

CITY OF BALTIMORE

ONE HUNDRED AND FORTIETH

ANNUAL REPORT

OF THE

DEPARTMENT OF HEALTH

1954



*To the Mayor and City Council of Baltimore for the
Year Ended December 31, 1954*

The cure for accidents is prevention.
ANON.

We often forget that two-thirds of all the people in the world are colored.
CHESTER BOWLES

Question: Then it is your opinion that it is necessary for the protection of the health of the city that each dwelling unit should have its own private bath facilities, and if it does not it is unfit for human habitation?
Answer: That is correct.

COURT TESTIMONY, BALTIMORE, 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.....JOSEPH GORDON
Laboratories.....CLINTON L. EWING
Eastern Health District.....W. SINCLAIR HARPER, M.D., D.P.H.
Western Health District.....GEORGE W. WATSON, M.S.P.H.
Druid Health District.....H. MACEO WILLIAMS, M.D., M.P.H.
Southeastern Health District.....JOHN A. SKLADOWSKY, M.D.
Southern Health District.....WILLIAM J. FRENCH, M.D.

MEDICAL SECTION—PREVENTIVE

Communicable Diseases.....MYRON G. TULL, M.D., M.P.H.
Tuberculosis.....CHARLOTTE SILVERMAN, M.D., DR.P.H.
Venereal Diseases.....NELS A. NELSON, M.D., M.P.H.
Child Hygiene.....JANET HARDY, M.D.
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.H., Director

SANITARY SECTION

WILMER H. SCHULZE, Phar. D., Director

Milk Control.....IVAN M. MARTY
Food Control.....FERDINAND A. KORFF
Meat Inspection.....WILLIAM J. GALLAGHER, D.V.M.
Environmental Hygiene.....GEORGE W. SCHUCKER
Industrial Hygiene.....CHARLES E. COUCHMAN

HOUSING BUREAU

FRANZ J. VIDOR, M.C.P., Director

STATISTICAL SECTION

MATTHEW L. TABACK, Sc.D., Director

Biostatistics.....TODD M. FRAZIER
Vital Records.....SIDNEY M. NORTON

Learn to Do Your Part in the Prevention of Disease

THE SUN

Published Every Week Day By
THE A. S. ABELL COMPANY
WILLIAM F. SCHMICK, Sr., President

BALTIMORE, MONDAY, MARCH 22, 1954

Baltimore Moves Toward The Private Bath tub

One Baltimore family in six, according to the 1950 census, had no bathtub of its own. Some improvements have been noted in the last few years. But that even one family in ten should lack this seemingly indispensable convenience leaves little cause for complacency.

The city Health Department has now decided to step in. By January of 1956, every dwelling unit must have its own bathtub or shower with adequate hot-water arrangements. If not, the owner will be subject to full penalty of the law. Slum landlords, in particular, are thus given plenty of advance warning that their opportunity to exploit tenants is shrinking.

Uncertainties and even questions are certain to arise. How long, for instance, will it take the Health Department's rather meager corps of inspectors to make the new rule fully effective? And how soon can tubless

units, only recently approved under the old regulations, be forced to conform to the new ones?

But, on principle, the Health Department is moving in the right direction. The principle was established some years back when outdoor privies were banned inside the city limits. Now, this regulation is being tightened again with the stipulation that every dwelling unit, rather than every ten persons, must have its own water closet. Still a third advance is the requirement for providing more square feet of living space per person than previously required.

All these steps are designed for the general purpose of bettering living conditions in low-rent neighborhoods. More specifically, they are aimed to reclaim slum neighborhoods and to prevent their further advance upon better preserved areas. Baltimore has already made its name nationally known for shrewd countermoves to the creeping destruction of blight. Here is another such move.

THE NEW HOUSING REGULATIONS
FOR SAFEGUARDING THE PUBLIC HEALTH

CONSULTANTS

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

DR. ANDREW C. GILLIS,
*Professor Emeritus 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 Preventive Medicine and Rehabilitation, 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 Microbiology, Johns Hopkins School of Hygiene and Public Health.

DR. ALLEN F. VOSHELL,
Professor of Orthopaedic 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

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*Director, Civic Development Bureau,
Baltimore Association of Commerce.*

DR. ANNA M. BAETJER,
*Associate 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

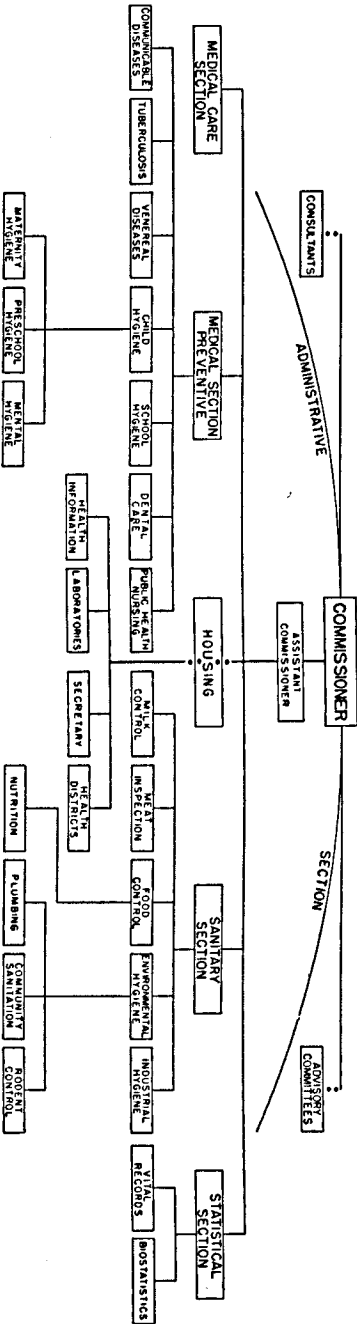
GEORGE G. ADAMS, M.D. t
 MAURICE L. ADAMS, M.D. s
 TOWNSEND W. ANDERSON, M.D. v
 DAVID BACHARACH, M.D. s, v
 McDONALD M. BANDO, M.D. c
 M. L. BARKSDALE, M.D. v
 BARNETT BERMAN, M.D. t
 WALTER P. BLOCK, M.D. c
 HARRY E. BLOOM, M.D. ey
 LOUIS V. BLUM, M.D. t
 KATHERINE H. BORKOVICH, M.D. t
 M. L. BREITSTEIN, M.D. ea
 GEORGE P. BROWN, M.D. v
 G. RAYNOR BROWNE, M.D. v
 W. BERKLEY BUTLER, M.D. v
 CAROLINE CHANDLER, M.D. c
 BARBARA K. CLARK, M.D. s
 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
 WINSTON C. DUDLEY, M.D. v
 MAURICE FELDMAN, JR., M.D. s
 ALAN FOORD, M.D. s
 NORMAN R. FREEMAN, JR., M.D. s
 MARY O. GABRIELSON, M.D. s
 LOUIS C. GAREIS, M.D. m
 MORTON GOLDFARB, M.D. v
 HARRIS GOLDMAN, M.D. v, s
 SYLVAN C. GOODMAN, M.D. v
 PAUL H. HARDY, JR., M.D. c
 LOUIS E. HARMON, M.D. v
 AARON HARRIS, M.D. c, s
 THOMAS W. HARRIS, JR., M.D. v
 JAMES B. HAWKINS, M.D. s
 MARY L. HAYLECK, M.D. c
 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
 JETHER M. JONES, JR., 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
 ELIZABETH LOEWALD, M.D. t, s
 NORMAN LEVIN, M.D. m
 LUCILLE LIBERLES, M.D. c
 JERRY C. LUCK, M.D. c
 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
 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
 MARY C. RILEY, M.D. t
 GILBERT W. ROSENTHAL, M.D. c
 ALMA S. ROTHHOLZ, M.D. c
 GILBERT E. RUDMAN, M.D. s
 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, s
 M. S. SHILING, M.D. t
 ISADORE A. SIEGEL, M.D. m
 MELCHIJAH SPRAGINS, M.D. c
 HENRY G. SUMMERS, M.D. c
 ARTHUR C. TIEMEYER, M.D. m
 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
 ORLYN H. WOOD, M.D. s
 CHARLES T. WOODLAND, M.D. v
 STANLEY N. YAFFE, M.D. v
 HAROLD E. C. ZHEUTLIN, M.D. v

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.

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ORGANIZATION CHART BALTIMORE CITY HEALTH DEPARTMENT



ONE HUNDRED AND FORTIETH ANNUAL
REPORT OF THE BALTIMORE CITY
HEALTH DEPARTMENT

1954

REPORT OF THE COMMISSIONER OF HEALTH

The Honorable,

THE MAYOR AND CITY COUNCIL OF BALTIMORE

GENTLEMEN:

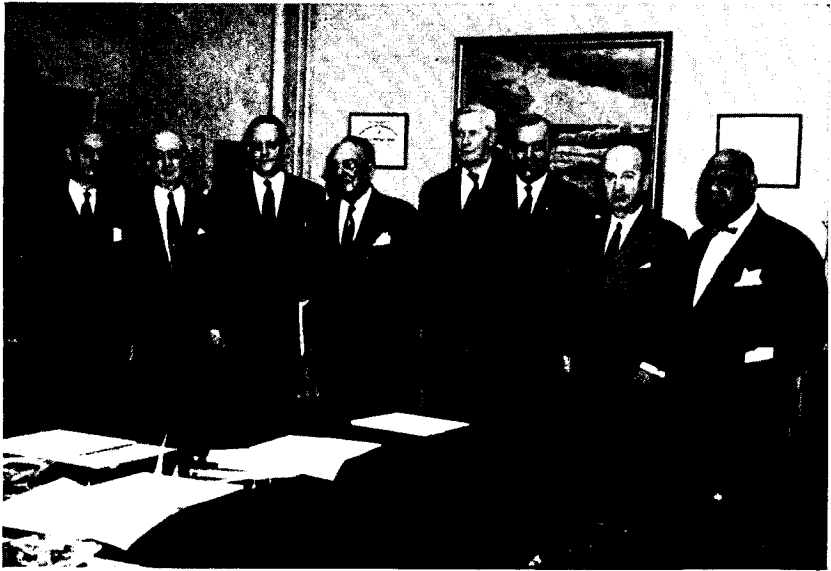
Pursuant to the provisions of Section 81 of the City Charter and also in accordance with a resolution adopted by the City Council in the year 1817, I have the honor to transmit to you a summary of the one hundred and fortieth in a series of consecutive annual reports of the work done by the Baltimore City Health Department, and by the several bureaus thereof, for the year ended December 31, 1954.

Introduction

The phenomenal decline reported in Baltimore's tuberculosis death rate for 1953 continued in 1954. The decline in 1953 of 36 per cent from the prior year was followed by a further decline of 26 per cent in 1954 as compared with the rate for 1953. There was not a single tuberculosis death in a Baltimore resident during the week ending August 26, 1954, the first such record since these vital statistics have been kept for the city.

On March 10 the Commissioner of Health adopted a major series of amendments to the rules and regulations governing the hygiene of housing and governing rooming houses, lodging houses and hotels. These regulations, first adopted on March 11, 1942, were promulgated pursuant to the city ordinance on the hygiene of housing. The new regulation requiring a bathtub or shower in individual dwelling units after January 1, 1956 was tested in court and upheld in an opinion rendered by Judge E. Paul Mason on October 22. The first Health Department project designed primarily for the prevention of residential blight as distinct from its correction, began on March 15 with the start of the Mount Royal neighborhood rehabilitation program.

The new million dollar Eastern Health District building on the southwest corner of Monument and Caroline Streets was completed and first put in operation on November 16. This structure was the first to be completed in the Broadway Redevelopment Area. The district boundaries were changed to include the entire northeast quarter of the city. The population served from the new building, in close association with the Johns Hopkins School of Hygiene and Public Health, was thereby increased to about one-third of the residents of the city. On November 2 the voters approved a bond issue loan to provide a like building for the Western Health District which will



THE MARYLAND STATE BOARD OF HEALTH

MAY 21, 1954*

In the photograph are shown (left to right): The Commissioner of Health of Baltimore; Lloyd N. Richardson, Phar.D.; A. Austin Pearre, M.D.; Robert H. Riley, M.D., Dr.P.H., *Chairman*; Maurice C. Pineoffs, M.D.; A. L. Penniman, Jr., P.E.; George M. Anderson, D.D.S.; and Ralph J. Young, M.D.

be located on the northwest corner of Lombard and Penn Streets, adjacent to the University of Maryland Hospital and Medical School.

Among other important city health activities in 1954 were the following: During the period April 30–May 10 the Health Department, in cooperation with the Department of Education and the Baltimore Safety Council, conducted a city-wide survey to promote the prevention of home accidents among 150,000 families of public school children; the amendment in March of the city milk ordinance and regulations to permit high-temperature short-time pasteurization; the assignment from the U. S. Public Health Service to the Health Department of a new mobile chest X-ray truck unit for making possible more widespread chest surveys in the city; and the completion in October of the report entitled “Widening the Lengthened Path of Life” which was prepared by the Baltimore Commission on Aging and the Problems of the Aged and submitted to Mayor Thomas D’Alessandro, Jr., who had appointed the Commission in 1952.

Dr. Wilmer H. Schulze, Director of the Health Department’s Sanitary Section, jointly with Edward Scott Hopkins who for many years served as engineer in charge of Baltimore’s water filtration plant, published early in September a volume entitled “The Practice of Sanitation.” This, in its second edition, is an authoritative text for health officers, physicians, nurses

* In the separate printing of the first 67 pages of this REPORT, under the title of *Guarding the Health of Baltimore—1954*, on page 10, the date of this photograph was recorded in error as May 28, 1954.

THE SUN

Published Every Week Day By
THE A. S. ABELL COMPANY
WILLIAM F. SCHMICK, Sr., PRESIDENT

Entered at the Post Office at Baltimore as
second-class mail matter.

BALTIMORE, TUESDAY, MAY 25, 1954

Preventive Medicine And A Cornerstone Laying

This morning, with fitting ceremony, the cornerstone of the new Eastern Health District building will be laid. In his letter to Acting Mayor Price calling attention to the event, Dr. Huntington Williams, city health commissioner, refers to the close relationship that has always existed between the district and the Johns Hopkins School of Hygiene and Public Health. In fact, the histories of the school and of the district are so intertwined that it is impossible to treat of one without the other.

The School of Hygiene and Public Health was established in 1916 through a gift of the Rockefeller Foundation. It was the first institution ever set up to train men and women especially for the public-health service. As such it was primarily interested in the prevention rather than cure of disease. It offered opportunities for research and courses of instruction in every branch of scientific knowledge that throws light on the causes of ill-health. Public health administration has been only a part of its comprehensive curriculum.

The Eastern Health District came into being in 1932. In part it was the first move in a program for decentralizing the City Health Department. More particularly it was an area designed for assembling data for the study of the health of a whole com-

munity by the students and faculty of the School of Hygiene. The co-operation of the 26,000 families living in the district was obtained, making possible the building up of a file containing an intimate history of each one of them. On the basis of this data many important individual studies in preventive medicine have been made.

Keen competition for the school came from a number of other cities. It was largely through the influence of Dr. William H. Welch and the competence of other Johns Hopkins Medical men that Baltimore was chosen. Dr. Williams has turned up letters of congratulation exchanged at the time between Mayor James H. Preston, President Frank J. Goodnow and Dr. Welch. Dr. Welch became the first director.

It has been said that the Eastern Health District and the Johns Hopkins School of Hygiene and Public Health are better known in the far corners of the world than they are to Baltimoreans. In addition to Americans serving in the United States, graduates of the school from many foreign countries have returned home to play leading roles in the field of public health and preventive medicine. The director general of the World Health Organization, the chief medical officer of the Italian Public Health Service, the senior medical officer for the Paris area in France, the director general of the National Health Service of Chile are among the graduates who hold top rank.

In India, Iran, Tokyo, Indonesia, Viet Nam, Burma, Ceylon, Liberia, Nigeria and Nicaragua men and women trained at the school are attacking preventable diseases from malaria and tuberculosis to syphilis and polio.

When the Rockefeller gift was announced *The Sun* commented that it was a splendid thing for the university, for Baltimore and for humanity. Thirty-six years after the opening of the school and 22 years after the opening of the Eastern Health District the records of those two related enterprises prove that the prophecy was not exaggerated.

F.F.B.

FOR THE NEW EASTERN HEALTH DISTRICT BUILDING
MAY 25, 1954

THE SUN

Published Every Week Day By
THE A. S. ABELL COMPANY
WILLIAM F. SCHMIDT, Sr., President

BALTIMORE, FRIDAY, APRIL 30, 1954

A Court Test Of The Bathtub Law

A landlord has brought suit to determine whether the Health Department's new regulation requiring that every dwelling unit shall have a bathtub or shower in good working condition is valid and enforceable. This is one of a number of new rules and regulations designed to raise the minimum living standards in the city.

The purpose is to have the regulations in effect by January 1, 1956. It was to be anticipated that they would be tested in the courts. In fact, such a test is essential if the Health Department is to have the full force of the law in carrying out its program.

Some twelve years ago, confronted by serious slum conditions that were spreading rapidly to the detriment of public health, Dr. Huntington Williams, health commissioner, introduced a set of rules and regulations aimed at raising the minimum standards. These regulations were successful among other things in banning outdoor privies and also in removing other back-yard nuisances that served as breeding ground for rats and other unsanitary conditions.

It then was recognized that these were pioneering efforts that would eventually have to be revised. In the opinion of the Health Department the time has now come for another lift to the minimum standards. Hence the new regulations having to do not only with bathtubs, but with adequate heating, cleanliness of premises, lighting and ventilation, and protection against overcrowding.

The rules as set forth are not merely the whims of an overzealous health department. They have been made pursuant to the power conferred on the Health Commissioner by Sections 118 and 68 of Article 12 of the Baltimore City Code of 1950. They have been adopted after consultation with the leading local medical authorities and on the advice of the special housing staff of the United States Public Health Service and other national authorities on housing.

The Baltimore Plan for meeting the slum problem has won distinction throughout the country. The new rules and regulations are an extension of that basic idea.

THE ANTICIPATED COURT TEST

and sanitarians and for all students of sanitary engineering. On October 13 the Commissioner of Health was elected Vice President of the American Public Health Association at the time the association was holding its eighty-second annual meeting in Buffalo. He continued for the twenty-second consecutive year to serve *ex-officio* as a member of the Maryland State Board of Health.

Civil Defense

On May 27 Baltimore witnessed its first demonstration of a civil defense casualty clearing station in operation following a mock atomic attack against the city. A number of simulated injuries were treated by physicians, nurses, and resident first-aid volunteers using the emergency medical supplies and equipment with which the station had been provided. The event was held at Casualty Clearing Station 98, located in the Uplands Community House near the western city boundary in the Edmondson Avenue area. Over 100 persons participated and the affair aroused much interest in civil defense in the neighborhood and generally in the city.

Hospital planning for a civil defense disaster was revised in 1954 by a Committee of Hospital Directors, headed by Mr. Carroll D. Hill, Director of the Union Memorial Hospital. Sites for improvised emergency hospitals were relocated as near as possible to the periphery of the city, but still within the city limits.

Key personnel of the Civil Defense Health Service participated in required drills and exercises both city-wide and at the district level. In conjunction with an international exercise held on June 14 a plan for transmitting "warning yellow" or "lemon juice" to hospitals by telephone was successfully implemented. In preparation for a "surprise" alert, held on November 8, an operations headquarters for the Health Service was obtained, located in the infirmary building at Morgan State College. A system of chain telephone calls during the November 8 test alerted key members of the Service upon receipt of the yellow warning. These persons thereupon reported to the operations headquarters.

Important civil defense medical conferences were attended by Dr. J. Wilfrid Davis in Pittsburgh on February 11 and in Chicago on October 30 and 31. Five dentists from Baltimore were instructed in a three-day civil defense course for dentists at the Olney Staff College near Washington during the month of July. In May Mr. William M. Stump, sanitarian in the Bureau of Industrial Hygiene, attended a course in radiological health at the U. S. Public Health Service Environmental Health Center in Cincinnati.

Mr. Samuel I. Raichlen, Chief of Pharmacy Services, assumed the task of obtaining an inventory of civil defense antibiotics stored in hospitals. The object of the inventory was to insure that no antibiotics would be stored beyond their expiration dates. During the year also training supplies for casualty clearing station groups were received from the Maryland Civil Defense Agency and placed in the Baltimore City civil defense storehouse in Carroll Park.

The Health of the City

The estimated population of the city on July 1, 1954 was 966,000; the white population was 708,000, and the nonwhite population was 258,000, or 26.7 per cent of the total. These figures have been used in calculating the rates in this report. Although the population total gives little evidence of annual change during the past several years significant shifts in racial distribution and geographical distribution have been experienced.

The tuberculosis death rate continued the precipitous decline in 1954 which is believed to have been initiated in 1952 when chemotherapy proved to be feasible and effective in the home treatment of cases. Baltimore's tuberculosis death rates per 100,000 population by race for the past five year period are as follows:

TUBERCULOSIS DEATHS AND DEATH RATES, BALTIMORE CITY, 1950-1954

YEAR	TOTAL		WHITE		NONWHITE	
	Deaths	Rate	Deaths	Rate	Deaths	Rate
1954	199	20.6	92	13.0	107	41.5
1953	268	27.8	139	19.4	129	52.1
1952	416	43.2	174	24.1	242	100.5
1951	497	52.1	212	29.4	285	122.1
1950	536	56.4	235	37.5	301	132.6

Although the mortality record for tuberculosis showed a remarkable fall, the incidence of the disease as measured by newly reported cases remained relatively constant. Nevertheless, the prevailing opinion among careful analysts of this problem forecasts a decline in the total reservoir of the disease in the near future.

The record as it related to communicable diseases was uniformly excellent. For the second consecutive calendar year, there was no diphtheria death among Baltimore residents and only 3 cases, a new low record; nor was there any death in 1954 from scarlet fever, whooping cough or typhoid fever. There were 3 deaths attributed to measles in 1954, all resulting from encephalitis, an infrequent complication of this common communicable disease. There was no death among the acute poliomyelitis cases which occurred in 1954. However, 1 death was ascribed to the late effects of poliomyelitis in a case with onset of disease in 1945. A total of 36 paralytic cases was reported which was well below the reported incidence of 92 cases for 1953.

Principal Causes of Death

The resident death rate reached a record low of 10.6 per 1,000 population in 1954. The figure of 11.2 in 1953 and 1950 was the previous low city rec-

ord. This trend is all the more surprising when one considers the fact that the population is aging. The decline was chiefly due to a drop of approximately 9 per cent in cardiovascular deaths during 1954 as compared to 1953. The principal causes of deaths for these two years are shown in the accompanying table.

RESIDENT DEATH RATES PER 100,000 POPULATION FOR THE SEVEN LEADING CAUSES OF DEATH; TOTAL, WHITE AND COLORED POPULATION—BALTIMORE 1953-1954

TOTAL POPULATION			WHITE POPULATION				COLORED POPULATION			
CAUSE	Death Rate per 100,000		CAUSE	Death Rate per 100,000		CAUSE	Death Rate per 100,000			
	1954	1953		1954	1953		1954	1953		
Diseases of the heart.....	441.2	481.2	Diseases of the heart.....	474.7	517.3	Diseases of the heart.....	349.2	376.7		
Cancer, all forms.....	176.8	172.5	Cancer, all forms.....	189.7	187.3	Cancer, all forms.....	144.2	129.6		
Vascular lesions of the central nervous system.....	85.6	85.4	Vascular lesions of the central nervous system.....	90.4	89.4	Certain diseases of early infancy.....	88.4	73.5		
Certain diseases of early infancy.....	50.0	45.1	Accidents.....	41.1	50.2	Vascular lesions of the central nervous system.....	72.5	73.9		
Accidents.....	46.5	52.1	Certain diseases of early infancy.....	36.0	35.3	Accidents.....	61.2	57.7		
Influenza and pneumonia.....	28.6	38.6	Diseases of arteries and veins.....	23.4	26.0	Influenza and pneumonia.....	48.1	63.8		
Diseases of arteries and veins.....	27.0	24.9	Influenza and pneumonia.....	21.5	29.9	Tuberculosis, all forms.....	41.5	52.1		

Administration

There follows a financial statement for the Baltimore City Health Department for the fiscal year ended December 31, 1954.

FINANCIAL STATEMENT

As of December 31, 1954

Total City Appropriations.....	\$2,267,156.02
Total City Expenditures.....	2,240,787.68
Appropriations by Ordinance of Estimates, January 1, 1954.....	\$2,143,300.00
Appropriation for Transportation.....	41,703.87
Supplementary Appropriations for Building Maintenance and Special Projects.....	82,152.15
	<u>\$2,267,156.02</u>

Expenditures of the Baltimore City Health Department

ADMINISTRATIVE SECTION

Administration.....	\$59,836.88
Health Information.....	37,014.40
Nutrition.....	8,089.30
Laboratories.....	144,819.93
Eastern Health District.....	170,464.03
Western Health District.....	63,379.09
Southeastern Health District.....	90,816.84
Druid Health District.....	160,148.92
Southern Health District.....	81,474.62
	<hr/>
	\$816,044.01

MEDICAL SECTION—PREVENTIVE

Communicable Diseases.....	\$17,184.35
Tuberculosis.....	86,230.09
Venereal Diseases.....	122,140.46
Child Hygiene.....	118,991.85
School Hygiene.....	39,512.13
Dental Care.....	80,096.48
Public Health Nursing.....	161,769.66
	<hr/>
	\$625,925.02

MEDICAL CARE SECTION

Administration.....	\$20,042.15
	<hr/>
	\$20,042.15

SANITARY SECTION

Administration.....	\$26,549.25
Milk.....	74,936.09
Food.....	70,567.92
Meat.....	89,159.34
Environmental Hygiene.....	125,941.82
Rodent Control.....	59,942.68
Industrial Hygiene.....	42,637.93
Air Pollution.....	27,677.83
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	\$517,412.86

STATISTICAL SECTION

Administration.....	\$16,276.68
Biostatistics.....	42,692.17
Vital Records.....	65,218.76
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	\$124,187.61