

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

### **Contributors**

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BOROUGH OF BEXLEY.



22 JUL 1943

C.N. 2

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MY REF. \_\_\_\_\_  
(PLEASE QUOTE)

YOUR REF. \_\_\_\_\_

29th June, 1943.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1942.

The report is again restricted in accordance with the Ministry of Health Circular 2773 of the 10th March, 1943.

A summary of vital statistics is appended, from which it will be seen that the general health of the inhabitants of the Borough has been maintained at a high standard.

The birth rate is the highest recorded since 1923 and the number of births the highest ever recorded in this area. Some reasons for the high rate are - (a) the population of the Borough is young, (b) the first children being born as a result of the high number of marriages in the first years of the war, (c) the decision of parents to have children rather than wait an indefinite period until after the war, (d) the better economic position of the working population, (e) the large number of husbands in the Forces stationed in this country, (f) the return to valuation of family life with less outside attractions, (g) a decision to rear a child rather than work in a factory. It is interesting to note in view of the present day demand for maternity beds that there was a 50% increase of births in institutions but only a 30% increase of births in private houses.

The infantile mortality rate (32.6) is the lowest ever recorded in this district and should be compared with the rate of 111 in 1915 when child welfare first began in Bexley and the rate of 78 in 1917 the third year of the last war.

The death rate is the lowest of the war years, and is low when it is realised that it is calculated upon the population which does not include the healthiest and most virile men and women who are now in the Forces. There are still many preventable deaths and there is no cause for complacency.

Diphtheria was the cause of two deaths, both in non-immunised children. Reference to the cycle of epidemics of this disease would lead one to expect a high rise in the number of cases by 1942, but this did not occur and I know of no other cause than that 63% of the children of the Borough were immunised against diphtheria by the end of 1942. If the remaining children were immunised diphtheria as a cause of death could be excluded.

There were three deaths from whooping cough during the year and, apart from cerebro-spinal fever and tuberculosis, whooping cough is the biggest killer of the infectious diseases. Permission was obtained during the year from the Ministry of Health to commence an immunisation scheme against whooping cough. A vaccine has been prepared which is given at the same time as the diphtheria prophylactic mixed in the same syringe, thus necessitating no additional injections. The scheme was commenced in July and was offered to parents with children under the age of five. By the end of the year 1,296 children had been given the two doses and of these children 2 only developed whooping cough during the year whilst 145 unprotected children of all ages contracted the disease.

The Borough had been very lightly affected by the country-wide epidemic of cerebro-spinal fever prior to 1942, but during the year the number of cases was comparable with those throughout the rest of the country, and there were five deaths despite the big reduction in the fatality of this disease since the use of the sulphonamide drugs.

An expected increase in the number of cases of scarlet fever occurred, but the disease continues to be mild, and there were no deaths. The policy of home isolation where possible was continued and there is no evidence to show that this policy causes any increase in the incidence. Almost half the number of cases were isolated at home. From these there were no return cases, but there were four from hospital isolated cases.

The increased birth rate meant a busy year in the child welfare centres and a record total of attendances and of new attenders. Approximately 90% of the children born in 1942 attended the clinics at least once. Two thirds of the expectant mothers attended the antenatal clinics, and practically all the rest attended clinics at maternity hospitals outside the Borough or their own doctors. The attendances for post-natal examinations showed a marked increase and this service which is intended to minimise suffering in later years is deservedly becoming more popular.

Full co-operation has been maintained with the Ministry of Food in the issue from the clinics of cod liver oil and orange juice for children under five, and cod liver oil for expectant mothers, and with the Board of Trade, in the issue of supplementary clothing coupons for expectant mothers.

Two war time day nurseries were opened in January which were an immediate success and the Council decided to provide a further three, raising the total accommodation to 240. Allowing for absentees this permits of 300 children on the registers. At the time of writing this report one of the nurseries has been enlarged by 18 places, also to provide accommodation for 18 children at night whilst their mothers are working and a sixth nursery is being prepared for 60 children and consideration is being given to provide accommodation for a further 100 children whose mothers will be in part time employment. However much we may be convinced that the place for the young child is at home with its mother there is no doubt that the child's place is in a nursery, so long as the mother goes out to work. In any case the scheme for Daily Minders was a failure in this Borough as although there were several initial registrations to take children the housewives practically all withdrew their applications after giving the matter further thought, as they no doubt realised that looking after children is difficult work and their household goods would be wearing away very quickly with other people's children in their homes.

Slum clearance and housing development has continued in abeyance, but there are many signs that the post war problem in this respect will be very different from those of pre-war years and that very extensive works will be urgently necessary. Many houses in the Borough are now occupied by two families, a mother with children whose husband is in the Forces letting off two rooms to a family in similar circumstances, but in view of the low standard of the Housing Act, 1936, there is no evidence of more overcrowding.

Treatment of scabies commenced in the new year and 475 persons were treated at the Cleansing Station, but until sufferers present themselves earlier for diagnosis and treatment and realise that infection is an accident and not a disgrace there does not seem to be much hope of eradicating the disease.

During the year accommodation for patients suffering from typhus in the event of the disease being introduced into the country was considered and the Borough Council came to an arrangement with the County Council for the admission of cases in the first instance to London County Council Hospitals and later to Bow Arrow Hospital.

The demand for maternity accommodation has again exceeded supply and the Maternity Home has continued to work with an average of two midwives short of requirements which has placed a severe strain on the rest of the staff. The Ministries of Health and Labour & National Service are now reviewing the question of shortage of midwives throughout the country and it is hoped that a solution will soon be found. As a partial solution the Council agreed during the year to employ non-resident midwives at the Home.

The Borough Ambulance had a 50% increase in calls and there was a 100% increase in calls on outside ambulances and in view of

-3-

this increased use and the increased number of mechanical breakdowns the Council resolved to purchase an additional ambulance.

The Sanitary Inspectors made an increased number of visits to various properties, food shops, etc., but their work has been made more difficult in view of the shortage of materials and labour in getting repairs carried out, and difficulty has been experienced with regard to collection and disposal of house refuse and a weekly collection has not yet been found possible. It has been found necessary to spend a large amount of time inspecting foodstuffs both canned and otherwise in various bulk food stores.

I wish to take this opportunity of thanking the Council and officers of all departments for their assistance and especially to all the members of the Health Department for the way in which they have cheerfully and ungrudgingly in effort dealt with the new and additional work of the Department.

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Medical Officer of Health.



## SUMMARY OF VITAL STATISTICS, 1942.

	England and Wales.	126 C.Bs and Great Towns inclu- ding London.	148 Smaller Towns (Resi- dent Popula- tions 25,000 - 50,000 at 1931 Census,	London Admini- strative County.	Borough of Bexley.
* Rates per 1,000 Civilian Population.					
<u>Births</u> -					
Live ...	15.8 +	17.3	18.4	14.0	19.07
Still ...	0.54 +	0.66	0.62	0.46	0.49
<u>Deaths</u> -					
All Causes...	11.6 +	13.3	12.1	13.9	8.73
Typhoid and Paratyphoid Fever ...	0.00	0.00	0.00	0.00	-
Scarlet Fever	0.00	0.00	0.00	0.00	-
Whooping Cough	0.02	0.03	0.02	0.04	0.04
Diphtheria...	0.05	0.06	0.04	0.02	0.02
Influenza ...	0.09	0.09	0.10	0.07	0.01
Smallpox ...	-	-	-	-	-
Measles ...	0.01	0.02	0.01	0.01	0.01
<u>Notifications</u> -					
Typhoid Fever	0.01	0.01	0.01	0.02	-
Paratyphoid Fever ...	0.01	0.01	0.01	0.01	-
Cerebro Spinal Fever ...	0.14	0.17	0.12	0.15	0.14
Scarlet Fever	2.19	2.49	2.34	1.86	2.75
Whooping Cough	1.73	1.97	1.58	2.72	1.90
Diphtheria...	1.05	1.35	0.91	0.76	0.27
Erysipelas...	0.30	0.36	0.26	0.43	0.27
Smallpox ...	0.00	0.00	-	0.00	-
Measles ...	7.46	9.27	7.39	8.62	6.97
Pneumonia ...	1.07	1.30	0.94	0.94	0.63
Rates per 1,000 Live Births.					
Deaths under one year of age..	49	59	46	60	32.6
Deaths from Dia- rrhoea & Enter- itis under two years of age	5.2	7.5	4.8	8.6	2.04
Rates per 1,000 Total Births (i.e. Live and Still)					
<u>Maternal Mortality</u> - (Excluding Abortion)					
Puerperal Infection (No. 147) ...	0.42	} Not available			0.66
Others ...	1.59				0.66
Total ...	2.01				1.32
<u>Notifications</u> -					
Puerperal Fever ...	12.61	15.94	10.80	3.10	14.59
Puerperal Pyrexia ...				17.69 including Puerperal Fever,	

\* A dash (-) signifies that there were no deaths.

+ These rates are those published in the Quarterly Return.

