[Report of the Medical Officer of Health for Dagenham].

Contributors

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BOROUGH OF DAGENHAM



INTERIM ANNUAL REPORT

of the

Medical Officer of Health

for the year

1943

CECIL HERINGTON, M.D. (Lond.), D.P.H.



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Medical Officer of Health

for the year

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To the Mayor, Aldermen and Councillors of the Borough of Dagenham.

Your Worship, Ladies and Gentlemen,

The lines adopted in compiling my report for the year 1943 closely follow those employed in the previous year, and it will be found that the report consists largely of statistical matter, the main comments being included in the earlier pages.

As in previous war years, the report is abbreviated in accordance with Circular 2773 issued by the Ministry of Health, many statistics are omitted but are preserved for presentation at a date to be determined by the Minister.

SONNE DYSENTRY.

This condition has been prevalent over a large part of the country and outbreaks occurred in two of the War-Time Nurseries,

one at the end of 1943 and a further one in the spring of 1944. The original cause in the first wave was ascertained and appropriate measures, consisting of bacteriological examinations of rectal swabs from both staff and patients, were taken and the results tabulated. The services of the Bacteriologist at Oldchurch County Hospital were sought and readily given. A scheme was then put into operation of systematic treatment of all those infected, the drug employed was supplied by Messrs. May and Baker, and the results were eminently satisfactory.

The second outbreak was entirely cleared up within a matter of a few weeks. Among other precautions taken, it was found necessary to close the two nurseries concerned for brief periods.

A full account of these outbreaks has been sent for publication in the medical press.

SCARLET FEVER.

The control of Scarlet Fever has been the subject of controversy for many years, the practice amongst different local authorities

often varied widely, causing confusion in the minds of the public. It was considered advisable to obtain some uniformity and the Essex Epidemiological Committee gave it their close attention. In due course a memorandum was prepared and circulated to all Medical Officers of Health, Medical Officers in charge of hospitals and General Practitioners in the administrative county of Essex. It was also published in the principal medical periodicals. The following is the text of the memorandum:—

"It is generally agreed that 'scarlet fever' has become so benign as to make largely unnecessary its administrative control as previously exercised. It is recognised also that this condition is only one of the many manifestations of infection with Group A haemolytic streptococci and that there is no justification for isolating in hospital individuals suffering from streptococcal sore throat associated with a rash, whilst ignoring those with a similar sore throat and no rash. To do so does not protect the community, but it is impracticable to remove to hospital all those suffering from streptococcal sore throat and it follows that the needs of the particular patient should decide whether or no he should be given hospital accommodation.

Cross infection, which is largely responsible for the complications of 'scarlet fever,' does not occur if the patient is nursed at home and this is one of the main reasons for advocating home treatment of this disease wherever possible. Although the welfare of the patient is the first consideration, other aspects of the problem cannot be ignored, and one of these is the possibility of the spread of infection by milk or foods which are consumed uncooked, whilst another is the risk of infecting a woman in the later stages of pregnancy. Where, therefore, a case of 'scarlet fever' occurs in a household, a member of which is a food handler, or where there is a woman approaching confinement, it would be inadvisable to have the patient nursed at home. It is, therefore, recommended that admission (of cases of 'scarlet fever') to hospital should be determined by:—

- (1) the severity of the disease;
- (2) the home nursing facilities;
- (3) the employment of another member of the household in the preparation or distribution of food for public consumption;
- (4) the approaching confinement, say within one month, of any female in the patient's home.

It is highly desirable that the public should be informed of the altered view now taken by the medical profession of 'scarlet fever,' and it is felt that this can best be done by the family doctor."

Members of the Council will recall that occasions have arisen in the past when the methods of the control of Scarlet Fever have been challenged. It is hoped that now the position has been clarified, the confidence of the public will be won.

IMMUNISATION. Immunisation Clinics has been maintained during the year, and an increasing number of children under five years of age has attended the Infant Welfare Centres for this purpose. Owing to removals from and into the Borough, it is not possible to give with any accuracy, the percentage of children in the Borough who may be regarded as successfully immunised, but the low incidence of Diphtheria may be taken as an

index of the immunity of the population.

Close co-ordination with the School Medical Service exists and it has been arranged that entrants to infants' departments should be notified to this department in order that they may receive a "boosting dose" if they have already been immunised in infancy, or the two standard doses of antigen. It is hoped that the comparative freedom of the population as a whole from Diphtheria will not lull parents into a state of false security.

In order to maintain the interest of parents in the importance of immunisation, the head teachers and factory executives all received a personal letter from the Medical Officer of Health inviting earnest consideration of this important subject.

VERMINOUS CONDITIONS.

The Health Visitors have given special attention to the control of head lice, and in accordance with Circular 2831 of the Ministry

of Health dated July, 1943, they have, when occasion so demanded, visited the homes of children outside their normal working hours in order to instruct the mothers with regard to the elimination of vermin. In times like these it is often difficult otherwise to make contact with mothers who, in many cases, are employed during the greater part of the day.

There are no statistical records of the prevalence of head lice, but one gathers from medical inspections prior to evacuation and other indications, that parents are becoming more conscious of their duties in this respect. New reagents are now available for the eradication of nits and live vermin, these mark a long step forward and simplify the technique.

Assistance has been received on many occasions from the School Medical Department of the County Council, which employs a lady in this district specifically for cleansing the heads of school children. In many instances her services have been utilised for pre-school children, as it will be agreed that it is useless to cleanse some members of a family and leave others who will readily cause re-infestation of their brothers and sisters, and even parents.

SCABIES CLINIC.

In the autumn the Council, being concerned with the apparent increase in Scabies, resolved to provide treatment for this condition, and

after receiving permission from the Scheme-making Authority, commenced treatment sessions at Five Elms First Aid Post. The reagent used is a preparation of Benzyl-Benzoate, it is applied after the patient has had a hot bath and been thoroughly dried. Normally one application suffices to clear up the condition, but occasionally obstinate cases occur requiring further treatment.

One important factor is that the whole family infected should be treated if possible at one session, otherwise those cured soon become re-infected. From the time that the clinic was opened in the middle of September to the end of the year 274 treatments were given.

POLIOMYELITIS. This disease has not been prevalent recently, but its reappearance must at all times, be guarded against. My report for the previous year indicated the dangers of transmission of diseases, particularly of the typhoid group, by hands unwashed after the use of the toilet. I would add that it is now the opinion of many Epidemiologists that Poliomyelitis can also be transmitted in this manner. This calls for increased attention to this very important subject and when designs of future houses are prepared, the necessity for the provision of wash-hand basins with hot and cold water convenient to the W.C. should be borne in mind.

RODENT CONTROL.

Infestations are dealt with in accordance with the technique suggested by the Ministry of Food, the work is supervised by the Sanitary

Inspectors and the personnel of the mortuary squad carry out the work. A publicity campaign was begun in the autumn and the general public invited to notify the presence of rats and mice. The local press published advertisements and posters were exhibited; the wardens' posts were used as receiving centres for complaints.

FOOT CLINIC.

During the early part of the year the Council decided to open a foot clinic. To commence with, one part-time Chiropodist was appointed

but owing to the demand for his services, it was soon found necessary to employ him on a whole-time basis.

The demand continued, and in September an additional Chiropodist was appointed, who also in the early months of 1944, was retained in a full-time capacity.

The services of this clinic are meeting a much felt want, as in addition to the relief of pain, the efficiency of many of those who formerly suffered is greatly enhanced.

As an experiment, a branch clinic has been opened in Chadwell Heath and this has been fully justified by results.

PROVISION OF INSULIN.

Certain persons suffering from Diabetes who are unable to procure Insulin, are able to purchase it from the Public Health Department

at or below cost price. The circular empowers Local Authorities to distribute this product to those persons who are entitled to benefit under this scheme. Recently this facility has been taken advantage of to an increasing extent, to those requiring large doses the advantage is considerable.

HOME HELPS.

It has been possible to satisfy the demand for Home Helps, although occasionally it has been difficult owing to the demand for workers in the

factories. At the moment two Home Helps are paid a retaining fee and an additional wage whilst they are working. Normally their

services are limited to confinement cases, but exceptionally the Committee has sanctioned their employment when domestic difficulties have not been able to be met otherwise.

Once more I wish to record my appreciation of the services of the members of the staff, all of whom have continued to show their willingness to contribute to the efficiency of the department.

I would like also to thank the Chairman and Members of the Health Services Committee for their support and interest in the activities directed towards prevention of illness and maintenance of health in this Borough.

I am,

Your Worship, Ladies and Gentlemen,
Your obedient servant,
CECIL HERINGTON,
Medical Officer of Health.

Public Health Department, Civic Centre, Dagenham.

MEMBERS OF THE COUNCIL

(31st December, 1943.)

Mayor:

Alderman (Mrs.) L. F. EVANS, J.P., E.C.C.

Deputy Mayor: Councillor F. BROWN.

Aldermen:

A. F. J. CHORLEY, J.P., E.C.C.

R. J. D. CLACK.

E. E. HENNEM.

W. F. LEGON.

W. C. MARKHAM.

M. E. MARLEY (Mrs.), J.P.

B. H. SAUNDERS, E.C.C.

Councillors:

J. R. ANDREWS.

W. E. BELLAMY.

D. E. BROWN.

J. W. BURRIDGE.

A. A. BUTTERS.

S. W. DEEKS.

E. EDWARDS.

A. E. GIBBS.

F. T. GRINDROD.

H. L. LYONS.

J. E. MUNN.

R. G. MURRELL.

J. NEISH (Mrs.).

F. J. PERFECT.

A. E. PRENDERGAST (Mrs.).

E. S. REDDY (Mrs.).

M. REDDY.

F. L. M. ROGERS (Mrs.).

E. R. SAYWOOD.

A. R. THOMAS (Mrs.).

F. G. THOMAS.

C. A. THORNEYCROFT.

M. A. E. WARREN (Mrs.).

HEALTH SERVICES COMMITTEE

Councillor (Mrs.) A. E. PRENDERGAST, Chairman. Councillor (Mrs.) E. S. REDDY, Vice-Chairman.

The Worshipful the Mayor (Ald. (Mrs.) L. F. EVANS,

Coun. A. E. GIBBS.

Alderman W. F. LEGON.

J.P., E.C.C.) Coun. A. R. THOMAS (Mrs.).

Coun. M. A. E. WARREN (Mrs.).

Deputy Mayor (Coun. F. BROWN).

OFFICERS of the

PUBLIC HEALTH SERVICES

Full-Time Staff:

Medical Officer of Health:

CECIL HERINGTON, M.D., B.S. (Lond.), D.P.H., M.R.C.S., L.R.C.P.

Deputy Medical Officer of Health:

JAMES A. C. FRANKLIN, M.B., B.S. (Lond.), D.P.H., M.R.C.S., L.R.C.P.

Assistant Medical Officer:

(Serving with R.A.F.)

HARRY B. CARTER-LOCKE, M.B., B.S. (Lond.), D.P.H. M.R.C.S., L.R.C.P.

Temporary Assistant Medical Officer: M. WEIZMANN, M.R.C.S., L.R.C.P.

Senior Sanitary Inspector: L. E. PRIOR (1, 2).

Sanitary Inspectors:

J. W. ALLAM (1, 2). F. W. S. FOX (1, 2, 3, 4). A. J. JAMES (1). F. W. KNIGHT (1, 2).

Senior Health Visitor: M. SMITH (5, 6, 7).

Health Visitors:

V. A. EVERITT (5, 6, 7). A. K. GIBSON (5, 6, 7). P. SILBY (5, 6, 7). C. KIPLING (5, 6, 7). L. SALTER (5, 6, 7). D. B. STEWART (5, 6, 7). E. THOMAS (5, 6, 7). D. E. WALLER (5, 6, 7). L. WEALE (1, 5, 6, 7, 8).

Senior Midwife: E. M. BEDFORD (5, 6).

Midwives:

D. K. ANKER (6).
M. HALL (6).
C. HURRY (6).
M. GOODBUN (5, 6).

O. M. LISSAMORE (6). H. MITSON (5, 6). M. ROBSON (6). M. J. STOREY (6).

Clerical Staff:

Senior Clerk:
B. E. E. DENNY.

Clerk to Sanitary Inspectors: H. FIELD (1).

Clerks:

G. BALLARD (9).	E. HIGHAM (9).
I. M. BISHOP.	K. W. SKEATES
K. BRIMBLECOMBE (9).	M. A. WATTS.
G K HARRIS	

Certificate of Royal Sanitary	Institute					
Meat Inspector's Certificate						
Sanitary Science as applied to	o Building	and F	ublic	Works	Certificate	
Smoke Inspector's Certificate	·					
General Trained Nurse						
State Certified Midwife						
New Health Visitor's Certific	ate					
M. & C. W. Certificate						
Temporary War-Time Appoi						
r	TITLITUIL	***	* * *			

Part-Time Staff:

Consulting Gynaecologist:
R. L. DODDS, M.Ch., F.R.C.S. (Eng.).

Consulting Orthopaedic Surgeon:
B. WHITCHURCH HOWELL, F.R.C.S. (Eng.).

Dentist:
F. C. RITCHIE, L.D.S., R.C.S. (Edin.)

Public Analysts:

BERNARD DYER, D.Sc., F.I.C.

J. HUBERT HAMENCE, Ph.D., M.Sc., F.I.C.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)							6,556
Number of inh to Rate Book	abited hou					ing	192 - 12 fe
	BO LANDON	1-+ 104	~~				25,854
Rateable value (I							(594,849
Sum represented	by a penny	y rate (a	ppro	ximat	e 1943-44)	£2,290
Extracts from V	Vital Stati	istics fo	r the	e Yea	r.		
Live Births :-							
	Total		F	emale			
Legitimate	1,762	861		901	Birth	rate p	er 1,000
Illegitimate	83	43		40	reside	he e	stimated oulation,
Stillbirths:—) 19.03		
Legitimate	49	26		23	Rate p	er 1.0	00 total
Illegitimate	1			1	} (live births	and	still)
Deaths	742	419		323	of the	he es	er 1,000 stimated pulation,
Deaths from pu	erperal car	uses—					
				Deat	hs. (live		
Puerperal sep	sis			2		1.06	
Other puerpe	ral causes			2		1.06	
				4		2.11	
Death rate of In	afante und	or one w	200 0	£	oft gravi		
All infants pe							46.05
Legitimate in							46.07
Illegitimate in	fants per I	000 legi	citie	e nve	DIFTINS		47.11
							24.10
Deaths from Ca							123
	easles (all a						3
	nooping Co						6
,, Dia	arrhoea (un	nder 2 ye	ears c	of age)		6

Births.

1,845 live births were registered during the year, there being 904 males and 941 females. There is a decrease of total births from 1,898 in 1942 to 1,845. The birth rate per thousand population was 19.83 compared with 16.5 for England and Wales and 18.6 for the 126 large towns, including London. The rate compares with that of 24.2, 26.5, 30.6, 23.8, 23.6, 20.4, 18.6, 19.6, 18.59, 18.47, 18.7, 18.06, 17.61, 18.77, 19.08 and 20.37 for the years 1927 to 1942 inclusive.

The illegitimate birth rate continues to be very low, being only 4.50 per cent. of total births. The rate of illegitimate stillbirths is 2.0 per cent. of total stillbirths.

Death Rate.

Total deaths in district	 	 	 460
Outward transfers	 	 	 120
Inward transfers	 	 	 405
Deaths of residents	 	 	 745

Of the 120 deaths of non-residents occurring in the district, 48 took place at the West Ham Sanatorium and 52 at the Joint Isolation Hospital.

Of the 405 deaths of local residents taking place outside this area, most occurred in institutions. Of these 186 occurred at Old-church Hospital, 31 at Orsett Lodge, 27 at The Retreat, Gt. Burstead, 17 at the London Hospital, 15 at 48, Wood Street, Chelmsford, 13 at King George Hospital, Ilford, seven at the Ilford Isolation Hospital, seven at 32a, Spital Road, Maldon, six at East End Maternity Hospital, five at Severalls Mental Hospital, five at Warley Wood Emergency Hospital, four at New Hall, Boreham, and four at Warley Hospital.

742 deaths are equivalent to a death rate of 7.98 compared with 12.1 for England and Wales. For the years from 1927 to 1942 inclusive, the local rates were 7.0, 7.3, 8.3, 6.6, 7.2, 6.5, 6.5, 6.6, 5.63, 6.43, 6.24, 6.19, 5.96, 8.90, 8.51 and 6.85.

A table giving the causes of death, and the age periods at which they occurred, is given at the end of the report.

Table showing Birth-rate, Death-rate and Analysis of Mortality during the year 1943.

Provisional Figures.—The mortality rates for England and Wales refer to the whole population, but for London and the towns to civilians only.

	1,000	Rate per 1,000 total Annual Death-rate per 1 Population.			er 1,000			Rate per 1,000 Live Births.				
	Live Births.	Still Births.	All Causes.	Typhoid and Paratyphoid Fevers.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Diarrhoea and Enteritis (under two years)	Total Deaths (under one year).
England and Wales	16.5	0.51	12.1	0.00	_	0.02	0.00	0.03	0.03	0.37	5.3	49
126 County Boroughs and Great Towns, including London	18.6	0.63	14.2	0.00	_	0.02	0.00	0.03	0.04	0.36	7.9	58
148 smaller towns (1931) resident populations 25,000–50,000	19.4	0.61	12.7	0.00		0.02	0.00	0.03	0.04	0.37	4.4	46
London	15.8	0.45	15.0	0.00	_	0.02	0.00	0.03	0.02	0.27	10.4	58
Dagenham	19.83	26.38	7.98	0.00	_	0.03	0.00	0.06	0.01	0.13	3.25	46.0
	Tog			238				100				

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

Infant Welfare Centres.

CENTRE.	Sessions held.	Times Sessions held.	Average Attend- ances.	Average New Cases.
First Aid Post, Ashton Gardens, Chadwell Heath.	Weekly	Wednesday, p.m.	61	4
Valence Club, Corner of Becontree	Weekly	Monday,	49	3
Avenue and Bennetts Castle Lane, Dagenham.	Weekly	Monday, p.m.	68	6
Finnymore Road School, Dagenham.	Weekly	Thursday,	57	3
	Weekly	Thursday, p.m.	73	6
Osborne Hall, Osborne Square,	Weekly	Tuesday,	42	2
Dagenham.	Weekly	Tuesday, p.m.	70	7
Rush Green Clinic, 179, Dagenham Road, Rush Green.	Weekly	Friday, p.m.	31	• 2

Ante-Natal Clinics.

CENTRE.	Sessions held.	Times Sessions held.	Average Attend- ances.	Average New Cases.
First Aid Post, Ashton Gardens, Chadwell Heath.	Weekly	Monday, a.m.	13	3
Becontree Clinic, Becontree Avenue,	Weekly	Tuesday, p.m.	18	5
Dagenham.	Weekly	Wednesday, a.m.	16	3
	Weekly	Friday, a.m.	19	4
Finnymore Road School, Dagenham.	Weekly	Monday, p.m.	14	4
90	Weekly	Tuesday,	15	4
	Weekly	Wednesday, a.m.	14	4
Rush Green Clinic, 179, Dagenham Road, Rush Green.	Monthly (1st in month)	Friday, a.m.	13	5
York House, Frizlands Lane,	Weekly	Tuesday,	16	4
Dagenham.	Weekly	a.m. Thursday,	17	4
	Weekly	a.m. Thursday, p.m.	21	5

School Clinics.

Clinic.	Inspection.	Minor Ailment.		
Co-operative Hall, Whalebone Lane North, Chadwell Heath.	Tuesday morning.	Friday morning.		
Green Lane School, Dagenham.	Tuesday and Thursday afternoons.	Monday, Wednesday and Friday mornings.		
Five Elms School, Wood Lane, Dagenham.	Monday and Friday mornings.	Tuesday, Wednesday and Thursday mornings		
Finnymore Road School, Dagenham.	Every second Tuesday afternoon and every Friday afternoon.	Wednesday morning.		

Sanitary Inspection of the District.

Report of the Sanitary Inspectors.

	(0)	Notine and muchan	-C				
	(a)	Nature and number	of visi	ts:—			10000
		Houses					850
		Nuisances under Pu		Health A	Acts		2,565
		Bakehouses					57
		Slaughterhouses					26
		Milkshops, dairies a	nd ve	hicles			69
		Foodshops and stalls	s				1,441
		Cafes					468
		Infectious disease en					2,506
		Visits to foster moth			100000		35
		Number of complain					745
		Outworkers' premise					54
		Factories					159
		Workplaces					38
		Tents, vans and shee					51
		Stables					27
		Hairdressers' and Ba					84
		Shops Act, 1934				****	17
		Houses fumigated					97
		Inspections re billeti		war wo	rkers		90
		Rodent Control					619
		Other visits					• 9
((b)	Notices served			C	omplie	d with.
		Statutory		36			
		Informal		388	***		200

INSPECTION AND SUPERVISION OF FOOD.

Legal Proceedings.

Proceedings were instituted under the provisions of the Milk and Dairies Order, 1926, against a local milk retail purveyor observed filling dirty milk bottles in the street, which had apparently just been collected from his customers. Defendant fined £3.

Slaughterhouses.

Arrangements were made early in the year for a District Sanitary Inspector to be loaned to a neighbouring Borough one day per fortnight to carry out meat inspection at the Regional Slaughterhouse. This procedure was found necessary because of the shortage of Inspectors in this Borough and the failure to obtain additional whole-time staff.

FOOD AND DRUGS ACT, 1938.

Analyses.

Article.		Number		Number Adulterated, etc.			
Arucie.		For- mal.	In- formal	Total	For- mal.	In- formal	Tota
Baking Powder		7	_	7	1	_	1
Beer		7	. —	7	1	-	1
Bread and Butter		1	_	1	1	-	1
Cake Flour		5	-	5	_		-
Cake and Pudding Mixture	s	8	1	9	_	_	_
Cocoa		4	_	4	_		_
Coffee		6	_	6	_		_
Cordials		3		3		T WELL	
Crystals—Lemon, etc.		2		2			10.10
Custard Powder		1		1			
Eas Dried		1		1			
Egg—Pried Egg—Powder Substitute		3		2	1		1
Egg—Fowder Substitute	***		-	3	1		1
Essences—Various		2	1	3	1	1000	-
Extracts—Various		4	2	6	1	-	1
Flour—Self Raising			1	1	To	1	1
Pea Flour		3	-	3	. 1	-	1
Gelatine Powder		2	-	2	-	-	-
Golden Raising Powder		2	-	3 2 2 3	-	-	-
Gravy		3	-	3	_	-	-
Meat		1	-	1	_	-	-
Medicinal Samples		15	6	21	-	-	_
Milk		43	_	43	1	-	1
Mustard		3	-	3	1	_	1
Oatmeal		3	_	3	_	_	_
Paste—Fish		_	1	1	_	_	_
Donnor		4		4			_
Direct		3		3	1		1
C-1+	•••	4		4	1		1
C YZ-+-1		3		3			
					1		1
Sausages		17		17	1		1
Semolina		4	-	4	-		-
Soups		3	-	3	-		-
Spaghetti—Macaroni		4	-	4	1	-	1
Spices		15	-	15	-		_
Spreads		2	-	2	-		_
Stuffing		2 2 1	-	2	-	-	-
Suet—Chopped		1	-	1	1		1
Table Creams, etc		3	1	4	-	1	1
Tonic—Vigor		1	_	1	_	_	_
Vinegar		15	_	15	1	_	1
Whisky		1	-	1	_	_	_
		211	12	224	12	2	15
Total		211	13	224	13	2	15

Adulterated Samples, etc.

	Au		Samples, etc.	am) A
Serial Num- ber.	Article.	Formal or Informal.	Nature of Adulteration or Irregularity.	Observations.
148	148 Spaghetti		Contained 1.6% fine dust including dead mites, a few living mites, fibres and miscellaneous debris.	Vendor warned. Withdrawn from sale.
151	Beer (Burton)	Formal	A little low in original gravity.	Vendor warned.
50	Rum	Formal	3% added water.	Vendor warned.
68	Bread and Butter	Formal	The fat in this sample consisted of margarine.	Referred to Food Executive Officer at whose request sample was taken.
82	Pork Sausages	Formal	Contained 140 parts per million of sulphur di- oxide (un- declared).	Vendor warned.
183	Chopped Suet	Formal	Contained excess of cereal filler, viz., 28 per cent. 11 per cent. beyond the recognised limit of 17.	Vendor warned.
308	Egg Substitute Powder	Formal	43% deficient in available Carbon Dioxide.	Vendor warned. Withdrawn from sale.
239a	Ice Blanc Mange	Informal	Consisted of a coloured and flavoured wheaten flour preparation, sweetened with sugars and saccharin and was therefore a food as defined in the Manufactured Pre-packed Foods Control Order thus requiring a licence for its sale.	Referred to Food Executive Officer at whose request sample was taken.
307	Mustard Mixture	Formal	Out of condition having a poor flavour and con- taining dead mites.	Vendor warned. Withdrawn from sale.

Adulterated Samples, etc.—continued.

Serial Number. Article. 97 Onion Extract		Nature of Adulteration or Irregularity.	Observations. Vendor warned. Withdrawn from sale.		
		A dilute solution of onion juice with only a slight smell and taste of onions.			
Pea Flour	Formal	Out of condition being lumpy and containing living maggots.	Vendor warned. Withdrawn from sale.		
Milk	Formal	16% added water.	Vendor warned.		
Baking Powder	Formal	55% deficient in available carbon dioxide.	Vendor warned. Withdrawn from sale.		
Self-raising Flour	Informal	Contaminated with a red dye.	Vendor warned.		
Vinegar	Formal	Deficient in acetic acid to the extent of 1/7th of the quantity proper to vinegar.	Legal proceedings taken. Case against Manufacturers dismissed on payment of £10.10.0 costs		
	Onion Extract Pea Flour Milk Baking Powder Self-raising Flour	Onion Extract Formal Pea Flour Formal Milk Formal Baking Powder Formal Self-raising Flour Informal	Article. Onion Extract Formal Formal A dilute solution of onion juice with only a slight smell and taste of onions. Pea Flour Formal Out of condition being lumpy and containing living maggots. Milk Formal Formal 16% added water. Baking Powder Formal Self-raising Flour Informal Contaminated with a red dye. Vinegar Formal Deficient in acetic acid to the extent of 1/7th of the quantity proper to vine-		

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

NOTIFIABLE DISEASES (other than Tuberculosis).

month long	Under 1 year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	Total
Cerebro-Spinal Fever	_	1	_	-	_	_	1	_	_		1	_	3
Diphtheria	-	2	1	2	5	7	4	5	2	-	-	-	28
Dysentery	-	1	-	-	-	-	-	-	_	_	_	-	1
Encephalitis Lethargica	-	_	-	-	_	-	-	_	_	_	_	_	-
Enteric Fever	-	-	-	_	-	-	-	1	_	_	_	_	1
Erysipelas	1	-	-	1	-	-	2	3	7	11	10	4	39
Food Poisoning	-	-	-	_	-	-	1		_				_
Measles	44	127	135	132	155	533	34	7	7	_	_	_	1174
Ophthalmia Neonatorum	3	-	_	_	_	_	_	_	_	_	_	_	3
Pemphigus	3	_	_	32	_	_	_	_	_		_		3
Pneumonia—				17/10	PHICH	1791							
Acute Primary	11	15	8	9	11	22	5	10	14	19	24	3	151
Influenzal	1	_	1	1	2	1	1	1	5	11	8	1	33
Poliomyelitis Acute	-	-	-	-	1	_	_			-	_	_	1
Polioencephalitis Acute	_	-	-	-	_	-	_	_	_	_	_	_	_
Puerperal Pyrexia	-	_	-	-	_	_	_		18	1	1	_	20
Scarlet Fever	-	12	29	32	38	191	62	6	1	1	4	_	376
Smallpox	_	_	_				_	_	_	_	_	_	_
Whooping Cough	42	43	42	46	55	96	6	_	_	2	1		333

University streets			Notified.	Admitted to Isolation Hospital, Rush Green.	Admitted to other Isolation Hospitals.	Admitted to other Hospitals.	Deaths Regis- tered.
Cerebro-Spinal Fever			3 ·	3	_		1
Diphtheria			28	26	2	_	1
Dysentery			1	_	_	_	_
Encephalitis Lethargica			_	_	_		_
Enteric Fever			1	1			_
Erysipelas			39	12	_		
Food Poisoning			_		_		
Measles			1174	13	1	And the second	3
Ophthalmia Neonatorur	n		3	1		A 120 4-1	
Pemphigus			3	3		A. Liba	
Pneumonia—							_
Acute Primary			151	37	7 1.5	10	
Influenzal			33	10		2	} 97
Poliomyelitis Acute			1	1		_	
Polioencephalitis Acute			_	-			
Puerperal Pyrexia			20	13			
Scarlet Fever			376	161	2	and the same of	-
Smallpox			570	101	- 2		_
Whooping Cough		***	333	20		1207 977	
acoping Cough	***		222	20	and the same of the same of		6

DIPHTHERIA IMMUNISATION.

The following is a summary of the work carried out during the year:—

Number of SCHOOL children immunised without preliminary testing 2,269
Number of PRE-SCHOOL children immunised without preliminary testing 1,588
Number of SCHOOL children re-Schick tested 53 Of these one was positive.
Number of PRE-SCHOOL children re-Schick tested 37 Of these three were positive.
Number of SCHOOL children who received one dose after Re-Schick test positive 1
Number of PRE-SCHOOL children who received one dose after Re-Schick test positive 3
Total number of children found to be immune during the year—86.

The following table shows details of children who attended for immunisation and were subsequently notified as suffering from Diphtheria, together with observations as to type and the ultimate result:—

Age	Particulars of Treatment.	Notified as Diphtheria.	Con- firmed.	Severity.	Result.
3	0.1 c.c. A.P.T. 23/9/42	14.1.43	Yes	Moderate	Recovered
$4\frac{1}{2}$	0.1 c.c. A.P.T. 10/12/42	20.2.43	Yes	Moderate	Recovered
11	Immunised at Cheltenham. Can-	10.3.43	Yes	Moderate	Recovered
$13\frac{1}{2}$	not trace. Ditto	3.3.43	Yes	Moderate	Recovered
6	1 c.c. T.A.F25.4.38 1. c.c. T.A.F20.6.38 1 c.c. T.A.F19.9.38	12.6.43	Yes	Very severe	Recovered
4	0.1 c.c. A.P.T. 3/12/42	9.10.43	Yes	Severe	Recovered

Scarlet Fever.

376 cases were notified, and of these 163 were admitted to hospital. The disease still shows a very low level of virulence, complications are rare and no deaths occurred. This subject is also dealt with in an earlier part of the report.

Tuberculosis.

				New	Case	S				Dan	ths.		
	1	Prin	nary	1.		her t	to no han b m A.						
	Pul- monary.		No Pu mon	ıl-	Pu		No Pu mon		Pu		P	on- ul- nary.	
	М	F	M	F	М	F	M	F	M	F	M	F	
Under 1 1 5 10 15 20 25 35 45 65 and upwards	- 1 2 14 13 12 9 11 5	- 1 - 13 18 9 5 4 2	- 4 1 4 5 2 1 -	- 1 3 1 1 - 1 - -		- - 1 4 3 - -	- 2 2 1 1 1 - 1	- 3 - 1 - 1 - -	- - 1 1 4 6 8 7 3				
and the second	67	53	17	7	8	8	8	5	30	23	3	1	

Register.

			Pulm	onary.	Non-Pu	ilmonary.	
No. on register let In-	his		Male.	Female.	Male.	Female	
No. on register 1st Jan., 1 During the year :—	943	ineyed 	434	312	150	142	
New Notifications			67	53	17	7	
Deaths			30	23	3	1	
Transfers into area			8	8	8	5	
Transfers out of area			17	12	2	2	
No. on Register 31st Dece	mber,	1943	462	338	170	151	

MATERNITY AND CHILD WELFARE.

Notification of Births.

1,781 notifications of live births were received during the year; the majority of these were notified by midwives.

Stillbirths.

26 male and 24 female stillbirths were notified and registered. The rate per 1,000 of total population registered was 0.45, the rate for England and Wales being 0.51. The percentage of illegitimate stillbirths to the total was 2.0, compared with a percentage of illegitimate to total births of 4.50.

Infant Mortality.

85 infants under one year of age died during the year, giving an infant mortality rate of 46.07 per 1,000 live births, compared with that of 49 for England and Wales and 58 for London. The rate amongst legitimate children was 47.11 while for illegitimate children it was 24.10.

Ophthalmia Neonatorum.

Three cases of this disease were notified, one of which was treated in hospital; all made complete recoveries.

There were 27 cases in which a medical aid notice was sent by a midwife to a medical practitioner on account of some eye condition occurring in a newly-born infant. All these cases were visited by the Medical Officer of Health and a Health Visitor. Of the total cases investigated, only three were notified as suffering from true Ophthalmia Neonatorum.

Maternal Mortality.

Four maternal deaths were assigned to this district, which give a maternal mortality rate of 2.11 per thousand births. This is a remarkably low figure; that for England and Wales for the corresponding period was 2.29 which also is low.

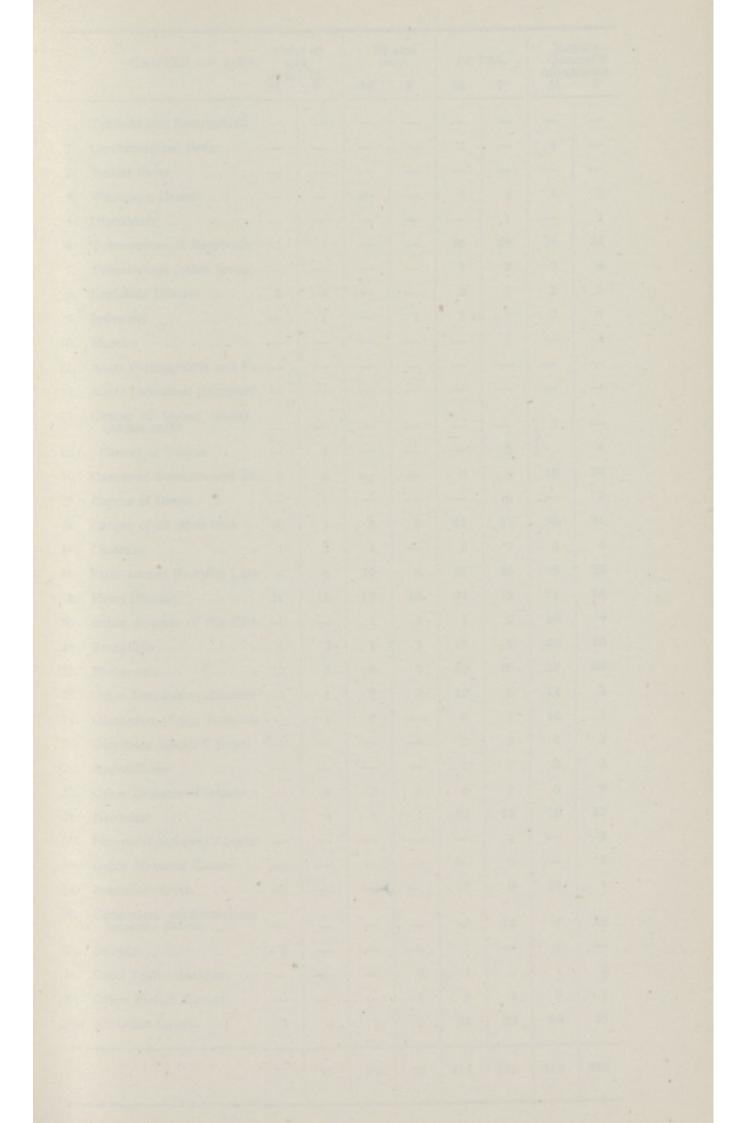
Work of Health Visitors.

The following table shows Health Visitors during the year:		umber	of vis	its pai	d by	the								
(a) To expectant mothers			First	visits		538								
			Total	visits		829								
(b) To children under one year of	of age		First	visits	2	2,107								
			Total	visits	7	7,409								
(c) To children between the age	es of or	ne and												
five years				visits		5,190								
(d) Ineffective visits			Total	visits		3,336								
Grand To	otal				26	5,764								
Supervisio	n of M	lidwiv	es.											
The following is a summary of the reasons for sending for medical help by midwives:—														
help by midwives :-														
Perineal Tear						116								
Prolonged Labour						41								
Rise of Temperature						44								
Discharging Eyes						27								
Miscarriage						23								
Ante-Partum Haemorrhage						18								
Premature Baby						13								
Malpresentation						7								
Post-Partum Haemorrhage						7								
Albuminuria						7								
Retained Placenta						6								
Feebleness of Infant						4								
Other Causes						70								
						383								
Notices summoning medical	laid					383								
For (a) Mothers						307								
For (b) Infants						76								
Notification that they had be conditions were received from m				under	nenti	oned								
Liable to be sources of infec						37								
Infant Deaths						13								
Stillbirths						12								
Substitution of artificial feed						8								
						2								
Daying out dead bodies					1779									

Domiciliary Midwifery Service.

Below is a table setting forth in statistical form the work of the Corporation Midwives, Dagenham Nursing Association and Salvation Army Midwives for the year 1943:—

COLUMN TO THE PARTY OF THE PART	Municipal Midwives.	Dagenham Nursing Association.	Salvation Army Nurses.
Births Attended: As Midwife As Maternity Nurse	508 85	392 56	154 7
Miscarriages Attended	15	10	4
Visits Paid: As Midwife As Maternity Nurse Ante-Natal	10,168 942 3,560	7,254 1,032 1,610	4,551 199 1,193
Ante-Natal Clinics Attended	461	222	99



territoria de la compansión de la compan

CAUSES OF DEATH.	Under 1 year M	r. F	Over and unde M	d	Ove an unde M	d	Ove an unde M	d	Ove an unde M	d	Ove ar unde M	r 25 nd r 35. F	ar	er 35 ad er 45. F	Ove ar unde M	er 45 id r 55. F	Ove an unde M	r 55 d r 65. F	Ove ar unde M	er 65 nd r 75.		and ver.	TO'	ΓAL F	Re Gen Alloc M	gistan neral's cation F
Typhoid and Paratyphoid Fevers	_	-	-	_	-	_	_	_	_	-	-	-	_	_	_	_	_	-	-	-	-	-	_	-	-	-
2. Cerebro-spinal Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1	-
3. Scarlet Fever		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Whooping Cough	3	-	-	1	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	2	4	2
5. Diphtheria	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-		-	-	-	-	-	-	-	1	-	1
6. Tuberculosis of Respiratory System	-	-	-	-	-	-	.1	1	4	9	7	5	9	5	11	4	3	-	1	1	-		36	25	35	24
7. Tuberculosis (other forms)	- 3	-	1		-		1	-	5	-	-	1	-	1	-	-	-	-	-	-	-	-	7	2	7	4
8. Syphilitic Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2	-	-	-	2	2	2	2
9. Influenza		-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	_	-	1	-	1	2	2	7	1
0. Measles	-	2	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	3	-	3
Acute Poliomyelitis and Polio-encephalitis	-	-	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Acute Infectious Encephalitis		-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	-
3. Cancer of Buccal Cavity & Oesophagus (Males only)		-	_	-	-	_	_	_	_	-	-	_	_	-	-	-	-	_	-	_	-	-	-	-	1 3	-
3.f. Cancer of Uterus		-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	3	-	1	-	-	-	5	5	
4. Cancer of Stomach and Duodenum	-	-	-	-	-	_	_	-	-	-	-	-	-	-	4	4	2	2	2	2	7	-	8	8	18	10
5. Cancer of Breast	-	-	-	-	-	-	-	-	-	1	-	-	-	2		1	-	1	-	1	-	_	-	6	_	
6. Cancer of all other sites		-	_	-	1	_	_	1	-	_	-	3	5	6	8	5	16	9	14	1	8	8	52	33	50	3
7. Diabetes		-	_		-	-	-	_	_	-	-	1	-	-	-	1	-	2	1	3	1	-	2	7	2	
8. Inter-cranial Vascular Lesions	1	1	_	_	-	-	-	-	_	-	-	1	3	3	-3	6	1	7	6	6	10	6	24	30	23	3:
9. Heart Disease	1	1	-	-	1	-	1	3	2	1	1	4	5	5	18	12	29	10	21	18	18	18	97	72	51	5
0. Other diseases of the Circulatory System		-	-	_	-	-	_	_	-	-	-	-		1	-	_	_	_	_	-	1	1	1	2	16	1
1. Bronchitis	1 .	-	-	-	-	-	_	_	-	_	-	_	2	_	2		4	_	5	2	1	3	15	5	40	10
2. Pneumonia	15	10	-	-	1	1	2	-	1	1	1	1	6	2	8	4	10	2	10	5	8	9	62	35	37	25
3. Other Respiratory diseases	-	-	-	-	-	-	-	-	-	-	2	-	-	-	1	-	3	2	4	1	2	2	12	5	12	1
4. Ulceration of the Stomach or Duodenum		-	-	-	-	-	-	-	1	-	-	-	- 1	-	, 2	-	3	-	-	1	1	-	8	1	14	1
5. Diarrhoea (under 2 years)	3	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	3	2	4	1
6. Appendicitis		-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	1	1	2	3
7. Other Digestive Diseases	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1		2	1	-	A	2	1	6	7	6	9
8. Nephritis		-	-	1	-	-	-	-	-	700	-	1	4	1	1	3	2	1	1	4	5	1	13	12	12	13
9. Puerperal and post Abortive Sepsis	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	1
0. Other Maternal Causes		-	-	-	_	-	-	-	-	-	-	2	-	11	-	-	-	-	-	-	-	-	-	3	-	1
1. Premature Birth	13	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	13	8	13	9
2. Congenital malformation, birth injury, infantile disease	8	12	-	-	-	_	_	-	_	-	-	-	-	-	-	-	-	-	_	_	-	-	8	12	9	10
3. Suicide	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	1	-	-	-	1	-	1	-
4. Road Traffic Accident		-	-	-	-	-	3	-	-	-	-	1	2	1	2	-	-	-	-	-	-	2	7	4	7	1
5. Other Violent Causes		-	-	-	-	-	2	1	1	-	-	-	2	1	3	-	-	_		-	-	1	8	3	9	1
6. All Other Causes	1	2	-	-	1	-	2	2	-	3		1	4	2	6	2	7	1	3	4	7	5	31	22	34	2
	46	38	1	3	5	1	12	10	14	15	12	22	44	33	71	45	84	41	71	55	64	58	424	321	419	32

