201	4,205	62	25	87
NORTHERN IRELAND ..	1,130	396	1,526	90	32	122
IRISH FREE STATE ..	3,051	851	3,902	103	29	132

ANNUAL CONFERENCES

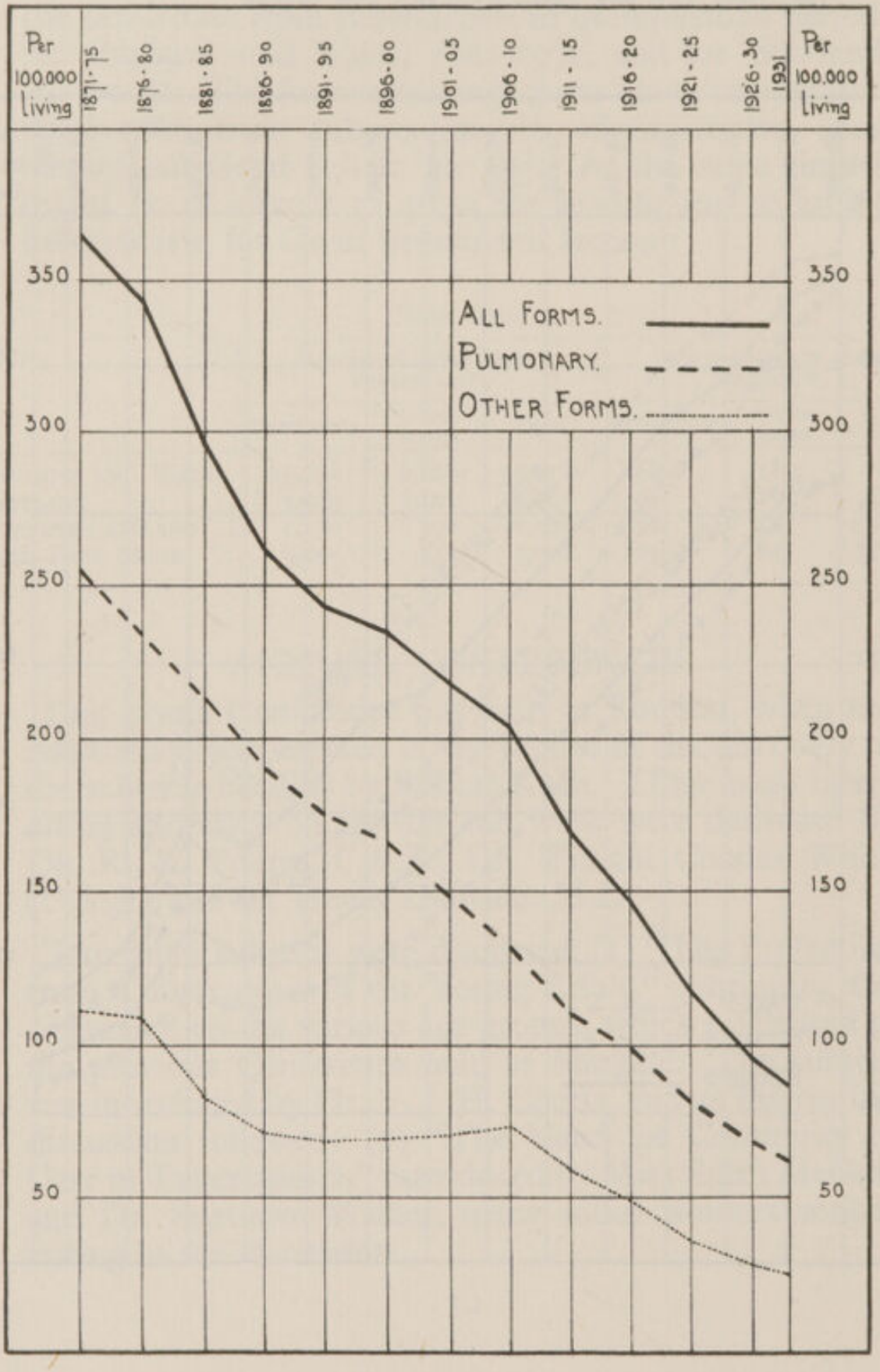
Last year's Conference was held in London, when the Association participated in the jubilee of the discovery of the tubercle bacillus by Robert Koch. Three most interesting addresses on his life and work were delivered by Dr. R. A. Young, C.B.E., Dr. William Charles White (U.S.A.) and Sir Henry Gauvain, M.D.

Two other subjects were discussed: (1) "The Protection from Tuberculosis of the Young Adult," continuing the discussion on the various age groups, which originated at the previous Conference held at Margate. The subject was introduced by Dr. F. J. H. Coutts, and an interesting discussion followed. (2) "The Need for Continuity of Care in Tuberculosis," introduced by Miss Edith McGaw and Dr. Septimus Walker, many social workers contributing to the discussion.

DEATH-RATES AT ALL AGES PER 100,000 LIVING FROM TUBERCULOSIS (ALL FORMS) AND PULMONARY TUBERCULOSIS IN QUINQUENNIA, 1861-1930, AND FOR 1931—ENGLAND AND WALES.

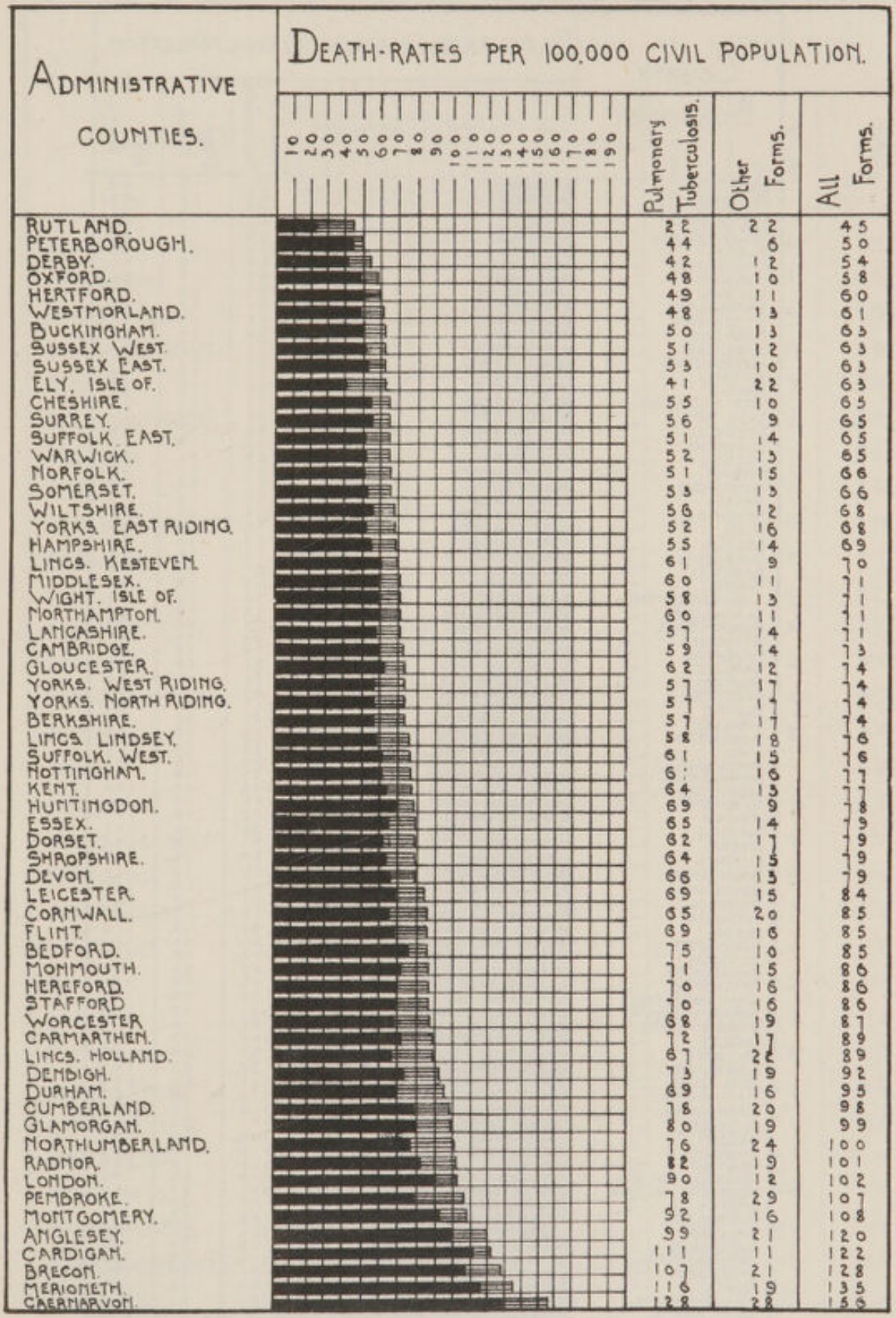


DEATH-RATES AT ALL AGES PER 100,000 OF POPULATION FROM TUBERCULOSIS IN QUINQUENNIA, 1871-1931.—SCOTLAND.

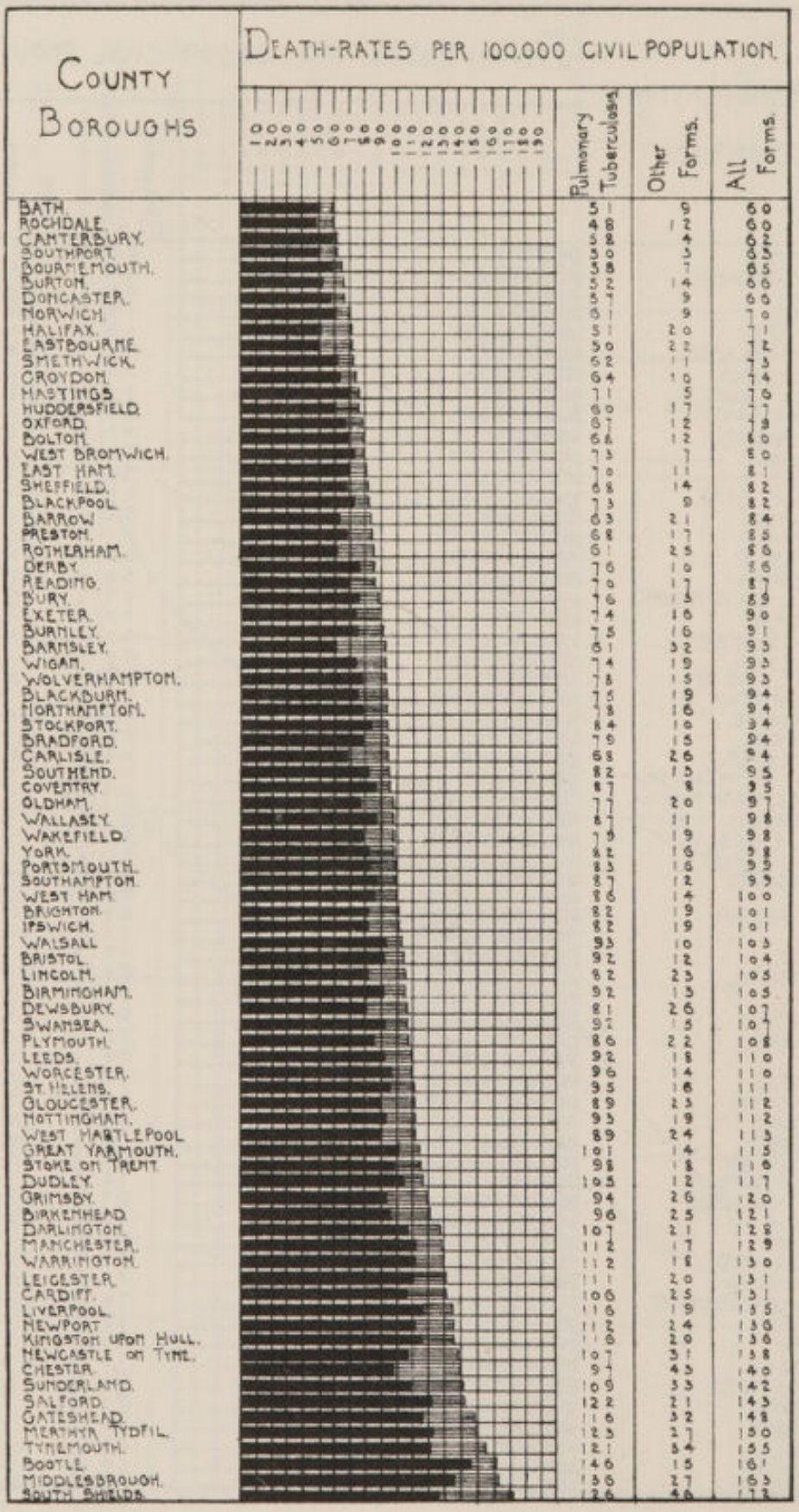


Death-Rates from Tuberculosis in the Year 1931.

Administrative Counties.—England and Wales.

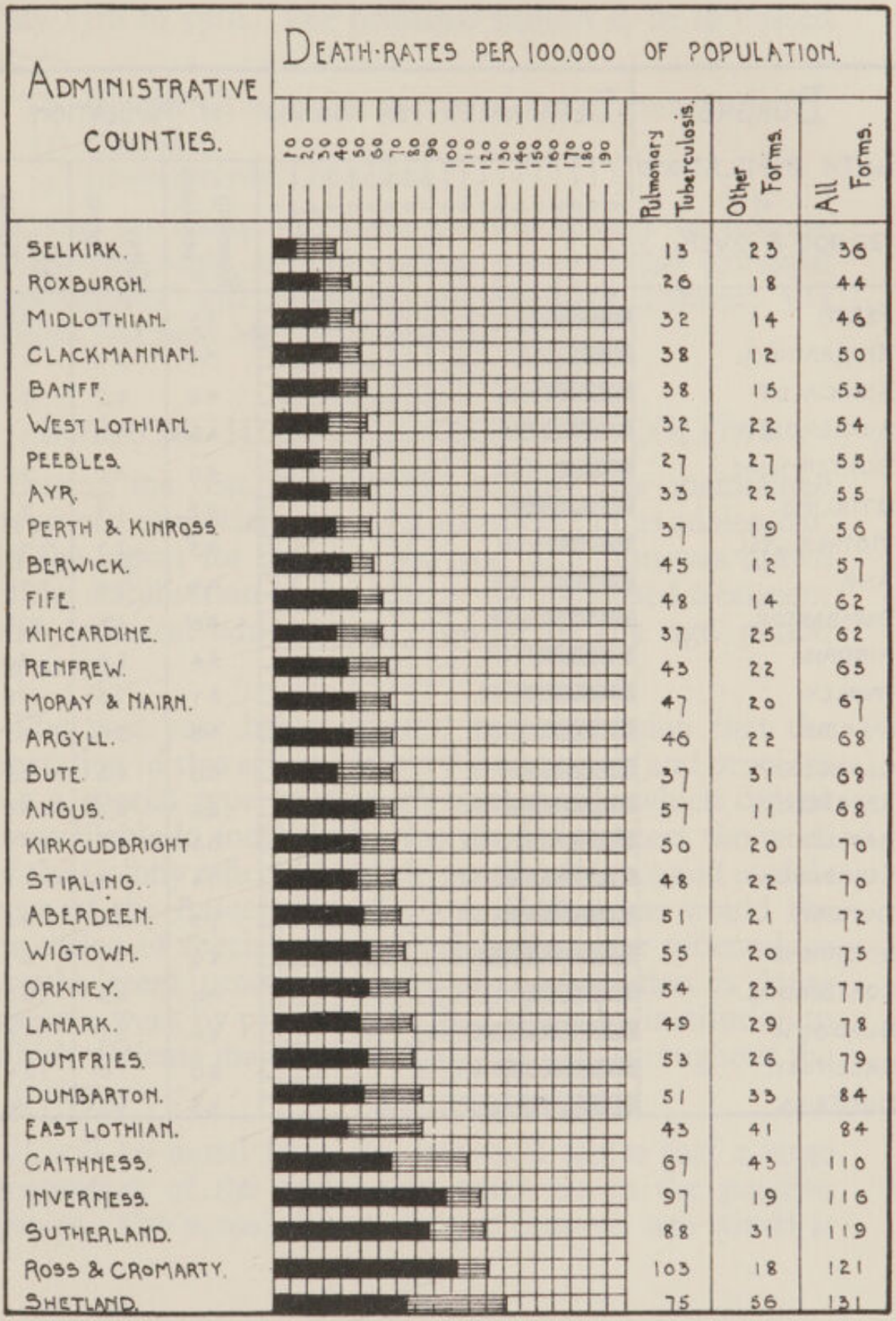


Death-Rates from Tuberculosis in the Year 1931.
County Boroughs.—England and Wales.



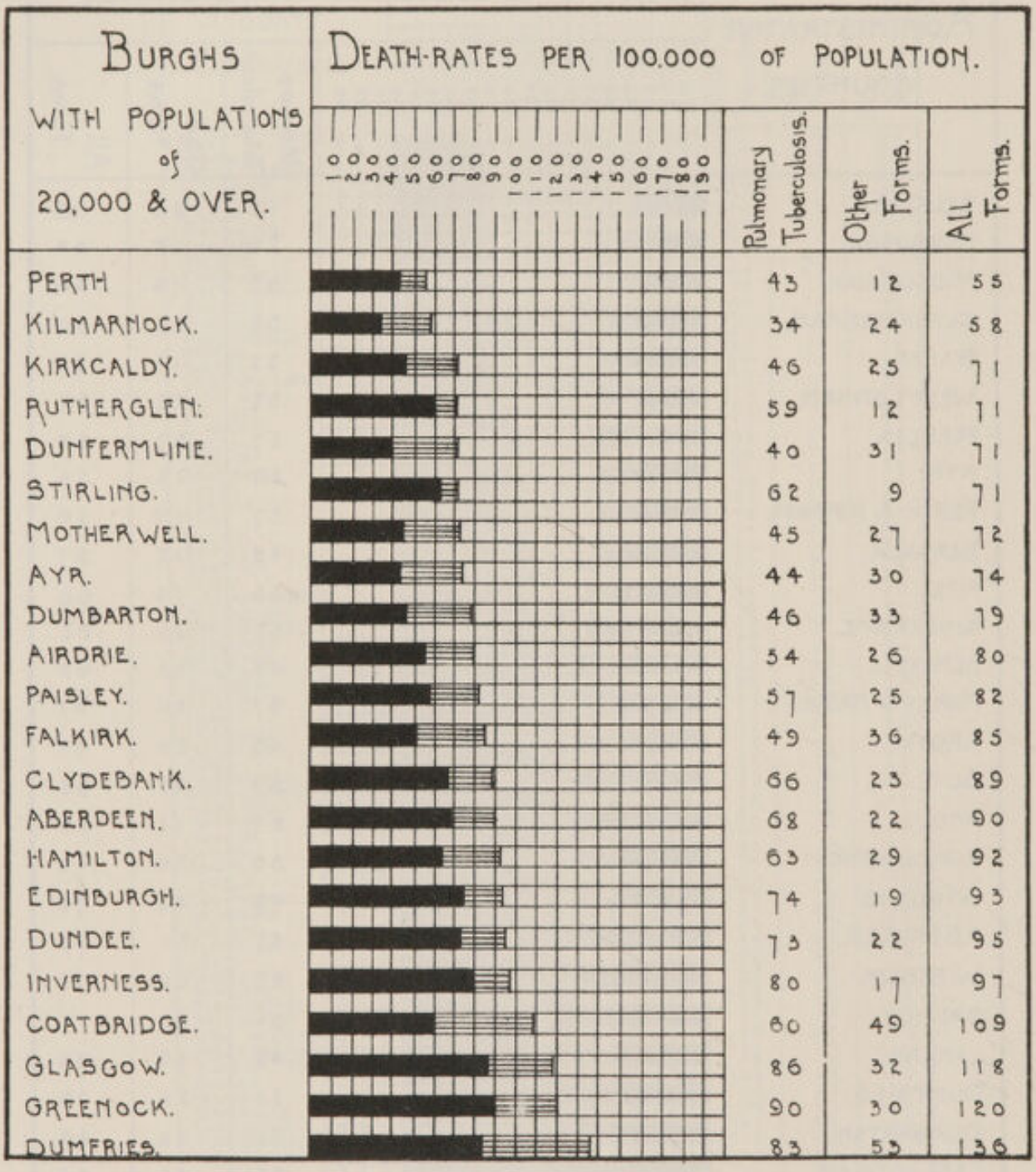
Death-Rates from Tuberculosis in the Year 1931.

Administrative Counties.—Scotland.



Administrative Counties.	Death-rates per 100,000 of population.		
	Pulmonary Tuberculosis.	Other Forms.	All Forms.
Selkirk.	13	23	36
Roxburgh.	26	18	44
Midlothian.	32	14	46
Clackmannan.	38	12	50
Banff.	38	15	53
West Lothian.	32	22	54
Peebles.	27	27	55
Ayr.	33	22	55
Perth & Kinross.	37	19	56
Berwick.	45	12	57
Fife.	48	14	62
Kincardine.	37	25	62
Renfrew.	43	22	65
Moray & Nairn.	47	20	67
Argyll.	46	22	68
Bute.	37	31	68
Angus.	57	11	68
Kirkgudbright	50	20	70
Stirling.	48	22	70
Aberdeen.	51	21	72
Wigtown.	55	20	75
Orkney.	54	23	77
Lanark.	49	29	78
Dumfries.	53	26	79
Dunbarton.	51	33	84
East Lothian.	43	41	84
Caithness.	67	43	110
Inverness.	97	19	116
Sutherland.	88	31	119
Ross & Cromarty.	103	18	121
Shetland.	75	56	131

Death-Rates from Tuberculosis in the Year 1931.
Larger Burghs.—Scotland.



Burghs with populations of 20,000 & over.	Death-rates per 100,000 of Population.		
	Pulmonary Tuberculosis.	Other Forms.	All Forms.
Perth	43	12	55
Kilmarnock.	34	24	58
Kirkcaldy.	46	25	71
Rutherglen.	59	12	71
Dunfermline.	40	31	71
Stirling.	62	9	71
Motherwell.	45	27	72
Ayr.	44	30	74
Dumbarton.	46	33	79
Airdrie.	54	26	80
Paisley.	57	25	82
Falkirk.	49	36	85
Clydebank.	66	23	89
Aberdeen.	68	22	90
Hamilton.	63	29	92
Edinburgh.	74	19	93
Dundee.	73	22	95
Inverness.	80	17	97
Coatbridge.	60	49	109
Glasgow.	86	32	118
Greenock.	90	30	120
Dumfries.	83	53	136

The Association meets in 1933 at Cardiff, on the kind invitation of the Lord Mayor and Corporation, from July 13th to 15th. The principal subject to be discussed is:—

"The Part played in the Production of Tuberculosis by

(1) Infection.
(2) Environmental Conditions."

Those attending will have an opportunity of hearing about the work, and of visiting some of the principal sanatoriums and hospitals, of the King Edward VII Welsh National Memorial Association.

BURROW HILL SANATORIUM COLONY

During the year, Burrow Hill Colony has maintained its record of special service for the tuberculous adolescent. In the report for the previous year attention was drawn to the stabilisation of the scheme for combined treatment and technical education of youths of the age period 14 to 19.

The past year has confirmed the impression that the operation of this scheme fills a definite need, and provides for a special type of case an opportunity which cannot be available in individual areas. In this respect the work of the Colony reflects the widespread influence and usefulness of the Association. In few single areas would the provision of special institutional facilities for tuberculous youths seem practicable, and the Association is doing pioneer work by providing at the Colony an institution to which patients may be sent from any area throughout the country.

It will be noted from the statistical tables that a large percentage of the pulmonary cases are in the positive group. The actual figure—60 per cent—is one which is

comparable with ordinary sanatorium statistics in this respect. At first sight this may seem an adverse reading in view of the fact that Burrow Hill is a training centre, and that the institution is described as a Colony. But, in fact, it is evidence of the importance which treatment plays in the scheme (see Appendix I).

This factor is emphasised by the full title of the institution which is Sanatorium Colony. From the number of positive cases in residence it is evident that Local Authorities are aware of its usefulness as a suitable institution for the treatment of a special age-group. This is all to the good, because the first and most important plank in the platform is treatment. Moreover, the heavy preponderance of positive cases at once disposes of the legend which is so apt to attach itself to all institutions devoted to the training of the tuberculous, *viz.*, the assumption that many cases so trained are not really tuberculous. The percentage of positive cases at once disposes of any such suggestion in regard to Burrow Hill Colony.

The non-pulmonary group continue to be well represented, comprising during 1932, 31 per cent of the total. This figure indicates that Local Authorities recognise the opportunity which is afforded at the Colony to the non-pulmonary patient. There is no doubt that the Clerical Course offers the best opportunity for a training in a remunerative occupation which has yet been opened to the tuberculous cripple.

The technical instruction given at the Colony is on a high standard. It is not surprising that a few of the entrants failed to stay the course, because of temperamental or educational insufficiency. The number who fall by the way is necessarily increased by the all too obvious handicap of physical incapacity. It is only natural that a proportion of those who enter fail to qualify, in view of the fact that

they are suffering from tuberculosis at an age when the outlook for this disease is particularly unfavourable. Roughly, one may say that for every three who enter, one completes the course of training. The remaining two fail either because of temperamental or educational handicaps.

Of those who have completed the course satisfactory reports continue to be received. No less than 66 per cent are now in work. Having in mind the distressing condition of the labour market at the present time, this is a surprisingly good figure.

As in previous years, one is happily impressed by the advantages of combined treatment with education and technical training. This is evident not only in immediate results in regard to employment, but also in more far-reaching ways in regard to the outlook and development of the youths concerned.

There can be no doubt that the combination of technical education with treatment makes for a better result and that the influence exerted is extended beyond the stay of an individual youth at the Colony. This salutary effect is evidenced not only by the letters received from former patients, but also by their visits to the Colony after discharge when they express freely their sense of indebtedness. Boys are normally reticent and while still in residence they do not as a rule give very definite expression of opinion. But the statements made by so many of them when on visits to the Colony after discharge are eloquent of all that the institution has meant to them as an opportunity for a fresh start in life.

For those in residence the days are well filled in from one year's end to the other. In addition to training the recreation field provides, in summer, a desirable outlook for such as are fit enough to have modified exercise. It is hoped that by next year a corner of the field now under

preparation will provide an area suitable for gentler exercise for the cripple and the less robust of the pulmonary patients.

During the winter months, the lecture programme referred to in the report for last year has been amplified and extended. An excellent series of lectures was given during the spring and autumn months with a wide variety of subjects including travel, nature study and things mechanical. This lecture programme is, of course, additional to the ordinary programme of indoor amusements. These recreational activities are maintained throughout the year, and are largely managed by a committee elected by the boys themselves.

The work of the school has already been commented upon earlier in this report when the advantages of treatment combined with education were under discussion. The more concrete instances of the success of the school work for the year in terms of examination results are listed in the statistical tables in Appendix I.

In the garden and grounds the good work accomplished by the boys is yearly more apparent. It is perhaps an exaggeration to say that one boy does more work than three adult patients, but certainly they are willing workers and the excellence of their work is well illustrated by the improved appearance of the grounds and the increased productivity of the garden.

The following report has been received from the London County Council relating to those boys who have been employed in various London Parks, following their courses of treatment and training at the Colony:—

(*a*) Aged 21, employed at Brockwell Park since April 16, 1931: "Has been successful in the examination in horticulture held for the gardening staff, and will be considered, in due course, for appointment to the permanent staff as gardener. A very promising employee."

(*b*) Aged 19, employed at Golder's Hill since May 28, 1931: "Very keen to learn and most energetic. Adapts himself to any work allotted to him. Of opinion that he will, in due course, become an efficient member of the gardening staff."

(*c*) Aged 19, employed at Avery Hill since September 24, 1931: "I have tried him in indoor and out-door work, and find him a very keen lad. He takes great interest in his work and is quick, very willing and quite handy with all tools. In my opinion he will make a good gardener."

(*d*) Aged 18, employed since December 31, 1931: "Has proved himself to be a good timekeeper and a willing worker and has done useful work in the propagating frames. If his health improves, he is likely to become an efficient member of the gardening staff. (He has been absent for 69 days on account of an operation for appendicitis.)"

(*e*) Aged 18, employed at Charlton Park since March 31, 1932: "Am pleased to say that he has adapted himself to all kinds of park work, and will, in my opinion, make a very good gardener. He is very willing."

(*f*) Aged 19, employed at Peckham Rye Park since May 12, 1932: "His work and conduct up to the present have been satisfactory. I consider that, if his present rate of progress is continued, he will in due course become an efficient member of the gardening staff."

INTERNATIONAL UNION AGAINST TUBERCULOSIS

The Eighth Conference of the International Union was held in the Hague and Amsterdam from September 6 to 9, 1932, under the Chairmanship of Professor W. Nolen (Netherlands). The three subjects discussed were:—

(1) Biological Subject: "Relationship between allergy and immunity."

(2) Clinical Subject: "Gold Therapy."

(3) Social Subject: "The After-care of the Tuberculous."

Two members of Council—Professor Lyle Cummins and Dr. Burrell—took part in the first two subjects

respectively, and the Medical Commissioner contributed to the third subject.

The next Conference of the Union will be held in Warsaw during the month of September, 1934.

Italian Scholarships

The Italian Fascist National Federation against Tuberculosis placed at the disposal of the International Union against Tuberculosis six scholarships at the Benito Mussolini Institute in Rome, which were open to candidates from all countries represented in the Union. The Council is glad to announce that one of these scholarships was awarded to a British candidate.

This year, the Italian Federation is offering two similar scholarships.

MEMBERS OF COUNCIL

The Council regrets to announce the death of one of its members, namely, Katherine, Countess of Cromer, who had been a member of Council for many years. To fill the vacancy, Lady Eustace Percy has been nominated, whose election should be confirmed.

The six members to retire in accordance with Article 12 of the Constitution are:—

Miss Price
Sir William Younger
Sir Henry Gauvain
Lady Bradford
Mrs. Dimsdale
Sir St. Clair Thomson

Lady Bradford and Miss Price do not seek re-election, leaving four members whose re-election is recommended.

By order of the Council,
FREDA STICKLAND,
Secretary.

FORM OF BEQUEST

The following Form of Bequest is respectfully submitted to those who may wish to become Benefactors by Will or Codicil to this Association:—

I give and bequeath to the Treasurer, for the time being, of THE NATIONAL ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS, *situate at* TAVISTOCK HOUSE NORTH, TAVISTOCK SQUARE, LONDON, W.C.1, *the sum of**

FREE OF LEGACY DUTY, *to be applied in and towards carrying on the work of the said Association; and I direct that the receipt of the Treasurer of the said Association for the time being shall be a sufficient discharge to my Executors for the said Legacy.*

*The sum to be expressed in words at length.

DONATION AND SUBSCRIPTION FORM

Cheques may be made payable to "The Secretary, N.A.P.T.," and crossed "Westminster Bank, Ltd., Tavistock Square Branch, W.C.1."

I enclose a Cheque (or Postal Order) for

the sum of £ : : as a { *Subscription for the year .....* / *Donation to the N.A.P.T.*

Name .....

Address .....

.....

.....

TO THE SECRETARY,
National Association for the Prevention of Tuberculosis,
Tavistock House North,
London, W.C.1

National Association for the Prevention of Tuberculosis

Central Office: Tavistock House North, London, W.C.1.

Bankers: WESTMINSTER BANK LTD., TAVISTOCK SQUARE BRANCH, W.C.1
Hon. Treasurer: THE RIGHT HON. H. J. TENNANT.

To the HON. TREASURER:

Please make me a Subscriber to your Association as a £ s. d.

(*a*) *Life Member* (*on payment of not less than £5 5s.*)

(*b*) *Subscribing Member* (*One Guinea and upwards*)

(*c*) *Ordinary Member* (*minimum annual subscription of 5s.*)

(Signed) *Name*.....

Postal Address.....

.....

Date.....

BANKER'S ORDER FORM

Date.....193.....

To Messrs.....

.....

Please pay *to* WESTMINSTER BANK LTD., TAVISTOCK SQUARE BRANCH, LONDON, W.C.1, *to the credit of the Account of* THE NATIONAL ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS, TAVISTOCK HOUSE NORTH, LONDON, W.C.1, *my Subscription of*.....*now and on the first day of January annually until countermanded.*

Signature. .....

Address .....

.....

Twopenny Stamp required

£ : :

NOTE.—Annual Subscribers will greatly facilitate the Collection of their subscriptions if they will kindly fill in this Order on their Bankers and send it to the Secretary of the Association. This order entails no liability beyond the Annual Payment, and may be cancelled at any time.

National Association for the Prevention of Tuberculosis

TAVISTOCK HOUSE NORTH, TAVISTOCK SQUARE, LONDON, W.C.1

BALANCE SHEET — 31st DECEMBER, 1932

	£ s. d.	£ s. d.
Creditors.		
Colony Supplies	434 9 3	
Printing, Posters, etc.	89 14 8	
		524 3 11
Capital Account.		
Balance at 31st December, 1931	119,531 16 4	
Add:—		
Income from Investments, not appropriated to separate Funds, for year ending 31st December, 1932	2,871 10 0	
Profits on Sales of Investments ..	2,931 16 1	
	125,335 2 5	
Less:—		
Grants and Care Committees, etc. for Year ending 31st December, 1932 .. .. £330 16 4		
Loss on Farm. Year to 31st December, 1932 .. 56 7 3		
Net Expenditure on Funds per Statement of Income and Expenditure for Year ending 31st December, 1932 4,045 6 4	4,432 9 11	
		120,902 12 6
H. J. TENNANT, *Hon. Treasurer.*		£121,426 16 5

	£ s. d.	£ s. d.
Cash at Bankers and in Hand ..	1,071 16 11	
Sundry Debtors for Services and Payments in Advance ..	1,616 5 2	
Investments (at cost)	82,445 7 7	
Burrow Hill Sanatorium Colony:—		
Land, Farm and Institution Buildings and Medical Superintendent's House (at cost), and Equipment (at cost, less Depreciation) ..	32,152 18 4	
Farm Inventory, including Implements and Machinery (as professionally valued) ..	3,065 2 11	
Sundry Stores	200 10 0	
Posters, Charts, and Literature (stock at valuation)	139 4 4	
Motor Cinema Van and Caravan (at cost, less Depreciation) ..	240 10 8	
Film Projectors, Films, Slides, Photographs, Models, etc. (at cost, less Depreciation) ..	140 10 2	
Office Furniture and Fittings (at cost, less Depreciation) ..	354 10 4	
	£121,426 16 5	

AUDITORS' REPORT.

We report that we have obtained all the information and explanations we have required, but that we have not seen the title Deeds of the Land and Property at Burrow Hill Sanatorium Colony. We have examined the above Balance Sheet with the Books and Vouchers of the Association relating thereto, and in our opinion it is properly drawn up so as to exhibit a true and correct view of the state of the affairs of the Association, according to the best of our information and the explanations given to us, and as shown by the Books of the Association.

Dated this 31st day of May, 1933.

LORD, FOSTER & CO.,
Chartered Accountants,
37 Walbrook, London, E.C.4.

STATEMENT OF INCOME AND EXPENDITURE OF FUNDS *For Year ending 31st December, 1932*

INCOME.	Burrow Hill Sanatorium Colony.	General (Central Office).	Propaganda.	Tyne-side Inquiry.	TOTAL.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Subscriptions	23 14 0	405 16 6	—	—	429 10 6
Donations	59 6 1	102 5 0	—	—	161 11 1
Legacy	—	235 12 1	—	—	235 12 1
Income from Investments	238 11 11	268 8 7	—	—	507 0 6
Annual Conference 1932 (Delegates' Fees, *less* Expenses)	—	13 14 8	—	—	13 14 8
Lecture Receipts, Film and Slides Hire, etc. Handbook Sales	—	6 4 5	145 15 8	—	152 0 1
Rent Charge of Farm	50 0 0	—	—	—	50 0 0
Maintenance of Patients	8,284 16 3	—	—	—	8,284 16 3
Total Income of Funds for Year to 31st December, 1932	£8,656 8 3	£1,032 1 3	£145 15 8	—	£9,834 5 2
Net Expenditure of funds for Year to 31st December, 1932	607 14 11	434 17 0	2,707 16 2	294 18 3	4,045 6 4
	£9,264 3 2	£1,466 18 3	£2,853 11 10	£294 18 3	£13,879 11 6
EXPENDITURE					
Salaries	1,100 0 0	658 0 0	900 0 0	245 0 0	2,903 0 0
Wages	321 10 8	84 5 8	620 16 8	6 9 6	1,033 2 6
Sanatorium Staff (Nurses, Domestics, Supervisors, etc.)	1,404 7 8	—	—	—	1,404 7 8
Rent, Light, Water, Fuel and Insurance	1,052 2 9	330 8 5	—	—	1,382 11 2
Annual Report	—	175 3 3	—	—	175 3 3
Printing and Stationery	23 2 9	75 2 11	36 8 2	26 12 0	161 5 10
Postages, Telegrams, and Telephone	62 10 6	8 9 3	43 12 1	—	114 11 10
Caravan and Cinema Van Running Expenses	—	—	253 14 5	—	253 14 5
Travelling Expenses and Carriage	224 2 5	5 17 4	171 5 11	16 16 9	418 2 5
Hire of Halls, Lecture and Exhibition Expenses	—	—	65 9 0	—	65 9 0
Posters, Charts, and Leaflets	—	—	177 16 8	—	177 16 8
Advertising and Film Expenses	—	—	22 0 9	—	22 0 9
Miscellaneous Expenses	195 11 9	93 1 9	26 15 10	—	315 9 4
Depreciation of Furniture, Equipment, Cinema Vans, Films and Projectors, Slides, Models, etc.	27 18 3	36 9 8	335 12 4	—	400 0 3
Queen's Institute of District Nursing (Scottish Branch): Contribution towards Nurse Commissioners	—	—	200 0 0	—	200 0 0
Groceries and Provisions	2,538 12 7	—	—	—	2,538 12 7
Surgery and Dispensary	86 17 7	—	—	—	86 17 7
Cleaning, Chandlery, Uniforms, Hardware, and Crockery	179 1 8	—	—	—	179 1 8
Laundry	429 10 11	—	—	—	429 10 11
Maintenance and Upkeep of Grounds	56 4 0	—	—	—	56 4 0
Repairs to Buildings	612 1 1	—	—	—	612 1 1
Market Garden Course (Wages and Materials, *less* Sales)	273 13 6	—	—	—	273 13 6
Clerical and General Education Course (Salaries, Equipment, Books, etc.)	529 14 5	—	—	—	529 14 5
Weekly Allowances to Patients	147 0 8	—	—	—	147 0 8
Total Expenditure of Funds for Year to 31st December, 1932	£9,264 3 2	£1,466 18 3	£2,853 11 10	£294 18 3	£13,879 11 6

BURROW HILL SANATORIUM COLONY FARM

Dr. *Profit and Loss Account* *For the Year ended 31st December, 1932* **Cr.**

	£	s.	d.
To Inventory, 1st January, 1932 (excluding Implements and Machinery) ..	1,734	14	9
„ Live Stock Purchases	84	5	0
„ Wages	567	2	11
„ Rates, Water, Insurance, Threshing, and Twine	52	16	5
„ Seeds, Fertilisers, Fodder and Feeding Stuffs	375	4	2
„ Repairs and Maintenance of Buildings and Implements	33	7	8
„ Veterinary and other Fees	38	4	6
„ Oil, Petrol, Fuel, and Miscellaneous Expenses	24	12	8
„ Depreciation of Implements and Machinery	12	15	9
„ Annual Rent Charge	50	0	0
	£2,973	3	10

	£	s.	d.
By Sales of Produce	796	18	4
„ Cartage and Hire	47	15	0
„ Live Stock Sales	293	6	5
„ Inventory, 31st December, 1932 (excluding Implements and Machinery valued at £1,286 6s. 1d.) ..	1,778	16	10
„ Loss for Year	56	7	3
	£2,973	3	10

APPENDIX I

BURROW HILL SANATORIUM COLONY, FRIMLEY

(Report of Resident Medical Superintendent)

TABLE 1—SHOWING NUMBER OF PATIENTS ADMITTED AND DISCHARGED DURING THE YEAR ENDED DECEMBER 31, 1932

	In Residence January 1, 1932	No. Admitted	No. Discharged	In Residence January 1, 1933
Garden Course	25	36	25	36
Clerical Course	36	40	36	40
Totals	61	76	61	76

Note.—Of the 76 cases admitted during the year 52 were pulmonary and 24 non-pulmonary.

TABLE 2—SHOWING AREAS FROM WHICH PATIENTS WERE DRAWN

Barnsley County Borough	..	1	
Essex County Council	.. ..	10	
Kent County Council	.. ..	1	
Lancashire County Council	..	1	
London County Council	..	53	
Manchester County Borough	..	2	
Middlesex County Council	..	1	
Norfolk County Council	..	1	
Staffordshire, Wolverhampton and Dudley Joint Committee for Tuberculosis	.. .. ..		2
Surrey County Council	.. ..		2
West Ham County Borough	..		1
West Riding County Council	..		1
			76

TABLE 3—SHOWING OCCUPATIONS OF PATIENTS ADMITTED

Apprentice, Dental Mechanic's		1	
,, Draper's	.. ..	1	
,, Upholsterer's	..	1	
Band Boy (Regular Army)	..	1	
Cable Hand	.. .. ..	1	
Cardboard Box Maker	.. ..	1	
Clerks	.. ..	9	
Cobblers	.. ..	2	
Errand Boys	.. .. ..	4	
Factory Hand	.. .. ..	1	
French Polisher	.. .. ..	1	
Garage Assistant	.. .. ..	1	
Garden Boys	.. .. ..	3	
Haulage Hand, Coal Mine	..	1	
Ink Boy, Boot Factory	.. ..	1	
Laboratory Assistant	.. ..	1	
Laundry Porter	.. .. ..	1	
Messenger	.. .. ..		1
Machinist	.. .. ..		1
Metal Workers	.. .. ..		2
Newspaper Collector	.. ..		1
Paper Boys	.. .. ..		2
Page Boy	.. .. ..		1
Sand Machine Minder	.. ..		1
Schoolboys	.. .. ..		27
Shirt Cutter's Assistant	.. ..		1
Shop Boy	.. ..		1
Telegraph Messenger	.. ..		1
Van Guards	.. .. ..		4
Waiter	.. ..		1
Woodworker	.. .. ..		1
			76

TABLE 4—SHOWING APPROXIMATE DURATION OF ILLNESS OF PATIENTS ADMITTED

	Months		Years									
Duration	1-6	6-12	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	Over 10
No. of Cases	9	19	18	7	7	2	1	2	–	2	1	8=76

Duration	Average	Maximum	Minimum
	3 years 2 months	14¼ years	3 months

TABLE 5—SHOWING PRESENCE OR ABSENCE OF TUBERCLE BACILLI IN EXPECTORATION

	Positive	Negative
No. of Cases	31	21

NOTE: Of the positive cases admitted 14 have a family history of tuberculosis.
Of the negative cases admitted 5 have a family history of tuberculosis.
Of the 24 non-pulmonary cases admitted 6 have a family history of tuberculosis.

TABLE 6—SHOWING DURATION OF RESIDENCE IN DAYS OF PATIENTS DISCHARGED

	Average	Maximum	Minimum
Days	342	884	3

TABLE 7—SHOWING RESULTS OF TREATMENT OF PATIENTS DISCHARGED

Improved	43
Stationary	11
Worse	6
Died	1
	61

TABLE 8—SHOWING DISPOSAL OF PATIENTS DISCHARGED

Discharged on completion of course	23
Discharged physically unfit	18
Discharged as not likely to derive benefit from a course of treatment and technical education	18
Observation case	1
Died	1
	61

TABLE 9—SHOWING THE SUBSEQUENT EMPLOYMENT OF YOUTHS DISCHARGED AFTER COMPLETING A COURSE OF TREATMENT AND TECHNICAL EDUCATION

In March, 1933, enquiries were made of the 87 patients who had completed their course and been discharged to December, 1932, regarding their employment. The results were as follows:—

	Clerks	Gardeners	Totals
Working as Clerks	19	—	19
Working as Gardeners	—	13	13
Doing other work	13	13	26
Unable to obtain employment	6	10	16
Unfit for work	5	—	5
Unable to trace	1	4	5
Died	2	1	3
	46	41	87

ROYAL SOCIETY OF ARTS—JUNIOR SCHOOL COMMERCIAL CERTIFICATE. MARCH AND JULY, 1932

Summary of results:—

SUBJECTS: Arithmetic, English, Book-keeping, Economic Geography, History, Commerce, Shorthand and Typewriting

No. entered	5
No. of full certificates gained	5
Single Subject Certificates:	In Stages I and II of the Single Subject Examinations 17 certificates have been obtained (4 with credit; 2 first-class, and 1 second-class).

PITMAN'S SHORTHAND EXAMINATIONS, 1932

Summary of results:—

	No. Entered	No. Passed
Elementary Certificate	11	11
Theory Certificate	13	11
Speed: Words per minute		
50	9	6
70	2	2
80	3	—
90	5	3
100	1	1
	44	34

FIRST-AID CLASSES

Summary of results of the St. John Ambulance Association Examinations, 1932:—

	No. Entered	No. Passed
Preliminary First-Aid	23	23
Preliminary Home Nursing	14	14

APPENDIX II

LIST OF PROPAGANDA MEETINGS HELD DURING THE YEAR ENDED MARCH 31, 1933

Dr. Harley Williams

CORNWALL
- Truro

HAMPSHIRE
- Basingstoke (2 meetings)
- Fareham
- Fordingbridge
- Gosport
- Christchurch

KENT
- Eltham
- Folkestone (2 meetings)
- Faversham (2 meetings)
- Ashford (2 meetings)
- Herne Bay (2 meetings)
- Tonbridge Incorporated Midwives Institute

LEICESTERSHIRE
- Loughborough (2 meetings)
- Coalville Grammar School
- Leicester: Personal Health Association
- Loughborough, Men and Women Adult School
- Leicester, Victoria Road Church, Men's Brotherhood

LONDON
- Salvation Army; William Booth Training College
- Wandsworth Branch Toc H
- Finchley Branch Toc H
- School Medical Officers Group

LONDON COUNTY COUNCIL INSTITUTIONS
- Northern Hospital
- Park Hospital (2 meetings)
- Grove Park Hospital
- Pinewood Sanatorium
- Colindale Hospital

MIDDLESEX
- Potter's Bar Branch Toc H

MIDDLESEX COUNTY COUNCIL INSTITUTIONS
- Redhill Hospital
- West Middlesex Hospital (2 meetings)
- North Middlesex Hospital

SALOP
- Oswestry, English Wesleyan Church

SUFFOLK (EAST)
- Ipswich, E. Suffolk and Ipswich Hospital
- Saxmundham (2 meetings)
- Framlingham (2 meetings)
- Orford (2 meetings)
- Halesworth (2 meetings)
- Lowestoft (2 meetings)

SUSSEX
- Crawley Down: Film demonstrations daily (for 6 days)
- Hastings (3 meetings)

SURREY
- New Malden

WORCESTERSHIRE
- Halesowen
- Knightwick Sanatorium
- Worcester (3 meetings)

YORKSHIRE
- Leeds Association for Care of Consumptives' Annual Meeting

LEEDS
- Armley Council School
- Jos. Bray Ltd.
- Montague Burton Ltd. (3 meetings)
- Osmondthorpe Council School
- Petty & Sons

Darley St. Council School
Alf. Cooks Ltd.
Meanwood Council School
Burley Rd. Council School
Jos. May & Sons
Gipton Council School
St. James' Municipal Hospital
Hunslet Hall Rd. Council School
Co-operative Wholesale Boot Factory
John Barran & Sons
Kirkstall Road School

EDINBURGH
Mid Calder

INVERNESS-SHIRE
Drumnadrochit (3 meetings)
Ardersier (2 meetings)

INVERNESS-SHIRE (ISLE OF SOUTH UIST)
Daliburgh (2 meetings)
Garrynamonie (2 meetings)
Howmore (2 meetings)
Stoneybridge (2 meetings)
Gerinish (2 meetings)
Eochar
(ISLE OF BARRA)
Eriskay (2 meetings)
Castlebay (2 meetings)
Northbay
Eoligarry (2 meetings)
Brevig
(ISLE OF NORTH UIST)
Lochmaddy (2 meetings)
Sollas (2 meetings)
Tighary (2 meetings)
Paible
Carinish
Craigstone (2 meetings)
(ISLE OF HARRIS)
Finnsbay (2 meetings)
Manish (2 meetings)
Leverburgh (2 meetings)

LINLITHGOW
Broxburn
Livingstone

ROSS-SHIRE (ISLE OF LEWIS)
Garrabost (2 meetings)
Aird (2 meetings)
Back (2 meetings)
Tong (2 meetings)
Barvas (2 meetings)
Lionel (2 meetings)
Borve (2 meetings)
Cross (2 meetings)
Balallan (2 meetings)
Fidigarry (2 meetings)
Carloway (2 meetings)
Sandwick (2 meetings)
Lewis Medical Society

STIRLINGSHIRE
Larbert
Blackbraes (2 meetings)
Bannockburn
Fallin
Carronshore
Plean
Airth
Stirling
Bangour Mental Hospital
Roslin

Dr. Noel Bardswell

LONDON
Stepney

Dr. William Brand

BUCKINGHAMSHIRE
Farnham Royal
Beaconsfield (2 meetings)
Downley
Stoney Stratford

HAMPSHIRE
Lymington Health and Baby Week (3 meetings)

NORTHAMPTONSHIRE
Northampton: Midwives' Union

Dr. W. M. MacPhail

HAMPSHIRE
Petersfield

Open Air Demonstrations

BERWICKSHIRE
- Coldstream
- Greenlaw
- Lauder

HAMPSHIRE
- Botley
- Wickham

LONDON
- Finsbury (3 meetings)
- Hyde Park (9 meetings)
- Regent's Park (2 meetings)
- Parliament Hill Fields

STIRLINGSHIRE
- Polmont

WEST LOTHIAN
- Winchburgh

Exhibitions

CORNWALL
- Cornwall Health Exhibition, Truro

CHESHIRE
- Stockport Health Week

DURHAM
- Houghton-le-Spring Health Week (5 demonstrations, 5 school meetings). Also special demonstration at Fever Hospital.

IRELAND
- Carlow Health Week

LEICESTERSHIRE
- Loughborough Health Week Exhibition

LONDON
- Woolwich Health Week

STAFFORDSHIRE
- Stoke-on-Trent Child Welfare Exhibition

YORKSHIRE
- Keighley Health Week

APPENDIX III

IMPORTANT NOTICE TO HEALTH AUTHORITIES AND OTHERS.

The services of the Medical Commissioner to give lectures, illustrated by films and slides, are available to Local Health Authorities and private organisations. He can make arrangements for showing the films with the Association's portable projector in almost any kind of hall, provided that there are no skylights. Black curtains are carried sufficient to obscure the windows of all but the very largest halls. The screen and apparatus is put in position and operated by the Association's technical assistant.

Those who wish to arrange for these lectures are asked to write to the Medical Commissioner, giving, if possible, a range of suitable dates and particulars of the size of the hall and the approximate number of windows that will have to be darkened if the meeting is held during daylight hours.

The public will attend these lectures in large numbers if there is adequate publicity. By means of posters, newspaper paragraphs, handbills and pulpit announcements, it is usually possible to make sure that most members of any community will *hear* of the meeting. If it be brought persistently to their notice a large proportion will attend, but it is of little use arranging a meeting and then awaiting the issue with folded arms.

Special gatherings of school children are usually held in the afternoon about 3 p.m., by permission of the Education Authorities. Suitably chosen films, giving the positive side of the subject, free from disagreeable features, are shown. These are very successful, and apart from their intrinsic value, they help to advertise the public meeting in the evening.

No one need fear that people will be afraid to attend a lecture on Tuberculosis. If it is well arranged and adequately advertised there will be no doubt of the result.

HIRE OF FILMS AND SLIDES.

A glance at the list of the Association's cinematograph films and slides on the following pages will show that they cover the Prevention of Tuberculosis in its widest sense. There is material to illustrate lectures to medical students and nurses, as well as more homely talks to mothers and children.

The Association is anxious that these should be of the greatest possible value to anyone who is preparing a lecture on any special aspect of the subject.

The Medical Commissioner will, if requested, offer suggestions as to the most suitable slides or films for any particular purpose, and will send typewritten notes to form the basis of a lecture.

A cinematograph projector, taking films of standard size, is also for hire at moderate charges. The current may be obtained from any ordinary electrical supply over 50 volts. The films are non-inflammable and may be shown in any hall without licence under the Cinematograph Acts.

HIRE OF CINEMATOGRAPH FILMS

Descriptions of the cinematograph films which the Association lends out for hire are given below. They are all composed of non-inflammable material and are of the size of the usual standard projector (35 mm.). This list of films is being extended from time to time.

In view of the increasing use of smaller projectors taking half-size films (16 mm.), three are also available in this gauge. Requests to have further films in the reduced size will be considered.

All the Association's films, both standard and 16 mm. sizes, are made of non-inflammable material (aceto-cellulose) and may be shown in any hall without licence under the Cinematograph Acts.

SYNOPSES OF FILMS

"AIR AND SUN"

"The Common Sun, the Air, the Skies
To them are opening Paradise." (*Gray*)

The subject of this short but picturesque film is the benefit to be derived from air and sun, not only as a means of special treatment for the diseased, but generally in strengthening and hardening the delicate and weakly, by a return for the time to the Natural Life.

The scenes are chiefly laid in Switzerland, which is shown not only under the snows of winter, but as a land of the sun and of summer beauty. Similar methods are being followed in our own country, but need wider application.

The film deals chiefly with children, who have the greatest claim on our protective care. It shows that in the case of delicate children their school life need not be interrupted, but that training of the mind and body can go together. Nature herself will be an object lesson to expand and improve the mind.

The early pictures show the invalid at rest under different conditions in the open, but with returning strength active pursuits, work, and sport take their place. We follow the children in their country rambles, at their games, their work in the field and garden, and at their picnic meals. We see them earnestly at their lessons in open-air schools. One cannot but be struck by their joy and interest in all they do, and by the activity and swing of all their movements. Fatigue seems unknown.

The life described is spent with the skin bare, and we see them hardening and bronzing till they brave the depths of winter without clothing, amid ice and snow, skating, ski-ing and toboganning.

A delightful film of mountains and flowers and vast sunlit spaces, which is much enjoyed, especially by children.

Duration—12-15 *minutes. Hiring fee*—5/- *per night* / £1 1 0 *per week* } *Carriage extra.*

Cost of purchasing one copy on non-inflammable material—35 *mm.* £8 10 0.
16 *mm.* £2 0 0.

"A STITCH IN TIME"

(This is an attractive film with a strong human interest portraying the application of the Dispensary system in a working-class neighbourhood, and a regeneration of the home, when the meaning of tuberculosis becomes clear.)

The heroine of the story, Jane Shore, lives in an unclean, badly ventilated home. Her father and mother are well-meaning but disheartened. There is also an old grandmother, who has a chronic cough, the cause of which is not suspected.

One day Jane goes to the dairy to buy some milk. On the way home she is jostled by some rough boys and cuts her finger upon the broken milk jug. A romantic rescue by a Boy Scout follows, and Jane is taken to his mother's house to have her cut finger dressed. She is amazed at the cleanliness and the airy rooms of the house in which she finds herself, and contrasts it wistfully with her own mean bedroom. The seeds of dissatisfaction with unhealthy surroundings are thus sown in her mind.

Later on Jane develops a lump in her neck which the old grandmother rubs assiduously with oil. A health visitor happens to be in the house, examining the baby, and upon her advice Jane is taken to the tuberculosis dispensary. A consultation with the doctor follows and it is decided that the lump in Jane's neck is in reality an enlarged tuberculous gland. The tuberculosis officer searches for the cause of infection. He visits the home of the Shores and his eye rests upon the old lady with her chronic cough. A specimen of her spit is examined under the microscope, and the true nature of the cough is revealed as chronic tuberculosis of the lung. As she has been sleeping in the same bed as Jane it is clear that from her the infection has come.

Jane goes to a sanatorium and afterwards to the open-air school, which is pictured in detail as a delightful chalet in the middle of a garden of flowers, where the children pass their time in healthy surroundings.

In the meantime, with the assistance of the Tuberculosis Care Committee, the home of the Shores is cleansed and decorated, and when Jane returns cured, from the sanatorium, her heart is glad to see that her own home has come nearer to the ideal which she had always pictured.

But the Boy Scout is not forgotten. He haunts the scene, and the last scene shows the beginning of a renewed appreciation of the charms of Jane Shore. The conquest of tuberculosis has brought happiness as well.

Duration—30-35 *minutes.*

Hiring fee—£1/1/- *per night* / £5 *per week* } *Carriage extra.*

Cost of purchasing one copy on non-inflammable material—35 *mm.* £24 0 0
16 *mm.* £10 10 0

"THE PRODUCTION OF CERTIFIED MILK"

The methods in use at the Experimental Dairy Farm, Liberton, Edinburgh, under the direction of the Royal Victoria Hospital Tuberculosis Trust for the Prevention of Tuberculosis

"Certified Milk," *i.e.*, the highest grade of milk, tubercle-free, must be produced from cows which have passed the Tuberculin test and veterinary examination.

The whole herd must be submitted to the tuberculin test at intervals of six months, and to veterinary examination not less than three times every year.

Every animal added to the herd must be tested immediately before admission.

The milk must be bottled on the farm and be delivered, bottled, to the consumer.

Certified milk must not at any time contain more than 30,000 organisms per c.c. or any coliform organisms in 0·1 c.c.

It should contain not less than 3·5 per cent. of butter fat.

Certified milk must not at any time during production be treated by heat.

In order to produce certified milk it is essential that the herd should lie under sound physiological conditions.

Accordingly, it is the practice of Gracemount Farm to have the cows outside daily, even during the winter months, as much as is feasible.

The cowshed is large; and perfect lighting, aeration, and cleanliness are ensured.

The cows are groomed regularly, and their hindquarters, tails and udders clipped frequently.

To prevent contamination during the process of milking, considerable care is exercised in the toilet of the cow.

The ever-restless tail is tied to the leg; and the flanks and udder are washed and dried by the herdsman.

The washing and drying of the udder is repeated by the milker, who pays more particular attention to the teats.

The milker's hands having been washed, the milking begins.

A special type of pail is used, closed at the top with an opening at the side, thus effectually preventing debris from falling into the milk.

The dry method of milking is adopted; no lubricant of any kind is used on the hands.

The first or fore-milk is discarded, as it is poor in quality and contains a large number of germs.

On completion of the milking, the milk of each cow is weighed and recorded.

It is then poured through a removable, sterilised chute into a sterilised tank inside the dairy.

Here the milk from several cows is mixed automatically, thereby ensuring a uniform product.

From the tank the milk flows down over a sterilised cooling apparatus, through which there is a circulation of cold water.

This cools the milk quickly from approximately 100°F. to 50°F., thus further reducing risk of bacterial growth.

The milk passes next into a simple, sterilised bottling apparatus, arranged on the syphon principle, and thereafter into sterilised bottles, which are immediately sealed and capped.

The caps are wired on by machine so that the milk cannot be tampered with until it reaches the consumer. The day of milking is marked on the cap of each bottle and the milk is ready for immediate delivery.

Returned empty bottles are first cleansed by steeping in hot water and soda.

They are then separately brushed, outside and inside, by means of an electrically-driven brushing machine with a continuous flow of hot water.

Thereafter they are treated by means of an automatic hot spray. Finally they are subjected to steam sterilisation under pressure for twenty minutes.

Bottling apparatus, overalls, tanks, milk-pails, stools, and all removable equipment in the dairy are sterilised after each milking.

This is an excellent film for gatherings in rural areas or for demonstrating correct methods to farm workers. It is much sought after by those who are trying to extend the use of graded milk in towns.

Duration—10 *minutes.*

Hiring fee—10/6 *per night* / £2 *per week* } *Carriage extra.*

Cost of purchasing a copy on non-inflammable material—35 *mm.*, £6 12 6
16 *mm.*, £3 3 6

"HOW TUBERCULOSIS IS CAUSED"

This is a scientific film, suitable for nurses, probationers, and health visitors.

There are numerous explanatory labels on the film and many of the features are made clear by a pointer. The film, however, is one which would form a good basis for an accompanying lecture.

The first picture shows, highly magnified in the sputum, the rod-shaped microbe, the *Tubercle Bacillus*, which is the cause of the disease. The bacillus is non-mobile, and is contrasted with the trypanosome, to which Sleeping Sickness is due, and which is shown in active movement in the blood.

The effects of infection on the lung are shown by means of the diseased lung (contrasted with a healthy one) of a guinea-pig.

X-ray pictures of the living chest follow, showing the transparent healthy lung, the movements of the heart and of the diaphragm, followed again by similar pictures of the human lung, healthy and tuberculous.

Films of miliary tubercle in the lung and of more advanced and destructive disease, with cavities, are presented.

But victory is not on the side of the invaders, and the film goes on to deal with the means of defence which the body puts into action against the invading bacilli, and by which they can be overcome. The defence is the work of special cells, among which are the white cells of the blood (leucocytes).

The circulation (highly magnified) of the cells of the blood in the vessels is shown and the movements of the heart together with the action of the leucocytes in dealing with invaders. The property of phagocytosis, by which the white cells surround and absorb the bacilli is illustrated in a graphic manner.

Giant cells are shown, and the fibrous capsule, formed from the massed cells, which walls off the area of disease and prevents its spread.

Duration—20 minutes.

Hiring fee—10/6 per night
£2 per week } *Carriage extra.*

"DELAY IS DANGEROUS"

John Dorsay, a business man of 35, has felt out of sorts for some weeks. His ordinary office work tires him unduly and when he reaches home he is disinclined to play with his children and only wishes to be left alone and rest. His wife tries to tempt him to eat, but with little success.

One afternoon she takes him for a drive. By the wayside he sees a large poster of the National Tuberculosis Association on which is printed the early symptoms of tuberculosis. He reads it and feels that it may apply to his case. He tells his wife, who is horrified at the thought but wisely insists that he must put his fears at rest by taking his doctor's advice. Next morning he goes to his doctor and is thoroughly examined, and in a few days' time, when the X-ray reports have been received and his whole examination completed, he is informed that he has tuberculosis of the lungs.

He demurs at the advice that he should go to a sanatorium, and raises business difficulties. His doctor and his wife overcome his objections, and without any real delay he enters a sanatorium. After a period of treatment he is told by the doctor at the Institution that his disease is quiescent and that, provided he carries out instructions and lives in a sensible way for the next few years, he need not fear any return of his illness, fortunately, as he had come under treatment at an early stage.

The end of the picture shows a happy reunion with his family.

The purpose of this film is to press home the importance of early treatment and the hopefulness of tuberculosis when this is carried out.

Duration—20 minutes.

Hiring fee—10/6 per night
£2 per week } *Carriage extra.*

"A DAY IN A SANATORIUM"

(Brompton Hospital Sanatorium, Frimley)

The word "Sanatorium" is but too well known to thousands in this country; but only the few have any idea how the day is spent.

Unfounded conceptions have arisen which do harm. By some a sanatorium is considered a gloomy place full of bed-ridden invalids; by others, a palace of ease and luxury where any benefit to health is more than counterbalanced by damage to character.

It is to dispel this ignorance that this bright and attractive film has been produced, with the intention of showing patients that the life may be an active happy road to health, and of interesting their families by making them understand what is happening to their relatives under treatment.

The inner meaning of what is seen is carefully explained by descriptive text interspersed between the pictures. But though the titles explain themselves, they will make excellent texts for a lecturer to enforce and expand, as the film goes on.

The early scenes show the ground and the exterior of the sanatorium, which is a pleasing building placed among charming wooded surroundings with beautiful views.

After a few short titles giving the essentials of treatment, the day begins, and the life of the sanatorium is taken, hour by hour, showing what is doing in the various parts.

Those who are fit rise at 6.45 and bed making is followed by breakfast. Vegetables are prepared for dinner and then exercise starts for those who are fit.

Dinner is followed by rest, after which walking is resumed, or for those on the road to recovery, graduated labour.

The tests governing this system are explained and then follow scenes showing the varied grades of graduated labour, starting with light garden work, then rolling and mowing, then general work on the land, passing on finally to the heaviest work, tree-felling.

A pig farm is run by the patients. Further examples follow the results of useful work done by the patients in a large greenhouse built by them and a reservoir holding 500,000 gallons which patients excavated and constructed.

Women patients are shown doing similar but lighter work.

The recreation room, the reading room, and library (with view into Dutch garden), and the concert hall, are shown, also games of croquet, clock-golf and bowls, and a group of girls at a piano.

The final scenes are those of visiting days and holidays, *e.g.*, a tea party on a bank holiday, and last, a farewell scene of patients leaving at the end of the treatment.

The film is 1,450 ft. long and is divided at a convenient place into two portions.

Duration—35 *minutes.*

Hiring fee—£1/1/- *per night* / £5 *per week* } *Carriage extra.*

APPENDIX IV

LANTERN SLIDES

Any person wishing to hire a collection of slides may select from the following list, or if lecturers would indicate the lines they propose to take, the Medical Commissioner would be glad to suggest the most suitable slides.

Charge for hiring :—	s.	d.	
30 slides	3	0	(carriage extra)

STATISTICAL

1. Total deaths from some of the principal diseases. England and Wales, 1919-1923.
2. Mortality per million living from some of the chief causes of death. England and Wales, 1923.
3. Mortality per million living from some of the chief causes of death. London, 1923.
4. Tuberculosis in all forms : Death rates, 1861-1923. Males and Females. England and Wales.
5. Phthisis : Death rates, 1861-1923. Males and Females. England and Wales.
6. Decline in death rate from all forms of tuberculosis. England and Wales, 1871-1930.
7. Decline in death rate from phthisis : England and Wales, 1871-1930.
8. Death rate from pulmonary tuberculosis in England and Wales in each decade, 1871-1920.
9. Death rates from all forms of tuberculosis in the Metropolitan Boroughs, 1923.
10. Death rate from pulmonary tuberculosis in Scotland in each decade, 1871-1920.
11. Decline in death rate from all forms of tuberculosis : Scotland, 1871-1930.
12. Decline in death rate from phthisis : Scotland, 1871-1930.
13. Comparative mortality from all forms of tuberculosis, 1913-1921. London—Edinburgh—New York—Paris.
14. Deaths from tuberculosis. Under one year of age. England and Wales, 1923.
15. Deaths from tuberculosis. Ages, 1—4 England and Wales, 1923.
16. Deaths from tuberculosis. Ages, 5—6 England and Wales, 1923.
17. Deaths from tuberculosis. Ages, 10—14. England and Wales, 1923.
18. Percentage of bovine infection in certain forms of tuberculosis. Under 10 years of age. Over 10 years of age.
19. Percentage of bovine infection in certain forms of tuberculosis. All ages.
20. Male age incidence : Pulmonary tuberculosis in England and Wales, 1921-1930. Urban and Rural districts.
21. Female age incidence : Pulmonary tuberculosis in England and Wales, 1921-1930. Urban and Rural districts.
22. Urban age incidence : Pulmonary tuberculosis in England and Wales, 1921-1930. Males and Females.
23. Rural age incidence : Pulmonary tuberculosis in England and Wales, 1921-1930. Males and Females.
24. Age incidence : Pulmonary tuberculosis in London, 1891-1900. Males and Females.
25. Mortality from phthisis compared from that of all causes of death in various occupations, 1910-1912.
26. Tuberculosis and Housing : Comparison of death rate (all forms of tuberculosis in the Metropolitan Boroughs, 1923) with the number of rooms occupied per person. (Census, 1921.)
27. England and Wales. 1930. Comparative table. Six chief causes of death.
28. Death rates from tuberculosis, 1920. County Boroughs, England and Wales.
29. Deaths by sex and age. England and Wales. 1930.
30. Deaths from three principal diseases—tuberculosis (all forms), cancer, and heart disease—as a percentage of the total deaths, 1931.

PHYSIOLOGY AND PATHOLOGY

51. Cavity of thorax and diaphragm.
52. Front view of heart and lungs.
53. Heart and lungs (exterior).
54. Front view of cartilages of larynx : the trachea and bronchi.
55. Human lung.
56. Minute structure of lungs.
57. Air cells and portion of lung magnified.
58. Human lung : section showing vascular supply of alveoli.

59. Human lung: section through infundibulum; vascular supply.
60. Micrococci.
61. *Streptococcus pyogenes.*—From pus (× 1000).
62. *Streptococcus.*—From culture.
63. *Staphylococcus pyogenes aureus.*
64. *Pneumococcus* (sputum).
65. Radiogram of Chest—chronic pulmonary tubercle.
66. Ditto advanced pulmonary Tuberculosis.
67. *Bacillus typhosus.*
68. *Bacillus pneumoniæ.* Culture.
69. *Bacillus diphtheriæ.* Culture. (× 1000).
70. *Bacillus tuberculosis.*
71. *Bacillus tuberculosis.* From culture.
72-74. Tubercle bacilli in sputum.
75. *Bacillus tuberculosis.* In Pus.
76. *Spirillum choleræ asiaticæ.* In culture. Forty-eight hours' growth (× 1000).
77. Malaria: malignant parasite. "Ring forms."
78. Actinomyces.

MORBID ANATOMY.

79. Lung chronic fibroid phthisis.
80. Tubercle in lung, caseated and broken down.
81. Lung—miliary tuberculosis.
82. Tubercles in lung.
83. Tubercle bacilli in lung of rabbit.
84. Tuberculous deposit in bone.
85. Tuberculous disease of cartilage.

TUBERCULOSIS OF THE BONES AND JOINTS, &c.

101. Child undergoing treatment by heliotherapy for abscess and correction of deformity.
102. Tuberculous disease of shoulder joint—Radiogram.
103. Tuberculosis of the spine—Pott's disease.
104. Deformity in dorsal caries.
105. Tuberculous disease of the hip-joint, untreated.
106. A case of tuberculous disease of the spine with marked deformity.
107. Tuberculous hip-joint showing deformity.
108. Children undergoing light treatment.
109. Tuberculous abscess of knee.
110. Tuberculous disease of foot showing fistulæ.
111. Early tuberculous disease of ulna and phalanx.—Radiogram.
112. Tuberculous knee-joint.—Radiogram.
113. Acute tuberculous disease of tibia and fibula.—Radiogram.

LORD MAYOR TRELOAR CRIPPLES' HOSPITAL, ALTON, HANTS., AND HAYLING ISLAND:

114. A case of tuberculous disease of the spine in high plaster jacket. The jacket acts as an exoskeleton to take the place of the softened and diseased endoskeleton. The weight of the head is taken direct from the pelvis; note the moulding over the pelvis which makes this possible. This patient had severe tuberculous disease of cervical and upper dorsal spine and advanced tuberculous disease of both lungs. The photograph was taken fifteen years ago. The patient is now a healthy well-developed young woman earning her own living.
115. Tuberculous disease of the hip joint with considerable deformity and spinal lordosis and abscess formation.
116. The same patient as in 115. Deformity corrected. Leg fixed in a short plaster apica. This photograph was taken twelve years ago. The patient is now a healthy young woman earning her own living.
117. Patients suffering from acute tuberculous disease of the hip-joint at Alton.
118. Ambulant patients suffering from various forms of surgical tuberculosis at Alton, setting out for sun treatment in the meadows and woods.
119. Sun treatment for ambulant patients in the meadows at Alton.
120. Ambulant patients receiving treatment amongst the wild flowers at Alton.
121. Ditto.
122. Sea bathing for ambulant patients suffering from surgical tuberculosis at the Marine Branch, Sandy Point, Hayling Island. Following the bathe is a sun bath.
123. A group of tuberculous cripples on the sea-balcony. Note the splendid muscular development this treatment produces.
124. Sun worshippers. The child on the left had suffered from (1) tuberculous disease of the left hip-joint with extensive abscess formation. (2) Very extensive glands of the neck, which have now completely disappeared. (3) Lupus vulgaris of the ear, cheeks, chest, both arms and buttocks; now quite healed. (4) Blepharitis with intense photophobia; no trace remains. The child on the right suffered from (1)

advanced lupus of face and neck. (2) Extensive lupus of buttock. (3) Lupus of leg. (4) Tuberculous disease of the right knee-joint. All these lesions are rapidly healing.

125. Balneotherapy. Ambulant patients undergoing this treatment. (1) Paddle as in photograph. (2) Later are sprayed with sea water. (3) Finally undergo complete immersion.
126. Sun treatment amongst the flowers.
127. Gardening during sun treatment. All these patients had suffered from severe tuberculous lesions. From right to left as follows: (1) Tuberculous disease of elbow and knee with abscesses. (2) Multiple tuberculous lesions, numerous abscesses and sinuses. (3) Tuberculous disease of hip and knee with numerous sinuses. (4) Tuberculous disease of the shoulder. (5) Spinal caries with abscess formation. (6) Not identified. (7) Tuberculous disease of spine (3 foci), double psoas abscess and tuberculous disease of both hips. (8) Tuberculous disease of knee. (9) Tuberculous disease of spine. (10) Tuberculous disease of knee and hip.
128. A solarium.
129. Children who have suffered from severe surgical tuberculosis. After the bathe the children are taken into specially prepared pens protected by wattle hurdles. They are rubbed down before a brazier (seen in foreground), put their feet in a trough containing warm water, have a hot drink and then a sun-bath.
130. Child admitted with very widespread tuberculous infection, comprising parietal and frontal caries, cervical adentitis, tuberculous disease of both elbows, both wrists, both lungs, both hips, both knees, both ankles, with numerous abscesses and sinuses, and mesenteric tubercle with intestinal destruction.
131. The same child on completion of treatment.
132. Case of advanced tuberculous disease of the spine with marked deformity.
133. Same patient after treatment. Deformity corrected.
134. Case of advanced pyæmia, including parietal caries, septic arthritis of hip, osteomyelitis of both tibae, septic arthritis of both ankle joints.
135. Same patient after treatment.
136. Black and white. Two cases of tuberculous disease of the spine with paraplegia and psoas abscess. The child on the left receiving sun treatment. The child on the right before such treatment was commenced.
137. Solarium at Alton.
138. Sun and Shade Balcony at Alton.
139-142. Sun treatment on the beach at Hayling Island.
143. Ambulant cases receiving sun treatment.
144. Recumbent case undergoing balneotherapy. This patient is suffering from tuberculous disease of the shoulder and hip.
145. Immersion during balneotherapy for recumbent cases.
146. Patient on stretcher about to be bathed.
147. Artificial light treatment for recumbent cases.
148. A corner of the artificial light department.
149. Tuberculous disease of the hip joint before treatment.
150. Ditto after treatment.
151. Tuberculous disease of the spine before treatment.
152. Ditto after treatment.
153. Tuberculous disease of the spine and pubis.
154. Ditto after treatment. Note the improved musculature.

QUEEN MARY'S HOSPITAL FOR CHILDREN, CARSHALTON:

155-160. Children under treatment for tuberculosis.

DR. ROLLIER'S SCHOOL IN THE SUN, LEYSIN:

161. Children undergoing treatment.
162. Boys setting out for their class.
163. Girls setting out for their class.
164. On the way to the class.
165. Class at work.
166. Skating.
167. Ski-ing.
168. At play in the snow.

KING GEORGE V. SANATORIUM, GODALMING:

169. Aerial view.

HEATHERWOOD HOSPITAL, ASCOT:

170. Ward verandahs.
171. Ditto
172. Aerial view.

COUNTY SANATORIUM, MILFORD:

173. Aerial view.

TUBERCULOSIS AND MILK

201. Specimen of tubercle bacilli in milk (× 1000).
202. Abdominal tuberculosis in cow.
203. Cows groomed before milking.
204. Ditto.
205. Milking, showing hygienic milk pail.

206. Automatic milker at work.
207. Composition of milk.
208. Ideal method of grading milk.
209. Grades of milk.
210. Cases of bovine infection (after Stanley Griffith).
211. Open-air milking.
212. A modern cowshed.

SANATORIUM AND COLONY LIFE

BROMPTON HOSPITAL SANATORIUM, FRIMLEY:

Graduated rest :

251. Men patients resting.
252. Men patients in bed on verandah.

Graduated exercise and labour:

253. Men patients walking.
254. Women patients gardening.
255. Men patients at work in fruit garden.
256. Men patients clipping ivy.
257. Men patients haymaking.
258. Men patients woodcutting.
259. Men patients putting up posts.
260. Men patients feeding pigs.

Recreation:

261. Men patients playing bowls.
262. Women patients preparing vegetables for dinner.

The patients build a reservoir:

263. Land before it was cleared.
264. Patients excavating and clearing away gravel.
265. Excavation completed: 500 tons of earth removed.
266. Mixing concrete and putting at the bottom.
267. Reservoir completed : capacity 500,000 gallons.

BURROW HILL SANATORIUM COLONY, FRIMLEY

268. Entrance to Colony.
269. Sanatorium block : exterior.
270. Sanatorium block : interior.
271. Dining Hall : exterior.
272. Dining Hall : interior.
273. Working in Market Garden (close up).
274. Working in Market Garden (showing buildings).
275. Ditto (distant).
276. Building garden shed.
277. Poultry runs built by patients.
278. View of estate.
279. Some of the tubercle-free dairy herd.
280-281. Visit of H.R.H. The Duke of Connaught:
282. Patients playing cricket.
283. Patients working in garden.
284. Patients learning clerical work.

HAIRMYRES COLONY, LANARKSHIRE:

285. Open air verandahs.
286. Ditto.
287. Ditto.
288. Lessons in open-air school.
289. Resting.
290. Dairy buildings (exterior).
291. Dairy buildings (interior).
292. Corner of one of the workshops.
293. Part of main building.

"THE NEED FOR FRESH AIR"

(useful for simple popular instruction)

351. London children at play in open air.
352. Ditto.
353. Ditto.
354. The anæmic work girl of our towns.
355. Look at the fisher-lass and see the contrast.
356. The fishermen hardly ever contract consumption.
357. In hospitals there is always a stream of fresh air.
358. A whole street without a window open.
359. Cleaning their houses but never opening the windows.
360. Windows closed and covered up with blinds and curtains.
361. Fireplaces which ventilate and warm air.
362. Fresh air excluded from the bedroom.
363. Clouds of smoke are often made, but quite unnecessarily.
364. A contrast.
365. Even the moor, the heather and ferns suffer from smoke.
366. London Slum Life.—A dark and sunless court.
367. London Slum Life.—Interior of kitchen: a dirty, airless room inhabited by a consumptive woman.
368. London Slum Life.—Consumptive patient making use of back garden to carry out open-air treatment.
369. A baby's comforter with flies settling on it.
370. Illustrated cartoon showing the dangers of leaving milk near the sink.
371. Chart showing the amount of air required for ventilating purposes.
372. Diagram showing air-currents in a room warmed by an open fire.
373. The house-fly.
374. Pocket spittoons.
375 to 378. London County Council housing estates.
379. Convicts' cells. Often better lit and ventilated than some slum rooms.

"THE NEED FOR FRESH AIR"—*continued*

380. Infant feeding bottles, new and old.
381 to 389. Careful Patient Series.—Female. Set of nine slides.
390 to 399. Careful Patient Series.—Male. Set of nine slides.
400. Open windows.

Useful sets showing the ideal habits of life.

OPEN-AIR SCHOOLS

KENSAL HOUSE (L.C.C.):
451. Classes at work.
452. Resting.
453. Making models.
454. Gardening.
455. At play.
456. Ditto.
457. Ditto.

ST. PANCRAS SCHOOL (L.C.C.):
458. A class.

BIRLEY HOUSE (L.C.C.):
459. A class.
460. A class working in shelter.
461. Gardening.
462. At play.

GROVE HILL SCHOOL:
463. At lessons.
464. Resting.

MOTHERWELL, LANARKSHIRE:
465. Knowetop School.
466. Ditto.

HAIRMYRES OPEN-AIR SCHOOL, LANARKSHIRE:
467. General view.

GLASGOW:
468. Shawlands New School.

CAMBRIDGE:
469. At lessons.

BRADFORD:
470. Thackley School. General view.
471. Thackley School. At lessons.

BURNLEY:
472. The Day Open Air School. General view.

SHEFFIELD:
473. Bentz Green School. At lessons.
474. Bentz Green School. Resting.

LONDON:
475. Wood Lane School. At lessons.
476. Wood Lane School. Gardening.
477. Downdeny Road School. General view.
478. Holly Court School. Resting.

BURY:
479. Summerseat Open Air School.

HISTORICAL SECTION

501. Hippocrates.
502. Galen.
503. Laennec.
504. Auenbrugger, Leopold.
505. Corvisart, J. N.
506. Jenner, Edward.
507. Koch, Robert.
508. Jenner, Sir William.
509. Brehmer, Hermann.
510. Trudeau, E. L.
511. Von Behring, Emil.
512. Virchow, Rudolf.
513. Ehrlich, Paul.
514. Turban, Karl.

GENERAL

551. National Association motor cinematograph van.
552. Foods containing principal vitamins.
553. Common foods rich in protein.
554. Common foods rich in fat.
555. Healthy bedroom.
556. Unhealthy bedroom.
557. Milk uncovered, showing dirt and dust.
558. Milk covered.
559. Careless sweeping.

MICROSCOPIC PREPARATIONS

A series of microscopic slides showing Tubercle Bacilli, section of tuberculous tissue, etc., are available for hire. They are useful to Sister Tutors and others, to illustrate lectures.

Hiring charge, 5/- per week. Carriage extra.

APPENDIX V

Price List of Publications, Films, and Lantern Slides

Local Authorities can have particulars of their Tuberculosis Dispensary and other Services overprinted on these leaflets.

Charge for overprinting:
100 copies, 10/–; 500 copies, 13/6; 1,000 copies, 17/–.

LEAFLETS

1. The Conquest of Tuberculosis.
2. Fresh Air and Sunlight.
3. Milk and Tuberculosis.
5. Diet in Tuberculosis.
6. Care work in Tuberculosis.
7. On leaving the Sanatorium.
8. Disinfection.
9. How can I protect my child from Tuberculosis? (children under 5).
10. How shall I protect my child from Tuberculosis (to mothers with children of school years).

2/6 per 100; 10/– per 500; £1 per 1000.

HANDBILLS

The Care of a Tuberculous Patient.
The Official Grades of Milk.
The Early Signs of Tuberculosis.
The Danger of Spitting.

Per 1,000, 6/–. Per 100, 6d.

POSTERS

Twelve Coloured Posters. Size 22 × 31 inches .. .. 1s.
(*For an annual subscription of* 15s. *one of these posters will be sent, post-free, each month.*)

POST CARDS

Eight Coloured Post Cards .. .. 1d. per dozen

VARNISHED DISPLAY CARDS

Prohibition of Spitting. Size 8 × 11 inches .. .. 6s. 0d. per doz.

TRANSACTIONS

	£	s.	d.
Transactions of Annual Tuberculosis Conferences:—			
7th Annual Conference, London, 1919	0	10	0
8th „ „ Liverpool, 1920	0	12	6
9th „ „ Birmingham, 1923	0	15	0
10th „ „ London, 1924	0	6	0
11th „ „ London, 1925	0	7	6
12th „ „ Glasgow, 1926	0	7	6
13th „ „ London, 1927	0	7	6
14th „ „ London, 1928	0	7	6
15th „ „ Newcastle, 1929	0	7	6
16th „ „ London, 1930	0	7	6
17th „ „ Margate, 1931	0	7	6
18th „ „ London, 1932	0	7	6
Transactions of Second International Conference (London), 1921	0	15	0
Causal Factors in Tuberculosis: a Report of an Investigation into the Incidence of Tuberculosis in certain Tyneside Districts	0	2	0
Handbook of Tuberculosis Schemes for Great Britain and Ireland (7th Edition)	0	5	0
Annual Reports	0	1	0
Historical Sketch, 1898-1926	0	1	0
Set of 26 Statistical Charts	0	2	6

HIRE OF FILMS. Standard size (35 mm.)

	Approximate Length.	Per Night. £ s. d.	Per Week. £ s. d.
1. "Air and Sun," 1 reel	300 ft.	0 5 0	1 0 0
2. "A Stitch in Time," 2 reels (total length)	1,500 „	1 1 0	5 0 0
3. "The Production of Certified Milk," 1 reel	530 „	0 10 6	2 0 0
4. "How Tuberculosis is caused"	950 „	0 10 6	2 0 0
5. "Delay is Dangerous"	1,000 „	0 10 6	2 0 0
6. "A Day in a Sanatorium," 2 reels (total)	1,450 „	1 1 0	5 0 0

HIRE OF FILMS. Small size (16 mm.)

	Per Night. £ s. d.	Per Week. £ s. d.
"The Production of Certified Milk"	0 5 0	1 1 0
"A Stitch in Time"	0 10 0	2 2 0
"Air and Sun"	0 5 0	1 1 0
"Tuberculosis"—A film for Nurses (in preparation) ..	0 5 0	1 1 0

Carriage extra in all cases.

For Synopses of Films see pages 27-32.

HIRE OF LANTERN SLIDES

Per 30 slides per Lecture, 3s. 0d. plus carriage.

For List of Slides see pages 33-37.

MICROSCOPIC SLIDES

A series of microscopic slides showing Tubercle Bacilli, section of tuberculous tissue etc.; are available for hire. They are useful to Sister Tutors and others, to illustrate lectures.

Hiring charge, 5/- per week. Carriage extra.

APPENDIX VI

(The Secretary will be glad to be notified of any errors that may occur in these lists.)

LIFE MEMBERS

Alexander, Mrs. M. A. J.
Anderson, Drysdale, M.R.C.S., L.R.C.P.
Askew, S. B.
Astley, C. C.
Astor, The Viscount

Barlow, Sir Thomas, Bt., K.C.V.O., M.D.
Barton, Geoffrey B.
Barton, S. Saxon, O.B.E., L.R.C.P.
Bathurst, Hon. W. R.
Blount, Miss
Boots the Chemists
Bothwell, Miss
Braithwaite, John
Broadbent, Miss
Broadbent, Walter, M.D., F.R.C.P.
Brock, G. Sandison, M.B.E., M.D.
Bromhead, Lt.-Col. A. C., C.B.E.
Brown, Walter H.
Burrell, L.S.T., M.D., F.R.C.P.
Butler, Henry A. B.
Butterworth, Sir Alexander Kaye

Carmichael, A. M.
Carmichael, Robert, J.P.
Chandler, F.G., M.D., F.R.C.P.
Corrigan, Mrs. James W.
Coutts, F. J. H., C.B., M.D.
Cox, G. Lissant, M.D.
Crawford, Sir Homewood, C.V.O.
Crewe, The Marquess of, K.G.
Crosfield, Miss Margaret C.
Cummins, Professor S. Lyle, C.B., C.M.G, M.D.

D'Abernon, The Lady
Dickson, Miss
Dodd, J. Theodore, M.A.
Douglas, George
Douglas-Pennant, The Hon. Adela
Dunbar, R., M.C.

Egerton of Tatton, The Lady

Fairhaven, The Lady
Falmouth, Kathleen, Viscountess
Findlay, Miss E. M.
FitzHerbert, Nicholas
Fletcher, Philip A.
Ford, Miss
Ford, Sir Patrick J., Bt., M.P.
Frankish, Mrs.
Franklin, Ellis A.

Gilchrist, James C., M.B.
Giles, Rev. Edward
Gillespie, John R., M.A., M.D.
Green, Forster

Hare, Major General Sir Stewart W., C.B., C.M.G.
Hasties
Heaf, Frederick, M.B.
Henderson, James
Henley's Telegraph Works Co. W. T., Ltd.
Henry, Miss Frances
Herbert, Arthur
Hide, Percy

James, The Hon. Mrs. Bernard
Joshua, Mrs.

Lawson, David, M.D.
Lessing, Mrs.
Le Vieux, Henri T., M.B., D.P.H.
Lewis, The Hon. Annie L.
Lister, G. D.

MacDonnell, J. J., M.B., D.P.H.
MacRobert, Sir Alasdair, Bt.
Maitland, T. Gwynne, M.D.
Mallam, Mrs.
Marling, W. J. Paley
Marshall, Mrs. Victor
Martin, Frank
Martineau, John
Mason, The Lady Evelyn
Merz & McLellan
Mills, Henry John
Morrice, George, M.D.

Nestlé and Anglo-Swiss Condensed Milk Co.
Nicholson & Sons, John, Ltd.
Norris, Mrs.
Norton, Mrs.

Osborne, John H.

Pain, Arthur C., J.P.
Parker, Will
Pearson, S. Vere, M.B.
Penrose, Hon. Mrs. J. Doyle
Perkins, Mrs.
Phillips, Sir Lionel, Bt.
Port, S. J.
Preston, Mrs. Percy
Price, Charles E., J.P.

Radcliffe-Platt, Mrs.
Rea, Mrs. Alec L.
Richardson, Mrs.
Robinson, J. C.
Rolleston, Lady (Humphry)
Rosling, Percy
Rothwell, Richard R.

Samuelson, Francis
Sandford, Arthur, M.D.
Sankey, Ivor J.
Santarelli, L.
Sassoon, Mrs. Meyer
Shigeno, K.
Smith, Mrs. Andrew
Smith, Miss Margaret
Smithson, Major Arthur, R.A.M.C.
Stevens, Mrs.
Stevenson, R. M.
Stolterforth, Miss C. E.
Stradbroke, The Countess of
Strathcona, The Lady
Suffield, The Dowager Lady
Summers, W.

Tait, Henry B., F.R.C.S.
Taylor, J.
Teichmann, Mrs. E.
Thompson, Sir Herbert, Bt.
Thomson, H. Hyslop, M.D., D.P.H.
Trimble, Andrew, M.B.

Van den Bergh, Donald, J.P.
Varrier-Jones, Sir Pendrill, M.A., M.R.C.P.
Vernon, Mrs. R. T.

Ward, T. Leonard
Warde, Wilfred B., M.D.
Weber, F. Parkes, M.D., F.R.C.P.
Weston, Henry J., M.R.C.S., L.R.C.P.
White, H. A.
Wythes, E. J., C.B.E.

MEMBERS (1932)

	£	s.	d.
Adams, F. E.	1	1	0
Albright, W. A.	1	1	0
Alexander, E. J.	5	0	0
Alexander, Mrs. M. A. J.		5	0
Alison, Miss		5	0
Allan, Mrs. H. M.	2	2	0
Allix, Miss E. B.	1	1	0
Arkwright, J. A., M.D.	1	1	0
Arthur, Mrs.	2	2	0
Ashworth, J. D.	1	0	0
Atkinson, E. C.	5	5	0
Backhouse, Mrs. E. F.	5	0	0
Bannerman & Co., G. L.	2	2	0
Barham, Col. A. S., C.M.G.	2	2	0
Barker, E. C.	2	2	0
Beale, Miss M. S.	2	2	0
Benington, Philip, M.D., D.P.H.		5	0
Bevis, Alfred	1	1	0
Bevis, In Memory of the late Mrs.	1	1	0
Bidwell, Miss	2	2	0
Bradford, Lady, O.B.E.	1	1	0
Brewer, Miss E. N. D.	1	1	0
Briggs, William Ll.D. (the late)	1	1	0
Broadbent, Miss	2	2	0
Brown, E. Clifton	1	1	0
Brown & Polson Ltd.	3	3	0
Brown, R. K., M.D.		5	0
Browning, Surgeon Commander H. A., R.N.		10	0
Bryant & May Ltd.	2	2	0
Bulman, Miss M. A.		5	0
Bulmer, Miss H. M.		5	0
Burrell & Co. Ltd.	2	0	0
Burton-Fanning, F. W., M.D.	1	1	0
Butt, A. H., M.B., B.S., D.P.H.	1	1	0
Butterworth, Sir A. Kaye	1	1	0
Campbell, Mrs. E. M. (the late)	1	1	0
Candler, Miss M. T.		5	0
Carlisle, The Countess of		5	0
Cater, A. E.		5	0
Caulfeild, Mrs. R. M. (the late)	2	2	0
Challis, Miss M. T.		5	0
Chidell, C. C., M.B.	1	1	0
Coats, The Lady Amy	1	1	0
Cochrane, Miss M. L.		10	0
Collings, E. H. R.		5	0
Collinson, F. W., M.D.		5	0
Colman, Lt.-Col. G. M.		5	0
Connell, Buchanan		5	0
Crament, F. W.		10	6
Davidson, Lady	2	2	0
Davis, W., M.B.E.		5	0
Dawkins, Miss V., M.B.		5	0
Debenham, Miss C. J.	1	1	0
de Vesci, The Viscountess	1	1	0
Dewar, W. J., M.D.		5	0
Dodds, W. J., M.D.		5	0
Dudley, County Borough of	5	5	0
Durrant, F. E.		5	0
Dutton, Mrs.		5	0
Edmonstone, Mrs. A. C.	1	1	0
Edwards, P. W., M.B.		5	0
Elphinstone, Mrs.	1	0	0
Everard, F. O.	1	1	0
Fanning, W. J., M.R.C.S., L.R.C.P.	1	1	0
Featham & Grieveson		10	0
Findlay, J. S.	1	1	0
Fletcher, Ernest, M.B.	1	1	0
Foggie, W. E., D.S.O., M.D.		5	0
Foot, H.	1	1	0
Forwood, Mrs. Miles	1	1	0
Foster, Major A. W.	2	2	0
Fowler, Mrs. G. H., O.B.E.		5	0
Fradgley, E. W.	1	1	0
Fry, L. G.	5	0	0
Furneaux, L. R.		10	6
Fyfe-Jamieson, Lt.-Col. J. F.		5	0
Gardner, H. W., M.B.E., M.D.		5	0
Gibson, G. D.	1	1	0
Giles, Rev. E.	2	0	0
Gossage, Mrs. F. H.	5	0	0
Granville, The Earl	5	5	0
Green, Miss C. M.	1	0	0
Griffith, T. E.	1	1	0
Grimes, John		10	6
Haigh, Frederick	1	1	0
Hartley, Rev. Canon	1	0	0
Hartley, Sir Percival H. S., C.V.O., M.D.		5	0
Harwood, Miss	1	1	0
Hastings Tuberculosis Care Committee	1	1	0
Hatton, Mrs. Villiers	1	1	0
Hawker, Mrs. J. F.	1	1	0
Hawkyard, A., M.D.		10	0
Heaton, Mrs.		5	0
Heginbotham, Mrs.		5	0
Helm, Public Trustee on account of the late C.	1	17	6
Hendry, Miss E. M.		5	0
Herbert, Mrs. Anstruther	1	0	0
Herbert, E.	1	1	0
Hills, Mrs. Ernest		5	0
Hodgson, Major P. K., O.B.E.	1	1	0
Hogg, Alexander F.		5	0
Holdsworth, C. Dyson, M.D.		5	0
Homan, Miss A. M.	2	2	0
Homer, J. T., C.B.E.		5	0
Hornsby, J. W.	1	1	0
Hoskyns, Jean Lady	1	0	0
Howell, Mrs.		5	0
Hunter, Miss Sheila, M.B.		5	0
Hyams, F. J.	1	1	0
Illingworth, Mrs. Percy (the late)	5	5	0
Imperial Chemical Industries Ltd.	50	0	0
Ingram, Sir Herbert, Bt.		10	0
Jaffe, John	5	0	0
Jardine, Ethel Lady Buchanan	4	18	0
Jones, Miss Amy	1	1	0
Jones, John		5	0
Jones, Lady	1	1	0
Jordan, N. T. K., M.B.		5	0
Kidd, Percy, M.D.	1	1	0
Kilmarnock, Medical Officer of Health of		5	0
King Edward VII Welsh National Memorial Association		5	0
Lace, W. F., M.R.C.S.		5	0
Lawrence, Arthur	1	0	0
Lee, Mrs.		5	0
Leeds Tuberculosis Care Association	1	1	0
Leng, D. C.	1	1	0
Lethbridge, Mrs.		5	0
Lewis, The Hon. A. L.	1	1	0
Lindsay, The Lady Jane		5	0
Llewellin, W. W.	1	1	0
London Corporation, Public Health Department of		5	0
Lusk, H. D.	1	1	0
Macadam, Miss I. J. R.		10	6
McClintock, Col. H. F.	1	1	0
Macpherson, A. H., L.R.C.P.Ed.		5	0
Mallett, F. R., M.D.		5	0
Maltby, Mrs. Maurice		5	0
Manbre, Mrs.	2	2	0
Manifold, Col. J. F., C.M.G. (the late)	2	2	0
Manning, Mrs. Leah	1	1	0
Mardon, Capt. E. G.	3	3	0
Marshall, Mrs. Victor	5	0	0
Martland, William (the late)	1	1	0
Matthews & Sons Ltd., P. E.		5	0
Maude, Miss F.	2	0	0
Maude, Miss S. M.	1	1	0
Mayhew, Lady	1	0	0
Mihrban Trust, The	10	0	0
Mitchell, Mrs.		5	0
Monk, G. H.		5	0
Moore, Miss Faith	1	1	0
Moore, Miss M. R.		10	0
Mostyn, Mrs.	1	0	0
Mothersill, Miss Emily		10	0
Moysey, Mrs.	2	0	0
Muir, R. S.	1	1	0
Musters, Mrs.		10	0
Nannetti, Miss M. F., L.R.C.P.		5	0
Nicol, George (the late)	2	2	0
Noble, Col. Leonard	2	10	0
Norton, Miss F. M.	5	5	0
Ogilvie, Mrs.		5	0
Ormsby, the Misses		5	0
Osborne, J. H.	5	0	0
Owen-Mackenzie, Lady	1	1	0
Palmer, W. J.	1	1	0
Parker, C. E.		5	0

	£	s.	d.
Paton, Calvert & Co. Ltd.	1	1	0
Patteson, Mrs. F. E.	1	0	0
Patullo, Mrs. J. A.		5	0
Pauling & Co. Ltd.	2	2	0
Pawsey, J. A.		10	0
Payne, E. M.	1	1	0
Philip, Sir Robert, M.D., LL.D.	1	1	0
Pilcher, Giles T.	2	2	0
Pilkington, D. F.	5	0	0
Pinder, Mrs. L. E.	5	0	0
Prest, E. E., M.D.		5	0
Prudential Assurance Co. Ltd.	25	0	0
Radcliffe-Platt, Mrs.	5	5	0
Ramsay, Mrs. John	1	0	0
Rayner, A. E., M.B.	1	1	0
Reckitt & Sons Ltd.	5	5	0
Reeves-Smith, G.	1	1	0
Rickards, E. H.		5	0
Royal National Sanatorium, Bournemouth		5	0
Rushton, William	1	1	0
Ruston, Col. R. S.		5	0
Ryman, H. J., Ltd.	1	1	0
St. Hill, Miss Annie	2	2	0
Sanderson, J. M.	1	1	0
Sanderson, Mrs.	1	1	0
Saner, J. D., M.B.		5	0
Saunders, Miss		5	0
Savill, P., M.D.		10	6
Scottish Life Assurance Co. Ltd.	1	1	0
Shrubsall, C. F.	5	5	0
Sim, Robert	2	0	0
Society for Improving the Conditions of the Labouring Classes	1	1	0
Somervell, John	1	1	0
Somervell, Miss Ursula	1	1	0
Spender-Clay, Rt. Hon. H.H., C.M.G. M.C., M.P.	1	1	0
Spurgeon, Sir Arthur		10	0
Stallard, N. F., M.D.	1	1	0
Startin, Mrs.		10	6
Stevenson, R. M.	1	1	0
Stirling, Hon. Mrs.	1	1	0
Summers, W.	3	0	0
Swan, C. R.		5	0
Swetenham, Mrs.	1	1	0
Sworder, Mrs. B. C.	1	1	0
Sykes, Mrs. B. C.	1	1	0
Teare, J., M.D.		5	0
Tennant, Rt. Hon. H. J.	5	5	0
Thomas, Miss G.	1	1	0
Thompson, Sir Herbert, Bt.	1	1	0
Thompson, Mrs. John	1	1	0
Thomson, Sir St. Clair, M.D., F.R.C.S.		5	0
Thrissell Engineering Co. Ltd.		5	0
Tomson, W. Bolton, M.D.	1	1	0
Toynbee, William	1	1	0
Trinder, Mrs.		8	0
Trollope, H.		5	0
Turner, Major Frederick T., M.C., M.R.C.S., L.R.C.P.	1	1	0
Ure, W. P.	2	2	0
Van den Berg, Dr. Heynsius		10	0
Walker, Miss Jane, C. H., M.D.	1	1	0
Walker, Mrs.		5	0
Walters, F. R., M.D.	1	1	0
Ward, B. M.	1	0	0
Ward, Ernest, M.D., F.R.C.S.		10	6
Ward, Miss H. O.		5	0
Watson-Kennedy, Mrs.	1	1	0
Wayte, Miss Ellen	1	1	0
Whitley, E.	1	1	0
Wilkin, J. Whiteley		10	6
Wilkin, Mrs. J. Whiteley		10	6
Williams, Sir J. Fischer, C.B.E.		10	0
Wilson, Mrs. R. Q.	1	1	0
Winckworth, W. B., M.R.C.S., L.R.C.P.		5	0
Wood, Miss F. Ethel	1	1	0
Wood, W. T.		5	0
Worcestershire King Edward VII Sanatorium	1	1	0
Younger, Sir William, Bt.	2	2	0
			£381 18 0
Deduct:—			
Subscriptions paid in 1931 for 1932	8	8	0
Subscriptions paid in 1933 for 1932	1	10	0
			9 18 0
			£372 0 0
Add:—			
Arrears paid during 1931	1	0	6
Subscriptions paid in 1932 for 1933	6	16	0
Life members	26	0	0
			33 16 6
Total as shown in statement of Income and Expenditure			£405 16 6

GENERAL DONATIONS (1932)

	£	s.	d.
Acutt, R. N.	1	0	0
Anderson, Mrs. Rupert		2	6
Anderton, Mrs. A.		5	0
Austral Development, Ltd.	1	1	0
Benwell, Miss		10	0
British United Shoe Machinery Co. Ltd., Employees' Benevolent Fund	2	12	6
Butterfield, H. D.	20	0	0
City of London Electric Lighting Co. Ltd.	5	5	0
Collins, Miss C.	5	0	0
Day, J. W.	2	0	0
Evans, Benjamin	1	1	0
Fedden, A. Player	2	0	0
Glen-Coats Charitable Trust, Sir Thomas	2	2	0
Goodrich, Miss		2	6
Grahame, W.	1	1	0
Gulbenkian, C. S.	2	2	0
Harari, Sir Victor, C.M.G.	2	2	0
Harper, Percy	0	10	0
Herzberg, B.	1	1	0
Holland, Alfred R.	1	1	0
Holt-Skinner, Mrs.	1	1	0
Hubbard, H. M.	6	0	0
Hunt, W. M.		2	6
Ipswich Industrial Co-operative Society Ltd.	1	1	0
Lesslie, R. J.	5	5	0
Levy Bros.	1	1	0
"Life of Faith," per		5	0
Matthew & Sons Ltd., P. E.	1	1	0
Merchant Taylors' Company Charities Fund, Trustees of	10	10	0
Morton, Miss D.		2	6
Okey, F. J.	1	1	0
Parsons, Major, E. H. T., C.B.E.		10	0
Pelly, Mrs. P. J.		10	0
Pott, Miss E. M.	2	2	0
Robins, Mrs.		10	0
Saint, H. B.	2	0	0
Smallwood, Guy	1	1	0
Smyth, Miss A. E.	1	0	0
Speak, Paul	2	0	0
Taylor, G. J.		5	6
Wall, S. H., "In Memoriam"	5	0	0
Waterhouse, Miss F. E.	1	1	0
Watters, G. T. B., M.D.		10	0
Welch, Miss	1	0	0
White, H. A.	1	1	0
White, Richard		5	0
Whitehead, Robert	1	0	0
Wilder, Miss		10	0
Wilson, Lady	1	1	0
W.J.F.	2	0	0
Wylde, Rev. Canon		10	0
	£102	5	0

BURROW HILL SANATORIUM COLONY

SUBSCRIPTIONS AND DONATIONS (1933)

	£	s.	d.
Alexander, E. J.	5	0	0
Beresford, Mrs. C. F.	2	2	0
Couper, Mrs. S. W.	1	1	0
Du Buisson, the Misses	2	2	0
Elphinstone, Mrs.	1	0	0
Gibson, Miss M. M.	1	1	0
Goodrich, Miss		2	0
Gossage, Mrs.	5	0	0
Græme, Mrs. L. O.	5	0	0
Grant, Miss M. G.	5	0	0
Jervoise, Miss E. Clarke	2	2	0
Manfield, Mrs.	1	1	0
Mardon, Capt. E. G.	3	3	0
Merz, Charles H.	10	0	0
Moysey, Mrs.	2	0	0
Nation, H.	5	5	0
Parry, R. H., F.R.C.S.	10	10	0
Penn, Mrs.	1	7	1
Reckitt Charity, Trustees of the Sir James	10	0	0
Ruffer, Lady	5	0	0
St. Martin-in-the-Fields Parochial Church Council	1	0	0
Sebag-Montefiore, Hon. Mrs.	2	2	0
Withers, Mrs. Percy	2	2	0
	£83	0	1

APPENDIX VII

BRANCHES OF THE ASSOCIATION AND AFFILIATED SOCIETIES

CAMBERWELL TUBERCULOSIS CARE COMMITTEE

Chairman	WILLIAM BRAND, Esq., M.B.
Vice-Chairman	Alderman Mrs. MORRIS.
Honorary Treasurer	ARTHUR GRIFFITHS, Esq.
Honorary Secretary	Mrs. E. R. MORROGH.
Secretary	Mrs. LEONARD.
Office	19 BRUNSWICK SQUARE, S.E.5.

CHELMSFORD AND DISTRICT TUBERCULOSIS CARE ASSOCIATION

President	C. E. RIDLEY, Esq., D.L., J.P., C.C.
Chairman	A. EDDINGTON, Esq.
Vice-Chairman	J. H. ROWE, Esq.
Honorary Secretary and Treasurer	J. COLMAN Esq., A.C.I.S.
Office	HEALTH DEPARTMENT, COUNTY HALL, CHELMSFORD.

CUMBERLAND BRANCH

Treasurer and Honorary Secretary	H. S. CARTMELL, Esq.
Office	34 LOWTHER STREET, CARLISLE
Medical Superintendent of Blencathra Sanatorium, Threlkeld	W. GOODCHILD, Esq., M.B.

DAGENHAM TUBERCULOSIS CARE ASSOCIATION

Chairman	ARTHUR E. REEVE, Esq., J.P.
Secretary	L. M. LAMB, Esq.
Office	130 CRANBROOK ROAD, ILFORD.

THE SOCIETY FOR THE PREVENTION AND CURE OF CONSUMPTION IN THE COUNTY OF DURHAM

Chairman of General Committee	WILLIAM ROBINSON, Esq., J.P., M.D., F.R.C.S.
Secretary	FRED FORREST, Esq.
Office	54 JOHN STREET, SUNDERLAND.
Visiting Medical Superintendent at Stanhope and Wolsingham Sanatoria	GEOFFREY S. ROBINSON, Esq., M.B.
Medical Superintendent at Stanhope Sanatorium	JOHN O'HARA, Esq., M.B.
Medical Superintendent at Wolsingham Sanatorium	JAMES F. MCCONCHIE, Esq., M.B.

GATESHEAD TUBERCULOSIS CARE COMMITTEE

Chairman	Alderman S. A. E. ELLIS.
Joint Hon. Secretaries	ALFRED MORRIS, Esq., and WILLIAM ROBINSON, Esq.
Office	13 GLADSTONE TERRACE, GATESHEAD.

GRAYS AND DISTRICT TUBERCULOSIS CARE ASSOCIATION

Chairman	J. MATHIESON, Esq.
Vice-Chairman	H. S. KIRBY, Esq.
Treasurer	P. B. DAVY, Esq.
Hon. Secretary	R. C. GILBERT, Esq.
Office	QUARRY HILL, GRAYS, ESSEX.

GRIMSBY TUBERCULOSIS CARE COMMITTEE

Chairman	Councillor C. E. Franklin, J.P.
Treasurer	F. R. Stephenson, Esq.
Secretary	R. Tulloch, Esq.
Office	Health Department, 184 Victoria Street, Grimsby.

ILFORD TUBERCULOSIS CARE ASSOCIATION

Chairman	G. H. Biggs, Esq.
Secretary	L. M. Lamb, Esq.
Office	130 Cranbrook Road, Ilford.

COMMUNITY COUNCIL OF KENT

Chairman of Health Committee	Col. A. S. Barham, C.M.G.
Chairman of Case Sub-Committee	A. S. Ransome, Esq., M.B., D.P.H.
General Secretary	L. Shoeten Sack, Esq., Barrister-at-Law.
County Organiser, Tuberculosis Care Work	Miss E. M. Allatt.
Offices	1 Holmesdale Terrace, Folkestone. 38 Earl Street, Maidstone.

LEEDS TUBERCULOSIS CARE ASSOCIATION

General Secretary	F. R. Tufft, Esq., F.I.S.A.
Secretary of Case Committee	Miss F. B. Mackay.
Office	Hope Chambers, Vicar Lane, Leeds.

LEYTON TUBERCULOSIS CARE ASSOCIATION

Chairman	Miss D. Weston.
Vice-Chairman	Mrs. F. Railton.
Honorary Secretary and Treasurer	A. E. Thornton, Esq.
Office	180 High Road, Leyton, E.10

MIDDLESBROUGH VOLUNTARY CARE SCHEME

Chairman	The Mayor of Middlesbrough.
Treasurer	H. G. Denning, Esq.
Secretary	Jas. Wandless, Esq.
Office	79 Grange Road, Middlesbrough.

NATAL ANTI-TUBERCULOSIS ASSOCIATION

Honorary Secretary	Arthur C. Copley, Esq., F.R.C.S.
Office	45 Anstey's Buildings, West Street, Durban, South Africa.

NORTHAMPTONSHIRE AND DISTRICT BRANCH

Honorary Secretaries	W. M. Robson, Esq., M.D. C. H. Battle, Esq.
Honorary Treasurer	Percy H. Page, Esq.
Secretary	A. Clifford Towers, Esq., F.S.A.A.
Office	15 Guildhall Road, Northampton.
Medical Superintendent of Creaton Sanatorium	E. T. W. Starkie, Esq., M.R.C.S., L.R.C.P.
Visiting Orthopædic Surgeon	F. Wilson Stuart, Esq., M.D., F.R.C.S.

NOTTINGHAM AND NOTTINGHAMSHIRE ASSOCIATION FOR THE PREVENTION OF CONSUMPTION

Chairman of General Committee	Miss Evans.
Honorary Treasurer	F. Guy Wardle, Esq.
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Secretary	Miss C. l'Oste Probart.
Office	37 Goldsmith Street, Nottingham.

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Treasurer	R. H. Bowdler, Esq.
Secretary	Miss Price
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Honorary Treasurer	Alderman H. V. Kenyon, M.B.E., J.P., L.C.C.
Honorary Secretary	Miss Edith McGaw.
Tuberculosis Medical Officer	R. S. Walker, Esq., M.R.C.P.E., D.P.H.
Secretary	Miss Cicely Milner.
Dispensary	20 Talbot Road, W.2.

READING TUBERCULOSIS DISPENSARY CARE ASSOCIATION

Chairman of Executive Committee	Alderman Edith M. Sutton, J.P.
Honorary Treasurer	A. J. Wright, Esq.
Honorary Secretary	Miss Robson Smith.
Office	Tuberculosis Dispensary, 1 London Street, Reading.

ROMFORD TUBERCULOSIS CARE ASSOCIATION

Chairman	H. C. Woodcock, Esq., J.P.
Vice-Chairman	A. Rouse, Esq.
Honorary Treasurer	F. W. Jeffes, Esq.
Honorary Secretary	A. E. Thornton, Esq.
Office	Combined Treatment Centre, Oldchurch Hospital, Romford.

ROTHERHAM COUNTY BOROUGH TUBERCULOSIS CARE COMMITTEE

President	His Worship the Mayor (Councillor J. Ketton).
Chairman	Alderman F. Harper.
Honorary Treasurer	R. G. Nicholson, Esq.
Honorary Secretary	Chas. L. Des Forges, Esq.
Assistant Secretary	G. E. Westby, Esq.
Medical Officers	William Barr, Esq., M.D., D.P.H. and A. T. Doig, Esq., M.B., D.P.H.
Home Visitor	Miss A. E. Scruton.
Office	Town Hall, Rotherham.

THE ROYAL VICTORIA HOSPITAL TUBERCULOSIS TRUST

President	Sir Ralph Anstruther, Bt.
Honorary Secretaries	Messrs. Wallace & Guthrie, W.S.
Clerk and Treasurer	L. B. Bell, Esq., C.A.
Office	42 Castle Street, Edinburgh.

ASSOCIATION FOR THE PREVENTION OF CONSUMPTION IN THE COUNTY OF SALOP AND THE HUNDRED OF MAELOR

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Chairman of Sanatorium Committee –	LINDSAY E. BURY, Esq., C.B.E.
Chairman of Care Committee – –	E. B. MOSER, Esq.
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Secretaries – – – – –	Messrs. ASBURY, RIDDELL & CO., Accountants.
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Medical Superintendent of King Edward VII Memorial Sanatorium, Shirlett, near Much Wenlock – – – –	F. T. TURNER, Esq., M.C., M.R.C.S., L.R.C.P.

SOUTHEND TUBERCULOSIS CARE SUB-COMMITTEE
(Southend Civic Guild of Help)

Chairman of Committee – – –	G. D. ROSE, Esq.
Honorary Medical Adviser – – –	G. N. MEACHEN, Esq., M.D. (Tuberculosis Officer.)
Honorary Secretary – – – –	Miss A. DELF, B.A.
Office – – – – – –	13 CLARENCE ROAD, SOUTHEND-ON-SEA.

EAST SUSSEX RURAL COMMUNITY COUNCIL.

President – – – – – –	The Rt. Hon. THE VISCOUNT GAGE.
Chairman of Executive Committee – –	Admiral T. B. H. BEAMISH, C.B.
General Secretary – – – –	Major G. H. POWELL-EDWARDS, M.C.
Office – – – – – –	THE OLD BANK HOUSE, LEWES, SUSSEX.

WALTHAMSTOW ASSOCIATION OF TUBERCULOSIS CARE HELPERS (W.A.T.C.H.)

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Vice-Chairman – – – – –	W. E. PAYNE Esq.
Honorary Secretary and Treasurer –	A. E. THORNTON, Esq.
Office – – – – – –	TUBERCULOSIS DISPENSARY, HIGH STREET, WALTHAMSTOW, E.17.

WORCESTERSHIRE ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS

President – – – – – –	The VISCOUNT COBHAM, D.L.
Secretary – – – – – –	J. P. HOLDER, Esq.
Office – – – – – –	48 PARK AVENUE, WORCESTER.
Medical Superintendent of Worcestershire King Edward VII Memorial Sanatorium, Knightwick – – – – –	H. GORDON SMITH, Esq., M.B., D.P.H.

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