

## **[Report of the Medical Officer of Health for Greenwich Borough].**

### **Contributors**

Greenwich (London, England). Metropolitan Borough.

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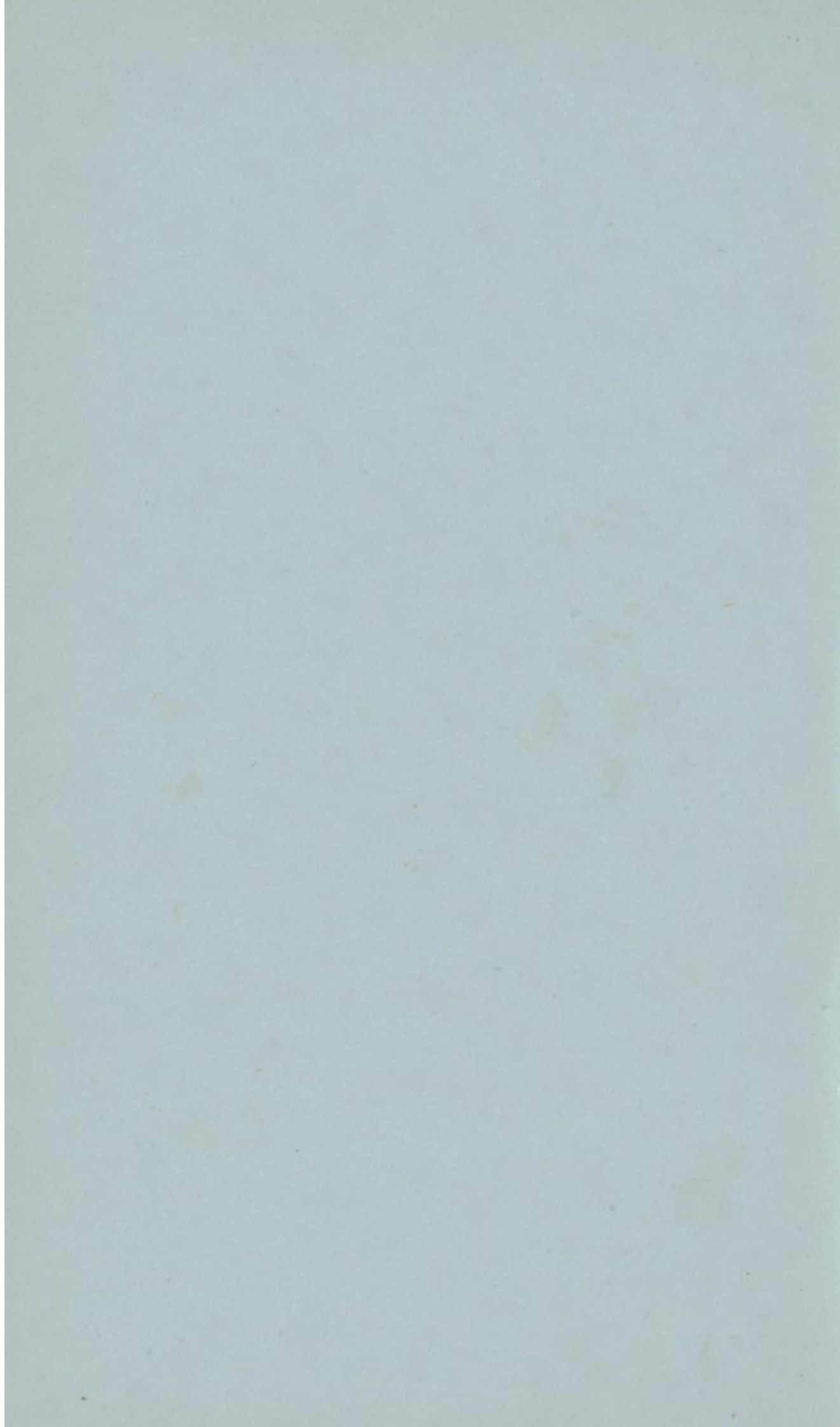
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Metropolitan  
Borough of Greenwich



REPORT  
of the  
MEDICAL OFFICER OF HEALTH  
FOR THE YEAR  
1952



# Metropolitan Borough of Greenwich

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# REPORT

of the

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

# 1952

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# PUBLIC HEALTH COMMITTEE

as at 31/12/52.

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# **PUBLIC HEALTH COMMITTEE**

as at 31/12/52.

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## **The Mayor :**

Councillor H. INGLE, J.P.

and 13 Members

Councillor Mrs. L. HILLDRITH (*Chairman*)

Councillor Mrs. A. D. A. KENNEDY (*Vice-Chairman*)

## **Aldermen :**

Mrs. C. Berry, Mrs. F. Carter, Miss M. Gollogly

## **Councillors :**

A. C. CHRISP (L.C.C.)

W. O. LITTLER

Mrs. J. GOLLOGLY (L.C.C.)

D. P. LYNCH

H. W. GORMAN

Miss K. E. H. ROSS

Lady HUME, J.P.

T. E. SMITH

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## **Powers and Duties of the Public Health Committee :**

- 1.—The Committee shall consist of 13 members of the Council.
- 2.—There shall stand referred to the Committee all matters relating to the powers and duties of the Council under Acts of Parliament, bye-laws and regulations dealing with the public health and the sanitary condition of the Borough; the administration of the Food and Drugs Act, 1938 and any regulations dealing with the preparation, storage and sale of Food and Drugs; the powers and duties of the Council under enactment relating to milk and dairies.
- 3.—Without prejudice to the generality of the provisions of the preceding paragraph, the powers and duties of the Council to serve and receive Notices, take proceedings and empower officers to make complaints and take proceedings on the Council's behalf and otherwise to enforce the provisions of the Public Health (London) Act, 1936, other than those specified in Part I of the First Schedule to such Acts, the

functions of the Council under Section 14 of the Food and Drugs Act, 1938 (registration of premises used in connection with manufacture or sale of ice-cream, preserved food, etc.), the Food and Drugs (Milk and Dairies) Act, 1944 and the Milk (Special Designations) Act, 1949 and all Regulations made or to be made under such last mentioned statutes, and under the Slaughter of Animals Act, 1933 (licensing of slaughtermen) and also the functions of the Council under the Bye-law dealing with the deposit of rubbish on vacant sites in the Borough, shall be delegated to the Committee.

- 4.—All plans for the drainage and re-drainage of buildings in the Borough shall be considered by the Committee, and all works of drainage and re-drainage of buildings shall be carried out under their jurisdiction.
- 5.—The Committee shall have the control of any Mortuary and of any disinfecting apparatus and plant provided and maintained by the Council, as well as public sanitary conveniences and conveniences maintained by the Council.
- 6.—The Committee shall have the control of all public drinking fountains other than those provided in any open space or other property belonging to the Council and coming within the jurisdiction of any other Committee.
- 7.—The powers and duties of the Council in connection with the repair, closure or demolition of individual insanitary dwellings and the duty of the Council to issue certificates under Section 5 (1) of the Rent and Mortgage Interest Restrictions Act, 1923 and Section 12 of the Rent and Mortgage Interest Restrictions (Amendment) Act, 1933 and the issue of reports under Section 5 (2) of the former Act, shall stand referred to the Committee.



**STAFF.****as at 31/12/52.***Medical Officer of Health :***JOHN KERR BROWN, B.Sc., M.B., Ch.B., D.P.H.***Public Analyst :***H. A. WILLIAMS, Ph.D., A.C.G.F.C., F.R.I.C.**  
(Part-time)*District Sanitary Inspectors :*

<i>ac</i> W. H. COLLINS, B.E.M. (Senior).	<i>ab</i> J. E. MILLWAY.
<i>abc</i> S. A. RADFORD.	<i>a</i> J. G. LYONS.
<i>ab</i> G. W. HEATH.	<i>ab</i> R. D. ANDREW *
<i>abd</i> J. ASHMORE.	<i>abefg</i> Miss B. HATFIELD.

*Food Inspectors :*

<i>ab</i> H. L. BENNETT (Senior)
<i>ab</i> F. A. SAUNDERS

**CLERICAL STAFF.**

L. A. WESTACOTT (Chief Clerk)	Mrs. V. I. STARR.
A. H. WILCOX.	Miss J. D. VANNER †
C. W. SPORE.	A. H. HAMMOND (Temporary)
J. F. VICKERS.	W. A. PEARCE (Conveniences
K. ALLUM, D.F.M.	Superintendent)
S. E. THELNER ‡	

**DISINFECTING STAFF.**

T. SMITH (Foreman)	A. MOORE.
H. W. C. SCARFF (Motor Driver).	W. CLEMENTS.
A. NASH.	

**RODENT CONTROL, FLY DISINFESTATION, ETC.****C. WEYMOUTH — Investigator and a Team of eight men.**

<i>a</i>	Certificated Sanitary Inspector.
<i>b</i>	" Meat and Other Foods.
<i>c</i>	" Smoke Inspector.
<i>d</i>	" Housing Officer
<i>e</i>	" Health Visitor.
<i>f</i>	" State Registered Nurse.
<i>g</i>	" State Certified Midwife.

\* Commenced duties 29/9/52

† " " 18/8/52

‡ " " 6/10/52



PUBLIC HEALTH DEPARTMENT,  
TOWN HALL, GREENWICH, S.E.10.

October, 1953.

*To the Mayor, Aldermen and Councillors,  
Metropolitan Borough of Greenwich.*

Ladies and Gentlemen,

I beg to present this account of the state of the public health in Greenwich in 1952. It is fairly comprehensive, embracing not only the work of the Health Department, but containing information gleaned from many sources, which has some connection with the health of our Borough and which otherwise might not be available for easy reference in future years.

The population increased by 1,490, and although the birth rate decreased from 15.16 to 14.34, the death rate also decreased by 0.67 to 10.57. The Infantile Mortality rate at 14.62 is by far the lowest ever recorded in the history of the Borough and is possibly about the lowest in the country. However, where comparatively small numbers are involved too much importance should not be attached to a figure for one particular year. Wide statistical variations are possible from year to year. The factors involved in Infant Mortality are many and sometimes indirect, but the work of the Maternity and Child Welfare Clinics must have contributed in no small measure to the attainment of this low figure. Related to this low Infantile Mortality Rate is the fact that there were no deaths from Infantile Diarrhoea, at one time a great scourge in the early months of life.

Infectious Diseases continued to decline and Measles, Whooping Cough and Dysentery were less prevalent. Scarlet Fever showed an increase of 120 and, unfortunately, there were 4 cases of Diphtheria : one case was a soldier admitted to hospital from foreign service and the other 3 were non-immunised children living at a Rest Centre in somewhat squalid conditions. These cases are a reminder that Diphtheria can still strike when immunity is low. There were 7 cases of Anterior Poliomyelitis : one death is recorded but this was a soldier who contracted his illness either abroad or in some other part of the country and was transferred to a local hospital where he subsequently died. In none of the cases was any relationship to recent inoculation or trauma established nor was there any evidence of case-to-case infection.



Housing matters continued to be given high priority during the year. The Council with commendable courage and foresight made a start with a slum clearance programme, despite their many rehousing commitments and the consequent difficulties which will have to be faced in rehousing the displaced tenants. They are to be congratulated on resuming their pre-war attempts to eliminate slum property from our Borough.

Reference to the appropriate section will indicate the strenuous efforts which are made by the Sanitary Inspectors to maintain the many poor properties in a reasonable state of repair. It would be unrealistic not to admit that in many cases this is a losing battle and a mere palliative which can be resolved only by eventual demolition and clearance. This is being done by this Council and the London County Council to the utmost of their rehousing resources.

No account of the year 1952 would be complete without a reference to the great fog which engulfed London in December, and at some length in the body of the Report an attempt has been made to relate the incident to the welfare of the inhabitants of Greenwich.

It has been the custom for me, in these Annual Reports, to enlarge on the wider issues of community health and to advance purely personal opinions on organisation and possible deficiencies in the Health Service. My view has always been that our present system of health priorities is fundamentally wrong and that by placing disproportionate emphasis on treatment and cure at the expense of the promotive and preventive services, we may have embarked on a journey which will lead to disappointment and disillusionment. I developed this argument at some length in previous Reports and, reading my remarks again after another year, there is nothing new I can add, nor very little that in honesty I would wish to retract. It is only by the free interplay of ideas and the airing of differences and above all by the preservation of a healthy empiricism that progress can be made.

My thanks are due to the Chairman and Vice-Chairman of the Public Health Committee for their support and understanding. I gladly acknowledge the advice and friendship which I have received from the Town Clerk and his Deputy, and I thank my other Chief Officer colleagues for their willing co-operation. Lastly, my thanks are due to the Staff for their loyalty and their application to duty.

I have the honour to be,

Your obedient Servant,

J. KERR BROWN,

*Medical Officer of Health*



## SECTION A

### STATISTICS AND SOCIAL CONDITIONS OF THE AREA

#### General Statistics

ELEVATION.—Varies from below high-water mark up to 249 feet above sea level.

#### AREA OF THE BOROUGH AND DISTRICTS—

East Greenwich	...	...	...	...	1,300 acres
West Greenwich	...	...	...	...	453 „
St. Nicholas, Deptford	...	...	...	...	115 „
Charlton & Kidbrooke	...	...	...	...	1,990 „
					3,858 acres

#### POPULATION—

At Census, 1931	...	...	...	...	100,924
At Census, 1951 (preliminary figure)	...	...	...	...	89,614
Estimated, 1952 (mid-year)	...	...	...	...	90,880

DENSITY OF POPULATION ... 23 persons per acre

NUMBER OF INHABITED DWELLINGS—end 1952 ... 22,255  
(according to Rate Books)

Structurally separate dwellings at Census, 1931... 18,114

#### NUMBER OF UNINHABITED DWELLINGS—

At Census, 1931	...	...	...	...	250
At end 1952	...	...	...	...	111

#### NUMBER OF FAMILIES OR SEPARATE OCCUPIERS—

At Census, 1931 ... 25,144

RATEABLE VALUE, 1952... £801,930

SUM REPRESENTED BY A 1d. RATE, 1952 ... £3,253

## PUBLIC OPEN SPACES.

### BOROUGH COUNCIL—

Charlton House and Gardens	...	...	...	9.25 acres
R.N. College Cemetery	...	...	...	5.86 „
St. Alfege Recreation and Church Grounds	...	...	...	2.30 „
St. Nicholas Recreation Grounds	...	...	...	1.25 „
Hughes Fields Recreation Grounds	...	...	...	.74 „
Batley Park	...	...	...	.97 „
Bellot Memorial Gardens	...	...	...	.19 „
Other Open Spaces	...	...	...	5.25 „

Approximately 26.00 acres

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### H.M.OFFICE OF WORKS—

Greenwich Park	...	...	...	...	185 acres
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### L.C.C.—

Blackheath (part of)	...	...	...	...	89 acres
Blackheath—Rangers House and Garden	...	...	...	...	2½ „
Maryon and Maryon Wilson Parks	...	...	...	...	51½ „
Charlton Park	...	...	...	...	42¾ „
Hornfair (formerly Charlton Playing Field)	...	...	...	...	26 „
Sayes Court Recreation Grounds	...	...	...	...	3¼ „

Approximately 215 acres

---

TOTAL PUBLIC OPEN SPACES IN BOROUGH ... Approx. 426 acres  
*(representing 11.4% of the total area of the Borough)*

MILEAGE OF STREETS ... 88 (approx)



## SOCIAL CONDITIONS

The Metropolitan Borough of Greenwich comprises three districts, *viz.*, Greenwich, Charlton and Kidbrooke and St. Nicholas, Deptford, all of which are now united into one civil parish.

There is evidence that Greenwich has been an inhabited place for perhaps 2,000 years. Saxon burial mounds and barrows dating from the 6th century are still to be seen in Greenwich Park and coins and fragments of pottery deposited at Charlton House show an almost continuous Roman settlement from 41 B.C. to 423 A.D.

In 1738, in a road book of the British Isles, this description was given: "Greenwich on the Thames, 4 miles east of London Bridge, a very delightful place." It can still lay claim to that title.

Greenwich lies mainly on a natural slope from the Thames to Blackheath and it thereby affords extensive views of London and the River and it is to this fact, coupled with its historic connection with Royalty, that it owes its fascination.

The sub-soil of the greater portion of the Borough consists of gravel and sand, the exception being in the Kidbrooke area which is mainly clay.

The altitude varies from a few feet below high-water mark on the Marshes up to 249 ft. above sea level on the Shooter's Hill Road by the Borough boundary.

The Borough is well catered for in the way of parks and open spaces, the largest being the famous Greenwich Park with its historical surroundings covering an area of 185 acres. Blackheath forms the southern boundary, 89 acres of which are within the Borough.

There are also excellent recreation grounds serving the Charlton area. In addition to the Maryon and Charlton Parks there is the L.C.C. Play Centre and Lido with its well-equipped swimming bath, tennis courts and bowling greens.

More recently, social centres catering for all shades of cultural and educational tastes have been established at Charlton House, Kidbrooke House and the Town Hall under the auspices of the Greenwich Community Council in conjunction with the L.C.C.

In addition to the normal Health Services, Greenwich has always been well furnished with schools and hospitals and it can boast of modern baths and excellent library facilities.

Considerable alteration has taken place during the post-war period by the erection of modern houses and blocks of flats and the



L.C.C. housing scheme on the Brook and Evelyn Estates is now complete. This latter area, always described pre-war as the "rural part of the Borough," is now almost entirely built over.

The Borough Council is pressing ahead with its new housing schemes and has behind it a record of sound achievement.

The part situated near the River Thames is, generally speaking, an industrial area, and is more densely populated than the upper parts of the Borough. In recent years, however, the commencement of a gradual movement of people away from the river-side has been witnessed.

The majority of the industries and sources of employment in the Borough are to be found in close proximity to the River Thames which forms the Borough boundary on the north side. Chief among these are large Cable and Engineering Works, Ship Repairing Works, Gas Works, Soap and Candle Works, L.T.E. Generating Station and Tramway Car Repair Depot, The British Electricity Authority's Works, Glass Bottle Works, Rope Works, Ship Propelling Works, Merryweather's Works (Fire Engines), Cement and Stone Works, Asbestos Works, Cold Meat Storage, Pressed Tool Works, Constructional Engineering Works, Galvanising and Sheet Metal Works, Brewery, Flour Mills, Aero Parts, Wireless and Vehicle Parts and Tin Box Manufacturing Works.

The numbers employed at 11 of the larger factories range between 500 and 5,000 each, whilst 17 smaller works each employ between 100 and 400.

## POPULATION

The Registrar General has submitted his estimate of the population of Greenwich, computed at mid-year 1952, upon which the Statistics of this Report have been based. The figure returned is 90,880 which indicates an increase in the population of 1,490 since last year and shows an advance of 27,080 since 1945.

The natural increase for the year, i.e., excess of births over deaths, was 341.

\* EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

LIVE BIRTHS

	Legitimate	Illegitimate	Total	} Birth Rate <u>14.34</u> (Comparable Rate 13.33)
Male	597	30	627	
Female	639	33	672	
Total	1,236	63	1,299	

STILL BIRTHS

	Legitimate	Illegitimate	Total	} Rate per 1,000 total Births } <u>17.39</u>
Male	10	—	10	
Female	12	1	13	
Total	22	1	23	

DEATHS—All Causes

Male	Female	Total	} Death Rate (Crude) <u>10.57</u> (Comparable Rate 11.10)
534	424	958	

DEATHS—Special Causes

Puerperal Causes	...	...	...	...	...	3
Tuberculosis (all forms)	...	...	...	...	...	32
Tuberculosis, Pulmonary	...	...	...	...	...	29
Cancer (all ages)	...	...	...	...	...	161
Measles (all ages)	...	...	...	...	...	Nil
Whooping Cough (all ages)	...	...	...	...	...	Nil
Diarrhoea (under 2 years of age)	...	...	...	...	...	Nil
Influenza	...	...	...	...	...	1

\*These figures, which are supplied by the Registrar-General, may differ slightly from those shown in other parts of the Report.



## DEATH RATES

*Infants under 1 year of age*

All infants per 1,000 live births	...	...	...	...	14.62
Legitimate Infants per 1,000 legitimate live births	...	...	...	...	15.37
Illegitimate Infants per 1,000 illegitimate live births	...	...	...	...	Nil

*Others*

Puerperal Causes (per thousand total births)	...	...	...	...	2.26
Tuberculosis (all forms) per 1,000 population	...	...	...	...	0.35
Tuberculosis, Pulmonary per 1,000 population	...	...	...	...	0.32
Cancer per 1,000 population	...	...	...	...	1.77
Common Infectious Diseases per 1,000 population	...	...	...	...	Nil
Influenza per 1,000 population	...	...	...	...	0.01

## MARRIAGES.

Mr. F. H. Searle, the Superintendent Registrar of the Greenwich Registration District, has kindly furnished me with particulars relating to the number of marriages solemnised or registered in the Borough of Greenwich during 1952. The total of 720 gives a marriage rate of 15.8.

The following table shows these particulars giving the number of marriages in the Borough for each year since 1938 :—

Year	Churches of England						Chapels and Roman Catholic Churches	Superintendent-Registrar's Office	Total	Approximate Population			
	Greenwich		Charlton and Kidbrooke		St. Nicholas								
1938 ...	309	...	185	...	31	...	101	...	268	...	894	...	95,770
1939 ...	395	...	218	...	31	...	128	...	397	...	1,169	...	94,790
1940 ...	451	...	243	...	33	...	126	...	345	...	1,198	...	74,280
1941 ...	277	...	174	...	7†	...	91	...	241	...	790	...	57,070
1942 ...	257	...	192	...	3	...	79	...	198	...	729	...	60,530
1943 ...	209	...	166	...	2	...	73	...	171	...	621	...	62,870
1944 ...	211	...	136	...	—	...	74	...	171	...	592	...	61,800
1945 ...	228	...	211	...	2	...	87	...	233	...	761	...	63,800
1946 ...	258	...	196	...	1	...	86	...	235	...	776	...	76,840
1947 ...	192	...	160	...	13	...	93	...	318	...	776	...	82,230
1948 ...	202	...	152	...	8	...	104	...	345	...	811	...	84,410
1949 ...	184	...	129	...	10	...	90	...	272	...	685	...	87,680
1950 ...	206†	...	121	...	6	...	74	...	245	...	652	...	89,570
1951 ...	210	...	133	...	3	...	60	...	264	...	670	...	89,390
1952 ...	191	...	144	...	4	...	102	...	279	...	720	...	90,880

†Parish Church destroyed by enemy action.

‡St. Peter's, Creek Road  
Holy Trinity, Blackheath Hill } Closed.



## METEOROLOGICAL OBSERVATIONS—1952

Some few years ago it was decided, for various reasons (one of which was atmospheric pollution), to remove the Royal Observatory from Greenwich to Herstmonceux in Sussex and as a result, meteorological observations at the Observatory during the last two or three years have been gradually curtailed, until in July of this year they finally ceased.

Nevertheless, in order to ensure that no lapse occurred in the records for this district, arrangements were made for limited observations to be continued at the National Maritime Museum.

I am, therefore, indebted not only to Sir Harold Spencer Jones, F.R.S., Astronomer Royal, for the data for the period January to July, but also to the Director of the National Maritime Museum for information for the period August to December.

### Period January to July

(Observations made at the Royal Observatory).

*Temperature*: The maximum temperature in the shade was  $89.4^{\circ}$  on June 29 and 30. Temperatures exceeding  $80^{\circ}$  were recorded on 13 days, 1 in May, 4 in June, and 8 in July. The lowest temperature was  $21.4^{\circ}$  on January 27.

*Rainfall*: For the first seven months of the year 9.39 inches of rain were measured, being 3.54 inches below the average for that period, every month except March being deficient.

*Sunshine*: A total of 933.3 hours, about 5 hours above the average, was registered. March had a deficiency of about 30 hours and April an excess of the same amount. There were 28 sunless days, 10 in January and only 4 in the months April to July.

### Period August to December

(Observations made at the National Maritime Museum).

Highest temperature in the Stevenson Screen— $79^{\circ}\text{F}$ . Dates: 25th and 27th August.

Temperature exceeding  $80^{\circ}\text{F}$ .—None.

Lowest temperature— $22^{\circ}\text{F}$ . on 25th November.

Maximum winter temperature during November and December.  $57^{\circ}\text{F}$ . on 2nd and 10th November.

*Sunshine*: Total hours recorded—463.3. Sunniest day—28th August. Number of hours of sunshine—12.

There were 40 days when no sun was recorded at all. One day in August, three days in September, six days in October, twelve days in November, 18 days in December.

*Rainfall*: Total 14.22 inches. Highest 24 hours, 2.22 inches on 6th August. Driest month, December, with 2.09 inches of rain. Wettest month, November, with 3.65 inches of rain. Average for the five months—2.84 inches.



## BIRTHS

The total number of live births registered in the Borough during the year was 1,395 and of this number, 951 occurred in St. Alfege's Hospital, 73 in various Nursing Homes and 371 in private dwellings. In 587 cases the parents resided outside the Borough and the births were consequently transferred to the appropriate districts, leaving a figure of 808. To this must be added 491 births belonging to the Borough which took place in Institutions outside the Borough, thus making a final figure for Greenwich of 1,299 a decrease of 52 from that of the previous year. Of this total 627 were males and 672 females.

The following table gives, by districts, the number of registrations of Greenwich Births during the current year :—

Source of Information	DISTRICT				Total Greenwich Births
	East	West	St. Nicholas	Charlton & Kidbrooke	
Greenwich Registrar's Returns :—	262	191	38	317	808
Inward Transfers :—					
1st Qtr.	44	19	—	85	148
2nd Qtr.	35	13	—	67	115
3rd Qtr.	38	12	3	75	128
4th Qtr.	23	12	1	64	100
TOTALS	402	247	42	608	1,299

The Birth Rate for the year, calculated on the figure of 1,299 births, is 14.34 per thousand of the population, 0.82 lower than that for 1951. The average rate for the previous ten years is 19.09. The Greenwich Comparability Factor for births is 0.93 which gives an adjusted rate of 13.33.

The Rates for the County of London and England and Wales are 17.6 and 15.3 respectively, indicating in each case a decrease of 0.2 from the figure for 1951.

Illegitimate Births numbered 63 representing 4.8 per cent. of the total live births and showing an advance of one over those of the previous year.

The number of Still Births registered was 23 (10 males - 13 females), which is equivalent to a rate of 17.39 per 1,000 total births, a decrease of 7.86 from that of the previous year.



## DEATHS

The net number of deaths registered during 1952 was 958, of which 534 were males and 424 females, compared with last year's total of 1,002 comprising 520 males and 482 females.

This gives a crude Death Rate for the Borough of 10.57 per thousand of the population, a decrease of 0.67 as compared with that of the previous year and a rate which is still 1.64 less than the average for the last ten years, viz., 12.21. The crude Death Rate figure is slightly increased to 11.10 when the comparability figure furnished by the Registrar General for adjusting Local Deaths, is taken into account.

The adjusted Death Rate is in effect a 'corrected' Death Rate. The Registrar-General has pointed out that if the population of all areas were similarly constituted as regards the proportion of their sex and age group components, their crude death rates (deaths per 1,000 population) could be accepted as valid comparative measures of the mortalities experienced by the several populations.

Populations, however, are not similarly constituted and their crude Death Rates therefore fail as true comparative mortality indexes in that their variations are not due to mortality alone, but arise also from differences in their population constitution. For instance a town with a population consisting of aged persons would register more deaths than one composed entirely of young and vigorous adults. Again a town containing a larger number of males than females records more deaths with a consequent higher Death Rate than one in which females preponderate.

To overcome this difficulty the Registrar-General has worked out for each area in the country an adjusting factor which is termed the 'Comparability Factor' and is based on the last census population figure.

The Comparability Factor for Greenwich is 1.05 and may be regarded as the population handicap to be applied which, when multiplied by the crude Death Rate for the year, modifies the latter so as to make it comparable with the country as a whole or with any similarly adjusted area.

The Death Rates for the County of London and for England and Wales are 12.6 and 11.3 respectively, indicating relative decreases of 0.5 and 1.2 compared with those of the previous year.

The inset table showing the causes of deaths at all ages has been supplied by the Registrar-General and is included in accordance with the Ministry of Health's request.



No. in Short List.	CAUSES OF DEATH	Sex	Deaths at subjoined Ages of "Residents," whether occurring within or without the District.								
			All Ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and under 75.	75 and over.
			M F	534 424	10 9	2 1	5 1	6 8	34 34	165 75	151 116
	All Causes ... ..	M F	534 424	10 9	2 1	5 1	6 8	34 34	165 75	151 116	16 18
1	Tuberculosis, Respiratory ...	M F	20 9	...	...	...	2 1	4 8	9 ...	3 ...	2 ...
2	Tuberculosis, Other ... ..	M F	1 2	...	...	...	...	...	1 ...	...	...
3	Syphilitic Disease ... ..	M F	2 1	...	...	...	...	...	1 ...	...	1 1
4	Diphtheria ... ..	M F	...	...	...	...	...	...	...	...	...
5	Whooping Cough ... ..	M F	...	...	...	...	...	...	...	...	...
6	Meningococcal Infections ...	M F	...	...	...	...	...	...	...	...	...
7	Acute Poliomyelitis ... ..	M F	1 ...	...	...	...	1 ...	...	...	...	...
8	Measles ... ..	M F	...	...	...	...	...	...	...	...	...
9	Other Infective and Parasitic Diseases ... ..	M F	2 1	...	...	1 ...	...	...	1 ...	...	...
10	Malignant Neoplasm, Stomach ...	M F	15 9	...	...	...	...	2 1	6 2	4 4	3 2
11	Malignant Neoplasm, Lung, Bronchus ... ..	M F	27 4	...	...	...	...	2 ...	15 2	9 1	1 1
12	Malignant Neoplasm, Breast ...	M F	...	...	...	...	...	...	...	...	...
13	Malignant Neoplasm, Uterus ...	F	6	...	...	...	...	...	2	2	2
14	Other Malignant and Lymphatic Neoplasms ... ..	M F	51 38	...	...	...	...	1 1	20 17	18 10	12 9
15	Leukaemia, Aleukaemia ... ..	M F	6 1	...	...	...	...	1 ...	4 ...	1 ...	... 1
16	Diabetes ... ..	M F	3 4	...	...	1 ...	...	...	1 ...	1 ...	... 3
17	Vascular Lesions of Nervous System ... ..	M F	37 64	...	...	...	...	2 1	8 12	11 27	16 24
18	Coronary Disease, Angina ...	M F	72 40	...	...	...	...	4 ...	26 6	23 16	19 18
19	Hypertension with Heart Disease	M F	9 18	...	...	...	...	...	2 1	4 9	3 8
20	Other Heart Disease ... ..	M F	68 80	...	...	...	...	3 1	9 10	21 54	35 54
21	Other Circulatory Disease ...	M F	36 40	...	...	...	...	1 1	9 3	8 12	18 24
22	Influenza ... ..	M F	1 ...	...	...	...	...	...	...	...	...
23	Pneumonia ... ..	M F	29 19	2 1	...	1 ...	1 ...	...	4 2	10 5	11 9
24	Bronchitis ... ..	M F	52 22	...	...	...	...	...	15 2	21 7	16 11
25	Other Diseases of Respiratory System ... ..	M F	8 3	...	1 ...	...	...	...	5 1	1 2	1 ...
26	Ulcer of Stomach and Duodenum	M F	13 ...	...	...	...	...	1 ...	5 ...	4 ...	3 ...
27	Gastritis, Enteritis and Diarrhoea	M F	1 1	...	...	...	...	1 ...	...	...	...
28	Nephritis and Nephrosis ...	M F	7 3	...	1 ...	...	...	2 1	1 1	...	3 ...
29	Hyperplasia of Prostate ... ..	M	9	...	...	...	...	...	1	2	6
30	Pregnancy, Childbirth, abortion	F	3	...	...	...	1	2	...	...	...
31	Congenital Malformations ...	M F	3 6	2 4	...	1 ...	...	...	1 ...	...	...
32	Other defined and ill-defined Diseases ... ..	M F	38 26	6 1	...	1 ...	...	2 3	15 7	6 3	8 5
33	Motor Vehicle Accidents ...	M F	4 2	...	...	1 ...	1 ...	2 1	...	...	...
34	All other Accidents ... ..	M F	14 6	...	...	...	1 ...	4 ...	...	4 ...	2 4
35	Suicide ... ..	M F	5 4	...	...	...	...	...	3 2	...	...
36	Homicide and Operations of War	M F	...	...	...	...	...	...	...	...	...

Disease at subjoined Age of "Insane," whether occurring within or without the District.	Deaths at subjoined Age of "Insane," whether occurring within or without the District.				
	From 10 to 19	From 20 to 29	From 30 to 39	From 40 to 49	From 50 to 59
1. Tuberculosis, Consumptive	10	10	10	10	10
2. Tuberculosis, Other	1	1	1	1	1
3. Typhoid Fever	1	1	1	1	1
4. Diphtheria and other Acute Infections	1	1	1	1	1
5. Whooping Cough	1	1	1	1	1
6. Rheumatism	1	1	1	1	1
7. Acute Rheumatism	1	1	1	1	1
8. Chronic Rheumatism	1	1	1	1	1
9. Gout	1	1	1	1	1
10. Syphilis	1	1	1	1	1
11. Scabies	1	1	1	1	1
12. Eczema	1	1	1	1	1
13. Psoriasis	1	1	1	1	1
14. Erysipelas	1	1	1	1	1
15. Tetanus	1	1	1	1	1
16. Cholera	1	1	1	1	1
17. Typhoid Fever	1	1	1	1	1
18. Diphtheria	1	1	1	1	1
19. Whooping Cough	1	1	1	1	1
20. Rheumatism	1	1	1	1	1
21. Acute Rheumatism	1	1	1	1	1
22. Chronic Rheumatism	1	1	1	1	1
23. Gout	1	1	1	1	1
24. Syphilis	1	1	1	1	1
25. Scabies	1	1	1	1	1
26. Eczema	1	1	1	1	1
27. Psoriasis	1	1	1	1	1
28. Erysipelas	1	1	1	1	1
29. Tetanus	1	1	1	1	1
30. Cholera	1	1	1	1	1
31. Typhoid Fever	1	1	1	1	1
32. Diphtheria	1	1	1	1	1
33. Whooping Cough	1	1	1	1	1
34. Rheumatism	1	1	1	1	1
35. Acute Rheumatism	1	1	1	1	1
36. Chronic Rheumatism	1	1	1	1	1
37. Gout	1	1	1	1	1
38. Syphilis	1	1	1	1	1
39. Scabies	1	1	1	1	1
40. Eczema	1	1	1	1	1
41. Psoriasis	1	1	1	1	1
42. Erysipelas	1	1	1	1	1
43. Tetanus	1	1	1	1	1
44. Cholera	1	1	1	1	1
45. Typhoid Fever	1	1	1	1	1
46. Diphtheria	1	1	1	1	1
47. Whooping Cough	1	1	1	1	1
48. Rheumatism	1	1	1	1	1
49. Acute Rheumatism	1	1	1	1	1
50. Chronic Rheumatism	1	1	1	1	1
51. Gout	1	1	1	1	1
52. Syphilis	1	1	1	1	1
53. Scabies	1	1	1	1	1
54. Eczema	1	1	1	1	1
55. Psoriasis	1	1	1	1	1
56. Erysipelas	1	1	1	1	1
57. Tetanus	1	1	1	1	1
58. Cholera	1	1	1	1	1
59. Typhoid Fever	1	1	1	1	1
60. Diphtheria	1	1	1	1	1
61. Whooping Cough	1	1	1	1	1
62. Rheumatism	1	1	1	1	1
63. Acute Rheumatism	1	1	1	1	1
64. Chronic Rheumatism	1	1	1	1	1
65. Gout	1	1	1	1	1
66. Syphilis	1	1	1	1	1
67. Scabies	1	1	1	1	1
68. Eczema	1	1	1	1	1
69. Psoriasis	1	1	1	1	1
70. Erysipelas	1	1	1	1	1
71. Tetanus	1	1	1	1	1
72. Cholera	1	1	1	1	1
73. Typhoid Fever	1	1	1	1	1
74. Diphtheria	1	1	1	1	1
75. Whooping Cough	1	1	1	1	1
76. Rheumatism	1	1	1	1	1
77. Acute Rheumatism	1	1	1	1	1
78. Chronic Rheumatism	1	1	1	1	1
79. Gout	1	1	1	1	1
80. Syphilis	1	1	1	1	1
81. Scabies	1	1	1	1	1
82. Eczema	1	1	1	1	1
83. Psoriasis	1	1	1	1	1
84. Erysipelas	1	1	1	1	1
85. Tetanus	1	1	1	1	1
86. Cholera	1	1	1	1	1
87. Typhoid Fever	1	1	1	1	1
88. Diphtheria	1	1	1	1	1
89. Whooping Cough	1	1	1	1	1
90. Rheumatism	1	1	1	1	1
91. Acute Rheumatism	1	1	1	1	1
92. Chronic Rheumatism	1	1	1	1	1
93. Gout	1	1	1	1	1
94. Syphilis	1	1	1	1	1
95. Scabies	1	1	1	1	1
96. Eczema	1	1	1	1	1
97. Psoriasis	1	1	1	1	1
98. Erysipelas	1	1	1	1	1
99. Tetanus	1	1	1	1	1
100. Cholera	1	1	1	1	1



In the Appendix to the Report will be found a table giving by districts, the causes of, and ages at death of residents whilst indicating the numbers actually dying in Public Institutions.

### DEATHS IN INSTITUTIONS.

The following table compares the average number of deaths of Greenwich residents in Public Institutions during the previous ten years with those of the current year:—

Year		Total Deaths of Greenwich Residents		Total Deaths of Greenwich Residents in Public Institutions.
1942	...	828	...	569
1943	...	888	...	609
1944	...	978	...	616
1945	...	813	...	521
1946	...	874	...	585
1947	...	952	...	561
1948	...	862	...	441
1949	...	942	...	484
1950	...	926	...	540
1951	...	1,002	...	574
<i>10-year Average</i>		906	...	550
<u>1952</u>	...	<u>958</u>	...	<u>551</u>

### AGE MORTALITY.

The age mortality and the distribution of the deaths between the different quarters of the year are shown by the following table:—

Deaths	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
Under 1 year of age ...	7	5	2	5	19
Between 1 and 2 years ...	—	2	—	—	2
Between 2 and 5 years ...	1	—	—	—	1
Between 5 and 15 years ...	2	1	1	2	6
Between 15 and 25 years ...	1	2	5	6	14
Between 25 and 45 years ...	26	16	15	11	68
Between 45 and 65 years ...	49	64	46	80	239
Between 65 and 75 years ...	77	50	57	84	268
75 years and upwards ...	106	67	54	114	341
Totals ...	269	207	180	302	958



The 1949 Report of the Royal Commission on Population indicated *inter alia* the trend during recent years towards an ageing population and, as one would expect, the number of deaths in the older groups increases at approximately a similar rate. Conversely, the deaths in the lower age groups show a remarkable decline since the beginning of the century.

It will be observed from the following table that during 1952 the deaths occurring at 65 years and upwards accounted for 63.5% of the total compared with a figure of 22.8% for 1901.

Deaths in the age group 0-5 years show an even more striking comparison: in 1901 the deaths in this group amounted to 37.4% whilst the figure for the current year is 2.3%.

Age Group	1901	1911	1921	1931	1952
Under 1 year of age	362	306	175	97	19
Between 1 and 5 years	187	158	80	39	3
Between 5 and 15 years	64	67	58	22	6
Between 15 and 25 years	66	60	67	65	14
Between 25 and 65 years	454	474	466	382	307
65 years and over	335	356	387	529	609
Totals	1,468	1,421	1,243	1,134	958

### MATERNAL MORTALITY

During the year, the following 3 deaths were recorded as being attributable to Puerperal causes:—

<u>Age</u>	<u>Cause</u>
20 years	Acute cardiac dilatation following caesarian section for difficult labour.
26 „	Inversion of uterus and post partum haemorrhage.
28 „	Ectopic tubal gestation—intraperitoneal haemorrhage.

Calculated on these deaths, the Maternal Mortality Rate was 2.26 per thousand total births compared with 4 deaths and a rate of 2.88 for the previous year.

No deaths from Puerperal causes were registered in 1950 and the corresponding figures for 1949, 1948, 1947 and 1946 were 1, 2, 4 and 2 respectively.



## INFANTILE MORTALITY

The Infantile Mortality Rate, measured by the deaths of children under one year of age to the number of live births registered was 14.6 per thousand live births as compared with 21.4 for the previous year. For the County of London the rate was 23.8 and for England and Wales 27.6 per 1,000 related live births.

Whilst providing a record low Infant Mortality Rate, the current year is the first in the history of the Borough to yield a rate below 20, a figure which once was considered an irreducible minimum. The present rate of 14.6 is a decrease of 6.84 from that of 1951 and is 18 lower than the average for the previous 10 years, viz. 32.6.

The total number of deaths during the year was 19, a decrease of 10 from that of 1951.

The deaths of the 19 infants were attributed to the following causes :—

Congenital			Meningococcal			
Malformation	6		Septicaemia	1		
Prematurity	...	4	Bronchitis	...	...	1
Broncho-pneumonia	3		White asphyxia	...	...	1
Atelectasis	...	2	Asphyxia (inhalation of regurgitated food)			1

Of the above, 10 were male and 9 female : 4 died in St. Alfege's Hospital, 1 in Brook Hospital, 8 in other Hospitals and 6 at home.

NEO-NATAL MORTALITY.—Neo-natal mortality, i.e., infants dying before attaining the age of one month, accounted for 10 deaths, equivalent to 52.6% of all infant deaths and giving a Neo-natal Mortality Rate of 7.7 per 1,000 live births. Eight of these neo-natal deaths occurred within the first week of birth, the main causes being Prematurity and Congenital Malformation.

A table showing the causes of and ages at death is included in the Appendix to the Report.

The following table shows the comparative Infantile Mortality Rate for the quinquennial periods since 1931, together with the Rate for 1952 :—



DISTRICT	Average for five years 1931-1935	Average for five years 1936-1940	Average for five years 1941-1945	Average for five years 1946-1950	Year 1952
Greenwich ...	75	50	40	27	14.6
London ...	63	56	60	33	23.8
England & Wales	62	55	50	36	27.6

Bad housing, overcrowding, poor sanitation, low standards of education, all tend to produce higher Infant Mortality Rates. It follows therefore, that the Infant Mortality Rate should provide a good index to the social circumstances of any particular area.

However, Infant Mortality Rates, which are based on the number of births occurring in the same year as the infant deaths are not comparable year by year unless the birth rates remain more or less constant for approximately one-third of the infants dying in any one year will be found to have been born in the previous year.

Again, it must be borne in mind that when dealing with small figures the slightest deviation in the number of deaths tends to misleading fluctuations in the rate.

Consequently care must be exercised when drawing conclusions from any rise or fall in Infant Mortality Rates.

#### REMARKS ON VARIOUS DEATH CAUSES.

Recognising the importance of ensuring as far as possible the uniformity and comparability of statistics in relation to diseases and causes of death, the Registrar-General has, from 1st January, 1950, implemented the Nomenclature Regulations, 1948, as suggested by the World Health Organisation. Although these regulations are not binding on Medical Officers of Health, it is essential that the International Statistical Classification of Diseases, Injuries and Causes of Death, 1948, should be adopted in order that local statistics can be compared with national figures and national with international.

As a result of the adoption of the new classification, it may not be possible accurately to compare all previous figures with those of the current year.



**CLASSIFICATION OF DEATHS.**—It should be borne in mind that the statistical data compiled locally relating to cause of death may not entirely agree with the figures furnished to Local Authorities by the Registrar-General. Classification of the cause of death is taken from one or more causes as stated on the medical certificate in accordance with the rules generally adopted throughout England and Wales.

The Registrar-General is able, in cases where it is deemed desirable, to obtain fuller information from the certifying practitioner. This enables his department to modify the original classification—hence the possibilities of discrepancies in some cases between the figures prepared locally and those referred by the Registrar-General.

**COMMON INFECTIOUS DISEASES.**—No deaths were recorded during the year from the class known as the Common Infectious Diseases which comprises Measles, Scarlet Fever, Diphtheria, Whooping Cough and Diarrhœa. The previous year's total was 3 deaths with a rate of 0.03 per thousand of the population, similar to the figures returned for 1950.

Two deaths were recorded in 1949, 4 in 1948, 6 in 1947 and 9 in 1946.

**SMALLPOX.**—No deaths from Smallpox have been recorded during the year, this year being the 50th since a death from this disease occurred.

**MEASLES.**—There were no deaths arising from this cause during the year—a similar return to that of the previous year. No deaths have been recorded since 1947 when there was one.

**SCARLET FEVER.**—For the sixth year in succession there were no deaths attributed to this cause. One was recorded in 1946, none in 1945 and one in 1944.

**WHOOPING COUGH.**—No deaths were credited to this cause during the current year in comparison with one for the previous year.

One death was registered for each of the years 1947, 1948, 1949 and 1950.

**ENTERIC FEVER.**—There were no deaths arising from this cause during the year and none has been recorded since 1941. Only 3 deaths from Typhoid Fever have been registered during the last twenty years.



DIARRHOEA AND ZYMOTIC ENTERITIS.—For the first time in the history of the Borough no deaths were attributed to this cause.

In the previous year there were 2 deaths, a similar figure being returned for 1950. Figures for 1945, 1946, 1947, 1948 and 1949 were 13, 4, 4, 3 and 1 respectively.

DIPHTHERIA.—Again it is gratifying to report that there were no deaths from Diphtheria during the year under review and that it is now 6 years since one was recorded.

TUBERCULOSIS.—There were 32 deaths from this disease during the year giving a Death Rate of 0.35 compared with 35 deaths and a Rate of 0.39 for the previous year. Again this year's Rate compares very favourably with the average T.B. Death Rate during the previous 10 years, *viz* : 0.75.

Current figures throw into relief the remarkable improvement in the Tuberculosis situation in the Borough during the past 10 years. Deaths from Tuberculosis are exactly one-half and the rate is one third of the corresponding figures for 1942 as the following table will indicate :—

<i>Year</i>	<i>No. of Deaths</i>		<i>Rate</i>	
1942	...	64	...	1.05
1943	...	60	...	0.94
1944	...	50	...	0.81
1945	...	53	...	0.82
1946	...	75	...	0.97
1947	...	69	...	0.82
1948	...	62	...	0.73
1949	...	46	...	0.53
1950	...	44	...	0.49
1951	...	35	...	0.39
10-year Average		55		0.75
1952		32		0.35

Tuberculosis of the Respiratory System is, as usual, credited with the major portion of these deaths, there being 29 attributed



to the cause, equalling a Rate of 0.32 as compared with 0.34 for the previous year.

Locally the deaths were : 7 in East Greenwich ; 4 in West Greenwich ; 2 in St. Nicholas, Deptford ; and 16 in Charlton and Kidbrooke.

The remaining forms of Tuberculosis were responsible for 3 deaths, 1 of which occurred in West Greenwich and 2 in Charlton and Kidbrooke.

CANCER.—Cancer is generally considered to be a disease of middle and old age and, as indicated in my Annual Report for 1950, as the proportion of middle-aged and elderly persons in the population becomes greater, one would normally expect a rise in the incidence of this disease. In addition, improved diagnosis and more accurate certification will effect an apparent rise in the number of cancer deaths. An increase in numbers therefore, is not, *per se*, necessarily an indication of increased morbidity.

Cancer was responsible for a total of 161 deaths giving a rate of 1.77 per thousand, these figures showing a decline of 37 and 0.45 respectively from those of the previous year. The total indicates that one in every six deaths resulted from cancer of one form or another. Since 1901 the yearly percentage of cancer deaths has risen from 4.2 to 16.8, the figure for 1952.

The distribution of the 1952 deaths was as follows : 62 in East Greenwich, 29 in West Greenwich, 5 in St. Nicholas, Deptford and 65 in Charlton and Kidbrooke.

Comparing the current year's figures with those of 1950 and 1951, the sites of the affected parts were :—

	1950	1951	1952
Cancer of Stomach ... ..	30	24	24
„ „ Lung, Bronchus ... ..	26	51	31
„ „ Breast ... ..	12	14	11
„ „ Uterus ... ..	7	11	6
„ „ all Other Sites ... ..	92	98	89
	—	—	—
Totals	167	198	161
	==	==	==



In recent years, there has been a tendency for cancer of the lung to increase and the following table has again been included in order that this trend may be studied :—

DEATHS FROM CANCER OF LUNG  
(including Bronchiogenic Carcinoma)

Year	AGE GROUPS								Totals		Grand Totals	Rate per 1,000 Pop.
	25 and under 45 yrs.		45 and under 65 yrs.		65 and under 75 yrs.		75 and up-wards					
	M	F	M	F	M	F	M	F	M	F		
1946	2	—	12	1	1	—	1	—	16	1	17	0.22
1947	2	—	13	—	8	1	1	—	24	1	25	0.30
1948	1	—	18	1	6	1	1	—	26	2	28	0.33
1949	1	—	11	3	10	1	3	1	25	5	30	0.34
1950	1	1	14	3	5	3	1	1	21	8	29	0.32
1951	1	—	26	3	15	—	3	3	45	6	51	0.57
1952	2	—	15	2	9	1	1	1	27	4	31	0.34
												Average for 7 yrs.
TOTALS	10	1	109	13	54	7	11	6	184	27	211	0.34

Current figures still give a ratio of 7 males to each female death from this cause and the age group 45 to 65 years still proves to be the period of greatest mortality.

Once again I must reiterate that many misconceptions regarding Cancer exist in the minds of the public, e.g., that Cancer is an hereditary disease ; that it is infectious or contagious ; or that chronic irritation or inflammation causes Cancer. Not one of these assumptions has been proved scientifically. Moreover, it is becoming more evident that under certain conditions Cancer is a curable disease but at the moment the most important factor is time. Unfortunately, many cases are beyond cure before advice is taken. At the risk of producing a few hypochondriacs it is obvious that greater efforts must be made to educate the public for the latest available information supports the fact that delay in seeking medical advice is becoming more prolonged.



**VASCULAR LESIONS OF NERVOUS SYSTEM.**—This class, which includes deaths arising from Cerebral Haemorrhage, Embolism and Thrombosis, was responsible for a total of 108 deaths. The age distribution was as follows :—4 between 25 and 45 years ; 23 between 45 and 65 years ; 40 between 65 and 75 years and 41 from 75 years upwards.

Fifty-six deaths occurred in East-Greenwich, 16 in West Greenwich, 3 in St. Nicholas, Deptford and 33 in Charlton and Kidbrooke.

**HEART DISEASE.**—Under the new classifications this disease has been divided into three sub-headings : (a) Coronary Disease, Angina, (b) Hypertension with Heart Disease, and (c) Other Heart Disease.

The total deaths occasioned by these amounted to 287 compared with a figure of 291 for 1951 and, as usual, the deaths from this class occupied the principal place in the classification of diseases. Comparable figures for the years 1946, 1947, 1948, 1949 and 1950 were 240, 283, 223, 250 and 273 respectively.

**DISEASES OF THE RESPIRATORY SYSTEM.**—There were altogether 133 deaths from these diseases, Bronchitis accounting for 74 and Pneumonia (all forms) for 48.

Of the total deaths, 5 were of children under the age of 5 years and 94 were in respect of persons 65 years and over.

The distribution locally was 55 in East Greenwich, 33 in West Greenwich, 3 in St. Nicholas, Deptford, and 42 in Charlton and Kidbrooke.

**INFLUENZA.**—Only one death was attributed to this cause during the year, thus showing a decrease of 18 from that of the previous year.

**DEATHS FROM VIOLENCE.**—These numbered 35 including 6 from Motor Vehicle Accidents, 9 from Suicide and the remainder being accounted for under the heading of 'All Other Accidents.'

Deaths from Motor Vehicle Accidents show a decrease of 3 from those of the previous year, while suicide shows an advance of one.

Much has been made, in recent times, of the serious nature of the increase in deaths due to cancer and heart disease but there has often been a tendency for the case, important though it may be, to be overstated.



From a national and economic standpoint, the child of 12 years who is killed in a road accident is a greater potential loss to the community than a person of over 65 years of age who dies from cancer or a heart disability.

Recently, Dr. D. J. R. Snow, Epidemiologist to the Department of Public Health for Western Australia, has analysed vital statistics with a view to determining the number of 'useful years lost' for each of the major causes of death and his investigations have revealed that on this basis 'automobile and other accidents' head the list as the primary cause of premature death with cancer and coronary disease in 3rd and 5th places respectively; suicide moves up from 13th to 7th position.

It follows that even greater attention should be focussed on accident prevention measures.

**LEPTOSPIROSIS (WEIL'S DISEASE).**—This comparatively rare disease, which is scheduled by the Secretary of State as one coming within the Workmen's Compensation Act, 1925, is often indistinguishable, clinically, from infective hepatitis and is primarily one peculiar to rats. Its onset is marked by fever, enlargement of the liver and spleen and jaundice. Human infection is chiefly brought about by contact with mud, slime or water which has been contaminated by the urine of diseased animals, the leptospira generally entering through a cut, abrasion or mucous membrane.

As one would expect, this complaint is prevalent mainly among sewermen, miners, farmworkers and others of similar occupation.

One fatal case of this spirochaetal jaundice was registered during the year, the man being employed by contractors engaged in building a bridge across Deptford Creek. On admittance to hospital a presumptive diagnosis of Weil's disease was made in respect of this case and as a result two specimens of mud and four of water were obtained from the Deptford Creek for bacteriological examination—they showed no evidence of leptospiral infection.

An occurrence of this nature comes strictly within the jurisdiction of H.M. Factory Inspector but nevertheless advice was given by this department concerning hygiene on the site. Special emphasis was made regarding the provision of protective clothing such as gum boots and rubber gloves as well as proper supervision of ablutions and supply of disinfectant.



## SECTION B

### General Provision of Health and Welfare Services for the Area.

Since July, 1948, the Personal Health Services available to residents of the Borough have been under the control of the London County Council and Dr. Waldron, the Divisional Medical Officer, has kindly supplied me with information and statistics relating to Health Visitors' records, attendances at Infant Welfare Centres, Prophylaxis figures, etc., for 1952, which will be found on the following pages in table form.

In addition, the following details of vitamin products distributed throughout the Borough from the Food Office and Welfare Centres during 1952 have been obtained from the returns issued by the London and South East Regional Food Office:—

Vitamin Product	1st Qtr.	2nd Qtr	3rd Qtr	4th Qtr	Whole Year
<b>Orange Juice (Bottles)</b>					
Average weekly Issues	1,176	1,332	1,550	1,231	1,322
% of Potential	25.3%	28.6%	36.7%	29.2%	29.8%
<b>Cod Liver Oil (Bottles)</b>					
Average weekly Issues	349	320	276	294	310
% of Potential	25.8%	23.6%	22.8%	23.9%	24.5%
<b>A &amp; D Tablets (Packets)</b>					
Average weekly Issues	79	85	84	91	85
% of Potential	29.2%	32.3%	32.0%	37.7%	32.7%



**Health Visitors' Records, Attendances at Infant Welfare Sessions, Prophylaxis figures, etc.**

**1. Health Visiting**

Quarter	Expectant Mothers		Premature Babies		Still-Births		Infants (under 1 year)		Children 1—5 years		Infantile Diseases		Home Helps	Miscellaneous	Un-successful	Total Visits
	1st visit	Re-visit	1st visit	Re-visit	1st visit	Re-visit	1st visit	Re-visit	1st visit	Re-visit	1st visit	Re-visit				
March ...	145	109	18	27	8	6	335	1,317	75	2,903	42	16	2	131	545	5,679
June ...	164	118	12	46	6	1	309	1,147	94	2,511	85	24	2	120	491	5,130
Sept. ...	144	97	4	38	3	—	290	951	65	2,370	141	17	1	135	527	4,783
Dec. ...	108	156	8	36	5	—	338	999	64	2,080	271	47	—	171	638	4,921
Totals	561	480	42	147	22	7	1,272	4,414	298	9,864	539	104	5	557	2,201	20,513

**2. Infant Welfare Clinics**

**(a) Attendances at Infant Welfare Clinics**

Quarter				Sessions	Attendances					
					0-1 year		1-2 years		2-5 years	
					1st	Total	1st	Total	1st	Total
March ...	...	...	...	210	324	4,534	13	1,519	21	1,415
June ...	...	...	...	201	317	4,726	9	1,336	15	1,350
September ...	...	...	...	203	292	4,927	8	1,305	22	1,282
December ...	...	...	...	217	270	4,863	7	1,217	24	1,192
Totals				831	1,203	19,050	37	5,377	82	5,239

(b) Attendances at Special Toddlers Clinics

Quarter	Sessions	Total Attendances	Medically Examined	Found to require Treatment
March ...	26	255	255	17
June ...	25	227	227	10
September ...	26	191	191	13
December ...	26	206	196	15
Totals	103	879	869	55

(c) Attendances at Ante and Post Natal Clinics

Quarter	Sessions		Attendances					
	M.O.	Midwife	First		Total			
			Ante-Natal (current pregnancy)	Post-Natal	Ante-Natal		Post-Natal	
					M.O.	Midwife		
March ...	104	106	341	59	1,213	988	61	
June ...	97	97	273	57	994	855	60	
September ...	103	103	271	57	923	825	61	
December ...	105	102	277	53	985	831	60	
Totals	409	408	1,162	226	4,115	3,499	242	



(d) Attendances at Ante and Post Natal Exercise Classes

Quarter	Sessions	Attendances	
		First	Total
March ... ..	11	11	50
June ... ..	9	6	45
September ... ..	11	7	44
December ... ..	13	14	78
Totals	44	38	217

(e) Attendances at Children's Exercise Classes

Quarter	Sessions	Attendances	
		First	Total
December ... ..	13	12	54

3. Sunlight Treatment

Attendances at Artificial Sunlight Centres

Quarter	Sessions	Attendances	
		First	Total
March ... ..	206	138	2,885
June ... ..	169	55	2,054
September ... ..	176	69	876
December ... ..	185	182	2,189
Totals	736	444	8,004

4. Chiropody Treatment

Attendances at Foot Clinics

Quarter	Sessions	Attendances	
		First	Total
March ... ..	377	293	4,981
June ... ..	361	469	4,876
September ... ..	372	326	4,760
December ... ..	391	270	4,913
Totals	1,501	1,358	19,530

## 5. Dental Treatment

### Attendances at Dental Clinics

Period	Sessions	Nursing & Expectant Mothers		Children under 5 yrs.	
		First Treatm'ts	Total Attend.	First Treatm'ts	Total Attend.
October only	5	6	8	6	19

## 6. Home Help Service

### (a) Analysis of Cases, etc.

	Cases				Home Helps	
	Mater-nity	Tuber-culosis	Others	Total	No. Part Time	Whole Time Equiva-lent
On live Register at :						
1st Jan. '52	30	7	348	385	107	54
31st Dec. '52	4	27	385	416	110	50
Cases attended during 1952 :—	98	40	757	895	—	—

### (b) Supervision

	Effective	Ineffective	Total
Visits made by Organising Staff :	1,631	118	1,749

## 7. Prophylaxis

Cases receiving completed prophylactic treatment during year :—

Diphtheria Immunisation ...	1,079
Whooping Cough Immunisation ...	566
Vaccination ...	541

## 8. District Nursing.

The staff of the Queens District Nursing Association for Charlton and Blackheath made 14,256 visits during the year.

Visits carried out by the Ranyard Nurses were additional to those quoted above.

## 9. Schools (Medical Statistics)

	Minor Ailments	Vision	Nutri-tion	Special Investi-gation Clinic	Dental (from 16.6.52)
No. of Children attending	10,684	—	—	—	—
No. of Attendances	64,195	756	255	194	555
No. of New Cases	—	499	47	59	386
No. of Glasses Ordered	—	182	—	—	—

NOTE : As appropriate children from Greenwich also attend special clinics in Deptford and Woolwich.



### TREATMENT CENTRES AND CLINICS

Particulars relating to the local Health Services throughout the Borough are given below :—

#### INFANT WELFARE CLINICS

	DAY	A.M.	P.M.
Bardsley Lane, S.E.10. ...	Thursday		1.30
Blackheath Hill, S.E.10 ...	Thursday		1.30
Charlton Lane, S.E.7. ...	Tuesday Thursday	9.30	1.30
Chevening Road, S.E.10 ...	Wednesday Thursday Friday	9.30 9.30	1.30
Creek Road, S.E.8. ...	Monday Friday	*9.30	1.30
Fairfield House, S.E.7. ...	Monday Wednesday Friday	9.30 9.30	1.30 1.30 (Toddlers)
Ridgebrook Road, S.E.3. ...	Tuesday	9.30 (Toddlers)	1.30
Shooters Hill Road, S.E.3. ...	Monday Tuesday Wednesday Thursday	9.30	1.30 1.30 1.30

\*Including Children's Exercise Class.

#### ANTE & POST NATAL CLINICS

Note : (a) Doctor in attendance  
(b) Midwife in attendance

Blackheath Hill, S.E.10. ...	Monday		1.30 (ab)
Charlton Lane, S.E.7. ...	Friday		1.30 (ab)
Chevening Road, S.E.10. ...	Tuesday		1.30 (ab)
Creek Road, S.E.8. ...	Tuesday Wednesday	((a) 1st and 3rd)	1.30 (ab) 1.30 (b)
Fairfield House, S.E.7. ...	Thursday		1.30 (ab)
Ridgebrook Road, S.E.3. ...	Thursday		1.30 (b) ((a) alter. weeks) 1.30 (b)
Shooter's Hill Road, S.E.3. ...	Friday		1.30 (ab)

## ARTIFICIAL SUNLIGHT TREATMENT

		DAY	A.M.	P.M.
Charlton Lane, S.E.7.	...	Tuesday Friday	9.30	1.30
Chevening Road, S.E.10	...	Wednesday Friday	9.30 9.30	1.30 1.30
Creek Road, S.E.8.	...	Tuesday Thursday	9.30 9.30	
Fairfield House, S.E.7.	...	Monday Wednesday		1.30 1.30
Shooters Hill Road, S.E.3.	...	Tuesday Thursday	9.30	1.30

## FOOT CLINICS (2/6 per treatment—by appointment only)

Chevening Road, S.E.10 ...	Monday Tuesday Wednesday Thursday Friday Saturday	9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30	1.30-4.30  1.30-8.00 1.30-8.00 1.30-4.30
Fairfield House, S.E.7. ...	Monday Tuesday Wednesday Thursday Friday Saturday	9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30	1.30-4.30 1.30-8.00 1.30-4.30 1.30-8.00
Shooters Hill Road, S.E.3. ...	Monday Tuesday Wednesday Thursday Friday Saturday	 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30 9.30-12.30	1.30-8.00 1.30-4.30 1.30-4.30 1.30-8.00 1.30-4.30
St. Alfege's Hospital S.E.10...	Wednesday Friday	10 - 1	2 - 5 (Diabetic Patients)

## IMMUNISATION AND VACCINATION CLINICS

Chevening Road, S.E.10 ...	Friday	9.30	
Fairfield House, S.E.7. ...	Monday		1.30
Shooters Hill Road, S.E.3. ...	Wednesday		1.30



## CHEST CLINICS (By appointment only).

Maze Hill, S.E.10. ...

DAY	A.M.	P.M.
Monday		2.00
Tuesday	*10.00	2.00
Wednesday	10.00 (men)	2.00 (women)
	(Special A.P. Clinics)	
Thursday	10.00	5 - 6.30 (workers only)
Monday		2.15 - 4.15
Wednesday		2.15 - 4.15
Friday		2.00 - 4.00

T.B. Handicraft Centre ...

## DENTAL CLINIC

Shooters Hill Road, S.E.3 ...

Mon.-Fri	9.30	1.30
Saturday	9.30	

## SCABIES &amp; CLEANSING CLINICS

Tunnel Avenue ...

Daily (Saturdays excepted)	9 - 12 (School Children)	2 - 4 (Adults and Children under school age)
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## WOMEN'S SPECIAL CLINIC (Family Planning Association)

Charlton Lane, S.E.7. ...

Wednesday		2.00
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## MARRIAGE GUIDANCE CENTRE

Shooter's Hill Road, S.E.3 ...

Friday		7.30
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## MINOR AILMENTS CENTRES (for School Children)

Chevening Road, S.E.10. ...

Mon-Fri		1.30
Saturday	8.30	
Mon-Fri	8.30	1.30
Saturday	8.30	
Mon-Fri	8.30	
Saturday	8.30	
Mon-Fri	8.30	1.30
Saturday	8.30	

Kidbrooke Park School, S.E.3.

Maryon Park School

Treatment Centre, S.E.7. ...

Sherington Road

Treatment Centre, S.E.7. ...

## SPEECH THERAPY (for School Children)

	DAY	A.M.	P.M.
Fairfield House, S.E.7. ...	Wednesday		1.30

## NUTRITION &amp; SPECIAL CONSULTATIVE CLINIC (for School Children)

Chevening Road, S.E.10. ...	Tuesday		1.30
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## HOME HELP SERVICE

Applications for this service to be addressed to :—

Divisional Medical Officer  
London County Council,  
Greenwich Sub-Office,  
105, Shooter's Hill Road, S.E.3.

## DISINFECTING STATION

Applications to :—Medical Officer of Health,  
Public Health Department,  
Town Hall, S.E.10.

## HOSPITALS

Brook Hospital (WOOLwich 1172)  
Miller Hospital (TIDeway 1136)  
Royal Herbert Hospital (WOOLwich 1166)  
St. Alfege's Hospital (GREenwich 2655)  
Seamen's Hospital (GREenwich 3433)

## NURSING ASSOCIATIONS.

Queens District Nursing Association for Blackheath & Charlton,  
78, Elliscombe Road, S.E.7. (Tel. GRE. 1675).  
Ranyard Mission,  
Ranyard House,  
11, Taviton Street, W.C.1. (Tel. EUSTon 5507).  
Nursing Sisters of St. John the Divine,  
Watson Street, S.E.8.

## OTHER ORGANISATIONS.

British Red Cross Society,  
Mrs. E. M. Wigley,  
Divisional Director,  
46, Vanbrugh Park, S.E.3 (Tel. GRE. 0157).  
Women's Voluntary Services,  
Mrs. F. Kidd,  
64B, Hyde Vale, S.E.10. (Tel. TID. 3708).  
Citizens' Advice Bureaux,  
71, Rectory Place, S.E.18 (WOOLwich 0047).  
173, Walworth Road, S.E.17. (RODney 2860).

## REGISTRATION OF BIRTHS, DEATHS AND MARRIAGES.

Town Hall, S.E.10.	Mon - Fri	{ 9 a.m. to 12 noon 2 p.m. to 4.30 p.m.
	Fri.	5 p.m. to 7 p.m.
	Sat.	9 a.m. to 11 a.m.



## SECTION C

### Sanitary circumstances of the Area

The tables on pages 72 to 74 summarise, as far as possible, the sanitary work of the Department; from these it will be seen that a total of 20,320 houses and premises have been inspected or re-inspected during the year; 1,185 intimation notices and 210 statutory notices were served.

Registered complaints, numbering 1,232, show a fall of 323 from those of the previous year, but this total is still greatly in excess of the pre-war average of 700.

Routine complaints arise mainly in connection with the deterioration of the older type properties, but under present conditions, application of Sec. 9 of the Housing Act, 1936 can no longer provide a satisfactory method of improving sub-standard houses as the rising costs of labour and materials preclude repairs from being effected at reasonable cost. In this respect, therefore, legal action is gradually being limited to the application of the Nuisance Sections of the Public Health Act.

Despite diligent use of these sections and the introduction of the London County Council (General Powers) Act, 1951, which under Sec. 8 enables a Council to recover expenses incurred in repairing houses in the event of the owner's default, it is clear that these expediences will seldom provide complete or adequate repair. Indeed, it is quite probable that without further legislation the position will deteriorate, for while the rate of provision of new dwellings is barely equivalent to the rate of houses falling into disrepair, so long will it be necessary for the District Inspector to continue to spend a large proportion of his time in covering routine complaints and in re-visits instead of utilising his efforts in preventive functions which would follow from house-to-house inspection.

Several Local Authorities have made representations to the Ministry of Housing and Local Government emphasising the serious



nature of the hindrance occasioned by the Rent Restrictions Acts in the satisfactory repair of dwelling houses and indicating that only changes in legislation are likely to meet the situation.

It would appear that the Minister has the matter under consideration but that he could give no intimation as to when legislation, if considered necessary, would be introduced.

**FACTORIES ACT, 1937.** Under this Act the principal functions are administered by the Ministry of Labour and National Service through H.M. Factory Inspectors. The Sanitary Authority is charged with the duty of enforcing the legislation as to sanitary accommodation in all factories in its area, and in those factories where mechanical power is not used, the following :—

Cleanliness

Ventilation.

Overcrowding.

Drainage of floors.

All factories must have an adequate supply of drinking water from a public main or some other source approved in writing by the Council.

During the year 568 inspections were made by the Council's Inspectors in relation to the 372 registered factories. The latter figure includes 68 premises where mechanical power is not used.

Defects were found in 28 instances, all of which were remedied.

### FACTORIES ACT 1937

Inspections for purposes of provisions as to health.

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	68	61	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ... ..	292	452	4	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	12	55	—	—
TOTAL ... ..	372	568	4	—



## Cases in which defects were found.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1.)...	21	21	—	6	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4)	1	1	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient ...	1	1	—	1	—
(b) Unsuitable or defective	5	5	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ...	—	—	—	—	—
TOTAL ...	28	28	—	8	—

## Outwork—(Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending list to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices served	Prosecutions
Wearing } Making, etc. apparel }	50	—	—	—	—	—
Racquet and tennis balls	1	—	—	—	—	—
Cosaques, Christmas crackers, Christmas stockings, etc. ...	2	—	—	—	—	—
Lampshades ...	23	—	—	—	—	—
TOTAL ...	76	—	—	—	—	—

OUTWORKERS. Twice yearly, February and August, the Factory Act requires all employers of outworkers to forward to the



Local Authority a list giving the names and addresses of all employed in homework during the previous six months.

Notifications received from Greenwich firms of :—

(a) Outworkers resident in the Borough	...	...	12
(b) Outworkers resident outside the Borough	...	...	30

Notifications received from firms outside the Borough of :—

Outworkers resident in the Borough	...	...	140
Total number of Greenwich residents employed as outworkers ( <i>as given in August list</i> )	...	...	76

Premises where homework is carried on were visited on 82 occasions by the Lady Sanitary Inspector. In no instance was it necessary to take action because of infectious disease.

RIVER POLLUTION.—As reported in previous years, smells from the River, due to a permanent concentration of sewage effluent moving up and down with the tides, continue to be a source of complaint and improvement in the position is impossible until the additions visualised at the Northern and Southern Outfalls are complete. These improvements comprise :—

- (i) Diffused air plant to treat 60 million gallons of sedimented sewage per day at Northern Outfall Works (approximate cost £3,250,000).
- (ii) Sludge digestion plant to treat all sludge produced at Northern Outfall Works (approximate cost £2,225,000).
- (iii) Diffused air plant to treat 60 million gallons of sedimented sewage per day at Southern Outfall Works (approximate cost £2,800,000).
- (iv) Sludge digestion plant to treat all sludge produced at Southern Outfall Works (approximate cost £1,515,000).

The London County Council Rivers and Drainage Committee has estimated that projects (i) and (ii) above will take from 1954 to 1958 to complete and Stages (iii) and (iv) from 1958 to 1962.

This Committee stated that “the completion of these works would enable all the sewage at both outfalls to receive efficient sedimentation and two-thirds of the effluents to be further purified by the activated sludge process and should lower the sewer pollution load sufficiently to render the River inoffensive from this source at all times.”

When one remembers that some 25 years ago “sticklebacks” could be netted anywhere along the Greenwich Reach and that it was a common occurrence to see children carrying seaweed away from the River, it is a poor reflection on the ability of modern society to keep its house in order.



## ATMOSPHERIC POLLUTION

Carbon monoxide and hydro-carbons from petrol and diesel engines respectively undoubtedly foul the air, but in the main pollution is caused by emission into the air of smoke from the burning of raw coal. In London the domestic consumption of coal is considered to be responsible for two-thirds of the pollution, the constituents of which may be itemised as :—

1. **Carbonaceous matter**—resulting from incomplete combustion of the volatile part of coal.
2. **Tar**—formed in the process of destructive distillation of bituminous coal.
3. **Ash**—drawn up from the fire by the rush of air passing through the fuel.
4. **Sulphur**—derived from sulphur compounds in coal (eventually forming sulphurous and sulphuric acids).
5. **Grit**—particles of unburnt coal carried away in the draught.

Effects of atmospheric pollution may be summarised thus :—

- (a) *An increase in deaths from respiratory and heart diseases which appears to be proportional to the amount of impurities and length of exposure.*

Although a close relationship between the death rate and atmospheric pollution has been substantiated statistically, no real medical evidence has as yet been advanced in support of this theory. Pneumoconiosis, arising in various industries, is attributed to the inhalation of dust and it is reasonable to suppose that constant exposure to a heavily polluted atmosphere could lead to some disability or aggravate one already existent. A normal reaction to the constant inhalation of dust is a low grade inflammation—the mucous lining of the lung is stimulated to secrete mucous in order to remove the soot, dust ash or other irritant and this can and often does lead to catarrh and bronchitis. In addition, fibrosis resulting from irritation impairs the lungs' elasticity which in turn tends to prevent normal drainage so necessary with respiratory diseases. Besides radio active particles, atmospheric dust is known to contain varying quantities of other carcinogens such as arsenic, benzpyrene and other coal tar products. The latter substances are known to be in greater concentration during the winter months, suggesting very strongly that the domestic stove is at fault. By many Authorities, soot is also considered carcinogenic and it is easy to see how atmospheric pollution becomes linked, rightly or wrongly, with lung cancer.



*(b) Absorption and elimination of ultra-violet rays from sunshine.*

It has been calculated that London loses 300 hours of sunshine per year through fog and smoke and it is a fact that lung cancer in urban areas is noticeably higher than in rural areas. It is possible that the connection between cancer deaths and lack of sunshine could be either that a smoky atmosphere predisposes to lung cancer or that sunshine is important in its prevention.

Under the influence of ultra-violet rays, the ergosterol of the skin is stimulated to manufacture vitamin 'D,' an essential for the anabolism of healthy bones and teeth. Deficiency of vitamin 'D' leads to rickets and dental caries.

*(c) Vegetation becomes stunted.*

It is pertinent to record that the plane tree, which sheds its bark annually, is practically the only tree to flourish in the London area.

*(d) Damage to buildings.*

Sulphur dioxide appears to be the culprit in this respect. At York Minster holes more than 9" deep have been discovered as a result of this form of corrosion, and magnesium sulphate crystals were found in cracks and fissures 20" from the surface of the stonework of the Houses of Parliament. The Office of Works calculates that damage to buildings by the acid amounts to more than £60,000,000 over a 25-year period.

*(e) Avoidable waste of material which could be of immense value to the community.*

A former Minister of Fuel and Power pointed out that 82% of the heat potential of coal is lost by wasteful methods and to reduce that loss to 72% would result in a saving of some 60 million tons of coal per year.

Dr. A. Parker, Director of the Fuel Research Station at Greenwich, commenting on atmospheric pollution, stated that: "it has been estimated that from the 150 million tons of coal burnt raw during the year, 7 million goes straight up into the air in the form of grit, sulphur dioxide and tarry smoke. It costs the country £50,000,000 a year in loss of fuel, repairs, losses to property and materials and in cleaning up the mess."

*(f) Increase in laundry costs.*

An enquiry made just before the recent war revealed the fact that the weekly wash at Manchester took one hour longer than at



Harrogate and that the soap and fuel costs averaged  $7\frac{1}{2}$ d. per week more.

It is unfortunately true that some local authorities feel that because they have no industries, action by them is unnecessary and, again, many authorities accept pollution as a necessary evil. This almost passive acceptance of air pollution by many urban authorities will, in years to come, be considered as reprehensible as the toleration of open sewers in the early days of public health.

At present, limited power to control smoke nuisance is vested in local authorities, but the number of these operating pollution gauges is only 7% of the whole. Despite vigorous efforts made by the National Smoke Abatement Society to improve the situation in this direction, progress has been slow and, as a consequence, information is still somewhat scanty.

However, in December of this year a four-day smoke fog caused the deaths of some 4,000 people in the London area and forcibly brought the question of atmospheric pollution, albeit in many instances only temporarily, to the notice of the public in general. As a result, the Government were stimulated into setting up an Investigating Committee.

This Investigating Committee, presumably, will examine the whole legislative field and make recommendations. It seems that several procedures could be adopted as a beginning.

Firstly, the designation and creation of smokeless areas in large cities within which all domestic grates would be of the smokeless fuel type and the suitable modification of factory plant to eliminate smoke and grit emission.

Secondly, more stringent laws should be enacted with precise standards laid down and easily enforced legally.

Thirdly, all new dwellings built either by private builder or local authorities should be fitted with smokeless fuel fires. The open grate should be entirely eliminated.

These measures would at least be a start on what will be a tremendous task which will eventually enhance the appearance of our cities and purify and clarify our atmosphere while reducing the annual mortality of our older people from lung and heart complaints in the depths of winter.

The position in regard to atmospheric pollution is a national, nay, an international scandal, which must be handled with resolution and courage, unencumbered by foolish and uninformed prejudice or selfish vested interests.



## THE LONDON FOG

*General.*—In the early morning of Friday, 5th December, high barometric pressure, low ground temperature, high relative humidity and absence of wind resulted in a dense fog over the London area which persisted until the morning of the following Tuesday, December, 9th.

The first indications of the serious nature of this fog became manifest at the Smithfield Cattle Show, when numbers of first-grade cattle rapidly became distressed and died in a matter of hours.

Within a day or so many Londoners exhibited somewhat similar symptoms and it later transpired that the number of deaths registered during the week ended 6th December and the succeeding three or four weeks was greatly in excess of the normal or average for that time of year, and also that the increase was associated with the fog. Dr. W. P. D. Logan, Chief Medical Statistician of the General Register Office, has estimated that this smoke-fog, now colloquially known as "smog," was responsible for approximately 4,000 deaths in the Greater London area, indicating a catastrophe of the first magnitude. Further, the Ministry of Health has recently stated that this same fog cost the National Health Service some £400,000 in prescriptions alone.

*Pollution at Greenwich.*—It is a regrettable fact that the only records of atmospheric pollution in the Greenwich area are maintained at the Fuel Research Station at Blackwall Lane. Dr. Wilkins, Officer-in-Charge of the Atmospheric Pollution Section, to whom I am indebted for permission to make use of data compiled at the Station, has intimated that "data obtained at the Station cannot be considered as typical for more than a very small corner of the Borough. Much of the pollution observed in the neighbourhood of the Fuel Research Station is of a local character and in the prevailing winds much of this airborne material is soon carried over the River. Furthermore, from other tentative information, we are of the opinion that the pattern of pollution in Greenwich is unusually complicated, possibly as a result of the distribution of the sources of pollution and the topography of the district. The indication are that, for this and other reasons, there are considerable differences between the degree of pollution from one part of the Borough to another; but, except for the immediate neighbourhood of the Research Station, we know next to nothing about the amounts or distribution of pollution in Greenwich."



The following tables and graphs indicate the pollution sustained during the year and emphasise the effect of the increase in atmospheric pollution which occurred at the beginning of December at the time of the "smoke-fog" and which occasioned such a devastating effect on life and property.

Observations concerning rainfall, deposited matter and sulphur dioxide are given in Table I. The deposited matter, expressed in tons per square mile, is divided into total insoluble and total soluble deposit. The sulphur dioxide figures give a rate of sulphation as measured by the lead-peroxide instrument and are expressed in milligrammes of  $\text{SO}_3$  per day per  $100 \text{ cm}^2$ .

TABLE I.—Rainfall, Monthly Deposit in Tons per Square Mile and Sulphur Dioxide by the Lead-Peroxide Method.

Month & Year		Rain- fall	Insoluble Deposit	Soluble Deposit	Total Solids	SO <sub>3</sub> mg./day/100 cm <sup>2</sup> of Batch A Lead Peroxide
		mm.	tons per square mile			
October	1951	26	42.36	12.30	54.66	2.82
November	"	104	27.69	11.26	38.95	2.37
December	"	56	35.53	12.89	48.42	1.49
January	1952	38	32.96	24.50	57.45	2.67
February	"	21	36.19	11.35	47.54	3.95
March	"	61	23.68	9.04	32.72	1.31
April	"	26	31.04	8.43	39.47	1.91
May	"	19	27.72	7.74	35.46	1.31
June	"	38	28.21	9.39	37.60	0.91
July	"	7	14.49	3.45	17.94	*
August	"	45	26.86	6.64	33.50	1.91
September	"	*	*	*	*	1.22
October	"	68	35.30	11.24	46.54	2.20
November	"	88	61.62	16.32	77.94	*
December	"	66	41.83	16.18	58.01	3.02†
January	1953	10	19.43	5.21	24.64	2.08‡
February	"	40	40.74	9.92	50.66	1.88

\* No figures available.

† Lead-peroxide cylinder exposed for 34 days, 28th November to 1st January.

‡ Lead-peroxide cylinder exposed for 28 days, 1st January to 29th January.



Besides giving the pH value of rainfall, Table II compares the analysis of the solids deposited in December 1951 with those of 1952.

TABLE II—Rainfall and Deposited Matter

(Deposited Matter in tons per square mile per month)

	Dec. 1951	Dec. 1952
Rainfall	56	66
mm.	4.37	4.37
pH value		
<b>Deposited Matter</b>		
Ca	1.61	1.57
Cl	1.95	2.34
SO <sub>4</sub>	5.94	0.99
<i>Total Dissolved Matter</i>	12.89	16.18
Soluble in CS <sub>2</sub>	0.37	1.97
Other combustible	14.44	17.10
Ash	20.72	22.76
<i>Total Insoluble Matter</i>	35.53	14.83
<b>TOTAL SOLIDS</b>	48.42	58.01

An overall picture of the amount of solids, soluble and insoluble, deposited each month is given in Graph 'A' and it will be apparent that the curve of monthly registered deaths which has been superimposed, follows very generally, the line indicating the pollution.

Graph 'B' gives the monthly averages of air pollution by Sulphur Dioxide and Smoke, together with the highest daily average concentrations.

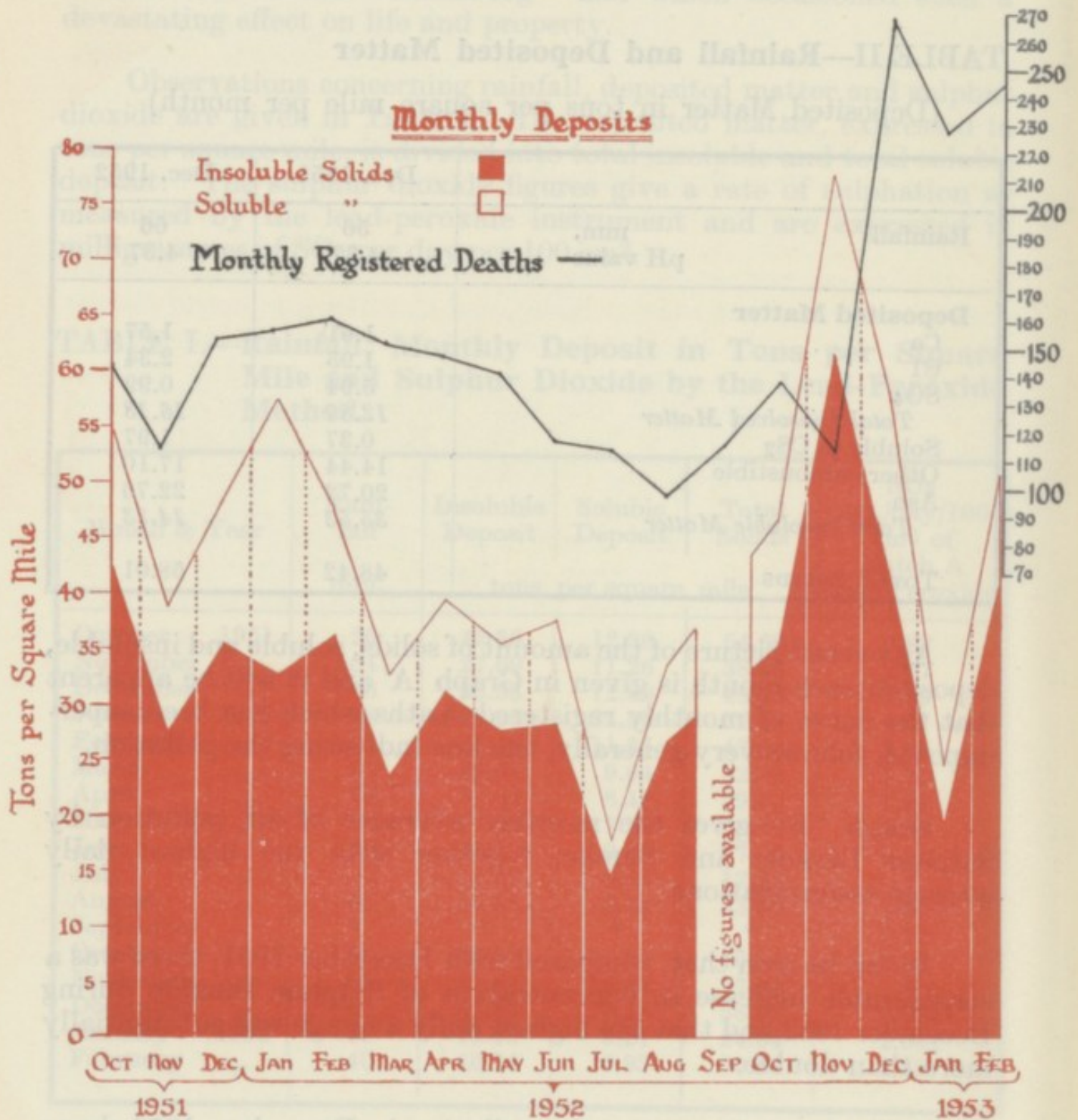
It can be seen that, compared with December 1951, there was a considerable increase in concentration of Sulphur Dioxide during December 1952 and that the highest daily average was substantially more than double.

With Smoke, however, the pollution in December, 1952 shows only a comparatively small increase over the same period in 1951, although again the highest daily concentration was roughly double.

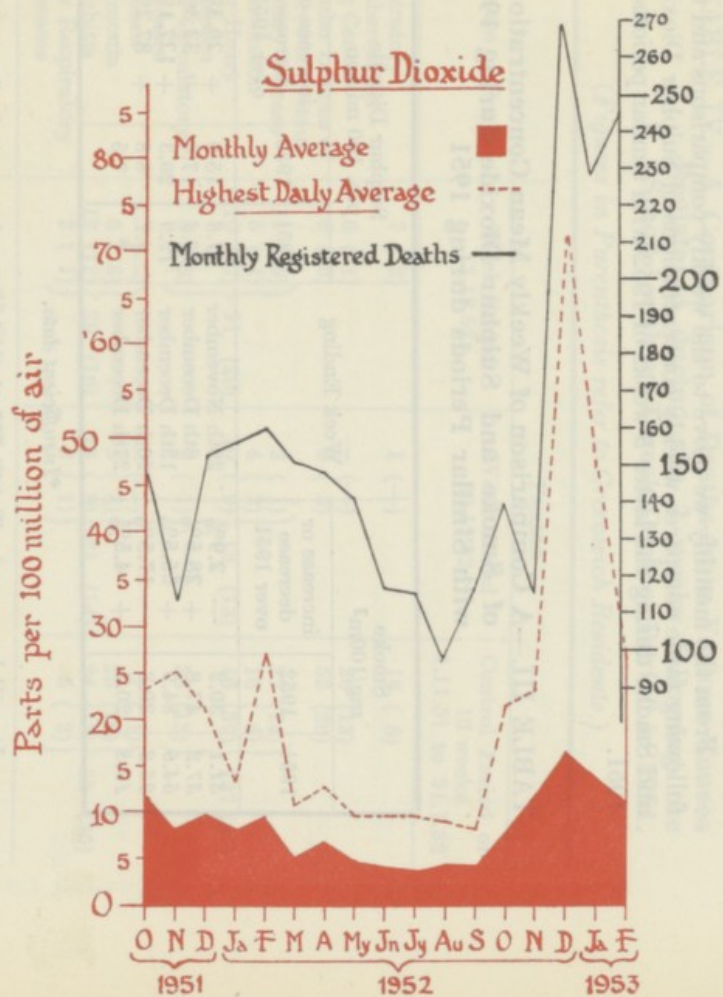
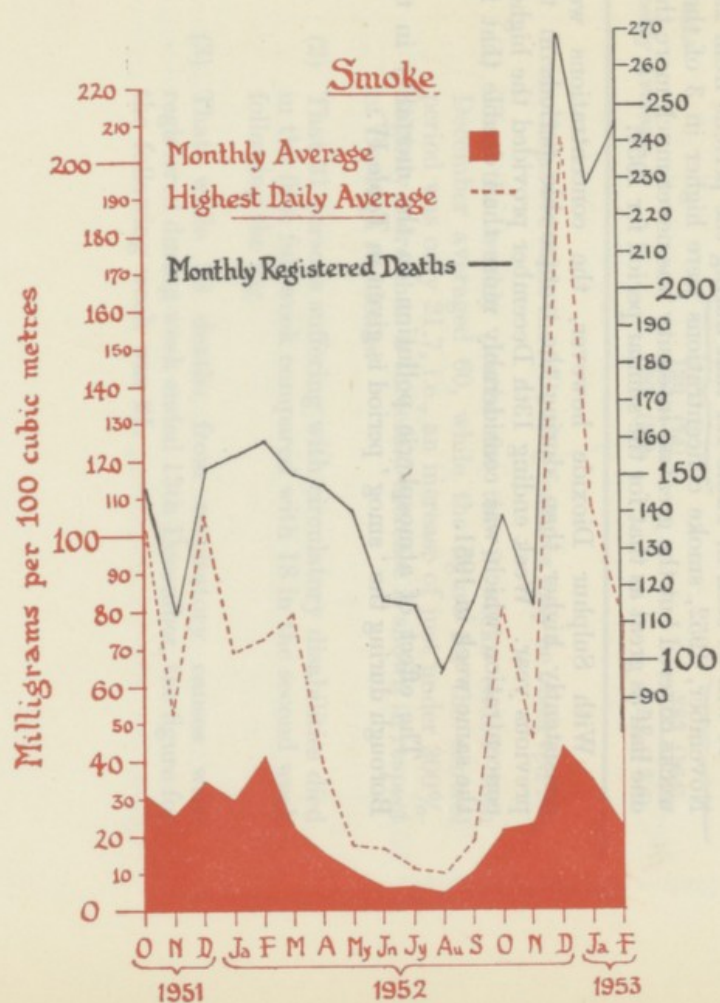
Once more the superimposed 'monthly registered deaths' curves tend to follow those of Sulphur Dioxide and Smoke concentrations.



GRAPH 'A'—Registered Deaths in Relation to Monthly Deposits



GRAPH 'B'—Registered Deaths in Relation to Monthly and Daily Concentrations of SO<sub>2</sub> and Smoke





From the monthly we move to the weekly comparisons and the following table compares weekly concentrations of Sulphur Dioxide and Smoke during the latter 5 weeks of 1952 with similar periods in 1951.

TABLE III.—A Comparison of Weekly Mean Concentrations of Smoke and Sulphur Dioxide during 1952 with Similar Periods during 1951

Smoke mg/100m <sup>3</sup>			Week Ending	Sulphur Dioxide p.p. 100 million		
1951	1952	increase or decrease over 1951		1951	1952	increase or decrease over 1951
31.1	30.2	— 2.9%	29th November	11.6	15.0	+ 29.3%
37.2	47.8	+ 28.5%	6th December	13.3	17.6	+ 32.3%
54.6	84.9	+ 55.5%	13th December	12.9	29.3	+ 127.1%
25.2	20.8	— 17.5%	20th December	4.7	8.8	+ 87.2%
19.8	20.7	+ 4.5%	27th December	*	7.5	—

*\*Insufficient data.*

It will be seen in Table III that during the periods from 29th November, 1952, smoke concentrations were higher in 3 of the 5 weeks covered but the greatest intensity was never much more than one half as great as that for the similar period for 1951.

With Sulphur Dioxide however, the concentrations were consistently higher than during the comparable periods in the previous year. Week ending 13th December provided the highest concentration which was considerably more than double that for the same week in 1951.

The effect of atmospheric pollution on the mortality in the Borough during the 'smog' period is given in Table IV.



TABLE IV.—A Comparison of Deaths from Various Causes Registered during the 2 weeks following the 'Smog' with a 13 week Control Period in 1951.

(Figures in Parenthesis refer to Greenwich Residents.)

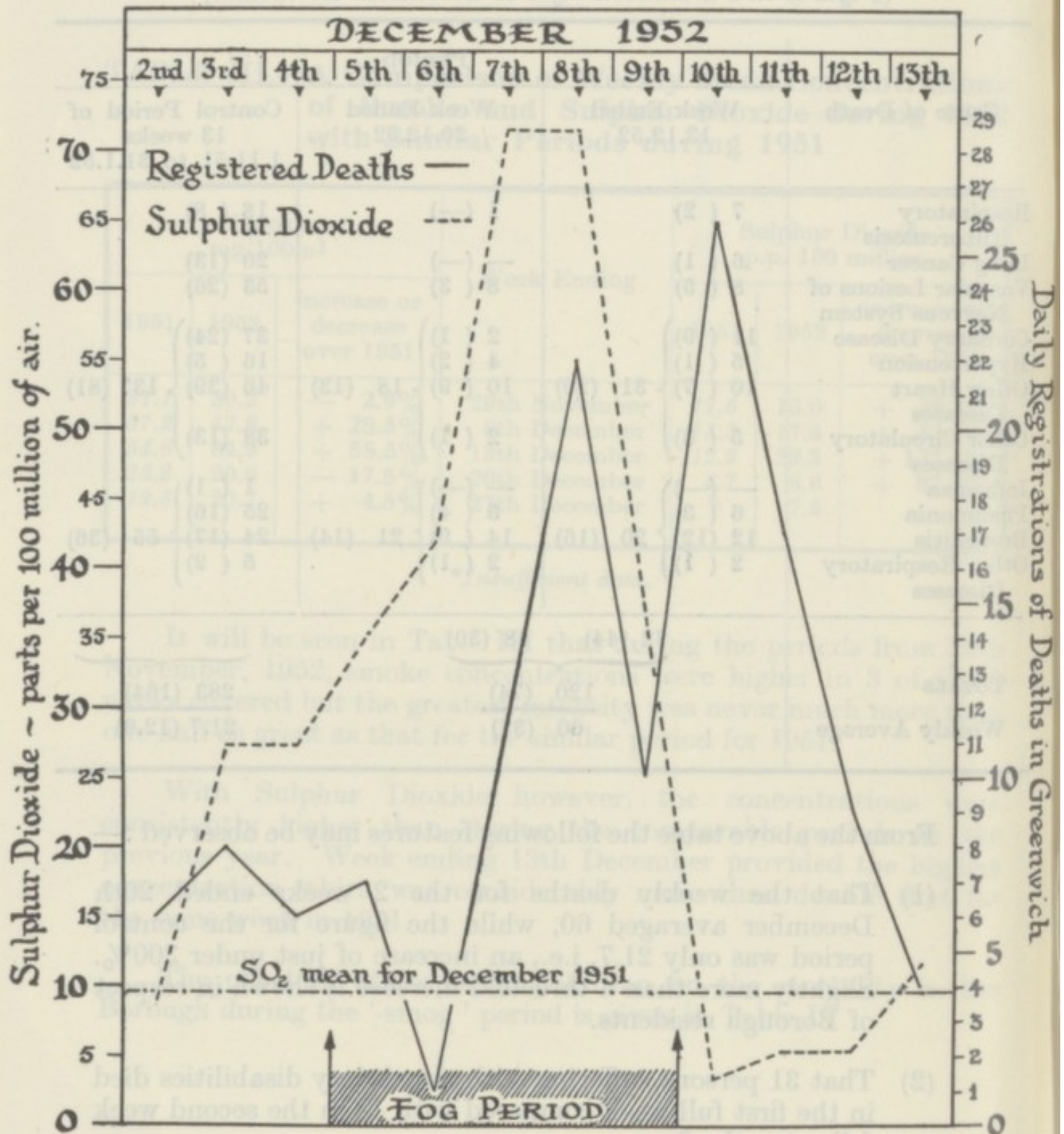
Cause of Death	PERIOD		
	Week Ended 13.12.52	Week Ended 20.12.52	Control Period of 13 weeks 1.11.51 to 31.1.52
Respiratory	7 ( 2)	1 (—)	18 ( 8)
Tuberculosis	6 ( 1)	— (—)	20 (13)
Lung Cancer	8 ( 5)	8 ( 3)	53 (26)
Vascular Lesions of Nervous System	11 ( 9)	2 ( 1)	37 (24)
Coronary Disease	5 ( 1)	4 ( 2)	16 ( 5)
Hypertension	10 ( 7)	10 ( 9)	46 (39)
Other Heart Diseases	5 ( 3)	2 ( 1)	38 (13)
Other Circulatory Diseases	— (—)	— (—)	1 ( 1)
Influenza	6 ( 3)	5 ( 4)	25 (16)
Pneumonia	12 (12)	14 ( 9)	24 (17)
Bronchitis	2 ( 1)	2 ( 1)	5 ( 2)
Other Respiratory Diseases			
	72 (44)	48 (30)	
TOTALS	120 (74)		283 (164)
Weekly Average	60 (37)		21.7 (12.6)

From the above table the following features may be observed :—

- (1) That the weekly deaths for the 2 weeks ended 20th December averaged 60, while the figure for the control period was only 21.7, i.e., an increase of just under 300%. Slightly more than a threefold increase is shown in respect of Borough residents.
- (2) That 31 persons suffering with circulatory disabilities died in the first full week compared with 18 in the second week following the fog.
- (3) That while 20 deaths from respiratory causes were registered during week ended 13th December, the figure for the following week was 21.



GRAPH "C"—Daily concentrations of sulphur dioxide before, during and after the fog period with the daily registered deaths.



This graph shows clearly the sudden increase in daily death registrations following the rise in sulphur dioxide concentration from the 5th—8th December.



It would appear from these figures that people already affected with circulatory disturbance were unable to sustain the extra strain thrown upon the lungs by the heavy pollution and succumbed very quickly.

In contrast, the general effect on sufferers from respiratory disease was more prolonged but none the less fatal. (Exceptions to this were Pulmonary Tuberculosis and lung Cancer—sufferers from these complaints appeared to be affected almost immediately).

Without affecting to draw any conclusions, it may be mentioned, as a point of interest, that further investigation of Greenwich deaths due to respiratory diseases registered during the two weeks covered by Table IV has revealed that approximately 80% of these occurred in the lower and more congested regions in close proximity to the River and the industrial areas—the higher portions of the Borough, such as Blackheath and Kidbrooke, being little affected.

Before any effort is made to correlate or draw any inference from the foregoing data it must be remembered,

- (a) that the records used were obtained from only one station ;
- (b) that so far as atmospheric pollution is concerned this station may be considered as being located in one of the darker spots of the Borough ; and
- (c) that on an average the wind blows from one quarter of the circle around West-South-West for half the year and from the reverse quarter around East-North-East and each of the other quarters for one-sixth of the time. The resultant effect is to send much of our atmospheric pollution to the North and East.

**OBSERVATIONS.**—From the information available it would appear that some relationship may exist between the number of deaths registered and atmospheric pollution, for the graph curves are somewhat similar. Deposited solids, however, constitute a constant factor in the life of the Borough and although an increase in these solids was evident during the “Smog” period, it was hardly sufficient to cause such a rise in mortality and it is reasonable to suppose that some other factor was involved.

In normal atmospheric conditions smoke and sulphur dioxide, being very light, are rapidly whisked away into the upper air by the prevailing air currents. However, during the fog period a temperature inversion served to act as a lid or umbrella and, with the absence of wind, these substances and other products of combustion were confined to the lower regions causing a steep rise in the



monthly concentrations. Indeed, the highest daily concentrations of both smoke and sulphur dioxide occurred on 7th and 8th December.

Deaths began to increase sharply on the 8th and continued at an abnormally high level until the 13th after which there was a gradual return to normal figures. This rise and fall of deaths follows closely the pattern of the daily concentrations of sulphur dioxide in the atmosphere.

Sulphur dioxide is an irritant gas known to cause damage to lung tissue and there would appear from our observations to be a direct relationship between the concentration of  $\text{SO}_2$  in the atmosphere and the deaths from respiratory and circulatory causes.

**DEFECTIVE DWELLINGS.—REPAIRS.**—With regard to houses found not to be in a reasonable state of repair, the following procedure, classified under three headings, is generally adopted :—

(1) *Complaints from or on behalf of the occupier.*—The District Sanitary Inspector makes inspection and an intimation is sent to the owner specifying the defect and nature of nuisance found. Where necessary, the circumstances are reported to the Public Health Committee for authority to serve a Statutory Notice to enforce abatement of the nuisance. The premises are re-inspected by the Sanitary Inspector and, if work required is not executed within a reasonable period, Statutory Notice is served. In cases of non-compliance the Town Clerk is instructed to institute proceedings.

(2) *Sanitary defects due to depreciation of property.*—Depreciation of property usually occurs as a result of the owners' inability to carry out repairs during the war period. A Notice is served on the owner by the Sanitary Inspector, and where expenditure exceeds £200 (*from 1st January, 1953 this amount has been raised to £500*) it is necessary for a licence to be obtained before the work is allowed to proceed.

(3) *Housing defects.*—These are cases where the conditions are such that they cannot be remedied under the procedure of the Public Health (London) Act, 1936, and are dealt with under the Housing Act, 1936, as being houses unfit for human habitation. Representations are made to the Public Health Committee to consider as to whether such houses can be repaired at a reasonable cost having regard to the value of the premises, or whether Closing and Demolition Orders should be made.



**HOUSES LET IN LODGINGS.**—The L.C.C. Bye-laws made under Section 6 of the Housing Act, 1936, define a house let in lodgings as one which is occupied or is of a type suitable for occupation by persons of the working classes and let in lodgings or occupied by members of more than one family. These dwellings are subject to registration and must comply with certain requirements as to sanitation, cleanliness, etc.

The number of houses on the Register at the end of the year was 12; these have been visited by the Lady Sanitary Inspector on 31 occasions.

**HEATING APPLIANCES (FIREGUARDS) ACT 1952.**—This Act has been introduced in order to prohibit the sale of or letting of certain heating appliances without an effective fireguard; and for purposes connected therewith.

Regulations are subsequently to be made by the Secretary of State concerning the date of operation and the standard of fireguards required to be fitted to gas and electric fires and oil heaters which without guards would be likely to injure by burning.

**RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACTS, 1920/39**—Under the provisions of these Acts landlords are permitted to make certain increases of rent and tenants whose houses are not in all respects reasonably fit for human habitation may apply to the Sanitary Authority for a certificate to this effect enabling them to suspend the payment of increased rent until the necessary works shall have been completed to the satisfaction of the Sanitary Authority.

During the year 3 applications for certificates were received and duly granted.

Landlords may also apply to the Sanitary Authority for a report to the effect that necessary works have been executed to the satisfaction of the Council.

One application was received and a report granted.

All applications whether for certificates or reports, must be accompanied by the statutory fee of one shilling.

**PHARMACY AND POISONS ACT, 1933.**—This Act came into force on 1st May, 1936, and has for its object closer control of the sale of poisons and poisonous substances. Under it the Medical Officer of Health and the Sanitary Inspectors are appointed to carry out the provisions referred to in Part II of the Poisons List. These chiefly relate to the Sale of Poisons used for domestic, horticultural and sanitary purposes.



The Poisons List Order, 1952, introduced during the year but operative from 1st January 1953, revises names and adds other substances to the Poisons Lists, Parts I and II; the latter were subsequently amended by the Poisons Rules, 1952, Nos. 1 and 2, operative from the same date.

During the year 7 applications for licences to sell poisons under Part II were received and 62 vendors applied for retention in the Council's List. All were duly considered and approved.

Fifteen inspections were carried out in accordance with the above Act.

**SHOPS ACT, 1950.**—This Act, which became effective from 1st October, 1950, superseded the Act of 1934 and, with amendments, was virtually a consolidation of the Shops Acts, 1912/1938 and their associated Regulations.

The Council is responsible, *inter alia*, for ensuring that adequate and proper sanitary accommodation and washing facilities are available at each shop in the Borough. In the event of such accommodation not being available at the premises the Council is empowered under Section 38 of the Act to grant exemption from this provision if it is satisfied that suitable facilities are readily accessible elsewhere.

During the year 3 Exemption Certificates were granted, 2 in respect of sanitary accommodation and 1 in respect of sanitary and washing facilities.

At the end of the year 15 such exemption certificates were in operation.

Routine inspections were carried out under the abovementioned Act on 382 occasions.

**RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.**—The introduction of this Act, which became operative on the 1st November, 1951, brought about the repeal of the previous Rag and Flock Acts of 1911 and 1928 as well as Section 136 of the Public Health (London) Act, 1936.

This Act seeks to secure the use of clean filling materials in upholstered or other articles which are stuffed or lined and it can be said to be a consolidation of the previous Acts of 1911 and 1928.

It is the duty of the Local Authority to enforce the Act and the Medical Officer of Health and the Sanitary Inspectors, being duly authorised officers of the Council, have the right at all reasonable times and on production of their 'authority' to enter and inspect premises and take samples for the purposes of the Act.



Three premises, at which filling and upholstering with new materials is carried out, remained on the register at the end of the year, and one licence was issued in respect of the manufacture of Rag Flock.

Regulations prescribe the standards of cleanliness for each type of filling material to which the Act applies and under the Rag Flock and Other Filling Materials Regulations, 1951, five samples were obtained and submitted for examination. All proved satisfactory.

**PET ANIMALS ACT, 1951.**—This Act, introduced to regulate the sale of pet animals with particular reference to their welfare prior to sale, became operative from 1st April of this year, since when it became an offence to keep a pet shop except under licence from the Local Authority.

The Act defines “the keeping of a pet shop” as the carrying on at premises of any nature (including a private dwelling) of a business of selling animals as pets and as including the keeping of animals in such premises with a view to their being sold in the course of such business, whether by the keeper thereof or by any other person. The term “animal” includes any form of vertebrate. “Premises” includes any stall or barrow *in a market but not any stall elsewhere or any part of a street or public place.*

Licences, renewable annually, are issued on payment of 10/- and are valid to the 31st December of each year.

When considering applications for licences, attention must be paid by the Council to the following conditions :—

- (a) that animals will at all times be kept in accommodation suitable as regards size, temperature, lighting, ventilation and cleanliness ;
- (b) that animals will be adequately supplied with suitable food and drink, and (so far as necessary) visited at suitable intervals ;
- (c) that mammals will not be sold at too early an age ;
- (d) that all reasonable precautions will be taken to prevent spread of infectious disease among animals ;
- (e) that appropriate steps will be taken in case of fire or other emergency.

In this connection, a schedule concerning the method of securing these conditions was drawn up by the Metropolitan Boroughs' Standing Joint Committee and was adopted by the Council in its entirety.



During the year three applications for licences were received, approved and licences subsequently issued after appropriate inspections had been carried out by the Sanitary Inspectors concerned.

**DRAINAGE AND SEWERAGE.**—During the year 641 drains were tested, 455 were opened, cleansed or repaired and there were 1,376 constructions and re-constructions, alterations and improvements effected.

Under the London County Council (General Powers) Act, 1951, some amendment to the Public Health (London) Act, 1936, has been made regarding appeals and the recovery of expenses in connection with drainage work.

Only two cesspools remain in use in the Borough and under the Borough Engineer's direction these are emptied on request.

Seventy-eight plans of drainage and other sanitary works relating to existing and new buildings were examined and approved.

**WATER SUPPLY.**—The whole of the Borough is supplied with water by the Metropolitan Water Board which is a Statutory undertaking, and the responsibility for its purity rests with that Authority. There are 22,255 dwellings with direct connection to the Board's mains.

No complaints were received during the year as to taste or possible contamination caused by insects or silt.

During the year 463 water supply certificates were granted under Section 95 of the Public Health (London) Act, 1936. Water fittings have been amended in 146 cases and extra water supply to a tenement house was provided.

**UNDERGROUND WATER SUPPLIES (WELLS).**—In August, 1947, at the request of the Ministry of Health, a survey of underground water supplies was made and full particulars were given in the Report for that year.

In all, 40 wells are listed, only 2 of which are used for the supply of water for drinking purposes. Of the remaining 38 wells, 13 are used for commercial purposes and 25 disused.

As far as this Borough is concerned the two wells providing drinking water are properly supervised and have shown no sign of deterioration.



Water from one of these wells is used by the Metropolitan Water Board to supplement the public water supply and is subjected to daily tests by that Authority for purity and palatability. Water from the other well is regularly tested by the commercial firm concerned.

**SCAVENGING AND REFUSE DISPOSAL.**—The collection of refuse in the Borough is under the control of the Borough Engineer who has kindly supplied me with the following information :—

“ During 1952 the amount of house and trade refuse and street sweepings collected amounted to 19,422 tons, and 1,514 tons respectively, the greater portion of which was tipped into barges alongside the Jetty at the Council's Tunnel Avenue Depot, and taken down to the river to controlled refuse tips in the Thames Estuary.

These tonnages are slightly under those for last year, but varying circumstances account for this. In addition quantities of unsound foodstuffs condemned by the Council's Food Inspectors were collected and disposed of.

The collection of paper and other salvageable material was continued throughout the year, a considerable income being derived therefrom, and the Council decided to continue this scheme without modification.

The collection of waste food continued, and a letter was received from the Minister of Agriculture and Fisheries conveying the Government's appreciation of the efforts made in this matter by Local Authorities and asking for continued co-operation and effort.

Continuing their policy to modernise the refuse collection system, orders were placed for three new refuse collection vehicles.

Meetings were held with representatives of the adjoining Boroughs to discuss the grouping scheme for refuse disposal; further adaptations of the dust shoots on various Housing Estates were carried out in order that the “totally enclosed” system of collection may be operated: and works of repair and improvement were carried out at the Council's Jetty.

The question of the survey of sites for refuse tips affecting London as a whole was again given consideration and the Council agreed, with other Boroughs, to contribute a sum of money towards this, and also agreed that active steps should be taken to secure that suitable land should be scheduled and protected under Town Planning powers.”



## RODENT CONTROL

*General.*—During the year the Rodent Control scheme, as approved by the Ministry of Agriculture and Fisheries, has been continued. A total of 2,556 investigations were made and infestations were found to exist at 530 premises, 24 factories and warehouses, 19 shops, 4 hospitals and 8 bombed sites. There were 12 major infestations, 7 of them caused by the common rat and 5 by the ship rat. Periodical treatments were carried out in each of these infestations which were all in large industrial premises. Throughout the year there were 15 instances only of re-infestation after treatment, 2 attributed to rats and 13 to mice.

The monthly average of complaints received was 43 as compared with 46 last year.

In 48 instances rat infestation was found to be due to defective drainage; all of these defects were repaired after service of Intimation Notices.

Block treatments were carried out in 22 small areas involving 363 premises.

Bombed sites and dumps have been test-baited but in only 3 instances was it found necessary to carry out treatment.

Frequent calls have been made on the services of the Borough Engineer's staff to open up paving to trace the source of infestation and this service has been readily available.

The premises of Messrs. Robinson's Mills, Deptford Bridge, have been receiving continuous treatment throughout the year and over 1,021 rats have been recovered from traps used inside the premises. Baiting and poisoning methods also have been used on open sites nearby and the infestation has been kept under control by these means. It is suspected that new colonies of rats invade the property from the lighters and barges which are constantly discharging cargoes at the wharves.

The Blue Cross Kennels, Shooter's Hill Road, were given 3 treatments with excellent results and "Warfarin" was used on one occasion. A small section of old wooden kennels still remains and until this is replaced by brick-built kennels with concrete runs, re-infestation is always possible.

Owners and occupiers still continue to take advantage of the rodent control service which has resulted in the early notification of the presence of rats. Only rarely are rats discovered during routine investigation.



Many of the large industrial firms in the Borough continue to use the Rodent Control Service and in most cases regular treatments are carried out, for which service a charge is made.

The Rodent Control personnel have performed their duties with diligence throughout the year and have given the Department good service.

*Prevention of Damage by Pests Act, 1949.*—Under previous legislation responsibility for the eradication of rats and mice rested with each individual occupier but the introduction of the Prevention of Damage by Pests Act, 1949, whilst repealing the Rats and Mice (Destruction) Act, 1919, and the Infestation Order, 1943, places the onus for the destruction of these pests on Local Authorities. The 1949 Act also makes it obligatory for occupiers to notify the Local Authority of any rodent infestation.

Rats and mice are notorious not only for the wholesale destruction and fouling of foodstuffs and for the structural damage they cause to buildings, but also for their part in the spread of disease. Leptospirosis (Weil's disease) is primarily a disease of rats and is one which can be fatal to man. The disease is transmitted by means of food, dust, mud, slime and water which has become contaminated by urine or faeces from infected rats. Efficient rodent control is the first and most important defence against this type of disease.

One fatal case of Weil's disease occurred to a resident of the Borough who was employed by a Contractor engaged in the building of a bridge across Deptford Creek.

It has not been found necessary during the year to take legal action to enforce the provisions of the Act.

The following report was submitted to the Ministry of Agriculture and Fisheries for the year 1952 :—

Anti-Flu and Anti-Mosquito Campaign.—During the summer period, April to September, the campaign was carried out on similar lines to those of previous years, a large number of motor-cycles and sidecars being employed in the anti-flu and anti-mosquito work.

The major factors to be controlled include drainage, water pipes, ponds, ditches, water and food refuse, etc., etc.

One of the main objects of the anti-flu and anti-mosquito campaign is to prevent the spread of disease by the removal of breeding places for mosquitoes and flies.



	Type of Property				Total
	Local Authority	Dwelling Houses	Agri-cultural	All other (includg. Business & Industrial)	
1. Total number of properties in Local Authority's District	32	21,457	—	3,244	24,733
2. Number of properties inspected by the Local Authority during 1952 as a result of	(a) 19	530	—	47	596
(a) notification or	(b) 11	1,775	—	174	1,960
(b) otherwise					
3. Number of properties (under 2) found to be infested by rats	Major —	61	—	13	74
	Minor —	304	—	49	353
4. Number of properties (under 2) found to be seriously infested by mice	—	193	—	12	205
5. Number of infested properties (under 3 & 4) treated by the Local Authority	19	558	—	69	646
6. Number of Notices served under Sec. 4:—					
(1) Treatment	—	—	—	—	—
(2) Structural Works (i.e. Proofing)	—	—	—	—	—
TOTAL	81	24,878	—	3,608	28,567
7. Number of cases in which default action was taken by Local Authority following issue of Notice under Section 4	—	—	—	—	—
8. Legal Proceedings	—	—	—	—	—
9. Number of "block" control schemes carried out	22 (involving 363 premises).				



Following experiments by the Ministry of Agriculture and Fisheries, "Warfarin," the bait containing the anti-coagulant chemical hydroxycoumarin, has been used wherever practicable and excellent results have been obtained. The fact that this preparation can be used in very low concentrations makes it an admirable all-purpose bait and relatively safe when employed in the proximity of humans and domestic animals.

*Baiting of Sewers.*—The Borough Engineer has kindly supplied me with the undermentioned information of the treatments carried out in the Council's sewers in connection with the scheme :—

Details	Date of Treatment	
	1st to 19th Dec., 1952	26th May to 16th June, 1952
1. No. of Manholes in foul and connected systems ... ..	1,165	1,165
2. Bait base and poison used ...	Sausage rusk and zinc phosphide	
3. No. of Manholes baited ...	1,165	1,165
4. No. of Manholes showing prebait takes ... ..	707	698
5. No. of Manholes showing complete prebait take (on one or both days) ... ..	423	350
6. Schemes of baiting used (e.g.; consecutive days or 1st, 3rd and 5th days) ... ..	Consecutive days	Consecutive days
7. No. of Manholes test-baited in conjunction with this treatment and not included in No. 3 above ... ..	Nil	Nil
<i>Remarks:</i> With regard to these treatments, the whole of the manholes were treated in the normal way — therefore no test-baiting was undertaken.		

It may be mentioned that the neighbouring Boroughs of Woolwich and Lewisham took action at the same time as Greenwich.

**ANTI-FLY AND ANTI-MOSQUITO CAMPAIGN.**—During the summer period, April to September, the campaign was continued on similar lines to those of previous years, 4 men with the use of 2 motor-cycles and sidecars being employed in this important preventive aspect of the Department's work.

The major factors to be controlled include house refuse, static water sites, ponds, ditches, cafes and food shops generally.

Once more the treatment of house refuse was successfully accomplished by arrangement with the Borough Engineer whereby



at each weekly collection a small quantity of "Gammaexane" power was introduced to each refuse bin by means of sprinkler-top tins. In addition, the collecting vans were sprayed with D.D.T. in kerosene and dust chutes in the numerous blocks of flats all received fortnightly treatment, this latter work being carried out as soon as possible after dust collection.

Static water sites, ponds, ditches, etc. were sprayed with D.D.T. and in certain instances "Gammexane" powder was employed. Much ingenuity is necessary for the purpose of overcoming the difficulties encountered at many of the places not easily accessible for treatment.

Food shops and cafes are difficult subjects to deal with in this respect and great care has to be exercised in the use of D.D.T. and "Gammexane," but these premises generally were treated with good results.

Offensive deposits, such as old mattresses, dead animals, food debris, etc., on vacant and bombed sites are a constant source of nuisance: in these cases combustible materials are burned on the site or collected and destroyed centrally and the site is then sprayed in the usual way.

**DISINFESTATION OF VERMINOUS PREMISES.**—D.D.T. in kerosene continues to prove the most effective vermicidal agent in dealing with verminous houses.

During the year the Sanitary Inspectors dealt with 176 cases of dirty and verminous houses compared with 149 for 1951. The Disinfestation staff sprayed 398 rooms and contents as compared with 399 last year.

In 30 cases the bedding and effects were removed to the Council's Disinfecting Station for steam disinfection.

Other pests, such as cockroaches, ants, moths, and wasps were again troublesome this year and 234 houses comprising 615 rooms were treated effectively with D.D.T.

**PUBLIC BATHS AND WASHHOUSES.**—Greenwich is in the happy position of having a modern establishment for its Public Baths and Washhouses, situated in Trafalgar Road, and covering an area of  $1\frac{1}{2}$  acres. Originally there were 3 large swimming baths, 74 ladies and gent's slipper baths, medicated vapour and foam baths, washhouses and laundry, etc.

During the war the Ladies 2nd Class Swimming Bath was demolished by enemy action and it has been decided that when



Ministry permission is obtained for re-instatement the bath will in future be utilised not for swimming but for Turkish Vapour Baths.

The swimming baths are constructed of reinforced concrete and lined with white marble terrazzo. Each bath is fitted with teak dressing cubicles, shower and footbaths and has adequate sanitary accommodation.

In connection with these baths there has been provided a most up-to-date filtration, aeration and chlorination plant capable of purifying the contents of each bath every  $3\frac{1}{2}$  hours, thus enabling bathers to use the baths with every confidence.

Regular chemical tests are taken (twice daily) and bacteriological tests taken periodically.

The 2nd Class bath is open to bathers all the year round but during the winter months (October to April) the 1st Class bath is floored over and used for social functions of all kinds.

Introduction of the Vapour, Medicated and Foam baths in 1931 has enabled treatment to be undertaken for the benefit of Borough residents suffering from various ailments such as neuritis, obesity and rheumatic conditions, etc.

The public wash-house and its ancillaries are well patronised, especially during the winter period and here, in a well-lighted and warm room, provision is made for unlimited supplies of hot and cold water to enable the family wash to be done at very low cost, the charge including facilities for mangling and drying.

Ventilation throughout the building is by the Plenum system, a system which allows for the closing of all windows thus excluding dust, grit, etc., and yet ensuring complete circulation of pure air.

I am indebted to Mr. K. L. Embley, Superintendent Engineer, for the following statistics :—

ATTENDANCES.—For the year ended 31st December, 1952 :—

Slipper Baths	...	...	...	...	83,477
*Swimming Baths	...	...	...	...	112,644
Vapour and Medicated Baths	...	...	...	...	7,334
Public Laundry	...	...	...	...	9,925
Total					213,380

*\*Includes 40,618 School-children.*



A Summary of the Bacteriological Samples taken during the year, with the results of the examinations, is given in the following tables, particulars of which were communicated to the Adoptive Acts Committee and the Baths Superintendent at the time of receipt of the Reports :—

Sample No.	Date & Time	Nature & Temperature	No. of Bathers	Plate Count per ml. Yeast Agar 2 days 37°C.	Probable No. of Coliform bacilli. MacConkey 2 days 37°C.	Result
1	27.2.52 10.45 a.m.	2nd Class Swimming (Mixed) Bathing 75°F.	50	Nil	Nil	Satisfactory
2	30.4.52 11.11 a.m.	2nd Class Swimming (Mixed) Bathing 74°F.	121	2	Nil	Satisfactory
3	2.7.52 10.20 a.m.	1st Class Swimming (Mixed) Bathing 75°F.	220	Nil	Nil	Satisfactory
4	2.7.52 10.25 a.m.	2nd Class Swimming (Mixed) Bathing 75°F.	170	4	Nil	Satisfactory
5	27.8.52 10.55 a.m.	1st Class Swimming (Mixed) Bathing 76°F.	20	2	Nil	Satisfactory
6	27.8.52 11.00 a.m.	2nd Class Swimming (Mixed) Bathing 76°F.	60	1	Nil	Satisfactory
7	12.11.52 11.15 a.m.	2nd Class Swimming (Mixed) Bathing 76°F.	76	17	Nil	Satisfactory

PUBLIC SANITARY CONVENIENCES, ETC.—The need for public conveniences is as great as ever and the 9 Council conveniences situated in the main arteries of traffic continue to provide a most satisfactory service.

The old underground convenience at Blackwall Lane was finally closed on Sunday, 2nd March and the new ground-level convenience at Rodmere Street opened the following day.

No further developments can be reported with regard to the new convenience envisaged at Woolwich Road in the vicinity of Anchor and Hope Lane.

#### Particulars of Public Sanitary Conveniences in the Borough

Convenience	MEN			WOMEN		HOURS
	W.C.'s	Lava- tory basins	Urin- al stalls	W.C.'s	Lava- tory basins	
Batley Park (Blackheath)	6	2	12	4	2	7a.m. to 11p.m.
Blackheath Hill (foot of)	3	—	10	4	—	
Blackwall Tunnel	3	—	6	5	—	
Charlton House	2	—	4	2	—	
Creek Road (St. Nicholas, Deptford)	4	2	10	4	2	
Greenwich South Street (near Town Hall)	4	1	10	4	2	
King William Walk (near Greenwich Park)	4	2	9	7	2	
Rodmere Street*	5	3	12	5	3	
Shooters Hill Road (junc. Well Hall Rd.)	3	1	6	3	1	
Totals ...	34	11	79	38	12	

NOTE :—Women's Conveniences are without an Attendant between 7 a.m. and 8 a.m.

On Sundays, Conveniences open at 10.30 a.m. (with the exception of Batley Park (Men) which opens at 9 a.m.), and close at 10.30 p.m.

\*Opened 3rd March, 1952. During Summer Period this convenience opens at 8.30 a.m.



The following are the Drinking Fountains and Horse Troughs in the Borough which are cleansed daily by the attendants attached to the Department :—

#### DRINKING FOUNTAINS

Armada Street, Deptford.

Blackheath (Andrew Gibb Memorial) (Damaged by enemy action).

Blackheath (Greenwich Park).

Blackheath Hill, West Greenwich.

Blackwall Lane, East Greenwich. (Damaged by enemy action).

Charlton Church Lane.

Westcombe Hill, Blackheath.

#### HORSE TROUGHS

Charlton Church Lane.

Creek Road, Deptford.

Invicta Road, Blackheath.

Tunnel Avenue, East Greenwich.

In addition to the above-mentioned Drinking Fountains and Horse Troughs one Council urinal and four others attached to Public Houses are cleansed daily by two attendants, responsibility for the repairs of the Public House urinals remaining with the Brewers concerned.

Free hand-washing facilities, introduced in the interests of Public Health during 1951, were continued with marked success during the year and the following table gives an indication of the use made of these facilities :—

Convenience	Men	Women	TOTAL
Batley Park ... ..	1,167	819	1,986
Creek Road ... ..	1,052	240	1,292
Greenwich South Street ... ..	115	437	552
King William Walk ... ..	1,395	492	1,887
Rodmere Street ... ..	1,201	278	1,479
Shooter's Hill Road ... ..	626	645	1,271
Totals ... ..	5,556	2,911	8,467



### AGED, INFIRM AND PHYSICALLY INCAPACITATED PERSONS.—

At the beginning of the century the average span of life in years was 50, compared with the present day figure of 68, and in more recent times attention has been focussed on this trend towards an ageing population.

Progress in civilisation, particularly in hygiene and of medicine, has served to increase the average length of human life, but this admirable advance in the expectation of life, gives rise to a corresponding growth in chronic illness, disability, degenerative diseases and mental and physical impairment. Frequency of circulatory and renal diseases due to arterio-sclerosis increases sharply after maturity has been reached and similar tendencies may be observed with regard to hypertension, neo-plastic diseases, arthritis and metabolic disorders such as diabetes mellitus, thyroid inadequacy, etc.

Current opinion is that opportunities for further gains in longevity are most likely to lie in a better appreciation of the chronic diseases and it is, therefore, not inconsistent that medical interest in geriatrics is increasing.

It is, however, a primary object of geriatric medicine to add breadth and depth rather than length to life—to prevent and retard the development of disorders of senescence and further to continue the cultivation of the mind through adult education.

Unlike other branches of medicine which are limited by reason of anatomy or therapeutics, the science of geriatrics deals not only with the illness of elderly people but also with the medical problems associated with normal ageing and therefore, is more an attitude of mind to the progress and consequences of senescence. Should the period of life between 40 and 60 years be one of good health and vigour, then the best possible basis exists for the prevention of premature ageing and disability and the following years could be faced with the minimum of anxiety regarding physical and mental wellbeing.

Prevention or amelioration of chronic diseases can best be promoted by (a) preventive medicine, (b) diagnosis, (c) treatment and rehabilitation, with emphasis on preventive medicine.

Doubtless it is superfluous to state that all old people were once young, but in this truism lies the reason for the stress on preventive medicine—care of the aged can be said to begin even before middle

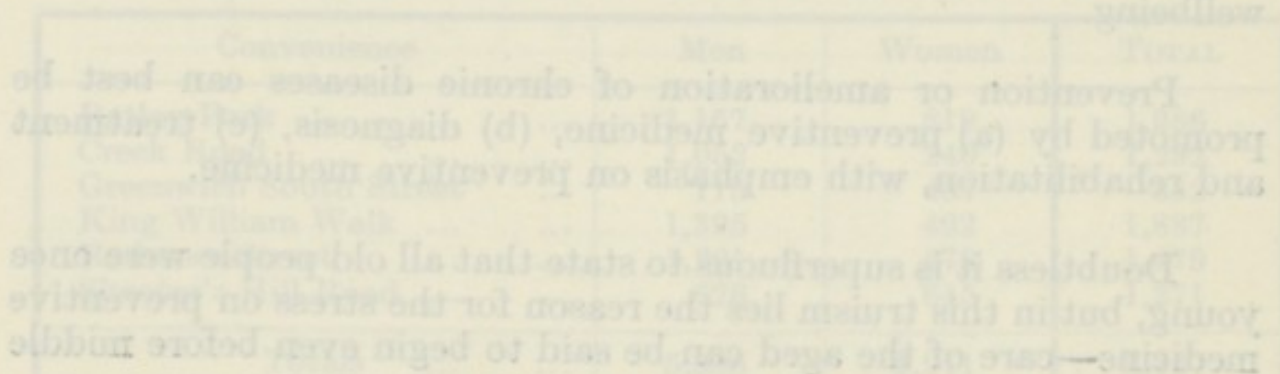


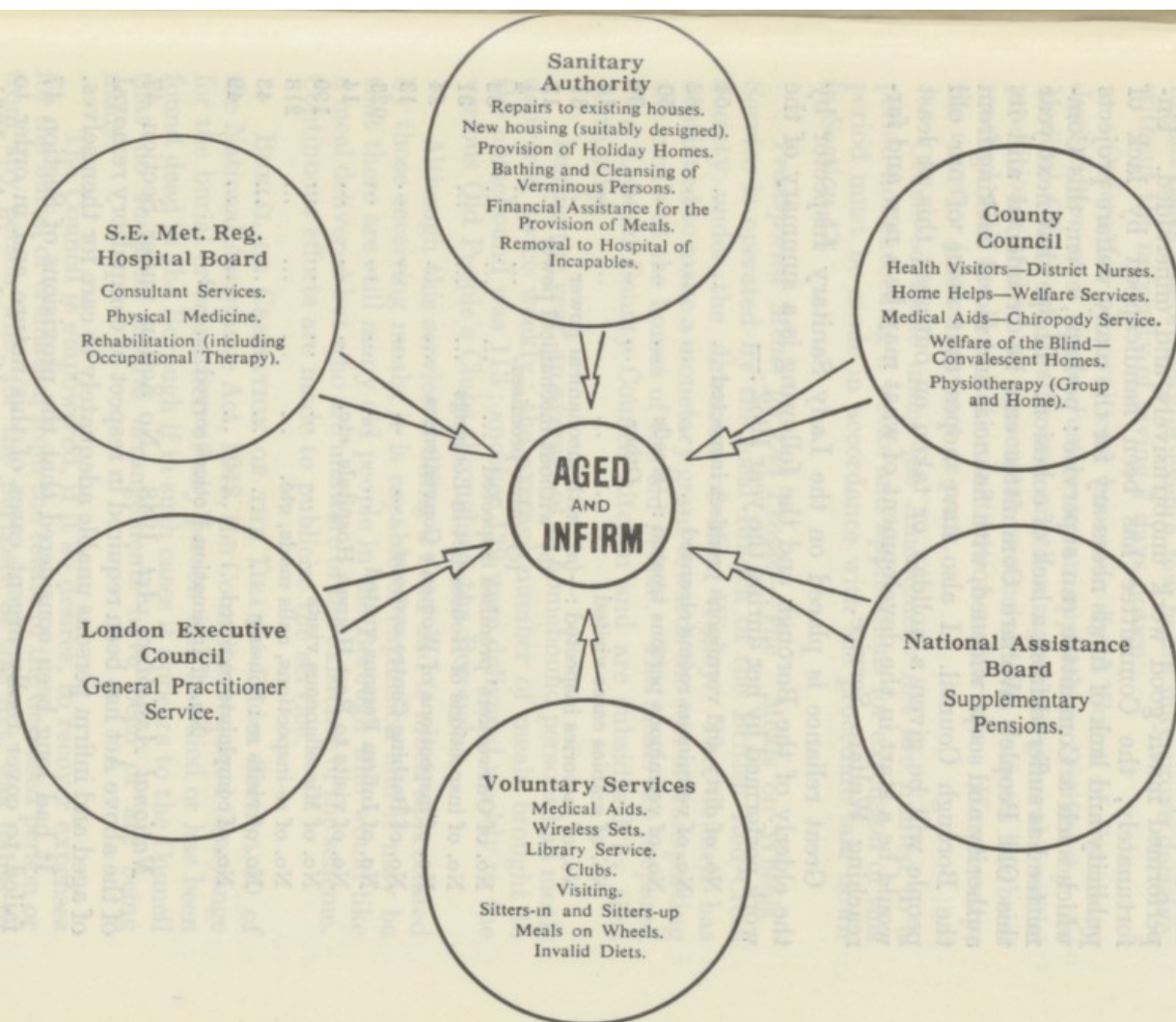
age. For example, it is no use providing Old People's Clubs for old persons who have shown no aptitude for social mixing in their younger days ; similarly, an extensive Domiciliary Library Service will not appeal to old persons who in their younger days never read a book. It is in the formative and middle years of life that people must prepare themselves for old age : they must learn how to approach old age and how to use to the full, for their own satisfaction and contentment those faculties least blunted by ageing. This art of living cannot be cultivated magically at the age of 65 or at any other age when the signs of ageing are becoming apparent ; it is an acquired characteristic which can be encouraged and developed.

Too often an old person suffers from loneliness and neglect as a result of his own inadequate personality and adaptation to changing circumstances in adult life.

In former years preventive medicine was predominantly the responsibility of the local Public Health Departments, but recent legislation has distributed these duties among several authorities. This may or may not be a desirable change but, in general, this collective responsibility for the aged tends to be a disadvantage in so far that no single co-ordinating authority exists for bringing the elderly into close contact with all the facilities which are available to them. Inevitably one finds that some aged people are inundated with visitors from various organisations and that others are completely bereft of callers. This duplication of visitors from various authorities is not only uneconomical but can often be very disturbing.

This can be illustrated best by means of the following diagram which shows the multiplicity of agencies concerned directly or indirectly with the welfare of the aged and infirm :—







It seems that some co-ordination of these agencies is desirable ; for the most part this is left to local organisation. At present, in Greenwich, an Old People's Welfare Committee does exist and has performed much good work unobtrusively and unheralded. Unfortunately, the Committee has been handicapped by lack of publicity and lack of funds necessary for the many welfare projects which such a Committee can supervise : perhaps, even, this Committee has suffered from a lack of cohesion. I hope that next year this Old People's Welfare Committee can be broadened and its authority and scope widened, with financial and moral backing from the Borough Council. I also have hopes that some of our old people will be given a holiday or taken on outings ; this at least would be a start in the development of what may be a new and far-reaching Welfare Service.

Great reliance is placed on the Lady Sanitary Inspector by the elderly of the Borough and the following is a summary of the work performed by her during the year 1952 :—

No. of dirty and verminous premises inspected ... ..	54
No. of verminous rooms cleansed ... ..	82
No. of verminous persons treated :—Heads ... ..	50
Other ... ..	34
No. of scabies cases visited ... ..	14
No. of factories inspected :—(a) with mechanical power ...	31
(b) without mechanical power ...	13
(c) other premises ... ..	4
No. of Outworkers' premises inspected ... ..	82
No. of inspections of Houses Let-in-Lodgings ... ..	31
No. of inspections of Women's Conveniences ... ..	24
No. of Bathing Centre sessions ... ..	13
No. of Infirm Persons visited ... ..	923
No. of visits to Rest Homes, Hospitals, etc. ... ..	14
No. of Miscellaneous visits ... ..	199
No. of re-inspections, calls made, etc. ... ..	218
No. of visits re : housing ... ..	43
No. of complaints received ... ..	49
No. of Intimation Notices served ... ..	2

*National Assistance Act, 1948.* No action under Section 47 of the above Act has been required in respect of compulsory removal of aged and infirm persons unable adequately to care for themselves.

It had long been considered that the provisions of Section 47 failed to cover really urgent cases of this nature and in order to meet the situation the National Assistance (Amendment) Act, 1951, was introduced and put into operation on 1st September of that year.



This alternative procedure enables the Local Authority or the Medical Officer of Health, if so authorised by the Council, to remove urgent cases where delay of even a few hours may prove decisive, without the necessity of giving 7 days notice.

Orders for removal can be made by a Court of Summary Jurisdiction or a single Justice on an application certified by the Medical Officer of Health and another registered general medical practitioner and where agreement to receive such patients has been reached with the Hospital or Institution authorities. If necessary, the court or justice may act *ex parte*.

Orders so made under the Amendment Act are limited to a period not exceeding 3 weeks and applications for extension of this period must be made in accordance with the procedure laid down in Section 47.

*Transported Meals for Old People.*—The “Meals on Wheels” Service is operated by the local Branch of the British Red Cross Society under the direction of Mrs. Wigley. The Council has continued to make a monetary grant towards the cost of transporting the meals to the homes of the old people. The meals are prepared at a London County Council kitchen and are subsidised by that Authority.

During the year, an average of 40 homebound persons had meals delivered twice weekly; the average number of meals brought to the homebound was 113; another 139 were delivered weekly to the various Old People’s Clubs throughout the Borough.

Although this service is filling a need and is much appreciated by those receiving meals, it is capable of expansion and it may be that there are still many old people in the Borough who would like a meal delivered but who are unaware of the existence of the scheme. Continuous efforts are made to publicise the service.

**BURIAL OR CREMATION OF THE DEAD.**—Under Section 50 of the National Assistance Act, 1948, the Council is required to arrange for the burial or cremation of any person who has died or has been found dead in the Borough if in such cases it appears to the Council that no suitable funeral arrangements have been or are being made.

The Council is empowered, if it so desires, to recover expenses for the burial or cremation from the estate of the deceased person or from any person who, for the purposes of this Act, was liable to maintain the deceased person immediately prior to his death.

During 1952 arrangements were made under the above Act for the burial of 5 bodies (3 males and 2 females). The total expenses



of these burials amounted to £42 9s. 0d., of which the sum of £33 15s. 6d. was recovered, making the nett cost to the Council of £8 13s. 6d.

**EXHUMATION.**—During the year there was one exhumation at the Greenwich Cemetery concerning the removal of a body from a common to a private grave. The Sanitary Inspector for the district was present to see that the usual precautions were observed.

### Summary of Work Performed by the Sanitary Inspectors during the Year 1952

#### **INSPECTIONS—**

Houses inspected (House-to-House) ... ..	312
"    "    (Complaints, nuisances) ... ..	1,703
"    "    (Infectious Disease) ... ..	323
"    "    (Overcrowding) ... ..	322
Re-inspections, calls made, etc. ... ..	14,260
Inspections of Factories ... ..	568
"    "    Shops ... ..	199
"    "    Stables and yards ... ..	53
"    "    Urinals ... ..	204
"    "    Miscellaneous ... ..	517
"    "    Houses let in Lodgings ... ..	31
"    "    Outworkers premises ... ..	82
Inspection of Premises (Pharmacy and Poisons Act, 1933) ... ..	15
Investigations (Rats and Mice) ... ..	574
On notice from Builder ... ..	1,157
	<hr/>
	20,320

#### **DRAINS—**

Drains tested—by smoke ... ..	281
"    "    —by water ... ..	360
Opened, cleansed and repaired ... ..	455
Reconstructions and additions ... ..	294
Inspection chambers constructed ... ..	180
New covers to manholes ... ..	197
Soil and vent shafts repaired or renewed... ..	196
Traps (gully) ... ..	359
Drains sealed off, etc. ... ..	41
Yards and forecourts drained ... ..	109

## WATERCLOSETS AND URINALS—

Closets erected	115
W.C.s repaired	314
Sanitary conveniences or improvements effected to Factories, Workshops and Workplaces	6
W.C. pedestals installed	433
Urinals cleansed or repaired	94

## DUSTBINS—

Provided	217
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## PAVINGS—

Yards and Forecourts	122
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## GENERAL WATER SUPPLY—

Water Fittings amended	146
Extra water supply to tenement houses	1
Water supply certificates granted (Sect. 95)	463

## OTHER IMPROVEMENTS—

Houses generally repaired	246
Rooms cleansed and repaired	2,264
Rooms and staircases lighted and ventilated	40
Verminous rooms cleansed	286
Roofs, gutters and rainwater pipes repaired	835
Dampness abated	730
Sinks, baths and lavatory basins	431
Sink, lavatory and bath waste pipes trapped or amended	343
Stoves and fireplaces	306
Washing coppers repaired or provided	55
Floors repaired	443
Provision for storage of food	39
Miscellaneous repairs	812

## OTHER NUISANCES ABATED—

Illegal use of Underground rooms discontinued	—
Overcrowding abated	61
Animals kept in unfit places discontinued or removed	3
Dung receptacles provided	—
Accumulation of manure and other obnoxious matter removed	26
Rat infestation abated	198



## SMOKE NUISANCES—

Observations ... ..	110
Statutory Notices served (Sects. 147 and 148) ... ..	—

## NOTICES, &amp;c.—

Intimations served under Public Health (London) Act, 1936 ...	1,185
Statutory Notices served ... ..	210
Houses rendered fit by informal action ... ..	292

## Legal Proceedings

Premises	Offence	Result of Proceedings
39, Eastney Street	Non-compliance of Statutory Notice	Order made for work to be completed in 28 days.
39a, Eastney Street	do.	Order made for work to be completed in 28 days.
146, Tunnel Avenue.	do.	Work completed after adjournment.
22, Armitage Road.	do.	Summons withdrawn on payment of 6/- costs.
39, Collerston Road	do.	Summons withdrawn on payment of 6/- costs.
41, Collerston Road	do.	Summons withdrawn on payment of 6/- costs.
18, Armitage Road.	do.	Summons withdrawn on payment of 6/- costs.
24, Armitage Road.	do.	Summons withdrawn on payment of 6/- costs.
19, Collerston Road.	do.	Summons withdrawn on payment of 6/- costs.
37, Collerston Road.	do.	Summons withdrawn on payment of 6/- costs.
51, Collerston Road.	do.	Summons withdrawn on payment of 6/- costs.
51, Glenister Road.	do.	Summons withdrawn on payment of 6/- costs.



## SECTION D

### Housing

**GENERAL.**—The problem of vacant land becomes a vital one when new housing estates are contemplated. In rural areas objections to the use of good arable land are obvious, whilst in the urban areas acquisition of land for new estates is virtually impossible, except as an ancillary to slum clearance—an extremely slow process. Even ignoring this disadvantage, it has been said by authoritative people well acquainted with housing problems that new building is most unlikely to provide all the necessary accommodation, and this, despite the fact that the annual rate of house building is in the region of 300,000.

So once more it is necessary to state that the repair and renovation of existing accommodation is not only desirable but essential if the housing position as a whole is not to deteriorate. In other words, what is necessary is not just a “house-building drive” but literally a “housing drive”; i.e. an energetic move for more dwellings rather than for only new dwellings. Time is a most important factor in this respect. With each year that passes many houses fall into the category of “outworn,” thus tending to offset the advances made by the building of new estates. Much of the property which will in a few years be classed as “outworn” could with timely intervention be made reasonable and its life extended for another 20 to 30 years. However, several drawbacks prevent the implementation of schemes by Local Authorities along these lines :—

(1) **Rent Restrictions Acts.**—A schedule of repairs sufficient to bring a property up to a reasonable standard is usually beyond the capacity of most owners to complete. Insistence by local authorities only induces the owner to seek a Closing Order under the Housing Act, 1936.

(2) **Under the Town and Country Planning Act, 1947,** responsibility is placed on Local Authorities to seek special powers to carry out reconditioning on a large scale. So far very few Authorities have endeavoured to utilise this method for improving the housing situation in their areas.



(3) In attempting to further the drive for greater housing accommodation the Housing Act, 1949, sought to encourage the alteration, enlargement, improvement and modernisation of existing houses and buildings. It has failed largely because the grant clauses are permissive and no obligation is placed on owners to make improvements nor on Local Authorities to make grants.

Considering the serious nature of the housing position and the rigid control under the Rent Acts, it is remarkable that existing powers given by the Housing Act, 1936, have not been utilised to any great extent. Section 72 of this Act empowers Local Authorities to purchase houses, repair and renovate them and to use them to supplement housing resources. When suitable property is selected the advantages are substantial; it is quicker and cheaper than building new houses or flats and tenants are not compelled to move further from their work or livelihood.

One of the greatest problems in housing today is the inability of many on the housing lists to pay even the subsidised rent of post-war council houses. It is in this field that area conversion could prove most useful—while providing modern housing without undue drain on rates or land, it would be an answer to the prevention of slums.

At a time when the Minister is pressing for the derequisitioning of houses the importance of increasing housing accommodation by all available means is only further emphasised.

The following table compares the number of dwellings erected since 1945 with the marriages solemnised during the same period :—

	(a)	(a)	(c)
	<i>New units of accommodation erected since 1945 up to :—</i>	<i>Marriages since 1945</i>	<i>Difference between (a) and (b)</i>
31st Dec. 1946	517	776	259
„ „ 1947	1,052	1,552	500
„ „ 1948	2,061	2,363	302
„ „ 1949	2,578	3,048	470
„ „ 1950	2,704	3,700	996
„ „ 1951	3,172	4,370	1,198
„ „ 1952	3,635	5,090	1,455

Although not an accurate method of assessing the housing situation, the above figures are indicative of a disturbing feature, i.e., that most newly married couples tend to live in 'rooms,' often with parents. Psychologically this is unsound and frequently leads to disharmony in the home.



**SLUM CLEARANCE.**—As indicated earlier in this section, slum clearance is the only practical method left by which the urban council is able to obtain space for housing. Conditions since the war have militated against slum clearance and it is therefore very gratifying to record that despite existing commitments the Council have managed to recommence operations in this direction with the representation of 3 properties in Park Vista. Arrangements have already been made for further areas to be represented.

**RE-HOUSING.**—

(a) *Borough Council.*—There were 304 new dwellings provided by the Council during the year and the number of families housed and re-housed including transfers, casual voids, etc., amounted to 653. Of this number 32 were in respect of overcrowded cases and 5 in respect of closures under the Housing Act.

The Housing Department now has control of 2,775 Council-owned units of accommodation, an increase of 294 over that of the previous year.

At the end of the year, in addition to 100 occupied hutments, a total of 968 properties giving 1,689 units of accommodation were requisitioned by the Council in order to provide for persons rendered homeless as a result of enemy action or who were otherwise inadequately housed.

(b) *London County Council.*—By 31st December, 1952, the L.C.C. had provided alternative accommodation for a total of 330 Greenwich families of which 29 had been certified as overcrowded cases. Of this figure, 137 were housed on L.C.C. housing estates outside the Borough.

**OVERCROWDING.**—As a direct result of rehousing carried out by the Housing departments of the Council and the County Council, 61 cases of overcrowding were abated during the year under review. The number of unabated certified cases of overcrowding in the Borough now amounts to 293.

During 1952, there was a further fall in the number of complaints received concerning overcrowding, the year's figure of 105 shows a decline of 43 from that of the previous year. Each complaint was investigated by the Sanitary Inspector concerned and as a result of these investigations, 52 families were found to be overcrowded according to the standards laid down by the Housing Act, 1936, and were subsequently certified as such.



It can be seen by the figures in the following table that there has been a definite decline since 1945 in the number of families found to be living in overcrowded conditions in the Borough :—

<u>Year</u>	<u>No. of cases of overcrowding reported</u>
1946	261
1947	128
1948	162
1949	168
1950	148
1951	56
<hr/>	
6-year Average	154
<u>1952</u>	<u>52</u>

NEW HOUSING ACCOMMODATION.—The following table lists the new dwellings erected in the Borough during 1952 :—

Type of Dwelling	G.B.C.	L.C.C	Private	Total
Permanent Houses ...	—	—	20	20
Permanent Houses (rebuilt)	—	—	19	19
Flats ... ..	304	76	26	406
Flats (rebuilt) ... ..	—	—	18	18
Total No. of Dwe'llings ...	304	76	83	463

Excluding the families accommodated in requisitioned property, the total number of dwellings provided in the Borough since the termination of the war is now 3,635.

#### COUNCIL HOUSING SCHEMES.

*Springfield Estate.*—This estate, planned to provide 230 flats in 9 blocks for approximately 1,095 persons was completed early in 1952.

*Cherry Orchard.*—This estate, which included 48 dwellings for old people, was completed towards the latter end of the year.

*Maitland Close.*— A further 18 dwellings were provided by the completion of this block during May of this year.



Determined efforts by the Council to overcome the lack of housing accommodation in the Borough is shown by the following table, which gives an indication of the dwellings in the course of construction at the end of the current year :—

<u>Site</u>			<u>Dwellings</u>
Ashburnham Place	...	...	12
Beaconsfield Road	...	...	60
Charlton Village ...	...	...	6 (and 4 shops)
Elliscombe Road	...	...	12
Invicta Road ...	...	...	18
Kinveachy Gardens	...	...	16
Plumbridge Street	...	...	13 (and 9 shops)

Whilst perhaps not finally confirmed, the following additions and extensions have been envisaged by the Council :—

<u>Site</u>			<u>Dwellings</u>
Blackheath Hill ...	...	...	22
Bramhope Lane ...	...	...	2
Charlton Village ...	...	...	3 (and 3 shops)
Coldbath Street ...	...	...	88
Humber Road/Ruthin Road	...	...	Not yet determined
Kidbrooke Grove...	...	...	„ „ „
Littleheath ...	...	...	„ „ „
Ormiston Road ...	...	...	8
Pond Road ...	...	...	101
Roan Street ...	...	...	Not yet determined
Tuskar Street ...	...	...	4
Woolwich Road ...	...	...	8

PROCEDURE UNDER HOUSING ACT, 1936.—The following representations were made under Part II of the above Act during 1952 :—

SECTION 11.—*Houses unfit for human habitation and not capable at reasonable expense of being rendered so fit.*

- 11, Woodlands Grove, S.E.10.
- 35a, Trafalgar Grove, S.E.10.
- 36, Trafalgar Grove, S.E.10.
- 37, Trafalgar Grove, S.E.10.
- 62, Guildford Grove, S.E.10.
- 201, Maryon Road, S.E.7.
- 13, Sigismund Street, S.E.10.
- 15, Sigismund Street, S.E.10.



SECTION 12.—*Parts of buildings unfit for human habitation, i.e., rooms being more than 3 ft. below the surface of adjoining ground and not complying with the Local Authority's Regulations.*

324, Tunnel Avenue, S.E.10.

326, Tunnel Avenue, S.E.10.

45, The Village, S.E.7.

HOUSING SURVEY.—Through the courtesy of Mr. F. H. Dore, the Housing Manager, the following extracts are quoted from his observations on the housing position in 1952 :—

“ Last year I mentioned a marked increase in the number of lettings and transfers effected compared with this activity in 1950. It is satisfactory to be able to report that the number of lettings from the Housing Register in 1952 is almost the same as in 1951 although there has been a drop in the number of transfers. The maintaining of the lettings figure during the year was due to the fact that the balance of the flats on the Cherry Orchard and Springfield Grove estates together with a small scheme at Maitland Close, Greenwich High Road and six flats over shops in Charlton Village were handed over during the period under review.

The number of new applications for accommodation was, however, greater than in 1951 and again I have to report that the number of families on the waiting list at the end of the year was higher than at the beginning.

*Housing Register.*—The following statement gives the indication of the position in 1952 compared with 1951.

1951		1952
3,532	Registered applicants at beginning of year	3,589
837	New applications registered during the year	919
4,369		4,508
	<i>Deduct :</i>	
	Families housed by the Greenwich	
347	Borough Council	336
117	Families housed by the L.C.C.	64
316	*Cancellations for other reasons	494
780		894
3,589	Registered applicants as at the 31st	3,614
	December.	

\*Cancellations for other reasons were mainly due to applicants failing to make the annual re-registration as required by the Council's scheme even after a written reminder had been issued.



*Points Scheme.*—At the beginning of the year an important modification in the operation of the points scheme was introduced. The Housing Committee had been concerned for some time over the position of families who had been waiting for many years for accommodation but whose awards of points were not quite sufficient for them to be dealt with. These families were being passed over because of the more recently registered applicants coming on the list with more points. Sometimes this was due to those older registered applicants having made efforts to improve their housing circumstances with the result that their points were lowered but they were still unsatisfactorily housed.

In order to amend this position the Committee decided that a "date order" list should be introduced. In order to qualify for this list an applicant has to have a minimum of 15 basic points. Applications are then dealt with in order of date of registration and are considered for either new property or the higher standard requisitioned properties. This scheme was operated during the year and went a long way to meet a considerable amount of criticism from a section of applicants on the Housing Register.

Applicants of more recent registration with high points still have an opportunity of obtaining accommodation in requisitioned properties.

*Transfers.*—266 transfers were effected during the year, a large proportion being from requisitioned accommodation to permanent properties. 28 of the transfers were from requisitioned accommodation to enable such properties to be handed back to owners. The general policy having regard to moves from requisitioned accommodation to permanent property is "first in first out," that is to say those families longest in requisitioned accommodation being given the first opportunity to move. In addition a certain amount of under occupation has been corrected by means of transfer.

*Mutual Exchanges.*—51 mutual exchanges were arranged during 1952 compared with 58 in 1951. This continues to be a particularly satisfactory way of dealing with housing problems since with every exchange at least two family problems are dealt with. On occasion three or four-way exchanges have been fixed up."



## SECTION E

### **Inspection of Food and Supervision of Food Premises**

During the past two or three decades much has been done by Public Health Departments to raise the standard of hygiene throughout the country, but it is obvious that hygiene is now rapidly becoming more of an individual responsibility and this is especially so with regard to food.

Even in the most up-to-date and hygienic food factory one ignorant, careless or apathetic employee can jeopardise the health of hundreds of people. All the efforts of the Food Inspectors, i.e. the insistence on the most suitable premises, the supply of adequate and efficient equipment and the instruction concerning the most effective and hygienic practices, can all be brought to nought by irresponsible individuals.

Contamination, however, is by no means confined to the worker in the catering industry—it can be perpetrated by the market man, the delivery man and even the customer, and it will be apparent from these few observations that responsibilities of the Food Inspector are not only onerous but wide and varied and demand great persuasive persistence and singleness of purpose.

With the staff of the food section fully restored, the systematic inspection of food and the supervision of food premises continued at a high level during the year, and the new L.C.C. Food Byelaws introduced on 3rd November will doubtless give valuable assistance in the drive for more hygienic catering.

These byelaws, based on the Ministry of Food's Model Byelaws of 1949, were made under Section 15 of the Food and Drugs Act, 1938, "to secure the observance of sanitary and cleanly conditions and practices in connection with the handling, wrapping and delivery of food sold or intended for sale for human consumption and in connection with the sale or exposure for sale in the open air of food intended for human consumption."

A copy of these byelaws was forwarded to the occupiers of all premises concerned with the sale, storage for sale or handling of any food commodity.



## LEGISLATION.

Legislation was comparatively light this year with the main accent on meat and its associated products. In this respect Memo 3/Meat was received from the Ministry of Food, with the recommendation that it be substituted for Memo 62/Foods (as amended by Memo 62b/Foods), concerning the methods and criteria to be adopted in meat inspection.

**MEAT.**—The *Meat Products Order*, 1952, which came into force on 16th March of this year, replaced the Meat Products and Canned Meat (Control and Maximum Prices) Order, 1948, and continued the prohibition on the manufacture and sale of meat products other than specified or excepted products. The principal changes included the rise in price of most meat products and from 14th September the minimum meat content requirements were extended to most products. This order was replaced by the *Meat Products (No. 2) Order*, 1952, which was then amended by the Meat Products (Amendment) Order, 1952, and finally all were superseded by the *Meat Products (No. 3) Order*, 1952, operative from 1st January, 1953.

The *Public Health (Meat) (Amendment) Regulations*, 1952, came into operation on 31st August. They amend the already amended Public Health (Meat) Regulations, 1924, so as to extend to horses, asses and mules the application of Part II thereof which relates to slaughterhouses and the slaughter of cattle, swine and goats for sale for human consumption and requires, *inter alia*, prior notice of slaughter to be given to the Local authority.

The *Poultry Pens, Fittings and Receptacles (Disinfection) Order*, 1952, introduced on 24th March, consolidated with amendments, previous Orders. This Order makes provisions concerning disinfection of enclosures, etc., at exhibitions and shows and demands written notification to the Local Authority of intention to hold an exhibition or show of poultry.

**ICE CREAM.**—The *Ice Cream (Heat Treatment, &c.) Amendment Regulations*, 1952, brought into force on 5th May, provide for a third method of heat treatment as an alternative to the methods prescribed by the Ice Cream (Heat Treatment) Regulations, 1947/51.

The *Food Standards (Ice Cream) Amendment Order*, 1952, amended the Food Standards (Ice Cream) Order, 1951, and from 7th July onwards the legal minimum content in ice cream of fat and milk solids other than fat was reduced.

**MILK.**—The *Milk (Special Designations) (Specified Areas) Order*, 1952, extended to a further five areas the compulsory use of special



designations in relation to the retail sales of milk, while the Minister of Food approved the addition of certain oxidising and preservative agents to the list authorised under the Milk and Dairies Regulations, 1949.

**COFFEE.**—The *Food Standards (Coffee Mixtures) Order*, 1952, which came into force on 21st September of this year, prescribed standards for coffee and chicory mixtures.

**GENERAL.**—The *Mineral Oil in Food (Amendment) Order*, 1952, restricts the allowable quantity of mineral oil remaining after surface treatment of dried fruit and also the oil content in foods in which dried fruit has been used.

Permission to affix Royal titles, emblems and photographs on boxes, caskets, etc., to be used for Coronation souvenirs was granted provided that such souvenirs should give the name of the manufacturer and the nature of the contents on the base or inside the lid. This, in actual fact, was a technical infringement of the Labelling of Food Order, 1950, which demands particulars to be prominently or conspicuously displayed. The Minister of Food confidently expected Food and Drugs authorities to note this special consideration and to take no exception to these Coronation souvenirs provided the particulars required by the Labelling Order were given on the base, inside the lid, on a loose label inside the container or on an outer protective cover.

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**MILK.**—Milk consists of approximately 87% of water holding proteins, sugar and certain salts in solution and having suspended in it finely divided globules of fat to which the milk owes its whiteness. This most important food is used in many familiar ways. It is encountered in many beverages, hot and cold, and is a staple constituent in numerous food preparations.

Milk, as drawn aseptically from a healthy cow, contains few bacteria but as it forms an excellent medium for the growth of organisms every precaution should be taken to prevent its contamination.

Wise application of many branches of science is required for the production and distribution of a pure milk supply. The hygienic handling of milk is of vital importance to the health and well-being of the nation and the eradication of bovine Tuberculosis, Typhoid and Undulant Fever, Diarrhoea and many other diseases is largely dependent on this factor. It is, therefore, to be expected that this commodity formed the largest class of food sampled during the year.



*Milk Supply.*—The supply of milk continues to be under the direction of the Milk Marketing Board, who, in this connection, act as agents to the Ministry of Food. The greater proportion of the milk which enters the Borough originates from the Home Counties and the remainder, which is of a higher fat content, arrives from Devon and the Channel Islands.

*Milk and Dairies Regulations 1949.*—Under the provisions of these Regulations each person retailing milk in the Borough must be registered as a Distributor. At the commencement of the year 94 persons were so registered and, allowing for additions to and deletions from this list, the number of Distributors registered at the end of the year was 109, which total includes a Distributor registered for the sale of cream as legislated for under the Cream (Revocation) Order, 1951, and 7 dairy premises.

On 221 occasions the premises of distributors and dairies were visited, other than for sampling purposes, and as a result of these inspections, the following defects were detected and remedied:—

Premises limewashed	...	...	...	2
Structural improvement...	...	...	...	1
Shop renovated	...	...	...	1
Geyser installed	...	...	...	1
Drainage modified	...	...	...	1
Hygienic shop fittings installed	...	...	...	1
Heating and lighting improved...	...	...	...	1
Kitchen painted and tiled	...	...	...	1

*The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 and 1950 and The Milk (Special Designation) (Raw Milk) Regulations, 1949 and 1950.*—All milk now sold in the Borough has been Sterilised, Pasteurised or Tuberculin Tested and the use of these Special Designations in relation to the sale of milk is prohibited under the above Regulations unless the distributor is licensed for the use of same. The special designation "Accredited" is coupled with "Tuberculin Tested" in the Milk (Special Designation) (Raw Milk) Regulations, 1949, in order to obtain absolute control of the sale of milk so designated.

Licences issued in accordance with the above Regulations are operative for one year from 1st January and are required to be renewed annually. Principal Licences are granted to Distributors in respect of premises within the Borough and Supplementary Licences to Distributors who sell within the Borough but whose



premises are outside. The following licences had been granted and were in force on the 31st December, 1952 :—

<u>Principal Licences</u>	<u>Licences issued</u>	<u>In Operation 31. 12. 52.</u>
Distribution of Sterilised Milk ...	83	80
„ „ Pasteurised Milk ...	41	39
„ „ Tuberculin Tested...	31	30
<u>Supplementary Licences</u>		
Distribution of Sterilised Milk ...	18	18
„ „ Pasteurised Milk ...	17	17
„ „ Tuberculin Tested...	17	17

*Sampling.*—Under provisions of the third Schedule to the first of the above-mentioned Regulations, Methylene Blue and Phosphates tests have been prescribed, the former for assessing the “keeping” qualities of milk and the latter for estimating the efficiency of pasteurisation. In addition, a Turbidity test is also prescribed for ascertaining the effectiveness of the heat treatment of Sterilised milk.

During the year 42 samples of Pasteurised milk were submitted to these tests. The samples, all of which proved genuine, were obtained mainly from schools and hospitals.

*Analytical Examination of Milk.*—Three of the 17 formal and 41 informal milk samples submitted to chemical analysis proved non-genuine. In the case of each non-genuine report the presence of up to 1% added water was indicated. This percentage being insufficient to warrant legal proceedings and repetitive samples proving satisfactory, warning letters were sent to the distributors concerned.

Reports on samples taken from L.C.C. Schools and Nurseries for chemical and bacteriological examination continued to be furnished quarterly to that authority and reports on samples taken from Hospitals in the Borough for similar purposes were again forwarded to the authorities concerned.

**PRESERVED FOOD AND ICE CREAM PREMISES.**—In accordance with the provisions of the Food and Drugs Act, 1938, Section 14, all premises with the exception of clubs, hotels or restaurants used :—

- (a) for the sale or manufacture for the purpose of sale of ice-cream or other similar commodity or storage of ice-cream or other similar commodity intended for sale ; or



(b) for the preparation or manufacture of sausages or potted, pressed, pickled, or preserved meat, fish or other food intended for sale ;

are required to be registered by the owner or occupier with the Sanitary Authority.

*Preserved Food Premises (meat, fish, etc.).*—Six applications for registration (5 in respect of meat and 1 in respect of fish) were received during the year and, allowing for deletions, the total number of premises remaining on the register at 31st December was 109.

Three hundred and sixty-eight visits of inspection were made to Preserved Food premises and Fried Fish shops as a result of which improvements were made and sanitary defects remedied in 42 instances.

*Ice Cream Premises.*—By the end of the year the number of registered Ice Cream premises had increased by 12 to a total of 216.

Visits to these premises were made on 441 occasions and 8 defects were remedied.

**MANUFACTURE AND SALE OF ICE CREAM.**—Whilst in operation, sweet rationing undoubtedly stimulated the demand for ice cream and, as evidenced by the increase in the number of premises registered, the consumption of this commodity is still rising.

However, in order to minimise the risk of contamination and the spread of infection, the policy in Greenwich has been to encourage the sale of 'wrapped' or 'carton' ice-cream in preference to the manufacture and sale of it 'loose.'

Factories in the area which produce 'Ice Lollies' or 'Lolly' syrup are regularly and carefully supervised.

*The Ice Cream (Heat Treatment, etc.) Regulations, 1947 to 1951.*—The above Regulations were introduced to secure the elimination of pathogenic organisms by a heat-treatment process similar to that used in the pasteurisation of milk and, generally speaking, this has been accomplished. The Amendment Regulations, 1952, introduced on 5th May, served to provide a third method of heat treatment for ice cream.

*Ice Cream Sampling (Bacteriological Examination).*—As in the previous year the Council continued to make use of the Public Health Laboratory Service as provided for under the National Health Act and 99 samples were submitted for examination and grading according to the Ministry's provisional Grading Scheme.



The grading is based on the results of the Methylene Blue Reductase Test and a summary of the year's reports is given below :—

Samples taken	Time taken to Reduce Methylene Blue	Provisional Grade	Observations
48	4½ hours or more	1	Satisfactory
33	2½ to 4 hours	2	Sub-standard
13	½ to 2 hours	3	Unsatisfactory
2	0 hours	4	Most Unsatisfactory
2	Ice-lollies ...	No coliform bacteria isolated.	
1	Chocolate mousse „		

On receipt of a Grade 3 or 4 report it is the practice in this area to obtain further samples from a vendor before administrative action is taken. However, in no instance during the year was the latter course necessary, although the Food Inspectors visited the vendors' premises to inspect the equipment and to offer advice with a view to preventing further contamination.

*Quantitative Analysis.*—Standards for the composition of ice cream were first laid down in the Food Standards (Ice Cream) Order, 1951. However, on 7th July, the legal minimum quantity of fat and milk solids other than fat required to be contained in ice cream were reduced by the introduction of the Amendment Order of 1952.

In connection with quantitative analysis 38 samples (33 of ice cream, 3 of ice lollies and 2 of ice cream powder) were examined in the normal course of sampling. All were satisfactory and full reference to the Analyses will be found under the heading of Food and Drugs Act, 1938.

**FOOD REJECTED.**—The following table is a summary of unsound food voluntarily surrendered during the year under the provisions of the Public Health (London) Act, 1936, Section 180 (8), most of which was processed and used for animal feeding :—

*Shops, Stalls, etc.—*

*Meat—*

Beef ... ..	105 lbs.
Beef Sausage Meat ... ..	62½ „
Beef and Mutton trimmings ... ..	545½ „
Chicken ... ..	5½ „
Ham, sliced ... ..	24½ „
Mutton ... ..	7 „
Ox kidneys ... ..	90½ „
Ox liver trimmings ... ..	12 „
Pork ... ..	183½ „
Pork, cooked salt ... ..	30 „
Rabbit ... ..	8½ „
Turkey ... ..	9½ „
	<hr/>
	1,084½ lbs.



*Other Foods—*

Provisions, Canned (various)	...	33,140 $\frac{3}{4}$ lbs.
Fish	... ..	1,732 "
Coconuts	... ..	1,680 "
Dried Fruit	... ..	150 $\frac{1}{2}$ "
Rolled Oats	... ..	112 "
Cheese trimmings	... ..	85 "
Flour	... ..	22 "
Bacon	... ..	20 "
Sweets and chocolates	... ..	13 $\frac{1}{2}$ "
Biscuits	... ..	6 $\frac{1}{2}$ "
Spices	... ..	6 "
Beef cubes	... ..	5 "
		<hr/> 36,973 $\frac{3}{4}$ lbs.

TOTAL FOOD REJECTED 38,057 $\frac{3}{4}$  lbs.

Plus Cordials — 23 pints

It will be observed that by far the largest proportion of goods found to be unsound was of the 'canned' variety, consisting mainly of ham, tomato concentrate and red cherries in syrup.

In respect of ham it can be recorded that since less of this commodity is now imported, less is correspondingly declared unfit. A full explanation of the conditions necessitating the condemnation of imported ham was given in last year's report.

With regard to the tomato concentrate and the tinned cherries, both were stored at a large warehouse in the Charlton district, and, resulting from the visit of the Senior Food Inspector, a number of tins were submitted to the Public Analyst for examination.

Four tins of Italian Canned Cherries in Syrup which appeared to be 'blown' were found to contain hydrogen and dissolved tin and iron.

The merchants concerned stated that 25,000 cases of these cherries had been imported, all of which, as a result of doubts of the efficiency of the tin plating, were being collected at the Charlton warehouse for examination. Approximately one third of the consignment had 'hydrogen swell'—a special dispensation from the Home Canning Act issued by the Ministry of Food enabled this fruit to be transported to Norfolk for re-processing and re-packing.

The remainder of the stock was kept under observation and during the year several quantities of leaky, blown or rusted tins of cherries were condemned and sent for stock feeding.

The tomato concentrate was proved to contain an excessive copper content and its distribution was controlled in order to ensure its proper dilution for human consumption.



**PUBLIC HEALTH (MEAT) REGULATIONS, 1924/52.**—These regulations provide for the supervision of slaughterhouses, butchers' shops, stalls, and the protection of meat against contamination by dirt and flies, etc., in transport and handling.

As reported under the Legislation section, amendment regulations were introduced during the year extending existing provisions to the slaughter of horses, asses and mules.

*Butchers' Shops and Stalls.*—These are under the constant supervision of the Food Inspectors who made 435 visits of inspection and arranged for the correction of insanitary defects at 32 premises.

As with other premises, legal proceedings are instituted only after disregard of the Officer's warning and in no instance was it necessary to resort to this procedure.

*Slaughterhouses.*—Two premises in the Borough originally licensed as slaughterhouses have not been used as such since the introduction of the Livestock (Restriction of Slaughtering) Order 1940. In both instances the premises are no longer to be used as slaughterhouses and the issue of the appropriate licences has therefore been discontinued.

**PUBLIC HEALTH (IMPORTED FOOD) REGULATIONS 1937 and 1948.**—The Metropolitan Borough of Greenwich with a river frontage of five miles with more than 30 wharves and two of London's largest and most modern cold stores receives a considerable percentage of London's imported meat stored on behalf of the Ministry of Food. In addition, considerable quantities of fresh fruit, tinned foods and miscellaneous provisions are dealt with. Visits to wharves and cold stores are made by the Food Inspectors and imported food generally is carefully supervised.

Inevitably meat is the commodity to which Food Inspectors must devote most of their time and it is their responsibility to see that each consignment landed is accompanied by an "official" certificate. This may be in the form of a certificate, label, mark, stamp or voucher which is recognised by the Ministry of Food as a guarantee that the accompanying product was inspected *ante* and *post mortem* and passed as fit in accordance with criteria satisfactory to the Minister and that any necessary packing or preparation had been executed under hygienic conditions.

A number of circulars were received from the Ministry during the year illustrating official certificates approved for certain countries.



IMPORTED FOOD REJECTED.—The following unsound or diseased imported foods were surrendered, the meat being passed for non-edible and refining purposes, and other unsound food, with the exception of fruit pulp and juice, being processed for stock feeding.

The following foods were rejected at the wharves :—

<i>Meat—</i>						
Mutton and Lamb	...	...	...	194	lbs.	
Beef	...	...	...	2,027	"	
						2,221 lbs.
<i>Other Foods—</i>						
Tomato concentrate	...	...	...	6,680	lbs.	
Cherries	...	...	...	5,337	"	
Other fruit	...	...	...	321½	"	
Concentrated orange juice	...	...	...	1,000	"	
Sweetened fat	...	...	...	515½	"	
Cods roe	...	...	...	97	"	
Beans in tomato sauce	...	...	...	34¾	"	
Evaporated milk	...	...	...	31	"	
Cooked ham	...	...	...	20½	"	
Cake mixture	...	...	...	10	"	
Gammon bacon	...	...	...	9	"	
Fish, canned	...	...	...	8	"	
Condensed milk	...	...	...	5½	"	
Chopped pork, canned	...	...	...	4½	"	
						14,074½ lbs.
TOTAL IMPORTED FOOD REJECTED						16,295½ lbs.

From the above table it can be seen that the total food rejected is a considerable fall from that of the previous year, the present total being only 8% of the rejections for 1951.

CASEOUS LYMPHADENITIS.—This disease, sometimes called "pseudo-tuberculosis" occurs mainly in sheep although it is occasionally found in cattle, rabbits and chickens. It is met usually in imported sheep carcasses and is often the cause of meat being rejected as unfit for human consumption. It follows, therefore, that much time and attention is given by the Food Inspectors to this disease during their inspections at the wharves and cold storage plants in the Borough.

It is worthy of note that although more than 92,000 carcasses, etc., of meat were landed none was rejected as a result of Caseous Lymphadenitis.

	<u>Landed</u>	<u>Examined</u>	<u>Rejected</u>	<u>Weight</u>
Mutton and Lamb Carcasses	32,124	1,226	—	—
Sides of Mutton ...	110	6	—	—
Ewes and Wethers ...	30,374	602	—	—
Sheep and Wethers ...	19,717	204	—	—
Sheep, Wethers and Sides ...	1,755	18	—	—
Bags Cut Mutton ...	8,305	18	—	—



**MERCHANDISE MARKS ACT, 1926.**—Under the powers conferred by this Act, Orders in Council have been made prohibiting the sale or exposure for sale of imported foodstuffs unless bearing an indication of the country of origin. Six hundred and twenty-one inspections were made to secure compliance with the various Orders but on no occasion was it found necessary to take action against Vendors.

**BLACKHEATH FAIR.**—Blackheath, famous for its association with Wat Tyler and the Peasants' Revolt in 1381 and again with Jack Cade and the Kentish Insurgents in 1480, has become the scene of an established institution—the 'Fair.'

Here, during Easter, Whitsun and the August Bank Holiday, many thousands of Londoners from this and adjacent Boroughs, once again availed themselves of the opportunity of making a visit to this source of entertainment.

Constant supervision of refreshment stalls, etc., was necessary to ensure that a safe standard of cleanliness was maintained by the vendors and to this end a Food Inspector was always in attendance.

The observance of hygiene during these holiday periods was assisted by the provision of a clean water supply and adequate sanitary accommodation by the London County Council's Parks Department.

**STREET TRADERS.**—Under Part IV of the London County Council (General Powers) Act, 1947, registration with the local Council is compulsory for all street traders. During the year 54 applications were made and licences granted to street traders engaged in the retailing of articles of food. Seven licences were revoked, reducing the total number of licences in force on 31st December to 52.

A number of contraventions of Section 16 of the Food and Drugs Act, 1938 were observed and the offenders warned.

Premises used for the purpose of storing articles of food intended for sale by street traders, were kept under regular supervision by the Food Inspectors.

**SUPERVISION OF PREMISES INCLUDING FACTORIES WHERE FOOD IS PREPARED.**—In addition to the more general type of premises, such as restaurants, cafés, bakehouses, fish shops, etc., where food is provided, the Borough has numerous other premises at which food and drugs are prepared. Such premises include those of the



manufacturers of pharmaceutical sundries, mineral waters and ice-cream as well as fruit-canning factories, flour millers and brewers. To these premises the Food Inspectors made 5,907 visits, as a result of which 210 improvements were effected. It is pleasing to record that of the improvements obtained only one was prompted by the issue of a Notice, the remainder being accomplished on verbal instructions.

The following table is a statistical record of the major portion of the duties performed and inspections undertaken during the year by the Food Inspectors.

Premises Inspected or Visits Made.	No. of Visits	No. of Improve- ments effected.
Caterers', Restaurants, etc. ... ..	567	60
Grocers ... ..	553	51
Butchers' Shops ... ..	435	32
Dairies, Milk Shops... ..	221	9
Licensed Victuallers ... ..	100	7
Wharves and Factories ... ..	169	1
Bakehouses ... ..	194	20
Ice Cream Shops, etc. ... ..	441	8
Fried Fish Shops ... ..	195	12
Other Fish Shops ... ..	97	1
Cooked Meat & Preserved Foods ... ..	173	*
Visits Re. Shops Act ... ..	183	—
"    " Diseases of Animals Act ... ..	17	—
"    " Rat Infestation ... ..	67	—
"    " Food & Drugs Act ... ..	521	—
"    " Merchandise Marks Act & Markets ... ..	621	—
"    " Public Health (London) Act ... ..	73	—
"    " Food Poisoning ... ..	4	—
Sampling Visits ... ..	642	—
Other Visits ... ..	64	—
Fair Visits ... ..	19	—
School Visits ... ..	45	2
Miscellaneous Visits & Interviews ... ..	345	7
Complaints Investigated ... ..	161	—
<b>TOTALS ...</b>	<b>5,907</b>	<b>210</b>

\*Included under Grocers & Butchers' Shops.

**BAKEHOUSES.**—Of the 16 premises in the Borough being used as bakehouses at the end of the year, 4 were of the basement type in respect of which Suitability Certificates were in operation. Bakehouses and bakers' shops were visited on 194 occasions and, as a result of the inspections, 20 improvements were realised. These alterations were effected solely by informal action.



At the end of the year, the basement bakehouse at 29 Blackheath Hill, S.E.10 was still operating as the alternative premises in Plumbridge Street were still not available.

**CATERING ESTABLISHMENTS.**—Since 1947, when the National Conference on Food Infections was held in London, campaigns have been conducted at various times throughout the country to draw the public's attention to the need for cleaner food handling. Shortages of labour and materials have been a great drawback to progress in this field but, despite the handicap, some fair measure of success has been achieved in the Borough with the help of the Greenwich Guild of Hygiene.

Owing to pressing public demand for communal catering the number of these establishments has risen sharply and the task of their supervision has risen proportionately. The modern practice of providing "works canteens" and the introduction of "school meals" have only served to increase the Health Department's responsibilities.

As a result of 567 visits of inspection to the catering establishments, insanitary conditions were remedied in 70 instances and the following summary indicates the type of improvements carried out :—

<i>Type of Improvement Effected</i>					<i>Total No.</i>
Cleansed and painted	...	...	...	...	39
New Shop front	...	...	...	...	1
New Sinks fitted	...	...	...	...	7
Refrigerators installed	...	...	...	...	2
Water Heaters installed	...	...	...	...	7
New Flooring	...	...	...	...	1
Plumbing modified	...	...	...	...	3
Drains cleansed	...	...	...	...	2
Ventilation fans installed	...	...	...	...	2
Kitchen tiled	...	...	...	...	1
Hygienic Show Cases installed	...	...	...	...	1
Hygienic tables introduced	...	...	...	...	1
Rat nuisance eradicated	...	...	...	...	1
Insanitary Premises closed	...	...	...	...	2
TOTAL					70







Article	How Obtained	EXAMINATION		Action Taken
		Bact. or Chem.	Result	
Bottle of Ale	Complaint	Chem.	Clothes peg fixed in bottle neck. No injurious constituents found.	Warning letter to Brewer who expressed regret.
6 tins of Italian Red Cherries in Syrup.	Special Investigation at Warehouse.	Chem.	4 samples had 'hydrogen swell' and contained dissolved tin and iron.	See report under 'Food Rejected'— $\frac{1}{3}$ rd. of stock sent for pig food.
2 tins Crab Paste.	Complaint.	Bact.	No significant organisms isolated.	Complainant notified of results.
2 tins Italian Tomato Purée.	Special Investigation at Warehouse.	Chem.	Excessive copper content.	Controlled distribution to ensure proper dilution for human consumption
Bottle of Non-brewed Condiment	Complaint.	Chem.	Unfit for human consumption due to excessive iron content.	Manufacturer asked to discontinue preparation.
3 samples of Synthetic Cream.	Special Investigation.	Bact.	Examination not possible owing to fault at the Laboratory.	Further samples obtained.
3 samples of Synthetic Cream	Special Investigation. Obtained from several distributors.	Bact.	Very high plate count from 2 of the samples.	Explanation received from manufacturer. Joint representation by this and adjacent Boro' to Min. of Food.
Synthetic Cream.	'Follow up' to previous unsatisfactory samples.—do.—	Bact.	Viable organisms 9,400,000 per mil.	Samples taken to establish channel via which the unsatisfactory cream was entering the Borough.
Synthetic Cream		Bact.	Only small plate count.	
2 tins Italian Tomato Purée.	From Warehouse in Charlton.	Chem.	One sample contained excessive copper.	Dilution of 10 to 1 recommended for catering purposes.
Casket of Milk Chocolates	Complaint.	Chem.	Free from harmful ingredients.	Complainant informed of result.
Loaf of Bread.	Complaint.	Chem.	Suspected substance proved to be mixture of burnt flour and bread.	Warning letter to Baker.



**PUBLIC HEALTH (DRIED MILK) REGULATIONS, 1923 to 1948.**—These Regulations control the minimum milk-fat content of dried milk and the labelling of tins or other receptacles in which this commodity is contained.

One sample was taken during the current year and this proved to be satisfactory.

**PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923 to 1948.**—Minimum percentages of milk-fat and milk-solids of condensed milk as well as the standards of labelling of receptacles are covered under the provisions of these Regulations.

During the year ten samples were examined and pronounced genuine.

## NOTIFICATION OF FOOD POISONING

Under the provisions of Section 17 of the Food and Drugs Act, 1938, every registered medical practitioner attending on any person shall, if he suspects or becomes aware that any person is suffering from food poisoning, forthwith notify such case to the Medical Officer of Health.

Ten notifications were received during the year compared with 4 in 1951, 12 in 1950, 6 in 1949 and 5 in 1948.

All ten cases were of the sporadic type—in five instances the agent identified was *Salmonella typhimurium* and in one other case although *Salmonella* was isolated the type remained unidentified. In the remaining four cases no organisms were isolated.

Although each case was thoroughly investigated no direct connection with any specific food was established.

A complete recovery was made by all patients.



## FOOD AND DRUGS ACT, 1938

Number and Description of Samples Submitted for Analysis  
under the above Act during the year 1952

ARTICLE	Number Examined			Number Adulterated, &c.		
	Formal	Informal	Total	Formal	Informal	Total
Ale	—	1	1	—	—	—
Almonds, ground (including 1 mixture)	—	3	3	—	—	—
Arrowroot	—	2	2	—	1	1
Asprin tablets	—	3	3	—	—	—
Baking powder and golden raising powder	—	3	3	—	—	—
Barley flour	—	1	1	—	—	—
Biscuits (cheese straws)	—	1	1	—	—	—
Black pudding	—	2	2	—	—	—
Borax and honey	—	1	1	—	—	—
Boric acid	—	1	1	—	—	—
Butter	—	6	6	—	—	—
Cake decorations	—	1	1	—	1	1
Cake and pudding mixtures	—	5	5	—	—	—
Cakes	—	2	2	—	—	—
Calamine lotion	—	1	1	—	—	—
Camphorated oil	—	1	1	—	—	—
Cascara sagrada tablets	—	1	1	—	—	—
Castor oil	—	1	1	—	—	—
Cheese spread	—	1	1	—	—	—
Coconut, desiccated	—	1	1	—	—	—
Coffee	—	3	3	—	—	—
Coffee extract, dried	—	2	2	—	—	—
Coffee & chicory essence	—	8	8	—	—	—
Confectionery, flour (cakes)	—	3	3	—	—	—
Cooking fat	—	2	2	—	—	—
Confectionery, sugar	—	2	2	—	1	1
Cornflour	—	1	1	—	—	—
Cream, imitation	—	1	1	—	—	—
Cream, powder, synthetic	—	1	1	—	—	—
Curry powder	—	5	5	—	—	—
Custard powder	—	3	3	—	—	—
Drinks, soft	—	6	6	—	1	1
Easton's Syrup	—	1	1	—	1	1
Epsom salts	—	2	2	—	—	—
Figs, compound syrup of	—	1	1	—	—	—
Fish, canned (prawns sild, etc.)	—	6	6	—	—	—
Fish cakes	—	2	2	—	—	—
Fish paste	—	6	6	—	—	—
Flavouring essence	—	3	3	—	—	—
Flour, self raising	—	3	3	—	—	—



ARTICLE	Number Examined			Number Adulterated, &c.		
	Formal	Informal	Total	Formal	Informal	Total
Fruit, bottled (cherries, etc.)	—	5	5	—	—	—
Fruit, canned (apples etc.)	—	8	8	—	—	—
Fruit, dried	—	2	2	—	—	—
Fruit, glacé (cherries etc.)	—	3	3	—	—	—
Fruit juice, canned	—	2	2	—	—	—
Fruit pie	—	1	1	—	—	—
Gin	2	—	2	—	—	—
Ginger, crystallised	—	1	1	—	—	—
Glauber salt	—	1	1	—	1	1
Glucose, powdered	—	1	1	—	—	—
Gravy preparations	—	2	2	—	—	—
Herb, dried	—	1	1	—	—	—
Herbs, extract of	—	1	1	—	—	—
Honey	—	2	2	—	—	—
Hydrogen peroxide, solution of	—	1	1	—	—	—
Hypophosphites, compound syrup of	—	1	1	—	—	—
Ice Cream	—	33	33	—	—	—
Ice Cream powder	—	2	2	—	—	—
Ice Lollipop	—	3	3	—	—	—
Iodine ointment	—	1	1	—	—	—
Jam	—	8	8	—	—	—
Jelly, tablets and crystals	—	5	5	—	1	1
Junket preparations	—	2	2	—	—	—
Lard	—	3	3	—	—	—
Lemonade and effervescent powder	—	5	5	—	—	—
Malt extract with cod liver oil	—	1	1	—	—	—
Marmalade	—	2	2	—	—	—
Margarine	—	6	6	—	—	—
Meat extract	—	1	1	—	—	—
Meat, minced beef	—	1	1	—	—	—
Meat pies	—	10	10	—	—	—
Meat products (brawn, faggots etc)	—	4	4	—	2	2
Meat products, canned	—	7	7	—	—	—
Medicated tablets	—	3	3	—	—	—
Meringue mixture	—	1	1	—	1	1
Milk	17	41	58	2	1	3
Milk, canned	—	10	10	—	—	—
Milk, dried (full cream)	—	1	1	—	—	—
Micemeat	—	3	3	—	1	1
Mustard	—	3	3	—	—	—
Oatmeal	—	1	1	—	—	—
Paraffin, medicinal	—	3	3	—	—	—



ARTICLE	Number Examined			Number Adulterated, &c.		
	Formal	Informal	Total	Formal	Informal	Total
Parrish's chemical food	—	1	1	—	—	—
Pea flour	—	1	1	—	—	—
Peanut butter	—	1	1	—	—	—
Peas, dried	—	1	1	—	—	—
Peel, candied	—	1	1	—	—	—
Pickles, (chutney, sweet, mixed sweet etc.)	—	8	8	—	—	—
Potato crisps	—	3	3	—	—	—
Potato powder	—	1	1	—	—	—
Proprietary food (Brands essence etc.)	—	5	5	—	—	—
Pudding, Christmas	—	2	2	—	—	—
Rice, ground	—	1	1	—	—	—
Saccharin tablets	—	3	3	—	—	—
Sago	—	1	1	—	—	—
Salad cream	—	4	4	—	—	—
Sauces (anchovy, mint, etc.)	—	12	12	—	2	2
Sausages	8	—	8	2	—	2
Sausages, cooked (liver, etc.)	—	2	2	—	—	—
Semolina	—	1	1	—	—	—
Soda, bicarbonate of	—	2	2	—	—	—
Soup, canned	—	7	7	—	—	—
Soup powder	—	3	3	—	—	—
Spaghetti, canned	—	2	2	—	—	—
Spices, mixed	—	5	5	—	—	—
Suet, shredded	—	2	2	—	—	—
Sulphur ointment	—	1	1	—	—	—
Sulphur and yeast tablets	—	1	1	—	—	—
Tapioca, flaked	—	3	3	—	—	—
Treacle	—	1	1	—	—	—
Vegetables, canned (peas, etc.)	—	13	13	—	—	—
Vinegar, artificial	—	2	2	—	—	—
Vinegar, malt	—	1	1	—	—	—
Welsh Rarebit mixture	—	1	1	—	—	—
Whisky	10	—	10	—	—	—
Wine, alcoholic	—	6	6	—	—	—
Wine, non alcoholic	—	3	3	—	—	—
Yoghourt milk	—	1	1	—	—	—
Zinc and Castor oil ointment	—	1	1	—	—	—
Zinc and Starch powder compound	—	1	1	—	—	—
TOTALS	37	395	432	4	14	18



# Administrative Action Taken in Regard to Samples Reported to be NOT GENUINE

Sample No.	Article	Nature of adulteration and/or irregularity	Action taken
T. 82	Meringue Mixture	An imitation Meringue Mixture consisting of a coloured and flavoured solution of synthetic gum (methyl cellulose). Genuine meringues are made from sugar and white of egg. Since the sample contained neither and was virtually devoid of nutritive value its description was considered false.	Matter referred to the Ministry of Food.
T. 101	Milk	Judged by the recognised standard this sample was deficient in milk-solids other than milk fat; the equivalent of 1% of added water was therefore presumed.	Deficiency small. Further sample proved satisfactory. Legal action not warranted.
T. 106	Brawn	Contained bone—8%. Brawn does not ordinarily contain bone.	Satisfactory explanation received.
T. 134	Tomato Ketchup	Mouldy with fungoid growth on surface. Contained fungal hyphae.	Remainder of stock destroyed.
T. 147	Tomato Ketchup	Contained an excessive proportion of fungus.	Satisfactory explanation received from manufacturer.
T. 158	Easton's Syrup	Absence of strichnine and quinine.	Stock withdrawn from sale. Explanation received from manufacturers who were in the process of being 'wound up'.
T. 213	Table Jelly	Failed to set satisfactorily.	Manufacturer at a loss to explain failure of jelly to set. Firm in process of closing down.
T. 242	Glauber's Salt, B.P.	Had increased in potency owing to the loss of water of crystallization by exposure to air.	Stock withdrawn from sale.
T. 244	*Toffee Cigarettes	Contained no added fat and were not made from toffee.	Matter referred to Ministry of Food
T. 300	Brawn.	Contained turbinate bone. Brawn does not ordinarily contain bone.	Warning letter sent to manufacturer.
T. 318	Arrowroot	Contained cornflour—8%	Explanation received from manufacturer.



Sample No.	Article	Nature of adulteration and/or irregularity	Action taken
T. 343	Mincemeat	Did not contain the required proportion of soluble solids ; viz :—65% by weight.	Warning letter to manufacturer. All offending stock withdrawn from sale.
T. 376	Cake Decorations	Contained an excessive proportion of talc.	Explanation received from manufacturer.
T. 383	Non-Alcoholic Peppermint Cordial	Contained an excessive proportion of preservative.	Warning letter.
951	Milk	Judged by the recognised standard this sample was deficient in milk-solids other than milk fat, corresponding to the presence of 1% added water.	Satisfactory reply from wholesaler.
956	Milk	Judged by the recognised standard this sample was deficient in milk-solids other than milk fat, corresponding to the presence of 0.8% added water	Deficiency too small to warrant legal action. Further sample proved satisfactory.
957	Pork Sausages	Meat content found to be 10% deficient.	Case referred to Ministry of Food, Enforcement Branch.
11	Beef Chipolata Sausages	Judged by the recognised standard this sample was deficient in meat—10%.	Explanation received from manufacturer.

\*This sample was not purchased but was presented for analysis as a reason for complaint by a member of the public.



## SECTION F

### Prevalence of, and control over, infectious and other Diseases

During the year under review, the only addition to legislation in respect of Infectious Diseases was provided by the Public Health (Tuberculosis) Regulations, 1952, which, replacing those previously in force, operated from 1st May, 1952. The accompanying Circular (MH 6/52) calls for co-operation and goodwill on the part of the Authorities concerned and it is on this basis that the future efficiency of records available to the Medical Officer of Health will rely, since of the legal requirements contained in the Public Health (Tuberculosis) Regulations, 1930, only the obligation to notify cases is retained.

The total number of Infectious Diseases notified under Section 192 of the Public Health (London) Act, 1936, and associated Orders and Regulations was 1,468. Under the Public Health (Tuberculosis) Regulations, 1930 and 1952, there were 119 notifications, giving a consolidated total of 1,587 cases notified during the year. In 22 of these cases the diagnoses were not confirmed, thus giving a corrected figure of 1,565. The following table indicates the figures for six years :—

<u>Year</u>	<u>No. of corrected notifications</u>
1946	1,691
1947	1,013
1948	1,671
1949	1,335
1950	1,644
1951	2,266
—	—
6-year Average	1,601
<u>1952</u>	<u>1,565</u>

Particulars of age groups and districts affected are shown in the table at the end of this Report.



NATIONAL INSURANCE ACT, 1946.—From time to time it is necessary for the Medical Officer of Health to insist that a suspected 'carrier' of, or a person in contact with, an infectious disease should be precluded from working in order that the risk of transmission of the disease is minimised. This is especially necessary when the person concerned is a 'food handler.'

Regulation 3(b) of the National Insurance (Unemployment and Sickness Benefit) Regulations, 1948, made under the above Act, enables any person so excluded to claim sickness benefit on production of a certificate issued by the Medical Officer of Health.

In the Ministry of Health Circular 115/48 it has been suggested that the Medical Officer of Health should be prepared to furnish such a certificate if, in his opinion, circumstances are such that this action becomes necessary.

During the current year 2 certificates were so issued.

SMALLPOX.—There were no cases notified during the year but a number of contacts were reported arriving in the Borough from abroad, and these were kept under observation for the requisite period.

*Public Health (Smallpox Prevention) Regulations, 1917.*—These Regulations give a Medical Officer of Health power to vaccinate or re-vaccinate, without charge, any contacts of a case of Smallpox willing to submit themselves for treatment.

During March of this year an outbreak of *variola minor* occurred in Rochdale and subsequently a soldier developed this disease at Aldershot.

Arising from this latter case one vaccination concerning a suspected contact, was carried out by your Medical Officer of Health.

Smallpox is a very dangerous and disfiguring disease and prior to compulsory vaccination in 1853, 9/10ths of smallpox victims were children under 5 years of age, but subsequently children, by and large escaped. Since 1898, when the 'conscientious objection' clause made its appearance, vaccinations have declined steeply and the position deteriorated still further from 1948 when vaccination became optional.

Occasionally smallpox scares throughout the country result in a jump in vaccinations but generally the trend is downwards.



The number of vaccinations carried out during 1952 was 541 indicating a fall of 774 from that of the previous year.

Today, although every precaution is taken at seaports and airports, infected persons do occasionally slip through but the comparative immunity of the country has hitherto been due mainly to its high vaccination state. With the fall in vaccinations this fortunate state of affairs cannot be expected to continue.

It is a remarkable thing that the public, who at the present time are reluctant to protect themselves, rush for vaccination in the event of an outbreak, and in infected cases it is then usually too late.

INTERNATIONAL CERTIFICATES (MINISTRY OF HEALTH CIRCULAR 20/52).—The question of authentication of International Certificates of vaccination has now been settled by the adoption of the International Sanitary Regulations (W.H.O. Regulations No. 2) which replaced the International Sanitary Conventions on 1st October, 1952. The Regulations prescribe, *inter alia*, new forms of International Certificates of vaccination against Cholera and Smallpox and, to be valid, the certificate must bear an approved stamp which certifies that the signature of the Vaccinator is that of a practising medical practitioner.

During the year some 70 certificates of persons proceeding abroad were so authenticated, of these 66 were in respect of Smallpox and 4 for Cholera; in 3 instances the necessary vaccinations were actually carried out by your Medical Officer of Health.

In addition to the above, 2 certificates in respect of inoculation against Typhoid were similarly verified.

MEASLES.—There were 919 notifications received of which one was not confirmed. The corrected total of 918 compares with 1,482 for the previous year and 935 for 1950. The distribution of the cases was as follows:—East Greenwich 353; West Greenwich 151; St. Nicholas, Deptford 25; Charlton and Kidbrooke 389.

Twenty-nine cases occurred in children under one year of age, 409 between 1 and 5 years, and 471 between the ages of 5 and 15.

As stated in my 1950 Report, the biennial fluctuation appeared to be re-asserting itself and this is borne out for the year under review. The epidemic, whilst not approaching the high incidence of two years ago, began at a similar period in October and was



continuing at the close of the year. Twenty-three cases were removed to Hospital but there were no fatalities.

**WHOOPING COUGH.**—Primarily 192 cases of this disease were notified, two of which were not confirmed. The final figure of 190 compares favourably with 384 for the previous year and 309 for 1950. Of these 190 cases, 63 occurred in East Greenwich; 12 in West Greenwich; 13 in St. Nicholas, Deptford; and 102 in Charlton and Kidbrooke. Fourteen cases were under one year of age, 103 between 1 and 5 years, and 73 between the ages of 5 and 15.

Ten cases were removed to Hospital.

There were no fatalities.

**DIPHTHERIA.**—Five notifications were received in respect of this disease and in one instance the diagnosis was not upheld. Of the 4 confirmed cases, one was in respect of a soldier admitted to the Royal Herbert Hospital two days after his arrival in this country from abroad. The remaining cases (none of whom was immunised) concerned three children of the same family from the Rest Centre at Blackheath. Despite thorough investigation, no contact with other cases or other source of infection could be established. Each of the four patients made a complete recovery.

No cases were reported for 1951 and the current year's figure of 4 shows the importance of keeping the immunity ratio of the population high by systematic immunisation in early childhood.

**Antitoxin.**—In accordance with the Antitoxin Order, 1910, a supply of Antitoxin is provided by the Council for the use of General Practitioners in emergency cases. No requests were dealt with during the current year.

During 1950 arrangements were made for a supply of this Antitoxin to be made available at St. Alfege's Hospital.

**ACUTE PRIMARY PNEUMONIA AND ACUTE INFLUENZAL PNEUMONIA.**—There were 18 cases attributed to these causes as compared with 30 and 29 for 1950 and 1951 respectively. Eleven occurred in East Greenwich; 2 in West Greenwich; and 5 in Charlton and Kidbrooke. Four cases were removed to Hospital but there were no fatalities.

**TYPHOID FEVER.**—No confirmed case in respect of this disease was received during the year.



SCARLET FEVER.—Altogether there were 221 notifications received, of which 9 were not confirmed. The corrected total of 212 compares with 92 in 1951 and 160 in 1950. The distribution was 76 in East Greenwich ; 58 in West Greenwich ; 6 in St. Nicholas, Deptford ; and 72 in Charlton and Kidbrooke.

Forty-nine cases received hospital treatment.

No deaths resulted from this disease.

ERYSIPELAS.—Compared with 4 in 1951, 16 cases were notified during the current year and of these, 8 were removed to hospital.

There were no fatalities.

ZYMOTIC ENTERITIS OR EPIDEMIC DIARRHOEA (Children under 5 years of age).—Originally 12 cases were notified but this figure was modified and 8 were eventually recorded as confirmed, compared with 15 for the previous year. Of these, 6 were under one year and 2 between 1 and 5 years.

No deaths were registered among these cases, all of which received hospital treatment.

DYSENTERY.—Twenty-two notifications were received in respect of this disease compared with 93 for the previous year. Sixteen of these, all of the Sonne type, resulted from a minor outbreak at the Rest Centre, Blackheath. For this reason and the highly infectious nature of Sonne Dysentery, removal of every case for treatment in hospital was considered the most effective means of limiting the spread of the infection. Seven families were ultimately involved over a period of less than 4 weeks but despite diligent investigation, in no instance could infected food be established as the primary causative agent. Of the 16 cases, twelve of which were children, ten were confirmed from 23 specimen faeces taken for bacteriological examination by this department.

The remaining 6, five of which were removed to hospital, proved isolated cases for investigation of all contacts revealed no positive results.

SCABIES.—Ten cases were so notified compared with 4 for the previous year.

Treatment of all cases of scabies is carried out at the Tunnel Avenue Centre.



**PUERPERAL PYREXIA.**—The first complete year operating under the new Puerperal Pyrexia Regulations, 1951, which became effective on 1st August, 1951, produced, as anticipated in my previous Report, a sharp rise in the number of cases notified. The total of 35 compares with figures for the years 1949, 1950 and 1951 of 4, 9 and 10 respectively.

All patients received hospital treatment. There were no fatalities.

**OPHTHALMIA NEONATORUM.**—No notifications in respect of this disease were received during the year. Figures for the years 1950 and 1951 were 2 and 1 respectively.

**MENINGOCOCCAL INFECTION.**—Diagnosis of one of the 4 notifications received was not upheld, giving a final total of 3. There were no cases in the previous year but 1 was recorded in 1950.

All three cases were removed to hospital. One case, a child of nine months, died on the day of admittance.

**ACUTE ENCEPHALITIS. (Infective or Post-Infectious).**—Three cases attributed to this cause were received during the year under review, 2 being under the sub-heading 'Infective' and one under 'Post-Infectious.' Of the former, one case died, cause of death being ascertained at a Post Mortem examination. Each of the remaining cases made a complete recovery.

**POLIOMYELITIS.**—Out of a total of 10 notifications, 7 were eventually registered as confirmed cases, of which 6 were of the paralytic type and one non-paralytic. Figures for the years 1950 and 1951 were 23 and Nil respectively.

In no instance was any determinable relationship established between the cases which occurred during the months of March to August.

With regard to the possible connection of paralytic cases with recent inoculation for Diphtheria or Whooping Cough immunisation it is interesting to note that in 2 such cases the site of recent inoculation and the area of paralysis were the same.

Each notified case received hospital treatment and there were no fatalities.



However, one death from poliomyelitis which occurred at the Royal Herbert Hospital was allocated to this area. It transpired that a soldier was admitted on 21st November to the Cambridge Military Hospital, Aldershot from the Middle East. On 12th December this patient was transferred to the Royal Herbert Hospital where he subsequently died.

CONTINUED FEVER.—As in the case of the previous year no notifications were received in respect of this disease.

MALARIA.—No Notifications were received during the year under review.

TUBERCULOSIS.—During the year 119 notifications of Tuberculosis were received in the Borough, 30 less than in 1951. Of this number 101 were of the pulmonary type, ordinarily known as consumption, and 18 were non-pulmonary, i.e., Tuberculosis of parts of the body other than the lungs.

The following table gives the distribution :—

District	Pulmonary	Non-Pulmonary	Total
East Greenwich ...	33	4	37
West Greenwich ...	18	1	19
St. Nicholas, Deptford ...	3	—	3
Charlton and Kidbrooke	47	13	60
Totals	101	18	119

Disinfection was offered and carried out in 52 cases including 116 rooms and 301 articles of clothing and bedding, etc.

The number of notified cases of Tuberculosis remaining on the Register at 31st December, 1952, was as follows :—

PULMONARY					NON-PULMONARY				
Men	Women	Children		Total	Men	Women	Children		Total
		M	F				M	F	
463	347	37	37	884	22	32	9	9	72

For further clarification I append herewith copy of Form T.137 for the year under review as forwarded to the County Medical Officer of Health.



# PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

**Part I.**—Summary of notifications of Tuberculosis during the period from the 1st January, 1952, to the 31st December, 1952.

AGE PERIODS				Formal Notifications													Total (all ages)
				Number of Primary Notifications of new cases of tuberculosis													
				0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	
Respiratory, Males	...	...	...	—	—	1	1	1	5	7	12	5	8	9	2	1	52
Respiratory, Females	...	...	...	—	—	3	4	1	5	11	15	3	1	2	—	—	45
Non-Respiratory, Males	...	...	...	—	—	—	1	—	1	2	3	—	—	2	—	—	9
Non-Respiratory, Females	...	...	...	—	—	—	1	—	2	2	—	2	—	—	—	—	7

**Part II.**—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

SOURCE OF INFORMATION			Number of cases in age Groups														Total	
			0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—			
Death Returns from Local Registrars	Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(A)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(B)	
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(C)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(D)	
Death Returns from Registrar-General (Transferable deaths)	Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(A)	
		F	—	—	—	—	—	—	—	—	1	—	—	—	—	—	(B)	
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(C)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(D)	
Posthumous Notifications	Respiratory	M	—	—	—	—	—	—	—	—	—	1	—	1	1	—	3 (A)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(B)	
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(C)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	1	1	(D)	
“ Transfers ” from other Areas (excluding transferable deaths)	Respiratory	M	—	—	2	—	—	—	4	16	7	—	1	—	—	—	30 (A)	
		F	—	—	1	—	1	—	4	8	6	1	—	—	—	—	21 (B)	
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(C)	
		F	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1 (D)	
Other Sources	Respiratory	M	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1 (A)	
		F	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1 (B)	
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(C)	
		F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(D)	

N.B. Where notification of one form of Tuberculosis is subsequently followed by a notification of the other, only the first notification is taken into account for the purpose of this return.

TOTALS (A) 34 (B) 23  
(C) — (D) 2



**MASS RADIOGRAPHY.**—Mass radiography was originally carried out in London by the London County Council, but since July, 1948, the responsibility for this service has rested with the Regional Hospital Board.

When facilities for this service have been available in the vicinity the Department's assistance has been sought to help arrange appointments especially for the staffs of local firms and establishments.

**VERMINOUS CONDITIONS.**—The procedure adopted to combat infestation by lice and general verminous conditions is essentially the same.

In addition to the notified cases of Scabies, all suspected cases are followed up and the homes visited by the Lady Sanitary Inspector who gives advice and instruction concerning treatment.

Treatment for all cases is carried out at the Tunnel Avenue Cleansing Station and the following Return summarises the work carried out during the year :—

	Attendances	
	Vermin	Scabies
Adults	97	61
Children under school age	45	15
School children	478	43
No. of home visits by Lady Sanitary Inspector ...	...	...
No. of home revisits by Lady Sanitary Inspector ...	...	...

**DISINFECTION.**—The disinfection of rooms is effected by the formaldehyde spray. This is carried out on removal of the infectious case or termination of the illness, and, on request, for conditions other than notifiable. In cases of request a charge is made according to the circumstances of the case. Bedding and wearing apparel may be removed to the Disinfecting Station, Tunnel Avenue, where they can be submitted to steam disinfection. Books may be treated with formalin.

The following Return shows in detail the work carried out during the year :—



## PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

Part I.—Summary of notifications of Tuberculosis during the period from the 1st January, 1952, to the 31st December, 1952.

## Rooms and Articles Disinfected, Year ended December, 1952

DISEASES, ETC.	Premises Entered	Rooms	Beds	Mattresses	Bolsters	Pillows	Sheets	Blankets	Eiderdowns	Cushions	Quilts	Odd Articles	Wearing Apparel	Rugs and Mats	Covers	Total No. of Articles Disinfected
Scarlet Fever ... ..	181	218	62	141	110	340	328	470	13	30	65	271	269	5	130	2,234
Diphtheria ... ..	12	15	4	11	6	22	22	31	2	—	—	13	35	—	12	158
Tuberculosis ... ..	52	116	9	29	13	65	25	77	2	11	9	31	11	4	15	301
Cancer ... ..	14	11	3	5	5	26	7	20	—	11	1	8	6	—	6	98
Meningococcal Infection	5	9	2	3	—	7	4	11	—	—	2	—	6	—	4	39
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever ... ..	1	2	1	—	1	4	—	3	—	—	—	—	—	—	3	13
Polio-Myelitis ... ..	16	44	3	15	6	23	20	38	1	10	4	6	36	—	11	173
Erysipelas ... ..	1	1	—	1	1	2	2	3	—	—	—	—	—	—	—	9
Acute Encephalitis ...	2	2	1	1	—	6	6	13	1	—	1	—	14	—	3	46
Measles ... ..	2	3	—	1	—	1	1	3	—	—	—	—	—	—	1	7
Scabies ... ..	1	—	—	—	—	—	—	2	—	—	—	—	—	—	—	2
Other Diseases ... ..	87	63	10	53	7	79	39	146	1	21	3	121	100	9	22	611
Vermineous Premises ...	30	1	21	40	8	45	25	78	—	12	2	48	59	3	78	419
TOTAL ... ..	404	485	116	300	157	620	479	895	20	95	88	498	536	21	285	4,110
Articles destroyed	—	—	22	42	6	22	2	8	—	5	—	155	34	4	1	301



## CHEST CLINIC REPORT

I am indebted to Dr. C. W. L. Jeanes, Chest Physician at the Greenwich Chest Clinic, for the following Report on Tuberculosis in the Borough.

At the end of 1952 there were 895 patients on the Chest Clinic Register consisting of:—

<u>Pulmonary Tuberculosis</u>			<u>Non-pulmonary Tuberculosis</u>		
<u>Men</u>	<u>Women</u>	<u>Children</u>	<u>Men</u>	<u>Women</u>	<u>Children</u>
430	333	73	17	26	16

Of these, 93 were new notifications of pulmonary tuberculosis and 14 of non-pulmonary tuberculosis.

During the year 45 patients were discharged as recovered.

Forty-two patients on the Tuberculosis register died during the year but only 32 of these died from Tuberculosis, the remaining 10 dying from accidents or illnesses in no way connected with their tuberculosis. Bearing this in mind, the actual death rate from Tuberculosis was 0.35 per 1,000 population.

Year	Population of Borough	Notifications		Incidence per 1,000 of population		Deaths	
		Pulm. Tub.	Non-Pulm. Tub.	Pulm. Tub.	Non-Pulm. Tub.	Total	Rate per 1,000
1938	95,770	153	38	1.59	0.39	53	0.55
1939	94,790	93	14	0.98	0.14	60	0.67
1940	74,280	125	17	1.68	0.23	73	0.97
1941	57,070	138	32	2.42	0.56	74	1.30
1942	60,530	164	18	2.70	0.29	64	1.06
1943	62,870	117	26	1.86	0.41	60	0.96
1944	61,800	113	16	1.82	0.26	47	0.76
1945	63,800	149	16	2.33	0.25	53	0.83
1946	76,840	173	18	2.25	0.23	56	0.73
1947	82,230	171	13	2.08	0.16	67	0.82
1948	84,410	112	17	1.32	0.20	62	0.73
1949	87,680	118	10	1.35	0.11	53	0.61
1950	89,570	126	18	1.41	0.20	50	0.56
1951	89,390	124	22	1.39	0.24	40	0.44
1952	90,880	101	18	1.11	0.19	42	0.46

The drugs Streptomycin, P.A.S. and Isoniazid, together with modern surgery in suitable cases, have contributed very largely to the fall in the death rate during the last few years.



The short term treatment scheme, linking Greenwich Chest Clinic with in-patient beds at Kettlewell Hospital, Swanley, has continued to work very successfully. A combined hospital-home treatment scheme such as this has entirely overcome the waiting list for the treatment of early tuberculosis and patients are now admitted within 2 weeks of diagnosis. An average stay of three months is sufficient time for the disease to be brought under control to a point where further treatment can reasonably be carried on at home.

There is still, unfortunately, a long wait for thoracic surgery, often up to one year, but it is hoped that this difficulty will eventually be overcome.

#### *General Statistics.*

No. of X-rays taken	...	...	...	...	9,422
Total patients attendances (including A.Ps.)	...	...	...	...	10,323
No. of new patients	...	...	...	...	1,437
No. of contacts examined for first time	...	...	...	...	611
No. of home visits by Health Visitors	...	...	...	...	3,231
No. of home consultations by Chest Physicians	...	...	...	...	181
No. of B.C.G. vaccinations	...	...	...	...	91

From these figures it will be seen that the volume of work continues to increase, especially the number of X-rays taken.

It is now an established routine that every case of Tuberculosis should have his chest X-rayed (often extending over a period of more than five years) and all contacts of known cases are urged to attend at regular intervals. Certain special groups such as expectant mothers, health workers, home helps, emigrants, etc., are also encouraged to have their chests X-rayed. In addition the number of patients referred to chest clinics by general practitioners has increased enormously in the past ten years.

Although large numbers of X-rays cost a large amount of money, it is only by their widespread use that serious chest disease can be discovered in its early treatable stage. Modern methods of detection, control and treatment have reduced deaths from pulmonary tuberculosis in Greenwich from 67 in 1947 (with a population 20,000 less than at present) to only 29 in 1952. Although the mortality from tuberculosis has been reduced there has as yet been no decrease in the notifications of the disease. This, coupled with the recent rapid increase in the number of cases of carcinoma of the lung, makes it more than ever important that there should be no restrictions on chest radiography.



Besides the increasing costs, the demand for X-ray film has recently been exceeding supply. For more than 10 years routine Mass X-rays have been using 35 mm. film. Much more recently the "Odelca" mirror camera with its 70 mm. film has been produced and one of these units was purchased by the Hospital Management Committee and since September, 1952, has been used for all routine work at Greenwich Chest Clinic.

It has been found that this film is entirely satisfactory for detecting even the smallest abnormality in the chest. 35 mm. films must be viewed through a projector, but the "Odelca" film is large enough to be viewed direct. It has the added advantage of being easily stored in the patient's notes, thus largely eliminating much time-consuming X-ray filing.

The cost of the individual 70 mm. film is about 3d. whereas the full sized 15"  $\times$  12" film costs about 3/-. The saving in X-ray filing cabinets and envelopes, the greatly diminished storage space and the time saved by the clerical staff are important economic considerations.

As the films are in rolls of about 40, patients can be X-rayed in rapid succession, which is particularly convenient in a busy clinic, or when doing routine films for Maternity Clinics.

During the 6 months September 1952 to February 1953, 2,803 adults had their chests X-rayed at the Greenwich Clinic. Of these, 2,485 were on 70 mm. film, and it was found necessary to take the full size 15"  $\times$  12" film in only 318 cases (11%).

The fact that 89% of all adult chest X-rays were on 70 mm. film demonstrates that besides many administrative advantages, it has effected a remarkable economy.

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Although the preceding report presents at least a satisfactory trend in the treatment of tuberculosis, it is more than disquieting to note the remarkable increase in the incidence of cancer of the lung. Deaths from this disease were almost as many as those for tuberculosis. Heavy smoking may well be a contributory factor, but atmospheric pollution may be important.



## SECTION G

### Greenwich Guild of Hygiene

Since the inception of the Guild in 1950 to the end of 1952 some 96 food traders have applied for Certificates of Hygiene; 77 have been awarded including 12 during the past year. Not only have certificate holders accomplished a satisfactory degree of hygiene but by example have influenced their fellow-traders to do likewise. Now that equipment is more readily available and building licences no longer hinder necessary structural improvements, real progress can be made. Already quite apart from the bare requirements of Section 13, Food & Drugs Act, 1938, dealing with washing facilities, ventilation, etc., many welcome additions are to be seen. Glass counter-guards in most provision shops protect the food from handling or being coughed upon by the less enlightened customer. Glass lids to biscuit tins are becoming the rule. Clean white paper is used for wrapping in place of the ubiquitous newspaper. Refrigeration is almost universal. Even fruiterers and greengrocers are keeping their wares beyond the risk of canine contamination.

Nevertheless in spite of all that is done to encourage the hygiene equipping of shops and catering establishments and to impress the food handler with the urgent necessity of hygiene practice, much remains to be done to stamp out the unclean personal commissions and omissions still common to this generation. The blowing into paper bags in which food is to be placed; failure of the food handler to wash the hands after use of the toilet; smoking while serving or otherwise handling food, and so forth. These and the many other dangerous practices can form a focus of contamination likely to infect the most robust constitution.

To remedy the unhygienic circumstances and habits of today is a formidable task but a state nearing perfection could be achieved if only our future food handlers, now school children, are inculcated firstly with the rules of hygiene and secondly with a sense of duty to apply them.

With this in mind a special invitation was sent to all school teachers and student nurses to attend the Annual General Meeting of the Greenwich Guild of Hygiene at which Councillor Mrs. L. Hilldrith, Chairman of the Public Health Committee, presided.



There was an excellent attendance and your Medical Officer of Health introduced two most instructive films illustrating the hygienic production of milk and meat. The Ministry of Agriculture and Fisheries supplemented this by a useful exhibition on rodent and insect infestation of food premises. The meeting was concluded by a discussion on the implications of the By-Laws for the Protection of Food, during which the Food Inspectors emphasized the vital need for improved food hygiene. So ended a year of progress for the Greenwich Guild of Hygiene.



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**INFANTILE MORTALITY DURING THE YEAR 1952**  
Deaths from stated Causes in Weeks and Months under 1 Year of Age.

CAUSE OF DEATH.	Under 1 week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total Deaths under One Year.
Small-Pox ... ..	...	...	...	...	...	...	...	...	...	...
Chicken-Pox...	...	...	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
Whooping Cough ... ..	...	...	...	...	...	...	...	...	...	...
Diphtheria—Croup ... ..	...	...	...	...	...	...	...	...	...	...
Influenza ... ..	...	...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis ... ..	...	...	...	...	...	...	...	...	...	...
Tubercular Meningitis ... ..	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis ... ..	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	...	...	...
Meningitis ( <i>not Tuberculous</i> ) ... ..	...	...	...	...	...	...	...	...	...	...
Meningococcal Infection ... ..	...	...	...	...	...	...	...	...	1	1
Bronchitis ... ..	...	...	...	...	...	1	...	...	...	1
Pneumonia (all forms) ... ..	...	...	...	...	...	2	1	...	...	3
Diarrhoea (all forms) ... ..	...	...	...	...	...	...	...	...	...	...
Gastro-Enteritis ... ..	...	...	...	...	...	...	...	...	...	...
Injury at Birth ... ..	...	...	...	...	...	...	...	...	...	...
Atelectasis ... ..	2	...	...	...	2	...	...	...	...	2
Congenital Malformation ... ..	1	...	2	...	3	...	2	1	...	6
Premature Birth ... ..	4	...	...	...	4	...	...	...	...	4
Atrophy, Debility and Marasmus ... ..	...	...	...	...	...	...	...	...	...	...
Asphyxia (inhalation of regurgitated food) ... ..	...	...	...	...	...	...	1	...	...	1
White Asphyxia ... ..	1	...	...	...	1	...	...	...	...	1
Other Causes ... ..	...	...	...	...	...	...	...	...	...	...
TOTALS ... ..	8	...	2	...	10	3	4	1	1	19
Male ... ..	...	...	...	...	...	10				
Female ... ..	...	...	...	...	...	9				







CASES OF INFECTIOUS DISEASE notified during the Year ended 31st December, 1952.

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT																				TOTAL CASES NOTIFIED IN EACH LOCALITY				No. of Cases removed to Hospital from each Locality				TOTAL
	Age & Sex Group																				Greenwich East	Greenwich West	St. Nicholas	Charlton and Kidbrooke	Greenwich East	Greenwich West	St. Nicholas	Charlton and Kidbrooke	
	At all Ages		0 to 1		1 to 3		3 to 5		5 to 10		10 to 15		15 to 25		25 to 45		45 to 65		65 and over										
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F									
Small-Pox ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Encephalitis	Infectious	2	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
		Post-Infectious	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Diphtheria ...	2	2	...	...	...	1	1	...	...	1	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Dysentery ...	12	10	2	1	4	2	2	1	2	1	1	...	...	1	1	3	...	...	...	...	2	...	...	20	1	...	...	4	4
Erysipelas ...	5	11	...	1	...	...	...	...	...	1	...	1	...	1	2	4	3	3	...	...	4	4	...	8	1	...	...	20	21
Acute Polio-Myelitis	P.	4	2	1	...	1	...	...	1	1	...	...	...	...	1	1	...	...	...	...	4	1	...	8	1	...	...	4	8
	N.P.	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	4	1	4	1	...	...	1	6
Scarlet Fever ...	116	96	...	1	8	10	20	13	70	57	14	12	2	1	2	2	...	...	...	...	76	58	6	72	30	2	3	14	49
Enteric Fever...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scabies ...	5	5	...	...	...	...	...	...	1	...	1	1	...	1	3	...	3	...	...	...	6	3	...	1	...	...	...	...	...
Puerperal Pyrexia ...	...	35	...	...	...	...	...	...	...	...	...	...	...	...	14	...	21	...	...	...	10	5	2	18	10	5	2	18	35
Meningococcal Infection ...	1	2	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	2	1	...	...	2	3
Measles ...	480	438	18	11	113	89	105	102	237	223	4	7	1	3	2	2	...	1	...	...	353	151	25	3	9	5	10	1	7
Whooping Cough ...	96	94	7	7	29	24	22	28	36	32	2	3	...	...	...	...	...	...	...	...	63	12	13	102	1	1	3	5	10
Diarrhoea ...	3	5	1	5	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	3	2	2	1	3	2	8
Ophthalmia Neonatorum ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia, Acute Primary or	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Influenzal	11	7	...	...	...	...	1	2	1	2	...	...	1	...	2	2	4	1	2	...	11	2	...	5	2	1	...	1	4
Tuberculosis, Pulmonary ...	56	45	...	...	2	1	1	1	1	4	1	1	13	16	17	18	18	3	5	...	33	18	3	47	9	4	...	7	20
Non Pulmonary	10	8	...	...	...	...	...	1	1	...	...	...	3	4	4	2	2	...	...	1	4	1	...	13	1	1	...	9	11
TOTALS ...	805	760	29	27	159	128	153	148	352	322	23	25	20	41	35	55	27	13	7	1	571	256	52	686	70	28	12	96	206

NOTE :—The above Table refers to "Corrected Notifications" only, i.e. all cases in which diagnosis was not confirmed have been ignored.







CAUSES OF, AND AGES AT, DEATH, during the year ended 31st December, 1952.

No. in Short List	CAUSES OF DEATH.	Deaths at Subjoined ages of " Residents " whether occurring within or without the District											Deaths at all Ages of " Residents " belonging to Localities, whether occurring in or beyond the District				Deaths of " Residents " in Public Institutions							Total Deaths whether of " Residents " or " Non-Residents " in Public Institutions in the District
		All Ages	Under 1		1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and under 75	75 and upwards	Greenwich East	Greenwich West	St. Nicholas, Deptford	Charlton and Kidbrooke	St. Alfege's Hospital	Seamen's Hospital	Miller Hospital	Herbert Military Hospital	Brook Hospital	Other Institutions	Outside Institutions	
			Under 4 mths.	4 mths. and under 1 yr.																				
1	Tuberculosis, Respiratory ...	29	...	...	...	...	3	12	9	3	2	7	4	2	16	4	...	2	...	...	...	...	10	49
2	Tuberculosis, Other ...	3	...	...	...	...	...	1	1	...	1	...	1	...	2	1	...	...	...	...	...	...	2	10
3	Syphilitic Disease ...	3	...	...	...	...	...	...	1	...	2	1	1	...	1	...	...	...	...	...	...	...	2	5
4	Diphtheria ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5	Whooping Cough ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
6	Meningococcal Infections ...	1	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	4
7	Acute Poliomyelitis ...	1	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	3
8	Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
9	Other Infective and Parasitic Diseases ...	2	...	...	...	...	...	...	1	...	1	...	2	...	...	1	...	...	...	...	...	...	1	2
10	Malignant Neoplasm, Stomach ...	23	...	...	...	...	...	3	7	8	5	5	7	...	11	6	2	2	...	...	...	...	4	39
11	Malignant, Neoplasm, Lung, Bronchus ...	29	...	...	...	...	...	1	17	9	2	8	6	2	13	7	2	...	...	1	...	9	66	
12	Malignant Neoplasm, Breast ...	11	...	...	...	...	...	1	3	5	2	2	3	...	6	1	...	...	...	...	...	3	13	
13	Malignant Neoplasm, Uterus ...	6	...	...	...	...	...	...	2	2	2	2	...	1	3	3	...	...	...	...	...	...	...	5
14	Other Malignant and Lymphatic Neoplasms ...	91	...	...	...	...	1	1	36	31	22	45	13	2	31	29	6	10	...	...	...	17	129	
15	Leukaemia, Aleukaemia ...	8	...	...	...	...	1	1	4	1	1	3	2	...	3	3	1	1	...	2	...	...	...	10
16	Diabetes ...	7	...	...	...	1	...	...	...	3	3	2	3	...	2	2	...	...	...	...	...	2	8	
17	Vascular Lesions of Nervous System ...	108	...	...	...	...	...	4	23	40	41	56	16	3	33	43	2	4	...	3	1	10	191	
18	Coronary Disease, Angina ...	108	...	...	...	...	...	4	26	40	38	48	21	4	35	18	2	3	...	...	...	14	83	
19	Hypertension with Heart Disease ...	27	...	...	...	...	...	...	5	11	11	11	7	1	8	8	1	1	...	...	1	2	44	
20	Other Heart Disease ...	142	...	...	...	...	1	7	20	34	80	63	26	5	48	37	...	5	...	2	2	25	159	
21	Other Circulatory Disease ...	80	...	...	...	...	...	3	12	21	44	35	11	5	29	36	2	...	...	3	2	7	161	
22	Influenza ...	1	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...
23	Pneumonia ...	46	3	1	...	...	1	2	8	10	21	21	9	1	15	14	1	1	...	...	1	14	68	
24	Bronchitis ...	73	1	...	...	...	1	2	16	25	28	26	20	1	26	17	...	3	...	1	...	2	66	
25	Other Diseases of Respiratory System ...	12	...	...	1	...	...	...	5	5	1	7	4	...	1	2	1	1	...	...	...	...	15	
26	Ulcer of Stomach and Duodenum ...	16	...	...	...	...	...	1	7	5	3	6	1	...	9	13	...	1	...	...	...	1	30	
27	Gastritis, Enteritis and Diarrhoea... ..	1	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	10	
28	Nephritis and Nephrosis ...	10	...	...	...	1	...	3	3	1	2	3	2	...	5	6	...	1	...	...	...	1	21	
29	Hyperplasia of Prostate ...	9	...	...	...	...	...	...	2	2	5	6	1	...	2	4	1	2	...	...	...	...	13	
30	Pregnancy, Childbirth, abortion ...	3	...	...	...	...	1	2	...	...	...	...	...	...	3	1	...	...	...	...	...	1	2	
31	Congenital Malformations ...	9	4	2	...	...	1	...	2	...	...	5	1	...	3	1	...	1	...	...	...	5	15	
32	Other defined and ill-defined Diseases ...	65	6	...	...	...	3	1	10	20	9	20	15	...	30	20	3	3	...	3	1	13	183	
33	Motor Vehicle Accidents ...	6	...	...	1	...	1	1	3	...	...	2	1	...	3	1	...	...	...	1	...	4	25	
34	All other Accidents ...	19	1	...	...	...	1	4	4	3	6	9	3	1	6	7	...	1	...	1	...	5	32	
35	Suicide ...	9	...	...	...	...	...	3	5	...	1	5	1	...	3	3	...	...	...	2	1	1	14	
36	Homicide and Operations of War ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	TOTALS ... ..	958	15	4	2	1	6	14	68	239	268	341	400	181	28	349	298	24	42	1	20	9	156	1,475

NOTE.—All "Transferable Deaths" of residents, i.e., persons resident in the Borough who died outside it have been included. The transferable deaths of non-residents, i.e., of persons resident elsewhere in England and Wales, and who died in the Borough in like manner have been excluded.

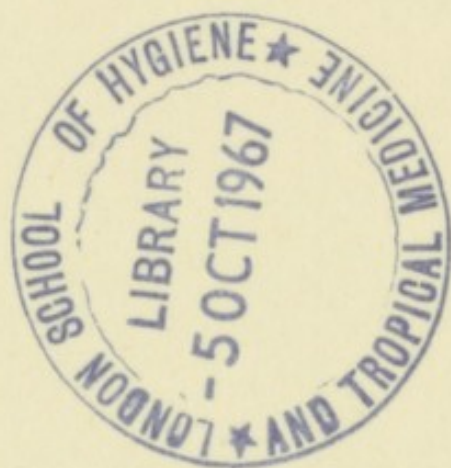












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