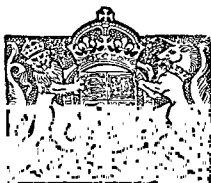


ANNUAL REPORT
OF THE
PUBLIC HEALTH COMMISSIONER
WITH THE GOVERNMENT OF INDIA
FOR 1936



Volume II

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ABBREVIATIONS.

A.	.	.	Admissions.
A. D. H.	.	.	Assistant Director of Hygiene.
A. D. P.	.	.	Assistant Director of Pathology.
Av, c s.	.	.	Average constantly sick.
A. H. Q.	.	.	Army Head Quarters.
B. M. H.	.	.	British Military Hospital.
B. Os.	.	.	British Officers.
B O. Rs.	.	.	British Other Ranks.
C.	.	.	Cases.
C. M. %	.	.	Case mortality per cent.
D.	.	.	Deaths.
D. A. D. P.	.	.	Deputy Assistant Director of Pathology.
D. A. H.	.	.	Disordered Action of the Heart.
G. S. W.	.	.	Gun-shot Wounds.
I. O. Rs.	.	.	Indian Other Ranks.
M. Os.	.	.	Medical Officers.
N C. Os.	.	.	Non-Commissioned Officers.
O. C.	.	.	Officer Commanding.
P.	.	.	Primary.
P. A.	.	.	Per annum.
P. M.	.	.	Per mille.
P. U. O.	.	.	Pyrexia of uncertain origin.
R.	.	.	Revaccinations.
U. K.	.	.	United Kingdom.
V. D.	.	.	Veneral diseases.
V. D. H.	.	.	Valvular diseases of the heart.
%	.	.	Per cent.

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SECTION I.

ON THE HEALTH OF THE BRITISH ARMY IN INDIA.

(From the Director of Medical Services in India.)

1. General health statistics of the British Army in India during the year 1936 are given in the table below :—

TABLE 1.

1936	Average strength	Admissions.		Deaths		Invalids sent home		Invalids discharged from service.		Average constantly sick.	
		No	Ratio per 1,000.	No	Ratio per 1,000.	No	Ratio per 1,000.	No.	Ratio per 1,000.	No.	Ratio per 1,000.
Officers	2,269	973	428.8	14	6.17	52	22.92	...	...	31.54	13.90
Other Ranks	52,059	30,301	582.1	129	2.48	572	10.99	...	...	1,399.21	26.88
Numbers of Nursing Service	...	86	...	1	...	5	...	...	...	3.61	...
Women	4,055	1,369	337.6	13	3.21	44	10.85	...	...	46.54	11.48
Women confinement	...	779	...	1	...	...	...	...	...	29.99	...
Children	6,192	2,077	335.4	83	13.40	20	3.23	...	...	64.18	10.36
Royal Navy	...	40	...	2	...	...	...	...	...	2.30	...
Royal Air Force	2,065	964*	466.6	9	4.36	45	21.79	...	...	43.75	21.19
R. A. F. Women and Children.	...	61	...	2	...	...	...	...	...	1.80	...
R. A. F. Women confinement.	...	19	...	...	...	...	...	...	...	0.72	...
Royal Indian Marine	...	1	...	...	...	...	...	...	...	0.05	...
Boys of L. R. M. School	...	436	...	...	...	...	...	...	...	17.69	...
Sanitar.	...	...	...	...	...	...	...	...	...	...	...
Others	...	...	...	...	...	...	...	...	...	...	...
Men	...	377	...	22	...	...	...	...	...	13.35	...
Women	...	354	...	4	...	15	...	...	...	9.82	...
Women confinement.	...	191	...	1	...	...	...	...	...	3.81	...
Children	...	184	...	5	...	3	...	...	...	3.98	...

* Includes 350 and 12.51 respectively for R. A. F. cases treated in quarters

The ratios per 1,000 for admissions, deaths and invalids, amongst officers and other ranks for the quinquennial periods 1910-14, 1920-24, 1925-29 and 1930-34 with those for 1935 and 1936 are given separately for purposes of comparison in the following table :—

TABLE 2.

Periods.	Ratio per 1,000.					
	Admissions.		Deaths.		Invalids.	
	Officers.	Other Ranks.	Officers.	Other Ranks.	Officers.	Other Ranks.
1910-14	567.5	567.2	5.14	4.36	16.30	7.03
1920-24	676.7	791.9	6.71	5.24	20.99	18.91
1925-29	589.9	619.4	5.25	2.90	17.44	13.50
1930-34	128.6	604.7	6.60	2.64	20.09	8.88
1935	470.1	567.1	6.74	2.55	24.25	6.90
1936	423.8	582.1	6.17	2.48	22.92	10.99

Officers.

2. 428.8 per 1,000 of strength were admitted to hospital during the year, compared with 470.1 in 1935.

The principal causes of sickness were :—

Dysentery	92	Fractures	34
Malaria	71	Contusions	22
Sandfly fever	64	Gastritis	22
Diarrhoea	60	Sprain and strain	20
Jaundice	55	Appendicitis	20
Cellulitis	55	Concussions	19
Tonsillitis	43	Dengue	16

There were 14 deaths giving a ratio of 6.17 per 1,000 compared with 16 and 6.74 per 1,000 in 1935.

The causes of deaths were injuries (other than G. S. W.) 8 cases, G. S. wound, 3 and Extra dural middle meningeal hemorrhage, Intrathoracic tumour, Retroperitoneal cyst each one case

The average constantly sick in hospital was 31.54 or 13.90 per 1,000 of strength as compared with 37.61 or 16.89 in the previous year

A total of 1,229 or 541.6 per 1,000 of the strength were treated as out patients

Soldiers.

3 There were 30,301 admissions to hospital, giving a ratio per 1,000 of 582.1 as compared with 567.1 in 1935 and 580.5 in 1913.

The principal causes of admission to hospital showing the increase or decrease compared with the previous year were :—

	1936	Increase or decrease.		1936.	Increase or decrease.
Malaria	3,017	+ 62	Boils	473	..
Cellulitis	2,297	— 4	Pharyngitis	462	+ 42
Sandfly fever	1,758	— 164	Impetigo contagiosa	390	+ 19
Tonsillitis	1,516	+ 22	Appendicitis	385	— 38
Gonorrhoea	1,340	— 17	Gastritis	357	+ 50
Dysentery	1,233	— 253	Constipation	339	+ 7
Sprain	866	— 41	Coryza	318	+100
Diarrhoea	859	+ 125	Jaundice	279	— 74
Bronchitis	834	+ 77	Wounds	277	— 26
Fractures	761	+ 51	Dengue	244	— 18
Contusion	697	+ 80	Soft chancre	241	—116
Influenza	646	+ 86	Syphilis	214	—101
Common cold	580	+ 238			
Synovitis	520	— 58			
Tinea	498	+ 205			

8 Diphtheria "Carriers" were admitted to hospital.

There were 129 deaths or 2·48 per 1,000 of the strength compared with 134 or 2·55 per 1,000 in 1935.

The most important causes of mortality were :—

Local injuries (including 18 Gun shot wounds)	31
Pneumonia	21
General injuries	19
Infectious diseases	18
Digestive diseases	17
Circulatory diseases	14

There were 572 or 10·99 per 1,000 of the strength sent home as invalids compared with 363 or 6·90 per 1,000 in 1935.

The principal causes of invaliding to the United Kingdom were :—

	1936.	Increase or Decrease.		1936	Increase or Decrease.
Mental diseases, other than schizophrenia	67	+34	Epilepsy	17	+ 4
			Deafness	16	+15
Pulmonary tuberculosis	63	+28	Diseases of bronchi and bronchioles	15	+ 5
Diseases of joints	39	+18	Valvular disease of the heart	13	+ 3
Injuries, other than fractures	32	+11	Deformities of limbs	12	— 1
Schizophrenia	31	+11	Diseases of the urinary organs	12	— 5
Fractures	27	+18	Tuberculosis, other than pul- monary	9	..

The average number constantly sick in hospital was 1,399·21 or 26·88 per 1,000 of the strength, compared with 1,407·76 or 26·74 per 1,000 in 1935.

The diseases chiefly responsible were :—

	Average constantly sick.		Average constantly sick.
Gonorrhoea	172·51	Appendicitis	25·60
Malaria	112·13	Sprain and strain	25·79
Cellulitis	81·85	Soft chancre	25·64
Dysentery	59·68	Synovitis	21·87
Fractures	57·53	Contusions	21·71
Tonsillitis	37·80	Diarrhoea	20·01
Sandy fever	34·57	Syphilis	19·56
Bronchitis	29·57		

A total of 83,746 men, or 1,608·7 per 1,000 of the strength were treated as out-patients. The average daily number under treatment was 1,208·82 or 23·22 per 1,000.

The combined ratio of constantly sick in hospital and under treatment as out-patients was 50·10 per 1,000 of the strength, compared with 47·42 in 1935.

The actual loss to the Army in India in working days was 512,111 due to sick in hospital and 442,428 due to sick in barracks, making a total of 954,539 days compared with 911,229 in 1935

The admission and death ratios per 1,000 of the strength for all causes and certain important diseases for stations with a strength of 1,000 and upwards compared with all India, are shown in the following tables :—

TABLE 3.

Table showing total admissions and deaths ratios per 1,000 of the strength for all causes and certain important diseases for stations with a strength of 1,000 and upwards compared with all-India.

Stations with total admission ratios higher than all-India.

		Farhawal.	Meerut.	Nowshera.	Lahore.	Sialkot.	All-India.
	Strength.	1,278	1,709	1,162	1,112	1,259	52,059
All Causes.	{ A	923.0	737.3	728.1	634.0	884.6	582.1
	{ D	6.28	1.70	2.58	4.50	2.38	2.48
	{ Av. c s.	40.29	43.55	25.23	35.19	23.08	26.88
Malaria	{ A	148.9	62.0	98.4	31.5	6.4	58.0
	{ D	...	...	...	...	...	...
Sandy fever	{ A	298.5	2.3	194.5	26.1	30.2	0.06
	{ D	...	...	...	...	...	...
Enteric group of fevers	{ A	2.4	1.8	...	1.8	3.2	1.5
	{ D	...	...	...	...	0.78	0.06
Dysentery	{ A	35.3	45.1	7.7	17.1	15.1	24.6
	{ D	...	...	...	...	...	...
Diarrhoea	{ A	16.5	31.6	21.5	15.3	38.1	16.5
	{ D	...	...	...	...	...	...
Influenza	{ A	1.6	15.2	4.3	13.5	6.4	12.4
	{ D	...	...	...	...	...	...
Pneumonia (Lobar and Lobular)	{ A	7.9	4.7	6.9	6.3	2.4	3.5
	{ D	2.06	0.59	0.86	0.90	...	0.38
General diseases	{ A	42.4	39.2	22.4	62.1	27.8	33.5
	{ D	...	...	...	...	...	...
Minor septic diseases	{ A	60.5	49.2	69.7	48.6	57.2	59.5
	{ D	...	...	...	...	...	...
Local injuries	{ A	53.4	70.8	73.1	63.5	81.8	61.8
	{ D	...	1.17	0.86	...	...	0.59
Heat stroke	{ A	...	...	...	1.8	2.4	0.2
	{ D	...	...	...	...	...	...
Heat exhaustion.	{ A	...	0.6	...	2.7	2.4	0.6
	{ D	...	...	...	...	0.79	0.7

A.—Admissions.
D.—Deaths.

Av. C. S.—Average constantly sick.

TABLE 3—contd.

Table showing total admissions and deaths ratios per 1,000 of the strength for all causes and certain important diseases for stations with a strength of 1,000 and upwards compared with all-India.

	Strength.	Stations with total admission ratios lower than all-India										All-India.
		Pooná.	Razmak.	Jhans.	Rawal- pind.	Jubbil- pore.	Luck- now.	Milow	Secunde- rabad.	Banga- lore.	Rail- khet.	
All causes	{ A. D. Av. C. S.	2,377 565.8 39.65	1,062 555.6 28.25	1,108 537.9 21.24	2,441 527.7 21.93	1,399 526.1 24.30	2,216 523.0 25.80	1,479 513.9 27.41	2,594 485.0 21.77	1,047 484.2 27.25	1,177 449.4 30.18	52,059 582.1 26.88
Malaria	{ A. D.	70.0 ...	43.3 ...	67.7 18.1	103.2 34.8	61.6 7.1	20.8 28.4	81.1 ...	3.1 39.3	10.5 3.8	18.7 ...	58.0 0.06
Sandfly fever	{ A. D.	...	...	...	...	...	...	...	...	...	...	...
Enteric group of fevers	{ A. D.	1.7 ...	...	1.8 0.90	1.2 ...	...	0.9 ...	1.4 ...	...	...	...	1.5 0.06
Dysentery	{ A. D.	30.2 ...	17.9 ...	20.8 ...	15.6 ...	23.6 ...	24.8 ...	17.6 ...	22.7 ...	22.7 ...	51.8 ...	24.6 ...
Diarrhoea	{ A. D.	12.2 ...	15.1 ...	22.6 ...	5.3 ...	18.6 ...	30.2 ...	18.4 ...	13.5 ...	1.0 ...	17.0 ...	16.5 ...
Influenza	{ A. D.	3.8 ...	13.2 ...	1.8 ...	27.4 ...	...	7.2 ...	6.4 ...	...	...	37.4 ...	12.4 ...
Pyæmia (Lobar and lobular).	{ A. D.	0.8 0.42	5.6 1.9	4.5 12.6	0.1 29.1	4.3 49.6	4.1 36.4	4.7 13.5	1.5 18.9	...	4.2 5.1	3.5 39.5
Veneral diseases	{ A. D.	...	...	...	...	...	...	...	...	70.7 ...	...	...
Minor septic diseases	{ A. D.	48.8 ...	88.5 ...	77.6 ...	53.3 0.41	39.3 ...	44.2 ...	49.4 ...	44.3 ...	64.0 ...	59.7 ...	59.5 0.02
al injuries	{ A. D.	45.0 ...	41.4 ...	50.5 ...	45.5 2.05	72.2 ...	48.7 0.45	61.5 ...	66.5 0.39	61.1 ...	45.9 ...	61.8 0.59
stroke	{ A. D.	...	...	...	...	...	...	...	...	...	...	...
asthma	{ A. D.	...	...	...	...	...	...	...	...	...	...	...

A.—Admissions.

D.—Deaths.

Av. C. S.—Average constantly sick.

jelly 2 ounces gave promise of good results and screw cap aluminium containers for this preparation are to be issued to troops in Northern Command for trial.

Experiments have been made with Malarial as a substitute for the usual army antilarval mixture of crude oil and kerosene. The experiments have not been conclusive and will be extended next year.

Dengue and Sandfly Fever.

5 Incidence of Dengue and Sandfly Fever among British troops from 1932 to 1936.

TABLE 6.

		1932	1933	1934	1935	1936.
Dengue	{ Admissions . .	432	644	360	262	244
	{ Ratio per 1,000 . .	7.8	11.7	6.6	5.0	4.7
Sandfly fever.	{ Admissions . .	2,262	2,252	1,973	1,922	1,758
	{ Ratio per 1,000 . .	40.9	40.9	36.2	36.5	33.8

Dengue—The incidence of this disease shows a still further decrease this year, there having been 244 cases compared with 262 in 1935.

The stations with the highest incidence were .—

	Actual.	Ratio per 1,000
Madras	46	60.4
Secunderabad	40	15.4
Calcutta	36	38.2
Benares	27	190.1
Mingaladon	21	23.5
Karschi	18	14.6

There was an increase of sandfly fever at Secunderabad during the year

although present, were few in number in the station.

The complete absence of dengue among troops in Karachi last year has not been sustained. Although there were 18 cases among British troops in the station, there was however only one case among Indian troops.

septic diseases, next in importance to malaria.

Northern Command bears the greater part of the brunt of this disease as in former years, Landikotal and Peshawar being the stations particularly affected. Efforts to prevent sandfly fever are at present necessarily confined to measures such as whitewashing, spraying and repairs to building until such

quitos

Pyrexia of Uncertain Origin.

6. There has been a steady decrease of these cases in the last five years. Four of the cases which occurred in Northern Command, where sandfly fever is prevalent, and two cases in Kamptec might equally well have been

diagnosed sandfly fever. One other case occurring in Northern Command, was originally diagnosed as Rheumatism.

The following figures illustrate the decrease in the use of the term
P U O —

1932	.	.	.	.	106
1933	.	.	.	.	61
1934	.	.	.	.	46
1935	.	.	.	.	37
1936	.	.	.	.	10

Oriental Sore.

7 At the end of 1935, the number of cases of oriental sore in Quetta, where the disease is endemic, were found to be increasing and early in 1936 the disease began to assume epidemic proportions among the local population in city and cantonment. In April 1936, Dr Smith, Director of the Pasteur Institute, Kasauli, was sent to Quetta under the orders of the Government of India to carry out an investigation and to advise on measures for prevention. Two men from each large and one from each small military unit in Quetta were detailed to work under Dr Smith and the resources of the District Laboratory were placed at his disposal.

Although conditions prevailing after the earthquake in May 1935 might be considered favourable for increased breeding of sandflies in the piles of debris, no such evidence was forthcoming and the irregularity of infection among units in relation to proximity to the ruined city did not suggest infection from sandflies breeding in the ruins. The chief predisposing factor, when infection under abnormal

Over 600 cases of all classes were treated by the medical specialist at Quetta. Included in this number were 34 cases among British troops in Quetta. In addition there were 26 cases in a battalion of British troops in Secunderabad which had left Quetta at the end of 1935.

f curettage
then being
the above

was used latterly in the Indian Military Hospital. After curettage, tannic acid was dusted on the wound to minimise bleeding and, for the sake of economy, sterile vascline was used instead of elastoplast with equally successful results.

In very extensive cases, especially those with multiple sores on the face sodium antimony tartrate was given intravenously starting with $\frac{1}{4}$ grain and increasing on alternate days by $\frac{1}{4}$ to $1\frac{1}{2}$ grains up to 10 to 15 grains. Trivalent antimony compounds were found to be more effective than the pentavalent.

Another method of treatment which was commented on favourably by the Surgical Specialist, Lahore District, was to clean the sore with a hydrogen peroxide dressing for two days and then dress it daily with a special copper sulphate and lactic acid solution. This solution is made by dissolving 120 grains of copper sulphate in 2 lbs. of distilled water and then adding 120 minims of pure lactic acid.

Few ladies developed oriental sores and the modern practice of lavish use of cosmetics probably deterred sandflies from biting. Dogs were found to be infected mainly round the nose, eyes and ears, and also many dogs were found with scars resembling healed oriental sores.

Fevers of the Typhus Group.

6.

TABLE 7.

	1932		1933.		1934		1935.		1936.	
	Admns	R. per 1,000	Admns	R. per 1,000	Admns	R. per 1,000	Admns	R. per 1,000	Admns	R. per 1,000.
British troops	11	0.2	23	0.4	52	1.0	19	0.4	44	0.8
Indian troops	10	0.1	19	0.2	51	0.4	45	0.4	47	0.4

ineteen
Owing
without

As in
previous years the cases fall into three main groups on their agglutination
reactions. Of 108 cases (including other categories than R. O. Rs. and I. O.

Rs.) only

titres of

British—

British—9, Indian—7; unclassified British—6, Indian—1.

The distribution by commands was as follows —

	Northern Command		Eastern Command.		Southern Command		Burma District.	
	Brit	Ind	Brit.	Ind	Brit	Ind.	Brit	Ind.
Proteus OXK	21	4	6	1	0	2	2	2
Proteus OX 19	2	15	5	3	2	14	0	0
Proteus OX 2.	0	0	5	3	4	4	0	0
Unclassifiable	1	2	3	3	1	2	1	0
Total	24	21	10	10	7	22	3	2

Seasonal distribution was similar to 1935, the Proteus OXK group being mainly restricted to the autumn months—e.g., 20 of the 21 Proteus OXK cases (British) occurred in the Simla Hill stations in August and September. The Proteus OX 19 group of cases were more or less distributed throughout the year. - In Northern Command the only months in which no cases occurred were March, April and July. In Southern Command no cases were reported in February, March and June

stations based on
in seasonal
ses occur in
stations in which District or Brigade Laboratories are located. In 1936 only 9 cases seemed to occur in stations at any distance from a military laboratory. The very few cases reported among the civil population in India annually is probably similarly due to the lack of laboratory facilities for fever cases among the mass of the population. In a large number of the milder cases in the military population diagnosis without repeated agglutination tests would not have been possible.

No cases occurred in Western Command during the year.

The cases were classified according to severity :—

	B. proteus ONK.	B proteus OX 19.	B proteus OX2
	Per cent.	Per cent.	Per cent.
Very mild	2.6	17.5	25
Mild	44.7	47.5	43.7
Moderately severe	28.9	30.0	6.2
Severe	13.1	5.0	25
Very severe	10.5	..	..

Symptoms were as described in the report for the previous year, *e.g.*, varying from pyrexia with headache to the severe toxic case with nervous

absolutely diagnostic of either of the three groups. In the past the rash as regards character and distribution was given some importance in this respect, but increasing experience has shown this not to be the case, *e.g.*, among the proteus ONK cases in 1936 the limbs were involved in 6 out of nine cases in which the rash was maculopapular in type, and in 2 of these the face was also involved. "Peeling" also took place during convalescence in a few cases. Temporary dilatation of the heart is recorded among certain of the cases, and one medical officer found that in several of his cases there was a marked fall in blood pressure in the acute stages both systolic and diastolic. Wasserman tests are being carried out on an increasing number of these cases annually. In 1936 56

early in the disease and sometimes only in convalescence—*e.g.*, of 7 good tests (British OX 19), in 6 the Wasserman tests was strong positive, and in 1 positive — of 14 good tests (Indian OX 19) 9 were ++, 2+, 2+ —, and 1 negative throughout

Six agglutination tests which exemplify most of the points in this connection, 2 typhoid, 2 typhus, 2 enteric group may be of interest.

(1) *Typhoid fever* (very mild)—10 years service. 8 times inoculated T. A. B. Bact. typhosum isolated from blood on 5th day.

Symptoms—Pyrexia 10 days; cough chief symptom. Patient did not look ill after 2nd day

Day after onset of disease	Titres of agglutination.					
	6th.	10th.	16th.	20th.	23rd.	27th.
Bact. typhosum H.	175	500	1,200	3,500	2,500	3,000
Bact. paratyphosum A. H.	25	0	0	0	0	0
Bact. paratyphosum B. H.	70	25	135	150	125	125
Bact. typhosum O.	0	50	50	50	25	0
B. proteus ON2.	25	25	25	25	25	25
B. proteus ON19	25	50	25	25	0	0
B. proteus ONK.	125	250	250	250	500	500

(2) *Typhoid fever* (very severe).—7 years service. 3 times inoculated T. A. B. Bact. typhosum isolated from blood on 5 occasions. Pyrexia 30 days, toxæmia, delirium, death.

Day after onset of disease	Titres of agglutination.			
	12th	13th	16th	20th.
Bact. typhosum H	70	70	175	275
Bact. paratyphosum A. . . .	50	55	70	100
Bact. paratyphosum B	175	175	175	175
Bact. typhosum O.	0	0	0	70
B. proteus OX2	0	0	0	0
B. proteus OX19	35	50	70	225
B. proteus OXK	80	150	225	300

(3) *Typhus fever* (very mild case during small epidemic in Subathu).—British soldier—10 months in India. 1 inoculation T. A. B. Pyrexia 15 days, no other symptoms except headache, pain neck and legs; no rash; blood cultures, urine and stool examinations negative to enteric group.

Day after onset of disease	Titres of agglutination						
	8th	10th	14th	26th	33rd	41st	54th.
Bact. typhosum A.	60	60	135	1,200	1,000	900	250
Bact. paratyphosum A. H . . .	110	135	100	150	100	50	125
Bact. paratyphosum B. H. . . .	85	100	85	125	160	45	70
Bact. typhosum O	50	25	0	250	0	25	50
B. proteus OX2	0	0	0	0	0	0	0
B. proteus OX19	50	70	70	50	50	50	50
B. proteus OXK.	0	110	2,500	3,500	6,000	3,500	1,400

(4) *Typhus fever* (severe case, during small epidemic in Subathu).—British soldier, 1 year in India. 1 inoculation T. A. B. Pyrexia 22 days, headache, injected conjunctivæ, laryngitis, drowsy, dilated heart, delirium 10th day, marked copper coloured mottling trunk and limbs 7th day, which lasted 8 days.

Blood culture, stools and urine examinations negative.

Day after onset of disease.	Titres of agglutination.								
	10th	12th.	15th.	19th.	26th.	35th.	42nd.	61st	
Bact. typhosum H.	0	50	45	45	30	125	25	25	
Bact. paratyphosum A. H. . . .	85	1,000	1,100	1,500	900	1,000	700	250	
Bact. paratyphosum B. H. . . .	22	45	30	100	75	50	40	40	
Bact. typhosum O.	0	0	0	0	0	0	250	0	
B. proteus OX2.	0	0	0	0	0	0	0	0	
B. proteus OX19.	0	0	0	0	0	0	0	0	
B. proteus OXK.	0	17	50	35	50	50	35	35	

(5) *Enteric group* (mild case).—Indian soldier. 18 months service. 2 inoculations T. A. B. Mild pyrexia 12 days, no other symptoms. 3 blood cultures negative.

Day after onset of disease.	Titres of agglutination.				
	5th.	9th.	15th.	23rd.	26th.
Bact. typhosum H.	225	110	225	300	55
Bact. paratyphosum A. H. . . .	20	250	600	500	60
Bact. paratyphosum B. H. . . .	17	225	200	150	145
Bact. typhosum O.	0	0	0	0	0
B. proteus OX2.	0	0	50	50	0
B. proteus OX19.	0	25	125	50	25
B. proteus OXK.	0	25	0	25	0

(6) *Enteric group* (moderately severe case).—British soldier. 17 months in India. 1½ inoculations T A B. (.5 c. c. T. A B. 5 days before onset). Pyrexia for 23 days, headaches marked, no other prominent symptoms. Blood culture, faeces and urine examinations negative.

Day after onset of disease	Titres of agglutination.				
	3rd.	8th.	11th.	18th.	21st.
Bact. typhosum H.	250	1,000	2,500	1,000	1,000
Bact. paratyphosum A. H	50	550	1,000	500	500
Bact. paratyphosum B H	50	1,000	1,000	400	500
Bact typhosum O	0	0	0	50	50
B. proteus OX2	0	0	0	225	250
B. proteus OXI9.	0	0	25	200	50
B. proteus ONK.	50	35	85	200	27

There were 2 deaths among the *Proteus* OXK group, 1 from double Lobar pneumonia and 1 from Broncho-pneumonia, also 1 death from toxæmia among those Indian cases which could not be classified owing to a general rise in agglutinins.

As in previous years, any evidence of "bites" by an insect vector was conspicuously lacking. In 1 case a small sore on the foot with lymphangitis in the leg was the cause of the patient's admission to hospital, and in 1 of the Burma cases the patient stated that he had removed a tick from his body some days before admission.

Digestive Diseases.

9. The steady decrease in these diseases during the past few years has not been sustained, there having been 5,362 admissions compared with 5,014 in 1935.

	1935.	1936.
Tonsillitis	1,494	1,516
Diarrhoea	734	859
Pharyngitis	420	462
Appendicitis	423	386
Gastritis	307	357
Constipation	332	339
Piles	195	205

Tonsillitis still heads the list of digestive diseases and it is fourth on the list of diseases causing admissions to hospital. If tonsillitis and pharyngitis, with which it is closely associated, are taken together they constitute the third most important cause of sickness.

Enteric group of fevers.

10. The incidence of enteric fevers among British and Indian troop during the years 1934-36 is shown in table 8.

Enteric Fevers.

TABLE 8.

		British											
		1934				1935				1936			
		Actuals		Ratio per 1,000		Actuals		Ratio per 1,000		Actuals		Ratio per 1,000	
		A	D	A	D	A	D	A	D	A	D	A	D
Typhoid		27	5	0.5	0.09	27	3	0.5	0.15	14	2	0.3	0.04
Para.	A	8		0.1		13		0.2		13		0.2	
Para.	B											0.02	
Para.	C	1		0.02						1		0.02	
Enteric group		55	2	1.01	0.04	66	1	1.3	0.02	47	1	0.9	0.02
Total		91	7	1.7	0.13	106	9	2.0	0.17	76	3	1.5	0.06

		Indian											
		1934				1935				1936			
		Actuals		Ratio per 1,000		Actuals		Ratio per 1,000		Actuals		Ratio per 1,000	
		A	D	A	D	A	D	A	D	A	D	A	D
Typhoid		78	11	0.66	0.09	35	8	0.5	0.07	29	3	0.2	0.03
Para.	A	45		0.38		46	3	0.4	0.03	14		0.1	
Para.	B	4		0.03		1		0.01		1		0.01	
Para.	C	2		0.02									
Enteric group		93	4	0.8	0.03	62	2	0.5	0.02	33	2	0.3	0.02
Total		222	15	1.9	0.13	164	13	1.4	0.11	77	5	0.7	0.04

In 1934 the incidence was the lowest ever recorded, but again this record has been broken by the even greater reduction in 1936, which is particularly striking among Indian troops. It is possible that a portion of the reduction among enteric group cases, and Para-typhus and typhoid and the ratio per 1,000 for typhus fever (Indian) is identical with that in 1934. The numbers of deaths in both British and Indian from enteric fever are also

is being eliminated. The main element in the T. A. B. Research Institute, Kasauli,

In the 1935 report attention recently ambulant infections among

On the onia from which he was also recovering. He then had a severe relapse and eventually died as the result of a perforation of the caecum. Agglutination results in this case showed no rise in either TH, or T. O. agglutinins. The second case died of toxæmia also during a relapse.

The comparative incidence, death rate and case mortality among British soldiers with under one year's service, and over one year's service in India is given in table 9.

TABLE 9.

	Under one year in India						Over one year in India.					
	Strength	Cases		Deaths		Case mortality %	Strength	Cases		Deaths		Case mortality %
		Actual.	Ratio per 1,000	Actual.	Ratio per 1,000			Actual.	Ratio per 1,000	Actual.	Ratio per 1,000	
Average for 1929-1933	10,632	30.2	2.84	7.2	0.63	23.84	44,914	32	0.71	3.6	0.03	11.24
Average for 1934-1935	10,900	7	0.63	2	0.18	28.57	43,623	20	0.47	4.5	0.11	22.5
1936	9,711	6	0.62	..	..	..	42,343	8	0.19	2	0.05	25

The six-monthly periods after inoculation at which infection occurred are shown in table 10.

TABLE 10.

	Total Enteric group of fevers			Typhoid cases bacteriologically proven.		
	0-6 months	6-12 months	12-18 months	0-6 months	6-12 months	12-18 months
	Per cent.	Per cent.	Per cent.	Per cent.	Per cent.	Per cent.
1929	32.2	50.5	17.5	31.2	58.3	10.4
1930	37.6	43.6	18.8	32.7	46.6	20.7
1931	33.4	35.4	29.2	34.4	34.0	30.2
1932	33.7	38.0	28.2	30.9	45.4	23.6
1933	32.0	44.0	24.0	25.0	45.8	29.2
1934	33.7	35.1	31.1	40.0	24.0	36.0
1935	30.0	43.3	26.6	21.7	43.4	34.7
1936	32.3	40.0	27.7	15.4	30.8	53.6

For the total enteric group of fevers the percentages are similar to previous years for the 0-6 months period, but for the 6-12 months period the percentages are lower, and for the 12-18 months period the percentages are higher.

The results obtained by agglutination tests are similar to those obtained in previous years both as regards "H" and "O" agglutination, e.g., inconclusive. Comparative tests are being carried out on as many cases as possible in all military laboratories, between Dreyers technique and that of Felix with standardised T. O. suspensions. Sufficient data are not yet available to base definite opinions on except that in the great majority much higher titres of "O" agglutination are shown to be present by the latter method.

TABLE 11.

Fevers of Enteric Group—Inoculation state among British other ranks—1936.

Group	Strength.	Actuals.		Ratio per 1,000.		Case mortality per cent.
		Cases.	Deaths.	Cases.	Deaths.	
Protected	50,615	65	3	1.3	0.06	4.62
Unprotected	643	11	..	17.1	..	..

TABLE 12.

Incidence of fevers of the enteric group among protected and unprotected British Officers, Other Ranks, Women and Children.

		Average strength	Admissions.					Total.
			Typhoid	Para. A.	Para. B.	Para. C.	Enteric group.	
British officers (British and Indian service)	Protected	4,236	..	3	.	.	..	8
	Unprotected	286	1	.	.	..	4	
British other ranks.	Protected	50,653	13	10	1	1	40	76
	Unprotected	645	1	3	.	.	7	
Women	Protected	5,631	1	1	.	.	1	3
	Unprotected	330	4	..	..	..	2	
Children	Protected	6,394	4	..	..	..	..	10
	Unprotected	1,096	5	..	..	..	1	

Dysentery, Diarrhoea, Colitis and Amoebic Hepatitis.

11. *Incidence of Dysentery, Diarrhoea, Colitis, and Amoebic Hepatitis during 1933—1936.*

TABLE 13.

Dysentery.		Diarrhoea.		Colitis.		Total		Amoebic Hepatitis.		Liver abscess.	
Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.
1933	1,369	24.9	842	15.3	53	1.0	2,264	41.2	36	65	7.13
1934	1,380	25.5	811	14.9	42	0.8	2,242	41.2	52	96	5.09
1935	1,536	29.2	734	13.9	19	0.4	2,289	43.5	24	46	4.03
1936	1,283	24.6	859	16.5	49	0.9	2,191	42.1	15	29	2.04

During 1936 the admission ratio for dysentery decreased by 4.6 per 1,000 as compared with 1935 and is the lowest for some years. This is however offset by an increase in admissions for diarrhoea and colitis leaving a decrease of 1.4 per 1,000 for the whole group of diseases. Reduction also occurred in admissions for amoebic hepatitis, and only two cases of liver abscess were admitted during the year.

Cases were as usual sporadic and no epidemics occurred.

The fly season corresponded as usual with the greatest incidence of the cases and in Northern Command it was noticed that units arriving recently in stations after train journeys produced small crops of cases. The fact that this group of diseases is under peace conditions largely passed on from the insanitary conditions prevailing among the civil community was stressed in the 1935 report.

The striking range of the fly and the absence of any reliable method of

of dysentery bacilli
the fact that the
1936 still as high
per 1,000 for the
enteric group of fevers.

The extent of the infection among the local population may be gauged by the fact that during the routine examination of menials prior to employment the majority of pathogenic bacilli discovered are mainly of the Flexner and Shiga group.

The percentage of dysentery cases diagnosed bacillary, bacillary exudate, protozoal and clinical dysentery throughout India during any one year now varies very little.

TABLE 14.

	1934.		1935.		1936.	
	Ad- missions.	Per- centage.	Ad- missions.	Per- centage.	Ad- missions.	Per- centage.
Dysentery Protozoal	163	11.74	158	10.3	138	10.8
Dysentery bacillary (bacteriologically proved)	513	36.93	637	41.5	592	46.1
Dysentery bacillary Exudate (typical Exudate, but no organism isolated)	383	27.57	353	23.0	288	22.4
Dysentery Clinical	330	23.76	388	25.3	265	20.7

The ratio per 1,000 of the above groups in Commands is shown in table below. It will be seen that as regards ratios of Bacillary and Protozoal infections there is little difference between command figures, except in Northern Command where amœbic infections were less prevalent than in the other three Commands. In the main there is little variation between Districts also.

Protozoal 5.8%, Bacillary dysentery 51.14%, Bacillary exudate 24.78%, Dysentery clinical 18.20%.

Dysentery—Admission ratio per 1000.

Command	Bacillary.	Bacillary exudate.	Protozoal	Clinical.	Total.
Northern	6.9	4.0	1.8	8.1	20.9
Western	12.5	5.0	2.5	15.3	35.3
Eastern	13.8	6.5	3.3	4.0	27.7
Southern	14.0	6.3	2.3	0.8	23.4

... isolated from cases also show little or there has been a general increase year the numbers of the B. sonne strains identified by Boyd have become recognised in military laboratories and the scheme for identification of dysentery groups brought into being by him has come into general use the so-called "inagglutinable Flexner bacilli", which were reported on annually in laboratory reports of military laboratories, have to all intents and purposes ceased to exist.

TABLE 15.

Analysis of Organisms isolated from Specimens submitted to Laboratories during the last four years.

Year.	Non-mannite fermenting.			Mannite fermenting.				Percentage Unclassified.
	Shiga.	Schmitz.	Total.	Andrews' type.	Sonne.	New types.	Unclassified.	
1933	253	80	333	260	198	315	91	1,564
1934	191	95	286	221	202	313	27	1,463
1935	230	106	336	298	292	392	19	1,492
1936	261	131	392	314	337	383	9	1,543

Tropical abscess of the liver and hepatitis.

12. There were 51 admissions for hepatitis of which 15 were considered as definitely amœbic in origin, and 19 in which the cause of the hepatitis was doubtful. There were only two cases of tropical abscess both of whom recovered.

Cholera.

13. A mild epidemic of 5 cases occurred in the Sergeants' Mess, Fort William, Calcutta, at the end of May. Examination of food, vegetables, ice and minerals did not reveal any source of infection but on examination of the members and staff of the Sergeants' Mess it was found that a Drum-Major was a cholera carrier. Vibrios morphologically and bio-chemically resembling *V. cholerae* were also isolated from a sergeant, two of the Indian staff of the mess and an Indian in the mineral water factory. On serological investigation these vibrios were proved not to be true *V. cholerae*.

Stool examinations of the remaining members and staff of the mess and mineral water factory gave the following rather striking results:—

One sergeant—2 Indian cooks—dysentery bacillary exudate.

One sergeant—indefinite exudate.

One Indian waiter—vegetative forms of *E. histolytica*.

One sergeant and one Indian wash-up boy—*Tænia Solium*.

Three Indians in mineral water factory—varied helminthic infestations.

Cysticercosis.

14. One case occurred at Trimulgherry and was invalided to England. The man was a pork butcher in England before joining the Army. On reporting sick for a minor injury of the hand he was found to have subcutaneous nodules in various parts of his body and he stated that these had been present for seven months. Subsequently he had an epileptiform fit.

In addition to this case of cysticercosis 17 cases of epilepsy were invalided home during the year without any association with cysticercosis being discovered.

There were 17 cases of *Tænia Solium* infestation treated during the year, compared with 24 during the previous year.

Venereal Diseases.

15.

TABLE 16.

Year.	Gonorrhœa	Syphilis.	Soft. chancres.	Total.
1932	26.1	6.0	5.5	37.7
1933	23.2	4.9	5.0	33.4
1934	25.2	4.5	4.1	34.1
1935	25.8	6.0	6.6	38.8
1936	25.7	4.1	4.6	34.4

Owing mainly to a reduction in Burma the admissions for venereal disease are lower than last year and slightly lower than the average of the last five years.

Burma District still supplies the majority of cases although there has been a steady decrease in that District in the last three years.

The treatment of gonorrhœa followed the usual routine lines with potassium permanganate (1 in 12,000—20,000). In chronic cases with "morning gleet" irrigation with 1/4000 zinc sulphate solution gave good results. Polyvalent vaccines received from Woolwich are still under trial and so far are favourably reported on. -

The specialist in Dermatology, Lahore District, in an endeavour to cut short the duration of chronic cases of gonorrhœa by raising the body temperature used intravenous injections of T. A. B. vaccine. Results were disappointing, possibly because the selected cases were all very chronic, and also because the height or duration of the increased body temperature could not be gauged for any given dose of T. A. B. Vaccine as patients reacted differently, influenced possibly by their previous inoculation history.

The average number of days in hospital for gonorrhœa was 47.12. The percentage of relapse cases was 23.3

Dmeleos vaccine has again been reported on very favourably for cases of soft chancre and it has now been placed on an "as required" scale of issue.

Diphtheria.

16 The number of cases occurring among British Army during 1936 were —

Officers=3

Other Ranks=66.

Other Ranks' Wives=6.

Other Ranks' Children=58.

Q A I M N S =1

The outbreak in a battalion on the N. W. Frontier, reported last year continued until February of this year, six cases occurring in January and one in February

Although throat swabs were taken of the whole battalion during the previous month further swabbing in January produced six more virulent carriers.

The necessary materials having been obtained by air mail from England, Schick-testing and immunisation of positively reactors were carried out, 197 (27% of the battalion strength) being immunised. Three months after immunisation previous positively reactors were again Schick-tested but only 3% gave positive reactions

This outbreak demonstrates the value of Schick-testing and immunisation for, in spite of extensive swabbing and isolation of carriers, it was not until immunisation had been completed that further cases ceased to occur.

Immunisation was also carried out among school children at Kirkee as several carriers were discovered. The non-virulent carriers were sent to their homes but the virulent carriers were isolated in hospital. In spite of gargling, fresh air and tonsillectomy, 4 children remained carriers up to 4 months.

Cerebro-spinal fever.

17 One case occurred among British troops in Rawalpindi. This case was severe and resulted in death in spite of energetic treatment with Group I antimeningococcus serum given intravenously, intrathecally and intramuscularly

There were 16 cases with 4 deaths among Indian other ranks and 4 cases with 3 deaths among Indian followers.

Of 14 strains of meningococci cultured 11 were found to belong to Group I (types I or III). The remaining 3 strains were not typed.

Smallpox.

18.

TABLE 17.

Half yearly state of vaccination of British troops and families.

	31st March.	30th September.
British Officers	98 96	98 73
British Other Ranks	99 65	99 69
Women and Children	93 09	98 09

There were 7 cases of small-pox during 1936, compared with 8 in 1935. Four of the cases were among British Other Ranks, one was a British Officer and the remaining two were children of British soldiers. One child aged 4½ years had been vaccinated eight times but always unsuccessfully. The other, aged 11 months, had not been vaccinated as the mother refused. Both of the children and one of the British Other Ranks, who had been re-vaccinated in 1933, died.

All the cases occurred between the months of February and May and no two cases occurred in the same station.

Respiratory diseases

19. The number of admissions for respiratory diseases, other than pulmonary tuberculosis, was 1,210 or 23 2 per 1,000 being practically the same as in 1935.

There were 132 cases of lobar pneumonia with 14 deaths compared with 164 cases and 19 deaths in 1935. Out of 51 cases of broncho-pneumonia there were 6 deaths. There were 834 admissions for bronchitis and 90 for pleurisy.

Tuberculosis.

20.

TABLE 18.

	Pulmonary tuberculosis.		Tuberculosis other than Pulmonary.
	Actuals.	Ratio per 1,000.	Actuals.
Admissions	57	1.1	9
Deaths	1	0.02	..
Invalids	63	1.21	9

There were 3 more cases and 2 less deaths but 28 more invalids for pulmonary tuberculosis than in 1935. The cases were distributed throughout India, although Southern Command gives a somewhat higher ratio of infection than the other Commands. There was also no higher incidence in any one unit.

Areolar Tissue and Local Injuries.

21. Although there has been a decrease of 512 or 9·3 per 1,000 in admissions for cellulitis this disease is still second only to malaria in the causation of admissions to hospital. There were 473 admissions for boils, this figure being the same as in 1935.

Sprains, contusions and abrasions constituted the majority of local injuries for which there were slightly fewer than in the previous year. Local injuries accounted for 31 deaths, this being one less than in 1935.

Experiments were carried out in certain stations in Northern Command during the hot months with a view to of "salt" to replace chloride deficit reduce the number of skin infection indicated that increased salt intake was thought to be of benefit, but they were of so general a nature that no safe conclusions could be drawn.

Effects of Heat.

22. There were 13 cases of heat-stroke with 3 deaths, and 39 cases of heat-exhaustion with 1 death. The number of cases of heat-stroke is 2 more than in 1935 but there were only half the number of cases of heat-exhaustion.

As in previous years the majority of cases occurred in Northern Command. The hot weather was not quite as severe, nor did it last quite as long as the previous year. In Northern Command the normal hot weather moves to the hills were not interrupted by civil disturbances. Attempts were made in this Command to reduce the number of hours spent by the men in their barrack rooms, as it is considered that long hours without employment in dull barrack rooms, during the hot weather, have a very definite adverse psychological effect on the troops. Reveille was held at a later hour to enable men to get more sleep in the cool early hours of the morning. Work was carried on out of doors, in the shade as much as possible, during the morning. The hot dinner was also postponed until the evening and a light mid-day meal given instead.

Another innovation was to send troops out into bivouac for 24 hours in the middle of the hot weather, under medical supervision. No ill effects resulted, and the troops liked it as a relief from the monotony of barrack life in the hot weather.

Mental Diseases.

23.

TABLE 19.

	1932	1933	1934	1935.	1936.
Total Mental Diseases	65	193	132	168	145
Schizophrenia	17	26	20	23	20
Feeble-mindedness	11	10	9	6	13
Manic depressive psychosis. (Acute mania and depression)	13	9	8	7	11
Hysteria	50	68	51	62	54
Neurasthenia	67	40	24	24	18
Anxiety neurosis		6	9	14	15
Psychasthenia	9	5	6	5	5

NOTE.—Before 1933 psychoneuroses were shown as nervous diseases.

There were 145 cases or 2·8 per 1,000 admitted for mental disease, compared with 168 cases or 3·2 per 1,000 in 1935. Of these admissions 46 were invalided to the United Kingdom and an additional 46 remaining from 1935 were also invalided during the year.

The diseases shown in the above table are those constituting the majority of admissions for mental diseases.

Hysteria was the chief mental disease but 75% of the cases were returned to duty. One case was admitted twice for hysteria and subsequently returned to duty on both occasions but was later re-admitted as a case of manic depressive psychosis.

Soldiers with less than 6 months in India were, as might be expected with their changed conditions of life, most affected. The admissions for mental diseases according to length of service in India were:—

	Per 1,000.
Under six months	20.04
Six months to 1 year	2.15
1 to 2 years	3.08
Over 2 years	2.18

The high percentage of cases under six months' service in India is made up by hysteria 10, anxiety neurosis 2, neurasthenia 1, temperamental instability 1, feeble minded 2, schizophrenia 1, manic depressive psychosis 1

HYGIENE.

Military Food Laboratory, Kasauli.

24.

TABLE 20

Summary of work done during 1936.

Source of samples.	Received.	Accepted.	Rejected.	Percentage of rejections.
<i>On tender or for acceptance</i>				
From overseas	322	218	98	29.5
Indian products	1,153	617	335	29.1
Grains from grains depots	3,121	3,037	67	2.1
Wheat from Government controlled mills	620	620	..	..
Bran from other than controlled mills	1,134	978	156	13.8
Ghi from Ghi Heating Centre, Agra	3,824	3,823	1	0.03
Stocks purchased without reference to the Military Food Laboratory	181	143	11	6.1
From R. I. A. S. C. stocks.	1,476	1,439	8	0.5
From units for advice	1,227	909	190	15.5
Total	13,058*	11,784	863	6.6

Specially prepared ascorbic acid tablets were analysed and found to contain ample ascorbic acid for the prevention and cure of scurvy. Storage tests of these tablets are still in progress.

A new specification for meat extract has been produced in place of essence of beef to provide a true meat extract with a high proportion of meat and a low percentage of salt.

* In 411 cases further samples were called for.

Early consignments of a particular brand of tinned milk appeared to be blown but the contents of the tins were found to be sterile and in good condition. The air in the tins did not differ from atmospheric air. Representation to the manufacturers resulted in improved packing and there was no further complaint.

Supplies of rice from Burma continued to be unsatisfactory and large stocks were condemned. The Officer-in-charge supplies, Rangoon, underwent a course of instruction at the Military Food Laboratory in September and since his return to Burma rice supplies have improved.

In September an outbreak of 200 cases of malarial fever occurred among Indian troops stationed at Minga. The quality of the rice supplies was suspected and further cases occurred.

Analysis of the particular supply of rice showed it to be superior in quality to normal supplies but to be in bad condition, having a bad smell and being full of weevils and maggots. Supplies of this rice were destroyed and godowns in which it had been stored were disinfected.

In November, fish cakes made from fish in camp and cakes made from fish were not available and a sample tin from the same pack was reported to be sound by the Military Food Laboratory. Eventually it was considered that there may have been one bad tin or adulteration may have taken place in the make up of the fish cakes by the contractor's staff.

Succinylchloramide tablets for sterilisation of small quantities of water were tested and found to be very satisfactory. Storage tests are now being made and if the tablets are found to be sufficiently stable their issue for chlorination of individual water bottles will be considered.

Ventilation of British Troops Cookhouses—The A. D. H. & P., Northern Command, carried out experiments in Ferozepore and Multan during July to ascertain the atmospheric temperatures which had to be endured under working conditions in British cookhouses. In spite of overhead electric fans the indoor dry bulb temperatures were ten degrees higher than the outdoor and wet bulb temperatures exceeded the point at which respiration and pulse were accelerated in a sitting man.

As a result of these experiments exhaust fans have been authorised in British cookhouses in certain stations in addition to overhead electric fans.

Air Conditioning—The experiments carried out last year for air conditioning the B M H. Delhi by means of khush-khush screens and fans were considered successful. The experiments this year have been further extended to hospitals at Cawnpore, Lucknow, Jhansi and Lahore.

Quarters and Barracks—A sum of Rs. 8,84,000 was provided for improvements to existing and provision of new married quarters for British personnel in Northern and Eastern Commands.

Improvements to and provision of new dining halls and cookhouses for British troops have been made in three Commands.

Water Supplies.—Independent military water supplies have been provided at several stations and improvements to water supplies and purification methods at other stations have been carried out to the limit of available funds.

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Analysis of the particular supply of rice showed it to be superior in quality to normal supplies but to be in bad condition, having a bad smell and being full of weevils and maggots. Supplies of this rice were destroyed and godowns in which it had been stored were disinfected.

In November an outbreak of food poisoning occurred in a British battalion in camp and investigation showed that the probable cause was due to fish cakes made from tinned salmon. The actual tins of salmon from which the cakes were made were not available and a sample tin from the same pack was reported to be sound by the Military Food Laboratory. Eventually it was considered that there may have been one bad tin or adulteration may have taken place in the make up of the fish cakes by the contractor's staff.

Succinylchlorimide tablets for sterilisation of small quantities of water were tested and found to be very satisfactory. Storage tests are now being made and if the tablets are found to be sufficiently stable their issue for chlorination of individual water bottles will be considered.

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Khaisora operations.

25. Wazir force was formed and concentrated at Mir Ali on December 6th to undertake punitive operations in Waziristan as a result of attacks by tribesmen on two columns which were making a demonstration peace march in the Khaisora Valley on 25th November.

The force operated in three columns establishing camps from which punitive measures and road construction were carried out.

The average daily sick rate for the whole force, British and Indian was 1.99 per 1,000 and the ratio per 1,000 admissions to hospital for British troops was 278.3 This hospital admission rate compares very favourably with that in the Mohmand operations 1935 which was 668.8 per 1,000 but it must be remembered that the Mohmand operations were carried out at the worst time of year when malaria was rife.

Sanitation of camps was good once they were organised but in many cases, especially at Mir Ali during the concentration period there was a certain amount of disorganisation. This again points out the necessity of Sanitary Sections being among the first units to arrive in concentration areas.

Pathology.

26 The routine work in military laboratories has increased during the year 184,814 specimens were sent for laboratory examination, 24,814 more than in 1935 Work in the clinical side-rooms of the majority of hospitals also increases annually As an example 24,567 examinations were carried out in the hospital clinical side-rooms in Peshawar in 1936 Included in this number are however 17,322 blood films This type of work is similar to that carried out in side-rooms of hospital wards in England, but includes large numbers of examinations for malaria parasites, examinations of dysentery exudates, and stool examinations for cysts or vegetative forms of protozoa.

Enteric Group—As always, examinations of blood, serum, stools, etc., in connection with enteric group and typhus fever group proved a large part of the routine work in all laboratories Blood cultures reached the high figure of 4,256 and in the majority of cases were taken at a suitable period after the onset of pyrexia Percentage of contaminated blood cultures received in the laboratories varied much in different stations, but the average for all India was 16.9 per cent

In this connection a small series of experiments were carried out by Lieut.-Colonel Bridges in an endeavour to reach a conclusion as to the real effect of extraneous organisms on *Bact. typhosum* in blood culture. Blood cultures proved sterile after 10 days incubation were used for the tests, *Bact. typhosum* being the specific organism, while contaminating organisms were *staph. albus* and *aureus*, *Bact. coli* and *B. subtilis*. The results were somewhat surprising particularly as regards *staphylococci* the usual contaminating organism encountered, in that, except in two cases, *Bact. typhosum* outgrew and killed the contaminating organism leaving a pure growth of typhoid bacilli *Staph. albus* was more easily killed than *Staph. aureus*. In one case the latter and *Bact. typhosum* grew harmoniously together. In one case both died out leaving the culture sterile *Bact. typhosum* and *B. subtilis* grew harmoniously together with no apparent effect on the growth of either, but in every case in which *Bact. coli* was used for contamination it outgrew and destroyed *Bact. typhosum*.

Contamination by staphylococci as a cause of negative blood culture in typhoid fever cases appears from the above to have been exaggerated. On the other hand the D. A. D. P., Lahore District, stresses the high number of contaminated blood cultures received in his laboratory, and states, "In no case has the causative organism been recovered from a blood culture which has been received contaminated in laboratory."

A perusal of many hundreds of records of cases only confirms the necessity for early and "repeated" blood culture particularly in a much inoculated population. In quite a reasonable percentage of cases a positive blood culture has been obtained from the 3rd or 4th consecutive culture while the first two or three cultures have been sterile or contaminated with staphylococci. In view of increasing experience as regards the anamnestic reactions obtained with "H" and to a lesser extent with "O" agglutination in particular in connection with the Enteric and Proteus OX groups, and the comparatively poor results obtained by stool and urine examination in the former, blood culture remains the one really satisfactory method of laboratory diagnosis. One bacteriologist suggests that his poor results from stool examination in typhoid cases may be due to the fact that in a highly inoculated and re-inoculated population frank ulceration of Peyer's patches seldom occurs with the result that fewer bacilli find their way into the bowel contents than is the case with un inoculated individuals. Certain typhoid cases are discovered annually in which a few days mild fever, and possibly a slight headache are the only symptoms, so there may possibly be something in the view, although many other factors are involved both from the hospital and laboratory side of this question.

In a country such as India where "fever cases" of unknown origin in the early stages bulk so prominently among hospital admissions the agglutination test is a mixed blessing as far as the laboratory worker is concerned. In 1936 tests up to a varying number for each case were carried out on 2,252 cases, which turned out to be due to other conditions than the enteric or typhus group. The number of organisms recovered in each test has increased during the past few

B(H), T(O),
add A(O) B(t)
laboratory, v
sometimes ev
laboratories c
titres obtain
bore agglutination tubes, and that of Dreyer in Dreyer's tubes, they have been asked to carry out as many comparative tests as possible on the same serum from enteric and typhus fever cases, and also, because of the unsatisfactory carry out comparative tests on
ic or typhus. The results will
doubt that in many cases the
end titre of agglutination is found in a far higher dilution by the Felix method than the Dreyer. Whether this will prove to be any advantage can only be shown by further experience.

A new "S. typhi" strain was reported by Lt.-Col. Poona (1935) was reported the name of Bact. Kirkee. The H. ant hat of Bact. paratyphosum B but its "O" antigen differs from that of any known organism. This organism will presumably be included in future editions of Kauffman-White scheme.

Bact. paratyphosum C was isolated from four cases, two of them being discovered during routine examinations of menials for carrier condition

Every year a number of organisms are isolated from the blood of pyrexia cases and reported as *Bact. alkaligenes* (*B. faecalis alkaligenes*). In the District Laboratory Rawalpindi alone twelve such were isolated during the year from Typhus fever cases. No relationship has ever been shown between these strains and that obtained from the national collection of type cultures, which is indeed so autoagglutinable as to be almost unmanageable. Moreover no organism isolated in India has ever been found to be identical with this. A strain from Ranikhet which produced suitable agglutinating serum and O and H suspensions was isolated in 1935 from a fever case. This strain unfortunately died, but another suitable strain was recovered in Ranikhet again during 1936. Agglutinating serum and H and "O" suspensions have been supplied to all laboratories who have been asked to keep a look out for similar strains

The results of an investigation carried out by Major H. J. Bensted in the District Laboratory, Rawalpindi, on the virulence of *B. typhosum* isolated from blood cultures were published in the R. A. M. C. Journal.

In brief he finds that—

- (1) In 100 consecutive cases 16% were of the highest virulence, 59% of medium virulence and 25% low virulence
- (2) Cases of normal clinical severity are normally produced by organisms of medium virulence. But mild or very severe or fatal cases do not show any well defined relationship in the virulence of the organisms to the severity of the disease
- (3) Virulence changes are noted similar to those found in experimental infection in mice
- (4) VI-antigen was demonstrated in all the strains from the blood.
- (5) Five "Carriers" were all found to be excreting organisms of the highest virulence

Routine examination of menials for a possible carrier condition resulted in the isolation of *Bact. typhosum* 10, *Bact. paratyphosum* A 6, *Bact. paratyphosum* C 2.

Owing to the difficulty of obtaining fluid stools from these individuals these examinations are always considered to be unsatisfactory, and results largely depend on the personal interest taken in the matter by the medical officer in charge of the hospital and laboratory

Dysentery.—Specimens from 3,767 cases were investigated during the year in the laboratories in addition to specimens from 3,290 diarrhoea cases.

Among the dysentery cases 2,355 were found microscopically to be typical exudates of Bacillary dysentery, and 1,413 to be indefinite in type. In all 13,754 bacteriological examinations were carried out on these cases. 212 were cases of amoebic dysentery and 17 were mixed amoebic and bacillary in origin. During routine examination of menials for the carrier condition the following dysentery group organisms were isolated—*B. shiga* 15, *B. flexner* 21, *B. sonnei* 11, *B. schmitzi* 1, *B. newcastle* 1, *B. enteritidis* 1. The latter bacillus is seldom encountered in dysentery cases in India, but when it is present it appears to cause a severe and protracted type of dysentery. Once such a case which was quite unresponsive for weeks to routine treatment, recovered rapidly after the administration of an autogenous vaccine.

The various types of bacilli recovered during 1936 are shown in Table 21.

TABLE 21.

Analysis of Organisms isolated from Specimens submitted to Laboratories during the last five years

Year.	Non-mannite fermenting.			Mannite fermenting.					Percentage unclassified.
	Shiga.	Schultz.	Total.	Andrews' types	Sonne	New types.	Unclassified.	Total.	
1932 . . .	384	126	510	1,007	106	126	152	1,393	10.9
1933 . . .	253	80	333	960	108	315	91	1,564	5.8
1934 . . .	191	95	286	921	202	313	27	1,463	1.8
1935 . . .	230	106	336	798	292	392	10	1,492	0.7
1936 . . .	261	131	392	814	337	383	9	1,543	0.6

Laboratories vary considerably as regards their percentage of positive isolation^c from bacillary dysentery cases. The technique in all laboratories should be identical, but the percentage of positive isolation depends as much

stations. The following results from military laboratories in Northern Command may be taken as more or less representative of the results in other commands also, some very good, mostly good, and one or two poor

TABLE 22.

Laboratory	Total cases.	Typical Bacillary exudate		Indefinite exudate.	
		Cases	Percentage positive results.	Cases.	Percentage positive results.
Peshawar	311	149	59	162	31
Kohat	120	72	75	48	50
Rawalpindi	347	199	61.3	147	17
Lahore	134	81	74	53	24.5
Razmak	112	81	82	31	41.9
Ambala	87	35	60	52	21
Sialkot	71	25	20	46	15.2
Bannu	47	27	88.9	20	50
Kasauli	33	15	100	17	70

The scheme in use in military laboratories for the classification of strains of dysentery bacilli isolated was fully described in the report for 1935. The point has been raised as to whether even this very complete scheme is sufficient without absorption tests being carried out on all the strains of the Flexner and Boyd strains isolated. It is considered however that the practical results obtained would not be commensurate with the large amount of extra work thrown on already busy laboratory staffs

ba, Bombay
the "green
B. flexner.

Of 4 infants who died in Colaba from this condition 3 were found to be *sonne* infections.

Food poisoning.—An interesting investigation was reported by Major H. J. Bensted, M.C., R.A.M.C. in this connection.

patients were all negative to organisms of the *Salmonella* group. Twenty days later samples of blood were taken from 19 of the cases. Fifteen out of the nineteen sera had appreciable titres of "O" agglutination for IV-5 group (Kauffmar various m for type *p* type read appear to contain any specific H agglutinins for *Salmonella* type typhosum

due to an intoxication associated with an infection of some food stuffs with *Salmonella* type reading

Typhus group of fevers—5,360 ccs of concentrated suspensions of *B. proteus* OX 2, OX 19, OXK, OXM were supplied by the Enteric Laboratory, Kasauli, to military laboratories in 1936.

2,101 series of agglutination tests were carried out in suspected cases the results of which have already been quoted in this report, and the difficulty in accepting any particular titre as diagnostic unless high has also been noted. In view of the power of sera, in which raised agglutinin titres to the proteus OX group are present, in fixing complement, Wassermann tests were carried out in the District Laboratory, Rawalpindi, on the sera of 200 healthy and nontyphus pyrexia cases as controls

Positive results were obtained once in a case of malaria, twice in tubercular infections and once in a case of typhoid, where the agglutinins for *Proteus* OXK rose from nil to 300. In this connection the following details are of interest. In the Command Laboratory, Poona, a small series of doubtful and false positive Wassermann results on gonorrhoea cases showing no clinical evidence of syphilis was obtained, which contrasted markedly with the clear cut negatives in such cases from other hospitals. It was found on investigation that these cases had received T.A.B. vaccine intravenously as protein shock treatment. Similar results were obtained in this laboratory from "climatic Bubo" cases receiving intravenous T. A. B. injections in 1935.

In the District Laboratory, Rawalpindi, an unusual number of bacilli resembling *B. faecalis alkaligenes* were isolated from the blood of cases ultimately diagnosed as "typhus group".

An organism was isolated from the urine of a case of typhus with *B. proteus* OX 2, OX that of any of the classical types. The patients serum agglutinated *B. proteus*

OX 2 to a titre of 1 in 1350, but showed no agglutination against the homologous organism. It was considered therefore that the organism was not concerned with the patient's illness.

The difference in the end point of agglutination titre between Dreyer's

in the Bhim Tal area, Kumaon was carried out by Captain B. Blewitt, R.A.M.C., and his report will in due course appear in the R.A.M.C. Journal.

Diphtheria—209 positive cultures of *C. diphtheriae* were obtained from throat swabs of 3,834 individuals, and 48 positive cultures from 2,431 contacts. The work of Major H. J. Bensted, M.C., R.A.M.C. in connection with an outbreak of diphtheria exhibiting cutaneous and faucial lesions which occurred in the winter of 1935-36 was referred to in the 1935 report, and has been published in the R.A.M.C. Journal of November 1936. A similar case to the above occurred in a patient from another regiment in Calcutta in 1936, *C. diphtheriae* of moderate virulence being isolated from the throat, and from an indolent ulcer on the knee of several weeks' duration.

Two nursing orderlies who attended this case both became temporary carriers. In the Rawalpindi District of 58 virulent *C. diphtheriae* strains only

As the result of six cases among children attending schools in Kirkee the noses and throats of all school children were swabbed. Diphtheroids were grown from 14 of which 8 proved to be virulent *C. diphtheriae*. All children of 3 years and upwards (126) were immunised with 1 c.c. T.A.F., three injections at 10 day intervals.

Virulence tests during the year totalled 320.

Culture of malaria parasites.—It was thought possible that owing to the

The District Laboratory, Peshawar and Rawalpindi carried out comparative tests of culture and microscope diagnosis. In Peshawar 132 cases were examined of which 89 had been diagnosed in the hospital side-rooms by slide examinations, and 21 as clinical malaria, no parasites having been seen. Thick drops were taken from each case at the time of culture. All 89 positive cases except one yielded positive cultures.

lood culture, but when microscopically examined 11 cases were parasites discovered. In only 1 case was a positive culture obtained in which parasites could not be demonstrated by the thick drop method.

In Rawalpindi results were slightly more encouraging. Culture was successful on every occasion in those cases in which parasites, no matter how few, had been demonstrated in film, and cultures were positive in cases in which parasites had only been discovered in later preparations.

On the other hand parasites were never cultivated from the blood of patients when the persistent and prolonged examination of direct blood films had failed to show Plasmodia.

The cultivation of *P. falciparum* was of interest in that in several cases large numbers of gametocytes were found at the end of 24 hours incubation in blood where the original film had only shown typical asexual trophozoites. The method employed in both laboratories was Thomson's modification of Bass and John's method.

On the whole therefore it is considered that cultivation methods would not justify their use in hospital clinical side-rooms. The tests were however of some value, in that they emphasise the necessity for thick blood examinations as well as thin and also for repeated and careful microscopic examinations in cases negative on first examination prior to the commencement of specific treatment.

Blood sedimentation tests—Apparatus for this purpose is now available in many of the laboratories, but the demands for the test vary with the interest taken in it by the specialist concerned. In Lahore sedimentation tests were carried out at the request of the latter on 62 cases of various diseases. The results showed that although sedimentation is rapid in proved tubercular cases, it was equally so in other diseases and could only therefore be regarded as a non-specific reaction. It is thought however that this condemnation is somewhat sweeping and that military laboratory workers in India might well increase their knowledge as to the utility of the test, not necessarily in diagnosis, but rather to indicate progress during disease.

Biochemical examinations, etc—These, as in former years, were restricted apart from the usual kidney efficiency tests to blood urea tests 295, blood sugar tests 268, Vanden Berg's reaction 243, and fractional test meals 458. The numbers of the two former tests has nearly doubled those carried out in 1935. 290 chemical and microscopic examinations of cerebrospinal fluid were carried out, and 238 cultures were taken for meningococci, Pea flour Tryparagar being the medium of choice.

Major D N Chakravarti, IMS in Allahabad carried out during the year very complete chemical investigations on the blood serum of heat exhaustion, and heat stroke cases. The investigations have been extended over the year 1937 also. His preliminary results are being published in the Indian Journal of Medical Research.

Wassermann tests.—The number of tests carried out in the five laboratories which carry out these tests is very similar to those recorded in 1935. In District Laboratory, Rawalpindi, over 7,000 tests were carried out during the year. Both amboceptor and antigen are now prepared in this laboratory. Kahn antigen purchased in the open market did not give good results, and is now being prepared from Bacto Beef heart. In Command Laboratory, Poona, all reagents for both Wassermann and Kahn tests are prepared in the laboratory. Preparation of suitable amboceptor for the Wassermann test has been the most troublesome as for some reason it has been difficult to maintain this reagent at a suitable titre. Eighteen months stock is kept in the laboratory of all reagents.

Considering the long distances and hot weather during which specimens are sent to these laboratories, the number received hæmolyzed or with capsules broken is few, e.g., of 6,135 posted to Rawalpindi 1.8% were hæmolyzed and 0.5 broken; of 4,241 posted to Poona 3.4% were hæmolyzed, and only 0.09% broken.

Other examinations.—These as always were very varied, but the following comprise certain of the more common examinations in the military laboratories—Bacteriological examinations of water 2,334, Preparation of autogenous vaccines (

for Lersh

sores for

cci 667, chemical examinations of milk 257. Sections were cut and reported on from 699 cases, which included the usual percentage of cysts and tumours of various kinds. One hundred and fifty examinations were carried out on brains of animals suspected of rabies, mainly dogs, but a few horses, buffaloes and jackals were also examined. Fifty-eight snakes were sent to laboratories for identification. There were 73 post-mortems carried out by D. A. Ds. P. or medical officers in-charge, Brigade Laboratories, during the year. Blood typing for purposes of blood transfusion was carried out in most laboratories; in all 899 donors were grouped. Animal inoculation is employed mainly for virulence tests on diphtheroids, now compulsory for all such isolations, and for diagnosis in suspected tubercular disease. Three hundred and twenty virulence tests for diphtheria, were carried out, the majority being by the intradermal method.

Women and Children (British Other Ranks).

27. A total of 1,369 women or 3,37·6 per 1,000 of the strength were admitted to hospital compared with 1,305 or 312·4 per 1,000 in 1935

The principal causes of admission to hospital were:—

Abortion	121	Cellulitis	47
Malaria	82	Bronchitis	39
Tonsillitis	81	Diarrhoea	36
Dysentery	48	Constipation	28
Appendicitis	47	Gastritis	24

The number of women treated as out-patients was 2,929 or 722·3 per 1,000 of the strength

In addition, 782 women were admitted to hospital for confinement. Three

preparations are now in use in all family hospitals, and it is hoped will reduce the above figures still further in future years

The total number of deaths among women was 14

There were 2,077 children or 335·4 per 1,000 of the strength admitted to hospital compared with 2,180 or 334·3 in 1935

The principal causes of admission to hospital were:—

Tonsillitis (including inflammation and hypertrophy)	348	Enteritis	43
Dysentery	195	Common cold	39
Bronchitis	145	Tænia saginata	37
Diarrhoea	125	Phimosis	35
Malaria	89	Fractures	33
Cellulitis	82	Inanition	27
Constipation	58	Jaundice	27
Diphtheria	58	Lymphadenitis	27
Pneumonia	46	Conjunctivitis	24
Chicken-pox	44	Measles	21
Influenza	43		

A total of 4,690 or 757·4 per 1,000 of the strength were treated as out-patients.

There were 83 deaths giving a ratio of 13·40 per 1,000.

The chief causes were :—

Dysentery	16	Premature birth	6
Pneumonia	10	Inanition	5
Enteritis	10	Asphyxia lvida	5
Gastritis	6	Convulsions	4

Dysentery, diarrhœa and enteritis accounted for 58·5 admissions to hospital, per 1,000 of the strength and 17·4 per cent of the total admissions.

The deaths resulting from these three diseases amounted to 34 (5·49 per 1,000) or 41·0 per cent of the total deaths from all causes

The majority of these cases are due to infections with *B. sonne* or *B. flexner* and treatment is mainly carried out on methods recommended by Colonel V. B. Green Armytage. Many of the cases are not brought to the notice of medical officers by their parents until the second or third day of illness. If all cases could be seen and treated directly after onset it is certain that the high death rate could be much reduced. The remarks made as regards source of infection for British troops apply with even greater force as regards families. All are advised to obtain milk from only government dairy sources, and to boil milk from other sources. Owing to the cheaper rate of milk from bazaar milk shops efforts in this direction are not always successful. Milk and flies are probably the main source of infection.

X-ray Examinations.

28 Summary of X-ray Examinations for the year 1936

No. of patients examined	British	15,336
	Indian	8,571
	Civilian	1,661
No. and nature of examinations carried out	Bones and Joints	{ Injury 15,277
		{ Disease 2,175
	Sinuses	789
	Teeth	1,110
	Lungs	2,634
	Heart	107
	Gastro intestinal	594
	Liver and gall bladder	360
	Urinary tract	895
	Genital tract	118
Cases in which a contrast medium was used and nature of medium	Miscellaneous	506
	Foreign body	43
	Pregnancy	34
	Barium	631
Miscellaneous information (Monthly and Annual)	Shadacol	128
	Luro-selectan B and Ipiodol	134
	No. of ordinary films used	34,990
	No. of dental films	3,943
	No. of exposures	49,879
X-ray papers in lieu of Films	No. of prints	43
	No. of screen examinations	675
		128

TABLE 23.

Surgical Operations.

29. Summary of operations carried out by Surgical Specialists during 1935.
(British).

Operations	Officers.	British Other Ranks.	All others.	Recovered.	Invalided.	Died.	Remarks.
<i>Nervous system.</i>							
Suture of ulnar nerve	..	1	..	1	..	..	
Anterior transposition ulnar nerve	..	1	..	1	..	..	
Median and ulnar neurolysis	..	1	..	1	..	..	
Injection of saline sciatic nerve	..	4	..	4	..	..	
<i>Head and neck</i>							
Trephine	..	3	..	1	..	2	
Subtemporal exploration	..	1	..	..	..	1	
<i>Eye.</i>							
Enucleation eye	..	2	..	2	..	..	
F. B.	..	5	..	5	..	..	
Excision lacrimal sac.	..	1	..	1	..	..	
Penetrating wound	..	1	..	1	..	..	
Cataract	..	1	..	1	..	..	
Panophthalmitis evisceration	..	1	..	1	..	..	
Iridectomy	..	1	..	1	..	..	
Others	..	12	1	3	..	..	
<i>Ear, Nose and Throat.</i>							
Nasal cantery	3	..	..	3	..	..	
Tonsillectomy	10	85	72	167	..	..	
Frontal sinus (Howrath)	..	1	..	1	..	..	
Retention cyst mouth-excision	..	..	1	1	..	..	
Mastoidectomy	1	8	1	7	2	1	
Myringotomy	1	2	..	3	..	..	
Polypus	..	2	..	1	..	..	1 Remaining.
Submucous resection	..	16	..	16	..	..	
Removal of salivary calculus	..	1	..	1	..	..	
Maxillary antrum	1	3	..	4	..	..	
Deflected septum	..	2	..	2	..	..	
Foreign Body in ear	..	..	1	1	..	..	
Removal of glands of neck	..	1	..	1	..	..	
Block dissection neck.	..	..	1	1	..	..	
Others	2	9	1	12	..	..	
<i>Circulatory and blood forming organs.</i>							
Varicose veins	..	27	1	28	..	..	
Varicose veins injection	4	35	12	51	..	..	
Varicose veins excision	..	2	..	2	..	..	
Ligature saphenous (vein)	..	1	..	1	..	..	
Blood transfusion	..	3	4	6	..	1	
Injection of saline	1	..	..	1	..	..	
Others	1	3	2	6	..	..	

Operations.	Officers.	British Other Ranks.	All others.	Recovered.	Invalided.	Died.	Remarks.
<i>Lymphatic system.</i>							
Lymphadenitis	..	12	..	12	..	..	
Tropical bubo, excision	..	1	..	1	..	..	
Glands, excision	1	5	1	7	..	..	
Glands, incision	..	1	..	1	..	..	
Tubercular glands, excision	..	1	1	2	..	..	
Calculus submaxillary duct	..	1	..	1	..	..	
Lymphatic system	..	10	..	10	..	..	
Supp. Lymphadenitis groin excised (Venereal—Ducrey)	..	1	..	1	..	..	
<i>Breast</i>							
Cystadenoma breast—excision	..	2	..	2	..	..	
Amputation	..	2	1	3	..	..	
Mastitis	..	3	4	7	..	..	
Fibroma breast	..	1	..	1	..	..	
<i>Respiratory.</i>							
Empyema	..	6	..	4	1	1	
Aspiration of Pleural effusion	..	1	..	1	..	..	
Exploration of G. S. W. of chest	..	1	..	1	..	..	
Secondary suture of G. S. W.— thorax.	..	1	..	1	..	..	
Intratracheal Ipiadol	..	1	..	1	..	..	
Excision of gynecomastia	..	2	..	2	..	..	
Operations on the chest:—							
Rib resection	..	2	..	2	..	..	
Aspirations	..	1	..	1	..	..	
<i>Teeth and gums.</i>							
Teeth extraction	4	155	16	175	..	..	
Alveolar abscess incision	..	1	..	1	..	..	
<i>Digestive.</i>							
Appendicectomy	40	141	167	345	1	2	
Liver abscess	1	3	..	3	1	..	
Hernia	8	85	7	100	..	..	
Cholecystectomy	1	..	3	2	..	2	
Cholecystotomy	..	1	..	1	..	..	
Laparotomy	2	16	5	16	..	7	
Retroperitoneal abscess	..	1	..	1	..	..	
Hæmorrhoids	12	89	25	126	..	..	
Fissure in ano	1	12	1	14	..	..	
Fistula in ano.	5	3	3	11	..	..	
Ischiorectal abscess	..	9	..	9	..	..	
Pelvic abscess	..	1	1	2	..	..	

1 case—ado-
lescent en-
largement,
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ded to con-
servative
treatment.

Operations.	Officers.	British Other Ranks.	All others.	Recovered.	Invalid	Died.	Remarks
<i>Digestive—contd.</i>							
Prolapse	..	2	1	3	..	..	
Gastrojejunostomy	..	1	..	..	1	..	
Jejunostomy	..	1	..	1	..	..	
Ileostomy	..	1	..	1	..	..	
Colectomy	..	1	..	1	..	..	
Colostomy	..	1	..	1	..	..	
Splenectomy	..	1	..	..	..	1	
Intestinal obstruction	..	5	..	3	..	1	1 still in hospital.
T. B. peritonitis	..	..	1	..	1	..	
T. B. glands	..	1	..	1	..	..	
Hæmatoma	..	3	..	3	..	..	
Enterectomy	..	1	..	1	..	..	
Acute pancreatitis	..	1	..	1	..	..	
Volvulus	..	1	..	1	..	..	
Others	7	53	12	68	1	3	
<i>Generative (Male).</i>							
Undescended testicle	..	1	..	..	..	..	Still in hos- pital
Varicocele	1	45	1	47	..	..	
Circumcision	1	51	38	90	..	..	
Phimosis	..	16	4	20	..	..	
Biopsy	..	1	..	1	..	..	
Passage of bougies	2	..	..	2	..	..	
Hydrocele	2	21	2	25	..	..	
Orchidectomy	..	3	..	3	..	..	
Urethral stricture, dilatation	1	..	2	3	..	..	
Acute epididymitis, incision	..	1	..	1	..	..	
Orchidopexy	..	1	..	1	..	..	
Spermatocele	..	1	..	1	..	..	
Carcinoma prostate and pros- tatectomy.	..	..	1	..	..	1	
Injection into vasdeferense	..	1	..	1	..	..	
Others	..	8	8	16	..	..	
<i>Generative (female).</i>							
Subtotal hysterectomy	..	..	1	1	..	..	
Cæsarain section	..	..	4	4	..	..	
Cystocele	..	..	1	1	..	..	
Hysterectomy	..	..	1	..	..	1	Anæsthetic death on table.
Ectopic gestation	..	..	3	3	..	..	
Uterine fibroid (Gravid uterus) —excision.	..	..	1	1	..	..	
Salpingectomy	..	..	1	1	..	..	
Dilatation and curettage	..	..	15	15	..	..	
Ventrosuspension	..	..	4	4	..	..	

Operations.	Officers.	British other Ranks.	All Others.	Recovered.	Invalided	Died.	Remarks.
<i>Generative (female)--contd</i>							
Ovariotomy	..	..	1	1	..	..	
Prolapse ovary	..	..	12	2	..	..	
Sterilization	..	..	1	1	..	..	
Dysmenorrhœa	..	..	1	1	..	..	
Salpingitis	..	..	2	2	..	..	
Uterine endo metritis D & C.	..	..	1	1	..	..	
Uterine ventro fixation	..	..	1	1	..	..	
Fibroid (vaginal)	..	..	1	1	..	..	
Cautery of cervix	..	..	3	3	..	..	
Pyosalpinx	..	..	1	1	..	..	
<i>Bones, joints, muscles, fasciæ and tendons.</i>							
Fractures, manipulated	10	178	33	224	4	2	
„ plated or wired	..	12	1	11	..	1	1 Remaining.
„ others	14	115	11	137	3	..	
Osteomyelitis	..	13	1	12	1	1	
Osteochondritis	2	1	..	2	1	..	
Osteoclasis	..	2	..	2	..	..	
Sequestrectomy	1	6	1	8	..	..	
Peripatellar bursitis knee	..	1	..	1	..	..	
Removal of bone plates	..	1	..	1	..	..	
Passive movement (inc manipu- lation).	2	10	..	12	..	..	
Myositis ossificans, excision of bony mass.	..	1	..	1	..	..	
Removal of exostosis, metacarpal	..	1	..	1	..	..	
Autroostomy	..	..	2	2	..	..	
Exostosis, subinqual right great toe	..	1	..	1	..	..	
Exostosis	1	6	..	7	..	..	
Dislocation	1	23	5	34	..	..	
Hammer-toe	..	24	1	25	..	..	
F B removal	..	9	1	10	..	..	
Manipulations joints	3	74	11	87	1	..	
Semilunar cartilage	1	59	..	60	..	..	
Intra articular cartilage	..	4	..	4	..	..	
Arthrotomy	..	30	..	30	..	..	
Maniscectomy	1	45	2	48	..	..	
Hallux Valgus	..	3	2	5	..	..	
Bursitis	..	14	..	14	..	..	
Disarticulation knee	..	1	..	1	..	..	
Tenotomy	..	2	..	2	..	..	
Suture tendon	..	4	..	4	..	..	
Ganglion	1	9	..	10	..	..	
Hernia of muscle	..	1	..	1	..	..	

Operations	Officers.	British Other Ranks.	All others.	Recovered.	Invalided.	Died.	Remarks.
<i>Bones, joints, muscles, fasciae and tendons—contd</i>							
Dupuytren contracture	1	1	..	2	..	..	
Lengthening, tendons	..	..	1	1	..	..	
Excision of joint	..	1	..	1	..	..	
Osteotomy	..	1	1	2	..	..	
Subluxation Sacro-iliac	1	4	1	6	..	..	
Subluxation sup. Tib-Fibula	..	1	..	1	..	..	
Pes cavus—Steiners operation	..	1	..	..	1	..	
Anthrotomy and meniscotomy	..	4	..	4	..	..	
Repair of wounds	..	3	..	3	..	..	
Compound fracture of skull with laceration of brain.	..	..	1	..	..	1	
Osteoarthritis	..	2	..	2	..	..	
Flat feet	..	4	..	4	..	..	
Dislocations, reductions and manipulations	..	4	..	4	..	..	
Sprains, manipulations	..	2	..	2	..	..	
<i>Amputations.</i>							
Toe	..	9	..	9	..	..	
Finger	..	9	..	9	..	..	
Forearm	..	1	..	1	..	..	
Thigh	..	2	..	1	1	..	
Leg	..	1	..	..	..	1	
<i>Skin and subcutaneous tissues.</i>							
I. A. T.	19	279	22	316	..	2	2 Remaining.
Onychia	..	9	..	9	..	..	
Keloid	..	..	1	1	..	..	
Primary suture	..	1	..	1	..	..	
Secondary suture	..	1	..	1	..	..	
Finger nail excision	..	1	..	1	..	..	
Ingrowing toe nails	..	70	..	70	..	..	
Avulsion of nails	4	33	2	44	..	..	1 Remaining.
Plastic operations	1	2	2	5	..	..	
Excision of scar	..	1	2	3	..	..	
Warts	..	3	4	7	..	..	
Ligature of angular vein for carbuncle.	..	..	1	1	..	..	
Warts and scar tissue	..	2	1	3	..	..	
Corns	..	4	..	4	..	..	
Nevus	..	3	..	3	..	..	
Septic phimosis	..	1	..	1	..	..	
Boil in ear	..	..	1	1	..	..	
Rodent ulcer	1	..	..	1	..	..	

Operations.	Officers.	British Other Ranks.	All others.	Recovered.	Invalided	Died.	Remarks.
<i>Skin and subcutaneous tissues—contd.</i>							
Papilloma	4	16	2	23	..	..	
Abscesses	22	189	33	224	..	..	
Onychogryphosis		1	..	1	..	..	
Fibroma	1	1	2	4	..	..	
Papillomatous growth above anus	..	1	..	1	..	..	
Cutaneous leishmaniasis .	..	70	1	71	.	.	
Axillary adenitis	..	1	..	1	..	..	
Hair lip repair	..		1	1	..	.	
Skin grafting		2	..	2	..	.	
Rectal polypus		3	1	4	.	.	
<i>Urinary</i>							
Pyonephrosis		..	1	1	.	.	
Hydronephrosis		2	..	2	.	.	
Nephropylolthotomy . . .		1	..	1	.	.	
Perinephric abscess		2		2			
Nephrectomy		2	.	1		1	
Nephrotomy			1	1			
Uretero-lithotomy		1	..	1	.	.	
Cystoscopy	8	41	3	51	1	.	
Cystoscopy and pyelography		4		4		..	
Renal calculus		1	..	1	.	.	
Ureteral catheterisation . .		1	.	1		..	
Ureteral calculi		3		3		..	
Vesical calculus			1	1		.	
<i>Injuries</i>							
Wounds		4		4	.	..	
G. S. Wounds		3		2	.	1	
Wounds and lacerations . .	2	15	4	21	..	.	
Ligaturing	1	.	1	2		.	
Suture of wounds	1	4	.	5		.	
Cleaning and repairs	3	13	3	18	1	..	
<i>Cysts and tumours</i>							
Excision of sebaceous cysts .	3	26	4	33	..	..	
Sebaceous	11	95	6	112	..	..	
Angioma of face		1		1	.	..	
Dental			1	1	..	..	
Ovarian			4	4	..	..	
Dermoid excision		3	..	3	..	..	
Dermoid	2	2	..	3	..	* 1	
Tumours		4	..	4	..	..	
Tuberculous		..	2	2	..	..	

* Syncope
under an-
aesthetic.

Operations	Officers	British Ranks,	All others.	Recovered,	Invalided.	Died.	Remarks.
<i>Cysts and tumours—contd</i>							
Retention parotid		1	..	1	.	..	
Baku's cyst		1	..	1	.	..	
Cysts occupational		1	..	1	.	..	
Tumours and cysts—removal		4	.	4	.	.	
Lipoma	3	3	.	6	.	.	
Salivary glands, cyst, aspiration	.	1	.	1	.	..	
Excision of angioma		1	.	1	..	.	
Excision of fibrous cyst		.	1	1	.	.	
Excision of cyst of epididymitis		.	1	1	.	..	
Neoplasm, excision	1	2	.	3	.	..	
Condylomata	.	1	.	1	.	.	
Sarcoma of bowel (Recurring examination).	1	.	.	.	1	.	
Diffuse lipoma	..	.	1	1	.	.	
<i>Parasites</i>							
Cysticercosis, removal of cyst	..	1	..	1	.	..	
<i>Miscellaneous</i>							
Foreign body removed	2	18	3	23	..	..	
Minor operations	..	59	..	59	..	..	
Pv. examinations	..	..	1	1	..	..	
Lumbar puncture	..	19	..	19	..	..	
Burns and scalds	..	3	..	3	..	..	
Arrest of secondary hæmorrhage scalp.	.	1	..	1	..	..	
Paracentesis, fontanelle for hydrocephalus	..	..	1	1	..	..	
Contusion extensor muscles leg. .	..	..	1	1	..	..	
Tracheotomy	..	..	1	..	..	1	
Ligature of cut artery	..	1	..	1	..	..	
Incision and drainage	..	1	..	1	..	..	
Adenoma thyroid	..	..	1	1	..	..	
Others	..	16	1	16	..	1	
TOTAL	255	2,701	634	3,613	23	37	

30. Anaesthetics.

TABLE 24.

[illegible]

SECTION II.

ON THE HEALTH OF THE INDIAN ARMY FOR THE YEAR 1936.

(From Director, Medical Services in India.)

General.

31.

TABLE A.

	Admissions.			Deaths			Invalids sent to United Kingdom			Invalids discharged in India			Average constantly sick		
	Average strength.	Ratio		Ratio		No.	Ratio		No.	Ratio		No.	Ratio		No.
		No.	per 1,000.	No.	per 1,000.		No.	per 1,000.		No.	per 1,000.		No.	per 1,000.	
Officers	2,059	750	364.3	9	4.37	11	5	3.4	..	..	..	23.89	11	60	..
Indian Ranks	116,528	49,703	426.5	252	2.16	..	..	..	613	5.52	1,798.00	15.43	..	..	..
Followers	26,545	7,410	279.1	85	3.20	..	..	..	89	3.35	259.10	9.78	..	..	..
Others*	..	1,666	..	27	..	..	..	..	79	..	..	..	..	..	..

The health statistics of officers and Indian ranks for the quinquennial periods 1925-29, 1930-34 with those for 1935, and 1936 are given separately in the following table for purposes of comparison

TABLE B.

Period	Ratio per 1,000.					
	Admissions.		Invalids		Deaths	
	King's Commissioned officers.	Indian ranks	King's Commissioned officers.	Indian ranks	King's Commissioned officers.	Indian ranks.
1925-29	498.0	385.6	5.22	10.8	4.74	3.48
1930-34	336.7	453.3	12.47	6.55	5.37	2.63
1935	346.8	422.7	6.82	5.54	7.31	2.15
1936	364.3	426.5	5.34	5.52	4.37	2.16

Officers.

32 The admission rate of officers sick in hospital for 1936 is 346.3 per 1,000 of strength as compared with 346.8 in 1935

*Includes Reservists, Indian Territorial Forces, Royal Indian Marine, Indian States Forces, R. A. F., Civilians and Pensioners

The principal causes of sickness were:—

TABLE C.

Diseases.	Actuals.	Ratio per 1,000.	Increase or decrease as compared with 1935.	
			Increase.	Decrease.
Digestive diseases other than tonsillitis, appendicitis and diarrhoea	107	52.0	6.7	..
Local injuries	91	44.2	..	6.5
Malaria	71	34.5	..	5.4
Minor septic diseases	53	25.7	..	1.6
Tonsillitis	51	24.8	9.2	..
Sandfly fever	40	23.8	14.1	..
Dysentery	41	19.9	2.4	..
Respiratory diseases	29	14.1	..	0.5
Diarrhoea	28	13.6	1.4	..
Appendicitis	24	11.7	.	0.5
Ear and nose	22	10.7	.	5.4
Diseases of bones, joints, muscles, fasciae and bursae	18	8.7	.	5.4
Urinary diseases	17	8.3	3.4	.
Jaundice catarrhal	16	7.8	..	..
Common cold	15	7.3	4.9	..

There were 9 deaths of which 3 were due to injuries, and 6 to other diseases (Poliomyelitis, Syncope, Thrombosis of artery, Pneumonia lobar, appendicitis, Cholecystitis 1 each).

Soldiers.

33. 49,703 or 426.5 per 1,000 of the strength, were admitted to hospital, compared with 422.7 in 1935. There is thus an increase of 3.8 per 1,000 compared with the 1935 figures.

The principal causes of admissions to hospital were:—

TABLE D.

Diseases.	Actuals	Ratio per 1,000.	Increase or decrease as compared with 1935.	
			Increase.	Decrease
Malaria	14,340	123.1	..	2.8
Local injuries	6,125	52.6	..	0.5
Minor septic diseases	3,893	33.4	..	1.9
Pharyngitis	2,329	20.6	4.1	..
Bronchitis	1,315	11.3	..	..
Dysentery	1,277	11.0	..	1.2
Common cold	1,241	10.6	4.8	..
Sandfly fever	1,236	10.6	3.1	..
Venereal diseases	1,142	9.8	..	0.3
Scabies	894	7.7	..	1.9
Influenza	851	7.3	1.9	..
Diarrhoea	726	6.2	0.6	..
Conjunctivitis	725	6.2	..	0.2
Tonsillitis	690	5.9	0.7	..
Ankylostomiasis	638	5.5	..	1.7
Pneumonia (lobar and lobular)	624	5.4	0.5	..
Mumps	599	5.1	..	1.7
Indigestion	427	3.7	..	..
Constipation	338	3.4	0.2	..
Ring worm	354	3.0	0.6	..
Dermatitis	329	2.8	0.2	..
Synovitis	323	2.8	..	0.3
Coryza	321	2.8	..	0.1
Otitis media	307	2.6	..	0.1
Rhinitis	307	2.6	0.2	..
Dengue	297	2.5	..	0.9
Myalgia	238	2.3	..	..
Eczema	279	2.4	0.4	..
Epidemic dropsy	265	2.3	2.3	..
Jaundice	252	2.2	..	0.3
Trachoma	230	2.0	..	..
Pleurisy	217	1.9	..	..
Pulmonary tuberculosis	203	1.7	..	0.2
Appendicitis	191	1.6	..	..
Piles	189	1.6	0.1	..
Oriental sore	172	1.5	0.9	..
Dracontiasis	171	1.5	..	0.2
Keratitis ulcerative	166	1.4	0.2	..
Measles	156	1.3	..	0.9
Colic	147	1.3	0.1	..
Gastritis	146	1.3	0.4	..
Ascariasis	144	1.2	0.1	..
Anaemia secondary	141	1.2	..	..
Renal colic	134	1.1	0.2	..
Sciatica	129	1.1	..	..
Lumbago	122	1.0	0.1	..
Urticaria	117	1.0	0.2	..

The death rate shows an increase of 0·01 per 1,000 from 2·15 in 1935 to 2·16 in 1936.

The main causes of deaths were :—

TABLE E.

Diseases.	Actuals.	Ratio per 1,000.	Increase or decrease as compared with 1935.	
			Increase	Decrease.
Pneumonia (Lobar and lobular)	71	0·61	0 10	..
Local injuries	41	0 35	0·02	..
Pulmonary tuberculosis	15	0 13	..	..
Circulatory diseases	15	0 13	0·01	..
Digestive diseases	15	0 13	0·02	..
General injuries	14	0 12	..	0·09
Nervous diseases	10	0 09	0·02	..
Malaria	8	0 07	..	0·01
Septicaemia	6	0·05	0·02	..
" "	5	0 04	..	0·07
" "	4	0·03	..	0·03
" "	3	0 03	..	0·03
" "	3	0 03	..	..

Invalids —There were 643 or 5·52 per 1,000 invalids discharged during the year, this is 0·02 per 1,000 less than in 1935.

TABLE F.

Principal causes of invaliding.

Diseases.	Actuals.	Ratio per 1,000.	Increase or decrease as compared with 1935.	
			Increase.	Decrease.
Pulmonary tuberculosis	103	1·66	..	..
Injuries	119	1·02	0 17	..
Diseases of bones, joints, muscles, fasciae and bursae	53	0·45	0·16	..
Diseases of the eye	42	0·36	0·04	..
Mental diseases	39	0 33	0 07	..
Diseases of the nervous system	33	0·28	..	0·06
Respiratory diseases	31	0 27	..	0 01
Circulatory diseases	21	0 18	..	0·05
Digestive diseases	18	0·16	..	0·06
Other tubercular diseases	15	0 13	..	0·09
Diseases of blood	15	0·13	0·01	..
Diseases of ear and nose	9	0·08	..	0·08
Diseases of urinary organs	8	0·07	..	0·01
Leprosy	7	0·06	..	0·05
Veneral diseases	4	0·03	..	0·03

TABLE

Table showing admission and death ratios per 1,000 of the strength for all causes compared

Stations with total admission ratios, all causes, higher than all-India.

Stations.	Wana.	Bannu	Rawal- pindi	Dehra Dun	Razmak	Lahore	Fort Sandeman	Poona.	All India
Strength .	3,279	2,035	4,553	3,055	4,677	2,351	2,132	3,324	116,528
All causes .	{ A. 680.1 D. 2.13 A.C. 19.95 Sick. 18.77	{ 606.4 2.95 18.77	{ 472.7 2.42 19.17	{ 469.7 2.95 20.85	{ 444.9 2.99 19.48	{ 441.5 2.98 12.05	{ 435.7 0.94 10.23	{ 433.8 0.30 15.22	{ 426.5 2.16 15.43

Analysis of the above total admission rates.

Malaria .	{ A.	284.5	146.9	109.2	81.5	79.5	80.8	190.4	101.4	123.1
	{ D.	0.30								0.07
Sand-fly fever .	{ A.	0.3	94.3	10.8	20.9	0.2	28.1	4.2		10.6
	{ D.									
Enteric group .	{ A.		0.5	0.4	2.3	0.8	1.3	0.5	0.9	0.7
	{ D.			0.22						0.04
Dysentery .	{ A.	6.0	10.4	11.4	7.6	11.9	6.0	4.2	29.5	11.0
	{ D.									0.03
Diarrhoea .	{ A.	4.0	23.1	16.9	5.9	7.3	11.5	8.4	7.5	6.2
	{ D.									
Influenza .	{ A.	59.2	9.8	2.9	2.6	8.8	13.2		20.2	7.3
	{ D.	0.30								0.01
Pneumonia lobar & lobular	{ A.	7.3	10.8	6.6	5.9	4.9	7.7	6.1	3.0	5.4
	{ D.		1.47	0.22	0.98	1.71		0.47	0.30	0.61
Veneral diseases	{ A.	5.2	14.7	8.3	14.4	8.3	10.6	5.2	20.2	9.8
	{ D.									
Minor septic diseases	{ A.	25.6	40.8	39.5	56.0	34.4	40.4	34.2	39.1	33.4
	{ D.									
Local injuries .	{ A.	80.6	69.3	53.2	80.9	64.6	71.5	49.2	62.3	52.6
	{ D.	0.61	0.49	0.22	0.33	0.21	0.85	0.47		0.35
Heat-stroke .	{ A.									0.0
	{ D.									0.01
Heat-exhaustion	{ A.			0.4						0.1
	{ D.									
Ankylostomiasis	{ A.	6.1	2.9	9.2	10.5	3.2	2.6	1.9	4.5	5.5
	{ D.									
Pulmonary tuberculosis .	{ A.	0.6	2.9	3.3	2.3	0.9	1.7	0.5	1.2	1.7
	{ D.				0.33		0.43			0.13

G

and certain important diseases for stations with a strength of 2,000 and upwards with all-India.

Stations with total admission ratios, all causes, lower than all-India.

Pesha- war.	Jubbul- pore	Banga- lore.	Now- shera.	Kohat	Quetta	Jhelum	Trimul- gherry.	Abbot- tabad	Ambala.	Roor- kee	Meerut.
5,773	2,411	2,641	2,791	4,043	4,954	2,357	3,027	3,877	2,439	2,402	2,319
433.4	408.5	405.9	403.0	392.0	376.1	373.4	366.7	361.1	330.5	321.0	291.2
2.42	0.83	2.65	2.15	2.47	2.42	2.12	1.32	4.90	0.82	2.91	2.13
13.50	14.31	22.26	14.46	13.80	19.47	9.45	15.45	11.23	15.81	10.08	14.58

Analysis of the above total admission rates

163.2	103.5	42.4	116.1	155.1	93.7	204.1	28.4	85.6	90.2	125.3	77.9
47.5	..	..	8.2	13.1	1.0	1.7	3.3	..	11.1	0.42	..
0.4	..	0.8	0.8	0.2	0.8	..	2.3	0.3	..	0.8	0.4
..	..	..	..	..	0.20	..	0.66	..	..	..	..
19.7	14.9	10.7	6.4	18.0	9.6	12.7	22.4	2.1	8.3	..	19.5
0.17	..	..	..	..	..	..	..	..	..	..	..
8.3	3.3	1.9	7.2	11.9	4.4	1.3	3.6	9.0	0.8	3.3	0.4
0.3	29.4	19.7	4.3	..	3.4	..	5.0	..	2.5	1.2	..
..	..	..	..	..	..	..	..	..	..	..	..
6.9	2.1	3.8	4.7	4.5	5.7	6.4	1.7	8.3	7.4	6.2	8.9
0.52	0.41	0.76	0.36	0.74	0.20	0.85	..	2.58	..	1.67	0.85
6.9	5.4	13.6	7.9	0.4	2.0	3.4	4.6	0.2	7.4	8.3	16.2
31.0	45.2	43.2	25.3	26.5	15.7	21.2	28.1	36.6	32.4	83.3	17.9
33.6	58.4	93.9	46.9	33.6	39.4	27.2	83.3	50.6	48.6	42.9	33.7
0.35	..	..	0.72	0.25	1.21	0.85	0.33	0.62	..	..	0.43
..	..	..	..	0.2	..	0.4	..	..	..	..	..
0.2	..	..	2.1	..	..	2.1	..	..	0.4	..	..
1.9	3.3	3.0	2.5	2.2	26.0	6.8	18.2	16.8	4.9	..	2.6
1.0	0.8	..	2.5	2.7	1.3	2.5	1.0	2.3	0.8	1.2	0.4
0.17	..	..	0.36	0.25	0.20	..	..	0.77	..	..	0.43

The age incidence was chiefly between 18 and 20 years and at 26 years. Out of the 17 cases in Indian Regular units 3 were recruits.

Dengue.

35. 297 cases were admitted for this disease giving a ratio of 2·5 per 1,000 compared with 3·4 in 1935. The stations principally affected were:—

	Actuals.	Ratio per 1,000.
Madras	171	339.3
Mingaladon	48	59.5
Mandalay	32	43.9

Typhus Fever.

36. There were 48 cases among Indian ranks and the distribution and type are given in Section I—Page 15.

Except in Southern Command where cases occurred all the year round the seasonal incidence was chiefly during second half of the year.

This disease is dealt with in greater detail in the Section of the report on British Troops.

Sandfly Fever.

37. There were 1,236 cases in 1936 compared with 882 in 1935, thus giving ratios per 1,000 of 10·6 and 7·5 respectively.

The incidence was chiefly among the troops in Kohat District, Peshawar District, Waziristan District, Lahore District, Zhob (I) Bde. Area, Meerut District and Rawalpindi District with ratios per 1,000 of 78·0, 36·1, 18·8, 12·7, 10·3, 5·6 and 4·9 respectively.

Dysentery, Diarrhoea and Colitis.

38.

TABLE I.

Years.	Dysentery.		Diarrhoea.		Colitis.		Total.	
	Actuals	Ratio per 1,000.	Actuals	Ratio per 1,000.	Actuals.	Ratio per 1,000.	Actuals.	Ratio per 1,000.
1933 . . .	1,804	15·3	933	7·9	30	0·3	2,767	23·5
1934 . . .	1,632	13·9	742	6·3	28	0·2	2,402	20·5
1935 . . .	1,424	12·2	651	5·6	21	0·2	2,096	17·9
1936 . . .	1,277	11·0	726	6·2	36	0·3	2,042	17·5

The admissions for different types of dysentery are given below and the percentage of each type remains very much the same as in 1935.

	Actual admissions.	Percentage.
Dysentery protozoal	75	5.87
Dysentery bacillary (proved bacteriologically)	652	51.06
Dysentery bacillary exudate (no dysentery bacilli isolated)	316	24.75
Dysentery clinical	234	18.32

Only 4 deaths occurred in the 1,277 dysentery cases, thus giving a case mortality of 0.31 per cent. In 1935 there were 2 deaths in 1,424 cases and a case mortality of 0.14 per cent. The distribution of dysentery by Commands is given below :—

TABLE J.

	Dysentery. (Ratio per 1,000).			
	Amoebic.	Bacillary (bacteriologically proved).	Bacillary exudate.	Clinical
Northern Command	0.5	4.6	2.3	2.3
Western Command	0.3	2.3	2.1	2.6
Eastern Command	0.5	6.1	3.0	1.7
Southern Command	0.7	10.0	3.2	1.0
Burma District	4.6	3.9	3.1	4.2

Enteric Group of Fevers.

39. These diseases are fully dealt with in the section of the report on British Troops where figures for Indian Troops also are given.

Among Indian Troops in 1936 the admission rate was 0.7 per 1,000 as compared with 1.4 per 1,000 in 1935, there being actually 88 less cases in 1936 than in 1935.

Out of the total of 78 cases there were 5 deaths representing a case mortality of 6.4 per cent. In 1935 there were 13 deaths in 166 cases giving a case mortality of 7.8 per cent.

The inoculation state of the troops is satisfactory, the figures for the last half yearly inoculation in October being :—

TABLE K

	British officers.	Indian other ranks.	Followers.
Strength	2,162	121,402	24,645
Protected	2,050	120,080	24,492
Unprotected	112	1,322	153
Protected percentage	94.8	99.9	99.4

The relative incidence, deaths and case mortality among protected and unprotected I. O. Rs. were:—

TABLE L.

	Actuals.		Ratio per 1,000		Case mortality per cent.
	Cases.	Deaths.	Cases.	Deaths.	
Protected	68	4	0.57	0.03	5.88
Unprotected	10	1	7.56	0.76	10.00

Malaria.

40 There were 14,310 cases of malaria with 8 deaths in 1936 compared with 14,728 cases and 9 deaths in 1935. The ratios per 1,000 during the last five years were:—

TABLE M.

	1932.	1933.	1934.	1935.	1936.
Admissions . . .	145.1	212.2	156.5	125.9	123.1
Deaths	0.10	0.05	0.05	0.08	0.07
Invalids	0.07	0.05	0.06	0.03	..

The following table shows the incidence of the various types of malaria by Commands:—

TABLE N.

Commands & Independent Districts.	Admissions and Deaths.							
	Actuals.				Ratio per 1,000.			
	B. T.	M. T.	Qtn.	Clin.	B. T.	M. T.	Qtn.	Clin.
Northern {	A. 5,117	2,078	14	601	90.8	36.9	0.2	10.7
{	D. 1	1	..	..	0.02	0.02	..	..
Western {	A. 1,244	259	6	79	100.0	20.7	0.5	6.3
{	D. 1	..	..	..	0.03	..	..	..
Eastern {	A. 1,866	624	9	241	78.0	26.1	0.4	10.1
{	D. ..	2	..	..	..	0.08	..	..
Southern {	A. 945	596	12	70	45.1	28.4	0.6	3.3
{	D. 230	86	2	39	102.6	30.4	0.7	13.8
Burma {	A. 1	..	..	..	0.35	..	..	..
{	D. 1	..	..	..	..	..	..	..
All India {	A. 9,467	3,643	43	1,030	81.2	31.3	0.4	8.8
{	D. 3	3	..	..	0.03	0.03	..	..

The stations with an average annual strength of over 1,000 in which malaria admissions exceeded 100 per 1,000 were:—

Loralai	289 2	Bareilly	148·6
Wana	284 5	Bannu	146 9
Maymyo	241 7	Landikotal	131·9
Jhelum	204 1	Delhi	131·0
Jullundur	197·7	Roorkee	125·3
Thal	191 5	Nowshera	116·1
Fort Sandeman	190·4	Dharamsala	109 4
Lansdowne	174 9	Rawalpindi	109·2
Peshawar	168 2	Jubbulpore	108·5
Kohat	155 1	Poona	101 4
Shillong	153 4		

The stations with an average strength of over 500 and under 1,000 in which malaria admissions exceeded 100 per 1,000 were:—

Shagar	511 5	Jhansi	171 0
Malakand	407 5	Mardan	153 5
Mir Ali	352 4	Aurangabad	151 6
Fatehgarh	234 1	Bakloh	150 9
Ahmedabad	233 8	Multan	132·8
Agra	226 9	Kamptee	109 2
Baroda	182 3		

Treatment and prevention of malaria are dealt with in the Section of the report on British Troops.

Pneumonia

41.

TABLE O.

Years	Admissions		Deaths	
	Actuals	Ratio per 1,000	Actuals	Ratio per 1,000
1931	1 078	8 7	132	1 06
1932	961	7 9	97	0·80
1933	730	6 2	89	0·76
1934	704	6 0	58	0·49
1935	576	4 9	60	0 51
1936	624	5 4	71	0 61

Of the 624 cases admitted 514 were lobar and 110 lobular in type. The case mortality of the two types were 11·09 and 12·73 per cent respectively.

The incidence by Commands was:—

	Ratio per 1,000.
Northern Command	6·3
Western "	5·1
Eastern "	5·7
Southern "	2 9
Burma District	2·1

Pyrexia of uncertain origin.

42. 10 cases were included under this head giving a ratio of 0.1 per 1,000.

Small-pox.

43. There were 20 admissions with no deaths giving an admission ratio per 1,000 of 0.2. This is practically the same as in 1935.

Tuberculosis.

44. Pulmonary tuberculosis caused 203 admissions with 15 deaths and 193 invalids giving ratios per 1,000 of 1.7, 0.13 and 1.7, respectively.

There were 30 admissions for tuberculosis of other organs with 3 deaths and 15 invalids giving ratios per 1,000 of 0.3, 0.03 and 0.13 respectively. Tuberculosis of various abdominal organs produced 12 admissions.

Venereal Diseases.

45. This group accounted for 1,142 admissions, giving a ratio per 1,000 of 9.8 which was 0.3 per 1,000 less than in 1935.

TABLE P.

Diseases.	Admissions.		Percentage	
	1935.	1936.	Increase.	Decrease.
Gonorrhœa	543	561	3.31	..
Syphilis	433	397	..	8.31
Soft chancre	210	181	.	13.81

Epidemic Dropsy.

46. In September and October an outbreak of epidemic dropsy occurred among Indian troops at Rangoon and Mingaladon, Burma.

On 27th September 4 men of the Burma Rifles stationed in Rangoon reported sick with swelling, pain and œdema of both legs. The following day 12 more men were found at a medical inspection to have a similar condition and were admitted to hospital. Further inspections of the battalion both at Rangoon and Mingaladon produced a total of 265 cases in the unit and also 40 women. All were rice eaters. The rice issued to the troops was suspected as the cause and its supply was at once stopped and replaced by specially milled rice. Rice was completely excluded from the diet of the patients and a special diet of milk, meat, atts, dhall, vegetables, fresh fruit, raw eggs and marmite were substituted. No further cases occurred.

None of the cases was really ill but strict confinement to bed was enforced. Most of the cases recovered from the œdema in 2 or 3 days and the average stay in hospital was 5 to 6 days. Samples of the suspected rice were examined at the Military Food Laboratory, Kasauli, and reported to be superior in quality to the normal supplies of Burma rice but in poor condition. The samples had been attacked by weevils and maggots and had an unpleasant smell both raw and when cooked. Moisture 11.8 per cent P205—0.36%. Unfit for issue.

Feeding experiments with the rice were done in Burma and 2 out of 4 pigeons fed on the rice were affected but quickly recovered when the rice was

September At Mingaladon the rice was first issued on September 4th and the first case of œdema occurred on October 4th.

Troops started to consume the rice as soon as it was received from the R. I. A. S. C.

During July, August and September the daily atmospheric temperature between 78° and 84°F and the relative % These figures were much the same

It seems quite definite that this outbreak was due to some contamination of the rice supply and not to a deficiency of its P205 content

Other Diseases due to Infection or Infestation.

47. There were 5,475 admissions under this heading. The most important diseases in this group were —

Common Cold	1,241	Ascariasis	144
Scabies	894	Chicken Pox	97
Influenza	851	Rheumatic fever	93
Ankylostomiasis	638	Intestinal taeniasis	86
Mumps	599	Kala azar	34
Jaundice catarrhal	197	Filariasis	22
Oriental sore.	172	Leprosy	8
Dracontiasis	171	Septicæmia	6
Measles	156	Diphtheria	6

Diseases of the Circulatory System.

48 Circulatory diseases caused 114 admissions to hospital of which the majority were D. A. H. The ratio per 1,000 for admissions was 1.0 which was practically the same as in 1935

There were 15 deaths from this group of diseases giving a ratio per 1,000 of 0.13 against 0.11, in 1935

Diseases of the Respiratory System.

49. The admissions for diseases of the respiratory system exclusive of pneumonia and tuberculosis, totalled 1,724 giving a ratio of 14.8 per 1,000. Of these 1,315 or 76 per cent. were due to bronchitis. There were 5 deaths and 31 cases were invalided. The ratio per 1,000 for bronchitis was 11.3 as in 1935

The other important diseases in the group were pleurisy 217, laryngitis 92 and asthma 59.

Diseases of the Digestive System.

50. There were 5,786 admissions for the diseases of the digestive system with 15 deaths and 18 invalids, the ratios per 1,000 being admissions 40.7

The most important diseases in this group were .—

TABLE Q.

	Admissions.	Deaths.	Invalids.
Pharyngitis	2,329	..	..
Diarrhoea	726	..	..
Tonsillitis	690	..	..
Indigestion	423		..
Constipation	398		..
Appendicitis	191	6	2
Hæmorrhoids	188	..	..
Colic	147		..
Gastritis	146	..	1
Hepatitis	66		..
Jaundice	55	..	..

In addition to the above there were 91 cases of hernia with no death and 4 invalids

Minor Septic Diseases.

51 This group produced 3,393 admissions giving a ratio of 33·4 per 1,000 of strength Included in the group were Cellulitis 2,453, Boils 696, Abscess 407 and Inflammation of lymphatic glands and vessels 166.

Local Injuries.

52. There were 6,125 admissions in this group. The ratio per 1,000 was 52·6 compared with 53·1 in 1935.

Followers.

53. The total admissions 7,410 or 279·1 per 1,000 of the strength compared with 302·9 in 1935.

The table below gives figures for certain endemic and infectious diseases amongst followers :—

TABLE R.

	Admissions.			Admissions.	
	Actuals.	Ratio per 1,000.		Actuals.	Ratio per 1,000.
Malaria	2,232	81·1	Dysentery	141	5·3
Bronchitis	341	14·4	Influenza	121	4·6
Veneral diseases*	260	9·8	Diarrhoea	104	3·9
Syphilis	224	8·6	Scabies	89	3·4
Pneumonia	207	7·8	Pulmonary tuberculosis	14	1·7
Common cold	141	5·4	Enteric group of fevers	20	0·8
			Dengue	14	0·7

*Gonorrhoea 123, Syphilis 93 and Soft chancre 47.

There were 85 deaths with a ratio of 3.58 per 1,000 of strength.

The principal causes of death were :—

TABLE S.

	Actuals.	Ratio per 1,000.		Actuals.	Ratio per 1,000.
Pneumonia	24	0.90	Digestive diseases	5	0.19
Other infectious diseases	13	0.49	Nervous diseases	3	0.11
Pulmonary tuberculosis	12	0.45	Poisons	3	0.11
Injuries	11	0.41	Urinary organ diseases	2	0.08
Other respiratory diseases	5	0.19	Disorders of nutrition or of metabolism	2	0.08

Sick and wounded labourers treated in Labour Camp Hospital at Quetta during 1936 (from May to December)

Diseases.	Admissions.	Deaths
Cerebro-spinal fever		..
Cholera	..	..
Diphtheria	..	..
Dysentery bacillary	2	.
Dysentery bacillary exudate	1	..
Dysentery protozoal	.	..
Dysentery clinical	.	..
Typhoid fever	2	2
Typhoid fever Para A.	.	..
Typhoid fever Para B	..	..
Typhoid fever Para C	..	..
Enteric Group	..	.
Malaria	265	.
Oriental sore	4	..
Pneumonia (Lobar and Lobular)	9	3
Small-pox	..	..
Typhus fever	..	..
Local Injuries	102	..
All Other Causes	256	..
TOTAL	641	5
		Ratio per 1,000 of strength.

Average strength of labourers	— 2470 .	
Admission (Actual)	— 641 .	259.5
Average daily sick	— 21.10 .	8.54
Deaths	— 5 .	2.02

Recruiting.

54. The total number of recruits examined at Recruiting Centres in the year ending the 31st March 1937, was 22,843; of these 8,427 were rejected, a percentage of 36·89. The percentage of rejections for the year 1935-36 was 35·99.

The principal causes of rejection of recruits for the year ending 31st March 1937 were as follows:—

Disability.	No. of men rejected as unfit for enrolment out of 22,843 presented at recruiting centres only.		No. of recruits found unfit during training out of 12,464 enrolled (11,386 recruits enrolled at recruiting centres and 1,078 at unit headquarters).	
	Actuals.	Percentage	Actuals.	Percentage.
1	2	3	4	5
Malaria (enlarged spleen)	522	2·29	2	0·02
Tuberculosis (pulmonary)	157	0·69	7	0·06
Tuberculosis (other organs)	23	0·10	..	..
Venereal diseases	355	1·55	..	..
Other diseases due to infection	48	0·21	1	0·01
Diseases of the nervous system	9	0·04	11	0·09
Defective vision	403	1·76	5	0·04
Trachoma	1,017	4·45	1	0·01
Other eye affections	192	0·84	3	0·02
Otitis media	523	2·29	3	0·02
Defective hearing	11	0·05	..	..
Other ear diseases	140	0·61	..	..
Diseases of nose and throat	133	0·60	..	..
Valvular disease of the heart	388	1·70	1	0·01
Disordered action of heart	826	3·62	4	0·03
Varicose veins	217	1·08	..	..
Hæmorrhoids	148	0·65	..	..
Varicocels	141	0·62	..	..
Other diseases of circulatory system	7	0·03	..	..
Anæmia	115	0·50	1	0·01
Goitre	261	1·14	..	..
Respiratory diseases excluding tuberculosis	33	0·14	2	0·02
Pyorrhœa	151	0·67	..	..
Loos or decay of teeth	27	0·12	..	..
Hernia	358	1·57	1	0·01
Other diseases of digestive system	26	0·11	..	..
Ankylosis of joints	45	0·20	..	..
Flat foot	141	0·62	2	0·02
Knock knee	147	0·64	1	0·01
Curvature of spine	177	0·77	..	..
Other deformities	335	1·47	13	0·10
Skin diseases	342	1·50	2	0·02
Poor physique	85	0·37	43	0·34
Other causes	990	3·88	39	0·31
Total	8,427	36·89	142	1·14

N.B.—The figures in columns 4 and 5, and in the heading, are in respect of the following only, Cavalry, Infantry Artillery, Signals, Machine Gun Platoons of British Infantry, and Sappers and Miners.

Military Operations.

55. Military operations in Khaisora Valley (Waziristan) during 1936 (25th November to 31st December).

I. O's, I. O. Rs and Followers.

Average strength. 10,992

Diseases	Admission to Hospital.		Deaths	
	Actuals	Ratio per 1,000.	Actuals.	Ratio per 1,000.
Admission to hospital				
All causes	1,341	122.0	8	0.73
Malara	74	6.7	..	..
Dysentery	21	1.9	..	..
Pneumonia	17	1.5	1	0.09
Minor Septic diseases	47	4.3	..	..
Digestive diseases	155	14.1	..	..
Local injuries excluding G. S. W.	153	13.9	..	..
G. S. Wounds	144	13.1	7	0.64

APPENDICES.

SECTION I.

BRITISH TROOPS, 1936.

TABLE A.

STATIONS BY COMMANDS AND INDEPENDENT DISTRICTS.

Stations.	Height above M S level in feet.	Authority for height.	Points of reference	Stations	Height above M S level in feet.	Authority for height.	Points of reference.
<i>Northern Com- mand.</i>				<i>Eastern Com- mand.</i>			
Abbottabad . . .	4,010	S.D.	Map	Agra (Fort) . . .	525	S.D.	S.B.M.
Ambala . . .	902	"	S B M.	Allahabad & Fort .	314	"	"
Amritsar . . .	754	"	"	Farrell . . .	563	"	"
Bannu . . .	1,250	"	Map.	Barrackpore . . .	24	"	"
Barian Camp and Khyragali . . .	7,133	I.B.	"	Benares . . .	258	"	"
Campbellpore . . .	1,180	S D.	Map.	Cawnpore . . .	407	"	B.M.
Cherat . . .	4,546	"	"	Chakrata . . .	6,885	"	Map
Dagshai . . .	6,087	"	"	Dacca . . .	20	M.D.	"
Dalhousie Conva- lescent Depot . . .	7,687	"	"	Dehra Dun . . .	2,232	S D	S.B.M.
Dera Ismail Khan .	585	"	"	Delhi . . .	757	"	"
Ferozepore . . .	649	"	S B M.	Dixapore . . .	170	"	Church.
Gharial . . .	5,811	S G	"	Fort William . . .	17	S G	"
Jhelum . . .	762	S.D	"	Fyzabad . . .	330	S.D.	S B M.
Jullundur Cantt. .	771	"	B M	Jhand . . .	849	"	"
Jutogh . . .	6,370	"	Map	Landour Conva- lescent Depot . . .	7,528	"	"
Kalabagh & Bara- gali . . .	7,963	"	"	Lehong . . .	8,000	"	"
Kalabagh & Mari Indus . . .	682	"	"	Lucknow Kahlbir's Meerut . . .	383	"	B.M.
Kasauli Conva- lescent Depot . . .	6,050	"	"	Muttra . . .	737	"	S B.M.
Kohat . . .	1,725	"	Map	Port Blair (Tidal Obay) . . .	9	"	B.M.
Khanpur and Ghora Dhaka . . .	7,721	"	"	Ranikhet and Chaubattia . . .	5,080	"	"
Kuldana . . .	7,049	S.G	"	Roorkee . . .	9,942	S G	S B M.
Lahore Cantt. and Fort . . .	706	S D.	S.B.M	<i>Southern Com- mand.</i>			
Lalolikotal . . .	3,509	"	Map.	Ahmedabad . . .	162	S D.	S.B.M
Lockhart Fort . . .	6,613	"	"	Ahmednagar . . .	2,180	"	Map.
Muztal . . .	1,650	"	"	Bangalore . . .	3,002	"	S.B.M.
Mir Ali . . .	2,240	S.G.	V.G.L.	Belgaum . . .	2,523	"	"
Multan . . .	404	S D.	S.B.M.	Colaba (Bombay Town Hall) . . .	20	"	"
Murree Conva- lescent Depot . . .	7,073	"	Map.	Deolali . . .	1,894	"	"
Nowshera (Rly. Station) . . .	969	"	B M.	Jubbulpore . . .	1,320	"	"
Peshawar . . .	1,152	"	S B M.	Kamptee (Rly. Station) . . .	940	"	B.M.
Rawalpindi . . .	1,689	"	"	Madras (Obay) . . .	250	"	"
Razmak . . .	6,536	"	Map.	Malapuram (Rly. Station) . . .	1,380	"	"
Risalpur . . .	1,014	"	B.M.	Mhow . . .	1,887	"	"
Sialkot . . .	829	"	"	Mount Abu Sanato- rium . . .	3,836	"	"
Solon . . .	5,078	"	"	Nawabshah . . .	1,461	"	Map
Sabatha . . .	4,000	"	Map.	Pachmarhi . . .	3,490	"	"
Thal . . .	2,450	"	"	Panna . . .	1,867	"	S B M
Wana . . .	4,539	S G.	V. G. L.	Purandhar . . .	4,560	"	"
<i>Western Com- mand.</i>				Saugor . . .	1,755	"	S B M.
Hyderabad . . .	91	S D.	S B M.	Semunderabad . . .	1,776	"	"
Katachi (Holy Tri- mity Church) . . .	28	"	"	Wellington (Stn. Hospital) . . .	5,800	"	Map.
Quetta . . .	5,310	"	"	<i>Burma Ind. District.</i>			
				Mandalay (Fort Doferin) . . .	264	S D.	Map.
				Maymye . . .	3,509	"	"
				Minzadon . . .	118	"	"

S D. = Survey Department.
S.B.M. = Standard Bench Mark.
B.M. = G. T. Bench Mark.
S G. = Surveyor-General of India.
M.D. = Meteorological Department.
V.G.L. = Village ground level.

Map. = Heights taken from Topo Maps.
I.D. = Intelligence Branch of the Division of
the Chief of the Staff.

TABLE I.

INDIA.

WARRANT OFFICERS, N. C. Os. AND MEN.

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

DISEASES.	Actuals.				Ratio per 1,000.		
	Admissions.	Deaths.	Invalids sent home.	Average number constantly sick.	Admissions.	Deaths.	Invalids sent home. Constantly sick.
Average strength 52,059.							
Common cold	.	.	.	12.11	11.1	.	0.23
Diphtheria	.	1	.	7.86	1.3	0.02	0.15
Dysentery	.	.	4	59.08	24.6	.	1.13
Enteric fevers (inclusive of typhoid, para. A, B and C and enteric group.)	70	3	2	11.99	1.5	0.06	0.23
Erysipelas	.	.	.	0.19	0.1	.	0.00
Influenza	4	.	.	17.80	12.4	.	0.34
Malaria	3,017	3	2	112.13	58.0	0.06	2.15
Measles	10	.	.	0.40	0.2	.	0.01
Meningococcal infection	1	1	1	0.23	3.0	0.02	0.00

SPECIFIC DISEASES DUE TO INFECTION OR INFECTION.

TABLE I—*cont'd.*

Diseases.	Actuals.				Ratio per 1,000.			
	Admissions.	Deaths.	Invalids sent home.	Average number constantly sick.	Admissions.	Deaths.	Invalids sent home.	Constantly sick.
Average strength 52,052.								
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION— <i>cont'd.</i>								
Mumps								
Pneumonia	12	20	3	0 50	0 2	0 38	0 06	0 01
	183			17 56	3 6			0 34
Erysipelas of uncertain origin	10			0 90	0 2			0 02
Rheumatic fever	73	1	6	10 56	1 4	0 02	0 12	0 20
Sandfly fever	1,758			34 57	33 8			0 60
Scarlet fever	7							
Small pox	4	1		0 64	0 1			0 01
				0 45	0 2	0 02		0 01
Tuberculosis { Pulmonary.	57	1	63	11 98	1 1	0 02	1 21	0 23
Other {	9		9	2 03	0 2		0 17	0 04
Venereal diseases { Gonorrhea	1,310		2	172 51	25 7		0 04	3 31
Soft chancre	241			25 64	4 6			0 49
Syphilis	214		1	10 56	4 1		0 02	0 38
Other V. D.	3			0 21	0 1			0 00
Other diseases due to infection	646	6	3	29 32	12 4	0 12	0 06	0 56
Diseases due to infestation by Metazoan parasites.	56			2 11	1 1			0 04
Other diseases	197		2	4 85	3 8		0 04	0 09
OTHER DISEASES CLASSIFIED UNDER SYSTEMS.								
Diseases of the nervous system	434	3	57	20 68	8 3	0 06	1 09	0 40
Mental diseases	145		98	32 79	2 8		1 88	0 63
Diseases of the eye	198		27	8 11	3 8		0 52	0 16
Larynx and nose	1,322		14	38 07	29 4		0 27	0 75

Circulatory system.	Valvular diseases of the heart.	20	6	20	3.44	0.4	0.12	0.58	0.07
		103	8	10	7.00	2.0	0.15	0.10	0.13
Blood and blood forming organs.	Disordered action of the heart.	81		15	7.23	1.6		0.20	0.14
		249		4	16.92	4.8		0.08	0.33
Ductless or endocrine glands.	Other diseases	24		7	2.00	0.5		0.13	0.06
		22			0.96	0.4			0.02
Respiratory system.	Larynx and trachea.	43			1.31	0.8			0.03
		874		21	32.89	16.8		0.40	0.63
Teeth and gums.	Bronchi and bronchioles.	110		11	10.21	2.1		0.21	0.20
		132			3.75	2.5			0.07
Digestive system.	Inflammation of tonsils.	1,516			37.80	29.1			0.73
		462			9.18	8.0			0.18
	Inflammation of pharynx.	357			14.50	6.9		0.02	0.28
		25		2	3.42	0.5		0.04	0.07
	Inflammation of stomach.	31		6	3.83	0.7		0.12	0.07
		80		4	6.34	1.5	0.08	0.08	0.12
	Gastric ulcer.	2,888		20	109.79	55.5	0.26	0.38	2.11
	Duodenal ulcer.								
	Liver.								
	Other diseases.								
Diseases due to disorders of nutrition or of metabolism									
Diseases of the—	Generative system.	16		7	2.54	0.3		0.13	0.05
Bones, joints, muscles, fasciae and bursa.	Disorders of nutrition.	16			37.43	13.8			0.72
Articular tissue.	Disorders of nutrition.	1,323		65	69.32	25.4		1.25	1.33
Skin.	Disorders of nutrition.	2,824	1	1	98.03	54.2	0.02	0.02	1.88
		1,865		8	82.59	35.8		0.15	1.59
Urinary system.	Disorders of nutrition.	35	4	12	23.86	6.2	0.08	0.23	0.46
General and cysts.	Disorders of nutrition.	55	19		2.98	1.6	0.36		0.06
		3,218	31	50	141.99	61.8	0.59	1.13	2.73
Local and cysts.	Disorders of nutrition.								
Soluble diseases.	Disorders of nutrition.	143	1	5	6.68	2.7	0.02	0.10	0.13
		9	2		0.21	0.2	0.04		0.00
Total	Disorders of nutrition.	165			6.29	3.2			0.12
	Disorders of nutrition.		16				0.31		
	Total	30,301	129	572	1,399.21	582.1	2.48	10.99	26.88

"Suicides" having already been shown under the heading of the injury, etc., which caused death, are not included

TABLE II.

WARRANT OFFICERS, N. C. O. AND MEN—contd.

NORTHERN COMMAND.

Table showing the average strength, admissions into hospital, deaths and constantly sick during the year 1936 with ratios per 1,000 of the strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions	Deaths.	Average number constantly sick.	Admissions	Deaths.	Constantly sick.
Average strength 16,873.						
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION.						
Common cold	131	..	2.32	7.8	..	0.14
Diphtheria	27	..	3.98	1.6	..	0.24
Dysentery	352	..	14.64	20.9	..	0.87
Enteric fever (inclusive of typhoid, para A, B and C and enteric group)	10	1	2.47	0.9	0.06	0.15
Erysipelas	3	..	0.14	0.2	..	0.01
Influenza	227	..	6.35	13.5	..	0.38
Malaria	1,324	..	45.34	78.5	..	2.69
Measles	3	..	0.13	0.2	..	0.01
Meningococcal infection	1	1	0.19	0.1	0.06	0.01
Mumps	4	..	0.17	0.2	..	0.01
Pneumonia	84	10	8.80	5.0	0.69	0.52
Pyrexia of uncertain origin	5	..	0.72	0.3	..	0.04
Rheumatic fever	23	..	2.67	1.4	..	0.15
Sandfly fever	1,354	..	25.13	80.2	..	1.49

TABLE II—*contd.*

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Diseases due to disorders of nutrition or of metabolism	2	..	0.50	0.1	..	0.03
Diseases of the generative system	199	..	9.10	12.8	..	0.54
Diseases of bones, joints, muscles, fasciæ and bursæ	463	..	23.42	27.4	..	1.39
Diseases of the articular tissue	950	1	30.67	56.3	0.06	1.82
Diseases of the skin	517	..	22.09	20.6	..	1.31
Diseases of the urinary system	101	1	8.83	6.0	0.12	0.52
Injuries { General	50	0	1.66	3.0	0.38	0.10
Local	1,086	9	45.40	64.4	0.53	2.69
In action	..	..	..	..	..	..
Tumours and cysts	48	1	2.37	2.8	0.0	0.14
Poisons	3	1	0.09	0.2	0.0	0.01
No appreciable diseases	46	..	1.71	2.7	0.30	0.10
*Suicides	..	6	..	..	..	..
Total	10,468	52	436.95	620.4	3.08	25.90

* The figures against "Suicides" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

TABLE III.

WARRANT OFFICERS, N. C. Os. AND MEN—*contd.*

WESTERN COMMAND.

Table showing the average strength, admissions into hospital, deaths, and constantly sick, during the year 1936, with the ratios per 1,000 of the strength.

Diseases.	Average strength 3,204.	Actuals.			Ratio per 1,000.		
		Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Common cold	.	155	.	3.70	48.4	.	1.15
Diphtheria	.	3	..	0.31	0.9	..	0.10
Dysentery	.	113	.	5.80	35.3	..	1.81
Enteric fever (inclusive of typhoid, para. A, B and C and enteric group)	.	1	..	0.25	0.3	.	0.08
Erysipelas	.	30	..	1.10	9.4	.	0.34
Influenza	.	333	2	9.97	103.9	0.62	3.11
Malaria	.	1	..	0.04	0.3	.	0.01
Measles	.	.	..	.	..	.	..
Meningococcal infection	.	.	..	.	.	.	..
Mumps	.	10	..	0.98	3.1	..	0.31
Pneumonia	.	.	..	.	.	..	..
Pyrexia of uncertain origin	.	..	..	..	..	..	..
Rheumatic fever	.	3	..	0.39	0.9	..	0.12
Sandfly fever	.	51	..	1.50	15.9	..	0.47

SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION

TABLE III—*contd.*

Average strength 3,204. SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION— <i>contd.</i>	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Scarlet fever	..	..	..	..	..	..
Small pox	..	..	..	..	..	..
Tuberculosis { Pulmonary	6	..	0.77	1.9	..	0.24
{ Other	1	..	0.13	0.3	..	0.04
Veneral diseases { Gonorrhea	63	..	8.66	19.7	..	2.70
{ Soft chancre	23	..	3.15	7.2	..	0.98
{ Syphilis	8	..	0.66	2.5	..	0.31
{ Other V. D.	..	..	..	..	..	..
Other diseases due to infection { Scabies	62	..	2.97	19.4	..	0.93
Diseases due to infestation by { Scabies	1	..	0.01	0.3	..	0.00
Metazoan parasites { Other diseases	7	..	0.15	2.2	..	0.05
OTHER DISEASES CLASSIFIED UNDER SYSTEMS.						
Diseases of the nervous system	35	..	2.14	10.9	..	0.67
Mental diseases	18	..	3.09	5.6	..	0.96
Diseases of the—						
Eye	12	..	0.48	3.7	..	0.15
Ear and nose	66	..	2.24	20.6	..	0.70
Circulatory system { Valvular diseases of the heart	..	..	..	..	..	..
{ Disordered action of the heart	19	..	1.38	5.9	..	0.43
{ Other diseases	11	1	1.15	3.4	0.31	0.36
Blood and blood forming organs	10	..	0.64	3.1	..	0.20
Ductless or endocrine glands	1	..	0.07	0.3	..	0.02
Breast	1	..	0.02	0.3	..	0.01
Respiratory system { Larynx and trachea	1	..	0.02	0.3	..	0.01
{ Bronchi and bronchioles	52	..	3.49	16.2	..	1.09
{ Other diseases	8	..	1.97	2.6	..	0.61

Teeth and gums	.	.	.	.	.	7	..	0.10	2.2	..	0.03
	{ Inflammation of tonsils					126	..	3.77	39.3	..	1.18
	{ Inflammation of pharynx					22	..	0.42	6.9	..	0.13
	{ Inflammation of stomach					26	..	0.81	8.1	..	0.25
Digestive system.	{ Gastric ulcer					1	..	0.48	0.3	..	0.15
	{ Duodenal ulcer					5	..	0.46	1.6	..	0.14
	{ Liver					4	..	0.43	1.3	..	0.13
	{ Other diseases					247	..	10.40	77.1	..	3.25
Diseases due to disorders of nutrition or of metabolism	.	.	.	.	.	2	..	0.59	0.6	..	0.18
Diseases of the :—											
Generative system	.	.	.	.	.	31	..	1.77	9.7	..	0.55
Bones, joints, muscles, fasciæ and bursæ	.	.	.	.	.	75	..	3.59	23.1	..	1.12
Areolar tissue	.	.	.	.	.	178	..	6.87	55.6	..	2.14
Skin	.	.	.	.	.	155	..	7.29	18.4	..	2.28
Urinary system	.	.	.	.	.	17	..	1.31	5.3	..	0.41
Injuries	{ General					6	1	0.31	1.9	0.31	0.11
	{ Local					218	3	9.75	68.0	0.94	3.04
	{ In action					.	..	..	..	..	..
Tumours and cysts	.	.	.	.	.	7	..	0.55	2.2	..	0.17
Poisons	.	.	.	.	.	3	1	0.04	0.9	0.31	0.01
No appreciable disease	.	.	.	.	.	..	..	..	..	..	..
Suicides	.	.	.	.	.	..	3	..	..	0.94	..
Total	.	.	.	.	.	2,235	8	106.20	697.6	2.50	33.15

The figures against "Suicides" having already been shown under the heading of the injury, etc. which caused death, are not included in the total.

TABLE IV.

WARRANT OFFICERS, N. C. Os. AND MEN—*contd.*

EASTERN COMMAND.

Table showing the average strength, admissions into hospital, deaths and constantly sick, during the year 1935, with ratios per 1,000 of the strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions	Deaths.	Average number constantly sick.	Admissions	Deaths.	Constantly sick.
Average strength, 15,683.						
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION.						
Common cold	134	..	2.54	8.5	..	0.16
Diphtheria.	10	1	1.09	0.6	0.06	0.07
Dysentery .	434	..	21.25	27.7	.	1.35
Enteric fever (inclusive of typhoid, para. A, B and C and enteric group) .						
Erysipelas .	42	2	6.87	2.7	0.13	0.44
Influenza .	1	..	0.05	0.1	..	0.00
	339	..	8.99	21.6	..	0.57
Malaria .	577	..	27.21	36.8	..	1.73
Measles .	6	..	0.23	0.4	..	0.01
Meningococcal infection	..	..	..	..	..	..
Mumps	6	..	0.26	0.4	..	0.02
Pneumonia.	54	7	4.53	3.4	0.45	0.29
Pyrexia of uncertain origin	1	..	0.05	0.1	..	0.00
Rheumatic fever	20	1	2.74	1.3	0.06	0.17
Sandfly fever .	180	..	3.91	11.5	..	0.25

Scarlet fever	.	.	.	.	.	.	.	3	..	0.33	0.2	0.02
Small-pox	.	.	.	.	.	.	.	1	..	0.11	0.1	0.01
Tuberculosis { Pulmonary	.	.	.	.	.	.	.	15	..	3.36	1.0	0.21
Other	.	.	.	.	.	.	.	2	..	0.57	0.01	0.04
Gonorrhoea	.	.	.	.	.	.	.	466	..	56.95	29.7	3.63
Soft chancre	.	.	.	.	.	.	.	90	..	9.04	5.7	0.58
Syphilis	.	.	.	.	.	.	.	61	..	6.44	3.9	0.35
Other V. D.	.	.	.	.	.	.	.	..	..	..	..	..
Other diseases due to infection	.	.	.	.	.	.	.	205	2	9.42	13.1	0.60
Diseases due to infestation { Scabies	.	.	.	.	.	.	.	14	..	0.63	0.9	0.04
by Metazoan parasites { Other diseases	.	.	.	.	.	.	.	69	..	1.89	4.4	0.12
OTHER DISEASES CLASSIFIED UNDER SYSTEMS.												
Diseases of the nervous system	.	.	.	.	.	.	.	158	1	5.79	10.1	0.37
Mental diseases	.	.	.	.	.	.	.	49	.	8.97	3.1	0.57
Diseases of the eye	.	.	.	.	.	.	.	78	..	3.39	5.0	0.22
Diseases of the ear and nose	.	.	.	.	.	.	.	456	..	12.38	29.1	0.79
Circulatory system { Valvular diseases of the heart	.	.	.	.	.	.	.	4	..	0.35	0.3	0.02
Disordered action of the heart	.	.	.	.	.	.	.	29	1	1.42	1.8	0.09
Other diseases	.	.	.	.	.	.	.	16	..	1.45	1.0	0.09
Blood and blood forming organs	.	.	.	.	.	.	.	87	.	6.60	5.5	0.42
Ducts of endocrine glands	.	.	.	.	.	.	.	7	..	1.05	0.4	0.07
Breast	.	.	.	.	.	.	.	5	..	0.16	0.3	0.01
Respiratory system { Larynx and trachea	.	.	.	.	.	.	.	20	.	0.66	1.3	0.04
Bronchi and bronchioles	.	.	.	.	.	.	.	263	..	8.43	16.8	0.54
Other diseases	.	.	.	.	.	.	.	28	.	1.93	1.8	0.12
Teeth and gums	.	.	.	.	.	.	.	43	..	1.33	2.7	0.08
Inflammation of tonsils	.	.	.	.	.	.	.	416	..	9.58	26.5	0.61
Inflammation of pharynx	.	.	.	.	.	.	.	165	..	3.14	10.5	0.20
Inflammation of stomach	.	.	.	.	.	.	.	98	..	3.60	6.2	0.19
Gastric ulcer	.	.	.	.	.	.	.	3	..	0.37	0.2	0.02
Duodenal ulcer	.	.	.	.	.	.	.	18	..	2.43	1.1	0.15
Liver	.	.	.	.	.	.	.	25	..	1.97	1.6	0.13
Other diseases	.	.	.	.	.	.	.	677	q	33.29	68.5	2.12

TABLE IV—*contd.*

Disease.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Average strength, 15,863.						
OTHER DISEASES CLASSIFIED UNDER SYSTEMS— <i>contd.</i>						
Diseases due to disorders of nutrition or of metabolism	5	.	0.86	0.7	.	0.05
Diseases of the generative system	253	.	15.81	16.1	.	1.01
Diseases of bones, joints, muscles, fasciæ and bursæ	418	..	22.43	26.7	.	1.43
Diseases of the articular tissue	769	..	27.27	49.0	.	1.71
Diseases of the skin	637	..	27.78	41.9	..	1.77
Diseases of the urinary system	83	..	6.01	5.3	..	0.38
Injuries { General	18	4	0.08	1.1	0.26	0.05
{ Local	978	8	43.89	62.4	0.51	2.80
{ In action	..	.	..	.	..	..
tumours and cysts	57	..	2.19	3.6	..	0.14
Poisons	1	.	0.01	0.1	..	0.00
No appreciable disease	55	..	2.30	3.5	..	0.15
•Suicides	..	3	..	..	0.19	..
Total	8,909	33	424.56	588.1	2.10	27.07

*The figures against "Suicides" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

TABLE V.

WARRANT OFFICERS, N. C. Os. AND MEN—contd

SOUTHERN COMMAND.

Table showing the Average Strength, Admissions into Hospital, Deaths and Constantly Sick, during the year 1936, with Ratios per 1,000 of the Strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Average strength 14,544						
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION.						
Common cold	147	..	3 25	10 1	.	0 22
Diphtheria	23	.	2 22	1 6	..	0 15
Dysentery	310	..	14 97	23 4	.	1 03
Enteric fever (inclusive of Typhoid, Para. A, B and C and enteric group).	10	..	1 46	0 7	.	0 10
Erysipelas	47	..	1 27	3 2	..	0 09
Influenza	.	.	.	.	..	..
Malaria	659	1	25 34	45 3	0 07	1 74
Measles	.	.	.	.	..	..
Meningococcal infection	..	.	0 01	..	..	0 00
Mumps	1	.	0 04	0 1	..	0 00
Pneumonia	31	3	2 71	2 1	0 21	0 19
Pyrexia of uncertain origin	2	.	0 03	0 1	..	0 00
Rheumatic fever	26	.	4 79	1 8	..	0 33
Sandfly fever	167	..	3 76	11 5	..	0 26

TABLE V—*contd.*

Diseases, Average strength—14,544.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION— <i>contd.</i>						
Scarlet fever	2	..	0.14	0.1	..	0.01
Small pox	1	..	0.21	0.1	..	0.01
Tuberculosis {	24	..	5.69	1.7	..	0.38
	3	..	0.45	0.2	..	0.03
Venereal diseases {	373	..	51.14	25.6	.	3.52
	75	..	7.60	5.2	..	0.62
	63	..	5.66	4.3	..	0.39
	203	..	7.48	14.1	..	0.51
Other diseases due to infection	16	..	0.38	1.1	..	0.03
Diseases due to infestation by Metazoan parasites {	67	..	1.63	4.6	..	0.11
OTHER DISEASES CLASSIFIED UNDER SYSTEMS.						
Diseases of the nervous system	96	..	5.14	6.6	..	0.35
Mental diseases	43	..	14.06	3.0	..	0.97
Diseases of the eye	79	..	1.80	2.7	..	0.12
Diseases of the ear and nose	280	..	9.89	19.7	..	0.68
Diseases of the {	7	..	1.49	0.5	..	0.10
valvular disease of the heart {	33	1	2.63	2.3	0.07	0.18
circulatory system {	23	1	1.99	1.6	0.28	0.14
Disordered action of the heart {	73	..	5.19	6.0	..	0.36
Diseases of the blood and blood forming organs	4	..	0.42	0.3	..	0.03
Diseases of the thyroid and endocrine glands	8	..	0.42	0.6	..	0.03
Diseases of the breast						

Diseases of the respiratory system.	{ Larynx and trachea Bronchi and bronchials Other diseases	5 225 32		0.09 9.22 2.92	0.3 15.6 2.9		0.01 0.63 0.20
Diseases of the teeth and gums	{ Inflammation of tonsils Inflammation of pharynx	29 413		1.16 9.76	2.0 28.4		0.08 0.67
Diseases of the digestive system.	{ Inflammation of stomach Gastric ulcer Duodenal ulcer Liver diseases Other diseases	128 107 15 6 16 781	 4 1	2.66 5.52 1.47 0.35 1.02 31.18	8.8 7.4 1.0 0.3 1.1 53.7	 0.28 0.07	0.18 0.38 0.10 0.02 0.07 2.14
Diseases due to disorders of nutrition or of metabolism		7	..	0.59	0.5	..	0.04
Diseases of the generative system		205	..	9.33	14.1	..	0.64
Diseases of bones, joints, muscles, fasciae and bursae		322	..	18.20	22.1	..	1.25
Diseases of the arterial tissue		717	..	27.80	49.3	..	1.91
Diseases of the skin.		447	..	20.93	30.7	..	1.44
Diseases of the urinary system		95	2	5.50	6.5	0.14	0.45
Injuries	{ General Local In action	11 801 ..	8 9 ..	0.18 36.42 ..	0.8 55.1 ..	0.55 0.62 ..	0.01 2.50 ..
Furuncles and cysts		28	..	1.37	1.9	..	0.09
Poisons		1	..	0.03	0.1	..	0.00
No appreciable diseases		47	4	1.89	3.2	..	0.13
Quintessence		..	..	..	..	0.28	..
Total		7331	33	371.64	504.1	3.27	25.55

* The figures against "Quintessence" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

TABLE VI.

WARRANT OFFICERS, N. C. Oa. AND MEN—*contd.*

BURMA DISTRICT

Table showing the average strength, admissions into hospital, deaths and constantly sick, during the year 1936, with ratios per 1,000 of the strength

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick
SPECIFIC DISEASES DUE TO INFECTION OR INFESTATION.						
Common cold	13		0.30	7.4	..	0.17
Diphtheria	3		0.26	1.7	..	0.15
Dysentery	44		2.42	25.1	..	1.38
Enteric fever (inclusive of typhoid, para A, B and C and enteric group).	7		0.94	4.0	..	0.54
Erysipelas						
Influenza	3		0.09	1.7	..	0.05
Malaria	124		4.27	70.7	..	2.43
Measles	..		..	..	..	..
Meningococcal infection	..		..	..	..	..
Mumps	1		0.03	0.6	..	0.02
Pneumonia	4		0.54	2.3	..	0.31
Pyrexia of uncertain origin	2		0.10	1.1	..	0.06
Rheumatic fever	1		0.07	0.6	..	0.04
Randilly fever	6		0.27	3.4	..	0.15
Scarlet fever	..		..	..	..	..
Small pox	..		..	..	..	..

Tuberculosis	{ Pulmonary Other	.	.	.	.	1	..	0.47	0.6	..	0.27
		.	.	.	.	..	..	..	..	..	..
Venereal diseases	{ Gonorrhea Soft chancre Syphilis Other V. D.	.	.	.	.	65	..	9.93	37.0	..	5.66
		.	.	.	.	14	..	1.21	8.0	..	0.69
		.	.	.	.	26	..	1.99	14.8	..	1.13
		.	.	.	.	2	..	0.14	1.1	..	0.08
Other diseases due to infection	.	.	.	.	.	44	..	1.43	25.1	..	0.81
Diseases due to infestation by Metazoan parasites	{ Scabies Other diseases	.	.	.	.	8	.	0.27	4.6	..	0.15
		.	.	.	.	13	..	0.38	7.4	..	0.22
OTHER DISEASES CLASSIFIED UNDER SYSTEMS											
Diseases of the nervous system	.	.	.	.	.	23	..	0.58	13.1	..	0.33
Mental diseases	.	.	.	.	.	4	..	0.11	2.3	..	0.06
Diseases of the eye	.	.	.	.	.	12	..	0.55	6.8	..	0.31
Diseases of the ear and nose	.	.	.	.	.	110	..	2.38	62.7	..	1.36
Diseases of the { Valvular diseases of the heart circulatory { Disordered action of the heart system. { Other diseases	.	.	.	.	.	1	..	0.01	0.6	.	0.01
		.	.	.	.	1	..	0.03	0.6	..	0.02
		.	.	.	.	3	1	0.13	1.7	0.57	0.07
Diseases of the blood and blood forming organs	.	.	.	.	.	11	..	0.76	6.3	.	0.43
Diseases of the ductless or endocrine glands	.	.	.	.	.	3	..	0.20	1.7	..	0.11
Diseases of the breast	.	.	.	.	.	..	..	..	..	..	..
Diseases of the { Larynx and trachea respiratory { Bronchi and bronchioles system. { Other diseases	.	.	.	.	.	2	..	0.08	1.1	..	0.05
		.	.	.	.	32	..	1.35	18.2	..	0.20
		.	.	.	.	2	..	0.10	1.1	..	0.06
Diseases of the teeth and gums	.	.	.	.	.	22	..	0.55	12.5	..	0.31
Diseases of the { Inflammation of tonsils Inflammation of pharynx Inflammation of stomach	.	.	.	.	.	51	..	1.18	29.1	..	0.67
		.	.	.	.	30	..	0.72	17.1	..	0.41
Diseases of the { Gastric ulcer Duodenal ulcer Liver Other diseases	.	.	.	.	.	..	..	0.13	2.3	..	0.07
		.	.	.	.	..	..	..	..	..	..
		.	.	.	.	..	..	..	..	..	..
		.	.	.	.	10	..	0.59	5.7	..	0.34
		.	.	.	.	99	..	3.97	56.4	..	2.26

TABLE VI—*contd.*

DISEASES.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick.	Admissions.	Deaths.	Constantly sick.
Average strength—1,753.						
OTHER DISEASES CARRIED UNDER SYSTEMS— <i>contd.</i>						
Diseases due to disorders of nutrition or of metabolism	28	..	1.42	16 0	..	0.81
Diseases of the generative system	45	..	1.68	25 0	..	0.96
Diseases of the bones, joints, muscles, fasciæ and bursæ	210	..	5.42	119 7	..	3.09
Diseases of the articular tissue	89	..	4.50	50.7	..	2.56
Diseases of the skin	29	..	1.21	16.5	..	0.69
Diseases of the urinary system	..	..	..	..	..	..
Injuries	135	2	6.53	76.9	1.14	3.72
{ General	..	..	..	..	..	..
{ Local	..	..	..	..	..	..
{ In action	..	..	..	..	..	..
Tumours and cysts	3	..	0.20	1.7	..	0.11
Poisons	1	..	0.04	0.6	..	0.02
No appreciable disease	17	..	0.33	9.7	..	0.19
* Suicide	..	1	..	..	0.57	..
Total	1358	3	59.86	773.8	1.71	34.11

*The figures against "suicides" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

TABLE VII.

BRITISH OTHER RANKS.

Table showing monthly ratios per 1,000 of the strength of admissions for certain diseases for all India during the year 1936.

1936.	Euteric group of fevers.	Influenza.	Cholera.	Small-pox.	Malaria.	Dysentery protozoa	Dysentery bacillary	Dysentery bacillary exudate.	Dysentery group.	Pyrexia of uncertain origin.	Pneumonia (lobar and lobular).	Diarrhoea.	Dengue.	Sandy fever.	Plague.	Effects of Heat.	All Causes.
January	0.1	1.5	..	0.4	1.5	0.2	0.4	0.2	0.2	0.2	0.4	0.4	0.8	0.2	..	..	33.3
February	0.1	2.2	..	0.2	1.8	0.1	0.5	0.1	0.1	0.2	0.5	1.3	1.1	0.2	..	..	31.6
March	0.2	1.4	..	0.2	1.5	0.2	0.8	0.6	0.2	0.2	0.2	1.5	0.8	0.2	..	..	33.4
April	0.3	0.8	0.1	0.0	2.1	0.3	1.2	0.8	0.7	0.1	0.3	2.7	0.2	2.5	..	0.3	44.2
May	0.2	0.9	0.1	..	2.6	0.2	1.1	0.5	0.4	0.1	0.3	2.1	0.2	7.7	..	0.3	57.3
June	0.2	0.0	0.0	..	4.0	0.1	0.8	0.5	0.4	..	0.3	1.5	0.5	5.4	..	0.3	54.0
July	0.1	1.2	..	..	5.7	0.2	1.6	0.8	0.6	..	0.4	2.0	0.5	6.0	..	0.1	59.7
August	0.2	1.9	..	..	6.5	0.2	1.3	0.5	0.4	..	0.3	1.7	0.5	4.7	..	0.1	62.0
September	0.0	0.4	..	..	9.5	0.2	1.0	0.6	0.4	..	0.1	0.0	0.9	3.3	..	0.0	54.4
October	0.2	0.4	..	..	9.6	0.2	0.9	0.3	0.7	..	0.2	0.9	0.8	1.5	..	..	50.5
November	0.1	0.6	..	..	6.6	0.2	0.9	0.4	0.4	..	0.2	1.2	0.4	0.4	..	..	48.1
December	0.1	0.5	..	..	5.1	0.2	0.6	0.4	0.3	..	0.3	0.9	0.4	0.3	..	..	56.1
Totals	2.6	12.4	0.1	0.1	57.7	2.6	11.1	5.8	4.9	0.2	3.4	16.4	4.7	33.0	..	0.8	580.5

VIII.

OTHER RANKS.

diseases and constantly sick for all causes in each station and district in during 1936.

Diarrhoea.	Cholera.	Veneral diseases.	Small-pox.	Malaria.	Dengue.	Sandy fever.	Plague.	Influenza.	Pneumonia (Lobar and Lobular)	Heart-stroke.	Heart-exhaustion.	All Causes.	Average annual number constantly sick
21 0	..	16 3	..	186 5	..	49 0	..	14 0	..	..	..	648 0	18 37
7 6	..	17 6	..	104 5	..	405 5	..	32 7	..	..	1 3	950 9	20 42
21 5	..	413 4	..	96 4	..	194 5	..	4 3	..	..	..	728 1	25 23
16 5	..	413 4	..	146 9	..	294 5	..	1 6	..	..	..	923 0	45 29
11 3	..	2 8	..	19 7	..	28 1	..	1 4	..	..	1 4	288 3	6 61
15 8	..	23 7	..	103 9	..	221 8	..	9 2	..	6 0	0 5	745 9	25 10
24 2	..	12 1	..	103 0	..	78 8	..	30 3	..	12 1	6 1	666 6	29 43
..	..	..	..	..	..	..	..	..	..	..	..	..	..
22 6	..	11 3	..	96 0	..	73 4	..	28 2	..	11 3	5 6	621 5	27 46
127 5	..	13 4	..	120 8	..	6 7	..	..	..	6 7	..	718 1	21 64
8 0	..	84 0	..	128 0	..	40 0	..	..	..	4 0	..	556 0	43 40
..	..	7 8	..	100 8	..	23 3	..	..	..	..	..	434 1	11 78
11 2	..	..	..	196 9	..	20 1	..	2 2	..	..	..	422 8	11 25
11 0	..	35 7	..	300 0	..	100 0	..	..	..	..	..	500 0	7 00
5 6	..	..	..	35 7	..	23 8	..	..	..	..	..	381 0	12 86
..	..	..	..	38 7	..	5 5	..	5 5	..	..	..	370 2	15 03
3 2	..	6 5	..	22 7	..	13 0	..	22 7	..	..	..	314 9	10 75
16 0	..	..	..	120 0	..	16 0	..	8 0	..	8 0	..	1408 0	164 56
5 3	..	29 1	..	103 2	..	34 8	..	27 4	..	6 1	0 4	527 7	21 93
10 7	..	24 2	..	106 2	..	28 6	..	14 7	..	4 4	0 2	522 8	24 71
10 5	..	31 5	..	70 6	..	12 0	..	..	..	..	..	445 5	23 41
11 0	..	47 7	..	21 5	..	21 6	..	..	..	4 8	..	568 0	18 49
..	..	117 3	..	18 5	..	24 7	..	6 2	..	8 2	..	808 6	41 67
6 3	..	25 0	..	2 2	19 4	..	2 2	..	13 0	4 3	..	591 8	28 19
13 1	..	42 0	..	1 3	76 2	..	55 2	..	49 9	3 9	1 3	662 3	28 52
24 5	..	25 1	..	7 7	..	21 5	..	3 1	..	9 2	..	630 4	21 7
..	..	42 8	..	10 7	..	..	..	..	..	..	5 3	743 3	20 84
22 4	..	3 8	..	5 2	..	..	..	7 6	..	..	..	642 6	50 11
10 3	..	62 1	..	31 5	1 8	26 1	..	13 5	..	6 3	1 8	634 0	35 19
9 9	..	23 0	..	176 0	..	85 2	..	9 9	..	1 6	4 9	634 2	23 20
10 6	..	5 3	..	31 7	..	31 7	..	..	..	..	..	444 4	12 01
39 1	..	27 8	..	6 4	..	30 2	..	6 4	..	2 4	2 4	534 6	21 04
..	..	7 8	..	..	..	39 1	..	..	..	..	..	187 5	4 61
17 3	..	38 4	..	0 3	44 1	0 3	..	33 1	..	3 6	1 3	632 9	24 32
75 4	..	..	..	115 0	..	230 1	..	..	..	..	8 8	911 5	22 82
..	..	20 4	..	214 9	..	..	..	61 2	..	..	23 4	510 2	14 49
..	..	..	..	..	..	..	..	..	..	..	..	214 3	3 57
13 1	..	1 4	..	84 3	..	53 3	..	..	..	..	..	166 7	5 00
24 3	..	26 3	..	43 3	..	..	..	15 2	..	8 6	..	535 6	28 83
..	..	..	..	107 4	..	..	..	..	..	..	..	12 1	0 23
..	..	..	..	..	..	..	..	29 3	..	13 2	..	960 5	27 24

TABLE

BRITISH
Table showing ratios per 1,000 of strength of admissions for certain
India

Stations and Districts	Average annual strength	Enteric group of fevers				Dysentery.			
		Typhoid fever	Para A	Para B	Para C.	Enteric group	Bacillary Dysent.	Bacillary exudate.	Proctocolic
Cherat	429						2.3	2.3	11.7
Landikotal	794					1.3	2.3	2.0	30.2
Nowshera	1,182						3.4	2.6	0.9
Peshawar	1,273				0.8	1.6	20.4	7.9	5.5
Risalpur	711						1.4	1.4	1.4
<i>Peshawar District</i>	4,369				0.2	0.7	8.0	4.1	0.9
Kohat	165						6.1		
Fort Lockhart	8								
Thall	4								
<i>Kohat District</i>	177						5.6		
Abbottabad	149						26.8		13.4
Barian	250						4.0		
Campbellpore	129						7.8		7.8
Ghazal	447							4.5	
Jhelum	10								
Kalabagh (Hazara)	84								11.9
Khanpur	191							22.1	6.6
Kuldana	309						3.2		
Murree	125		8.0				16.0		32.0
Rawalpindi	2,441	1.2					4.1	1.2	5.7
<i>Rawalpindi District</i>	4,124	0.7	0.2				4.8	2.2	4.4
Ambala	668	1.5					3.0	7.5	7.5
Dagbhal	419						2.4		4.8
Amritsar	162							6.2	
Dalhoosie	483						23.8	6.5	8.6
Perozepore	761						1.3	7.9	22.3
Julianpur	652						1.5	1.5	19.9
Jutogh	197						5.3	5.3	
Kasauli	263	7.6					11.4	7.6	8.8
Lahore	1,112					1.8	3.6	5.4	0.9
Multan	603					1.6	6.6	6.6	6.6
Subathu	149						5.8		
Skalkot	1,259					3.2	4.0	7.1	0.8
Sotou	129								
<i>Lahore District</i>	6,913	0.4				1.0	4.9	5.5	1.2
Bannu	113						70.8	8.8	97.3
Utra (small Khan)	49								
Kalabagh and Marri Indas	14								71.4
Muzal	12								
Razmak	1,062						13.2	0.9	5.8
Mir Ali	9								
Wasa	76								26.3

VIII—contd.

Diarrhoea.	Cholera	Veneral diseases	Small-pox	Malaria.	Dengue	Sandy fever.	Plague	Influenza.	Pneumonia (Lobar and lobular).	Heart-stroke	Heat exhaustion	All Causes.	Average annual number constantly sick
16.5 ..	3.7	..	65.2	..	20.12	..	14.2	5.2	..	1.5	597.0	26.07	
38.9 ..	12.5	..	113.2	..	1.4	..	20.1	3.5	..	..	730.6	31.70	
39.9 ..	12.5	..	113.2	..	1.4	..	20.1	3.5	..	..	730.6	31.70	
30.1 ..	30.1	..	183.5	..	18.8	..	0.8	1.9	..	5.6	614.7	18.08	
14.6 ..	39.8	..	66.6	14.6	31.7	..	0.8	1.6	..	..	641.2	41.14	
19.3 ..	36.8	..	95.8	10.2	27.8	..	0.6	1.7	..	1.7	633.2	31.19	
30.8 ..	24.1	..	44.2	..	5.4	..	26.8	1.3	..	..	735.9	20.73	
7.3 ..	32.1	..	26.9	..	23.1	..	4.1	23.1	..	..	399.0	20.29	
7.9 ..	111.9	..	9.9	..	25.5	..	22.4	7.5	..	..	567.2	19.38	
22.6 ..	12.6	..	67.7	..	18.1	..	1.8	4.5	..	0.9	537.9	21.24	
31.6 ..	29.2	..	19.6	..	2.3	..	39.2	4.7	..	0.6	411.8	10.50	
9.6 ..	30.2	..	63.0	..	..	..	15.2	..	..	..	737.3	41.66	
..	23.9	..	43.1	..	..	..	..	..	..	..	387.6	5.02	
22.2 ..	35.1	..	48.9	..	6.0	..	12.1	3.7	..	0.4	601.2	28.73	
24.6 ..	36.3	..	50.4	1.2	7.0	..	8.2	5.9	..	..	545.7	27.63	
28.2 ..	23.2	..	7.0	180.1	7.0	..	23.2	7.0	..	14.1	918.6	38.68	
11.8 ..	34.1	..	42.0	14.4	13.1	..	22.3	..	..	..	569.2	10.51	
8.3 ..	22.7	..	17.0	..	17.0	..	2.8	2.8	1.4	..	318.2	14.33	
30.2 ..	32.4	0.5	20.8	0.5	23.4	..	7.2	4.1	..	..	523.0	26.40	
17.0 ..	5.1	..	18.7	..	..	..	37.4	4.2	..	..	449.4	30.13	
21.7 ..	23.7	0.2	26.6	6.8	15.7	..	15.4	3.8	0.2	0.3	502.8	25.35	
9.5 5.3	74.2	..	17.0	39.2	1.1	..	47.7	5.3	..	..	637.3	27.72	
7.8 ..	141.2	..	2.0	7.8	..	..	0.8	2.0	..	..	495.1	39.55	
1.8 ..	66.1	..	32.1	..	25.0	..	12.5	..	..	..	458.9	17.70	
5.7 ..	9.5	..	24.7	..	..	..	116.0	..	..	..	355.5	9.96	
.. ..	7.5	..	30.1	..	30.1	..	..	..	..	..	83.3	11.43	
.. ..	..	..	..	..	..	..	..	..	..	..	130.5	7.74	
6.3 ..	68.0	..	19.4	14.9	7.1	..	44.0	2.2	..	..	492.9	23.10	
11.6 ..	47.9	..	41.4	3.9	15.5	..	1.3	3.9	1.3	2.6	720.6	30.35	
29.3 ..	34.9	..	71.6	4.3	27.1	..	75.9	1.1	..	..	790.7	34.23	
3.9 ..	57.9	..	54.1	..	3.9	..	..	15.4	..	..	830.5	34.71	
18.9 ..	41.0	..	57.3	3.6	19.4	..	36.3	4.1	0.5	1.0	781.5	33.29	
13.0 ..	18.3	..	45.8	..	2.2	..	..	..	..	..	232.0	5.63	
14.6 ..	49.3	..	61.5	..	2.1	..	..	4.3	..	0.7	526.1	24.39	
10.3 ..	27.5	..	92.9	..	57.6	..	13.7	5.2	..	..	532.7	13.07	
14.4 ..	18.9	..	3.1	15.4	39.3	..	..	1.5	..	..	435.0	21.77	
17.2 ..	..	..	69.0	..	..	..	..	..	..	..	327.4	7.26	
.. ..	..	..	47.6	..	..	..	..	..	..	..	714.3	11.40	

TABLE

Stations and Districts.	Average annual strength	Enteric group of fevers.					Dysentery.			
		Typhoid fever	Para A.	Para B	Para C.	Enteric group.	Bacillary Bact.	Bacillary exudate.	Protozoal.	Clinical
<i>Dacca District</i>	5,753	.	..	..	..	0.2	14.4	4.0	1.6	0.5
<i>Mhow</i>	1,479	..	.	.	..	1.4	9.5	5.4	1.4	1.4
<i>Mount Abu</i>	73	.	.	.	..	.	13.7	.	.	.
<i>Nasirabad</i>	711	.	.	..	..	.	18.3	4.2	4.2	1.4
<i>Ahmedabad</i>	156	.	.	.	.	.	12.3	25.6	6.4	.
<i>Colaba</i>	749	.	.	.	.	1.4	12.2	9.6	2.7	4.1
<i>Deolali</i>	337	.	.	.	.	.	.	2.8	.	.
<i>Bombay District</i>	3,516	.	...	..	..	0.9	11.1	6.5	2.3	1.7
<i>Belgaum</i>	73	..	..	.	.	13.7	.	.	.	.
<i>Poona</i>	2,377	0.4	0.4	..	...	0.8	21.5	13.9	0.8	.
<i>Purnadhar</i>	72	.	..	..	...	...	27.8	..	.	.
<i>Poona Ede Area</i>	2,522	0.4	0.4	..	.	1.2	21.0	13.1	0.8	.
<i>Bangalore</i>	1,047	...	...	...	...	...	16.2	5.7	3.8	2.9
<i>Madras</i>	761	..	...	...	...	.	5.3	3.9	1.3	..
<i>Malapurm</i>	134	...	..	..	...	..	1.3	16.2	3.8	...
<i>Wellington</i>	789	..	..	..	...	1.3	.	.	.	.
<i>Madras District</i>	2,748	...	.	..	...	0.4	8.0	7.6	2.9	1.1
<i>Manila'y</i>	126	...	..	...	...	7.9	...	7.9	.	...
<i>Miymyo</i>	715	...	...	...	...	4.1	4.1	6.8	2.7	2.7
<i>Mingaladon</i>	894	.	..	...	..	2.2	14.5	3.4	14.5	2.2
<i>Burma District</i>	1,755	...	...	.	..	3.4	9.1	5.1	6.5	2.3
INDIA	52,059	0.3	0.2	0.0	0.0	1.0	11.1	5.4	2.5	4.9

VIII—concl'd.

Diarrhea.	Cholera.	Veneral diseases.	Small-pox.	Malaria.	Dengue.	Sandfly fever.	Plague.	Influenza.	Pneumonia (Lobar and Lobular).	Heat-stroke.	Heat-exhaustion.	All Causes.	Average annual number constantly sick
14.2	..	20.7	..	36.8	8.2	26.3	..	2.1	2.4	.	0.2	468.0	18.74
18.3	.	13.5	0.7	61.1	..	..	..	5.4	4.7	...	.	513.9	27.41
41.1		27.4	.	54.8	..	..	..	7.0	..	.	.	424.7	12.60
25.3		25.3	.	39.4	.	7.0	..	7.0	.	...	...	544.3	21.21
6.4		25.6		160.3	25.6	..	..	6.8	4.1	..	1.4	763.8	23.03
10.3		77.0		27.0	..	..	..	14.0	5.6	..	5.6	697.3	48.86
5.6		19.6	...	70.0	.	..	..	14.0	5.6	..	5.6	728.3	22.21
16.8		30.7	0.3	63.1	1.1	1.4	..	6.5	3.4	..	0.9	589.6	29.64
12.2		27.4		27.4	..	..	..	13.7	13.7	..	..	369.9	9.45
13.9		32.4		76.8	..	..	..	3.8	0.8	..	..	565.8	39.65
		27.8		55.8	..	..	..	..	..	..	..	736.1	27.03
11.9		32.1		74.5	..	..	..	4.0	1.2	.	..	565.0	33.42
1.0		70.7		10.5	3.8	3.8	...	..	1.3	.	..	484.2	27.25
0.2		114.3		21.0	60.4	..	..	..	..	.	..	471.7	31.24
7.5		126.9		7.5	..	..	..	1.3	..	...	..	522.4	31.04
16.5		49.4		6.3	..	..	...	1.3	..	...	..	316.9	21.46
8.0	..	79.0		11.6	18.6	1.5	.	0.4	0.4	...	..	431.6	26.71
31.7	..	163.7	..	63.5	47.6	..	..	..	..	...	..	1097.3	49.32
5.4	...	48.3	.	85.7	10.9	8.2	..	2.7	..	...	..	593.6	31.67
10.1	.	53.7		60.4	23.5	..	...	1.1	4.5	..	...	815.4	30.50
9.7	.	59.7	.	71.2	19.9	3.4	...	1.7	2.3	...	...	732.0	32.35
16.4	0.1	35.1	0.1	57.7	4.7	33.6	...	12.3	3.4	0.2	0.6	530.5	26.93

TABLE IX.

BRITISH OFFICERS (BRITISH SERVICE).

ALL INDIA.

Table showing the Average Strength, Admissions into Hospital, Deaths and Constantly Sick, during the year 1930, with Ratios per 1,000 of the Strength.

Diseases	Actuals.			Ratio per 1,000		
	Admissions.	Deaths.	Average number constantly sick.	Admissions	Deaths	Constantly sick.
Average strength	2,269.					
Specific diseases due to infection or infestation.						
Crim. m. cold	12		0.20	5.3	..	0.09
Diphtheria	3		0.14	1.8	..	0.05
Dysentery	92		3.14	40.1	..	1.38
Enteric fever (inclusive of typhoid, para A, B and C, and enteric group)	6	..	0.70	2.6	..	0.31
Paratyphoid	1		0.02	0.4	..	0.01
Typhus	30	..	0.60	13.2	..	0.26
Measles	71	..	2.05	31.3	..	0.91
Measles-exanth infection	..	..	..	..	..	..
Mumps	6	..	0.23	2.6	..	0.10
Pneumonia	7	..	0.68	3.1	..	0.30
Pyrexia of uncertain origin	1	..	0.16	0.4	..	0.07
Rheumatic fever	64	..	0.97	28.2	..	0.43
Sandfly fever	..	..	..	..	..	..
Scarlat. fever.	..	..	..	..	..	..
Small-pox	1	..	0.05	0.4	..	0.02
Tuberculosis { Pulmonary	2	..	0.12	0.9	..	0.05
{ Other	1	..	0.00	0.4	..	0.00
Veneral diseases { Gonorrhoea	1	..	0.13	0.4	..	0.06
{ Soft chancre	..	..	..	..	..	..
{ Syphilis	..	..	..	..	..	..
{ Other V. D.	..	..	..	..	..	..

TABLE X.

WIVES OF WARRANT OFFICERS, N. C. Os. AND MEN.

INDIA.

Table showing the average strength, admissions into hospital, deaths and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Average number constantly sick	Admissions.	Deaths.	Constantly sick.
<i>Specific diseases due to infection or infestation.</i>						
Common cold	18	...	0.22	4.4	...	0.05
Dysentery	6	...	0.47	1.5	...	0.12
Dysentery	48	...	1.69	11.8	...	0.42
Etiologic fever (inclusive of typhoid, paratyphoid and enteric group).	2	..	0.28	0.5	...	0.09
Krysalpelas	1	..	0.03	0.2	...	0.01
Indurata	14	...	0.25	3.5	...	0.06
Malaria	82	...	2.31	20.2	...	0.57
Measles	2	..	0.09	0.5	...	0.02
Meningoencephalitis	...	...	..	...	...	...
Mumps	1	...	0.04	0.2	...	0.01
Pneumonia	10	1	0.69	2.5	0.25	0.17
Pruritus of uncertain origin	...	...	...	...	...	...
Rheumatic fever.	2	...	0.27	0.5	...	0.07
Sandy fever	12	...	0.17	3.0	...	0.04
Scarlet fever.	...	..	...	...	...	...
Small pox	...	...	0.14	...	...	0.03
Tuberculosis { Pulmonary	6	...	1.25	1.5	...	0.31
{ Other	2	...	0.64	0.5	...	0.01
Veneral diseases { Gonorrhoea	1	..	0.11	0.2	...	0.03
{ Soft chancre	...	...	...	...	...	...
{ Syphilis	...	..	...	...	...	...
{ Other V. D.	...	..	...	...	...	...
Other diseases due to infection	29	..	0.76	7.2	..	0.19

TABLE XI.

CHILDREN OF WARRANT OFFICERS, N. C. Oa. AND MEN.

INDIA.

Table showing the Average Strength, Admissions into Hospital, Deaths, and Constantly Sick, during the year 1936, with Ratio per 1,000 of the Strength.

Disease.	Average strength	Average strength due to infection or infestation	Actuals			Ratio per 1,000.		
			Admissions.	Deaths	Average number constantly sick	Admissions	Deaths	Constantly sick
Common cold	.	.	59	1	0.80	6.3	0.16	0.10
Influenza	.	.	53	16	4.89	9.4	2.55	0.79
Dysentery	.	.	143	..	6.06	23.1	..	1.05
Fatigue fever (inclusive of typhoid, para. A, Band and enteric group)	.	.	10	..	1.43	1.6	..	0.24
Typhoid	.	.	..	..	..	..	..	..
Jaundice	.	.	43	..	0.75	6.9	..	0.12
Malaria	.	.	40	..	2.82	14.4	..	0.42
Diarrhoea	.	.	21	..	0.85	3.4	..	0.10
Brucellosis	.	.	..	..	..	..	..	..
Measles	.	.	6	10	0.14	1.0	..	0.02
Scarlet fever	.	.	46	10	1.03	7.4	1.61	0.31
Typhoid uncertain origin	.	.	..	..	..	..	..	..
Rheumatic fever	.	.	9	1	0.51	1.5	0.16	0.03
Sandy fever	.	.	14	..	0.19	2.2	..	0.03
Scarlet fever	.	.	11	..	0.68	1.8	..	0.11
Smallpox	.	.	2	1	0.12	0.3	0.16	0.02
Tuberculosis { Pulmonary	.	.	2	2	0.22	0.3	0.20	0.04
{ Other	.	.	..	..	..	..	..	..
Veneral diseases { Gonorrhoea	.	.	3	..	0.10	0.3	..	0.02
{ Soft chancre	.	.	..	..	1.64	0.5	..	0.27
{ Syphilis	.	.	..	..	..	..	..	..
{ Other V. D.	.	.	..	..	..	..	..	..
Other diseases due to infection	.	.	102	3	4.16	16.5	0.43	0.67

Diseases due to infestation by metazoan parasites	1	..	0.06	0.2	0.01
Other diseases classified under systems.					
Diseases of the nervous system	19	4	0.76	3.1	0.12
Mental diseases	..	..	..	..	..
Diseases of the—					
Eye	30	..	0.82	4.8	0.13
Ear and nose	61	..	2.12	9.9	0.31
Valvular disease of the heart	1	..	0.16	0.2	0.03
Disordered action of the heart	1	..	0.16	0.6	0.03
Circulatory system.	1	..	0.11	0.2	0.02
Other diseases	..	..	..	..	..
Blood and blood forming organs	29	..	0.87	4.7	0.14
Ductless or endocrine glands	1	..	0.02	0.2	0.00
Liver	..	..	..	..	..
Respiratory system.	149	..	0.06	0.3	0.01
Larynx and trachea	2	..	2.84	24.1	0.46
Bronchi and bronchioles	2	..	0.31	0.5	0.05
Other diseases.	..	..	..	..	..
Teeth and gums	15	..	0.44	2.4	0.07
Inflammation of tonsils	274	..	4.90	44.3	0.79
Inflammation of pharynx	31	..	0.15	1.8	0.02
Inflammation of stomach	9	6	0.13	1.5	0.03
Gastric ulcer	..	..	..	..	..
Digestive system.	..	..	..	..	..
Duodenal ulcer	..	..	0.01	0.3	0.00
Liver	22	..	8.51	63.8	1.39
Other diseases	395	18	..	..	0.50
Diseases due to disorders of nutrition or of metabolism	26	6	1.78	5.8	0.29
Diseases of the—					
Generative system	49	12	0.93	7.9	0.15
Bones, joints, muscles, fasciae and ligum.	14	..	0.70	2.3	0.11
Arterial tissue	90	..	2.40	14.5	0.39
Skin	26	..	0.32	4.2	0.13
Urinary system	27	..	1.52	4.4	0.25
Injuries	..	..	..	..	..
General	2	..	0.02	0.2	0.00
Local	75	1	2.55	12.1	0.40
In action	..	..	..	..	..
In unconsolidated crystals	3	..	0.08	0.5	0.01
In blood	..	..	0.05	0.6	0.01
Metamorphic labile disease	39	..	2.64	6.3	0.43
Other life	..	..	..	..	..
Total	2,025	83	64.55	327.0	10.2

TABLE XII.

BRITISH OTHER RANKS.

Table showing admission and death ratios per 1,000 of strength by Commands contrasted with the previous year, and the average for the previous five years.

Commands.	Enteric group of fevers.		Influenza.		Cholera.		Small-pox.		Malaria.		Dysentery.	
	A.	D.	A.	D.	A.	D.	A.	D.	A.	D.	A.	D.
Northern Command	{ 1931-35 1935 1936	: 3.6 0.29 0.30 0.05	: 21.0 8.0 13.5	:	:	:	: 0.1 .. 0.1	: .. 0.06	: 104.7 57.3 78.5	: 0.06	: 24.2 28.8 20.9	:
Western Command	{ 1931-35 1935 1936	: 2.8 0.06 1.3 0.3	: 38.9 11.2 9.4	: 0.10	:	:	:	:	: 154.8 138.1 103.9	: 0.25 0.51 0.62	: 39.1 37.1 36.3	:
Eastern Command	{ 1931-35 1935 1936	: 3.1 0.26 2.3 0.19 0.13	: 18.2 11.0 21.6	: 0.02	: 0.1 .. 0.3	:	: 0.1 0.2 0.1	:	: 71.9 44.8 36.8	: 0.06 0.13 ..	: 26.2 30.6 27.7	: 0.04 0.08 ..
Southern Command	{ 1931-35 1935 1936	: 1.6 0.12 0.7 0.07 0.7	: 11.5 12.6 3.2	: 0.01	:	:	: 0.1 .. 0.1	:	: 81.8 46.0 45.3	: 0.05 .. 0.47	: 27.2 25.6 23.4	:
Burma District	{ 1931-35 1935 1936	: 3.1 3.2 4.0	: 19.1 6.1 1.7	:	:	:	:	:	: 47.8 20.2 70.7	:	: 19.2 32.0 25.1	:
All-India	{ 1931-35 1935 1936	: 2.7 0.20 2.0 0.17 1.6	: 18.2 10.6 12.4	: 0.02	: 0.0 0.4 0.1	:	: 0.1 0.1 0.2	: 0.02	: 55.1 54.1 55.0	: 0.07 0.08 0.04	: 36.6 30.2 26.6	: 0.01 0.02 ..

Commands.	Pyrexia of uncertain origin.	Pneumonia, lobar and lobular.		Venereal diseases.		Dysentery.	Fever by fever.		Plague.	
		A.	B.	A.	B.		A.	B.	A.	B.
Northern Command	{ 1931-35	2.2	5.5	0.48	27.6	0.3	80.6	..	..	..
	{ 1935	1.0	5.2	0.42	27.3	..	53.1	..	..	..
	{ 1936	0.3	5.0	0.59	27.8	0.1	80.2	..	..	..
Western Command	{ 1931-35	0.7	4.0	0.44	26.3	3.7	7.4	..	..	..
	{ 1935	..	3.3	0.26	25.2	5.6	6.4	..	..	..
	{ 1936	..	3.1	..	29.4	..	15.9	..	..	..
Eastern Command	{ 1931-35	0.6	4.2	0.34	43.8	10.4	21.7	0.01	..	..
	{ 1935	0.2	4.4	0.70	50.8	4.8	24.3	..	..	..
	{ 1936	0.1	3.6	0.45	39.3	5.5	11.5	..	..	..
Southern Command	{ 1931-35	2.6	2.9	0.24	37.0	10.9	16.3	..	..	..
	{ 1935	0.1	3.6	0.14	33.3	5.9	9.7	..	..	..
	{ 1936	..	2.1	0.21	35.1	7.0	11.5	..	..	..
Barua District	{ 1931-35	0.9	2.3	0.11	97.6	63.6	1.6	..	..	..
	{ 1935	0.6	0.6	..	79.4	57.4	3.4	..	..	..
	{ 1936	5.7	21.3	..	59.8	19.9	..	..	..	..
All India	{ 1931-35	1.7	4.1	0.26	37.3	8.6	58.8	..	..	..
	{ 1935	0.7	4.2	0.40	38.8	5.0	36.5	..	..	..
	{ 1936	0.2	3.6	0.38	34.5	4.7	35.3	..	..	..

A—Admissions.

D—Deaths

TABLE XIII

VACCINATION PERFORMED IN THE BRITISH AND INDIAN ARMIES DURING 1935—OFFICERS AND OTHER RANKS.

Commands.	British Troops.									
	Officers.					Warrant and N. C. Officers and men.				
	Number.		Percentage of successful cases to total operations.			Number.		Percentage of successful cases to total operations.		
	F.	R.	F.	R.	F.	R.	F.	R.	F.	R.
Northern	.	.	.	.	2	375	50	86	274	6,324
Western	.	.	.	.	23	52	10.3	85	928	480
Eastern	.	.	.	.	700	79	73	73	53	4,628
Southern	.	.	.	.	15	184	83	74	340	3,390
Burma District	.	.	.	.	..	4	..	..	..	424
Total	..	..	..	..	49	835	95	81	1,599	15,216
										77
										79

Commands.	Indian Troops.									
	Indian commissioned, Non-commissioned officers and men.					Followers.				
	Number.		Percentage of successful cases to total operations.			Number.		Percentage of successful cases to total operations.		
	F.	R.	F.	R.	F.	R.	F.	R.	F.	R.
Northern	.	.	.	.	22	29,631	95	84	24	4,807
Western	.	.	.	.	506	4,618	..	82	2	1,017
Eastern	.	.	.	.	506	14,015	100	70	5	1,892
Southern	.	.	.	.	361	6,455	80	65	16	1,985
Burma District	.	.	.	.	..	1,089	..	55	..	137
Total	..	..	..	..	659	46,790	89	76	45	9,833
										100
										80

F.—Primary		R.—Re-vaccinations.	

TABLE XIV.

VACCINATION PERFORMED IN THE FAMILIES—BRITISH ARMY DURING 1936.

Commands.	Women				Children.			
	Number		Percentage of successful cases to total operations.		Number.		Percentage of successful cases to total operations.	
	P.	R.	P.	R.	P.	R.	P.	R.
Northern . . .		836	..	90	223	853	100	90
Western . . .		49	..	78	17	51	100	84
Eastern . . .	5	391	..	76	174	490	90	75
Southern . . .	66	349	97	73	263	616	98	73
Burma District . .	5	19	100	67	24	20	87	59
Total	76	1,613	91	83	701	1,930	96	81

P—Primary

R—Revaccinations.

TABLE XV.

VACCINATION PERFORMED IN THE FAMILIES—INDIAN ARMY DURING 1936.

Commands.	Women.				Children.			
	Number.		Percentage of successful cases to total operations.		Number.		Percentage of successful cases to total operations.	
	P.	R.	P.	R.	P.	R.	P.	R.
Northern . . .	..	113	..	81	19	66	100	77
Western . . .	..	20	..	100	5	3	100	100
Eastern . . .	..	168	..	75	6	93	100	97
Southern . . .	..	65	..	63	9	24	100	75
Burma District . .	..	3	..	23	2	1	100	..
Total	..	306	..	79	41	137	100	79

P—Primary.

R—Revaccinations.

SECTION II.
INDIAN ARMY, 1936.

TABLE B.

STATIONS BY COMMANDS AND INDEPENDENT DISTRICTS.

Stations.	Height above M S level in feet.	Autho- rity for height.	Points of reference.	Stations.	Height above M S level in feet.	Autho- rity for height.	Points of reference.
<i>North-east Command.</i>				<i>Eastern Command— contd</i>			
Abbotabad . . .	4,010	S. D.	Map.	Almora . . .	6,494	S.D.	Map.
Ambala . . .	902	"	S.B.M.	Bankura . . .	"	"	"
Amritsar . . .	754	"	"	Bareilly . . .	563	S.D.	S.B.M.
Bakloh . . .	4,585	"	Map.	Benares . . .	256	"	"
Bannu . . .	1,250	"	"	Cawnpore . . .	407	"	B.M.
Campbellpore . . .	1,180	"	"	Chittagong . . .	"	"	"
Chitral . . .	4,980	"	"	Comilla . . .	"	"	"
Dagshai . . .	6,087	"	"	Dacca . . .	20	M.D.	"
Dalhousie . . .	7,687	"	"	Dehra Dun . . .	2,232	S.D.	S.B.M.
Dera Ismail Khan . . .	568	"	S.B.M.	Dehli . . .	757	"	"
Dharamsala Cantt. . .	4,500	"	Map.	Dinapore . . .	170	"	Church.
Drosh Fort . . .	4,340	"	"	Fatehgarh . . .	467	"	"
Perwezpore . . .	649	"	S.B.M.	Fyzabad . . .	330	"	S.B.M.
Jhelum . . .	762	"	"	Ghoom . . .	7,313	"	Jn of road.
Jullundur Cantt. . .	771	"	B.M.	Gyantse . . .	13,120	"	Map
Jutogh . . .	6,370	"	Map.	Gorakhpore . . .	"	"	"
Kalabagh and Bara- gall . . .	7,963	"	"	Jhansi . . .	849	S.D.	S.B.M.
Kalabagh and Mari Indus . . .	692	"	"	Landsdowne . . .	5,823	"	Map.
Kohat . . .	1,725	"	"	Lucknow . . .	383	"	B.M.
Kuldana . . .	7,049	S.G.	"	Meerut . . .	737	"	S.B.M.
Lahore Cantonment . . .	706	S.D.	S.B.M.	Midnapore . . .	"	"	"
Landikotal . . .	3,509	"	Map	Muttra . . .	560	S.D.	S.B.M.
Lockhart Fort . . .	6,613	"	"	Mymensingh . . .	"	"	"
Malakand . . .	2,740	"	"	Nowgong . . .	735	S.D.	B.M.
Manzal . . .	1,650	"	"	Roorkee . . .	879	"	S.B.M.
Mardan . . .	1,000	"	"	Saidpur . . .	"	"	"
Mir Ali . . .	2,240	S.G.	V.O.L.	Shillong . . .	4,921	S.D.	Map.
Mona . . .	3,500	R.D.	Map.	<i>Southern Command.</i>			
Multan . . .	404	"	S.B.M.	Ahmedabad . . .	162	S.D.	S.B.M.
Nowshera (Ry. Sta- tion) . . .	966	"	B.M.	Ahmednagar . . .	2,180	"	Map.
Peshawar . . .	1,152	"	S.B.M.	Aurangabad . . .	1,905	M.D.	"
Rawalpindi . . .	1,689	"	"	Bangalore . . .	3,002	S.D.	S.B.M.
Rashtak . . .	6,556	"	Map	Baroda . . .	114	"	B.M.
Risalpur . . .	1,014	"	B.M.	Belgaum . . .	2,623	"	S.B.M.
Rawal . . .	3,174	"	"	Bombay (town hall) . . .	20	"	"
Rareodha (Railway Rest House) . . .	615	"	"	Cannanore . . .	40	"	"
Sialkot . . .	829	"	"	Deotoli . . .	1,894	"	S.B.M.
Solan . . .	5,073	"	"	Jubbulpore . . .	1,320	"	"
Suibah . . .	4,077	"	Map	Kamptee (Rly. Sta- tion) . . .	940	"	B.M.
Thall . . .	2,450	"	"	Mhow (Ry. Station) . . .	1,837	"	"
Wana . . .	4,530	"	V.O.L.	Mount Abu (Sanito- rium) . . .	3,836	"	"
<i>Western Command.</i>				Nearmud . . .	1,613	"	"
Chaman Fort . . .	5,502	S.D.	Map.	Nasirabad . . .	1,461	"	B.M.
Fort Sandeman . . .	4,630	"	"	Pachmarhi . . .	3,490	"	"
Hinjabagh . . .	5,421	"	"	Poona . . .	1,667	"	S.B.M.
Hyderabad (Civil) . . .	94	"	S.B.M.	Saugor . . .	1,755	"	"
Karachi (Holy Tri- nity Church) . . .	24	"	"	St. Thos. Mount (Ry. Station) . . .	34	"	B.M.
Loralai . . .	4,723	"	Map	Madras (Obey.) . . .	250	"	"
Quetta . . .	5,510	"	S.B.M.	Trichinopoly . . .	254	"	S.B.M.
Siti . . .	455	"	"	Trimulgherry . . .	1,843	"	Map.
<i>Eastern Command</i>				Wellington Sta. Hosp. . .	5,800	"	"
<i>Burma District.</i>				<i>Burma District.</i>			
Agra (Fort) . . .	523	S.D.	S.B.M.	Mandalay (Fort Dufferin) . . .	244	S.D.	Map.
Alipore . . .	17	"	B.M.	Maymyo . . .	3,503	"	"
Allahabad . . .	314	"	S.B.M.	Mingaladon . . .	115	"	"

* These heights are usually those of the survey marks or of the masonry surface in barometer elevations of meteorological observatories.

TABLE XVI.

INDIAN OFFICERS AND INDIAN OTHER RANKS.

ALL INDIA.

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

Disease.	Admissions.	Deaths.	Actuals.		Average number constantly sick	Ratios per 1,000.			
			Admissions.	Deaths.		Admissions.	Deaths.	Invalids.	Constantly sick.
Average strength, 116,523									
<i>Specific diseases due to infection or infestation</i>									
Common cold	1,241	..	..	..	21.69	10.6	..	..	0.19
Diphtheria	6	..	..	..	0.54	0.1	..	..	0.00
Dysentery	1,277	4	..	..	50.02	11.0	0.03	..	0.43
Enteric fever (inclusive of typhoid, para. A D & C and enteric group).	73	5	..	..	11.34	0.7	0.04	..	0.10
Typhus	4	1	..	..	0.21	0.0	..	..	0.00
Influenza	851	..	..	..	19.66	7.3	0.01	..	0.17
Malaria	14,340	8	..	..	348.05	123.1	0.07	..	2.09
Measles	156	..	..	..	4.35	1.3	..	..	0.05
Meningococcal infection	16	4	1	..	1.51	0.1	0.03	0.01	0.01
Mumps	592	..	1	..	31.64	5.1	0.61	0.01	0.27
Scarlet fever	621	71	..	..	48.95	5.4	..	..	0.42
of uncertain origin	10	1	..	..	0.63	0.1	0.01	..	0.01
ty fever	93	..	8	..	7.51	0.3	..	0.07	0.06
fever	1,236	..	..	..	21.66	10.6	..	..	0.19
of	..	..	..	..	..	..	..	..	..
of	20	..	..	..	1.75	0.2	..	..	0.02
monary	203	16	193	..	21.30	1.7	0.13	1.66	0.18
er	30	3	15	..	4.32	0.3	0.03	0.13	0.04
Non-specific	561	..	1	..	61.32	4.8	..	0.01	0.53
Neisseria	181	..	..	..	15.24	1.6	..	..	0.13
Neisseria	397	..	..	..	42.00	1.4	..	0.03	0.30
Syphilis	..	..	..	..	..	0.0	..	..	0.00
Other VD.	5	..	..	..	0.17	..	..	..	..

TABLE XVII.

INDIAN OFFICERS AND INDIAN OTHER RANKS—*contd.*

NORTHERN COMMAND.

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

Diseases.		Actuals				Ratio per 1,000.			
Average strength, 56,536.		Admissions	Deaths	Invalids	Average number constantly sick	Admissions	Deaths.	Invalids	Constantly sick
Specific Diseases due to infection or infestation.									
Common cold	.	511	..	...	8.93	9.1	...	...	0.16
Diphtheria	.	1	..	...	0.08	0.0	...	...	0.00
Dysentery	.	544	..	...	21.61	9.7	0.05	...	0.38
Enteric fever (inclusive of typhoid, para A, B & C, and enteric group).	.	27	1	...	4.55	0.5	0.02	...	0.08
Fryalpeias	.	4	...	..	0.21	0.1	...	...	0.00
Indonisa	.	356	1	..	9.25	6.9	0.02	...	0.16
Malaria	.	7,864	3	..	171.44	139.6	0.06	...	3.04
Mecras	.	114	...	..	4.06	2.0	...	...	0.07
Meningococcal infection	.	11	4	...	0.73	0.2	0.07	...	0.01
Mumps	.	256	..	1	15.67	5.1	...	0.02	0.28
Pneumonia	.	357	44	..	26.76	6.3	0.78	...	0.47
Pyrexia of uncertain origin	.	5	1	..	0.52	0.1	0.62	...	0.01
Rheumatic fever	.	41	...	6	3.51	0.7	..	0.11	0.08
Scarlat fever	.	1,041	...	...	18.23	18.5	...	...	0.32
Scarlet fever.	.	...	...	...	...	...	...	...	...
Small-pox	.	7	10	98	0.63	0.1	0.18	...	0.01
Tuberculosis	.	114	2	7	0.83	2.0	0.15	...	0.16
Other	.	17	...	...	2.57	0.3	0.04	0.12	0.05
Veneral diseases	.	183	...	1	17.82	3.2	...	0.02	0.32
{ Gonorrhoea	.	67	...	...	6.41	1.2	...	...	0.11
{ Soft chancre	.	120	...	...	11.34	2.1	...	...	0.50
{ Syphilis	.	...	...	...	0.12	0.0	...	...	0.09
{ Other V. D.	.	...	...	...	...	...	...	...	...

Specific Diseases due to infection or infestation.

Common cold	511	..	...	8.99	9.1	...	...	0.16
Diphtheria	1	..	...	0.08	0.0	...	...	0.00
Dysentery	544	..	...	21.61	9.7	0.05	...	0.28
Enteric fever (inclusive of typhoid, para A, B & C, and enteric group).	27	1	...	4.55	0.5	0.02	...	0.08
Fryalpeias	4	..	...	0.21	0.1	...	...	0.00
Indonisa	386	..	...	9.25	6.9	0.02	...	0.16
Malaria	7,884	3	..	171.44	189.4	0.06	...	3.04
Meningococcal infection	114	..	...	4.06	2.0	...	...	0.07
Mumps	11	4	..	0.73	0.2	0.07	...	0.01
Pyrexia of uncertain origin	256	..	...	15.67	5.1	...	0.02	0.28
Rheumatic fever	357	44	..	28.76	6.3	0.78	...	0.47
Sandy fever	5	1	..	0.53	0.1	0.02	...	0.01
Scarlet fever.	41	...	6	3.51	0.7	..	0.11	0.06
Small-pox	1,041	...	...	18.23	18.5	...	...	0.32
Tuberculosis	7	10	98	0.63	0.1	...	...	...
Veneral diseases	114	2	7	9.53	2.0	0.18	1.74	0.15
{ Gonorrhoea	17	..	...	2.77	0.3	0.04	0.12	0.05
{ Soft chancre	183	...	1	17.82	3.2	...	0.02	0.32
{ Syphilis	67	...	..	6.41	2.2	...	...	0.11
{ Other V. D.	120	1	..	11.34	2.1	...	0.04	0.20
	..	..	...	0.12	0.0	...	..	0.00

Other diseases due to infection	5	8	19.55	4.6	0.09	0.14	0.35
Diseases due to infectious diseases	...	...	9.59	6.2	...	...	0.17
by Mexican parasites { Other diseases	...	...	21.27	7.2	...	...	0.38
<i>Other Diseases classified under systems</i>							
Diseases of the nervous system	8	21	8.32	3.0	0.14	0.37	0.14
Mental diseases	1	16	4.25	0.7	0.02	0.28	0.08
Diseases of the —							
Eye	580	24	24.71	10.5	...	0.45	0.44
Nose and mouth	410	2	13.03	8.0	0.02	0.04	0.24
Diseases of the circulatory { Vascular diseases of the heart	1	1	0.60	0.0	0.0	0.02	0.02
system. { Disorders of action of the heart	2	6	1.26	0.4	0.02	0.11	0.9
Other disease	25	3	1.53	0.4	0.07	0.05	0.63
Blood and blood forming organs	149	5	8.43	2.6	0.05	0.09	0.15
Diseases of nerves or endocrine glands	6	1	0.55	0.1	...	0.02	0.01
Diseases of the breast	...	...	...	...	...	...	...
Diseases of { Larynx and trachea.	54	...	1.80	1.0	...	...	0.03
the respiratory { Bronchi and bronchioles	573	...	18.29	10.2	...	0.04	0.22
system. { Other diseases	100	15	9.17	1.9	0.05	0.27	0.16
Diseases of the teeth and gums	151	...	3.78	2.7	...	...	0.07
Inflammation of tonsils	339	...	8.61	6.0	...	...	0.15
Inflammation of pharynx	1,395	...	26.24	24.8	...	...	0.47
Inflammation of stomach	35	...	1.55	0.6	...	...	0.03
Gastric ulcer	2	...	0.18	0.0	...	...	0.00
Duodenal ulcer	1	1	0.05	0.0	0.02	...	0.00
Liver diseases	40	...	2.37	0.7	...	0.02	0.04
Other diseases	1,221	11	40.13	21.7	0.12	0.20	0.71
Diseases due to disorders of nutrition or of metabolism	...	...	0.26	0.1	...	...	0.00
Diseases of the generative system	112	...	4.04	2.0	...	...	0.09
Diseases of bones, joints, muscles, fasciae and ligaments	424	22	19.08	7.5	0.02	0.30	0.35
Diseases of the articular tissue	1,076	1	54.47	28.0	...	0.02	0.07
Diseases of the skin	605	1	28.80	12.2	...	0.02	0.61
Diseases of the urinary system	148	4	8.20	2.6	0.04	0.07	0.15
Injuries { Genital	20	55	0.45	0.4	0.14	...	0.91
{ Local	2,534	20	125.10	51.7	0.75	0.98	2.22
{ Infection.	8	4	1.78	0.1	...	0.07	0.03
Tumours and cysts	83	3	4.98	1.5	0.02	0.05	0.08
Poisons	11	...	0.53	0.2	...	...	0.01
No appreciable disease	129	...	1.59	0.5	...	...	0.02
Self-destruction	1	2	0.01	0.0	0.04	...	0.00
Total	24,080	321	310.57	427.4	2.41	5.70	14.39

* This figure against "Self-destruction" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

† Includes 4 cases of parasitism held and dysentery carriers

TABLE XVIII.

INDIAN OFFICERS AND INDIAN OTHER RANKS—*contd.*

WESTERN COMMAND.

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

	Actuals.				Ratio per 1,000.			
	Admissions.	Deaths.	Invalids	Average number constantly sick.	Admissions.	Deaths.	Invalids.	Average numbers constantly sick.
Specific Diseases due to infection or infestation.								
Average strength, 12.4th.								
Diseases								
Common cold	313	..	..	5.56	25.1	..	..	0.45
Measles	91	..	..	3.89	7.3	..	..	0.30
Dysentery	..	..	..	1.15	0.6	0.08	..	0.09
Enteric fever (inclusive of typhoid, para. A, B & C and enteric group)	8	1	..	1.78	6.6	..	..	0.14
Typhoid	83	..	..	45.34	128.4	0.08	..	3.63
Scarlet	1,603	1	..	0.42	0.7	..	..	0.03
Malaria	9	..	..	0.46	0.2	..	..	0.04
Meningo-cerebral infection	3	..	..	5.65	9.9	..	..	0.45
Mumps	123	..	..	6.25	5.1	0.40	..	0.50
Pneumonia	64	5	..	0.76	1.0	..	..	0.06
Pyrexia of uncertain origin	12	..	..	0.96	5.1	..	..	0.08
Rheumatic fever	64	..	..	..	..	..	..	..
Sandy fever	..	..	..	..	..	..	..	..
Scarlet fever	..	..	..	..	..	..	..	..
Small pox	..	..	..	..	..	..	..	..
Tuberculosis	..	..	..	0.18	0.2	..	..	0.01
Other	18	3	19	3.17	1.4	0.24	1.52	0.25
Gonorrhoea	4	..	2	0.81	0.3	..	0.16	0.06
Soft chancre	26	..	..	2.17	2.1	..	..	0.17
Other diseases	9	..	..	0.77	0.7	..	..	0.06
Syphilis	13	..	..	1.79	1.4	..	..	0.14
Other V. D.	..	..	..	..	..	..	..	..
Other diseases due to infection	71	..	..	4.76	5.7	..	..	0.38
Diseases due to irritation by Scabies	29	..	..	0.88	2.2	..	..	0.07
Metazoan parasites.	194	..	..	7.03	15.3	..	..	0.56
Other diseases	..	..	..	..	..	..	..	..

Other diseases classified under systems.

Diseases of the nervous system	..	1-34	2-3	..	..	0-11
Mental diseases	..	1-63	7-4	..	..	0-13
Diseases of the eye	..	4-77	7-4	..	..	0-26
Diseases of the ear and nose	..	1-76	5-0	..	..	0-14
Diseases of the heart	..	0-18	0-2	..	0-18	0-01
Valvular diseases of the heart	..	1-06	0-8	..	0-03	0-04
Diseases of the coronary system	1	0-41	0-3	0-03	0-03	0-03
Diseases of the blood and blood-forming organs	..	5-93	4-2	..	0-03	0-21
Diseases of the ducts or endocrine glands	..	0-29	0-2	..	..	0-02
Diseases of the breast	..	..	..	..	..	..
Diseases of the { Larynx and trachea.	..	0-34	1-2	..	..	0-03
respiratory {	1	6-21	11-9	0-08	0-08	0-50
respiratory {	1	2-43	2-3	0-08	0-03	0-20
Diseases of the teeth and gums	..	0-48	1-2	..	..	0-04
Inflammation of tonsils	..	1-36	4-0	..	..	0-11
Inflammation of pharynx	..	4-09	17-0	..	..	0-33
Inflammation of stomach	..	0-29	0-7	..	..	0-02
Diseases of the digestive system	..	..	..	..	..	..
Diarrhoea	..	..	..	..	..	..
Dysentery	..	..	..	..	..	..
Diseases of the liver	..	0-68	0-7	..	..	0-25
Diseases of the gall bladder	..	7-71	16-8	..	0-08	0-62
Diseases of the pancreas	..	..	..	..	..	..
Diseases due to disorders of nutrition or of metabolism	..	..	..	..	..	..
Diseases of the generative system	..	0-09	0-1	..	..	0-01
Diseases of bones, joints, muscles, fascia, and bursae	..	0-71	1-5	..	0-08	0-03
Diseases of the skin	..	5-03	8-7	..	0-32	0-40
Diseases of the articular tissue	..	7-14	17-1	..	..	0-57
Diseases of the skin	..	5-83	11-6	..	..	0-47
Diseases of the urinary system	..	2-80	3-3	..	0-03	0-21
Injuries	..	23-03	40-1	0-72	0-80	1-92
General {	..	..	..	..	..	..
Local {	..	..	..	..	..	..
In action {	..	..	..	..	..	..
Tumours and cysts	..	0-51	1-0	..	0-08	0-04
Polioma	..	0-24	1-2	..	..	0-02
No appreciable disease	..	0-85	1-0	..	..	0-07
Malformations	..	0-10	0-10	0-05	..	..
Total	56	178-72	382-0	1-78	4-49	14-31

* The figures against "injuries" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.
 † Includes 2 cases of malformations and 1 case of parotitis.

TABLE XIX.

INDIAN OFFICERS AND INDIAN OTHER RANKS.

EASTERN COMMAND

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the Strength.

Diseases.	Actuals			Ratio per 1,000.			
	Admissions	Deaths	Invalids	Admissions.	Deaths	Invalids	Constantly sick.
Average strength, 23,914.							
Specific diseases due to infection or infestation.							
Common cold							
Diphtheria	204	...	...	6.30	...	...	0.22
Dysentery	271	1	...	10.69	...	...	0.44
Fatigue fever (inclusive of typhoid, para. A, B & C. and enteric group)	21	...	...	2.95	...	...	0.12
Furunculosis	116	...	...	2.62	...	...	0.11
Malaria	2,794	3	...	80.81	0.13	...	3.28
Meningoencephalitis	9	...	...	0.67	...	...	0.03
Meningoencephalitis	1	...	...	0.00	...	...	0.00
Mumps	131	...	...	7.04	...	...	0.29
Pyrexia of uncertain origin	136	16	...	10.61	0.67	...	0.44
Rheumatic fever	16	...	1	1.05	...	0.04	0.04
Sandy fever	87	...	...	1.57	...	...	0.07
Scarlet fever	...	...	...	...	...	...	...
Small pox	10	...	...	0.28	...	...	...
Tuberculosis	48	...	...	5.77	...	...	0.04
Other	5	...	...	0.69	...	2.05	0.24
General diseases	163	...	...	17.01	6.8	0.21	0.03
Gonorrhoea	45	...	...	3.80	...	...	0.71
Scrub typhus	131	...	...	13.01	...	...	0.14
Scrub typhus	1	...	...	0.05	...	...	0.04
Other V. D.	...	...	...	...	...	...	0.00

Other diseases due to infection	8	2	12.35	6.9	0.33	0.08	0.62
Diseases due to Infestation { Scabies by Methan parasites } Other diseases	221 180	..	7.22 8.35	0.2 7.6	...	...	0.20 0.85
<i>Other diseases classified under systems</i>							
Diseases of the nervous system	70	2	9.81	2.9	0.08	...	0.12
Menial diseases	22	1	2.01	0.9	0.04	...	0.08
Diseases of the eye	391	7	15.08	15.4	0.29	...	0.47
Diseases of the ear and nose	285	1	7.91	11.9	0.04	0.13	0.33
Diseases of the { Vascular diseases of the heart Circulatory sys. } { Disorders action of the heart Other diseases	3 12	1 1	0.36 9.17 1.00	0.1 0.4 0.5	0.04 0.04 ..	0.04 0.04 0.04	0.02 0.01 0.04
Flood and blood forming organs	83	1	5.39	3.5	0.04	0.21	0.23
Diseases of ducts of excretory glands	6	1	0.21	0.3	...	0.08	0.01
Diseases of the breast	..	..	..	..	...	..	...
Diseases of the res- { Larynx and trachea piratory sys. } { Bronchi and bronchioles Other diseases	22 324 47	3 1 ..	0.60 10.29 4.34	0.9 13.6 2.0	..	0.13 0.04	0.03 0.18
Diseases of the teeth and gums	51	..	1.36	2.1	...	..	0.06
<i>Diseases of the digestive system</i>							
Inflammation of tonsils	159	...	3.61	6.6	...	..	0.16
Inflammation of pharynx	269	...	5.39	11.2	...	..	0.22
Inflammation of stomach	46	..	1.53	1.9	...	..	0.06
Gastric ulcer	2	...	0.10	0.1	..	..	0.01
Duodenal ulcer	6	..	0.3	0.3	..	..	0.03
Liver	37	1	2.08	1.6	0.04	..	0.09
Other diseases	493	2	16.78	20.6	0.69	..	0.70
<i>Diseases due to disorders of nutrition or of metabolism</i>							
Diseases of the generative system	69	...	0.26	0.2	..	..	0.02
Diseases of bones, joints, muscles, fascia and ligaments	205	12	8.22 10.50	2.9 8.6	..	0.50	0.13 0.44
Diseases of the areolar tissue	896	..	23.14	34.5	...	..	1.18
Diseases of the skin	322	..	15.37	13.7	..	..	0.64
Diseases of the urinary system	68	2	3.62	2.8	...	0.08	0.15
<i>Injuries</i>							
General	10	3	0.29	0.4	0.13	0.01	0.01
Local	1,230	8	57.01	51.7	0.33	2.38	0.09
In action	..	...	...	...	..	..	0.00
Tumours and cysts	23	2	0.24	1.4	0.13	0.08	0.00
Poisons	4	2	0.08	0.2	0.08	...	0.02
No appreciable disease	114	4	0.54	0.6	0.16	..	16.57
Incidents	...	..	...	..	..	..	..
Total	9,078	54	396.31	417.2	2.26	4.93	16.57

* The figures against "Necrosis" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

† Includes 3 admissions of Malignant.

Other diseases due to infection		3	4	13-02	16-4	0-16	0-10	0-62
Diseases due to infection by Scabies		...	...	7-44	10-6	...	...	0-35
Diseases due to infection by Malarial parasites		...	...	...	...	...	...	...
Other diseases		240	1	11-34	11-4	...	0-06	0-54
Other diseases classified under systems.								
Diseases of the nervous system								
Diseases of the nervous system	...	80	9	5-14	3-8	...	0-43	0-24
Septic diseases	1	17	8	1-57	0-8	0-05	0-38	0-07
Diseases of the eye	...	247	5	0-85	11-8	...	0-24	0-47
Diseases of the ear and nose	...	250	3	7-60	13-4	...	0-14	0-37
Diseases of the circulatory system								
Valvular disease of the heart	2	...	1	0-08	0-1	0-10	0-05	0-00
Disordered action of the heart	3	...	4	0-10	0-1	0-14	0-19	0-01
Other diseases	11	...	...	0-65	0-5	0-03	0-03	0-03
Diseases of the blood and blood forming organs								
Leukaemia of ductless or endocrine glands	72	...	4	5-40	3-4	0-05	0-19	0-28
Diseases of the breast	2	...	...	0-14	0-1	...	...	0-7
Diseases of the respiratory system								
Larynx and trachea	9	...	3	0-22	0-4	...	...	0-02
Bronchi and bronchioles	27	...	2	9-21	13-2	...	0-14	0-44
Other diseases	43	...	...	3-10	2-1	...	0-10	0-15
Diseases of the teeth and gums								
Inflammation of tooth	55	...	...	1-56	2-6	...	...	0-07
Inflammation of gingivae	134	...	...	3-42	0-4	...	...	0-16
Inflammation of pyorrhea	307	...	...	6-55	14-6	...	...	0-31
Inflammation of alveolar process	53	...	1	2-28	2-5	...	0-05	0-11
Inflammation of buccal mucosa	6	...	1	0-32	0-3	...	0-05	0-02
Inflammation of buccal ulcer	2	...	...	0-25	0-1	0-05	...	0-01
Other diseases	29	...	2	1-62	1-4	0-10	0-10	0-01
Diseases due to disorders of nutrition or of metabolism								
Diseases of the genitourinary system	3	...	1	0-27	0-1	...	0-06	0-01
Diseases of bones, joints, muscles, fascia and tendons	60	...	11	2-56	2-9	...	...	0-12
Diseases of the skin	245	...	...	10-66	11-6	...	0-52	0-51
Diseases of the arterial tissue								
Diseases of the aorta	774	...	1	25-14	26-9	...	0-05	1-20
Diseases of the venous system	272	...	3	16-80	13-0	...	0-52	0-14
Diseases of the urinary system	60	...	1	2-46	2-9	0-05	0-05	0-12
Injuries								
General	6	...	1	0-15	0-2	0-05	1-43	0-01
Local	1,253	...	30	58-03	59-8	0-14	...	2-77
Tumours and cysts								
In action	35	...	...	1-77	1-7	0-05	...	0-08
Not in action	5	...	...	0-39	0-2	0-05	...	0-02
No special disease								
Subtotal	123	...	1	1-10	1-1	0-14	0-05	0-05
Total	8,316	123	123	316-26	336-7	1-34	5-87	15-09

* The figures against "Scabies" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

† Includes 7 admissions of (cancers and 4 admissions of Malformations)

TABLE XX.

INDIAN OFFICERS AND INDIAN OTHER RANKS—contd.

SOUTHERN COMMAND.

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Invalids.	Admissions.	Deaths.	Invalids.
Average strength, 20,003.						
Specific diseases due to infection or infestation.						
Common cold	101	...	...	4.8	...	0.07
Dysentery	4	...	...	0.2	...	0.02
Epidemic	312	...	...	14.9	...	0.55
Etiologic fever (inclusive of typhoid, paratyphoid, B & C, and enteric group).	21	3	...	1.0	0.14	0.12
Erysipelas	128	...	...	10.6	...	0.26
Infantile	1,853	...	...	78.9	...	1.69
Malaria	11	...	...	0.5	...	0.03
Meningitis	1	...	...	0.05	...	0.01
Mitral regurgitation	65	...	...	2.6	...	0.14
Mononucleosis	61	5	...	2.9	0.24	0.23
Pyrexia of uncertain origin	5	...	...	0.2	...	0.00
Rheumatic fever	24	...	...	1.1	...	0.10
Sandy fever	44	...	...	2.1	...	0.05
Scarlet fever	...	...	...	...	...	...
Small pox	...	...	...	...	...	...
Tuberculosis	...	...	...	...	...	...
{ Pulmonary	20	...	23	0.05	...	0.60
{ Other	3	...	1	1.0	...	1.10
{ Gonorrhea	...	...	...	0.1	...	0.05
{ Post-chancous	85	...	...	4.1	...	0.37
{ Syphilis	23	...	...	1.1	...	0.09
{ Other V. D.	90	...	...	4.5	...	0.46
{ ...	30	...	...	0.5	...	0.04

TABLE XXI.

INDIAN OFFICERS AND INDIAN OTHER RANKS—contd.

BURMA DISTRICT.

Table showing the average strength, admissions into hospital, deaths, numbers included and constantly sick during the year 1936, with ratios per 1,000 of the strength.

Diseases.	Actuals.			Ratio per 1,000.		
	Admissions.	Deaths.	Invalids.	Admissions.	Deaths.	Invalids constantly sick.
Average strength, 2,827.						
Specific diseases due to infection or infestation.						
Common cold	12	..	...	4.2	...	0.10
Dysentery	1	..	...	0.4	...	0.01
Dysentery	50	...	...	20.9	...	0.86
Enteric fever (inclusive of typhoid, para. A, B, & C, and enteric group).	1	...	..	0.4	...	0.05
Pyæmia	..	...	...	...	...	...
Leishmaniasis	36	...	...	13.4	...	0.24
Malaria	426	1	...	150.7	0.93	3.84
Malaria	13	...	...	4.6	...	0.21
Meningoencephalitis	...	...	..	...	...	...
Mumps	4	...	...	1.4	...	0.10
Pneumonia	6	1	...	2.1	0.35	0.19
Pyæmia of uncertain origin	...	...	...	...	...	...
Rheumatic fever	...	...	...	...	...	...
Scarlet fever	...	...	...	...	...	...
Small pox	...	...	...	...	...	...

Tuberculous	Pulmonary	.	.	.	.	.	3	...	4	0.35	1.1	...	1.4	0.12
	Other	.	.	.	.	.	1	1	..	0.09	0.4	0.35	...	0.01
Venereal diseases	Gonorrhea	.	.	.	.	.	104	.	..	1.49	35.8	..	..	5.83
	Soft chancre	.	.	.	.	.	50	.	..	2.32	10.6	...	...	0.52
	Syphilis	.	.	.	.	.	45	.	..	0.04	15.9	...	...	2.14
	Other V. D.	.	.	.	.	.	..	...	...	...	...	...	...	...
		.	.	.	.	.	..	...	...	...	...	...	...	...
Other diseases classified under systems.														
Diseases of the nervous system	Diseases due to infection	.	.	.	.	.	91	2	...	2.95	32.2	0.71	...	1.04
	Diseases due to intoxication	.	.	.	.	.	73	.	...	0.65	55.8	..	...	0.28
	Diseases due to Metazoan parasites	.	.	.	.	.	51	.	..	1.72	18.0	.	.	0.61
	Other diseases	.	.	.	.	.	..	...	...	...	...	...	...	...
		.	.	.	.	.	..	...	...	...	...	...	...	...
Diseases of the eye	Diseases of the eye	.	.	.	.	.	11	..	3	0.86	3.9	..	1.06	0.30
	Ear and nose	.	.	.	.	.	7	.	3	0.70	2.5	...	1.06	0.27
		.	.	.	.	.	..	...	...	...	...	...	...	...
		.	.	.	.	.	56	..	2	2.21	19.8	...	0.71	0.82
		.	.	.	.	.	127	.	...	2.16	44.9	...	..	0.77
Circulatory system.	Valvular diseases of the heart	.	.	.	.	.	3	.	..	...	..	...	.	0.03
	Disordered action of the heart	.	.	.	.	.	4	1	...	0.18	1.4	0.35	...	0.06
Blood and blood-forming organs	Fractures of epiphyseal glands	.	.	.	.	.	50	..	1	3.59	10.6	..	0.35	1.27
	Liver	.	.	.	.	.	...	...	..	..	..	..	.	..
Respiratory system	Larynx and trachea	.	.	.	.	.	7	..	..	0.24	9.5	...	...	0.08
	Heart and bronchioles	.	.	.	.	.	62	...	1	1.65	23.9	...	0.25	0.58
	Other diseases	.	.	.	.	.	13	...	2	1.82	2.8	...	0.71	0.47
Diseases of the digestive system.	Inflammation of the tonsils	.	.	.	.	.	8	.	..	0.15	9.8	.	..	0.05
	Inflammation of pharynx	.	.	.	.	.	146	.	..	2.04	51.9	..	..	0.03
	Inflammation of stomach	.	.	.	.	.	13	.	...	0.07	1.1	..	.	0.02
	Gastric ulcer	.	.	.	.	.	..	...	..	..	..	..	..	.
	Duodenal ulcer	.	.	.	.	.	8	.	..	0.62	2.8	..	..	0.29
Diseases of the bowels, joints, muscles, fasciae and bursae	Liver	.	.	.	.	.	159	1	..	4.12	49.2	0.35	0.35	1.10
	Other diseases	.	.	.	.	.	..	...	...	...	...	...	...	...
Diseases due to disorders of nutrition or of metabolism	Diseases of the generative system	.	.	.	.	.	265	..	.	4.25	93.7	...	..	1.50
	Diseases of the bones, joints, muscles, fasciae and bursae	.	.	.	.	.	32	...	.	1.46	11.3	...	..	0.62
		.	.	.	.	.	57	...	4	2.00	50.2	0.71	1.4	0.91

TABLE XXI—*contd.*BURMA DISTRICT—*contd.*

Table showing the average strength, admissions into hospital, deaths, numbers invalided and constantly sick, during the year 1936, with ratios per 1,000 of the strength—contd.

Diseases.	Actuals			Ratio per 1,000.		
	Admissions.	Deaths.	Invalids.	Admissions.	Deaths.	Invalids.
Average strength, 2,827.						
Other diseases classified under system—contd.						
Diseases of the —						
Arteriosclerosis	108	...	...	70.0	...	...
Arteriosclerosis	140	...	...	49.5	...	...
Urinary system	5	...	...	1.8	...	...
Ischaemia { General	4	2	...	1.4	0.71	...
Ischaemia { Local	247	1	4	87.4	0.35	1.41
Ischaemia { Ischaemia	...	...	...	...	...	...
Tumours and cysts	10	...	...	3.5	...	...
Tuberculosis	...	...	...	...	...	...
No appreciable disease	7	...	...	2.5	...	...
Unidentified	...	...	...	...	...	...
Total	2,560	12	25	905.6	4.24	8.84
						33.79

* The figures against "Unidentified" having already been shown under the heading of the injury, etc., which caused death, are not included in the total.

TABLE XXII.

INDIAN OFFICERS AND INDIAN OTHER RANKS—*contd.*

Table showing monthly ratios per 1,000 of strength of admissions for certain diseases for All-India during the year 1936.

Month.	Bacterial group of fevers.	Influenza.	Cholera.	Small-pox.	Malaria.	Dysentery proctocol.	Dysentery bacillary.	Dysentery bacillary exudate.	Dysentery group.	Pyrexia of uncertain origin	Pneumonia lobar and lobular.	Diarrhoea.	Dengue.	Sand-fly fever.	Plague.	Effects of heat.	All causes.
January	0.03	0.4	0.03	0.03	3.0	0.02	0.2	0.1	0.04	0.01	0.9	0.3	0.03	0.01	..	..	25.6
February	0.04	0.5	0.03	0.03	1.4	0.01	0.1	0.1	0.04	0.01	0.8	0.3	0.01	0.03	..	..	21.9
March	0.04	1.2	0.01	0.01	1.7	0.01	0.1	0.1	0.1	0.01	0.4	0.3	0.03	0.03	..	..	21.5
April	0.01	0.5	0.01	0.02	2.7	0.04	0.5	0.2	0.2	0.04	0.4	0.6	0.1	0.3	..	..	25.5
May	0.04	0.5	0.01	0.02	4.0	0.1	0.4	0.3	0.3	0.01	0.3	0.9	0.3	0.4	..	0.04	33.0
June	0.1	0.3	0.02	0.02	9.4	0.1	0.6	0.3	0.2	0.01	0.3	0.8	0.3	0.0	..	..	36.3
July	0.1	0.6	0.03	0.03	15.9	0.1	0.8	0.4	0.2	0.01	0.2	0.6	0.5	1.0	..	0.1	45.0
August	0.1	0.6	0.01	0.01	18.5	0.1	0.8	0.3	0.3	..	0.2	0.9	0.5	1.0	..	0.01	47.9
September	0.1	0.3	..	..	20.7	0.03	0.5	0.3	0.3	..	0.2	0.5	0.3	1.1	..	0.03	40.8
October	0.03	0.3	0.01	0.01	19.9	0.1	0.8	0.2	0.2	0.3	0.4	0.4	0.2	0.9	..	0.01	48.2
November	0.03	1.1	0.02	0.02	15.5	0.05	0.6	0.1	0.1	..	0.6	0.5	0.2	0.3	..	..	42.3
December	0.1	0.4	0.01	0.01	7.9	0.1	0.5	0.2	0.1	..	0.7	0.4	0.1	0.1	..	..	32.6
Total	0.7	7.3	0.01	0.2	122.9	0.6	5.7	2.6	2.0	0.1	5.3	6.2	2.5	10.6	..	0.2	425.7

TABLE

Stations and Districts.	Average annual strength.	Enteric group of fevers.					Dysentery.			
		Typhoid fever.	Para. A.	Para. B.	Para. C.	Enteric group.	Bacillary.	Bacillary exudate	Protozoal	Cholera.
<i>Total Lahore District</i>	13,360	0.1	0.3	..	..	0.4	1.6	3.0	1.3	1.6
Bannu	2,035	..	0.5	..	..	..	..	8.4	0.5	1.5
D. I. Khan	101	..	..	..	..	..	..	..	..	..
Kalabagh and Mari Indus	158	..	..	..	..	..	12.7	..	..	6.3
Manzal	781	..	..	..	..	..	1.3	..	..	..
Mir Ali	718	..	..	..	..	..	..	..	..	..
Razmak	4,677	0.4	0.4	..	..	..	8.3	1.7	0.2	1.7
Wana	3,279	..	..	..	..	..	3.0	0.9	..	2.1
<i>Total Waziristan District</i>	11,740	0.2	0.3	..	..	..	4.4	2.4	0.2	1.6
Chaman	1,302	..	..	..	..	0.8	1.5	1.5	..	0.8
Quetta	4,954	0.4	0.2	..	..	0.2	2.6	2.4	0.4	4.2
Sibi	245	..	..	..	..	..	..	4.1	..	4.1
<i>Total Baluchistan District</i>	6,501	0.3	0.2	..	..	0.3	2.3	2.3	0.3	3.5
Fort Sandeman	2,132	..	..	..	..	0.5	1.4	1.9	..	0.9
Hindubagh	294	..	..	..	..	..	..	..	..	3.4
Loralai	1,245	..	..	..	..	1.6	..	0.8	..	1.6
<i>Total Zhob Bds Area</i>	3,675	..	..	..	..	0.8	0.8	1.4	..	1.4
Hyderabad	565	..	..	..	..	..	1.8	5.3	..	..
Karachi	1,744	..	..	..	..	..	5.7	1.7	1.1	2.3
<i>Total Sind Bds Area</i>	2,309	..	..	..	..	..	8.2	2.6	0.9	1.7
Bareilly	1,110	0.9	..	..	..	..	10.8	2.7	..	1.8
Dehra Dun	3,035	1.6	..	..	..	0.7	5.2	0.7	1.0	0.7
Jhansi	877	..	..	..	..	..	12.5	5.7	1.1	3.4
Landsdowne	1,972	..	..	..	..	..	2.0	10.1	..	6.6
Meerut	2,349	..	..	..	..	0.4	11.9	6.8	0.4	0.4
Nowgong	66	13.2	..	..	..	..	..	..	15.2	..
Roorkee	2,402	..	0.4	..	..	0.4	..	..	..	3.3
<i>Total Meerut District</i>	11,531	0.6	0.1	..	..	0.3	6.0	3.9	0.5	1.8
Almora	306	..	..	..	..	..	9.8	..	..	..
Allahabad	725	..	..	..	..	..	6.8	1.4	5.4	2.7
Benares	299	..	..	..	..	..	3.8	6.7	..	3.3
Cawnpore	91	..	..	..	..	..	11.0	..	..	..
Fatehgarh	643	..	..	..	..	..	..	..	..	..
Fyzabad	126	..	..	..	..	7.9	..	..	..	7.9
Gorakhpore	124	8.1	..	..	..	..	..	..	..	..
Lucknow	1,576	0.6	..	..	..	..	21.6	4.4	..	4.4
<i>Total Lucknow District</i>	3,920	0.3	..	..	..	0.3	11.2	2.6	1.0	2.8
Calcutta (Alipore)	752	1.3	..	..	..	..	17.3	4.0	2.7	..
Dinapore	37	..	..	..	..	..	..	..	..	27.0
Gyaspore	91	..	..	..	..	..	..	..	..	..
Ghoom	82	..	..	..	..	..	..	..	..	..
Shillong	1,933	..	..	..	..	..	1.1	3.3	..	1.1
Bankura	36	..	..	..	..	..	..	..	..	..
Chittagong	466	..	..	..	..	2.1	6.4	..	..	..
Comilla	334	..	..	..	..	..	..	..	..	..
Dacca	612	1.6	..	..	..	1.6	..	..	..	1.6
Mymensingh	172	..	..	..	..	..	..	..	..	..
Milnapore	505	..	..	..	..	..	2.0	4.0	..	..
Railpar	551	..	..	..	..	..	10.9	..	..	..

TABLE

Stations and Districts	Average annual strength.	Enteric group of fevers					Dysentery.			
		Typhoid fever.	Para. A	Para. D.	Para. C.	Enteric group	Bacillary.	Bacillary exudate.	Protozoal.	Clinical.
Total P. & A. District	5,490	0.4	..	..	..	0.4	4.6	2.0	0.4	0.7
Agra	512	..	..	..	..	..	1.8	3.7	1.8	1.8
Delhi	1,504	..	..	..	..	0.7	2.0	12.0	..	1.2
Muttra	627	..	..	..	..	1.6	3.2	..	..	1.6
Total Delhi Ede Area	2,673	..	..	..	..	0.7	2.2	1.9	0.4	1.5
Ahmednagar	999	1.0	..	..	..	..	8.3	3.0	..	6.2
Aurangabad	963	..	..	..	..	..	9.5	1.0	..	..
Jubbulpore	2,414	..	..	..	..	..	..	4.6	0.8	..
Kamptee	564	..	..	..	..	..	1.8	..	..	1.8
Pachmarhi	348	..	..	..	..	..	2.8	2.9	..	..
Saugor	529	..	1.9	..	..	..	5.2	1.9	..	..
Tellicherry (Secunderabad)	3,027	1.3	..	..	..	1.0	17.2	1.3	2.6	1.3
Total Deccan District	8,837	0.6	0.1	..	..	0.3	10.0	2.4	1.1	1.2
Belgaum	1,186	0.3	0.3	..	..	0.3	2.5	2.5	..	0.3
Poona	3,324	0.3	0.3	..	..	0.3	21.2	7.2	0.9	0.3
Total Poona Ede Area	4,510	0.2	0.2	..	..	0.2	16.2	6.0	0.7	0.2
Ahmedabad	599	..	..	..	..	..	3.3	1.7	..	..
Baroda	554	..	..	..	..	1.8	3.6	14.4	..	3.6
Bombay (Colaba)	516	..	..	..	..	1.9	3.9	3.9	..	..
Deolali	255	..	..	..	..	..	..	3.9	..	..
Mhow	622	..	..	..	..	..	4.4	..	..	1.5
Mt. Abu	19	..	..	..	..	..	..	..	..	..
Nasirabad	721	1.4	1.4	..	..	1.4	9.7	1.4	1.4	2.8
Neemuch	413	..	..	..	..	2.4	9.7	..	..	2.4
Total Bombay District	3,757	0.3	0.3	..	..	1.1	5.3	3.5	0.3	1.6
Bangalore	2,811	0.4	0.4	..	..	1.8	8.0	2.3	0.4	..
Cannanore	563	..	..	..	..	..	1.8	..	..	1.8
Madras, St. Thomas Mt.	501	..	..	..	..	..	7.9	2.0	..	2.0
Trichinopoly	109	..	..	..	..	..	18.3	..	..	..
Wellington	42	..	..	..	..	..	..	..	..	..
Total Madras District	3,359	0.3	0.3	..	..	0.3	7.3	1.8	0.3	0.8
Manilay	729	1.4	..	..	..	..	..	11.0	1.4	6.1
Maymye	1,291	..	..	..	..	..	..	7.0	..	1.5
Mingaladon	897	..	..	..	..	..	13.6	7.4	1.9	8.7
Total Burma District	2,927	0.4	..	..	..	..	3.9	8.1	4.8	4.2
Total All-India	116,325	0.2	0.1	0.0	..	0.2	5.6	2.7	0.6	2.0

XXIII—concl'd.

Colitis	Diarrhea	Cholera	Veneral diseases	Small-pox.	Malaria.	Dengue.	Sand fly fever.	Pique.	Influenza.	Pneumonia, lobar and lobular.	Heat-stroke.	Heat-exhaustion.	All causes	Average number standing sick.
0.2	3.6		17.7	0.2	104.0	1.6	0.5	..	7.3	5.8	..	..	385.4	15.42
	20.3		5.5	..	226.9	..	..	..	..	1.8	..	..	540.6	18.90
	1.6		14.6	..	171.0	..	..	..	..	6.5	..	..	396.9	14.45
			22.3	..	59.1	..	..	..	..	9.6	..	..	531.1	18.29
...	4.5	..	14.6	..	133.6	..	..	..	..	6.4	..	..	457.5	15.66
1.0	3.0		9.1	..	40.5	..	2.1	..	1.0	5.1	..	1.0	215.6	7.29
0.2	3.3		5.2	..	151.6	..	..	..	29.4	2.1	..	..	353.1	12.14
0.8			5.4	..	108.5	..	..	..	..	2.1	..	..	408.5	14.31
	3.5		2.5	..	100.2	5.3	49.3	..	1.8	..	..	..	376.8	10.63
	2.9		5.7	..	158.0	..	..	..	17.2	..	..	..	250.0	4.37
	5.7		5.7	1.9	68.8	2.3	3.3	..	5.0	3.3	..	..	514.2	14.60
0.3	3.6	..	4.6	..	28.4	..	..	..	..	1.7	..	..	366.7	15.45
0.5	3.2	..	5.4	0.1	79.0	1.1	4.5	..	10.6	2.2	..	0.1	364.6	13.06
1.7			11.0	..	30.6	..	..	..	..	2.5	..	..	585.2	15.24
3.0	7.5	..	20.2	..	101.4	..	..	..	20.2	3.0	..	..	433.5	15.22
2.7	5.5		17.7	..	85.1	..	..	..	14.9	2.9	..	..	473.6	15.22
..			1.7	..	235.8	6.7	..	..	..	6.7	..	..	434.8	10.49
..			7.2	..	182.9	..	..	..	..	5.4	..	..	373.6	9.79
7.8	5.9	..	9.7	..	68.0	..	..	..	3.9	5.8	..	..	380.6	24.64
	3.9	..	15.7	..	82.4	..	..	..	..	..	..	..	502.0	16.66
..	5.0	..	4.4	..	73.3	..	4.4	..	4.4	2.9	..	1.5	294.7	12.92
..	5.9	..	4.2	..	77.7	..	..	..	..	3.3	..	..	105.3	3.16
..	2.4	..	2.4	..	104.1	..	2.4	..	..	2.4	..	..	324.5	11.29
0.5	4.0	..	5.6	..	119.0	1.1	1.1	..	1.3	5.1	..	0.3	353.6	14.92
..	1.9		14.6	..	42.4	0.4	..	..	19.7	3.8	..	..	405.9	22.26
1.6	1.8	..	10.7	..	12.4	..	..	..	3.6	..	..	..	305.5	12.28
..	9.9	..	27.8	..	9.9	339.5	..	..	14.9	..	..	..	621.0	15.81
9.2	..	..	18.9	..	..	36.7	..	..	9.2	..	..	..	293.6	7.60
..	..	..	23.8	..	..	..	..	..	..	..	..	..	71.4	4.76
0.5	5.9	..	15.3	..	32.1	43.6	..	..	16.1	2.6	..	..	412.5	19.77
..	31.9	..	124.2	..	82.8	43.0	..	..	..	2.7	..	..	607.7	41.14
0.8	15.5	..	23.2	..	241.7	1.5	..	..	29.4	2.3	..	..	897.8	23.62
..	0.2	..	70.6	..	60.9	59.5	..	..	..	1.2	..	..	1,137.1	37.63
0.4	17.3	..	63.3	..	150.7	29.0	..	..	13.4	2.1	..	..	905.6	33.97
0.3	6.2	0.0	9.4	0.2	123.1	2.5	10.6	..	7.3	5.4	0.02	0.1	424.5	13.13

TABLE XXV.

INDIAN OFFICERS AND INDIAN OTHER RANKS.

Table showing admission and death ratios per 1,000 of strength by Commands contrasted with the previous year, and the average for the previous 5 years.

Commands	Years	Enteric group of fever		Influenza.		Cholera.		Small-pox.		Malaria		Dysentery	
		A.	D.	A.	D.	A.	D.	A.	D.	A.	D.	A.	E.
Northern Command	{ 1931-35	2.0	0.18	9.3	0.01	0.0	..	0.2	0.02	189.6	0.10	13.5	0.02
	{ 1935	1.6	0.09	5.4	0.04	..	..	0.2	0.02	137.0	0.03	11.8	0.01
	{ 1936	0.6	0.02	0.9	0.02	0.0	0.02	0.1	..	139.6	0.05	9.7	0.05
Western Command	{ 1931-35	2.6	0.15	6.0	0.01	0.0	..	0.2	..	201.1	0.07	22.7	0.06
	{ 1935	1.3	0.07	4.6	0.07	..	..	0.1	..	175.0	0.22	9.5	..
	{ 1936	0.6	0.05	6.6	..	..	..	0.2	..	158.4	0.08	7.3	..
Eastern Command	{ 1931-35	1.9	0.16	9.3	0.01	0.0	0.02	0.3	0.01	121.4	0.07	42.6	0.03
	{ 1935	1.5	0.13	6.5	..	..	..	0.4	..	111.3	0.08	12.7	..
	{ 1936	0.9	..	4.2	..	0.0	0.04	0.4	..	116.8	0.13	11.3	0.04
Southern Command	{ 1931-35	1.6	0.13	9.5	..	..	0.01	0.2	0.04	84.8	0.02	45.7	0.03
	{ 1935	1.1	0.19	5.5	..	0.0	0.05	0.1	0.09	80.7	..	13.0	..
	{ 1936	1.0	0.14	10.9	..	..	..	0.0	..	78.9	..	14.9	..
Burma District	{ 1931-35	2.6	0.10	20.6	..	..	..	0.1	..	156.1	0.26	13.7	..
	{ 1935	0.7	..	1.0	..	..	..	..	..	198.8	0.33	50.3	..
	{ 1936	0.4	..	13.4	..	..	..	..	..	150.7	0.35	20.9	..
All-India	{ 1931-35	2.0	0.16	9.3	0.01	0.0	0.01	0.2	0.02	157.7	0.08	15.0	0.02
	{ 1935	1.4	0.11	5.4	0.03	0.0	0.02	0.2	0.03	125.9	0.08	12.2	0.02
	{ 1936	0.7	0.04	7.3	0.01	0.0	0.01	0.2	..	123.1	0.07	11.0	0.03

	Pyrexia of uncertain origin		Innominata febrile and lobular		Venereal diseases		Dengue		Sand-fly fever		Plague	
	A.	D.	A.	D.	A.	D.	A.	D.	A.	D.	A.	D.
Northern Command	{ 1914-25	0.1	0.01	6.0	0.81	7.8	0.01	0.0	..	10.2	..	0.00
	{ 1925	0.1	0.05	5.1	0.65	7.4	..	0.0	..	18.5	..	..
	{ 1926	0.1	0.02	6.3	0.78	6.5	..	0.0	..	18.5	..	..
Western Command	{ 1911-25	0.1	..	6.2	0.21	5.6	0.01	0.1	..	9.0	..	..
	{ 1925	..	..	5.5	0.22	4.9	..	..	..	2.9	..	..
	{ 1926	..	..	5.1	0.40	4.2	..	0.1	..	5.1	..	..
Eastern Command	{ 1921-25	0.1	..	5.4	0.52	13.5	..	1.0	..	2.9	..	..
	{ 1925	0.0	..	5.9	0.25	14.5	..	1.1	..	1.4	..	0.01
	{ 1926	..	..	5.7	0.67	13.8	..	0.9	..	3.6	..	..
Southern Command	{ 1921-25	0.4	0.02	4.4	0.46	11.0	0.01	4.9	..	2.4	..	0.00
	{ 1925	0.0	..	3.1	0.33	9.4	0.05	10.4	..	1.0	..	..
	{ 1926	0.2	..	2.9	0.24	10.0	..	9.1	..	2.7	..	..
Central District	{ 1921-25	0.1	..	0.4	0.62	42.1	..	33.3	..	0.6	..	0.01
	{ 1925	0.2	..	4.9	0.19	51.9	..	47.0	..	..	..	..
	{ 1926	..	..	..	0.35	63.2	..	29.0	..	..	..	..
All-India	{ 1921-25	0.2	0.01	4.8	0.73	10.5	0.01	2.2	..	11.7	..	0.0
	{ 1925	0.1	..	4.9	0.51	10.1	0.01	3.4	..	7.5	..	0.0
	{ 1926	0.1	0.01	5.4	0.61	9.8	..	2.5	..	10.8	..	..

TABLE XXVI.
DETAIL OF DISEASES.

I leucos.	European Army of India.					Indian Army.					
	British officers attached to European troops.	Men.		Women.		Children.	British officers attached to Indian troops.	Men present.		Constantly sick.	
		2,849.	A.	D.	4,055.			A.	D.		A.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva- lide.
	A.	D.	Inva- lide.	A.	D.	A.	D.	Inva- lide.	A.	D.	Inva

Disease	Origin	Sex	Age	Duration	Fever	Sweat	Chills	Headache	Nausea	Vomiting	Diarrhea	Stool	Urine	Blood	Sputum	Cough	Pulse	Temp.	Mortality	Remarks
Jandriacirrhosis.																				
Leishmaniasis.																				
(a) Kala-azar																				
(b) Oriental sore																				
Leptosy																				
Malala																				
Measles																				
Measles infection (Cerebrospinal fever)																				
Mumps																				
Plague																				
Pyrexia																				
Pyrexia of Uncertain Origin																				
Relapsing fever																				
Rheumatic fever																				
Rubella (German measles)																				
Sand fly fever																				
Scarlet fever																				
Septicemia																				
Small pox																				
Tetanus																				
Tuberculosis Pulmonary																				
Tuberculosis Other cases																				
Typhoid fever																				
Typhus fever																				
Veneral diseases—																				
(a) Gonorrhea																				
(b) Soft chancre																				
(c) Syphilis																				
(d) Other cases																				
Whooping-cough																				
Other diseases caused by infection																				
Diseases due to infestation by																				
Arthropods																				
Amygdalitis																				
Amoebiasis																				
Cellulitis																				
Disenters (Cholera, worm)																				
Intestinal teniasis—																				
(a) Tania Solium																				
(b) Tania Saginata																				
Other Intestinal parasites																				
Cholera																				
Enteritis																				
Other diseases due to Infestation																				

A.—Admissions. D.—Deaths. *Includes one death from hemorrhage encephalitis.

TABLE XXVI—*contd.*

Diseases.	European Army of India.					Indian Army.				
	British officers attached to European troops.		Men		Children.	British officers attached to Indian troops.		Men present		Constantly sick.
	A. D. Invalids.		A. Constantly sick.			A. D. Invalids.		A. D. Invalids.		
	A.	D.	A.	D.		A.	D.	A.	D.	
<i>Diseases of the nervous system.</i>										
Apoplexy	...	...	2	0.08	1	...	...	1	...	0.05
Cerebral hemorrhage	...	...	1	0.28	...	...	...	4	3	0.21
Chorea	...	...	...	...	...	...	...	...	...	...
Convulsion	...	...	9	0.53	...	...	...	...	...	...
Diseases of the spinal cord	...	...	3	0.00	...	...	...	...	...	...
Epilepsy	...	...	20	2.80	17	...	...	17	1	1.24
Vertigo	...	...	35	1.09	...	...	...	29	...	1.10
Meningitis	...	...	2	0.06	1	...	...	...	...	...
Headache	...	...	188	4.31	2	...	...	...	...	0.02
Neuralgia	...	...	86	1.40	...	...	...	...	...	0.47
Neuritis	...	...	18	1.12	...	...	...	...	...	...
Paralysis	...	...	17	1.42	...	...	...	...	...	...
Sciatica	...	...	59	4.18	...	...	...	...	...	...
Other diseases of the nervous system	...	...	44	2.43	1	21	4	...	...	...
<i>Mental diseases.</i>										
Febrile madness	...	...	13	3.42	...	...	...	...	...	...
Hysteria	...	...	54	1.83	22	...	...	...	...	...
Insolation (Melancholia)	...	...	1	0.30	...	...	...	...	...	...
Mania	...	...	1	0.25	...	...	...	...	...	...
Mental deficiency	...	...	16	1.69	...	...	...	...	...	...
Neurasthenia	...	...	...	...	7	...	...	...	...	...
Schizophrenia (Dementia praecox)	...	...	20	0.02	...	...	...	...	...	...
Other mental diseases	...	...	38	11.62	...	...	...	...	...	...
<i>Diseases of the eye.</i>										
Amblyopia and amaurosis	...	...	1	0.21	...	...	...	...	...	...
Anomalies of refraction	...	...	10	0.36	...	...	...	...	...	...
Diophtia	...	...	10	0.54	...	...	...	...	...	...
Conjunctivitis	...	...	105	2.83	...	...	...	...	...	...
Conjunctivitis granular (Trachoma)	...	...	18	0.38	...	...	...	...	...	...
Cataract	...	...	...	...	...	...	...	...	...	...
Glaucoma	...	...	1	0.02	...	...	...	...	...	...

TABLE XXVI—contd.

Diseases.	European Army of India.										Indian Army.				
	British officers attached to European troops. 2,227					Men 52,646					British officers attached to Indian troops 2,083				
	A.	D.	In- valids.	A.	Con- sistently sick.	A.	D.	In- valids.	Women. 4,178	Children. 6,552	A.	D.	In- valids.	A.	In- valids, stan- dantly sick.
<i>Diseases of Glands of Internal Secretion.</i>															
Gout	...	...	...	13	1-25	...	...	2	3	...	...	...	...	13	...
Hypertrophism	...	...	...	10	1-64	...	...	4	2	...	...	...	...	2	...
Other diseases	...	...	...	1	0 10	...	...	1	4	...	...	...	...	1	...
<i>Diseases of the Breast.</i>															
Mastitis	...	...	...	21	0 84	...	...	...	10	...	...	...	...	...	...
Other diseases	...	...	...	1	0 82	...	...	...	...	...	...	...	...	...	...
<i>Diseases of the Respiratory System.</i>															
Asthma	...	...	...	22	2-10	...	...	6	20	...	...	...	...	69	...
Bronchitis	...	...	...	831	29-57	...	...	13	39	...	...	...	...	1,315	...
Empyema	...	...	...	2	0-54	...	...	1	...	...	...	...	...	...	...
Laryngitis	...	...	...	32	0 05	...	...	...	...	...	...	...	...	92	...
Pleurisy	...	...	...	88	6 04	...	...	2	3	...	...	...	...	217	...
Pneumonia	...	...	...	132	12-69	...	...	1	8	...	...	...	...	514	...
(2) Lobar (Baccho- pneumonia)	...	...	...	51	4-76	...	...	2	2	...	...	...	...	6	...
Other diseases	...	...	...	39	5-26	...	...	10	1	...	...	...	...	110	...
<i>Diseases of the Teeth and Gums</i>															
Caries of the enamel, dentine and cementum	1	...	...	41	1-01	...	...	...	5	...	...	...	...	63	...
Gingivitis	...	...	...	31	0-88	...	...	...	2	...	...	...	...	118	...
Pyorrhoea alveolaris	...	...	...	45	1-23	...	...	...	4	...	...	...	...	83	...
Other diseases	...	...	...	15	0-61	...	...	...	1	...	...	...	...	21	...

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Diseases of the Digestive System.

	20	1	385	25-60	7	3	47	...	13	...	24	1	...	101	6	2	12-45
Appendicitis	2	1	131	2-85	...	1	6	...	...	...	3	1	...	127	1	2	1-93
Coloecystitis and cholangitis	2	...	163	3-45	...	...	7	...	...	...	5	...	...	147	...	...	2-93
Colic	1	...	40	2-33	...	1	2	...	5	...	6	...	...	308	...	...	1-47
Colitis	6	...	339	6-95	...	...	28	...	68	...	...	...	...	799	...	...	6-61
Constipation	60	...	859	10-01	...	...	36	...	125	...	28	...	...	...	...	...	16-64
Diarrhea	14	...	97	2-64	...	...	1	...	42	...	4	...	...	34	...	...	0-55
Dysentery	4	...	...	...	...	...	1	...	...	...	18	...	...	...	...	...	3-42
Enteritis	22	...	357	14-60	...	1	24	...	...	...	...	...	...	146	...	1	5-72
Enterocolitis	1	...	...	0-01	...	...	...	...	...	...	...	...	...	7	...	...	0-20
Gonorrhoidea (Piles)	4	...	205	8-75	...	...	...	...	...	...	2	...	...	189	...	...	0-47
Hemorrhoids	2	...	49	4-25	...	2	3	...	...	...	4	...	...	63	...	...	4-25
Hepatitis acute (Tropical)	...	...	1	0-44	...	2	...	...	...	...	...	...	...	3	...	...	0-19
Hepatitis chronic (Cirrhosis)	...	...	3	0-50	...	...	...	...	...	...	...	...	...	...	...	...	...
Hernia	3	...	137	0-95	...	1	...	...	8	...	6	...	...	91	...	4	7-37
Hyper trophy of the tonsils	6	...	189	6-07	...	...	4	...	74	...	8	...	...	7	...	1	0-61
Indigestion	10	...	116	4-62	...	1	20	...	42	...	4	...	...	427	...	...	10-67
Intestinal obstruction	...	...	8	0-54	...	1	...	...	1	...	...	...	...	6	...	1	0-26
Ischemia of the palate	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ischemia of the pharynx	12	...	27	1-36	...	1	1	...	...	...	9	...	...	1	...	...	0-02
Pharyngitis	...	...	482	9-18	...	...	8	...	11	...	9	...	...	2,329	...	...	0-93
Peritonitis	...	...	10	0-59	...	...	2	...	1	...	...	...	...	3	1	...	0-13
Quincy	...	...	108	3-02	...	...	19	...	1	...	...	...	...	29	...	...	1-22
Rabies	...	...	6	1-13	...	4	7	...	...	...	...	...	...	3	...	2	0-62
Stomatitis	1	...	...	0-22	...	...	3	...	...	...	...	...	...	24	...	...	0-67
Tonsillitis	48	...	1,516	27-80	...	...	81	...	274	...	51	...	...	690	...	...	17-35
Other diseases	18	...	230	18-01	...	3	26	...	34	...	21	...	...	137	...	4	0-59

<i>Diseases due to disorders of Nutrition or of Metabolism.</i>																	
Bulimia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Emaciation	1	...	4	1-93	...	4	1	...	...	...	2	...	...	...	4	...	0-34
Emaciation melinitis	1	...	2	0-06	...	1	...	...	...	...	...	...	...	1	...	...	0-02
Gout	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Insanition	...	...	7	0-85	...	1	...	...	27	...	1	...	...	3	...	...	0-19
Itch	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Neuritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other diseases	1	...	3	0-15	...	1	...	...	...	...	...	...	...	268	...	...	4-08

<i>Diseases of the Male Organs of Generation.</i>																	
Balanitis	...	...	109	3-69	...	...	...	...	...	...	...	...	...	11	...	...	0-50
Polymyoma	...	...	61	3-46	...	...	...	...	...	...	...	...	...	...	...	...	1-07
Prostatitis	1	...	37	3-07	...	...	...	...	...	...	1	...	...	53	...	...	2-04
Hyper trophy of the prostate	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	0-50
Orchitis	...	...	46	8-02	...	...	...	...	...	...	2	...	...	79	...	...	2-50
Testis	...	...	13	0-72	...	...	...	...	...	...	...	...	...	6	...	...	0-50

TABLE XXVI—*contd.*[illegible]

Diabetes and Deafness

[illegible]

Disorders of Bones, Joints, Muscles, Posture and Posture

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Arthritis	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Diseases of the spine	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Flat foot	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Hammertoes	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Myalgia	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Auto-angitis	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Preflexitis	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Sciatic	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
Other deformities of limbs	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

Diagnosis of the areolar tissue

Roll	8	473	14.02	.	.	1	7	0	...	...	696	...	19.11
Cathodic	1	10	0.55	.	.	35	76	2	...	...	51	...	1.11
residual	55	2,121	74.24	1	.	35	...	35	...	1	2,438	...	84.02
suppurative	...	174	7.61	.	...	12	6	4	...	...	407	...	16.05
(abscess)	...	35	1.61	.	...	2	1	...	...	...	9	...	0.31
Other discharges	...	1	...	.	...	...	...	...	...	...	...	...	...

Discourse of the SI(n).

Species	Sex	Age	Length	Wing	Tail	Culmen	Gape	Weight	Sex	Age	Length	Wing	Tail	Culmen	Gape	Weight
Ardea herodias	♂	1	20	0.91	1	0.40	0.40	1	♂	1	13	0.85	0.85	0.40	0.40	1
Ardea herodias	♀	2	23.6	13.54	1	16.85	16.85	1	♀	1	23.6	13.54	1	16.85	16.85	1
Ardea herodias	♂	3	103	6.35	4	18.78	18.78	4	♂	1	23.6	13.54	1	16.85	16.85	1
Ardea herodias	♀	4	37	1.10	1	0.18	0.18	1	♀	1	2	0.18	0.18	0.18	0.18	1
Ardea herodias	♂	5	39.5	19.05	1	2.68	2.68	1	♂	1	2	0.18	0.18	0.18	0.18	1
Ardea herodias	♀	6	139	4.52	1	0.17	0.17	1	♀	1	4	0.17	0.17	0.17	0.17	1
Ardea herodias	♂	7	10	0.31	1	0.13	0.13	1	♂	1	12	0.27	0.27	0.13	0.13	1
Ardea herodias	♀	8	24	0.98	1	0.27	0.27	1	♀	1	12	0.27	0.27	0.13	0.13	1
Ardea herodias	♂	9	17	0.94	1	0.82	0.82	1	♂	1	16	0.82	0.82	0.82	0.82	1
Ardea herodias	♀	10	29	2.02	1	1.23	1.23	1	♀	1	16	1.23	1.23	1.23	1.23	1
Ardea herodias	♂	11	58.2	21.42	1	12.59	12.59	1	♂	1	16	1.23	1.23	1.23	1.23	1
Ardea herodias	♀	12	81	1.75	1	0.75	0.75	1	♀	1	17	0.75	0.75	0.75	0.75	1
Ardea herodias	♂	13	30	1.54	1	0.75	0.75	1	♂	1	16	0.75	0.75	0.75	0.75	1
Ardea herodias	♀	14	80	1.88	1	4.37	4.37	1	♀	1	14	4.37	4.37	4.37	4.37	1
Ardea herodias	♂	15	182	6.25	3	2.93	2.93	3	♂	1	15	2.93	2.93	2.93	2.93	1

TABLE XXVI—concd.

Diseases	European Army of India.						Indian Army							
	British Officers attached to European troops 2,227		Men		Women		Children.		British Officers attached to Indian troops. 5,083		Men present 116,984			
	A.	D. valids.	Con-stantly sick	I.D.	A.	D.	A.	D.	A.	D. valids.	A.	D.	In-valids	Con-stantly sick.
<i>Morbores of the Urinary Organs.</i>														
Calculus—														
(a) Bladder	...	...	12	1'41	1	3	...	...	1	...	6	...	...	0'54
(b) Kidney	...	...	6	0'62	...	...	...	...	4	...	5	...	...	0'27
(c) Ureter	...	...	...	...	2	...	...	...	...	...	27	1	1	2'18
Cystitis	6	...	46	2'99	...	...	...	...	2	...	22	...	1	1'59
Hæmaturia	3	...	57	3'48	...	1	...	...	1	...	4	...	...	0'16
Incontinence of urine	...	...	3	0'10	...	...	...	...	...	...	...	...	...	...
Nephritis acute	...	...	11	2'82	3	3	...	...	...	...	14	...	4	1'37
Nephritis chronic	...	...	1	0'10	...	...	...	...	...	...	...	...	...	...
Pycclitis	...	...	48	3'76	...	...	...	...	4	...	31	...	...	2'80
Renal colic	...	...	43	2'12	...	...	...	...	...	...	134	...	...	4'22
Other diseases	...	...	97	6'16	...	3	...	...	...	...	79	...	2	4'26
<i>General Injuries.</i>														
Burns and scalds	...	...	...	0'76	1	...	...	...	...	...	...	...	...	...
Effects of anti-rabic treat-ment.	1	...	...	...	...	...	...	...	1	...	...	...	...	...
Effects of inoculation	...	...	14	0'20	...	...	...	...	...	...	2	...	...	0'03
Heat exhaustion	...	...	39	1'33	1	...	...	...	...	...	...	...	...	0'83
Heat stroke	...	...	13	0'57	3	...	...	...	1	...	17	...	...	0'02
Sonastroke	1	...	...	...	...	...	...	...	...	...	2	...	...	...
Other injuries	4	5	19	0'72	14	...	...	...	...	...	19	13	...	0'68
<i>Local Injuries.</i>														
Abrasions	5	...	167	4'47	...	...	...	...	...	...	...	...	...	...
Burns and scalds	3	...	78	2'81	...	...	...	...	...	...	...	...	...	...
Contusions	19	1	146	7'56	...	3	...	...	...	...	231	...	...	5'02
											169	...	...	7'00
											43	...	...	2'11

Cuts and lacerations	22	...	...	697	20-71	1	3	...	...	14	...	1,931	3	10	61.42			
Dislocation and displace- ments.	6	...	...	117	5-78	1	5	...	...	5	...	102	5	3	6.00			
Fractures	24	2	6	761	57-53	9	27	10	...	26	2	1,270	15	74	102.00			
Poisons and strychnine	20	..	..	806	25-79	6	2	5	...	18	...	761	...	...	23.90			
Wounds gun-shot	1	...	1	23	1-39	...	7	...	...	2	...	81	6	14	5.85			
Wounds others	8	...	1	250	8-98	...	4	2	...	9	...	1,481	3	4	55.88			
Injuries self-inflicted .	1	4	...	4	0-00	12	...	...	...	...	...	2	...	...	0.01			
Other injuries	4	...	...	119	6-97	1	12	3	...	...	...	103	8	11	6.56			
Tumours and Cysts																		
Carcinoma	..	3	1	1	0-02	...	1	14	...	1	...	2	1	...	0.15			
Cysts	...	...	...	81	3-08	...	...	7	...	1	...	98	...	...	3.59			
Sarcoma	...	2	1	32	1-75	1	2	...	...	...	...	6	2	1	0.34			
New growths "malignant" (other cases)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	0.58			
New growths non-malignant	1	...	1	25	1-30	...	...	...	...	1	...	53	1	3	4.53			
Malformations	1	...	...	19	0-50	...	...	1	...	...	...	12	...	1	1.16			
Poisons.																		
Alcohol	...	...	...	2	0-05	1	...	...	...	...	...	1	...	...	0.01			
Arsenic	...	...	...	1	0-00	1	...	...	...	...	...	4	1	...	0.49			
Charcoal	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
Other chemical poisons	1	...	...	3	0-09	...	...	2	...	...	...	...	...	...	0.17			
Oxylum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
Venom of insects	...	...	...	2	0-00	...	...	...	...	...	...	6	1	...	0.10			
Venom of Ophiura (Snake bite).	...	...	...	1	0-01	...	...	...	...	...	...	7	...	...	0.44			
Other poisons	...	...	...	...	...	...	...	...	...	1	...	3	1	...	0.03			
No appreciable disease	...	...	...	145	5-34	...	35	...	...	1	...	...	...	...	3.01			
All other causes . . .	...	...	...	10	0-45	...	1	...	...	...	...	2	...	...	0.03			
Total	973	14	52	30,801	1,389-21	159	572	1,363	14	2,025	83	750	0	11	48,703	252	643	1,793.00

* Includes 11 cases of carriers

