



FALKLAND ISLANDS.

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ANNUAL

MEDICAL AND SANITARY REPORT.

FOR THE

YEAR ENDED 31ST DECEMBER, 1935.

Published by Command of His Excellency the Governor.

PORT STANLEY.

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1936.

Senior Medical Officer's Office,
King Edward VII Memorial Hospital,
Stanley, Falkland Islands.
8th June, 1936.

Sir.

I have the honour to submit for the information of His Excellency the Governor, and for transmission to the Right Honourable the Secretary of State for the Colonies, the Medical Report on the Health and Sanitary conditions of the Colony of the Falkland Islands for the year 1935, together with returns, etc., appended thereto.

I am,
Sir,
Your obedient servant,
R. L. CHEVERTON,
Senior Medical Officer.

The Honourable,
The Colonial Secretary,
Stanley.

ANNUAL MEDICAL AND SANITARY REPORT

FOR THE
YEAR ENDED 31st DECEMBER, 1935.

I. ADMINISTRATION.

(A) Establishment, vacancies and acting appointments.

MEDICAL STAFF.

1 Senior Medical Officer.
2 Medical Officers.
1 Dental Surgeon.

NURSING STAFF.

1 Matron.
1 Nursing Sister.
2 Junior Nurses.
1 Nurse Probationer.

SUBORDINATE MEDICAL AND SANITARY STAFF.

1 Sanitary Inspector.
1 Clerk.
1 Dental Mechanic.
1 Dental Mechanic's Assistant.
Attendant Gardener and Domestic Staff.

APPOINTMENTS, PROMOTIONS, ETC.

Dr. R. L. Cheverton, appointed Senior Medical Officer, 10th February, 1935.
Dr. H. Glyn Edmunds, acted Medical Officer, Fox Bay, West Falkland, from 20th July until the 26th October, 1935.
Dr. T. P. Binns, Medical Officer, Fox Bay, resigned on the 20th July, 1935.

Dr. J. B. Henderson, Medical Officer, Fox Bay, assumed duty on 26th October, 1935.
 Miss C. Wells, Nurse Matron, resigned on the 14th July, 1935.
 Miss M. E. Hill, Nursing Sister, appointed Nurse Matron, on 15th July, 1935.
 Miss G. Reive, appointed Nursing Sister on 15th July, 1935.
 Miss M. S. J. Miller, appointed Junior Nurse on 7th March, 1935.

(B) Legislation.

The following legislation affecting the Medical Department was enacted during the year :

1. Senior Medical Officer (Designation) Ordinance, 1935.
2. Hospital, Medical, Maternity and Dental Fees Regulations, 1935.

(C) Financial.

The following table shows the Revenue during the year 1935, in respect of the Medical Services of the Colony :

	£	s.	d.
Hospital fees, sale of medicines	321	0	10.
Medical Staff fees	93	11	10.
Dental Surgeon's fees	268	12	6.
West Falkland Farmers' Medical Contribution	400	0	0.
East Falkland Farmers' Medical Contribution	225	10	0.
Total	1308	15	2.

Details of Expenditure for 1935 :

	£	s.	d.
Drugs, Medicines	134	18	6.
Hospital Maintenance, Domestic Staff salaries, etc.	654	0	7.
Laundry	3	11	1.
Clothing, Bedding, Bandages	72	17	7.
Uniform allowance to Nurses	50	0	0.
Instruments, Equipment, etc.	96	11	6.
Dental Drugs and equipment	111	13	8.
Xray upkeep, electrical etc.	122	5	6.
Courses in the United Kingdom	5	0	0.
Incidental Expenses	19	18	3.
Total	1270	16	8.

N.B. Personal Emoluments not shewn.

II. PUBLIC HEALTH.

(A) General Remarks.

(1) GENERAL DISEASES.

ALIMENTARY SYSTEM.

(a) *Gastritis*. During the year under review 54 cases have reported sick suffering from Gastritis and Dyspepsia, and 4 cases of Gastric Ulcer.

(b) *Constipation* is common amongst most of the islanders, an unbalanced diet being an important factor with a probable deficiency in certain food factors.

(c) *Appendicitis* is still a common disease, 28 cases of appendicectomy were performed, the majority being in the quiescent stage, with symptoms of slight abdominal pain and appendical dyspepsia, only one case could be called acute in the true clinical sense; *Oxyuris Vermicularis* worms were found in the lumen of several appendices. It is of interest to note that prior to 1920 no appendicectomies were performed locally, as a frequent mail service allowed for their transport to Montevideo. Since that date, however, all such operations have been performed in Stanley and up to the 31st December, 1935, 248 cases have been operated upon, that is to say 9.5% of the population.

(d) *Haemorrhoids*, a fairly common complaint, especially amongst the shepherds, who have to make very long rides on horseback. Several cases were treated by injection successfully.

(e) *Enteritis*. 41 cases reported for treatment; every few months there are outbreaks of acute enteritis with blood and mucus, the attack lasts 2 - 3 days only, the patients, often children, do not appear to be very ill, and there is little or no pyrexia. In the Camps the condition is more prevalent during the summer months, where it is quite possible that the water supplies are responsible, but it is a little difficult to place the blame on the general town supply in Stanley as householders drawing from this supply and rain water tanks alike, are apt to pick up the infection also; during the year 40 cases reported sick in Stanley itself. It is hoped that a bacteriological investigation will be made next year when the laboratory has been equipped for such work.

(f) *Influenzal enteritis*. During the month of June there was an epidemic of vomiting and diarrhoea, very acute in onset, both amongst adult and child population of Stanley, a diagnosis of gastro intestinal influenza was made.

Tonsillitis. 69 cases of hypertrophic infected Tonsils were seen in the hospital, 20 enucleations were performed. During the year there were several outbreaks of Tonsillitis in the Town.

Dental conditions. Dental caries is very high in spite of the energy expended by the Dental department, children of school age even being compelled to wear dentures. A special clinic is run for the school children, being opened as far back as 1913. It would appear that diet is the predisposing factor and as such, the line of attack is education in food more than mechanical treatment of the actual dental defect.

In a country where sunshine is very limited, the weather always on the cool side, we are unable to rely on natural ultra violet rays, an essential factor in correlating the Calcium Phosphorus ratio and Vitamins A and D.

The growing season is very short with consequent shortage of fresh vegetables; fruit is imported in limited quantities. It is also disappointing that the value of whole milk is not appreciated more by a people dependant upon an imported food, including tinned milk. The available Calcium in the soil, is very limited and is artificially added to the town water supply. A more liberal use of whole milk, Cod Liver Oil and green vegetables is strongly advocated. A separate report of the Dental Surgeon is attached as an appendix.

RESPIRATORY SYSTEM.

Nasal catarrh and Bronchitis are very prevalent in the Falkland Islands, fortunately mild in type although extensive in distribution. Cases of Pneumonia are not common except as a sequence to the Influenza epidemic, which was of Bronchial type. Asthma and Pulmonary Tuberculosis occur and will be enlarged upon under their own headings.

<i>Allergic Diseases.</i>	Asthma	17 cases.
	Hay Fever	4 „
	Migraine	2 „
	Eczema	13 „

The above number of cases actually came under treatment during the year but there is every reason to believe that other isolated cases are to be found in various parts of the Colony. During the Influenza epidemic several adults suffered for the first time with this affliction and one case recurred, the prior attack being during childhood.

The incidence of Asthma seems to be high. Geographical and hereditary factors must have some bearing on this disease. In these islands we are subject to rapid variations of temperature and wind often accompanied by rain squalls. The soil is peaty therefore the water level is high and must be a factor influencing asthma. In Stanley, there are definitely houses known to breed asthma, these old houses are usually built of stone without under-floor ventilation or damp courses. Is it possible that a fungus such as *Aspergillus fumigatus* is growing on the damp peaty soil, a very suitable vegetable medium? This would fit in with Van Leeuwen's house dust theory. Apart from climatic and geographical factors, heredity plays an equally important part more especially in an isolated community where inter-marriage is only too frequent.

VENEREAL DISEASE.

Four cases of venereal disease were under treatment during the year, these were contracted in South America. At the present time we have not got the necessary facilities for testing the Wasserman reactions.

HAEMORRHAGIC DIATHESIS.

Five cases of post operative haematomata were seen during the year under review. At the time of operation, there was an excessive oozing; it would appear that there was a delayed coagulation time, a pseudohaemophilia. One family in particular is known to be haemophilic but the 4 cases under review are in no way connected with this family. The condition is not necessarily confined to the male sex. One woman operated upon was subject to metorrhagia and liable to bruise.

Those patients giving a history of such a diathesis were given a pre-operation course of Calcium, but this did not appear to have the marked effect one would expect.

The question, which is worth considering is whether this is a manifestation of a deficiency disease. A deficiency of Vitamin A, B and C sometimes causes an alteration in the fibrinogen and a deficiency of Vitamin C is known to increase the permeability of the blood vessel endothelium. Intravenous ascorbutic acid has not been tried as a means of prophylaxis and control.

On the other hand we may be dealing with an Essential Thrombopenia or a blood disease of this vague group, - perhaps a thrombasthenia with a familiar tendency to weak and malformed platelets.

The history of one woman, who came from the United Kingdom was suggestive of Werlhof's disease, having an ovarian dysfunction with cystic ovary and increased bleeding time, however, no splenic enlargement was felt.

The line of enquiry should be into the coagulation time, the platelet or megakaryocytic system of these cases. It is hoped to begin such an enquiry when the laboratory is properly equipped.

EPILEPSY.

3 cases of Grand Mal; 2 cases of Petit Mal were under treatment. Veronal was found to be very effective.

INSANITY.

Actual numbers unknown, several cases of idiocy in Stanley and in the Camp.

NEURALGIA.

It is noticeable that neuralgia, neuritis and vague nervous disabilities occur amongst the people.

RHEUMATISM.

Acute rheumatism is rare, but chronic rheumatic myalgias and arthritis are common, a damp cold climate with a peaty clay soil being a contributory factor.

EYE DISEASES.

Several cases of Follicular Conjunctivitis have been noted amongst the children, this condition has responded to the administration of Cod Liver Oil.

Enucleation of an eye-ball was performed in a case of embedded cement in the posterior chamber of the eye. The Medical Officer has arranged with the local watch-maker to keep a stock of ordinary lenses and frames. The following refractions were made during the year for the causes detailed below :-

Myopia	6.	Presbyopia	11.
Hypermetropia	11.	Astigmatism	2.
Myopic astigmatism	6.	Hypermetropic astigmatism	1.

INFECTIOUS DISEASES.

Epidemics of Influenza, Chicken Pox, and Impetigo Contagiosa occurred and will be reported upon under a later section.

MEDICAL OFFICERS TOURS.

The Senior Medical Officer made a short tour of the West and East Falklands in March and a more extensive tour of the East Falkland during the month of June, a separate report is attached as Appendix C. The Medical Officer, while acting Medical Officer, Fox Bay, was able to visit every farm on the West Falkland. Normally, this officer visits the North East section of the East Falkland twice a year, but arrangements have been made for the visits to be made every quarter.

The remainder of the East Falkland is under the care of the Falkland Islands Company's Medical Officer, stationed at Darwin, a return of diseases for the latter section appears as Table VII. The returns for the West Falkland are incomplete owing to a lack of system in making returns, this error has been rectified and complete records will be shown in future reports.

(2) Communicable Diseases.

INFECTIOUS AND EPIDEMIC DISEASES.

Tuberculosis. 15 cases are under treatment, these include nine cases of pulmonary Tuberculosis, three cases of Spinal Caries and three cases of other bones and joints. Fortunately, the people spend practically no time in public halls, cinemas and meeting places, such social amenities being almost lacking in Stanley and entirely absent in the Camps; otherwise the incidence of this disease would be much higher. In most cases the history may be traced back to some definite personal contact with known infectious cases. There are, however, other cases in which the origin of the disease is uncertain and the question of bovine tuberculosis rises to the mind. Bovine Tuberculosis is said to be very rife amongst the cattle and there is positive evidence that a case was imported in cattle brought from the United Kingdom in 1926. It is proposed to investigate the matter in the near future.

For the purpose of comparison the number of cases of Tuberculosis reported between 1913-1934 are shewn :-

1913	3 cases.
1914	1 case.
1915-16	Nil.
1917	3 cases.
1918	6 ,, Bad outbreak of Influenza.
1919-26	Nil.
1927	3 cases, - 1 Phthisis, 2 Intestinal.
1928	Nil.
1929	12 cases, including 3 Phthisis.
1930	4 cases, - 2 Phthisis, 2 Abdominal.
1931	3 ,,
1932	4 ,,
1933	7 ,,
1934	17 ,,

Bronchitis and Coryza - assumed epidemic form in November, the relation between these diseases and climatic conditions is enlarged upon under the meteorological section, the South winds would appear to have a definite bearing.

Influenza. During June a form of Gastro Intestinal influenza broke out in the Town of Stanley on or about the 4th of September. Actually 260 cases reported sick, but it is estimated that almost every person in the Town succumbed to the disease. It was of bronchial type, three cases developed pneumonic symptoms. Relapses were common especially following a Southerly wind. Two cases of Myocarditis and Tachycardia came under treatment. Three deaths definitely attributed to the epidemic and several cases of persistent bronchitis resulted.

The epidemic is supposed to have originated from contacts with a mild but extensive epidemic in South America at the same period. The disease was not confined to Stanley but spread to certain settlements in the East Falkland, escaping only those who rigidly isolated themselves and their settlements. It spread over the whole of the West Falkland. The schools were ordered to be closed for six weeks.

Impetigo Contagiosa. 63 children were under treatment for this complaint, there being an outbreak in the schools during the month of June.

Ringworm. Although sporadic outbreaks occur amongst the cattle of the North East Falkland, fortunately no cases are reported to have effected human beings during the present year.

HELMINTHIC DISEASES.

Oxyuris Vermicularis is very common ; a cause of appendicitis the lumen of which organ is often filled with worms, most children in the islands seem to suffer from this infection from a very early age.

One case of Hydatid cyst was removed from the abdominal muscles. This case is of interest as the disease has never been reported before in spite of this being a sheep rearing country. Apparently, the child in question, used to play with an old dog, whose mother was imported into the country from Wales. The dog itself was subject to fits and became comatosed from time to time during its life.

(B) Vital Statistics.

GOVERNMENT OFFICIALS.

There are 79 permanent officials in the Government, out of which number 24 are recruited from the United Kingdom. During the year 16 officials reported sick, of these 6 were from the United Kingdom and the remaining 10 were recruited locally.

The Islanders are of European descent, representing English, Scotch, Irish, Welsh, Norwegians, Swedes, Germans, Spanish and French peoples. Recent legislation has been enacted controlling immigration, a measure adopted to keep down the incidence of unemployment in the Colony. However, from an eugenic point of view this law may react adversely in a place where inter-marriage is only too common. During the year under review the problem of finding work for all able bodied men in Stanley has arisen.

The Town has no factories of trades to absorb this excess of population, which has steadily increased during the last ten years.

				<u>BIRTHS.</u>		
				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Stanley ...	...	...	...	13	25	38
Darwin and East Falkland	...	...	...	4	5	9
West Falkland	...	...	...	1	2	3
				<hr/>	<hr/>	<hr/>
				18	32	50
				<hr/>	<hr/>	<hr/>

The number of births registered in the previous year was 54.

				<u>DEATHS.</u>		
				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Stanley ...	...	...	...	6	8	14
Darwin and East Falkland	...	...	...	2	1	3
West Falkland	...	...	...	1	1	2
				<hr/>	<hr/>	<hr/>
				9	10	19
				<hr/>	<hr/>	<hr/>

The number of deaths registered in the previous year was 28.

The population on the 31st December, 1935 was 2,432 as shewn below :—

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Estimated population on the 31st December, 1934	1,366	1,071	2,437
Add arrivals during year	47	35	82
<hr/>			
	1,413	1,106	2,519
Deduct departures during year	73	45	118
<hr/>			
	1,340	1,061	2,401
Add births during the year	18	32	50
<hr/>			
	1,358	1,093	2,451
Deducts deaths during the year	9	10	19
<hr/>			
Totals	1,349	1,083	2,432
<hr/>			

Birth rate per 1,000	...	...	20.55
Death rate per 1,000	...	...	7.81
Population per square mile	...	...	.52

DEPENDENCIES.

Births registered during the year	...	...	Nil.
Deaths registered during the year	...	...	2.

The resident population at South Georgia during the year was estimated at 741 males and 7 females, or a total of 748.

III. SANITATION.

(1) Preventive Measures.

Mosquito and insect borne diseases. Certain types of mosquitoes exist in the houses. On warm days the Common Fly (*Musca domestica*) is common in certain houses, so also is the Blue Bottle (*Calliphora Vomitoria*), it is not unlikely that these insects are responsible for the periodic outbreaks of Diarrhoea.

Only one Common Flea (*Pulex irritans*) was seen, these parasites are almost non-existent, there are no signs of bites on any patients or school children. The Bed Bug (*Cimex lectularius*) is unknown, no doubt to the acidity of the air in the houses from the burning of peat. They have been seen on ships in the harbour and are also known to exist on the whale catchers working in the Ice, therefore temperature is not a deciding factor, however the climate in the Falkland Islands appears to be colder, owing to its dampness, dampness might have some influence in the bionomics of Bed Bugs.

Epidemic diseases. Arrangements have been made with H. M. British Consuls at Rio de Janeiro, Montevideo, Bahia Blanca, Magallanes and Valparaiso to send wireless messages in the event of any scheduled infectious disease breaking out in those areas of South America.

Vaccinations. The carrying out of the Vaccination Ordinance has been very slack and many adults and children in the Colony are unvaccinated. More strict measures are being taken with promising results.

Chicken Pox. 7 cases were under treatment.

Epidemic Diarrhoea. From time to time both in Stanley and in the Camps outbreaks of enteritis occur. With the help of the laboratory it is hoped to make detailed bacteriological investigations.

(2) General Measures.

Sewage. Sewage is disposed of by water carriage, the water closet system is gradually gaining ground and with the extra supply of water provided under the new scheme there is a great possibility that more houses will change the bucket to the water closet system.

Latrines. Fortunately, this being a cold climate the bucket system is fairly satisfactory but might be improved if the buckets were emptied more frequently.

In the Camp several systems are in use, the majority having the bucket method with peat loam; sheep dip containing carbolic is used frequently as a disinfectant. Some of the larger houses have a form of pit latrine, but is not altogether satisfactory as the sites chosen for the pits are usually devoid of underground drainage, horse manure might be used more often to increase the fermentation process.

Several cookhouses have latrines built on piles over the foreshore, the rise and fall of the tides making a natural water carriage system.

The Public Works Department are responsible for collecting the night soil which is dumped into the sea at the sanitary jetty, the system is satisfactory.

Disposal of Refuse. It is very difficult to impress on the inhabitants of Stanley the importance of keeping the lids of their ashpits closed. The town rubbish is dumped on the

foreshore to the East of the Town, the method seems to be quite satisfactory except that it is an excellent area for breeding rats.

Water Supply. The town supply is from surface water collected off a 'stone-run' and conveyed in a pipe line a distance of $2\frac{1}{2}$ miles to the two reservoirs. Prior to passing into these reservoirs, it passes through a bed of rubble, lime stone and sand, fresh lime being added each month. The chief objection to the supply is that a shortage is liable to take place during the summer and the water is very peat stained. During the coming year it is hoped to make periodic bacteriological examinations of the water.

A scheme for tapping another spring to the South of the town, known as the Roberts Spring, is being developed, the water supply is abundant and crystal clear. A recent analysis of this water is attached as Appendix E.

Many houses still use rain water collecting tanks as their water supply. The town supply is available for use from fountains placed in various quarters. On the days when the houses were entirely dependant on rain water it was thought that the epidemics of diarrhoea were caused by sea birds contaminating the roofs.

In the Camps, surface wells are in use, many are open to contamination by grazing animals and also by dogs. The supplies could be improved with more adequate protection. Unfortunately no apparatus exists in the Colony for drilling for artesian wells.

Drainage. The town is very efficiently drained except where an outcrop of rocks has made unsurmountable barriers. At one time, flood water used to pour into the town from the Southern slopes but a series of parallel drains has greatly helped to intercept this nuisance. These drains open into the main sewers and the whole is carried out into the harbour. Each house is responsible for draining its own premises and conducting all waste waters into the town drains.

Scavenging Service. The streets are kept very clean, all the drains being cleared to carry away the surface water to all the sewers. The work is under control of Public Works Department.

Roads. Most roads in Stanley have a macadamised surface; a great improvement on the conditions that existed some years ago.

SLAUGHTERHOUSES.

There are three privately owned establishments under supervision of the Medical Department. The majority of animals slaughtered are sheep; the meat is sound and of reasonably good quality. Oxen are slaughtered occasionally. Sometimes *Cystercercus Cellulosae* and *Cystercercus Tenuicollis* are seen in the livers. Cases of yellow carcasses (ochronosis) are seen, most butchers discard these carcasses, although there is no definite reason for condemning such meat, however, if generalised the meat is considered to be of inferior quality. The introduction of the Humane Killer is strongly advocated. No lesions of Tuberculosis amongst the oxen have been discovered for the last two years.

The condition of the slaughterhouses is satisfactory except for a few minor details.

DAIRIES.

There are about 200 head of cattle on the Common, owned by various persons in Stanley, each person keeping anything from one to six cows. The majority of cattle come once daily for milking, some few are milked twice a day. The grazing on the Common is very poor and the cows usually have supplementary feeds of pollards (third grade wheat offals) and tussac grass (*Poa Flabellata*).

The best cows yield two gallons of milk per diem, unfortunately there are many cows which give a much smaller yield. The state of the average cow-shed leaves much to be desired but lack of funds amongst owners prevents any more radical changes being carried out.

Tuberculosis is said to be rife amongst the cattle and it is proposed to carry out a Tuberculosis survey using a Double Intradermal Tuberculin Test, and Bacteriological and Biological tests with the milk. It would appear desirable to import a fresh strain of milking cows into the Colony as the present stock through in-breeding has become very puny, this

fact combined with indifferent feeding all tends to diminish the milk supply. In passing, it is of interest from a nutritional point of view to note the marked craving the animals have for seaweed and the bones of dead animals, a very natural craving in a country where the necessary salts are difficult to obtain from the grazing pastures. For further details of soil analysis made by Sir John Orr, see Appendix D.

The importation of goats to be kept by the householders might assist in increasing the available milk supply, a good class of goat is obtainable in the Argentine and it ought to be possible to tranship across from the mainland without very much cost.

A scheme might be developed, when funds are available, to construct a model dairy and poultry farm wherein modern methods could be developed as a demonstration, and apprentices, after they leave school, could be instructed in these methods.

(3) School Hygiene.

The school children were examined during the year under review and a separate report is to be found as Appendix B.

(4) Housing.

Several new houses have been built in Stanley during the year and all have complied with the existing Bye-laws. The Building Sub-Committee inspected the sites and buildings as required, giving advice and suggestions as to any improvements that might enhance the value of the property. The type of house now being constructed is far superior to that built a decade ago and it is marked that there is a growing sense of property among the landowners.

(5) Diet.

Although it is difficult to make any categorical statement as to the existence of deficiency diseases, it would appear, however, that the majority of people live on a diet which is definitely poor, not so much in quantity and quality as in its balance. There are several factors which lead one to this opinion.

Dental caries is very rife, both amongst the adults and children; school children even wearing dentures. There is a considerable amount of vague illhealth such as nervous debility amounting to almost mental lethargy which might have its origin in the disturbance in the Calcium Phosphorous ratio and a deficiency in Vitamins. As has been mentioned already the peculiar haemorrhagic diathesis, various vague skin conditions, constipation, and dyspepsia are all diseases which could be ameliorated by a better balanced diet. Rickets is found but a much higher incidence would be expected. It is interesting to note that the children have a real craving for raw vegetables and it is common knowledge that they will go into the gardens to pick and eat cabbage leaves, turnips and carrots.

The staple diet in the Falkland Islands consists of mutton, and beef during the winter months in the Camp, potatoes, bread and strong tea. Meat is eaten for breakfast, lunch and supper, usually being swilled down with strong tea. During the summer months fresh greens are obtainable but for six months of the year, the gardens are empty and green food almost unknown. In this cold climate the growing season is very short and it requires a considerable amount of ingenuity, such as the help of glass to get a longer season, however, with care the lack of green food could be made up. Curly Kale is found in most gardens but it is used in soups not as a table vegetable. Fortunately the potatoe crop is good and very dependable. The use of Cod Liver Oil and its derivatives is being pushed at the Infant Welfare Clinic; the use of swede juice to replace orange juice is being encouraged. This department has put forward to the Government a scheme for the teaching of domestic economy in the schools, also the daily administration of a pint of whole milk to each child, both ideas are receiving favourable consideration provided that the necessary money can be found. A third idea, that of giving Cod Liver Oil to each child has, however, not received the support it deserves in a climate so cold, damp and sunless as the Falkland Islands.

(6) Anti-Rat Campaign.

The bi-annual rat weeks have been continued. Red squills and Ratox have been used to poison the rats in the rubbish dumps along the foreshore.

(7) Recommendations for future work.

1. Investigation into Blood diseases.
2. Dietetic survey in Stanley and in the Camps.
3. Campaign to get a better milk supply and to encourage its use.
4. Tuberculin Testing of cattle.
5. Cod Liver Oil to be given daily in the schools.
6. Administration of whole milk to every school child free of charge.
7. Teaching of Domestic Economy in the schools.
8. Press articles on dietetic problems.

IV. PORT HEALTH ADMINISTRATION.

In accordance with the usual practice vessels calling at the port were given pratique by the Medical Officers. Also all passengers for the port were seen by the Medical Officers before landing. The great necessity for preventing, if possible, the incursion of infectious disease is fully realised; nevertheless it must be stated that it is possible for persons incubating disease, and showing no signs thereof to land and cause a serious epidemic.

Vessels entered during 1935 :-

	Nos.	Tons net.	Crews.
Number of ships entering ports of the Falkland Islands	23	40,103	942
23 ships cleared		41,180	961

Note. Ships of War not included.

Arrangements have been made for wireless telegraphic communications with the British Consuls at the main ports on the mainland of South America to return a monthly bulletin of infectious diseases.

V. HOSPITAL.

The K. E. M. Hospital comprises of 12 beds, operating theatre, quarters for nurses, stores and outpatients department. The Dental Surgery and workshop is apart from the Hospital.

The scheme for reconstructing and enlarging the hospital has been approved, and the work will be commenced early in 1936.

A King George V Jubilee Fund has been opened with the object of placing a permanent commemoration in the hospital, it has been proposed that some kind of ultra violet radiation should be obtained, in the form of a "Solarium" with Vita glass or mercury vapour lamps.

Throughout the year lectures were given to the nurses by the Medical Officers and the Matron.

During the year under review 12 patients received 314 irradiations from the carbon Ultra Violet ray lamp; 14 patients received 96 exposures from the Radiant Heat apparatus; 7 patients received 36 treatments with Vapour baths. With X-ray apparatus, Watsons "Sunic" model, 41 patients were photographed and 97 films taken, 24 patients were screened, for details of this work see Table V.

Several interesting cases were seen during the year, one was an Hydatid Cyst in the abdominal muscles, the cyst was removed and the diagnosis confirmed by microscope. The disease is especially interesting as no case has been reported in the Colony. In another case a laparotomy on a woman revealed a large rete-testis cyst, which was removed. One case of Erythrooedema (Pink's Disease) was seen and treated in a child aged 8 months, she responded well to ultra violet radiation and Cod Liver Oil Therapy. There were several cases of a scaly, weeping type of eczema, leaving a dry scab; this might possibly be a manifestation of a deficiency disease but it is difficult to come to any definite conclusion.

The medical department has been fortunate in obtaining the services of T. K. Miller, Esq., B.Sc., Assistant Schoolmaster, to run the newly equipped laboratory in his spare time.

VI. MATERNITY AND CHILD WELFARE.

The hospital provides ante-natal and post natal services, the majority of confinements take place in hospital :

Confinements in :-	Hospital.	Town.	Camp.	Total.
	43	5	—	48.

There were 30 confinements during 1934.

In November an Infant Welfare Clinic was started, by the end of the year 55 babies were enrolled, and attended the clinic regularly. The idea is new to the Falkland Islands and a very gratifying response has been made. It is surprising to note the number of babies, which are fed on artificial foods, in time it is hoped to encourage breast feeding. The clinic caters for children up to five years of age when they attend the schools and come up for routine examination each year.

VII. PRISONS AND ASYLUMS.

No person was detained more than a night. The prison was inspected and found to be in a satisfactory state.

VIII. METEOROLOGICAL.

The Falkland Islands are situated about 300 miles East of South America in latitude 51 degrees 41 minutes South and longitude 57 degrees 41 minutes West (Stanley).

Readings are taken at the Government Dockyard every day at 9.0 a.m. and recorded according to the Beaufort scales.

The year under review has been exceptionally wet. The relation between the incidence of disease and a southerly wind is striking. For example :-

- (i) During the month of June there was an outbreak of Gastro Intestinal Influenza, 7 days during that month there was a Southerly wind, the ground was wet, frozen twice and daily average sunshine 2.1 hours.
- (ii) During the last two weeks of August there was an epidemic of Tonsillitis. On 19th, 22nd, 23rd & 31st of August there was a southerly wind, the ground was wet all the time, being frozen on three occasions, snow falling on the 19th & 20th. Daily average sunshine from the 17th to the 31st was 2.1 hours, many days being sunless.
- (iii) On the 4th of September a widespread epidemic of Influenza and bronchial Catarrh broke out, having been imported on the 29th of August from the s.s. 'Lafonia' with a couple of cases. The wind from the 30th August until the 9th September was blowing from the following quarters respectively: N.N.W. 4; W. 3; S.W. 6; S.S.W. 5; S.S.E. 6; W.S.W. 5; W. 5; W.S.W. 5; S.S.W. 4; S.W. 4; the state of the ground was very wet, the daily average sunshine being 3.3 hours with snow on two occasions.
- (iv) The Influenza epidemic continued until the first week in October, during that time there was an exacerbation of the epidemic about the 19th of September. The meteorological returns on the 15th-20th respectively showed wind W. 5; W.S.W. 5; S.E. 3; S. 1; S.W. 6; W.S.W. 5; W.N.W. 4; ground wet; snow on the 19th and 20th; average daily sunshine 4.6 hours.
- (v) Finally on the 20th-26th of November, Coryza was prevalent in the Town. Returns for 17th-26th November respectively, wind W.N.W 4; S.S.W. 4; N.N.W. ; S.W. ; S.W. ; wet, snow once average daily sunshine 4.4 hours.

In a hard climate where catarrhal conditions are so rife, the Southerly and South-easterly winds are especially detrimental to the health of the people.

Meteorological Returns for Stanley, for the year 1935 are given below.

T A B L E I.
METEOROLOGICAL OBSERVATIONS taken at STANLEY, FALKLAND ISLANDS, during the Year ended 31st December, 1935.

Latitude 51° 41' South. Longitude 57° 51' West.

MONTHS.	MEAN PRESSURE IN MILLIBARS.	AIR TEMPERATURE (F°)						PRECIPITATION IN INCHES.			WEATHER.				WIND.																									
		DRY BULB.	WET BULB.	MEANS OF		ABSOLUTE MAX. AND MIN.		TOTAL.	GREATEST FALL.	DATE.	VAPOUR PRESSURE IN MILLIBARS.	RELATIVE HUMIDITY SATURATION = 100.	AMOUNT OF CLOUD.	MEAN SUNSHINE (hours and tenths.)	RAIN.	SNOW OR SLEET.	GALES.	CLEAR SKY. 0-1	OVERCAST. 9-10	MEAN FORCE.	Number of Observations of																			
				MAX.	MIN.	MAX.	MIN.														MAX. DATE.	MIN. DATE.	N.	N.N.E.	N.E.	E.N.E.	E.	E.S.E.	S.E.	S.S.E.	S.	S.S.W.	S.W.	W.S.W.	W.	W.N.W.	N.W.	N.N.W.	CALM.	
January ...	998.4	48.3	45.0	53	30.9	63°	12th	32°	3rd	2.47	.40	2nd	8.8	77	7.0	3.6	25	—	4	—	16	4.3	1	—	1	—	—	2	3	4	1	4	2	5	7	1	—	—		
February ...	999.7	48.6	45.7	53	41	68°	26th	30°	23rd	4.41	.80	3rd	9.3	80	6.8	4.9	19	—	—	1	11	4.5	1	1	1	—	—	—	—	1	3	3	3	3	1	6	3	1	—	
March ...	993.1	49.4	47.1	55	41	64°	27th	35°	16th	1.42	.27	15th	10.0	83	6.0	6.0	17	—	—	5	9	5.0	—	1	—	—	—	1	—	—	—	—	—	5	3	3	10	6	5	—
April ...	1002.2	41.4	40.2	45	35	51°	3rd	28°	21st	5.92	1.92	11th	7.8	88	7.7	3.2	26	—	—	2	15	3.9	—	—	1	—	—	3	—	5	—	3	6	1	6	2	2	—		
May ...	1001.9	40.1	38.8	43	34	51°	8th	28°	14th	3.21	.51	15th	7.4	88	7.0	1.8	28	7	—	1	15	4.2	1	—	1	—	—	1	1	1	—	5	—	—	5	4	8	4	8	—
June ...	995.2	36.6	37.5	42	33	46°	3rd	28°	30th	2.76	.63	14th	7.4	90	6.0	3.1	20	—	—	1	15	4.0	3	—	—	1	—	1	—	1	—	2	4	4	8	6	3	3	1	—
July ...	1001.5	33.4	32.5	37.5	27.1	42°	13th	18°	27th	2.48	.55	28th	5.7	89	6.7	1.6	28	8	—	—	17	3.5	1	1	—	—	—	1	2	1	1	6	3	7	3	3	1	1	1	
August ...	1007.0	35.7	35.6	41	30	51°	20th	23°	20th	2.65	.8	30th	6.5	87	7.0	2.2	24	5	—	3	16	4.2	1	—	—	—	1	—	1	—	1	5	4	8	3	3	3	3	—	
September ...	1004.7	36.6	35.1	41	28	52°	30th	21°	3rd	2.58	.44	12th	6.0	86	6.0	3.5	28	—	—	5	19	6.0	—	1	—	—	1	1	1	1	2	6	6	3	4	4	3	3	1	—
October ...	1015.0	41.7	38.9	45	33.7	59°	12th	26°	24th	.6	.2	22nd	6.5	75	6.7	4.0	11	—	—	1	15	4.7	—	2	—	—	—	2	1	1	3	7	1	3	9	3	3	—	—	
November ...	986.1	43.8	40.6	49	36.4	61°	10th	43°	6th	2.08	.31	20th	8.1	72	6.0	6.5	23	3	—	2	6	4.0	1	—	1	—	—	—	4	1	5	3	3	5	4	2	1	—		
December ...	964.9	47.9	44.5	53	38	58°	15th	33°	14th	3.25	.91	7th	6.7	76	7.0	4.2	23	—	2	1	16	4.0	—	—	4	1	1	4	1	5	—	—	1	7	1	5	1	—		
Means.	993.3	42.1	40.1	46	34.3	—	—	—	—	2.82	—	—	7.4	82	6.6	3.7	27.2	23	6	25	17.0	4.3	9	9	9	5	4	5	17	11	28	9	51	36	63	59	39	11	3	

Stanley, Falkland Islands.
6th January, 1936.

M. J. STEWART,
Harbour Master.

DEPENDENCIES.

It is hoped to obtain a report on the health and sanitary conditions of South Georgia for the next annual report.

All the personnel recruited from the Falkand Islands were medically examined prior to leaving for South Georgia.

R. L. CHEVERTON,
Senior Medical Officer.

T A B L E I I .

MEDICAL AND SUBORDINATE STAFF.

OFFICE.	NAME AND QUALIFICATIONS.	REMARKS.
A. MEDICAL STAFF.		
Senior Medical Officer ...	R. L. Cheverton, M.R.C.S., L.R.C.P., M.R. SAN. I.	Appointed 10/2/35.
Medical Officers	H. Glyn Edmunds, M.S.A.	
	T. P. Binns, M.R.C.S., L.R.C.P.	Resigned on 20/7/35.
	J. B. Henderson, M.B., Ch.B., Glasgow.	Assumed duty as Medical Officer, Fox Bay on 26/10/35.
B. NURSING STAFF.		
Matron	Miss C. Wells, S.R.N., R.F.N.	Resigned on 14/7/35. 4½ months leave.
Nursing Sister	Miss M. E. Hill, S.R.N.	Promoted to Matron on 15/7/35.
Junior Nurses	Miss G. Reive, S.R.N.	Promoted to Nursing Sister after study leave on 15/7/35.
	Miss R. Harvey	
Nurse Probationers	Miss M. S. J. Miller	Promoted on 7/3/35. to Junior Nurse.
	Miss E. H. Fuhlendorff	
C. DENTAL STAFF.		
Dental Surgeon	S. W. Harding, L.D.S., (R.C.S.I.)	
Dental Mechanic	J. Turner	
Dental Mechanic's Assistant ...	R. Lellman	
D. SANITARY STAFF.		
Sanitary Inspector	S. H. Hooley	Chief Constable.
E. CLERICAL STAFF.		
Clerk	B. N. Biggs	

TABLE III.

K. E. M. Hospital, Stanley.

LIST OF OPERATIONS, 1935.

	No. of cases.
Whitlow	2
Ganglion of Hand	4
Removal of Tonsils and Adenoids	20
Dermoid excision	1
Dentals	91
Ludwig's Angina	1
Circumcision	4
Naevus (CO ₂)	1
Talipes (manip)	1
Abscess	6
Bursa (incision)	2
Tongue Tie	2
Varicose Veins	36
Foreign Bodies (removal)	20
Hydrocele (radical oper.)	1
Appendicitis	23
Hernia - Inguinal	2
Femoral	1
Fractures	2
Rete Testis Cyst (removal)	1
Meibomian Cyst (removal)	1
Dilate and Curette	1
Version (bipolar)	1
Uterine fibroid (removed)	1
Tubercular Osteomyelitis, Sequestrotomy	1
Renal Urinary fistula	1
Carc. Gall Bladder (laparotomy)	1
„ Liver („)	1
Pleurisy and effusion - aspirated	1
Total	230

TABLE IV.

RADIOGRAPHICAL EXAMINATIONS.

January to December, 1935.

Subject.	No. of cases.	No. of films taken.
Tubercular Osteomyelitis of Femur	1	6
Tubercular Clavicle	1	2
Tuberculosis of the spine	1	1
Tuberculosis of the Hip Joint	1	4
Tuberculosis of the Lungs	1	1
Barium Meal	5	8
Hip and Pelvis - nil found	5	11
Arthritis - Hypertrophic	1	3
- Atrophic	1	4
Skull - Sinuses	3	7
- Teeth (Pyorrhoea)	1	2
Fractures -		
Femur	1	4
Tibia with sep. lower epiph.	1	3
Ankle joint	1	2
Separation lower epiph. Femur	1	3
Injuries -		
Finger	1	1
Hand	4	5
Shoulder	1	1
Knee	4	9
Ankle	1	1
Teno Synovitis of finger	1	1
Forearm abscess	1	1
Tumours : Cyst of Femur	1	14
Foreign Body in Hand	1	1
" " " Eye	1	2
Total ...	41	97
Screenings ...	24	

TABLE V.
RETURN OF DISEASES AND DEATHS (IN-PATIENTS) 1935.
(Excluding West Falkland & Lafonia.)

Disease.	Patients remaining in Hospital 1933-1934.	Yearly Total.		Deaths.	Patients remaining in Hospital 1934-1935.
		Total Admissions.	Total Cases.		
I. INFECTIOUS AND PARASITIC DISEASES.					
11b. Influenza without respiratory complications ...		3	3		
23. Tuberculosis of the Respiratory System. ...		1	1		
24. Tuberculosis of the Central Nervous System ...		1	1	1	
25. Tuberculosis of Intestines and Peritoneum ...		1	1		
26. Tuberculosis of Vertebral Column ...		3	3		
27. Tuberculosis of other bones and joints ...		3	3		1
41. Hydatid cysts ...		1	1		
II. CANCER AND OTHER TUMOURS.					
46. Cancer of the digestive organs and peritonem		2	2		
48. Cancer of the Uterus ...		1	1		
50. Cancer of Breast ...		1	1		
54. Non Malignant Tumours:					
Fibroma of Hand ...		1	1		
Fibromyoma ...		1	1		
Rete testis cyst ...		1	1		
Cyst of Bone ...		1	1		
III. RHEUMATISM, DISEASES OF NUTRITION, EN- DOCRINE GLANDS, OTHER GENERAL DISEASES.					
59. Diabetes Mellitus ...		1	1		
VI. DISEASES OF NERVOUS SYSTEM.					
87b. Neuritis:		2	2		
Trigeminal neuralgia ...		1	1		
87c. Hysteria ...		1	1		
89. Diseases of the ear:					
Mastoiditis ...		1	1		
VII. DISEASES OF THE CIRCULATORY SYSTEM.					
102. Abnormalities of blood pressure ...		1	1		
VIII. DISEASES OF RESPIRATORY SYSTEM.					
106b. Chronic bronchitis ...		1	1		
107. Broncho-pneumonia ...		3	3		
108. Lobar pneumonia ...		2	2	1	
112. Asthma ...		2	2		
IX. DISEASES OF THE DIGESTIVE SYSTEM.					
115:1 Disease of the teeth and gums:					
Dental Caries ...		91	91		
2 Ludwig's Angina ...		1	1		
3 Disease of tonsils ...		23	23		
117a. Ulcer of Stomach ...		2	2		
117b. Ulcer of the duodenum ...		1	1		
<i>Carried Forward</i>	—	154	154	2	1

T A B L E V . (Continued).

Disease.	Patients remaining in Hospital 1933-1934.	Yearly Total.		Deaths.	Patients remaining in Hospital 1934-1935.
		Total Admissions.	Total Cases.		
<i>Brought Forward</i>	—	154	154	2	1
118:1 Inflammation of Stomach		3	3		
121. Appendicitis	2	26	28		1
122. Hernia:					
Inguinal		1	1		
Femoral		1	1		
Adhesions		3	3		
123:1 Constipation		1	1		
X. NON-VENEREAL DISEASES OF GENITO-URINARY SYSTEM.					
133b. Other diseases of the kidney:					
Haematuria		1	1		
Renal Urinary fistula		1	1		
135a. Cystitis		1	1		
138. Circumcision:					
Hydrocele		1	1	1	
Paraphimosis		2	2		
139b. Diseases of uterus					
Amenorrhoea		1	1		
Cervical Erosion		3	3		
Prolapsus Uteri		1	1		
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND PUERPERAL STATE.					
2. Abortion		1	1		
147. Toxaemia of Pregnancy					
Hyperemesis Gravidarum		1	1		
150:3 Childbirth	2	20	22		
XII. DISEASES OF SKIN AND CELLULAR TISSUE.					
151. Carbuncle, Boil		1	1		
152:1 Cellulitis		1	1		
2 Acute abscess		1	1		
153. Other diseases of skin and annexa:					
Dermatitis		1	1		
XIII. DISEASES OF BONES, JOINTS AND OTHER ORGANS OF LOCOMOTION.					
156a. Diseases of the joints:					
Prepatellar Bursitis		1	1		
156b. Diseases of other organs of locomotion:					
Ganglion of Wrist		1	1		
XIV. CONGENITAL MALFORMATIONS.					
157. Congenital Malformations.					
Talipes Equino Varus		1	1		
XV. DISEASES OF EARLY INFANCY.					
158. Congenital debility Marasmus		1	1	1	
<i>Carried Forward</i>	4	230	234	4	2

T A B L E V . (Continued).

Disease.	Patients remaining in Hospital 1934-1935.	Yearly Total.		Deaths.	Patients remaining in Hospital 1934-1935.
		Total Admissions.	Total Cases.		
<i>Brought Forward</i>	4	230	234	4	2
XVII. VIOLENCE.					
194. Blows	1	3	4		
Contusions		1	1		
Concussion		1	1		
Fractures		2	2		
Foreign Body under skin		1	1		
200:1 Heart failure		1	1	1	
<i>Total</i>	5	239	244	5	2

TABLE VI.
RETURN OF DISEASES AND DEATHS, (OUT-PATIENTS &
DISTRICT), 1935.

(Excluding West Falkland & Lafonia.)

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
I. INFECTIOUS AND PARASITIC DISEASES.						
6. Vaccinations against Small Pox ...	105	128	3	2		
11. Influenza	114	105	2	13		
11a. 1 Pneumonic	1					
11b. without respiratory complications	60	3	91	145		
Gastro-intestinal	7	2	4	8		
23. Tuberculosis of the Respiratory system ...	8	124	10	45	2	
25. Tuberculosis of Intestines and Peritoneum			1	2		
26. Tuberculosis of Vertebral Column ...	1	10	1	6		
27. Tuberculosis of other bones and joints ...	1	73	2	22		
34. Syphilis	3	40				
35. Gonorrhoea	1	37				
41. Hydatid Cysts	1	14				
42. Other diseases due to helminths:						
Oxyuris Vermicularis	26	9				
43. Mycoses:						
Thrush	2		2	5		
44. Rubella:						
Chicken Pox	7	5	3	2		
Erythroedema	1	55				
II. CANCER AND OTHER TUMOURS.						
46. Cancer of the digestive organs and peritoneum ...	1	7	1	16	1	
48. Cancer of the Uterus	1	1	1	1		
50. Cancer of the Breast			1	3	1	
54. Non Malignant Tumours:						
Sebaceous Cyst	2	7				
Neurofibroma	2	4				
Fibromyoma		14				
Cyst of Bone	1	13	1	1		
Exostosis	1					
55. Cerebral Tumour		16	1	11		
III. RHEUMATISM, DISEASES OF NUTRITION, EN- DOCRINE GLANDS, OTHER GENERAL DISEASES.						
57. Chronic rheumatism	43	59	13	7		
Osteo-arthritis	2	1	2	5		
58. Gout	2	1	1			
59. Diabetes Mellitus					1	
63. Rickets	2	15				
65. Disease of the pituitary gland	1	4				
66. Diseases of the thyroid and parathyroid glands	1	2				
<i>Carried Forward</i>	397	749	140	294	5	—

T A B L E V I. (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	397	749	140	294	5	—
69. Other general diseases:						
Acidosis	1	33	1			
Obesity	1	2				
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.						
71. Anaemia, Chlorosis	16	19	1			
74. Other blood diseases:						
Erythema nodosum	1	1				
V. CHRONIC POISONING.						
75. Alcoholism:						
Delirium Tremens	2	3	1			
VI. DISEASES OF THE NERVOUS SYSTEM.						
82. Cerebral haemorrhage			1	6	1	2
84. Other form of Insanity:						
Melancholia	2	5	1	4		
85. Epilepsy	5	71				
87. Other diseases of the central nervous system:						
Insomnia	2	7				
87b. Neuritis	14	64	3	1		
Trigeminal neuralgia	1	2				
Migraine	2	42				
Neuralgia	9	4	1			
87c. Hysteria	2	1	1	1		
Neurasthenia	2	4	1	1		
Nervous debility	5	11				
88. Diseases of the eye and annexa:						
Blephaeritis	10	4				
Conjunctivitis	12	6				
Hordeolum	7					
Meibomian Cyst	1	2				
Corneal Ulcer	1	7				
Refraction tests	75	16				
89. Diseases of the ear:						
Otitis Media	3	8				
Perforation of Drum	1	1				
Deafness	3					
Influenzal Otitis	2	1				
Cerumen	8	7				
VII. DISEASES OF THE CIRCULATORY SYSTEM.						
2. Mitral valve	2	7				
3. Aortic and mitral valve	2	14				
5. Other valvular diseases			4	6		
93. Disease of the myocardium:						
Chronic myocarditis	5	24	9	13	1	1
<i>Carried Forward</i>	594	1115	164	326	7	3

T A B L E V I. (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	594	1115	164	326	7	3
94. Angina pectoris						1
95. Other diseases of the heart:						
Auricular fibrillation	1	51	2	3		
Tachycardia	2	2	1	9		
Cardiac Asthma			1			
Heart Block	1	2				
97. Arterio-sclerosis	2	5				
100. Diseases of veins:						
Haemorrhoids & V.V.	42	25	3			
Phlebitis	1					
Ruptured V.V.	1	16				
101. Diseases of the lymphatic system:						
Lymphadenitis	4	5				
102. Abnormalities of blood pressure ...	7	11	1			
103. Other diseases of the circulatory system ...						
Epistaxis	4					
VIII. DISEASES OF THE RESPIRATORY SYSTEM.						
104:1 Diseases of the nose:						
Coryza	92	25	19	13		
105. Diseases of larynx	1	2				
106a. Acute bronchitis	18	18	11	34		
Subacute bronchitis	3	7				
106b. Chronic bronchitis	40	34	11	10		
107. Broncho-pneumonia	1		3	5		
108. Lobar pneumonia			3	12	1	
110. Pleurisy	4	2	6	14		
112. Asthma	17	48	7	26		
Hay Fever	2		2	3		
114. Other diseases of the respiratory system:						
Pleurodynia	6	3	1	1		
IX. DISEASE OF THE DIGESTIVE SYSTEM.						
115:1 Disease of the teeth and gums:						
Dental Caries	110	57				
Dental Ulcer	1					
2 Ludwig's Angina	1	2				
3 Disease of tonsils	58	24	11	23		
4 Other diseases of buccal cavity and pharynx:						
Glossitis	6	3				
Stomatitis	9	2				
Pharyngitis	16	12				
Tongue Tie	1					
117a. Ulcer of Stomach	3	25				
117b. Ulcer of the duodenum	1					
118:1 Inflammation of stomach	14	77	1	2		
2 Dyspepsia and other diseases:						
Dyspepsia	40	23	4	1		
<i>Carried Forward</i>	1103	1596	251	482	8	4

T A B L E V I. (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	1103	1596	251	482	8	4
120:2 Diarrhoea	28	5	1	1		
Enteritis	12	4				1
121. Appendicitis	34	78	5	2		
Appendix stitch abscess	1	6				
122. Hernia:						
a Inguinal	5	3				
Femoral	1	2				
Umbilical	2					
Adhesions	2	7	1			
123:1 Constipation	24	39				
3 Other diseases:						
Melaena	1					
125. Other diseases of the liver:						
Hepatitis	2	2	4			
126. Biliary calculi	1					
127:1 Cholecystitis	2	1				
2 Jaundice	1	2				
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.						
130. Acute nephritis	1	1				
131. Chronic nephritis		2				
133b. Other diseases of the kidney:						
Nephroptosis	1					
Renal Urinary fistula	1	4				
Hydronephosis	1	3				
134. Urinary calculi-renal	1	1				
135a. Cystitis	4	11	2	10		
135b. Incontinence	6	2				
137. Diseases of prostate	3	11	2			
138. Circumcision	3	15				
Hydrocele	1	3				
139a:1 Ovary	2	16	1			
139b. Diseases of uterus:						
Amenorrhoea	9	39	2			
Dysmenorrhoea	11	28	4			
Menorrhagia	8	1				
Exaggerated Menopausal Syndrome	2	1				
Laucorrhoea	1					
Astresia Vaginae	1	4				
Cervical Erosion	6	40	1	3		
Fibroid	1	1				
Retroversion	1					
Prolapsus Uteri	4	9	1	2		
Sterility	1	4				
139c. Diseases of the Breast:						
Mastitis	3					
<i>Carried Forward</i>	1291	1941	275	500	8	5

T A B L E V I . (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	1291	1941	275	500	8	5
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.						
2. Abortion		6	3	7		
147. Toxaemia of Pregnancy:						
Slight Albuminuria			1			
Hyperemesis Gravidarum	3	6				
148a. Puerperal phlegmosia	1	1				
149. Other accidents of childbirth:						
Antenatal Clinic	43	88	5	11		
Postnatal Care		21	4	33		
150:3 Childbirth			8	93		
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.						
151. Carbuncle, Boil	6	33	4	6		
Furunculosis	3	19				
152:1 Cellulitis	13	8		1		
2 Acute abscess	22	75	1	1		
153. Other diseases of skin and annexa:						
Acne Vulgaris	3	4				
Herper Zoster	1					
Verruca	1	8				
Puritus Vulvae	3	1				
Chilblains	8	3	1	1		
Dermatitis	30	38	1			
Impetigo Contagiosa	63	319				
Wart	19	18				
Corn	7					
Alopecia	1	1				
Ulcer	3	52				
Pzoriasis	2	32				
Sebaceous cyst	2	1				
Eczema	13	9				
Urticaria	11	9	6	1		
XIII. DISEASE OF THE BONE AND ORGANS OF LOCOMOTION.						
155. Other diseases of bones:						
Osteitis	1	2				
Dactylitis	1	6				
Coxalgia	1					
156a. Diseases of the joints:						
Arthritis	7	2				
Arthralgia	1	5				
Prepatellar Bursitis	7	12	1	3		
Synovitis		1	1	1		
156b. Diseases of other organs of locomotion:						
Teno Synovitis	3	6				
<i>Carried Forward</i>	1570	2727	311	658	8	5

T A B L E V I . (Continued).

Disease.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	1570	2727	311	658	8	5
Hammer Toe	1					
Pes Planus	2					
Hallux Rigidus	1					
Ganglion of Wrist	1	1				
Myositis	3	2	2	1		
XIV. CONGENITAL MALFORMATIONS.						
157. Congenital Malformations:						
Naevus	3	8				
Tongue tie	2					
Pes Planus	1					
Talipes Equino Varus	1	6				
XV. DISEASES OF EARLY INFANCY.						
158. Congenital debility Marasmus	2	13		8		
161. Umbilical Haemorrhage	1					
Teething	1					
XVI. OLD AGE.						
162. Old Age			1	2		1
XVII. VIOLENCE.						
163. Suicide			1		1	
176. Bee Sting	1					
Gnat Bite	1					
Dog Bite	1	2				
181. Accidental burns	10	29				
190. Excessive cold	3	3				
194. Blows	8	8	6	10		
Contusions	32	27	2	9		
Concussion	2	2				
Incised Wound	43	62				
Fractures	2	37	8	40		
Dislocation	1	8				
Strain	18	16	3	5		
F.B. in eye	11	10				
„ ear	1					
„ Oesophagus	1	1				
under skin	6	27				1
200:1 Heart failure						
2 Other ill-defined causes.						
Debility	19	13	1			
Examination for Life insurance	2					
General Examination	34					
Infant Welfare Clinic	52	42	3	12		
<i>Total</i>	1837	3044	338	745	9	7

TABLE VII.
RETURN OF DISEASES AND DEATHS, YEAR 1935.

Lafonia, Falkland Islands Company's Camp.

Disease.	At Surgery Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
I. INFECTIOUS AND PARASITIC DISEASES.						
11. Influenza			63	59		
23. Tuberculosis of the Respiratory system ...	1	7	2	16		
42. Other diseases due to helminths:						
Oxyuris Vermicularis			1	3		
43. Mycoses:						
Tinea	3	1	3			
44. Erythroedema	1	5	1	18		
II. CANCER AND OTHER TUMOURS.						
54. Non-malignant tumours:						
Lipoma	1	6				
Uterine fibroid	1	5	1	2		
III. RHEUMATISM, DISEASES OF NUTRITION & ENDOCRINE GLANDS & OTHER GENERAL DISEASES.						
56. Rheumatic fever	1	1	5	1		
57. Chronic rheumatism:						
Osteo-arthritis	1	1	2	1		
VI. DISEASES OF THE NERVOUS SYSTEM.						
84. Other forms of insanity			1	1		
Neurasthenia	1	3	1	1		
Sciatica	1		1	1		
88. Diseases of the eye and annexa:						
Asthenopia	2		2			
Conjunctivitis	2	8	3	1		
89. Diseases of the ear:						
Meniere's disease			1	6		
External otitis			2	5		
VII. DISEASES OF THE CIRCULATORY SYSTEM.						
92. Chronic endocarditis:						
92:2 Mitral valve	1	6	4	16		
94. Angina pectoris			1	3		
95. Other diseases of the heart						
Tachycardia			13	46		
101. Diseases of the lymphatic system ...			2			
100. Disease of veins:						
Varicose veins			1			
Haemorrhoids	1		1			
VIII. DISEASES OF THE RESPIRATORY SYSTEM.						
105. Laryngitis	2					
<i>Carried Forward</i>	19	43	111	180	—	—

TABLE VIII. (Continued).

Disease.	At Surgery (Out-patients.)		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	19	43	111	180	—	—
106a. Acute bronchitis	14	12	28	16		
110. Pleurisy	1		1	18		
114. Pulmonary Fibrosis	1	3	1	3		
IX. DISEASE OF THE DIGESTIVE SYSTEM.						
115:1 Diseases of the teeth and gums:						
Gingivitis	1	1	2	1		
3 Diseases of tonsils			8	5		
Ulcerative Stomatitis			2	3		
117a. Ulcer of the stomach			1	7		
118:2 Dyspepsia and other diseases	11	4	17	10		
120. Gastro-enteritis			34	13		
121. Appendicitis	2	4	6	13		
Post-operative adhesions	1	3	1	1		
123:1 Constipation	7	6	1	3		
Diverticulitis	1	3	1	2		
127:1 Cholecystitis	2	2	2	1		
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.						
133a. Pyelitis	1	2	2	1		
134. Urinary calculi:						
Kidney			1	2		
135a. Cystitis	3	8	2	23		
135b. Other diseases of the bladder:						
Enuresis	1	1	1			
139b. Diseases of uterus:						
Menorrhagia	1	2	1	1		
Irregular menses	1					
Prolapsus uteri	1	1	1	4		
Amenorrhoea (Pathological)	1		1	1		
139c. Diseases of the breast:						
Mastitis	2	3	2	1		
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.						
152:1 Cellulitis	2	1	2			
2 Acute abscess			2	3		
153. Other diseases of skin and annexa:						
Dermatitis	6	11	9	10		
Chilblains			3	1		
Erythema multiforme	1	2	1	2		
XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION.						
156a. Diseases of the joints:						
Bursitis	1	6	2	6		
Sprain	7	2	4	3		
<i>Carried Forward</i>	88	120	250	334	—	—

T A B L E V I I . (Continued).

Disease.	At Surgery Out-patients.		District.			Deaths in the Colony apart from these previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	88	120	250	334	—	—
156b. Diseases of other organs of locomotion:						
Torticollis 			1	1		
Lumbago 	6	3	1	1		
XVII. VIOLENCE.						
194. Blows:						
Laceration of face 			1	10		
Contusions 	5	8	5	7		
Fractures 			3	13		
Foreign body in eye 	1	1	1			
XVIII. ILL-DEFINED DISEASES.						
Debility 	4	1	9	15		
<i>Totals</i>	104	133	271	381	—	—

TABLE VIII.
RETURN OF DISEASES AND DEATHS. (August to December, 1935.)
West Falkland Island.

Disease.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
I. INFECTIOUS AND PARASITIC DISEASES.						
11. Influenza	126					
11a. 1 Pneumonic			1	2		
Other respiratory complications			1			
11b. Without respiratory complications			2	3		
Marked Urticaria during deferverence			1	3		
26. Tuberculosis of Vertebral column			1	2		
II. CANCER AND OTHER TUMOURS.						
50. Cancer of the breast			1			
54. Non-malignant tumours:						
Papilloma Hard Palate			1			
56. Rheumatic fever:						
Rheumatic neuritis	1					
Chronic Rheumatism	7	1	4			
Osteo-arthritis	1					
59. Diabetes Mellitus	1					
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.						
71. Anaemic Chlorosis			4			
74. Other blood diseases			1			
VI. DISEASES OF THE NERVOUS SYSTEM.						
82. Cerebral haemorrhage			1		1	
87. Other diseases of the central nervous system			1			
88. Diseases of the eye and annexa:						
Myopia	3					
Hypermetropia	1					
Asthenopia	1					
89. Diseases of the ear:						
Chronic Otitis Media			1			
Deafness			1			
93. Disease of the Circulatory system:						
Myocarditis			1			
Varicose Veins (injected)			2			
VIII. DISEASES OF THE RESPIRATORY SYSTEM.						
104:1 Diseases of the nose			1			
110. Pleurisy	1					
Nasal Catarrh			1			
Chronic Rhinitis			1			
112. Asthma			1			
106a. Acute bronchitis			1			
Other diseases of the respiratory system:						
Pleurodynia			1			
<i>Carried Forward</i>	142	1	30	10	1	—

T A B L E V I I I . (Continued).

Disease.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	142	1	30	10	1	—
IX. DISEASE OF THE DIGESTIVE SYSTEM.						
115:1 Diseases of the Teeth and gums ...	27		1			
3 Diseases of Tonsils ...			1			
2 Dyspepsia and other diseases ...			3	6		
120:2 Diarrhoea ...			1			
121. Appendicitis:						
Chronic ...			2			
Subacute ...			2			
123:1 Constipation ...			3			
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.						
131. Chronic nephritis ...			1			
135a. Cystitis ...			1			
131. Circumcision ...	2					
139b. Diseases of the uterus ...						
Leucorrhoea ...			1			
Menorrhagia ...			3			
Dysmenorrhoea ...			2			
Climateric ...			1			
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.						
3 Childbirth ...			2			
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.						
151. Carbuncle, Boil ...	1					
152:1 Cellulitis ...			1			
2 Acute abscess ...						
153. Other diseases of skin and annexa:						
Corns ...	1		1			
Warts ...			1			
Urticaria ...			1	3		
Eczema ...			2			
156a. Diseases of the joints:						
Bursitis ...			1			
Synovitis (knee) ...			1			
156b. Diseases of other organs of locomotion:						
Hammer Toe ...			1			
Muscular dystrophy ...			1			
XV. DISEASES OF EARLY INFANCY.						
158. Congenital debility ...			1	1		
161. Other diseases peculiar to early infancy:						
Teething ...			1			
XVII. VIOLENCE.						
181. Accidental burns ...			1			
<i>Carried Forward</i>	173	1	67	20	1	—

T A B L E V I I I . (Continued).

Disease.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	173	1	67	20	1	—
194. Blows:						
Contusions	2			2		
Foreign Body in eye				2		
Incised wound	1			2		
<i>Totals</i>	176	1	71	20	1	—

N.B. Return of diseases shewn include only the period between August and December, 1935.

A P P E N D I X A.

DENTAL REPORT.

2nd March, 1936.

Sir,

I have the honour to report on the Dental Department for the year 1935.

I was on leave in England from the 9th March to the end of October. On my return, I made a tour of the North Camp, taking equipment for fillings, extractions and making dentures, up to the stage of trying in. These I took back to Stanley to be finished, finally being sent to the patients.

On the 27th of December I again left Stanley for the West Falkland Island, this time taking my mechanic and all our instruments.

Fillings are still not very popular among the people, especially in the Camp, and there is an increasing demand for extraction and dentures. This means using large quantities of expensive materials, causing a big inroad in our Annual vote for drugs, instruments, etc.

The children's clinic on Saturday morning is still well attended. Below is a summary of the year's work, which shows a big decrease on previous years owing to leave.

I am,

Sir,

Your obedient servant,

S. W. HARDING,

Dental Surgeon.

The Honourable,

Senior Medical Officer,

Stanley.

N.B. The work of the Dental Department was carried on by the Medical Officers during the absence on leave of the Colonial Dentist.

TABLE IX.

DENTAL RETURNS.

Patients.	No.	Fillings.	Dentures.	Extractions. Local.	Extractions General.	Repairs.	Scalings.	Operations.
Adults ...	212	34	89	96	185	51	4	9
Children ...	72	19	—	52	104	—	—	6
Totals	284	53	89	148	289	51	4	15

Summary of work done on West Falkland Island from 29/12/1935 to 20/2/1936.

Station.	Extractions.	Fillings.	Dentures.	Repairs.	Scalings.	General Anaesthetics.	Number of Patients.
Port Howard ...	42	3	5	—	2	—	15
Hill Cove ...	35	1	2	2	1	—	17
Chartres ...	69	5	6	4	2	1	22
Roy Cove ...	27	3	6	1	—	1	10
Fox Bay West ...	20	—	—	—	—	—	5
Fox Bay East ...	17	5	8	—	1	—	11
Spring Point ...	6	—	3	—	—	—	4
Port Stephens ...	—	—	2	1	—	—	2
Totals	216	17	32	8	6	2	86

S. W. HARDING,
Colonial Dental Surgeon.

A P P E N D I X B .

REPORT ON SCHOOL MEDICAL EXAMINATION.

Average school attendance during 1935 was 187.2 at the Government School and 52 at the Roman Catholic School. The former school had an average of 203.9 pupils on the Roll and the latter 62 pupils during the whole of 1935.

EXAMINATION OF SCHOOL CHILDREN.

1. *Clothing and General Cleanliness.* The majority of the children were clean, no signs of *Pediculis Capitis*, a few cases, however, showed *Seborrhæic Dermatitis* of the Scalp.

2. *Height and Weight.* The figures shown below are based on the Tables drawn up by the Chief Medical Advisor of the Board of Education, 1927.

(a) <i>Height.</i>	Under average height	1.21%
	Average height	81.32%
	Above average height	17.47%
(b) <i>Weight.</i>	Under weight	25.60%
	Average weight	28.09%
	Excessive weight	20.71%

The percentage figure of 25.60% for underweight is on the high side. The children falling into this category were confirmed clinically, the greater part being anaemic, and suffering from dental caries and of nose and throat infections, the remainder appeared weedy.

The 20.71% overweight is also on the high side, several of the children showed hereditary adiposity; the cold climate might account for a certain number of cases, especially during the winter months. One case is definitely endocrine in origin.

3. *Dental Examination.* 43.08% of children showed defective teeth. From my previous remarks with reference to diet it seems to be a definite manifestation of vitamin deficiency due to an ill balanced diet. The Dental department runs a special clinic for children free of charge.

4. *Naso-pharyngeal examinations.*

Hypertrophic Tonsils	17.47%
" Adenoids	4.47%
Septic Tonsils	9.75%

A determined effort was made during the year to deal with these naso-pharyngeal infections.

5. *Examination of the Eyes.* Follicular Conjunctivitis was found in 6.91% of the children. This condition responded well to the administration of Cod Liver Oil, indicating that the lack of Vitamin A is a factor. The condition is aggravated in the homes where it is the custom to live in overheated kitchens.

6. *Vision.* Tested with Snellin Test Types; 9.75% cases were found defective. The younger children up to the age of eight were not examined.

7. *Ear Diseases.* Otitis Media 1.2½%.

8. *Hearing.* No defects were found.

9. *Speech.* No defects except in adenoiditis cases.

10. *Mental conditions.* The girls are generally more alert than boys. The suggestion that Group Mental Tests and Binet Simon Tests be made has not received the support of the authorities concerned.

11. *Heart Disease.* 6% were found to be suffering from organic cardiac lesions; several showed hypertrophic tonsils but there was no history of acute rheumatism.

12. *Lungs.* Asthma 5% of the children suffering from this condition, in several cases it is familial.

Bronchitis – two cases; an Acute Coryza and Bronchitis is very common amongst the children during the winter months.

13. *Tuberculosis.* There is one suspicious case of Hilium Tuberculosis in a boy with a bad family history. No cases of adenitis were observed.

The Government did not think it advisable to make the von Pirquet Test, when the matter was put forward for consideration.

14. *Deformities.* One case of rachitic chest.

15. *Infectious and Contagious Diseases.* Influenza, Impetigo, Chicken Pox, Coryza and Ringworm have occurred amongst the children during the year. The schools being closed for three weeks on account of Influenza.

The school premises were inspected and it was noticed how very cold certain class rooms were, this defect has been given very close attention and a scheme is being worked out to improve the heating system. The lavatories and urinals leave much to be desired, it is hoped that they will be rebuilt in the near future, with adequate accommodation being made for staff and pupils.

The Government have accepted in principle that some form of domestic economy be taught in addition to the Hygiene, at present, being taught in the schools. Owing to climatic and other difficulties it was thought inadvisable to press forward the suggestion of acquiring land in order to teach horticulture.

To combat Dental caries, persistent bronchitis, coryza and other conditions suggestive of vitamin deficiencies, it is strongly advocated that each child should be supplied daily with Cod Liver Oil and One pint of Milk. Certain cases might benefit with courses of Ultra Violet irradiation, if a mercury vapour lamp were purchased for the hospital. The ear, nose and throat conditions are receiving attention. The Dental clinic is doing good work every Saturday morning, when the children receive treatment free of charge.

In the case of organic heart disease, the parents have been advised not to allow their children to partake in the physical exercises.

A P P E N D I X C .

REPORT ON A TOUR OF THE EAST FALKLAND ISLANDS.

A tour was made of the North East Falkland Islands during the month of June, a distance of 295 miles was covered and 58 houses were visited; owing to bad weather it was considered advisable not to visit the south Lafonia country.

HOUSING CONDITIONS.

All houses visited were built of wood and iron, and for the most part they are in a good state of repair with the exception of 2 or 3 already condemned and awaiting a suitable opportunity for re-building. One or two houses are very damp owing to their close proximity to fresh water lakes; most houses seem to be constructed without proper under floor ventilation or damp courses.

The cookhouses seem to be very comfortable and simple in design. The general state of cleanliness depends on the cooks and this varies in what they consider to be a tidy house.

It would be a great advantage if proper washing accommodation and a bathroom be built in every cookhouse, it is very desirable that after shearing and long rides the men should get a proper wash.

The bucket system of latrine is in general use; most cookhouses have latrines built over the foreshore, and the pit latrine system is used in certain settlements only.

It is very desirable that every settlement should have a small properly drained slaughterhouse. Some settlements use a corner of the shearing shed for killing for meat.

The water supply is almost entirely subsoil water, several wells are properly protected but the majority are entirely unprotected and liable to be contaminated by animals. Several houses use rain water for all purposes.

The growing of vegetables might with advantage be more scientifically studied, the value of green vegetables is not always appreciated. Several of the more inland houses have the greatest difficulty in growing potatoes, a staple food in the camp during the winter.

Better protection might be afforded the houses and gardens by planting gorse bushes, caliphath, willow and maritime pines, suitably protected during their early growth, failing that, fencing and sod walls might be used with advantage.

The supply of milk is very poor during the winter, although ample during the summer. summer milk might be made into cheese or stored in bottles and the proper attention to the cows should give a better yield of milk during the winter.

There appears to be quite a lot of mastitis amongst the cattle. Cases of ringworm frequently crop up amongst the calves and human infections often result from contact.

The laying down of tussac plantations (*Poa Flabellata*) near the settlements would make the feeding of cattle and horses much easier during the winter.

The food in the camp is very limited in its variety and more abundance of milk and cheese should be taken.

Dental caries and pyorrhoea alveolaris is very high. The camp people are subject to constipation, dyspepsia, appendicitis and attacks of diarrhoea during the summer. Asthma occurs in isolated cases, Acute Bronchitis and Coryza are common, but Pneumonic conditions very rare. Many children suffer from Thread worms.

A P P E N D I X D .

Notes from a report to His Excellency the Governor on the Mineral composition
and nutritive value of Falkland Islands Pastures.

by

Sir John B. Orr of the Rowett Research Institute.

(1925).

PASTURES.

The most striking feature is a Calcium deficiency, the pastures contain only about 22½% of the average amount found in cultivated pastures in Britain.

Calorific value, however, is very little less than in cultivated pastures in Britain.

The herbage is rather low in nitrogen and higher in fibre than the grasses of Great Britain.

The silica-free ash constituents, a measure of the essential ash constituents of food-stuffs, is only a little over 50% of that of cultivated grasses, a deficiency shared by all constituents but most markedly by Calcium as mentioned above. This herbage calcium deficiency is probably correlated with a deficiency of calcium in the soil, for the soils are not deficient in available phosphorous or potash. The lack of soil calcium would appear to control the assimilation of all mineral salts by the plant.

SOILS.

The soil analysis showed extreme poverty in Calcium and a very high content of organic matter, reaching to 80% of the dry soil.

The soils gave a marked acid reaction. Phosphorus and total potash are moderate in amount, a reasonable proportion being available. The nitrogen content is high owing to the organic matter but does not appear to be in a state for utilization of crops.

BONES.

A series of bones were analysed, the marrow and fat in the bones of unhealthy lambs being much poorer than those of healthy lambs.

The bones of ewes living on a healthy pasture were heavier than those living a poor pasture, otherwise there was no significant difference.

Arising out of these notes on pastures and soil analysis it should be borne in mind that a Calcium deficiency in the soil might have some bearing on dental caries; as mentioned in the earlier part of the report it is surprising to find Rickets and allied bone conditions to be almost lacking amongst the Falkland Islanders. Amongst the stock, the habit of sheep and cattle eating dried bones is often observed.

During the year an interesting case of Osteomalacia was found in a sow which subsequently died, the piglets showed a form of rachitis, having an apparent partial paralysis and scissor gait. Unfortunately no post mortem examinations were available. The litter in question improved with whole milk and green vegetables.

A P P E N D I X E .

ANALYSIS OF THE ROBERT'S SPRING.

Copy of Letter from Riley, Harbord and Law to Crown Agents.

Parliament Mansions,
Orchard Street,
Victoria Street, S.W. 1.
5th January, 1935.

Gentlemen,

The following are the results of our analysis of the three samples of Water received here on the 14th December :-

Marks.	"A"	"B"	"C"
Appearance.	Clear Colourless	Slightly turbid pale yellow.	Slightly turbid pale yellow.
Reaction pH	5.3	5.6	5.4
<i>On filtered samples:</i>		<i>Parts per 100,000.</i>	
Total solids dried @ 130°C.	13.9	14.6	14.4
" " ignited	11.5	11.2	10.8
including :			
Silica - - - - -	1.46	1.04	0.92
Lime - - - - -	0.48	0.32	0.46
Magnesia - - - - -	Trace	Trace	Trace
Soda - - - - -	4.50	4.88	4.18
Chlorine - - - - -	5.30	5.60	5.40
Sulphuric Anhydride - - -	0.64	0.34	0.60
approximately equivalent to :			
Sodium Chloride - - - - -	8.6	9.2	8.5
Calcium Sulphate - - - - -	1.1	0.7	1.1
Nitrites - - - - -	Nil	Nil	Nil
Nitrates - - - - -	Less than 0.1	Trace	Trace
Free Ammonia - - - - -	0.013	0.008	0.013
Albuminoid ammonia - - -	0.002	0.005	0.005

These samples are all soft waters containing a small amount of sodium chloride as the the main mineral constituent.

They are acid in reaction mainly on account of the presence of free carbon dioxide, and become nearly neutral after boiling.

Owing to the lapse of time in transit from the Falkland Islands a bacteriological examination was useless, but the nitrogen condition of these waters is quite normal and there is nothing in the chemical analysis to indicate that they are not potable.

Yours faithfully,
p.p. Riley, Harbord and Law.
(sgd.) E. F. Law.



FALKLAND ISLANDS.

—:O:—

ANNUAL

MEDICAL AND SANITARY REPORT.

FOR THE

YEAR ENDED 31ST DECEMBER, 1936.

Published by Command of His Excellency the Governor.

PORT STANLEY.

PRINTED BY THE GOVERNMENT PRINTER, FALKLAND ISLANDS.

1937.

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Senior Medical Officer's Office,
King Edward VII Memorial Hospital,
Stanley, Falkland Islands.
4th January, 1937.

Sir,

I have the honour to submit for the information of His Excellency the Governor and for transmission to the Right Honourable the Secretary of State for the Colonies, the Medical Report on the Health and Sanitary conditions of the Colony of the Falkland Islands for the year 1936, together with returns, etc., appended thereto.

I am,

Sir,

Your obedient servant,

R. L. CHEVERTON,

Senior Medical Officer.

The Honourable,
The Colonial Secretary.
Stanley.

ANNUAL MEDICAL AND SANITARY REPORT

FOR THE

YEAR ENDED 31ST DECEMBER, 1936.

I. ADMINISTRATION.

(A) Establishment, vacancies and acting appointments.

MEDICAL STAFF.

- 1 Senior Medical Officer.
- 2 Medical Officers.
- 1 Dental Surgeon.

NURSING STAFF.

- 1 Matron.
- 1 Nursing Sister.
- 2 Junior Nurses.
- 1 Nurse Probationer.

SUBORDINATE MEDICAL AND SANITARY STAFF.

- 1 Sanitary Inspector.
- 1 Clerk.
- 1 Dental Mechanic.
- 1 Dental Mechanic's Assistant.
- Attendant Gardener and Domestic Staff.

APPOINTMENTS, PROMOTIONS, ETC.

Dr. H. Glyn Edmunds, Medical Officer, transferred to the West African Medical Service, left the Colony on the 29th August, 1936.

Mr. S. W. Harding, Colonial Dentist, transferred to Malayan Medical Service, left the Colony on the 22nd May, 1936.

Dr. D. K. Cowan appointed Medical Officer, West Falkland, arrived in the Colony on the 5th December, 1936.

Miss R. Harvey, Junior Nurse resigned on 20th June, 1936.

Miss H. Fuhlendorff, appointed Junior Nurse on 10th October, 1936.

Miss N. Steen appointed Probationer Nurse on 9th July, 1936.

(B) Legislation.

No legislation affecting the Medical Department was enacted during the year under review.

(C) Financial.

The following table shows the Revenue during the year 1936, in respect of the Medical Services of the Colony :-

	£	s.	d.
Hospital fees, sale of medicines, Medical Staff fees ...	517	7	3.
West Falkland Farmers' contribution ...	200	0	0.
East Falkland Farmers' contribution ...	225	10	0.
Dental Surgeon's Fees ...	418	4	4.
Total	£1,361	1	7.

Details of Expenditure for 1936 :

	£	s.	d.
Drugs, Medicines ...	144	0	4.
Hospital Maintenance, Domestic staff salaries, etc., ...	785	0	11.
Laundry ...	5	4	3.
Clothing, Bedding, Bandages ...	120	13	3.
Uniform allowance to nurses ...	48	6	9.
Instruments, Equipment, etc., ...	135	18	11.
Dental Drugs & Equipment ...	88	6	11.
X-ray upkeep, electrical etc. ...	86	14	0.
Incidental Expenses ...	31	5	1.
Total	£1,445	10	5.

II. PUBLIC HEALTH.

(A) General Remarks.

(1) GENERAL DISEASES.

ALIMENTARY SYSTEM.

(a) *Gastritis*. During the year 68 cases reported sick suffering from Gastritis and vague dyspepsias, 3 cases of Gastric Ulcer received treatment.

(b) *Constipation* is very common, most people use some form of purgative drug.

(c) *Appendicitis* is still very common, 54 cases were reported and 40 appendicectomies were performed as against 28 in the previous year. It is interesting to note that several very acute cases were operated upon, other cases had to be treated with the Oschner Sherren method with subsequent operation. One case of acute appendicitis died before medical assistance was procurable owing to the house being situated in an isolated area. Several cases of vague appendical pain radiating from the right lumbar to the right iliac fossa with *Oxyuris Vermicularis* in the lumen of the appendix were found. It is reported that this disease is very common in Patagonia, the neighbouring part of South America.

(d) *Haemorrhoids* - a common complaint, especially amongst the shepherds.

(e) *Enteritis* - several minor outbreaks occurred in the Town of Stanley, unfortunately stools were difficult to obtain in any number for investigations.

Tonsillitis - 72 cases were treated and 22 enucleations were performed. During the year there were several outbreaks of Tonsillitis.

Diabetes Mellitus. - 6 cases have been under treatment during the year. Previously sporadic cases only of this disease have been reported.

Dental Conditions. A considerable amount of work remains to be done in order to improve the very bad state of the teeth, this chiefly lies in the Infant Welfare Clinic, improved diet and intensive propaganda. The adult population are not interested in having dental caries treated except by complete edenturation. Dental defects are often shewn soon after eruption by a flaking off of the enamel, a deep yellow discolouration and later a levelling off of the denture down to the alveolar margin.

The tooth brush is not used as a general rule, in a place where fruit is not part of the staple diet and the habit of making the food pappy by drinking at the same time as mastication thus destroying the natural method of cleansing the teeth, the tooth brush has a real value. When the necessary funds are available it is hoped that a Kroyamer lamp for local ultra violet irradiation of the mouth will be purchased.

Patients.	No.	Fillings.	Dentures.	Extractions Local.	Extractions General.	Repairs.	Scalings.	Operations.
Adults	274	58	78	242	242	52	8	—
Children	82	39	—	68	26	—	2	—
Totals	356	97	78	310	268	52	10	—

RESPIRATORY SYSTEM.

Nasal catarrh and bronchitis are common complaints with Falkland Islanders, acute attacks of Coryza were frequent during the year, in the town of Stanley.

Asthma - 4 cases were under treatment.

Venereal Disease. 4 cases of Syphilis were treated, these included a case of Specific Keratitis, another of Iritis with gumma of the face and another of extensive anal condylomata; the fourth case was old standing and shewed no definite lesions. All responded to treatment.

Haemorrhagic Diathesis. A preliminary investigation has been started, details of which will appear on pages 11 and 12.

Epilepsy. 1 case, was being treated with success by luminal.

Neuralgia. Neuralgia, neuritis and such allied conditions were noticed frequently in the outpatients. It would be interesting to try the effect of one of the Vitamin B (Complex) compounds on this type of case.

Rheumatism. One case of acute rheumatic myocarditis with fatal termination was under treatment. Several cases of rheumatic myalgias, lumbago and fibrositis were seen including two marked cases of rheumatoid arthritis. Radiant heat and Kelp baths were tried with varying success in these cases. Bemax was also prescribed but no definite conclusions were arrived at in relation to this complaint.

Eye Diseases. Follicular Conjunctivitis was noticed amongst the children. 36 refractions were made during the year.

Recently a large stock of lenses was bought and in future the hospital will supply the glasses prescribed.

MEDICAL OFFICERS' TOURS.

The Senior Medical Officer made an extensive tour of the West Falkland, several outlying islands and parts of the East Falkland; the tour lasted two months.

While on tour patients were seen and treated, houses inspected and the double intradermal test for Tuberculosis was made on 230 head of cattle, one positive reactor was found. A preliminary investigation into the incidence of helminthic diseases amongst sheep was made.

The Medical Officer made several visits to the North East Camp section of the East Falkland during the year in order to see and treat patients. There were several urgent calls to this area.

A separate report from the Medical Officer at Fox Bay, West Falkland, for the West Falkland, is shewn below; a return of diseases for this section will be found on page 4 and 5.

The Falkland Islands Company's Medical Officer's report on diseases for the South of the East Falkland, namely, Lafonia, San Carlos and Port San Carlos will be found on pages 27 and 28.

Report of the Medical Officer, West Falkland.

During the year the total number of patients seen was 252; of these, 132 were seen at headquarters, the remainder being seen at their respective stations entailing an absence of 34 nights from headquarters. The following gives a list of the stations visited for the purpose of attending patients together with the number of times each station was so visited.

<u>NAME OF STATION.</u>	<u>NUMBER OF VISITS MADE.</u>
Port Stephens.	2
Spring Point.	3
Chartres	5
Roy Cove	2
(Hill Cove	5)
{Shallow Bay	1}
{Teal River	1}
Saunders Island	2
Pebble	1
Port Howard	1
{Fox Bay, East	2)
{Dunnose Head	2)
{Fox Bay, West	1)
{East Bay	1}

A special vaccination tour was made, all stations on the West being visited and 62 vaccinations performed. This shows that vaccination so far as the West is concerned has been more honoured in the breach than the observance. I am of the opinion that the method of enforcing the vaccination regulations requires tightening up.

Two inquests were held during the year, the Coroner's finding as to the cause of death being in the first case - Accidental Drowning - and in the second - Pneumonia.

It was found necessary to send 13 patients to Stanley for hospital treatment. Fortunately, only twice had a boat to be specially chartered from Stanley as the cost of such chartering is prohibitive. The conditions from which the above 13 patients were suffering are as follows :

Enlarged Prostate	1.
Appendicitis	4.
Diabetes	2.
Pregnancy	3.
Varicose Veins	1.
Tonsils & Adenoids	1.
Neurasthenia.	1.

Four operations were performed at Fox Bay : these were of a minor character.

Only one case of Tuberculosis came under my notice on the West and fortunately this man is making a splendid recovery. The common causes of complaint are - Dental Caries, Dyspepsia, Gastro-enteritis, Worms, Injuries and Tonsillitis.

The Dental Caries, is mainly due to neglect plus unbalanced diet as I can find no sign of any clinical calcium deficiency. Instruction in the proper care of teeth and more efficient dental attention would, I am sure, result in a decided diminution of teeth defects. One large station on the West has not received a visit from the Dental Surgeon for more than 3 years.

Small localised outbreaks of Tonsillitis are common and may derive their origin from unclean teeth and subsequently spread in the cook-houses.

The Dyspepsia is due to the predominance of meat and strong tea in the diet.

The Gastro-enteritis is seasonal, occurring mainly in the summer months and is

probably due to the drinking of water contaminated by subsoil water.

Worms are very common mainly among children. This is not surprising in view of the prevalence of worm infection in sheep and dogs.

Injuries arise from the nature of the mens' work: a fall from a horse or a cut from the shears being common.

Finally I should like to add a note about nursing facilities. In the past, the camp women were able to help each other in sickness. Today, these women have either died out or for other, mainly health, reasons are unable to carry on and the younger are either unable or unwilling to fill the gap. I feel this matter will become more pressing as time goes on.

J. B. HENDERSON,
Medical Officer.

(2) Communicable Diseases.

Tuberculosis. 12 cases under treatment, these included 4 Respiratory; 2 Intestinal; and 6 cases of Bone Tuberculosis; one case of Pulmonary Tuberculosis died.

Coryza. The usual epidemics of sudden coryza made their appearance; one outbreak was associated with bronchitis and lasted ten days.

Infectious adenitis. Twice during the year several children succumbed to a form of adenitis similiar to Glandular Fever. The children in the schools were examined on these two occasions for the purpose of isolating any early cases.

The infected cases seemed to suffer from painful cervical adenitis first on one side and then on the other side of the neck. The illness was usually introduced by a high fever lasting for 2-7 days, then subsiding, leaving a marked adenitis. The condition of the fauces in no way corresponded with that of the neck, the axillary and inguinal glands did not appear to share in the same inflammation and there was no splenomegaly. Blood counts were performed in two cases of two children aged 5 and 7.

Both cases showed a very slight leucocytosis, lymphocytosis was not marked, in one case a preponderance of monocytes appeared on the film, there was no eosinophilia in either cases.

Ringworm. 4 cases were under treatment, two cases were contracted from the cattle, which show sporadic outbreaks amongst the calves, one case infected two other people living in the same house. The common type would appear to be an ectothric trichophytin of the glabrous skin.

Varicella. 2 cases.

Impetigo Contagiosa. 11 cases were found amongst the school children in the early part of the year.

HELMENTHIC DISEASES.

Oxyuris Vermicularis is very common, often found in the lumen of the appendix and is one of the causes of the intermittent attacks of appendicitis cases in the Falkland Islands.

(B) Vital Statistics.

There are 79 permanent officials, out of which 25 are recruited from the United Kingdom and the Dominions. During the year under review, 12 officials reported sick, of these 2 were recruited from the United Kingdom.

The Islanders are of European descent, representing English, Scotch, Irish, Welsh, Norwegians, Swedes, Danes, Germans, French, Spanish, from the Dominions, Chile, Argentine territories, also from St. Helena.

There has been an unemployment problem during the year under review, but successful measures have been adopted to solve this difficulty.

The country is essentially a sheep farming country; a limited number of men are employed on sealing during the winter months and whaling at South Georgia during the summer season.

	<u>BIRTHS.</u>		
	Males.	Females.	Total.
Stanley	21	15	36.
Darwin & East Falkland	4	3	7.
West Falkland ...	1	1	2.
	<hr/> 26	<hr/> 19	<hr/> 45.

	<u>DEATHS.</u>		
	Males.	Females.	Total.
Stanley	8	7	15.
Darwin & East Falkland	2	—	2.
West Falkland ...	2	2	4.
	<hr/> 12	<hr/> 9	<hr/> 21.

There has been a steady influx of people into the Town of Stanley, the seat of Government. Beyond the necessary trades of supply to this community in the town, there are no other trades; therefore any excess population must automatically find occupation in the Camps.

In Appendix A will be found a history of the causes of death in the Falkland Islands taken from the Registrar of Deaths starting from 1844.

III. SANITATION.

(1) Preventive Measures.

Mosquito and insect borne diseases. Although mosquitos are found in the gardens, they are not associated with any disease. The Common Fly (*Musca domestica*) and the Blue Bottle (*Calliphora Vomitoria*), are common. Body parasites are almost unknown, one case of lice infestation (*Pediculis vestimentorum*) was seen during the year.

Epidemic diseases. Arrangements have been made with His Majesty's British Consul at Rio de Janerio, Montevideo, Bahia Blanco, Magallanes and Valparaiso to send wireless messages in the event of any scheduled infectious disease breaking out in these areas of South America. One case of Small Pox was reported from Rio de Janeiro.

Vaccinations. 201 persons were vaccinated during the year.

Epidemic Diarrhoea. No steps have been taken to combat the sporadic and small epidemics which break out from time to time as it has been impossible to incriminate any one factor as being responsible for the attacks.

(2) General Measures.

TOWN SANITATION.

Sewage. Sewage is disposed of by water carriage, the water-closet system is gradually gaining ground and with the extra supply of water provided under the new scheme there is a great possibility that more houses will change the bucket to the water closet system.

Latrines. Fortunately, the climate being cold the bucket system is fairly satisfactory, but might be improved if the buckets were emptied more frequently.

In the Camp several systems are in use, the majority using the bucket method with peat loam; sheep dip containing carbolic is used frequently as a disinfectant. Some of the larger houses have a form of pit latrine, but it is not altogether satisfactory as the sites chosen for the pits are usually devoid of underground drainage, horse manure might be used more often to increase the fermentation process.

Several cookhouses have latrines built on piles over the foreshore, the rise and fall of the tides making a natural water carriage system.

The Public Works Department are responsible for collecting the night soil which is dumped into the sea at the sanitary jetty; the system is satisfactory.

Disposal of Refuse. It is very difficult to impress on the inhabitants of Stanley the importance of keeping the lids of their ashpits closed. The town rubbish is dumped on the

foreshore to the East of the Town, the method seems to be quite satisfactory except that it is an excellent area for breeding rats.

Water Supply. The Roberts Spring with its system of aero motor pumps now supplies the Town with a very fine supply of clear water. Prior to the water being received into the reservoirs it passes through beds of rubble, limestone and sand, fresh lime being added to the bed each month.

This supply is more than adequate for the present needs of the Town and the old supply is still in reserve. It is hoped that more houses will have this water laid on and that water closets will be installed in greater numbers.

In the Camps, surface wells are in use, many are open to contamination by grazing animals and also by dogs. The supplies could be improved with more adequate protection. Unfortunately no apparatus exists in the Colony for the drilling for artesian wells.

Drainage. The Town is very efficiently drained except where an outcrop of rocks has made an unsurmountable barrier. At one time, flood water used to pour into the town from the Southern slopes but a series of parallel drains has greatly helped to intercept this nuisance. These drains open into the main sewers and the whole is carried out into the harbour. Each house is responsible for draining its own premises and conducting all waste waters into the town drains.

Scavenging Service. The streets are kept very clean, all the drains being cleared to carry away the surface water to all the sewers. The work is under the control of the Public Works Department.

Roads. Most roads in Stanley have a macadamised surface; a great improvement on the conditions that existed some years ago.

Slaughterhouses. There are three privately owned establishments under the supervision of the Medical Department. It is hoped that the Agricultural Department will take over the work of inspection of slaughterhouses and meat in as much as this is such a specialized work requiring expert advice.

Dairies. There are supposed to be about 200 head of cattle on the Stanley Common owned by various persons in the Town. The majority of cattle come in once a day for milking, the system of late weaning of calves is uneconomical and wasteful in cattle already poor in quality, through poor feeding and in-breeding. All these factors tend to impoverish the supply of such an essential food as milk.

Bovine Tuberculosis. During the year under review 100 cattle in Stanley have been subjected to the Double Intradermal Tuberculin Test; ten per centum shewed a positive reaction. All reactors were killed, the owners being compensated. Post Mortem examinations were made on all carcasses and the greater part shewed evidence of mesenteric tuberculosis, one case showing caseous patches in the lungs. Apparently a certain bull and cows supposed to have come from attested herds were imported by the Government in 1926, tuberculosis broke out amongst them and it would appear that this was the source of infection. A further 230 tests were carried out by the Senior Medical Officer on his tour of the West Falkland (Port Howard, Fox Bay, East & West, Chartres and Roy Cove), Speedwell Islands and the Darwin sector of the Falkland Islands Company's Camp. One reactor only out of 230 head of cattle was found, no post mortem examination was available.

Control tests by the Ophthalmic method were adopted in doubtful cases. Latterly it was found quicker to use the single caudal fold injection.

Several samples of milk have been tested in the Laboratory details of which examination will be found under a separate heading.

The Government were not in a position to purchase a stud flock of goats from South America but it is hoped that the number of goats recently introduced into Stanley will encourage goat keeping.

A scheme for starting a Government dairy for supplying every school child with a pint of milk per diem has been worked out and is receiving the attention of the Government.

In the Falkland Islands where the essential elements in food are on the minus side it would be of great benefit to the health of the community if every encouragement was given to the production of clean milk and its more general use in the diets of the people of the Falkland Islands. Under the able advice of Mr. D. S. A. Weir, Stock Adviser, it is hoped that this object will be achieved in the near future but naturally such changes can be made

only very gradually; the education is the value of milk going hand in hand with a clean production.

(3) School Hygiene.

The Government and Convent Schools were examined once during the year in question. It was decided to improve the heating and sanitary systems.

During the inspection 242 children were seen, the results of the examination were entered on forms drawn up along the lines of the Board of Education Circular 582.

1. *Vaccination.* 13.22% found to be unvaccinated. This figure will be gradually reduced on stricter application of the Ordinance.

2. *Height and Weight.* There are definite signs of malnutrition. This assessment was made both by clinical observations supported by statistical methods.

Von Pirquet's Pelidisi formula, that is to say the cube root of ten times the weight over the sitting height measured in grammes and centimetres equals one or a hundred; the number so attained is known as the nutrition index of the child, the basic unit by 100. If the index is over 100 the person is overnourished, normal index ranges between 95 - 100.

The examination revealed such a large number of children under-nourished it was thought advisable to have border line cases around 94.

In the table given below there are age groups of 4 - 6; 7 - 9; and 13 - 16 respectively, under separate sexes.

Age Group.	Overweight		Normal.		Border line.		Below normal.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
4 - 6	9.5	18.2	50.	63.6	9.5	—	31.	18.2
7 - 9	20.6	2.7	29.4	27.1	5.9	13.5	44.	56.8
10 - 12	23.1	3.8	38.5	34.6	7.7	19.2	30.8	42.3
13 - 16	15.4	3.8	38.5	23.1	11.5	7.7	34.6	65.4
Total %	12		36.5		8.7		42.7	

From this table it will be observed that the girls between the ages of 13 and 19 show a high percentage of undernourishment, no doubt, the years of adolescence impose a heavy drain on the constitution; however, it is surprising to find such a high percentage of under normal children both boys and girls, in the 7 - 9 group. Obviously these two groups require most attention in future; both as to the food received and the work given.

3. *Cleanliness and Clothing.* Children are inclined to be burdened with too many clothes; for the most part the clothing was clean. No sign of *Pediculis Capitis* or *Impetigo Contagiosa*.

4. *Dental Caries.* 35.041% children shewed defective teeth. The state of the mouths is very bad, a flaking off of the enamel, bad alignment and frank caries often associated with *pyorrhoea alveolaris* is common. The teeth in some cases seem to rot soon after eruption.

Apart from those with actually diseased teeth 8.6% showed dirty teeth; the practice of using the tooth brush is almost unknown.

5. *Naso-Pharyngeal Examination.* 22.7% of the children shewed an enlargement of Tonsils, this condition is very closely connected with the dental caries and colds so prevalent in Stanley.

6. *External Eye Diseases.* 6.19% of the children were found to be suffering from external eye diseases, these included follicular conjunctivitis and blepharitis (scaly eyes).

7. *Vision.* 9.91% of the children proved by Snellen's Test to be suffering from defective eyesight.

Diseases of the Ear, of Hearing and defects of speech were not observed.

8. *Mental condition.* A definite actual assessment is impossible without the application of proper tests; but generally the girls were found to be more alert than the boys.

9. *Heart Disease.* 2.48% of the children shewed defective hearts, since my last

examination I have met with definite evidence of Rheumatic infections including a case of Acute Rheumatic Endocarditis.

10. *Lungs.* Apart from one or two asthmatic children, who appear to have been peculiarly free from attacks lately, nothing abnormal was found. No signs of new cases of Tuberculosis or rickets were found.

11. *Infectious Diseases.* Several cases of Infective Adenitis were seen during the year, the school children were examined on two different occasions in order to identify and isolate any obvious clinical cases.

12. *General Remarks.*

- i. Number of unvaccinated children is less.
- ii. There is Statistical and Clinical evidence of Malnutrition.
- iii. Dental caries is very rife.
- iv. Naso-pharyngeal infections should be watched.
- v. 24.8% of the children show a clean bill of health from a clinical point of view.
- vi. Every parent has been informed in writing of the divers ailments of their children.

Suggestions for the future.

- i. Daily administration of Cod Liver Oil.
- ii. Daily administration of one pint of milk to each child.
- iii. A Sunlight Clinic for giving irradiation to certain children.
- iv. Further development of the School of Cookery in order to teach a larger number of children.
- v. Terminal examination of every mouth in order to check dental diseases.

(4) Housing.

Six new houses have been built in Stanley during the year and all have complied with the existing bye-laws.

(5) Diet.

There is nothing further to add to the remarks made in last year's report on diet except that malnutrition does exist and vague deficiency diseases do occur. Before any more categorical statements can be made it will be necessary to do a considerable amount of laboratory research work together with fieldwork in the form of a house to house survey in Stanley and the Camp.

The whole question of Nutrition is receiving the close attention of the Government and it is hoped that the Nutrition Committee will be able to produce some concrete results during the year 1937.

For a period of six months, articles were written each week in the local press on Diet and dietetic values.

Practical application of the value of fruit is being shewn by the daily ration of an orange or an apple to every in-patient in the hospital.

Cod Liver Oil is being emphasized at the Infant Welfare Clinic for children of two months and upwards.

The taking of orange juice, or swede juice, also vegetables, including potatoes at six months is being urged at this clinic.

(6) Anti-Rat Campaign.

Ratox has been used to poison the rats on the rubbish dumps many times during the year, at one period the rats began to attack the potato crops in the gardens.

(7) Veterinary Work.

In the absence of any Veterinary Surgeon or Agricultural Department a considerable number of sick animals were seen and treated by the Medical Department.

The work of Tuberculin Testing of cattle has been mentioned under the section relating to Dairies. A preliminary survey of the worm infestation of sheep was made and the following species of worms were isolated: Dictyocaulus filaria, Chabertia Ovina, Oesophagostomon venulosum, Nematodirus sp. Trichuris ovis, Ostertagia circumcincta. Dr. Baylis of the British Museum very kindly confirmed the species which were presented to the Museum. Following the instructions of His Excellency the Governor, articles of veterinary and agricultural interest were culled from current literature and reported each week in the local press.

Mr. D. S. A. Weir, Stock Adviser, loaned from the New Zealand Government, arrived towards the end of the year and is organizing an Agricultural Department which has taken over all this extraneous work of the department including the supervision of dairies and slaughterhouses.

(8) First Aid Lectures.

Lectures in first aid were given by the Medical Officers to the Ambulance Section of the Falkland Islands Defence Force, the Rover Scouts and the Sea Scouts. An attempt was made to run a series of lectures on this subject to one man from every settlement, but the matter fell through for various reasons.

(9) Recommendations for future work.

- i. Carrying into effect the various recommendations of the Nutrition Committee.
- ii. Health propaganda by press articles, pamphlets, films, lectures and wireless talks.
- iii. The establishment of a small Electro Therapy Department.
- iv. Further blood investigations.

IV. PORT AND HEALTH ADMINISTRATION.

In accordance with the usual practice vessels calling at the port were given pratique by the Medical Officers. Also all passengers for the port were seen by the Medical Officers before landing. The great necessity for preventing, if possible, the incursion of infectious disease is fully realized; nevertheless it must be stated that it is possible for persons incubating disease, and showing no signs thereof to land and cause a serious epidemic.

Vessels entered during 1936 :-

	Nos.	Tons net.	Crews.
Number of ships entering ports of the Falkland Islands	24	47328	1039.
Number of ships cleared	22	45993	992.

Note: Ships of War not included.

V. HOSPITAL.

The King Edward VII Memorial Hospital comprises 17 beds and one cot, there is a reserve ward accommodation of 3 beds, making a full complement of 20 beds. During the year under review the total reconstruction of the hospital was carried out. The nursing staff, with the exception of the Matron, have had quarters made in the adjoining Rock Cottage. A new kitchen and dining room was built, being connected to the main building by a covered in corridor. A separate Labour Ward connected to the Maternity Ward was made. Two new 2 bedded wards were made out of the existing rooms. An anaesthetic room was constructed opposite the operating theatre.

A proper X-ray Room with dark room, was altered to house the "Sunic" X-ray apparatus. The old hospital kitchen and scullery was converted into a large out-patient department with proper waiting rooms, clinical rooms and two separate rooms for consultations. The Out-patient Department has been so constructed that minor operations such as Tonsillectomies and Dental Extractions are performed without admitting the patient into the wards. New bathrooms, lavatories and sluice room were constructed. A separate office was constructed for the Senior Medical Officer adjoining the Clerk's Office.

The drug store and laboratory building was moved and reconstructed on the new site.

In commemoration of the King George V Jubilee, a solarium of Vita glass is to be constructed and attached to two wards during the ensuing year.

During the year under review 151 patients were admitted to hospital and 241 operations were performed. With the Xray apparatus 58 patients were photographed and 109 films taken, 11 patients were screened.

With carbon sunlight lamp 380 irradiations were given to 17 patients, 25 treatments with the Turkish bath to 5 patients; the radiant heat apparatus was used 19 times for 4 patients.

Lectures were given to the Nursing Staff by the Medical Officer.

VI. MATERNITY AND CHILD WELFARE.

The Hospital provides ante-natal and maternity services. Every effort is being made to encourage all maternity cases to be admitted to hospital for their confinements.

	Hospital.	Town.	Total.
Confinements in :	26	3	29.

There were 48 confinements during 1935.

An Infant Welfare Clinic was started on 1st November, 1935, and has been working very well during the fourteen months under review. Every Friday afternoon it holds its meetings quite regardless of the inclemency of the weather. During the period in question the clinic was run by the Senior Medical Officer with the assistance of the Matron and the Nursing Sister. The mothers are advised as to feeding of their children, special attention being given to the value of breast feeding, fruit and swede juices, cod liver oil, eggs, potatoes and green vegetables and the general health of the children watched is advocated.

During the year from the 1st of November, 1935 to 1st of November, 1936, 108 infants were entered on the books, there have been 544 repeat visits, making a total of 652 visits to the clinic. In addition, the nursing staff have made 126 visits to the children in their homes, and the total number of visits in connection with the Infant Welfare Clinic amounted to 778.

In order to further the interest in this work a very successful Baby Show was held in the Town Hall on December the 19th, there were 67 entries divided into six classes arranged into ages up to five years old. Several ladies in the Town assisted the medical staff in the judging.

VII. METEOROLOGICAL.

The Falkland Islands are situated about 300 miles East of South America in latitude 51 degrees 41 minutes South and longitude 57 degrees 41 minutes West (Stanley).

Meteorological Returns for Stanley for the year 1936 are given in Table IX.

VIII. PRISONS AND ASYLUMS.

No persons were detained during the year. The Medical Officers were called in on 4 occasions on the request of the Chief Constable to see police cases.

IX. SCIENTIFIC.

A laboratory has been started in a small way by Mr. T. K. Miller, B.Sc., Assistant Schoolmaster in order to assist the Medical and Agricultural Departments in carrying out a few routine investigations.

(i) *Examination of Faeces* - two cases of Dysentery were investigated; a typical, small, circular and pale but not grey colony was grown on MacConkey's media, no liquefaction of gelatin resulted, a non-sporing, Gram negative, non motile, large cocci was identified - a short bacilli organism producing acid but no gas in Glucose, Maltose and Mannose. Suggestive of the Flexner type of Dysenteric Bacillus but not confirmed as agglutinating media for serological tests was not available.

(ii) *Examination of Contaminated Flour.* While at sea several of the crew of the Research Yacht "Penola" suffered from gastro intestinal disturbances. The blame was laid down to a certain barrel of flour; several kegs appeared mouldy around the lids and portions of this were subjected to examination. Two types of Colonies were observed and cultured in Agar, one of these appeared to be a saprophytic organism of the Bacillus Subtilis type, the other colony appeared to be non-hathogenic bacillus resembling the Dysenteric group. Solutions were made from each culture and injected into the peritoneum cavity of guinea pigs without any result.

(iii) *Analysis of Milk.* Seven samples of milk were taken from five licensed dairies.

(a) The Fat Content, was taken and the highest shewn being 2.2% and the lowest

0.8% the average figure being 1.047%, an excessively low figure even considering that the pasture was poor at the time of testing.

- (b) Lactometer readings kept a good average of 1.032, corrected to 60°F.
- (c) 'Minet' test for deposits; 2 were quite clean, three with slight deposit and two with visible faecal contamination.
- (d) Reductase test – all except one sample not discoloured in 5 hours.
- (e) Fermentation test – three samples only showed good results, the remainder appeared 'stormy' or did not clot in 48 hours.
- (f) Plate Count – one sample gave no result (boiled), the remainder shewed well over 30,000 organisms per c.c.

On the whole the first survey of the milk has yielded very poor results and both field and laboratory indicate that a lot of cleaning up is required. This work will be done by the Agricultural Department during the current year.

Apart from the above mentioned work, cultures were made for diagnosis, sputums examined and blood urea tests performed.

(iv) *Blood Investigations.* Every patient on being admitted to Hospital is subjected to certain tests; (i) the Coaguability time, (ii) the Bleeding time, (iii) the percentage of Haemoglobin in the blood, and (iv) the Sedimentation rate, are worked out. So far twenty one cases have been subjected to the tests.

- (i) Lee & White's method was used for the Coaguability, with this method an average reading lies between 6 and 7 minutes. Of the twenty one cases, 14 shewed a general average coagulation time of 4–6 minutes, the actual shortest time being 2.0'; of the remaining seven cases the average coagulation time was 11.3 minutes, minimum being 8.5 minutes and maximum being 15 minutes. Of the cases shewing a long period prior to coagulation, two of them were women, two other cases gave a history of easy bruising, nose bleeding and bleeding following dental extractions.

Another case of a woman, the mother of one of the patients subject to epistaxis, did not shew any signs of delayed coagulation although subject to bruising according to her own history, a familial complaint.

- (ii) Duke's method was used for assessing the bleeding time and an average of 2.3 seconds was found in the 21 cases examined.
- (iii) The Haemoglobin percentage of blood (Tallquist's method), only two readings were found to be as low as 70%.
- (iv) Sedimentation Rate of the Blood was worked out in 23 cases by Cutler's method using the special graph forms. Excluding five marked cases, the average rate for men and women was shewn as 4.2 mm in the sedimentation rate of 60 minutes, readings being taken every five minutes.

The five outstanding cases, four of them had tubercular lesions and the fifth had a suggestive history of a similar infection, the readings on the Cutler chart were respectively 9 mm in a man; 11 mm in a woman, 13 mm; 21 mm; and 28 mm.

From this preliminary investigation into the question of an Haemorrhagic diathesis amongst the Falkland Islanders quite a high percentage (33½%) show increased coagulation time, *i.e.* slowness in the clotting of blood.

Several of the Patients exhibited a familial tendency to such a diathesis, in other cases where this diathesis was expected it was not shewn by the test. It is impossible to come to any definite conclusion without carrying out many more examinations. The investigations should be carried out amongst certain families with this known diathesis using other families as controls. In an isolated community intermarriage is universal therefore this factor has to be borne in mind and makes it difficult in working out familial groups. At the same time as coagulation time is being worked out, Göthlein test for the permeability of the vascular endothelium should be made in order to ascertain if Vitamin C deficiency is a factor.

Publications.

"Handbook of Health Suggestions for use of Camp Settlements and Houses"
by the Senior Medical Officer, Stanley, published by the Government
Printing Office, Stanley.

“Irritation caused by contact with the Processionery Caterpillar (Larva of *Thaumetopoea Wilkinsinii* Tanus”
 Transaction of Royal Society of Tropical Medicine & Hygiene, London. 29/2/36.

DEPENDENCIES.

(a) *Medical Personnel.*

Grytviken Harbour – Dr. Thorsen, Medical Officer.
 Leith Harbour – Dr. P. Will, “ ”
 Dr. Haug, “ ”

The following medical officers are practising on the whaling factories.

Dr. H. V. Sverdrup.	Dr. B. P. B. Longva.	Dr. E. Refsum.
Dr. K. Auginsen.	Dr. P. K. Shand.	Dr. F. Harne.
Dr. R. Balzersen.	Dr. H. I. Vold.	

One medical officer remains on the Island the whole year either at Grytviken Harbour or Leith.

(b) *Hospitals.* Grytviken Harbour – seven beds, operating theatre and consulting room. Has dental chair and instruments but no dentist; has male orderly and dispenser combined.

Leith Harbour – six beds, operating theatre, Xray plant and consulting room.

(c) *Water supply.* Water is collected into dams direct from the snow and ice off the hills and conveyed to the houses, no system of filtration, liable to be contaminated by bird droppings, but no clinical evidence of such contamination.

(d) *Sewage.* Water borne direct into the harbours, latrines for workmen placed on the pier.

(e) *Refuse.* All refuse digested on the factories.

(f) *Rats.* Numerous at Grytviken Harbour but no longer a pest at Leith Harbour.

(g) *Milk.* The Factory at Grytviken Harbour owns two cows and several goats. Tinned milk is chiefly used by the workmen.

(h) *Diseases.* No returns are available for 1936 but it is hoped that something will be produced for the 1936-1937 whaling season.

(i) *Meteorological Observations* taken at Cumberland Bay Station in 1936 :

Mean Air Pressure	744.24
Mean Temperature	Max. 2.85°c
	Min. -5.57°c

PSYCHROMETER.

Mean Vapor tension	4.01
Mean Relation Humidity	73.7%
Mean Rainfall	68.321''

WEATHER.

Days of Rain	88
“ “ Snow	91
“ “ Fog	59
“ “ Sunshine	229

It is hoped that some return of diseases will be available for the 1936-1937 season for subsequent annual reports. Most of the above data was supplied by Surgeon Commander E. C. Davis, R.N. of H.M.S. “Ajax”.

R. L. CHEVERTON,
Senior Medical Officer.

Stanley, Falkland Islands.

TABLE 1.
MEDICAL AND SUBORDINATE STAFF.

OFFICE.	NAME AND QUALIFICATIONS.	REMARKS.
A. MEDICAL STAFF.		
Senior Medical Officer ...	R. L. Cheverton, M.R.C.S., L.R.C.P., M.R. SAN. I.	
Medical Officers ...	H. Glyn Edmunds, M.S.A. J. B. Henderson, M.B., Ch.B., Glasgow. D. K. Cowan, L.R.C.P., S. Ed. L.D.S., R.C.S., Ed.	Transferred 29/8/36. Appointed 14/11/36.
B. NURSING STAFF.		
Matron ...	Miss M. E. Hill, S.R.N.	
Nursing Sister ...	Miss G. E. Reive, S.R.N.	
Junior Nurses ...	Miss R. Harvey Miss M. S. J. Miller Miss E. H. Fuhlendorff	Resigned on 20/6/36. Promoted 10/10/36. to Junior Nurse.
Nurse Probationer ...	Miss N. F. Steen	Appointed 7/9/36.
C. DENTAL STAFF.		
Dental Surgeon ...	S. W. Harding, L.D.S., (R.C.S.I.)	Transferred 22/5/36.
Dental Mechanic ...	J. Turner	
Dental Mechanic's Assistant ...	R. Lellman	
D. SANITARY STAFF.		
Sanitary Inspector ...	S. H. Hooley	Chief Constable.
E. CLERICAL STAFF.		
Clerk ...	B. N. Biggs	

T A B L E I I .

K. E. M. Hospital, Stanley.

L I S T O F O P E R A T I O N S , 1 9 3 6 .

	No. of cases.
Appendicectomies	40
Appendicectomy with Laparotomy	4
Appendix abscess drained	2
Post appendicectomy drainage	1
Post operative adhesions	1
Bilateral Inguinal Hernia	2
Unilateral Inguinal Hernia	2
Ventral hernia with appendicectomy	1
Right femoral omentocoele	1
Laparotomy, Gall Stones	1
Hydronephrosis Radical Cure	1
Septic Umbilical Hernia	1
Excision of septic umbilicus	1
Cervical erosion and cystocoele	
Amputation of cervix and radical cure	1
Tuberculosis (Periostitis) of Clavicle (1 Patient)	3
Epididymitis	1
Placenta manually removed	1
Exploration of chest, Resection 2 ribs.	1
Bladder Sounds passed	1
Supra-pubic cystotomy	1
Cystoscopy	6
Dental Extractions under General anaesthetic	56
Pedunculated tumours of hard palate	1
Nasal polypi	1
Removal of adenoids	1
Tonsillectomy	14
Tonsillectomy and removal of adenoids	8
Circumcision	9
Removal of warts	3
Abscess Incised	9
Carbuncle (1 patient)	2
Whitlow	5
Removal of Toe-nails	4
Wounds sutured	18
Varicose viens injected	20
Lacerated fingers, Surgical Toilet	1
Osteomyelitis of finger, Sequestrotomy	1
Dislocation of elbow (i) Manipulation, (ii) Reduction (1 Patient)	2
Adhesions of Thumb, manipulation	1
Adhesions of Shoulder, manipulation	1
Dermoid Cyst of forehead	1
Degeneration fibroma of leg. Excised	1
Extra dactyl big toe	1
Cysts, Removed	2
Meibomian Cyst Removed	1
Fibroma of finger	1
F. B. in Finger	1
F. B. in Hand	1
Bursitis knee, Aspirated	1
Dropped little Finger of left hand, Sutured	1
Total	241

TABLE III.
RADIOGRAPHICAL EXAMINATIONS.

January to December, 1936.

Subject.	No. of Cases.	No. of Films.
Fractured Ankle	2	4
Fractured Thumb	1	1
Fractured Toe	1	1
Dislocation of Elbow	1	7
Dislocation of Thumb	1	2
Foreign Body in Hand	1	2
Abscess of Elbow	1	1
Whitlow	1	2
Cyst of Femur	1	2
Degenerating fibroma of R. Knee	1	2
Injury of Tibia	1	2
" " Knee	1	2
" " Foot	2	5
" " Ankle	1	2
" " Toe	1	1
" " Shoulder	2	8
" " Elbow	2	4
" " Wrist	4	7
" " Fingers	3	4
" " Hand	3	5
" " Thumb	1	1
X-ray of Skull. Concussion	1	2
" " Sinuses	2	2
" " Pyorrhoea	3	4
" " Teeth	5	8
<i>Diagnostic.</i>		
Barium Meal	2	3
Hip and Pelvis	2	4
Spine and Hip	1	3
Pelvis	1	1
Knee	3	6
Chest	2	4
Throat	1	1
Gall Stones	1	2
Renal Calculi	2	4
Total	58	
Screenings	11	109

T A B L E I V .

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) 1936.

(Excluding West Falkland & Lafonia.)

Disease.	Patients remaining in Hospital at end of 1935.	Yearly Total.		Deaths.	Patients remaining in Hospital at end of 1936.
		Total Admissions.	Total Cases.		
I. INFECTIOUS AND PARASITIC DISEASES.					
23. Tuberculosis of the Respiratory System. ...		3	3	1	
25. Tuberculosis of Intestines and Peritoneum ...		2	2		
27. Tuberculosis of other bones and joints ...	1	3	2		1
34. Syphilis ...		1	1		
44. Glandular fever ...		1	1		
II. CANCER AND OTHER TUMOURS.					
46. Cancer of the digestive organs ...		1	1		
50. Cancer of Breast ...		1	1	1	
54. Non-Malignant Tumours:					
Fibroma of Leg ...		1	1		
Pedunculated tumour of hard palate ...		1	1		
III. RHEUMATISM, DISEASES OF NUTRITION, ENDOCRINE GLANDS, OTHER GENERAL DISEASES.					
56. Rheumatic Fever ...		1	1	1	
57. Rheumatic Arthritis ...		1	1		
59. Diabetes ...		4	4		
Senile Glycosuria ...		1	1		
VI. DISEASES OF NERVOUS SYSTEM.					
85. Epilepsy ...		1	1		
87b. Neurasthenia & melancholia ...		1	1		
VII. DISEASES OF THE CIRCULATORY SYSTEM.					
95. Tachycardia ...		1	1		
102. Hypertension ...	1	1	1		
82c:2 Paralysis, Bell's ...		1	1		
VIII. DISEASES OF RESPIRATORY SYSTEM.					
104. Coryza ...		1	1		
106a. Acute Bronchitis ...		1	1		
b. Chronic Bronchitis ...	1	1	2		
107. Broncho-pneumonia ...		1	1		
112. Asthma ...		1	1		
IX. DISEASES OF THE DIGESTIVE SYSTEM.					
115:3 Disease of Tonsils ...		3	3		
117a. Ulcer of Stomach ...		1	1		
121. Appendicitis ...	1	42	43		1
Appendix abscess ...		2	2		
Perforative appendicitis ...		2	2		
122. Hernia:					
Inguinal ...		4	4		1
Femoral omentocoele ...		1	1		
Ventral Hernia ...		1	1		
Umbilical ...		1	1		
<i>Carried Forward</i>					
	4	88	89	3	3

T A B L E I V . (Continued).

Disease.	Patients remaining in Hospital at end of 1935.	Yearly Total.		Deaths.	Patients remaining in Hospital at end of 1936.
		Total Admissions.	Total Cases.		
<i>Brought Forward</i>	4	88	89	3	3
122b. Post operative adhesions		1	1		
123. Constipation		2	2		
126. Biliary calculi		3	3		
127. Cholecystitis		1	1		
X. NON-VENEREAL DISEASES OF GENITO-URINARY SYSTEM.					
130. Acute nephritis		2	2		
131. Chronic nephritis		1	1		
133b. Hydronephrosis		2	1		
137. Disease of prostate		3	2		1
138. Epididimitis		2	2		
139b. Cervical Erosion		1	1		
139b. Cervical Fibroma		1	1		
139d. Prolapse vagina		1	1		
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND PUERPERAL STATE.					
141. 2. Incomplete Abortion		1	1		
147. Toxaemia of Pregnancy. albuminuria		2	2		
150. Childbirth (normal)		26	26		
Antenatal		1	1		1
XII. DISEASES OF SKIN AND CELLULAR TISSUE.					
151. Carbuncle		1	1		
2 Acute abscess		1	1		
152:2 Infected glands of neck		1	1		
Infected Umbilicus			1		
XIV. CONGENITAL MALFORMATIONS.					
157. Bilateral Talipes Equino Varus		1	1		
XVII. VIOLENCE.					
163. Suicide Drowning				1	
179. Acute accidental poisoning		1	1	1	
181. Burns (one cornea of eye)		2	2		
194. Blows:					
Injured fingers		1	1		
Dislocation of elbow		1	1		
Strain		1	1		
Concussion, post traumatic		1	1		
<i>Total</i>	4	149	149	5	5

The total number of actual admissions is in excess of the previous year, as Dental extractions and minor operations such as Tonsillectomies, are no longer included in the In-Patient Register.

1935. Total admissions 239; actual in-patients 125.

1936. Total number of in-patients admitted - 151.

TABLE V.
**RETURN OF DISEASES AND DEATHS, (OUT-PATIENTS &
DISTRICT), 1936.**
(Excluding West Falkland & Lafonia.)

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
I. INFECTIOUS AND PARASITIC DISEASES.						
6. Vaccinations against Small Pox ...	139	169		13		
23. Tuberculosis of the Respiratory system ...	1	66		61		
25. Tuberculosis of Intestines and Peritoneum		18		2		
27. Tuberculosis of other bones and joints ...		35		64		
34. Syphilis		32				
42. Other diseases due to helminths:						
Oxyuris Vermicularis	6	39				
43:2 Ringworm	4	147				
44:6 Glandular fever	8	8	11	24		
II. CANCER AND OTHER TUMOURS.						
46. Cancer of the digestive organs and peritoneum		3		2	1	
50. Cancer of the Breast		18		9		
53. Cancer of the Liver		4		2		
54. Non-Malignant Tumours:						
Angioma		5		1		
Haemangioma		3				
Pedunculated tumour of hard palate ...	1	1				
Teliangectas	1	2				
Papilloma	1					
Dermoid Cyst	1	1				
Meibomian Cyst	1	4				
Fibroma of leg	1	1				
Cyst of femur		5				
Cervical polypi			1			
54a. 1 Fibromyoma of uterus	1	1				
2 Cervical Fibromyoma	1	8				
55. Cerebral Tumour		30		37		
III. RHEUMATISM, DISEASES OF NUTRITION, EN- DOCRINE GLANDS, OTHER GENERAL DISEASES.						
56. Rheumatism	15	43	2	6		
Fibrositis	1	1				
Rheumatic endocarditis			1	6		
57:2 Rheumatoid Arthritis	2	2	2	124		
Osteo-arthritis				1		
59. Diabetes	3	229	2	13		
Senile Glycosuria			1	12		
65. Disease of the pituitary gland		2				
66. Diseases of the thyroid glands	1	4	1	5		
69. Other general diseases						
2 Obesity	5	26				
Hyperidrosis	1	3	1			
<i>Carried Forward</i>	194	910	22	382	1	

T A B L E V . (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	194	910	22	382	1	
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.						
71. Anaemia	14	47	1			
V. CHRONIC POISONING.						
75. Alcoholism			2	1		
VI. DISEASES OF THE NERVOUS SYSTEM.						
82c. Paralysis, Bell's		19				
Paralysis, Facial		6	1	2		
84. Other forms of Insanity:						
Melancholia	2			3		
Psychosis	4	10	1			
85. Epilepsy		33		5		
87. Other diseases of the central nervous system:						
Insomnia	6	2				
Neurasthenia	5	8	2	12		
Migraine	7	20	1			
Sciatica	2	17	1	2		
Neuritis	15	64		2		
Nervous debility	13	58		6		
88. Diseases of the eye and annexa:						
Errors of Refraction	50	96				
Conjunctivitis	7	11				
Phlyetenuar ulcer	1	20				
Corneal Ulcer	1					
Syphilitic Keratitis		7				
Syphilitic Iritis	1	15				
Hordeolum	4					
Blepharitis	5	2	1	1		
Eye-strain				2		
89. Diseases of the ear:						
Otitis	1	70				
Wax in ears	7	5				
Deafness	2	3				
VII. DISEASES OF THE CIRCULATORY SYSTEM.						
92. Chronic endocarditis:						
2. Mitral valve	2	23		4		
3. Aortic and mitral valve	1	37				
93. Disease of the myocardium	1	21	1	5	1	
94. Angina pectoris			1		1	
95. Other diseases of the heart:						
Auricular fibrillation	1	35				
Auricular flutter		9				
Tachycardia		8	1	8		
100. Diseases of veins:						
Varicose	10	82				
Haemorrhoids	3	1				
Phlebitis		2				
<i>Carried Forward</i>	359	1647	35	435	3	

T A B L E V . (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	359	1647	35	435	3	
101. Diseases of the lymphatic system ...	4	2				
102. Abnormalities of blood pressure ...	3	62				
Hyperpiesis			2	6		
103. Other diseases of the circulatory system:						
Epistaxis	3	6		1		
VIII. DISEASES OF THE RESPIRATORY SYSTEM.						
104:1 Diseases of the nose:						
Coryza	43	23	1	4		
Nasal obstruction	1	1				
Adenoids	1					
105. Diseases of larynx	9	2				
106a. Acute bronchitis	6	17	8	18		
106b. Chronic bronchitis		10		19		
107. Broncho-pneumonia			2	6		
110. Pleurisy	1	6	4	4		
Pleurodynia	6	1	1	2		
112. Asthma	3	48		10		
114. Other diseases of the respiratory system:						
Fibrosis of the Lung	1					
IX. DISEASE OF THE DIGESTIVE SYSTEM.						
115:1 Diseases of the teeth and gums ...	156	110	2	3		
1 Ulcer of Tongue	1	36				
2 Ludwig's Angina			1			
3 Quinsey	1	1				
3 Disease of tonsils	35	28	10	33		
4 Other diseases of buccal cavity and pharynx	2	2				
117a. Ulcer of Stomach		8				
117b. Ulcer of the duodenum		1				
118:1 Inflammation of stomach	5	63	1	2		
2 Dyspepsia	42	117	2	2		
120:2 Diarrhoea	11		7	4		
Enteritis	13	3	6	6		
Intestinal colic	1		2	1		
Gastro enteritis			1			
121. Appendicitis	43	121	4	9		
Appendix abscess	1	70		2		
122a. Hernia:						
Inguinal	2	13		1		
Femoral	1	5		1		
Umbilical	1	5				
Scrotal				1		
122b. Abdominal Adhesions	2	7				
123:1 Constipation	18	41	1	2		
125. Diseases of the liver:						
Hepatitis	2	21	2			
126. Biliary calculi		7	1	4		
127. Cholecystitis	2	6	1			
<i>Carried Forward</i>	780	2491	94	576	3	

T A B L E V. (Continued.)

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations.	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	780	2491	94	576	3	
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.						
130. Acute nephritis		2	2	4		
131. Chronic nephritis		2				
132. Albuminuria (occasional)	1	4				
133. Hydronephosis		10				
Phosphaturia	1	2				
135a. Cystitis	5	5				
136b. Carbuncle of urethra	1	1				
137. Diseases of prostate	2	33		3		
138. Circumcision	6	37		5		
Hydrocele	2					
Epididymitis	1	2				
139a:1 Ovary	3	4				
139b. Diseases of uterus:						
Amenorrhoea	1					
Dysmenorrhoea	5	11	1			
Menorrhagia	5	22	2	2		
Prolapse of uterus		5				
Retroversion of uterus		1				
Cervical Erosion	1	30				
139c. Diseases of the Breast	3	4				
Mastitis				2		
139d. Pruritis	1	1				
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.						
141. Ante-partum haemorrhage:						
2. Abortion		1				
Abortion (Incomplete)			2	7		
149:2 Antenatal	32	97	2	20		
Postnatal		8		8		
150:3 Childbirth			3	49		
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.						
151. Carbuncle, Boil	13	45		1		
152:1 Cellulitis	3	7	1	3		
2 Acute abscess	24	169		4		
153. Other diseases of skin and annexa:						
Dermatitis	14	30	1			
Acne Vulgaris	8	7				
Urticaria	6	5				
Impetigo	17	55				
Pzoriasis		4				
Herpes Zoster	5	5	1	3		
Eczema	3	6		1		
Erythema Nodosum	1	2				
Chilblains	1					
<i>Carried Forward</i>	945	3108	109	688	3	

T A B L E V . (Continued).

Diseases.	Out-patients.		District.			Deaths in the Colony apart from those previously recorded.
	New Cases.	Old Consultations	First Visits.	Subsequent Visits.	Deaths.	
<i>Brought Forward</i>	945	3108	109	688	3	
Sunburn	2					
Telangiectasis	1	2				
Sebaceous cyst		1		16		
Omychogryphosis				7		
Cyst		5				
Wart	12	50				
Corn	3	6				
Ulcer	3	1				
Alopecia	1					
Ingrown toe nail	5	12				
Pediculi Vestimenti		4				
XIII. DISEASE OF THE BONES AND ORGANS OF LOCOMOTION.						
155. Sequestrum				6		
156a. Diseases of the joints	3	1				
Synovitis	3	21		2		
Bursitis	1	2				
Bursa of knee			1			
156b. Diseases of other organs of locomotion:						
Lumbago	5	12		1		
Ganglion	4					
Pes Planus	2	2				
Dropped finger	1	7				
Dupuytren's contraction	1					
Teno Synovitis	1	1				
Myalgia	5		3	2		
XIV. CONGENITAL MALFORMATIONS.						
157. Talipes Equino Varus			9			
XV. DISEASES OF EARLY INFANCY.						
161. Thrush	1					
Anaemia	1	21				
Malaena neonatorum			1	19		
XVI. OLD AGE.						
162. Old Age		19		13	2	
XVII. VIOLENCE.						
181. Accidental burns	9	4	2	37		
194. Blows	59	56	3	2		
Foreign Body	7	4				
Contusions	22	41	1			
Cut	40	97	1	3		
Fractures	5	36	1	69		
Concussion		3		8		
Strain	35	90	2	1		
XVIII. ILL-DEFINED DISEASE.						
200. Examinations, Clinical	81	10				
Infant Welfare Clinic	61	625				
<i>Total</i>	1319	4256	124	868	5	

TABLE VI.
RETURN OF DISEASES AND DEATHS, 1936.
West Falkland Island.

Disease.	Patients under treatment during the year.	Deaths.	Patients remaining under treatment at end of year.
I. INFECTIOUS AND PARASITIC DISEASES.			
26. Tuberculosis of Vertebral column ...	1		1
42. Other diseases due to helminths			
Thread Worms	7		
III. RHEUMATISM, DISEASES OF NUTRITION AND ENDOCRINE GLANDS AND OTHER GENERAL DISEASES.			
57. Chronic Rheumatism	1		1
Osteo-arthritis	1		1
Muscular Rheumatism	5		
59. Diabetes	2		
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.			
71. Anaemic Chlorosis	8		1
VI. DISEASES OF THE NERVOUS SYSTEM.			
87b. Neuritis	1		
88. Diseases of the eye and annexa:			
Astigmatism	1		
Presbyopia	3		
Myopia	8		
Meibomian Cyst	1		
Conjunctivitis	1		
Foreign body in eye	1		
89. Diseases of the ear:			
Otitis Media	2		
Wax in ear	1		
VII. DISEASES OF THE CIRCULATORY SYSTEM.			
93. Diseases of the myocardium			
Myocarditis	1		
94. Angina pectoris	1	1	
100. Diseases of the veins:			
Haemorrhoids	2		
Varicose Veins	6		
VIII. DISEASES OF THE RESPIRATORY SYSTEM.			
105. Diseases of the Larynx			
Laryngitis	1		
106a. Acute bronchitis	2		
Bronchial Catarrh	4		
112. Asthma	1		
IX. DISEASE OF THE DIGESTIVE SYSTEM.			
115:1 Diseases of the Teeth and gums			
Dental Caries	24		
3 Diseases of Tonsils:			
Tonsillitis	19		
<i>Carried Forward</i>	105	1	4

T A B L E V I . (Continued.).

Disease.	Patients under treatment during the year.	Deaths.	Patients under treatment at end of year.
<i>Brought Forward</i>	105	1	4
4 Other diseases of buccal cavity & pharynx			
Pharyngitis	1		1
117b. Ulcer of the duodenum	1		
118:2 Dyspepsia and other diseases	7		
Gastritis	2		
Gastro-enteritis	4		
121. Appendicitis	4		
122. Hernia			
a. Inguinal	1		
123:1 Constipation	1		
127:1 Cholecystitis	1		
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.			
135a. Cystitis	1		
137. Diseases of prostate			
Enlarged Prostate	1		1
139b. Diseases of the uterus			
Menorrhagia	1		1
Amenorrhoea	1		
Prolapses uteri	1		
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.			
143. Other accidents of pregnancy			
Normal pregnancy	3		
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.			
152:1 Cellulitis			
2 Acute abscess	8		
153. Other diseases of skin and annexa:			
Eczema	2		
Dermatitis	3		
Psoriasis	1		1
Sebaceous Cyst	3		
Seborrhoea	1		
Warts	2		
Corns	4		
Lipoma	1		
Chilblains	5		
XIII. DISEASES OF BONES, JOINTS AND OTHER ORGANS OF LOCOMOTION.			
156a. Diseases of the joints:			
Synovitis	1		
156b. Diseases of other organs of locomotion:			
Dupuytren's Contraction	1		
XIV. CONGENITAL MALFORMATIONS.			
157. Club feet	1		1
<i>Carried Forward</i>	168	1	9

T A B L E V I . (Continued).

Disease.					Patients under treatment during the year.	Deaths.	Patients under treatment at end of year.
<i>Brought Forward</i>					168	1	10
XVI.	OLD AGE.						
	Senility	...	...	...	1	1	
XVII.	VIOLENCE.						
183.	Accidental Drowning	...	...	...	1		
194.	Insect bite	...	...	...	1		
	Strain	...	...	...	4		
	Injuries	...	...	...	15		
XVIII.	ILL-DEFINED DISEASES.						
2	Other ill-defined causes:						
	Vaccinations	...	...	...	62		
	Teething	...	...	...	1		
<i>Totals</i>					253	2	10

T A B L E V I I .

RETURN OF DISEASES (31st August to 31st December, 1936.

Lafonia, San Carlos, & Port San Carlos.

Disease.	Patients under treatment.
I. INFECTIOUS AND PARASITIC DISEASES.	
26. Tuberculosis of the Vertebral column ...	1
27. Tuberculosis of other bones and joints ...	1
II. CANCER AND OTHER TUMOURS.	
54. Non-malignant tumours	1
III. RHEUMATISM, DISEASES OF NUTRITION & ENDOCRINE GLANDS & OTHER GENERAL DISEASES.	
56. Rheumatic fever	1
57. Chronic rheumatism, Osteo-arthritis ...	2
VI. DISEASES OF THE NERVOUS SYSTEM.	
88. Diseases of the eye and annexa:	
Foreign Body in eye	2
Cataract	1
Ametropia	2
88b. Neuritis	2
89. Diseases of the ear:	
Impacted wax	2
VII. DISEASES OF THE CIRCULATORY SYSTEM.	
92:2 Mitral valve	1
93. Diseases of the Myocardium	2
100. Disease of veins:	
Varicose veins	1
VIII. DISEASES OF THE RESPIRATORY SYSTEM.	
104. Chronic Hypertrophic Rhinitis	1
IX. DISEASE OF THE DIGESTIVE SYSTEM.	
115:1 Diseases of the teeth and gums ...	24
3 Diseases of tonsils	8
4 Other diseases of the buccal cavity & pharynx	2
118:2 Dyspepsia and other diseases	9
120:2 Diarrhoea	2
121. Appendicitis	2
123:1 Constipation	3
3 Other diseases:	
Haemorrhoids	1
127. Cholecystitis	1
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.	
131. Chronic nephritis	2
134. Urinary calculi	1
135a. Cystitis	1
<i>Carried Forward</i>	76

Fibroids.

T A B L E V I I . (Continued).

Disease.	Patients under treatment.
<i>Brought Forward</i>	76
139a. Diseases of parametrium: Parametritis	2
139b. Diseases of uterus: Retroversion	1
139d. Other diseases of the female genital organs: Vulvitis	1
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.	
141:2 Abortion	1
150:3 Childbirth	1
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.	
152:1 Cellulitis	2
2 Acute abscess	1
153. Other diseases of skin and annexa:	
Ringworm	1
Rosaica	1
Seborrhoeic dermatitis	2
Urticaria	1
XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION.	
156a. Diseases of the joints:	
Weak knees	2
156b. Diseases of other organs of locomotion:	
Tenosynovitis	2
XVII. VIOLENCE.	
179. Acute accidental poisoning	1
194. Blows:	
Contusions	3
Fractures	24
Strain	1
<i>Totals</i>	123

This return of diseases and deaths sent in by Dr. N. Gray, Medical Officer to The Falkland Islands Company is for the period 1st August to the 31st December, 1936. This officer assumed duty on the 1st August, and there is no available data for the previous months.

TABLE VIII.
 RETURN OF DISEASES AND DEATHS, 1936.
 Leith Harbour, South Georgia.

Disease.	New Cases.	Old Consultations.
IV. DISEASES OF THE NERVOUS SYSTEM.		
79. Meningitis	1	
85. Epilepsy	1	
87b. Neuritis	4	
88. Diseases of the eye & annexa	5	
89. Diseases of the ear	2	
VII. DISEASES OF THE CIRCULATORY SYSTEM.		
100. Diseases of the veins.	1	
101. Diseases of the lymphatic system	1	
103. Other diseases of circulatory system	1	
VIII. DISEASES OF THE RESPIRATORY SYSTEM.		
104. Diseases of the nose	3	
106. Acute Bronchitis.	8	
112. Asthma	1	
IX. DISEASE OF THE DIGESTIVE SYSTEM.		
Diseases of the Tonsils	6	
Diseases of pharynx	3	
118. Dyspepsia and other diseases	9	
119. Colitis	2	
121. Appendicitis	3	
123. Constipation	3	
3 Other Diseases	2	
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.		
Kidney	1	
136. Stricture of urethra	2	
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.		
152:1 Cellulitis	2	
153. Other Diseases of skin & annexa	12	
XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION.		
155. Other Diseases of the bones	4	
156. Diseases of the joints	3	
Diseases of other organs of locomotion	7	
XVII. VIOLENCE.		
181. Accidental burns	2	
194. Blows	5	
Contusions	5	
Total	99	—

METEOROLOGICAL OBSERVATIONS taken at STANLEY, FALKLAND ISLANDS, during the Year ended 31st December, 1936.

TABLE IX.

Latitude 51° 41' South.

Longitude 57° 51' West.

MONTHS.	MEAN PRESSURE IN MILLIBARS.	AIR TEMPERATURE (F°)						PRECIPITATION IN INCHES.		VAPOUR PRESSURE IN MILLIBARS.	RELATIVE HUMIDITY SATURATION = 100.	AMOUNT OF CLOUD.	MEAN SUNSHINE (hours and tenths.)	WEATHER.				WIND.																					
		DRY BULB.	WET BULB.	MEANS OF		ABSOLUTE MAX. AND MIN.		TOTAL.	GREATEST FALL.					DATE.	RAIN.	SNOW OR SLEET.	GALES.	CLEAR SKY. 0-1	OVERCAST. 9-10	MEAN FORCE.	N.	N.N.E.	N.E.	E.N.E.	E.	E.S.E.	S.E.	S.S.E.	S.	S.S.W.	S.W.	W.S.W.	W.	W.N.W.	N.W.	N.N.W.	CALM.		
January ...	974.19	49.8	48.3	56	40	67	28th	34	14th	3.10	37	5th	10.1	62	6.0	6.5	29	—	—	31	—	30	1	2	1	1	2	—	1	1	5	2	1	2	6	3	—	—	
February ...	1004.4	52.3	48.7	59	41	62	4th	50	13th	2.41	.71	29th	10.3	72	5.0	6.9	25	—	2	4	9	4.1	2	—	1	—	1	—	—	—	1	1	4	1	5	4	8	1	—
March ...	998.7	47.8	45.5	52	38	61	9th	44	10th	3.21	.43	20th	9.3	56	7.0	3.9	22	2	1	—	15	4.8	1	—	1	—	—	2	—	1	1	2	4	7	6	3	2	1	—
April ...	1006.1	45.7	43.8	49	35	55	5th	43	7th	3.02	.82	22nd	9.4	53	3.0	3.9	23	—	—	1	—	3.6	1	1	—	—	—	2	—	1	—	2	3	7	2	8	2	—	
May ...	1000.74	35.6	35.0	30	26	50	1st	35	2nd	2.89	.45	21th	5.7	53	7.0	2.5	18	11	—	4	—	3.5	1	—	1	2	—	1	1	—	2	2	1	9	5	3	—	3	
June ...	1033.22	38.8	37.3	41	31	47	28th	40	19th	1.49	.33	12th	3.5	53	4.0	1.8	19	1	—	2	16	3.3	2	2	—	—	—	1	—	2	1	4	6	3	6	—	—		
July ...	1005.12	38.5	37.6	42	32	45	25th	39	10th	3.70	1.01	6th	7.3	91	7.0	1.4	23	2	—	1	15	3.5	2	2	2	—	—	1	—	—	4	1	4	2	8	1	—		
August ...	1000.7	37.4	35.8	40	30	48	31st	38	28th	2.03	.47	21th	6.1	85	10.0	2.3	21	5	—	3	16	3.1	—	—	3	—	—	3	2	1	1	3	—	7	2	6	—	3	
September	1008.1	40.8	39.2	44	31	51	22nd	26	25th	2.74	.7	4th	7.5	53	7.0	4.6	16	9	—	—	16	4.1	1	—	—	2	—	—	1	—	—	6	—	6	5	5	3	—	
October ...	1005.4	42.7	42.0	48	33	55	25th	27	15th	2.47	.42	3rd	8.0	83	6.0	5.2	21	5	—	3	10	4.0	—	—	—	—	—	—	1	4	1	7	4	4	6	3	1	—	
November ...	1003.6	47.9	43.8	51	37	67	27th	29	7th	.89	.15	13th	8.0	72	6.0	5.8	15	—	—	1	9	4.4	3	—	—	—	—	—	2	1	3	7	1	2	3	6	2	—	
December ...	995.4	53.1	51.6	53	37	64	18th	35	21th	2.65	.35	10th	15.9	59	4.0	7.3	19	—	—	1	4	4.7	1	—	1	—	—	—	1	—	2	—	3	3	9	1	—		
Means.	1002.9	44.2	42.4	47	34	56	—	36	—	2.55	.52	—	8.4	66	6.0	4.3	20	3	—	1	9	3.8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		

Stanley, Falkland Islands.

V. J. LEBLANC,
For Harbour Master.

APPENDIX A.

Causes of Death in the Falkland Islands 1852-1891.

The list of causes has been grouped in groups to ten years.

Many of the causes have been entered under vague terms such as "Natural causes", "The Will of God", "Debility", "Dropsy", "Water on the Brain", "Found Dead".

As the years progress the terminology becomes more precise as to the actual pathological cause of death.

Certain diseases are of special interest, Typhus Fever in the first group, Typhoid Fever in the 4th group. Scarlet Fever in the 2nd group. Diphtheria assumed a small epidemic at one period. Dysentery and Inflammation of the bowels seems to have been very common.

It is interesting to note that Tetanus occurred in 1862. Phthisis and Consumption are included under one head. The mortality was very high in the fourth group. Cerebral conditions such as "water on the brain" and apoplexy are quite common.

There appears to be a high infantile mortality diagnosed as "Convulsions" and "Inanition".

The highest number of deaths is recorded under Accidental Drowning, many due to known shipwrecks.

In 1866 a Spanish frigate reported 12 deaths due to Scurvy.

Causes of Death.	1852-1861.	1862-1871.	1872-1881.	1882-1891.	Causes of Death.	1852-1861.	1862-1861.	1872-1881.	1882-1891.
					<i>Brought Forward</i>	61	94	59	114
Typhus Fever	11	1			Inflammation of				
Typhoid Fever		1		10	the chest		6		
Measles			3	3	Pneumonia			3	4
Scarlet Fever		10	1		Congestion of Lungs	1			
Whooping Cough		1			Pulmonary Collapse				2
Diphtheria	9	2		1	Diarrhoea & Enteritis	5			
Dysentery	3	2	5		Hernia			1	
Erysipelas	1	1	1		Colic		1		
Tetanus		2			Cirrhosis of Liver		1		1
Consumption	12	16	4	28	Peritonitis				2
Tabes Mesentica	1	2		8	Nephritis		2		1
Tubercular Meningitis				2	Disease of Bladder		1	1	
T. B. Scrophulous Caries			1		Childbirth		3	1	1
Laryngeal T. B.			1		Fractured skull			1	
Blood Poisoning			6		Accidental drowning	6	18	19	26
Helminths		1			Suffocation				2
Cancer of Breast				1	Accidental injury	1		2	4
Cancer		1			Shooting, accidental		2	1	2
Cancer of Stomach		1			Excessive cold	2	1		
Rheumatic Fever		1			Exposure	2	5	2	5
Scurvy		12			Murders		1	1	2
Alcoholism	2	4			Execution, judicial	1	1		
Poisonings	1				Spina Bifida		1		1
Cerebral Inflammation	2	4	3	1	Congenital debility			2	
Disease of the brain		1	1	1	Marasmus		1	4	
Meningitis			1	2	Insanity		2	9	
Disease of the Spine	1			1	Premature Birth	2			
Apoplexy	6	7	2	3	Old Age			2	4
Cerebral softening		1			Suicide		1	1	2
Collapse of brain	1				Homicide	3			
Paralysis			2	3	Poisoning by Water		1		
Insanity		1			Accidental burns	5	1		
Epilepsy	1				Overlaying		1		1
Infantile Convulsions (under 5)	1	9	7	18	Ill-defined diseases				
Convulsions			2		Dropsy	5	2	1	5
Heart Disease	4	9	6	9	Debility 1-10			1	1
Anguina Pectoris	1	1		1	" 10-70		9	8	1
Ruptured Heart		1		1	Dentition	1			
Rupture of Pulmonary artery				1	Atrophy	3			
Aneurysm			1		Cyanosis			1	
Haemorrhage	2	1	1	1	Found Dead	1			
Larynx				1	Unknown	2	1	1	8
Lung Disease				2	Will of God		8	2	
Bronchitis	2	1	11	16	Inflammation		1	1	
					Malaena		1		
<i>Carried Forward</i>	61	94	59	114	<i>Total</i>	101	166	124	189



FALKLAND ISLANDS.

1937

ANNUAL

MEDICAL AND SANITARY REPORT.

FOR THE

YEAR ENDED 31ST DECEMBER, 1937.

Published by Command of His Excellency the Governor.

PORT STANLEY.

PRINTED BY THE GOVERNMENT PRINTER, FALKLAND ISLANDS.

1938.

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Senior Medical Officer's Office,
King Edward VII Memorial Hospital.
Stanley, Falkland Islands.
9th March, 1938.

Sir,

I have the honour to submit for the information of His Excellency the Governor and for transmission to the Right Honourable the Secretary of State for the Colonies, the Medical Report on the Health and Sanitary conditions of the Colony of the Falkland Islands for the year 1937, together with returns, etc., appended thereto.

I am,

Sir,

Your obedient servant,

Geo. Kinneard,

Senior Medical Officer.

The Honourable,
The Colonial Secretary,
Stanley.

ANNUAL MEDICAL AND SANITARY REPORT

FOR THE

YEAR ENDED 31ST DECEMBER, 1937.

I. ADMINISTRATION.

(A) Staff.

<i>Senior Medical Officer.</i>	George Kinneard, M.D. (Man.) C.P.H. (Johns Hopkins); Cert. London Sch. Hyg. & Trop. Med.
<i>Two Medical Officers.</i>	John Banks Henderson, M.B., Ch.B., (Glasgow). David Kellock Cowan, L.R.C.P. & S. (Edin.) L.D.S. (Edinburgh).
<i>Nurse Matron.</i>	G. E. Reive, R.N.
<i>Nursing Sister.</i>	<i>Vacant.</i>
<i>Staff Nurse.</i>	Mary S. J. Miller.
<i>Two Probationers.</i>	Nellie Steen. Mary Paice.
<i>Clerk to the Senior Medical Officer.</i>	B. N. Biggs.

Five other employees include a Caretaker and maids.

DENTAL STAFF.

<i>Colonial Dentist.</i>	W. H. R. Still, L.D.S., R.C.S., (Eng.)
<i>Dental Mechanic.</i>	J. Turner.
<i>Dental Apprentice.</i>	R. Lellman.

STAFF CHANGES.

R. L. Cheverton, Senior Medical Officer, left Colony on February 7th, 1937, appointed Senior Medical Officer, British Honduras.

G. Kinneard, appointed Senior Medical Officer on February 7th, 1937.
 Miss C. Thompson, appointed Nursing Sister, February 17th, 1937. Resigned on the 28th October, 1937.
 Miss M. E. Hill, resigned on the 2nd February, 1937.
 Miss G. E. Reive appointed Matron on 2nd February, 1937.
 Miss H. Fuhlendorff, Nurse Probationer, proceeded on leave and for subsequent training at St. Mary's Hospital, London on April 4th.
 Mr. W. H. R. Still, L.D.S., R.C.S., appointed Colonial Dentist on February 17th, 1937.

(B) Statistical Returns.

(1) FINANCIAL.

Total Government Revenue during 1937	...	...	£69,655 : 15 : 3.
Total Expenditure on Medical and Sanitary services during the year 1937 :-			
(a) Personal Emoluments	...	...	3,751 : 5 : 3.
(b) Other Charges	...	...	1,264 : 12 : 9.
		Total	<u>£5,015 : 18 : 0.</u>

Percentage that this bears to the total revenue 7.2%.

Revenue actually received during 1937 :

	1936.			1937.		
	£	s.	d.	£	s.	d.
Medical Subscriptions (approx.)	625	10	0.	540	0	0.
Medical Fees	517	7	3.	725	15	8.
Dental Fees	418	4	4.	679	2	5.
Totals	<u>1,561</u>	<u>1</u>	<u>7.</u>	<u>1,944</u>	<u>18</u>	<u>1.</u>

Unpaid accounts for 1937 and previous years
 on the 31st of December, amounted to ... £338 : 12 : 1.

- Notes :—
1. Civil Servants, their dependants and domestics are treated free except for maintenance in Hospital and special services.
 2. Despite a somewhat determined effort to secure payment at the time service is rendered considerable sums remain in the class of "unpaid and doubtful accounts".
 3. All patients unable to pay may have charges remitted in whole or in part.
 4. Fees, even when collected are kept low; consultations one shilling and sixpence, house visits two shillings and sixpence; major operations two pounds; maintenance one pound per week.
 5. The subscription from four stations is still outstanding for the half year ending 31st December, hence the amount shown under Medical Subscriptions is short by some £100.

(2) VITAL STATISTICS.

Births - Males 18, Females 19, Total 37.	1936 - 45.
Deaths - Males 12, Females 8, Total 20.	1936 - 21.
Marriages. 1937 - 10.	1936 - 26.
Arrivals - Males 77, Females 52, Total 129.	
1936 (58)	(38) (96)

Departures - Males 93, Females 61, Total 154.
 1936 (92) (61) (153)

Estimated population on January, 1st, 1937, Males 1329 and Females 1070 making a total of 2399.

Add arrivals 129.

Deduct departures 154.

Add births 37.

Deduct deaths 20.

Estimated population on December, 31st, 1937 2391.

Birth rate per 1000 15.48 (Males 7.53 Females 7.95)

Death rate per 1000 8.36

Population per sq. mile .52

Dependencies.

Marriages Nil. Births 1. Deaths Nil.

Resident population in the Dependencies 700.

In the East Falkland where some 85% of the population of the Colony lives there were no deaths in children under one year. On the West Falkland one child died from prematurity, one died from pneumonia. The numbers are so small that the calculation of an infant mortality rate is meaningless but the actual numbers taken from the Registrar's Records give the following :-

1931.	1932.	1933.	1934.	1935.	1936.	1937.
2.	0.	2.	1.	2.	0.	2.

There is a record of only one abortion admitted to hospital and one was reported as having been attended outside the hospital.

It will be noted that departures from the Colony exceeded arrivals by 25 so that on balance the population is 8 less than a year ago but the ratio of births to deaths stands at 37 to 20 and whatever social significance these figures have they do indicate a sound biological situation.

Among officials recruited from abroad, numbering 25, three were absent from duty more than 48 hours due to illness :-

Official 1 -	Arthritis, Dental abscess.
„ 2 -	Influenza, Injuries.
„ 3 -	Appendicitis.

Among 54 officials recruited locally 23 were certified as absent from duty for more than 48 hours. This invaliding was due :-

	No. of cases.
Influenza	14.
Suppurating Stye	1.
Injuries	3.
Dental condition	1.
Gastritis	1.
Pleurisy	1.
Neurasthenia and hysteria	2.

(C) Legislation.

During the year the Public Health Ordinance, No. 5 of 1894, was amended to :

I. Create a Board of Health for the whole Colony consisting of "The Senior Medical Officer who shall be Chairman of the Board, the Government Medical Officers and such other members not exceeding five as shall be appointed annually by the Governor in Council, and it shall be lawful for the Governor from time to time to fill up any vacancy or vacancies which may occur during any year on the said Board."

II. Section 16 of the Principal Ordinance was repealed and replaced by the following section :-

16. Any Inspector of Nuisances shall have power to enter any wharf, shop, yard or building used for the sale of butcher's meat, and examine any meat or flesh intended for the food of man, and if it shall appear that the same is unfit for food it shall be seized and the matter at once reported to the Agricultural Adviser, and if it appears to the said Agricultural Adviser that any of the said articles are unsound or unfit for the food of man he shall order the same to be destroyed and the person to whom the same belongs or in whose possession or on whose premises the same was found shall be liable on conviction before two Justices of the Peace or the Police Magistrate of the Colony, to a penalty not exceeding ten pounds for every such offence.

III. Section 18 of the Principal Ordinance was amended by the deletion of subsection (viii). (Proper regulation of markets and slaughterhouses).

VI. Sections 22, 23, 24, 25 and 26 were repealed. (These sections dealt with the West Falkland Board of Health now abolished).

The Bye-laws of the Board of Health were redrafted in 1936 but due to changes in administration whereby some of the work was transferred to the control of the Agricultural Adviser the final form of these Bye-laws was not approved during 1937 and at the end of the year it had not yet been considered formally in Council.

The Regulations governing the schedule of medical fees had given rise to difficulty in interpretation and permission was secured to completely redraft them. These were awaiting consideration by the Governor in Council at the end of the year.

The attention of the Government has been actively engaged in considering some contributory scheme which would eliminate the present nuisance of multiple petty charges for what is really one service - medical care. At the end of the year the Department was still functioning under the old system but some further action is possible in 1938.

Difficulty was again experienced in securing nurse probationers and upon consideration it was decided to redraft the Regulations passed in 1923 so as to provide somewhat more attractive terms. The exact nature of these changes was awaiting action by the Governor in Council at the year's close.

(D) Port Health Administration.

Very few ships relatively, from foreign ports enter the Colony. Thus during 1937 the number of vessels entered at Port Stanley was as follows:-

From United Kingdom	2.
„ Monte Video (on mail service)	13.
„ Colonial Ports	3.
„ Chile	8.
	<hr/>
Total	26.
	<hr/>

The desirability of excluding communicable disease is fully realized and arrangements have been made with His Majesty's British Consul at Rio de Janeiro, Montevideo, Bahia Blanca, Magallanes and Valparaiso to send wireless messages in the event of any scheduled infectious disease breaking out at these points. In addition regular written reports covering the incidence of communicable disease in Montevideo, the principal point of contact are received.

The population has not been immunised against diphtheria and while this disease is prevalent in Uruguay ships' masters are asked to make specially certain that no persons with sore throats are on board their ships before signing the Declaration of Health. Nonetheless it is recognised that the practice of boarding a ship by a Medical Officer upon arrival, for the purpose of granting pratique, is no guarantee against the introduction of communicable disease in a subclinical form or in the stage of incubation.

During 1937 all ships approaching the Colony were requested to send a radio message

to the Senior Medical Officer if they had a clean bill of health and all were well on board. In these cases the ship was received by the Harbour Master or some one specially designated. Such a practice often saved the Medical Officer on the West Falkland a long arduous trip in winter to perform a duty which in no way afforded added security.

This method of arranging radio-pratique was an innovation and representations protesting against it were made by some elements in the Colony. Thus far there seems no good reason to interfere with the system.

II. PUBLIC HEALTH.

Infectious Diseases.

During 1937 the public health of the Colony showed no unusual or disquieting features. The Colony is healthy, prosperous in a modest way, and during the current year completely free from most, if not all, of the communicable diseases. Thus measles, scarlet fever, whooping cough and diphtheria were not seen, nor were there any cases of enteric fever, infantile paralysis, meningitis or "sleepy sickness. For this we must thank the isolation and smallness of the settlement for the most part. Uruguay 1000 miles away is the only point of contact with these diseases and ships call only once per month.

Medically speaking there are two unique features about the Falkland Islands. Firstly, that scourge of other areas, Venereal Disease is very seldom seen. Only two proved cases of gonorrhœa, both in seamen, were treated during the year and only one suspected tertiary syphilitic. Secondly, during 1937 no child under one year died in the East Falkland which includes the bulk of the population. In the West Falkland there were two infant deaths.

Influenza. Infections of the upper respiratory tract – the common cold, influenza, bronchitis and pneumonia, etc., contributed the bulk of the infectious diseases. The influenzal cold was seen throughout the year with four or five waves approaching epidemic proportions while in July during an unusually cold period the incidence of cases rose very high indeed. There was no mortality from influenza proper but several cases of bronchopneumonia associated with earlier attacks of influenza terminated fatally.

There are no precise figures for previous years but this July epidemic of influenza did not appear to be greatly different than similar outbreaks referred to in earlier reports over the previous twenty years.

It has been assumed without much basis that this disease is introduced from without by visiting ships and while this is possible one feels that the disease is in the Port of Stanley continuously, reaching epidemic proportions only when the weather becomes unusually favourable (*i.e.* continuous high winds with low temperatures) for its development.

This year when the cases receded to normal incidence a questionnaire was sent out to people living in Stanley asking for certain information of an epidemiological character and replies were received from a group of some three or four hundred between the ages of five and eighty. From the data so secured it appeared that during the epidemic there was a crude attack rate of 67%. This was a high rate but it will be seen that about one third of the population over five escaped.

Analyzing this crude rate, age and sex made no difference :

The attack rate in the group	5 – 15	was	65%.
„ „ „ „ „ „	16 – 40	was	72%.
„ „ „ „ „ „	41 –	was	64.2%.

One person in five considered they had had a severe attack.

An interesting point brought out was the small number who took Cod Liver Oil, namely one in four. However, the attack rate among those who admitted taking Cod Liver Oil or its substitutes was 65.1 and among those who did not it was 66.9 showing that in this particular sample at least Cod Liver Oil had no prophylactic effect. We do not know how long or how much or how regularly the Cod Liver Oil had been taken but these were the findings.

Nor did location appear to play any part. True, the attack rate rose steadily from

It is idle to speculate on the explanation of these outbreaks but the methods of handling food, especially meat, leaves much to be desired. While nothing was seen to suggest the presence of a true dysentery there are plenty of closely allied organisms, such as the Salmonella group quite capable of producing these gastro-intestinal upsets. Most of the year the temperature both of the soil and the air is too low to permit much bacterial growth and hence food spoilage is very little noticed even when food is kept under improper conditions.

One interesting feature of the situation from an epidemiological aspect will be to see what effect, if any, the provision of piped water and the stricter control over meat and milk presently to be exercised by the Agricultural Department, has on the incidence of diarrhoea and enteritis.

GENERAL DISEASES.

Considering the size of the population diabetes and asthma appear to be rather more prevalent than one would expect. If there is a familial tendency about these diseases the extensive inter-marriage may tend to throw up more cases.

The peptic ulcer syndrome is frequently observed in the Out-patient Department as it is in many temperate latitudes. No cases of perforation occurred. In regard to appendicitis there was a sharp recession in the number diagnosed as suffering from this disease. Two cases hospitalized late (coming from an isolated area) had a suppurating appendix, two cases showed acute catarrhal inflammation when operated on and a fifth case had an acute condition within the recent past. In all, eleven appendicectomies were performed but several of these had been told they had appendicitis and coming from isolated areas it was deemed best to investigate surgically. Usually the appendix showed no pathology but a period of hospitalization permitted the treatment of other conditions such as varicose veins; diet was changed; outlook was altered and for a time, at least, the patient felt greatly benefited.

The haemorrhagic diathesis – An investigation of such a diathesis would of course be very valuable and very interesting but it will be readily agreed by those competent to judge that such an investigation particularly as related to Vitamin C lack, is surrounded by many technical difficulties and requires expert scientific work. It was therefore felt that time spent in attempting such an investigation might be delayed for the present.

Work along these lines was suggested in the 1936 report.

Clinically no cases of abnormal bleeding were encountered. Secondary haemorrhage occurred in two surgical cases, one was severe and required transfusion. In both, errors in technique such as insufficient haemostasis, and the lack of chromic catgut appeared to give quite satisfactory explanations of the bleeding without seeking a haemorrhagic diathesis.

(B) Nutrition.

Nutrition continued to engage the attention of the Government and the report of the Committee on Nutrition was submitted early in the year. The report appears in the appendix of this publication.

Some of the recommendations of the report were put under way almost at once. With the idea of introducing a fundamental change in the dietary of the population by establishing milk as a staple article in the daily menu, a group of some fifty boys and girls in the Government School was selected to receive a daily free issue of a pint of milk. These children were all considered to be malnourished or to have especially bad teeth.

In addition each member of the group received fifteen drops daily of Radiostoleum – a concentrate of vitamins A and D.

Heights and weights were recorded in the beginning, the dentist made a note of the dental condition present and this will enable a comparison to be made in a year's time.

Under the supervision of Mrs. W. D. A. Jones, who teaches the Domestic Science Class, the scheme, began in June, has functioned smoothly throughout the year. A similar undertaking was organized for a group of eighteen pupils at St. Mary's Catholic School.

(C) Health Education.

During Coronation Week when it was expected large numbers of the people from the "Camp" would be visiting Port Stanley a short course for camp cooks and itinerant school masters was organised. This was a conspicuous failure. Practically no one attended and the idea had to be abandoned.

Better success attended the attempt to produce a lecture demonstration on food in the Town Hall Coronation Week. This was carried out with the close co-operation of the Educational Department. A lecture on the "protective foods" was given by the Senior Medical Officer. The Domestic Science Class of the Government School then demonstrated the preparation of some of these foods such as kale salad, whole wheat biscuits, etc. There was also an exhibit of one days food for the pregnant or nursing mother showing quantities, the "protective foods", and the energy yielding foods. Local dealers arranged stalls where whole-wheat flour, Graham flour, bran, Bemax, Marmite, etc., could be seen or bought.

Several hundred people attended this meeting including His Excellency the Governor and various senior officials. Later in the year a similar mass meeting was held to focus the attention of the people on the relation of food to good teeth. School children were invited to compete for prizes by writing essays on the care of the teeth and the public were invited to compose limericks on the same subject. These with other items were presented at a lecture Concert. Much of the success of this very large meeting was due to the help and co-operation of the Folk Dance Society and the Defence Force Band.

During December a Baby Show was held and over fifty children were entered. Certificates and small prizes were given to the winners in each of the various classes. These were presented by Mrs. M. C. Craigie-Halkett, wife of the Acting Governor. The judging was carried out by the medical staff assisted by a number of ladies and mothers were given an opportunity to see the various points which had to be considered in awarding the marks.

It was felt that this show had a definite educational value in as much as it focused the attention of the community on infant welfare work, demonstrated what fine specimens the Falkland Island babies are and kindled fresh enthusiasm among the mothers.

In addition to these general measures no opportunity was lost to do individual teaching in the various clinics and perhaps this less spectacular but steady work is more productive of real health education than any other.

III. MATERNITY AND CHILD WELFARE.

During the year a special time was set apart once per week to see pre-natal cases. Each patient was given a general physical examination at the first visit. Subsequently at monthly or fortnightly visits the weight and blood pressure were noted and the urine examined. Every patient was urged to put herself in the best possible condition for confinement and she was urged to include in her diet thirty ounces of milk, an egg, some green vegetables and Cod Liver Oil.

During the year twenty-five women registered at the clinic and these were seen an aggregate of eighty-one times. Actually twenty-eight women were confined in hospital so that only three women appear to have had no pre-natal observation. Two guineas covers the whole cost of confinement including maintenance in hospital for a period up to two weeks if the mother wishes to remain that long. No charge save for medicine is made at the pre-natal clinic. There were no maternal or neo-natal deaths. Every effort is made in the Pre-natal Clinic and while the mother is in Hospital to teach the importance of regular attendance at the Infant Welfare Clinic and close co-operation with the doctor.

At the Infant Welfare Clinic, held weekly, an effort is made to see every child during the first year every two weeks at first, then every month; during the second year every two months; and subsequently every quarter. Here again mothers have co-operated well and attend regularly. Anyone who has worked in a community where serious malnutrition is common and the economic level is low will be strongly impressed by the splendid babies that attend these clinics, spotlessly clean, beautifully dressed and in the great majority of cases mothers report that advice is being followed and that the child appears entirely normal and healthy.

The average attendance throughout the year was 9. The aggregate attendance 470.

The Infant Welfare Clinic probably offers the best means of making real progress in health education of any in the Colony.

IV. ORAL HYGIENE.

Oral Hygiene. The prevalence of dental caries has impressed medical men for many years. A. H. B. Pearce, Colonial Surgeon, 1914, wishes in his report "to draw attention to the School Dental Clinic and to the *inestimable benefit* it will be to the community, not only now, *but in the future*". Looking back over more than twenty years one can say that dental caries is still very prevalent and the situation emphasizes the fact that a dentist is primarily a repair man. His very presence and necessity is a reproach to the medical profession. If we knew for certain the cause of caries and if we knew for certain whether or not the average caries rate in the Falklands differs significantly from the rate in similar latitudes elsewhere we should have a basis on which to build a "preventive policy".

Work was begun during the year to determine

- (a) The average caries rates for various age groups.
- (b) The structure and quality of teeth.
- (c) The effect, if any, upon the teeth of a group of children, after feeding a pint of milk and fifteen drops of Radiostoleum (Vitamins A and D) for one year.
- (d) Any marked difference between the average Falkland Island diet and a balanced ideal diet.
- (e) Any marked difference in the dental caries rate experienced by the "foreigner" here and during residence elsewhere.

There is nothing naturally to report as yet but it is expected that some, if not all, these points will be reported on in 1938.

Full details of the Dental Surgeon's activities are given in his report.

What conditions will be like twenty years hence we do not know, one can only hope that the "inestimable benefits" referred to in 1914 will be more apparent to our successors than they are to those of Dr. Pearce. In any case it is proposed to leave on record a quantitative basis for comparison.

V. HYGIENE AND SANITATION.

In the Town of Stanley control of sanitation and general hygiene is somewhat unusual. The Senior Medical Officer is considered to be responsible for the health of the Colony. He serves as President of a large Board of Health which in the year 1937 included in its membership the Colonial Secretary, the Director of Public Works, the Agricultural Adviser and three ordinary residents. This Board met twice during the year, put forward no special policy, save to instruct its building committee to approve no further new residences in a sewered area unless these were connected to the town water and sewage system.

The building committee consisted of the Senior Medical Officer, the Director of Public Works and one other Board member. This committee examined all building permits throughout the year.

The Director of Public Works although sitting on the Board of Health, is completely independent of it in all questions of sanitary engineering. There is no Board of Public Works and the Director controls all matter of hygiene pertaining to public buildings such as public baths, the gymnasium, School, etc. He also controls street cleaning, water and sewage; and the collection of garbage.

During 1936 it was decided in principle to remove the control of meat and milk out of the hands of the Senior Medical Officer and the Board of Health, place it directly under the Agricultural Adviser. Legislation permitting this with consequent changes in the Board of Health Bye-laws has not yet been effected. This delay was not anticipated, consequently slaughter houses and dairies have functioned without licences pending the Agricultural Adviser's new regulations.

In school hygiene the views and standards of the Superintendent of Education play an important part in the conditions which prevail in the Government School.

It follows, that such an administrative organisation is apt to exhibit considerable inertia and potentialities for friction. However during the past year all elements have worked together well and while little or nothing was accomplished a groundwork was laid which it is hoped will bear fruit in 1938.

Actually in the Town of Stanley there do not appear to be any very serious public health problems as far as environmental hygiene is concerned. The population is small, there is no overcrowding, the climate even in summer is cool; natural drainage despite a peaty soil is facilitated by the town's position on a hillside and flooding has been controlled by the paving of streets and the construction of storm water drains (Building regulations require householders to drain their premises into the general system where this is possible).

The Chief Constable acts as Sanitary Inspector for the Board of Health. His duties include periodic house to house inspection and he reports directly to the Senior Medical Officer. The new Health Bye-laws, (approved but not yet formally passed) set forth this official's duties in considerably greater detail, require a written monthly report to the Senior Medical Officer.

WATER AND SEWAGE.

The water and sewage system is controlled by the Director of Public Works and he has supplied the following data :-

Water consumption per day	...	...	15,000 gallons.
Total number of houses in Stanley	...	...	284.
Properties connected to Water main or			
59.1% of total houses	...	...	168.
Water connections made in 1937	...	...	8.
Reservoir storage	...	...	355,142 gallons.
Hydrants on water main	...	...	30.
Connections to main sewer	...	...	218.
Lavatories, flushing	...	...	149.
Concrete gutter with catchpits			
connected to main drain in 1937	...	...	770 yards.

The water appears to be of good quality, shows little or no tint from the peat soil, is unchlorinated and has very slight "taste". It will be seen that the supply is ample for the Town's needs.

As noted previously the Board of Health will require all new dwelling houses to be connected if built in areas served by water and sewer mains. There appears to be a steady tendency to link up with the Town water and sewage system and the Public Works Department have as many applicants currently as it has staff and equipment to take care of.

A few houses still use rain water and the number of ordinary toilets is still considerable. The pail system is largely used. "Night soil" is collected during the night by the Public Works Department. The system works as well as such a system can and until superseded by flush lavatories is a satisfactory method.

Garbage and ashes are deposited in a large cement bin located in the rear of the householders' premises. Save for Government buildings these bins have to be emptied by the house-holder. During the peat cutting season it may be difficult to get garbage carted away and it would seem that there is room for improvement in organizing a service to take care of this problem.

The streets are cleaned by the Public Works Department and the Town as a whole is very neatly kept. The Blue-bottle Fly tends to be a nuisance towards the end of the warmer season. The common house-fly finds the climate unsuitable; at least very few are seen.

Housing. It can be fairly said that the houses for the most part, while architecturally unattractive, are in a good state of repair and well painted. The new Board of Health Regulations govern the construction of new houses in considerable detail. The Board of Health

is also given powers to condemn houses as unfit for human habitation and may demolish those houses which it can be shown are a public danger. There are a few houses where action along these lines is indicated but until the new Bye-laws are formally adopted no legal action is possible.

Food Control.

As indicated elsewhere in this report it was decided to place the control of meat and milk directly under the control of the Agricultural Adviser.

Early in the year the Senior Medical Officer and the Agricultural Adviser visited the dairies and slaughter-houses with a view to making recommendations to the Board of Health about licences. These officials were unable to recommend any of the places visited until certain changes had been effected. Since the Board of Health had condoned these conditions in previous years and since it was shortly to lose control to the Agricultural Adviser no action was taken pending the passage of enabling legislation transferring its responsibilities to that official.

The Agricultural Adviser is an able and experienced officer and there is little doubt that he will see certain common sense changes are made in the handling of milk and meat.

Milk. The milk requirements of the Town to a growing degree are met by the use of evaporated full cream milk. This milk can be bought for sixpence a quart retail per single can whereas raw fresh milk sells for ten-pence to twelve-pence and in samples tested frequently showed a poor cream content. The production of safe clean milk in Stanley is surrounded by many difficulties due to the absence of adequate pasturage adjacent to the town and while conditions remain as they are at present the house-holder will continue to depend more and more on the cheap, safe and clean article in a tin. Fresh milk from the camp is out of the question because no suitable transport exists.

Butter. The butter requirements of the town are not met by local production. This important foodstuff is imported from abroad (the Argentine and New Zealand). Two reasons are put forward to account for this. The sheep farmer feels under no economic necessity to increase his income by such a troublesome and laborious business as butter making and there appears to be a widely believed theory that butter, locally made, will not keep no matter how much attention is given to its preparation. This problem is engaging the attention of the Agricultural Adviser and his report will doubtless deal with it "in extenso".

Apart from the control of meat and milk the Board of Health continued to exercise its usual powers over the sale and distribution of food. There was one prosecution and one conviction for selling food unfit for consumption.

Fruit. Fruit is imported regularly each month and secures a ready sale. This fruit is secured from South American countries and is sometimes badly graded. There are no special facilities either for transporting fruit or storing it upon arrival so that the trader runs some risk of loss and the price must be correspondingly high. Oranges are available practically the year round at two shillings to two shillings and sixpence per dozen. Apples, bananas, pears, plums, peaches and even cherries appear in season. The Colony appears to be as well off in this respect as other countries in similar latitudes. Naturally residents in the "camp" are less favourably situated because of the absence of suitable transport.

VI. SCHOOL MEDICAL SERVICE.

The students at the Government and St. Mary's Schools were examined during the year. The pupil was examined in the presence of the parents and any point of interest discussed on the spot. Arising out of these examinations the following points were noted :

NUTRITION - In the 1936 Report, use was made of the Von Pirquet's Pelidisi scale for assessing the nutrition of the scholars (*i.e.* The cube root of 10 times the weight in grammes divided by the sitting height in centimetres.)

This gave 42.7% as "below normal"; 8.7% as "border line". There is a great diversity of opinion as to the best method to assess a child's state of nutrition but in the last analysis the clinical judgment of the experienced physician is, at least in the writer's view the best guide.

From the available data an attempt was made to select at the Government School those specific cases which the Pelidisi scale declared to be under nourished. This produced a list of some eighty-two students. The Superintendent of Education upon examining the list declared that it contained many students who to the lay mind appeared very well nourished indeed. It was therefore decided before beginning a free milk clinic to re-examine the students from a clinical stand point.

When this had been done it was found that on a clinical basis some fifty students at the Government School were considered as suitable for extra feeding of milk - seventeen at St. Mary's School.

Out of 224 children examined :

(a)	Vaccination had not been effected for one reason or another in	10.7%
(b)	Dental Caries to some extent was noted in	36.1%
(c)	Some abnormality in the nose or throat was seen in	31.7%
(d)	No actual eye-testing was done but there was a query about vision, external eye disease etc., in	7.6%
	(these cases were referred to the Out-Patient Department, K.E.M. Hospital).	
(e)	Hearing was slightly affected in only	0.008%

The number of nose and throat conditions dealt with at the King Edward Memorial Hospital has not been as high as the school examination indicated they should have been and it will be necessary in 1938 to consider ways and means of bringing more of these children with remedial defects to the hospital.

Section 13 of the Education Ordinance No. 8 of 1909 requires the Government Medical Officer to make an examination of the school children at least once annually. Unfortunately, or so it would seem to the writer, he is not enjoined to pay any attention to the subject of school hygiene. School hygiene is more important than medical examination of individual pupils and it would seem that the Education Ordinance should be amended so as to give the Senior Medical Officer or the Board of Health authority to require modern hygienic standards should these not already exist.

VII. MEDICAL SERVICE OUTSIDE STANLEY.

Medical service outside Stanley is provided on the public health side, for the whole Colony by Government but as regards medical care the Falkland Islands Company maintains a resident doctor at Darwin who attends to the people in the Falkland Islands Company's camp and two other stations. Patients however requiring hospitalization are received at the King Edward Memorial Hospital regardless of where they reside and these are, of course, attended on admission by the Government doctors.

One doctor is constantly maintained on the West Falkland and one doctor resides in Stanley to assist the Senior Medical Officer and attend non-Company Stations in the camp. In addition to answering special calls these officers tour all the camp stations twice a year.

During the year the entire rural portion of the Colony apart from that served by the Falkland Islands Company doctor came under a system whereby each station pays a flat rate (£25 - £20 - £15 according to the number of sheep per annum, plus £2 for a married man and £1 for a single employee) to cover the cost of medical care. For this the Medical Department supplies all services free except a hospital maintenance charge of £1. 1s. per week. In addition where a medical officer certifies an urgent case requires hospitalization, Government contributes half the cost of transport up to £25.

As regards housing and rural sanitation, the landowner or manager is comfortably, not infrequently luxuriously, housed. The married shepherd enjoys a snug home, often with somewhat small rooms and in somewhat isolated locations. Compared with agricultural workers in many other places however he is economically very well off and is often able to retire to Stanley with a modest competence in his old age.

The single man on the farm is less well situated. He lives in a cook-house which often leaves much to be desired from the standpoint of hygiene and which is presided over by

a male cook who sometimes has taken up this work not through any knowledge or competency in cookery but rather because he has become too old, or otherwise unsuitable for the general work of the station.

In contrast to this some places where there is an alert manager the cook is a better type, latrines are clean and well kept; the meat house is clean and fly-proof; the bedrooms show signs of care, and separate facilities exist for washing and bathing.

A few stations charge employees a flat rate for board but more usually the men enter into a private agreement to pay their share of whatever outlay the cook has made. A common rate is reported to be under a shilling per day. Under such conditions the fare served must be readily prepared and contain no fancy or expensive items. It would be easy as a rule for ample supplies of milk, butter, eggs and fresh vegetables to be made available to these men, practically free, but since these matters are left entirely to the men by the managers at these stations not infrequently all these important "protective" foods are not regularly enjoyed.

VIII. METEOROLOGICAL.

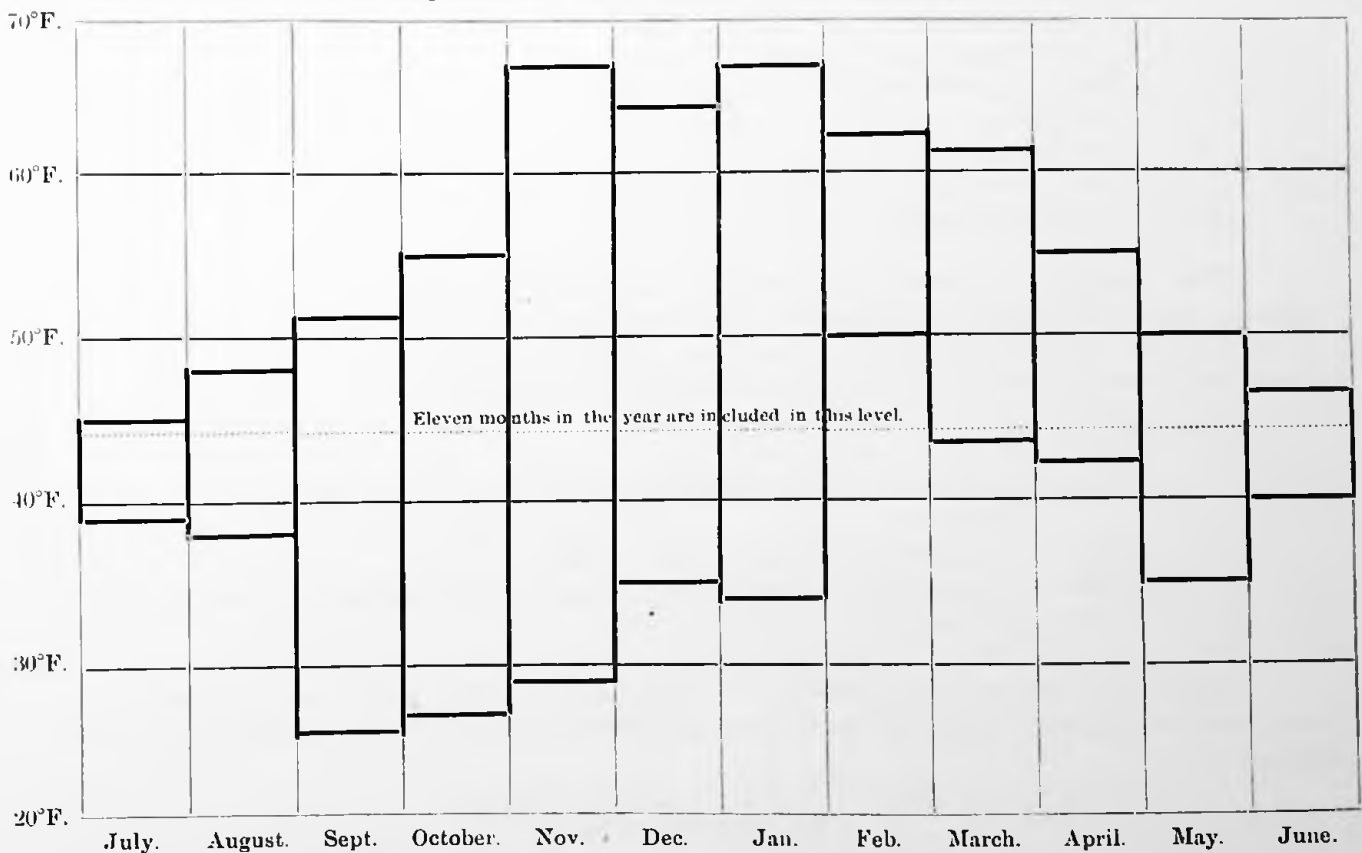
Meteorological observations in some detail are recorded by the Agricultural Department and interested parties may consult the records there.

The climate of the Falkland Islands is an equable one. Unpleasant weather and westerly winds both prevail. This does not exclude a good deal of really fine weather but good periods come irregularly and seldom stay long. The current year was considered to be particularly bad but the lowest temperature recorded was 16° F. The air is moist however and for many months the difference between the wet and dry bulb readings is no more than 1° F.

The accompanying diagram indicates the cool character of the climate and the remarkably narrow range of temperature throughout the year.

It is to be noted too that the outburst of influenzal colds occurred in July corresponding with an unusually severe period of cold.

Temperature variations throughout the year.



The enclosed areas indicate the mean, maximum and minimum temperatures reached in each month.

IX. KING EDWARD VII MEMORIAL HOSPITAL.

The King Edward VII Memorial Hospital reconstructed in 1936 provides seventeen beds which appear to be ample for the needs of the Colony. Financial considerations compelled the original reconstruction plans to be modified so that staff quarters in the Hospital proper were not included. "Rock Cottage" an old building adjacent to the Hospital provides a surgery for the Colonial Dentist and quarters for the subordinate nursing staff. This Cottage has not proved as suitable as it was hoped. There is no central heating and in the winter the staff complained about the coldness and dampness. By moving one staff nurse into the Hospital, securing maids who sleep at home, and the vacancy in the post of Nursing Sister, the difficulty has been met. Certain changes are contemplated for the winter of 1938 which it is hoped will meet the situation at least temporarily. These include the installation of electric heaters.

During the year a large Solarium was built on to the north side of the Hospital. Special Vita-Glass was fitted into this structure and the result has been a very splendid addition. The cost was met by public subscription and the Solarium has been erected in commemoration of the Jubilee of King George V.

Admissions to hospital have been as follows :-

<u>1935.</u>	<u>1936.</u>	<u>1937.</u>
230	149	219.

Radiological Examinations numbered in

<u>1935.</u>	<u>1936.</u>	<u>1937.</u>
65	69	65.

Surgical Procedures

<u>1935.</u>	<u>1936.</u>	<u>1937.</u>
230	241	184.

In 1937 the field for legitimate surgery was quite small. Of 184 procedures only some 23 could be called major undertakings. These included :-

Appendicectomies	...	...	...	11
Herniotomies	...	...	...	4
Forceps (obstetrical)	...	...	...	3
Laparotomy	...	...	...	1
Cystotomy	...	...	...	2 (<i>1 urinary calculus</i>)
Thyroidectomy	...	...	...	1
Choleystostomy	...	...	...	1

The Hospital is supplied with sufficient laboratory equipment to carry out all the ordinary simple clinical investigations but it was considered advisable to gain further experience in the needs of the Colony before expending money on more elaborate material. A few other pieces of equipment it was felt however should be secured and these are on order.

They include :-

- (1) A pump to provide positive and negative air pressure in the operating theatre.
- (2) A "shadowless lamp" for the dentist.
- (3) A modern electric dental engine with all the various attachments which go with it.

During the winter some difficulty is experienced in drying hospital laundry. Plans were therefore made to build a small modern laundry containing a power-washer and a drying room.

The Dependencies.

No Government doctor is stationed in the Dependencies. Medical service is rendered by Ship's Surgeons employed on Whaling ships. Working conditions are said to be very satisfactory but no details are available for publication when this report was submitted.

APPENDIX I.

Report of the Medical Officer, West Falkland.

The Honourable,
Senior Medical Officer.

Sir,

I have the honour to submit the following report on medical conditions in the West Falklands.

During the year 302 cases were seen; of these 183 consulted at headquarters, the remainder being seen at their respective stations entailing an absence of 50 nights from headquarters. The following is a list of stations visited for the purpose of attending patients together with the number of times each station was visited :-

<u>Name of Station.</u>	<u>Number of Visits.</u>
Spring Point	2
Hill Cove	9
Chartres	8
Roy Cove	5
Port Howard	3
Carcass Island	1
West Point	1
Saunders Island	1
Fox Bay East	6
Dunnose Head	7
Port Stephens	1
Port Edgar	1

Two operations of a minor character were performed. During the early months of the year an outbreak of impetigo occurred which proved resistant to treatment.

In the month of August an epidemic of Influenza swept the Island. This had apparently spread from Stanley. Few people escaped infection. The Islanders have little or no resistance to respiratory infections. The condition was widespread before it was notified and consequently no means of controlling the spread could be put into action. Five cases developed Influenzal Pneumonia and all recovered. Three cases of Chicken Pox in the one family were seen. Strict and conscientious isolation was carried out and no further cases occurred.

One case of Glandular Fever was seen. No facilities for examining blood are available.

I have advised on all occasions, that Maternity cases should come to Stanley. Whilst it is true that most cases are normal and present no difficulties, it is felt that this lulls people into a false sense of security, many hours must elapse before the Medical Officer can get to a case by reason of the slowness of transport and this delay would be of serious consequence in most obstetrical emergencies.

During the year the Medical Officer's residence Marnon House was moved from its former site and re-erected at Fox Bay Settlement beside other government buildings. The house has been modernised, water laid on, a hot water heating system installed together with a flush lavatory. A Caretaker is to be provided in 1938 who will prepare a garden and it is hoped that in future the District Medical Officer will be comfortably housed.

CLASSIFICATION OF DISEASES SEEN.

I. Infectious and Parasitic. (Mostly Influenza)	72.
II. Cancer and other tumours.	3.
III. Rheumatism - Nutrition - general diseases.	11.
IV. Disease of the blood etc.	1.

V.	Diseases of the Nervous system.	1.
VI.	Diseases of the eye, ear etc.	22.
VII.	Diseases of the Circulatory System. (2 deaths)	16.
VIII.	Diseases of the Respiratory System. (1 death)	23.
IX.	Diseases of the Digestive System	79.
X.	Diseases of the genito-urinary system (1 death) (including 5 cases of child-birth)	15.
XI.	Diseases of the Skin.	24.
XII.	All other conditions. (1 death)	34.
	Total	<u>301.</u>

D. K. COWAN,
Medical Officer, West Falkland.

APPENDIX II.

Dental Report.

King Edward VII Memorial Hospital,
Stanley,
26th January, 1938.

The Honourable,
The Senior Medical Officer.

Sir,

I beg to submit my report for the year 1937. On my arrival here - February, 17th, 1937, I found that there had been no dental surgeon in the Colony for approximately nine months, as a result of which work was much in arrears. The Dental mechanic had been doing surgical work during that period - a state of affairs I deprecate because the public do not get an efficient treatment. Also it is illegal. A tendency to come to the Dental Surgeon for urgent treatment only was evident at first, but it is my earnest hope that this trait is being and will be overcome, so that a desire to come every three months for routine inspection and treatment is manifest.

In May, during the Coronation festivities and holidays much time was devoted to Camp people, about ninety being treated. The last week of May was set aside for an examination in detail of the dental condition of fifty school children selected for the administration of tinned milk and other adjuncts of diet in an attempt to improve their physical condition. A control group of the same number was also examined.

It occurred to me soon after my arrival that surgeries held during the normal Government working hours did not give the requisite opportunity to a large proportion of the people of attending for treatment. So it was suggested, and approved, that the surgeries on Monday and Thursday afternoon be held in the evening between 6 and 8 p.m.; and that, as Saturday mornings did not give sufficient time for the treatment of children the surgery on Wednesday afternoon be devoted to them, and be held from 4.30 p.m. to 7.0 p.m. this avoided interference with their attendance at school. These alterations have been well supported.

With the idea of stimulating interest in Dental Topics, a "Lecture-Concert" in conjunction with the Folk Dance Society, and Limerick and Essay Competition were held early in October. The last two were for the best Limerick on a subject in connection with teeth; and on the best Essay on the subject of 'What I know about my teeth' the children being divided up into age-groups; while my lecture embraced general Dental Hygiene, stressing the advantage of regular visits to the dental surgeon, with special reference to children. These, I think, were quite successful.

On Tuesday, November, 16th, I left Stanley for a tour of the West Falkland and Pebble Island taking Mr. Turner as mechanic, and materials and instruments necessary for all dental treatment. The matter of transport for this material is a costly matter and rather a problem on occasion. A Report has already been submitted concerning this tour. I returned to Stanley on Thursday the 16th of December, 1937. I would suggest that a 'Travelling Clinic' Equipment be obtained and a small permanent surgery be established on the West Falkland.

The dental condition of the Colony is most interesting. While there are no facts in support of my theory as yet, I think that the apparent poor state of the teeth among the people is due in the most part to neglect. The incidence of caries in the children examined in May was about 9% higher than that of the children in the United Kingdom. Very few of them took any regular care of their teeth. I would suggest that a course of oral hygiene be given every year in conjunction with the Education Department. It is only by teaching the the children the elements of this that one can hope to improve the dental condition of the future generations.

The theory that lack of Calcium, Phosphorous and Sunlight, coupled with malnutrition, are the basic causes of decay through the faulty tooth structure so produced seems to me to have no clinical support. I note only a familial tendency to malformation of teeth, and I will submit statistics in support or against my view at a later date. There is however too under development of the maxilla and mandible, and delayed eruption of the teeth, but I cannot say as yet whether it is greater than normal.

With regard to tooth structure, I have specimen teeth in stain, and also dry and wet specimens unstained from which it is hoped to obtain sections. A report will be submitted when this is completed.

It seems quite possible that there is some factor here conducive to acidity of the mouth, or that some persons are more susceptible than others. This factor may assist inimical bacterial growth in the mouth, and clinical decomposition of the teeth. Recently I have commenced to use filling materials containing copper as this has shown signs of resisting the action of caries in its neighbourhood. I will also endeavour to produce evidence for or against this at a later date. A study of the saliva has been begun but so far no conclusive results are available.

I was informed on arrival here, and I believe I have read that haemophilia was common. In so far as it affects dentistry, and it is most easily demonstrable at dental operations - I can entirely refute it. I have seen many hundreds of patients this year and I have had no cases of haemophilia. There are one or two families with a tendency to bleed - but never for more than two days and then only a slow ooze. I have noticed however that so-called "bleeders" have a habit of sucking the wound, and so not allowing a clot to form.

Much work requires doing still in dental matters, and many avenues of enquiry investigated before the dental problem here is under control, and I hope to do as much as possible during the next two years.

I have the honour to be

Sir,

Your obedient servant,

W. H. R. STILL,
Dental Surgeon.

Statistical Return of Dental Work done.

1937.	February 18th to March 31st.	Children seen.	No. of Visits.	New Patients.	Old Patients.	Total Patients.	General anaesthetics.	No. of Extractions at G.A.'s.	Minor operations.	No. of working days.	Free.						Paid for.						Total.					Value of work done. £ s. d.
											Extractions.	Fillings.	Scalings.	Dentures.	Repairs.	Cost. £ s. d.	Extractions.	Fillings.	Scalings.	Dentures.	Repairs.	Value of work. £ s. d.	Extractions.	Fillings.	Scalings.	Dentures.	Repairs.	
	April	59	296	94	56	149	1	18	2	22	79	67	11	4	0	42 15 6	134	27	3	10	2	48 3 0	213	94	14	14	2	90 18 6
	May	139	263	113	42	155	7	93	0	22	118	26	0	5	1	32 12 6	294	26	10	20	1	112 10 0	412	51	10	25	2	146 2 6
	June	85	281	56	80	135	6	89	3	25	130	95	2	4	1	49 9 6	122	37	1	11	8	54 19 0	252	132	3	15	9	104 8 6
	July	45	249	43	66	109	4	41	3	27	66	51	3	0	0	22 19 0	77	57	5	14	4	66 16 0	143	108	8	14	4	89 15 0
	August	68	278	45	85	130	1	13	2	26	124	127	5	16	3	42 11 0	37	13	3	2	5	59 13 6	161	140	8	18	8	102 4 6
	September	134	403	73	95	168	2	12	3	26	127	111	5	6	1	68 16 0	95	47	6	16	12	74 11 0	222	158	11	22	13	143 7 0
	October	132	375	78	114	192	7	80	0	26	151	118	9	5	1	78 3 6	141	67	10	18	5	75 11 0	292	185	19	23	6	153 14 6
	November	25	176	78	16	94	1	6	1	23	68	13	2	2	0	20 0 0	195	46	10	13	6	66 16 0	263	59	12	15	6	86 16 6
	December	30	132	65	27	92	0	0	0	20	50	28	0	0	1	11 14 6	186	39	9	13	2	57 9 6	236	67	9	13	3	69 14 6
	Total for year	788	2830	747	590	1337	40	429	14	251	1007	710	42	45	9	£405 13 6	1318	392	64	125	50	£686 2 6	2425	1102	106	170	59	£1071 16 0

APPENDIX III.

RETURN OF DISEASES AND DEATHS, KING EDWARD VII.
MEMORIAL HOSPITAL. 1937.

Disease.	In Patients.	
	Total Admissions.	Deaths.
I. INFECTIOUS AND PARASITIC DISEASES.		
11. Influenza	6	
23. Tuberculosis of the Respiratory System. ...	2	
25. Tuberculosis of Vertebral column	1	
27. Tuberculosis of other bones and joints ...	4	
35. Venereal diseases	1	
Glandular fever	1	
II. CANCER AND OTHER TUMOURS.		
46. Cancer of the digestive and peritoneum ...	1	1
53. Cancer of other organs or sites	1	
III. RHEUMATISM, DISEASES OF NUTRITION, ENDOCRINE GLANDS, OTHER GENERAL DISEASES.		
56. Muscular Rheumatism	2	
56. Rheumatic Fever	1	
Rheumatoid Arthritis	1	
59. Diabetes	3	
Glycosuria	2	
66. Diseases of the thyroid and parathyroid glands	1	
69. Obesity	1	
VI. DISEASES OF NERVOUS SYSTEM.		
81. Progressive muscular atrophy	1	
82. Cerebral haemorrhage	1	
85. Epilepsy	4	
87. Other diseases of central nervous system ...	2	
Neuralgia	2	
88. Diseases of the eye and adnexa	1	
89. Diseases of the ear	1	
VII. DISEASES OF THE CIRCULATORY SYSTEM.		
Myocarditis	2	1
95. Other diseases of the heart	2	
99. Diseases of arteries	1	
101. Diseases of the lymphatic system	2	
VIII. DISEASES OF RESPIRATORY SYSTEM.		
106a. Acute bronchitis	1	
b. Chronic bronchitis	2	
107. Broncho-pneumonia	2	1
109. Pneumonia	2	1
112. Asthma	2	
114. Other diseases of the respiratory system ...	3	
IX. DISEASES OF THE DIGESTIVE SYSTEM.		
115:1 Diseases of the teeth & gums	35	
Adenoids	1	
<i>Carried Forward</i>	95	4

Disease.	In Patients.	
	Total Admissions.	Deaths.
<i>Brought Forward</i>	95	4
Diseases of the tonsils	8	
Other diseases of buccal cavity and pharynx ...	1	
117a. Ulcer of the stomach	2	
b. Ulcer of the duodenum	2	
118. Dyspepsia and other diseases	1	
120. Enteritis	6	
121. Appendicitis	12	
122. Hernia	7	
126. Biliary colic	1	
127:1 Cholecystitis	1	
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.		
130. Acute nephritis	1	
132. Albuminuria	4	
133b. Other diseases of the kidney	1	
134. Urinary calculi	1	
136b. Diseases of urethra	1	
137. Disease of prostate	8	1
138. Circumcision	2	
139b. Diseases of the uterus	7	
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.		
141. Abortion	1	
147. Toxaemia of pregnancy.	3	
150:3 Childbirth	30	
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.		
151. Carbuncle, boil	2	
152. Cellulitis	5	
153. Other diseases of skin and adnexa	3	
XIII. DISEASES OF BONES AND ORGANS OF LOCOMOTION.		
155. Other Diseases of the bones	1	
156. Diseases of the joints:	3	
XIV. CONGENITAL MALFORMATIONS.		
157. Congenital Malformation	1	
XV. DISEASES OF EARLY INFANCY.		
158. Congenital debility	1	
XVII. VIOLENCE.		
Concussion	2	
Fractures	2	
XVIII. ILL-DEFINED DISEASES.		
Ill-defined causes	8	1
<i>Totals</i>	223	6

APPENDIX IV.

RETURN OF DISEASES AND DEATHS, IN THE OUT-PATIENTS DEPARTMENT AND ON THE DISTRICT DURING THE YEAR 1937.

Disease.	Out Patients.	District.	
	First Visits.	First Visits.	Deaths.
I. INFECTIOUS AND PARASITIC DISEASES.			
Vaccinations against small-pox ...	64	1	
7. Measles		1	
11. Influenza	24	96	
27. Tuberculosis of bones and joints ...	2		
35. Venereal diseases	1		
42. Diseases due to helminths	6	3	
43. Mycoses		1	
II. CANCER AND OTHER TUMOURS.			
52. Cancer of the skin		1	
54. Non-malignant tumours	1		
III. RHEUMATISM, DISEASES OF NUTRITION & ENDOCRINE GLANDS & OTHER GENERAL DISEASES.			
Rheumatism	18	7	
59. Diabetes	3		
69. Other general diseases	3		
IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.			
71. Anaemic Chlorosis	15	2	
VI. DISEASES OF THE NERVOUS SYSTEM.			
81. Diseases of the spinal cord		2	
82. Cerebral haemorrhage		1	
82c. Paralysis	2	1	
84. Other forms of insanity	1		
85. Epilepsy	3	1	
87. Other diseases of the central nervous system	9	2	
87b. Neuritis	3		
88. Diseases of the eye and adnexa ...	122	4	
89. Diseases of the ear	29	4	
VII. DISEASES OF THE CIRCULATORY SYSTEM.			
91. Acute endocarditis	1		
92. Chronic endocarditis	4	4	
93. Disease of the myocardium	2	2	
95. Other diseases of the heart	2	2	
99. Diseases of the arteries	15	2	
100. Diseases of veins	2		
101. Diseases of the lymphatic system ...	1	3	
102. Abnormalities of blood pressure ...	1		
103. Other diseases of the circulatory system ...	2		
<i>Carried Forward</i>	336	158	—

Disease.	Out Patients.	District.	
	First Visits.	First Visits.	Deaths.
<i>Brought Forward</i>	336	158	—
VIII. DISEASES OF THE RESPIRATORY SYSTEM.			
104. Diseases of the nose	35	12	
105. Diseases of larynx	1		
106. Acute Bronchitis.	50	20	
106b. Chronic bronchitis	4		
110. Pleurisy	1	5	
112. Asthma	7	5	
114. Other diseases of the respiratory system ...	3	3	
IX. DISEASE OF THE DIGESTIVE SYSTEM.			
115. Disease of the teeth and gums	46	1	
Adenoids	2		
Diseases of tonsils	44	15	
Other diseases of buccal cavity and pharynx	10	2	
118. Dyspepsia and other diseases	37	10	
120. Diarrhoea	34	10	
121. Appendicitis	9	1	
122. Hernia	3	2	
123. Constipation	4		
126. Biliary colic		2	
X. NON-VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.			
130. Acute nephritis		1	
132. Albuminuria	3	1	
133a. Pyelitis	1	2	
b. Other diseases of the kidney	3	1	
134. Urinary calculi		1	
135a. Cystitis	5	3	
137. Diseases of prostate		3	
138. Circumcision	7	1	
139b. Diseases of the Uterus	11	4	
139c. Diseases of the breast	1		
139d. Other diseases of the female genital organs		1	
XI. DISEASES OF PREGNANCY, CHILDBIRTH AND THE PUERPERAL STATE.			
143. Accidents of pregnancy	1		
Ante-natal Examinations	25		
XII. DISEASES OF THE SKIN AND CELLULAR TISSUE.			
151. Carbuncle, Boil	6	1	
152. Cellulitis	33	4	
153. Other diseases of skin and adnexa ...	101	5	
XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION.			
155. Diseases of the bone	1		
<i>Carried Forward</i>	824	256	—

Disease.	Out Patients.	District.	
	First Visits.	First Visits.	Deaths.
<i>Brought Forward</i>	824	256	—
Diseases of other organs of locomotion ...	19	7	
XIV. CONGENITAL MALFORMATIONS.			
157. Congenital Malformations		1	
XVI. OLD AGE.			
162. Old Age		1	
XVII. VIOLENCE.			
Dog Bite	1		
179. Accidental poisoning		1	1
181. Accidental burns	15	2	
194. Blows, Injuries	137	22	
XVIII. ILL-DEFINED DISEASE.			
Ill-defined causes	14	5	
<i>Totals</i>	1,010	296	1

Subsequent visits to the Out-Patients Department ... 2,084.

Subsequent visits on the District 652.

APPENDIX V.

A Committee consisting of the Senior Medical Officer, the Superintendent of Education, and the Agricultural Adviser was appointed by His Excellency the Governor in 1936. Early in 1937 this Committee submitted its final report.

MEMORANDUM ON NUTRITION.

In connection with the nutrition of the population in the Falklands I have the honour to submit the following memorandum :

I. Present knowledge of nutrition in the Colony.

Until quite recently, no one appears to have made any precise observations on nutrition but succeeding medical officers have recorded their impressions. Twenty years ago Dr. A. H. B. Pearce said the physique of the people was decidedly below average but attributed it to inbreeding, isolation and confinement. In 1927 Dr. Deane considered the children showed a lack of physical development but made no attempt to explain the condition he observed. Dr. Reford however, in 1928 was sent here, more or less as an expert, and he states that the children were of AVERAGE physical development. All agreed that the condition of the teeth was bad.

During the past few years medical opinion considered the diet of the people quantitatively adequate but lacking balance and too closely restricted to mutton, bread and tea. In a general way the doctors attributed the prevalence of upper respiratory infections, appendicitis and constipation to the above, but they were apparently unable to point out specific deficiencies in the diet except in respect of calcium which they considered to be lacking both in the soil and the people.

It is a striking fact that over the past 20 years no doctor has been able to recognize any of the great food deficiency diseases such as nutritional oedema, pellagra, beri-beri, scurvy, xerophthalmia, or night-blindness. Rickets, which one would normally expect, has only been diagnosed in one or two cases.

The general condition of a population is always reflected in its vital statistics and I submit the attached graphs as being of some relevant interest to the subject under discussion. It is seen that the population except for the war years is largely the same in 1934 as it was in 1914; that the birth rate exhibits a steady swing about the mean, which lies at 20 per 1000 as against 17 for the United Kingdom; and that the death rate is likewise steady at about 10 as against 12 for the United Kingdom.

To summarize our present knowledge therefore of nutrition in the Falklands one can say that there is a steady population with a very favourable birth and death rate comparatively speaking; that no nutritional disease exists; and that the diet is quantitatively adequate although in its quality and variety there is room for improvement. Finally there is a well founded impression that the Falkland Islander as a physical type tends to be below par and Dr. Cheverton in 1936 using the Von Pirquet height and weight ratio was able to show that 42.7% of the children in the Government School were below the normal of this formula.

II. Practical measures taken in the past to apply scientific knowledge to the improvement of nutrition.

The scientific knowledge of nutrition has no past. Even 30 years ago nutritional experts were preoccupied with calories and the quantitative adequacy of the national diet. The newer knowledge of nutrition is very new indeed and it is therefore not surprising that very few practical measures in the Falklands were taken or even appeared necessary, *nor to the lay mind do any appear necessary today!* Starvation does not exist.

III. Measures, studies and researches in connection with nutrition which appear desirable in this Colony.

(1) *Health Education.* The newer knowledge of nutrition has radically altered our views on diet and our objective is no longer the production of "fat sheep" but rather the realization that capacity, efficiency and resistance to infection may be impaired by qualitative starvation. In other words, the sort of person you are depends a good deal on what you have eaten! This conception needs to be taught. An idea must be accepted before it can be put into practice.

The following work in this direction, subject to approval is being arranged :

- (a) Short course - coronation week to Camp Cooks, itinerant teachers, etc., explaining to these people why certain dietetic habits are important and why we advocate them.
- (b) Public lectures through the year as opportunity presents with the same objective as in (a). The newer knowledge of nutrition is a fascinating subject if properly presented.
- (c) Purchase or rental of moving pictures dealing with public health problems :
 - i. Building an A1 Nation - Public propaganda.
 - ii. A Brush with the enemy - Dental Health Education.
 - iii. Preparation of dried milk - Public propaganda.

(2) *The introduction of fundamental changes in the diet of the Colony.*

Milk. In as much as the scientific and chemical evidence in favour of milk as an item of diet is overwhelming it is proposed to introduce milk more generally into the diet of the people. Milk is already in use but it does not occupy the secure position enjoyed by tea, for instance.

To this end, and as an initial step there has been worked out by the Superintendent of Education and myself the following plan :

- (a) That group in the Government School considered by Dr. Cheverton to be below par (42%) will be offered each school day at least one pint of milk.
- (b) Parents of these children will be appealed to *and invited* to co-operate by giving consent to permit their under nourished child to partake of the Government issue of free milk.
- (c) In co-operation with the domestic science classes, and if possible under their supervision, the milk will be attractively prepared in various ways and administered during *two* periods each day.
- (d) The milk will be served in a church hall adjacent to the school and conveniently situated.
- (e) The plan involves the following expenditures
 - i. Rental for the use of the hall.
 - ii. Provision of a diet kitchen if present facilities are inadequate.
 - iii. Provision of utensils to serve the milk.
 - iv. Provision of the required milk.

Nothing in the plan requires legislation nor does it commit the Government to any serious financial outlay. The primary object is to make the growing generation "milk conscious" *i.e.* propaganda. Incidentally it may serve to benefit a malnourished group.

I wish to make the following points about providing the necessary milk in this Colony.

- (a) The supply of milk from petty owners is (i) inadequate (ii) low in fat content (iii) produced under dirty conditions and (iv) all these conditions are likely to resist efforts at improvement over a period of years - (The A/A's report indicates that efforts in the past have not been a conspicuous success).

- (b) In the light of present knowledge no M. O. H. could recommend such milk to anyone and if standards were enforced it is not unlikely that every cow owner in Stanley would be forbidden to sell milk.
- (c) *But* there is a single answer to the difficulties outlined in the preceding paragraphs.

Evaporated unsweetened full cream milk is available here at six pence per quart just half the cost of local fresh milk.

Evaporated milk is just milk with water removed, replace the water and one has fresh milk from grass fed English herds, sterile, safe and with a content known to two places of decimals. Thus a typical local brand contains when diluted with water Fat 4.48% Protein 3.32% Sugar 4.8%. The local milk according to analysis by my predecessor runs from .8% to 2.2% Fat (3% being the legal minimum). Such evaporated milk is an excellent source of Vitamin A - a good source of Vitamin B and contains a variable amount of Vitamin D as does any milk. (Sherman's Chemistry of Food and Nutrition).

To summarize, evaporated milk is good milk, it is a safe milk and a cheap milk compared with local prices. It can be bought from local dealers in precisely the quantity required and provides a source ready to hand for implementing the scheme we have put forward. *Meanwhile the Government is committed to nothing more than sixpence per quart.*

Cod Liver Oil. Basic research establishing the value of cod liver oil in sunless temperate zones has been very carefully done elsewhere. There is no need to repeat it in the Falklands but as a piece of propaganda in the interests of preventive medicine it is proposed to take the same under-nourished group in the public school. Each child's parent will be invited to permit the daily administration of, say, half an ounce, *free*.

I shall detail a nurse to attend at the school at 4 p.m. to give the oil. It is felt that it will be more impressive given this way, will place no extra burden on the teaching staff and will not interfere with school work.

The cost will be roughly a half penny per dose. If viosterol or a similar preparation is given the cost would be a little greater but the medicine is easier given.

The group would be examined periodically to note the results if any.

Green Vegetables. In order to encourage greater production of leafy vegetables, the Agricultural Department has taken over certain gardens where methods will be demonstrated and seedlings will be distributed. I understand this measure is already under way. In this Colony every man is his own gardener and it is well that such is the case, so that it does not appear that a market would find either sellers or buyers.

Eggs. Fresh eggs are expensive and too little used. It may be that natural conditions preclude their cheap production but the local situation will be examined by the Agricultural Department in the coming months. It appears that new stock will need to be introduced, and proper feeding and handling methods taught.

Fish. As a source of iodine and to add variety fish should be consumed in greater quantity. In this connection I note

- (a) Fish are plentiful in the sea.
- (b) Fishermen operate irregularly so that there is either a feast or a famine.
- (c) There is no fish market or facilities for storing *i.e.* fish corrals.

With organization, the Hospital and a group of private individuals could undertake to buy a daily quantity of fish, the Government could guarantee to buy a minimum amount of fish - in short a dependable market could be created in a small way. At the same time a contract could be made with some person or persons to catch fish regularly. The fish eating habit would then gradually become established. The financial loss to the Government if the scheme failed would be I should think quite small; if it succeeded even moderately it would carry itself.

(3) *Medical Agencies affecting Nutrition.*

- (a) The Infant Welfare Clinic supervises the nutrition of the child from birth to school age. This type of clinic is now well established and meets weekly. This is perhaps the best teaching agency we have.
- (b) *Pre-natal clinic.* It is proposed to set up such a clinic and strive to get as many expectant mothers as possible under supervision. This involves attending to the diet of only 40 to 50 women if every one came to the clinic.
- (c) *Adult welfare clinic* – For other reasons besides nutrition it is proposed to set up a weekly clinic for well people. The value of an annual health audit can be taught so that people will become interested in keeping well not in getting better from illness.

4. *Research.* The medical department in the past has made few precise observations relating to nutrition. I have therefore asked Dr. Henderson to examine the blood picture of a random sample of the population in Stanley with a view to discovering the haemoglobin level. I have asked Mr. Still the Dental Surgeon to carry out certain histological studies on the structure of carious teeth with a view to discovering whether or not this very prevalent condition is related to malnutrition or is hereditary.

There has been some evidence to suggest that the soil and the people lack calcium. I shall, as soon as the laboratory is equipped, carry out estimations of blood calcium on patients known to or suspected of being "bleeders".

Finally it is hoped to carry out certain epidemiological studies on the Stanley population principally to find out exactly what the people do and do not eat and to work out any relationship diet may have to the incidence of infection.

To summarize Part III:— The measures and studies etc., which appear desirable include :

- (a) Health education – Adult teaching by lecture, demonstration and ante-natal and infant welfare clinics – Adolescent instruction in the school by domestic science classes and didactic teaching.
- (b) The attempt to introduce fundamental changes in the dietary of the people by means of a free issue of milk and Cod Liver Oil to under-nourished school age children; by encouraging the increased production of green vegetables and eggs, through the agency of the Agricultural Department and by providing a reliable supply of fish for Port Stanley.
- (c) The provision of certain medical agencies; pre-natal, infant and adult welfare clinics and dental services.
- (d) Research :
 - (1) Observations as to the incidence of anaemia.
 - (2) Observations on blood calcium.
 - (3) Histological studies of dentition.
 - (4) Dietetic Survey in Port Stanley.

IV. Consequences which improvements in nutrition would have on the economy of the Falklands.

Sheep farming being the only considerable industry it is not to be expected that improvements in nutrition would have very great effect on the economy of the Colony. However indirectly any improvement in resistance to infection or increase in physical or mental capacity would be reflected in a more efficient and prosperous community.