

### CITY OF BALTIMORE

## ONE HUNDRED AND THIRTY-NINTH

#### ANNUAL REPORT

OF THE

## DEPARTMENT OF HEALTH

1953



To the Mayor and City Council of Baltimore for the Year Ended December 31, 1953 Among the concerns of our Government for the human problems of our citizens, the subject of health ranks high. For only as our citizens enjoy good physical and mental health can they win for themselves the satisfaction of a fully productive, useful life.

PRESIDENT DWIGHT D. EISENHOWER Message to Congress: January 18, 1954

#### DEPARTMENT OF HEALTH

Commissioner, Huntington Williams, M.D., Dr.P.H. Assistant Commissioner, Ross Davies, M.D., M.P.H. Secretary, Reed Gaither

#### ADMINISTRATIVE SECTION

Administration	HUNTINGTON WILLIAMS, M.D., DR.P.H.
Health Information	
Laboratories	. Clinton L. Ewing
Eastern Health District	W. SINCLAIR HARPER, M.D., D.P.H.
Western Health District	. George W. Watson, M.S.P.II.
Druid Health District	
Southeastern Health District	
Southern Health District	

#### MEDICAL SECTION—PREVENTIVE

Communicable Diseases	Myron G. Tull, M.D., M.P.H.
Tuberculosis	CHARLOTTE SILVERMAN, M.D., DR.P.II.
Venereal Diseases	NELS A. NELSON, M.D., M.P.II.
Child Hygiene	
Dental Care	H. BERTON McCAULEY, D.D.S.
Public Health Nursing	ALICE M. SUNDBERG, R.N., M.P.H.

## MEDICAL CARE SECTION

## J. WILFRID DAVIS, M.D., M.P.II., Director

WILMER H. SCHULZE, Phar. D., Director

#### SANITARY SECTION

Milk Control	Ivan M. Marty
Food Control	FERDINAND A. KORFF
Meat Inspection	WILLIAM J. GALLAGHER, D.V.M.
Environmental Hygiene	
Industrial Hydiana	

#### HOUSING BUREAU

FRANZ J. VIDOR, Director

#### STATISTICAL SECTION

MATTHEW L. TABACK, Sc.D., Director

## THE SUN

The state of the s

Published Every Week Day By
THBA.S.ABBLL COMPANY
WILLIAM F. SCHMICK, SR., PRESIDENT

BALTIMORE, THURSDAY, MARCH 5, 1953

Dr. Thomas S. Cullen
It was altogether in keeping with
his character that, on the eve of the
attack which resulted in his death, Dr.
Thomas S. Cullen was attending a gathering of members of his profession.
He loved the company of his fellow
men and his presence never falled to
add zest to any assemblage.

Chief among the qualities which endeared him to a host of friends were his enthusiasm, his unselfishness and his humor. But these were not mere ornaments. He used them assiduously for the purpose of bettering the community in which he lived.

Dr. Cullen had no hesitancy about approaching persons of power and importance and making his demands known. This, according to his friends, he was able to do because he asked things for others, but never for himself. His humor, too, served him well. For often when tempers rose in the discussion of some controversial mat-

ter, Dr. Cullen would rescue the situstion with a good story from his abundant stock.

In a long life so full of good works it is impossible to select one which might be described as his outstanding contribution. Dr. Cullen represented the last living link with the "Four Doctors" of the Hopkins, in association with whom he began his professional career here. As professor of gynecology in succession to Kelly he achieved international distinction in research and teaching. Like Osler and Welch he became greatly interested in public health. Both the State and city health departments are indebted to him for expert advice and unfailing support. He was indefatigable, too, in his efforts on behalf of the Pratt Library. Added to that was his pioneer work in the public fight on cancer and miscellaneous labors on other boards too numerous to mention.

'Amid the many doubts and anxieties of the times there is great encouragement in the thought that our civilization produces men of skill and character and devotion to the public good like Dr. Cullen.

A GREAT SURGEON—A GREAT FRIEND A GREAT COUNSELOR

#### CONSULTANTS

DR. THOMAS S. CULLEN,
Member, Maryland State Board of Health.

DR. ALLEN W. FREEMAN,
Professor Emeritus of Public Health Administration,
Johns Hopkins School of Hygiene and Public Health.

DR. ANDREW C. GILLIS,
Professor of Neurology, School of Medicine, University of Maryland.

DR. LOUIS P. HAMBURGER,
Assistant Professor Emeritus of Medicine, Johns Hopkins School of Medicine.

DR. MAURICE C. PINCOFFS,
Professor of Medicine, School of Medicine, University of Maryland.

DR. ROBERT H. RILEY,
Director, Maryland State Department of Health.

DR. JAMES M. II. ROWLAND,
Dean Emeritus, School of Medicine, University of Maryland.

DR. ARTHUR M. SHIPLEY,
Professor Emeritus of Surgery, School of Medicine, University of Maryland.

DR. ERNEST L. STEBBINS,
Director, Johns Hopkins School of Hygiene and Public Health.

Dr. Thomas B. Turner,
Professor of Bacteriology, Johns Hopkins School of Hygiene and Public Health.

DR. ALLEN F. VOSHELL,
Professor of Orthopedic Surgery, School of Medicine, University of Maryland.

DR. WALTER D. WISE,
Professor of Surgery, School of Medicine, University of Maryland.

DR. SAMUEL WOLMAN,
Assistant Professor Emeritus of Medicine, Johns Hopkins School of Medicine.

#### ADVISORY COMMITTEE ON SANITATION

MR. CLARK S. Hobbs, Chairman Director, Civic Development Bureau, Baltimore Association of Commerce.

DR. ANNA M. BAETJER,
Assistant Professor of Environmental Medicine,
Johns Hopkins School of Hygiene and Public Health.

DR. FRANK S. FELLOWS,
Medical Director, United States Public Health Service
in Charge of the Baltimore Quarantine Station.

MR. HANS FROELICHER, JR. Head Master, Park School

MR. PAUL L. HOLLAND,
Director of Public Works of Baltimore.

DR. ABEL WOLMAN,
Professor of Sanitary Engineering,
Johns Hopkins School of Hygiene and Public Health.

#### MEDICAL STAFF

GEORGE G. ADAMS, M.D. t MAURICE L. ADAMS, M.D. 8 TOWNSEND W. ANDERSON, M.D. v BRUCE ARMSTRONG, M.D. t DAVID BACHARACH, M.D. s, v McDonald M. Bando, M.D. c M. L. BARKSDALE, M.D. V. BARNETT BERMAN, M.D. t WALTER P. BLOCK, M.D. c HARRY E. BLOOM, M.D. ey Louis V. Blum, M.D. t KATHERINE H. BORKOVICH, M.D. t M. L. BREITSTEIN, M.D. ea GEORGE P. BROWN, M.D. v G. RAYNOR BROWNE, M.D. v W. BERKLEY BUTLER, M.D. v JAMES D. CARR, M.D. v BARBARA K. CLARK, M.D. 8 J. W. V. CLIFT, M.D. c HARRY COHEN, M.D. m MORRIS M. COHEN, M.D. v THEODORE COOPER, M.D. t MIRIAM S. DALY, M.D. c GEORGE H. DAVIS, M.D. m W. ALLEN DECKERT, M.D. m MAURICE FELDMAN, JR., M.D. s ALAN FOORD, M.D. s NORMAN R. FREEMAN, JR., M.D. s TOBIAS R. FUNT, M.D. V PERRY FUTTERMAN, M.D. v Louis C. Gareis, M.D. m LESTER H. GLIEDMAN, M.D. V MORTON GOLDFARB, M.D. V HARRIS GOLDMAN, M.D. v, s SYLVAN C. GOODMAN, M.D. v ALFRED GREENBERG, M.D. v S. Butler Grimes, M.D. c Louis E. Harmon, M.D. v AARON HARRIS, M.D. c THOMAS W. HARRIS, JR., M.D. v JAMES B. HAWKINS, M.D. 8 MARY L. HAYLECK, M.D. c FREDERICK J. HELDRICH, JR., M.D. v EMIL H. HENNING, JR., M.D. s CLEWELL HOWELL, M.D. c HUGH P. HUGHES, M.D. s RICHARD H. HUNT, M.D. v MEYER W. JACOBSON, M.D. t

REUBEN D. JANDORF, M.D. v W. Atwell Jones, M.D. v THEODORE KARDASH, M.D. m KATHARINE V. KEMP, M.D. c ALBERT L. LAFOREST, M.D. v ARNOLD K. LAVENSTEIN, M.D. c C. Dudley Lee, M.D. t LUCILLE LIBERLES, M.D. e RENOLD B. LIGHSTON, JR., M.D. v ELIZABETH H. LONGSHORE, M.D. s JERRY C. LUCK, M.D. e CHARLES F. MALONEY, M.D. c CLARENCE W. MARTIN, M.D. v MARY E. MATTHEWS, M.D. c ROBERT MAZER, M.D. v, s ISRAEL P. MERANSKI, M.D. V DONALD W. MINTZER, M.D. v GEORGE C. PAGE, M.D. v GEORGE H. PENDLETON, M.D. v TALMADGE H. PINKNEY, M.D. V WILLIAM G. POLK, M.D. c, v HILDEGARD H. REISSMANN, M.D. 8 A. L. RETTALIATA, M.D. mi PAUL F. RICHARDSON, M.D. v MARY C. RILEY, M.D. t GILBERT W. ROSENTHAL, M.D. c ALMA S. ROTHHOLZ, M.D. c GILBERT E. RUDMAN, M.D. 8 CECIL RUDNER, M.D. t ALVIN D. RUDO, M.D. ea ROYD R. SAYERS, M.D. mi JAMES H. SHELL, JR., M.D. m J. Douglass Shepperd, M.D. v ERNEST W. SHERVINGTON, M.D. v, 8 M. S. Shiling, M.D. t ISADORE A. SIEGEL, M.D. m Andrew R. Sosnowski, M.D. s MELCHIJAH SPRAGINS, M.D. c HENRY G. SUMMERS, M.D. c ARTHUR C. TIEMEYER, M.D. m LESLIE A. WALKER, M.D. v HOWARD H. WARNER, M.D. s WILLIAM E. WEEKS, M.D. c HENRY L. WHITTLE, M.D. c JOSEPH C. WICH, M.D. c GUSTAV H. WOLTERECK, M.D. c CHARLES T. WOODLAND, M.D. v HAROLD E. C. ZHEUTLIN, M.D. v

[6]

c = child hygiene, ea = ear clinic, ey = eye clinic, m = maternity hygiene, mi = medical investigator, s = school physician, t = tuberculosis clinic, v = venereal disease clinic.

## TABLE OF CONTENTS

	' Page
THE DEPARTMENT OF HEALTH	3
REPORT OF THE COMMISSIONER OF HEALTH	9
ADMINISTRATIVE SECTION	
Assistant Commissioner of Health	67
Health InformationLaboratories	
Eastern Health District	95
Druid Health District	
Southeastern Health DistrictSouthern Health District	
MEDICAL SECTION—PREVENTIVE	108
Communicable Diseases	
Venereal Diseases	
Child Hygiene	
Dental Care	181
Public Health Nursing	`
MEDICAL CARE SECTION	197
SANITARY SECTION	
Sanitary Section	207
Milk Control	
Food Control	
Environmental Hygiene	
Industrial Hygiene	
HOUSING BUREAU	267
STATISTICAL SECTION	
Statistical Section	
Biostatistics	
Vital Records	
VITAL STATISTICS TABLES	285
APPENDIX Ordinances: Tattooing	390
Regulations: Tattooing	
State Psittacosis Control Law, Amendment	
State Regulations: Psittacosis Control, Amendments	332
INDEX	335

CONTROL NYGIENE HYGENE MUTRITION PLUMBING COMMUNITY ROCENT SECTION BALTIMORE CITY HEALTH DEPARTMENT CARD SCHOOL DENTAL PUBLIC MEATH CONTROL MSPECTION HEALTH LABORATORIES SECRETARY HEALTH DISTRICTS ORGANIZATION CHART COMMISSIONER ASSISTANT COUNISSIONER HOUSING MATERNITY PRESCHOOL MENTAL MEDICAL SECTION PREVENTIVE COMPLETANTS COMMUNICABLE TUBERCULOSIS VEWEREAL DISEASES MEDICAL CARE SECTION

## ONE HUNDRED AND THIRTY-NINTH ANNUAL REPORT OF THE BALTIMORE CITY HEALTH DEPARTMENT 1953

#### REPORT OF THE COMMISSIONER OF HEALTH

The Honorable,

THE MAYOR AND CITY COUNCIL OF BALTIMORE

#### GENTLEMEN:

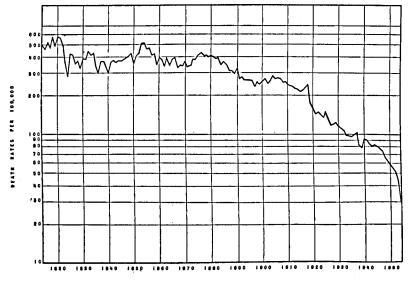
Pursuant to the provisions of Section 81 of the City Charter and also in accordance with a resolution adopted by the City Council in the year 1817, I have the honor to transmit to you a summary of the one hundred and thirty-ninth in a series of consecutive annual reports of the work done by the Baltimore City Health Department, and by the several bureaus thereof, for the year ended December 31, 1953.

#### Introduction

The truly phenomenal decline of 36 per cent in Baltimore's tuberculosis death rate and the even more striking drop of 48 per cent in the city's Negro tuberculosis death rate compared with 1952 constitute the most prominent achievements in the public health progress of the municipality during 1953. With these new low records, tuberculosis for the first time in Baltimore's history dropped out from the ranks of the major killers. Also, for the first time in the city's health records, a calendar year passed without a diphtheria death. The number of cases and deaths of syphilis, likewise, dwindled to a degree that permitted a reduction in Health Department expenditures for the treatment and control of that disease, and the maternal mortality rate reached a new record low which may represent a nationwide record for a city of Baltimore's size.

On February 16 the State Planning Commission submitted to the Governor and to the General Assembly of Maryland a report of its Committee to Review the Medical Care Program of the State which included an important analysis of this work in Baltimore City. In addition, another project of long-range future significance was the inauguration toward the middle of the year of the door-to-door survey of approximately 4,000 homes in the city by the Commission on Chronic Illness, a national non-profit independent agency, with headquarters in Baltimore, which was established in 1949.

In mid-February the Western Health District moved its offices from 617 West Lombard Street where they had been since the District was established in 1935 to the second floor of the old University of Maryland Hospital building at Lombard and Greene Streets, and Mr. George W. Watson became District Health Administrator. A month later the new Southeastern Health District building was opened at 3411 Bank Street, and on September 1 ground was broken by Mayor Thomas D'Alesandro, Jr., for the new Eastern Health District building which will be on Caroline Street between Monument and McElderry Streets.



TUBERCULOSIS DEATH RATES PER 100,000 POPULATION, BALTIMORE 1814-1953

The Housing Bureau was reorganized during the year and on June 23 Mr. Franz J. Vidor began his work as director of the bureau. Special efforts were made in preparation for an area project in neighborhood rehabilitation in the Mt. Royal area, and for the revision of the regulations adopted in 1942 pursuant to the Ordinance on the Hygiene of Housing. The Department work in air pollution control was also strengthened by the appointment of Mr. F. C. Hettinger, Chairman of the Department of Chemical Engineering at the Johns Hopkins University, to serve on a part-time basis as Senior Engineering Supervisor in the Bureau of Industrial Hygiene. Changes in the State psittacosis control law and the repeal of the city ordinance permitted the sale of love birds and other psittacine birds in Baltimore under Health Department permit, and two new tattoo

control ordinances with regulations put this procedure in the city under strict sanitary control.

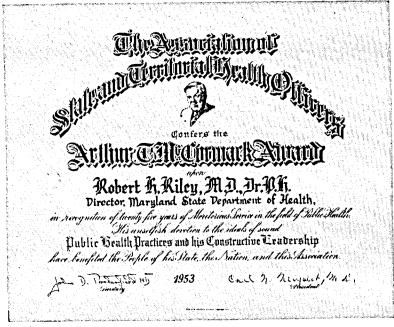
At the suggestion of Senator George L. Radcliffe, President of the Maryland Historical Society, the City and State Health Departments arranged with the help of the Medical and Chirurgical Faculty of Maryland and other professional groups an Exhibition on the History of Medicine in the State. Dr. Thomas Parran, Dean of the Graduate School of Public Health at the University of Pittsburgh, formerly Surgeon General of the U. S. Public Health Service and a native Marylander, gave the opening address on November 16 and the Exhibition remained on view at the Society building until December 31. Special sections were arranged by a group of committees, under the general chairmanship of the Commissioner of Health, which dealt with Medical Education and Research, General Practice, Hospitals, Public Health, Nursing, Dentistry and Pharmacy. Also of historical interest was the republication in facsimile of The First Thirty-Five Annual Reports of the Baltimore City Health Department for the years 1815 through 1849.

The Commissioner of Health presented an address on "Osler and Welch: Founders of Modern American Public Health" before the Section on the History of Medicine of the Richmond, Virginia, Academy of Medicine on February 10. He also continued to serve as Professor of Hygiene and Public Health at the Medical School of the University of Maryland, as Adjunct Professor of Public Health Administration at the Johns Hopkins School of Hygiene and Public Health, and as a lecturer at the Johns Hopkins Medical School. On November 5 Dr. Robert H. Riley, for 25 years Director of Health of Maryland and a Consultant to the Baltimore City Health Department, received the Arthur T. McCormack Award for unusually meritorious service in public health, at the annual meeting of the Association of State and Territorial Health Officers in Washington.

#### Civil Defense

Civil Defense Health Service activities during 1953 were primarily directed toward pushing forward the plans developed during 1951. While preparation to meet these Health Department responsibilities went ahead during the year, adequate means for giving emergency treatment to those injured by the effects of enemy bombing were not assured in an entirely satisfactory manner. This was largely due to a characteristic reluctance on the part of many agencies, groups and individuals to prepare for an attack which never appeared to be imminent.

However, at the close of the year it was felt that the Civil Defense Health Service of Baltimore was basically sound. Planning for it will



DR. ROBERT H. RILEY RECEIVES McCORMACK PUBLIC HEALTH AWARD

surely require periodic revision from time to time. This was particularly true in regard to emergency hospitalization. There appeared to be a need for a full-time medical director for the Civil Defense Health Service and for finding the right person for each particular position of leadership in this special field of organization.

Other civil defense activities during 1953 included: The distribution of quantities of litters, large and small burn dressings, cartons of special supplies, and cases of blood plasma to the ninety-eight casualty clearing stations of the city; distribution of a large quantity of antibiotics to cooperating hospitals for storage and use on a rotation basis; receipt of 10,000 fibre blankets and 400 cases of surgical instruments and other equipment for casualty clearing stations; and the receipt of ninety-eight metal signs designating selected buildings as casualty clearing stations most of which were distributed by the end of the year.

#### The Health of the City

The estimated population of the city on July 1, 1953 was 963,500; the white population was 715,800 and the nonwhite population was 247,700.

or 25.7 per cent. These figures have been used in calculating the rates in this report.

The extraordinary reduction in Baltimore's tuberculosis death rate from 43.2 per 100,000 population in 1952 to 27.8 in 1953 represented the most striking advance recorded during 1953 in the control of disease. With the advent of effective antibiotic therapy, the development and practice of increasingly successful chest surgery, and an expansion in the number of hospital beds available for tuberculosis care, the decline in tuberculosis mortality has been accelerated markedly in the past several years. Thus in the biennium 1952–1953 the average annual drop in rate was 24 per cent compared with 9 per cent in the period 1950–1951 and 8 per cent during 1948–1949.

Further progress in the control of syphilis was revealed by the fall in the mortality rate for this disease from 10.1 deaths per 100,000 in 1952 to 6.5 in 1953. A parallel reduction in cases from 1,982 reported in 1952 to 1,336 recorded in 1953 may constitute additional evidence of a decline in the infectious reservoir of this disease in Baltimore.

During 1953, the maternal mortality rate was 3.1 per 10,000 liveborn, a new low record. Among white women the rate was 0.7 and for Negro mothers it was 7.4. This health record revealed how effective have been the efforts of the medical profession and the Health Department in recent years through insistence upon the highest quality of care for the widest possible segment of the child-bearing group of women.

A rise in the death rate from pneumonia and influenza combined, continued a trend noted in 1951 and constituted a puzzling reversal in the generally successful fight against mortality associated with known bacterial organisms. Diseases of early infancy were an additional complex of disorders for which the statistical record failed to provide evidence of successful achievement.

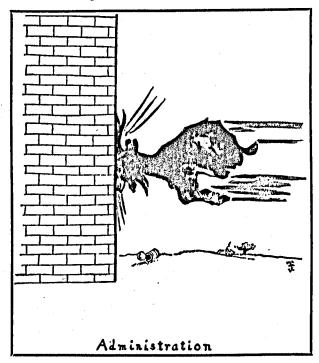
#### Principal Causes of Death

The total resident death rate was 11.2 per 1,000 population in 1953, a decline of about 4 per cent from the rate of 11.7 recorded in 1952. Mention has been made of the sharp decline in the city's tuberculosis mortality. Among the leading causes of death in 1953, accidents appeared to be perhaps the group most susceptible to control by the application of current knowledge and resources.

# RESIDENT DEATH RATES PER 100,000 POPULATION FOR THE SEVEN LEADING CAUSES OF DEATH: TOTAL, WHITE AND COLORED POPULATION—BALTIMORE 1952-1953

TOTAL POPULATI	ON		WHITE POPULAT	ION		COLORED POPULATION		
CAUSE	Rat	ath per ,000	Cause	Rat	ath e per	CAUSE	Death Rate per 100,000	
	1953	1952*		1953	1952*		1953	1952*
Diseases of heart Cancer, all forms Vascular lesions of central nervous system Accidents Certain diseases of	172.5	179.3 86.9	Vascular lesions of	187.3 89.4	193.0 85.8		129.6 73.9	
early infancy Influenza and pneumonia Tuberculosis, all forms	38.6	30.8	Influenza and pneu- monia	1	25.5	monia	57.7	46.5 77.2 100.5

Rates for 1952 vary slightly from those published in the Annual Report for 1952. This is due to the use
of an improved method of estimating the racial components of the population.



SEEN ON THE OFFICE WALL OF A BALTIMORE ADMINISTRATOR

#### Administration

There follows a financial statement for the Baltimore City Health Department for the fiscal year ended December 31, 1953.

#### FINANCIAL STATEMENT

As of December 31, 1953

As of December 31, 1953	
Total City Appropriations Total City Expenditures	\$2,085,427.13 2,060,542.20
ppropriations by Ordinance of Esti-	, , ,
mates, January 1, 1953 \$1,970,000,00	
Appropriation for Transportation 41,316.79	
Special Appropriation—Air Pollution 20,650.00 Supplementary Appropriations for	
Building Maintenance and Special	
Projects 53,460.34	

\$2,085,427.13

## Expenditures of the Baltimore City Health Department

#### ADMINISTRATIVE SECTION

Administration	\$ 58,630,53
itealth Information	30 202 21
Laboratories	144 749 00
Eastern Health District	97,246.11
Western Health District	64 000 00
Southeastern Health District	
Druid Health District	96,198.71
Southern Health District	149,157.70
Southern Health District	80,572.28

\$730,416.53

#### MEDICAL SECTION-PREVENTIVE

Communicable Diseases	\$10 863 54
Tuberculosis	04 982 00
Venereal Diseases	115 055 00
Child IIvgiana	115,355.86
Child Hygiene.	112,498.61
School Hygiene	34,683.00
Dental Care	63,830.53
Public Health Nursing	171,004.44

\$611,499.97

#### MEDICAL CARE SECTION

Administration\$18
--------------------

#### SANITARY SECTION

Administration \$	27,803.74	
Milk	71,588.19	
Food	67,393.49	
Meat	83,919.42	
THAIR CHANGE TO BE SEEN THE SE	114,255.52	
Rodent Control	56,843.37	
Industrial Hygiene	38,293.01	
Air Pollution	7,631.72	
		\$467,728.46
STATISTICAL SE	CTION	
Administration	\$14,781.01	
Biostatistics	29,968.57	
Vital Records	58,426.78	
		\$103,176.36
Housing		
Administration\$	128.462.86	,
Administration —	120,102.00	
		\$128,462.86
CIVIL DEFE	ENSE	
Administration	\$1,096.63	
		\$1,096.63
Total, Salaries and Expenses		
Receipts		
Vital Records		
Child Hygiene Licenses	119.00	
	12,605.00	
Milk Permits		
Milk Permits	23.483.50	
Plumbing Permits	23,483.50 603.00	
Plumbing Permits Rooming House Permits	603.00	
Plumbing Permits		
Plumbing Permits	603.00 24,546.00 212.50	. \$93,613.08

There follow certain tabulations of expenditures for health work in Baltimore in 1953 which was closely related to or a part of the City Health Department:

I Official Expenditures	
City Civil Defense Organization—Health Service	\$7,100.00
City Department of Education—high school medical services	101,063.00

City Department of Welfare	
Tuberculosis hospital service	
Baltimore City Hospitals	. 536,301.42
are. I leasant Sanatorium—city cases	17 000 10
17ddowood Sanatorium—city cases.	20 417 00
Communicatie disease hospital service	. 76,382.00†
State Department of Health Funds	
State Tuberculosis Sanatoria—city cases	. 1,503,947.00
M. I leasant Sanatorium—city cases	10 101 01
City venereal disease control	
services for city crippled children	FF 01F 00
Medical care—public assistance clients	. 55,915.00
U. S. Public Health Service Funds	. 672,296.00
General	
The Johns Hopkins Hospital—venereal disease control	. 32,995.17
Tuberculosis control.	. 26,800.00
U. S. Children's Bureau Funds	. 38,028.00
Maternal and Child Health Service.	
Services for crippled children	. 111,019.69
Services for cerebral palsy project.	. 37,668.44
The Johns Hopkins University rheumatic fever and congenital heart project.	48,039.14
The Johns Honkins University to its in the and congenital heart project	15,500.00
The Johns Hopkins University training program in audiology and speech.	26,300.00
The Johns Hopkins Hospital—epilepsy clinic	10,381.80
University of Maryland Hospital—epilepsy clinic	7,051.50
_	<b>\$2</b> 400 470 00
II Nonofficial Expenditures	\$3,409,470.80
Arthritis and Rheumatism Foundation.	15 000 00
Date more City Chapter—National Foundation for Infantile Duralises	
Datemore Hearing Society	89,660.43
Baltimore League for Crippled Children and Adults, Inc.	17,854.34
Eudowood Sanatorium	78, 150.80
Food Establishments—sanitary control	10,241.28
Heart Association of Maryland	80,000.00†
Instructive Visiting Nurse Association.	78,947.62
Johns Hopkins University Fraction Houlds Disaster	140,378.33
Johns Hopkins University—Eastern Health District	8,446.55
Laboratory services—hospital or private	150,000.00†
Maryland Division, Inc.—American Cancer Society	104,000.00
many and society for the frevention of Blindness	14,404.12
Maryland Tuberculosis Association	120,000.00†
Mt. Pleasant Sanatorium—city cases.	105, 870, 41
assectivation paints—rarm and laboratory control	175,000.00
Venereal disease control—hospital dispensaries.	20,000.00†
m	\$1,207,953,88†

This \$4,617,424.68 added to the City Health Department expenditures of \$2,000,542.20 gives an estimated total of \$6,677,966.88 or \$6.93 per capita. This does not include large expenditures for water purification or sewerage, or for general hospital and medical care services rendered by the City Welfare Department or by private hospitals, agencies or individuals.

† Approximate figure.

#### Personnel

Dr. Thomas S. Cullen, member of the Maryland State Board of Health and one of the original group of Consultants to the City Health Department died on March 4. Dr. Cullen, internationally known as a surgeon and for his teaching and research in gynecology, was for many years both friend and counselor to the City and State Health Departments. He will