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COLORADO STATE DEPARIMENI OF PUBLIC VELFARE DIVISION OF IUBERCULOSIS HOSPIIALIZATION

> Report for 1951 by Edward N. Chapman, M.D., Director

The year 1951 was a somewhat difficult one for the Division of Tuberculosis Hospitalization due to the absence from illness of the Director during the first eight months of the year. Dr. Robert K. Brown gave invaluable assistance as Acting Director during this period. Because of other commitments, however, only part time medical direction could be given by him. During this time, the general administration of the central office was carried on, until the return of the Director in September, by Miss Gertrude Loos of the Medical Social Department and Mrs. Elsie Hansen, Secretary; and their work deserves special commendation.

Table I

Total Number of Cases Given Care for Tuberculosis

 1947.
 .
 .343

 1948.
 .
 .379

 1949.
 .
 .413

 1950.
 .
 .442

 1951.
 .
 .479

265 cases were under care as of January 1, 1952.

The largest number of cases ever given care since the start of the State Iuberculosis Hospitalization Plan were hospitalized in 1951. As shown in Table I, a total of 479 individuals afflicted with this disease and unable financially to provide for themselves were given care. The increase was accounted for by the change made by the last legislature in changing the requirements from three years of residence to one year. These cases were given care at the following institutions.

> Colorado General Hospital, Denver Cragmor Sanatorium, Colorado Springs Craig Colony, Lakewood...(Bed and ambulant care) Glockner-Penrose Hospital, Colorado Springs Lutheran Sanatorium, Wheatridge Mennonite Hospital, La Junta Mesa Vista Sanatorium, Boulder National Jewish Hospital, Denver...(children only) St. Francis Sanatorium, Denver Sunnyrest Sanatorium, Colorado Springs...(ambulant care only) Swedish National Sanatorium, Englewood

Each of these institutions has been approved by the Director of Tuberculosis Hospitalization and by the State Board of Public Welfare and is licensed by the Colorado State Department of Public Health. The Director, or his associates, Drs. Robert Brown and Fred Harper, make visits to these institutions in order to consult with the staffs regarding treatment, time of discharge or transfer of patients for surgery, and on other matters important in the patient's care. No beds are under contract with any institution. The arrangement is entirely one of cooperation in the care of our patients; and this care continues only as long as the institution continues to furnish adequate treatment.

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Of the pulmonary cases hospitalized, almost half (46 per cent) of the cases come from Denver County. Despite active case finding by health departments, the percentage of far advanced cases at entrance increased to 62 percent from 58 percent the previous year; and minimal cases declined from 17 per cent of the total in 1950 to 12 percent in 1951. Iwenty six percent were moderately advanced on entrance last year.

Of the 238 cases admitted in 1951, approximately 14 percent (34 cases) were patients who had been discharged from care in past years with their disease arrested or quiescent, only to relapse later. It must be remembered that our patients, for the most part, return to poor home conditions and insufficient nutrition. Few county welfare departments are able to provide sufficient relief funds for a high protein diet, most desirable in a case of recently active tuberculosis. The remaining cases listed as readmitted or reopened were cases that were brought back for check-up or had previously left against medical advice.

Two hundred thirty-five cases were terminated during the year. At the year end, approximately 265 cases were under care, of which 21 were out-patients. The condition on discharge of the 235 cases terminated in 1951 was as follows:

	Number	Percent
Discharged with disease arrested	95	40.4
Discharged with disease quiescent*	16*	6.8*
Discharged with disease improved	12	5.1
Discharged with disease unimproved	1.4	6.0
Left against advice	54	23.0
Died	41	17.4
Disciplinary discharge	2	.9
Discharged as non-tuberculous	1	.4

\*Includes 15 cases discharged to Out-Patient Department

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Table II shows the percentage of cases discharged with their tuberculosis arrested, quiescent or improved in each of the past five years.

### Table II

Percent of Cases Discharged as Arrested, Guiescent or Improved

1947.				.34.6%
1948.				.45%
1949.				. 50%
1950.				.67.5%
				.52.3%

There was a slight rise in the percentage of deaths in 1951 as shown in Table III. All deaths of patients are included in this table whether the actual cause of death was tuberculosis or not. Actually there were nine deaths in 1951 out of the total of 41 that were attributable to causes other than tuberculosis.

### Deaths as a Percentage of lotal Discharges

1947.				.31%
1948.		•		.23%
1949.				.23%
1950.				.14.5%
1.951.				.17.4%

Table IV shows the percentage of patients leaving care against advice. The rise that has occurred the past year may, in part, be due to the fact that since Miss Naughton, one of our two Medical Social Workers, left in August, we have been unable to fill this position due to lack of money in the administrative fund of the Welfare Department. Medical Social service is invaluable in resolving many of the family and financial problems that plague so many of our patients, which make them restless and unvilling to remain under care as long as seems necessary.

### Table IV

### Percent of Cases Leaving Against Medical Advice

 1947.
 .17%

 1948.
 .18%

 1949.
 .22.4%

 1950.
 .16.5%

 1951.
 .23%

Beds for the tuberculous have always been available in some of the approved Colorado institutions at all times during the year. There is usually a greater demand for beds in the Denver area than the supply, since most Denver patients desire hospitalization near home - not always conducive to peace of mind however. In general, the beds in the institutions in and near Denver are given to Denver patients who show a spirit of cooperation in their treatment.

During the prolonged absence of the Director, it was impossible to keep the county welfare departments, and others, as well informed regarding the progress of patients as has been done in the past. This service is now being restored as rapialy as possible. The total net cost under the Colorado Tuberculosis Hospitalization Plan in 1951 was 540,121.02 which cost was divided equally between the state and the counties from which the patients originated.

The work of Mr. Satchell, of the Colorado Tuberculosis Association, and Mr. Haase, of the Colorado Division of Vocational Rehabilitation, has been most helpful in guiding those of our patients, who are unable to resume former occupations, to training courses in new fields better suited to their physical limitations. The county welfare departments, public health units, and Dr. Cannon and his Division of Tuberculosis Control, of the State Department of Public Health, have been most cooperative in assisting in rounding up patients who have left us against advice, and in persuading many to return for further treatment.

The staff of the Colorado School of Medicine - both medical and surgical - have served with skill and without compensation those of our patients requiring chest surgery or special diagnostic evaluation. We are indeed fortunate to have had the facilities offered by Ward "A" for our cases. In this connection, the professional ruidance given our patients by Dr. James J. Laring during a large part of the year at the Colorado General Hospital has been invaluable.

# SUMMARY OF TUBERCULOSIS ASSISTANCE

Year ending December 24, 1951

# PART I -- APPLICATIONS

Pending December 24, 1950
Received during 1951
Disposed of during 1951
Placed under care
Not placed under care
Pending December 24, 1951 10

5

# PART II -- CASES UNDER CARE

Cases under	care in Senatoria December 24, 1950 241	
New case Readmiss	care during the year	
	Total	
Discharg Died. Left aga Transfer	ated during the year       235         ed.       123         Arrested.       95         Quiescent       1         Improved.       12         Unimproved.       14*         Non-tuberculous       1	

\*Includes 3 cases transferred to a Mental Institution and 3 cases who left Colorado

## SUMMARY OF OUT-PAILEN'I DEPARIMENT

Cases in Out-patient Department December 24, 1950 17 Cases transferred to Out-patient Department during the year. 15 Placed directly into Out-patient Department
Cases in Out-patient Department terminated during the year 15 Discharged

Cases in Out-patient Department December 24, 1951. . . . . 21

COUNTY	JANUAF	RY 1, 1951	PLACED D	URING 1951	TOTAL 1951 SANAIORIA OUTPATIENT		
COUNTY	SANATORIA	OUTPATIENT	SANATORTA	OUTPATIENT			
Adams	6	1	4		10	1	
Alamosa	1		3	1	4	1	
Arapahoe	5	1	3		8	1	
Archuleta	i		2		3		
Bent			2 2		2		
Boulder	8	1	8		16	1	
Chaffee	ĩ				1	-	
Clear Creek	3			1	3	1	
Conejos	í		1	3 <b>-</b>	2	-	
Costilla	i		i		2 2		
Crowley	1.1		2		2		
Delta	1	2	l		2	2	
Denver	94	2	109	9	203	11	
Douglas	1	~	109	9	205	TT	
El Paso	17	2	12			2	
Garfield	2	~		1	29	3	
Grand			2		4		
	l			-	2		
Huerfano	4		4	3	8	3	
Jefferson	5		3		8		
Lake	1		1		2		
La Plata	3		3		6		
Larimer	9		5 8	the first life and	14		
Las Animas	12			2	20	2	
Logan	2		1		3		
Mesa	5		7	1	12	1	
Montezuma			1		1		
Montrose	3		3		6		
Morgan	1		3		4		
Otero	6	3	10		16	3	
Ouray			1		1		
Provers	9		2		11		
Pueblo	16	1	17		33	1	
Rio Grande	2	1	2		4	1	
Routt			1				
Saguache	1		1		2		
San Miguel	· 1		in a la test		ĩ		
Washington			l		ī		
Weld	16	3	12		28	3	
Yuma	2	28 18 2		1	2	í.	
					~ ~ ~		
TOTAL	241	17	238*	19	479	36	

TUBERCULOUS PATIENTS RECEIVING CARE IN SANATORIA AND OUT-PATIENT DEPARTMENTS COLORADO STATE DEPARTMENT OF PUBLIC WELFARE, BY COUNTIES, 1951

\*Includes 9 cases which were discharged and re-admitted during the year.

			PULMONARY NON-PULMONARY									
AGE	TOTAL CASES	Total PULMONARY	Minimal	Moderately Advanced	Far Advanced	Silico	Miliary	Pulmonary plus other		Genito-	Bone	Menin-
			:				:	TB compli- cations	ular	urinary Tract		geal
Total	238	216*	24	54 :	119	: 4	3 :	12	5:	7 :	9	1
0-9	12	11	5	-	3	:	1	2				1
10-19	13	11 :	3 :	5 :	2	:	: :	1	:		2	
20-29	42	39	7	12	19	:	1		2	1		
30-39	49	44 :	2 :	14 :	24	: 1	: 1 :	2		2	3	
40-49	58	51	4 :	9	34	1		3	3	1	3	
50-59	26	23 :	1 :	7 .:	12	: 2		1		3 :		
60-69	26	26	2 :	4	18	:		2	:	:		
70-79	9	8	7	2 :	5	:		1	:	:	1 :	
80 and over	3	3 :		1	2	: .				:		

TUBERCULOUS PERSONS PLACED UNDER CARE COLORADO STATE DEPARTMENT OF PUBLIC WELFARE BY AGE AND STAGE, 1951

\*Includes 3 cases of TB Meningitis

## OCCUPATION OF NEW PATIENTS HOSPITALIZED IN 1951

Housewives	27.3
Food handlers and service	18.5
None	19.3
Semi-skilled	10.1
Office and sales people	8.0
Unskilled	7.6
Agriculture	5.9
Skilled	3.3

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## SURGICAL AND SPECIAL DIAGNOSTIC PROCEDURES PERFORMED ON TUBERCULOUS PATIENTS COLORADO STATE DEPARIMENT OF PUBLIC VELFARE

## 1951

PROCEDURE	NUMBER	PROCEDURE	NUMBER
Pneumonectomy	10	Chest Abscess	1
Thoracoplasty	30	Incision and Drainage	
Lobectomy	2	of TB Gland	1
Lung Resection	2	Cystoscopy	12
Decortication of lung	2	Appendectomy	1
Decortication of Lobe	1	Celiotomy	1
Phrenic Crush	11	Septectomy	1 2 3 2 1 2 3 1 1
Cavernostomy	1	Orchidectomy	2
Open Thoracotomy	1	Epididymectomy	3
Exploratory Thoracotomy	1	Vasectomy	2
Monaldi Drainage of Lobe	1 3	Craniotomy	1
Rib Resection		Esophagoscopy	2
Bronchoscopy	63	Esophageal Dilation	3
Fusion of Knee	2	Ureter Dilation	1
Spinal Fusion	6	Dilation and Curettage	1
Hip Spica	1	Ureteral Catheterization	1
Brace	1	Transurethral Prostatectomy	2
Exploration of Elbow	1	Centricular Aspiration	1
Exploration of		Ligation of Intercostal Artery	1
Sciatic Nerve	1	Sterilization	1
1B Abscess of Knee	1	Confinement	4
Incision and Drainage of		Debridement Thoracoplasty Wound	
Abdominal Abscess	2	with Chronic Silk Infection	1
Drainage of Pelvic Abscess	1	Osteotomy	1
Open Abscess	1	Retrograde Pyelography	3
Psoas Abscess	1	Ureters Irrigation	1
	14		

### EXPENDI'URES DIVISION OF TUBERCULOSIS HOSPITALIZATION COLORADO STATE DEPARIMENT OF PUBLIC WELFARE 1951

Total Amount expended for patients in sanatoria
Amount expended for Out-Patient Department
Total gross amount expended
Patient days
Partial reimbursement by patients and relatives
Iotal net amount expended

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