MALTA

REPORT

ON THE

HEALTH CONDITIONS OF THE MALTESE ISLANDS

AND ON THE WORK OF THE

MEDICAL AND HEALTH DEPARTMENT

FOR THE YEAR

1953.

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INDEX

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MEDICAL & HEALTH DEPARTMENT—MALTA.
Head Office, 15 Merchants Street, Valletta.

15 July, 1954.

Sir,

I have the honour to submit the annual report on the health conditions of the Islands of Malta and Gozo and on the work of the Medical & Health Department during the year 1953.

During the year under review the Islands enjoyed good health and the sanitary conditions remained on a high level. The normal tenor of life was not upset by epidemics or abnormal incidence of diseases. The approved principles of prevention, environmental control and preventive therapy were effectively applied for the protection of the population and for the promotion of national health. All machinery of diagnosis, confirmation and search for the source of possible infections were kept in motion for the purpose of maintaining a strong line of defence against disease. Sanitary officers did not relax their vigilance on circumstances affecting the health of the people; they kept a constant watch on home sanitation, food production, preventive measures and structural undertakings; they were liberal with guidance and advice and it is satisfactory to note that the public is assuming an ever increasing attitude of confidence towards officers of the Department. Formerly it was not unusual for these officers to have to use their power of persuasion and sometimes coercion in dealing with refractory elements but happily such occasions are becoming rare. Nowadays all classes of the population look with sympathy and appreciation on the work of sanitary officers and eagerly go to them with their problems and troubles. This is in part due to better education of the public, but mostly to a realisation of the utility and importance of the activities of health officers.

During the year a tendency which has been slowly developing since the last world war, has become more noticeable. It is the inclination shown by country people to move into towns. The rural population regard the town very often as the focus of everything desirable, so there is a considerable drift of people into towns with a consequent depletion of the agricultural areas. This flight from the land may have grave consequences as it affects the economic structure and the social pattern of the country, but from a health point of view it may also have serious repercussions. Some of our towns and suburbs have grown at a remarkable pace which has brought with it two very great difficulties in maintaining a reasonable sanitary level: provision of water supplies and maintenance of essential services. Any overcrowding therefore may be fraught with grave perils. In spite of the remarkable pace made in the construction of new houses and the reconstruction of damaged ones, the shortage of housing accommodation has remained an ever pressing problem especially in industrial and urban areas and the continuous shifting of the population into those areas with consequent conglomeration and overcrowding may touch off a chain of insanitary events leading to some epidemic outbreak or disaster.

The estimated mid-year population was 317,248 of whom 153,793 were males and 163,455 females. The total increase of the population over the previous year was 2,341. In spite of sustained efforts to encourage emigration the upward trend in the population has continued. It is true that of late a slackening in the increase rate has been observed, but the saturation point has been reached some time ago and possibly surpassed in terms of density of population, water supply, industrial employment and housing accommodation.

The Honourable,
Minister of Health & Social Services.

During the last three years a special effort has been made to encourage child emigration and a good number of youngsters left the Islands for Australia where they are being rapidly absorbed in the life of that country. Under proper safeguards and with care, sympathy and understanding child migration is beneficial to the children themselves and to the country of their birth. Maltese children have shown a remarkable power of adaptation and whilst maintaining their national traits, they readily develop into lawful and useful citizens. If child migration is continued for a long period it may well afford a solution to our overpopulation problem because it will eventually reduce the number of persons in the fertility period of their life with consequent reduction of the birth rate and a corresponding decrease in the population.

During the last 150 years the population of our Islands has more than trebled itself; from about 100,000 in 1814 it has now risen to 317,248. During this century and a half there were periods of large increments and they were invariably related to major events in the history of Europe. The Napoleonic wars, the Crimean war, the first and the second World wars stimulated trade and commerce, brought affluence and sent navies and armies to these Islands. Taking as an example, the last World war it will be noted that during the war years a record marriage rate of 19.6 was reached in 1943 followed next year 1944 by a record birth rate of 39.26. Since then both the marriage rate and the birth rate have been reduced; this year the former being 12.89 and the latter 28.29.

This year's marriage rate at 12.89 is higher than last year's which was 11.00 but there is no corresponding increase in the birth rate which on the contrary at 28.29 compares unfavourably with last year's rate of 29.30. The downward trend in the birth rate therefore continues and the increase in the population is mainly due to a lowering of the death rate which from 10.69 in 1952 was reduced to 8.98 this year. This death rate is the lowest ever reached in these Islands and compares very favourably with that recorded only ten years ago, in 1943, when it stood at 20.49. Indeed, during the last decade consistently with the general improvement in sanitary conditions and with the introduction of new health and social services, a steady decline in mortality rates both general and infantile has been noticed.

Once again it is with satisfaction that I report a further decrease in infantile mortality rate. The number of deaths of infants during 1953 was 582, that is 80 deaths less than in the previous year. The infantile mortality rate for the year under review is 64.82 which is a great improvement on that of 1952 which stood at 71.75. This steady reduction in our infantile mortality during the last few years has been one of the major achievements of the Department. From a rate that was deplorably high, it stood at 219 in 1943, our infantile mortality has been reduced to a level which is comparable with European standards. Our continued efforts to popularize health education together with better appreciation by mothers of the benefits of our child health service mainly account for these satisfactory results. In this respect a word of praise is due to the Child Health Officers and the Health Visitors who spare no pains in their endeavours to promote the health of babies brought under their care and attention.

In neonatal mortality we have had no spectacular results. Although a gradual decrease was noticeable during the last years, the reduction was not regularly maintained, as there were fluctuations. This year there was an increase in the neonatal mortality. The rate rose from 33.16 in 1952 to 34.30 in 1953. The increase principally resulted from a high rate in Gozo where the neonatal mortality rose from 28.63 in 1952 to 41.8 in 1953. Many factors account for neonatal mortality the most important being those of maternal origin.

Preferably every married woman should have a thorough examination, including evaluation of the pelvic organs and the bony structures of the pelvis. When she becomes pregnant such an examination becomes essential; it serves to detect abnormal conditions which may jeopardize pregnancy and it permits the early institution of corrective measures. More often than not however the physician first sees the woman after the second missed period and occasionally much later. Not infrequently prospective mothers, especially in the country, do not seek medical advice at all, but prefer to consult the local midwife. This is regrettable because a timely medical examination may avoid much painful suffering and complications. At the first visit an attempt should be made to assess the obstetric patient as a whole. This requires thorough history taking, complete physical examination, urine analysis, blood picture and type and Rh determination. By tactful questioning, sympathetic listening and

alert observation much useful information may be gathered and the emotional status as it affects the pregnancy can be determined. The benefits of such examination are provided by antenatal clinics the main purpose of which should be the total well-being of mothers and infants as distinct from the immediate task of reducing the incidence of morbidity and mortality.

Unfortunately no organized prenatal service is provided in Malta. Maternity care is in the hands of private physicians and District Medical Officers who often go out of their way to alleviate the lot of mothers. Expectant mothers are at liberty to call at the local dispensary for examination by the District Medical Officer and if they are considered to require special examination or treatment they are referred to the maternity department of the general hospital. There they come under the attention of the specialist who carries out all the investigations and examinations and advises or treats accordingly. Admittedly this system of prenatal care lacks streamlining but in the absence of a properly organised service it has been found useful and profitable to those mothers who avail themselves of its benefits.

This year saw the opening in Malta of a number of antenatal clinics established by a local branch of that philanthropic organisation the "Save the Children Fund". After some exploratory work the local branch was inaugurated on the 18th of May and it immediately opened eight clinics in the principal towns and villages. The clinics are under the direction of a doctor with special qualifications in maternity and gynaecology. He is assisted by a state registered nurse. The clinics are held once a week in the Government dispensaries, the local Health Visitors attend each session and give their help and assistance. These clinics have proved to be a success from the very beginning; their popularity has demonstrated the need for their existence and mothers are attending in ever increasing number, so much so that towards the end of the year the necessity of expanding was being seriously felt.

We have now in these Islands three voluntary bodies that are doing praiseworthy work for the promotion of good health. They are: "The Mothers and Infants Health Association (Pro Infantia)", "The Malta Memorial District Nursing Association" and the "Save the Children Fund". There are other associations or bodies looking after the welfare of the public or of their members but these three organisations have a much wider scope; they cater for all classes of the community and are more directly concerned with medical care and assistance.

The "Mothers & Infants Health Association" is the oldest of the three bodies. It was founded about thirty years ago on the initiative of one of my predecessors, the Hon. Dr. A. Critien. It found a fertile field for its activities and immediately undertook the hard work that lay ahead. In a few years the Association gained the confidence of mothers; it also earned the approval of the medical profession and enjoyed official support. Clinics were opened in towns and large villages and today these clinics have established themselves and are very popular with mothers.

"The Malta Memorial District Nursing Association" is a consequence of the Second World war and was founded on the initiative of a few friends of Malta who took it upon themselves to raise funds from various sources as a tribute to, and in admiration of, the brave stand made by our countrymen in the defence of Europe. District nursing was a new venture in Malta, but the scope for it was so obvious that the Association met with immediate success; it expanded its activities rapidly; this year saw the opening of a branch in Gozo. Today the Association enjoys a reputation for quick and efficient nursing and midwifery service and it commands universal admiration and respect.

The "Save the Children Fund" is an international organization sponsored by the United Nations. Its scope is expressed in the Declaration of the Rights of Child commonly known as the Declaration of Geneva of 1946 wherein it is asserted that "the welfare of children physically, mentally and spiritually must be the first concern of every nation." The Malta branch was opened with the blessing of the Archbishop and the encouragement of the Government. Needless to say it enjoys the support of the Department which realizes the necessity and importance of prenatal work which has been made the main object of the activities of the local branch of the "Fund".

As a result of the overall care and attention offered by the state and partly also due to the activities of the three voluntary bodies already mentioned, it affords satisfaction to record a reduction over the previous year in the number of deaths due to maternal and natal causes. There were only six deaths due to diseases of pregnancy,

childbirth and puerperium. This number does not offer cause for alarm considering the number of births during the year (8977 live and 188 still births). The mortality is lower than in the previous year when there were eight deaths. Also the number of deaths from ill-defined diseases peculiar to early infancy and immaturity, birth injuries, post natal asphyxia and atelectasis during this year were below those of the previous year being respectively 176(186) 37(43) and 87(88).

The incidence of Pulmonary Tuberculosis during the year amounted to 177 cases which is somewhat higher than in the previous year when there were 146 cases, but at the same time there was a marked decrease in the number of other forms of Tuberculosis, 54 against 88. There was however an all round increase in the mortality figures: 39 deaths occurred from Pulmonary Tuberculosis against 34 from the same cause last year. With the establishment of a special Tb. service action against the disease became more intensive and more unified whilst control became more comprehensive.

Thorough examination of all contacts and enlightened public opinion have resulted in the discovery of initial cases which otherwise would have passed unnoticed. These initial cases are most important because with modern means of treatment at our disposal, they stand a good chance of recovery or else they improve to such an extent as to become non-infectious and thus constitute no danger to the rest of the community.

We have no mass X-ray unit to tour the country, but almost the whole population is being gradually examined for some reason or other. All contacts, all migrants and their families, all teachers, nurses, policemen and other classes of employees are X-rayed. Private medical practitioners have at their disposal all the facilities for special tests, investigations and examinations and they may avail themselves of specialists' advice. Treatment in and out of hospitals as well as all supplies of drugs, medicines and appliances for Tb. patients and their contacts are free of charge. All these factors tend to swell the number of notifications and there is every reason to believe that the number of infected persons in the population has not increased. The increase in the number of cases simply means that fewer patients have remained undetected and untreated.

The decrease in the incidence of non-pulmonary tuberculosis follows the same trend noticed in England where the reduction in the incidence of non-respiratory forms has been even greater than that of pulmonary forms. The improvement in our case is accounted for by, amongst other things, the increasing use of pasteurized milk and by the modern methods of orthopaedic treatment.

The increase in the incidence of measles, 193 cases against 45 in the previous year, is chiefly due to the number of notifications in December which amounted to 50 heralding the epidemic which broke out in the succeeding year and which was not altogether unexpected. In Malta measles is practically always with us although at times it becomes epidemic. Epidemics of measles follow fairly regularly a three year cycle; they usually start in the winter months and persist during the cold damp months up to late Spring or early summer. The infectivity of measles is very marked and as the maximum infectivity is just prior to, and for a few hours after, the appearance of the rash there is little chance of alerting the parents and of avoiding contact infections. The cases of measles which came to our notice were of a mild nature none of them proving fatal. Indeed, generally speaking, measles in Malta is not a killing disease like in other countries; here the disease is often treated too lightly by certain mothers who speak of it as "only measles!". It is probably this attitude that contributes to the complications from the disease even when it is not fatal. Too much exposure of the sick child especially in the winter months tends to set up bronchitis or pneumonia and in fact an increase in the incidence of the latter disease was also registered during the year under review.

Typhoid fever has always received serious attention from the Department and vigorous reaction invariably followed any abnormal incidence. Epidemics of typhoid fever were once very common; the disease often decimated armies on the battlefields and proved disastrous in the civic affairs of communities. Within the last twenty years the morbidity and mortality rate has been appreciably reduced, but there has been no corresponding decrease in the virulence of the responsible microorganism. The decline in the incidence of the disease has resulted from an increased knowledge of its epidemiology and from a vigorous prosecution of control measures. With modern

means of treatment typhoid fever need not be given emphasis in clinical medicine but it must be given very serious consideration in preventive medicine since it remains a potential menace that must be kept under constant watch.

The number of notified cases of typhoid fever rose from 118 in 1952 to 132 in 1953. The increase was mainly due to two small outbreaks occurring in two families living in farming areas around Rabat. Both families lived in primitive farmsteads unprovided with any sanitary conveniences. Night soil water was disposed of haphazardly into the fields and there is no doubt that the infections were contracted from the original case through consumption of contaminated vegetables and fruit eaten in the raw state. In the first family 5 cases followed one another within a period of three weeks and in the second family 3 cases were notified similarly within a period of four weeks.

Most cases of typhoid fever occurred during September and October when the rainy season had set in and no doubt the heavy rains had flooded defective water tanks and unprotected springs. The presence of carriers probably accounted for a certain proportion of the incidence. The carrier is an important factor in the spread of the disease and if he is employed in any trade or occupation associated with the production of food or drink, he may be the cause of immense harm.

On the occasion of the great epidemic of typhoid fever in 1943 compulsory inoculation against the disease had produced a degree of immunity amongst our population. Unluckily the protection level was not maintained and nowadays a generation of citizens has grown up possessing no immunity at all. Hence it is to be expected that in the next few years the upward trend in the incidence of the disease will be maintained. To offset this the Department has now in operation a service for free immunization which is doing beneficial work in towns and villages but of all the free immunizations offered, that against typhoid fever is the least popular, perhaps, because of the reaction which it sometimes produces. It is hoped that with increased propaganda the public will come to realise that the protection offered by immunization is an ample reward for the little inconvenience suffered at the time of the inoculation.

So far the health of the people has been kept at a satisfactory high level. The general improvement in hygienic conditions has promoted a state of well being in the population as exemplified by an appreciable advance in social health and diminished incidence of excremental and water-borne diseases. Rural and domestic hygiene, expectation of life, nutrition, body development, capacity for work, health and vigour have on the whole been improved. This does not mean that we have reached the limits of our endeavours; there are so many advances that are still to be made in various spheres of public health but so far it may be safely asserted that the medical and health services provided by the State have justified their existence.

In Malta we have not a national health service equivalent to that obtaining in England but our medical and health service is run on a non-contributory basis for the benefit of the whole population. The guiding principle is that whatever a patient requires he will get it free if he is unable to pay for it. If he has the means he is required to make some contribution which is assessed on very liberal terms. The question of free hospitalization has been discussed in Parliament. It would do away with the means test which, however liberal, is always irksome and is looked upon with disfavour by exponents of the modern conception of social welfare.

Most of the field work in clinical medicine is performed by the District Medical Officers. They constitute our vanguard, in the fight against disease; they are ever ready to offer their help and assistance and to take administrative measures in their respective districts where each of them is the representative of the Chief Government Medical Officer. District Medical Officers are appointed in all towns and large villages and are whole-time officers with private practice. They attend free of charge to the needs of the poor patients of their districts and assist the Police in emergencies. Besides paying domiciliary visits, the District Medical Officer attends at the local Government dispensary during certain hours every day when they examine the patients, dispense drugs and medicine and supply surgical appliances to those patients who are unable to pay.

District Medical Officers, and in fact all general practitioners, are entitled to send their patients for specialists' examination, investigations and treatment in all Govern-

ment hospitals where, if found necessary, they are admitted as in-patients or they may be registered as out-patients and instructed to call for periodical check up.

In these Islands like in other countries, we have our own hospital problem which is becoming increasingly pressing year by year. It is due to the fact that the increased hospital-mindedness of the public has not been followed by a corresponding or relative expansion in the hospital service. It is true that good progress has been made but not to such an extent as to satisfy our present needs.

Our general hospital was planned in 1927 when a different outlook was prevailing on the scope and functions of a hospital. Our population was then 228,575; the majority of the people were reluctant to seek treatment in hospital; ancillary services were restricted and certain special departments. i.e. children, physiotherapy, blood transfusion etc. were non existent. Since then the population has increased by about 90,000, a transformation has occurred in the attitude of the public towards hospitals and in harmony with the advances made in medical science, special departments have been introduced in hospitals for the proper investigation and treatment of different conditions of sickness and disease. As a result hospital wards today are overcrowded, some patients being even temporarily accommodated in the corridors. All professional and lay staff are working without respite; the specialist departments can barely cope with the amount of work referred to them. This has created a problem with which we will have to deal in the very near future.

In May I was privileged to attend in London as a delegate of the Government, the Eighth Congress of the "International Hospital Federation". The theme of discussion was preventive medicine as a major function of the hospital and its implications. The following paragraph taken from a paper read by Professor H.W.C. Vines M.D. of London University expresses in an admirable way the modern conception of hospital and may serve to guide us in our future undertakings and endeavours:

"Turning to the institutional service, it is surely old-fashioned still to think of the hospital only as a place of disease whose sole duty is to attempt the cure of illnesses which so often come to it too late for effective treatment. Hospitals have been called the repair shops along the road of life, but they should have something more to offer than the functions of a garage. Every hospital should know its place and its role in a nation-wide master-plan for the control of disease: its work must be inspired by some definite aim or goal in view, for most hospitals have been working too long on a mechanical day-to-day programme of admission, treatment and discharge in partial or complete isolation."

Nowadays more and more emphasis is being made on the association of preventive medicine with the main functions of a hospital. By cultivating the preventive aspects in addition to the curative ones, medical science has altered the scope and functions of a hospital as regards both patients and the community. The responsibility of the hospital towards the community has increased and the commitments of the hospital administration towards the public have been extended. It is therefore reasonable to expect that the community will not fail in its obligations towards hospitals and towards those who serve in them.

The school population of these Islands is on the increase and this is quite as it should be. It means that there is progressive evolution in the attitude of the people towards education and a better appreciation of the facilities for public instruction offered by the State. The modern conception of a school is not merely that of a place for teaching but also a centre for the formation of character, for the cultivation of good habits and for the acquisition of a sense of values of the principles of life. A basic principle of life is personal health which should be cultivated and fostered from the early beginning; hence the necessity and the importance of a proper school medical service.

School medical service is a full time occupation. The School Medical Officer should be able to dedicate all his time to the children under his care so much so that the appointment is everywhere on a whole-time basis except in certain areas where in order to avoid the necessity of appointing part-time officers the Medical Officer of Health is entrusted with the medical attention of the local school children.

There are two School Medical Officers in Malta: in Gozo the Medical Officer of Health is also in charge of the school medical service of that Island. School Medical Officers are assisted by dental and other specialist officers and school nurses. They

have the duty to examine all entrants and leavers and the other children should be examined at least twice each year. In addition School Medical Officers advise parents of the existence of any defect in their children and suggest about treatment; they also keep under regular supervision children undergoing treatment and follow them up. All this entails laborious work which for obvious reasons cannot be totally carried out by the present number of School Medical Officers. It must be recorded that it is the expressed intention of the Government to appoint an additional School Medical Officer.

During this year very few laws and regulations were enacted touching the health of the Islands, but on the 24th of July two new Acts, Act No. X and Act No. XI, were published which did away with a system that had prevailed for over half a century in these Islands i.e. the system of compulsory segregation of lepers.

Leprosy is one of the oldest diseases known on the face of the earth. The prejudice against the disease is such as to sever the victims from the sympathy and the society of other men. Both the Bible and the Koran contain references to the repugnance with which the disease was looked upon in olden times. The extraordinary horror of leprosy haunted ancient and modern men and engendered that sense of leprophobia which has been the bane of the wretched victims of the disease throughout the span of the ages. Brutal suppressive measures against lepers are recorded in Egypt far back in the year 1250 B.C. and as recently as 1952 in China when inmates of a leprosarium in the hinterland were burnt to death. But apart from such excesses innumerable restrictive measures were issued from time to time against lepers. In every country they were subjected to restrictions, disabilities and vexations.

In Malta as in other countries special laws were enacted restraining the liberty of lepers and because of the position of these Islands in the central Mediterranean highways, special measures had to be taken against lepers whether local, or foreigners arriving with soldiers, merchants, pilgrims or adventurers from the Near East where the disease has ever been endemic. As far back as the year 1659 leprosy must have been a burning question because on the 29th of October of that year a commission was appointed to provide for the care of leper patients*. On the 30th December 1704 regulations were issued by the Chief Medical Officer of that time warning barbers against the dangers of accepting leper clients in their shops. In 1900 all known male lepers were segregated and female patients were similarly segregated in 1912.

Since 1874 when Hansen discovered that the causative agent of leprosy was a fungus-like microbe, a new conception has arisen about the disease, the extraordinary horror of leprosy is gradually giving way to saner methods of prevention. Modern leprologists have done much to allay public fear. Contrary to erroneous belief leprosy is among the least contagious of infectious diseases. In fact under ordinary conditions its contraction is only a remote possibility. The disease is almost invariably but by no means inevitably, a result of prolonged and intimate association with a lepromatous leper. Tuberculoid leprosy is rarely, if ever, communicable.

In view of the modern knowledge on leprosy countries have revised laws against lepers. The present trend in dealing with leper patients does not seem to favour compulsory segregation; this method is becoming obsolete; it has its utility as a check on the spread of disease but it has also many drawbacks social, ethical and administrative and it certainly does not seem to agree with the modern outlook of thought and life. It has been ascertained that the ancient system of compulsory segregation may do more harm than good in causing the early cases to be hidden for fear of life-long imprisonment, until it is too late for the effective treatment and they have already infected members of the household. With the modern drugs and modern methods of treatment the course of the disease may be favourably altered especially if patients seek medical advice early.

Forcible segregation has been tried in many countries but it has given poor results. In the Philippines it had been adopted at a great expenditure of money but it has not proved capable of controlling leprosy and now the law is being reviewed and amended. In England the Public Health (Leprosy) Regulations came into operation on the 22nd of June 1952; they make no provision for compulsory segregation. In the light

* Commissione perchè provedesse ai poveri affetti dal terribile morbo della lebbra — Liber Concilium Vol 121 Fol 53 — Royal Malta Library.

of what is happening elsewhere and in conformity with informed opinion in advanced countries you have now decided to treat leprosy as one of the other infectious diseases and to suppress a measure which was fast becoming outmoded, outdated and unpopular. For this purpose you were instrumental in introducing and piloting the necessary legal enactments in the House.

On the 1st October of this year the senior Pathologist after a long course of specialization in England assumed duties at St. Luke's Hospital and thus a long felt want has been filled. It is nowadays recognised that pathology constitutes one of the fundamental departments in a general hospital and more so in a teaching hospital like our St. Luke's. Pathology is complementary to other branches of medical science in that it provides the means of research, experimentation, examination and confirmation which are essential requisites for correct diagnosis and treatment. It is our intention to expand the department of pathology to comprise the four main branches of haematology, morbid anatomy, biochemistry and of course pathology; this expansion will be facilitated when the department of pathology is removed to new premises in the outpatient block of St. Luke's now under construction.

A welcome visitor to this Department was Dr. J.C.R. Buchanan C.M.G., F.R.C.P., Principal Medical Officer in the Colonial Office, who arrived in Malta on the 15th December. Dr. Buchanan stayed in our Island for five days during which he found time to visit several medical establishments and was very helpful with his advice and suggestions. He had occasion to meet most of the Senior Officers at Head Office and also members of the Senior Visiting Staff in various hospitals with whom he discussed questions of local interest and character.

Relations between the Department and medical authorities of Her Majesty's Forces were as usual frank and cordial. On various occasion we met together in an atmosphere of mutual confidence and discussed matters of general interest. There is close liaison between civilian and Service medical authorities; we work in harmony and we are ever ready to cooperate with each other and assist with the resources at our disposal for our mutual benefit. A regular feature in our contacts has been the bi-monthly meetings of the Rodent Control Committee where topical questions relating to public health are discussed and suggestions are made for coordinating sanitary activities and health measures.

Our grateful thanks are due to His Excellency the Governor and Lady Creasy, His Grace the Archbishop and the Honourable the Prime Minister and members of his Cabinet for the interest they have taken in the affairs of the Department in general and in the welfare of hospital patients in particular. Their concern, their attention and their visits to our hospitals have been a source of inspiration to the staff and of comfort to the patients.

We are also thankful for the many acts of benevolence and other considerations of kindness by various public-spirited ladies and gentlemen who contributed presents and assisted in many ways to cheer the stay of patients in hospitals. We appreciate their presents and their assistance but more than anything else we feel grateful for their encouragement and inspiration. It is impossible to mention by name all the generous persons who contributed towards making life cheerful in hospitals but I feel in duty bound to single out the Ladies Hospital Visiting Committee who spared no pains to improve the lot of patients, Lady Mountbatten of Burma whose innate affability and understanding has charmed all patients on the occasion of her many visits to our hospitals, and Mrs. Trafford Smith who very generously made it a point to visit our hospitals soon after her arrival in Malta with her husband the Lieutenant-Governor; she evinced a great interest in the affairs of hospitals and a remarkable sympathy towards patients. We are also indebted for the help, assistance and advice received from the members of the various Boards and Committees attached to the Department. Most of the members have undertaken in earnest the business of the boards and attended with regularity the meetings, sometimes at a great inconvenience and sacrifice of their private occupations. Our thanks are likewise due to other Government Departments for their cooperation and especially to the Public Relations Office for the prompt response when we required their assistance. The Rediffusion Company and the Press deserve all our praise in that we found them ever willing to offer their services for broadcasting or publicising material of public health importance. The Venerable Order of St. John sent various contributions for the comfort of patients in our hospitals thus maintaining its traditions and ideals of humanitarian work.

Finally I cannot end in a better manner than by expressing my appreciation of, and thanks for, the help at all times so willingly contributed by each and every member of my staff. Their efficiency and devotion to duty, their understanding of the needs of their various branches and institutions is greatly valued. This has again resulted in an achievement of a high order one which, but for that loyalty, could not have been so successfully undertaken.

I have the honour to be,

Sir,

Your obedient servant,

J. GALEA,

Chief Government Medical Officer.

I. SUMMARY OF VITAL STATISTICS FOR 1953

		Malta	Gozo	Both Islands
AREA	Square miles	94·870	26·974	121·844
POPULATION as estimated on 30th June, 1953 ...	Males	140,318	13,475	153,793
	Females	148,669	14,786	163,455
	Total	288,987	28,261	317,248
	Density per sq. mile ...	3,046	1,048	2,604
MARRIAGES	Number	1,897	148	2,045
	Rate per 1000 population...	13.13	10.47	12.89
BIRTHS — Live ...	Males	4,316	345	4,661
	Females	3,986	330	4,316
	Total	8,302	675	8,977
	Rate per 1000 population...	28·72	23·88	28.29
Still ...	Number	165	23	188
	Rate per 100 total births ...	1·95	3·30	2.05
DEATHS	Males	1,333	134	1,467
	Females	1,231	150	1,381
	Total	2,564	284	2,848
	Rate per 1000 population...	8.87	10·05	8·98
Maternal	Number	4	2	6
	Rate per 1000 births (live and still) ...	·47	2·86	0·65
Infant (under 1 year) ...	Males	294	39	333
	Females	234	15	249
	Total	528	54	582
	Rate per 1000 births ...	63·58	80·00	64·82
Child (1 year to 5 years) ...	Males	20	3	23
	Females	18	2	20
	Total	38	5	43
	Rate p. 1000 of same group	1·15	1·70	1·20
(5 years and over) ...	Males	1,019	92	1,111
	Females	979	133	1,112
	Total	1,998	225	2,223
	Rate p. 1000 of same group	8·05	9·11	8·14
From tuberculosis of respiratory system	Males	26	1	27
	Females	9	3	12
	Total	35	4	39
	Rate per 1000 population...	0·12	0·14	0·12
From other forms of tuberculosis ...	Males	7	–	7
	Females	7	–	7
	Total	14	–	14
	Rate per 1000 population...	0·05	–	0·04
From respiratory diseases... ...	Males	82	4	86
	Females	69	4	73
	Total	151	8	159
	Rate per 1000 population...	0·52	0·28	0·50
From malignant neoplasms ...	Males	138	12	150
	Females	107	12	119
	Total	245	24	269
	Rate per 1000 population...	0·84	0·85	0·84

Population. The mid-year civil population for 1953 has been estimated at 317,248 as against 314,907 in 1952.

The excess of births over deaths was 6,129 which is 268 more than in the previous year. The rate of natural increase was 19.32 per thousand as against 18.61 in 1952 and 19.28 in 1951.

Births. The number of live births during the year was 8,977 which is 249 births less than that of last year. Of these, 8,302 occurred in Malta and 675 in Gozo, and of which 4,661 were males and 4,316 females. The birth-rate was once again lower than in the preceding year, namely 28.29 against 29.30 in 1952 and 30.38 in 1951. The downward trend in the birth-rate has continued since 1945.

Still-Births. The number of still-births registered during the year was 188 (165 in Malta and 23 in Gozo) with a rate of 2.05 per hundred total (live and still) births. During 1952 there were 221 still-births which gave a rate of 2.34; this shows a decrease of 12 still-births in Malta and an increase of 2 in the figures for Gozo.

Deaths. There were 2,848 deaths, registered during the year, 517 less than last year. Of these 2,564 occurred in Malta and 284 in Gozo. The death-rate per thousand population was 8.98 as compared with 10.69 in 1952 and 11.10 in 1951.

Table I shows the number of deaths from the principal causes of death.

TABLE I.

Deaths from Principal Causes.

Year	Infective and Parasitic Diseases	Malignant Neoplasms	Diabetes Mellitus	Diseases of the Blood and Blood-forming Organs	Cerebral Haemorrhage etc.	Arteriosclerotic and Degenerative Heart Disease	Diseases of Arteries (Arteriosclerosis)	Bronchitis	Pneumonia (all forms)	Gastro-Enteritis and Colitis (under 2 years)	Gastro-Enteritis and Colitis (2 years and over)	Acute Nephritis	Chronic Nephritis	Diseases of Pregnancy, Childbirth and the Puerperium	Congenital Malformations	Ill-defined Diseases Peculiar to Early Infancy and Immaturity Unqualified	Birth Injuries	Post-natal Asphyxia and Atelectasis	Senility
1944	277	190	43	23	264	604	32	117	95	484	38	35	204	18	28	407	8	123	181
1945	311	211	99	20	289	551	59	128	106	798	20	23	130	22	47	508	40	98	175
1946	548	233	88	18	306	487	43	124	156	599	17	21	119	25	45	461	16	159	169
1947	383	227	75	26	290	556	38	112	183	567	10	29	115	20	66	419	38	121	172
1948	302	216	71	26	307	603	43	104	111	497	23	25	117	15	68	392	50	90	218
1949	188	232	78	20	357	619	29	84	101	267	7	13	130	15	64	299	47	106	250
1950	183	263	72	16	332	545	36	91	113	265	8	16	91	15	70	268	35	133	225
1951	161	248	83	24	315	649	35	101	99	340	12	5	92	7	43	299	35	114	272
1952	101	297	103	8	389	739	52	84	96	178	6	12	73	8	38	186	43	88	197
1953	96	269	87	9	355	604	56	44	68	144	6	12	57	6	39	176	37	87	161

The proportion per 1,000 deaths was as shown in the following figures :—

Arteriosclerotic and degenerative heart disease	212
Cerebral haemorrhage	125
Malignant neoplasms	94
Ill-defined diseases peculiar to early infancy and immaturity unqualified (congenital debility, marasmus and immaturity)	56
Senility	61
Gastro-enteritis and colitis under 2 years	51
Infective and parasitic diseases	34
Diabetes mellitus	31
Post-natal asphyxia and atelectasis	24
Pneumonia (all forms)	31
Chronic nephritis	15
Diseases of arteries (arteriosclerosis)	20
Bronchitis	20
Congenital malformations	13
Birth injuries	14
Acute nephritis	4
Diseases of the blood and blood-forming organs	3
Diseases of pregnancy, childbirth and the puerperium ...	2
Gastro-enteritis and colitis (2 years and over)	2
Other causes	188
	1,000

Infant Mortality. The nmber of deaths among infants during the year was 582, that is 80 deaths less than in the previous year. The infant mortality rate per 1,000 live births was 64.82, which is the lowest on record.

The neo-natal mortality (deaths of infants under 1 month of age) was 308 which is 2 more than in the previous year. The neo-natal mortality rate per 1,000 live births was 34.30 as compared with 33.16 in 1952 and 37.32 in 1951.

Marriages. The number of marriages during the year, including marriages among service personnel, was 2,045, of which 1,897 took place in Malta and 148 in Gozo. The marriage rate, which is expressed as the number of persons married per thousand of the population, was 12.89. This shows an increase on the marriage rates of 1952 and 1951 which were 11.00 and 12.18 respectively.

Table II shows the comparative data for the last twenty years.

TABLE II

Comparative Birth, Death and Marriage Rates
Malta and Gozo.

Year	Births				Death-Rate		Marriage-Rate per 1,000 population	Natural increase
	Live	Rate per 1,000 population	Still	Rate per 100 total births	Infant Mortality-Rate	Total Death-Rate		
1934	8,544	33·48	240	2·7	277·03	22 34	13·2	2,842
1935	8,701	33·96	282	3·1	285·71	23·49	12·4	2,683
1936	8,875	33·85	304	3·3	190·30	17·61	14·4	4,258
1937	8,879	33·54	345	3·8	242·70	20·04	13·6	3,575
1938	8,704	32·39	294	3·3	224·83	20·09	13·2	3,305
1939	8,930	33·08	309	3·3	226·98	19·95	14·6	3,545
1940	8,808	32·53	261	2·8	276·45	22·69	13·4	2,664
1941	7,352	27·09	240	3·1	303·45	23·74	16·7	908
1942	6,768	25·15	227	3·3	345·15	31·97	15·0	1,835†
1943	8,452	31·06	293	3·3	210·00	20·49	19·6	2,874
1944	10,963	39·26	334	2·9	116·30	13·25	19 5	7,263
1945	10,998	38·37	317	2·8	144·03	14·01	16·2	6,982
1946	11,304	38·29	298	2·5	130·75	13·72	14·4	7,254
1947	11,612	38·20	304	2·5	120·30	12·62	12·01	7,774
1948	11,029	36·04	262	2·3	112·97	12·21	12·80	7,292
1949	10,590	34·05	251	2·3	83·76	10 69	11 61	7 264
1950	10,281	32·95	280	2·6	88·51	10·33	11·20	7,057
1951	9,511	30·38	205	2·2	99·78	11·10	12 18	6,035
1952	9,226	29·30	221	2·3	71·75	10·69	1·00	5,861
1953	8,977	28.29	188	2·0	64·82	8·98	12·89	6,129

† Decrease

II. INFECTIOUS AND COMMUNICABLE DISEASES

The following infectious diseases are notifiable, namely:— Plague, smallpox, cholera, diphtheria and membranous croup, typhus fever, yellow fever, epidemic cerebro-spinal meningitis, scarlatina or scarlet fever, typhoid or enteric fever, malarial fever, undulant fever, puerperal fever, measles, erysipelas, varicella, influenza, whooping-cough, hydrophobia, leprosy, pulmonary and all other forms of tuberculosis, pneumonia, broncho-pneumonia, acute anterior poliomyelitis, encephalitis lethargica, dengue fever, granular conjunctivitis or trachoma, tetanus neonatorum and leishmaniasis.

The total deaths attributed to these diseases during the year were 140 as against 178 in 1952. Calculated as rate per 1,000 population the comparable figures are 0.4 in 1953, 0.6 in 1952 and 0.6 in 1951. The largest percentage of deaths among this group is represented by broncho-pneumonia (37.8) followed by pulmonary tuberculosis (27.8), pneumonia (10.0), other forms of tuberculosis (10.0) and diphtheria (4.3).

No cases of major infectious diseases, namely plague, cholera, yellow-fever, smallpox, epidemic typhus, nor any cases of malaria (indigenous), hydrophobia (rabies in animals), encephalitis lethargica and dengue fever occurred during the year.

The cases of, and deaths from, the notifiable diseases are shown in Table III while incidence by district is shown in Table IV, the monthly incidence in Table V and the age and sex distribution in Table VI.

TABLE III.

Cases of and Deaths from Notifiable Diseases

Year	1 Pulmonary tuberculosis		2/5 Other forms of tuberculosis		12 Typhoid fever		15 Undulant fever		17 Scarlet fever		19 Erysipelas		21 Diphtheria		22 Whooping-cough		23 Cerebro-spinal fever		24 Plague		26B Tetanus neonatorum (b)	
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
1944	281	146	...	a) ...	361	15	173	8	275	...	125	3	62	2	712	2	7	1	...	...	...	...
1945	295	134	...	a) ...	240	23	1024	26	25	...	100	1	104	13	20	...	8	3	75	20	...	...
1946	273	133	...	a) ...	174	12	2410	39	15	...	83	4	241	22	12	...	3	1	5	2	1	13
1947	220	161	...	a) ...	102	12	1390	33	28	1	75	1	546	37	1411	28	6	...	...	...	12	7
1948	202	104	...	a) ...	54	4	1039	15	46	...	51	2	249	12	1398	65	6	4	...	...	6	5
1949	228	97	...	a) ...	121	3	902	8	164	...	46	...	119	5	24	1	7	3	...	...	1	...
1950	208	82	...	a) ...	106	4	831	6	1050	2	35	...	33	5	509	5	9	5	...	...	3	2
1951	171	68	.	a) ...	180	4	613	6	40	...	43	...	29	1	694	10	4	1	...	...	3	3
1952	146	34	88	12	118	6	550	4	42	...	38	...	208	11	1141	8	8	1	...	...	1	1
1953	177	39	54	14	132	1	425	3	25	...	35	2	140	6	207	1	7	2	...	...	2	2

Year	28 Acute anterior poliomyelitis		31 Smallpox		32 Measles		36B Murine Typhus		43H Chicken-pox		43L Leishmaniasis (b)		88 Influenza		89 Pneumonia		90 Broncho-pneumonia		115 Puerperal fever		43J Trachoma
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.
1944	..	...	...	...	30	...	65	3	219	...	...	...	195	...	107	17	223	78	103	5	132
1945	37	...	...	...	20	...	134	5	174	...	...	...	70	...	91	24	204	82	47	2	226
1946	46	...	5	1	21,168	240	35	4	168	...	37	15	132	1	141	22	311	134	48	4	139
1947	59	2	...	...	2,422	14	28	2	312	...	194	12	39	...	103	28	228	155	48	4	283
1948	11	...	...	...	39	...	17	2	323	...	208	9	250	9	64	26	223	85	30	1	334
1949	1	...	...	...	80	...	21	2	308	...	98	3	84	5	62	13	146	88	39	...	224
1950	154	8	...	...	249	2	57	...	765	...	67	1	26	5	50	18	122	61	25	2	(c)41
1951	43	...	...	...	4,486	17	43	1	284	...	58	3	283	1	81	14	184	61	18	...	(c)55
1952	37	1	...	...	45	...	20	1	485	...	55	...	266	3	69	17	138	79	17	...	(c)51
1953	26	1	...	...	193	...	9	...	356	...	63	1	46	1	86	14	118	53	16	...	(c)59

(a) Not available;
(b) Declared notifiable October 1946;
(c) This figure does not include the cases found during the intensive anti-trachoma campaign in Gozo. For further details vide 'Trachoma'.

TABLE IV

Notifiable Infectious Diseases by Locality in Malta, 1953

Locality	Pulmonary Tuberc.		Other Forms of T. B.		Typhoid Fever		Undulant Fever		Scarlet Fever		Erysipelas		Diphtheria		Whooping Cough		Cerebro-spinal Fever		Tetanus Neonatorum		Poliomyelitis		Measles		Murine Typhus		Chicken pox		Leishmaniasis		Influenza		Pneumonia		Broncho-pneumonia		Puerperal Fever		Trachoma
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.
Attard	1	2	..	...	4	...	2	...	...	...	...	...	...	...	4	..	...	...	...	...	...	...	...	...	...	...	3	...	...	...	1	..	4	...	...	...	...	...	...
Balzan	2	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	2	...	...	...	2	...	...	...	4	...	3	...	4	...	...	...	...
Birkirkara	10	2	6	2	8	...	2	...	4	...	3	...	4	...	12	...	...	...	...	...	...	...	5	...	1	...	6	...	4	...	...	...	3	...	4	2	...	...	6
Birżebbuġa	1	1	1	...	5	...	8	...	...	...	...	...	6	...	1	...	1	...	...	...	1	...	1	...	...	...	2	...	...	...	...	...	3	..	...	...	...	...	1
Cospicua	3	..	...	1	1	...	10	...	2	...	...	...	2	...	3	...	...	...	...	...	2	...	1	...	...	...	7	...	1	...	...	...	3	1	...	...	1	...	3
Dingli	...	...	.	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	2	...	...
Floriana	2	...	...	...	4	...	1	...	3	...	2	1	...	...	3	...	...	...	...	...	1	...	1	..	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...
Għargħur	...	...	1	...	...	...	3	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...
Għaxaq	1	1	1	..	...	...	11	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gudja	1	1	...	...	...	...	9	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	..	...	1	...	...	...	...
Gżira	5	3	2	..	1	...	1	...	1	..	1	.	...	...	21	...	...	...	...	...	...	...	5	...	...	...	14	...	...	...	2	...	1	..	2	2	...	..	1
Hamrun	14	3	6	2	6	...	17	...	...	...	....	...	8	1	11	...	...	...	...	...	...	...	8	...	...	...	19	...	2	1	...	...	2	...	5	4	1	...	6
Kalkara	2	...	1	1	...	.	..	...	1	..	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	2	...	1	...	...	...	2	1	1	1	...	...	...
Kirkop	1	...	..	.	...	...	2	...	.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lija	4	1	1	...	...	..	5	...	...	...	...	...	1	..	1	...	...	...	...	...	...	...	4	...	...	...	1	...	...	...	2	...	...	...	2	1	...	...	...
Luqa	2	...	1	...	1	...	7	...	...	...	...	..	3	...	5	...	...	...	...	...	2	...	1	..	...	...	4	...	...	...	...	...	3	...	2	2	...	...	...
Marsa	9	2	2	...	8	...	15	...	...	...	...	..	9	...	6	...	...	...	...	...	1	...	19	...	1	...	14	...	2	...	...	...	8	...	6	6	1	..	2
Marsaskala	...	...	...	...	...	...	1	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	15	...	...	...	6	...	1	...	...	...	...	...	..	...	...	...	...
Marsaxlokk	1	..	1	...	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mdina	...	...	...	...	...	...	...	..	...	...	..	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...
Mellieħa	...	...	...	...	1	...	20	.	..	...	.	...	3	1	2	1	...	...	...	...	...	...	...	...	...	...	3	...	1	...	1	...	...	...	1	1	1	...	...
Mġarr & Żebbiegħ ...	...	...	.	...	...	...	1	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	2	...	2	1	...	1	...	...	...
Mosta	2	..	...	1	1	...	8	1	1	..	...	...	...	...	1	...	...	...	...	...	2	...	1	..	...	...	9	...	...	...	7	...	1	..	...	1	...	...	...
Mqabba	...	...	...	...	...	...	2	...	.	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	...	...	...	4	...	...	1	...	...	...
Msida	6	3	.	.	...	...	1	...	3	...	3	...	2	...	9	...	...	...	...	...	...	...	12	...	...	...	16	...	2	...	1	...	3	...	5	3	...	...	...
Naxxar		...	...	...	...	...	8	...	...	...	1	...	2	...	.	...	...	...	...	...	...	...	1	...	...	...	...	...	...	..	...	..	5	...	3	1	...	...	...
Pawla	8	2	4	1	8	..	7	..	...	...	...	...	1	...	23	...	...	...	...	...	3	1	11	...	...	...	54	...	...	...	...	...	5	1	4	3	1	...	2
Pietà	3	1	2	..	...	...	3	...	1	..	..	...	...	...	4	...	...	...	...	...	...	...	3	..	1	...	1	..	...	...	...	...	...	...	1	...	...	...	...
Qormi	14	1	4	1	17	...	67	..	..	...	1	...	1	...	3	...	...	...	...	...	...	...	3	...	...	...	3	...	4	...	1	...	4	5	15	5	...	...	3
Qrendi	...	...	...	...	1	...	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rabat	2	...	3	2	13	1	13	...	..	...	2	.	5	...	18	.	...	...	...	...	3	...	1	...	...	...	18	...	3	...	2	...	5	...	5	...	...	...	2
Safi	...	...	...	...	...	...	1	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
St. Julian's	1	...	1	1	...	...	1	...	...	...	...	..	1	1	8	...	1	...	...	...	...	...	10	...	...	...	9	.	...	...	...	...	..	...	4	...	...	...	...
St. Paul's Bay ...	1	...	...	...	...	...	3	...	...	...	...	...	1	...	...	.	...	...	...	...	1	...	1	...	...	...	2	.	3	...	...	..	2	...	...	...	...	...	1
St Venera	...	...	...	1	2	...	1	...	1	..	...	...	3	...	1	...	...	...	...	...	...	...	25	...	...	...	5	...	1	...	1	...	...	...	3	...	...	...	...
Senglea	1	...	...	...	...	...	...	...	1	.	1	.	..	...	5	...	...	...	...	...	1	...	2	...	...	...	20	..	...	...	2	...	...	...	1	...	...	...	...
Siġġiewi	2	...	3	...	2	...	31	..	...	..	3	.	4	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	2	...	...	...	...	...	3	2	...	...	...
Sliema	15	1	...	...	5	...	...	...	2	...	3	1	7	...	9	...	1	...	...	...	...	...	21	...	...	...	62	...	1	...	11	1	5	2	4	3	1	...	10
Tarxien	8	1	2	...	7	.	10	...	..	..	2	.	..	...	4	...	...	...	...	...	1	...	3	...	...	...	15	...	2	...	...	...	...	...	1	...	...	...	...
Valletta	20	6	4	1	3	...	2	...	1	...	1	...	3	...	4	...	1	...	...	...	1	...	1	...	...	...	3	...	2	...	1	...	3	1	6	2	1	...	5
Vittoriosa	4	..	1	...	5	...	...	...	...	...	1	...	9	...	...	...	...	...	...	...	1	...	5	...	...	...	2	...	...	...	...	...	...	1	...	...	1	...	...
Żabbar	8	3	1	...	13	..	14	...	1	.	3	.	12	...	3	.	...	...	...	...	...	...	2	...	1	...	21	...	6	...	...	...	4	...	11	5	1	..	1
Żebbuġ	4	...	...	...	3	..	5	...	...	...	3	...	11	1	4	...	...	...	...	...	1	...	2	...	2	...	2	...	3	...	9	...	1	...	5	1	2	...	...
Żejtun	8	1	4	...	4		37	...	...	...	1	...	2	1	4	...	1	1	...	...	1	..	...	...	2	...	2	...	3	...	...	...	3	1	5	...	...	...	3
Żurrieq	3	...	1	...	3	...	20	.	1	...	1	...	8	...	1	...	...	...	...	...	...	...	2	...	...	...	3	...	6	...	...	...	2	...	5	2	1	...	...
Total Malta ...	169	35	53	14	127	1	352	1	23	...	32	2	118	5	174	1	5	1	...	...	24	1	171	...	9	...	336	.	55	1	45	1	85	14	109	51	14	...	46

TABLE IV (cont.)

Notifiable Infectious Diseases by Locality, 1953

Locality	Pulmonary Tuberc.		Other Forms of T. B.		Typhoid Fever		Undulant Fever		Scarlet Fever		Erysipelas		Diphtheria		Whooping Cough		Cerebrospinal Fever		Tetanus Neonatorum		Poliomyelitis		Measles		Typhus Murine		Chicken pox		Leishmaniasis		Influenza		Pneumonia		Bronchopneumonia		Puerperal Fever		Trachoma
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.
Kemmuna	...	..	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Għajnsielem	...	...	...	...	...	...	7	...	...	...	...	...	4	1	7	...	1	1	1	1	1	...	5	..	...	...	...	...	1	..	...	...	...	...	2	...	...	..	4
Għarb	...	...	...	...	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Għasri	...	...	...	...	...	...	...	...	...	...	..	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kerċem	...	...	...	.	...	...	8	...	...	...	...	...	1	...	...	...	1	.	...	...	...	...	...	...	...	...	3	...	..	...	...	...	...	...	...	..	...
Marsalforn ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mġarr	...	...	.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Munxar	...	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Nadur	2	...	..	...	1	...	14	1	...	...	...	...	9	...	5	...	...	...	...	...	...	...	5	...	...	...	2	...	...	...	...	...	...	...	...	...	...	1
Qala	1	1	...	...	3	...	7	1	...	...	...	..	...	...	...	...	...	...	...	...	1	..	8	...	...	.	1	...	...	...	...	...	1	...	...	...	...	2
San Lawrenz	...	...	1	...	...	...	...	...	...	...	...	...	...	...	2	.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Sannat	.	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	.	...	..	...	...	2	...	..	...	...	...	...	...	1
St. Lucia	...	...	...	...		...	3	...	...	...	..	...	...	..	...	...	...	...	...	...	...	...	..	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Victoria	4	3	..	.	...	...	16	...	2	...	...	...	3	...	5	...	...	..	...	...	...	...	2	...	...	...	12	...	...	...	...	...	...	...	1	...	...	...
Xagħra	...	...	...	...	1	...	1	...	...	...	1	...	...	...	11	...	...	...	1	1	...	...	...	...	.	...	...	...	2	...	...	...	...	...	2	1	1	2
Xewkija	1	...	...	...	...	...	6	...	...	...	1	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	3	1	1	2
Xlendi	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Żebbuġ	...	...	...	...	...	...	3	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Total Gozo ...	8	4	1	..	5	...	73	2	2	...	3	...	22	1	33	...	2	1	2	2	2	...	22	...	...	...	20	...	8	...	1		1	...	9	2	2	...	13
Total Both Islands...	177	39	54	14	132	1	425	3	25	...	35	2	140	6	207	1	7	2	2	2	26	1	193	...	9	...	356	..	63	1	46	1	86	14	118	53	16	...	59

TABLE V.

Monthly Notifications of Infectious Diseases, 1953

MONTH	1 Pulmonary Tuberculosis		2/5 Other Forms of T. B.		12 Typhoid Fever		15 Undulant Fever		17 Scarlet Fever		19 Erysipelas		21 Diphtheria		22 Whooping-Cough		23 Cerebro-spinal Fever	
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
January ...	17	5	7	3	2	—	18	—	3	—	3	1	24	2	18	—	—	—
February ...	13	4	7	1	2	1	14	—	1	—	1	—	21	—	28	—	—	—
March ...	10	5	2	2	2	—	19	—	2	—	3	—	8	—	13	1	—	—
April ...	11	4	4	—	12	—	29	—	2	—	1	—	10	1	11	—	—	—
May ...	16	2	6	4	10	—	40	1	2	—	1	—	9	—	9	—	2	—
June ...	8	1	5	—	8	—	65	—	4	—	1	—	7	—	28	—	1	—
July ...	19	2	5	2	16	—	50	1	1	—	3	—	5	—	25	—	—	—
August ...	27	3	2	—	10	—	51	—	1	—	4	—	5	1	16	—	—	—
September	17	2	3	1	23	—	48	—	1	—	6	—	4	—	15	—	1	1
October ...	22	3	4	—	27	—	44	—	3	—	7	—	17	—	9	—	2	1
November	8	6	3	1	11	—	26	1	2	—	3	1	17	1	16	—	1	—
December	9	2	6	—	9	—	21	—	3	—	2	—	13	1	19	—	—	—
Total ...	177	39	54	14	132	1	425	3	25	—	35	2	140	6	207	1	7	2

MONTH	26B Tetanus Neonatorum)		28 Acute Anterior Poliomyelitis		32 Measles		36 B Typhus Murine		43 H Chickenpox		43 L Leishmaniasis		88 Influenza		89 Pneumonia		90 Broncho-pneumonia		115 Puerperal Fever		43 J Trachoma
	C.	D.	C.	D.	C.	D.	C	D.	C.	D.	C.	D.	C.	D.	C.	D.	C	D.	C.	D.	C.
January ...	—	—	12	—	2	—	—	—	17	—	5	—	4	—	9	3	10	8	—	—	6
February ...	—	—	2	1	1	—	—	—	33	—	3	—	12	—	2	—	4	—	1	—	1
March ...	—	—	2	—	24	—	—	—	72	—	7	—	9	1	13	1	19	7	2	—	4
April ...	—	—	1	—	13	—	—	—	102	—	7	—	5	—	5	—	13	6	6	—	2
May ...	—	—	—	—	25	—	—	—	58	—	5	—	9	—	8	—	8	4	—	—	3
June ...	1	1	3	—	33	—	—	—	34	—	7	—	—	—	8	2	13	4	1	—	13
July ...	1	1	—	—	23	—	1	—	21	—	5	—	—	—	7	2	11	7	—	—	8
August ...	—	—	2	—	5	—	2	—	5	—	4	—	—	—	5	1	5	3	1	—	4
September	—	—	—	—	3	—	3	—	1	—	5	—	2	—	7	—	6	3	2	—	11
October ...	—	—	2	—	4	—	2	—	—	—	7	1	1	—	13	3	11	2	1	—	4
November	—	—	1	—	10	—	1	—	—	—	4	—	3	—	2	2	12	3	—	—	1
December	—	—	1	—	50	—	—	—	13	—	4	—	1	—	7	—	6	6	2	—	2
Total ..	2	2	26	1	193	—	9	—	356	—	63	1	46	1	86	14	118	53	16	—	59

TABLE VI.

Age and Sex Distribution of Cases and Deaths

AGES	Influenza				Pneumonia				Broncho-Pneumonia				Scarlet Fever				Diphtheria				Typhoid Fever				Undulant Fever				Murine Typhus			
	Cases		Deaths		Cases		Deaths		Cases		Deaths		Cases		Deaths		Cases		Deaths		Cases		Deaths		Cases		Deaths		Cases		Deaths	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Under 1 year	1	...	...	...	5	4	4	4	19	16	18	12	...	...	...	...	6	7	2	...	...	...	...	...	...	...	...	...	..	...	...	...
1 year	...	...	...	...	1	3	1	...	7	4	1	4	2	...	...	...	15	13	1	1	...	...	...	...	4	6	...	...	..	..	...	...
2 years	...	...	...	...	2	1	...	...	6	3	1	1	5	2	...	..	17	9	...	...	...	...	...	...	6	8	...	...	...	...	...	...
3 years	1	...	...	...	1	1	...	...	3	1	...	...	2	..	...	...	10	16	2	...	2	4	...	...	18	9	...	...	...	...	...	...
4 years	...	...	...	...	...	...	...	...	2	2	1	...	1	...	...	...	14	7	...	...	3	1	...	...	4	7	...	...	...	...	...	...
5 to 9	1	3	...	...	11	8	...	2	3	2	...	...	3	8	...	...	4	17	...	...	23	18	...	...	47	33	...	...	...	...	...	...
10 to 14	1	...	...	...	3	...	...	...	3	...	...	...	...	2	...	...	...	1	...	...	9	10	...	...	30	22	...	...	...	...	...	...
15 to 19	...	1	...	...	2	2	...	...	1	2	...	...	...	...	...	...	...	...	...	...	9	14	...	...	26	22	1	...	2	2	...	..
20 to 24	...	4	...	...	3	3	...	...	...	2	...	...	..	...	...	...	...	...	...	...	4	5	...	...	18	13	...	...	...	...	...	...
25 to 34	7	8	...	...	5	7	...	...	4	2	...	1	...	...	.	...	2	1	...	...	2	11	...	...	29	27	...	1	...	1	...	...
35 to 44	6	...	...	...	6	2	..	1	3	4	1	2	...	...	...	...	1	...	...	...	5	4	...	...	16	12	...	...	1	..	...	...
45 & over	7	6	1	...	11	5	2	...	14	15	7	4	...	...	...	...	...	...	...	...	6	2	1	...	35	33	1	..	2	1	...	...
Total	24	22	1	...	59	36	7	7	65	53	29	24	13	12	...	...	69	71	5	1	63	69	1	.	233	192	2	1	5	4	...	...

Chickenpox. The number of cases that came to the notice of the Department was 365 against 485 in 1952; 336 cases occurred in Malta and 29 in Gozo; 23 cases were treated in hospital. Most cases occurred in children aged 3 years or under, but a few were notified in adults, mostly members of families of service personnel. One patient aged 47 years was landed from on board a merchant ship. He had a diffuse vescicular eruption over the ophthalmic branch of the fifth nerve on the left side which later developed into a typical attack of herpes zoster. Some days later he had a characteristic chickenpox rash.

Another patient aged 32 was landed from on board another ship suffering from a mild attack of chikenpox.

The greater incidence of cases occurred in localities bordering the harbour area and the highest number of cases was reported in April. The cases were mild with no complications. No deaths occurred from the disease.

Whooping-Cough. The incidence of the disease, which had risen to 1141 cases in 1952 came down to 207 during the year; of these 174 cases were admitted for treatment at the Isolation Hospital. There was only one death due to the disease, that is 7 less than the figure for 1952. On the whole, cases were of a mild form. As in the previous year chloromycetin was the drug of choice with good results when given in the early stages.

Scarlet Fever. The number of notified cases during the year was 25 as against 42 in 1952, of which 16 were remitted to hospital. Nearly all cases occurred in children under 9 years of age. The disease ran a mild course and complications including albuminuria and otitis were uncommon. There were no deaths from this infection.

Measles. The number of cases registered during the year was 171 against 45 in 1952; 13 cases were treated in hospital. Three adult patients were notified, one of whom was landed from on board a ship, one was a passenger in transit who developed measles during his night stay here and was taken to hospital from a hotel, the third patient was also suffering from puerperal fever and was treated in hospital for both conditions. No complications were registered and no deaths occurred from the disease.

Diphtheria. (including membranous croup). The total number of diphtheria cases during the year was 140 (118 in Malta and 22 in Gozo) which is less by 68 than the number of cases reported in 1952. With the exception of one patient who was too ill to be moved, all the other cases were treated in hospital.

The majority of cases (96.43%) occurred in children up to 5 years of age.

Of the children who developed diphtheria only one had received protective inoculation (incomplete T.A.F.), the disease ran a very mild course in this case, but in many of the other cases there were severe symptoms, even though complications were rare.

Three children belonging to the same family were admitted to hospital in October suffering from diphtheria. Swabs were as usual taken from all other members of the family and the Corynebacterium Diphtheriae was isolated from the throat and nose of the mother who was then removed to hospital. After the usual treatment had failed to clear her throat, she responded to a combined treatment of aureomycin and penicillin.

There were 6 deaths due to this infection during the year, 5 in Malta and 1 in Gozo, as against 11 in the previous year; of these 4 died within 24 hours of admission into hospital. Further investigations showed that one case had been kept at home for 10 days and another for 7 days before a doctor was called in to see the patient; apparently the parents had failed to realise the seriousness of the condition of their child who at first had shown only mild symptoms. In two other cases the disease had a very rapid course, one child aged 1 year dying within 24 hours of onset. One of the children who at the time was being treated for leukaemia had been kept under observation for swelling of the throat for about one week, but the infection had remanied undiagnosed. His condition deteriorated very rapidly; on the seventh day patient was admitted to hospital, where tracheotomy was carried out. The child however died shortly after.

Propaganda by our mobile unit and posters emphasizing the necessity of calling in a doctor at the first symptoms was again intensified this year.

Inoculations against diphtheria were again carried out as in the previous year. School children, the majority of whom were new entrants were immunized by the School Medical Officer and pre-school children by the Child Health Officers and by the Free Immunization Unit. The relatively smaller number of school children inoculated this year is due to the fact that many entrants had already received inoculations during pre-school age.

It is of significance that no cases of diphtheria were notified from among the children attending the Infant-Primary schools. This is probably due to the high percentage of school children who have now been immunised.

TABLE VII

Diphtheria.

Ages of Death.

Under 1 year	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	All Ages
2	2	—	2	—	—	—	—	—	—	—	—	—	6

Age Periods of Notified Cases.

Under 1 year	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55	All Ages
13	28	26	26	21	21	1	—	—	3	1	—	—	140
96.43%						3.57%							

Case-mortality at Each Age Period.

(Calculated as a percentage).

Under 1 year	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	All Ages
15.4	7.1	—	7.7	—	—	—	—	—	—	—	—	—	4.3

Typhoid Fever. There were 132 cases reported, with 1 death, during the year, giving a case mortality of 0.8. This shows an increase of 14 cases on the previous year when 118 cases with 6 deaths were notified. As in previous years practically all patients suffering or suspected to be suffering from typhoid fever were removed to hospital. Incidence was again highest during the hotter months. Cases were distributed throughout the Island, the highest number of notifications coming from Qormi (17), Rabat (13) and Żabbar (13). At Qormi several patients admitted having consumed raw vegetables bought from a farmer who was suspected of having irrigated his small plot with sewage water, but as no definite evidence was available, legal action could not be taken. At Rabat five children belonging to the same family contracted the disease within a period of three weeks, probably through drinking contaminated water from a shallow well in their own field. Three more cases occurred in children belonging to another family; again it was found that they had been drinking water from another shallow well. On further examination three contacts of this latter family were found to be carriers of the disease. The cases at Żabbar were partly due to the consumption of infected raw shellfish gathered while bathing at Xgħaira which is relatively close to the point where the effluent from the main sewer discharges into the sea off Malta.

Several warnings were broadcast over the rediffusion system stressing the danger which might result following the ingestion of raw vegetables and shellfish.

During the year there was a gratifying increase in the number of persons who availed themselves of the free immunization service. Figures, however, are still far below expectation.

Undulant Fever. The number of cases notified during the year was 425 (352 in Malta and 73 in Gozo) as against 550 cases (449 in Malta and 101 in Gozo) reported during 1952 and 613 in 1951. The above figures show a further decrease of 125 cases as compared with the previous year. The number of deaths was 3 as against 4 in 1952 and the case mortality has decreased from 1.1 in 1952 to 0.7 in 1953.

As in the case of typhoid fever, notifications for undulant fever were received from all over the Island, the town of Qormi again having the highest incidence with 67 cases followed by Żejtun (37), Siġġiewi (31), Żurrieq and Mellieħa (20). During the year under review no localities were added to the area in which it is forbidden to sell raw goats' milk.

Influenza. The number of cases notified during the year was 46 as compared with 266 in 1952. Six cases occurred in children under 9 years of age. There was only 1 death from the disease (a man of 77 years of age), as compared with 3 in 1952.

Pneumonia. During the year the number of notified cases of pneumonia was 86 with 14 deaths, as against 62 cases and 17 deaths in 1952. Two cases were notified as virus pneumonia.

Cases of broncho-pneumonia were 118 with 53 deaths. The figures for the previous year were 138 cases and 79 deaths.

Cerebro-Spinal Fever. There were 7 cases with 2 deaths as against 8 cases with 1 death in 1952. All the cases were treated in hospital. A further case was landed from on board a Naval ship and admitted for treatment to one of the Services Hospitals.

Erysipelas. The cases numbered 35 with 2 deaths as compared with 38 cases with no deaths during the previous year; 18 patients who could not receive proper treatment at home were remitted to hospital; one of them died of chronic nephritis and acute heart failure.

Puerperal Fever. The number of cases reported was 16, which is one less than last year's figure. There were no deaths either this year or in 1952.

Murine Typhus. The number of cases was 9 all of which occurred in Malta. This compares favourably with last year's figure i.e. 18 in Malta and 2 in Gozo, with one fatal case. All the cases were treated in hospital. No deaths were registered as due to this infection.

Leishmaniasis. The cases notified during the year were 63, eight of which in Gozo. This shows an increase of 8 cases over last year. There was one death as compared with no deaths in 1952.

All the cases occurred in rural areas, except for one reported from Floriana. The highest number notified from any one district was 2 from Żebbuġ and 2 from Żejtun.

Tetanus Neonatorum. There were 2 cases both of which proved fatal, against 1 case and 1 death in 1952. Both cases were investigated by the Medical Officer of Health who submitted samples of the thread used to tie the umbilical cord for laboratory investigations. Results were negative.

Acute Anterior Poliomyelitis. The cases of poliomyelitis among the civilian population during 1953 amounted to 27 cases, 3 of which occurred in Gozo; of the above cases 13 have completely recovered and 3 are still making satisfactory progress, 5 more have made a satisfactory recovery but no further improvement has been recorded during the last three months; 2 remained severely disabled. Only one death was recorded as due to acute anterior poliomyelitis.

TABLE VIII

ACUTE ANTERIOR POLIOMYELITIS

Civilian Cases in Malta

1953

MONTHLY INCIDENCE :—

	Males	Females	Total
January	7	4	11
February	—	2	2
March	1	2	3
April	1	—	1
May	—	—	—
June	—	2	2
July	—	—	—
August	—	2	2
September	—	—	—
October	1	—	1
November	1	—	1
December	1	—	1
Total	12	12	24

INCIDENCE BY AGE GROUPS :—

	Males	Females	Total
Up to 6 months	—	—	—
6 months to 1 year	2	5	7
1 year to 2 years	6	5	11
2 years to 3 years	3	2	5
3 years to 4 years	1	—	1
Total	12	12	24

STATISTICS OF RECOVERY :—

of the 12 male patients :—

6 patients recovered completely.
2 patients have made satisfactory recovery and are still showing signs of improvement.
3 patients have made satisfactory recovery and are showing no further signs of improvement.
1 patient has made poor recovery remaining severely disabled.

12

of the 12 female patients :—

7 patients have recovered completely.
1 patient has made satisfactory recovery and is still showing signs of improvement.
2 patients have made satisfactory recovery and are showing no further signs of improvement.
1 patient has made poor recovery and has remained severely disabled.
1 patient has died.

12

Male and Female : complete recovery	6 + 7 = 13
Male and Female : satisfactory recovery and are still improving	2 + 1 = 3
Male and Female : satisfactory recovery and not improving	3 + 2 = 5
Male and Female : severely disabled	1 + 1 = 2
Male and Female : deaths	0 + 1 = 1

Recoveries in relation to admission into hospital after onset of symptoms:—

The 6 male patients who made complete recovery were admitted into hospital 1, 2, 3, 5, 8, 9 days after onset of symptoms.

The 2 male patients who have made satisfactory recovery and are still showing signs of improvement, were admitted into hospital 5 and 9 days after onset of symptoms.

The 3 male patients who have made satisfactory recovery and are showing no further signs of improvement were admitted into hospital, 6, 7 and 7 days after onset of symptoms.

The male patient who has made poor recovery and remaining severely disabled was found to be suffering from sequelae of Polio. The precise date of onset could not be ascertained.

The 7 female patients who have made complete recovery were admitted into hospital 1, 2, 3, 3, 4, 4 and 8 days respectively after onset of symptoms.

The female patient who has made satisfactory recovery and is still showing signs of improvement was admitted into hospital 5 days after onset of symptoms.

The 2 female patients who have made satisfactory recovery and are showing no further signs of improvement were admitted into hospital 1 and 2 days after onset of symptoms.

The female patient who has made poor recovery and remaining severely disabled was admitted into hospital 4 days after onset of symptoms.

The female patient who died was admitted into hospital 45 days after onset of symptoms.

Recoveries by Age Groups:—

The 6 male patients who have made complete recoveries were on admission into hospital, 11 months, 18 months, 20 months, 22 months, 3 years and 3 4/12 years of age.

The 2 male patients who have made satisfactory recovery and are still showing signs of improvement were on admission into hospital 13 months and 26 months of age.

The 3 male patients who have made satisfactory recovery and are showing no further signs of improvement were on admission 16 months, 2 years and 2½ years of age.

The male patient who has made poor recovery remaining severely disabled was on admission into hospital 8 months of age.

The 7 female patients who have made complete recovery were on admission into hospital 7 months, 11 months, 17 months, 17 months, 18 months, 2 years and 3 years of age.

The female patient who has made satisfactory recovery and is still showing signs of improvement was on admission into hospital 7 months of age.

The 2 female patients who have made satisfactory recovery and are showing no further signs of improvement were on admission into hospital 9 months and 1 year of age.

The female patient who has made poor recovery remaining severely disabled was on admission into hospital 20 months of age.

The female patient who died was on admission into hospital 2 4/12 years of age.

INCIDENCE BY LOCALITY :—

Rabat	3 cases
Pawla	3 ,,
Luqa	2 ,,
Mosta	2 ,,
Cospicua	2 ,,
Valletta	1 case
Vittoriosa	1 ,,
Senglea	1 ,,
Marsa	1 ,,
Siġġiewi	1 ,,
Żejtun	1 ,,
Birżebbuġa	1 ,,
Gudja	1 ,,
Tarxien	1 ,,
Floriana	1 ,,
Żebbuġ	1 ,,
Dingli	1 ,,
Total	24 cases

Acute Anterior Poliomyelitis in Gozo. There were 3 cases of poliomyelitis in Gozo. All of these cases came from the village of Għajnsielem but were unrelated with each other. One occurred in February, another in September and another in October. All 3 patients have made complete recoveries.

They were on admission to hospital 1 year, 2 years and 2½ years of age.

They were admitted into hospital 4 and 5 days and 6 weeks after onset of symptoms.

Trachoma. The number of new cases was 59 of whom 46 were in Malta and 13 in Gozo. This number does not include the cases notified by the Eye Specialist conducting the Trachoma Campaign in Gozo.

TABLE IX

Trachoma Incidence
(Malta and Gozo)

A.

Year	Cases	
	New	Old
1944	132	128
1945	226	111
1946	139	69
1947	283	133
1948	334	145
1949	224	68
1950	41	19
1951	55	12
1952	51	11
1953	59	3

B.

Periods	New Cases in 1953	
	Males	Females
Under 1 year	—	—
1 ,,	—	—
2 years	—	—
3 ,,	3	—
4 ,,	1	—
5 to 9 ,,	10	4
10 to 14 ,,	12	5
15 to 19 ,,	11	—
20 to 24 ,,	2	2
25 to 29 ,,	1	2
30 to 34 ,,	—	—
35 to 44 ,,	—	2
45 & over	2	2
Total ...	42	17

TRACHOMA IN GOZO

The fight against trachoma in Gozo has been sustained with successful results. It offers satisfaction to compare the incidence of the disease now with its prevalance twenty years ago, when the whole Island was infected. Then it was the exception to find a family altogether free from trachoma whereas now the reverse holds good.

Weekly visits to the schools, and periodical visits to Government Dispensaries were regularly carried out by the Eye Specialist throughout the year.

Schools:— Table X shows details of findings and analyses of trachoma cases. At the beginning of the year, there were 55 cases in all the schools, and by the end of the scholastic year, the number was reduced to 42.

On the re-opening of schools, all school children were examined, (4370 in all) and 121 new cases were discovered; by adding to this figure those cases outstanding from the previous year (42) and deducting the number cured by the end of 1953 i.e. 15 cases, we get the figure of 148 which represents the number of cases remaining over at the end of 1953.

Clinics:— Details will be found in Table XI. Twenty five clinics were held in all, at which 337 adult patients attended; 53 were found cured and 486 remained on the registers by the 31st December, 1953.

Considerations:— Scrutiny of the figures shown in the relative tables reveal several interesting points.

a) Duration of treatment: The average case of trachoma is now taking a much longer time to get better, than did the majority of cases in the earlier part of the campaign five years ago. This is probably due to more than one factor. First, it is obvious that we are now dealing with the more resistant cases. Secondly, resistance has probably developed towards the sulphonamides. This phenomenon, has been observed elsewhere, and it is common to other drugs too. Its effects can only be overcome by changing the curative agent, and in this instance, by having recourse to either aureomycin or terramycin. Up to now we have been using sulphacetamide drops but it is now generally recognized that sulphonamides act best in trachoma when given by mouth, and they should be reserved for those cases exhibiting resistance to the antibiotics mentioned above. The Eye Specialist is at the moment engaged in experimenting with achromycin capsules and drops, and both are giving ecnouraging results, but as yet it is too early to give a complete evaluation of this modern method of treatment.

b) The great majority of cases outstanding in school children at the end of 1953, were cases discovered at the routine examination at the beginning of each scholastic year. Only occasionally an old case was found to be re-infected or reactivated. This is an added confirmation of the thoroughness of treatment and of the soundness of criteria of cure.

c) The fifteen cases declared cured before the end of the past year, were unusually mild cases; there was hardly enough time for the others to get cured, if one considers that the routine examination of all school children was protracted well into November.

d) Fewer clinics than usual were held, because the Eye Specialist was away for a good part of the Summer with the World Health Organization. He has now been appointed on the international panel of experts on Trachoma of the W.H.O. Lately it has been observed that too few patients attend these clinics, and this is a matter for regret. The health visitors do their best to rally round a good number, but they come across several difficulties. There is the question of transport; many villages, like Xagħra and Nadur, are spread out, and though very few outlying houses are further away than a mile from the centre, a person wishing to visit all those on the trachoma register, to notify them of an impending clinic, must perforce cover several miles. Then there is the question of indifference on the part of patients. Many of these are probably by now completely cured, but failing an examination by the specialist, they remain on our registers. Occasionally we carry out house to house visits, but such cannot be carried on regularly. Education of the people on sanitary and health matters, cannot fail to have also a beneficial effect on the trachoma situation.

e) Trachoma in Gozo in now well in hand, but it is obvious that eradication of the disease must take several more years, provided of course that efforts are maintained at least at their present pitch. We are keeping a constant and regular watch for trachoma in all the schools in Gozo, especially the primary schools. Recent experience has shown that every year a fresh crop of cases is uncovered in the elementary schools, and if these cases are left untreated the situation would worsen in a short time.

f) From a scientific angle last year's figures, show that the type of trachoma most prevalent in the schools, was Tr. II. Pannus was again not a major feature of trachoma cases. On the other hand, several cases were seen with typical pannus, in whom no trace of past or present trachoma could be detected. Evidently too much stress has been laid in the past on the finding of pannus, as an essential requisite for making a diagnosis of trachoma.

g) The assault on trachoma is a slow process, but with perseverance there is no reason why it should not succeed. I have reason to hope that in the years to come the index of trachoma in Gozo, will be persistently reduced until it reaches the low figures normal on the continent of Europe.

TABLE X

Incidence of Trachoma & Conjunctivitis in school children during 1953

School		No. Seen	New admissions	Tr. II	Plus Pannus	Tr. III	Plus Pannus	Tr. IV	Plus Pannus	Pannus only	Conjunctivitis		Foll. Conj.	
											(—) Pannus	(+) Pannus	(—) Pannus	(+) Pannus
NADUR	Boys	309	—	—	—	—	1	2	3	4	—	1	—	1
	Girls	431	124	4	4	2	—	15	1	5	1	—	1	1
QALA	Boys	82	—	—	5	2	—	2	—	4	1	—	—	—
	Girls	120	—	4	6	—	—	3	3	4	1	1	—	—
GĦAJNSIELEM	Boys	102	—	—	5	1	—	—	2	6	—	—	—	2
	Girls	180	—	5	6	—	3	2	—	6	—	—	—	1
XEWKIJA	Boys	188	—	2	2	—	—	4	4	10	3	1	—	—
	Girls	370	120	6	6	2	—	5	5	13	4	1	2	1
SANNAT	Mixed	278	56	12	14	—	4	3	4	12	—	—	—	—
VICTORIA	Boys	323	—	2	2	—	—	3	—	14	1	—	—	—
	Girls	577	135	4	4	—	4	—	—	19	4	—	—	—
XAGĦRA	Boys	250	—	4	2	—	—	—	—	15	3	1	—	—
	Girls	383	57	6	5	—	—	2	—	6	4	—	—	—
KERĊEM	Mixed	215	32	3	1	1	—	4	—	12	1	—	—	—
ŻEBBUĠ	Mixed	195	32	—	1	—	—	—	—	12	1	—	—	—
GĦARB	Mixed	212	29	1	1	—	—	—	—	6	2	—	—	—
SAN LAWRENZ	Mixed	80	11	2	—	—	—	—	—	8	1	1	—	—
GĦASRI	Mixed	75	21	—	—	—	—	4	—	4	—	—	—	—

TABLE XI

Clinics held at Government Dispensaries in 1953

Place	Number of Clinics	Number seen	Number found cured	Number still on register
Victoria	5	110	23	89
Xaghra	4	80	12	76
Nadur	7	45	10	65
Qala	2	9	1	90
Xewkija	4	63	4	101
Sannat	2	20	2	34
Ghajnsielem	1	10	1	31
Total	25	337	53	486

TABLE XII.

No. of cases examined during 1953

School		No of cases January 1953	No. of cases July 1953	No. examined Autumn 1953	No. of new cases Autumn 1953	Total at end of 1953
NADUR	Boys	1	1	309	5	6
	Girls	2	1	431	9	9 (1 cured)
QALA	Boys	2	2	82	5	7
	Girls	5	4	120	13	15 (2 cured)
GHAJNSIELEM	Boys	2	—	102	6	6
	Girls	8	6	180	10	14 (2 cured)
XEWKIJA	Boys	—	—	188	4	4
	Girls	10	10	370	8	14 (4 cured)
SANNAT	Mixed	10	8	278	24	30 (2 cured)
VICTORIA	Boys	1	—	323	4	4
	Girls	5	4	577	10	12 (2 cured)
XAGHRA	Boys	1	1	250	4	4 (1 cured)
	Girls	3	2	383	10	12
KERCEM	Mixed	2	2	215	4	5 (1 cured)
ŻEBBUG	Mixed	—	—	195	1	1
GHARB	Mixed	1	—	212	2	2
SAN LAWRENZ	Mixed	2	1	80	2	3
GHASRI	Mixed	—	—	75	—	—
Total ...		55	42	4,370	121	148 (15 cured)

Leprosy. The number of leper patients notified during the year was 11 (6 males and 5 females). The age and sex distribution is shown in Table XIII.

TABLE XIII

Age and Sex Distribution of Cases of Leprosy notified during the year

Ages	Males	Females	Total
1 — 10	—	1	1
11 — 20	1	—	1
21 — 30	1	3	4
31 — 40	2	1	2
41 — 50	—	—	—
51 — 60	1	—	1
61 — 70	1	—	1
71 — 80	—	—	—
81 — 90	—	—	—
Total	6	5	11

The number of notified cases during the last ten years is given in Table XIV.

TABLE XIV

Cases notified during 1953 and nine preceding years

	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
Males ...	6	6	—	10	7	10	6	4	9	6
Females ...	4	9	4	3	7	5	6	1	5	5
Total ...	10	15	4	13	14	15	12	5	14	11

There are at present 153 cases of leprosy known in these Islands. Table XV explains the type of the disease.

TABLE XV

Type of Hansen's Disease

		Males	Females	Total
In-Patients :—	Malta	58	21	
	Gozo	3	5	
		61	26	87 (1)
Out-Patients :—		15	16	31 (2)
		16	19	35 (3)
	Total	92	61	153

(1) The nature of the disease in these patients is as follows :—
Lepromatous, 74 (51 males, 23 females)
Indeterminate, 8 (6 males, 2 females)
Major Tuberculoid, 1 female
Burnt out cases at the St. Vincent de Paul Hospital, 4 males.

(2) These patients were discharged at request and the nature of the disease is as follows :—
Lepromatous, 27 (13 males, 14 females)
Indeterminate, 4 (2 males, 2 females)

(3) These patients are suffering from the Tuberculoid form of the disease and are all "old" out-patients.

VENEREAL DISEASES

Venereal diseases were never prevalent in our Islands and in comparison with neighbouring countries, the incidence is very low.

The number of new patients during the year was 96 (62 males and 34 females) as against 124 (78 males and 46 females) for the previous year. Of these 8 were treated as in-patients (4 males and 4 females).

In-patients. The number of in-patients treated during the year is detailed in the following table :—

Diagnosis	Males	Females	Total
Syphilis secondary	1	2	3
Syphilis tertiary	—	1	1
Gonorrhoea acute	2	—	2
Gonorrhoea chronic	—	1	1
Non-specific urethritis	1	—	1
	4	4	8

Out-patients. The following is the classification of the new patients.

Diagnosis	Males	Females	Total
Syphilis primary	1	—	1
Syphilis secondary	9	2	11
Syphilis tertiary	1	1	2
Syphilis congenital	—	1	1
Chancroid	1	—	1
Gonorrhoea acute	18	12	30
Gonorrhoea chronic	6	4	10
Non-specific urethritis	9	1	10
Verrucae	3	—	3
Vulvo-vaginitis	—	1	1
Observation for Venereal Disease... ...	14	12	26
	62	34	96

The source of infection was ascertained in the following cases only :— contracted abroad 15; street-girls 21; prostitution 14; friends 8; husband 3; unknown 2; congenital 1; mother 1; wife 1.

The occupation of the patients is shown hereunder :— barmaids 23; labourers 22; seamen 19; engaged in trade 7; housewives 7; transport 4; unemployed 4; different occupations (one each) 10.

39 of these 96 patients reported at the Clinic of their own accord, 12 were remitted by private practitioners, 10 came from other hospital wards, 9 were submitted by District Medical Officers, 7 were referred by the Medical and Health Department under the V.D. Regulations, 6 were persuaded by the same Department to present themselves for examination, 6 were referred by the Criminal Investigation Department, 6 by the Shipping agencies, and 1 by the Port Medical Officer.

TUBERCULOSIS

Tuberculosis in Malta is under control and the prevalence of the disease is not alarming; it is certainly not higher than in other civilised countries. The means for examination, treatment, observation and following up of patients and contacts are adequate. What is lacking is a modern hospital in which the benefits of space, diversional occupations and other amenities may be enjoyed by the patients.

Control: A total of 6,890 persons attended for medical examination at the chest clinic of whom 707 were contacts of the 177 new cases of pulmonary tuberculosis and of the 54 of extra-pulmonary tuberculosis notified during the year. 15 of the contacts were found to be suffering from open pulmonary tuberculosis and were either referred to the out-patient chest clinic or remitted as in-patients to the Connaught Hospital for tuberculosis. Twelve children belonging to contact families were found with active primary intra-thoracic tuberculosis, mostly primary complexes and were treated at the chest clinic.

Case finding surveys were carried out amongst 4210 prospective emigrants, 48 of whom, were subsequently referred to the chest clinic for clinical and laboratory investigations. 439 other persons were X-rayed for the chest prior to taking up emlpoyment with Government. The occupations of these persons is given in Table XXXIV. Six were diagnosed as suffering from active tuberculosis of the lung, whilst in most of the other cases calcification and residual scars, mostly of fibrotic tissue due to former tuberculous lesions, were discovered. Many of these cases were unaware that they ever harboured the disease which must have healed off spontaneusly at a later date.

B.C.G. Campaign: The B.C.G. vaccination campaign against tuberculosis which started in April 1952 is proceeding satisfactorily. In 1952 owing to an out-break of poliomyelitis during the month of May, vaccination had to be discontiuend for a period of 8 weeks. No such incidents occurred this year so that the number of persons tested and immunised is higher than that of last year by 3936 and 2773 respectively.

No Koch phenomena or other complications were observed among the recipients of B.C.G. vaccine during the previous year and this record has been maintained during the campaign in 1953.

Since the year 1950 when B.C.G. vaccination was attempted for the first time in this island by an expert Norwegian team, under the auspices of the International Tuberculosis Campaign no cases of pulmonary or extra-pulmonary tuberculosis amongst the immunised population have so far been notified. It is important to point out this achievement in relation to the fact that although the incidence of tuberculosis has somewhat declined in recent years, the decrease has been relatively slow when compared to the fast decline in the level of the mortality rate already reached.

Mortality: In the last two years modern treatment has reduced mortality to even beyond the level of the most optimistic forecast. In common with other countries Malta is now being faced with a new problem because this gap between the rates of incidence and death appears to be widening more and more every year and therefore society has to cope with the burden of an increasing number of morbid cases.

To reduce further the incidence rate no better prospects are envisaged apart from the wider application of B.C.G. immunisation, which incidentally is the only effective prophylactic measure available locally for protection against tuberculous infection. The members of contacts' families are in particular encouraged to undergo the tuberculin test, and the non-reactors immunised. Infants of tuberculous families who are still under one year are not excepted and, under certain conditions, such as temporary isolation from their infective surroundings, they are also safely vaccinated. Incidentally a child of four months has been successfully immunised at the Clinic this year.

Recent investigations with B.C.G. vaccine as a means to increase resistance against leprosy are still in the experimental stage. It has been observed however, that after vaccination conversions from Lepromin negative to Lepromin positive are very frequent. Whether these artificially induced conversions have also induced any degree of immunity against the disease has not been yet definitely ascertained but if the preventive value is confirmed B.C.G. vaccine may in future be considered as another prophylactic measure in the control of leprosy.

During the period covering 21 months between the 1st April 1952 when the present campaign was started up to the end of 1953 the total number of persons tested was 19,534 and of these 7,629 non-reactors received the vaccination. These figures are not very impressive when compared with 54,328 and 38,681 for the first campaign (March-June 1950) but at the time the field work was shared among six vaccination teams.

The proportion of vaccinated persons compared to the total population of the island is 14.59% which is still rather low. Besides a good percentage of the early recipients of vaccine are expected to become negative reverters in the immediate years ahead, and these must be retested and eventually vaccinated all over again.

It is felt that the campaign should be intensified, but on the other hand it is somewhat difficult for one team to cover the two islands and in spite of hard work the team cannot be expected to improve much further on the present figures for apart from incidental recurrent epidemics which may suddenly interfere with the work in progress, it has been found impossible, owing to the excessive heat of the summer months to keep the team working in the field for the whole year round. In fact the campaign has to be stopped for a period of two months every year in the interest of the staff themselves and also of the children who will be enjoying the summer holidays.

Home visiting: 1490 homes of contact families have been visited by the Sanitary Inspectors attached to the chest clinic. The conditions obtaining in previous years still call for further improvement. Out of the 177 cases notified this year, 96 cases (54.0%) could not afford to sleep in a separate bed-room. The effects of the housing shortage is still being felt by that section of the population which is composed mainly of families with limited financial means. There is reason to hope, however, that in the not distant future as more houses become available this highly deserving class of society shall be given the necessary priority to obtain the adequate and more hygienic accommodation which they so badly need.

TABLE XVI

Number of Pulmonary Tuberculosis cases alive on 31. 12. 53

DISTRICT	0 — 5		— 10		— 20		— 30		— 40		— 50		— 60		— 70		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
MALTA																	
Attard	...	...	...	...	2	2	2	2	...	2	1	...	...	...	...	...	11
Balzan	...	...	...	..	3	5	4	4	1	1	2	2	...	.	...	...	22
Birkirkara	...	...	2	1	27	15	37	15	16	17	12	7	10	3	3	...	165
Birżebbuġa	...	...	...	...	10	4	15	6	4	3	2	1	1	1	...	...	48
Cospicua	...	...	...	...	4	...	8	2	4	4	6	1	1	3	2	2	37
Dingli	...	...	...	...	...	...	2	1	1	1	1	1	...	...	...	...	7
Floriana	...	...	...	1	4	3	3	6	2	1	2	2	2	1	2	...	29
Għargħur	...	...	...	...	1	1	3	1	...	2	...	...	...	...	...	...	8
Għaxaq	...	...	...	...	3	2	5	...	...	1	...	1	1	...	...	...	13
Gudja	...	...	...	...	...	...	2	...	1	...	...	...	...	...	1	...	4
Gżira	...	...	1	...	6	11	20	13	7	6	4	4	3	3	4	2	84
Hamrun	...	1	1	3	35	30	57	37	24	15	9	10	10	4	8	...	244
Kalkara	...	...	...	...	1	...	4	2	...	2	1	...	2	...	...	...	12
Kirkop	...	...	...	...	...	...	...	.	...	1	...	1	2	...	...	...	4
Lija	1	...	...	...	1	4	6	4	1	4	2	1	1	...	...	1	26
Luqa	1	1	1	...	1	6	3	4	1	2	1	...	...	...	1	...	22
Marsa	1	...	...	1	13	9	22	15	7	2	7	1	4	2	5	2	91
Mellieha	...	...	...	1	...	...	1	2	2	2	...	1	1	...	...	...	10
Mġarr	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	—
Mosta	...	...	...	...	4	1	7	1	...	2	1	2	1	...	...	1	20
Mqabba	...	...	...	...	...	1	...	2	...	...	...	...	...	...	...	...	3
Msida	...	...	...	1	7	11	18	5	10	5	1	4	1	3	2	1	69
Naxxar	1	...	...	1	3	2	6	3	3	3	...	1	1	1	...	...	25
Pawla	...	...	...	..	10	16	41	14	12	4	8	3	5	3	4	1	121
Qormi	1	...	...	...	9	7	12	8	5	3	5	4	4	3	3	...	64
Qrendi	...	...	...	...	...	...	1	3	1	1	1	...	...	...	...	...	7
Rabat	...	...	1	...	5	5	8	12	10	2	5	2	1	2	2	...	55
Safi	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	—
St. Julian's	3	...	...	...	2	1	8	7	3	2	2	...	...	2	...	...	30
St. Paul's Bay	...	...	...	...	2	...	4	2	...	...	1	...	...	...	...	...	9
Senglea	...	...	1	.	2	1	6	...	2	...	5	...	1	...	1	...	19
Siġġiewi	...	...	...	1	3	3	6	5	...	...	1	...	...	1	...	...	20
Sliema	...	...	...	2	21	16	31	16	24	6	13	6	6	9	...	2	152
Tarxien	...	2	...	...	5	3	5	5	6	...	6	1	2	2	1	...	38
Vittoriosa	...	...	...	...	4	2	3	...	2	3	2	2	2	...	...	...	20
Valletta	...	2	..	...	24	27	50	36	20	13	18	4	10	5	4	1	215
Żabbar	...	...	...	...	7	3	20	14	6	1	7	1	5	1	1	1	67
Żebbuġ	1	...	...	...	6	2	3	3	1	5	3	1	2	...	2	...	29
Żejtun	...	...	...	...	7	3	9	4	7	1	4	1	5	1	...	...	42
Żurrieq	1	...	1	...	3	3	5	4	2	...	...	...	1	1	...	...	21
Total Malta	11	6	8	12	236	199	437	258	185	117	133	65	85	51	46	14	1863
GOZO																	
Għansielem	...	...	...	...	1	...	2	...	1	...	2	1	1	...	...	...	8
Għarb	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	2
Għasri	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	2
Mġarr	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	.	1
Nadur	...	...	...	...	1	3	3	3	1	2	2	1	2	...	...	..	18
Qala	...	...	...	...	...	2	...	...	...	2	3	1	...	...	...	...	8
Victoria	...	...	...	...	3	1	5	4	2	2	2	1	1	...	...	1	22
San Lawrenz	...	..	...	...	...	..	...	1	1	...	...	...	..	..	...	...	2
Sannat	..	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	2
Xagħra	...	...	...	...	...	.	1	...	...	1	...	...	...	...	1	...	3
Xewkija	...	...	...	...	1	1	3	4	...	...	...	2	..	...	...	1	12
Żebbuġ	...	...	...	...	1	...	1	1	..	...	...	...	...	3	...	...	6
Total Gozo	...	...	...	1	7	7	16	14	5	7	10	6	5	5	1	2	86
Total both Islands	11	6	8	13	243	206	453	272	190	124	143	71	90	56	47	16	1949

TABLE XVII

Distribution of New Cases of Pulmonary Tuberculosis by District.

District	Cases	Population	°/₀₀
MALTA :—			
Attard	1	2,541	0·4
Balzan	2	2,395	0 8
B'kara	10	17,770	0·5
B'buġa	1	4,802	0·2
Cospicua	3	7,835	0·3
Dingli	—	1,606	
Floriana	2	5,712	0·3
Għaxaq	1	2,853	0·3
Gudja	1	1,700	0·5
Gżira	5	8,905	0·5
Hamrun	17	18,643	0 8
Kalkara	2	2,222	0·9
Kirkop	1	1,122	0·8
Lija	4	2,345	0·1
Luqa	2	5,191	0·3
Marsa	9	13,853	0 6
Mellieħa	—	4,404	—
Mġarr	—	2,256	—
Mosta	2	7,516	0·2
Mqabba	—	2,131	—
Msida Pieta	6	9,818	0·9
Naxxar	—	3,994	—
Qormi	14	14,996	0·9
Qrendi	—	2,234	—
Rabat	2	14,939	0 1
Safi	—	695	—
St. Julians	1	6,358	0·1
St. Paul's Bay	1	3,502	0·3
Senglea	1	4,089	0·2
Siġġiewi	2	4,903	0·4
Sliema	15	24,099	0·6
Tarxien/Pawla	17	19,758	0·8
Valletta	20	18,806	1·6
Victoriosa	4	3,454	1·1
Żabbar/M'skala	8	12,307	0·6
Żejtun/M'Xlokk	9	13,253	0·6
Żebbuġ	4	7,904	0·5
Żurrieq	3	6,328	0·4
Total Malta	170	288,987	·508
GOZO :—			
Victoria	4	6,522	0·6
Għajnsielem	—	1,819	—
Għarb	—	1,301	—
Ghasri	—	469	—
Kerċem	—	1,285	—
Nadur	1	4,153	0·2
Qala	1	1,881	0·5
San Lawrenz	—	569	—
Sannat	—	1,645	—
Xaghra	—	4,133	—
Xewkija	1	3,206	0·3
Żebbuġ	—	1,281	—
Total Gozo	7	28,261	0·24
Total both Islands	177	317,248	0·55

TABLE XVIII

Incidence of new cases of Pulmonary Tuberculosis by sex and age

Age Periods	Males	Females	Total
0 — 5 years	3	4	7
6 — 10 ,,	1	—	1
11 — 20 ,,	12	17	29
21 — 30 ,,	23	18	41
31 — 40 ,,	23	9	32
41 — 50 ,,	13	9	22
51 — 60 ,,	19	11	30
61 — 70 ,, and over	10	5	15
Total	104	73	177

TABLE XIX

Incidence of new cases of Pulmonary Tuberculosis by month

Months	Males	Females	Total
January	13	4	17
February	9	4	13
March	6	4	10
April	5	6	11
May	12	4	16
June	6	2	8
July	7	12	19
August	16	11	27
September	9	8	17
October	11	11	22
November	4	4	8
December	6	3	9
Total	104	73	177

TABLE XX

Mortality by age periods from Pulmonary Tuberculosis

Age Periods	Males	Females	Total
0 — 5 years	1	—	1
6 — 10 ,,	—	—	—
11 — 20 ,,	—	—	—
21 — 30 ,,	5	4	9
31 — 40 ,,	7	5	12
41 — 50 ,,	5	—	5
51 — 60 ,,	5	1	6
61 — 70 ,, and over	4	2	6
Total	27	12	39

TABLE XXI

Mortality by month from Pulmonary Tuberculosis

Months	Males	Females	Total
January	3	2	5
February	3	1	4
March	3	2	5
April	4	—	4
May	2	—	2
June	1	—	1
July	2	—	2
August	3	—	3
September	1	1	2
October	2	1	3
November	1	5	6
December	2	—	2
Total	27	11	39

TABLE XXII

Analysis of Cases and Deaths from Pulmonary Tuberculosis

Year	Estimated Population at end of year	Cases Notified	Case-rate per 1000 Population	No. of Deaths	Death-rate per 1000 Population
1947	303,908	220	0.72	161	0.52
1948	305,991	202	0.66	104	0.34
1949	310,985	228	0.73	97	0.31
1950	311,973	208	0.66	82	0.27
1951	312,146	171	0.54	68	0.21
1952	316,619	146	0.46	34	0.09
1953	317,248	177	0.55	39	0.12

TABLE XXIII

Monthly notification of Pulmonary Tuberculosis

Year	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
1947 ...	14	17	14	21	23	24	28	17	22	10	10	20	220
1948 ...	15	10	17	18	15	17	27	18	20	13	19	15	204
1949 ...	16	10	18	20	23	12	22	27	27	16	17	20	228
1950 ...	9	20	17	15	16	17	22	30	14	20	16	12	208
1951 ...	15	12	19	13	14	10	17	19	16	11	19	7	172
1952 ...	6	13	14	8	8	14	24	13	11	14	11	10	146
1953 ...	17	13	10	11	16	8	19	27	17	22	8	9	177

TABLE XXIV

An analysis of the sources of notification of new cases

From Hospitals	54
From Private Practitioners	79
From Chest Clinic — Central Hospital	31
From H.M's Services	7
From Examination of Prospective Emigrants	6
	177

TABLE XXV

Synopsis of occupation of cases of Pulmonary Tuberculosis, 1953

Occupation	Number
Asst. Apothecary	1
Barmen	3
Basket maker	1
Boiler maker	1
Breadmakers	4
Butcher	1
Carpenters	4
Cattle-shed attendants	2
Children	5
Clerks	6
Domestic servants	4
Electrician	1
Fitters	8
Factory girls	2
Farmers	4
General labourers	15
Girls employed on home duties	20
Hawkers	2
Hospital Attendants/Nurses	2
Housewives	33
Masons	3
Merchants	2
Milkman	1
Motor Drivers	2
Old age pensioners	7
Plasterers	2
Policeman	1
Refuse collectors	2
Shop assistants	2
Shoemakers	2
Shipwrights	3
Servicemen	2
Stewards/Canteen Managers	2
Stoker	1
Store houseman	1
Tailors	2
Teachers, school children/students	7
Telephone operator	1
Unemployed	11
Waiters	2
Watchman	1
Washerwoman	1

TABLE XXVI

Attendance at Contacts' Clinic

Month	Males	Females
January	282	351
February	246	295
March	287	325
April	207	276
May	211	332
June	123	242
July	249	368
August	244	397
September	233	340
October	307	340
November	227	440
December	200	368
Total	2,816	4,074

TABLE XXVII

Number of Cases of Non-Respiratory and Non-Intrathoracic Tuberculosis during 1953

Tuberculosis of the Meninges and C.N.S.	19
,, ,, ,, Intestines, Peritoneum & Mesenteric Glands ...	1
,, ,, ,, Bones & Joints	6
,, ,, ,, Vertebral Column	4
,, ,, ,, Lymphatic System	3
,, ,, ,, Genito-Urinary System	3
,, ,, ,, Pleurisy	4
,, ,, ,, Primary Complexes	12
,, ,, ,, Oral cavity	1
,, ,, ,, Larynx	1
Total	54

TABLE XXVIII

Home visiting — Environmental Figures

Size of families visited	Size of home visited	Room accomodation	Bed accomodation	Sanitation
8 families of 1 person				
12 families of 2 persons	19 houses of 1 room	80 patients have their own room	98 patients have their own bed	97·1% clean
26 families of 3 persons	49 ,, ,, 2 rooms	(45·4%)	(55·5%)	2·9% dirty
18 families of 4 persons	50 ,, ,, 3 ,,			
36 families of 5 persons	31 ,, ,, 4 ,,	97 patients have no room of their own	79 patients have no bed of their own	
19 families of 6 persons	14 ,, ,, 5 ,,			
15 families of 7 persons	13 ,, ,, 6 ,,	(54·6%)	(44·5%)	
14 families of 8 persons	1 ,, ,, 7 ,,			
10 families of 9 persons				
5 families of 10 persons				
10 families of 11 persons				
2 families of 13 persons				
1 family of 14 persons				

TABLE XXIX

Home visits

District	January	February	March	April	May	June	July	August	September	October	November	December	Total
MALTA													
Attard ...	3	2	1	2	1	1	3	...	2	1	1	...	17
Balzan ...	4	2	3	...	3	2	5	...	1	...	1	1	22
Birkirkara	4	5	3	4	3	5	6	12	5	9	6	...	62
Birżebbuġa	2	3	1	3	5	6	2	8	..	2	3	1	36
Cospicua	2	3	4	3	3	2	5	5	3	2	1	2	35
Dingli ...	1	...	1	2	1	...	2	1	...	...	1	1	10
Floriana	1	...	2	...	2	6	3	1	4	...	...	1	20
Għargħur	...	1	...	3	...	1	1	1	2	3	...	1	13
Għaxaq...	1	...	1	1	...	2	...	1	1	2	1	1	11
Gudja ...	...	...	1	2	...	3	...	3	2	2	...	3	16
Gżira ...	4	2	1	1	...	1	3	4	8	7	10	6	47
Hamrun	10	10	5	9	10	10	20	10	7	8	11	...	110
Kalkara	2	...	1	4	1	6	4	4	...	1	1	1	25
Kirkop ...	1	2	...	..	2	2	3	1	...	..	4	...	15
Lija ...	4	2	3	1	5	3	3	3	6	2	...	1	33
Luqa ...	2	1	1	3	2	1	2	7	4	6	3	2	36
Marsa ...	...	5	3	2	3	7	6	8	4	6	4	2	50
Mellieħa	1	...	3	...	2	3	2	...	...	1	1	1	14
Mġarr ...	...	2	..	1	...	1		...	...	...	...	...	4
Mosta ...	1	3	1	3	2	1	4	3	2	2	3	1	26
Mqabba	...	2	1	...	1	...	1	2	...	1	1	...	9
Msida ...	2	3	1	2	3	1	5	2	1	7	1		28
Naxxar	2	5	2	2	1	6	1	1	2	...	2	5	29
Pawla ..	6	7	9	10	13	11	16	10	5	6	2	2	97
Qormi ...	3	5	6	5	6	6	8	8	5	2	2	5	61
Qrendi ...	...	...	3	...	...	4	...	5	2	2	3	...	19
Rabat ...	3	5	...	8	...	6	...	7	3	2	3	1	38
Safi ...	3	6	2	4	2	..	2	2	1	...	...	...	22
St Julian's	4	...	5	1	4	2	2	3	...	1	...	...	22
St. Paul's Bay	...	2	...	4	..	...	6	1	...	..	...	...	13
Senglea...	1	6	4	2	2	6	4	3	5	2	...	1	36
Siġġiewi	1	2	5	3	6	4	1	1	2	1	1	1	28
Sliema ...	5	9	9	8	12	20	15	13	10	6	7	8	122
Tarxien	...	6	4	2	1	3	5	7	9	1	...	2	40
Valletta	6	10	8	12	10	10	9	13	2	16	11	6	113
Vittoriosa	2	1	1	3	3	5	2	1	6	1	2	2	29
Żabbar & M'Skala ...	5	3	6	2	5	8	9	6	3	9	2	4	62
Żebbuġ ...	1	4	3	4	6	...	...	2	..	6	...	...	26
Żejtun & M'Xlokk ...	2	2	...	4	5	2	...	3	...	1	1	1	21
Żurrieq ...	...	2	3	5	...	1	4	...	1	2	...	...	18
Total ...	89	123	107	125	125	158	164	162	108	120	91	63	1435
GOZO													
Għajnsielem ...	...	2	1	...	...	3	...	2	1	...	1	1	11
Għarb ...	...	...	...	...	1	...	...	...	...	...	...	...	1
Għasri ...	...	...	...	1	...	...	...	...	...	...	1	1	3
Kerċem	...	3	2	...	...	...	...	...	...	...	...	...	5
Marsalforn	...	...	...	...	...	...	...	...	...	...	...	...	...
Mġarr ...	...	1	...	...	..	1	1	...	...	...	...	...	3
Nadur ...	...	3	...	...	...	...	...	1	...	...	...	...	4
Qala ...	...	...	...	...	...	...	1	...	...	...	...	...	1
Rabat ...	1	2		4	5	...	1	...	...	...	1	...	14
San Lawrenz	.	...	...	...	...	...	...	...	...	...	...	...	...
Sannat ...	...	...	...	...	...	...	...	...	..	..	...	...	...
Xagħra...	...	1	2	...	..	...	...	2	...	...	1	...	6
Xewkija	...	..	...	...	...	.	..	...	..	..	...	...	...
Żebbuġ	...	3	...	1	1	...	...	...	2	...	...	...	7
Total ...	1	15	5	6	7	4	3	5	3	...	4	2	55
Total both Islands ...	90	138	112	131	132	162	167	167	111	120	95	65	1490

TABLE XXX

Results of B.C.G. vaccination during 1953 (Malta)

DISTRICT	PIRQUET TUBERCULIN TESTING								B.C.G. VACCINATION			
	TESTED		POSITIVE		NEGATIVE		NOT-READ		GIVEN		NOT-GIVEN	
	M	F	M	F	M	F	M	F	M	F	M	F
Luqa	58	109	34	51	14	43	10	15	7	25	7	18
Mqabba	106	134	21	43	38	44	47	47	37	37	1	7
Senglea	234	232	94	119	105	86	35	27	102	86	3	—
Kalkara	204	321	113	219	71	75	20	27	67	74	4	1
Mellieha	438	511	166	254	215	179	57	78	215	179	—	—
Cospicua	361	459	192	284	118	114	51	61	117	112	1	2
Floriana	222	313	98	177	64	74	60	62	64	73	—	1
Mgarr	289	341	188	232	65	81	36	28	64	80	1	1
Albert Town	42	64	11	22	26	38	5	4	26	37	—	1
St. Edward's College	45	43	24	23	21	20	—	—	20	19	1	1
Bishop's Seminary	45	—	32	—	12	—	1	—	12	—	—	—
St. Paul's Bay	235	318	145	176	68	114	22	28	67	112	1	2
Pawla	656	912	345	530	293	362	18	20	287	351	6	11
Valletta	720	762	287	377	296	277	137	108	292	275	4	2
Mosta	491	684	67	136	339	460	85	88	336	460	3	—
Naxxar	317	365	55	85	220	245	42	35	213	245	7	—
Valletta Private Schools ...	176	96	72	44	89	50	15	2	84	50	5	—
Gharghur	220	266	19	26	177	208	24	32	174	207	3	1
Pieta	130	207	37	61	78	131	15	15	78	130	—	1
St. Venera	316	293	88	75	198	192	30	26	197	190	1	2
TOTAL	5,305	6,430	2,088	2,934	2,507	2,793	710	703	2,459	2,742	48	51

Total number of persons TESTED 11,735
,, ,, ,, POSITIVE REACTORS 5,022
,, ,, ,, persons VACCINATED 5,201
,, ,, ,, NEGATIVE REACTORS & NOT VACCINATED 99
,, ,, ,, persons with a NOT-READ TEST 1,413

TABLE XXXI

Vaccination by District during 1950 & 1953 showing percentage of protected persons (Malta)

District	No. of Persons Registered	Tested Found Positive	Persons Eligible for Vaccination	Vaccinated in 1950	Vaccinated in 1953	Total Vaccinated	%
Luqa	1,706	226	1,480	599	32	631	42.5
Mqabba	1,034	98	906	410	74	484	53 4
Senglea	1,893	837	1,056	420	188	608	57.5
Kalkara	1,276	523	753	500	141	651	86.05
Mellieha	2,484	449	2,035	771	394	1,165	57.2
Cospicua	3,432	702	2,730	856	229	1,085	39.7
Floriana	2,626	576	2,044	400	137	537	26.2
Mgarr (Malta)	1,578	449	1,129	728	144	872	76.3
Albert Town	177	33	144	—	63	63	43.7
St. Paul's Bay ...	1,887	398	1,489	675	179	854	57.3
Pawla	7,415	1,631	5,784	1,995	638	2,633	45.5
Valletta	7,863	1,388	6,475	1,339	567	1,906	29.4
Mosta	3,667	427	3,240	970	796	1,766	54 5
Naxxar	1,970	261	1,709	293	458	761	44.5
Gharghur	906	91	815	229	381	610	74.8
Pieta'	1,468	156	1,312	408	208	616	46.9
St. Venera	1,787	287	1,500	264	387	651	43.4
Total ...	43,153	8,532	34,601	10,857	5 016	15,893	48.8

TABLE XXXII

Result of B.C.G. Vaccination in Malta by Year of Birth

Year	Tested	Positive	Negative	Vaccinated
1952	130	13	92	91
1951	430	47	350	342
1950	551	88	443	435
1949	715	137	485	476
1948	778	225	429	426
1947	794	237	401	424
1946	930	327	449	438
1945	983	366	450	445
1944	954	397	434	413
1943	669	329	285	279
1942	602	262	234	228
1941	638	290	215	206
1940	651	314	234	228
1939	542	278	154	150
1938	411	255	103	102
1937	345	176	98	95
1936	240	113	70	69
1935	161	78	59	58
1934	122	85	32	33
1933	94	80	18	18
1932	73	79	17	17
1931	60	57	19	18
1930	57	87	16	16
1929/25	244	102	55	54
1924/20	245	144	61	56
1919/15	102	100	16	15
1914/10	62	74	19	17
1909/05	28	63	5	5
1904/00	15	63	1	1
Age unknown	54	51	24	25
Total	11,680	5,086	5,268	5,180

TABLE XXXIII

Result of after investigation of persons vaccinated in 1950

District	Number Re-Tested	Negative	%	Positive	%
Luqa	97	71	73·1	26	26·9
Mqabba	71	42	59·1	29	40·9
Senglea	136	45	33·0	91	67·0
Kalkara	193	45	23·3	148	76·7
Mellieħa	265	151	56·9	114	43·1
Cospicua	270	51	18·8	219	81·2
Floriana	157	31	19·7	126	80·3
Mġarr	294	127	43·2	167	56·8
Albert Town ...	6	3	50·0	3	50·0
St. Edward's College	30	3	10·0	27	90·0
Bishop's Seminary	—	—	—	—	—
St. Paul's Bay ...	261	86	32·1	175	67·9
Pawla	401	64	15·8	337	84·2
Valletta	407	59	14·4	348	85·6
Mosta	300	213	71·0	87	29·0
Naxxar	142	98	69·0	44	31·0
Valletta Private Sch.	—	—	—	—	—
Gharghur	126	108	85·7	18	14·3
Pietà	115	86	74·7	29	25·3
St. Venera... ...	38	27	71·0	11	29·0
Total ...	3,309	1,310	39·6	1,999	60·4

TABLE XXXIV

X-Ray examination of persons prior to their employment in Government service or to their admission into private institutions

Teachers	243
Massage and Physiotherapy Sister	1
Nurses and Hospital Attendants	29
Cooks	1
Motor Drivers	3
Police Constables	86
Employees at Malta Power House (Ta' Ċejlu)	15
Admissions of children into Institutions	54
Persons joining Religious Orders :—	
Priests and Monks	2
Nuns	5
	439

III. CHILD HEALTH SERVICE

The total number of live-births for the year 1953 was 8,977 of which 4,661 were males and 4,316 were females. The birth rate was 28.29.

The total number of still-births was 188 as against 221 last year, giving a rate of 2.05 and 2.34 for both years.

The total number of deaths among children under 5 years was 625 as against 750 in the previous year; age distribution of these deaths is shown in the following table.

TABLE XXXV

Age distribution of deaths in children under 5 years

Under 1 month	Under 1 year including 1 month	Over 1 year under 5 years
308	582	43

Neonatal Deaths. Of the 582 infants dying in the first year of life no less than 308 occurred in the first 4 weeks of life; more babies died in the first month of life than in the subsequent eleven months. The number of 308 shows an increase of 2 deaths over last year's figures. The respective rates in the neonatal period for this year's and last is 34.30 and 33.46.

TABLE XXXVI

Neonatal deaths by weekly periods

Under 1 week	1 and under 2 weeks	2 and under 3 weeks	3 and under 4 weeks	Total 1 to 4 weeks
254	24	18	12	308

TABLE XXXVII

Causes of neonatal deaths

Causes of Death		
Prematurity and congenital debility		140
Asphyxia and atelectasis		83
Birth injuries		36
Congenital malformations		17
Infections :—		
Tetanus	2	
Pneumonias	5	
Bronchitis and other respiratory infections ...	3	
Gastro-enteritis	1	
Other infections of new-born	6	17
Haemolytic diseases		4
Intestinal obstruction and hernia		1
Miscellaneous		10
		308

Of the congenital malformations 7 were spina bifida with meningocele, 2 congenital heart lesion and the rest unspecified and multiple.

Prematurity and congenital debility top the list with asphyxia and atelectasis following. This great loss of life does in reality take place in the first week, and it is with antenatal care and better midwifery service that it is hoped that such figure will be improved upon.

Infant mortality. The total number of deaths in children under 1 year including those occurring in the first 4 weeks is 582, a decrease of 80 from last year's figures. The infant mortality rate is 64.82 as compared with 71.75 for last year. This is the lowest infant mortality rate ever registered in these Islands. It compares well with those of the Mediterranean countries. Sanitary improvement has accounted for the present favourable results which however are being somewhat impeded by the low standard of education of certain classes and their ignorance of the elementary principles of general and domestic hygiene. The Department is endeavouring to do this through the child health clinics and propaganda service.

TABLE XXXVIII

Infant deaths between 1 and 12 months

Over 1 and under 3 months	Over 3 and under 6 months	Over 6 and under 9 months	Over 9 months and under 1 year	Total 1-12 months
82	99	66	27	274

TABLE XXXIX

Causes of death between the age of 1 month and 1 year

Alimentary :—		
Enteritis	132	
Gastritis	1	
Liver cirrhosis	1	
Hernia	1	135
Respiratory System :—		
Broncho-pneumonia	27	
Bronchitis	18	
Pneumonia	7	
T.B. Pneumonia	1	53
Other Infections :—		
Septicaemia	2	
Diphtheria	2	
Whooping-cough	1	
Skin	1	6
Congenital malformations :—		
Congenital heart	13	
Other and unspecified congenital malformations	3	
Spina bifida and meningocele ...	1	17
Congenital debility and marasmus ...	—	36
Birth injuries and asphyxia	—	5
Blood disorders :—		
Leukaemia	1	
Anaemia	2	3
Accidents	—	2
Miscellaneous	—	17
		274

Children above 1 year and under 5 years. The total number of children under 5 years but above 1 year dying in this year was 43, an improvement of 45 over last year's figures.

TABLE XL

Distribution of deaths by ages between 1 and under 5 years

Over 1 year and under 2 years	Over 2 years and under 3 years	Over 3 years and under 4 years	Over 4 years and under 5 years	Total
19	10	8	6	43

TABLE XLI

Causes of death between 1 and 5 years

Infections :—

Pneumonias, bronchitis	12
Enteritis	7
Diphtheria	4
Meningitis T.B.	4
Meningitis (suppurat.)	4
Accidents	3
Congenital malformations (heart)	2
Leukaemia	2
Nephritis	2
Poliomyelitis	1
New growths (C.N.S.)	1
Miscellaneous	4

Children's department St. Luke's Hospital

Year	Out-patient Department (new patients)	Admissions to Children's Ward
1946	513	—
1947	665	—
1948	757	314
1949	880	596
1950	950	692
1951	1603	763
1952	1122	919
1953	1052	894

TABLE XLII

Infant Mortality Rate over the last 20 years by month

Year	January	February	March	April	May	June	July	August	September	October	November	December	Average Rate Per Year
1934	158.70	106.88	99 32	121.33	284.09	575.76	475.55	555.98	303.78	299.75	316.78	234.50	277.03
1935	216.01	238.44	184 63	219.12	242.77	382.88	410.08	349.54	336.16	385.25	193.93	150.28	285.71
1936	81.97	97.78	88.60	143.04	169.27	237.87	321.77	283.88	252.89	252.53	163.12	146.59	290.30
1937	145.29	102.14	108.89	108.40	165.76	396.25	316.41	333.33	376.93	397.74	277.42	157.64	242.70
1938	121.89	112.94	140.96	123.53	134.41	447.81	424.50	326.47	213.56	243.43	288.70	223.16	224.83
1939	138.62	122.00	129.03	104.90	165.17	282.33	362.98	309.67	287.53	439.29	235.29	212 59	226.98
1940	134.53	82.57	120.13	119.56	226.19	406.68	692.96	733 23	396.77	258.74	216.17	147.50	276 45
1941	134.43	134.98	149 44	183.64	290.50	678.06	691.62	495.62	338.26	246.68	270.11	191.20	303.45
1942	164.63	232.89	155.58	198.74	384.23	561.03	541.24	417.82	424.68	482.11	445.91	241.04	345.15
1943	136.15	84.17	100.72	105.61	142.25	380.13	459.92	446.07	330.04	287.90	147.65	112.02	210.00
1944	84.99	103.06	74.64	74.23	91.96	180.41	140.87	132 69	138.77	125.00	138.70	127.77	116.30
1945	107 17	80.25	56.72	71.51	164.85	250.37	218.03	193.90	202.85	191.55	151.76	107.07	144.30
1946	67.30	66 23	71.27	93.20	122.83	130.04	148.71	205.10	149.83	148.32	195.37	163.36	130.75
1947	93.02	74.29	61.97	90.23	109.54	162.50	167.62	177.55	142.12	144.12	129.86	115.34	120.30
1948	98.85	89.85	79 80	95.02	150.07	171.74	139.02	135 86	97.41	131.71	107.47	89.00	112.97
1949	72.55	60 35	72.38	83.33	65 77	93.71	126.56	83.73	106.89	95.87	94.01	63.46	83.76
1950	40.07	56.60	65.92	48.80	72.90	97.31	178.21	160.85	111.40	105.79	78.53	82.21	88.51
1951	81.28	57.03	79.72	70.96	119.25	146.16	132.99	158.67	100.64	101.71	86.29	78.16	99.78
1952	73 64	42.89	51.07	43.53	46.34	137.48	69.21	88.00	83.33	76.82	91.41	69.99	71.75
1953	73.98	55.26	53.45	45.02	54.96	69.54	136.23	67.69	55.26	56.47	53.98	60.86	64.82

TABLE XLIII

Number of deaths under 5 years of age classified by cause of death

DISEASES	Under 1 week	1 & under 2 weeks	2 & under 3 weeks	3 & under 4 weeks	Total under 4 weeks	4 weeks & under 3 months	3 & under 6 months	6 & under 9 months	9 & under 12 months	Total under 1 year	1 year & under 2 years	2 & under 3 years	3 & under 4 years	4 & under 5 years	Total 1 to under 5 years	Total under 5 years
Tuberculosis of the Respiratory System...	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	1
T. B. of meninges and central nervous system	—	—	—	—	—	—	—	—	—	—	—	2	1	1	4	4
Septicaemia and pyaemia	—	—	—	—	—	—	1	—	1	2	—	—	—	—	—	2
Diphtheria	—	—	—	—	—	—	—	—	2	2	2	—	2	—	4	6
Whooping Cough	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	1
Tetanus	—	2	—	—	2	—	—	—	—	2	—	—	—	—	—	2
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Food poisoning, etc....	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Malignant neoplasm of unspecified sites	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1
Leukaemia and Aleukaemia	—	—	—	—	—	—	—	1	—	1	—	—	2	—	2	3
Other specified and unspecified anaemias	—	—	—	—	—	—	—	—	2	2	—	—	—	—	—	2
Allergic disorders, etc.	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	1
Non-meningococcal meningitis	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Otitis media and mastoiditis	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Diseases of the nervous system and sense organs	—	—	—	—	—	—	—	—	—	—	1	—	—	1	2	2
Lobar pneumonia	—	1	—	—	1	3	1	2	1	8	1	—	—	—	1	9
Broncho-pneumonia	—	—	2	1	3	7	10	10	—	30	5	2	—	1	8	38
Primary atypical, other and unspecified pneumonias	1	—	—	—	1	—	—	—	—	1	—	—	—	—	—	1
Acute bronchitis	—	—	2	—	2	1	6	5	6	20	1	2	—	—	3	23
All other Respiratory Diseases	—	1	—	—	1	—	—	—	—	1	—	—	—	—	—	1
Gastritis and Duodenitis	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	1
Intestinal obstruction and hernia ...	—	1	—	—	1	—	1	—	—	2	—	—	—	—	—	2
Gastro-enteritis and colitis under 2 years	—	—	1	—	1	31	57	34	9	132	7	—	—	—	7	139
Chronic enteritis and ulcerative colitis ...	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	1
Cirrhosis of liver	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	1
Other diseases of the digestive system ...	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	1
Acute nephritis	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	2
Infections of kidney	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	1
Infections of skin and subcutaneous issue	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	1
Spina bifida and meningocele	5	2	—	—	7	—	1	—	—	8	—	—	—	—	—	8
Congenital malformation of the circulatory system	2	—	—	—	2	6	2	3	2	15	—	—	2	—	2	17
All other congenital malformations ...	6	1	1	—	8	3	—	—	—	11	—	—	—	—	—	11
Birth injuries	35	—	1	—	36	—	1	—	—	37	—	—	—	—	—	37
Post-natal asphyxia and atelectasis ...	78	4	—	1	83	3	1	—	—	87	—	—	—	—	—	87
Infections of newborn	1	1	1	3	6	1	—	—	—	7	—	—	—	—	—	7
Haemolytic diseases of newborn	3	1	—	—	4	—	—	—	—	4	—	—	—	—	—	4
All other defined diseases of early infancy	9	—	—	1	10	8	1	3	1	23	—	—	—	—	—	23
Ill-defined diseases of early infancy and immaturity unqualified	114	10	10	6	140	17	13	5	1	176	—	—	—	—	—	176
Motor vehicle accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1
Accident caused by hot substances, corrosive liquid, steam and radiation	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	1
Accidental drowning and submersion ...	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	1
All other accidental cases	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
Homicide and injury purposely inflicted by other persons (not in war)	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Total	254	24	18	12	308	82	99	66	27	582	19	10	8	6	43	625

TABLE XLIV

Population, Live Births, Live Birth-rate, Still Births, Still Birth-rate by District.

Locality	Population	Live Births	Live Birth-Rate per 1000 population	Still Births	Rate per 100 Total Births
MALTA					
Attard	2,541	37	14 6	1	2.6
Balzan	2,395	59	24.6	—	—
Birkirkara...	17,770	508	28.6	8	1.5
Birżebbuġa	4,802	225	46.8	2	0.9
Cospicua	7,835	275	35.1	5	1.8
Dingli	1,606	41	25.5	2	4.6
Floriana	5 712	156	27.3	3	1.9
Għargħur	1,866	48	25.7	—	—
Għaxaq	2,653	84	31.7	2	2.3
Gudja	1,700	50	29.4	1	2.0
Gżira	8,905	257	28.9	5	1.9
Hamrun & Sta. Venera ...	18,643	538	28.8	10	1 8
Kalkara	2,222	79	35.5	—	—
Kirkop	1,122	37	33.0	—	—
Lija	2,345	52	22.2	1	1.9
Luqa	5,191	128	24.6	3	2.3
Marsa	13,853	364	26.3	8	2.1
Marsaxlokk	1,352	51	37.7	1	1.9
Mellieħa	4,404	136	30.9	4	2.8
Mġarr	2,256	77	34.1	5	6.1
Mosta	7,516	232	30.9	10	4.1
Mqabba	2,133	62	29.1	1	1.6
Msida & Pietà	9,818	270	27.5	7	2.5
Naxxar	3,994	94	23.5	4	4.1
Paola & Tarxien	19,758	567	28.7	7	1.2
Qormi	14,996	493	32.9	12	2 4
Qrendi	2 234	70	31.3	1	1.4
Rabat & Mdina	14,939	412	27.6	11	2.6
Safi	695	15	21.6	—	—
St Julian's	6,358	262	41.2	6	0.2
St. Paul's Bay	3,582	99	27.6	—	—
Senglea	4,089	170	41.6	4	2.3
Siġġiewi	4,903	133	27.1	3	2.2
Sliema	24,099	592	24.6	11	1.8
Vittoriosa	3,454	106	30.7	2	1.8
Valletta	18,806	466	24.8	9	1.9
Żabbar & Marsaskala ...	12,307	352	28.6	4	1.1
Żebbuġ	7,904	205	25.9	3	1.4
Żejtun	11,901	290	24.3	6	2.0
Żurrieq	6,328	210	33.2	3	1.4
GOZO					
Victoria	6,522	139	21.3	4	2.8
Għajnsielem & Comino ...	1,819	47	25.8	1	2.1
Għarb	1,301	14	10.8	1	7.1
Għasri	469	10	21.3	—	—
Kerċem	1.285	33	25.7	—	—
Nadur	4 153	111	26.7	6	5.1
Qala	1,881	29	15.4	4	12.1
San Lawrenz	569	10	17 6	1	9 1
Sannat & Munxar	1,645	51	31.0	—	—
Xagħra & Marsalforn .	4.130	107	25.9	3	2.7
Xewkija	3.206	95	29.6	2	2 1
Żebbuġ	1,281	29	22.6	1	3.3

TABLE XLV

Return of Attendances at Child Health Clinics.

Centre	No. of Clinics held	New Cases			Old Cases			Totals
		Under 1 year	Over 1 year	Total	Under 1 year	Over 1 year	Total	
Birkirkara ...	46	164	79	243	411	53	464	707
Birżebbuġa ...	24	159	82	241	246	67	313	554
Floriana ...	32	42	28	70	135	55	190	260
Għargħur ...	24	23	3	26	123	7	130	156
Għaxaq	45	81	32	113	258	281	539	652
Gudja	24	52	5	57	167	59	226	283
Gżira	48	820	71	891	588	54	642	1,533
Kirkop	24	35	45	80	186	59	245	325
Lija	24	53	7	60	249	38	287	347
Luqa	24	63	42	105	240	45	285	390
Marsa	49	159	42	201	823	59	882	1,083
Mellieħa ...	24	78	35	113	303	21	324	437
Mosta	45	106	21	127	465	24	489	616
Mqabba... ...	24	62	51	113	63	59	122	235
Msida	48	101	4	105	804	92	896	1,001
Naxxar	24	63	24	87	227	35	262	349
Qormi	45	139	27	166	730	31	761	927
Qrendi	24	88	61	149	184	112	296	445
Rabat	49	254	79	333	237	57	294	627
Senglea	24	63	24	87	53	17	70	157
St. Julian's ...	24	69	18	87	145	34	179	266
Siġġiewi... ...	48	38	21	59	328	51	379	438
Sliema	48	75	39	114	427	56	483	597
Tarxien	48	279	49	328	928	215	1,143	1,471
Vittoriosa ...	24	77	11	88	182	34	216	304
Żabbar	48	99	13	112	559	50	609	721
Żebbuġ	48	133	58	191	724	70	794	985
Żurrieq & Safi...	47	184	76	260	489	123	612	872
	1,006	3,559	1,047	4,606	10,274	1,858	12,132	16,738

TABLE XLVI

Home Visits by Health Visitors

Year	First Visit	Subsequent Visits	Total
1948	8,685	24,802	33,487
1949	7,988	21,950	29,938
1950	7,457	21,965	29,422
1951	7,156	21,131	28,287
1952	7,012	19,659	26,671
1953	6,797	18,981	25,778

IV. SCHOOL MEDICAL SERVICE

The School Medical Service is expanding progressively, the number of school children is on the increase and the calls on the School Medical Officers are proportionately becoming more numerous. It is felt that an addition of another Medical Officer to the staff of the school medical service is now due, and in fact the Government has already expressed its intention to increase the staff accordingly.

Staff. The staff of the School Medical Service in Malta consists of :—

* 3 School Medical Officers
† 2 Eye Specialists
2 School Dental Surgeons
2 School Nurses
2 School Dental Nurses.

The Education Authorities provide the following ancillary services :—

1 Speech Therapist
2 Health Education Officers
1 Child Welfare Officer.

Medical Inspections. The school population in Malta and Gozo was 51,078 of which 7,634 were newly admitted children. 125 schools were visited and all the new entrants were medically examined, as shown in Table XLVII.

TABLE XLVII

Medical Inspections

No. of Schools visited	Routine Medical Inspections	Special Inspections	Re-Inspections	Total
125	21,573	1,465	16,813	39,851

Routine Medical Inspections. The routine medical inspections consist of a thorough physical examination including special tests of the eyes, throat, teeth, weight, growth, nutrition, etc. The defects noticed during inspections were brought to the notice of the parents, and subsequently followed up. Children requiring special investigation or treatment were referred to the out-patient departments of the Government hospitals. Re-examinations and special examinations were carried out at regular intervals.

* The Medical Officer of Health, Gozo, is the School Medical Officer for that Island.

† One engaged on part time basis for Gozo.

TABLE XLVIII

Children referred to Out-Patient departments of Hospitals

Clinic	Number of Children
School Dental	568
E. N. T.	550
Ophthalmic	191
Skin	97
T.B. (Contact)	11
Surgical	2
Orthopaedic	2
Total	1,421

Result of Medical Inspections: The ailments noticed amongst children attending the Infants Primary Government Schools are shown in Table XLIX. The most common ailments were nutritional anaemia, enlarged tonsils, defective vision and skin diseases.

TABLE XLIX

Return of defects found during routine Medical Inspections

Defects or Diseases	No. of Defects
Skin :	
Ringworm (head)	122
Ringworm (body)	21
Other diseases	45
Impetigo	33
Scabies	15
Eye :	
Defective vision	162
Squint	108
Blepharitis	55
Conjunctivitis	41
Other diseases	36
Corneal Ulcer & Opacities	2
Trachoma	* (see Table LVII)
Ear :	
Defective hearing	15
Otitis Media	9
Other diseases	20
Nose and Throat :	
Enlarged Tonsils & Adenoids	607
Enlarged Adenoids	34
Other conditions	26
Heart & Blood :	
Anaemia	197
Organic Heart Disease	2
Lungs :	
Bronchitis	9
Other diseases	6
Nervous System :	
Chorea	5
Epilepsy	4
Other diseases	67
Deformities :	
Mild forms	2
Mental Conditions :	
Backward	35
Dull	8
Idiots	3
Dental Diseases :	749
Enlarged Cervical Glands (non-T.B.) :	81
Defective Speech :	21
Other Defects and Diseases :	
Thread worms	12
Tenia Solium	6

Skin Diseases. Other skin diseases which are not specified in Table XLIX were the following:— urticaria 14; warts 13; boils 10; verrucosis 7; ichthyosis 1.

Eye Diseases. All school children were examined by the Eye Specialists and diseases and defects were treated by them or by the Ophthalmic Surgeons of the Government Hospital. The School Medical Officers give due attention to the condition of the eyes during inspections and refer suitable cases either to the School Eye Specialist or to the Out-patient Ophthalmic Clinic of the Government Hospital.

Glasses were supplied free of charge to 257 children referred to hospital from the schools.

The other eye diseases met with during the inspections were the following:— styes 28; ptosis of both eyelids 4; congenital ptosis of eyelids 3; nystagmus 1.

Ear, Nose & Throat Diseases. Other diseases not specified in Table XLIX were the following:— acute rhinitis 31; cleft palate and harelip 6; allergic rhinitis 4; otorrhoea 4; cerumen 1.

Children suffering from enlarged tonsils and adenoids were referred to the E.N.T. clinic for operations. 22 children were operated upon during the year.

Defective Speech. Children suffering from defective speech were dealt with by the Speech Therapist.

Diseases of the Heart and Blood. The usual advice was given to parents of children suffering from heart diseases and instructions were given to teachers to exclude such children from excessive physical training and to prevent them from overstraining themselves.

Children suffering from nutritional anaemia were given iron pills in addition to other food accessories such as milk, cod liver oil and vitamin tablets.

Pulmonary Diseases. No cases of pulmonary tuberculosis were detected during medical examinations by the School Medical Officers. Two cases of pulmonary tuberculosis were referred by private doctors to the Chest Specialist and were notified by him. They were excluded from school. All Tb contacts met with during inspections were referred to the chest clinic for examination and X-ray investigation and were kept under observation.

Other diseases met with were:— allergic asthma 4; bronchial asthma 2.

Nervous Diseases. The following ailments not mentioned in Table XLIX were also detected:— enuresis 54; maladjustments 13.

Deformities. The deformities noticed were:— congenital deformity of right hand 1; pigeon chest 1.

Mental Conditions. The number of mentally deficient children was 3 all of whom were idiots.

Other Defects or Diseases. Threadworms 12; tenia solium 6.

The control of the spread of infectious diseases in schools is an important function of the service. When communicable diseases were reported the affected children as well as their contacts were excluded from school for definite periods.

Infectious Diseases. The number of school children reported to be suffering from notifiable infectious diseases was 55.

TABLE L

Notifiable Infectious Diseases found in school children

Disease	No. of Cases
Measles	39
Chicken Pox	9
Whooping Cough	3
Scarlet Fever	2
Pulmonary Tuberculosis	2

Exemption from School. The total number of children recommended for exemption from further school attendance on medical grounds was 32.

TABLE LI

Physically Handicapped and Educationally Subnormal Children exempted from School

Ailment	Sex		Total
	Male	Female	
Anaemia & General Debility ...	1	8	9
Educationally Subnormal	3	1	4
Anti-Social Behaviour	—	2	2
Migraine	—	4	4
Puberty Trouble	—	2	2
Eyesight (impaired)	—	1	1
Backward	2	—	2
Pulmonary Tuberculosis	1	1	2
Incontinence of Urine	—	1	1
Deaf and Dumb	1	1	2
Epilepsy	1	—	1
Nervous Breakdown	1	—	1
Chorea	—	1	1
TOTAL	10	22	32

Nutrition. The present state of nutrition of school children is very satisfactory compared with that of the previous years. I am pleased to record that the incidence of undernourished children is on the down grade, due not only to the fact that there is a sufficient supply of food available to all classes of the population, but also to the fact that many parents are becoming conscious that children need a generous and nutritious diet.

TABLE LII

Classification of Children during Routine Medical Inspections according to their state of nutrition

No. of children inspected	A. — Good		B. — Fair		C. — Bad	
	No.	%	No.	%	No.	%
21,573	19,123	88.6	2,256	10.5	194	.9

Weighing and Measuring of all school children is carried out regularly. Height-weight tables are kept by the School Medical Officers as well as by the Officer in charge of the Child Welfare Scheme.

TABLE LIII

Child Welfare Scheme — Average Weights of Children

Age Groups 5-15 Years

Age Group	Area 1			Area 2			Area 3			Area 4		
				Boys								
	Stone	lbs.	ozs.	Stone	lbs.	ozs.	Stone	lbs.	ozs.	Stone	lbs.	ozs.
5—6 years	3	2	4	3	3	3	3	3	12	3	—	2
6—7 „	3	4	9	3	3	8	3	3	12	3	4	11
7—8 „	3	8	14	3	7	15	3	7	12	3	8	2
8—9 „	3	13	2	3	12	—	3	13	1	3	13	10
9—10 „	4	4	—	4	3	13	4	3	7	4	3	15
10—11 „	4	9	12	4	8	11	4	8	13	4	10	1
11—12 „	5	1	3	5	—	8	5	—	15	5	3	11
12—13 „	5	8	11	5	6	13	5	8	4	5	10	3
13—14 „	6	3	11	6	2	1	6	3	2	6	4	1
14—15 „	7	—	12	6	10	2	7	—	3	6	12	14
				Girls								
5—6 years	3	7	—	3	1	8	3	4	12	3	—	—
6—7 „	3	3	—	3	2	6	3	2	12	3	3	8
7—8 „	3	7	6	3	6	1	3	6	9	3	7	11
8—9 „	3	11	10	3	10	15	3	11	3	3	12	11
9—10 „	4	2	11	4	1	6	4	2	5	4	4	3
10—11 „	4	9	1	4	8	9	4	6	14	4	9	12
11—12 „	5	3	—	5	1	1	5	3	10	5	4	13
12—13 „	5	12	9	5	11	8	5	11	2	5	12	7
13—14 „	6	8	15	6	6	5	6	6	4	6	9	2
14—15 „	7	2	5	6	13	11	6	12	10	6	13	13

TABLE LIV

Average Heights of Children

Age Groups 5-15 Years

Age Group	Area 1		Area 2		Area 3		Area 4	
			Boys					
	Ft.	ins.	Ft.	ins.	Ft.	ins.	Ft.	ins.
5—6 years	3	9	3	8	3	9	3	6
6—7 „	3	8	3	8	3	8	3	8
7—8 „	3	10	3	10	3	10	3	10
8—9 „	4	—	4	—	4	—	4	—
9—10 „	4	2	4	2	4	2	4	2
10—11 „	4	4	4	4	4	4	4	4
11—12 „	4	6	4	5	4	6	4	6
12—13 „	4	7	4	7	4	8	4	7
13—14 „	4	10	4	9	4	10	4	9
14—15 „	5	—	4	11	5	-	5	—
			Girls					
5—6 years	3	7	3	8	3	9	3	7
6—7 „	3	8	3	8	3	8	3	8
7—8 „	3	10	3	10	3	10	3	10
8—9 „	4	—	4	—	4	—	4	—
9—10 „	4	2	4	1	4	2	4	2
10—11 „	4	4	4	4	4	3	4	4
11—12 „	4	6	4	5	4	6	4	6
12—13 „	4	8	4	8	4	8	4	8
13—14 „	4	10	4	9	4	10	4	10
14—15 „	4	11	4	11	5	—	4	11

AREA 1 comprises Valletta, Floriana, Msida, Gżira, Sliema, St. Julians, Mensija, Birkirkara, Lija, Attard, Hamrun, Balzan, Ta' Xbiex, St. George's, St. Vennera.

AREA 2 „ Marsa, Pawla, Tarxien, Ghaxaq, Marsaxlokk, Birżebbuġa, Żabbar, Fgura, Żejtun, Marsaskala, Cospicua, Kalkara, Senglea, Vittoriosa.

AREA 3 „ Gudja, Luqa, Kirkop, Safi, Żurrieq, Qrendi, Mqabba, Siġġiewi, Żebbuġ, Qormi.

AREA 4 „ Mosta, Naxxar, Gharghur, Rabat, Dingli, St. Paul's Bay, Mellieħa, Mgarr, Mtarfa.

Provision of Milk. Milk is provided free of charge to school children chiefly on medical and financial grounds. The number of children in receipt of milk in 1952/53 was 11,200. The average supply is 1/3 of a pint per head per school day. From investigations and enquiries carried out amongst parents during the inspections of children, it was roughly estimated that only about 13% of the school children were in the habit of taking one pint of milk per day in their homes.

Provision of Cod Liver Oil and other food accessories and drugs. Cod Liver Oil and other food accessories were given to children as in previous years. Cod Liver Oil was available for all children, the average dose being one tablespoonful daily.

TABLE LV

Average state of Nutrition from 1948/53

Nutrition	1948/49	1949/50	1950/51	1951/52	1952/53
Good	78.5 %	84.1 %	87.1 %	86.9 %	88.6 %
Fair	14.3 %	13.3 %	11.9 %	11.7 %	10.5 %
Bad	7.2 %	2.6 %	1.0 %	1.4 %	.9 %

TABLE LVI

Food accessories and drugs prescribed to children

Article	Quantity
Cod Liver Oil	780 gallons
Iron Tablets	18,100 tablets
Calcium Tablets	193,000 tablets
D.D.T. Hair Oil	200 ounces

TABLE LVII

School Children inspected by the Eye Specialist

No. of Children Examined	Defective vision	Trachoma			Conjunctivitis		
		New	Old	Cured	New	Old	Cured
25,168	487	14	7	8	147	145	89

* The figures shown in Table LVII are for children in Malta only. A special report on Trachoma in Gozo is given at page 30 (Table IX).

Cleanliness. The sanitary conditions of the school premises on the whole are very good but there are premises which have been taken over as schools and have not yet been rendered structurally fit for the purpose. Children in schools maintained a very satisfactory standard of cleanliness. Routine cleanliness inspections were carried out periodically by the school nurses; they have inspected 35,534 children during the year under review. Suitable preparations and necessary advice were given for disinfestation or delousing whenever the necessity arose.

Diphtheria Immunisation. Inoculations against diphtheria were carried out as in previous years. The majority of children inoculated were new entrants; the relatively small number of children immunised is due to the fact that many of the children are being inoculated during the pre-school age.

Refresher doses were given to children who had received the immunisation four or five years previously.

TABLE LVIII

Children Immunised against Diphtheria

Newly admitted children inoculated in school	699
Newly admitted children inoculated before admission ...	6144
Number of objectors and not inoculated	18
Number of children who received a refresher dose	78

Physical Training. Children are deriving great benefit form physical training. This is not only shown in the physical development of the children but also in the fact that the children are becoming more interested in sports, physical culture and healthy recreations.

Health Education. The teaching and practice of the art of hygienic living is imparted to the children not only by the School Medical Officer but also by the Health Education Officers and the School Nurses.

School Dental Service. Dental caries is the most serious problem in schools. It is the commonest of all defects in childhood and consequently steps have been taken not only to find the causes and correct teeth defects but also to prevent their recurrence.

TABLE LIX

School Dental Clinic (Malta)

Report of work carried out from 1st October 1952 to 30th September, 1953

(1)	Number inspected				6,474
(2)	Number found to require treatment				2,675
(3)	Number attended				6,412
(4)	Number who received complete treatment				3,116
(5)	Number sent for emergency treatment				3,467
(6)	Half-days devoted to: a) Inspections		105		
	b) Treatment		710		
		Total			815
(7)	Fillings: Permanent teeth		848		
	Temporary teeth		123		
		Total			971
(8)	Extractions: Permanent teeth		796		
	Temporary teeth		6,295		
	For regulation purposes		874		
		Total			7,965
(9)	Teeth extracted under General Anaesthesia:				
	Permanent		47		
	Temporary		781		
		Total			828
(10)	Administration of General Anaesthetics:				
	Number of sessions:		29		
	Number attended		143		
		Total			172
(11)	Scaling and polishing				67
(12)	Miscellaneous treatment				398
(13)	Refusals				32
(14)	Cases referred for X-rays				32
(15)	Applications for artificial restorations				44

V. HEALTH SERVICES

Public Health Laboratory

The total number of samples examined and analysed during 1953 was 22,497. The samples were submitted for chemical analysis or bacteriological examination by Sanitary Inspectors, Medical Officers and Medical Practitioners. Samples of water were taken by members of the Laboratory Staff itself conjointly with the Staff of the Water Works Department. Others being samples derived from various Government Departments, Defence Services and other sources.

The samples examined during 1950, 1951 and 1952 totalled 21,876, 20,251 and 22,634 respectively.

The high figure of samples examined annually has been maintained and there is no indication that it will be reduced.

Samples were made as follows :—

Food and drink (for examination or analysis in terms of the Food, Drugs, and Drinking Water Ordinance)	9,326
Water from public springs	1,385
Water from public boreholes	304
Water from private tanks	304
Water from other sources	176
Foodstuffs for bacteriological examination	276
Blood for serum reaction and titration	3,702
Swabs, etc. for bacteriological examination	3,164
Urine for chemical analysis	628
At the request of the Customs and other Government Departments	488
At the request of the Defence Services	11
Rats from Rodent Control Officer and from Defence Services ...	2,733

CHEMICAL WORK

Public Water Supply. Samples of water were taken regularly from the various sources of water supply and from numerous reservoirs and public taps situated in different localities of the Islands. The water was consistently found fit for drinking.

As chlorination of the water is one of the factors determining its safety, a rigid control of the extent of chlorination was maintained by means of chemical tests.

Boreholes and Shafts. The number of water samples from boreholes and shafts totalled 304. The analysis carried out concerned mainly their saline content. The highest saline content reached was found to be over 110 parts per 100,000 at the Misraħ Lewża sources. The lowest was found to be about 10, at Naxxar.

Service Mains. The number of water samples taken from service mains in the vicinity of repairs totalled 176, of which 5 were found to contain traces of free ammonia, 10 were found to contain a moderate proportion of free ammonia, and 2 were found to contain gross quantities; the other 159 samples were found free from signs of contamination.

Private Cisterns. Sanitary Inspectors submitted 304 samples of water taken from private cisterns and wells, 153 of which were found free from contamination and fit for drinking, while 100 were found to be grossly polluted and unfit. The remaining 51 samples, were found to contain traces of free ammonia and subsequently corrected and rendered fit by means of proper chlorination.

Food and Drink. As in previous years Sanitary Inspectors maintained a routine flow of samples of food and drink. A total of 9,326 samples were submitted, of which 63 were found to be unfit. The result of these examinations is contained in the following table.

TABLE LX

Analysis in accordance with the Food, Drugs, and Drinking Water Ordinance

Nature of sample	Number Examined	Found Abnormal	Nature of sample	Number Examined	Found Abnormal
Wheat	316	—	Cnicory	24	—
Bread	1,397	8	Sugar	76	—
Flour and Semolina	2,266	1	Sweets	55	—
Self-raising flour ...	5	—	Salt	36	—
Cornflour ...	3	—	Spices	33	—
Yeast	4	—	Pepper	78	—
Dough	5	—	Aerated water ...	554	1
Paste	1,022	—	Wine	464	—
Biscuits and Rusks ...	64	3	Vinegar	6	—
Pastries	60	1	Spirits	62	—
Milk	8	1	Beer	37	—
Milk powder ...	2	—	Eggs	33	—
Rkotta	26	—	Egg powder ...	21	—
Cheese	172	5	Cheesecakes ...	14	—
Maltese Cheese (gbejniet) ...	6	—	Tomato paste ...	372	39
Ice cream ...	109	—	Peas and Beans ...	128	—
Butter	176	1	Fruit Dried ...	52	—
Margarine ...	360	1	Meat preparations ...	90	—
Lard	456	—	Fish preparations ...	38	—
Oil	260	1	Sauce ...	41	—
Rice	222	—	Miscellaneous ...	10	—
Tea	93	—	Total ...	9.326	63
Coffee	78	1			
Cocoa	6	—			

Urine Analysis. The Medical Officers of Health remitted 628 candidates who were being medically examined prior to employment with the Government. 14 candidates were found to have albumin in the urine, 2 had glucose, and the rest were normal.

Pharmacy Inspection. All the pharmacies in Malta and Gozo were inspected during the year for the purposes of Section 36, Chapter 51, of the Laws of Malta. Although none of the pharmacies was found to be contravening the law, still there were occasions when the managing apothecaries were advised to improve conditions in their pharmacies.

Milk Marketing Undertaking. The Department of Milk Marketing Undertaking sent 35 employees engaged in the handling of milk for a blood-serum test. Reactions were negative. Moreover, the same department submitted 8 samples of flavouring syrup used in milk shakes which were analysed and reported upon.

One large tin of milk powder from the same department was found to be in a state of deterioration and declared unfit. One bottle of reconstituted milk was likewise found to be deteriorated and unfit.

Agriculture. The Department of Agriculture sent 9 samples of cow's milk for fat content. This was found to vary from 2.05 to 3.30%.

Police. Of 31 samples of raw goats milk seized in areas where the sale of raw milk is prohibted, none was found to contain added water.

One pot of fish-soup was found to contain white phosphorus. The total quantity present was estimated at 0.05 Gm.

Six samples of methylated spirit were found to be diluted with water in proportion from 5.74 up to 34.04 per cent by volume.

One sample of water from a well, suspected to be contaminated with diesel oil, was found to be free from contamination.

Stains on a car cushion were examined for the presence of semen. The result was negative.

Medical Stores and St. Luke's Hospital. One bottle of ether (diethyl) was submitted for fitness for use in general anaesthesia. It was found to conform with B.P. standards. Sulphonamide tablets, labelled sulphaguanidine, were analysed and found to be sulphadiazine. One bottle of hydrogen peroxide from St. Luke's hospital was found to be 20 volumes strong. From the same hospital came two samples of urine for presence of lead; results were negative. Testosterone and other pharmaceutical injections were submitted through the Senior Health Officer and after examination were found to have been prepared *secundum artem.*

The Electrical Engineer at St. Luke's Hospital submitted three powders for identification; they were found to be sodium carbonate, sodium aluminate, and hydrated lime.

Officer in charge Supplies and Commissioner for Gozo. The Officer i/c Supplies in the Medical and Health Department submitted a total of 308 foodstuffs, plus 1 insecticide and 15 detergents. The insecticide was found to be suitable for use as such, and the detergents were found to be of good quality but of different degrees. The foodstuffs consisting of 306 samples of ground coffee and 2 samples of peas, were all found to be fit and unadulterated. Similarly 21 samples of ground coffee submitted from the Commissioner's Office in Gozo were found free from adulteration.

Customs. This Department submitted various articles of edible and non-edible nature for classification before assessment of duty, namely cocoa-powder, dried milk and infant-food powders, corn starch, ice-cream mix, gluten powder, soya-bean flour, vegetable fat, soap, rubber tubing etc. Also for duty purposes 29 samples were submitted consisting of pollard, the flour content of which was determined, and samples of cheese, the composition of which was also determined. The same department submitted 9 samples of tea, which were ascertained to be arsenic-free before release for human consumption, and 17 samples of ethyl alcohol which were similarly found to be free from noxious ingredients.

Food and Commerce Control Office. Bottles of aerated water (lemonade) came from this office for identification of the sweeting agents; they were found to contain saccharin plus 3.5% w/v of cane sugar. Five samples of cheese were analysed for fat and protein content.

Services. The R.A.F., Safi Station, sent 4 samples of distilled water. These were analysed and found to conform with the required standard of purity.

The C.R.E., Malta Garrison, sent 1 sample of water for examination for presence of free CO2, and iron, manganese, and aulminium salts. No such salts were detected, but CO2 was found to be present in the proportion of 20.95 mgm. for 100 ml.

Other articles received from the Defence Services included 2 tins of stewed steak and 1 tin of tomatoes, which were all found to be free from metallic contamination and from bacteria; 1 stomach content was submitted by the Pathologist, David Bruce Hospital. It was examined for presence of barbiturates and alkaloids with negative results. 2 samples of tablets were also examined: 1 was identified as phenobarbitone, the other was found to be veganin.

BACTERIOLOGICAL WORK

The Bacteriological Section of the Public Health Laboratory performed clinical tests and investigations for general practitioners, and carried out frequent and regular examinations of the sources of water-supply as shown in Table LXV. Bacteriological examinations were also carried out in connection with food poisoning and also for testing the purity of ingredients used in the preparation of ice-cream, cheese and other foodstuffs. Many specimens were submitted for bacteriological examination from hospitals and other Government Departments.

Agglutination reactions. 3,515 samples of blood sera were submitted for agglutination test against the causative micro-organism of typhoid and undulant fever, by the slide method. The results are given in Table LXI hereunder :—

TABLE LXI

Results of Examination of Blood for Undulant and Typhoid Fever

	Positive reactions against Br. melitensis			Positive reactions against Salm. typhi			Negative Reactions	Total No. of Tests
	Malta	Gozo	Total	Malta	Gozo	Total		
January	22	—	22	2	—	2	149	173
February	22	1	23	8	—	8	137	168
March	18	2	20	8	1	9	113	142
April	20	4	24	12	1	13	201	238
May	34	7	41	2	1	3	259	303
June	57	16	73	8	2	10	276	359
July	51	8	59	11	1	12	417	488
August	47	7	54	4	—	4	377	435
September	58	10	68	16	—	16	329	413
October	36	10	46	26	5	31	292	369
November	17	19	36	8	2	10	194	240
December	18	9	27	3	1	4	156	187
Total ...	400	93	493	108	14	122	2,900	3,515

In 187 other cases complete titrations were carried out, repeated tests being often done on the same sample to observe changes in titre. In 35 of such cases positive results were obtained against *Brucella melitensis*, in 26 cases against *Salmonella typhi*, in 4 cases against *Proteus OX 19*, in one case against *Salmonella paratyphi A*, and in another case against *Salmonella paratyphi B*.

Blood Culture. Cultures were carried out in 151 samples of blood. Culture was carried out on *tryptose broth* and *tryptose agar*, and on *taurocholate broth* where the evidence pointed to the probability of a typhoid infection. From 15 samples *Brucella melitensis* was cultivated, *Salmonella typhi* from 12 samples and *Streptococcus* from 1 sample.

Inflamed joints. Eleven samples of fluids from inflamed joints were examined. The presence of *Brucella melitensis* was noted in one sample. In two other samples, agglutinations against *Brucella* were also carried out with positive results.

Abcesses. Out of 36 samples of the contents of abcesses, 12 showed the presence of *Staphylococci*, the *Staphylococcus aureus* being the commonest met with, 3 showed the presence of *Mycobacterium tuberculosis* and from one *Bacterium coli* was cultivated.

Pleural Fluids. Out of the 17 samples of pleural fluid, most of which were examined by cultural and animal inoculation tests, the *Mycobacterium tuberculosis* was detected in one, *Streptococcus pneumoniae* in another and *Streptococcus haemolyticus* in another.

Cerebrospinal Fluids. 39 samples were examined. *Mycobacterium tuberculosis* was isolated in 3, *Neisseria meningitidis* in 3 and *Streptococcus pneumoniae* in one.

Diphtheria control. In connection with measures to control diphtheria 2,023 swabs were examined throughout the year. The purpose of this procedure is to confirm bacteriologically every case remitted to the Isolation hospital in Malta and Gozo, and not to discharge the patient from isolation before at least two consecutive swabs have failed to show the presence of *Corynaebacterium diphtheriae.*

In special circumstances when the contacts of a case were engaged in occupations making them unusually liable to spread the infection, these contacts were also swabbed. Out of 142 thus examined 2 were found to carry *Corynaebacterium diphtheriae* which in one case was proved to be non-virulent.

Virulence tests were carried out when *Corynaebacterium diphtheriae* was isolated from discharging ears, and also in cases of diphtheria which yielded a positive result in spite of intensive treatment and when the patient was declared to be clinically cured.

A diagnostic service for medical practitioners is also provided free of charge.

Details of the number of examinations carried out are given in Table LXII.

Faeces and Urine. Out of 52 samples of faeces examined mostly coming from convalescent cases of Typhoid fever, the *Salmonella typhi* was cultivated in one case only.

Ninety two catheter samples of urine were received for bacteriological examination. In 20 only *Straphylococcus albus* was cultivated, in 18 *Bacterium coli*, in 4 *Streptococcus faecalis*, in 3 *Bacterium proteus*, in 3 *Mycobacterium Tuberculosis* and in one *Pseudomanas pyocyanea.*

In connection with the medical examination of candidates for Government appointments 628 samples of urine were examined; 14 showed the presence of albumin and 2 gave positive reaction for glucose.

Food poisoning. In connection with 9 suspected cases of milk poisoning 157 different samples of goat's milk were examined. In three cases the *Staphylococcus aureus* was cultivated and the samples contained pus as well. The goats were found to be suffering from mastitis. In one sample only blood was present and in another blood and few pus cells were present but no microorganisms were isolated.

In connection with 2 cases of ice-cream poisoning, 6 samples of ice-cream were examined. In one case the *Staphylococcus aureus* was isolated from the ice-cream as well as from the throat of an employee. In the other case no abnormalities in the samples submitted were detected.

Another case of suspected food poisoning was investigated. Two samples of cheese, bread and a bottle of soft drink were examined with negative findings.

Tuberculosis. 324 sputa were examined. Ninety-nine samples revealed the presence of *Mycobacterium tuberculosis* on direct examination. In 4 cases *Streptococcus pneumoniae* was cultivated, in 2 cases *Staphylococcus aureus* and in one case *Friedlander's bacillus.*

Seventy five samples of gastric washings were examined by guinea-pig inoculation and cultural methods for the presence of *Mycobacterium tuberculosis.* Most of these samples came from prospective emigrants who on X-ray examination revealed calcified foci or signs of infiltration. The *Tubercle bacillus* was isolated from 19 cases.

Ice-Cream. Samples of ice-cream were submitted to the laboratory and were examined by the methylene blue reduction test for grading from the hygienic standpoint. 109 samples were examined. Of these 72 were found to be Grade 1, 15 were found to be Grade 2 (satisfactory) and 22 failed to reach the necessary standard.

Skin Department. 130 samples of blood were tested for the Kahn & Wassermann reactions. Of these samples 17 gave a positive Wassermann and ten a positive Kahn. The rest yielded a negative result.

Thirty nine smears were submitted for bacteriological examination. Of these two showed the presence of *N. Gonorrhoeae;* one *Streptococcus faecalis;* four *Gram positive bacilli* and 12 showed only *Staphylococci.* 19 cases of suspected ringworm were examined for presence of spores with negative findings.

TABLE LXII

Results of examination of Swabs for C. Diphtheriae

Swabs received from Isolation Hospitals	Onset of Disease			Period of Convalescence												Swabs from Contacts	Total
	1st	2nd	3rd	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th		
Positive	104	18	4	38	28	21	8	11	5	5	2	3	3	—	—	2	252
Negative	402	264	186	252	234	106	66	30	19	17	20	19	4	6	6	140	1,771
Total	506	282	190	290	262	127	74	41	24	22	22	22	7	6	6	142	2,023

E.N.T. Thirty five swabs were submitted from cases of ear discharge for the isolation of the responsible microorganisms and their sensitivity to sulphathiazole, aureomycin, terramycin, chloromycetin, streptomycin and penicillin.

Malaria. On three occasions blood smears for malaria were examined with negative results. No cases of suspected local origin were reported during the year.

Trachoma. Six conjunctival scrapings were examined for the presence of inclusion bodies, which were detected in one case only.

Leprosy. Six nasal smears and six smears from a skin slit were examined for the presence of *Mycobacterium leprae*. *Hansen's* bacillus was detected in one nasal smear and in its corresponding skin slit smear.

Miscellaneous. Four ascitic fluids were examined for the presence of *Mycobacterium tuberculosis* or other pathogenic mircoorganisms with negative results.

One hydrocele fluid examined was found to be sterile.

In connection with 2 cases of *Tetanus neonatorum*, samples of talcum powder, thread and instruments used were examined for the presence of *Clostridium tetani* with negative results.

Dead chickens and samples of faeces were submitted from Government Experimental Farm at Għammieri. These were examined with special reference to the presence of microorganisms in connection with bacillary white dysentery. No pathogenic organisms were isolated.

Two splenic smears for the presence of L.D. Bodies yielded a negative result.

Scales and scrapings from an infected toe-nail and sinus were examined with a negative result.

Injections of nikethamide, testosterone propionate, morphine and hyoscine, adrenaline and water were tested for sterility and found to be so.

Plague. No cases of suspected plague were reported during the year. Dead rats and mice were examined for any suspicion of plague infection. The rats were submitted by the Rodent Control Officer and by the Services — none showed any suspicious signs of the disease. The number and species of the rats is shown in Table LXIII.

TABLE LXIII

Number and species of rats examined (Civil).

Month	Rattus Norvegicus	Rattus Frugiverus	Rattus Rattus	Mus Musculus	Total	Found infected
January	24	2	1	—	27	Nil
February ...	117	—	—	1	118	Nil
March	40	—	2	—	42	Nil
April	73	2	11	6	92	Nil
May	189	5	—	4	198	Nil
June	68	—	—	6	74	Nil
July	102	4	—	3	109	Nil
August	187	4	1	11	203	Nil
September ...	289	2	—	24	315	Nil
October	179	2	—	4	185	Nil
November ...	69	11	—	1	81	Nil
December ...	140	4	—	2	146	Nil
Total ...	1,477	36	15	67	1,590	Nil

TABLE LXIV

Number and species of rats examined (H.M. Dockyard and Services).

Month	Rattus Norvegicus	Rattus Frugiverus	Rattus Rattus	Mus Musculus	Total	Found infected
January	--	6	85	14	105	Nil
February ...	1	—	37	6	44	Nil
March	1	3	34	13	51	Nil
April	3	4	56	25	88	Nil
May	6	2	47	45	100	Nil
June	—	—	25	5	30	Nil
July	—	—	41	9	50	Nil
August	4	9	113	30	156	Nil
September .	17	17	129	61	224	Nil
October	-	5	66	14	85	Nil
November ...	2	12	40	11	65	Nil
December ...	17	15	59	16	107	Nil
Total ...	51	73	732	249	1,105	Nil

TABLE LXV

Bacteriological Examination of Water.

Springs, etc.	Probable number of coliform organisms in 100 ml. of sample (Mc'ready's Tables)								
	Nil	3 to 10	11 to 20	21 to 30	31 to 40	41 to 50	90	180	Total number of samples tested
Springs:									
Malta:									
Wied il Kbir	52	...	...	...	...	...	...	...	52
Tal Hlas	52	...	...	...	...	...	...	...	52
Wied il Għasel	52	...	...	...	..	...	..	..	52
Fawwara (Qrendi)	53	...	...	...	...	...	...	1	54
Buskett (Siġġiewi)	52	...	...	...	...	...	...	...	52
Għajn Qajjed	52	...	...	...	...	...	...	...	52
Għajn Tuffieħa	54	...	...	...	...	...	...	2	56
Mellieħa	52	...	...	...	...	...	...	1	53
Dingli Pumping Station ..	52	...	...	...	...	...	...	...	52
Kandia	54	...	...	...	...	...	...	2	56
Gozo:									
Għajn Abdul	26	...	...	...	...	...	...	...	26
Għar Ilma	26	...	...	...	...	...	...	...	26
Marsalforn	32	1	...	...	...	...	...	5	38
Mġarr ix-Xini	30	...	...	...	...	..	...	4	34
Mġarr Pumping Station ...	31	1	...	...	...	...	...	4	36
San Lawrenz	2	...	...	...	...	...	...	1	3
Reservoirs:									
Schinas	52	...	...	...	...	...	...	...	52
Luqa	52	...	...	...	...	...	...	...	52
Ta' Qali	53	...	...	1	...	...	...	...	54
Santa Lucia (Gozo)	3	...	...	...	...	...	...	...	3
Taps:									
Valletta	52	...	...	...	...	...	...	...	52
Floriana	52	...	...	...	..	...	...	...	52
Hamrun	52	...	...	..	...	...	...	...	52
Sliema	53	...	...	...	...	...	...	1	54
Msida	53	...	...	...	...	...	...	1	54
Qormi	54	...	...	...	...	...	...	2	56
Żebbuġ	52	...	...	...	...	...	...	...	52
Cospicua	105	...	...	...	...	...	...	1	106
Żejtun	52	...	...	...	...	...	...	...	52
Total	1,357	2	...	1	...	...	...	25	1,385

ENTOMOLOGICAL WORK

The Laboratory has had various occasions to carry out research in connection with insect vectors, and for this purpose the Entomologist visited 53 premises in various parts of the Island in connection with his search for the *Phlebotomus pappatasii* after cases of Kala Azar. The Phlebotomus was, in fact, found and collected in 4 of the premises visited. The Entomologist visited also various watercourses, pools and other localities suitable for breeding of mosquito larvae. No anopheline, however, were discovered.

Flea-Index. The preventive campaign by the Department against plague has been maintained. 2695 dead rats, submitted by the Rodent Control Officer and by the Defence Services, were examined for signs of infection. Besides, a total of 38 live rats, from the same sources were examined for flea-index; 202 fleas were collected, made up of the following species, *Xenopsylla cheopis* 185, *Leptopsylla* 8, and *Ctenocephalus* 9.

PORT HEALTH SERVICE

The number of ships and aircraft inspected during the year under review was 1636 and 1546 respectively as against 1644 and 2175 respectively during the previous year. The number of aircraft inspected is less than that of the preceding year; this, however, is not to be taken as denoting a decrease in traffic as the figure given is only for those aircraft which were attended to by the Airport Medical Officer and not for all aircraft touching down at Airports. Air-traffic is actually increasing and there seems to be no immediate probability of any falling off in the number of aircraft and air-passengers calling at Malta.

During the year under review there were no major epidemics abroad which threatened directly the health of the population of these Islands. Nevertheless, sporadic cases of small-pox, typhus, and relapsing fever occurred in North Africa and the Near East. Whereas sea-passengers usually arrived from these countries after the incubation period, air passengers reached Malta within the incubation period and therefore necessitated constant vigilance all the year round. Small outbreaks of epidemic diseases in countries which are normally healthy required special attention, as for example the outbreak of small-pox in Yorkshire and Lancashire in March, which necessitated the keeping under medical surveillance of all the passengers arriving from the U.K. both by sea and by air.

One passenger arriving by air was found to be suffering from a malarial attack and was remitted to the Isolation Hospital. Several other passengers, who were found to be suffering from various non-infectious complaints were sent to King George V hospital.

It has now become common practice for Masters of ships of various nationalities to send wireless messages to the Port Health Office asking for medical advice. These requests have always been promptly answered and the ships could in many instances proceed to destination without interrupting their voyage, but in a few cases when the patients on board the ships required hospitalization the Masters were advised accordingly.

Masters of ships calling at Malta have often availed themselves of the opportunity to land sick members of their crew for medical or surgical treatment in our hospitals. Amongst the infectious cases thus landed during the year the most common were measles and chickenpox. There were also two cases of leprosy. As regards the infectious diseases in transit, excluding venereal diseases, the most common was pulmonary tuberculosis, followed by chickenpox, malaria, measles and mumps.

I wish to place on record the case of the Polish ship m.v. "Batory" which called here from Indian ports on the 28th February. It had among its 500 passengers an Indian student who was diagnosed by the ship's surgeon and an Indian doctor on board, as suffering from chickenpox. Our Port Medical Officer considered this case to be small-pox and took all the necessary precautions. The patient was later landed at Gibraltar where his disease was confirmed as small-pox.

The water ambulance which had been destroyed by enemy action during the war was replaced by a new one in December.

The Port Sanitary Inspector paid various visits of inspection on board ships and advised about sanitary accommodation. He also kept under constant supervision for hygienic purposes the bonded stores, warehouses and the establishments for the storage of foodstuffs in the harbour area and regularly he took samples for examination at the laboratory of the Department.

A summary of the work performed by the Port and Airport Health Staff during 1953 is shown in Table LXVI.

TABLE LXVI

Summary of work performed by the Port Health Staff in 1953

Ships inspected in the Grand Harbour	1,534
Ships inspected in all the harbours	1,636
Ships inspected at Marsaxlokk Bay	81
Ships inspected at Marsamxett Harbour	17
Ships inspected outside harbour	4
Aircraft dealt with by the Port Medical Officers	1,546
Ships inspected and admitted to pratique	1,632
Ships inspected and kept in quarantine	4
Ships having or having had infectious diseases on board	26
Aircraft having infectious diseases on board	NIL
Number of cases of infectious diseases on board	45
Number of cases of infectious diseases disposed of prior to arrival	4
Number of cases of infectious diseases landed at Malta	13
Passengers (by sea) served with warning for surveillance	1,539
Passengers (by air) served with warning for surveillance	459
Passengers (by sea) served with "notice" re infectious disease	864
Passengers (by air) served with "notice" re infectious disease	905
Passengers kept under surveillance inspected at the Port Health Office	46
Inspections of imported fresh fish	...(tons) 146
Ships partially disinfected	13
Ships partially fumigated	NIL
Aircraft disinsected or disinfected	NIL
Ships, lighters and other craft inspected by the Port Sanitary Inspector	1,414
Certificates re-Hay, Straw and Cotton seed examined	8
Certificates re Tomatoes examined	63

Foodstuffs, etc., examined by the Port Sanitary Inspector :—

Preserved	2,900 lbs.
Preserved Vegetables	11,000 lbs.
Tinned meat	2,700 lbs.
Frozen meat	2,000 lbs.
Pigs' feet	3,000 lbs.
Fats	300 lbs.
Soups	400 lbs.
Tinned fish	500 lbs.
Tinned milk	161,800 tins
Sugar	900 lbs.
Jam	6,200 lbs.
Biscuits	1,750 lbs.
Chocolate & Sweets	1,700 lbs.
Coffee	900 lbs.
Oatmeal	7,600 lbs.

also discarded mess gear, H.M. Victualling Yard.

FREE IMMUNIZATION SERVICE

This service was under the direction of a Medical Officer, who had with him two Sanitary Inspectors, one Nurse and one M.T. driver. The team visited in rotation towns and villages and with the help of the local Health Visitor and Sanitary Inspector offered free immunization against Typhoid fever and Diphtheria and B.C.G. vaccinations. Inoculations were carried out at Government Schools but whenever possible arrangements were also made for the team to visit private schools.

Some time before a district was visited the Sanitary Inspector attached to the team went to the local school, and explained to the head-teacher what was expected from him so that the session of immunization in his district might by successful. Likewise the Rev. Parish Priests were contacted and their help and encouragement were solicited.

Three days before field work in immunization was commenced, the mobile cinema van of this Department visited the district in the evening and exhibited films with running commentary emphasizing the value of immunization to the public. This information was also brought to the notice to heads of families by house to house visits by the Sanitary Inspector of the area. During the visit, the Sanitary Inspector handed out to heads of families cards for all children requiring immunization. The Health Officers of the Education Department likewise were of great help in explaining the value of immunization to parents and upper forms school children.

Sessions for immunization against Tuberculosis and Typhoid or Diphtheria were mostly carried out on alternate weeks. During the sessions devoted to B.C.G. vaccination the first three days of the week were employed in testing with the Adrenalin Von Pirquet method and the following three days to vaccinating with B.C.G. all those persons who had given a negative (less than 3 mm. infiltration) result. Children and young adults from 1 year to 21 years of age were tested and vaccinated. The dose was taken as 0.1c.c. of a fresh suspension of B.C.G. Bacilli prepared at the State Serum Institute of Denmark.

With regard to Diphtheria, children from 6 months to 6 years were given two injections of 0.5c.c. A.P.T. with an interval of 4 weeks between the first and second injection. Inoculations against Typhoid were carried out with anti-typhoid paratyphoid A B C Vaccine (T.P.3) and were reserved for older children and young adults between the ages of 9 and 21 years. The initial dose was 0.2c.c. and the second inoculation given after an interval of 4 weeks was 0.5 c.c.

During 1953 the total attendance for anti-typhoid immunization was :—

1st Dose 2782
2nd Dose 2228

giving an overall percentage of immunised persons of 28.1%.

During the same year Diphtheria totals were :—

1st Dose 2066
2nd Dose 1583

giving a 24.3% of immunised infants.

The above figures do not include children inoculated by the School Medical Officer, by the Child Health Officer or by private practitioners.

During the year under review 11,735 persons were tested with Adrenalin Von Pirquet and out of this total 5201 were vaccinated with B.C.G. being negative reactors. 5022 were positive reactors, 1413 failed to present themselves for final checking of the test and 99 negative reactors refused vaccination.

Anti-typhoid immunization gave very favourable figures in 1953. This is largely due to the fact that this age group is mostly made up of grown up children who can present themselves for vaccination with the expressed wish of the parents, but without the necessity of the parents having to carry the child themselves, thereby leaving the household work. Diphtheria did not show an appreciable rise perhaps because of this reason. Mothers are very reluctant to leave the house and spend some time waiting to have their children immunised. B.C.G. vaccination showed a rise of 4,000 from the 1952 figures. But B.C.G. has always been much more popular with the local public especially in rural areas.

Tables LXVII, LXVIII show the areas visited by the team and the number of persons inoculated. The figures showing the result of B.C.G. vaccination is given in Table XXX.

TABLE LXVII

Typhoid Immunisation

DISTRICT	No. of Persons Registered	1st Dose	2nd Dose	Refresher Dose	Ex-Patient	Unfit for Vaccination	% Immunised
Dingli	264	71	61	—	—	—	23.1
Marsamxett	250	69	45	—	1	2	18.0
Safi	112	30	26	—	—	—	23.2
Żurrieq	540	408	346	—	—	—	64.0
Qrendi	416	189	161	—	—	1	38.7
Kirkop	229	38	36	—	—	2	15.2
Siġġiewi	906	232	186	1	2	3	20.6
St. Joseph Asylum (Żabbar)	40	29	29	—	—	—	—
Approved School (Hamrun)	73	73	73	—	—	—	100.0
Cini's Institute (Hamrun)	60	32	32	—	—	—	53.3
Total Malta ...	2,890	1,171	995	1	3	8	34.4
GOZO							
Nadur	726	155	83	—	—	6	11.4
Qala	366	146	104	—	—	3	28.4
Victoria	853	292	210	—	—	1	34.2
Xaghra	528	283	241	—	—	—	45.5
Xewkija	838	176	140	—	—	—	16.7
Ghajnsielem	354	127	112	—	—	8	31.6
Sannat	298	111	75	—	1	4	25.5
Munxar	120	44	30	—	—	—	25.0
St. Lucia & Kercem ...	260	97	91	—	—	5	35.0
San Lawrenz	100	2	1	—	—	—	1.0
Ghasri	76	9	9	—	—	—	11.8
Gharb	234	90	80	—	1	14	34.1
Żebbuġ & Marsalforn ...	216	79	57	—	—	3	23.1
Total Gozo ...	4,999	1,611	1,233	—	2	44	24.6
Total both Islands ...	7,889	2,782	2,228	1	5	52	28.1

TABLE LXVIII

Diphtheria Immunisation

DISTRICT	No. of Persons Registered	1st Dose	2nd Dose	Refresher Dose	Ex-Patient	Unfit for Vaccination	% Immunised
Dingli	121	42	27	2	1	3	23.9
Marsaxlokk	255	101	62	17	2	3	30.9
Safi	156	56	48	16	1	2	41.0
Żurrieq	726	269	228	44	—	5	37.4
Qrendi	358	146	119	12	—	5	33.5
Kirkop	219	65	65	14	—	3	37.6
Siġġiewi	662	117	92	—	—	13	31.5
St Joseph Asylum (Żabbar)	25	23	23	—	—	—	84.0
Approved School (Hamrun)	—	—	—	—	—	—	—
Cini's Institute (Hamrun)	13	13	13	—	—	—	100.0
Total Malta ...	2,536	835	677	105	4	34	26.8
GOZO							
Nadur	638	174	111	—	—	4	17.3
Qala	280	75	47	—	—	4	17.5
Victoria	608	178	142	—	1	2	23.3
Xaghra	447	228	182	—	—	18	40.7
Xewkija	747	74	33	—	—	3	4.4
Ghajnsielem...	347	142	122	—	2	10	35.1
Sannat	213	75	44	—	2	3	20.6
Munxar	70	35	34	—	—	—	48.5
St. Lucia & Kercem ...	137	82	52	—	—	7	37.9
San Lawrenz	56	—	—	—	—	—	—
Ghasri	41	—	—	—	—	4	—
Gharb	126	84	80	—	—	5	6.34
Żebbuġ & Marsaforn ...	155	87	59	—	—	25	38.06
Total Gozo ...	3965	1234	906	—	5	85	22.8
Total both Islands ...	6491	2066	1583	105	9	119	24.3

PUBLIC CLEANSING

This service has met with some difficulties and was carried out at the expense of intense efforts and labour by the staff concerned. Certain householders apparently have not yet realised the importance of cooperation in our campaign for cleaner streets and thoroughfares; perhaps our drive to enlist public support will eventually have successful results and help maintain our streets and public places clean and tidy.

Scavenging. This service continued to carry out its normal activities during the year under review.

The cleaning of streets was daily carried out in Malta and Gozo while the beaches at Sliema, St. Julian's, St. Paul's Bay, Ghar-Lapsi and Marsalforn, Gozo, were regularly cleaned during the summer period by scavengers specially employed.

The mechanical-sweeper continued to function during the night in the Valletta area. A gang of scavengers was specially employed for the purpose of cleaning and flushing the Valletta Market during the evening, after normal closing time. This new system, besides giving more efficient results, eliminated altogether the inconvenience that was being caused to the public and stall-keepers alike.

The slop-water removal service by 5 motor tanks detailed for the purpose continued to operate in those districts not provided with sewerage.

House-Refuse Collection Service. The collection of domestic-refuse continued to be regularly performed while the removal of ashes and refuse from Military areas was also carried out.

The works in connection with the extension of the Pulverizing Plant at the Refuse Disposal Centre were completed by the end of the year and it is presumed that the plant would start functioning to full capacity in the near future.

From the house-refuse collected during the year under review, which amounted to 10,278.396 tons the following by-products were taken:—

Pulverized manure	7,235 tons
Scrap paper	274 ,,
Waste cardboard	31 ,,
Firewood	11 ,,
Rags	10 ,,
Scrap iron	4 ,,
Glass bottles	1 ,,

The by-products were sorted out, treated and disposed of on the local market for £2,680. 12. 7. Fees raised through the use by private parties of the weighbridge installed at the Refuse Disposal Centre amounted to £566. 16. 10.

From the sale of the by-products remaining from last year and collected during the year and from weighbridge fees a sum of £3,247. 9. 5 was realized as detailed hereunder:—

Pulverized manure	7,198 tons for	£1,805 7 9
Scrap paper	274 ,, ,,	276 16 —
Waste cardboard	30 ,, ,,	76 16 —
Firewood	11 ,, ,,	86 5 —
Rags	10 ,, ,,	56 — —
Scrap iron	40 ,, ,,	277 3 —
Glass bottles	16 ,, ,,	82 4 10
Small quantity of earthenware		20 — —
		£2,680 12 7
Weighbridge fees		566 16 10
Total Revenue ...		£3,247 9 5

2717 tons of other refuse of no value were incinerated at the Luqa Dump and about one ton of glass bottles were supplied to the Government Medical Store.

Maintenance of Public Conveniences. During the year a special drive was carried out for the painting and whitewashing of practically all the Public Conveniences in Malta and Gozo. No effort was spared to raise their standard of cleanliness and many repairs were effected. However, it is distressing to report the deplorable behaviour of certain irresponsible persons and it is to be regretted to record that wilful damage and fouling was rampant in many latrines not provided with attendants.

The beach-latrines for men at St. Paul's Bay, Armier and Sliema as well as for women at Qui-si-Sana and under the Tower, Sliema, were opened during the summer-months and were duly provided with attendants.

RODENT CONTROL

Though no major infestations were reported during the year, the Rodent Control Section did not relax its efforts and proceeded with the systematic deratting of the towns, villages and sewers of both Islands. The importance of these preventive measures is now fully appreciated by the public and signs of infectations or traces of rats are immediately reported to the Rodent Control Officer.

A total of 32 towns and villages, together with surrounding areas, were given complete treatments during the year whilst the sewers at Valletta and Floriana and at Victoria and Għajnsielem in Gozo were given routine treatments at six monthly intervals.

The Rodent Control Officer also attended to 2,352 cases of minor rats and mice infestations reported by the public; a total kill of 5,293 rats and 730 mice was recorded following treatment.

In connection with surveys for rat infestations the rodent control squads inspected 44,987 premises of which 9,097 were found to require treatment. Premises requiring rat proofing works and accumulation of rubbish affording harbourage for rats were reported to the Sanitary Inspector of the area.

The Rodent Control Committee, made up of representatives of this Department and the Defence Services, met six times during the year to coordinate the work of the several departments as regards rodent control work and to discuss the progress achieved. Complete co-operation prevailed at these meetings thus ensuring uniformity of treatment and concerted action when contiguous areas under civil and Services control were involved. The Rodent Control Officer demonstrated measures for the extermination of rats to personnel of the R.A.F.

For purposes of control against plague the Rodent Control Officer submitted 120 live rats to the laboratory for flea-index and examination.

The success of the rodent control campaign can be gauged by the fact that the number of cases of Murine Typhus reported during the year is the lowest ever recorded. Murine Typhus first made its appearance in these Islands during 1944 and the incidence of this disease has been decreasing year by year. Prompt action is invariably taken for the deratting of the immediate area whenever a new case is reported.

The estimated number of rats destroyed and the number of dead rats found during the year is given in Table LXIX while other information in connection with rat control work is given in Tables LXX and LXXI.

TABLE LXIX

Number of rats destroyed during 1953

Period	Estimated number of rats killed	Corresponding number for previous year	Dead rats collected	Corresponding number for previous year
16th December, 1952 to 15th February, 1953	4,323	5,233	191	477
16th February, 1953 to 15th April, 1953	3,320	4,065	248	479
16th April, 1953 to 15th June, 1953 ...	3,528	3,589	506	345
16th June, 1953 to 15th August, 1953 ...	3,062	2,862	472	400
16th August, 1953 to 15th October, 1953	3,083	3,515	618	554
16th October, 1953 to 15th December, 1953	3,238	3,768	300	475
Total	20,554	23,032	2,335	2,730

TABLE LXX

Quantity of poison used in the preparation of baits (in ounces)

Zinc Phosphide	Arsenic	Alpha-Naphthyl-thio-urea (Antu)	Red Squill Powder
$2227\frac{3}{4}$	Nil	$129\frac{3}{4}$	$238\frac{3}{4}$

TABLE LXXI

Summary of operational details in connection with the destruction of rats by the prebaiting method

First Treatment

No. of Areas given first treatment	Quantity of plain baits laid (in ounces)	Plain bait takes observed	Quantity of poison baits laid (in ounces)	Poison bait takes observed (in ounces)	Dead rats collected	Estimated number of rats killed by poisoning
232	47,876	13,729	11,359	$7,053\frac{1}{2}$	2,269	19 500

Second Treatment

No. of Areas given second treatment	Quantity of plain baits laid (in ounces)	Plain bait takes observed	Quantity of poison baits laid (in ounces)	Poison bait takes observed (in ounces)	Dead rats collected	Estimated number of rats killed by poisoning
232	15,132	1,171	1,070	974	66	1 054

INSECT CONTROL

As in previous years an intensive campaign against insects was carried out especially during the Summer months. A 5% liquid D.D.T. solution prepared by this Department and D.D.T. powder were mostly used.

D.D.T. powder of 5 or 10% strength was used for the eradication of bugs, cockroaches and other insects from private dwellings, warehouses, factories etc. An empty granary pit in Floriana which was heavily infested with cockroaches was successfully treated by repeated pumping of D.D.T. dust by means of "rotary blowers". On another occasion the rotary blower helped to stop an infestation of "bristle tails" (Lepsima Saccharina) from spreading in the archives of a Government Department.

Active measures were taken throughout the year but especially during the Summer months against fly nuisance. Accumulations of refuse and deteriorating organic material were removed by order of the sanitary authorities and spraying with D.D.T. liquid regularly carried out.

Action against the breeding of mosquitoes was also intensified. Stagnant pools of water were drained, a number of water cisterns in gardens and on roofs of houses were cleared of weeds and some water tanks were emptied of their contents and treated with insecticides including D.D.T.

Liquid D.D.T. solution was also used to disinfest 52 houses and their neighbourhood where cases of Leishmaniasis had been reported.

TABLE LXXII

Summary of work performed in connection with Insect Control

Places treated with D.D.T.	Liquid 5 °/₀ solution	5 or 10 °/₀ dust
Government hospitals and Institutions	721 gallons	80 lbs.
Private dwellings	198 „	202 „
Private schools...	20 „	10 „
Factories and shops	71 „	69 „
Markets...	49 „	—
Civil Abattoir	29 „	—
Refuse dumps...	94 „	80 lbs.

FOOD AND DRINK

The quality and standard of food and drink were ensured by frequent visits of inspection of bakehouses, confectioneries, restaurants, flour mills and wine, beer and lemonade factories and other premises in which food and drink were prepared, manufactured or stored. Samples were frequently taken from such premises and also from shops.

Officials of this Department were often called to examine tins of sweetened condensed milk which had been returned to the Milk Marketing Undertaking by the public as unfit for consumption. A total of 4,378 tins were examined out of which over 863 were found unfit for human consumption. The rest were released for sale to confectioneries.

"Certificates of unfitness" covering a total quantity of 21, 096 lbs. of deteriorated foodstuffs were issued during the year; the foodstuffs in question were destroyed or disposed of under the supervision of this Department.

The following table shows the articles of food unfit for human consumption and destroyed by Sanitary Inspectors during the year.

TABLE LXXIII

	Number of articles	Weight in lbs
Tinned milk	519 tins	460
Cheese and milk products	595 tins	215
Lard	50 packets	25
Margarine	14 packets	7
Tinned meat	1,085 tins	6,197½
Fresh, processed or prepared meat	92 parcels	3,750
Fowls and poultry	31 head	117
Soups	65 tins	25
Tinned fish	268 tins	123
Fresh or cured fish	6 parcels	75
Shell fish	3 parcels	39
Tinned fruits and vegetables	233 tins	329
Fruits, vegetables and cereals	13 parcels	200½
Tomato paste	93 tins	511½
Sugar, sweets, and confectioneries	483 tins	1,863
Condiments	114 tins	46
Paste, bread and flour	60 parcels	81½
Wines and minerals	6 bottles	—
	3,730 articles	14,065 lbs.

FOOD POISONING

During the year seven outbreaks of food poisoning were brought to the knowledge of the Department. Three were due to the consumption of goats' milk, two to the consumption of ice-cream, and the other two were attributed to the consumption of meat. None of the food poisonings was of a serious nature, the patients recovered quickly without complications.

In the cases of milk poisoning the milk was consumed raw and on investigation it was ascertained that in the three outbreaks the milk was yielded by animals suffering from abcesses of the udder.

In the poisoning due to the consumption of meat two families were involved one in each outbreak. There were nine patients in all. Enquiries revealed that the patients had consumed meat which was kept at home unprotected and exposed to contamination by flies and dust.

Of the poisonings due to the consumption of ice-cream the most important occurred in August. The ice-creams were manufactured at a small factory and were supplied on a Sunday at a wedding party at Lia and at a reception at Birkirkara. 45 patients were interviewed but there were certainly many other patients. Of those interviewed 20 had partaken of ice-cream at the Lia wedding and 25 had ice-cream at the Birkirkara reception.

The clinical features manifested were more or less similar in all the cases with the predominating symptom of acute and profuse diarrhoea. The incubation period was fairly long (average 12 hours) and in some cases the initial colicky pains preceding the diarrhoea were accompanied by pyrexia (102°F).

The cases were notified to this Department on Tuesday morning that is two days after the occurrence of the poisoning and a surprise inspection was immediately effected at the factory concerned, but nothing abnormal was detected. Samples of stools from 5 patients who were still suffering from diarrhoea were submitted to the laboratory with negative results. Some ice-cream that was left over at the Birkirkara reception was submitted for bacteriological examination but the result was also negative.

SANITARY INSPECTORATE

District Sanitary Inspectors carried out 192,701 inspections of licensed premises in Malta and Gozo during the year.

	Malta	Gozo
Bakehouses, flour mills, paste factories	26,241	2,391
Grocery shops	29,631	5,977
Grocery shops licensed also for the sale of wine and spirits	19,494	1,608
Confectioneries and shops for the sale of cheesecakes ...	12,865	401
Restaurants and coffee shops	16,907	1,042
Butchershops	16,678	2,597
Wine and spirit shops	24,678	4,066
Aerated water factories	2,784	163
Milk shops and dairies	18,066	415
Barbers	4,930	677

The number of samples submitted by Sanitary Inspectors to the Laboratory for examination was :—

	Malta	Gozo
Foodstuffs	8,015	897
Drinks	1,273	61
Water	580	30

The number of inspections of houses made by Sanitary Inspectors in Malta and Gozo during 1953 was 111,233 and legal proceedings were instituted as follows :—

	Malta	Gozo
Houses kept dirty	2,945	270
Houses having accumulation of refuse or dung	1,498	364
Houses where animals were kept in contravention	1,238	293
Households ordered to remove nuisances	5,036	999
Households reported in contravention of sanitary laws and regulations	645	128
Households reported upon for special defects	8,233	1,246

The number of inspections of house-drains was as follows :—

	Malta	Gozo
Drains inspected	39,000	3,970
Drains tested	4,538	355
Drains found defective	3,217	61
Drains found obstructed	3,276	43
Cesspits cleaned by order of the Sanitary Authorities ...	8,862	471
Cesspits reported in contravention	359	9

The number of new houses and other buildings completed during the year was 1,857 and the number of alterations in existing buildings was 662.

During the same period 980 houses were connected with the public sewer and 534 were connected with cesspits.

The number of alterations in existing drains connected with the public sewer was 815 and in those connected with cesspits 159.

A total of 20,382 inspections of premises under construction was made during the year.

The number of disinfections or disinfestations of houses performed by Sanitary Inspectors in Malta and Gozo after cases or suspected cases of Infectious diseases during the year was as follows:—

	Malta	Gozo
Typhoid fever	117	4
Tuberculosis	110	3
Diphtheria	195	46
Cerebro-spinal Meningitis	5	3
Poliomyelitis	29	8
Scarlet fever	15	2
Typhus Murine	7	—
Leprosy	10	2
Erysipelas	1	—
Puerperal fever	6	—
Measles	2	—
Leishmaniasis	52	—
Broncho-pneumonia	4	—
Varicella	2	—

The number of Statutory Notices issued during the year was as follows:—

General defects and minor nuisances	2,179
The laying of house drains and their connection with the public sewer	477
The emptying of polluted water tanks	111

POPULAR HEALTH EDUCATION

The Mobile Cinema Unit of this Department continued its normal work during the year under review. All cities, towns and villages of Malta were visited several times during the year. Outlying hamlets which have a sizeable population have been visited for the first time with success. The shows are given after dark and the estimated number of people in the audiences attending the shows was 71,550 which proves the popularity of these performances.

Eight different programmes were shown during the year. These programmes involved the projection of nine different health films and sixteen other educational films which are projected to liven the programmes and catch the crowds for the main health film feature. These educational films are lent to the Mobile Cinema Unit through the courtesy of the British Council Representative in Valletta and the Visual Education Centre of the Education Department. During the Coronation Fesivities a special film show was given to the inmates of the following five institutions:— St. Patrick's Salesian Institute, Sliema; St. Joseph Institute, Hamrun; Nazarene Convent, Żejtun; St. Joseph Asylum, Żabbar and the Good Shepherd Convent, Balzan. In these Coronation programmes the health films "Mary's Birthday", "Good Housewife in her Kitchen" and "How Town People Get Their Water" were included. A short newsreel of activities in Malta specially photographed and produced by a member of the Mobile Cinema Unit in conjunction with the Colonial Film Unit was added to the programmes to increase the interest of the crowds. This novel newsreel was well accepted by the audiences.

Three films were received on loan from the Communicable Diseases Centre of the Public Health Service of the U.S.A. These films dealt mainly with refuse collection and disposal and were shown to a selected audience of the Health Department. One of these films entitled "Refuse", dealing with the way in which householders dispose of their refuse, was shown in six different localities. The time limit of the loan curtailed the possibility of the film being shown all over the Island.

Five films dealing with the following medical problems :— "Portcaval Shunt", "Lobectomy", "Aureomycin", "Aureomycin packing" and "Folvite" a preparation of Folic Acid, were received on loan from the Lederle Laboratories Film Division of the U.S.A. through the good offices of their Agent in Malta. Four special sessions for medical practitioners showing these films were held, one at the Royal University of Malta, Valletta, and three in the Lecture Rooms of St Luke's Hospital, Guardamangia.

The Health Education Film Library of this department received 4 new films during the year bringing the total number of films to 34.

During the winter months 4,000 leaflets dealing with the precautions to be taken against Influenza were distributed to all the main schools, clubs and other places frequented by the general public.

The Mobile Cinema gave 42 shows in connection with B.C.G. vaccination, exhibiting the film "Your Enemy Tuberculosis".

In connection with Diphtheria and Typhoid Immunisation the films "Defeat Diphtheria" and "Unseen enemy" were projected for 9 times in areas selected for mass immunisation. The film "Another Case of Food Poisoining" dealing with the proper handling of foodstuffs and hygiene in food producing centres was shown for 46 times in the main centres of the Island.

In addition to these cinema shows the loud speaking apparatus of the mobile cinema van gave 114 corner talks in several districts where the Free Immunisation Service was holding its sessions.

The Agriculture Department and the Civil Defence Department both made use of the Mobile Cinema Unit for their programme purposes during the year. A special programme for the Civil Defence sessions was organised in which the Health Film "Fly about the House" was included.

In Gozo the Mobile Cinema Unit of that island held 15 open-air shows with an aggregate audience of 11,760 in connection with the Free Immunisation Service. The films "Defeat Diphtheria" and "Unseen Enemy" were projected in 15 different localities.

Moreover, several talks were given on the Gozo relay system on Sunday mornings by members of the Medical and Health Department stationed in Gozo.

WATER SUPPLY

(From information supplied by the Senior Water Engineer — Water & Electricity Department)

Pumping Plant. A Mirlees Diesel driven pump was erected at tal-Hlas Pumping Station. At Wied il-Għasel an alternator was installed and at San Anton the erection of a diesel engine was completed.

Water Development Scheme.

Ta' Kandja. At Ta' Kandja work in connexion with the driving of galleries was continued; 650 feet of galleries were driven during the year.

A two-ton electrically-driven haulage gear was installed and put into service.

Miżiep. Work on the development of the Miżiep Syncline was taken well in hand during the year under review and steady progress was maintained.

a) **Erection of Pumping Station:**— Construction was taken in hand during the year; by the end of the financial year good progress was made.

b) **Shafts sinking:**— Preliminary work in connexion with the sinking of shafts was taken in hand in October and excavation in rock was commenced towards the end of the year.

c) **Trunk Main — Miżiep to Fiddien:**— Work on this trunk main was started on 1st July; the progress achieved was as follows:—

Digging trenches	12,390 feet
Transport of pipes	468 tons
Laying of pipes	12,390 feet
Jointing and caulking	680 sockets
Refilling trench	12,390 feet

d) **Sinking Boreholes:**— A borehole within the site of pumping station was sunk.

e) **Boundary Wall and Sundry Works:**— The mass concrete retaining wall on north side of site and foundations for the west boundary wall were commenced and completed.

Excavation for a rain water tank 30′ × 10′ × 24′ deep in connexion with the cooling system of engines were carried out.

Rainfall. The rainfall recorded by the Department totalled 26.96 inches in Malta and 24.03 inches in Gozo from 1st September 1952 to 31st August 1953.

Water Testing and Sterilization. Bacteriological and salinity tests were regularly carried out at the laboratory of the Medical and Health Department. Chlorination was effected by chlorine gas and chloride of lime solution dosage at all water production points.

The maximum recorded salinity figures were 245 parts Chlorine per 100,000 in the Water Table and 8 parts Chlorine per 100,000 in the Upper Water Table.

Survey of Private Wells. The Survey of private wells which was being carried out to determine the quantity, quality and utilization of underground water extracted from private wells was completed during the year.

Laying of Water Mains. The following water mains were completed during the year under review.

Extensions of water mains carried out at Government expense.

3″	6944 feet
3″ (Tal-Virtù)	1600 feet
	8544 feet
Renewals. 3″	7232 feet
12″	1400 feet

SEWERAGE

(From information supplied by the Engineer, Public Works Dept.)

During the year under review appreciable progress was made on the extension of sewers to several parts of the Island. Of special interest is the commencement of works on street sewers in two new areas, namely Birżebbuġa and Siġġiewi.

At Siġġiewi steady progress has been maintained since the work was started in July 1953. Work in Birżebbuġa was unfortunately held up due to a certain amount of delay in the importation of cast iron pipes needed for the construction of the interception under the sea water level. At first owing to the large amount of water seepage into the trenches advance was slow but now work on the interception is going on in full swing and progress is satisfactory. Extension of street sewers above sea level has also made remarkable advances in spite of the hard nature of rock met with at the beginning.

The erection of the sewage pumping station at Birżebbuġa is still withheld pending the formal acquisition of the site. Plans, however, have already been drawn up and the work will be pushed ahead when all preliminary preparations are completed.

Masonry work on the Dingli Pumping Station was commenced in November, 1953. The pumping plant for this station has also been ordered and will be in Malta in the near future.

Extension of street sewers in the various localities were carried out as follows:—

Mellieħa: New Mill Street, 6th Street, 10th Street, North Street and Qasam Barrani Street — Total 1617 feet.

Mosta: Constitution Street, Main Street, Ponsonby Street, Dun Mikiel Xerri Street, St. Anthony Street and Orchard Street — Total 2123 feet.

Naxxar: Alleys 3 to 10, St. Lucy Street, Parish Street and Luqa Briffa Street — Total 2494 feet.

Hamrun: Canon Bonnici Street, Farsons Street, Sulphur Lane, Brewery Lane, New Street (Marsa), St. Luke Street (Gwardamangia), and several alleys in St. Vennera Street — Total 2735 feet.

Birkirkara: Ganu Street, Dun Perin Lane, Mohli Street, St. Joseph Street, Narrow Street, St. Rocco Street, Dyers Street, Canella Lane, High Street, Hassajjied Street, Matteluwa Street, St. Julian Street — Total 3891 feet.

Siġġiewi: Ramija Street, Siġġiewi Road, St. James Street, St. Nicholas Square, Narrow Street, St. Margaret Street — Total 3500 feet. Interceptor-Shafts 1200 feet. Galleries 900 feet.

Żebbuġ: Our Lady Street, Candlemas Street, Hal-Dwiel Street, Siġġiewi Road — 2080 feet.
About 800 feet of these sewers were constructed in galleries.

Dingli: St. Mary Street, St. Paul Street, Main Street, Liedna Street, Conception Street, St. Dominic Street, Cola Xara Street, Church Street, Parish Street — Total 1921 feet.

Tal-Virtù: Extension of sewer to Training College — Total 888 feet.

Gżira: Moroni Street, Oratory Street, Belvedere Street — Total 739 feet.

In addition about 4000 feet of small extensions were made in various towns and villages including Sliema, St. Julians, Cospicua, Senglea, Msida, Gżira, Luqa, Pawla, Għaxaq, Żejtun and Pietà.

TABLE LXXIV

Bed and Patient Statistics in Hospitals for 1953

	St. Luke's Hospital	Central Hospital	Connaught Hospital	Santo Spirito Hospital	Hospital for Mental Diseases	St. Vincent de Paul Hospital	St. Bartholomew's Hospital	Isolation Hospital	Victoria Hospital	St. John the Baptist Hospital	St. Theresa Hospital	Chambray Hospital	Sacred Heart Hospital	Isolation Hospital Gozo	TOTAL
1. Total bed complement	493	61	156	70	754†	893	118	80	94	147	16	180	27	20	3,109
2. Average daily number of occupied beds ...	465	50	116	54	878	796	94	17	61	86	14	167	10	12	2,830
3. Highest daily occupation	530	65	138	65	926	817	107	43	71	97	17	172	13	12	3,073
4. Lowest daily occupation	309	38	99	40	893	777	74	3	23	81	11	164	8	12	2,532
5. Total No. of in-patients treated	7,046	590	249	339	1,116	—	111	423	782		—	192	13	12	10,873
6. Radiological examinations	9,040	—	—	133	—	—	—	—	2,776	—	—	—	—	—	11,949
7. Pathological examinations	13,419	—	—	201	4,232	—	—	—	1,338	—	—	—	—	—	19,190
8. Patients treated by Physiotherapy Departments	9,392	—	—	80	—	—	—	24	—	—	—	—	—	—	9,496
9. Treatments given by Physiotherapy Depts.	12,350	—	—	758	—	—	—	—	—	—	—	—	—	—	13,108
10. New out-patients	20,749	4,334	208	—	178	—	31	—	803	—	—	1	2	—	26,306
11. Total out-patient attendances	—	18,781	440,4	163	1,256	—	70	—	3,242	—	—	4	60	—	27,980
BEDS ALLOCATED															
12. General Medicine	120	—	—	—	—	26	—	—	26	—	—	—	—	—	272
13. General Surgery	152	—	—	—	—	40	—	—	40	—	—	—	—	—	232
14. Gynaecology	28	—	—	—	—	—	—	—	6	—	—	—	—	—	34
15. Obstetrics	45	—	—	—	—	—	—	—	12	—	—	—	—	—	57
16. Paediatrics	40	—	—	—	—	—	—	—	10	—	—	—	—	—	50
17. Psychiatry (including Mental Deficiency) ...	—	—	—	—	733	—	—	—	—	—	—	178	—	—	911
18. Cardiology	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
19. Dentistry	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. Dermatology	—	14	—	—	—	—	—	—	—	—	—	—	—	—	14
21. Tuberculosis															
a) Respiratory	—	—	156	—	—	30	—	—	—	—	16	2	—	—	204
b) Non-respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. E. N. T.	28	—	—	—	—	—	—	—	—	—	—	—	—	—	28
23. Infectious Diseases	—	—	—	—	—	—	—	80	—	—	—	—	—	20	100
24. Ophthalmology	—	45	—	—	—	—	—	—	—	—	—	—	—	—	45
25. Orthopaedic Surgery	80	—	—	70	—	—	—	—	—	—	—	—	—	—	150
26. V. D.	—	2	—	—	—	—	—	—	—	—	—	—	—	—	2
27. Chronic Sick	—	—	—	—	21	797	—	—	—	147	—	—	—	—	965
28. Leprosy	—	—	—	—	—	—	118	—	—	—	—	—	27	—	145

† Nominal.

VI HOSPITAL SERVICES

ST. LUKE'S HOSPITAL

The movement of the hospital population during the year was as follows:—

Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
			Transferred to other Hospitals	At request	Cured	Relieved	Died	
Males 174	3,504	21	167	529	1,599	1,058	156	190
Females 225	4,107	15	159	627	1,893	1,254	198	216
Total 399	7,611	36	326	1,156	3,492	2,312	354	406

The daily average number of patients in all wards was 465 (179 males, 286 females).

The classification of diseases and deaths is included in Appendix MA.

During March a bacteriological laboratory was opened at this hospital and the Senior Bacteriologist has been entrusted with all clinical bacteriology for all hospitals except for work of a routine nature which some hospitals carry out for themselves and for the isolation hospital part of whose bacteriological work is carried out at the laboratory of the Health Department.

The number of patients who attended the out-patients clinics attached to the hospital was as follows:—

Casualty	3,800	
Surgical	2,422	
Obstetric & Gynaecological	1,005	
Ear, Nose and Throat	2,755	
Orthopaedic	1,863	
Children	1,052	
Physiotherapy	6,523	(out-patients)
	2,869	(in-patients)
Medical	1,329	
	23,618	

Surgical Division: The following operations were performed during the year:—

Alimentary Tract. Appendicectomy 178; gastrectomy 73; haemorrhoidectomy 55; exploratory laparatomy 45; cholecystectomy 39; fistula in ano 35; intestinal obstruction 33; strangulated hernia 32; sigmoidoscopy 27; sinus 25; perforated gastric ulcer 17; Rammstedt's operation 7; colectomy 7; oesophagectomy 6; oesophagoscopy 5; resection of rectum 5; gastro-enterostomy 4; intussusception 3; splenectomy 3; colostomy 2; sigmoidectomy 1; abdomino-perineal resection 1.

Herniae. Inguinal 209; umbilical 80; femoral 16; incisional 15; epigastric 4.

Genito-urinary tract. Cystoscopy 113; prostatectomy 42; hydrocele 36; suprapubic cystostomy 30; phimosis 29; nephrectomy 15; urethral transplantation 11; fulgmation 7; ovarian cyst 7; hypospadias 6; nephrolithiasis 4; varicocele 4; hysterectomy 3; ectopic gestation 1; undescended testicles 10.

Respiratory tract. Thoracoplasty 33; empyema (drainage) 11; bronchoscopy 8; pneumonectomy 5; lobectomy 1.

Miscellaneous. Epithelioma 23; gland biopsy 23; sympathectomy 22; adenoma of breast 22; thyroidectomy 20; radical mastectomy 16; block dissection of glands (upper cervical) 4; excision of cancer of lips and dissection of glands 3; infiltration of trigeminal 2; infiltration of cervical sympathetic 2; excision for cancer of mouth 1; excision of sarcoma of scapula 1; excision of growth from axilla 1; excision of growth from groin 1.

Trauma. Skin grafting 69; extensive lacero-contused wounds 39; suturing of cut tendons 25; rodent ulcer 11; plastic operation 8; cleft palate 8; amputation of lower limb 8; compound fractures 6; craniotomy trephining for depressed fracture 4; hare lip 4; amputation of digitis 3; gunshot wound 1; open reduction and screw fixation 1; excision of patella 1; amputation of hand 1; decompression 1.

Miscellaneous minor operations 258.

Orthopaedic Division. The following operations were performed during the year:— ganglionectomy 26; arthrodeses of foot 22; stenosing tendosynovitis 20; open reduction of fracture 19; excision of bursae 15; manipulation 14; menisectomy 13; arthrotomy and patellectomy 12; tendon transplantation 11; suture of patella 10; suture of olecranon 9; aspiration of joints 9; incision for osteomyelitis 8; manual osteoclasis 8; closed plantar fasciotomy 7; reduction of compound fracture 6; hallux valgus 6; Lambrinudi stabilization 5; bone graft 4; sequestrectomy 4; laminectomy 3; spinal bone-graft 3; open tenotomy 3; arthrodeses of knee 2; suture of nerve 2; transposition of ulnar nerve 1.

Ear, Nose & Throat Department. The number of patients treated during the year totalled 1,108 (548 males, 560 females). The following operations were performed:— tonsillectomy 849; adenoidectomy 830; removal of foreign body from nose 16; laryngoscopy 13; mastoidectomy 10; bronchoscopy 8; removal of nasal polypi 8; antrostomy 4; proof puncture 4; larynx biopsy 4; reduction of nasal fracture 3; turbinectomy 3; Caldwell Luc operation 2; nasopharynx biopsy 2; tracheotomy 1; labyrinthectomy 1; submucosal resection 1; removal of aural polypi 1; removal of foreign body in ear 1; removal of foreign body in throat 1; removal of foreign body in oesophagus 1; excision of subglottic papilloma 1; oesophagoscopy 1; excision of cyst of nose 1.

A total of 460 laboratory investigations and 440 radiological examinations were carried out on behalf of this Department.

The number of out-patients was 2,755 (1,417 males, 1,338 females.)

Pathological Department. A total of 13,419 specimens, including specimens submitted by District Medical Officers and private medical practitioners, were examined during the year. The tests carried out were as follows:—

Morbid Anatomy and Histology. Surgical histology 274; post-mortem examination 25.

Haematology. Blood count and picture 5,848; haemoglobin estimation 261; marrow and spienic pulp for LDB 109; haematocrit estimation 60; clotting time 53; platelet count 49; bleeding time 43; myelogram 37; reticulocyte count 28; erythrocyte fragility test 19; prothrombin time 10.

Clinical Pathology. Urine (routine examination) 3,029; blood urea 1,114; flocculation test, liver function 908; C.S.F. examination 526; test meals 165; faeces, test for occult blood 163; glucose tolerance test 137; transudates and exudates — physical, chemical and cytological 76; blood sugar — fasting level 49; Van den Bergh reaction 43; pregnancy tests, Friedman 38; plasma cholesterol 35; plasma proteins 26; plasma alkaline phosphatase 20; urine diastase 17; plasma acid phosphatase 8; urine urea 6; plasma bilirubin 4; plasma amylase 4; serum calcium 2.

Bacteriology. Microscopical examination of faeces 200; microscopical examination of sputum 33.

Bacteriological Laboratory. Since March when the laboratory was opened a total of 4,838 examinations were carried out. A large proportion of all media used are prepared in the laboratory itself, as are also most antigens, etc.

Blood cultures. A total of 372 samples of blood were submitted for culture, of which 45 gave a growth of *Bruc. melitensis*, 26 a growth of *Salm. typhi*, and one a growth of a non-haemolytic Streptococcus. A culture from a sample of bone-marrow was sterile.

Agglutinin tests. 1120 samples of blood sera were submitted, of which 237 reacted against *Bruc. melitensis*, 219 against *Salm. typhi*, 5 against *Proteus 0 x 19*, 4 against *Shigella flexneri*, and one against *Shigella boydii*. In another 650 cases, only capillary tubefuls of blood were submitted, and, instead of carrying out on them complete agglutinin titrations as in the samples previously mentioned, slide reactions were performed. Of these 46 reacted against *Bruc. melitensis* and 13 against *Salm. typhi*.

Wassermann Complement Fixation Tests and Kahn Tests. These tests were performed on 522 samples of blood. In 29 cases both tests gave a positive result; the Wassermann test alone was positive in 14 cases, the Kahn test alone being positive in 3 cases. These tests carried out on 3 samples of cerebro-spinal fluid gave negative results.

Faeces examinations. 414 samples of faeces were submitted. *Salm. typhi* were cultivated in 21 cases, *Shig. flexneri* in 1 case and *Shig. Semitzi* in another. The method normally adopted when the typhoid bacteria were being looked for was a preliminary enrichment on sodium selenite broth, followed by plating on desoxycholate citrate agar on MacConkey's bile-salt medium. Many of the samples submitted came from patients who had been long under treatment or who were clinically cured and were being routinely examined before their discharge from hospital. In two faeces samples *Entamoeba histolytica* and *Giardia lamblia* were present, *Giardia* alone being present in 4 cases.

Urine Examinations. 194 samples of urine were received for bacteriological examination. In 9 the *Myco tuberculosis* was found, in 21 the *Bact. coli*, whilst a mixed staphylococcal and *Bact. Coli* infection was present in 12. Other samples showed the presence of *Pseudomonas pyocyanea Proteus*, *Bact. aerogenes*, etc. 118 samples were present.

Urethral and vaginal discharges. A total of 79 samples were examined from cases of urethritis, leucorrhoea, etc. In 8 cases, the *Neis. gonorrhoeae* was detected. In 7 cases *Trichomonas vaginalis* appeared to be the only pathogen.

Cerebro-Spinal Fluid examinations. 145 samples were examined by direct smear examination of centrifuged deposit, by culture on blood-agar, on Lowenstein-Jensen medium and on Duboz's medium, and by guinea-pig inoculations. In 13 cases the presence of *Myco. tuberculosis* was detected; in 2 cases the *Neis. meningitidis* was identified. Staphylococci occurred in 8 cases and an aerobic bacillus in 1.

Sputum examinations. A total of 421 sputa were examined in various ways, for the presence of *Myco. tuberculosis*, etc. In 47 cases tubercle bacilli were detected; reports on the bacteria met with and on the predominant flora were made in other cases.

Pleural fluids. 39 samples were examined, the *Myco. tuberculosis* being found in 8, Staphylococci in 3, and Streptococci in 2.

Gastric contents. 104 samples were examined, almost always by guinea-pig inoculation. Many of these samples came from prospective emigrants in whom an X-ray or other examinations had shown the possibility of an infection and in whom therefore this examination was required for the granting of a clean bill of health. The presence of *Myco. tuberculosis* was detected in 19 cases.

Pus. 51 samples from various sources were examined. In 5 the presence of *Myco. tuberculosis* was detected; 7 showed *Staphylococcus aureus*; 10 the *Staphylococcus albus*; 1 *Pseudomonas* and in 3 cases a mixed flora of Staphylococci, Streptococci and and Bacilli.

Joint fluids. Sixteen samples of fluids from inflamed joints were examined, Staphylococci being found in one case and the *Brucella melitensis* being cultivated from four other cases, the fluid from which also reacted against Brucella. In one case the fluid reacted against *Brucella melitensis* up to a dilution of 1/160 whilst the culture was negative.

Antibiotic sensitivity tests. On 62 occasions materials were submitted for identification of the bacteria present and determination of the sensivity of these micro-organisms to antibiotics. The cases in question were most commonly ones of otitis, tonsillitis, or purulent infections and the bacteria cultivated were tested against Penicillin, Streptomycin, Aureomycin, Terramycin, and Chloromycetin.

Hair examinations. 23 cases were examined; in most cases the examination was required for emigration purposes. *Tinea capitis* was found in one case and *Trichophyton* in another.

Miscellaneous examinations. 126 miscellaneous examinations were carried out, including examination of discharge from the ears in two of which the *Coryn. diphtheriae* was detected, one being non-virulent. In 2 examinations of skin preparations the *Myco. leprae* was detected; nasal smears showed the *Myco. leprae* in one case and the *Coryn. diphtheriae* in another. Agglutinin reaction carried out on human milk from a patient whose blood serum had reacted against *Bruc. melitensis* up to a dilution of 1/320, reacted against Brucella up to a dilution of 1/160; milk culture was negative. Two samples of ascitic fluid reacted against *Brucella melitensis* up to a dilution of 1/2560 and 1/160 respectively, and one sample of pericardial fluid up to a dilution of 1/80. Other work included bacteriological examination of bile, of bone-marrow, and of blood for Leprospirae, identificaton of intestinal worms, Paul-Bunnell reactions, preparation of autogenous vaccines etc.

Radiological Department. A total of 9,040 persons were X-rayed during the year involving the use of 17,108 films; dentals and occlusals totalled 149 and 39 respectively.

CENTRAL HOSPITAL

The movement of the hospital population during the year was as follows:—

	Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
				Transferred to other Hospitals	At Request	Cured	Relieved	Died	
Males	20	305	12	12	—	298	—	—	27
Females	27	285	9	9	—	284	—	4	24
Total	47	590	21	21	—	582	—	4	51

The total number of in-patients treated was 658, of which 590 were new admissions. The average daily population was 50 (42 males, 8 females). The average stay in hospital was 25 days.

The classification of diseases and deaths is given in Appendix MA.

The out-patients treated in the various clinics was 4,334 (2391 males, 1943 females).

Ophthalmic Division. The number of patients who received treatment was as follows :—

	Males	Females	Total
In-patients	249	235	484
Out-patients	1576	1123	1699
Operations performed	146	178	324

The in-patients were treated for the following diseases :— diseases of lens 152; anomalies of external muscles 107; diseases of the cornea 59; conjunctivitis 47; glaucoma 33; diseases of eyelid 30; affections of eyeball 23; diseases of the iris 12; diseases of lacrymal apparatus 13; diseases of retina 10; diseases of orbit and neighbouring parts 7; diseases of the ciliary body 3; diseases of sclerotic 3.

Out of a total of 2,699 patients who attended the clinic, 1348 were examined for errors of refraction and had glasses prescribed and 486 were prospective emigrants who had been referred for routine examination by the Department of Emigration. The total number of attendances at the clinic was 10,312.

Orthopaedic Clinic. The number of out-patients who attended the Orthopaedic section was 183 (90 males, 93 females).

Chest Clinic. 513 out-patients (293 males, 220 females) were treated at the chest clinic for out-patients.

Dermatological Division. The number of patients who received treatment was as follows :—

	Males	Females	Total
In-patients	52	49	101
Out-patients	370	473	843

The in-patients were treated for the following diseases :—

Males : Avitaminosis 1; cancer 2; Dermatitis :— allergic 3; contact 2; exfoliative 3; seborrhoeic 2; septic 21; dermatomycosis 3; herpes zoster 1; perniosis 1; pruritus 1; psoriasis 2; ulcers 9; verruca plantaris 1.

Females : Cancer 3; Dermatitis :— exfoliative 2; seborrheoic 4; septic 12; eczema nummular 3; herpes zoster 2; pemphigus vulgaris 1; psoriasis 1; tinea capitis 4; ulcers stasic 17.

Of the 843 patients who attended the out-patient clinic 80 were either prospective emigrants referred by the Department of Emigration or children seeking admission into schools or institutes.

Radiological Division. 9,291 patients were examined radiologically during the year; the number of films required for their study was 9,544. In addition 4,210 prospective emigrants had their chest X-rayed or screened on behalf of the Department of Emigration.

Patients who received radio-therapy totalled 92; the total number of sittings held was 756.

The conditions treated were as follows :— Rodent ulcers 27; N.G. breast 15; chronic eczema 12; keloid 10; dermatitis papillaris capillitiae 7; verruca plantaris 6; Hodgkins disease 5; tinea corporis 5; acne 3; tinea capitis 2; malignant adenitis 1; adenoma of thyroid 1; mixed tum[illegible] of parotid 1; mycosis fungoides 1; lupus vulgaris 1.

Dental Division. The ever incre[illegible] work of this division necessitated the employment of an additional dental surge[illegible] a part-time basis. Moreover, the School Dental Surgeon has continued to [illegible] excellent service during the year. It was found necessary to employ anothe[illegible]anic to manufacture prosthetic appliances. The additional supply of dentures [illegible]by this extra mechanic has reduced in no small degree the long list of patie[illegible]iting dental appliances.

The work performed during the year was as follows :—

No. of patients attended to	4,421
Extractions under local anaesthesia	3,461
Visits in connection with prosthetic appliances	1,885
Prophylactic treatment	449
Operations under general anaesthesia including impacted and buried teeth, alveolectomies, enucliation of cyst, surgical treatment of epulides etc.	25
Patients referred for Extravial Radiology	37
Complete and partial dentures supplied	373
Restoration of teeth	274
Scaling and gum treatment	90
Patients refusing treatment	5
Patients treated for fractures of the jaws	13
Patients referred to hospital for extraction under general anaesthesia	103

In addition to the above-mentioned work dental service was regularly provided at various Government Institutions at the request of the Medical Superintendent of the Institution concerned. The work performed at the Institutions is the following.

Attendances at various hospitals	41
Patients treated	200
Teeth extracted under general or local anaesthesia ...	302
Attendances at Prisons :—	
Patients treated	103
Extractions under local anaesthesia	31
Other treatments in hospitals and prisons amounted to ...	106

SANTO SPIRITO HOSPITAL

The movement of the hospital population during the year was as follows :—

	Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
				Transferred to other Hospitals	At request	Cured	Relieved	Died	
Males	24	15	137	18	21	88	5	13	31
Females	34	9	120	16	18	81	9	11	28
Total	58	24	257	34	39	169	14	24	59

The established number of beds is 70, thirtyfive in each division.

The daily-average number of in-patients in hospital during the year was 54 (25 males and 29 females).

The highest number of patients in hospital on any one single day was 65, and the lowest 40.

The change in the nature of cases admitted to this hospital for treatment reported upon in 1952 persisted throughout the year under review. Santo Spirito has now reverted to its original allotment scope of giving all types of medical and surgical cases, i.e. those requiring more or less prolonged hospitalization for chronic ailments, patients convalescing from acute illness or after operations performed at S. Luke's, or patients requiring special treatment prior to admission into St. Vincent de Paul Hospital.

With few exceptions, the patients treated in 1953 were transferred from St. Luke's and hailed from different towns and villages of the Island. This marks out a departure from conditions obtaining before 1945, when patients were admitted directly from their own homes and came only from the Rabat area.

Of the total number of cases admitted, 254 were transferred from St. Luke's; the rest (27) were admitted from other hospitals or from home. The diseases treated during the year were as follows:— Abscess, septic conditions 45; trauma, fractures, wounds 44; osteo-arthritis (non-Tb) 37; new growths 22; A.P.M. sequelae 21; gangrene (senile and diabetic) 20; neuritis and sciatica 13; TB spondylitis 9; osteomyelitis 9; arthritis due to brucella infection 8; burns and scalds 8; congenital and acquired deformity 7; appendicectomy (post-op.) 7; rheumatoid arthritis 6; Tb osteo-arthritis 5; varicose veins 6; thrombo-angeitis obliterans 5; heart failure 5; cerebral apoplexy 5; hyperplasia of prostate 5; senility 5; cerebral thrombosis 4; chronic bronchial asthma 4; diabetes mellitus 3; enteric fever (conval.) 3; erythema nodosum (conval.) 3; adenitis 3; chronic myocarditis 3; hernia (post-op.) 3; rickets 3; chronic bronchitis 2; empyema 2; undulant fever (conval.) 2; amoebic dysentery 2; kerosene poisoning 1; anaemia 1; chronic cholecystitis 1; thrombophlebitis 1; haematomyelia 1; meningo-vascular syphilis 1; chronic gastritis 1; renal calculi 1; cirrhosis of the liver 1; transverse myelitis 1; subac. combined sclerosis 1.

Nine plaster appliances were made at the hospital during the year:— Casts of the lower limbs 3; turning cases 3; plaster jackets 2; hip spicas 1.

The number of X-rays taken at the hospital with the mobile apparatus was 133; the regions examined were the following:— Chest 29; spine 26; pelvis 12; femur 11; hip joint 10; knee 9; tibia 8; foot 7; wrist joint 6; ankle joint 4; skull 3; hand 3; humerus 2; shoulder joint 1; clavicle 1; mandible 1.

The following orthopaedic appliances were supplied to patients discharged from hospital:— Walking calipers 7; orthopaedic boots 7; Taylor's braces 5; abdominal corsets 3; artificial limbs 3; rubber stocking 1.

The number of out-patients treated was 162, most of them being the usual cases of accidental injuries seeking treatment at this hospital. The nature of the injuries treated was as follows:— Wounds 116; fractures and dislocations 18; burns and scalds 8; foreign bodies 6; sprains and contusions 5; cases of poisoning 4; cerebral concussion 3; dog bites 2.

Thirty-one of the above cases required treatment and investigations beyond the resources of this hospital and were transferred to St. Luke's, after receiving preliminary attention at this hospital; all the remaining cases received full treatment. One patient, admitted as a casualty, showed no signs of life on admission. Two medical cases also attended for injections.

One-hundred and thirty seven laboratory tests of the following specimens were made by the Pathologist at St. Luke's:— Urine for complete analysis 42; blood counts and blood pictures 32; blood urea 14; blood serum reactions 13; urine for presence of T.B. 11; blood serum reaction c. titre 8; Wassermann reaction 7; faeces for typhoid and dysent. 5; sputum for presence of T.B. 3; liquid effusion from joints 2. Besides the above, 64 erythrocyte sedimentation tests were made at this hospital.

The Physiotherapy Sister attended regularly twice a week during the first half of the year. Later in the year the patients requiring physiotherapy treatment decreased in number, and the Physiotherapist had to restrict her visits accordingly. In all seven-hundred and fifty-eight treatments were given to eighty patients.

The outings to the country or the seaside were continued once a week throughout the year. A departmental bus is used for this purpose. Chronic or convalescent patients derive great benefit from these outings, and the children look forward to them with much anticipation.

The education of the children of school age, was continued throughout the scholastic year. A priest from Rabat has been detailed by the Education Department to teach in this hospital. The adult class was discontinued during the year, as the age of the adult patients was beyond the education stage.

A long felt need was fulfilled during the year by the erection of rooms, to be used as sleeping accommodation by the Assistant Medical Officer.

CONNAUGHT HOSPITAL

The average daily number of patients during the year was 116. There were 134 new admissions (81 males and 53 females) which is 11 more admissions than in the previous year. The number of patients remaining in hospital at the end of 1952 was 115 (75 males and 40 females) thus bringing the total number of cases under treatment during the year to 249. During this year 10 patients (5 males and 5 females) died. This number of deaths is the lowest ever recorded in this hospital. Of these deaths 2 occurred during the first fortnight after admission into the hospital indicating an advanced stage of the disease, 2 between the third and sixth month and 2 between the sixth and twelfth month of their stay in hospital.

The total number of patients discharged from hospital during the year was 135 of whom 2 were not suffering from Tuberculosis on admission. Table LXXVII gives the relative information.

TABLE LXXV

Movement of population during the year

Sex	Remaining at end of 1952	Patients admitted in 1953	Discharged						Remaining at end of 1953
			Quiescent Stage	Disease arrested	Improved	Not Improved	Dead	Not suffering from T.B.	
Males	75	81	39	1	31	8	5	2	70
Females	40	53	27	—	16	1	5	—	44
Total	115	134	66	1	47	9	10	2	114

TABLE LXXVI

Classification of In-Patients

Sex	Class "A"	Class "B" Group i	Class "B" Group ii	Class "B" Group iii	Not suffering from T.B.	Total
Males	2	5	99	48	2	156
Females	7	2	60	24	—	93
Total	9	7	159	72	2	249

TABLE LXXVII

Ages on Discharge or Death of Patients

Sex	From 1 to 4 years	From 5 to 9 years	From 10 to 14 years	From 15 to 19 years	From 20 to 24 years	From 25 to 29 years	From 30 to 34 years	From 35 to 39 years	From 40 to 44 years	From 45 to 49 years	50 years & over	Total
Males	—	—	1	3	11	20	8	7	11	12	13	86
Females	2	—	—	12	8	7	7	2	4	—	7	49
Total	2	—	1	15	19	27	15	9	15	12	20	135

TABLE LXXVIII

Capacity for work of patients on discharge

Capacity	Sex	Class A.	Class B. Group i.	Class B. Group ii.	Class B. Group iii.	Not suffering from T.B.	Total
Fit for light work	Males ...	1	1	22	3	—	27
	Females ...	3	1	15	3	—	22
Unfit for work	Males ...	1	1	30	20	—	52
	Females ...	2	1	12	7	—	22
Not Suffering from T.B.	Males ...	—	—	—	—	2	2
	Females ...	—	—	—	—	—	—
Total	... ...	7	4	79	33	2	125

TABLE LXXIX

Age of all in-patients

Sex	From 1 to 4 years	From 5 to 14 years	From 15 to 24 years	From 25 to 34 years	From 35 to 44 years	From 45 to 54 years	From 55 to 64 years	65 years and over	Total
Males	—	1	27	52	35	26	13	2	156
Females	2	1	38	24	13	7	6	2	93
Total	2	2	65	76	48	33	19	4	249

TABLE LXXX

Duration of stay of patients discharged during 1953

Sex	Under 2 weeks	From ½ to 1 month	From 1 to 3 months	From 3 to 6 months	From 6 months to 1 year	From 1 to 2 years	From 2 to 3 years	From 3 to 4 years	From 4 to 5 years	From 5 to 6 years	6 years and over	Total
Males	7	5	19	13	18	12	3	3	—	—	1	81
Females	1	2	2	8	17	8	5	1	—	—	—	44
Total	8	7	21	21	35	20	8	4	—	—	1	125

TABLE LXXXI

Duration of stay of patients who died during 1953

Sex	Under 2 weeks	From ½ to 1 month	From 1 to 3 months	From 3 to 6 months	From 6 months to 1 year	From 1 to 2 years	From 2 to 3 years	From 3 to 4 years	From 4 to 5 years	From 5 to 6 years	6 years and over	Total
Males	2	—	—	1	—	2	—	—	—	—	—	5
Females	—	—	—	1	2	1	1	—	—	—	—	5
Total	2	—	—	2	2	3	1	—	—	—	—	10

TABLE LXXXII

Special treatment of in-patients

Sex	Artificial Pneumothorax											
	Unilateral				Bilateral				Pneumo-Peritoneum			
	No. of patients	No. of Refills	Improved	Not Improved	No. of patients	No. of Refills	Improved	Not Improved	No. of patients	No. of refills	Improved	Not Improved
Males	24	684	21	3	2	84	2	—	4	62	3	1
Females	14	268	12	2	—	—	—		3	29	2	1
Total	38	952	33	5	2	84	2	—	7	91	5	2

Antibiotics. The same method of treatment employed during last year was maintained, i.e. specific antibiotic treatment in conjunction with suitable rest and nourishing diet. No serious side effects were met with and the results on the whole were good and satisfactory. To ensure that reacutization of the disease during treatment was completely absent in the patients undergoing this treatment, patients were invariably kept for six months under absolute rest in bed and given antibiotics as soon as treatment was begun.

Surgical. The following surgical interventions were performed during last year :— Thoracoplasty 12 ; Internal pneumolysis 4 ; Phrenectomy 2.

Chest Clinic. The Chest Clinic at the Central Hospital was run on 3 days a week during the year. Table LXXXIII gives particulars of attendances and treatment during the year.

TABLE LXXXIII

Out-Patient T.B. Chest Clinic

Sex	No. of Pts. attending the Out-Pt. T. B. Chest Clinic				No. of Visits		
	New entries	For A.P.	For General Treatment	Total	For artificial Pneum.	For General Treatment	Total
Males ...	122	23	293	438	544	1,624	2,168
Females ...	86	32	220	318	1,062	1,174	2,236
Total ...	208	55	513	716	1,606	2,798	4,404

HOSPITAL FOR MENTAL DISEASES

The movement of the hospital population during the year was as follows :—

	Males	Females	Total	Males	Females	Total
On the hospital registers 1st January, 1953	...	...	...	440	423	863
Admissions {Certified	104	94	198			
Admissions {Voluntary	9	8	17			
Referred from other hospitals ...	5	12	17	118	114	232
Total under treatment	...	...	...	558	537	1,095
Discharges:						
Not insane	3	2	5			
Recovered	15	14	29			
Relieved	25	26	51			
Not improved	24	25	49			
Not requiring hospital treatment ...	15	10	25			
Transferred to the Hospital for Mental Diseases, (Gozo)	3	6	9			
Transferred to other hospitals ..	4	14	18			
Deaths	23	13	36	112	110	222
Remaining on the hospital registers 31st December, 1953				446	427	873

Admissions (215) were more by 13 compared to last year. 76 males and 82 females were first attack cases, and 20 males and 15 females suffered from previous attacks of mental disorder. Congenital cases numbered 15 (12 males and 3 females). 5 cases (3 males and 2 females) were found "not insane" on admission, 2 of whom having been admitted under observation by order of a Court of Law.

The ages on admission during 1953 averaged 40 for males and 44 for females.

Single persons numbered 109 (64 males and 45 females), married 83 (42 males and 41 females) and widowed 23 (7 males and 16 females).

Classification of admissions by mental disorder and sex during the year

	Males	Females	Total
Mental deficiency	6	7	13
Neuroses	2	3	5
Affective psychoses	22	20	42
Schizophrenia	33	25	58
Paraphrenia	3	11	14
Paranoia	—	1	1
Confusional state	5	3	8
Epilepsy & epileptic psychoses	2	5	7
Syphilitic psychoses	3	2	5
Senile & arteriopathic psychoses	8	13	21
Psychopathic state	7	2	9
Other types	7	1	8
Undetermined	12	7	19
Not insane on admission	3	2	5

Discharges numbered 159 of whom 29 were considered recovered and 51 relieved. 9 patients were transferred to the Mental Hospital in Gozo.

Discharges by mental disorder and condition of discharges during the year

	Recovered	Improved	Not Improved	N.R.H.T.
Paranoia	—	1	—	—
Mental deficiency	—	—	4	—
Neuroses	1	2	2	1
Affective psychoses	16	14	4	3
Schizophrenia	5	23	23	3
Paraphrenia	—	1	9	—
Confusional state	7	—	—	—
Epilepsy & epileptic psychoses ...	—	2	3	1
Senile & arteriopathic psychoses	—	1	1	10
Psychopathic state	1	3	—	—
Other types	1	5	1	6

Cases discharged as not considered suffering from mental disorder numbered 5.

Transfers to the Gozo Hospital included :— schizophrenia 2; senile psychoses 2; other types 5.

Deaths during the year numbered 36 (23 males and 13 females). The death rate on the average number of patients during the year (867) was 4% compared to 2.9% last year.

The principal causes of death were :—

Heart diseases	14 or 39%
Cerebral vascular diseases	2 or 5.5%
Lung diseases	3 or 8.3%
Other causes	17 or 47.2%

General health. Apart from the normal expectation of physical illness the general health of the hospital population was good. 66 patients were referred for consultation to the several out-patient clinics at other hospitals.

One case of typhoid fever occurred during the year.

Treatment. The following is a summary of the major forms of treatment carried out during the year and of the results obtained :—

Hypoglycaemic shock:— 23 patients (16 males and 7 females) treated gave the following results :—

Symptom free	6
Improved	5
Not improved	6
Treatment suspended	2
Still under treatment at the end of year	4

Excluding the patients in the last two categories listed the percentage of recoveries and improvements amounted to approximately 73.9%.

Electric Convulsive Treatment. 86 patients, (41 males and 45 females) treated gave the following results :—

Symptom free	14
Improved	25
Not improved	18
Still under treatment at the end of the year	29

Excluding those under treatment at the end of the year, the percentage of recoveries and improvements amounted to 66.3%.

Modified electrical convulsive treatment was carried out on 11 patients (5 males and 6 females). The results obtained are included in the above table.

Out-Patient Clinic. The number of out-patients seen at St. Luke's Hospital continued to increase and this year 178 new cases were seen compared to 143 last year. Total cases seen numbered 275 compared to 187 in 1952, and 1,256 interviews were held.

Diagnostic Classification of New Cases

Anxiety state	35
Obsessional compulsive state	9
Hypochondriasis	13
Depression	39
Mania	1
Schizophrenia	20
Psychopathic state	1
Neurosyphilis	2
Alcoholism	1
Huntington's chorea	1
Epilepsy	15
Mental deficiency	23
Encephalitis	1
Abnormalities in children	11
Unclassified	4
No psychiatric disability	2

Disposal of New Material

A.	Consultations	10
B.	Treatment	
	(a) ceased attending or refused treatment	39
	(b) admitted as in-patients	16
	(c) remained for treatment	104
	(d) recovered or improved	9

Electrical Convulsive Treatment. 39 patients (21 males and 18 females) attended at this hospital or at St. Luke's as out-patients, with the following results:—

Symptom free	7
Stopped attending but improved	6
Stopped attending but no response	10
Admitted as in-patients	6
Treatment suspended owing to complications	1
Improved	5
Not improved	1
Still under treatment	3

6 of the above patients had modified E.C.T.

Pathological Laboratory. During the year 4,232 investigations were carried out classified as follows:—

Blood. Complete histological examination 275; differential count 282; leucocyte count 7; serum reaction (Widal) 299; sugar estimation 29; sugar tolerance test 54; urea estimation 18; Van den Bergh test 10; coagulation time 2; Kahn test 586; Wassermann reaction 460.

Cerebro-Spinal fluid. Chemical test 22; cytological examination 19; Lange's colloidal gold test 152; Kahn test 114; Wassermann reaction 114.

Urine. Chemical and microscopical examination 1,045; other chemical tests 866; Zondek test (Friedmann's) 17.

Various. Faeces 8; gastric juice 3; guinea pig inoculation 1; sputum microscopical examination 8; nasal smear 1.

Post mortem investigation 1.

Occupation and recreation. During the year an average of 204 patients (91 males and 113 females) were occupied daily, compared to 165 (80 males and 85 females) last year.

The patients continued to enjoy char-a-banc trips four times weekly, and a good many attended 78 films and 5 theatrical shows given in the entertainment hall of the hospital.

St. Vincent de Paul Hospital Extension Wards. The movement of the inmates (males) in this ward during the year under review was as follows:—

Remaining at end of 1952	Admitted during 1953	Discharged or Died	Remaining at end of 1953
21	3	3	21

ST. VINCENT DE PAUL HOSPITAL

The movement of the hospital population during the year was as follows:—

Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
			Transferred to other Hospitals	At Request	Relieved	Cured	Died	
Males 375	87	41	26	28	—	—	64	385
Females 333	113	52	10	26	—	—	121	341
Total (Inmates) ... 708	200	93	36	54	—	—	185	726
EXTENSION WARDS								
Male Medical Ward ... 56	11	36	8	18	1	—	21	25
Male Surgical Ward... 19	12	52	7	19	3	12	20	22
Female Surgical Ward 13	4	36	7	6	1	6	20	13
Male T. B. Wards ... 19	16	13	5	5	—	1	11	26
Total (Patients)... 77	43	137	27	48	5	19	72	86
S. V. P. H. (Proper)... 708	200	93	36	54	—	—	185	726
Extension Wards ... 77	43	137	27	48	5	19	72	86
Grand Total ... 785	243	230	63	102	5	19	257	812

The daily average population of inmates was 719 (379 males and 340 females), whilst that of the patients in the four Extension Wards was 25 for the Male Medical, 16 for the Male Surgical, 11 for the Female Surgical and 25 for the Male Tuberculosis, giving a comprehensive daily average of 796.

The number of inmates admitted during the year was 293 (128 males and 165 females), as against 298 (163 males and 135 females) in 1952. Though many of the inmates admitted were in a very advanced stage of their illness, there were only 185 deaths (64 males and 121 females) during the year, as against 231 (108 males and 123 females) in 1952 and 240 (111 males and 129 females) in 1951. The causes of death were, as usual, generally attributed to conditions of a senile character. The number of deaths amongst the male inmates, especially during the last five months of the year, is the lowest ever recorded; in fact, there were only 13 deaths during this latter period i.e. 2 in August, 4 in September, 1 in October, 1 in November and 5 in December. As a consequence of this low death rate the number of admissions in the men's subdivision (128) was markedly lower than that of previous years (163 in 1952, 208 in 1951, 152 in 1950 etc.)

Forty-seven patients, mainly transfers from St. Luke hospital, were admitted to the male medical ward, the majority of patients being of a senile age and suffering from chronic or incurable diseases. There were 21 deaths; last year's figures were 101 admissions and 41 deaths.

In the male tuberculosis ward there were 29 admissions with 11 deaths as against 37 admissions with 8 deaths in 1952.

In the male surgical ward there were 64 admissions with 20 deaths as against 136 admissions with 34 deaths the previous year, whilst in the female surgical ward 40 patients were admitted with 20 deaths as against the preceding year's 64 admissions with 18 deaths. The patients admitted in both these wards were mainly transfers of chronic or inoperable cases from St. Luke hospital.

Due to the lack of funds the reconstruction of the wing block in the women's subdivision, which is the only major war-damage work in this hospital still outstanding, has again this year been left untouched.

The structural alterations to the Laundry department begun last year were completed during the year. In the same department other alterations to the linen, sorting and storage sections were also carried out.

The main pantry has been given a new and tidy aspect through the construction of four inlaid cupboards, together with the replacement of the old stone side-tables with mosaic shelves and the laying of white glazed tiles to the dados.

The extensive quadrangle in the women's division is being paved with cement; this work was started towards the end of the year and is still in hand.

Other works carried out in the year were the following:—

1) mosaic surfacing of the steps leading to the main door of the Chapel;

2) glaze tiling of the dados in the provision store;

3) cement surfacing of the yards on each side of the Chapel;

4) construction of a small stone-built workshop for the occupational therapy of T.B. patients;

5) restoration of the hot water service in the wing block, men's subdivision;

6) stone-colour washing and painting of the laundry, the engine room and the provision stores and the colour washing of the corridors round the quadrangle in the women's subdivision and the central yard opposite the Chapel;

7) planting of fifty ficus trees round the yards and along the avenues of the hospital;

8) installation of fourteen additional rediffusion sets so that now there is practically a set in every ward.

ST. BARTHOLOMEW'S HOSPITAL

The movement of the hospital population during the year was as follows:—

Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
			Transferred to other Hospitals	At request	Cured	Relieved	Died	
Males 66	3	1	—	15	—	—	1	54
Females 37	3	1	1	16	—	—	3	21
Total 103	6	2	1	31	—	—	4	75

The number of patients remaining in hospital at the end of 1952 was 103 (66 males and 37 females)). The number of patients admitted into the hospital during 1953 was 8, (4 males and 4 females). Of the 8 patients admitted, one male and one female patients were transferred from the Sacred Heart Hospital, Gozo.

In July the Leper Ordinance was amended abolishing the compulsory segregation of leper patients. As a result of this enactment 31 patients (15 males and 16 females) left the hospital at their own request. Of these, the majority were cases in whom the disease has been arrested, while the rest were cases who, although still active can effectively be isolated in their own homes. Besides, one female patient was transferred to the Sacred Heart Hospital, Gozo. During the period under review 4 patients died (1 male and 3 females). The causes of death were as follows:— 2 patients died of chronic myocardial disease, and 2 of chronic nephritis.

The daily average number of patients this year was 94 i.e. 62 males and 32 females.

The same treatment has been kept up as in previous years. Sulphetrone has been utilized almost exclusively in patients suffering from advanced lepromatous leprosy, while DDS has been used in patients suffering from lepromatous leprosy in the initial stage of the disease as, speaking generally, advanced lepromatous cases were intolerant to DDS. All patients received concurrent iron therapy. The initial dose of DDS was 100 mg. twice a week. This dose was increased by 100 mg. increments every 4 weeks until 300 mg. twice a week was reached. With this dose no serious complications have so far been noted. Several patients are undergoing combined treatment with Streptomycin and Sulphetrone or DDS, and results, both clinically and bacteriologically, are proving satisfactory. Isonicotinic acid was also tried on a small number of patients suffering from lepromatous leprosy in an advanced stage. Three tablets (50 mg. each) a day were given over a six months' period. No disturbance was noted in the renal or hepatic function. However, no significant improvement could be noted when the results of this treatment are compared with the good clinical and bacteriological results obtained from the other remedies now in use in the treatment of Hansen's disease.

The Visiting Physician, has been of great help. His advice and assistance were asked for with profit several times during the year.

The Senior Ophthalmologist called on various occasions during the year and examined and treated the eye complications of the patients. The Government Dental Surgeon also attended the patients on various occasions.

The dados of the kitchen and pantries have been covered with glazed-tiles, and marble mosaic shelves have been fixed in the pantries. Hot water communications have been now extended to all the dressing rooms.

ISOLATION HOSPITAL

The movement of the hospital population during the year was as follows:—

	Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
				Transferred to other Hospitals	At Request	Cured	Relieved	Died	
Males	21	174	15	21	1	182	1	5	1
Females	15	178	20	23	1	163	1	5	19
Total	36	352	35	44	2	345	2	10	20

A total of 423 persons (210 males and 213 females) were treated during the year. Of these 387 cases were new admissions or transfers from other hospitals. The daily number of patients during 1953 averaged 17 (9 males and 8 females). The highest number of patients on any one single day was 43, the lowest 3.

Cases admitted into the hospital with a provisional diagnosis of diphtheria amounted to 219 of which 106 were confirmed bacteriologically, and 12 clinically. The remaining 101 were cases of tonsillitis or of other affections of the upper respiratory tract. Only one of the bacteriologically confirmed cases had been fully immunised against this disease and in this case the infection developed in a mild form and the course of the disease was uneventful. There were 5 deaths from diphtheria, four of which occurred within 26 hours of admission of the patients.

Four cases of cerebro-spinal fever were admitted into hospital. There was one death in a man 48 years old in whom the sulphonamides failed to act.

Cases of acute anterior poliomyelitis admitted were 24. There was one death.

There were 23 cases of chickenpox; 16 of scarlet fever; 13 of whooping cough; 13 of measles; 5 of german measles; 5 of murine typhus; 4 of mumps; 4 of influenza; 4 of puerperal fever; 1 of septic abortion; 1 of malaria (contracted abroad) with no deaths.

There were 18 deaths of erysipelas of whom one patient, a man aged 78 years died of chronic nephritis and acute heart failure. There was in addition a death from Hodgkin's disease and one from pneumococcal meningitis, bringing the total to 10 deaths.

The disinfection station is nearing completion and it is hoped that it will be put into operation in the very near future.

During the year two wards that had sustained war damage were considered unsafe and had to be closed down.

HOSPITALS IN GOZO

VICTORIA HOSPITAL

The movement of the hospital population during the year was as follows :—

	Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
				Transferred to other Hospitals	At Request	Cured	Relieved	Died	
Males	16	293	6	14	17	103	147	15	19
Females	35	427	5	10	82	225	97	24	29
Total	51	720	11	24	99	328	244	39	48

The total number of cases treated during the year was 782, The daily average population was 61 (25 males and 36 females) whilst the death-rate was 5%, same as for 1951.

The classification of diseases and deaths is given in Appendix MA.

Six cases of typhoid fever with no deaths and 33 cases of undulant fever with one death came up for treatment during the year; the corresponding figures for last year being respectively 7 with 2 deaths and 47 with no deaths. As usual Chloromycetin for typhoid fever and Aureomycin for undulant fever were used in the treatment of these conditions. The claim that Aureomycin can be administered in smaller doses with the same effect was not confirmed in our series. Even with doses of 8 capsules a day (2 grm.) a number of relapses was observed. Five cases of tetanus with no deaths were treated, as against 4 with no deaths for the preceding year. 3 cases of Kala-azar, one of whom was still remaining at the end of the year came up for treatment. The other 2 were discharged cured. Tuberculosis of the respiratory system accounted for 10 cases, as against 19 for last year. Seven of them were discharged cured and three transferred to the Connaught Hospital. Other forms of Tuberculosis, including bones and joints accounted for 3 more cases, which were all discharged cured.

During the year 66 cases were referred to hospitals in Malta for special investigations and/or specialised treatment as against 79 for last year. Amongst them were cases requiring physiotheraphy, dentures or special X-ray investigations, such as tomography or screening of the digestive tract, which could not be dealt with in this hospital. Other cases were transferred at the request of the Consultants or for operative or other special treatment.

The number of operations performed during the year was 255. The great majority of them, including tonsillectomies, all obstetric and gynaecological work, herniectomies, fractures and dislocations and all emergency operations such as Caesarean sections (lower segment), perforated duodenal ulcer and appendicectomies were performed by the medical staff of the hospital. Other specialized operations that could afford to wait, were performed by the Consultants during their respective session at the Hospital.

A re-conditioned high pressure sterilizer was supplied during the year in place of two former sterilizers that had become unserviceable.

The total number of cases seen in the Out-patient department during the year was 891 as against 1042 for last year. As usual a good proportion of them were accidents or other cases of emergency reporting for treatment at any time of the day and sometimes by night. There were also claimants under the Workmen's Compensation Ordinance. Others were cases discharged from hospital as out-patients or referred to the Department by the D.M.O.'s or by the M.O.'s of the hospital. Other cases were referred to the Consultants.

The number of examinations and other tests performed at the laboratory during the year was 1338 as against 1376 for last year.

These tests were carried out for :— blood count and picture 186; blood urea estimation 50; blood serum agglutination 60; blood grouping 154; red blood cells sedimentation rate 144; complete examination of urine 200; examination of faeces for amoebae 19; examination of faeces for occult blood 20; examination of gastric content 5; examination of C.S.F. 8; examination of urine for T.B. 19; examination of throat swabs 54; examination of hair and scraping for parasites 79; examination of sputum 199; splenic pulp for L.D.B. 22; Friedman's test for pregnancy 81; nasal swabs for H.B. 17; vaginal swabs 5; pus, discharge, scraping etc. 6; Van den Bergh's test 10.

Since facilities for X-raying of chest were accorded to prospective emigrants and their families 3 years ago, work in this department continued to be brisk, and from 3 sessions per week very often X-ray examinations were carried out 4 times and occasionally 5 times a week.

X-ray examinations on in and out-patients have also risen in number and this will further increase if, as it is hoped, facilities for screening will again become available.

The total number of X-ray examinations performed during the year was 2776 as against 2840 for last year.

The consultant service is now past the experimental stage and during the 6 years of its existence it has consistently proved its worth and utility.

With the exception of the Ophthalmologist who was away from the Island on a WHO mission in the Far East during the first quarter of the year, all the Consultants held punctually their monthly session at the hospital. Their clinics were always well attended and the Surgeon and the Ophthalmic Surgeon each performed a good number of important operations.

The services of one of the radiologists from St. Luke's were also available when required.

In October the construction of the new post mortem room and of the inquest room was completed. At the same time the remodelling of the operating theatre, which had taken almost a year to complete, and the construction of its new annexes, namely the sterilization room, the anaesthetic room and lavatories were brought to a close. The two big wards of St. John the Baptist's Hospital which is attached to this Hospital were paved with cement tiles during the year. The roof of the X-ray Department and that of the bath room on the Women's division of St. John the Baptist's Hospital, both of which were in a dangerous condition for some time, have been dismantled and reconstructed.

The old telephone switchboard was replaced by a new and larger one. A new boiler for the hot water system was also installed during the year.

As in previous years the patients of this hospital and the inmates of the St. John Baptist hospital were entertained in various ways.

ST. JOHN THE BAPTIST HOSPITAL

The movement of the hospital population during the year was as follows :—

Sex	Remaining at end of 1952	Admitted	Transferred from other hospitals	Discharged			Remaining at end of 1953
				Transferred to other hospitals	At request	Died	
Males	47	3	2	1	1	12	38
Females ...	50	10	—	1	3	12	44
Total	97	13	2	2	4	24	82

This hospital which is an asylum for the aged and infirm, had an average population of 86 (41 males and 45 females).

The deaths were due to the following causes :— Brain tumour 1; cerebral haemorrhage 6; cerebral thrombosis 2; pulmonary embolism 1; asthmatic bronchitis 1; heart failure 2; congestive heart failure due to chronic myocarditis 3; senility 1; senile cachexia 2; senile atrophy 1; uraemia from chronic nephritis 1; diabetes mellitus 2; gangrene from femoral artery thrombosis 1.

The outstanding event of the year in the hospital was the commemoration of the first century of its existence as a home for the aged and the infirm. To be exact the event should have been commemorated two years ago because the hospice, as the hospital was then called, was opened on the 24th January 1851 on the authority of Sir Richard Moore O'Ferrall, the Governor of the Islands at the time, but a hospital named after St. John the Baptist had existed in Gozo long before the last century. In fact it is recorded that in the year 1719 a wealthy citizen of Gozo, Canon John M. Camilleri with the consent of the reigning Grand Master Perellos and the approval of Pope Clement XI, had endowed the hospital of St. Anthony and St. John the Baptist. That hospital existed outside the walls of the citadel and provided care and treatment for men and women.

Since the hospital was reserved for the aged, the chronics and the infirm in 1851, it has proved to be a haven of rest and comfort for the thousands of inmates who have ever found shelter and protection within its walls.

ST. THERESA'S HOSPITAL

The movement of the hospital population during the year was as follows :—

Sex	Remaining at end of 1952	Admitted	Transferred from other hospitals	Discharged			Remaining at end of 1953
				Transferred to other hospitals	At request	Died	
Males	9	1	1	1	2	1	7
Females ...	8	3	1	—	3	2	7
Total	17	4	2	1	5	3	14

This hospital which houses tuberculous cases, had an average daily population of 14 (8 males and 6 females). It is under the care of the medical staff of the Victoria hospital, the Superintendent of the latter hospital acts in the same capacity in this hospital. The Government Chest Specialist pays regular visits to this hospital.

HOSPITAL FOR MENTAL DISEASES (GOZO)

The movement of the hospital population during the year was as follows :—

	Males	Females	Total	Males	Females	Total
On the hospital registers on 31st December, 1952	—	—	—	82	90	172
Transferred from H.M.D. Malta ..	3	6	9	—	—	—
Provisionally admitted	8	3	11	11	9	20
Total cases under treatment				93	99	192
Discharges:						
Transferred to H.M.D. Malta ..	8	3	11	—	—	—
Deaths	4	7	11	12	10	22
On the hospital registers on the 31st December, 1953	—	—	—	81	89	170

The daily average population was 167 (80 males and 87 females).

Of the 20 patients (11 males and 9 females) admitted during the year, 11 (8 males and 3 females) were new cases whilst the others were transfers from the Hospital for Mental Diseases, Malta. The new cases were subsequently transferred to Malta for examination by the Hospital Board.

The general health of the patients was satisfactory and except for two old cases of pulmonary tuberculosis (1 male and 1 female) in a quiescent state reported upon last year there were no cases of notifiable diseases.

Treatment is mainly symptomatic: all patients in this hospital are chronic cases that have already undergone specialized treatment in Malta.

The average daily number of patients usefully occupied during the year was 38.

Patients who are considered suitable, frequently go for walks out of the hospital grounds under proper surveillance. Besides, bus drives and day outings were also frequently organised during the year.

Deaths totalled 11 (4 males and 7 females). The causes of death were :— senility 4 ; heart disease 2 ; nephritis 1; cerebral thrombosis 1 ; diabetes mellitus 1; enterocolitis 1 ; cancer of the breast 1.

12 inmates (9 males and 3 females) of the St. Vincent de Paul Hospital are still housed in emergency wards of this hospital.

SACRED HEART HOSPITAL

The movement of the hospital population during the year was as follows :—

Remaining at end of 1952	Admitted	Transferred from other Hospitals	Discharged					Remaining at end of 1953
			Transferred to other Hospitals	At Request	Cured	Relieved	ied	
Males 6	—	—	1	1	—	—	1	3
Females 7	—	1	1	—	—	—	2	5
Total 13	—	1	2	1	—	—	3	8

No new cases of patients suffering from Hansen's disease were admitted during the year. Transfers from and to St. Bartholomew's Hospital, Malta, totalled 3 whilst only 1 patient (male) left hospital following the enactment of the Lepers (Amendment) Act, 1953.

Deaths numbered 3 (1 male and 2 females). The causes of death were :— leprosy and glycosuria 2; leprosy and uraemia 1.

Attendances at the out-patient clinic totalled 60.

Following the enactment of legislation abolishing compulsory segregation of lepers and in view of the small number to which the patients in this hospital have been reduced, the question will arise whether it is justifiable to maintain this fully equipped and fully staffed hospital for the benefit of half a dozen patients, when so many of the other hospitals are actually understaffed.

ISOLATION HOSPITAL

The movement of the hospital population during the year was as follows :—

Remaining at end of 1952	Admitted	Transfer ed from o her Hospitals	Discharged					Remaining at end of 1953
			Transferr d to other Hospitals	At Request	Cured	Relieved	Died	
Males 3	29	—	3	—	28	—	—	1
Females 4	33	—	3	—	30	—	1	3
Total 7	62	—	6	—	58	—	1	4

During the year the hospital was kept open all the year round when 62 patients (29 males and 33 females) were admitted.

The total number of patients treated during 1953 was 69 and the cases treated consisted of the following :— Diphtheria 22 (9 males and 13 females); acute tonsillitis 15 (10 males and 5 females) ; whooping cough 11 (2 males and 9 females) ; acute anterior poliomyelitis 3 (males) ; measles 3 (1 male and 2 females) ; scarlet fever 3 (1 male and 2 females); cerebro-spinal meningitis 3 (1 male and 2 females); erysipelas 1 (male); puerperal fever 1; Vincent's angina 1 (female); oedema of larynx 1 (male); axillary adenitis 1 (male) ; *arthritis 1 (male) ; *hip joint disease 1 (male) ; *transverse myelitis of spine 1 (female).

There was one death, a female patient who died of cerebro-spinal meningitis.

The age groups of the patients treated were :—

Under 6 years of age 57 (31 males and 26 females).
Under 11 years of age 9 (2 males and 7 females).
Over 11 years of age 3 (1 male and 2 females).

The locality of cases of acute anterior poliomyelitis were : Għajnsielem 3 (males).

* These cases were originally referred as suspected acute anterior poliomyelitis.

VII. ADMINISTRATION AND MISCELLANEOUS

Staff:

Medical :— At Head Office : Chief Government Medical Officer, Senior Medical Officer, Senior Health Officer, Principal Laboratory Officer, Medical Officers of Health 4, Junior Analyst, Junior Bacteriologist, Medical Officer General Service.

Administrative :— Administrative Secretary, Accountant, Almoner, Supplies Officer.

In Districts :— Port Medical Officers (including Luqa Airport) 5, School Medical Officers 2, District Medical Officers 40, Child Health Officers 2, School Dentists 2, School Eye Specialist 1.

Specialists :— Physicians 3, Surgeons 4, Accoucheurs 2, Surgeons E.N.T. 2, Pathologists 2, Venereal Disease Officers and Dermatologists 2, Psychiatrists 6, Bacteriologist, Tuberculosis and Chest Specialists 2, Orthopaedic Surgeons 2, Blood Transfusion Officer, Ophthalmologists 2, Radiologists 4, Anaesthetists 3.

Hospitals :— Resident Medical Superintendents 9, Resident Medical Officers 9, Resident Clinical Officers 3, Assistant Medical Officers 16.

Dental Officers :— Dental Surgeons 2, Junior Dental Surgeons 2.

Pharmaceutical Chemists :— Medical Stores 3, Hospitals 2, Assistants Apothecaries 13, Laboratory Assistants 6.

Radiographers 4.

Health Inspectors :— Sanitary Inspectors 60; Public Cleansing Officer, Tuberculosis Officer, Rodent Control Officer.

Health Visitors 38.

School Nurses 4.

Nursing Sisters :—Sister Tutors 2, Registered Nurses 9, Sick Children Nurse.

Midwives :— In hospitals 6, subsidized in districts 3.

Masseuses and Physiotherapy Sisters 6.

Council of Health :— No Council of Health meetings were held during 1953.

Medical Board :— The Medical Board held fourteen sittings during the year; no extraordinary meetings were convened.

In continuation of its policy of establishing reciprocity with other countries of the Commonwealth for locally trained doctors and nurses, the Board opened negotiations with the Medical Board of New South Wales and with the Nurses Board of the same state. Negotiations with the Nurses and Masseurs Registration Board of Brisbane, Australia, continued to progress favourably. Negotiations with Pakistan for the reciprocal recognition of medical degrees between that Dominion and Malta were satisfactorily concluded.

The Board approved the recommendation of the sub-committee appointed to report on the existing facilities for student midwives and agreed to recommend to Government the revised syllabus of studies. The tariff of fees submitted by the same sub-committee was agreed to and recommended for submission to Government.

The sub-committee appointed to study and report on the manufacture and the use of pre-cast concrete blocks held several meetings and presented its report towards the end of the year. Its recommendations are under consideration.

A claim from the Chamber of Pharmacists for the representation on the Board and for the drawing up of a tariff of dispensing fees were considered by the Board. A sub-committee was entrusted with the drawing up of the tariff of fees.

The Board also considered several applications for the local practice of the medical and kindred professions. Seven doctors, 3 dentists, 20 apothecaries, 5 assistant apothecaries and 4 midwives were recommended for the grant of the relative licence, whilst 20 nurses and 3 physiotherapists were admitted to the Register for Nurses and the Register for Physiotherapists respectively.

Fifteen notices for the construction of new buildings and/or structural alterations to existing buildings were brought before the Board. Of these, 3 were submitted by the Superintendent of Public Health and 12 were appeals against decisions taken by the Department.

The Board has also assessed fees a) claimed by persons licensed to practise the medical and kindred professions, b) due to officers of this Department for services rendered to other Government Departments and c) submitted by private persons.

Laws and Regulations:— The following legislation was approved and published during the year:—

i) Government Notice No. 7 of the 5th January amending the Public Health (Aircraft) Regulations, 1946, and extending the validity of the International Certificate of Vaccination against Yellow Fever from 4 to 6 years;

ii) Government Notice No. 8 of the 5th January, amending the Port Health Regulations, 1946, and extending the validity of the International Certificate of Vaccination against Yellow Fever from 4 to 6 years;

iii) Government Notice No. 452 of the 14th August increasing the rate for the stamping of sausages from 1d. to 1½d.;

iv) Government Notice No. 461 of the 1st August raising the fee for the watching of corpses at the Addolorata Cemetery from 5/- to 10/-;

v) Government Notice No. 665 of the 18th December prescribing the maximum quantity of water which may be contained in bread as 45% of the total weight.

In addition the following acts were passed by the Legislative Assembly during the year:—

i) Act No. VIII to amend the Medical and Kindred Professions Act;

ii) Act No. X to amend the Prevention of Disease Ordinance;

iii) Act No. XI to amend the Lepers Ordinance.

Medical Examinations:— A total of 506 Government officials were examined by the Medical Officers of Health prior to appointment. Nurses, teachers and police recruits also had their chest X-rayed. The Medical Officers of Health examined 85 Government Officials who had exceeded their statutory period of sick leave or who were reported unfit for further service by their Head of Department.

Pharmacies:— The Medical Officers of Health together with the Analyst of the Department paid 113 surprise inspections to pharmacies throughout the year. These inspections were carried out in terms of Section 36 of the Medical and Kindred Professions Ordinance to ascertain if the provisions of the law are being complied with.

All the pharmacies were found to be supplied with the medicinal substances required by law; no substance was found imperfect, spoilt or noxious. The registers were properly kept and the prescriptions containing dangerous drugs were found to conform with the provisions of Government Notice No. 292 of 1939.

Vaccinations:— In terms of the Prevention of Disease Ordinance all parents are obliged to have their babies vaccinated against small-pox. Such vaccination must be carried out after the baby attains the age of two months. Though vaccination may be carried out by all medical practitioners the Department holds yearly two sessions of public gratuitous vaccinations. The vaccine lymph is always provided free of charge by the Department and is available to all doctors who ask for it.

The number of babies vaccinated during the year totalled 3485.

District Medical Service:— The staff of the District Medical Service is made up of 40 medical practitioners who attend daily at the Government District Dispensaries and also pay domiciliary visits.

The number of attendances at the District Dispensaries totalled 96,387; domiciliary visits totalled 17,662 during the same period.

Training of Personnel:— Dr. J. Pisani, one of the Resident Medical Officers at the Hospital for Mental Diseases, is undergoing a postgraduate course in psychological medicine at Maudsley College. Two other officers Dr. Joseph Ellul and Dr. Francis T. Pullicino left for U.K. to undergo a course in port health and blood transfusion service respectively. The latter will be responsible for the organization of a blood transfusion service on his return to Malta.

Three entrance examinations were held during the year at the St. Luke Training School for Nurses. It is gratifying to note that the idea of the nursing profession as a career is appealing to our younger generation and many young ladies of school-leaving age are coming forward requesting enrolment.

Two preliminary and two final examinations were held during the year. Seventeen, out of twenty-three candidates, were successful in the preliminary examination whilst eight, out of nineteen candidates, passed the final examination and were awarded state registration certificates.

Appointments:— The following appointments were made during the year:—

Dr. Edward P. Gatt, M.D., B.Sc., appointed District Medical Officer as from the 19th February;

Dr. Robert Muscat Inglott, M.D., D.P.H., appointed Medical Officer of Health as from the 11th March;

Dr. Maurice Ellul, M.D., appointed Resident Medical Officer as from the 26th June;

Prof. G. P. Xuereb, M.D., B.Sc., B.Sc. (Oxon.), D.Phil. (Oxon.), D.C.P. (Lond.) appointed Pathologist and Professor of Pathology in the Royal University of Malta as from the 1st October;

Dr. Raphael S. Cefai, M.D., B.Sc., appointed District Medical Officer as from the 14th October;

Dr. Joseph M. Paris, M.D., appointed District Medical Officer as from the 14th October;

Dr. Edward R. Mercieca, M.D., D.M.R. (D), appointed Junior Radiologist as from the 13th November.

Medical Stores:— The total value of Medical Supplies issued during the Financial Year 1953-54 was £64,357. 7. 0 as detailed hereunder:—

	Drugs	Dressings	Equipment	Total
Hospitals, District Dispensaries and other Branches of the Medical and Health Department (Malta) ...	£32,290 11 1½	£10,918 3 5	£16.344 5 4	£59,563 19 10½
Approved Prescriptions and Charitable Institutions ...	33 0 10	3 8	12 0 5	45 4 11
Hospitals, District Dispensaries and other Branches of the Medical and Health Department (Gozo) ...	2,383 11 0½	501 1 7	914 15 1	3,799 7 8½
Other Government Departments	341 9 1	244 3 4	72 10 3	658 2 8
Sales from Medical Stores	217 8 0	— — —	— — —	217 8 0
Relief to Greek Earthquake Victims	62 8 2	5 16 0	4 19 8	73 3 10
	£35,328 8 3	£11,669 8 0	£17,359 10 9	£64,357 7 0

Medical Relief:— No changes were made in the rate granted to families of patients at St. Bartholomew's and in other hospitals.

As in former years persons suffering from certain diseases for which treatment is not avilable locally were remitted to U.K. hospitals. Thirty-eight patients were sent for treatment in British hospitals of whom twenty-eight patients were sent to the Royal Cancer Hospital, six to the Middlesex Hospital, three to the National Hospital and one to Hammersmith Hospital.

Expenditure on medical relief and kindred services during the financial year 1953-54 was as follows:—

Grant to sick persons and their dependants	£ 3,560	7	6
Grant to dependants of T.B. patients (Malta only) ...	21,814	19	—
Subsidies for milk for babies	5,808	3	6
Infants kept at Ursuline Creche at Sliema	2,617	—	—
Grant to families of inmates of St. Barth's Hospital (Malta only)	3,630	8	6
Payment of fees to midwives for services rendered to necessitous mothers	63	5	—
Travelling expenses to persons sent to U.K. hospitals for treatment not available locally	3,495	9	10
Total	£40,989	13	4

Total cost of the Medical and Health Department

The expenditure during the financial year 1953-54 — structural repairs not included — was as stated hereunder. The expenditure for 1952-53 is given for comparison.

	1952-53	1953-54
General Administration and general expenses ...	£ 19,966	£ 19,983
Health Branch, Laboratory and Quarantine Stations	46,036	48,384
Child Health Service	9,101	9,534
Cemeteries	6,530	6,395
School Medical Service	4,682	4,701
Hospitals	811,596	824,838
School for Nurses	11,343	9,793
District Medical Service	21,363	21,782
Grant to the Ladies' Hospitals Visiting Committee	250	250
Grant to the Malta Memorial District Nursing Association	2,000	2,000
Grant to the Mothers' and Infants' Health Association	450	450
Maintenance of seven beds in the Malta War Memorial Hospital for Children	630	630
Grant to the St. John Ambulance Association (Malta Centre)	122	122
Relief to families of inmates of St. Bartholomew's Hospital, Malta, and Sacred Heart Hospital, Gozo	3,735	3,636
Outdoor Medical Relief, including milk subsidies for babies and midwifery assistance	17,209	14,411
Relief to T.B. cases and/or to their families ...	19,773	22,318
Expenses in connexion with the burial of paupers	1,077	1,039
Public Cleansing Service	209,409	216,023
	£1,185,272	£1,206,289

Revenue :— The Revenue of the Medical and Health Department in 1953-54 amounted to £29,447 as compared with £28,663 in 1952-53.

Details of Revenue are as shown below :—

Heads and Subheads of Revenue

			Actual Revenue 1952-53	1953-54
			£	£
II.	2.	Quarantine Dues	—	—
III.	18.	Miscellaneous	17	17
V.	A.	Fees of Office :—		
	18.	Permits, certificates, etc.	246	242
	19.	Radiography	710	579
	20.	Pathological Examinations	8	14
	21.	Stamping Sausage Fees	1,161	1,566
	36.	Miscellaneous	134	50
	B.	Reimbursements :—		
	65.	Refund of Expenses for watching corpses at the Addolorata Cemetery	111	146
	66.	Sale of Produce	460	453
	67.	Sale of Offal	3,685	4,512
	68.	Ambulance and funeral expenses	125	151
	69.	Hospital Fees	11,871	12,472
	70.	Sale of Medicines	910	601
	71.	Collections from Public Conveniences ...	1,153	1,178
	102.	Miscellaneous	1,314	1,207
XIV.	1.	Widows and Orphans Fund	2,443	2,445
XVII.	1.	Sale of House Refuse	2,596	2,834
	2.	Miscellaneous	722	561
	3.	Weighbridge Fees	891	407
XVIII	1.	Sale of Crown Lands	106	12
			£28,663	£29,447

APPENDIX A

METEOROLOGICAL OBSERVATIONS — 1953.

STATION—VALLETTA, MALTA. $\lambda = 14^\circ 30'$ $\phi = 35^\circ 53'$ H = 185 ft

Months	Mean Pressure (8 a.m.)	Air Temperature: Adopted Mean Temperature	Means of: Min.	Means of: Max.	Absolute Min. and Max.: Min.	Absolute Min. and Max.: Date	Absolute Min. and Max.: Max.	Absolute Min. and Max.: Date	Tension of Vapour (8 a.m.)	Relative Humidity (8 a.m.)
January	29.901	51.1	47.6	55.6	41.3	14th	66.2	1st	8.9	70 p.c.
February ...	30.007	53.1	49.9	57.6	45.6	9th	62.8	14th	9.7	71 p.c.
March	30.206	53.8	50.4	57.5	44.5	12th	62.8	31st	10.2	72 p.c.
April	29.987	61.3	57.2	66.0	52.5	1st	75.4	9th	13.8	77 p.c.
May	29.936	65.8	61.4	70.7	54.1	5th	78.6	19th	16.2	75 p.c.
June	29.918	77.7	67.5	78.3	60.3	2nd	91.8	29th	18.1	67 p.c.
July	29.981	80.3	75.6	85.9	72.4	5th, 10th & 15th	95.3	31st	24.7	71 p.c.
August	29.990	79.0	74.1	84.1	68.7	11th	89.8	1st	24.4	72 p.c.
September ...	30.052	76.5	71.7	81.7	68.8	14th	85.8	8th	23.3	75 p.c.
October	30.009	71.4	67.5	76.0	59.8	10th	84.2	16th	19.2	72 p.c.
November ...	30.155	61.6	58.3	65.3	53.9	26th	70.9	7th	13.5	72 p.c.
December ...	30.160	59.6	57.1	63.8	46.2	31st	69.7	17th	13.5	78 p.c.
Year	30.025	65.9	61.5	70.2	41.3	14th Jan	95.3	31st July	16.3	73 p.c.

λ=Longitude of Station. ϕ = Latitude of Station. H = Height above mean sea level.

STATION—VALLETTA, MALTA. Ht. = 71 hr. = 59.

Months	Cloud: 8 a.m	Sunshine: Hours of :	Rainfall: Total ins.	Rainfall: Max. ins	Rainfall: Date	Weather No. of Days of:— Rain	Snow	Hail	Thunder Storms	Clear Sky	Overcast	Gales	Wind — No. of Observations of:— (8 a.m.) N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm
January ...	6.7	4.7	5.35	1.04	27th	20	...	5	6	...	12	2	...	5	...	...	1	8	3	11	3
February ...	4.6	7.0	0.75	0.23	18th	11	...	4	...	1	7	...	1	1	...	3	1	4	3	12	3
March ...	5.8	6.0	4.45	1.42	10th	11	...	...	3	1	13	2	4	12	1	1	1	2	...	5	5
April ...	5.8	8.8	1.30	0.62	24th	6	...	...	...	4	14	1	1	2	2	7	1	...	2	10	5
May ...	5.2	9.3	1.00	0.50	5th	6	...	...	2	5	10	...	4	2	2	1	...	1	3	11	7
June ...	3.4	11.4	0.60	0.43	7th	3	...	...	...	7	6	1	3	2	4	4	1	1	2	7	6
July ...	1.3	12.6	0.02	0.02	4th	1	...	...	...	11	2	...	8	7	1	...	...	...	1	8	6
August ...	3.2	11.3	1.68	1.20	7th	4	...	...	6	3	3	1	7	6	2	1	...	2	1	6	6
September...	3.8	9.3	0.32	0.21	8th	3	...	...	...	5	6	..	1	2	2	12	...	...	1	4	8
October ...	6.8	6.3	2.87	1.41	24th	10	...	1	10	...	13	...	2	...	5	3	3	4	2	4	8
November ...	6.7	5.4	6.54	1.36	26th	17	...	1	5	...	13	...	2	11	1	4	1	1	2	2	6
December ...	7.0	3.9	1.16	0.25	25th	11	...	1	1	...	14	...	1	3	...	4	7	1	2	4	9
Year ...	5.0	8.0	26.04	1.42	10th Mar.	103	...	12	33	37	113	7	34	53	20	40	16	24	22	84	72

Ht = Height of the Therms. above the ground in feet hr. = Height of the Raingauge above ground in feet.

Appendix B

Applications for Licences dealt with by the Medical and Health Department

	Bake-Houses			To work in the preparation of bread			Premises for the preparation of paste			Mills			Aerated Water Factories			Factories for the making of Sausages			To keep Stables			To keep Goat pens			To keep Cowsheds			To sell meat of inferior quality			To work in Sausage Factories			Sale of Milk		
	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Applications received	New licences issued	Licences renewed	Licences received	New licences issued	Licences renewed
Malta ...	33	19	354	15	11	369	1	1	24	1	1	16	6	5	33	—	—	3	2	2	9	36	19	582	30	11	46	33	—	—	5	5	48	96	71	34
Gozo ...	7	3	56	3	1	48	1	—	8	—	—	5	1	—	4	—	—	—	—	—	—	2	—	9	1	—	—	—	—	—	6	6	9	—	—	—

Appendix C

Applications for Police Licences reported upon by the Medical & Health Department

	Wines & Spirits	Wine Factories	Non-Intoxicants	Groceries	Butchers' Shops	Coffee Shops	Restaurants	Lodging Houses	Shops for the sale of Cheesecakes	Schools	Cinemas & Theatres	Applications to exercise noxious trades	Hotels	Market Stalls	Confectioneries	Cold Stores	Manufacture of foods	Barber Shops	Fish Stores	House drains
Malta ...	517	9	28	789	30	125	82	6	39	3	20	43	4	18	263	—	12	22	1	713
Gozo ...	18	—	15	64	3	9	—	—	—	—	2	9	2	—	43	—	3	3	—	148

APPENDIX HA.

Table showing diseases causing death, by month, in accordance with the International List of Causes of Death.

Causes of Death	Jan.	Feb.	Mch.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
I. *Infective and Parasitic Diseases.*													
1. Tuberculosis of the respiratory system	5	4	5	4	2	1	2	3	2	3	6	2	39
2. Tuberculosis of the meninges and central nervous system	3	...	2	...	3	...	1	...	...	...	1	...	10
4. Tuberculosis of bones and joints	...	1	...	...	..	..	...	...	...	..	...	...	1
5. Tuberculosis, all other forms	..	...	...	...	1	...	1	...	1	..	..	...	3
8. Tabes dorsalis	...	1	...	...	..	..	...	..	...	..	..	...	1
9. General paralysis of insane	...	1	...	...	...	...	..	..	...	...	1	1	3
12. Typhoid fever	...	1	...	...	...	...	...	..	...	...	..	..	1
13. Paratyphoid fever and other salmonella infections	...	..	...	..	...	...	1	..	...	...	..	...	1
15. Brucellosis (undulant fever)	...	...	..	...	1	...	1	..	...	...	1	...	3
16*c*. Other unspecified forms of dysentery	...	...	..	...	...	...	...	...	...	1	..	..	1
19. Erysipelas	1	..	..	...	..	...	..	..	...	...	1	...	2
20. Septicæmia and pyæmia	...	...	...	..	..	...	2	2	1	...	1	...	6
21. Diphtheria	2	..	...	1	...	...	...	1	...	...	1	1	6
22. Whooping cough	...	...	1	...	...	...	...	...	...	...	...	...	1
23 Meningococcal infections	...	...	..	..	..	...	..	...	1	1	..	..	2
25. Leprosy	1	...	2	...	..	...	...	...	...	...	3	...	6
26 Tetanus	1	..	..	...	...	2	2	...	1	...	1	...	7
28*a*. Poliomyelitis	...	1	...	...	...	...	...	...	...	...	...	...	1
43*d*. Food poisoning infectio and intoxication	...	..	...	1	...	...	..	...	...	...	.	...	1
43*f*. Leishmaniasis	...	.	..	..	...	...	...	...	...	1	...	..	1
II. *Neoplasms.*													
44. Malignant neoplasm of buccal cavity and pharynx	...	..	1	..	2	2	1	1	...	...	...	1	8
45. Malignant neoplasm of œsophagus	.	1	1	...	1	1	1	...	...	1	1	..	7
46. Malignant neoplasm of stomach	8	5	5	4	1	4	1	3	5	3	6	5	50
47. Malignant neoplasm of intestines, except rectum	1	.	2	2	1	2	..	2	2	3	2	2	19
48. Malignant neoplasm of rectum	1	.	...	...	2	1	1	...	1	...	...	1	7
49. Malignant neoplasm of larynx	...	..	2	1	1	...	..	...	...	..	1	1	6
50. Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary	3	2	1	4	3	2	5	...	...	5	4	3	32
51. Malignant neoplasm of breast	3	2	1	3	1	1	4	4	5	2	3	3	32
53. Malignant neoplasm of other and unspecified parts of the uterus	2	..	...	2	...	1	3	1	...	4	1	1	15
54. Malignant neoplasm of prostate		...	...	...	...	...	..	...	...	1	3	...	4
55. Malignant neoplasm of skin	...	...	...	...	..	...	...	1	...	1	...	...	2
56. Malignant neoplasm of bone and connective tissue	1	2		..	1	...	...	1	1	...	...	1	7
57. Malignant neoplasm of all other and unspecified sites	9	5	6	8	5	9	7	7	5	8	9	2	80
58. Leukæmia and aleukæmia	1	1	3	1	1	2	...	..	...	1	..	1	11
59. Lymphosarcoma and other neoplasms of lymphatic and haematopoietic system	3	2	1	..	...	1	1	...	...	2	...	...	10
60. Benign neoplasms and neoplasms of unspecified nature	...	..	2	..	...	...	1	...	...	1	...	1	5
III. & IV. *Allergic, Endocrine System, Metabolic and Nutritional Diseases and Diseases of the Blood & Blood-forming Organs.*													
61. Nontoxic goiter	.	...	.	...	...	...	...	...	1	.	...	...	1
62. Thyrotoxicosis with or without goiter	..	.	...	...	...	...	.	..	1	...	..	...	1
63. Diabetes mellitus	10	6	10	8	6	8	7	10	4	2	11	5	87
64 Beriberi	.	1	...	...	.	...	.	...	...	...	..	...	1
65*a*. Pernicious and other hyperchromic anæmias	1	..	.	1	...	1	.	...	...	...	...	...	3
65*c*. Other specified and unspecified anaemias	.	.	...	1	3	.	.	1	1	...	.	...	6
66*a*. Asthma	3	1	...	2	2	2	...	...	1	1	3	1	16
66*b*. All other allergic disorders, endocrine, metabolic and and blood diseases	2	...	2	..	..	1	1	1	...	..	...	...	7
V. *Mental, Psychoneurotic and Personality Disorders.*													
67. Psychosis	1		1	...	..	...		...	...	...	...	..	2
68. Psychoneurosis and disorders of personality	...	...	...	..	...	...		1	...	...	...	...	1
69. Mental deficiency		...	...	1		...		...	...	..	...	...	1
VI. *Diseases of the Nervous System and Sense Organs.*													
70 Vascular lesions affecting central nervous system	45	40	34	35	35	22	26	22	23	20	25	28	355
71. Non-meningococcal meningitis	...	...	...	...	1	...	1	...	...	.	...	...	2
73. Epilepsy	1	...	...	...	2		1	...	2	1	1	...	8
77*b*. Otitis media and mastoiditis	...	...	1	...	...	...	..	...	...	...	...	...	1
78*b*. All other diseases of the nervous system and sense organs	...	1	1	...	1	...	1	2	1	..	3	1	11
Carried forward	108	78	84	79	76	63	72	63	59	62	89	61	894

APPENDIX HA — (*Continued*).

Table showing diseases causing death, by month, in accordance with the International List of Causes of Death.

Causes of Death.	Jan.	Feb	Mch	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Brought forward ...	108	78	84	79	76	63	72	63	59	62	89	61	894
VII. *Diseases of the Circulatory System.*													
79. Rheumatic fever	1	...	1	2	...	...	...	...	1	1	...	1	7
80. Chronic rheumatic heart disease	2	...	3	...	...	...	...	1	..	1	1	2	10
81. Arteriosclerotic and degenerative heart disease ...	103	61	71	48	35	36	48	31	38	32	49	52	604
82. Other diseases of heart	16	5	11	16	15	12	12	3	7	6	6	10	119
83. Hypertension with heart disease	14	8	7	9	3	6	3	6	2	5	3	7	73
84. Hypertension without mention of heart	3	4	5	1	..	2	4	1	1	1	2	2	26
85. Diseases of arteries	5	10	10	5	5	3	3	2	2	4	4	3	56
86 Other diseases of circulatory system	1	...	1	...	2	...	2	..	...	1	...	1	8
VIII. *Diseases of the Respiratory System.*													
88. Influenza	...	...	1	...	...	...	...	..	...	...	...	...	1
89. Lobar pneumonia	3	.	1	..	..	2	2	1	...	3	2	...	14
90. Broncho-pneumonia	8	...	7	6	4	4	7	3	3	2	3	6	53
91. Primary atypical, other and unspecified pneumonia .	...	...	...	.	..	...	...	...	...	..	1	...	1
92. Acute bronchitis	5	1	...	2	1	2	7	1	3	5	2	2	31
93. Bronchitis, chronic and unqualified	..	1	2	...	3	.	1	...	2	...	...	1	13
97*b*. All other respiratory diseases	2	5	7	4	5	1	7	3	3	2	4	3	46
IX. *Diseases of the Digestive System.*													
99. Ulcer of stomach	...	...	...	...	...	1	...	1	1	2	...	...	5
100 Ulcer of duodenum	...	.	...	...	...	..	...	1	...	...	...	...	1
101. Gastritis and duodenitis	...	...	...	..	...	...	...	1	...	...	...	...	1
102. Appendicitis	...	...	...	1	...	.	...	..	..	...	...	...	1
103. Intestinal obstruction and hernia	1	...	...	1	1	4	3	1	2	1	...	4	18
104*a*. Gastro-enteritis and colitis between 4 weeks and 2 years	5	3	1	2	6	17	48	18	8	10	8	13	139
104*b*. Gastro-enteritis and colitis ages 2 years and over	...	1	..	1	...	...	...	1	1	...	1	1	6
104*c*. Chronic enteritis and ulcerative colitis	...	...	...	1	..	...	1	...	...	1	1	..	4
105. Cirrhosis of liver	2	1	1	2	...	3	1	1	1	1	1	2	16
106. Cholelithiasis and chol cystitis	1	1	...	...	..	...	1	...	...	...	...	1	4
107. Other diseases of digestive system	...	...	..	...	2	1	3	...	3	2	...	1	12
X. *Diseases of the Genito Urinary System.*													
108. Acute nephritis	2	...	...	1	3	...	1	2	1	1	1	...	12
109. Chronic, other and unspecified nephritis ...	9	7	4	5	4	4	2	6	1	9	4	2	57
110. Infections of kidney	...	...	...	...	1	...	1	1	2	...	...	1	6
112. Hyperplasia of prostate	1	...	1	..	...	...	...	...	...	1	2	..	5
114*c*. All other diseases of the genito-urinary system ..	...	1	...	1	1	...	...	...	1	...	...	...	4
XI. *Deliveries and Complications of Pregnancy, Childbirth and the Puerperium.*													
120*a*. Other complications of pregnancy, childbirth and the puerperium	...	..	1	1	...	1	...	2	...	..	1	...	6
XII. *Diseases of the Skin and Cellular Tissue* & XIII. *Diseases of the Bones and Organs of Movement.*													
121. Infections of skin and subcutaneous tissue ...	...	...	1	...	...	...	...	...	..	...	..	...	1
122. Arthritis and spondylitis	...	...	1	...	...	...	...	...	...	..	2	...	3
124. Osteomyelitis and periostitis	...	...	...	...	1	...	...	...	...	...	...	...	1
126*a*. Chronic ulcer of skin (including tropical ulcer) ...	...	...	1	..	...	...	...	...	..	...	...	...	1
126*b*. All other diseases of skin	...	..	...	2	...	...	...	...	1	...	...	...	3
126*c*. All other diseases of musculo-skeletal system ...	...	...	1	..	...	...	...	...	...	...	...	...	1
Carried forward ...	292	190	223	190	168	162	229	150	113	153	187	176	2,263

APPENDIX HA — (*Continued*).

Table showing diseases causing death, by month, in accordance with the International List of Causes of Death.

Causes of Death	Jan.	Feb.	Mch.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Brought forward ...	292	190	223	190	168	162	229	150	143	153	187	176	2,263
XIV. *Congenital Malformations.*													
127. Spina bifida and meningocele	1	...	1	...	1	1	3	1	...	...	...	...	8
128. Congenital malformation of circulatory system ...	2	...	...	1	2	2	3	...	2	3	1	2	18
129. All other congenital malformations	...	2	3	2	2	1	1	...	1	...	1	...	13
XV. *Certain Diseases of Early Infancy.*													
130. Birth injuries	3	6	2	2	2	2	5	3	3	3	...	6	37
131. Postnatal asphyxia and atelectasis	14	10	6	7	5	4	6	3	11	5	10	6	87
132*a*. Diarrhœa of newborn (under 4 weeks)	...	...	...	...	...	1	2	2	...	.	...	...	5
132*c*. Other infections of newborn	2	...	...	...	...	...	..	.	...	...	...	...	2
133. Haemolytic disease of newborn	...	...	...	...	...	...	.	2		...	1	1	4
134. All other defined diseases of early infancy ...	3	1	3	1	4	1	1	3	2		1	3	23
135. Ill-defined diseases peculiar to early infancy, and immaturity unqualified	14	18	16	15	11	6	11	16	13	21	16	16	176
XVI. *Symptoms, Senility and Ill-defined Conditions.*													
136. Senility without mention of psychosis	26	22	13	16	9	8	14	7	10	10	11	15	161
XVII. *Accidents, Poisoning and Violence.*													
138. Motor vehicle accidents	...	...	1	3	...	.	...	2	2	1	1	...	10
141. Accidental falls	1	..	..	1	...	1	1	2	1	...	...	...	7
143. Accident caused by fire and explosion of combustible material	1	...	1	...	..	2	1	...	1	...	1	..	7
144. Accident caused by hot substance, corrosive liquid, and radiation	..	...	...	.	...	..	..	...	...	...	...	1	1
145. Accident caused by firearm	...	1	...	.	1	...	...	...	.	...	...	1	3
146. Accidental drowning and submersion	...	1	1	..	...	1	...	...	..	1	...		4
148. All other accidental causes	...	2	...	2	1	1	1	3	2	1	2	2	17
149 Homicide and injury purposely inflicted by other persons (not in war)	...	1	1	...	...	...	...	...	...	...	..	...	2
Total ..	359	254	271	240	206	193	281	194	191	198	232	229	2,848

Appendix HB.

Table showing mortality in quinquennial and decennial age groups by sex

Locality	AGES																												
	Under 5		5 & under 10		10 & under 15		15 & under 20		20 & under 25		25 & under 35		35 & under 45		45 & under 55		55 & under 65		65 & under 75		75 & under 85		85 & under 95		95 and over		Total		Total both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Attard	1	2	...	...	...	...	...	...	...	...	2	...	...	...	1	...	1	1	3	2	3	2	...	2	...	...	11	9	20
Balzan	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	...	3	1	1	...	3	1	...	...	...	5	8	13
Birkirkara	24	12	...	...	...	1	...	1	...	1	...	2	3	1	6	7	18	13	13	16	12	13	...	5	...	...	76	72	148
Birzebbuġa	4	6	1	...	1	...	...	1	...	...	1	1	...	...	2	...	3	1	2	1	4	1	...	1	...	1	18	13	31
Cospicua	15	6	...	1	1	...	...	...	...	...	1	2	1	1	4	3	5	2	11	3	3	7	1	1	...	...	42	26	68
Dingli	1	—	...	...	...	...	...	...	...	..	...	..	..	...	...	...	3	...	...	3	1	2	1	...	...	...	6	5	11
Floriana	2	3	1	...	...	...	...	...	1	1	1	1	1	1	4	...	5	4	3	9	6	6	...	..	...	...	24	25	49
Għargħur	4	1	...	...	...	...	...	...	1	...	...	...	1	...	1	...	...	...	3	1	3	1	...	...	...	...	13	3	16
Għaxaq	1	3	...	...	...	...	...	...	...	...	1	...	...	...	..	1	4	2	2	3	3	...	...	4	...	...	11	15	26
Gudja	1	2	...	...	...	...	...	...	...	...	...	...	...	...	1	2	1	...	...	...	1	...	1	1	...	...	5	5	10
Gżira	8	7	...	...	...	...	...	...	...	...	1	1	1	1	2	1	8	3	5	6	2	4	...	3	...	...	27	26	53
Hamrun	14	11	...	2	...	...	...	...	2	1	1	2	5	6	14	3	16	10	11	27	18	23	3	11	...	2	84	98	182
Kalkara...	5	1	...	...	...	...	...	...	...	...	...	...	1	...	1	1	5	2	...	1	4	3	...	.	...	...	16	8	24
Kirkop	3	1	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	1	2	2	1	2	...	..	...	...	6	6	12
Lija	1	2	...	...	...	...	...	...	...	...	...	...	1	1	2	2	2	3	1	3	3	2	..	...	...	...	10	13	23
Luqa	9	2	...	...	...	...	...	...	2	...	...	...	...	...	1	...	6	3	3	6	3	5	1	2	...	...	25	18	43
Marsa	11	14	...	...	1	...	1	1	...	...	3	2	1	3	6	4	9	10	11	12	8	11	2	2	...	...	53	59	112
Marsaskala	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	2	1	...	...	...	1	...	...	...	...	4	2	6
Marsaxlokk	1	1	...	1	1	..	...	...	...	...	...	...	1	...	...	...	1	...	2	...	1	1	...	...	...	...	7	3	10
Mdina	..	...	...	...	...	...	...	...	..	...	...	...	..	...	..	1	1	1	1	...	1	...	...	...	...	...	3	2	5
Mellieħa	1	5	...	...	...	...	...	1	...	..	...	...	3	...	1	3	...	4	3	3	6	5	1	1	...	...	15	22	37
Mġarr and Żebbieħ	3	2	...	...	..	...	1	...	...	...	3	...	...	...	1	...	2	...	1	...	2	1	...	...	...	..	13	3	16
Mosta	5	12	..	...	...	...	1	...	...	...	...	2	...	1	2	1	8	4	12	7	7	7	4	3	...	..	39	37	76
Mqabba	3	2	...	...	...	..	...	...	...	...	...	1	1	1	...	2	1	1	3	4	3	1	2	..	...	...	13	12	25
Msida	9	10	1	...	...	...	...	...	...	..	1	1	2	1	5	2	9	5	4	7	7	2	1	...	...	...	39	28	67
Naxxar	6	6	...	...	...		...	...	...	...	1	...	...	...	...	2	4	...	7	6	4	5	1	2	...	...	23	21	44
Paola	11	14	..	1	...	...	2	1	...	...	...	1	1	...	7	5	12	5	16	9	5	6	...	3	...	..	54	45	99
Pietà	1	2	...	...	...	...	...	...	...	...	...	...	1	1	...	2	2	...	1	4	3	3	...	...	...	...	8	12	20
Qormi	26	19	...	2	3	.	1	...	...	...	1	1	...	3	7	3	13	11	19	16	16	9	2	3	...	...	88	67	155
Qrendi	1	3	...	...	..	...	...	...	..	..	...	...	...	...	3	...	2	1	4	3	1	3	...	1	...	...	11	11	22
Rabat	14	6	2	.	...	...	2	...	...	3	2	1	...	2	3	5	13	13	17	18	17	11	3	1	1	3	74	63	137
Safi	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...		3	1	4
St. Julian's	6	5	3	...	...	...	...	...	.	1	..	1	...	...	2	1	6	6	3	12	3	6	1	1	...	...	24	33	57
St. Paul's Bay	2	3	...	...	...	...	...	...	...	...	...	...	1	...	3	1	2	1	2	3	3	3	...	...	...	...	13	11	24
Sta. Vennera	2	1	...	...	...	...	...	...	...	...	1	...	...	..	...	2	2	...	2	...	1	1	...	...	...	...	8	4	12
Senglea	6	5	...	1	...	...	...	...	...	1	1	...	1	1	...	2	1	4	5	3	...	1	1	1	...	...	15	19	34
Siġġiewi	3	6	...	...	..	...	...	...	...	...	1	1	...	1	...	4	6	7	4	10	5	5	...	2	1	.	20	36	56
Sliema	19	7	1	2	...		...	...	1	1	...	3	4	2	11	10	16	15	23	18	15	18	1	7	...	...	91	83	174
Tarxien	4	4	...	...	...	...	...	...	...	...	...	2	1	...	1	1	5	5	9	8	6	7	2	1	...	...	28	28	56
Valletta...	20	18	1	1	...	...	1	...	1	...	2	2	1	3	10	5	23	18	23	25	13	12	1	8	...	1	96	93	189
Vittoriosa	5	5	...		1	...	...	...	...	...	...	...	...	...	1	...	3	1	4	4	4	2	1	2	...	...	19	14	33
Żabbar	11	10	3	...	..	...	1	1	...	2	1	...	1	4	3	4	6	5	10	10	7	12	2	2	...	1	45	51	96
Żebbuġ	10	8	...	1	...	2	...	...	...	...	...	...	1	1	8	3	4	1	7	8	10	12	1	1	...	...	41	37	88
Żejtun	13	10	2	...	...	...	2	1	3	...	...	2	2	...	5	3	8	7	13	13	9	13	1	2	...	...	58	51	109
Żurrieq	25	12	3	..	...	..	...	...	...	...	1	...	4	2	2	2	4	1	3	5	5	6	2	5	...	..	49	33	82
Total Malta	314	252	19	12	8	3	12	7	11	11	26	29	41	37	122	89	242	175	269	292	230	238	37	78	2	8	1,333	1,231	2,564

APPENDIX HB.—*cont.*

Table showing mortality in quinquennial and decennial age groups by Sex

LOCALITY	AGES																													
	Under 5		5 & under 10		10 & under 15		15 & under 20		20 & under 25		25 & under 35		35 & under 45		45 & under 55		55 & under 65		65 & under 75		75 & under 85		85 & under 95		95 and over		TOTAL		TOTAL both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Għajnsielem	5	1	...	...	...	...	...	...	...	...	...	..	...	...	...	1	...	1	1	1	1	3	1	1	...	1	8	9	17
Għarb	...	2	...	...	...	...	...	...	...	...	..	1	...	...	1	1	...	1	...	3	2	4	...	1	...	...	3	13	16
Għasri	2	...	...	...	...	...	..	...	..	..	...	...	...	...	...	..	1	...	2	...	5	1	1	..	.	...	11	1	12
Kerċem	1	...	...	...	...	...	..	...	...	...	...	1	...	...	1	...	1	...	2	2	2	3	..	2	...	...	7	8	15
Munxar	...	...	...	1	...	...	1	...	...	...	...	..	..	...	...	...	...	...	...	...	..	1	...	..	.	...	1	2	3
Nadur	2	5	...	...	...		.	...	...	1	...	..	...	2	...	...	4	2	4	3	4	8	...	2	...	...	14	23	37
Qala	2	1	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	1	2	3	2	1	1	...	...	...	8	7	15
San Lawrenz	...	1	...	..	...	...	...	...	...	...	...	...	1	...	...	...	1	1	1	...	...	1	2	...	...	...	5	3	8
Sannat	1	1	...	..	...	...	...	...	..	...	...	...	...	...	...	...	...	3	...	2	1	2	...	..	...	..	2	8	10
Victoria	11	1	1	...	...	...	..	1	1	...	1	2	...	4	...	1	4	1	11	10	4	11	1	9	1	...	35	40	75
Xaghra	5	2	1	...	..	...	...	...	...	...	...	...	...	1	...	...	3	3	3	6	2	7	3	1	...	...	17	20	37
Xewkija	8	3	...	1	...	...	...	...		...	...	...	1	1	...	...	...	3	1	...	3	1	...	1	...	...	13	10	23
Xlendi	..	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	..	...	...	...	1	..	...	...	...	...	1	1
Żebbuġ	5	...	...	...	...	...	...	...	...	...	...	..	1	...	...	...	1	...	1	3	1	1	1	1	...	..	10	5	15
Total Gozo	41	17	2	2	...	...	2	1	1	1	1	4	3	9	2	3	15	16	28	33	27	45	10	18	1	1	134	150	284
Total Both Islands...	356	269	21	14	8	3	14	8	12	12	27	33	44	46	124	92	257	191	297	325	257	283	47	96	3	9	1467	1381	2848

Deaths by Cause according to Age and Sex

CAUSES OF DEATH	Under 1 year		1 year and under 2		2 years and under 3		3 years and under 4		4 years and under 5		5 years and under 10		10 years and under 15		15 years and under 20		20 years and under 25		25 years and under 35		35 years and under 45		45 years and under 55		55 years and under 65		65 years and under 75		75 years and under 85		85 years and under 95		95 years and over		TOTAL		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	BOTH SEXES
I. *Infective and Parasitic Diseases*																																			
1. Tuberculosis of respiratory system	1	...	...		...	...	...	...	...	..		.	..		..	...	..	2	9	6	3	1	8	...	5	2	..	1	1	...	..	...	..	...	27	12	39
2. Tuberculosis of meninges and central nervous system	..	..	...	..	2	.	...	1	...	1	1		...	...	1	...	...	1	.	...	..	1	...	1	..	...	.	..	...	...	..	.	...	...	4	6	10
4. Tuberculosis of bones and joints	...	..			.	..	...	..	...	...	..	..	...	.	...	...	...	..	.	...	...		1	.	..	...	...	..	...	..	...	..	...	..	1		1
5. Tuberculosis, all other forms	..		..		...	..	...	...	...		..	..	...	.	...	...	...	..	..	1	2	..	...	.	..	..	...	..		...		...		...	2	1	3
8. Tabes dorsalis	...	...	...		...	..	...	..	...	..	..	..	...	.	...	...	...	..	...	..	...	...	...	...	..	..	1	..	.	.	..	.	..	.	1	...	1
9 General paralysis of insane	...		...	...	...	...	...	..	...	..	...	..	..	...	..	...	..	...	...		1	...	1	...	...	...	1		...	.	..	...	...	...	3	...	3
12. Typhoid fever	...	...	...	..	...		...	...		...	.		..	...	...	...	..	...	...		..	...	..	...	1	..	..	..	...	..	.	..	...	...	1	...	1
13. Paratyphoid fever and other salmonella infections	...	.	...	.		..	..	..	...	...	..	...	..		...	...	...				1	...			...	...		...	..	...	..	...	..	...	1	.	1
15. Brucellosis (undulant fever)	..		...	...	..	...	..	...	...		.			...	1	...	...			1	...		.	...	1	.	..	.				...	...	2	1	3
16c. Other unspecified forms of dysentery	...	.	...		...	...	...	..	...		.		..	..	.	...	...	...		..	...		..	..	...	...		1	..	..	.	.	...	..	1	1
19 Erysipelas	...	...	.	..	.	.	..	...					..	..	..	...	..	..	...	..	..		...	...	...	.	..	1	1		...	..	...	...	1	1	2
20, Septicaemia and pyaemia	2		...	.	.	...	...	...	...	...		2	...	...	...	...	..	1	...	..	..			1	...	...	...			...					3	3	6
21. Diphtheria	2	...	1	1	...		2	..		...	.	...			...	...	..	...	...	..					..	...			...	...	..		...	...	5	1	6
22. Whooping cough		1			...		...	.	...	..			...	..	...	..	.	.	...	..	...	...	..		..	...			.	.	.		..	..		1	1
23 Meningococcal infections	...	...			...	...	...	.	..	..	...	1	.	...	...	..	..	...	.				1	...	..	...				...			...	..	1	1	2
25. Leprosy	...	...	...		...	...	...	...	...		...		...	...	...	..	...	2	1	2			1	..	..	...	..	..	...		..	..	...	...	1	5	6
26. Tetanus	1	1	...		...	...	...	...	..		2	1	...	...	...	...	..	..	...	..	...		...	2	..	..		...	.	..	..	..	...	...	5	2	7
28a. Poliomyelitis			...		...	1	...	...	..	...	.	..	...		...	..	..	..	..	..	...	..	...	...	..			...	...	.	...	.	...	...	...	1	1
43d. Food poisoning infection and intoxication		...		..	1	. .	...	...	...		..	..	..	...	...	..	...		...	...	...	..	.	...	...	...	..	..	..	...	..	...	...	...	1		1
43l. Leishmaniasis		...		..	...	..	...	...	..	..		..	...	..	...	.	1	...	.	..	..	...	...	...	..	..	..			...	...	...	...	...	1	...	1
II. *Neoplasms*																																					
44. Malignant neoplasm of buccal cavity and pharynx	...	..	...		..	..	...	..	...	..	..	..	...		1		..	...	..	...	...	..	1	...	3	1		..	2	..	...	.	...	...	7	1	8
45. Malignant neoplasm of oesophagus		...		.	...			...	...	.	..	..	..			..	...	..	...	...	...	..	2	...	2	..	2	.	1	...	..		..	..	7	.	7
46. Malignant neoplasm of stomach		...	..	...	...	..	.	...	...	...	..	...	...			..	...	..		4			5	3	5	6	5	9	6	5	1		1	...	27	23	50
47. Malignant neoplasm of intestines, except rectum	...	...	..		...	.		..	...	..	..	..	..		..	.	..	...	..	..	1	2	4	1	3	2	3	2	1	..	...		12	7	19
48. Malignant neoplasm of rectum		...	...	...	...	...	..	..	.	..	...	..	...	..		...	.	..	...	...	3	1	..	..	3			...	...		...	...	6	1	7
49 Malignant neoplasm of larynx		...	...		.		...	..	...	...	.		...	...	.	...	...	..	...	...	1	...	3	..	1	.	1	..	...	...	...	...	6	...	6
50. Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary	..	...	..	..	...	..	...	...	..	..	..	..	...		...	...	..	.	...	...	1	6	2	8		13	1	...	1	...	..		...	27	5	32
51. Malignant neoplasm of breas		...	.	...	..		...	...	..		...	..	..	..	..	..	...		...	..	3		6	...	12	...	4	...	5	...	2	..	...	...	32	32
53. Malignant neoplasm of unspecified parts of uterus	...	...	...		...		...	...	...	...	...	.	..		...	...	...	.	...	..	..	...	3	..	9	..	3	..	..	...	...	...	...	...	15	15
54. Malignant neoplasm of prostate		...	...	..		...	..		..	..			...	...	..	...	...	..	...	...		...	...	1	..	2	...	1	...	...	...	...	...	4	...	4
55. Malignant neoplasm of skin	...	...	..	..	..	...		...	...	..		..		...		..	...	...	...	...	...	...		1	..	..	...	1	...	...	...	...	...	2	...	2
56. Malignant neoplasm of bone and connective tissue	...	...	...	...	...	..	...	...	...	..	...	...		...	...	...	...	...	2	1	...	...	...	...	...	1	...	1	..	2	...	..	..	...	1	6	7
57. Malignant neoplasm of all other and unspecified sites	..	...	...	...	...		1	...	...	...	1	...	1	...	..	1	..	...	..	1	2	...	10	4	13	13	16	6	7	4	...	...	...	...	51	29	80
58. Leukaemia and aleukaemia	..	1	...	...	...		2	..	..	...	1	1	1	..	...	. .	1	1	...	...	..	...	...	2	.	...	..	1	...	...	...	..	...	...	5	6	11
59. Lymphosarcoma and other neoplasms of lymphatic and haematopoietic system	..	..	..	...	...	.	...	...	...	..	1	.	1	...	..	1	...	...	1	...	1	...	1	2	.	...	1	..	...	1	...	...	...	...	6	4	10
60. Benign neoplasms and neoplasms of unspecified nature	...	...	...	...	...	...	...	...	...	.	2	...	...	..	...	..	...	..	...	...	...	...	...	...	...	1	...	...	...	2	...	...	...	...	2	3	

APPENDIX HC — (*Continued*).

Deaths by Cause according to Age and Sex

CAUSES OF DEATH	Under 1 year		1 year and under 2		2 years and under 3		3 years and under 4		4 years and under 5		5 years and under 10		10 years and under 15		15 years and under 20		20 years and under 25		25 years and under 35		35 years and under 45		45 years and under 55		55 years and under 65		65 years and under 75		75 years and under 85		85 years and under 95		95 years and over		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	BOTH SEXES
III. *Allergic, Endocrine System, Metabolic and Nutritional Diseases.* & IV. *Diseases of the Blood and Blood-forming Organs*																																				
61. Nontoxic goiter	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1	1
62. Thyrotoxicosis with or without goiter	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1
63. Diabetes mellitus	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	2	5	5	6	12	6	29	7	10	2	1	...	...	27	60	87
64. Beriberi	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1
65a. Pernicious and other hyperchromic anaemias	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	1	...	...	...	...	3	3	3
65c. Other specified and unspecified anaemias	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	1	...	...	...	...	...	...	3	3	6
66a. Asthma	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	3	3	1	2	1	2	2	...	...	...	...	8	8	16
66b. All other allergic disorders, endocrine, metabolic and blood diseases	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1	...	1	1	...	1	...	...	...	...	4	3	7
V. *Mental, Psychoneurotic and Personality Disorders*																																				
67. Psychosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2	...	2
68. Psychoneurosis and disorders of personality	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
69. Mental deficiency	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
VI. *Diseases of the Nervous System and Sense Organs*																																				
70. Vascular lesions affecting central nervous system	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	4	2	13	17	40	47	52	75	30	47	3	13	...	...	151	204	355
71. Non-meningococcal meningitis	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2	...	2
73. Epilepsy	...	...	...	...	...	...	...	...	...	...	1	1	...	...	2	...	...	...	1	...	...	1	...	...	...	...	...	...	2	...	...	...	...	5	3	8
77b. Otitis media and mastoiditis	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
78b. All other diseases of the nervous system and sense organs	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	...	1	...	1	...	3	1	...	...	...	...	1	...	...	7	4	11
VII. *Diseases of the Circulatory System*																																				
79. Rheumatic fever	...	...	...	...	...	...	...	...	...	...	1	...	2	...	1	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	5	2	7
80. Chronic rheumatic heart disease	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	1	1	2	...	...	2	...	...	...	...	...	...	...	...	...	...	3	7	10
81. Arterio-sclerotic & degenerative heart disease	...	...	...	...	...	...	...	...	...	...	1	1	1	1	...	3	...	1	11	7	23	67	71	35	98	91	60	106	14	28	...	1	311	293	604
82. Other diseases of heart	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1	...	...	5	2	17	13	22	24	13	10	2	5	...	...	61	58	119
83. Hypertension with heart disease	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	1	1	4	5	1	13	10	12	7	7	...	...	...	...	35	38	73
84. Hypertension without mention of heart	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	2	1	8	...	2	4	5	3	...	...	...	...	18	8	26
85. Diseases of arteries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	1	3	8	15	11	8	2	5	...	1	24	32	56
86. Other diseases of circulatory system	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	2	1	1	3	...	...	...	...	...	...	...	4	4	8
VIII. *Diseases of the Respiratory System*																																				
88. Influenza	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	1
89. Lobar pneumonia	4	4	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1	...	...	...	...	7	7	14
90. Bronchopneumonia	18	12	1	4	1	1	...	...	1	...	...	...	...	...	...	...	...	...	1	1	2	2	1	4	2	...	...	1	1	...	...	...	...	29	24	53
91. Primary atypical, other and unspecified pneumonia	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
92. Acute bronchitis	7	13	...	1	1	1	...	...	...	...	...	...	...	...	1	...	1	...	...	...	1	1	...	1	1	...	1	2	1	...	...	...	...	10	21	31
93. Bronchitis chronic and unqualified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1	...	3	1	2	1	1	...	1	1	...	...	9	4	13
97b. All other respiratory diseases	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	4	2	...	4	1	7	2	11	3	3	4	1	1	...	...	30	16	46
IX. *Diseases of the Digestive System*																																				
99. Ulcer of stomach	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	2	...	...	1	...	...	...	...	...	...	4	1	5
100. Ulcer of duodenum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
101. Gastritis and duodenitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
102. Appendicitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
103. Intestinal obstruction and hernia	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	2	...	...	2	...	...	1	1	3	1	5	...	...	...	...	5	13	18
104a. Gastro-enteritis and colitis between 4 weeks and 2 years	60	63	2	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	71	68	139
104b. Gastro-enteritis & colitis, ages 2 years & over	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	2	...	...	...	...	...	...	6	6
104c. Chronic enteritis and ulcerative colitis	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	3	1	4
105. Cirrhosis of liver	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	4	3	4	...	2	1	1	...	...	...	...	...	...	13	3	16
106. Cholelithiasis and cholecystitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	1	1	...	...	...	...	...	...	3	1	4
107. Other diseases of digestive system	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...	3	1	1	1	1	...	1	...	...	...	...	...	7	5	12

Deaths by Cause according to Age and Sex

CAUSES OF DEATH	Under 1 year		1 year and under 2		2 years and under 3		3 years and under 4		4 years and under 5		5 years and under 10		10 years and under 15		15 years and under 20		20 years and under 25		25 years and under 35		35 years and under 45		45 years and under 55		55 years and under 65		65 years and under 75		75 years and under 85		85 years and under 95		95 years and over		TOTAL		
	M		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	BOTH SEXES
X. *Diseases of Genito-Urinary System*																																			
107. Acute nephritis									1	1	1	2		1	1	1	...		1		...	1					1	1	...				5	7	12
109. Chronic, other and unspecified nephritis ...														1					2	3	1		2	2	12	7	14	7	2	4		...			3	24	57
110. Infections of kidney	1		...																				1		2		1	1						5	1	6
112. Hyperplasia of prostate																									1		2		2						5		5
114c. All other diseases of the genito-urinary system		...							...										1			2			1								2	2	4
XI. *Deliveries and Complications of Pregnancy, Childbirth and the Puerperium*																																			
120a. Other complications of pregnancy, childbirth and the puerperium				...	...	...			...	...										2		2						1	...	..				6	
XII. *Diseases of the Skin and Cellular Tissue* & XIII. *Diseases of the Bones and Organs of Movement*																																			
121. Infections of skin and subcutaneous tissue		1	...	...	...	...																												1	1
122. Arthritis and spondylitis					...																				2			1	...	...				2	1	3
124. Osteomyelitis and periostitis ...						...			...	...	...	1			...	...																			1	...	1
126a. Chronic ulcer of skin (including tropical ulcer)		...	...	...	...		...	...	...	...	...																									
126b. All other diseases of skin				...			...																					1						1	1
126c. All other diseases of musculo-skeletal system		...	...			...																						2						3	3
XIV. *Congenital Malformations*																																			
127. Spina bifida and meningocele ...	6	2			...	...	...		...																									6	2	8
128. Congenital malformation of circulatory system	5	10			...	...	1	1	...		1																							7	1	18
129. All other congenital malformations	8	3													1																			10	3	13
XV. *Certain Diseases of Early Infancy*																																			
130. Birth injuries	23	14	...		...	...	...	...	...																									23	14	37
131. Postnatal asphyxia and atelectasis ...	45	42	...				...	...																										45	42	87
132a. Diarrhoea of newborn (under 4 weeks ...	1	4					...	...																										1	4	5
132c. Other infections of newborn ...	2																																	2		2
133. Haemolytic disease of newborn ...	4				...		...	...																										4		4
134. All other defined diseases of early infancy ..	14	9			...	...																												14	9	23
135. Ill-defined diseases peculiar to early infancy, and immaturity unqualified	113	63																																113	63	176
XVI. *Symptoms, Senility and Ill-defined Conditions*																																			
136. Senility without mention of psychosis ...			...																								4	8	41	45	19	36	1	7	65	96	161
XVII. *Accidents, Poisonings and Violence*																																			
138. Motor vehicle accidents		...			...	...	...	...	1		3	...	1			...	3	...				1	1	...	...	...	...	...	...					9	1	10
141. Accidental falls		...				...		...			1	1			1	...	2	...	...	...	...			...			1							4	3	7
143. Accident caused by fire and explosion of combustible material ..	...	...	...		...	...					1				...	...	1		1			1			1		1	1	...	...				3	4	7
144. Accident caused by hot substance, corrosive liquid, steam and radiation ...		1		...		...	...	...																												
145. Accident caused by firearm				...																														1	1	
146. Accidental drowning and submersion ...	1		...		...	...					2		...			...									1									2	1	3
148. All other accidental causes ...	...		1									1	...		1		2		...	2	...	1	4		2					3	...	...	10	7	17
149. Homicide and injury purposely inflicted by other persons (not in war)	...					1	...								...		1		...														1	1	2
TOTAL	332	249	8	11	6	4	6	2	3	3		14	8	3	14	8	12	12	27	33	44	46	124	92	257	191	297	325	257	283	47	96	3	9	1467	1381	2,848

APPENDIX MA.

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hospital at end of 1953
I. *Infective and Parasitic Diseases.*								
1. Tuberculosis of the respiratory system ...	7	44	12	63	2	23	31	7
2. Tuberculosis of the meninges and central nervous system	4	17	...	21	5	6	1	9
3. Tuberculosis of intestines and peritoneum and mesenteric glands	1	3	...	4	...	4	...	...
4. Tuberculosis of bones and joints ...	13	31	7	51	...	38	1	12
5. Tuberculosis, all other forms	7	18	2	27	2	20	2	3
6. Congenital syphilis	...	...	...	...	...	...	...	...
7. Early syphilis	...	...	...	...	...	...	...	...
8. Tabes Dorsalis	...	1	...	1	...	1	...	...
9. General paralysis of insane	...	...	...	...	...	...	...	...
10. All other syphilis	...	1	1	2	...	1	...	1
11. Gonococcal infections	1	6	2	9	1	8	...	...
12. Typhoid fever	5	143	3	151	2	135	...	14
13. Paratyphoid fever and other Salmonella infections	...	...	...	...	...	...	...	...
14. Cholera	...	..	...	...	...	...	...	...
15. Brucellosis (undulant fever)	11	253	3	267	2	249	1	15
16a. Bacillary dysentery	...	2	...	2	...	2	...	...
16b. Amœbasis	3	31	...	34	...	32	...	2
16c. Other unspecified forms of dysentery ..	...	1	...	1	...	1	...	...
17. Scarlet fever	..	...	...	...	...	...	...	
18. Streptococcal sore throat	...	50	...	50	4	44	2	...
19. Erysipelas	...	...	...		...	...	...	...
20. Septicaemia and pyaemia	...	2	...	2	...	2	...	...
21. Diphtheria	..	1	..	1		1	...	...
22. Whooping cough	...	...	...	...	...	...	...	...
23. Meningococcal infections	...	3	...	3	...	...	3	...
24. Plague	...	...	...	...	...	...	...	...
25. Leprosy	...	1	...	1	...	1	...	...
26. Tetanus	...	29	...	29	2	24	...	3
27. Anthrax	...	1	...	1	...	...	...	1
28a. Acute poliomyelitis	43	51	10	104	...	87	4	13
28b. Polioencephalitis	...	1	...	1	...	1	...	...
29. Acute infectious encephalitis	...	3	..	3	1	2	...	...
30. Late effects of acute poliomyelitis and acute infectious encephalitis	...	...	...	...	..	...	...	...
31. Smallpox	...	.	...	...	...	...	...	...
32. Measles	...	3	...	3	..	1	2	...
33. Yellow fever	...	...	...	...	...	.	...	...
34. Infectious hepatitis	...	16	...	16	1	14	1	...
35. Rabies	...	...	...	...	...	...	...	...
36a. Louse-borne epidemic typhus	...	...	...	...	...	...	..	...
36b Flea-borne endemic typhus	...	4	...	4	...	4	...	...
36c. Tick-borne epidemic typhus	...	...	...	...	...	...	...	...
36d. Mite-borne typhus	...	..	...	...	...	...	...	...
36e. Other and unspecified typhus	...	...	...	...	...	...	...	...
37a. Vivax malaria (benign tertian) ...	..	...	...	...	...	...	...	...
37b. Malariae malaria (quartan)	...	...	...	...	...	...	...	...
37c. Falciparum malaria (malignant tertian)	...	...	...	...	...	...	...	...
37d. Blackwater fever	...	...	...	...	...	...	...	...
37e. Other and unspecified forms of malaria	...	...	...	...	..	...	...	...
38a. Schistosomiasis vesical (S. hæmotobium)	...	...	...	...	...	...	...	...
38b. Schistosomiasis intestinal (S. hansoni)	...	.	...	...	...	..	...	...
38c Schistosomiasis pulmonary (S.japonicum)	...	...	...	...	...	...	...	...
38d. Other and unspecified schistosomiasis ...	...	...	...	...	..	...	...	...
39. Hydatid disease	...	...	...	...	...	...	...	...
40a Onchocerciasis	..	...	...	...	...	...	...	...
40b. Loiasis	...	...	...	...	...	...	...	
40c. Filariasis (bancrofti)	...	...	...	...	...	...	...	...
40d. Other filariasis	...	...	...	...	...	...	...	
41. Ankylostomiasis	...	1	...	1	...	1	...	...
Carried forward .	95	717	40	852	22	702	48	80

APPENDIX MA — (*Continued*).

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hosp. at end of 1953
Brought forward ...	95	717	40	852	22	702	48	80
42a. Tapeworm (infestation) and other cestode infestations	...	7	...	7	...	7	...	...
42b. Ascariasis	...	...	...	..	...	...	...	...
42c. Guinea worm (dracunculosis)	...	...	...	...	...	...	...	...
42d. Other diseases due to helminths ...	...	..	...	...	...	...	...	...
43a. Lymphogranuloma venereum	...	21	...	21	3	18	...	...
43b. Granuloma inguinale, venereal	...	...	...	...	...	...	...	...
43c. Other and unspecified venereal diseases .	...	...	...	...	.	...	...	...
43d Food poisoning infection and intoxication	...	2	...	2	..	2	...	...
43e. Relapsing fever	...	...	...	...	...	...	...	...
43f. Leptospirosis icterohæmorrhagica (Weil's disease)	...	...	...	...	...	...	...	..
43g. Yaws	...	...	...	...	...	...	...	...
43h. Chickenpox	...	...	...	...	...	...	...	...
43i. Dengue	...	...	...	...	...	...	...	...
43j. Trachoma	...	1	...	1	..	1	...	...
43k. Sandfly fever	...	...	...	.	...	...	...	...
43l. Leishmaniasis	...	3	...	3	..	2	...	1
43m. Trypanosomiasis gambiensis Trypanosomiasis rhodesiensis Other and unspecified Trypanosomiasis	...	...	...	...	...	...	...	...
43n. Dermatophytosis	...	...	...	...	...	...	...	...
43o. Scabies	...	...	...	...	...	...	...	...
43p. All other diseases classified as infective and parasitic	..	5	...	5	...	5	..	...
II. *Neoplasms*								
44. Malignant neoplasm of buccal cavity and pharynx	3	9	...	12	...	9	...	3
45. Malignant neoplasm of œsophagus ...	1	7	...	8	2	3	...	3
46. Malignant neoplasm of stomach ..	3	50	3	56	22	28	3	3
47. Malignant neoplasm of intestines except rectum	...	4	...	4	...	3	1	...
48. Malignant neoplasm of rectum	2	2	1	5	1	2	...	2
49. Malignant neoplasm of larynx	...	1	...	1	...	1	...	...
50. Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary		32	2	34	11	22	1	...
51. Malignant neoplasm of breast	6	25	3	34	2	30	...	2
52. Malignant neoplasm of cervix uteri ...	...	1	...	1	1	...	...	...
53. Malignant neoplasm of other and unspecified parts of uterus	..	1	...	1	1	...	...	...
54. Malignant neoplasm of prostate ...	1	4	1	6	1	2	3	...
55. Malignant neoplasm of skin ...	1	10	...	11	...	9	1	1
56. Malignant neoplasm of bone and connective tissue	1	7	...	8	...	5	...	3
57. Malignant neoplasm of all other and unspecified sites	2	81	6	89	30	41	5	13
58. Leukæmia and aleukæmia ...	1	62	4	67	3	64	...	...
59. Lymphosarcoma and other neoplasm of Lymphatic and hæmatopoietic system	...	5	...	5	...	3	...	2
60. Benign neoplasms and neoplasms of unspecified nature	14	102	2	118	1	112	1	4
Carried forward	130	1,159	62	1,351	100	1,071	63	117

APPENDIX MA — (*Continued*).

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp. at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hosp. at end of 1953
Brought forward ...	130	1,159	62	1,351	100	1,071	63	117
III. & IV. *Allergic, Endocrine System Metabolic and Nutritional Diseases. Diseases of the Blood and Blood-forming Organs.*								
61. Nontoxic goitre	...	11	...	11	...	11	...	...
62. Thyrotoxicosis with or without goitre	2	23	...	25	...	21	...	4
63. Diabetes mellitus	5	85	5	95	17	69	4	5
64a. Beriberi	...	15	...	15	...	13	2	...
64b. Pellagra	...	...	...	...	...	...	...	...
64c Scurvy	...	...	...	...	...	...	...	...
64d. Other deficiency states	2	8	3	13	...	9	3	1
65a. Pernicious and other hyperchromic anæmias	...	69	...	69	4	61	3	1
65b. Iron deficiency anæmias (hypochromic)	...	2	1	3	...	1	1	1
65c. Other specified and unspecified anæmias	...	8	...	8	1	5	...	2
66a. Asthma	5	70	3	78	2	70	...	6
66b. All other allergic disorders, Endocrine, Metabolic and Blood Diseases ...	1	8	1	10	2	6	...	2
V. *Mental, Psychoneurotic and Personality Disorders.*								
67. Psychoses	...	31	..	34	...	34	...	...
68. Psychoneuroses and disorders of personality	4	24	...	28	...	25	...	3
69. Mental deficiency	1	7	...	8	...	8	...	...
VI. *Diseases of the Nervous System and Sense Organs*								
70. Vascular lesions affecting central nervous system	5	81	5	91	37	32	11	11
71. Non-meningococcal meningitis	...	29	...	29	...	24	2	3
72. Multiple sclerosis	...	...	...	...	...	...	...	...
73. Epilepsy	2	21	...	23	...	22	...	1
74 Inflammatory diseases of eye	...	8	...	8	...	8	...	...
75. Cataract	...	16	...	16	...	15	...	1
76. Glaucoma	...	3	...	3	...	3	...	...
77a. Otitis externa	..	1	...	1	...	1	...	...
77b. Otitis media and mastoiditis	24	5	...	29	...	27	1	1
77c. Other inflammatory diseases of ear ...	19	10 9	2	1110	5	1067	6	32
78a. All other diseases and conditions of eye	34	488	15	537	...	482	17	38
78b. All other Diseases of the Nervous System and Sense Organs	9	62	12	83	2	72	2	7
VII. *Diseases of the Circulatory System.*								
79. Rheumatic fever	9	99	...	108	3	45	45	15
80. Chronic rheumatic heart disease ..	...	20	4	24	3	15	2	4
81. Arteriosclerotic and degenerative heart disease	1	79	2	82	18	58	1	5
82. Other diseases of heart	13	63	2	78	6	55	2	15
83. Hypertension with heart disease ...	...	60	...	60	13	39	6	2
84. Hypertension without mention of heart	2	3	...	5	...	4	...	1
85. Diseases of arteries	11	68	25	107	18	45	24	20
86. Other diseases of Circulatory System ...	6	120	7	133	.	123	7	3
Carried forward	288	3,838	149	1,275	231	3,541	202	301

APPENDIX MA — (*Continued*).

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp. at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hosp. at end of 1953
Brought forward ...	288	3,838	149	4,275	231	3,541	202	301
VIII. *Diseases of the Respiratory System*								
87. Acute upper respiratory infections ...	...	92	...	92	2	88	1	1
88. Influenza	...	4	...	4	...	4	...	...
89. Lobar pneumonia	...	10	...	10	...	10	...	...
90. Broncho-pneumonia	5	97	...	102	14	76	7	5
91. Primary atypical, other and unspecified pneumonia	...	123	...	123	6	114	3	...
92. Acute bronchitis	1	18	...	19	...	18	1	...
93. Bronchitis, chronic and unqualified	7	80	2	89	6	77	5	1
94. Hypertrophy of tonsils and adenoids ..	...	68	...	68	...	66	...	2
95. Empyema and abcess of lung	2	8	2	12	...	8	2	2
96. Pleurisy	7	42	...	49	...	47	1	1
97a. Pneumoconiosis	6	62	...	68	6	57	5	...
97b. All other Respiratory Diseases ...	...	5	...	5	1	2	1	1
IX *Diseases of the Digestive System.*								
98a. Dental Caries	...	22	...	22	...	22	..	...
98b. All other diseases of teeth and supporting structures	...	14	...	14	...	14	...	...
99. Ulcer of stomach	...	20	...	20	1	19	...	..
100. Ulcer of duodenum	2	122	...	124	4	109	3	8
101. Gastritis and duodenitis	...	56	1	57	...	53	3	1
102. Appendicitis	7	333	9	346	1	327	11	7
103. Intestinal obstruction and hernia	16	413	3	432	11	397	8	16
104a. Gastro-enteritis and colitis between four weeks and two years ...	...	232	...	232	29	196	...	7
104b. Gastro-enteritis and colitis, ages two years and over	1	7	...	8	2	5	...	1
104c. Chronic enteritis and ulcerative colitis	...	21	...	21	...	21	..	...
105. Cirrhosis of liver	1	17	1	19	4	9	3	3
106. Cholelithiasis and cholecystitis ...	6	61	2	69	3	57	2	7
107. Other Diseases of the Digestive System	8	76	...	84	4	79	...	1
X. *Diseases of the Genito-Urinary System.*								
108. Acute nephritis	6	64	...	70	2	55	6	7
109. Chronic, other and unspecified nephritis	7	38	...	45	3	37	1	4
110. Infections of kidney	10	52	...	62	3	53	1	5
111. Calculi of urinary system	6	91	...	97	4	81	10	2
112. Hyperplasia of prostate	4	58	6	68	7	48	7	6
113. Diseases of breast	1	12	...	13	...	13		...
114a. Hydrocele	1	125	...	126	8	117	1	...
114b. Disorders of menstruation	2	1	...	3	...	3	...	...
114c. All other Diseases of the Genito-Urinary System	6	51	1	58	1	52	3	2
XI *Deliveries and complications of Pregnancy, Childbirth and the Puerperium.*								
115. Sepsis of pregnancy, childbirth and the puerperium	...	1	...	1	...	...	1	...
116. Toxæmia of pregnancy and the puerperium	...	2	..	2	...	2	...	...
117. Hæmorrhage of pregnancy and childbirth	2	...	...	2	...	2	...	...
118. Abortion without mention of sepsis or toxæmia	...	16	...	16	...	16	...	...
119. Abortion with sepsis	...	...	...	...	...	...	...	...
120a. Other complications of pregnancy, childbirth and the puerperium ..	1	76	...	77	4	73	...	...
120b. Delivery without complications ...	3	42	...	45	...	44	...	1
Carried forward	406	6,467	176	7,049	357	6,012	288	392

APPENDIX MA — (*Continued*).

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp. at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hosp. at end of 1953
Brought forward ...	406	6,467	176	7,049	357	6,012	288	392
XII. *Diseases of the Skin and Cellular Tissue.* *and* XIII. *Diseases of the Bones and Organs of Movement.*								
121. Infections of skin and subcutaneous tissue	7	329	35	371	...	332	23	16
122. Arthritis and spondylitis	20	163	46	229	...	186	9	34
123. Muscular rheumatism and rheumatism, unspecified	...	38	...	38	1	36	1	...
124. Osteomyelitis and periostitis	13	83	5	101	2	86	5	8
125. Ankylosis and acquired musculoskeletal deformities	1	10	.	11	..	11	...	...
126a. Chronic Ulcer of Skin (including Tropical Ulcer)	1	14	5	20	...	18	...	2
126b All other Diseases of Skin	20	106	7	133	3	108	7	15
126c. All other diseases of musculoskeletal system	1	100	1	102	1	91	3	7
XIV. *Congenital Malformations.*								
127. Spina bifida and meningocele	...	2	...	2	1	...	...	1
128. Congenital malformation of the Circulatory System	...	10	...	10	1	9	...	...
129. All other congenital malformations ...	7	89	4	100	6	86	3	5
XV. *Certain Diseases of Early Infancy.*								
130. Birth injuries	...	...	...	...	...	...	...	...
131. Postnatal asphyxia and atelectasis ..	2	...	...	2	2	...	...	...
132a. Diarrhoea of newborn (under 4 weeks)	...	1	...	1	...	1	...	...
132b. Ophthalmia neonatorum	...	...	...	...	...	...	...	...
132c. Other infections of newborn	...	...	...	...	...	...	...	...
133. Hæmolytic disease of newborn ...	...	...	...	...	...	...	...	...
134. All other defined diseases of early infancy	...	94	...	94	8	83	...	3
135. Ill-defined diseases peculiar to early infancy, and immaturity unqualified	3	2	...	5		4	...	...
XVI. *Symptoms, Senility and Ill-Defined conditions.*								
136. Senility without mention of psychosis	...	8	5	13	1	5	2	5
137a. Pyrexia of unknown origin	8	127	...	135	...	130	3	2
137b. Observation, without need for further medical care	4	...	...	4	..	4	...	..
137c. All other ill-defined causes of morbidity	...	83	...	83	...	66	4	13
XVII. *Accidents, Poisonings and Violence.*								
138. Motor vehicle accidents	1	90	6	97	5	84	6	2
139. Other transport accidents	5	42	...	47	17	25	3	2
Carried forward	499	7,858	290	8,647	406	7,377	357	507

APPENDIX MA — (*Continued*).

GENERAL HOSPITALS IN MALTA AND GOZO

Return of diseases and deaths (in-patients) for the year 1953

Disease	Remaining in Hosp. at end of 1952	Admissions	Transfers from other Hospitals	Total cases treated	Deaths	Discharges	Transfers to other Hospitals	Remaining in Hosp. at end of 1953
Brought forward ...	499	7,858	290	8,647	406	7,377	357	507
140. Accidental poisoning	25	469	...	494	1	456	19	18
141. Accidental falls	1	114	14	129	1	115	4	9
142. Accidents caused by machinery ...	...	7	...	7	...	7	...	...
143. Accidents caused by fire and explosion of combustible material	1	138	...	139	5	122	8	4
144. Accidents caused by hot substance, corrosive liquid, steam and radiation	...	9	3	12	1	8	1	2
145. Accidents caused by firearm	5	123	1	129	...	115	4	10
146. Accidental drowning and submersion ...	...	14	...	14	...	12	1	1
147a. Foreign body entering eye and adnexa	...	15	...	15	...	14	1	...
147b. Foreign body entering other orifice ...	...	2	...	2	...	1	1	...
147c. Accidents caused by bites and stings of venomous animals and insects ...	...	...	...	...	...	...	...	...
147d. Other accidents caused by animals ...	...	...	...	...	...	...	...	...
148. All other accidental causes	24	179	17	220	7	192	9	12
149. Homicide and injury purposely inflicted by other persons (not in war)... ...	...	...	...	...	...	...	...	...
150. Injury resulting from operations of war	...	17	...	17	...	16	...	1
Total	555	8,945	325	9,825	421	8,435	405	564