TRACHOMA IN GLASGOW

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BY

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GLASGOW is the only city in the British Isles where trachoma is a notifiable disease. It was added to the list in 1914 owing to an outbreak of the disease in an industrial school. By the end of 1933 the number of notifications was 1039, but only 613 of these were regarded as definite cases.

The number of cases notified each year is small, but it is difficult to say if the incidence is declining. There is certainly no increase.

Along with notification provision is made for supervision and treatment of the disease by the Public Health Authority. A central dispensary has been established where an ophthalmic surgeon and nurse are attached. The surgeon diagnoses and treats the cases, the nurse visits the homes, keeps contacts under observation and carries out treatment. Cases for indoor and operative treatment are admitted to hospital where there are special beds for their accommodation, under the charge of an ophthalmic surgeon.

The number on the trachoma register at the end of 1934 was 120, and 13 of these were doubtful cases. During the year there were 17 notifications, and 7 of these were definite trachoma cases.

In 1933 it was found that the disease was commoner in females 78-51 males. 59 per cent. under 15 years of age and 80 per cent. under 25 years of age, when the disease was contracted. All cases occurred among the poorer classes. In 1933 as regards intradomestic infection, there were two instances where two cases occurred in the same family, three instances with three and in one instance there were four in the family. In an analysis of 1466 blind persons occurring in the south-west of Scotland, carried out by Drs. Smith and Marshall, there were 14 cases of blindness due to trachoma.

In Stobhill Hospital, Glasgow, I made an investigation as regards the presence of *B. Granulosis* (Noguchi). I found that this organism was not present in the cases occurring in this area. It was actually isolated from one case which turned out to be a simple folliculosis.

I regard compulsory notification of the disease as a very important factor in its control, and also the treatment by a special dispensary does much to prevent incapacity and blindness.

I am indebted to the Annual Report of the Medical Officer of Health of Glasgow for the figures given above.