

THE TUSCARAWAS COUNTY
GENERAL HEALTH DISTRICT

DISTRICT OFFICE
at

210 West High Avenue
New Philadelphia, Ohio

ANNUAL REPORT

1950

W. Miller

Mr. Walter H. Lahmers
President of the Advisory Council
Tuscarawas County General Health District

Dear Mr. Lahmers,

Herewith, I submit to you and members of the Advisory Council the report of the work of the Tuscarawas County General Health District for the year 1950.

Noteworthy is the willing and helpful effort that has been expended by the members of the Board of Health. Their faithfulness, sincerity and tireless response to the demands of their position, mark them as true and qualified public servants.

May I commend to you also the performance "far beyond the line of duty" of our Department Staff. The accomplishments which we here set forth would not have been possible without their sacrifice of time and personal pleasure to the needs of our people.

A foundation and inspiration to our Board and Staff have been the assuring knowledge of the understanding, co-operation, and interest that this Council has so splendidly demonstrated during the past year. Without it we could not have weathered our storms and our accomplishments would have no splendor.

The world moves onward as it always has and always will. As we pause to view the culmination of 1950's work, the relationships and results are changing even as we watch. The "easy way" is always backward. The road ahead is still UPHILL. Eternal vigilance is the price of progress, safety, health and happiness.

We salute the spirit of willing co-operation, self-help and progressiveness which our Advisory Council and the people of this Health District have shown. We catch your enthusiasm as we travel on into 1951.

Faithfully yours,

Elizabeth Rowland-Aplin, M.D.
Health Commissioner

ADVISORY COUNCIL

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Warren	Irven Eichel	Mineral City, Ohio
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Wayne	Harry Wallick	R. R. #2, Dundee, Ohio
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Mrs. Mary Hahn, R. N. - Staff Nurse, Sugarcreek, Ohio
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Mr. Norman Miller, Sanitarian, New Philadelphia, Ohio
Mrs. Arlene Mizer - Clerk, Stonecreek, Ohio
Mrs. Mary Kay Sentz - Clerk, Uhrichsville, Ohio
James L Stumm - Custodian

POPULATION

Tuscarawas County General Health District (1940 census):

Townships and village	40,362
City of Dover	<u>9,691</u>
Total	50,053

SCHOOL STATISTICS

	<u>No. of Schools</u>	1949 <u>No. of pupils</u>	1950 <u>No. of pupils</u>
County Schools	40	5,356	5,387
Dennison	3	850	748
Newcomerstown	3	1,067	1,067
New Philadelphia	8	2,290	2,250
Dover	5	1,952	1,740
St. Joseph's	1	401	424
St. Mary's	1	274	388
Sacred Heart	1	184	190
Sandyville	1	164	141

The Tuscarawas County General Health District has continued to operate during the year 1950 by classifying their activities under seven basic services.

These are:

1. Vital Statistics
2. Environmental Sanitation
3. Maternal and Child Health
4. Communicable Diseases
5. Chronic or Adult Diseases
6. Laboratory Services
7. Health Education

The principles underlying our program remain the same, namely, to protect and promote the health of our constituents by democratic and educational methods. Only by such a program can our people achieve the highest level of physical, mental and social well-being.

Briefly, in this report, we shall attempt to delineate progress in each of these fields.

VITAL STATISTICS

Birth and death records since the year 1925 have been bound and are filed chronologically in metal, glass front book-cases. A visible cross index has been established for names, giving volume and page where the record may be found. It is thus possible to find in an expeditious manner any birth or death certificate contained in the records. In view of the increasing importance of birth certificates, particularly, we believe this service will be of real value to residents of this County.

We have also found increasing accuracy and completeness in the certificates as they reach our office. This has resulted in more accurate picture concerning births and the causes of death in our District. If we are to adequately meet the health needs of our population it is important that this picture be clear and undistorted.

ENVIRONMENTAL SANITATION

The Board of Health of the Tuscarawas County General Health District at its regular meeting on Nov. 7, 1950 formally adopted Sanitary Regulations covering water supply, sewage disposal and miscellaneous sanitation. This was probably the most important and far reaching activity of the Department so far as sanitation is concerned and the Board is to be commended on its timely action. Surely no one can deny the importance of these items in the building of an environment in which disease cannot prevail. Any doubts which may exist would be quickly dispelled by observation of the conditions which exist in a large percentage of our roadside ditches and streams, and the large number of unsafe, poorly located and developed water supplies that are in existence. Without these regulations it was practically impossible for the Health Department to cope with the increasing problems which they present.

209 visits relative to water supply, sewage and waste disposal were made in 1950. In these, if faulty conditions were found, recommendations for their corrections, together with educational material on the subject was given. A complete list on the corrections is not available since call back visits were seldom made. A number of new water supply sources and sewage disposal units of approved design were installed on a voluntary basis and a number of others are in various stages of construction. Our problem now is to disseminate information rapidly to those individuals planning new construction, as to the requirements of the new regulations and to make "call back" checks to be sure these requirements are met.

During the year 71 inspections of schools and other public buildings such as rest homes were made. Our schools constitute an important field in the Health Department activities. The condition of the school is reflected in the present and future mental and physical health of the

pupil, therefore, we feel that we must make every effort to attain the maximum in standards for our school buildings and surroundings. Boards of Education have made great effort to bring about improvements, but in a great many cases they have failed because of lack of funds.

Food handling is one of the basic problems of your Health Department. Properly handled food is a source of nourishment and growth. Improperly handled it can be a source of infection and disease. 421 inspections were made of various food handling establishments, part of these, meat markets and slaughter houses are covered by regulations of the Health Department. These regulations require a minimum of sanitation and should be considered for revision. Those establishments licensed by the Liquor Department are inspected at the request of the Liquor Department. In this field we operate chiefly through recommendation and some very fine cooperation has been received. While much improvement has been made in this field as a whole, there is still much room for improvement and every effort should be made to set up satisfactory standards for all food handling establishments and perhaps even more important the impressing upon food handlers themselves their obligation and importance in the field of public health.

Very little actual field work was accomplished in our milk sanitation program, however, efforts were centered on education, since it is our belief that only through understanding and cooperation that any degree of success can every be attained or maintained. We observe that a steady improvement is being made in this industry. Again in this field, every effort should be made to improve public relation and impress upon those engaged in it their duty and importance in protecting public health.

While food, milk, and water supply and sewage disposal comprise the basic sanitation programs, attention should also be given to such fields as camps, swimming pools, housing, rodent and insect control, and meat inspections for a well balanced program, working in the best interests of

the general public.

Another very important and pressing factor has entered the field of public health and sanitation, "Civil Defense." A major portion of the health problems in this activity is being thrust on the health departments, and it is the recommendation, if not order, of civil defense authorities, "That the civilian population attain the highest level of maintained efficiency possible. This means the completion and intensification of public health services and the sanitary improvement of the environment, now, when studied and deliberate action may avert situations which could not be controlled in the emergency." This is a serious matter, we pray that we will never be called upon to use civilian defense measures, but should the need arise and disaster strike we must be prepared to meet any situation. Our very existence as a nation depends upon the health and strength of our civilian population.

We live today in a rapidly changing environment, one in which sanitation plays a more important part than many of us realize, and it will continue to grow and advance as a means of man living with man. Its benefits are measured not only in health or absence of disease but also in happiness, security, dollars, social relations, beauty, recreation, in fact in all fields of human activity.

MATERNAL AND CHILD HEALTH

In 1949, Tuscarawas County had the highest maternal death rate in the State of Ohio. 4 maternal deaths occurred during this year in this field. During 1950 there were no maternal deaths. The dramatic drop in the maternal death rate of our District and County during the year 1950 represents the outstanding achievement. Great credit is due our hospitals both the administrative and professional staffs and the physicians of our

County for this excellent record.

Our Child Health program begins with the birth of a baby. A program of referral for premature babies from hospitals and physicians was begun this year. Before premature or weak infants are discharged from hospital care, the home is visited by the Public Health Nurse. Here she evaluates the situation and if she finds that facilities or knowledge for proper care of this baby are lacking, she attempts correction, so that the specialized care which this baby needs may be continued in the home. Since it has been shown that a large percentage of infant deaths occur in this group, this program should be a life saving one.

Well Child Conferences were established in eleven communities during the year. This is an educational conference to which mothers may bring infants and children of preschool age. A physician's examination and counselling with the mother about the health needs of her child, and the preventive and protective measures which she can take during these years constitute the activity of the Conference. In two localities the Conference was discontinued because the attendance was too low to prove practical, but in nine other vicinities the conferences have flourished and developed. Local groups interested in child health sponsor the conferences. Physicians attending them are compensated from Health Department Funds.

After a child reaches school age supervision is carried out in our school health program. Since 1948, the Department has been engaged in rendering specialized health services to school children as specified in the contracts between Boards of Education of the public schools and the Administrators of parochial schools. Every school in our district receives the contracted services, and they are also provided in the public and parochial schools of New Philadelphia. A rate of 50¢ per pupil has been established for schools located within our Health District and \$1.00 per

pupil for schools located outside the District. The County Board of Education provides the financial requirement for schools under its supervision. Boards of Education furnish funds for schools located in cities or exempted villages. During 1950 these contracts have been made identical for all schools, so that each school is receiving the same services. While Health Departments provide basic health services to schools in respect to the control of communicable diseases and nuisances, care of handicapped children, extensive and complete services such as are covered by contract, would not be possible. Educators are aware of the desirability of this program and are legally empowered to procure such services either through Health Department personnel or from other sources. Statistical account of these services is listed later in this report. In addition to this tabulation other school health activities are described under Health Education.

We have emphasized and again repeat that school health services are inadequate if they mean only the finding and correction of existing defects. Equally important is the supervision and care exercised so that the healthy child may continue in good health and that all influences during these years in school, home, and community may foster his complete development into a healthy, happy and responsible citizen.

CHRONIC OR ADULT DISEASES

Under this category falls the control of diseases which traditionally affect the older segment of our population. With the extension of human life expectancy to an average of 26 years during the past century and with our people living into the years when degenerative diseases attack an individual to produce invalidism or death, this program assumes a role increasingly prominent. If we are to live longer, let us take steps to insure that these added years shall be health happy and productive years.

It is maxmatic that the state of health in the older years of life is largely dependent on the preventive measures taken in earlier years. "Prevention" then, becomes the watchword for health protection during mature life. Circulatory diseases and cancer, with diabetes as a runner-up, are the greatest threats to life. All of these diseases, in the stage that they are curable often cannot be recognized by the individual. However, it is possible for physicians to detect the pre-disposition and the early signs of the disease. It is important that individuals provided with knowledge concerning preventive steps, the recognition of early symptoms and be motivated to seek medical examinations at frequent intervals even when they feel they are in perfect health. Your Health Department provides this type of education through movies, group talks, radio and newspaper articles, and informative literature.

In this County we have voluntary societies formed for the prevention of heart disease and cancer. The Tuscarawas County Heart Council has provided valuable educational aids, besides furnishing electrocardiographic machines for our hospitals. During the year they have also done screening electrocardiograms. Their support of heart research on a state and national level fosters the very basis on which progress in defeating the No. 1 killer of our population must be laid.

The Tuscarawas County Cancer Society likewise provides educational aids, supports two diagnostic clinics, and by subsidizing the salary of a nurse provides nursing services to cancer victims.

Close working relationships between personnel from the Health Department and these voluntary agencies has provided adequacy and completeness to programs which are aimed to lengthen and preserve life in the mature years.

LABORATORY SERVICES

Laboratory services to our area were increased during 1950 by the establishment of a branch laboratory in the Office of the Northeast Ohio Health District. All types of tests needed by health departments, hospitals and physicians for diagnosis of disease in man or animals, besides water and food samples, are done at this Laboratory. Our County continues to have access also to the central laboratory in Columbus. Containers and materials for submitting tests are furnished and distributed by our Department to hospitals and physicians. Our Department receives copies of reports on all tests done for our District, besides prenatal tests done by private laboratories.

Other important functions of these laboratories are the licensing of hospital and private laboratories throughout the State and the development of new tests as medical progress indicates the need for them. Particularly significant in view of threatened epidemics in certain parts of the United States are the laboratory tests now available for the diagnosis of influenza.

HEALTH EDUCATION

It is debatable whether this activity should be separately classified since health education is the cornerstone of all department work. We must recognize the fact that the individual cannot do everything in the modern world, but neither can he have everything done for him. The world owes a safe and easy existence to no one and provides none. While Health Departments traditionally will point the way, erect danger signals and guard rails, we cannot be at each person's side throughout life. The "follow-through" is after all, up to each one. The challenge of health education is that it shall provide to each one the knowledge that he needs for successful living, and that he be motivated to adopt this knowledge for his own pattern of living.

All our activities promote this goal, and are essentially education for health, whether we are quarantining a home, talking to a mother about child care, performing visual and hearing tests, attending diagnostic clinics or planning sanitation projects.

Several outstanding conferences were conducted during the year. In June the Tuscarawas County Medical Society sponsored a School Health Conference to which were invited School Superintendents, Chairmen of Boards of Education, physicians and dentists and their wives, P. T. A. representatives and Health Department staff. A panel of speakers, including the Chairman of the School Health Committee of the Ohio State Medical Association, a school superintendent, a spokesman for the Ohio Department of Health and a dentist presented the health needs of the child of school age, and "how-to-do" information.

In October Midvale Schools were host to a School Lunch Workshop arranged as a co-operative enterprise between the Ohio Department of Health, the Ohio Department of Education and the county schools serving school lunches. Invited personnel included school lunch managers, cooks, home economics teachers, and school administrators, as well as interested teachers and parents. Food demonstrations by Mrs. Ethel Patterson, Consulting dietician for the Northeast Ohio District and the Ohio Power Company, with a discussion of school lunch room sanitation by our Sanitarian, Mr. Miller, and administrative aspects of the program by Mr. Wade D. Bash, from the State Department of Education, provided an interesting and helpful afternoon and evening. A model school lunch was served at dinner time to the group.

Perhaps the most comprehensive educational venture of the year was the exhibit at the County Fair by combined health groups of the County. Through preliminary conferences we planned a "Health Plaza". This included

a tent housing the exhibit and movies concerning venereal diseases, which was travelling about among County Fairs from the Ohio Department of Health, the Mobile Unit for screening chest X-rays from the Ohio Department of Health, and a tent exhibit of educational literature and movies furnished by the voluntary health groups of the County. These included: The Infantile Paralysis Foundation, the Ohio Society for Crippled Children, the American Heart Association, the Tuberculosis and Health Association, the American Cancer Society and the Red Cross. Representatives from these groups and from the Health Department were present to receive and conduct visitors through the exhibit. In an inner tent they could rest comfortably and watch the movies which accented the programs of the various groups. A most popular and educational feature was the electrocardiograms taken during the evening hours each day. The Heart Council furnished a technician and equipment for electrocardiography. The reports of these electrocardiograms, after they were read, were sent to the patient's family physician for his interpretation to the patient. This individual received in a practical way a valuable education in preventive heart care and the entire group also benefitted as they learned by watching the demonstration. As Fair goers stepped into the Mobile Unit and had X-rays made of their chests, a similar educational step was accomplished.

In schools an ideal situation exists for effective health education. Here we have an opportunity to reach on an average at least one member of every family, and secondly, we are reaching the next generation, for the boys and girls of today are the family heads of tomorrow. By all school personnel, administrators, teachers, custodians, physicians and nurses pooling their efforts to make every educational process a "healthful" one, the best results can be secured. We must "practice what we preach" if we are to mold present and future health habits.

Health Education is being taught as an accredited, and in some schools,

a compulsory course for senior high school students. Formal discourses on anatomy and physiology have given way to a personalized approach in understanding of health standards and healthful living by each student. Emphasis is placed on teaching through activity. Our Department has participated in planning and presenting health methods and problems to these students. For example, one well accepted procedure is the demonstration of an ideal physical examination. This is done by examining each student and explaining diagnostic methods, equipment, and medical counselling. The aim is to assist him in his present personal evaluation and to win his acceptance of regular physical examinations as a health necessity in future years.

During the summer months our Staff Nurses took the training course prescribed by the American Red Cross for instructors of home nursing classes. Five adult classes, consisting of an average of fifteen members per class were taught during the year. It was with great regret that because of our limited nursing staff we could not accept more classes; the need is great, and the demand enthusiastic and widespread. We hope during the summer of 1951 to be able to train more "home nurses".

One very enjoyable activity of the Department was the assignment of nursing personnel to provide medical supervision to the children attending 4-H camps. Besides her usual duties in camps the nurses presented health programs using movies and informal talks as educational aids.

As we view the program for the year we find that 84 speaking engagements were filled by your Health Commissioner to a variety of groups who requested this service. In addition all members of the staff performed this type of service to a more limited degree.

"Civil Defense" is assuming an ever increasing and time consuming load to our Staff. Its priority and importance is unquestionable. We are faced with the deletion of crucial services presently being rendered as we assume the responsibility for this new task unless the way is opened to increase

our Staff personnel.

COMMUNICABLE DISEASES

Activities in this division group themselves into the control of the acute contagious diseases, such as scarlet fever and other streptococcal infections, venereal diseases, tuberculosis, and diseases transmitted from animals to man.

With the broadened concept concerning streptococcal infections and broader application of antiobiotic therapy, the Sanitary Code of Ohio was changed to provide greater latitude in the quarantining and control of infections of this type. Emphasis now is placed on the release in the community of infected victims after their physicians certify that they have recovered from the infection, rather than in a stereotyped length of time. This program should provide in not only better public control, but also improvement in the individuals' future health.

The usual activities of the venereal disease program were augmented this year by a large group of cases referred from Veteran's Administration. These cases represented men who contracted venereal diseases during military service in World War II, and who still had positive blood tests when discharged from treatment by military authorities. The challenge of this situation was in finding these cases, and persuading them to undergo further blood and spinal tests, and if necessary, further treatment. Otherwise this group are potential victims of neuro-syphilis in later years, and unless salvaged, would provide a large burden to already overcrowded mental institutions.

Tuberculosis Control in Tuscarawas County involves close working relationships between personnel, employed by the County Commissioners, the Health Department and representatives of the Tuscarawas County Tuberculosis and Health Association. In Ohio the control of tuberculosis is delegated by law to the County Commissioners. They have the legal responsibility

for establishing clinics, sanitarians and other services required to control and treat this disease. Health Department has the responsibility to find and control afflicted individuals. The voluntary association has as its program case finding through surveys, and educational programs to prevent the incidence and spread of the disease. All of these areas overlap and intertwine, and in order to work together more effectively, conferences have been held at bi-weekly intervals by representatives of the three agencies. One of the goals which we accomplished was the detailed outlining of a program of control in which each area of need was adequately covered by the agency properly responsible. This plan was presented to the County Commissioners, and several steps in its development have already been accomplished.

Facilitating this work is the Central Registry of Tuberculosis cases in the County provided by the Tuberculosis Society. Maximum effectiveness of this Register will require the services of a full time Registrar.

During the year a chest X-ray survey was made by the Mobile Unit from the Ohio Department of Health with the Tuberculosis Society providing funds for local expenses and for follow-up X-ray films. This Society also provided materials for patch tests and follow-up rays.

The revision of the Sanitary Code of Ohio also makes possible the more effective control of diseases transmitted from animals. Now animal diseases, capable of transmission to human beings, are required to be reported to the Health Department, as are injuries inflicted by animals to humans. Working with the Agricultural Extension office we have aided in the promotion of Brucellosis testing by all the educational methods at our disposal. Rabies and its incidence in dogs, has been a matter of great concern to our Board of Health, and here again, we have set up educational programs to reduce its incidence, working in co-operation with veterinarians, the Dog Warden, and the County Commissioners.

The greatest weakness of our program to control communicable diseases lies in the postponed and often neglected reporting of diseases by physicians. The Sanitary Code of Ohio makes prompt and complete reporting of diseases classified as "dangerous to public health" compulsory, and imposes penalties for failure to perform this duty by anyone who has knowledge of the existence of these diseases, whether he be a physician or layman. It may be that this Health Department has been guilty of neglect of duty by its failure to prosecute violators. Certainly, we know that unless we correct this condition we have not provided the protection to health that is the rightful claim of our constituents.

SERVICES TO HANDICAPPED CHILDREN

A handicapped child is one who, because of some physical or social defect, cannot lead an entirely normal life. The aim of the program is to correct the defect, or if this cannot be done, then to provide an environment for the child that is compatible with his abilities.

Physical defects include low mentality, skeletal crippling, impaired hearing, vision, speech and nutrition, and the psycho-neurosis. Social defects are found in children who live in insecure or "broken" homes or whose personalities have been distorted by improper parental guidance or community influence. Some handicapped children present a combination of many defects. Schools and health departments have the legal as well as the moral obligation to recognize the handicapped child and activate the cure or modification of his situation.

The process begins with notification to the parent by letter, home visit or office conference. Family physicians in most cases are then consulted by the family and in turn the assistance of official agencies such as the Juvenile Court, the County Welfare Department and the Crippled Children's Services, is often sought. Or the case may be referred to the voluntary

groups. The Society for Crippled Children, the Tuberculosis and Health Association, the Lions, Rotary, Kiwanis Clubs and the Child Conservation League for the purchase of orthopedic appliances, eye glasses, hearing aids and even food and clothing.

Boards of Education have legislation enabling them to provide special classes for the handicapped, the mentally retarded, the crippled, the hard of hearing and those requiring visual conservation or speech correction. While we have some classes established in this County, they are far from adequate. Lack of trained personnel and available funds have hampered the development that is needed.

The most common defect in our school children is dental caries. 85% of them show dental disease in mild or advanced stages. It is now recognized by the dental profession that our only hope for correcting this situation lies in a widespread program of prevention. To this end we are conducting with our County Dental Association and the Dental Division of the Ohio Department of Health an Educational program for the preservation of dental health. Movies, posters and informative talks are given to the children in schools, as well as individual dental inspections. Mothers are counselled specifically concerning the care of their children's teeth in our Well Child Conferences.

VITAL STATISTICS
for
TUSCARAWAS COUNTY GENERAL HEALTH DISTRICT

	<u>1949</u>	<u>1950</u>
Live births	1319	1549
Stillbirths	22	34
Deaths (all causes)	551	615
Infant Deaths (under 1 month of age)	25	26
Infant Deaths (under 1 year of age)	39	34

TEN LEADING CAUSES OF DEATH
in order of frequency

<u>1949</u>	<u>1950</u>
1. Diseases of the Heart	Diseases of the Heart
2. Cancer	Cancer
3. Diseases of Arteries	Diseases of Arteries
4. Vascular Accidents affecting the central nervous system	Vascular Accidents affecting the central nervous system
5. Accidents	Accidents
6. Diseases peculiar to early infancy	Diseases peculiar to early infancy
7. Diabetes	Infective and parasitic Diseases (including pneumonia, other than tuberculosis)
8. Infective and Parasitic Diseases (including pneumonia other than tuberculosis)	Diseases of Kidney
9. Tuberculosis	Suicide
10. Maternal Deaths	Diabetes

STATISTICAL REPORT
OF
SELECTED ACTIVITIES 1950

Well Child Conferences	79
Infants and Children admitted to Conferences	691
Number of Pre-school Conferences	51
Number of Children Admitted to Conferences	880

School Health Service

Nursing visits to schools	1,111
Number of nurse-teacher conferences	1,772
Number of home visits by nurses	349
Number of parent-pupil health appointment conferences	573
Number of schools providing school lunches	15
Physical Examinations by physicians	3,776
Children admitted to nursing service follow-up	578
Auditory screening tests	5,973
Auditory defects found	795
Audiograms made	127

School Health Services (continued)

Visual screening tests	5,643
Visual defects found	728
Tuberculin tests done	1,416
Positive reactors to tuberculin test	72
Number of follow-up chest X-rays	186
Small pox vaccinations and revaccinations	2,075
Diphtheria Immunizations	1,905

Communicable Disease Control

Cases of "childhood diseases" reported	92
Number of homes quarantined	44
Immune globulin distributed (number of doses)	849
Number of rabid animals reported	7
Number of individuals provided rabies serum	21

Venereal Disease Control Program

Number of cases diagnosed in 1950 for the first time	38
Number of cases previously diagnosed and given follow-up service in 1950	22
Number of cases and contacts admitted to service in 1950	77
Total number of blood tests made in 1950	162
Total number of spinal fluid tests	5
Number of cases sent to Central Ohio Rapid Treatment Center for treatment	19
Number of home visits made by nurses to cases and contacts in 1950	41
Number of visits by cases and contacts to cases	248
Cases and contacts carried to 1951 from previous years	152

Tuberculosis Control Program

Cases diagnosed for first time in 1950	23
Minimal	4
Moderately advanced	12
Far advanced	5
Reinfection	2
Previously diagnosed reinfection cases given service during 1950	32
Total clinic services given to new and previously reported cases	103
Total number given out patient services at Tuscarawas Valley Sanitorium during 1950 (exclusive of X-ray)	167
Total number out patient X-rays at Tuscarawas Valley Sanitorium	564
Number of screening X-rays - Mobile Unit	6,357
Number labeled "suspected Tuberculosis" and provided follow up X-rays	119
Nursing visits to homes for conferences or nursing care	311
Screening X-rays of school children because of contacts with active case of tuberculosis in a school employer	186

FINANCIAL STATEMENT

Balance, January 1, 1950		\$16,385.33
Receipts:		
Twp. and Village Taxes	\$ ¹² 11,750.00	
City of Dover, Taxes	5,725.00	
State Subsidy	1,720.00	
Federal Subsidy	<u>3,250.00</u>	
Total from taxation		\$22,445.00
Dover City Schools	1,737.00	
New Philadelphia Schools	2,209.50	
St. Joseph's Parochial	400.00	
Sacred Heart Parochial	<u>309.00</u>	
Total from Schools		4,655.50
Tuscarawas County Cancer Society		3,000.00
Inspection and Other fees:		
Meat Market Permits	1,012.50	
Slaughter House Permit	125.00	
Miscellaneous fees	<u>42.85</u>	
Total inspection fees		<u>1,180.35</u>
TOTAL RECEIPTS		<u>31,280.85</u>
Total in Health Fund		\$47,666.18
Expenditures:		
Salaries:		
Administration	\$ 8,510.64	
Nursing	9,977.50	
Clerks	2,410.22	
Sanitarian	<u>2,886.70</u>	
Total for salaries		23,785.06
Travel	2,389.50	
Expense of Board Members	216.30	
Workmen's Compensation	146.78	
Public Employees Ret. System	744.84	
Stationery and Supplies	794.90	
Medical Supplies	149.72	
Equipment	391.48	
Expenses of Well Child Conf.	587.50	
Other Expenses (Telephone, Legal, Advertising etc.)	<u>527.64</u>	
Total other expenses		<u>5,948.66</u>
TOTAL EXPENDITURES		<u>29,733.72</u>
Balance January 1, 1951		\$17,932.46