

**CONTINUOUS MORBIDITY
REGISTRATION SENTINEL
STATIONS**

ANNUAL REPORT 1972

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* FOREWORD

As Chairman of the Programme Committee it is with great pleasure that I submit to you the third annual report of the Sentinel Stations Project. For the third successive year fifty-one general practitioners have been found willing to collect a number of data relevant to health care. As a method of collection, this may be described as a success.

Through the continuity of collection over a longer period the data acquire greater significance. Certain trends may guide policy and further research.

Despite the limitations inherent in almost any morbidity investigation, these data can give a pretty good insight into morbidity as it appears to workers in the field.

I hope that this project, the result of a joint venture by the Chief Medical Office of Health and the Netherlands Institute for General Practice, can make a contribution to the developments going on in health care.

C.P. Bruins, M.D.

Chairman of the Programme Committee for Sentinel Stations

CONTINUOUS MORBIDITY REGISTRATION SENTINEL STATIONS
Annual Report 1972

INTRODUCTION

The reporting with respect to a number of illnesses and other information by spotter physicians continued with few problems in 1972, the third year of the project.

The set-up and procedure of the sentinel stations, as described in the annual report for 1970, have remained unchanged.

The programme committee¹⁾ met four times.

Miss H. van Weerden, who from the start had made a major contribution as secretary to the creation and development of the sentinel station project, was succeeded on 1 September, 1972, by Miss M. de Jong.

- 1) Programme committee : C.P. Bruins, M.D. (chairman) ^{a)}
W.M.J. van Duyne, M.D. ^{b)}
Dr. M.J. Hartgerink ^{b)}
Dr. A.P. Oliemans, deputy member ^{c)}
Dr. J.A. Stoop ^{c)}
M.H.B. Thissen ^{c)})
H.C.J.M. Damen ^{b)}) financial experts
Adviser : Professor J.C. van Es ^{d)}
Coordinators : R. Drion, M.D. ^{b)}
T.E. Halbertsma, M.D. ^{c)}
Project leader : Dr. H. Bijkerk ^{e)}
Scientific officer : J.P. Dopheide, sociologist ^{a)}

a) Netherlands Institute for General Practice

b) Ministry of Public Health and Environmental Hygiene

c) Foundation of the Netherlands Institute for General Practice

d) Institute of General Practice of Utrecht State University

e) Chief Medical Office of Health

Mrs. M. de Boer-de Wijze, who worked part-time for the project for a considerable period, has also resigned, being succeeded as from 1 September, 1972, by Miss T. van Geleuken. On 15 August Mr. J. P. Dopheide was assigned to the sentinel station project as scientific officer for a period of one year. The task entrusted to him comprises the organization and analysis of the longitudinal research.

As in the past two years, the Prevention Fund undertook the subsidization of the general practitioners participating in the project. Although the Prevention Fund had promised financial support to this project for a period of three years, it has agreed that the moneys not yet used will also be spent on the sentinel station project in 1973 and 1974. The experimental phase of the project has been put at five years. At the end of 1973 it will be decided whether continuous morbidity registration by sentinel stations should be maintained as a permanent project.

As in the past two years, the sentinel station project continues to attract interest. Public health bodies and individual research-workers at home and abroad regularly ask to be sent annual reports on this project. However, this does not alter the fact that, as regards suggestions for subjects to be included in the weekly return, the programme committee still mainly gets its ideas from those who are closely connected with the project. It would be greatly appreciated if others than spotter physicians and members of the programme committee were to make comments and suggestions regarding this important project.

Meeting of spotter physicians

On 14 January, 1972, a meeting was held in the Industries Fair Congress and Meeting Centre in Utrecht which was attended by many spotter physicians and members of the programme committee. The meeting was addressed by the chairman of the programme committee, Mr. C. P. Bruins, M.D., the adviser to this committee, Professor J. C. van Es, and the coordinator,

Mr. R.Drion, M.D.. Dr. N.Masurel, head of the National Influenza Centre, Rotterdam, then gave a fascinating talk on the occurrence of the various influenza A strains in past years. The discussions provoked by this talk and the questions invited at the end of the meeting were very lively, and illustrated the involvement of those present in this project.

Distribution of the spotter physicians over the Netherlands
(Fig. 1)

With effect from 1 January, 1972, two spotter physicians - in Eindhoven and in Rheden - withdrew from the sentinel station project for personal reasons.

The sentinel station in Rheden was replaced by a new one in Velp. As Maastricht currently has a population in excess of 100,000 and now belongs to urbanization group 3, it was decided not to replace the sentinel station that ceased to exist in Eindhoven. The criterion of 1 spotter physician per 200,000 - 250,000 inhabitants per province group and urbanization group was not affected thereby.

The foreword by the chairman of the programme committee in the annual report for 1971 already mentioned the fact that a participating spotter physician, Mr. J.Balten, of Lelystad, lost his life in an accident on 19 January, 1972. As the take-over of Mr. Balten's practice required considerable time and his successor, for personal reasons, was unable to take part in the project, a different sentinel station will have to be sought in this region in 1973. The number of participating physicians - 51 - has remained almost constant in comparison with 1971 (53 physicians). ¹⁾

Appendix 1 lists the general practitioners who participated in the sentinel station project in 1972.

¹⁾ *The practice in Lelystad was left out of consideration here.*

The following table gives a distribution of the number of spotter physicians per province group and urbanization group:

Province group	Number of participating physicians
A. Groningen, Friesland and Drenthe	7 ^{#)}
B. Overijssel, Gelderland and the Southern IJsselmeer Polders	9 ^{#)}
C. Utrecht, North Holland and South Holland	23 ^{#)}
D. Zeeland, North Brabant and Limburg	12
Netherlands	51

Urbanization group ¹⁾	Number of participating physicians
1. Rural municipalities	11 ^{#)}
2. Municipalities with urban characteristics together with urbanized rural municipalities	25 ^{#t)}
3. Municipalities with a population of 100,000 or more	15
Netherlands	51

The practice populations

In 1972 no overall census of the practice populations of the sentinel stations was performed (1971 report, p.9). In the first half of 1973 all practice populations will be subjected to a census again. This is firstly because a number of spotter physicians were to set up a group practice with effect from 1 January, 1973, and an existing two-man practice was to be extended into a group practice of three general practitioners. Secondly, the programme committee considers it important to check after two years whether major shifts have occurred in the practice

^{#)} One asterisk indicates that two doctors together have a group practice.

¹⁾ Typology of the Dutch municipalities by degree of urbanization, 31 May, 1960 (Central Bureau for Statistics).

populations. The populations of which a census has been made again will be first fed into the computer for calculation of the incidences of the third quarter.

Illnesses and other information to be reported

The weekly return (Appendix 2)

The questions on the weekly return for 1972 were chosen as follows by the programme committee:

1. new cases of influenza (-like illnesses) ¹⁾
2. prescription of tranquillizers
3. consultations for family planning (first consultations only)
4. sterilization of the man (consultation and performance)
5. prescription of morning-after pill
6. requests for abortion
7. abortus provocatus (lege artis or (suspicion of) non lege artis)
8. attempted suicide (successful, unsuccessful)
9. consultation for drug-use

As in 1971, the basis in principle was weekly reporting, the "week" consisting of the period from Monday to Friday inclusive. The exceptions to this are the reporting of prescription of morning-after-pill, request for abortion, abortus provocatus, attempted suicide and consultation for drug-use, which are also reported on Saturdays and Sundays.

The reporting of individual cases of illness

On 15 September, 1971, as already stated in the 1971 report, the reporting of patients with anginose disorders ceased, since the number of patients reported (981) was considered adequate.

¹⁾ See for the criteria regarding the diagnosis of influenza-like illnesses the footnote on page 27 of the 1970 report.

Up to 1 January, 1973, a total of 601 new patients with a heart infarct and 186 new patients with an acute cerebrovascular disease had been reported. This reporting is continuing for the time being.

On 1 April, 1972, a start was made with the reporting of old and new patients with an epileptiform syndrome. Up to 1 January, 1973, 231 patients with an illness of this kind had been reported.

With effect from 15 August, 1972, a sociologist was engaged as scientific officer, with the task of processing the results obtained so far from the longitudinal research for analysis.

Processing of the data on the weekly return

This report contains the computerized results of the weekly return for 1972.

Three tables are produced on a routine basis:

1. the number of patients by sex and age group
2. the number of patients by sex and province group
3. the number of patients by sex and urbanization group.

Tables 1, 2 and 3 are produced per quarter on behalf of the reporting. Moreover, Table 1 is also produced per sentinel station for the convenience of the participating physicians.

Tables 1, 2 and 3 are also produced on a weekly basis on behalf of surveillance, with special reference to the influenza-like illnesses. With the exception of the information furnished per sentinel station, the data are expressed in rates (per 10,000 of the practice population) (frequency). The frequencies are given in round figures. In the case of a frequency of under 0.5 per 10,000 inhabitants the figure is rounded off to "0". When no cases at all have been reported, this is indicated by "-". In principle a sentinel station reports over a five-day week. However, in practice it proves that in some weeks fewer days are reported on, or none at all (sickness, vacation, etc.). The data from the physicians who have reported on 0, 1 or 2 days of the week are not processed, while the populations of these practices are not included in the calculation of the frequencies.

The data from the practices that have reported on 3, 4 or 5 days of the

week are processed, however, the numbers relating to influenza (-like illnesses), prescription of tranquillizers and consultations for family planning being corrected by a factor of 1.67, 1.25 or 1 respectively, so that a theoretically complete "weekly" reporting is attained. In the 1970 and 1971 reports it was incorrectly stated that the numbers relating to consultations for family planning were not corrected. However, this proves to have taken place - in fact wrongly. Although it may be assumed that by far the majority of the women will approach their family doctor for a first consultation for family planning, the correction made will have little effect on the incidence calculated, since in general correction in this respect was necessary on only a small number of the weekly returns (12 - 14%). Moreover, it has proved that the correction factor with regard to these weekly returns averages 1.25 (reporting over 4 days). In connection with the comparability of the data this correction was applied to the consultations for family planning in 1972 as well. The data on the other categories remain uncorrected. The quarterly returns are built up from the (corrected) weekly figures, the frequencies being calculated on the average population present in the quarter.

Some results of the weekly reporting for 1972 ¹⁾

This annual report will not attempt to give a complete analysis of the material.

The following quarterly tables are included here:

Tables 1a, 1b, 1c and 1d: the number of patients per 10,000 of the age group. In these tables and the tables in the text derived from them age-specific frequencies are given in all cases.

Tables 2a, 2b, 2c and 2d: the number of patients per 10,000 of the province group.

Tables 3a, 3b, 3c and 3d: the number of patients per 10,000 of the urbanization group.

¹⁾ *The tables indicated by letters are to be found in the text. The tables designated by Arabic numerals appear together with the appendices and the figures after the text.*

In the discussion of the tables the following abbreviations or codes are used:

- influenza for influenza (-like illnesses)
- A for the Groningen, Friesland and Drenthe province group
- B for the Overijssel, Gelderland and the Southern IJsselmeer Polders province group
- C for the Utrecht, North Holland and South Holland province group
- D for the Zeeland, North Brabant and Limburg province group
- 1 for the A₁ - A₄ urbanization group (rural municipalities)
- 2 for the B₁ - B₃, C₁ - C₄ urbanization group (municipalities with urban characteristics together with urbanized rural municipalities)
- 3 for the C₅ urbanization group (municipalities with a population of 100,000 or more).

Influenza (-like illness)

Table 4 and Figs. 2 to 4 incl. give the number of new cases of influenza per 10,000 inhabitants per week, per province group and per urbanization group.¹⁾

The 1971/1972 influenza epidemic was already described in the 1971 report. The influenza A/England/42/2/72 (H₃N₂) strain led to an influenza epidemic which became obvious in the 49th week of 1972 and quickly reached a peak in the 1st week of 1973, with an incidence of 115 cases per 10,000 inhabitants. The influenza struck almost simultaneously in all province groups in the 49th - 50th week, in group A approx. two weeks later than in the other province groups. In all province groups the peak is reached in the 1st week of 1973. This peak is the highest in province group D and the lowest in province group C. The incidences in the urbanization groups run practically parallel. In contrast to the epidemic in 1971/1972, which had a protracted course (Fig. 2), the 1972/1973 epidemic was of somewhat shorter duration, though the peak surpasses that of the preceding epidemic. If the incidences per week during the epidemic period are added together, 536 patients per 10,000 inhabitants prove

¹⁾ Here and elsewhere in the text incidence or frequency means the frequency per 10,000 inhabitants (or men or women).

to have been reported during the 1971/1972 epidemic (49th week of 1971 to 8th week of 1972 incl.) and 459 patients per 10,000 inhabitants during the 1972/1973 epidemic (49th week of 1972 to 6th week of 1973 incl.). This shows that the total incidence of influenza (-like illnesses) during the 1972/1973 epidemic is lower than that during 1971/1972.

Figures 2 to 4 incl. also show the trend of the weekly incidences with regard to influenza since the beginning of the sentinel station project in 1970.

Age and sex distribution

Figure 5 gives the incidences per quarter for the various age groups since the beginning of 1970. In both the epidemic and inter-epidemic periods the incidences in the age groups below 5 years prove to be higher than in the older age groups.

In general there are no obvious differences by sex (cf. 1970 and 1971 reports and Tables 1a to 1d incl.).

Investigation of the aetiology of the influenza-like illness

During the 1971/1972 influenza season the mobile unit of the National Influenza Centre, Rotterdam, performed an investigation of the aetiology of illnesses reported by spotter physicians (1971 report). The results of this investigation have been described by Dr. Masurel et al. (1973).¹⁾

An investigation indetical in set-up and performance was instituted during the 1972/1973 influenza season. The same sentinel stations participated as in the first investigation (Groningen, Nijmegen, Eindhoven, Utrecht, 't Zandt, Zelhem, Oirschot and Lindschoten). The investigation took place from 13 November, 1972, to 11 March, 1973.

¹⁾ Masurel, N., W.J.J. Anker, H. Bijkerk (1973), *Etiologie van influenza-achtige ziektebeelden in Nederland*, Ned. T.Geneesk., 117, 905.

Unlike the first investigation, in which material was taken from patients who had not been ill for longer than 24 hours, during the second investigation patients were also examined who had been ill for a longer time, but not more than three days.

The National Influenza Centre will in due course report on the results of the investigation in a separate article.

Prescription of tranquillizers

Initially, during the first quarter, it was left to the spotter physician himself to decide what should be regarded as a tranquillizer. A properly usable definition of what exactly constitutes a tranquillizer cannot be given, since certain substances which need not be regarded as tranquillizers nevertheless have a tranquillizing effect (see also footnote to weekly return). As in many cases it proves unfeasible to indicate whether a repeat consultation or a first consultation is concerned, no distinction is made in the weekly return between first and repeat consultations. However, the reporting on tranquillizers proved to encounter difficulties. These problems were discussed at the meeting of spotter physicians on 14 January, 1972.

The principal drawbacks concerned the physician's personal interpretation of what is meant by tranquillizers and the fact that the one physician prescribes tranquillizers for the patient for say 1 month, and the other for 3 months. In the latter case the problem of the frequency and the interval of iteration thus plays an important part. To obviate these objections to some extent it was decided to simplify reporting as follows with effect from the second quarter:

1. The reporting relates exclusively to the prescription of a limited group of tranquillizers. However, these tranquillizers should be representative of the whole group of tranquillizers. The choice fell on: librium, meprobamate, nobrium, seresta and valium.
2. Patients prescribed tranquillizers in 1972 will be reported on once only.

3. The indication on which a tranquillizer is prescribed is not important in this context. If for instance valium is prescribed as a muscle relaxant, this should, however, be reported.

The quarterly figures with regard to the prescription of tranquillizers from Tables 1a to 3d incl. are shown schematically in Fig. 6.

As different criteria were used in the first quarter, the frequencies in that quarter will be left out of consideration. The frequencies have clearly decreased in the third quarter, compared with the preceding period. This is observed in all province groups and urbanization groups and results from the questions (single reporting in 1972 of patients for whom tranquillizers are prescribed).

In the fourth quarter the coefficient of decrease proves to be still smaller. The total frequency for the second to fourth quarters incl. is the highest in province group D (741). Province groups A, C and B follow with total frequencies of 595, 518 and 502 per 10,000 inhabitants respectively.

In the urbanization groups the total frequencies are fairly close together: 633, 564 and 558 per 10,000 inhabitants for urbanization groups 3, 1 and 2 respectively.

Nationally the total frequency is 579 per 10,000 inhabitants.

As the data of the first quarter have been left out of consideration in the calculation of these frequencies, the total frequencies for 1972 will in fact have to be higher.

Table a gives the total frequencies per 10,000 inhabitants.

There is a clear predominance of the number of female patients in the age groups above 10 years (Fig. 7). It is noticeable that the frequency among women is already considerably higher from the 15 - 19 age group onwards.

Table a.

Number of patients for whom tranquillizers were prescribed by age group and sex, per 10,000 inhabitants (second to fourth quarters of 1972 incl.)

		Age group											Tot.
		<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	≥65	
Number of patients per 10,000 inhabitants	men	-	32	43	42	137	393	517	835	788	789	444	421
	wo-												
	men	9	55	18	68	394	611	910	1312	1343	1259	922	734
		to-											
		tal	4	44	31	54	264	510	714	1074	1068	1034	711 579

Among men the total frequency in the older age groups constantly increases at first to a peak of 835 patients per 10,000 men in the 35-44 age group, after which it decreases again. Among women there is the same trend, though at a higher level. The peak is reached here in the 35 - 44 and 45 - 54 age groups (1312 - 1343 patients per 10,000 women).

Consultations for family planning (first consultations)

In the weekly return for 1972, as in 1970 and 1971, the category "first consultations for family planning" was introduced. The category is subdivided into two parts: "first prescription of the 'pil'" and "other consultations".

First prescription of the "pill"

In Table b the total frequencies per 10,000 women per province group and urbanization group for 1970, 1971 and 1972 are summarized (cf. Fig. 8).

Table b.

Number of first consultations with regard to the "pill" per province group and urbanization group, per 10,000 women, 1970 - 1972

Year	Number of first consultations							
	Province group				Urbanization group			Netherlands
	A	B	C	D	1	2	3	
1970	194	278	408	351	235	327	446	345
1971	186	294	417	443	246	396	418	374
1972	283	411	489	497	390	448	506	454

Table b and Fig. 8 show that the frequency is clearly increasing annually. This also applies, particularly in 1972, to practically all province groups and urbanization groups.

In the province groups the highest frequency in 1972 (497) is found in group D, immediately followed by group C with a frequency of 489 first consultations in 1972. The lowest frequency (283) falls in province group A. The higher the degree of urbanization, the greater the number of first consultations. The total frequencies for urbanization groups 1, 2 and 3 are for 1972 390, 448 and 506 respectively. For the whole country the frequency in 1972 is 454.

Age distribution

Table c (cf. Fig. 9) gives the age-specific frequencies with regard to the first consultations for the "pill" per 10,000 women per quarter for 1970, 1971 and 1972.

Table c.

Number of first consultations with regard to the "pill" by age group, per 10,000 women, 1970 - 1972

	<i>Age group</i>								
	<i>10 - 14</i>			<i>15 - 19</i>			<i>20 - 24</i>		
	<i>1970</i>	<i>1971</i>	<i>1972</i>	<i>1970</i>	<i>1971</i>	<i>1972</i>	<i>1970</i>	<i>1971</i>	<i>1972</i>
<i>1st quarter</i>	-	2	2	144	198	214	331	358	398
<i>2nd quarter</i>	2	-	2	168	187	257	276	349	388
<i>3rd quarter</i>	2	-	2	126	224	270	312	350	375
<i>4th quarter</i>	2	5	-	147	175	258	329	345	373
<i>Total</i>	6	7	6	585	784	999	1248	1402	1534

	<i>Age group</i>								
	<i>25 - 34</i>			<i>35 - 44</i>			<i>45 - 54</i>		
	<i>1970</i>	<i>1971</i>	<i>1972</i>	<i>1970</i>	<i>1971</i>	<i>1972</i>	<i>1970</i>	<i>1971</i>	<i>1972</i>
<i>1st quarter</i>	235	222	232	71	93	111	21	26	28
<i>2nd quarter</i>	190	212	272	86	83	117	37	20	26
<i>3rd quarter</i>	203	176	288	81	84	117	11	14	24
<i>4th quarter</i>	187	184	220	73	68	114	24	11	31
<i>Total</i>	815	794	1012	311	328	459	93	71	109

The relatively most considerable increase in respect of 1970 has occurred in the 15 - 19 age group. Whilst in this age group a total frequency of 585 was still determined in 1970, in 1972 it proves to have increased to 999. This frequency is now practically identical with that for the 25 - 34 age group in 1972 (1012). As in 1970 and 1971, the highest frequencies per quarter (373 - 398) are found in the 20 - 24 age group.

Other first consultations for family planning

Table d gives the total frequencies per 10,000 men or women for 1970, 1971 and 1972 with regard to the other first consultations for family planning, per province and urbanization group (cf. also Fig. 10).

Table d.

Number of other first consultations with regard to family planning per province group and urbanization group, per 10,000 men or women, 1970 - 1972

Year	Number of other first consultations															
	Province group								Urbanization group						Netherlands	
	A		B		C		D		1		2		3		M	F
	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
1970	10	62	17	95	7	76	24	121	15	56	16	94	9	100	14	91
1971	12	44	16	129	29	99	68	193	23	103	43	125	24	123	34	120
1972	7	18	15	123	22	104	64	197	11	84	26	125	47	139	30	123

The number of consultations per 10,000 men or women, which in 1970 was 14 and 91 respectively, increased in 1971 to 34 and 120 respectively. In 1972 this number remained practically the same: 30 and 123 respectively. There is a clear predominance of the number of female patients.

The highest total frequencies are found in province group D. Then follow province groups B, C and A.

As in the case of the first consultations for family planning, the frequency with regard to the other consultations increases with the degree of urbanization.

Age and sex distribution

Table e gives a survey of the age-specific frequencies in the period 1970 - 1972 (cf. Fig. 11).

Table e.

Number of other consultations with regard to family planning by age group per 10,000 men or women, 1970 - 1972

<i>Age group</i>	<i>Year</i>					
	<i>1970</i>		<i>1971</i>		<i>1972</i>	
	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>
15 - 19	11	69	37	160	43	130
20 - 24	30	225	65	329	70	309
25 - 34	41	268	53	291	56	315
35 - 44	18	143	116	198	81	236
45 - 54	14	36	28	53	9	40

In 1971 the frequency in practically all age groups and in both sexes, compared with 1970, has clearly increased. The highest frequencies are found in the 20 - 24 and 25 - 34 age groups. Female patients are far in the majority.

Prescription of morning-after pill

Table f gives the total frequencies with regard to the prescription of the morning-after pill in 1972, per province group and urbanization group (cf. also Fig. 12).

Table f.

Number of women for whom the morning-after pill was prescribed, per province group and urbanization group, per 10,000 women

Year	Number of patients							
	Province group				Urbanization group			Netherlands
	A	B	C	D	1	2	3	
1972	34	42	55	68	45	41	81	53

The highest frequency (68) in 1972 is found in province group D, followed by province groups C, B and A.

In urbanization groups 1 and 2 the frequencies differ little (41 - 45).

In urbanization group 3, on the other hand, nearly twice as high a frequency (81) is found.

Age distribution

Table g gives the age distribution of the total frequencies with regard to prescription of the morning-after pill per quarter (cf. Fig. 12).

Table g.

Number of women for whom the morning-after pill was prescribed by age group, per 10,000 women, 1972

	Age group					
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54
1st quarter	-	21	29	35	12	-
2nd quarter	-	52	38	28	11	1
3rd quarter	-	32	44	24	28	5
4th quarter	2	43	39	30	16	1
Total	2	148	150	117	67	7

The highest frequencies are found in the 15 - 19 and 20 - 24 age groups. The third and following places are respectively occupied by the 25 - 34, 35 - 44, 45 - 54 and 10 - 14 age groups.

Requests for abortion

The number of requests for abortion per 10,000 women, per province group and urbanization group respectively, in the years 1970 to 1972 incl., is summarized in Table h (cf. Fig. 13).

Table h.

Number of requests for abortion per province group and urbanization group, per 10,000 women, 1970 - 1972

Year	<i>Number of requests for abortion</i>							
	<i>Province group</i>				<i>Urbanization group</i>			<i>Netherlands</i>
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>1</i>	<i>2</i>	<i>3</i>	
1970	12	14	44	24	9	22	55	29
1971	31	35	45	53	24	40	62	43
1972	20	31	48	45	20	30	76	41

In 1971 the number of requests for abortion, compared with 1970, clearly increased. The only exception to this is formed by province group C, where the total frequencies have remained practically the same. In 1972 a drop in the frequency may be observed in most groups, compared with 1971.

Age distribution

The age-specific frequencies per 10,000 women with regard to the number of requests for abortion, for 1970, 1971 and 1972, are given in Table i (cf. Fig. 13).

Table i.

Number of requests for abortion by age group, per 10,000 women, 1970 - 1972

Year	Province group					
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54
1970	2	80	68	66	46	4
1971	10	102	108	97	62	11
1972	2	122	84	87	72	10

As in 1970, the 15 - 19 age group occupies first place in 1972 with a frequency of 122 requests for abortion per 10,000 women in that age group. The second and third places are alternately occupied by the 20 - 24 and 25 - 34 age groups.

Abortus provocatus (lege artis and non lege artis)

The number of cases of abortus induced non lege artis is very small.

In 1971 per 10,000 women 0 to 2 cases and in 1972 0 to 1 case of abortus induced non lege artis were reported.

The number of cases of abortus induced lege artis, per 10,000 women and per province group and urbanization group, in 1971 and 1972, is given in Table j (cf. Fig. 14).

Table j.

Number of cases of abortus provocatus, lege artis, per province group and urbanization group, 1971 - 1972

	Province group				Urbanization group			Netherlands
	A	B	C	D	1	2	3	
1971	19	26	20	25	13	16	38	22
1972	21	21	37	28	16	20	57	30

The number of women aborted *lege artis* increased in 1972. For all sentinel stations together the frequency in 1971 and 1972 is 22 and 30 respectively. With the exception of province group B this frequency proves to have increased in all province groups and urbanization groups in 1972. The most considerable increase may be noted in province group C and in urbanization group 3.

The number of requests for abortion remained practically the same in 1972 compared with 1971, while the number of cases of *abortus provocatus* increased. This might suggest that in 1972 the wish to be aborted was granted more than in 1971.

Age distribution

The age-specific distribution of the number of cases of *abortus provocatus* (*lege artis*) per 10,000 women in 1971 and 1972 is summarized in Table k (cf. Fig. 14).

Table k.

Number of cases of *abortus provocatus*, *lege artis*, by age group, per 10,000 women, 1971 - 1972

Year	Age group					
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54
1971	4	50	43	52	42	5
1972	2	69	68	70	49	11

The increase in the number of cases of *abortus* noted in 1972 proves to have occurred in all eligible age groups, with the exception of the 10 - 14 year-olds. In 1972, as in 1971, the highest frequencies were found in the 15 - 34 age groups.

Sterilization of the man

The category sterilization of the man comprises the number of first consultations for sterilization and the number of sterilizations performed on the man.

Table 1 gives the total of the quarterly frequencies per 10,000 men and per province group and urbanization group in 1972 (cf. Fig. 15).

Table 1.

Number of primary consultations for sterilization and the number of sterilizations performed on the man, per province group and urbanization group, per 10,000 men, 1972

	<i>Province group</i>				<i>Urbanization group</i>			<i>Netherlands</i>
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>1</i>	<i>2</i>	<i>3</i>	
<i>Number of consultations</i>	20	22	42	81	22	50	57	47
<i>Number of sterilizations performed</i>	15	19	22	33	9	25	30	24

The national frequency with regard to the number of first consultations is nearly twice as high as that regarding the number of sterilizations performed: 47 and 24 respectively. The highest frequencies are found in province group D and urbanization group 3 and the lowest ones in province group A and in urbanization group 1.

Age distribution

The age-specific distribution of the number of first consultations and the number of sterilizations performed per 10,000 men is given in Table m (cf. Fig. 15).

Table m.

Number of first consultations for sterilization and the number of sterilizations performed on the man, by age group, per 10,000 men, 1972

	<i>Age group</i>					
	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54	54 - 64
<i>Number of consultations</i>	4	8	95	216	43	6
<i>Number of sterilizations performed</i>	-	3	42	105	35	-

The highest frequencies are observed in the 35 - 44 age group: 216 first consultations and 105 sterilizations performed per 10,000 men in that age group. The 25 - 34 and 45 - 54 age groups follow with clearly lower frequencies. It is striking that in the 15 - 19 age group a frequency of 4 first consultations is found.

Attempted suicide (successful and unsuccessful)

Tables 5 and 6 give the frequencies per 10,000 inhabitants per province group and urbanization group respectively in 1972.

The frequency of the number of successful and unsuccessful suicide attempts, which remained constant in the four quarters of 1970 and 1971 at 0 and 2 cases respectively per 10,000 inhabitants, displayed greater fluctuations in 1972 (between 0 and 1 respectively and 0 and 3 respectively per 10,000 inhabitants). ¹⁾

In province groups C and D, compared with the other two province groups, relatively more cases of unsuccessful attempted suicide are reported, 0 - 4 and 0 - 2 cases respectively per 10,000 inhabitants.

¹⁾ The meaning of "0" and "-" has been explained in the section on "Processing of the data on the weekly return".

The frequency of unsuccessful attempted suicide is connected with the degree or urbanization. The highest frequencies are found in urbanization group 3. A survey follows (Table n) of the absolute number of suicide attempts - successful and unsuccessful - for the years 1970 - 1972 incl.

Table n.

Number of suicide attempts, successful or unsuccessful, absolute, 1970 - 1972

<i>Successful</i>			<i>Unsuccessful</i>		
1970	1971	1972	1970	1971	1972
11	17	13	98	118	97

Age and sex distribution

In Tables o and p the age-specific frequencies per 10,000 men or women with regard to the total number of cases of attempted suicide, successful or unsuccessful, reported in 1970, 1971 and 1972, are given (cf. Fig. 16).

Table o.

Number of cases (men) of attempted suicide, successful and unsuccessful, by age group, per 10,000 men, 1970 - 1972

<i>Age group</i>								
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54	55 - 64	≥ 65
<i>Successful</i>								
1970	-	-	-	2	-	1	4	3
1971	-	-	1	-	-	1	7	3
1972	-	-	-	-	1	-	-	5

Table 0. (continued)

	<i>Age group</i>							
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54	55 - 64	≥ 65
	<i>Unsuccessful</i>							
1970	-	7	10	10	4	6	7	4
1971	1	4	5	4	12	7	7	-
1972	-	4	13	5	6	1	3	4

Table p.

Number of cases (women) of attempted suicide, successful and unsuccessful, by age group, per 10,000 (women), 1970 - 1972

	<i>Age group</i>							
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54	55 - 64	≥ 65
	<i>Successful</i>							
1970	-	-	-	-	-	2	3	1
1971	-	-	-	1	2	4	4	1
1972	-	2	-	1	1	3	4	1

	<i>Age group</i>							
	10 - 14	15 - 19	20 - 24	25 - 34	35 - 44	45 - 54	55 - 64	≥ 65
	<i>Unsuccessful</i>							
1970	-	20	10	9	13	21	13	4
1971	2	10	22	17	21	12	13	8
1972	2	15	7	19	18	12	7	7

The highest frequencies with regard to the number of successful suicide attempts are found among men in the 55 - 64 and older age groups and among women in the 45 - 54 and 55 - 64 age groups.

With regard to unsuccessful suicide attempts, the frequencies are in general much higher among women than among men. The frequencies in the 15 - 19 and older age groups are subject to great fluctuations. It is striking here that in the younger age groups frequencies as high as those in older age groups are not uncommon.

Consultation for drug-use

The frequencies with regard to the first consultation for drug-use by others than the drug-user himself are in general at a somewhat lower level than those regarding the first consultations by the patient himself (Table r). The frequencies relating to repeat consultations by others than the drug-user himself prove to be of little or no significance and require no discussion.

First consultations

Table r gives a survey of the first consultations.

Table r.

Number of first consultations by the drug-user himself or by others¹⁾, per quarter, province group and urbanization group, per 10,000 inhabitants, 1972

	Province group				Urbanization group			Netherlands
	A	B	C	D	1	2	3	
	Men							
1st quarter	2	-(1)	2(2)	-	-(1)	0(0)	4(2)	1(1)
2nd quarter	1	1(1)	2(0)	1	2(1)	1	1(1)	1(0)
3rd quarter	-	-(1)	1(0)	-	-	-(0)	1(1)	0(0)
4th quarter	2(2)	-	1(1)	-	-	0(0)	2(1)	1(0)

Table r (continued)

	<i>Province group</i>				<i>Urbanization group</i>			<i>Netherlands</i>
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>1</i>	<i>2</i>	<i>3</i>	
<i>Women</i>								
<i>1st quarter</i>	-	-	2(1)	1	-	1	3(2)	1(1)
<i>2nd quarter</i>	-	-(1)	1(1)	-(1)	-(1)	0(0)	1(1)	1(1)
<i>3rd quarter</i>	-	-	1	-	-	-	1	0
<i>4th quarter</i>	-	-	0	-(1)	-	-	0(0)	0(0)

1) The figures between brackets give the number of consultations by others than the drug-user.

Table r shows that the highest frequencies of first consultations are found in province group C and urbanization group 3.

Among the men it is striking that in province group A frequencies are found that differ little from those in province group C.

Repeat consultations

Table s summarizes the repeat consultations.

Table s.

The number of repeat consultations by the drug-user himself, per quarter, province and urbanization group, per 10,000 inhabitants, 1972

	<i>Province group</i>				<i>Urbanization group</i>			<i>Netherlands</i>
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>1</i>	<i>2</i>	<i>3</i>	
<i>Men</i>								
<i>1st quarter</i>	4	—	4	—	—	—	7	2
<i>2nd quarter</i>	1	—	5	—	—	0	8	3
<i>3rd quarter</i>	—	—	3	—	—	—	4	1
<i>4th quarter</i>	2	—	3	1	—	0	6	2

Table s (continued)

	<i>Province group</i>				<i>Urbanization group</i>			<i>Netherlands</i>
	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>1</i>	<i>2</i>	<i>3</i>	
<i>Women</i>								
<i>1st quarter</i>	-	-	2	5	-	2	4	2
<i>2nd quarter</i>	1	-	4	1	-	1	6	2
<i>3rd quarter</i>	-	-	2	-	-	-	4	1
<i>4th quarter</i>	-	-	1	-	-	-	2	1

The distribution of the frequencies with regard to the repeat consultations is the same, though at a higher level, as that of the first consultations.

Age and sex distribution

It will suffice here to give the age and sex distribution of the first consultations by the drug-user himself (Table t).

Table t.

Number of first consultations by the drug-user himself by age group and sex, per 10,000 inhabitants, 1972

<i>Age group</i>							
10 - 14		15 - 19		20 - 24		25 - 34	
M	F	M	F	M	F	M	F
2	2	24	19	14	4	2	2

In the 15 - 19 and 20 - 24 age groups the male patients predominate. The frequency in the 15 - 19 age group occupies first place for both men and women (24 and 19 respectively), followed by the 20 - 24 year-olds, with a frequency of 14 and 4 respectively.

EXTRAPOLATION OF SOME FREQUENCIES FOUND TO THE DUTCH POPULATION

The frequencies found acquire greater relief if they are related to the total population. However, it must be borne in mind that the spotter physicians are a selected group.

Consequently, it cannot be automatically established to what extent the results differ from the actual situation.

The following table gives an approximate impression of the number of patients, consultations etc. in the Netherlands, on the basis of the frequencies calculated from the results of the continuous morbidity registration by sentinel stations with regard to tranquillizers, family planning, morning-after pill, abortus provocatus and sterilization of the man.

Category	Period	Frequency ¹⁾		Total	Netherlands ²⁾		Total
		M	F		M	F	
Prescription of tranquilizers for the first time	2nd - 4th quarter, 1972	421	734	579	27900	488000	768000
First consultations for the "pill"	1970		345			225000	
	1971		374			246000	
	1972		454			302000	
Other consultations for family planning	1970	14	91		9000	59000	
	1971	34	120		22000	79000	
	1972	30	123		20000	82000	
Prescription of the morning-after pill	1972		53			35000	

Category	Period	Frequency ¹⁾		Total	Netherlands ²⁾		Total
		M	F		M	F	
<i>Number of requests for abortion</i>							
	1970		29			19000	
	1971		43			28000	
	1972		41			27000	
<i>Abortus induced lege artis</i>							
	1971		22			14000	
	1972		30			20000	
<i>Sterilization of the man:</i>							
-consultation	1972	47				31000	
-performance	1972	24				16000	

1) Number of patients, consultations etc. per 10,000 men and/or women (sentinel station data)

2) Extrapolation of the frequencies to the Dutch population, in round thousands

GENERAL REMARKS

1. The questions on the weekly return for 1973 have been compiled as follows by the programme committee:

- a. new cases of influenza (-like illnesses)
- b. prescription of tranquillizers
- c. consultations for family planning (first consultations only)
- d. sterilization of the man (performance only)
- e. prescription of morning-after pill
- f. requests for abortion
- g. abortus provocatus (lege artis or (suspicion of) non lege artis)
- h. consultation for drug-use
- i. (suspicion of) battered child syndrome.

At the same time space has been left on the weekly return so that possible new categories can be included in it in the course of 1973. What is primarily envisaged is the collection of information on the prevalence of certain diseases.

2. Suggestions relating to the questions on the weekly returns will be gladly received by the programme committee and evaluated insofar as they relate to their application to this project.

Dr. H. Bijkerk (project leader)

Explanatory notes pertaining to:

Bijlage 1

Bijlage	- Appendix
Deelnemende artsen	- Participating general practitioners
Naam	- Name
Plaats	- Residence
Provincie	- Province

Bijlage 2

Bijlage	- Appendix
Weekstaat t.b.v. centrale registratie	- Weekly return for central registration
Continue morbiditeitsregistratie peilstations 1972	- Continuous morbidity registration sentinel stations 1972
Proj.no.	- Project number
Verslagjaar	- Year under review
Week no.	- Number of the week
Code peilstations	- Code number, sentinel stations
Rapportdagen	- Number of days over which reporting took place
Regel no.	- Line number
Leeftijdsgroep	- Age group
Influenza (-achtig ziektebeeld)	- Influenza (-like illness)
Tranquillizers voorgeschreven	- Prescription of tranquillizers
Adviezen geboorteregeling	- Consultations for family planning
Voor de eerste maal	- First consultation
Ovulatieregger voor geschreven	- Prescription of the "pill"
Overige adviezen	- Other consultations
Sterilisatie van de man	- Sterilization of the man
Eerste consult	- First consultation
Verricht	- Performed
Morning-after-pill voorgeschreven	- Prescription of morning-after pill
Verzoek om abortus	- Requests for abortion

- | | |
|--------------------------------|--|
| (Vermoeden op) niet lege artis | - (Suspicion of) non lege artis |
| Zelfmoordpoging | - Attempted suicide |
| Geslaagd | - Successful |
| Niet geslaagd | - Unsuccessful |
| Consult druggebruik | - Consultation for drug-use |
| Door druggebruiker zelf | - By patient himself |
| Door andere dan patiënt zelf | - By other than the patient |
| Eerste consult | - First consultation |
| Herhalingsconsult | - Repeat consultation |
| M | - Male |
| V | - Female |
| Weeknummer | - Number of the week |
| Aantal dagen gerapporteerd | - Number of days over which reporting took place |
| Opgemaakt dd. | - Completed on |
| (Zie voetnoot 1) | - (See footnote number 1) |
-
1. De kolommen hebben deels betrekking op een 5-daagse rapportering (maandag tot en met vrijdag). Door vakantie, ziekte en andere oorzaken zal deze rapportage zich echter ook over minder dan 5 dagen kunnen uitstrekken. Ten aanzien van de overige vragen wordt het van belang geacht om, zo mogelijk, ook de tijdens het weekeinde waargenomen patiënten te rapporteren
 2. Zowel primaire als herhalingsconsulten. De beslissing over wat als tranquillizer dient te worden beschouwd wordt aan de peilstationarts zelf overgelaten. Tranquillizers zijn bijvoorbeeld librium, nobrium, valium, limbritol, seresta en meprobamaat. Specifieke antidepressiva zoals tofranil en tryptizol en sedativa zoals barbituraten vallen hierbuiten.
 2. Both first and repeat consultations. The decision on what constitutes a tranquillizer is left to the spotter physician himself. Tranquillizers are for instance librium, nobrium, valium, limbritol, seresta and meprobamate. Specific anti-depressives like tofranil and tryptizol and sedatives like barbiturates are not included.

- | | |
|---|--|
| <p>3. Tijdens dit consult behoeft uiteraard de beslissing over de sterilisatie nog niet genomen te zijn</p> | <p>3. During this consultation the decision on sterilization need not of course be taken yet.</p> |
| <p>4. Uitsluitend indien er een directe indicatie is.
Indien een recept voor de morning-after-pill wordt afgegeven omdat betrokkene bijvoorbeeld met vakantie naar het buitenland gaat, dient dit <u>niet</u> te worden gerapporteerd</p> | <p>4. Solely if there is a direct indication.

If a prescription for the morning-after-pill is issued because the patient is for instance going on holiday abroad, this should <u>not</u> be reported.</p> |
| <p>5. Hierbij wordt verstaan het op <i>eigen initiatief</i> gebruiken van een of meer van de volgende psychotrope stoffen: henneproducten, opium of opiumderivaten, LSD, wekaminen en producten waarvan het waarschijnlijk moet worden geacht dat zij dergelijke stoffen bevatten</p> | <p>5. This means the use on <i>one's own initiative</i> of one or more of the following psychotropic substances: hemp products, opium or opium derivatives, LSD, amphetamines and products which probably contain such substances.</p> |

Tables 1 - 3

Continue morbiditeitsregistratie peilstations	- Continuous morbidity registration sentinel stations
Kwartaal	- Quarter
Gestandaardiseerd per 10 000	- Standardized per 10,000 inhabitants
Leeftijdsgroep	- Age group
Influenza (-achtig ziektebeeld	- Influenza (-like illness)
Tranquillizer voorgeschreven	- Prescription of tranquillizer
Adv.geb.reg.	- Consultations for family planning
Ovul.rem..	- Prescription of the "pill"
Overige adviezen	- Other consultations
Sterilisatie van de man	- Sterilization of the man
Cons.	- Consultation
Verr.	- Performed
Morning-after-pill	- Morning-after pill
Verz. tot abortus	- Requests for abortion
Abort.prov.	- Abortus provocatus
Lege artis	- Lege artis
Niet l.a.	- Non lege artis

Zelfmoortpoging	- - Attempted suicide
Geslaagd	- Successful
Niet geslaagd	- Unsuccessful
Consult druggebruik	- Consultation for drug-use
Door druggebruiker zelf	- By patient himself
1e consult	- First consultation
Herh.consult	- Repeat consultation
Door andere dan patiënt zelf	- By other than the patient
Populatie	- Population
M	- Male
V	- Female
Aantal weekstaten	- Number of weekly returns
Waarvan gecorrigeerd	- Of which corrected
Met	- With
Rapporteringsdagen	- Days over which reporting took place
Provinciegroepen	- Province groups
Gr + Fr + Dr	- Groningen, Friesland, Drenthe
Ov + Gld + Z IJ P	- Overijssel, Gelderland, Southern IJsselmeer Polders
Utr + NH + ZH	- Utrecht, North Holland, South Holland
Zld + NB + Lim	- Zeeland, North Brabant, Limburg
Urbanisatiegroepen	- Urbanization groups
A ₁ - A ₄	- Rural municipalities
B ₁ - B ₃ - C ₄	- Municipalities with urban characteristics and urbanized municipalities
C ₅	- Municipalities with a population of 100,000 or more

Table 4

Aantal patiënten met influenza (-achtig ziektebeeld), per week en per 10 000 inwoners, 1972 en 1973 (1e kwartaal)	- Number of patients with influenza (-like illness) per week, incidence per 10,000 inhabitants, 1972 and 1973 (first quarter)
Week nr.	- Number of the week
Aantal patiënten	- Number of patients

Provinciegroep

- Province group. See for explanation A, B, C and D under tables 1 - 3

Urbanisatiegroep

- Urbanization group. See for explanation 1, 2 and 3 under tables 1 - 3

Table 5/6

Aantal gevallen van zelfmoordpoging, al dan niet geslaagd, per province (urbanisatie) groep, kwartaal, per 10 000 inwoners, 1972

- Number of cases of attempted suicide, successful or unsuccessful, per province (urbanization) group and quarterly, per 10,000 inhabitants, 1972

Provinciegroep (Urbanisatiegroep)

- Provincegroup (Urbanization group)

Geslaagd

- Successful

Niet geslaagd

- Unsuccessful

Figure 1

Peilstations continue morbiditeitsregistratie 1972

- Sentinel stations continuous morbidity registration 1972

Figures 2 - 4

Aantal patiënten met influenza (-achtig ziektebeeld) per week en per 10 000 inwoners, 1970 - 1973 (1e kwartaal)

- Number of patients with influenza (-like illness) per week and per 10,000 inhabitants, 1970 - 1973 (first quarter)

Aantal patiënten

- Number of patients

Nederland

- The Netherlands

Provinciegroepen

- Province groups

Urbanisatiegroepen

- Urbanization groups

Figure 5

Aantal patiënten met influenza (-achtig ziektebeeld) naar leeftijdsgroep, per 10 000 inwoners

- Number of patients with influenza (-like illness) by age group, per 10,000 inhabitants

Aantal patiënten

- Number of patients

Kwart.

- Quarter

Jaar

- Year

(vervolg)

- Continued

Figure 6

Aantal patiënten aan wie een tranquillizer werd voorgeschreven, per provincie - en urbanisatiegroep, per 10 000 inwoners

Aantal patiënten
Kwartaal

- Number of patients for whom a tranquillizer was prescribed, per province group and urbanization group, per 10,000 inhabitants
- Number of patients
- Quarter

Figure 7

Aantal patiënten aan wie een tranquillizer werd voorgeschreven naar leeftijdsgroep en geslacht, per 10 000 inwoners, 1972 (2e t/m 4e kwartaal)

Aantal patiënten
Mannen
Vrouwen
Leeftijdsgroep

- Number of patients for whom a tranquillizer was prescribed, by age group and sex, per 10,000 inhabitants, 1972 (2nd - 4th quarter incl.)
- Number of patients
- Men
- Women
- Age group

Figure 8

Aantal primaire consulten inzake ovulatieregger per provincie- en urbanisatie, per 10 000 inwoners

Aantal consulten
Jaar

- Number of consultations with regard to the "pill" per province group and urbanization group, per 10,000 inhabitants
- Number of consultations
- Year

Figure 9

Aantal primaire consulten inzake ovulatieregger naar leeftijdsgroep, per 10 000 inwoners

Aantal consulten

- Number of first consultations with regard to the "pill" by age group, per 10,000 inhabitants
- Number of consultations

Figure 10

Aantal overige primaire consulten inzake geboorteregeling, per provincie- en urbanisatiegroep, per 10 000 mannen c.q. vrouwen

- Number of other first consultations with regard to family planning, per province group and urbanization group, per 10,000 men or women

Aantal consulten	- Number of consultations
Mannen	- Men
Vrouwen	- Women

Figure 11

Aantal overige primaire consulten in- - Number of other first consultations
zake geboorteregeling naar leeftijds- with regard to family planning, by
age group, per 10 000 mannen c.q. age group, per 10,000 men or women
vrouwen

Aantal consulten	- Number of consultations
Mannen	- Men
Vrouwen	- Women
Jaar	- Year

Figure 12

Aantal vrouwen aan wie de morning- - Number of prescription of the mor-
after pill werd voorgeschreven, ning-after pill, by age group, per
per leeftijds-, provincie- en ur- province group and urbanization
banisatiegroep, per 10 000 vrouwen group, per 10,000 women

Aantal vrouwen	Number of prescriptions
Geogr. verdeling	Geographic distribution
Leeftijdsgroep	Age group

Figure 13

Aantal verzoeken om abortus, per - Number of requests for abortion,
leeftijds-, provincie- en urbani- by age group, per province group
satiegroep, per 10 000 vrouwen and urbanization group, per 10,000
women

Aantal verzoeken	- Number of requests
Geogr. verdeling	- Geographic distribution
Leeftijdsgroep	- Age group

Figure 14

Aantal gevallen van abortus provo- - Number of cases of abortus provo-
catus, lege artis, per leeftijds-, catus, lege artis, by age group,
provincie- en urbanisatiegroep, per province group and urbanization
per 10 000 vrouwen group, per 10 000 women

Aantal gevallen	- Number of cases
-----------------	-------------------

Geogr. verdeling

- Geographic distribution

Leeftijdsgroep

- Age group

Figure 15

Aantal primaire consulten inzake sterilisatie en het aantal verrichte sterilisaties bij de man, per leeftijds-, provincie- en urbanisatiegroep, per 10 000 mannen

- Number of first consultations with regard to sterilization and the number of sterilization performed on men, by age group, per province group and urbanization group, per 10,000 men

Aantal gevallen

- Number of cases

Primaire consulten

- First consultations

Verrichte sterilisatie

- Sterilization performed

Geogr. verdeling

- Geographic distribution

Leeftijdsgroep

- Age group

Figure 16

Aantal gevallen van zelfmoord, geslaagd en niet geslaagd, naar leeftijdsgroep en geslacht, per 10 000 mannen c.q. vrouwen

- Number of attempted suicide, successful or unsuccessful, by age group and sex, per 10,000 men or women

Aantal gevallen

- Number of cases

Mannen

- Men

Vrouwen

- Women

Geslaagd

- Successful

Jaar

- Year

Bijlage 1

Continue Morbiditeits Registratie Peilstations 1972

Deelnemende artsen

Naam:	Plaats:	Provincie:
F.H.Mulder	Groningen	Groningen
F.G.H.de Noord (tot 1-11-'72)	't Zandt	Groningen
A.A.E.E.Brockmöller (vanaf 1-11-'72)	't Zandt	Groningen
Chr.Schotanus	Oostermeer	Friesland
J.Vennema	Franeke	Friesland
F.A.Bol	Schoonoord	Drente
W.Frankenberg (tot 13-6-'72)/H.W.Reinking/ R.F.Sprenburg (vanaf 1-7-'72)(comb.prak- tijk)	Assen	Drente
J.Balten (overleden 19-1-'72)	Lelystad	Overijssel
Dr. H.K.Muller	Kampen	Overijssel
Dr. W.Vasbinder (tot 1-8-'72)	Gramsbergen	Overijssel
H.Nap (vanaf 1-8-'72)	Gramsbergen	Overijssel
R.C.Veldhuyzen van Zanten	Enter	Overijssel
J.E.Bekkering	Nijmegen	Gelderland
Th.M.G.van Berkestijn	Velp	Gelderland
J.H.de Boer/J.van Noort (comb.praktijk)	Zelhem	Gelderland
J.P.van Dam	Nijmegen	Gelderland
Dr. H.Mulder	Heerde	Gelderland
G.E.v.d.Burger	Linschoten	Utrecht
H.J.de Bruin	Utrecht	Utrecht
J.Hartog/F.K.A.Fokkema (comb.praktijk)	Amersfoort	Utrecht
J.Busquet	Alkmaar	Noord-Holland
C.den Hartoog	Broek in Water- land	Noord-Holland

Bijlage 1 (vervolg)

A.A.M.E.Janssen	Heilo	Noord-Holland
H.J.v.d.Leen	Hilversum	Noord-Holland
Dr. P.A.Roorda	Haarlem	Noord-Holland
G.J.Schiethart	Amsterdam	Noord-Holland
H.O.Sigling	Amstelveen	Noord-Holland
Mej. P.J.Visser	Amsterdam	Noord-Holland
H.L.van Amerongen	Rotterdam	Zuid-Holland
Dr. B.J.M.Aulbers	Delft	Zuid-Holland
J.Beunk	Maassluis	Zuid-Holland
Dr. A.W.Bots	Voorhout	Zuid-Holland
G.Dorrenboom	Rotterdam	Zuid-Holland
G.van Gangelen	Sliedrecht	Zuid-Holland
J.B.Hugenholtz	Oegstgeest	Zuid-Holland
Dr. A.P.Oliemans	Den Haag	Zuid-Holland
A.G.Stam	Dordrecht	Zuid-Holland
Th.J.van Stockum Jr.	Den Haag	Zuid-Holland
B.J.van Vianen	Den Haag	Zuid-Holland
R.J.P.Bauwens	Terneuzen	Zeeland
M.Reyerse	Middelburg	Zeeland
K.E.W.Ebeling-Koning	Eindhoven	Noord-Brabant
Dr. H.A.M.Hoevenaars	Uden	Noord-Brabant
R.J.F.M.Leijgraaf	Etten	Noord-Brabant
S.H.H.M.v.d.Meer	Rosmalen	Noord-Brabant
Dr. J.P.C.Moors	Rosmalen	Noord-Brabant
J.W.G.A.van Rens	Oirschot	Noord-Brabant
A.Sluyters	Ravenstein	Noord-Brabant
I.J.Velzeboer	Eindhoven	Noord-Brabant
N.G.M.Courtens	Maastricht	Limburg
J.M.M.Hermans	Weert	Limburg

Bijlage 2

Weekstaat t.b.v. centrale registratie

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS 1971

Proj. no.	Verstlag jaar	Week no.	Code peilstations	Rapport dagen
M P	7 1			
1-4	5-6	7-8	9-12	13

Regel no	Leeftijdsgroep	5-daagse rapportering														week rapportering											
		Influenza (f-achtig ziektebeeld)		Rubella (f-achtig ziektebeeld)		Adenotomie en/of tonsillectomie in anamnese		Adenotomie en/of tonsillectomie niet in anamnese		Ongevallen ²			Tonsillectomie c.q. adenotomie		Adviezen gebouwen		Verzoek tot abortus		Legge arts		Abortus provocatus		Zelfmoordpoging				
		M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V
01	<1																										
02	1-4																										
03	5-9																										
04	10-14																										
05	15-19																										
06	20-24																										
07	25-34																										
08	35-44																										
09	45-54																										
10	55-64																										
11	>65																										
3-4		14-16	17-19	20-21	22-23	24-25	26-27	28-29	30-31	32-33	34-35	36-37	38-39	40-41	42-43	44	45	46-47	48-49	50-51	52	53	54	55	56	57	58

Weeknummer:	Opgemaakt d.d.:	Aantal dagen gerspoort: 0	1	2	3	4	5	
		Icht na behandeling: patiënt volledig ambulant en volledig valide.						
		matig na behandeling: patiënt heeft bedrust c.q. "huisarrest" tot maximaal 1 week						
		ernstig na behandeling: patiënt heeft bedrust c.q. "huisarrest" langer dan een week						
		N.B.: Voor de berekening van de druk van de arts op het moment dat het te onderzoeken plaatsvindt, bepalend.						

Tabel 1a

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS																
IE KWARTAAL 1972 GESTANDAARDEERD PER 10000																
LEEFTIJD GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)			TRANQUILLIZER VOORGESCHREVEN			OVUL. REMM. OVERIGE ADVIEZEN			STERILISATIE MOR- VAN DE MAN AFTER			VERZ TOT ABORTUS		ABORT PROV LEGE NIET ARTIS L.A.	
	M	V	T	M	V	T	M	V	T	M	V	M	V	V	V	V
I JR	422	617	516	8	18	13	-	-	-	-	-	-	-	-	-	-
1-4 JR	530	533	531	21	31	26	-	-	-	-	-	-	-	-	-	-
5-9 JR	377	412	394	41	20	31	-	-	-	-	-	-	-	-	-	-
10-14 JR	321	296	309	33	58	45	2	-	2	1	-	-	-	-	-	-
15-19 JR	369	381	375	88	298	193	214	9	16	12	2	-	21	34	24	-
20-24 JR	415	330	370	253	360	310	398	16	68	44	3	1	29	36	16	-
25-34 JR	398	392	395	295	480	388	232	13	66	40	28	9	35	25	22	1
35-44 JR	459	411	435	475	787	631	111	20	40	30	61	12	12	13	7	-
45-54 JR	443	422	433	530	931	733	28	4	8	6	11	12	-	1	3	-
55-64 JR	362	374	369	549	783	671	-	-	-	-	-	-	-	-	-	-
65 JR	332	373	355	357	614	500	-	-	-	-	-	-	-	-	-	-
TOTAAL	403	394	398	272	459	367	108	7	24	16	13	4	11	12	8	0

AANTAL WEEKSTATEN 558 WAARVAN GECORRIGEERD 22 MET 84 RAPPORTERINGSDAGEN

Tabel 1a

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS																				
LEEFTIJD GROEP		IE KWARTAAL 1972 GESTANDAARDISEERD PER 10000																		
		ZELFMOORDEPING				DOOR DRUGGEBRUIKER ZELVE				DOOR ANDERE DAN PATIENT ZELVE										
		M		V		T		M		V		T		M		V		T		
		GESLAAGD		NIET GESLAAGD		IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		IE CONSULT		
		M		V		T		M		V		T		M		V		T		
1 JR		-	-	-	-	-	-	-	-	-	-	-	-	-	-	1232	1134	2366		
1-4 JR		-	-	-	-	-	-	-	-	-	-	-	-	-	-	5741	5455	11197		
5-9 JR		-	-	-	-	-	-	-	-	-	-	-	-	-	-	7154	6839	13994		
10-14 JR		-	-	-	2	1	-	-	-	-	-	-	-	-	-	6411	6158	12570		
15-19 JR		-	-	-	5	3	7	9	8	7	7	2	2	2	-	5826	5806	11633		
20-24 JR		-	-	-	6	4	5	4	3	3	9	9	1	1	4	1	6718	7698	14417	
25-34 JR		-	-	-	3	9	6	2	2	2	3	5	4	1	-	0	11443	11524	22967	
35-44 JR		-	1	1	4	7	6	-	-	-	-	-	-	-	-	8913	8890	17804		
45-54 JR		-	3	1	1	4	3	-	-	-	1	1	1	4	3	-	7352	7554	14907	
55-64 JR		-	2	1	3	2	2	-	-	-	-	-	-	-	-	-	5906	6440	12347	
65 JR		-	-	-	2	1	1	-	-	-	-	-	-	-	-	-	6324	7910	14234	
TOTAAL		-	1	0	2	4	3	1	1	1	2	2	2	1	1	0	73026	75414	148440	

Tabel 2a

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS

PROVINCIE GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)		TRANQUILLIZER VOORGESCHREVEN		OVUL. REMM.		OVERIGE ADVIEZEN		CONS. VERR.		STERILISATIE VAN DE MAN AFTER PIL		VERZ TOT ABORTUS		ABORT PROV LEGE NIET ARTIS LA.	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V
	IE KWARTAAL 1972		GESTANDAARDISEERD PER 10000		ADV.-GEB.-REG.		IE MAAL		MOR- NING		MOR- NING		MOR- NING		MOR- NING	
GR+FR+DR	549	580	564	334	566	452	38	2	7	5	8	4	7	7	7	-
OV+GLD+ZYP	421	403	412	239	392	316	74	2	21	12	9	5	10	6	1	-
UTR+NH+ZH	272	290	281	241	447	347	126	5	23	14	12	4	11	16	12	0
ZLD+NB+LIM	549	489	519	320	480	401	135	17	35	26	20	5	14	12	6	-
TOTAAL	403	394	398	272	459	367	108	7	24	16	13	4	11	12	8	0

AANTAL WEEKSTATEN 558 WAARVAN GECORRIGEERD 22 MET 84 RAPPORTERINGS-DAGEN

Tabel 2a

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS

PROVINCIE GROEP	ZELFMOORDPOGING				DOOR DRUGGEBRUIKER ZELVE												DOOR ANDERE DAN PATIENT ZELVE												POPULATIE																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
	GESLAAGD		NIET GESLAAGD		IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		M		V		M		V		M		V																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V	M	V																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
	IE KWARTAAL 1972		GESTANDAARDISEERD PER 10000		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K		CON S U L T O R U G G E B R U I K																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
GR+FR+DR	-	-	-	-	2	-	1	4	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Tabel 3a

CONTINUE MORBIDITEITSREGISTRATIE PIELSTATIONS

ORGANISATIE GROEP	IE KWARTAAL 1972										GESTANDAARDISEERD PER 10000					
	INFLUENZA (-ACHTIG ZIEKTEREELD)			TRANQUILLIZER VOORGESCHREVEN			ADV.GEB.REG. IE MAAL OVUL. REMM. OVERIGE ADVIEZEN			STERILISATIE MOR- NING VAN DE MAN			ABORT PROV LEGE NIET ARTIS L.A.			
	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	
AI-A4	495	471	483	245	468	355	77	4	19	12	4	3	7	1	3	-
BI-B3CI-C4	359	370	365	274	437	357	111	5	21	13	14	4	9	10	6	0
C5	415	367	401	286	492	392	124	13	31	22	18	6	18	22	14	-
TOTAAL	403	394	398	272	459	367	108	7	24	16	13	4	11	12	8	0

AANTAL WEEKSTATEN 558 WAARVAN GECORRIGEERD 22 MET 84 RAPPORTERINGS-DAGEN

Tabel 3a

CONTINUE MORBIDITEITSREGISTRATIE PIELSTATIONS

ORGANISATIE GROEP	IE KWARTAAL 1972										GESTANDAARDISEERD PER 10000									
	ZELFMOORDOEGING					DOOR DRUGGEBRUIKER ZELVE					DOOR ANDERE DAN PATIENT ZELVE					POPULATIE				
	GESLAAGD			NIEET GESLAAGD		IE CONSULT			HERH. CONSULT		IE CONSULT			HERH. CONSULT						
	M	V	T	P	V	T	M	V	T	M	V	T	M	V	T					
AI-A4	-	-	2	1	1	-	-	-	-	-	-	-	-	-	-	14508	14091	28600		
BI-B3CI-C4	-	0	0	1	2	2	0	1	0	-	2	1	0	-	-	36923	38182	75105		
CS	-	1	1	4	8	6	4	3	3	7	4	6	2	2	2	0	1	21594	23140	44734
TOTAAL	-	1	0	2	4	3	1	1	1	2	2	2	1	1	1	0	0	73026	75414	148440

Tabel 1b

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																
2E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																
LEEFTIJD GROEP	INFLUENZA (ACHTER ZIEKTEBEELD)				TRANQUILLIZER VOORGESCHREVEN				OVUL. REHM. OVERIGE ADVIEZEN				STERILISATIE VAN DE MAN			
	M		T		M		T		M		V		T		M	
	V		V		V		V		V		V		V		V	
1 JR	88	95	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1- 4 JR	83	96	90	13	14	14	-	-	-	-	-	-	-	-	-	-
5- 9 JR	44	35	46	14	5	9	-	-	-	-	-	-	-	-	-	-
10-14 JR	57	30	43	18	23	20	2	-	-	-	-	-	-	-	-	-
15-19 JR	55	59	57	57	172	114	257	13	46	29	2	-	52	26	15	2
20-24 JR	65	55	66	178	217	199	388	24	71	49	3	2	38	13	20	-
25-34 JR	54	56	57	228	363	295	272	7	63	35	22	14	29	22	20	-
35-44 JR	52	57	70	365	607	486	117	17	48	32	36	31	11	19	7	-
45-54 JR	60	56	58	361	613	488	26	1	9	5	6	4	1	1	-	-
55-64 JR	42	56	49	399	608	503	-	-	-	-	2	-	-	-	-	-
65 JR	42	43	42	201	473	353	-	-	-	-	-	-	-	-	-	-
TOTAAL	60	54	57	190	348	260	117	7	27	17	9	7	14	9	7	0

AANTAL WEEKSTATEN 516 WAARVAN GECORRIGEERD 145 MET 568 RAPPORTERINGSDAGEN

Tabel 1b

CONTINUE MORBIJTEITSREGISTRATIE PEILSTATIONS																		
		2E KWARTAAL 1972 GESTANDARDEEERD PER 10000																
LEEFTIJD GROEP	M	ZELFMOEDOPGANG			DOOR DRUGGE BRUIKER ZELVE			CONSULT			DOOR ANDERE DAN PATIENT ZELVE			POPULATIE				
		GESLAAGD V T	NIET GESLAAGD M V T	IE CONSULT M V T	HERN. CONSULT M V T	IE CONSULT M V T	HERN. CONSULT M V T	HERN. CONSULT M V T	HERN. CONSULT M V T	M	V	T						
1 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	1135	1055	2191		
1-4 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	5272	5002	10274		
5-9 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	6619	6283	12902		
10-14 JR	-	-	-	-	2	2	2	1	-	-	-	-	-	5984	5752	11736		
15-19 JR	-	-	-	6	3	13	6	9	4	17	10	2	-	5466	5405	10872		
20-24 JR	-	-	5	3	4	2	-	1	23	6	14	-	3	5	6194	7041	13236	
25-34 JR	-	1	0	1	3	2	-	-	-	-	-	-	-	10349	10371	20721		
35-44 JR	1	-	1	-	7	4	-	-	1	-	1	-	-	8165	8209	16374		
45-54 JR	-	-	-	3	1	-	-	-	-	-	-	1	4	3	6847	7014	13862	
55-64 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	5447	5935	11382		
65 JR	?	-	1	2	-	-	-	-	-	-	-	-	-	5770	7250	13021		
TOTAAL	0	0	0	1	2	2	1	1	1	3	2	2	0	1	0	67252	69322	136575

Tabel 2b

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																			
PROVINCIE GROEP		2E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																	
		INFLUENZA (-ACHTIG ZIEKTEBEELD)			TRANQUILLIZER VOORGESCHREVEN			ADV.-GEB.-REG. OVUL. REHM.			IE MAAL STERILISATIE VAN DE MAN			MOR- NING AFTER ABORT- PIL TUS V			VERZ TOT ABORT- LEGE ARTIS V		
		M	V	T	M	V	T	M	V	T	M	V	T	M	V	H	M	V	V
GP+FR+DR		44	30	37	200	359	281	56	3	5	4	4	3	6	6	5	1		
OV+GLD+ZYP		83	73	78	166	296	231	109	3	19	11	3	9	16	9	6			-
UTR+NH+ZH		38	35	36	167	317	243	125	5	21	13	9	5	11	10	9			-
ZLD+NB+LIM		93	91	92	250	361	306	136	14	55	35	15	9	22	9	6			-
TOTAAL		60	54	57	190	328	260	117	7	27	17	9	7	14	9	7			0

AANTAL WEEKSTATEN 516 WAARVAN GECORRIGEERD 145 MET 568 RAPPORTERINGS-DAGEN

Tabel 2b

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																				
PROVINCIE GROEP		2E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																		
		ZELFMOOROPGING			DOOR DRUGGEBRUIKER ZELVE			CONSUULT DOOR ANDERE			PATIENT ZELVE			POPULATIE						
		M	V	T	N I E T G E S L A A G D	M	V	T	I E C O N S U L T	H E R H . C O N S U L T	M	V	T	M	V	T				
GR+FR+DR	-	-	-	-	1	-	-	1	1	1	1	-	-	-	-	7664	8044	13708		
OV+GLD+ZYP	1	-	0	-	4	2	1	-	0	-	-	1	1	1	-	11950	11975	23926		
UTR+NH+ZH	0	-	0	1	3	2	2	1	1	5	4	4	0	1	0	2	1	31701	33106	64808
ZLD+NB+LIM	-	1	0	1	1	1	1	1	1	-	1	0	-	1	1	-	15936	16195	32132	
TOTAAL	0	0	0	1	2	2	1	1	1	1	3	2	2	0	1	1	67252	69322	136575	

Tabel 3b

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																
2E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																
URBANISATIE GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)			TRANQUILLIZER VOORGESCHREVEN			OVUL. REMM.	OVERIGE ADVIEZEN			CONS. VERR. M	STERILISATIE VAN DE MAN	MOR- NING AFTER	VERZ TOT	ABORT LEGE	PROV. NIET L.A.
	M	V	T	M	V	T		M	V	T						
A1-A4	80	109	94	206	303	254	100	2	14	8	4	2	9	6	2	-
B1-B3C1-C4	43	31	37	183	331	258	118	5	30	17	9	7	3	7	4	0
C5	77	63	70	191	340	268	125	13	29	21	12	8	25	15	15	-
TOTAAL	60	54	57	190	348	280	117	7	27	17	9	7	14	9	7	0
AANTAL WEEKSTATEN 516 WAARVAN GECORRIGEERD 145 MET 568 RAPPORTERINGSDAGEN																

AANTAL WEEKSTATEN 516 WAARVAN GECORRIGEERD 145 MET 568 RAPPORTERINGSDAGEN

Tabel 3b

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																				
2E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																				
URBANISATIE GROEP	ZELFMOORDPOEGING			DOOR DRUGGEBRUIKER ZELVE			DOOR ANDERE DAN PATIENT ZELVE			POPULATIE										
	M	GESLAAGD V T	NIET GESLAAGD P V T	IE CONSULT			HERH. CONSULT			HERH. CONSULT										
				M	V	T	M	V	T	M	V	T								
A1-A4	-	-	4	2	1	2	-	1	-	1	1	1	-	-	12742	12450	25193			
B1-B3C1-C4	1	-	0	1	1	1	0	1	0	1	0	0	-	-	35264	36461	71725			
C5	-	0	0	-	6	3	1	1	1	8	4	7	1	1	3	-	19246	20410	39656	
TOTAAL	0	0	0	1	2	2	1	1	1	3	2	2	0	1	1	-	0	67252	69322	136575

AANTAL WEEKSTATEN 516 WAARVAN GECORRIGEERD 145 MET 568 RAPPORTERINGSDAGEN

Tabel 1c

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS
3E KWARTAAL 1972 GESTANDAARDISEERD PER 10000

LEEFTIJD GROEP	ZELFMOORDOPING						CONSULT. DOOR DRUGGEBRUIKER ZELVE DOOR ANDERE DAN PATIENT ZELVE												POPULATIE		
	GESLAAGD			NIET GESLAAGD			IE CONSULT			HERH. CONSULT			IE CONSULT			HERH. CONSULT					
	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T
1 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1037	989	2026
1-4 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5010	4707	9718
5-9 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6222	5864	12086
10-14 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5518	5331	10849
15-19 JR	-	-	-	2	2	2	2	4	3	-	4	2	2	-	1	-	-	-	5033	4967	10001
20-24 JR	-	-	-	-	-	-	-	-	1	11	5	7	-	-	-	-	-	-	5635	6534	12169
25-34 JR	-	-	-	-	-	4	2	-	-	-	1	1	1	-	-	-	-	-	9791	9922	19713
35-44 JR	-	-	-	-	-	1	1	-	-	-	1	1	1	-	1	-	-	-	7557	7612	15170
45-54 JR	-	-	-	-	-	2	1	-	-	-	-	-	-	-	-	-	-	-	6241	6369	12610
55-64 JR	-	-	-	-	-	2	1	-	-	-	-	-	-	-	-	-	-	-	4945	5376	10322
65 JR	-	-	-	-	-	2	1	-	-	-	-	-	-	-	-	-	-	-	5279	6635	11914
TOTAAL	-	-	-	0	1	1	1	0	0	1	1	1	1	0	-	-	-	-	62272	64310	126583

Tabel 1c

CONTINUE MORBIDITEITSREGISTRATIE PILSTATIONS																
3E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																
LEEFTIJD- GROEP	INFLUENZA (-ACHTIG ZIEKTEGEELD)		TRANQUILLIZER VOORGESCHREVEN		OVUL- REMM. OVERIGE ADVIEZEN		STERILISATIE VAN DE MAN		MOR- NING AFTER		VERZ ABORT TOT LEGE		PROV. NIET L.A.			
	M	V	M	T	M	V	T	M	M	V	M	V	M	V	M	V
1 JR	96	71	84	-	-	-	-	-	-	-	-	-	-	-	-	-
1-4 JR	142	125	134	4	23	13	-	-	-	-	-	-	-	-	-	-
5-9 JR	71	60	65	14	7	11	-	-	-	-	-	-	-	-	-	-
10-14 JR	49	64	56	7	19	13	2	1	-	-	-	-	-	-	-	-
15-19 JR	40	70	55	34	99	66	270	12	46	29	-	-	32	40	18	-
20-24 JR	73	64	68	103	207	159	375	16	67	44	2	-	44	21	18	-
25-34 JR	66	63	75	153	294	224	288	20	104	62	25	10	24	24	18	2
35-44 JR	70	56	63	251	376	314	117	19	92	55	56	19	28	29	20	1
45-54 JR	77	53	65	224	399	312	24	3	14	9	10	8	5	5	3	-
55-64 JR	28	43	36	229	353	294	-	-	-	-	2	-	-	-	-	-
65 JR	28	30	29	140	255	204	-	-	-	-	-	-	-	-	-	-
TOTAAL	69	61	65	122	218	170	120	8	39	24	12	5	14	13	9	0

AANTAL WEEKSTATEN 471 WAARVAN GECORRIGEERD 12 MET 44 RAPPORTERINGS-DAGEN

Tabel 2c

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS														
3E KWARTAAL 1972 GESTANDAARDISEERD PER 10000														
PROVINCIE GROEP	INFLUENZA (-ACHTTIG ZIENTESEELD)		TRANQUILLIZER VOORGESCHREVEN		ADV.-GEB.-REG. OVUL.		IE MAAL REHM. OVERIGE ADVIEZEN		STERILISATIE VAN DE MAN		MOR- NING AFTER ABOR-		VERZ. ABORT. PROV. TOT LEGE NILT	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
GR+FR+DR	28	20	24	124	204	165	101	-	2	1	5	3	8	3
OV+GLD+ZYP	92	68	80	104	163	133	133	4	43	23	4	1	6	12
UTR+NH+ZH	40	42	41	99	206	154	119	6	33	20	10	5	19	13
ZLD+NB+LIM	114	105	109	169	278	224	119	18	59	39	22	8	15	17
TOTAAL	69	61	65	122	218	170	120	8	39	24	12	5	14	13

AANTAL REEKSTATEN 471 AARVAN GECORRIGEERD 12 MET 44 RAPPORTERINGS-DAGEN

Tabel 2c

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS														
3E KWARTAAL 1972 GESTANDAARDISEERD PER 10000														
PROVINCIE GROEP	ZELFCONSPICUING		DOOR DRUGGESRUIKER ZELVE		CONSULT. D R U G G E R U I K		DOOR ANDERE DAN PATIENT ZELVE		HERH. CONSULT		HERH. CONSULT		POPULATIE	
	M	V	M	V	M	V	M	V	M	V	M	V	M	V
GR+FR+DR	-	-	-	-	-	-	-	-	-	-	-	-	6054	6357
OV+GLD+ZYP	-	-	1	4	2	-	-	-	1	0	-	-	11294	11472
UTR+NH+ZH	-	-	-	1	0	1	1	3	2	0	0	-	27834	29374
ZLD+NB+LIM	-	-	-	2	1	-	-	-	-	-	-	-	17089	17305
TOTAAL	-	-	0	1	1	0	0	1	1	0	0	-	62272	64110

Tabel 3c

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS																		
3E KWARTAAL 1972 GESTAANDARDEERD PER 10000																		
URBANISATIE GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)			TRANQUILLIZER VOORGESCHREVEN			ADV.-GEB.-REG. IE MAAL			STERILISATIE MOR- NING AFTER DE MAN			VERZ ABORT PROV. TOT ABOR- LEGE TUS ARIS L.V V V					
	M	V	T	M	V	T	OVUL. REMM. OVERIGE ADVIEZEN			CONS. VERR.			MOR- NING AFTER DE MAN			VERZ ABORT PROV.		
							V	V	M	T	M	M	V	V	M	M	V	V
AI-A4	108	85	97	126	209	167	106	3	24	14	3	1	14	9	6	-		
BI-B3CI-C4	49	48	48	118	198	158	118	9	42	26	13	6	11	8	6	1		
C5	80	72	76	126	264	198	133	9	42	26	16	6	21	25	16	-		
TOTAAL	69	61	65	122	218	170	120	8	39	24	12	5	14	13	9	0		
AANTAL WEEKSTATEN 471 WAARVAN GECORRIGEERD 12 MET 44 RAPPORTERINGSDAGEN																		

AANTAL WEEKSTATEN 471 WAARVAN GECORRIGEERD 12 MET 44 RAPPORTERINGS-DAGEN

Tabel 3c

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS																			
3E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																			
ORGANISATIE GROEP	ZELFMOORDOEGING			DOOR DRUGGEBRUIKER ZELVE			DOOR ANDERE DAN PATIENT ZELVE			POPULATIE			POPULATIE						
	M	GESLAGD		M	IE CONSULT		M	HERH. CONSULT		M	IE CONSULT		M	HERH. CONSULT		M	T		
		V	T		V	T		V	T		V	T		V	T		V	T	
AI-A4	-	-	1	-	U	-	-	-	-	-	-	-	-	12258	11937	24196	-	-	
BI-B3CI-C4	-	-	-	1	1	-	-	-	-	0	-	-	-	34004	35120	59125	-	-	
C5	-	-	-	2	1	1	1	4	4	4	1	-	0	-	16010	17252	33262	-	-
TOTAAL	-	-	0	1	1	0	0	1	1	1	0	-	0	-	62272	64310	126583	-	-

Tabel 1d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS

LEEFTIJD GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)		TRANQUILLIZER VOORGESCHREVEN		4E KWARTAAL 1972		1972		GESTANDAARDISEERD PER 10000		STERILISATIE VAN DE MAN		MOR- NING AFTER		VERZ TOT ABOR-		PROV. NIET L.A.	
	M		V		T		OVUL- REHM.		OVERIGE ADVIEZEN		CONS. VERR.		PIL V		TUS V		LEGE ARTIS	
	V		M		T		V		V		M		M		V		V	
	T		M		T		V		V		M		M		V		V	
1 JR	333	258	297	-	9	4	-	-	-	-	-	-	-	-	-	-	-	-
1-4 JR	347	360	354	15	18	17	-	-	-	-	-	-	-	-	-	-	-	-
5-9 JR	204	189	197	15	6	11	-	-	-	-	-	-	-	-	-	-	-	-
10-14 JR	174	168	171	17	26	21	-	-	2	1	-	-	-	2	2	2	2	2
15-19 JR	282	298	290	46	123	84	258	9	22	15	-	-	-	43	22	12	-	-
20-24 JR	332	251	288	112	187	152	373	14	103	62	-	-	-	39	14	14	1	1
25-34 JR	287	273	280	136	253	195	220	16	82	49	20	9	30	16	10	10	2	2
35-44 JR	329	255	292	219	329	274	114	25	56	41	63	43	16	11	15	-	-	-
45-54 JR	275	275	275	203	331	268	31	1	9	5	16	11	1	3	5	-	-	-
55-64 JR	196	241	219	171	298	237	3	2	-	1	2	-	-	-	-	-	-	-
65 JR	190	205	198	103	194	154	-	-	-	-	-	-	-	-	-	-	-	-
TOTAAL	266	251	259	109	188	149	109	8	33	20	13	4	14	7	6	6	3	3

AANTAL WEEKSTATEN 549 WAARVAN GECORRIGEERD 61 MET 203 RAPPORTERINGS-DAGEN

Tabel 1d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIONS
4E KWARTAAL 1972 GESTANDAARDISEERD PER 10000

LEEFTIJD GROEP	ZELFWOORPOSGING						CONSUULTUR DOOR DRUGGEBRUIKER ZELVE DOOR ANDERE DAN PATIENT ZELVE												POPULATIE		
	GESLAAGD			NIET GESLAAGD			IE CONSULT		HERH. CONSULT		IE CONSULT		HERH. CONSULT		HERH. CONSULT		M	V	T		
	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M				V	T
1 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1231	1161	2392		
1- 4 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5813	5471	11285		
5- 9 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7216	6813	14037		
10-14 JR	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6437	6191	12628		
15-19 JR	-	2	1	2	2	2	2	2	2	2	2	2	2	2	2	2	5656	5779	11637		
20-24 JR	-	-	2	-	1	6	1	4	18	3	10	3	1	2	6	3	6602	7658	14261		
25-34 JR	-	-	1	3	2	-	-	-	-	-	-	-	-	-	-	-	11390	11520	22911		
35-44 JR	-	-	2	3	3	-	-	-	-	2	1	-	-	-	-	1	8828	8267	17696		
45-54 JR	-	-	-	-	3	1	-	-	-	-	-	-	-	-	-	-	7296	7463	14759		
55-64 JR	-	2	1	-	3	2	-	-	-	-	-	-	-	-	-	-	5775	6272	12047		
65 JR	3	1	2	-	3	1	-	-	-	-	-	-	-	-	-	-	6110	7693	13804		
TOTAAL	C	U	0	1	2	1	1	0	0	2	1	1	0	0	0	1	72565	74837	147463		

Tabel 2d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS

PROVINCIE GROEP	4E KWARTAAL 1972										GESTANDAARDEERD PER 10000									
	INFLUENZA (-ACHTIG ZIEKTEREELD)					TRANQUILLIZER VOORGESCHREVEN					OVUL. REMM. OVERIGE ADVIEZEN					STERILISATIE MOR- NING VAN DE MAN				
	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V
GP+FR+DR	101	88	94	125	172	149	88	2	4	3	3	5	13	4	4	4	4	4	4	4
OV+GLD+ZYP	262	217	239	110	166	138	95	6	40	23	6	4	10	4	6	4	6	6	6	6
UTR+NH+ZH	222	242	232	84	155	121	119	6	27	17	11	8	14	9	7	14	9	7	14	9
ZLD+NB+LIM	408	351	379	147	273	211	107	15	48	32	24	11	17	7	6	17	7	6	17	7
TOTAAL	266	251	259	109	188	149	109	8	33	20	13	8	14	7	6	14	7	6	14	7

AANTAL WEEKSTATEN 549 WAARVAN GECORRIGEERD 61 MET 203 RAPPORTERINGSDAGEN

Tabel 2d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS

PROVINCIE GROEP	4E KWARTAAL 1972										GESTANDAARDEERD PER 10000									
	ZELFMOOROPPOEGING					DOOR DRUGGEGRUIKER ZELVE					CONSULT D R U G G E B R U I K					DOOR ANDERE DAN PATIENT ZELVE				
	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V	T	M	V
GP+FR+DR	-	1	1	-	-	2	-	1	2	-	1	2	-	1	-	-	-	6456	6815	13271
OV+GLD+ZYP	1	-	0	1	3	2	-	-	-	-	-	-	-	-	-	-	-	13508	13532	27040
UTR+NH+ZH	0	-	0	1	2	1	1	0	1	3	1	2	1	-	0	1	0	1	33952	35645
ZLD+NB+LIM	-	1	1	1	2	1	-	-	1	-	0	-	1	0	-	-	-	18649	18904	37553
TOTAAL	0	0	0	1	2	1	1	0	0	2	1	1	0	0	1	0	0	72565	74397	147462

Tabel 3d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																	
4E KWARTAAL 1972 GESTANDAARDEEERD PER 10000																	
URBANISATIE GROEP	INFLUENZA (-ACHTIG ZIEKTEBEELD)			TRANQUILLIZER VOORGESCHREVEN			ADV.GEB.-REG. 1E MAAL			STERILISATIE VAN DE MAN			MOR- NING AFTER			VERZ AGORT PROV. TOT ASOR- LECE NIET TUS ARTIS L.A. V V V	
	M	V	T	M	V	T	M	V	T	M	V	M	V	M	V		
A1-A4	259	250	255	119	168	143	107	2	27	15	11	3	15	4	5	-	
B1-B3C1-C4	239	227	233	99	183	142	101	7	32	20	14	8	12	5	4	0	
C5	323	295	308	121	209	167	124	12	37	25	11	10	17	14	12	1	
TOTAAL	266	251	259	109	188	149	109	8	33	20	13	9	14	7	6	3	
AANTAL WEEKSTATEN 549 WAARVAN GECORRIGEERD 61 MET 203 RAPPORTERINGSDAGEN																	

AANTAL WEEKSTATEN 549 WAARVAN GECONTRIGEERD 61 MET 203 RAPPORTERINGSDAGEN

Tabel 3d

CONTINUE MORBIDITEITSREGISTRATIE PEILSTATIENS																		
URBANISATIE GROEP		4E KWARTAAL 1972 GESTANDAARDISEERD PER 10000																
		ZELFMOOROPPOEGING			DOOR DRUGGEBRUIKER ZELVE			DOOR ANDERE DAN PATIENT ZELVE			HERM. CONSULT			POPULATIE				
		M	V	T	M	V	T	M	V	T	M	V	T	M	V	T		
A1-A4	-	1	0	-	-	-	-	-	-	-	-	-	-	13147	12019	25966		
B1-B3C1-C4	-	0	0	1	1	1	0	-	0	0	-	0	-	-	39097	40348	79445	
C5	1	-	0	1	4	3	2	0	1	6	2	4	1	0	1	20321	21728	42050
TOTAAL	0	0	0	1	2	1	1	0	0	2	1	1	0	0	0	72565	74897	147462

Tabel 4

Aantal patiënten met influenza (-achtig ziektebeeld), per week en per 10.000 inwoners, 1972 en 1973 (1e kwartaal)

Week nr. 1972	Aantal patiënten				Urbanisatiegroep			Totaal
	Provinciegroep				1	2	3	
	A	B	C	D				
1	38	85	47	108	53	84	71	84
2	61	62	46	73	65	52	61	58
3	93	69	40	65	64	56	56	57
4	74	60	36	47	55	42	49	47
5	92	46	27	49	60	40	40	44
6	74	37	21	31	42	33	28	33
7	23	18	12	39	37	18	17	22
8	13	15	10	37	27	18	14	19
9	13	11	9	15	15	9	13	11
10	9	14	6	21	21	9	11	12
11	6	5	5	9	4	6	8	6
12	2	6	2	7	1	4	7	4
13	5	4	5	6	2	5	7	5
14	5	5	3	4	2	3	6	4
15	4	4	4	3	4	2	6	3
16	4	6	3	4	5	3	5	4
17	2	6	1	7	6	3	5	4
18	1	5	2	5	4	2	4	3
19	2	3	3	5	3	4	3	3
20	2	7	3	7	11	3	5	5
21	2	7	3	6	7	3	6	5
22	3	7	2	5	6	2	5	4
23	6	10	4	11	10	4	10	7
24	1	4	2	17	14	3	5	6
25	3	9	4	10	14	3	6	6
26	2	5	3	11	9	3	5	5
27	2	4	3	7	7	2	5	4
28	-	5	1	8	6	2	5	4
29	-	2	1	7	6	2	3	3
30	4	5	2	2	3	2	4	3
31	-	0	2	7	3	4	4	4
32	2	8	4	6	10	3	5	5
33	1	5	5	11	6	4	10	6
34	-	15	4	8	14	4	6	6
35	2	4	3	6	7	2	5	4
36	3	5	4	8	10	3	6	5
37	5	5	3	12	7	7	5	6
38	2	6	4	12	7	5	8	6
39	2	9	3	10	8	5	7	6
40	-	10	6	15	8	8	8	8
41	2	6	7	18	10	8	11	9
42	3	6	6	17	10	7	12	9
43	2	5	5	12	6	6	7	6
44	-	6	5	14	8	6	9	7
45	9	9	6	14	11	8	8	9
46	6	8	14	9		11	7	9
47	3	16	10	20	18	9	17	13*
48	1	8	12	19	17	9	14	12
49	6	19	24	21	18	17	30	21
50	5	26	37	36	23	25	47	31
51	7	31	46	48	35	37	45	39
52	47	91	67	117	88	48	93	84

Week nr. 1973	Provinciegroep				Urbanisatiegroep			
	A	B	C	D	1	2	3	
1	131	115	81	167	121	108	124	115
2	95	60	51	85	83	55	77	66
3	33	40	30	66	52	32	47	41
4	31	27	20	41	31	23	33	27
5	16	19	12	35	21	13	27	19
6	6	19	9	24	10	12	18	14
7	5	14	8	19	9	7	18	11
8	9	11	5	16	9	7	12	9
9	5	10	4	19	13	5	13	9
10	4	8	4	19	15	7	9	9
11	3	8	4	27	13	6	15	10
12	1	9	4	28	16	4	18	11
13	19	9	4	21	17	4	15	10

Provinciegroep

- A. Groningen, Friesland, Drenthe
 B. Overijssel, Gelderland, Zuidelijke IJssel-meerpolders
 . Utrecht, Noord-Holland, Zuid-Holland
 . Zeeland, Noord-Brabant, Limburg

Urbanisatiegroep

1. Plattelandsgemeenten
 2. Gemeenten met stedelijk karakter tezamen met verstedelijkte plattelandsgemeenten
 3. Gemeenten met 100.000 of meer inwoners

Tabel 5

Aantal gevallen van zelfmoordpoging, al dan niet geslaagd, per provinciegroep en kwartaal, per 10 000 inwoners, 1972

Provinciegroep	1e kwartaal		2e kwartaal	
	Geslaagd	Niet geslaagd	Geslaagd	Niet geslaagd
<i>A</i>	—	—	—	1
<i>B</i>	0	2	0	2
<i>C</i>	0	4	0	2
<i>D</i>	1	3	0	1
<i>Nederland</i>	0	3	0	2

	3e kwartaal		4e kwartaal	
	Geslaagd	Niet geslaagd	Geslaagd	Niet geslaagd
<i>A</i>	—	—	1	—
<i>B</i>	—	2	0	2
<i>C</i>	—	0	0	1
<i>D</i>	—	1	1	1
<i>Nederland</i>	—	1	0	1

Tabel 6

Aantal gevallen van zelfmoordpoging, al dan niet geslaagd, per urbanisatiegroep en kwartaal, per 10 000 inwoners, 1972

Urbanisatie- groep	1e kwartaal		2e kwartaal	
	Geslaagd	Niet geslaagd	Geslaagd	Niet geslaagd
1	-	1	-	1
2	0	2	0	1
3	1	6	0	3
Nederland	0	3	0	2

	3e kwartaal		4e kwartaal	
	Geslaagd	Niet geslaagd	Geslaagd	Niet geslaagd
1	-	0	0	-
2	-	1	0	1
3	-	1	0	3
Nederland	-	1	0	1

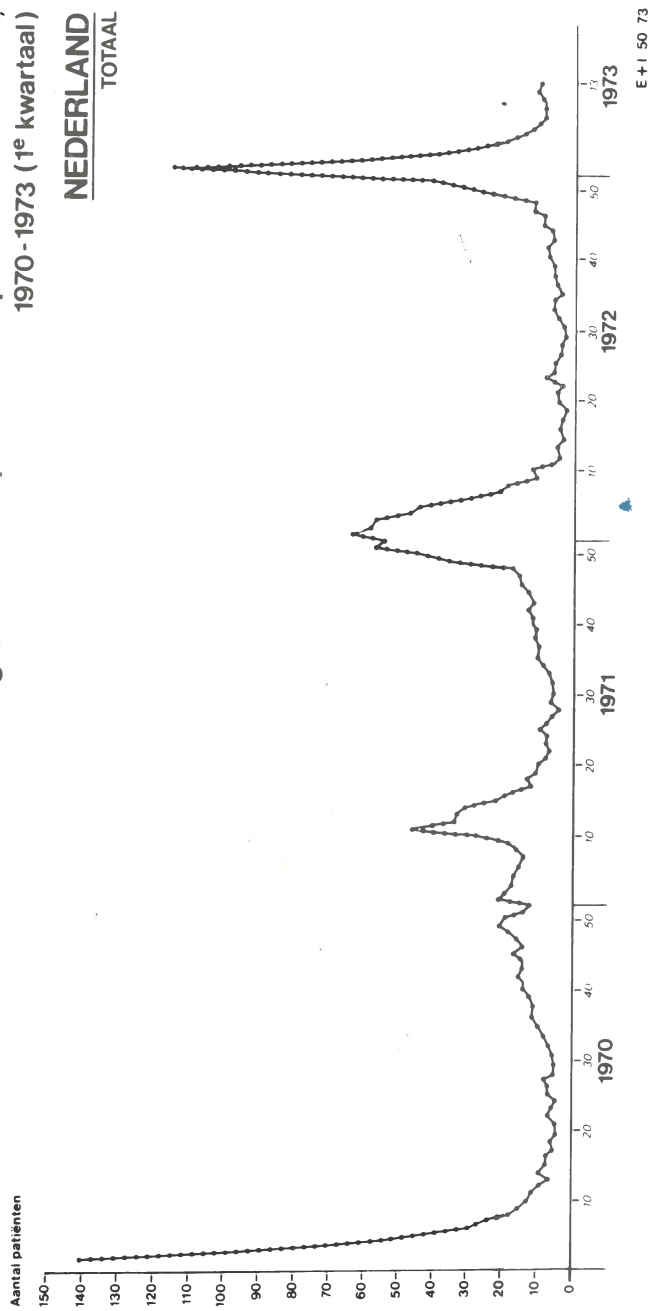
figuur 1.

**PEILSTATIONS
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1972**



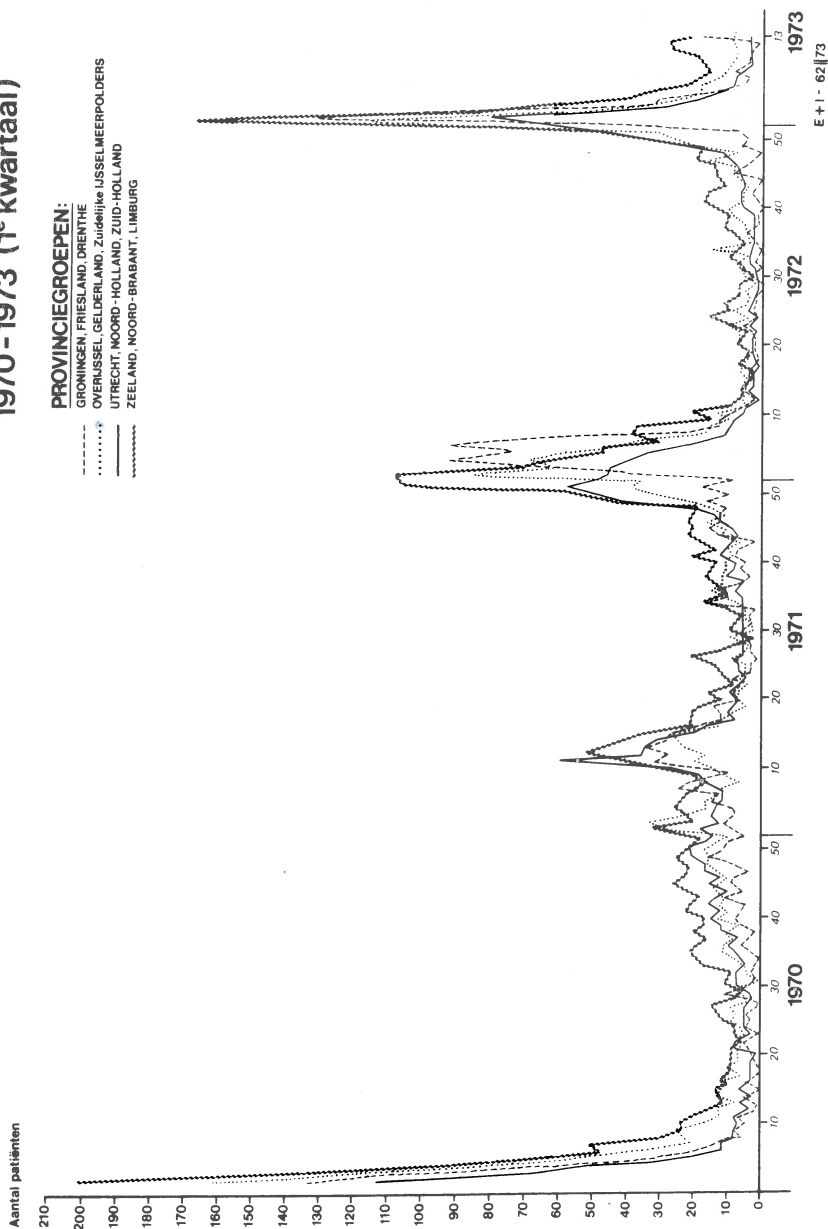
figuur 2

AANTAL PATIËNTEN MET INFLUENZA(-achtig ziektebeeld) per week en per 10000 inwoners, 1970-1973 (1^e kwartaal)



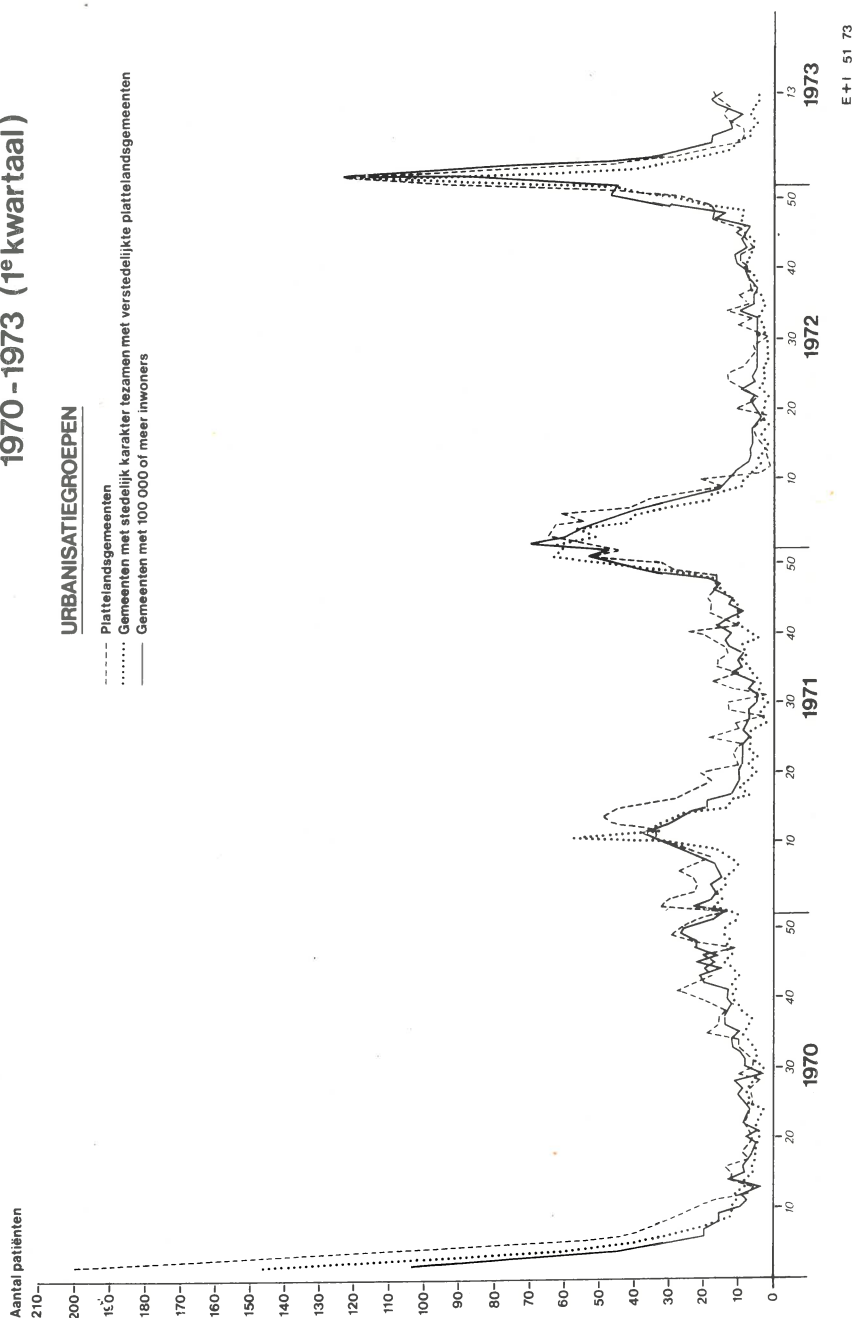
figuur 3.

Aantal patiënten met influenza (achtig ziektebeeld) per week en per 10 000 inwoners, 1970 - 1973 (1^e kwartaal)

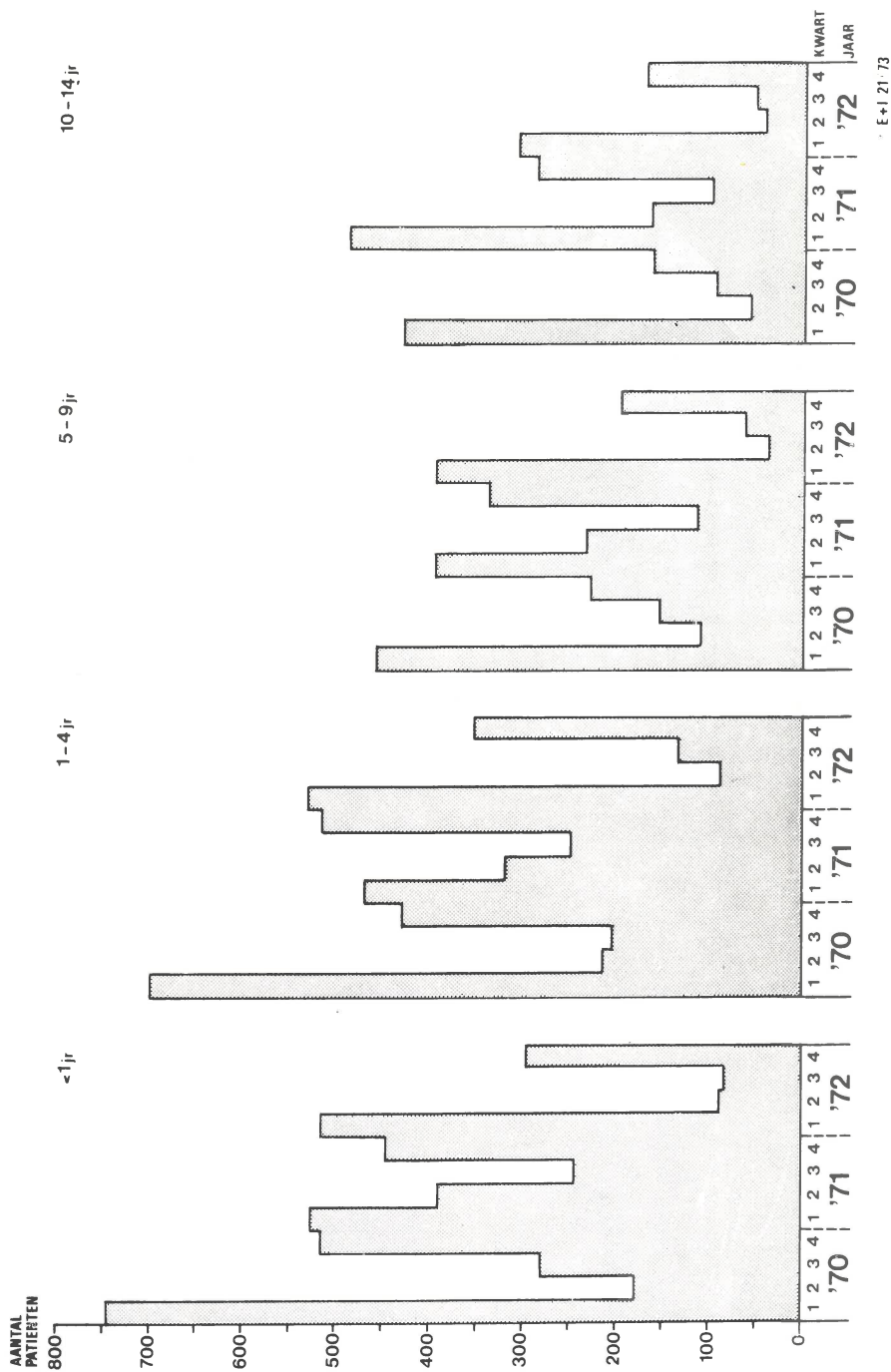


figuur 4

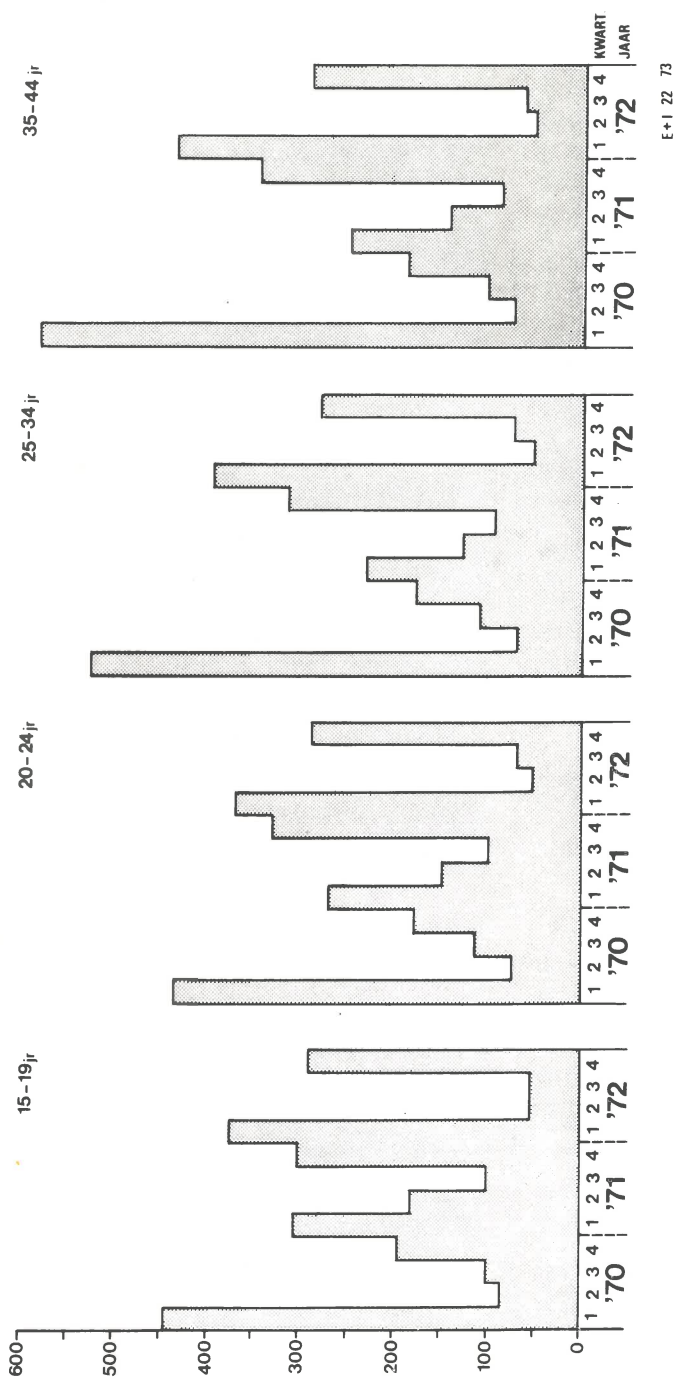
Aantal patiënten met influenza (-achtig ziektebeeld) per week en per 10 000 inwoners, 1970-1973 (1^e kwartaal)



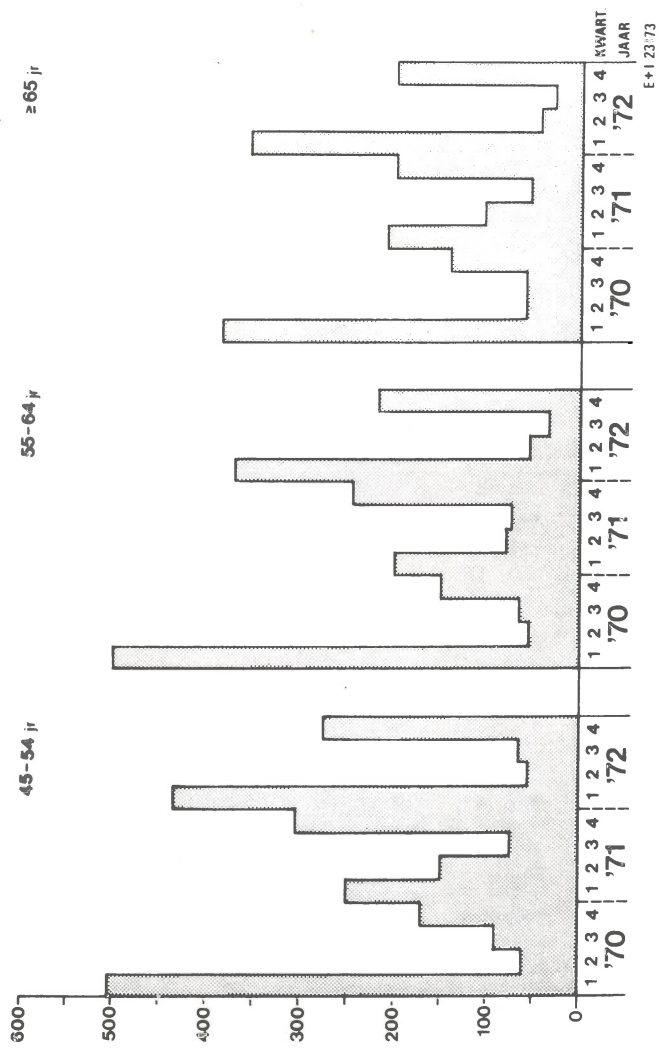
figuur 5. Aantal patiënten met influenza (-achtig ziektebeeld), naar leeftijdsgroep, per 10000 inwoners, 1970-1972.



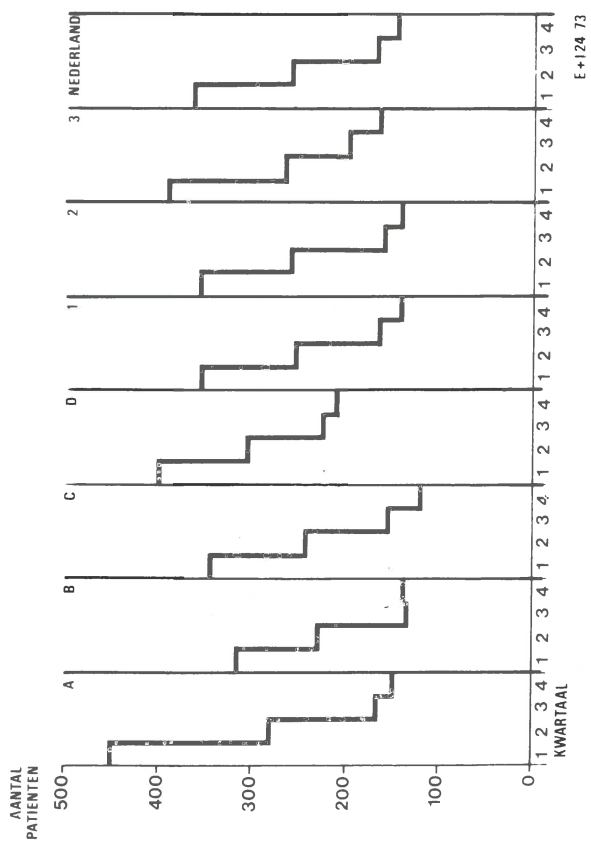
figuur 5. (vervolg 2)



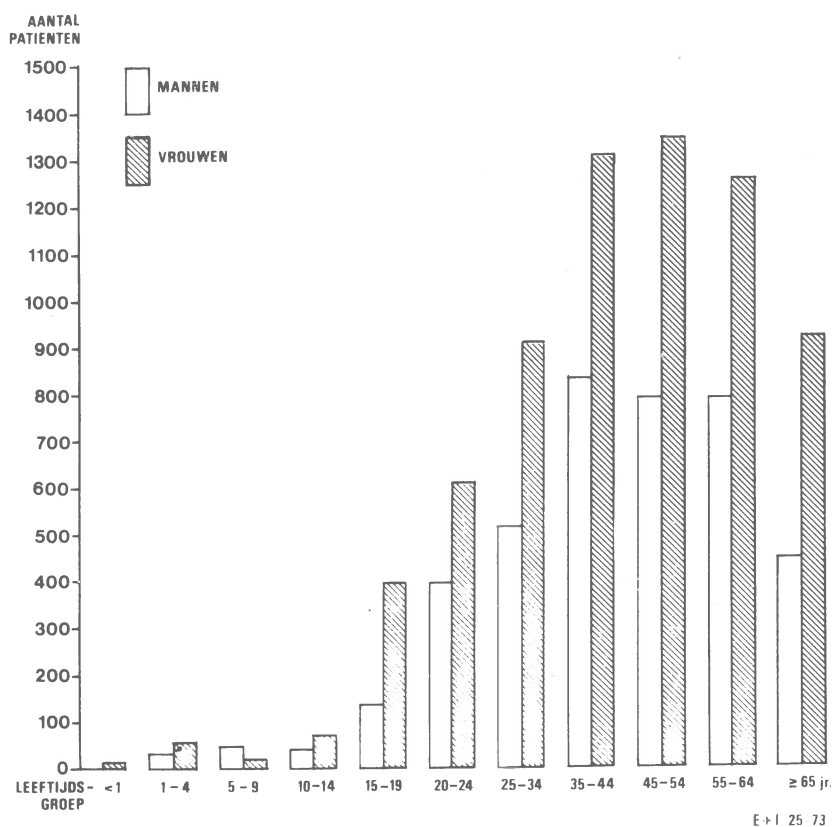
figuur 5. (vervolg 3)



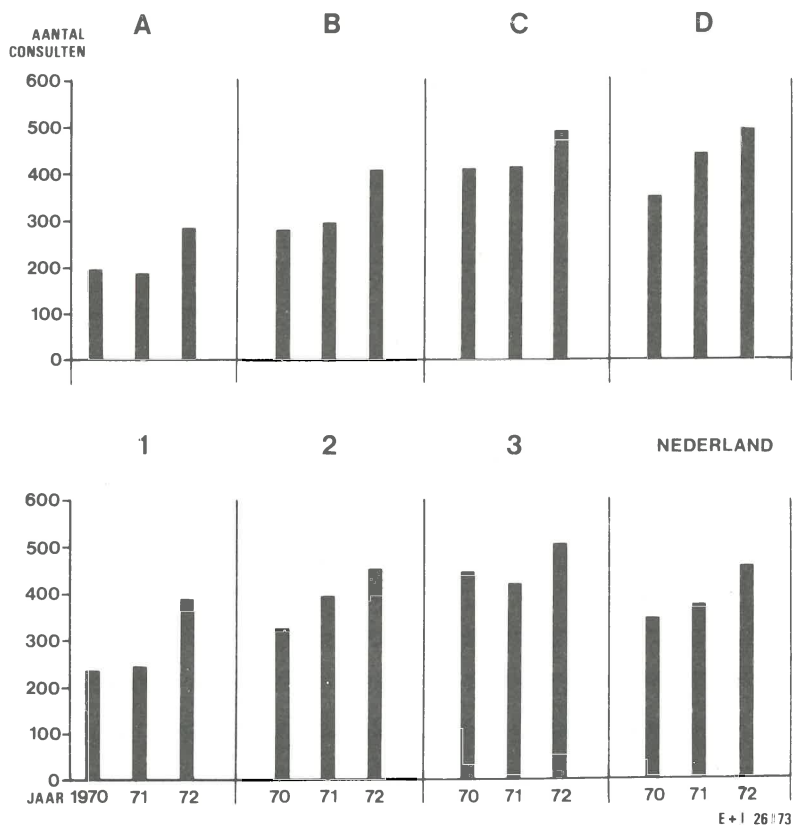
figuur 6. Aantal patiënten aan wie een tranquillizer werd voorgeschreven, per provincie- en urbanisatiegroep, per 10000 inwoners, 1972.



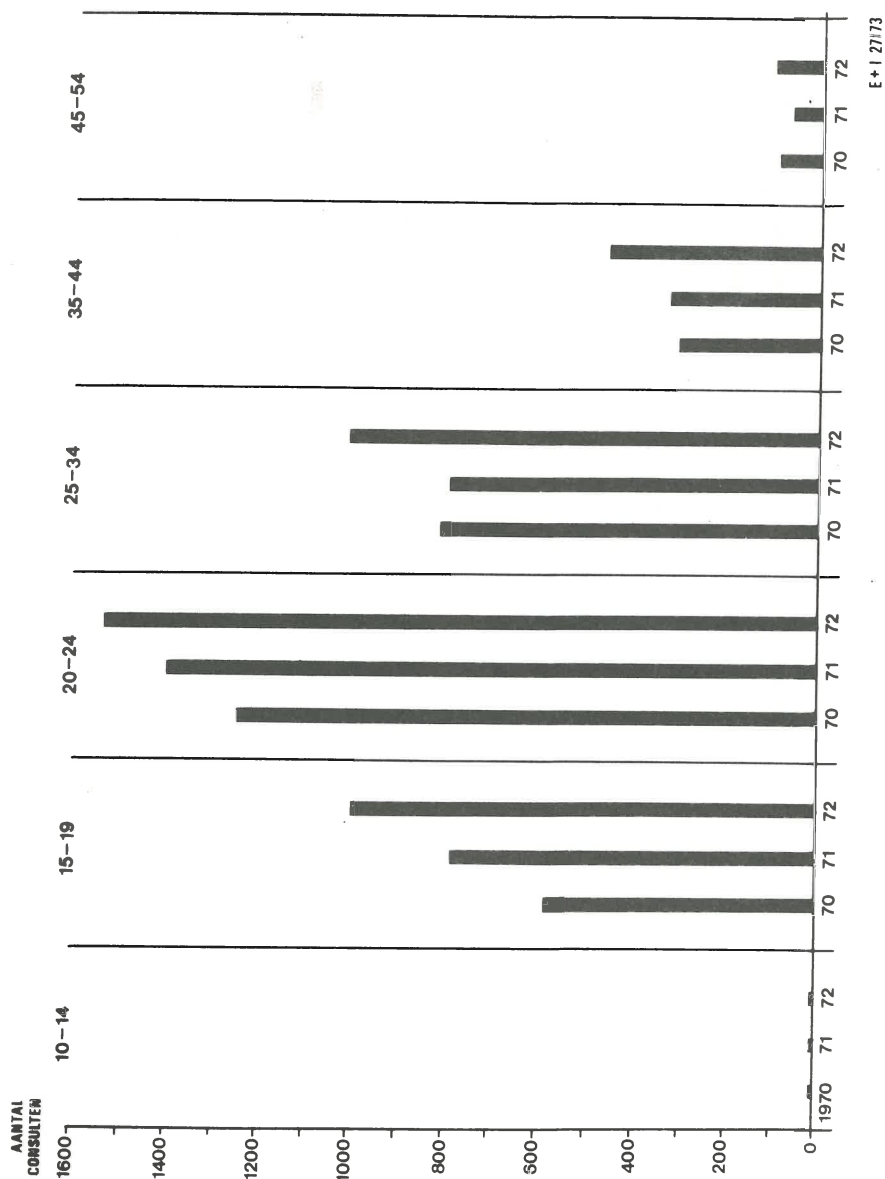
figuur 7. Aantal patiënten aan wie een tranquillizer werd voorgeschreven, naar leeftijdsgroep en geslacht, per 10000 inwoners, 1972 (2e t/m 4e kwartaal).



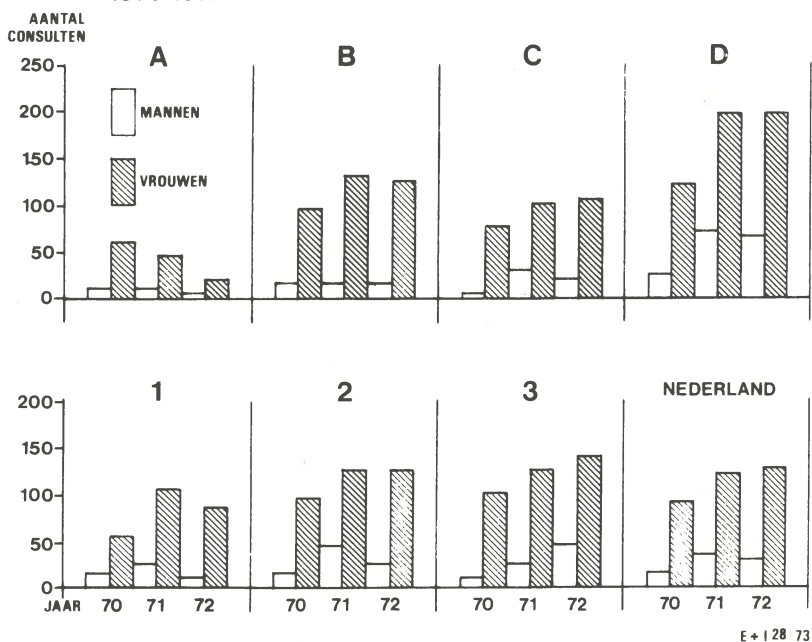
figuur 8. Aantal primaire consulten inzake ovulatie-remmer, per provincie- en urbanisatiegroep, per 10.000 vrouwen, 1970-1972.



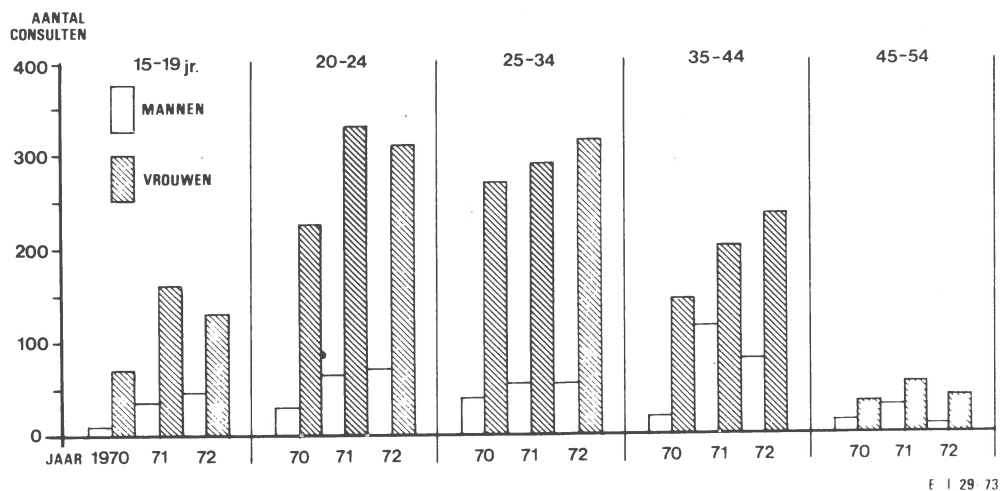
figuur 9. Aantal primaire consulten inzake ovulatieregner, naar leeftijdsgroep, per 10000 vrouwen, 1970-1972.



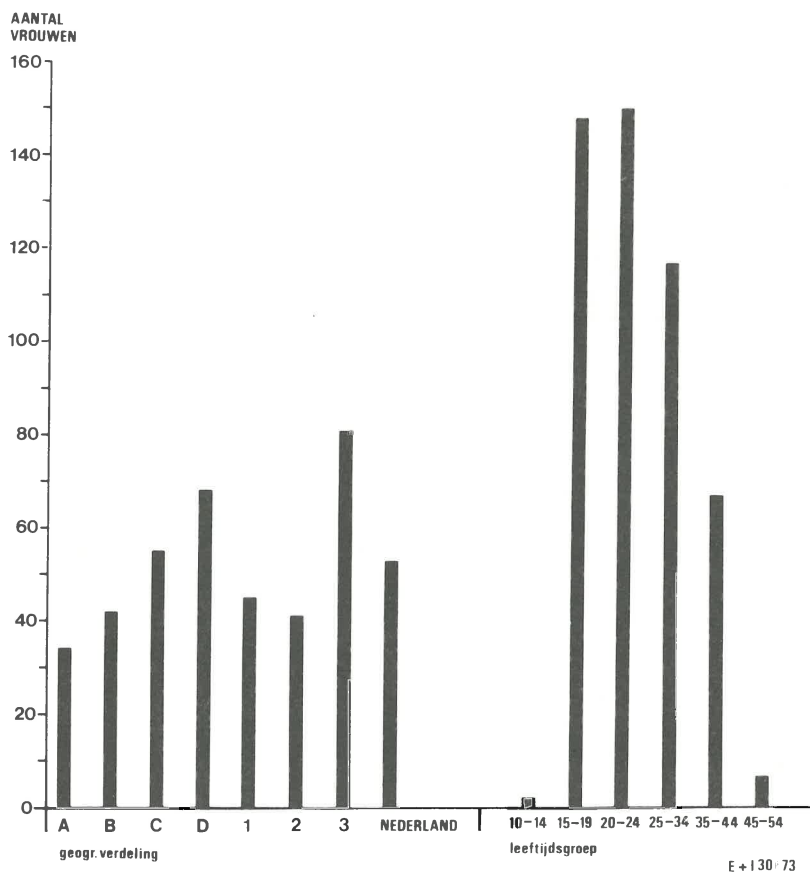
figuur 10 Aantal overige primaire consulten inzake geboorteregeling, per provincie- en urbanisatiegroep, per 10000 mannen c.q. vrouwen, 1970-1972



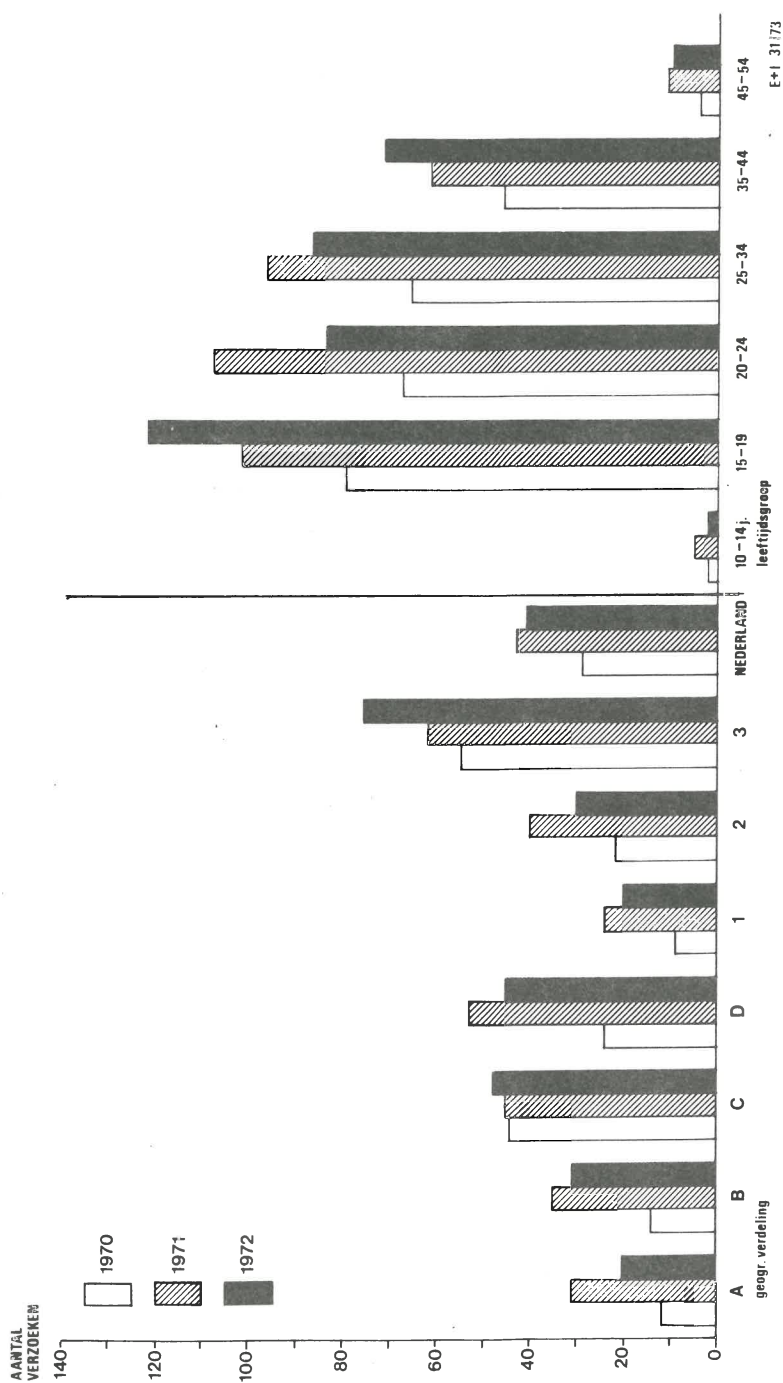
figuur 11. Aantal overige primaire consulten inzake geboorteregeling, naar leeftijdsgroep, per 10000 mannen c.q. vrouwen, 1970-1972.



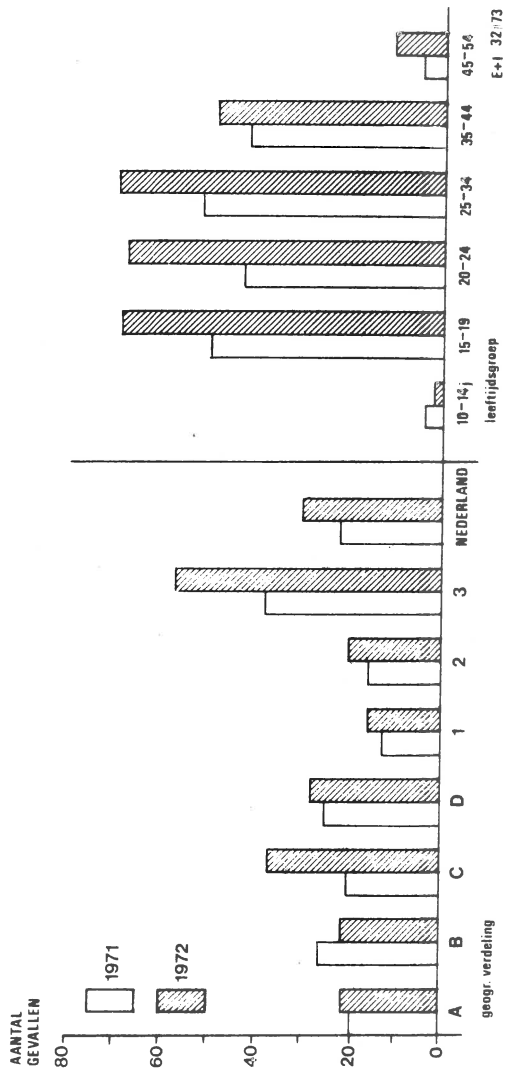
figuur 12. Aantal vrouwen aan wie de morning-after-pill werd voorgeschreven, per leeftijds-, provincie- en urbanisatiegroep, per 10 000 vrouwen, 1972.



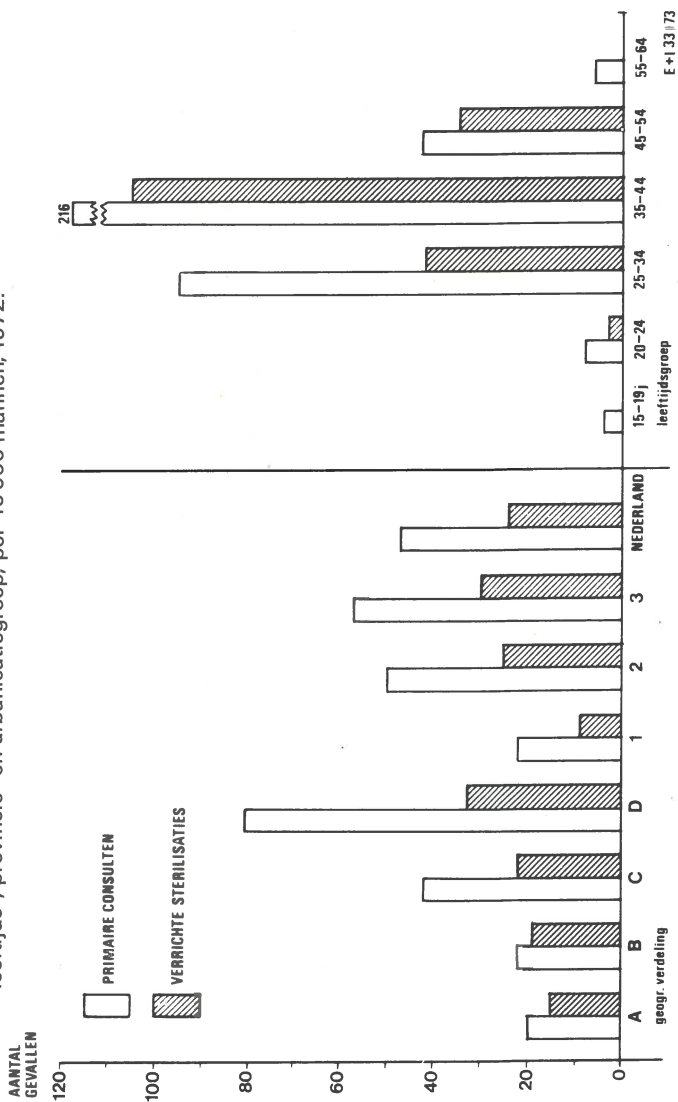
figuur 13. Aantal verzoeken om abortus, per leeftijds-, provincie- en urbanisatiegroep, per 10000 vrouwen, 1970-1972.



figuur 14. Aantal gevallen van abortus provocatus, lege artis, per leeftijds-, provincie- en urbanisatiegroep, per 10000 vrouwen, 1971-1972.



figuur 15. Aantal primaire consulten inzake sterilisatie en het aantal verrichte sterilisaties bij de man, per leeftijds-, provincie- en urbanisatiegroep, per 10 000 mannen, 1972.



figuur 16. Aantal gevallen van zelfmoordpoging, geslaagd en niet geslaagd, naar leeftijdsgroep en geslacht, per 10.000 mannen c.q. vrouwen, 1970-1972

