

THE TUBERCULOSIS WORK THAT IS BEING DONE AT LEICESTER.*

(Abridged.)

By MISS LUCY GLASS.

In speaking of the Tuberculosis Work that is being done in Leicester it may be classified under the following headings:—

- (1) That done by the State.
- (2) That done by Municipal Authority.
- (3) That done by Local Charities supported by voluntary contributions.

(1) First, in reference to the work of the State in connection with tuberculosis, a most important step has been taken in the present year of 1912—by this I mean the Act has been brought into force making tuberculosis a notifiable disease—an Act which all Health Authorities must have longed for for many years, as no one knows better than they tuberculosis is a preventable disease if certain precautions and treatment are carried out. But until the notification of tuberculosis was made compulsory many cases of tuberculosis were never heard of by the Health Authorities, and thus some houses have become sources of infection, for when a death from phthisis has occurred in a house there is always a danger to the other inmates, unless the room, clothing, bedding, and all appliances that were used by the patient have been thoroughly disinfected, boiled, and stoved. It can easily be imagined how many cases of tuberculosis would never be heard of by the Health Authorities before the compulsory notification of tuberculosis came into force; especially in houses where the people were careless or indifferent to the spreading of the infection, and only looked upon the precautions taken by the Sanitary Inspectors as an unnecessary trouble and upset. The Compulsory Notification of Tuberculosis also helps the Sanitary and Education Authorities to discover cases of tuberculosis amongst the children in the Council Schools. To quote from the Regulations sent out by the Local Government Board:—"A School Medical Inspector is required to notify all cases of pulmonary tuberculosis of which he becomes aware in the course of an inspection held by him at a public elementary school, or elsewhere.

"Valuable results may be anticipated from the co-operation of Sanitary and Local Education Authorities. In many instances it will be practicable for the Medical Officer of Health to acquaint the School Medical Inspector with the names of children coming from houses in which

cases of pulmonary tuberculosis have been notified. The latter will then be able to pay special attention to such children at his periodical inspections, and to call them up for inspection more frequently than would otherwise be the case."

In Leicester when the M.O.H. receives a notification of a case of tuberculosis that is not already being treated by a Medical Practitioner and is a suitable case for the Tuberculin Treatment, he passes it on to the Assistant Medical Officer of Health who is in charge of the tuberculosis dispensary.

THE MUNICIPAL AUTHORITY.

Now we come to the work that is being done by the Municipal Authorities in Leicester, who were the second in England to start a tuberculosis dispensary, Portsmouth being the first. Probably the number of these dispensaries at the present time is over half a dozen.

After the notification of a case of tuberculosis is received at the dispensary the case is visited by a Health Visitor attached to the dispensary. There are three of these Health Visitors at work in Leicester; their work is to visit the patients in their own homes and to get their general history.

Miss Glass here mentioned the Local Government Board Regulation emphasising the necessity for regarding records and information acquired as strictly confidential documents, and explained that the Leicester Tuberculosis Dispensary organizes its work through four forms. *Form A*, filled in before admission to the Dispensary. *Form B*, filled in by the doctor, "a record of physical condition on admission." *Form C*, "a record of treatment and progress." *Form D*, "a record of Home Conditions."

Treatment.—The treatment consists chiefly of the injection of tuberculin.

Method.—The method adopted is that each patient is taught to read a clinical thermometer and how to take his or her temperature. A card is then given to each patient who attends the Dispensary, on which the temperature is to be recorded, and which he is instructed to take three times a day for one week; if it keeps fairly normal, and the physical signs are indefinite, the patient returns to the Dispensary, and is given a diagnostic series of doses of tuberculin. If there is reaction after several of these doses the patient is considered tubercular and is put under a regular course of treatment, which lasts for about nine months, the tuberculin being injected twice a week and the patient weighed once a week. When the treatment is finished the patient is requested to

* Read at the Nursing and Midwifery Conference, London, April, 1912.

[previous page](#)

[next page](#)