

## Trinidad and Tobago.

THE annual report of the Surgeon-General for the year ending March, 1911, contains reports of the different medical institutions in the colony—namely, the Colonial Hospitals, the Lunatic Asylum, the Leper Asylum, and the District and Yaws Hospitals.

### PUBLIC HEALTH.

The reports of the district medical officers show steady improvement in the health conditions of their districts. Educational efforts have been continued, and the diminished prevalence, more especially of the graver forms, of malaria indicates a more general and intelligent appreciation of the subject of prophylaxis and treatment. Many of the district medical officers direct special attention to the increasing prevalence of ankylostomiasis and the high infantile mortality. An ordinance has recently been introduced in the Legislature giving larger powers of control over the former disease, and a scheme for the provision of district nurse midwives in certain districts, submitted by the Medical Board, for dealing with the latter condition, is under the consideration of the Government. The death-rate in Port of Spain was 28.52.

In the different hospitals and asylums in the colony 13,649 patients were admitted during the year, and there were 17,677 out-patients.

### PLAGUE.

Twelve cases of plague were reported during the year; 9 cases proved fatal. A large number of rats and mice were destroyed, and out of 19,839 rats caught and bacteriologically examined 11 were found to be plague-infected.

### LEPER ASYLUM.

The number of cases of leprosy treated during the year was 338; of these, 31 were discharged and 34 died.

Regarding the presence of the bacillus of leprosy in these cases, out of 80 anaesthetic cases a positive result was only obtained in 9, while out of 105 tubercular cases the bacillus was found in all of them. These figures agree very closely with those of Professor Deycke. The Medical Superintendent of the Leper Asylum (Dr. F. A. de Verteuil) therefore says that it can be laid down as a general rule that the leprosy bacillus is invariably found in the nasal mucous membrane of all patients suffering from tubercular leprosy. The presence of the bacillus is of great practical importance. It affords a ready and valuable diagnosis in all doubtful cases; and it shows that nasal hygiene should be an essential part in the treatment of all leper patients, more especially when these patients are not thoroughly segregated and are living in contact with others. Regarding the treatment by nastin, improvement consists in previously anaesthetic cases becoming sensible—ulcers healing—the muscles of the forearm improve in tone, and the gait in some cases becomes more natural. In tubercular cases the tubercles assume a bronze or brown colour, get softer and smaller, and disappear. The patients feel stronger and their general health improves. Besides the nastin treatment, 9 patients were injected with 0.6 gram of salvarsan; slides taken from these patients showed, as a rule, bacteriolysis; in some of the cases it was very marked indeed; the degenerative process began from ten to fourteen days after the injection. As some of the patients also showed some clinical improvement, there is sufficient reason to give this drug a larger and more extensive trial. Radium has also been tried in 3 cases; Dr. de Verteuil says that it is difficult to formulate any very definite statement, but it seemed to him that radium had a marked influence on the leprotic manifestations. After a couple of applications in one of the cases there was a sensible change in the size of the nodulated infiltration. The application of radium may be of use in removing any disfiguring nodule or infiltration from the face. The 34 deaths reported were mostly due to diseases of the alimentary and respiratory systems.

Appended to the report are a large number of statistical tables showing the number of cases in the various institutions throughout the colony; these are of very little clinical value, and as they occupy about sixty pages of the report could be dispensed with.

## Gibraltar.

### PUBLIC HEALTH FOR 1910.

THE annual report of the medical officer of health for Gibraltar (Major Fowler, R.A.M.C.) has been issued.

### Statistics.

The population returns of the census taken in the latter end of 1910 form the basis for calculating the various rates connected with the vital statistics of the civil community of Gibraltar. The data connected with the military population are not included in the report. The returns show a total civil population of 18,134, in comparison with 18,351 at the end of 1909.

In 1910 there were 390 births, as against 436 in 1909, giving a birth-rate of 25.2 per 1,000. The total births are by far the lowest as yet recorded in the colony, and the birth-rate has only once been lower, in 1907.

The general death-rate works out at 18 per 1,000 living, as compared with 15.09 in 1909. There were 53 deaths amongst children under 1 year of age, equivalent to an infant mortality of 135 per 1,000 births.

### Zymotic Diseases.

Measles and scarlet fever were prevalent during the year, but both were of a mild type. Diphtheria prevailed to a slight extent, 13 cases being notified, while there were 14 cases of small-pox. There were 25 cases of enteric fever; there was no common factor which could be accused of giving rise to this disease. The disease nearly always appears during the hot months of July, August, and September.

### Pulmonary Tuberculosis.

There were 28 deaths from phthisis during 1910; the cases notified amounted to 66, as against 46 in the previous year. It is probable, judging by these figures, that there are at least 300 persons of the population affected with the disease. With reference to the treatment of phthisis, Major Fowler suggests the establishment of dispensaries for the treatment of patients in the early stage of the disease, as well as the erection of a sanatorium. A committee has been appointed to inquire into and report on the whole subject of consumption in Gibraltar.

### Sanitary Conditions.

The general sanitary condition of Gibraltar is satisfactory taking into consideration how closely aggregated the houses are to each other, and the fact that the large majority of the houses are of the tenement order. There are areas in certain districts which would greatly benefit the community at large by being demolished and opened out.

## Malta.

### ANNUAL REPORT FOR 1910-11.

### Vital Statistics.

THE annual report of the Public Health Department for 1910-11 states that the civil population enumerated on April 2nd was 211,473, to which should be added the military families, 1,922; in all, 213,395. The birth-rate was 36.12, as against 36.07 for the previous year. The average birth-rate for the past twelve years was 38.26. The death-rate for the year was 21.42—slightly under 1909-10, which was 22.57. The average rate for the past twelve years was 24.58.

The death-rate of children under one year per 1,000 was 242.46 in 1909-10, while that for 1910-11 was 236.93.

The report states that out of 69 cases of leucocytæmia during the year 66 occurred in children below 5 years of age.

### Zymotic Diseases.

The deaths from infectious diseases reported during the year numbered 269. There were 41 cases of small-pox; these were all due to imported cases. Diphtheria cases amounted to 63, with 12 fatal. Enteric fever accounted for 25 deaths out of a total of 95 cases. There were 297 cases of Mediterranean fever with 35 deaths, as against 463 cases and 53 deaths the previous year. The regulations

published in June, 1909, for preventing the spread of Mediterranean fever could not, so far, be carried out in their entirety; still the periodical inspection of goats and the destruction of infected animals and the precaution of boiling milk already show a beneficial result. During the year 13,272 goats were examined; 402 were found infected and destroyed. There were 224 cases of phthisis and 161 deaths—a decrease on the number of the previous year, 280 cases with 192 deaths.

Appended to the report is a short note by Dr. Critien on infantile leishmaniasis in Malta, in which he suggests the adoption of certain principles of prevention—namely, the destruction of all ownerless dogs, the keeping of dogs as clean and free from vermin as possible; babies not being allowed to crawl if there is a dog in the house; the isolation of infected children and the thorough disinfection of their clothing.

Malta has a favourable meteorological record, the mean temperature for the year being 63.8° F., the shade maximum temperature recorded during the year being 92.7° F., with a daily average of bright sunshine amounting to 8.2 hours. The rainfall is small, 18.978 in., which fell on seventy-five days.

## England and Wales.

[FROM OUR SPECIAL CORRESPONDENTS.]

### LONDON.

#### LONDON COUNTY COUNCIL.

##### *The Milk Supply.*

In a long report presented to the London County Council on April 2nd the Public Health Committee dealt with the conclusions of the Royal Commission appointed to inquire into the relations of human and animal tuberculosis and the existing powers of local authorities to prevent the sale of contaminated milk, declaring its opinion that further legislation was urgently required in order to safeguard effectively the milk supply of London. The general conclusions of the Royal Commission, the committee stated, as to the frequency with which infected milk found its way to the public made it apparent that it was the paramount duty of the Council to make further attempts to ensure a pure milk supply for London. In 1909 more than 10,000 deaths from tuberculosis (other than pulmonary tuberculosis) occurred in England and Wales in children under the age of 15. Of this number, 2,806 deaths which took place in children under the age of 5 were attributed to tuberculosis of the digestive system. Having regard to these facts, and putting aside the danger from diseases other than tuberculosis, which did undoubtedly from time to time infect an inadequately supervised milk supply, the committee felt that, although an impure milk supply was only one of various possible and probable sources of tuberculosis, nevertheless it was the duty of public authorities to try and remove any and every cause where possible, and that the eradication of tuberculosis in cattle must be regarded as a public health measure of considerable importance to man. The necessity for legislation to deal with dirty milk was generally appreciated. Examination of samples made for the Council by the Lister Institute showed that a large proportion afforded evidence of undesirable methods of production and handling. Samples of milk containing dung had not been uncommonly noted by the inspectors in the course of their routine work of collecting samples at railway stations. On more than one occasion also samples had been observed to be of a pinkish tint, due to the admixture of blood. Parliamentary action was necessary to arm local authorities with requisite and uniform powers. The powers of public authorities to deal with milk in London at present consisted of the following:

*The London County Council.*—Power to license cowhouses annually (Section 20 of the Public Health (London) Act, 1891). Power to secure proper conditions in cowsheds and dairies and the sanitary condition of milkshops. Power to forbid the use for human food of milk from a diseased cow, or one having tuberculous disease of the udder. (The Dairies, Cowsheds, and Milkshops Orders of 1885, 1886, and 1899; applicable also

throughout the country.) Power to seize and slaughter on payment of compensation any cow in a London cowshed suspected of tuberculosis of the udder. (Part V of the L.C.C. (General Powers) Act, 1904.) Power to take within and outside the county samples of milk coming into London; to examine suspected cows outside London, and to prohibit the sending of further supplies from an infected source. (Part IV of the L.C.C. (General Powers) Act, 1907.)

*The Metropolitan Borough Councils.*—Power of registration of dairymen, the enforcement of the various Dairies, etc., Orders; power to prohibit supplies from any infected dairy within the county, to prohibit a person suffering from an infectious disease from milking any animal, to seize any article unfit for human consumption, to refuse to register persons carrying on dairies in unsuitable premises; power of enforcement of sanitary regulations made by the County Council, and powers under the Sale of Food and Drugs Act.

*The Local Government Board.*—May make regulations relating to the importation of any article of food unfit for human consumption. The Board has issued regulations, which come into force in June, 1912, prohibiting the use of preservatives in milk and cream.

Since the London County Council Powers Act, 1907, had come into operation, the bacteriological examination of 7,896 samples of milk of country origin had been completed, 850 (10.8 per cent.) proving tuberculous, 44,307 cows at 1,622 farms without the county had been examined, and 574, or 1.3 per cent., of the animals proved to be affected with tuberculosis of the udder. It was to be remarked, therefore, that whereas 10.8 per cent. of the milk examined was found to be tuberculous, only 1.3 per cent. of the cows were traced as being tuberculous. The disparity in the percentages was largely accounted for by the fact that milk from various cows was blended in the same railway churn; but, nevertheless, it appeared that more tuberculous animals existed than could be traced under present conditions. The Council had power to prevent the sale, within the county, of milk from cows ascertained to be suffering from tuberculosis of the udder only. It was most desirable that this power should be extended to include all cows suffering from tuberculosis with emaciation, or giving tuberculous milk, and the Council had already urged this upon Parliament. Moreover, although the Council could exclude from London milk from a farm without the county, which on examination was proved to be tuberculous, it had no power to require the slaughter or prevent the removal of the animal giving such milk. Consequently, if the animal was moved, all trace of it might be lost, and its milk would be sold for human consumption until again detected. Further, the Council had no powers to deal with milk which, on examination, was deemed to be so filthy as to be unfit for human food.

The Public Health Committee recapitulated the attempts made by the Council to obtain from Parliament the extensions of its powers suggested above. Since 1907 proposals by the Council had been withdrawn or rejected in favour of a plan for dealing with the question on national lines. Pressure of other business, however, has led to the continual postponement of a Government measure. The Committee expressed its agreement with the principle of a settlement of the question on national lines. The proposals made by the Council were necessarily limited in extent, and general legislation was more desirable. To deal in an effective and uniform manner with the question as affecting the whole country, legislation was required in one consolidating Act. In the opinion of the Committee the following points, *inter alia*, appeared to require the consideration of Parliament:

1. To make it possible to deal with a cow suffering from any form of tuberculosis, and to prohibit the sale of its milk.
2. Further powers of supervision of buildings where cows are kept or milk exposed for sale.
3. Power to take samples in any place from the time the milk leaves the cow to the time it reaches the consumer.
4. Adequate penalties to deter from wilful breaches of the law.
5. The more complete supervision of the import trade with a view to providing that imported milk, equally with home-produced milk, shall be subject to proper control.

The Public Health Committee advised that a deputation should wait upon the President of the Local Government Board to urge the importance of effective general legislation with regard to the milk supply being speedily promoted. Failing such general legislation, however, the Government should be urged to assist the Council in its efforts to safeguard London's milk supply, notwithstanding the fact that general legislation would be more satisfactory. In the unfortunate event of the Council having