

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

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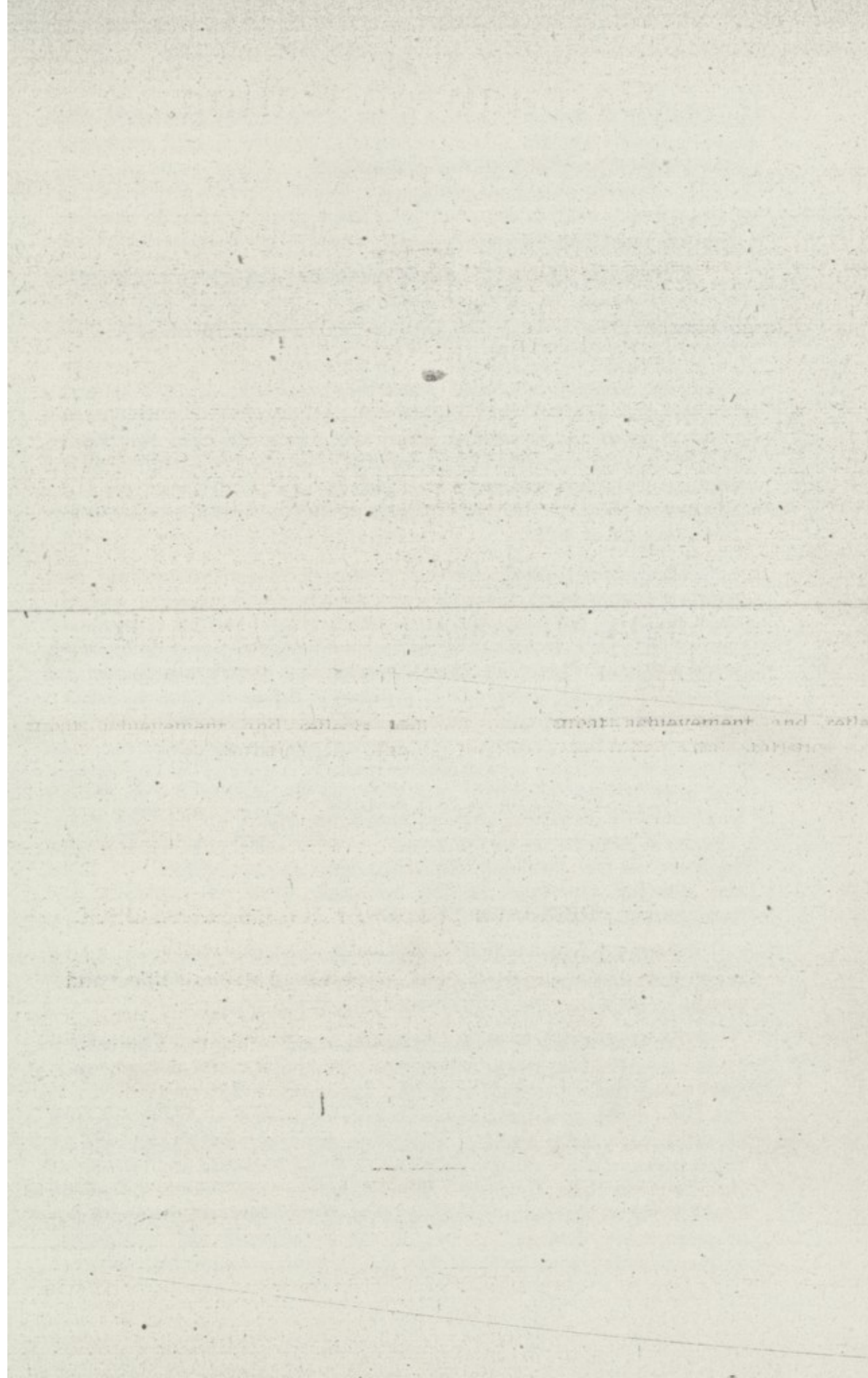


ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

1946

REGINALD LEADER. M.R.C.S, L.R.C.P., D.P.H.,
Medical Officer of Health,
Borough School Medical Officer and
Medical Superintendent of the
Isolation and Maternity Hospitals.

Perry & Routleff Ltd., Printers



27th February, 1948.

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

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit the Annual Report on the health of the Borough for 1946, and although I am writing this most of the work done during the period was actually under the supervision of my predecessor, Dr. Thomas Orr.

This Report has been somewhat delayed by circumstances beyond my control, first by the interval between the resignation of Dr. Orr on 4th December, 1946, and my assuming my duties on the 27th January, 1947, and secondly by the resignation of the Deputy Medical Officer, Dr. Cyril G. K. Thompson, on 28th February, 1947, on his appointment as Medical Officer of Health of the Borough of Erith.

The infant mortality rate is probably at the moment the best index we possess of the social circumstances of an area, and the rate tends to be high in places where public health services are poor and where maternal ignorance and neglect are found. It is with pleasure, therefore, that I can direct your attention to the rate of 27 for this year. It is the lowest figure on record and is a great achievement and reflects well on your Health Services. The other vital statistics are almost equally satisfactory. The birth rate continues to rise and is actually higher in Ealing than in the rest of the country. At 19.7 per thousand of the town's population it is higher than at any time during the last 26 years. The total number of births for the year is 3,505, the highest ever recorded in the Borough, and this figure is, curiously, just twice the number of deaths (1,799) occurring from all causes in the same period of time.

The death rate of 10.1 compares favourably with that of 12.0 for the rest of the country, and it is pleasing to record that there has been no death from diphtheria during the year.

The abatement of smoke nuisance must be one that has rarely been raised in this town. However, throughout the country each year considerable pollution of the atmosphere takes place and it has been calculated that something in the order of 3,000,000 tons of solid and tarry matter, including ash, and 5,000,000 tons of sulphur dioxide are thrown into the air from domestic and industrial chimneys in this country. The latter is equivalent to about 8,000,000 tons of sulphuric acid, and the effect of this on the incidence of respiratory disease has yet to be determined and evaluated. It is calculated that most of this ash is from non-domestic sources

but about half of the carbonaceous matter or smoke is derived from domestic fires so that it is a public health matter affecting every town to some degree. This pollution represents continuous waste of fuel which may emphasise the economic side as well as the medical aspects of the problem, even in a Borough of this character with its 1,148 acres of well preserved public parks and open spaces.

I wish to bring one further matter to your attention.

Modern Child Guidance comprises work in maternity and child welfare clinics, in schools, by selection and grading of pupils and by special teaching methods ; in foster-homes, boarding homes, and residential schools ; in children's hospitals, notably orthopaedic and fever ; and finally diagnosis and disposal and treatment at the Clinic itself, in work in the home, and in the provision of special hostels for treatment. In future, therefore, regional hospital boards, local health authorities, local education authorities and the Home Office are all concerned, with the local education authority having a pre-eminence of interest.

It seems logical therefore for this great preventive mental health service of childhood to remain an integral part of the education system, and there is no paramount administrative reason for changing the existing arrangements by which the Child Guidance is administered by the School Health Service. The demand for this form of treatment is growing in the Borough and plans are in hand for the enlargement of the facilities provided.

In conclusion I wish to thank the staff of the department for their help so freely given during a particularly onerous period, and members of the Council for their unfailing assistance and support in our endeavours.

I have the honour to be

Your obedient servant,

REGINALD LEADER,

Medical Officer of Health.

SUMMARY OF STATISTICS.

Area (in Acres)...	...	...	...	...	...	...	8,739
Population (Census, 1931)	...	...	...	...	...	...	117,707
Population (estimated middle of 1946)	...	...	...	...	...	...	178,080
Rateable Value, 1st April, 1946	...	...	...	...	...	...	£1,889,572
Net Product of a Penny Rate, 1946-47	...	...	...	...	...	...	£7,654

Live Births :—

Legitimate Males,	1,718	Females, 1,616	Total, 3,334
Illegitimate Males,	78	Females, 93	Total, 171
			— 3,505

Birth-Rate per 1,000 of Estimated Population	19.7
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Still-Births :—

Males, 40	Females, 43	Total	83
Rate per 1,000 total Births (Live and Still-Births)						23.1

Deaths : Males, 878	Females, 921	Total	1,799
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Death-Rate per 1,000 of Estimated Population	10.1
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Deaths of Infants under one year of age :—

Legitimate Males,	49	Females, 35	Total, 84
Illegitimate Males,	3	Females, 6	Total, 9
			— 93

Death Rate of Infants under one year of age :—

All Infants per 1,000 Live Births	...	...	...	27
Legitimate Infants per 1,000 Legitimate Live Births				25
Illegitimate Infants per 1,000 Illegitimate Live Births				52

Deaths from Diseases and Accidents of Pregnancy and Childbirth :—

From Sepsis	1	Death-Rate 1,000 Total Births	0.28
From other Causes	2	" " "	0.56
	—		—
Total	3		0.84
	—		—

Total
Deaths

Measles	...	...	...	...	...	...	1
Whooping Cough	...	...	...	...	...	...	2
Diphtheria	...	...	...	...	...	...	—
Scarlet Fever	...	...	...	...	...	...	2
Influenza	...	...	...	...	...	...	17
Tuberculosis of Lungs	...	...	...	...	...	...	78
Other Forms of Tuberculosis	...	...	...	...	...	...	15
Diarrhoea (under 2 years of age)	...	...	...	...	...	...	4

Causes of Death, 1946.

Cause of Death.	Deaths, 1946			Total Deaths 1945
	Male	Female	Total	
Typhoid and Paratyphoid Fevers ...	—	—	—	—
Cerebro-Spinal Fever ...	1	1	2	2
Scarlet Fever ...	2	—	2	—
Whooping Cough ...	1	1	2	1
Diphtheria ...	—	—	—	1
Tuberculosis of Respiratory System ...	49	29	78	67
Other Forms of Tuberculosis ...	5	10	15	6
Syphilitic Diseases ...	6	2	8	13
Influenza... ..	8	9	17	10
Measles ...	—	1	1	2
Acute Infectious Encephalitis ...	1	1	2	—
Cancer of B. Cav. and Oesoph. (M.), ; Uterus (F.) ...	8	21	29	26
Cancer of Stomach and Duodenum ...	25	25	50	43
Cancer of Breast ...	1	33	34	33
Cancer of all other Sites ...	116	97	213	191
Diabetes ...	6	8	14	10
Intra-Cran. Vasc. Lesions ...	80	122	202	151
Heart Disease ...	232	258	490	427
Other Diseases of Circulatory System	30	52	82	76
Bronchitis ...	57	40	97	75
Pneumonia ...	43	32	75	83
Other Respiratory Diseases ...	16	12	28	23
Ulcer of Stomach or Duodenum ...	14	5	19	18
Diarrhoea (under 2 years) ...	—	4	4	13
Appendicitis ...	6	4	10	10
Other Digestive Diseases ...	19	17	36	30
Nephritis ...	17	14	31	31
Puerperal and Post-Abortive Sepsis ...	—	1	1	—
Other Maternal Causes ...	—	2	2	—
Premature Birth ...	16	9	25	28
Congenital Malformations, Birth In- jury, Infantile Diseases ...	22	16	38	42
Suicide ...	9	2	11	8
Road Traffic Accidents... ..	17	3	20	20
Other Violent Causes ...	20	24	44	56
All other Causes ...	51	66	117	127
Total ...	878	921	1,799	1,620

Table Showing Birth-Rate, Death-Rate and Infant Death-Rate
for the Borough of Ealing.

<i>Period</i>	<i>Birth-Rate</i>	<i>Death-Rate</i>	<i>Infant Death-Rate</i>
1921—1925	15.4	10.7	58
1926—1930	14.5	10.9	49
1931—1935	14.2	10.1	46
1936—1940	14.7	10.1	45
1941	14.5	10.9	49
1942	17.2	10.3	48
1943	18.8	11.2	40
1944	19.4	10.9	41
1945	17.2	10.1	40
1946	19.7	10.1	27

Maternal Mortality per Thousand Births.

<i>Period</i>	<i>Ealing</i>	<i>England and Wales</i>
1931—1935	4.10	4.12
1936—1940	2.18	2.95
1941	1.53	2.23
1942	1.79	2.01
1943	2.95	2.29
1944	0.97	1.93
1945	—	1.79
1946	0.84	1.06

HOSPITALS.

ISOLATION HOSPITAL.

The Clayponds Isolation Hospital at South Ealing is under the control of the Ealing and Brentford & Chiswick Hospitals Committee. Forty beds were available for the treatment of infectious disease.

MATERNITY HOSPITAL.

The Perivale Maternity Hospital of 43 beds is also under the control of the Ealing and Brentford & Chiswick Hospitals Committee. Throughout the year this hospital was taxed to the uttermost by the demands for admission, the accommodation being fully booked months in advance throughout the year.

AMBULANCE FACILITIES.

1. FOR INFECTIOUS DISEASE.

The Ealing and Brentford & Chiswick Hospitals Committee provide a motor ambulance for the removal of cases of infectious disease to the Clayponds Isolation Hospital at South Ealing.

2. FOR ACCIDENTS AND CASES OF ACUTE ILLNESS.

Three suitably equipped ambulances and a former Civil Defence ambulance are available for the removal of accidents, cases of acute illness and maternity cases.

Two of the ambulances are satisfactory but the other is in a bad condition and the Middlesex County Council have promised early replacements for this and for the former Civil Defence ambulance, which is used only in emergencies.

There is also a utility car which is used for general duties and for the conveyance of children to Health Centres or Hospitals.

The following table shows the extent of the calls made upon the Service during the year.

Cases of Accident	...	...	...	...	706
Cases of Illness	...	...	...	...	3,392
Maternity Cases	...	...	...	...	1,105
					<hr/>
Total cases.	...	...	...	...	5,203
					<hr/>
Number of journeys outside the Borough (included above)	...	...	...	...	914
Annual Mileage	...	...	...	...	40,669

MATERNITY AND CHILD WELFARE.

With the number of births, 3,505, the highest ever recorded in the Borough, and the birth-rate 19.7 per 1,000 population, the highest since 1920, the demands on the maternity and child welfare service have increased enormously. It is extremely gratifying, therefore, to be able to state that the infant death-rate of 27 per thousand live births is by far the lowest ever to be recorded for the Borough. The infant death-rate for the country, as a whole, was 43 per thousand live births. Previously, the lowest infant death-rate, recorded in 1934, was 38 per thousand births, while the rates in the last three years have remained steady at 40, 41 and 40, respectively.

In 1945, no maternal deaths were recorded at all. In 1946 this excellent record was not maintained, there being three deaths from maternal causes: even so, the maternal mortality-rate of 0.84 per thousand total births compares favourably with the rate of 1.06 for the country generally.

The outstanding value of the maternity and child welfare facilities in the Borough is shown by these low infant and maternal mortality rates.

The following table, indicating where the births occurred, shows that 75 per cent. took place in hospitals and nursing homes.

Births in Perivale Maternity Hospital	...	771
Births in other hospitals	... ..	1,259
Births in nursing homes	... ..	599
Births at home	... ..	876
		<hr/>
		3,505
		<hr/>

During the year the increased demand for admission to the local maternity hospital accommodation, at Perivale, Central Middlesex and West Middlesex Hospitals, led to the length of stay of normal cases in each of these hospitals being reduced, thus permitting an increase in the number of admissions. Despite this arrangement there was a greatly increased number of home confinements, and two additional midwives had to be engaged to deal with this work.

In April, it became possible to offer every woman confined at home, with a domiciliary midwife in attendance, the opportunity to have gas and air analgesia at her confinement. Approximately 60 per cent. of the cases received this means of relief from pain at their confinement. The provision of housing accommodation for midwives, payment of a special auto-cycle allowance to a relief midwife and the acceptance of Hospital Saving Association vouchers in full settlement of fees were other measures introduced during the year with a view to improving the midwifery service. The payment of a car allowance to any midwife using her own car for her duties was under consideration at the end of the year.

The Domestic Help Service was extended considerably in the early part of the year, an increase in the rate of pay (now 1/9d. per hour) facilitating the enrolment of suitable staff. This increase in pay led to difficulty in many maternity cases, as the maximum payment for 14 days' attendance rose to £8 for each case. As there was urgent need to encourage home confinements and as hospital confinements are subsidised to a considerable extent from the rates, the Council agreed that the maximum charge for domestic help in a maternity case should be fixed at £4 for the 14 days.

The arrangements whereby unmarried expectant mothers can be admitted to pre-natal and post-natal hostels have continued. During the year 31 cases were admitted to one or both hostels.

Facilities have also been made available, through the Middlesex County Council, for a limited number of small children to be admitted to a Residential Nursery while the mother is in hospital.

Twenty-eight notices were received under Section 7 of the Adoption of Children (Regulation) Act, 1939, and in these cases the Health Visitors have carried out supervisory duties. Visits have also been made to other cases of adoption in which notice had not been given under the Act.

Summary of the Visits made by the Health Visitors.

	(1945)	(1946)
Visits to children under 12 months :—		
First visits	2,617	4,182
Return visits	5,442	3,092
Visits to children 1 to 5 years of age	8,006	4,920
Visits to expectant mothers	1,572	1,676
Visits to investigate infant deaths and still-births	52	23
Special visits or investigations	207	253
Visits to cases of Ophthalmia Neonatorum ...	6	—
Visits to cases of Measles and Whooping Cough...	269	21
Visits to cases of Scarlet Fever on discharge from the Isolation Hospital	97	83
Inspections of Women's Lavatories	37	31
Visits to children under care of foster-mothers ...	363	251
Other visits	326	304
Total Visits	<u>18,994</u>	<u>14,836</u>

Summary of the Work at the Health Centres.

<i>Mothers.</i>	(1945)	(1946)
Expectant Mothers attending Ante-Natal Clinics :—		
Attending for the first time	2,258	2,936
Total attendances	12,885	15,303
Nursing mothers attending Post-natal Clinics :—		
Attending for the first time	123	135
Total attendances	130	143
<i>Children.</i>		
Children attending Centres for the first time :—		
Under one year of age	2,275	2,721
One to five years of age	365	376
Total attendances made by children :—		
Under one year of age	28,629	31,426
One to five years of age	13,541	12,483

Medical Examination of Pre-School Children.—The number of complete medical examinations of children from one to five years of age are indicated in the following table :—

<i>Age-Group</i>	<i>No. of Examinations</i>	
	(1945)	(1946)
1 year to 18 months	1,318	920
18 months to 2 years	723	550
2 years to 3 years	602	538
3 years to 4 years	524	416
4 years to 5 years	388	227
	<hr/> 3,555 <hr/>	<hr/> 2,656 <hr/>

DENTAL TREATMENT.

During the year 647 expectant or nursing mothers and 243 children under five years of age attended for dental inspection and treatment. The total attendances were 2,876 by mothers and 501 by children. The treatment carried out was as follows :—

Mothers.—Extractions, 1,604 ; Fillings, 372 ; Gum treatments, 267 ; Sealing, 274 ; full or partial dentures provided, 218 ; Adjustments to new dentures, 81.

Children.—Extractions, 521 ; Fillings, 85 ; Treatment with silver nitrate, 149.

DAY NURSERIES.

From the 1st April the provision of day nurseries ceased to be regarded by the Ministry of Health as a war-time measure subject to 100 per cent. grant. The Council, in addition to having to bear approximately half the running costs, had to decide on the policy to be adopted for the future as to provision of nurseries. In view of the great demand for accommodation of children whose mothers were at work, it was decided to continue the seven existing whole-time nurseries for the time being. It was, however, decided to hand over the two part-time nurseries, Wood End and St. John's, to the Education Committee, under whose control they would revert to their former status of nursery schools or classes. There was, however, such a demand for St. John's to continue as a part-time nursery that the Council reversed their decision in respect of this nursery and throughout 1946 it continued as a part-time nursery, in the same way as in the war years.

The attendances at the nurseries during the year were as follows :—

	<i>Date opened</i>	<i>Capacity</i>	<i>Days open</i>	<i>Total attendances</i>	<i>Average attendance</i>
Stanhope ...	17/11/41	70	302	17,052	56
Culmington Road	26/1/42	85	302	19,870	66
Cuckoo ...	9/3/42	70	302	15,694	52
Perivale ...	5/10/42	58	302	10,827	36
Northolt ...	26/10/42	40	302	9,845	33
St. Mark's ...	4/1/43	44	302	11,700	39
Oldfield ...	19/7/43	50	302	12,312	41
St. John's ...	5/10/42	60	242	11,505	48
Wood End ...	5/10/42	28	64	1,156	18

CHILD LIFE PROTECTION.

The work of supervision of foster-mothers carried out by the Health Visitors who have all been appointed Child Protection Visitors, is summarized in the following table :—

Number of children on the register at the beginning of the year	39
(Number of fostermothers having care of the above children, 36).	
Number of children registered during the year	33
Number of children removed from register during year ...	34
Number of children on register at end of year	38
(Number of fostermothers having care of the above children, 35).	
Number of visits made by Health Visitors	203

MIDWIFERY SERVICE.

At the end of the year, 12 midwives were employed by the Council in connection with the domiciliary midwifery service.

The cases attended by the midwives were as follows :—

Number of Confinements attended :—

(a) as midwife	618
(b) as maternity nurse	92

SUPERVISION OF MIDWIVES.

Number of midwives practising at end of year :—

Midwives in service of Council	...	...	...	...	12
„ at Perivale Maternity Hospital	...	...	...	...	10
„ in independent practice	...	...	...	...	5
„ in private nursing homes	...	...	...	...	6
All these midwives possessed the certificate of the Central Midwives Board.					

Number of births attended by midwives :—

When acting in the capacity of midwife :—

(a) In private nursing homes	...	...	...	...	178
(b) At the patient's home	...	...	...	...	663

When acting in the capacity of maternity nurse (a doctor being in attendance) :

(a) In private nursing homes	...	...	...	...	629
(b) At the patient's home	...	...	...	...	117

SUPERVISION OF NURSING HOMES.

The following table gives information regarding nursing homes in the Borough :—

	<i>No. of Homes</i>	<i>No. of Beds</i>
Number of Nursing Homes on Register at beginning of year ...	14 (6)	212 (61)
Number of New Homes registered	2	—
Number of Homes discontinued	2	—
Number of Nursing Homes on Register at end of year ...	14 (6)	218 (69)

The figures in brackets indicate the number of Homes and the number of beds wholly or partly devoted to the reception of maternity cases.

PREVALENCE OF, AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

Cases of Infectious Disease occurring in the Borough.

Disease	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	195	228	52	123	142	92	33	48	28	13	17	14	29
Scarlet Fever ...	493	400	408	317	383	303	116	166	180	448	228	340	232
Enteric Fever (including Paratyphoid)	3	7	8	5	2	5	4	5	—	1	—	—	—
Puerperal Fever ...	3	7	3	4	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	14	11	9	24	46	40	30	30	39	41	42	47	35
Pneumonia :													
Primary ...	72	59	85	60	83	50	66	97	105	123	142	110	114
Influenzal ...	17	11	14	37	18	26	10	27	17	40	9	14	16
Acute Poliomyelitis ...	—	1	2	7	6	1	1	9	2	2	2	3	4
Cerebro-Spinal Fever	—	—	—	1	1	—	7	15	5	1	—	6	6
Malaria ...	1	—	1	—	—	—	1	1	2	—	—	—	—
Dysentery ...	—	1	1	5	12	2	—	3	6	5	24	60	10
Erysipelas ...	43	28	28	27	41	37	29	26	36	41	30	26	31
Polio-Encephalitis ...	1	—	1	—	—	—	—	—	—	1	—	—	—
Tuberculosis :													
Pulmonary ...	139	157	139	178	142	149	156	195	223	233	173	194	275
Non-Pulmonary ...	24	23	22	37	33	38	30	28	38	51	30	23	33
Ophthalmia Neonatorum	5	3	4	7	15	16	5	2	8	4	3	3	3
Total ...	1010	936	777	832	924	759	488	653	689	1004	700	840	788

SCARLET FEVER.—Out of 232 cases of scarlet fever only 90 cases were removed to hospital. Accommodation for cases of scarlet fever at the Isolation Hospital has been much reduced and only in exceptional circumstances have cases been admitted. There was one death from this disease.

DIPHTHERIA.—All the cases of diphtheria were removed to hospital. There were no deaths from this disease.

Diphtheria Immunization.—The protection of children by means of immunization is considered on page 32.

MEASLES AND WHOOPING COUGH. — Measles and whooping cough became notifiable under the Measles and Whooping Cough Regulation, 1939. The following number of cases were notified :—

Measles ...	791
Whooping Cough ...	271

There was one death from measles and two deaths from whooping cough during the year.

The number of cases of measles admitted to hospital was 18.

TUBERCULOSIS.—The number of cases of tuberculosis notified during the year and the number of deaths which occurred were as follows :—

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulm'y		Pulmonary		Non-Pulm'y	
	Male	F'male	Male	F'male	Male	F'male	Male	F'male
0—1	—	1	—	—	1	1	—	1
1—5	2	4	2	3	—	—	1	—
5—10	—	—	1	5	1	—	—	—
10—15	1	7	3	2	—	—	—	1
15—20	14	20	1	1	2	3	—	2
20—25	27	26	1	4	3	3	1	3
25—35	40	40	1	5	6	9	1	2
35—45	23	20	—	2	7	5	2	1
45—55	15	6	1	—	11	2	—	—
55—65	12	5	—	1	10	1	—	—
65 upwards	8	4	—	—	8	5	—	—
Total ...	142	133	10	23	49	29	5	10

SANITARY CIRCUMSTANCES OF THE BOROUGH.

SANITARY INSPECTION OF THE BOROUGH.—The following is a summary of the work carried out by the Sanitary Inspectors during the year :—

GENERAL.

Number of Premises inspected on Complaint	...	...	3,046
Number of Nuisances observed by Inspectors	...	...	43
Number of Premises inspected in connection with Infectious Disease	...	...	452
Number of Premises visited by Periodical Inspection (Cow-sheds, Dairies, Slaughterhouses, Factories, etc.)	...	...	210
Number of Houses inspected under House-to-House Survey	...	...	—
Food Inspections	...	...	1,034
Total Number of Re-inspections	...	...	9,069
Other Inspections	...	...	2,388
Total Number of Inspections and Re-inspections...	...	...	16,242
Number of Intimation Notices given	...	...	1,344
Number of other Letters written	...	...	2,744
Number of Statutory Notices served	...	...	226
Proceedings before Magistrates	...	...	1

Complaints received during the year were 961 in excess of the number dealt with in 1945.

CONTROL OF CIVIL BUILDING.

In connection with the Regulations for the Control of Civil Building, Certificates of Essentiality have been issued in respect of 881 houses at an estimated cost of £53,771 13s. 9d.

The Sanitary Inspectors have dealt with all applications for Building Licences which involved work for which Statutory Notices under the Public Health Act could have been served.

INSPECTION AND SUPERVISION OF FOOD.

MEAT AND OTHER FOODS.—There were no infringements of the Public Health (Meat) Regulations. No meat is sold from stalls in the Borough.

There are three private slaughterhouses but no animals were slaughtered in them during the year.

There is no public slaughterhouse in the Borough.

The Meat Depot which was established in a central position at the beginning of the war and served a large area in Middlesex including Ealing, was closed in April on the re-opening of the Central Meat Market at Smithfield.

The following table indicates the amount of various foodstuffs which have been condemned by the Sanitary Inspectors as unfit for food in the course of their inspections at the meat depot and at the various food premises in the Borough :—

	lbs.
Beef	2,188
Mutton	200 $\frac{3}{4}$
Veal	31
Offal	101 $\frac{1}{4}$
Bacon	227
Fish	5,272
Sausage Meat	334 $\frac{3}{4}$
Tinned Meat	5,304
Fruit and Vegetables	6,736 $\frac{1}{4}$
Confectionery	4,576
Cocoa	19,945 $\frac{3}{4}$
Cereals	285
Assorted Food	25,405
	<hr/>
	70,606 $\frac{3}{4}$
	<hr/>
Meat (tins)	497
Milk (tins)	4,375
Fish (tins)	1,393
Assorted Articles	4,765
Eggs	1,700
Assorted tins, jars and packets	745
Tinned Fruit and Vegetables... ..	2,085

RATS AND MICE DESTRUCTION (ACT) 1919. **INFESTATION ORDER, 1943**

The following is a summary of the work carried out by the Rodent Operative, acting under the direct supervision of the Chief Sanitary Inspector.

Complaints	...	...	...	...	...	507
Premises inspected	...	...	...	...	...	649
Premises found to be infested with :						
(1) Rats	...	...	...	...	...	440
(2) Mice	...	...	...	...	...	72
Estimated number caught :						
(1) Rats	...	...	...	...	...	759
(2) Mice	...	...	...	...	...	964
Fees received for treatment	...	...	...	£297.	9s. 0d.	
Premises treated free of charge	...	...	...	...	...	47
Re-visits to infested premises	...	...	...	...	...	940

SCHOOL HEALTH SERVICE.

The work of the School Health Service was well maintained throughout the year. Routine medical examinations were carried out in schools in the usual manner and the minor ailment clinics continued to be held at all of the six health centres.

Dental inspections and treatment continued covering all the pupils at maintained primary and secondary schools in the Borough.

STAFF.

Dr. Thomas Orr, Medical Officer of Health, retired from the Public Health Service in November as previously mentioned in this report.

The medical work, inspections and treatment for the year was carried out by Assistant Medical Officers.

Three Dental Surgeons (one Senior Officer and two Assistants) carried out the dental work referred to above.

The Child Guidance team, consisting of a Psychiatrist, Psychologist and Play Therapist, and a Psychiatric Social Worker, continued their work in the new premises at 70, Uxbridge Road, West Ealing, which were opened in January of this year.

MEDICAL INSPECTION.

Medical Inspections included (1) the routine inspection in all maintained primary and secondary schools of pupils in the two age-groups (a) entrants and (b) children at 13 years; (2) the special inspection of children referred by the Head Teachers, School Nurses and School Enquiry Officers; and (3) the annual examination of physically handicapped children and of children required to be kept under observation.

FINDINGS OF MEDICAL INSPECTION.

Among the 5,738 children examined at routine inspections there were 517 defects, excluding uncleanliness and dental disease, requiring treatment, and 764 children required to be kept under observation.

The 9,015 children referred for special examination showed 3,812 with defects requiring treatment and 473 requiring to be kept under further observation.

Of the 5,738 children examined at the routine inspections, 494 or 8.6 per cent. were found to require treatment for one or more defective conditions, other than defective teeth or uncleanliness.

NUTRITION.

The state of nutrition of the children examined at routine medical inspection is shown in Table II. The classification is in accordance with the suggestions of the Ministry of Education. Of the 5,738 school children examined 10.4 per cent. were classified as of excellent nutrition, 86.5 of normal nutrition, and 3.1 per cent. slightly sub-normal. There were no children classified as of bad nutrition.

The School Nurses continued their monthly visits to the schools to survey children and to enquire from the Heads whether there were any children whose condition was not entirely satisfactory. Appointments were made where necessary for selected children to be seen at the Health Centres by the Medical Officers.

UNCLEANLINESS.

Cleanliness surveys were conducted in the usual manner on three occasions during the year, and additional visits were paid to schools on request where the usual standard of cleanliness was not being maintained.

The results of these surveys were very satisfactory, only 3.7 per cent. of the children being found to have nits or vermin on the head. In the following table the results are tabulated for comparison with those of previous years.

Year	Average Number on Rolls	No. of examinations for verminous condition	Number of children excluded	Number of warning notices issued	Total Number of unclean children excluded or warned	Percentage of children unclean whether excluded or not	Legal proceedings taken.
1938	18,107	43,372	731	584	1,315	3.0	18
1939	18,174 (End of August)	29,357	520	303	823	2.8	6
1940	8,600 (Nov.)	25,615	466	325	791	3.0	1
1941	14,100	25,956	557	480	1,037	4.0	6
1942	16,542	39,937	674	639	1,313	3.3	61
1943	16,900	44,607	675	646	1,321	3.0	32
1944	14,367	38,546	535	447	982	2.5	25
1945	19,500	43,563	595	563	1,158	2.6	—
1946	19,715	50,352	761	1,117	1,868	3.7	—

ARRANGEMENTS FOR TREATMENT.

MINOR AILMENTS AND DISEASES OF THE SKIN.—The treatment of minor ailments carried out at the Health Centres is shown in Table III, Group I (page 35). As many as 97 per cent. of the children found to be suffering from minor ailments on medical inspection attended the Health Centres for treatment.

The number of cases treated and the total attendances involved are as follows :

<i>Conditions Treated</i>	<i>No. of cases treated</i>	<i>Total attendances made</i>
Skin :		
Ringworm	5	53
Scabies	348	427
Impetigo	114	415
Others	195	1,290
Minor eye defects	277	1,066
Minor ear defects	268	2,543
Miscellaneous :		
Minor injuries	1,255	6,480
Sores		
Others		
Total	2,462	12,274

SCABIES.

The treatment of Scabies with two applications of Benzyl Benzoate was continued. During the year there were 348 school children, 129 pre-school children and 321 cases referred by General Practitioners and Factory Medical Officers, making a total of 798 cases treated. Four of these cases required re-treatment.

All who attended the Health Centre for treatment were encouraged to bring other members of the family and any home contacts with them when there was any likelihood that they were suffering from the same condition.

The following table shows that the number of cases of scabies in school children has decreased since 1943 :

Number of School Children treated for Scabies.

<i>Year</i>	<i>At Health Centres</i>	<i>Otherwise</i>	<i>Total Cases</i>
1934	12	2	14
1935	12	—	12
1936	25	—	25
1937	97	—	97
1938	128	7	135
1939	86	23	109
1940	141	8	149
1941	328	19	347
1942	501	—	501
1943	622	3	625
1944	473	—	473
1945	345	—	345
1946	348	—	348

DEFECTIVE VISION AND DISEASES OF THE EYE.—The following is the report of the Ophthalmic Surgeon, Mr. Freeman Heal :—

During the year 616 new cases were examined. Re-inspections numbered 973. Prescriptions for glasses were given in 1,257 cases and 1,139 pairs were supplied.

Abnormal eye conditions, other than refractive errors, were as follows :

						<i>New Cases</i>	<i>Re-inspections</i>
Congenital Abnormalities :							
Squint	...	...	...	...	...	107	301
Ptosis	...	...	...	...	...	4	—
Obstruction Nasal Duct	...	...	...	...	...	3	—
Congenital Nystagmus	...	...	...	...	...	2	11
Progressive Myopia	...	...	...	...	...	2	8
Congenital Cataract	...	...	...	...	...	2	4
Dermoid of Lid	...	...	...	...	...	1	1
Buphthalmos	...	...	...	...	...	1	—
Coloboma of Uveal Tract	...	...	...	...	...	—	1
Entropion	...	...	...	...	...	1	—
Fibroma of Conjunctiva	...	...	...	...	...	1	—
Abnormalities due to Infection :							
Blepharitis	...	...	...	...	...	8	3
Meibomian Cyst	...	...	...	...	...	3	—
Corneal Scarring	...	...	...	...	...	—	3
Conjunctivitis	...	...	...	...	...	2	—
Styes	...	...	...	...	...	2	—
Corneal Ulcer	...	...	...	...	...	2	—
Abscess of Lid	...	...	...	...	...	1	—
Irido-Cyclitis	...	...	...	...	...	1	—
Interstitial Keratitis	...	...	...	...	...	—	1
Herpes Simplex of Lid	...	...	...	...	...	1	—

Abnormalities due to Trauma :

Perforation of Cornea	...	...	...	1	—
Central Retino-choroiditis	1	—

Abnormalities after Surgical Treatment :

Eye removed, reason unknown	...	—	1
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Abnormalities of Unknown Etiology :

Optic Atrophy	1	2
Phthisis Bulbi	1	—

DEFECTS OF EAR, NOSE AND THROAT.—The examination and treatment of children suffering from defects of the ear, nose and throat was continued during the year by Mr. Arthur Miller, F.R.C.S.

During 1946, 318 new cases were examined at the Mattock Lane and Ravenor Park Health Centres. Of these 283 were school children referred from the Minor Ailment Clinics and School Inspection, and 35 from the Child Welfare Centres.

The treatment advised by the Surgeon was carried out at the various Health Centres and included ionization and diastolization, instillation of ear drops and insufflation of iodized boric acid, politzeration and cauterization.

Cases needing X-Ray for diagnostic purposes were referred by the Surgeon to the West Middlesex Hospital or the Central Middlesex Hospital.

During the year 86 children were operated on for the removal of enlarged tonsils and adenoids ; of these 11 were under school age. The operations were performed by Mr. Miller at the Clayponds Hospital.

The new cases were classified as follows :

Post-suppurative otitis media	...	...	...	8
Chronic otitis media suppurative	...	...	...	18
Acute otitis media	...	...	...	5
Deafness	...	...	...	4
Unhealthy and enlarged tonsils and adenoids	...	...	...	253
Nasal obstructions	...	...	...	5
Nasal catarrh	...	...	...	9
Dry perforation	...	...	...	3
Infected Sinus	...	...	...	1
Cerumen	...	...	...	5
Deflected septum	...	...	...	1
Rhinitis	...	...	...	2
Foreign body in nose	...	...	...	1
Furuncle	...	...	...	3

DENTAL DEFECTS.—The report of Mr. C. Colenso, the Senior Dental Surgeon, is as follows :—

All the schools, both Primary and Secondary, were visited by the Dentists during the year for the annual inspection of the teeth. In the case of new entrants there is a second visit made after the return to school from the summer holidays, to inspect and select for treatment those children in need of attention. The figures given for children needing treatment is mainly work to be done on the permanent series of teeth, and it is therefore not a true figure for the full number of children who do need some form of treatment, which may be of a minor degree of decay in the temporary dentition. The urgency of the work and the number of children in need of attention to the second dentition is so great, that the efforts of the dentist is mostly taken up with treatment of the permanent series.

The number of children of all ages now requiring Orthodontic treatment is increasing, and the service of a specialist in this form of treatment is necessary. The number of children who are at present receiving treatment has increased to a great extent over other years. The time that has to be given to these cases interferes in no small measure with the progress and number of children in need of conservative treatment of the permanent and temporary teeth. It is estimated that five per cent. of the school children in Ealing require Orthodontic treatment of a minor or major degree. This figure is also the same for the rest of England and Wales.

The work was carried out at the five Health Centres by the services of three full time dentists. The third dentist did not commence her duties until the beginning of March. It was possible to complete the treatment of the remaining number of evacuees, who were delayed in their return to the Borough; therefore it is satisfactory to know that the dental scheme is returning to normal, and the figures which follow will be proof of this statement. The number of children inspected by the dentists amounted to 19,823 and the number found to require treatment totalled 8,905. The number actually treated amounted to 5,920. The number of casuals or specials inspected and treated totalled 422. This figure is included in the number actually treated.

The various forms of treatment carried out were as follows : The number of permanent teeth filled totalled 5,024. The total number of fillings inserted in the permanent teeth amounted to 5,411.

The two main types of fillings used in restoring permanent teeth are Silver Amalgam and Porcelain. The base of the cavity is lined with Oxyphosphate Cement and Zinc Oxide.

The division of the number of permanent fillings—5,024 into the respective material used is as follows : 4,814 permanent posterior teeth were restored with Silver Amalgam and 210 Anterior permanent teeth were restored with Porcelain Cement. The number of permanent teeth filled for the year was greater by 1,274 to that obtained for the preceding year.

The number of temporary teeth filled showed an increase also to that of the previous year. The number actually filled reached 381 against 26.

The figures for extraction are higher in both series of Dentition. The larger number of children treated is accountable for this increase.

The number of permanent teeth removed for extreme forms of decay amounted to 1,191, this figure being greater by 385 over the preceding year ; also 155 sound teeth were removed for regulation purposes, making a total of 1,346 permanent extractions.

The number of temporary teeth removed amounted to 6,525. This figure also is greater by 354 over that of the preceding year.

The ratio of permanent fillings to permanent extractions of decayed teeth is 4.1 approximately. In the coming year the ratio between these figures will be greater, as the acceptance rate is increasing.

The above figures are for work carried out in the most important branch of school dentistry, namely, fillings and extractions. There are, however, other forms of treatment, and the next in importance is that carried out on the regulation of abnormal and misplaced teeth and irregular relationship of the jaws. The number of new cases fitted with Orthodontic Appliances for this form of work totalled 183. The children who were in the greatest need of treatment were supplied with the appliances. The number of children who had Orthodontic treatment completed during the year totalled 25. The number of visits for both old and new cases attending for adjustments totalled 1,708. The increase in the number of appliances fitted this year to that of the previous year totalled 128, an increase of over 300%.

Other minor forms of treatment were also carried out. For instance, 185 children had their teeth scaled and polished. Forty children had various forms of Gum Infections. For this number of children 320 visits were required to cure the condition. The number of temporary teeth treated with Silver Nitrate totalled 1,000 ; and this figure, added to the temporary teeth that had fillings inserted in them, make a total of 1,381 teeth saved. Dressings of Oxide were also inserted in painful temporary and permanent teeth : the number of these dressings totalled 527 separate teeth.

The remaining figures for the statistical report are as follows : The number of sessions devoted to inspection at the schools totalled 120 against 106 in the preceding year. The total number of sessions given to treatment amounted to 1,434 ; this figure is greater by 607 over that given for the previous year, the increase being due to the fact that, the services of a third full time dentist were of material benefit throughout the greater part of the year.

The number of sessions given to the administration of gas totalled 220, and the number of children who had gas administered to them amounted to 1,636, this figure being smaller to that of the previous year where 2,035 administrations were given by the Doctors. In addition to the above number of gas administrations, a number of local injections were performed on both temporary and permanent teeth in suitable cases. The total number of injections amounted to 1,581.

The total number of attendances made by the children to the centres for all the treatment completed amounted to 10,832. This number of visits averages approximately two visits per child treated.

DEFECTIVE SPEECH.—Treatment was given during the year at the following Health Centres :

Mattock Lane H.C.	} Twice weekly
Perivale H.C.	...	...	...
Cherington House	...	...	...
Ravenor Park	...	...	...
Greenford Green H.C.	} Once a week
Oldfields School	...	...	...

The following children received treatment :

Stammerers	...	...	...	...	47
Speech Defects	...	...	...	...	59
Cleft Palates	...	...	...	...	5
Others	...	...	...	...	4
Total	...	...	...	...	<u>117</u>

Attendance for treatment was good except for some absences due to bad colds and the usual illnesses.

During the year 30 school visits were made and 28 parents were interviewed. The number of new patients treated totalled 33.

Twenty-three patients were examined by Assistant Medical Officers and discharged. Visits to schools were found to be of great value to the Speech Therapist, as co-operation of the school staff is an essential factor in the treatment of Speech Defects. A noticeable improvement in nearly every case treated was observed, particularly where parents were co-operative.

CHILD GUIDANCE CENTRE.

The report of Dr. Portia Holman, the Psychiatrist, is as follows :—

This year is the first in which the Borough had not only a policy for a Child Guidance Service but also a Child Guidance Centre. On the analysis of previous work it was decided to appoint a full-time Educational Psychologist to the Education Committee to help the schools with the problems of classification and of special provision for children of less than normal promise.

In intention, and in practice, the Educational Psychologist has seen all cases presenting any sort of problem in the schools (or brought to the notice of school teacher or doctor), and has been responsible for passing on those needing Child Guidance services to the Centre.

The Educational Psychologist has seen about 450 cases of whom she has referred about one third to the Centre for advice and treatment.

This accounts for a fall in the total number of cases referred to the Child Guidance Centre this year. It will be remembered, however, that last year 26 cases were withdrawn after referral, and 55 were considered to be "educational" rather than Child Guidance cases. In addition, 90 were discharged after advice from the Psychologist to parents and school. Consequently, if we compare cases of the same type in 1945 and 1946, the figures are : 1945—127 cases ; 1946—141 cases (146 minus 5 withdrawn before investigation). The figures are therefore of roughly the same magnitude.

Table I. Analysis of Work.

During the year 146 new cases were referred, and 17 were on the waiting list from 1945. Of these 163 cases, 48 had not been seen at the end of the year. Of the remaining 115, 5 were withdrawn, 27 were discussed by the team and advised by the Psychiatric Social Worker, 6 were referred to the Educational Psychologist for advice, or some form of remedial teaching (these 6 were referred to the Centre before the Educational Psychologist's appointment) and 77 were seen by the Psychiatrist, as in need of the full services of the Centre. Of these 22 were discharged after diagnosis and advice, 15 were put down for treatment, 8 were sent for special medical investigations, and 19 formed the objects of special recommendations (see Table V) for some change in their environment.

Of the cases given treatment, 13 were carried over from 1945, and 14 were taken on in 1946. Of these 27 cases, 10 were discharged, 5 broke off treatment before we wished to close the case—in 2

cases because the patients themselves, both adolescent girls, did not wish to continue further—in one because the mother was unco-operative, and in 2 because the patients left the district. 12 cases were still under treatment at the end of the year.

Centre Staff.

The appointments foreshadowed at the end of 1945 were made when the Uxbridge Road premises were opened in February, 1946. The Centre now has :

Psychiatrist	... ..	2 2-hourly sessions per week
Play-Therapist	... ..	5 sessions per week.
Psychiatric Social Worker		Full-time.

It also has the invaluable assistance of the Educational Psychologist, Miss Lewis.

As pointed out in the previous report, the Centre is now equipped to deal with about 100 cases per annum. (The number of cases seen in the Centre slightly under-estimates the extent of the work, a good deal of which, especially the Psychiatric Social Worker's, is advisory, and often of value to cases who do not actually get referred to the Centre). It can be supposed that the Centre will have at least 150 cases per annum to deal with, or even a larger number in future years. Although 450 cases is about the maximum number which one Psychologist can see in the year, in the Educational Psychologist's first year there has been a special emphasis on the ascertainment of backwardness. In the future, therefore, a higher proportion of those seen by her may be referred to the Centre.

At present treatment interviews can be provided for 13 or 14 children each week, with the result that 27 children can be treated in the year. (The average case making about 25 attendances).

Table II. Symptoms.

Owing to the screening done by the Educational Psychologist the number of those referred to the Centre for backwardness is only half as great as last year. 8 children with I.Q.'s below 70 were referred, and 27 with I.Q.'s below 85, *i.e.*, educationally subnormal. This is accounted for by the fact that many children referred present more than one symptom, and our advice is often sought on a behaviour problem in a child who is also of less than average intelligence.

Delinquency, including stealing and lying, now heads the list of the remaining symptoms, although the incidence does not differ appreciably from last year. "Difficulty in management at home," though less high, is still a serious problem. These problems indicate the need for discovering such children earlier.

The other symptoms occur in much the same proportions as in other years, except that there is an increase in "Nervous Disorders"—conditions such as fears and anxiety, solitariness and unsociability, depression, etc., which are very apt to pass unnoticed, although they are among the more serious symptoms of psychological disturbance in children.

Table III. Intelligence Levels.

The average I.Q. is considerably higher than last year, though still significantly (in the statistical sense) lower than the average for the school population, *i.e.*, the majority of the children seen had less than average intelligence. This tendency to low intelligence is correlated with the symptoms that predominate, *i.e.*, "behaviour difficulties."

Table IV. Special Recommendations.

Of the 11 children in the first two categories here, 2 were admitted to suitable boarding schools. The two recommendations for admission to Approved Schools were on cases already before the Juvenile Court, and in one of these cases alternative placement was found. The recommendations involving the other 6 children were put into effect. It will therefore be seen that 9 children are still remaining in unsatisfactory environmental conditions, and in two of these cases the parents withdrew their consent to the plans suggested because of the failure to implement them while the matter still seemed urgent to the home.

Conclusion.

This report is of the work of the Child Guidance Centre in its first year in its own premises, and the first serious attempt to assess the needs of the school population for psychiatric help. It has become clear as the work has proceeded that very great advantages are attached to the method adopted in Ealing of appointing a full time Psychologist to work in the schools and in close co-operation with the Child Guidance Team. The present analysis of the work of the Centre shows also, however, that the character of the problems in the Centre will be determined to a large extent by the direction of the Educational Psychologist's work. Her first year has been particularly directed to problems of backwardness, and while this has relieved the Centre of problems of "mere" backwardness with which it is powerless to deal, it has brought to attention an unusually high proportion of difficulties arising out of backwardness. This is of general interest, and of great importance. The average age of the children referred is 9 years, *i.e.*, 50 per cent. are not seen until they are 9 or over, by which time they have had four years of school life. Failure to deal with the educational difficulties of the less gifted children in the first years

of school means that they have on the average four years in which to be bored and discouraged, and to seek for outlets along anti-social paths. Many of these children are incapable of profiting by psycho-therapy. If, by the age of nine, they are set towards delinquency, it is difficult and expensive to reclaim them. The restoration of these children to an appropriate social outlook may take years. Most of them present problems which need never have arisen if their limitations had been ascertained and their environment adapted to them at a much earlier age. The importance of early ascertainment and the provision of suitable education cannot be overstressed.

TABLE I.
Analysis of Work.

Total number of cases referred to the Centre in 1946	...	...	146	
Total number of cases brought forward from 1945 waiting list			17	
				163
Total number of new cases dealt with by Psychiatrist :				
Boys	...	...	48	
Girls	...	...	29	
				77
Number of cases referred to Educational Psychologist on her appointment	...	...	6	
Cases withdrawn before investigation	...	...	5	
Cases investigated by Psychiatric Social Worker and advised by her	...	...	27	
Remaining on waiting list for interview at the Centre	...	...	48	
				163
Analysis of Cases seen at the Centre.				
Total number of new cases seen by the Psychiatrist	...	...		77
A. Diagnosis and advice	...	...	22	
Special recommendations	...	...	19	
Further hospital investigation	...	...	8	
B. Treatment :				
(1) Psychiatrist	...	...	3	
(2) Play Therapist	...	...	8	
(3) Remedial teaching	...	...	4	
Failed to attend for treatment after diagnosis	...	...	2	
On waiting list for treatment in 1947	...	...	11	
				77
Analysis of Treatment Cases.				
Number of cases carried over from 1945	...	...	13	
Number of cases taken on in 1946...	...	...	14	
				27
Discharged, much improved	...	...	8	
Discharged, improved	...	...	2	
Treatment broken off	...	...	5	
				15
Number of cases current on December 31st, 1945	...	...		12
				27

TABLE II

Table of Symptoms.

(Including those for which the children were referred and others which were discovered at the diagnostic interview—146 children).

1. Nervous Disorders.

Fears and anxiety	...	...	...	...	...	16
Solitariness and unsociability	...	...	...	...	...	4
Depression and lethargy	...	...	...	...	...	9
						<hr/> 29

2. Habit Disorders and Physical Symptoms.

Enuresis	...	...	...	...	...	...	...	20
Habit spasms	...	...	...	...	...	...	...	8
Speech disorders	...	...	...	...	...	...	...	6
Asthma	...	...	...	...	...	...	...	3
Sleep disorders	...	...	...	...	...	...	...	2
Food fads	...	...	...	...	...	...	...	2
Hysterical symptoms	...	...	...	...	...	...	...	2
Epilepsy	...	...	...	...	...	...	...	1
Faecal incontinence	...	...	...	...	...	...	...	1
								45

3. Behaviour Disorders.

Delinquency, including stealing and lying	...	...	...	22
Difficult to manage at home	...	...	...	15
Sex difficulties	...	...	...	12
Difficult to manage in school	...	...	...	11
Aggression	...	...	...	8
Truancy and wandering	...	...	...	7
Temper tantrums	...	...	...	3

4. Educational Difficulties.

"Backward," including 8 below I.Q. 70	...	...	...	37
School failure...	...	...	...	9
				<hr/> 46
				<hr/> 198

TABLE III.

Analysis of Intelligence of 142 Children.

50-59	60-69	70-79	80-89	90-99	100-109	110-119
1	7	10	29	29	23	19
	120-129	130-139	140-149	150-159		
	15	3	4	1		
	Average I.Q.				97	

TABLE IV

Analysis of Ages of Children Referred.

3-4	4-5	5-6	6-7	7-8	8-9	9-10
1	6	8	18	14	13	17
10-11	11-12	12-13	13-14	14-15	15-16	
10	17	16	18	4	4	
Average age 9.						

TABLE V.

Special Recommendations. 19 Children.

Number of children recommended for schools or hostels for maladjusted children	9
Number of children recommended for ordinary boarding schools ...	2
Number of children recommended for approved schools ...	2
Number of children recommended for school for educationally sub-normal children	2
Number of children recommended for change in day school ...	1
Child recommended for in-patient treatment Maudsley Hospital ...	1
Child to return to wartime billet	1
Child boarded in this district to return home	1
	<hr/> 19

ORTHOPAEDIC TREATMENT.—The Orthopaedic Surgeon attended the Mattock Lane Health Centre on one session a month during the early part of the year and twice monthly during the latter part. The Physiotherapist attended five sessions in each week.

The work of the Orthopaedic Clinic during the year may be summarised as follows :

Orthopaedic Clinic.

	<i>School children</i>	<i>Children under five</i>	<i>Total</i>
Attendances by Surgeon	—	—	19
Number of children seen for first time...	159	125	284
Total number of children examined ...	574	352	926
Attendances by Physiotherapist	—	—	228
Number of cases treated	101	39	140
Number of attendances by children ...	1,670	449	2,119
Children admitted to hospital for special treatment	12	—	12
Children supplied with special boots or surgical appliances	39	29	68

INFECTIOUS DISEASE.

The returns forwarded each week by the Heads of schools giving particulars of all new cases of infectious disease coming to their knowledge included 417 cases of measles, 226 of whooping cough, 381 of chicken pox and 659 of mumps.

Children to the number of 333 were excluded from school for the following conditions :

Impetigo	...	...	...	...	78
Ringworm of body	...	...	...	...	1
Scabies	...	...	...	...	239
Other skin diseases	...	...	...	...	2
Ringworm of head	...	...	...	...	6
Conjunctivitis	...	...	...	...	6
Blepharitis	...	...	...	...	1
					<hr/> 333

Diphtheria Immunization.

Immunization of school and pre-school children was continued at the Health Centres.

The following table shows the amount of immunization work carried out in 1946 :

Schick tests	...	...	...	...	2
School children immunized	...	...	...	...	255
Children under 5 years immunized	...	...	...	...	2,271
Children given reinforcing injections	...	...	...	...	558

The total number of children of all ages immunized at the Health Centres and in the Schools in 1946 was thus 3,084.

MILK AND MEALS FOR SCHOOL CHILDREN.

One third of a pint of milk was supplied to children attending school at the cost of a halfpenny or free of charge according to the level of the family income until August of this year, when it was provided for all school children free of charge.

School meals are provided at a cost to the parents of 6d. or at half price or free of charge according to the level of the family income.

The following figures supplied by the Borough Education Officer show the number of children who were receiving meals in school on a day in October :

Number of children on roll	...	...	...	...	19,715
Number of children receiving free meals	...	...	...	...	395
Number of children paying 6d.	...	...	...	...	8,664
Number of children paying 3d.	...	...	...	...	74

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The number of children examined in connection with their employment out of school hours was 85, and of this number 6 were found unfit for employment. The nature of the employment of those considered fit was :

Boys.	Errand boy...	...	...	...	39
	Milk round ...	...	...	...	17
	Newspaper round ...	...	...	...	15
	Baker's round	...	...	...	3
Girls.	Shop assistants	...	...	...	3
	Others	...	...	...	2
					—
					79
					==

These children are submitted to re-examination when routine medical inspection is being carried out in the school and if it is found that employment is detrimental to their health, sanction for employment out of school hours is withdrawn. At routine inspection 44 children were found who had not obtained the necessary permission to engage in employment ; 1 of these was found to be unfit for employment and 3 were under age.

MISCELLANEOUS.

It is usual to group under this heading the medical inspections which are made prior to their appointment on the teaching staff of the Education Committee and of other candidates on appointment to various branches of the Council's technical and clerical staff and of manual workers. All these examinations are carried out by the school medical staff assisted by the School Nurses. During the year 100 teachers and 176 other candidates were medically examined, making a total of 276.

STATISTICAL TABLES.

The Tables required by the Ministry of Education are as follows :

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A. Routine Medical Inspections.

Number of Inspections :							
Entrants	...	...	...	...	...	...	2,185
Second Age Group	...	...	...	...	...	...	1,114
Third Age Group	...	...	...	...	...	...	2,439
Total							5,738
Number of other Routine Inspections							
Grand Total							5,738

B. Other Inspections.

Number of Special Inspections and Re-Inspections	...	9,015
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TABLE II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE-GROUPS.

Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly sub-normal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
5,738	598	10.4	4,963	86.5	177	3.1	—	—

TABLE III.

Group I.—Treatment of Minor Ailments
(excluding Uncleanliness).

Total number of Defects treated or under treatment during
the year under the Authority's Scheme... .. 2,519

Group II.—Treatment of Defective Vision and Squint.

	Under the Authority's Scheme
Errors of Refraction (including Squint)	1,496
Other defect or disease of the eyes (excluding those recorded in Group I)	35
Total ...	<u>1,531</u>

Number of children for whom spectacles were

(a) Prescribed	1,103
(b) Obtained	1,139

Group III.—Treatment of Defects of Nose and Throat.

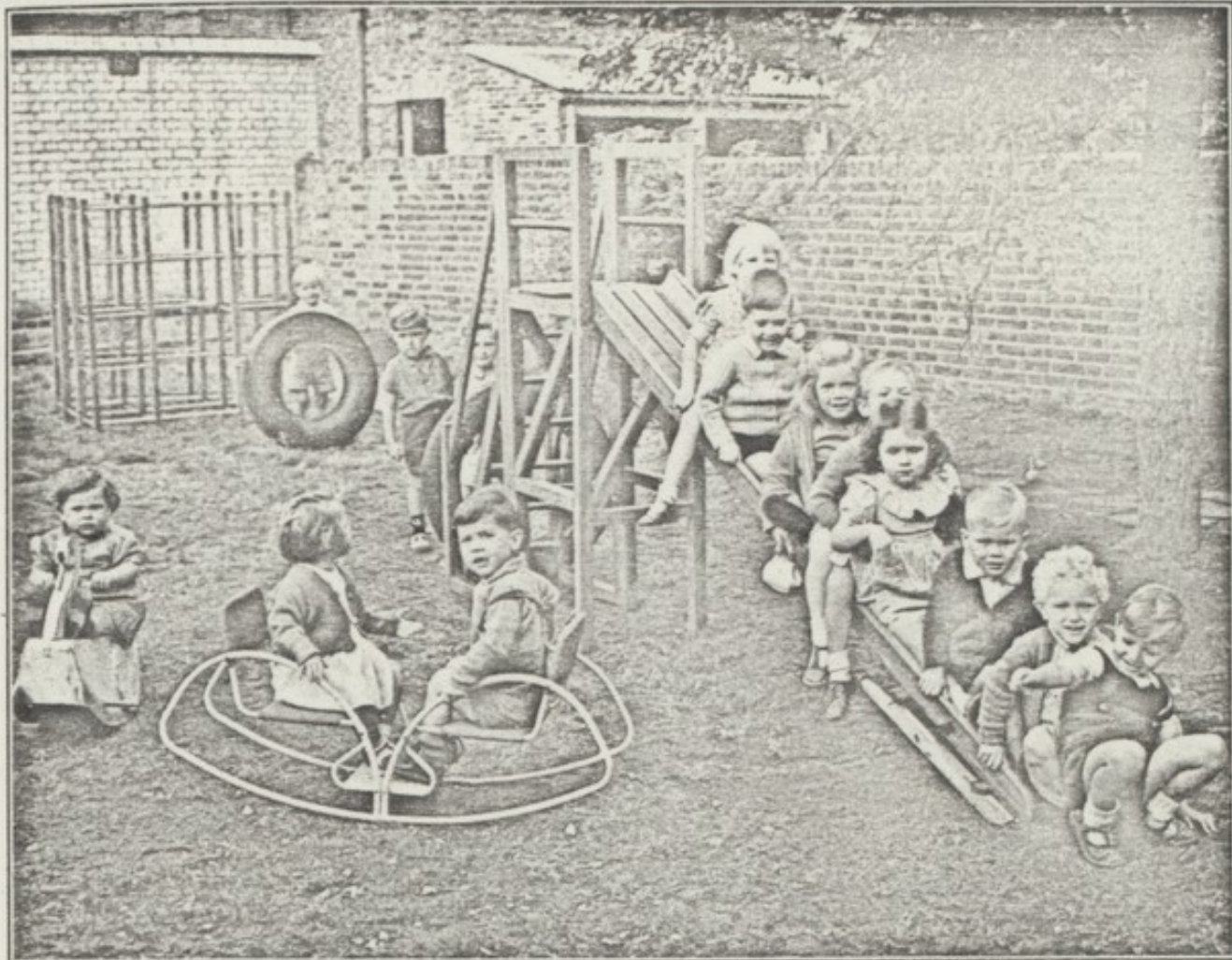
Received Operative Treatment	76
Received other forms of treatment	—
Total number treated	<u>76</u>

TABLE IV.
DENTAL INSPECTION AND TREATMENT.

(1) Number of children inspected by the Dental Surgeons :						
(a) Routine age-groups	...	...	...	...	...	19,401
(b) Specials	...	...	...	...	...	422
(c) Total (Routine and Specials)	...	...	...	...	...	19,823
(2) Number found to require treatment	...	...	...	...	...	8,905
(3) Number actually treated	...	...	...	...	...	5,920
(4) Attendances made by children for treatment	...	...	...	...	...	10,832
(5) Half-days devoted to :—						
Inspection	...	...	...	...	120	
Treatment	...	...	...	...	1,434	
					—	Total 1,554
(6) Fillings :—						
Permanent Teeth	...	...	...	...	5,411	
Temporary Teeth	...	...	...	...	381	
					—	Total 5,792
(7) Extractions :—						
Permanent Teeth	...	...	...	...	1,191	
Temporary Teeth	...	...	...	...	6,525	
					—	Total 7,716
(8) Administration of general anaesthetics for extractions	...	...	...	...	...	1,636
(9) Other Operations :—						
Permanent Teeth	...	...	...	...	2,032	
Temporary Teeth	...	...	...	...	—
					—	Total 2,032

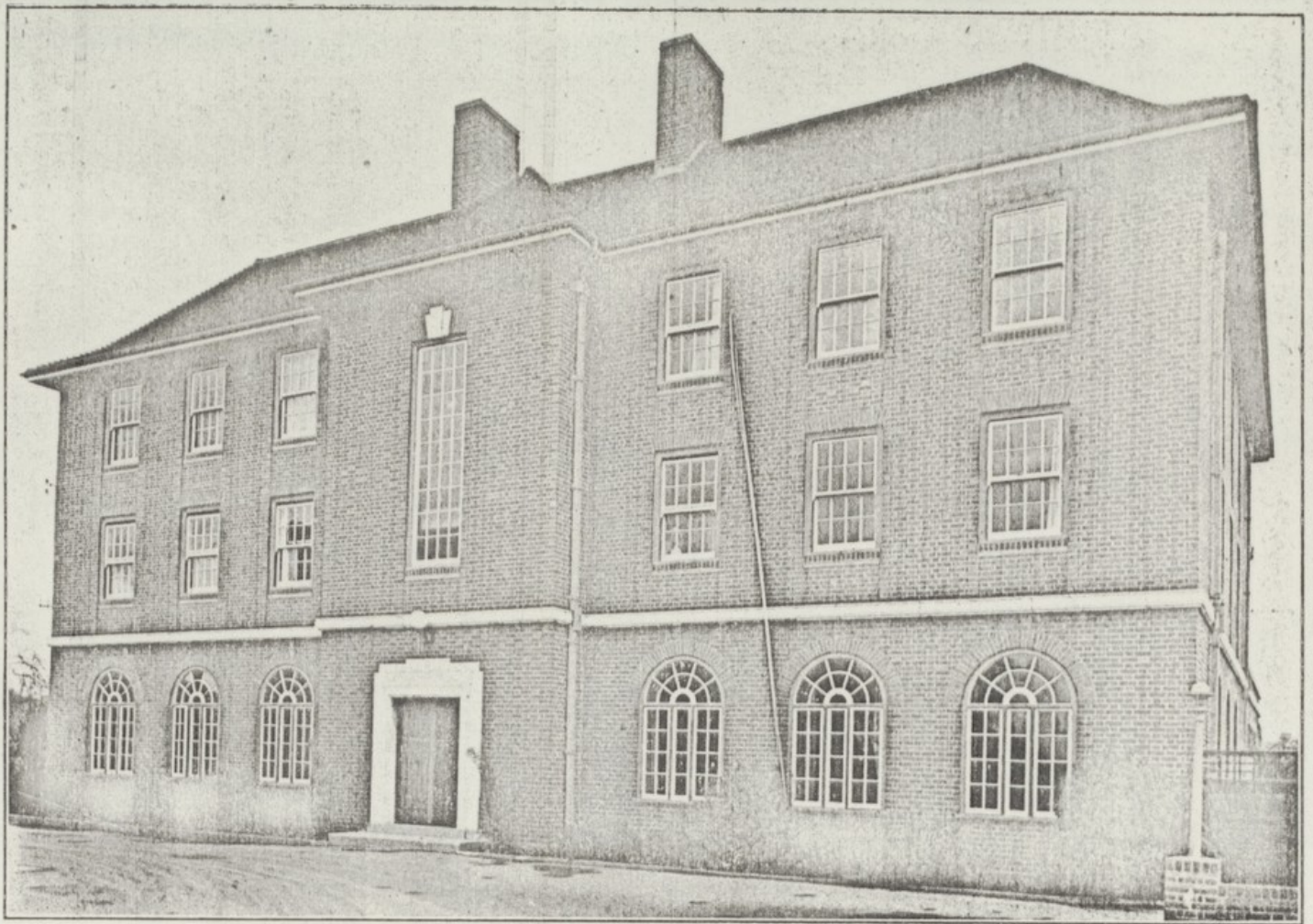
TABLE V.
VERMINOUS CONDITIONS.

(1) Total number of examinations of children in the Schools by School Nurses or other authorised persons	...	...	...	52,393
(2) Number of INDIVIDUAL children found unclean	...	...	...	1,090



LIFE IN A DAY NURSERY

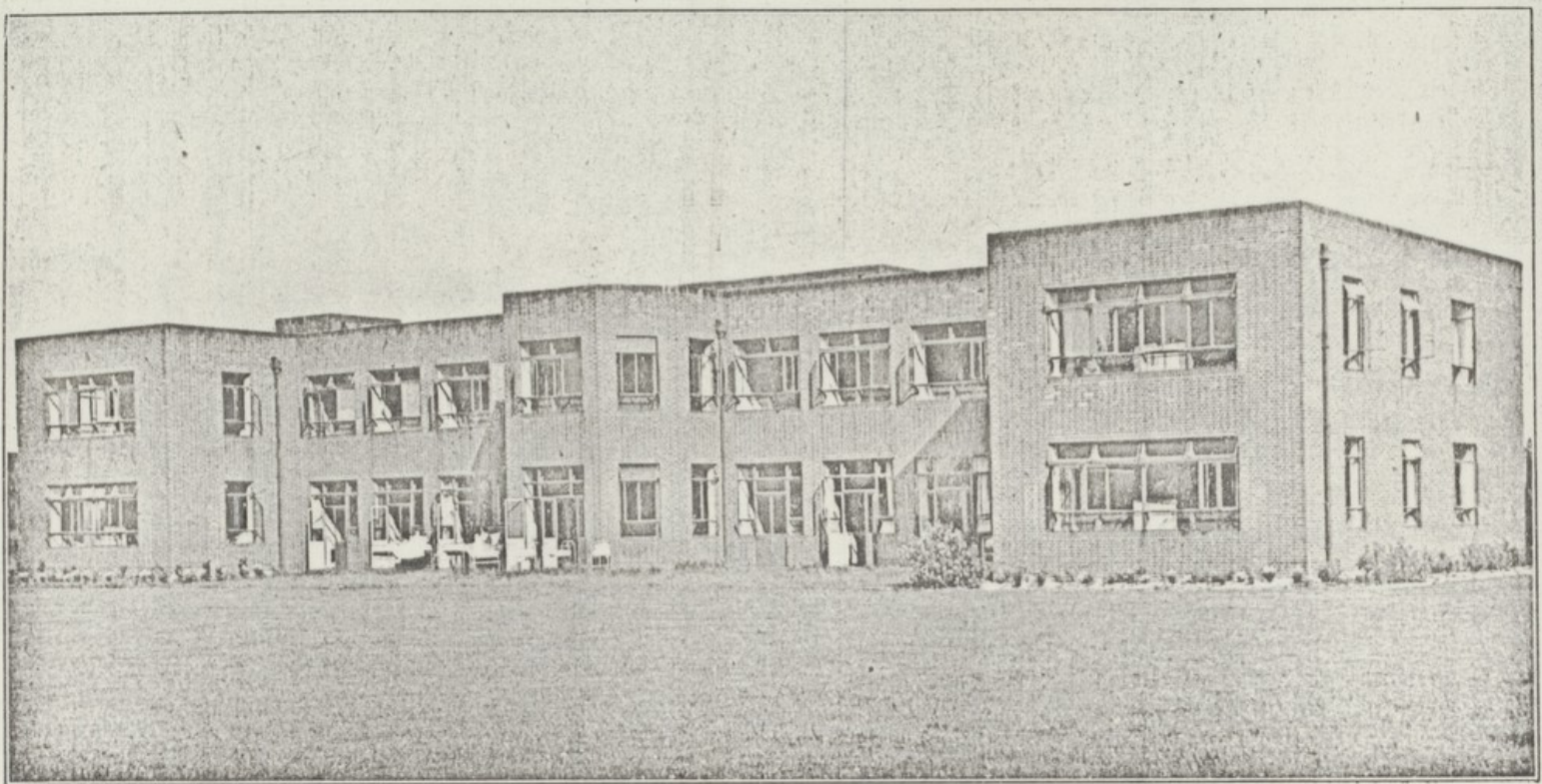




CLAYPONDS ISOLATION HOSPITAL—NURSES' HOME



CLAYPONDS ISOLATION HOSPITAL—CUBICLE BLOCK



PERIVALE MATERNITY HOSPITAL—WARD BLOCK

**Ealing and Brentford
and Chiswick
Hospitals Committee.**

CLAYPONDS ISOLATION HOSPITAL.

PERIVALE MATERNITY HOSPITAL.

ANNUAL REPORT
OF THE
MEDICAL SUPERINTENDENT

FOR THE YEAR ENDING

31st MARCH, 1947.

REGINALD LEADER, M.R.C.S., L.R.C.P., D.P.H.,

Medical Superintendent.

EALING AND BRENTFORD & CHISWICK
HOSPITALS COMMITTEE.

TOWN HALL,

EALING, W.5.

15th June, 1947.

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit to you the Annual Report on the two hospitals for the year 1946-47.

The national birth-rate continues to rise and the number of births in your district therefore continues to increase, and this is well reflected in the statistics of the maternity hospital. Furthermore, the Ministry of Health in May of this year, in order to ensure the maximum useage of beds, advised that consequent on a recent resolution of the Central Midwives Board, all patients could now be discharged from maternity units on the tenth day instead of on the fourteenth day.

This has naturally resulted in an increased number of patients being admitted, and during the period under review a total of 1,191 patients have secured admission to Perivale Hospital, an increase of 25% as compared with the previous twelve months and an all time record figure. Such a list of cases is of course exceptional and could never have been contemplated for a hospital of 40 beds, but it does emphasise the demand for institutional care of maternity cases in the district.

The number of emergency cases admitted has also increased and the fact that in 21 cases both the mother and baby were well on discharge from hospital, and in the remaining instance the pregnancy proceeded normally after treatment in the hospital, reflects great credit on the care and skill of the medical and nursing staff.

A perusal of the case histories illustrates that most of the known complications of labour and the puerperium have been encountered during the year, with a nil maternal mortality, and it is pleasing to note that it has also been possible to admit more ante-natal cases for treatment, 130 patients as compared with 87 patients during 1945-46. This last is preventive work of the highest order and enables many conditions to resolve before the labour commences.

The number of patients treated at the Clayponds Hospital while well within the available accommodation, has actually increased this year by 30%.

Of the 381 patients admitted Scarlet Fever again claims the highest incidence with 128 cases, together with a further 3 cases of Streptococcal Sore Throat.

This year it was found possible to admit some 76 cases of measles during the epidemic period, no less than 43 of whom had medical complications. There were two fatal cases, one from septicaemia and the second from bronchial pneumonia and gastroenteritis.

Fifteen children suffering severely from Whooping Cough were also admitted and one child aged 14 months and a second aged 4½ months both died from broncho-pneumonia. These cases illustrated the dangerous nature of these last two diseases in young children, and there is no doubt that more cases must receive hospitalisation in the future.

Only 13 patients suffering from Diphtheria were treated, all making good recoveries, eloquent testimony to the present schemes for immunisation against diphtheria in the boroughs.

Generally speaking, a wider variety of cases has been admitted during the last year, and in my opinion this is a policy to be encouraged and developed. In this direction may lie the future of the infectious disease hospital, and a very useful contribution to the social problems of the district can thereby be made under the new regime.

I wish to take this opportunity of recording my thanks to the members of the Committee and to the staffs of the institutions for the very willing support they have given me in my onerous task of assuming control of the administration following the retirement in November, 1946, of Dr. Thomas Orr.

I am, Ladies and Gentlemen,

Your obedient Servant,

REGINALD LEADER,

Medical Superintendent.

CLAYPONDS ISOLATION HOSPITAL.

The total number of patients admitted to Hospital in the year 1946-47 was 381. The highest number of patients in hospital on any day was 40 on 1st June, 1946, and the lowest was 8 on 10th September, 1946. The average daily number was 23.1.

The following table indicates the number of cases of each disease admitted during the year.

Disease	Remaining in Hospital, 31st March, 1946	Admitted during the year	Discharged during the year	Died during the year	Remaining in Hospital 31st March, 1947
Diphtheria	6	13	19	—	—
Diphtheria Carriers ...	—	3	3	—	—
Scarlet Fever	8	126	128	1	5
Measles	1	86	75	2	10
Whooping Cough	—	15	11	2	2
Tonsillitis	—	24	24	—	—
Streptococcal Sore Throat...	—	3	3	—	—
Vincent's Angina	—	4	3	—	1
Erysipelas	—	6	6	—	—
Gastro-Enteritis	—	13	12	—	1
Dysentery (Sonne)... ..	—	3	3	—	—
Meningitis and Meningo- coccal Infections	—	6	2	2	2
Chicken Pox	—	5	5	—	—
Mumps	—	4	3	—	1
Pemphigus Neonatorum ...	—	12	12	—	—
Ophthalmia Neonatorum ...	—	1	1	—	—
Nursing Mothers	—	14	13	—	1
Complications of the Puer- perium	—	5	4	—	1
Pneumonia	—	4	4	—	—
Acute Bronchitis	—	4	4	—	—
Acute Poliomyelitis	1	2	3	—	—
Rubella	—	2	2	—	—
Toxic Erythema	—	2	2	—	—
Impetigo	—	2	2	—	—
Influenza	—	2	2	—	—
Intussusception	—	2	2	—	—
Enteritis	—	1	1	—	—
Infectious Mononucleosis ...	—	1	1	—	—
Peritonsillar abscess	—	1	1	—	—
Pharyngitis	—	1	1	—	—
Laryngitis	—	1	1	—	—
Ulcerative Stomatitis	—	1	1	—	—
Coryza	—	1	1	—	—
Pleurisy	—	1	1	—	—
Rheumatic Fever	—	1	1	—	—
Cervical Adenitis	—	1	1	—	—
Incomplete Abortion	—	1	1	—	—
Dermatitis	—	1	1	—	—
Eczema	—	1	1	—	—
Pelvic Tumour	—	1	1	—	—
Pupura Simplex	—	1	1	—	—
Papular-Urticaria	—	1	1	—	—
Sunstroke	—	1	1	—	—
Pyrexia of Unknown Origin	—	1	1	—	—

DIPHTHERIA. There were 13 cases of diphtheria admitted : 11 from Ealing and 2 from Brentford & Chiswick. The age distribution of these was as follows :

Under 5	5-10	11-15	16-20	21-25	26-30
0	4	3	2	1	0
		31-40	Over 41		
		2	0		

This low incidence of diphtheria shows a well marked decline on that of previous years, which is part of the continuous reduction in the incidence of the disease since the introduction of diphtheria immunization. All cases were mild but two patients who persistently remained carriers had to have their tonsils removed. The average period in hospital for all cases was 46 days.

In addition to the above cases three admissions were diagnosed as diphtheria carriers. The following cases were admitted as suffering from diphtheria and the diagnosis altered as shown.

Tonsillitis	...	...	...	...	18
Vincent's Angina	...	...	...	...	3
Cervical Adenitis	...	...	...	...	1
Bronchitis	...	...	...	...	1
Laryngitis	...	...	...	...	1
Peritonsillar Abscess...	...	...	...	...	1
Infectious Mononucleosis	...	...	...	...	1
Nasopharyngitis	...	...	...	...	1
Streptococcal Sore Throat	...	...	...	...	3
Ulcerative Stomatitis	...	...	...	...	1

SCARLET FEVER.—Scarlet Fever admissions numbered 126 (87 from Ealing and 39 from Brentford & Chiswick).

The age distribution of the cases was as follows :

Under 1	1-2	3-5	6-10	11-15	16-25
1	7	33	57	20	4
		26-45	Over 45		
		4	0		

The following complications were encountered either on admission or during the course of treatment.

Otitis Media	...	...	...	9 cases
Cervical Adenitis	...	...	...	10 "
Rheumatism	...	...	...	3 "
Paronychia	...	...	...	3 "
Sinusitis	...	...	...	2 "
Secondary Tonsillitis	...	...	...	2 "
Bronchitis	...	...	...	2 "
Furunculosis	...	...	...	2 "
Myocarditis	...	...	...	1 case
Appendicitis	...	...	...	1 "
Rhinitis	...	...	...	1 "
Herpes Zoster	...	...	...	1 "
Glandular Abscess	...	...	...	1 "
Impetigo	...	...	...	1 "
Conjunctivitis	...	...	...	1 "
Streptococcal Fissure	...	...	...	1 "

The majority of the complications were of a mild type. Thus 4 out of the 9 cases of otitis media subsided without otorrhoea and only one case of cervical adenitis developed a glandular abscess. There was, however, one fatal case of scarletinal myocarditis in a 5 year old child in which death from acute heart failure occurred within 12 hours of the onset of the symptoms on the fifth day after admission. This must have been an instance of the now rare hypertoxic variety of the disease, though previous signs and symptoms had not suggested that such was the case.

The average period in hospital of scarlet fever cases was 28 days. Two cases of scarlet fever were cross-infected with chicken-pox while a third case was admitted while incubating chickenpox developing the disease 11 days after admission. One of the scarlet fever cases was due to an infected burn. In the following cases admitted as suffering from scarlet fever the diagnosis had to be altered as shown.

Tonsillitis	...	...	...	...	...	3
Rubella	...	...	...	...	...	2
Toxic Erythema	...	...	...	...	...	1
Purpura Simplex	...	...	...	...	...	1
Papular Urticaria	...	...	...	...	...	1
Measles	...	...	...	...	...	1
Eczema	...	...	...	...	...	1
Dermatitis	...	...	...	...	...	1
Pharyngitis	...	...	...	...	...	1
Lobar Pneumonia	...	...	...	...	...	1

MEASLES.—There was a total of 86 cases of measles admitted during the year. The high proportion of measles admissions was due to the occurrence of an epidemic of this disease during the last four months of the year which necessitated reserving a special ward for measles patients. 54 of these admissions were from Ealing and 32 from Brentford & Chiswick. The age distribution of measles cases was as follows :

Under 3	3-5	Over 5
46	21	19

The complications encountered, most of which were present on admission, were as follows :

Broncho Pneumonia...	...	...	...	...	21
Otitis Media	...	...	...	...	5
Bronchitis	...	...	...	...	4
Acute Mastoiditis	...	...	...	...	2
Gastro Enteritis	...	...	...	...	2
Scarlet Fever and Septicaemia	...	...	...	...	1
Cellulitis	...	...	...	...	1
Tonsillitis	...	...	...	...	1
Blepharitis	...	...	...	...	1
Subcutaneous Abscess	...	...	...	...	1
Pharyngitis	...	...	...	...	1
Stomatitis	...	...	...	...	1
Conjunctivitis	...	...	...	...	1
Coryza	...	...	...	...	1

A high incidence of haemorrhagic rashes was also noted. It will be seen that the majority of cases admitted were young children in many of whom chest complications had already occurred. The high incidence and severity of complications—a common feature of widespread epidemics was probably accentuated this year due to the exceptionally cold weather experienced during the height of the epidemic. There were two fatal cases. One child aged four years died seven days after admission, death being considered due to streptococcal septicaemia. The other fatal case was that of a child of 15 months suffering on admission from broncho-pneumonia and gastro-enteritis.

Mastoidectomy had to be performed on the two children who developed acute mastoiditis. In one of these children there was a co-existing chickenpox infection.

The average period in hospital for all measles admissions was 18 days. In all cases except one admitted as measles the diagnosis was confirmed.

WHOOPIING COUGH. Of the 15 patients admitted suffering from whooping cough 12 were from Ealing and 3 from Brentford & Chiswick. Their age distribution was as follows:

Under 1 year	1-2	2-5	Over 5
7	3	4	1

The following complications were encountered:

Broncho-Pneumonia	6 cases	One case became cross-infected with chicken-pox
Convulsions	2 cases	
Bronchitis	4 cases	

Due to the high ratio of infants admitted this small total of whooping cough patients included a high proportion of seriously ill cases. There were two fatal cases. One child aged 14 months died from broncho-pneumonia 15 days after admission. The other fatality concerned a baby aged 4½ months admitted in a moribund condition suffering from broncho-pneumonia and convulsions. Death occurred 6 hours after admission.

In addition to the above confirmed cases, admissions for whooping cough included two cases of bronchitis and one of measles.

DIARRHOEAL DISEASES. Gastro-enteritis in infants constituted the most important disease of this group. Of the 13 cases of gastro-enteritis admitted 9 were under 12 months of age. No fatalities occurred in cases of primary gastro-enteritis although one baby was so ill that recovery seemed scarcely to be expected. All cases except one were admitted during the last five months of the year, a period during which diarrhoeal disorders appeared to be more prevalent.

The other diseases of this group treated consisted of three patients suffering from Sonne Dysentery and one adult suffering from enteritis. No case of typhoid or paratyphoid occurred.

In addition to the cases noted above two patients admitted as suffering from typhoid fever were diagnosed as measles and chicken-pox respectively while in the case of three patients admitted for dysentery two were found to be suffering from intussusception and one from pelvic tumour.

MENINGITIS AND MENINGOCOCCAL INFECTIONS. There were 6 admissions in this group. Of these four were clinical cases of meningitis. In two cases meningococci were isolated from the cerebro-spinal fluid, in the third a coliform organism, while in the remaining case, though probably meningococcal, no organism was isolated. In one case there was a co-existing haemorrhagic nephritis. All four cases recovered without sequelae.

There was one fatal case of meningococcal septicaemia. This was a boy of 9 years of age admitted on the eighth day of disease when suffering from advanced heart failure. Complications present included pericarditis, pneumonia, pleurisy and focal lesions of the brain and meninges. Treatment resulted in a temporary improvement but heart failure recurred and proved fatal. The remaining patient of this group, a child of 4 years, was admitted in a moribund condition and died within an hour of admission. The presence of meningitis was confirmed by post-mortem examination.

One case of each of the following diseases was also admitted as suffering from cerebrospinal meningitis, Lobar pneumonia, Broncho-pneumonia, Acute Bronchitis, Pleurisy, Tonsillitis, Influenza, Toxic Erythema and Sunstroke.

ERYSIPELAS. The six cases of erysipelas, mostly facial, all responded rapidly to treatment and do not merit special comment.

CHICKENPOX. The five cases of chickenpox listed are in addition to those already mentioned as associated with other infections. They were admitted either because other conditions requiring hospital treatment were present or suspected or because of lack of facilities for home nursing.

MUMPS. Two admissions for mumps were uncomplicated. The remaining two patients were suffering on admission from threatened abortion and acute appendicitis respectively.

ACUTE POLIOMYELITIS. Despite the fact that this disease was epidemic in other parts of the County only two cases were admitted. One of these was a mild type with minimum paralysis. In the other patient paralysis was extensive including partial respiratory paralysis. Unusual features were a normal cerebro-spinal fluid

and complete recovery from extensive muscular involvement. Two other patients admitted as suffering from poliomyelitis were diagnosed as rheumatic fever and influenza, while in a third case no ascertainable cause for pyrexia could be discovered.

COMPLICATIONS OF THE PUERPERIUM. No severe infection was encountered in this group of cases. Two cases of puerperal pyrexia had a mild degree of sapraemia while post partum haemorrhage, femoral thrombosis and anaemia and tonsillitis accounted respectively for the remaining three admissions.

INFECTIONS OF THE NEW-BORN. All twelve cases of pemphigus admitted were mild infections which completely recovered in periods of from 1—2 weeks. The ophthalmia case treated recovered without damage to the eyes.

CONSULTANT STAFF. The following Consultants were called in during the year :—

Mr. Miller, the Ear, Nose and Throat Specialist, performed mastoid operations in two cases of acute mastoiditis. He also removed tonsils in two convalescent diphtheria carriers.

Mr. Gordon Bryan, Surgeon, visited to see a case of intussusception, later successfully reduced at King Edward Memorial Hospital.

Miss F. Barry, Surgeon, performed appendicectomy in a case of acute appendicitis occurring in a tonsillitis patient.

Mr. Murray, Surgeon, performed appendicectomy in a case of acute appendicitis occurring in a scarlet fever patient. He also successfully treated expectantly a case of acute appendicitis in a patient suffering from mumps and saw a case of intussusception later successfully operated on at the Middlesex Hospital.

Mr. Rait Bell, Gynaecologist, visited two patients and performed curettage in a patient suffering from post-partum haemorrhage due to retained placental products.

Mr. Cholmeley, Orthopaedic Surgeon, visited to advise on the after treatment of a case of poliomyelitis.

Dr. Lewis, Anaesthetist, gave anaesthetics for the two mastoid operations, two appendicectomies, two tonsillectomies, and curettages already mentioned.

TONSILLECTOMY IN SCHOOL CHILDREN. Twenty-two sessions were held between April and July. 164 children had tonsils and adenoids removed. The Surgeon was Mr. Miller and the Anaesthetist Dr. Lewis.

ILLNESS OF STAFF. Only 7 members of the staff have been ill during the year suffering from :

Tonsillitis	...	...	...	...	1 case
Furunculosis	...	...	...	...	1 "
Chickenpox	...	...	...	...	1 "
Cervical Polypus	...	...	...	...	1 "
Appendicitis	...	...	...	...	1 "
Vincent's Angina	...	...	...	...	1 "
Trichomonas Infection	...	...	...	...	1 "

PERIVALE MATERNITY HOSPITAL.

During the year 1st April, 1946, to 31st March, 1947, 1191 patients were admitted to the hospital. These included 22 emergency cases.

<i>Month</i>	<i>Ealing</i>	<i>Brentford & Chiswick</i>	<i>Other Districts</i>	<i>Total</i>
April	60	24	—	84
May	66	27	—	93
June	70	18	—	88
July	65	31	—	96
August	73	32	—	105
September	74	34	—	108
October	85	24	—	109
November	62	23	—	85
December	77	28	—	105
January	82	27	—	109
February	77	35	—	112
March	69	28	—	97
	860	331	—	1,191

The greatest number of patients in hospital on any day was 62 on 1st March, 1947. The average period of stay was 11.764 days.

Emergency Cases.

The 22 emergency cases admitted were as follows :

1. Gravida 5, aged 37 years, admitted as a prolonged labour with uterine inertia. On admission she had fairly strong pains and a normal delivery followed. She had a retained placenta which was removed manually, and the mother's condition was good. Puerperium was uneventful and both mother and baby were satisfactory on discharge.

2. Gravida 4, aged 30 years, admitted for an extended breech with prolonged labour and a history of obstetric shock with her other babies. Normal breech delivery followed but patient had a post-partum haemorrhage with a retained placenta. Manual removal was performed and patient's general condition was fairly good. Both mother and baby were satisfactory on discharge.

3. A primipara, aged 32 years, a midwife's case, was admitted as a toxæmia of pregnancy. She had marked oedema of legs and ankles, no albuminuria but blood pressure was 160/90. She was 38 weeks pregnant. After one week of conservative treatment she complained of nausea and her oedema increased so a surgical induction was done. A normal delivery followed and both mother and baby were satisfactory on discharge.

4. Primipara, aged 28 years, admitted as an albuminuria, 36 weeks pregnant. Patient's general condition was good, blood pressure 120/80, no oedema. She was treated conservatively at first and a surgical induction was done 10 days later. Normal delivery followed and the puerperium was uneventful. Both mother and baby were well on discharge.

5. Gravida 3, aged 33 years, admitted as a pre-eclamptic toxæmia. She was 36 weeks pregnant, blood pressure 160/120, albuminuria with oedema of ankles and feet. Her two previous babies were alive and well but the last one was jaundiced at birth. She was given a simple medical induction and a normal delivery followed the next day. On the second day the baby was deeply jaundiced and was vomiting. The baby was transferred to Great Ormond Street Hospital as an Icterus Gravis where she was given a blood transfusion and progressed satisfactorily. The mother's puerperium was uneventful.

6. Gravida 5, sent in by a doctor as an ante-partum hæmorrhage. Patient was 38 weeks pregnant and had had one sudden free red loss at home. On admission general condition was good, blood pressure 150/85, no albuminuria, head engaged in pelvis and the patient was in labour, having good contractions. Normal delivery followed with little further red loss, and on examination of the placenta it showed a lateral insertion. Patient had an attack of asthma whilst in hospital but both she and the baby were satisfactory on discharge.

7. Primipara, aged 24 years, booked by a District Midwife, was found to be a footling presentation when in labour and was sent into hospital. She was in the second stage of labour for 2 hours with no advance and very poor pains so a general anaesthetic was given and the breech extracted. Forceps were applied to the after-coming head. The mother's puerperium was uneventful and both she and the baby were satisfactory on discharge.

8. Primipara, sent in by a doctor as Uterine inertia, said to have been in labour for four days. On admission she was very tired and was having poor contractions. Sedatives were given and a normal delivery of a 9 lbs. 5 ozs. baby followed. The mother had a mild urinary infection during the puerperium but both she and the baby were satisfactory on discharge.

9. Gravida 2, a midwife's case, sent in by a doctor as a persistent Occipito-posterior position with foetal distress. On admission the head was on the perineum and a 9 lbs. baby was delivered normally. The puerperium was uneventful and both mother and baby were satisfactory on discharge.

10. Gravida 3, admitted with mild toxæmic signs. Normal delivery followed after a medical induction at term and both mother and baby were well on discharge.

11. Gravida 2, aged 32 years, booked with a midwife, was sent in with Hydramnios. Normal delivery followed a simple medical induction. The baby weighed 10 lbs. 2 ozs. Both mother and baby were well on discharge.

12. Gravida 2, was admitted as a shoulder presentation at a doctor's request. It was a footling presentation on admission and a normal breech delivery followed. Puerperium was uneventful and both mother and baby were well on discharge.

13. Primipara, aged 22 years, sent in as a uterine inertia. She had been in labour 36 hours with ruptured membranes and on admission the os was $1/3$ dilated with poor contractions. Forceps were applied 2 hours after full dilation and the third stage followed normally. The mother had a urinary infection during the puerperium but both she and the baby were discharged as satisfactory on the fourteenth day.

14. Gravida 3, aged 23 years, admitted at request of a doctor as a face presentation in labour. On admission patient was having very strong pains and on vaginal examination the vertex was low in the pelvis. The internal os and cervical canal was dilated but the external os was cut and forceps applied. The cervix was sutured with catgut. The puerperium was uneventful and both mother and baby were well on discharge.

15. Primipara, 36 years old, was admitted as a breech presentation for external version. However, patient started in labour the same day, and a normal extended breech delivery followed. Both baby and mother were well on discharge.

16. Primipara was admitted at a doctor's request as a delayed second stage. The baby was in a persistent occipito-posterior position and was rotated under a general anaesthetic and forceps applied. Third stage was apparently normal, but on the eighth day patient had a secondary post-partum haemorrhage. A digital evacuation of the uterus was carried out and no further haemorrhage occurred. Both mother and baby were well on discharge.

17. Gravida 3, admitted with acute retention of urine with overflow. She was 3 months pregnant with a retroverted uterus. She was catheterised and the uterus replaced and micturition was normal on discharge from hospital.

18. Primipara, a midwife's case, admitted at request of a doctor as a foetal distress. On admission the patient was fully dilated with meconium stained liquor and the foetal heart was slowing. A low forceps delivery was carried out and both mother and baby were satisfactory on discharge.

19. Gravida 3, was booked for delivery at home but was unable to find a midwife when labour commenced. She was admitted to Hospital and had a normal delivery.

20. Gravida 4, aged 33 years, was admitted in a poor general condition with mild toxæmic signs. She had a normal delivery and puerperium was uneventful.

21. Gravida 2, aged 34 years, admitted as a toxæmia of pregnancy. She was 37 weeks pregnant, blood pressure 140/95 and with albuminuria. Esbach $1\frac{1}{2}$ parts. Normal delivery followed a simple induction and both mother and baby were well on discharge.

22. Primigravida admitted as disproportion at request of her doctor. The baby was delivered naturally but became rapidly jaundiced. It was transferred to the Westminster Hospital as an Erythroblastosis. It was treated and returned. Both mother and child were discharged well.

Booked Cases.

Ante-Natal Cases admitted for Treatment.

130 patients were admitted during the pregnancy for treatment. The conditions for which they were admitted are as follows :

Toxaemia	...	...	...	...	...	...	61
Pyelitis	...	...	...	...	...	...	3
Hypertension	...	...	...	...	...	...	6
Mitral Stenosis	...	...	...	...	...	...	3
General Debility and Anaemia	...	...	...	...	...	...	4
Tuberculosis	...	...	...	...	...	...	1
Postmaturity	...	...	...	...	...	...	2
Oedema	...	...	...	...	...	...	2
Hydramnios	...	...	...	...	...	...	2
Abnormal Presentation for Version	...	...	...	...	...	...	18
Phlebitis	...	...	...	...	...	...	3
Acute retention of Urine	...	...	...	...	...	...	1
Trilabour	...	...	...	...	...	...	9
Antè-partum haemorrhage	...	...	...	...	...	...	9
Threatened miscarriage	...	...	...	...	...	...	1
Vaginal thrush	...	...	...	...	...	...	1
Dead Foetus	...	...	...	...	...	...	2
Herpes Zoster	...	...	...	...	...	...	1
Haematuria	...	...	...	...	...	...	1

Abnormal Presentations.

Persistent occipito-posterior	...	...	...	...	20
Twin pregnancy :					
(a) Vertices	...	...	...	...	6
(b) Vertex and breech	...	...	...	...	5
(c) Breeches	...	...	...	...	3
Breech :					
(a) Flexed Breech	(1) Primipara	...	...	...	8
	(2) Multipara	...	...	...	5
(b) Extended breech	(1) Primipara	...	...	...	18
	(2) Multipara	...	...	...	2
(c) Breech extraction	...	...	...	...	4
Face	...	...	...	...	1
Vertex with prolapsed hand	...	...	...	...	1

Obstetrical Manipulations and Operations.

Episiotomy	...	...	...	...	...	68
External Version	...	...	...	...	...	12
Internal Version	...	...	...	...	...	1
Rupture of membranes for						
Toxaemia	...	...	...	...	...	26
Hypertension	...	...	...	...	...	3
Accidental Haemorrhage	...	...	...	...	...	1
Post Maturity	...	...	...	...	...	4

Forceps Delivery.

(a) Foetal distress	...	...	...	...	...	5
(b) Maternal distress	...	...	...	...	...	5
(c) Uterine enertia	...	...	...	...	...	21
(d) Minor pelvic disproportion	...	...	...	...	...	7
(e) Prolapsed cord	...	...	...	...	...	1

Caesarean Section.

(a) Upper Segment :						
(1) Primiparous Breech with Bilateral thrombosis	...	...	...	...	...	1
(b) Lower Segment :						
(1) Disproportion	...	...	...	...	...	3
(2) Rhesus factor	...	...	...	...	...	1

Ruptured Uterus.

(a) Spontaneous	...	...	...	...	...	1
(b) Rupture of old myomectomy scar	...	...	...	...	...	1

High Head—primipara without disproportion ... 14

Unsuccessful Trial Labour—for disproportion ... 1

Eclampsia ... 4

Haemorrhages.*Ante-Partum.*

Central Placenta Praevia	...	...	...	...	...	0
Lateral Placenta Praevia	...	...	...	...	...	2
Accidental	...	...	...	...	...	1

Post-Partum.

Moderate	...	...	...	...	...	54
Severe	...	...	...	...	...	4
Manual removal of placenta	...	...	...	...	...	10
Secondary post partum haemorrhage	...	...	...	...	...	2

Notifiable Pyrexia ... 26

Acute Mastitis	...	...	...	...	...	1
Flushed Breast	...	...	...	...	...	1
Urinary Infection	...	...	...	...	...	10

Uterine Infection :

(a) Retained products	...	...	...	...	...	3
(b) Non-streptococcal infection	...	...	...	...	...	1
(c) Haemolytic streptococcal infection, Group C	...	...	...	...	...	2
Influenza	...	...	...	...	...	7
Post operative distension	...	...	...	...	...	1

Non-notifiable Pyrexia during Puerperium	...	...	...	31
General debility	...	...	...	5
Urinary infection	...	...	...	11
Cracked nipples and mastitis	...	...	...	4
Breast abscess	...	...	...	2
Uterine infection	...	...	...	2
Phlebitis	...	...	...	1
Retained products	...	...	...	6

Patients transferred to other Hospitals.

To Clayponds Isolation Hospital :

(a) For Haemolytic Streptococcal infection...	...	2
(b) Dental abscess	...	1

Maternal Deaths	0
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INFANTS.

Number of infants born	1,183
Males (alive)	612
Females (alive)	571
Stillborn	20
Abortion...	...	...	...	...	1
Neo-natal deaths	...	...	...	...	11

Stillbirths.

Fresh.

(a) Full term	6
(b) Premature	2
(c) Anencephalic	1

<i>Macerated</i>	11
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Abnormal Infants.

Congenital Heart Disease	2
Mongol	3
Talipes	4
Hare lip	1
Hypospadias	...	...	...	...	3
Spina Bifida	...	...	...	...	1
Abnormal genitalia	...	...	...	...	1

Infants' Illnesses.

Cerebral Haemorrhage	...	...	...	...	2
Erythroblastosis	...	...	...	...	3
Congenital ichthyosis	...	...	...	...	1

Premature Babies born alive.

28-32 weeks' gestation	...	...	...	...	7 (2 sets twins)
32-36 weeks' gestation	...	...	...	...	17
36-38 weeks' gestation	...	...	...	...	21

Infants Weaned.

Owing to mother's breast condition	...	...	...	10
Owing to tuberculosis of mother	...	...	...	3
Owing to baby's condition	...	...	...	1

Infants transferred to other Hospitals.

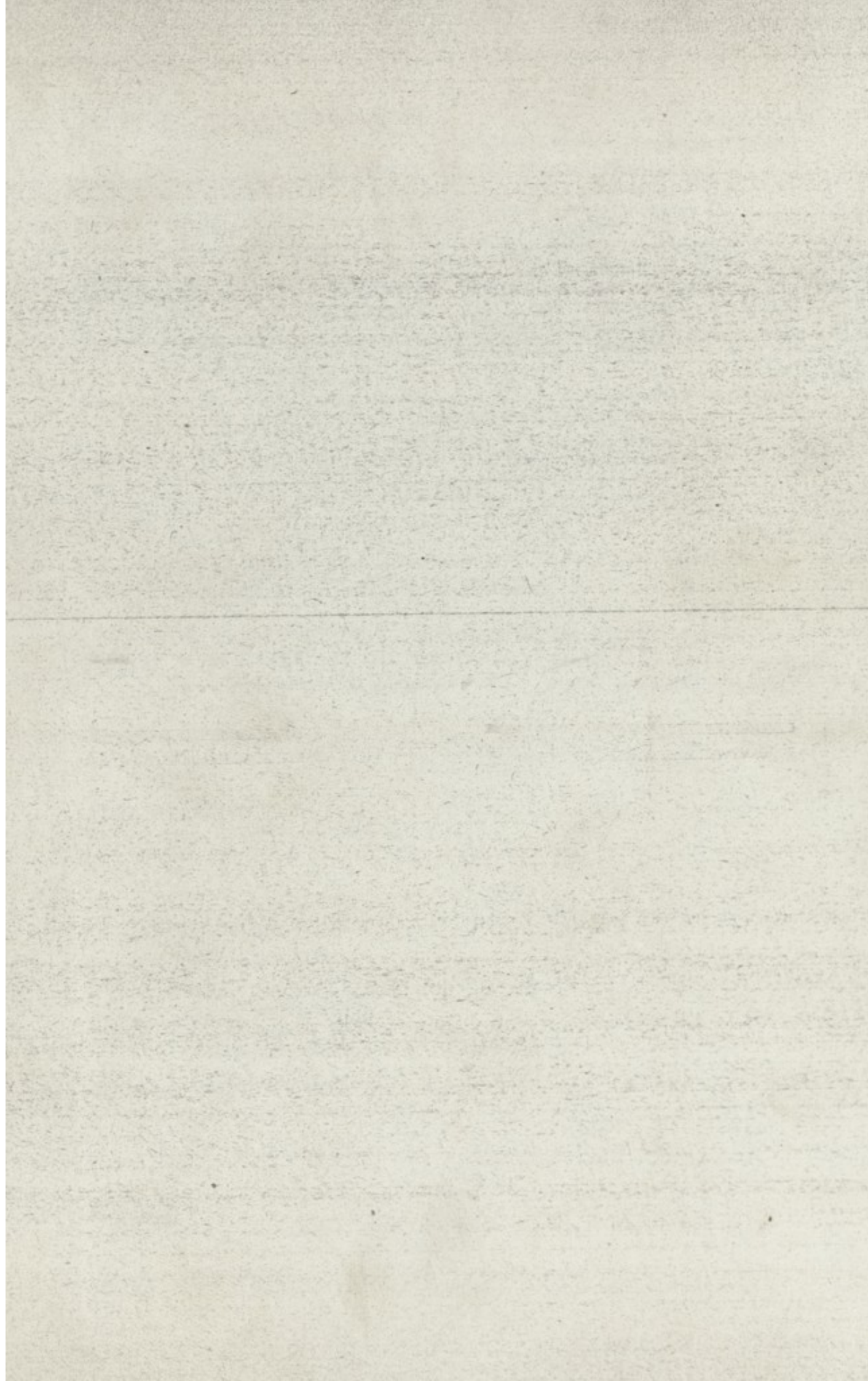
To Clayponds Isolation Hospital with Staphylococcal blisters	...	...	...	...	9
To West Middlesex Hospital :					
Spina Bifida	...	...	...	...	1
To Great Ormond Street :					
Erythroblastosis	...	...	...	...	2
To Queen Elizabeth Children's Hospital :					
Erythroblastosis	...	...	...	...	1
To Westminster Hospital :					
Jaundice	...	...	...	...	1

Consultants called in.

Dr. J. W. Bell on 20 occasions.
 Mr. Arnold Walker on 6 occasions.
 Dr. Rees on one occasion.
 Dr. Potter on one occasion.
 Dr. Maurice Shaw on one occasion.

Training of Pupils.

During the year ended 31st March, 1947, 44 pupils completed their course of training and entered for the examination of the Central Midwives Board. All 44 pupils were successful.





JR2/68

