#### [Report of the Medical Officer of Health for Romford].

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## BOROUGH OF ROMFORD





HEALTH DEPARTMENT.

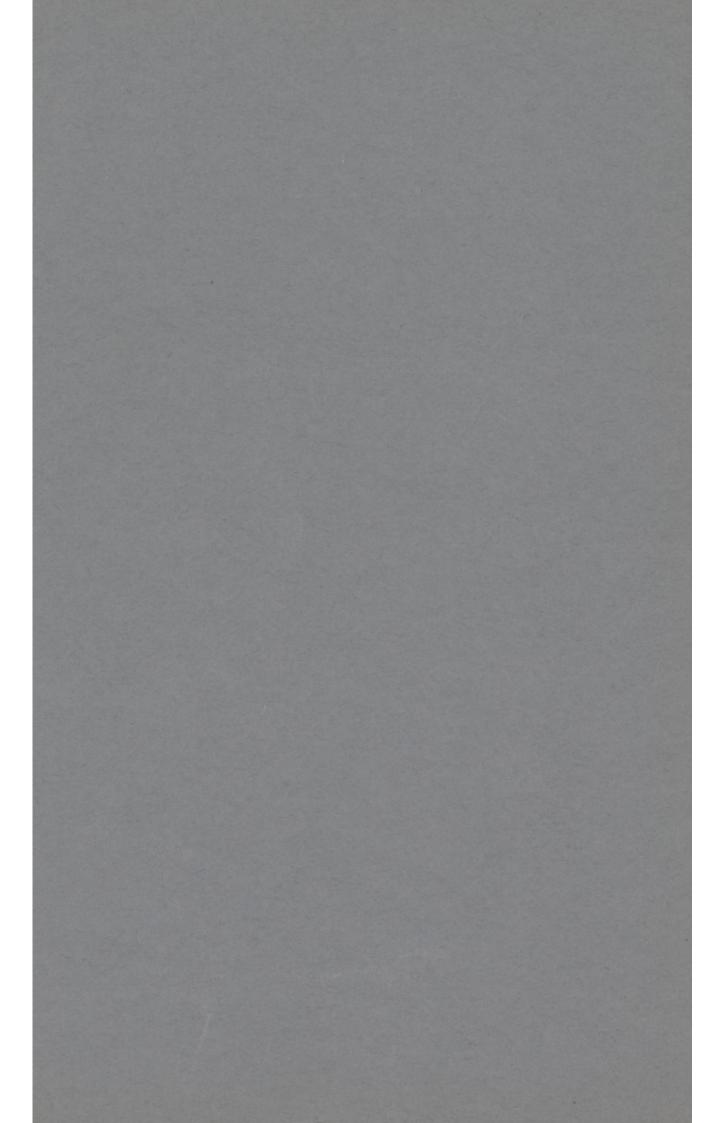
## ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the Year 1938.

JAMES B. SAMSON, M.D., D.P.H., Medical Officer of Health.



## BOROUGH OF ROMFORD



HEALTH DEPARTMENT.

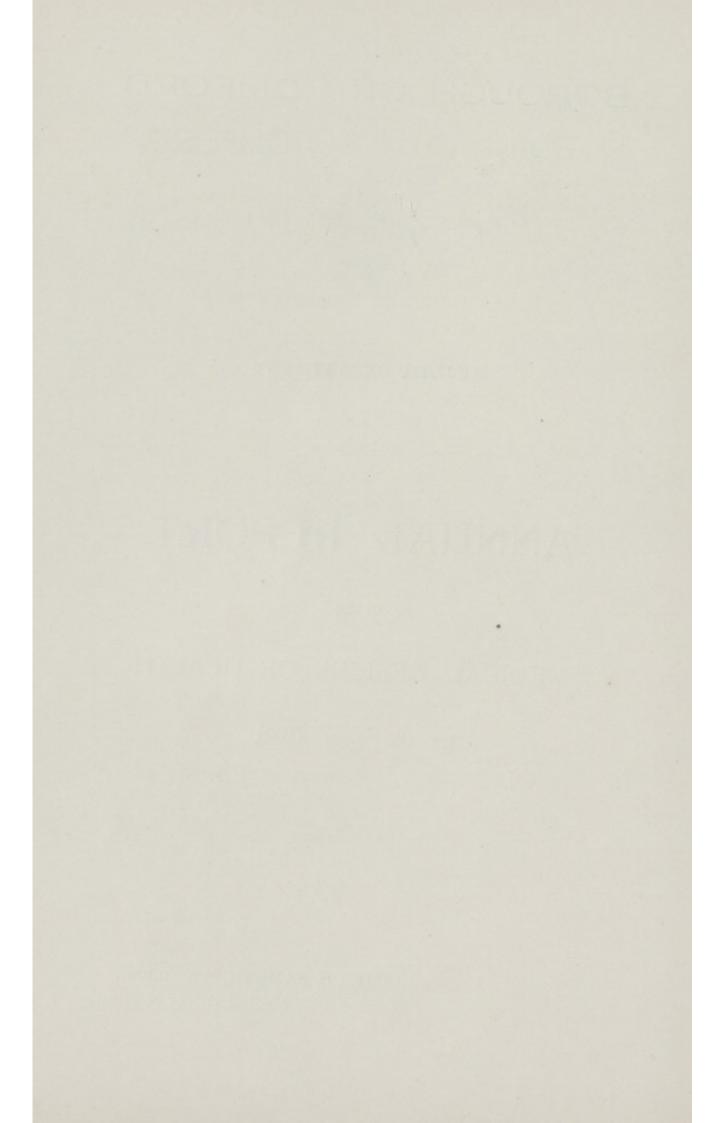
# ANNUAL REPORT

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MEDICAL OFFICER OF HEALTH

for the Year 1938.

JAMES B. SAMSON, M.D., D.P.H., Medical Officer of Health.



## BOROUGH OF ROMFORD

#### MEMBERS OF THE COUNCIL.

(As at 31st December, 1938)

HIS WORSHIP THE MAYOR: Alderman R. A. Forge, J.P.

#### DEPUTY MAYOR:

Alderman C. H. Allen.

#### ALDERMEN:

Alderman C. H. Barney. Alderman H. W. Hole, J.P.

,, F. L. J. Cole, C.C. . C. E. Smart.

" W. M. Goldsmith.

#### COUNCILLORS:

Councillor A. E. Blane Councillor W. D. Hill.

R. G. L. Bowyer. ,, Mrs. L. A. Irons.

, A. J. Brian, ,, L. A. Lucas.

.. G. W. Butcher. ,, A. Needham.

J. Butterfield. , C. A. Osborn.

, G. F. Chaplin G. E. C. Quartermaine

, Mrs. I. J. Coates. ,, W. J. Russell.

H. F. Davenport. E. W. Smith.

,, A. J. Dyer, O.B.E. ,, G. A. Stafford.

N. Eyre. L. S. Webb.

,, A. E. Fruitnight,

## BOROUGH OF ROMFORD

#### PUBLIC HEALTH COMMITTEE

(As at 31st December, 1938)

#### HIS WORSHIP THE MAYOR:

Alderman R. A. Forge, J.P. (Ex-officio member).

#### DEPUTY MAYOR:

Alderman C. H. Allen (Ex-officio member).

#### CHAIRMAN:

Councillor L. S. Webb.

#### VICE-CHAIRMAN:

Councillor G. W. Butcher.

Alderman C. H. Barney. Councillor Mrs. I. J. Coates.

,, F. L. J. Cole, C.C. ,, H. F. Davenport.

,, W. M. Goldsmith. ,, Mrs. L. A. Irons.

,, C. E. Smart. ,, G. E. C. Quartermaine

Councillor A. E. Blane. ,, W. J. Russell.

,, A. J. Brian.

## Maternity and Child Welfare Committee.

As above with the addition of :-

Mrs. G. Bignold.

Mrs. A. Damant.

Mrs. L. Fox.

Mrs. B. Hollingsworth.

#### HEALTH DEPARTMENT.

#### Public Health Staff.

#### MEDICAL OFFICER OF HEALTH.

J. B. Samson, M.D., CH.B., D.P.H.

Assistant Medical Officer of Health for M. & C.W. Purposes. Hilary S. M. Hadaway, M.B., B.S.

#### SANITARY INSPECTORS.

- (a) W. S. Gent, Chief Sanitary Inspector, Certificate of the Royal Sanitary Institute; Certificate of the Liverpool University School of Hygiene for Meat and Foods.
- (b) C. H. Bossley, Certificate of the Royal Sanitary Institute; Certificate of the Royal Sanitary Institute (Meat and Foods).
- (c) C. H. Sargent, Certificate of the Royal Sanitary Institute; Certificate of the Royal Sanitary Institute (Meat and Foods).

#### HEALTH VISITORS.

- (a) Mrs. E. J. Bingham, State Registered Nurse; State Certified Midwife.
- (b) Miss M. J. Thomas, State Registered Nurse; State Certified Midwife; Health Visitors' Certificate; State Certified Fever Nurse; Certificate for Tuberculosis.
- (c) Miss F. K. Wells, State Registered Nurse; State Certified Midwife; Health Visitors' Certificate.

#### COUNCIL MIDWIVES.

- (a) Mrs. G. E. Sexton, State Registered Nurse; State Certified Midwife; Queen's Certificate for District Nursing.
- (b) Mrs. D. Shaddick, State Registered Sick Children's Nurse; State Certified Midwife.
- (c) Mrs. A. P. Shuttleworth, State Registered Nurse; State Certified Midwife.
- (d) Mrs. J. Thompson, State Registered Nurse; State Certified Midwife.

#### CLERKS.

- (a) E. W. Gowers, Senior Clerk to the Medical Officer of Health.
- (b) C. G. Humberston, Clerk to the Sanitary Inspectors.
- (c) S. Adams, Junior Clerk to the Medical Officer of Health.

## BOROUGH OF ROMFORD.

To His Worship the Mayor, Aldermen, and Councillors of the Romford Borough Council.

MR. MAYOR, LADIES, AND GENTLEMEN,

I have the honour, herewith, to present to you, this, my Annual Report on the Health of the District for the year, 1938. This is the Fifth Report in the series since I was appointed your Medical Officer of Health, and it is drawn up in accordance with the requirements of Article 17 (5) of the Sanitary Officers (Outside London) Regulations, 1935, and Circular 1728 of the Ministry of Health, dated 25th October, 1938.

Although the health of the community is of paramount importance, and of growing interest to the average citizen it is surprising how little is known of the armamentaria at the command of the Health Department for the prevention of Disease. Even a casual glance, however, through the succeeding pages of this Report will show the diversity of our work, and how each individual item is a link in the chain, which strengthens our resources against the Arch Enemy of Mankind, viz., Disease.

The year 1938 was marked by considerable activity in connection with A.R.P., which reached a climax during the Emergency in September, and, although we were allotted a breathing space in the two or three weeks immediately following the Emergency, there was every indication that A.R.P. would continue to demand the increasing attention of this Department. In spite of the additional duties, however, placed upon us, I feel that it is to the credit of my staff that there has been the minimum of interference with the normal routine work.

With regard to our personnel, there is no change to record, and I have once more much pleasure in acknowledging the contribution which each member has made to the compilation of this Report.

My best thanks also go to all the members of the Council, who have continued to place the health of the Town as a foremost consideration in their public work.

I am,

Mr. Mayor, Ladies, and Gentlemen, Your obedient servant,

JAMES B. SAMSON.

Public Health Department,
Town Hall,

Medical Officer of Health.

ROMFORD.

May, 1939.

# LOCAL ACT, ADOPTIVE ACTS, BYELAWS, ETC., IN FORCE WITHIN THE DISTRICT.

#### Local Act.

Romford Urban District Council Act, 1931.

#### Adoptive Acts.

Infectious Disease (Prevention) Act, 1890 as amended.

Local Government and Other Officers' Superannuation Act, 1922.

Private Street Works Act, 1892.

Public Health Acts (Amendment) Act, 1890-

Parts 2, 3, 4 and 5, as amended.

Public Health Acts (Amendment) Act, 1907-

Part 2, Sections 15, 16, 17, 18, 20, 21, 22 and 28/33 (inclusive), as amended.

Parts 4 and 6, as amended.

Part 7, Section 81.

Parts 8 and 9.

Part 10, Section 95.

Public Health Act, 1925—Part 2, as amended.

Small Dwellings Acquisition Acts, 1899 to 1923.

The Slaughter of Animals Act, 1933, has also been made applicable to "sheep, ewes, wethers, rams and lambs."

## Byelaws.

Cemetery.

Hackney Carriages.

Mortuary and Post-Mortem Room.

New Streets and Buildings.

Pleasure Grounds.

Romford Market.

Slaughterhouses.

#### Orders.

Romford, Hornchurch, and Upminster Weekly Half-Holiday (Hairdressers) Order, 1923.

Romford Urban (Offensive Trades) Confirmation Order, 1929, declaring each of the following trades to be an offensive trade, viz.: Trades of Blood-Drier, Leather Dresser, Tanner, Fat Melter or Fat-Extractor, Glue-Maker, Size-Maker, Gut-Scraper, Rag and Bone Dealer, and Fish Frier.

#### SOCIAL CONDITIONS OF THE AREA.

With regard to the employment of the population of Romford, circumstances have not altered—the majority being employed in business or professional duties, either in the town itself or in London. A certain number is engaged in agricultural pursuits.

For those who work in London, there is no doubt that the time taken in travelling, and the conditions under which such travel is accomplished are not conducive to the high standards of public health at which we aim at the present day, and it is, therefore, all the more essential that the Public Health Services of Romford, and in this I include facilities for Recreation and Physical Training, should be of such a character as to counteract any injurious effects that may appertain.

As opposed to the train and 'bus services, many of the working classes find it more economical to travel the 12 or 15 miles to Town by bicycle, and, in spite of periodic attacks of Rheumatism, Sciatica and Lumbago, with occasional Bronchitis due to exposure to bad weather especially during the winter months, heroically pursue their daily avocations.

Regarding particulars of the extent of unemployment in the district, I once more gratefully acknowledge thanks for the following details supplied by Mr. P. C. Eversfield, Manager of the Local Employment Exchange, and would again point out that the figures relate not only to Romford, but also to adjacent areas supervised by the Romford Branch of the Exchange.

	TA	BLE 1.			
Totally Unemployed	Men	Women	Boys	Girls	Total
1937	1,601	330	72	49	2,052
Short Time Workers 1937	. 103	36	-	1	140
Totals .	1,704	366	72	50	2,192
m + 11 - TT - 1 - 3	Men	Women	Boys	Girls	Total
Totally Unemployed 1938 Short Time Workers	. 2,153	455	137	71	2,816
1938	. 244	37	7	1	289
Totals	. 2,397	492	144	72	3,105

These are the Live Register figures as on December 31st.

In last year's report I mentioned an increase of unemployment amongst Men, Women and Boys, and a slight decrease amongst Girls as compared with the previous year, and expressed the hope that the cause of this state of affairs might be of a seasonal character only. I regret to say, however, that this hope has not been fulfilled, and, as can be seen from the above table, there has been a further increase in unemployment, this time amongst all classes. In consequence, a greater strain has been thrown on the financial resources of those concerned, and this has shown itself in the increased amounts that this Council has had to write off for the various services connected with our Maternity and Child Welfare Schemes. In spite of these facts, I have no evidence, statistical or otherwise, that unemployment has exercised any significant influence on the health or physique of children or adults in the district.

## ANNUAL REPORT

## of Medical Officer of Health for the Year 1938.

## Statistics and Social Conditions of the Area.

Area (in acres)					9,342
Population: Census (1931), 35,91	18. M	lid. 1938	(Estd.)	5	4,600
Number of Inhabited Houses (en	d of 1	(938)	***		5,933
Rateable Value (end of 1938)				£489	9,104
Product of Penny Rate (end of	1938)			£	1,800
Extracts from Vital Statistics for	the Y	Year.			
			Total	M.	F.
Live Births: Legitimate		***	977	500	477
Illegitimate			28	10	18
Birth Rate: 18.4 per 1,000					
estimated resident populat					
Still Births: Legitimate			30	18	12
Illegitimate			2	1	1
Rate per 1,000 total (live an			-	1	
still) births: 30.9.	u				
T) (1			509	281	228
		4 . 7			
Death Kate: III II ner I IIIII	actim	SION POST			
Death Rate: 10.0 per 1,000	estim	ated resi	ient bobi	mation	•
Death Rate: 10.0 per 1,000	estim	ated resi			
Death Rate: 10.0 per 1,000	estim	ated resid	Rate	per 1,	000
Death Rate: 10.0 per 1,000			Rate total	per 1,0	000 and
		Deaths	Rate total	per 1,	000 and
Deaths from Puerperal Causes :-	_ 1	Deaths	Rate total	per 1,0 (live a l) birt	000 and
Deaths from Puerperal Causes: From Puerperal Sepsis		Deaths	Rate total	per 1, (live : l) birt	000 and
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes		Deaths 0 2	Rate total	per 1,0 (live : 0 1.93	000 and
Deaths from Puerperal Causes: From Puerperal Sepsis		Deaths	Rate total	per 1, (live : l) birt	000 and
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total		Deaths 0 2 2	Rate total still	per 1,0 (live : 0 1.93	000 and
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes		Deaths 0 2 2	Rate total still	per 1,0 (live : 0 1.93	000 and
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total	  	Deaths  0 2 2 of age:-	Rate total still	per 1,6 (live : 1) birt 0 1.93 1.93	000 and
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi	 e year	Deaths  0 2 2 of age:-	Rate total still	per 1,0 (live a l) birt 0 1.93 1.93	000 and hs
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,000	year rths	Deaths  0 2 2  of age: timate li	Rate total still	per 1,0 (live a l) birt 0 1.93 1.93	53.7 48.1
Deaths from Puerperal Causes: From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,00 Illegitimate Infants per 1,00	year rths	Deaths  0 2 2  of age: timate ligitimate l	Rate total still	per 1,0 (live a l) birt 0 1.93 1.93	53.7 48.1 250.0
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,00 Illegitimate Infants per 1,00 Deaths from Cancer (all ages)	year year of leging of the leg	Deaths  0 2 2 of age: timate li	Rate total still	per 1,6 (live : 1) birt 0 1.93 1.93	53.7 48.1 250.0
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,00 Illegitimate Infants per 1,00 Deaths from Cancer (all ages) Deaths from Measles (all ages)	year year of the legion of the	Deaths  0 2 2 of age: timate li itimate l	Rate total still still	per 1,6 (live : 1) birt 0 1.93 1.93	53.7 48.1 250.0
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,00 Illegitimate Infants per 1,00 Deaths from Cancer (all ages)	year year of the legion of the	Deaths  0 2 2 of age: timate li itimate l	Rate total still still	per 1,6 (live : 1) birt 0 1.93 1.93	53.7 48.1 250.0
Deaths from Puerperal Causes:  From Puerperal Sepsis Other Puerperal Causes Total  Death Rate of Infants under one All Infants per 1,000 live bi Legitimate Infants per 1,00 Illegitimate Infants per 1,00 Deaths from Cancer (all ages) Deaths from Measles (all ages)	year year of leging of the leging of the leging (all ag	Deaths  0 2 2  of age: timate li itimate l ges)	Rate total still	per 1,6 (live 3 l) birt 0 1.93 1.93	53.7 48.1 250.0 80 6

#### TABLE 2.

BIRTH-RATES. DEATH-RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH-RATES and CASE-RATES for certain Infectious Diseases in the year 1938.

England and Wales, London, 126 Great Towns and 148 Smaller Towns.

#### (Provisional Figures based on Weekly and Quarterly Returns).

	PER	ATE 1,000 PULA-	DEATH-RATE PER 1,000 POPULATION.							RATE PER 1,000 LIVE BIRTHS		
	Live	Still- births	All Causes	Typhoid and Paratyphoid fevers	Small-pox	Measles	Scarlet	Whooping	Diphtheria	Influenza	Diarrhoea and Enteri- tis (under 2 years)	Total Deaths under 1 year
England and Wales	15.1	0.60	11.6	0.00	0.00	0.04	0.01	0.03	0.07	0.11	5.5	53
126 County Boroughs and Great Towns, including London	15.0	0.65	11.7	0.00	0.00	0.05	0.01	0.03	0.07	0.10	7.8	57
148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	15.4	0.60	11.0	0.00	0.00	0.03	0.01	0.02	0.06	0.11	3.5	51
London	13.4	0.48	11.4	0.00	0.00	0.06	0.01	0.03	0.05	0.06	13.1	57
ROMFORD	18.4	0.59	10.0	0.00	0.00	0.11	0.02	0.05	0.09	0.09	8.0	.54

Total Puerperal Sepsis Others { per 1,000 Live Births , , , , Total Births , , , Live Births , , , . Total Births 0.89 - 0.86 - \_ \_ 3.08 2.97 1.99 1.93 2.19 2.11 1.99 1.93 The maternal mortality rates for England and Wales are as follow: Romford are as follow:

TABLE 3.

	Causes of Death		All ag	es		De	corre	at the	for ]	iojoin Inwai	rd an	d Ou	itwai	d Tr	ts, after ansfers.
	Causes of Death	M.	F.	Total	Under 1	1	2-4	5-14	15- 24	25- 34	35- 44	45- 54	55- 64	65- 74	75 & upward
1	Typhoid and paraty-														
	phoid fevers		***		***			***	***		***		***	***	***
2	Measles		1	6	1	3	2	***	***	***	***	***	***	***	
3	Scarlet fever		***	1			1	***	***	***	***	***	***	***	***
4	Whooping cough		3	3	1	1	9	1 9		***	***			***	***
5	Diphtheria	- 63	3	5 5	***	***	-		1	1	***	***		1	ï
6	Influenza		-	9	0.7	***		***	***	1	***	***	2	-	
7	Encephalitis legarthics			ï	***	1	***	***		8 67	***	***	***	***	***
8	Cerebro-spinal fever Tuberculosis of respi		***	1	***	. A	***	***	***	***	***	***	***	***	***
9		20	13	27					4	5	7	3	6	2	
0	Other tuberculous	11	10		***	***		***	-1	0		0	0	-	
.0	diseases	4	1	5	1	1		1		1		1			
1	Syphilis	- 0		2				1000		î			***	ï	
2	General paralysis of	-	***	-	***	***	***	****		-				-	
	the insane, tabes		-												
	dorsalis			***			***			***			***		
3	Cancer, malignant dis							100000							
	ease	475	40	80							4	15	21	23	17
4	Diabetes	0	1	3								1		1	1
5	Cerebral hæmorrhage					134				955				F CN	
	&c	10	10	20	***	***	***			***		1	5	7	7
6	Heart Disease	. 60	44	104	1			2	2	1	2	7	14	33	42
7	Aneurysm	2		2			***	***	***	1		***	1	***	
8	Other circulatory dis-	1											1		
	eases		17	39				***			***	***	8	13	18
9	Bronchitis		7	12	***		***	***	***	***	***	1	4	3	4
0.	Pneumonia (all forms)	15	13	28	7	1		1	3	***	2	2	2	2	8
1	Other respiratory dis			-			-								9
	eases		2	5	***	***	1		1	***	***	***	1	***	2
22	Peptic ulcer	. 2	1	3	***		***	***		***	***	1	2	***	***
23	Diarrhœa, &c. (under		2		0										
	2 years)		4	8	8	***		***	***	***	***	***	***		
4	Appendicitis	2	2	4		***		1	***	***	***	***	1	2	***
25	Cirrhosis of liver			***	***			***	2.4.4	***	***	***	***	***	***
26	Other diseases of liver			-							1			0	
	etc		4	5	***	***	***	***	***	***	1	***	1	3	***
37	Other digestive dis-		0	10	. 9		7					2	0	4	
	eases		6	12	3	***	1	***	***	***	***	-	2	4	
28	Acute and chronic ne	(3)	3	11						2	1	1	2	1	4
	phritis						***	***		_					
20	Puerperal sepsis		2	2	***	***	***	***	***	1	1	***		***	
30	Other puerperal cause	3	-	2	***	***	***	***	***	1	-	***		***	200
31	Congenital debility,														
	premature birth,	1.	11	0=	95										
	malformations, etc.	14	11	25	25	***	***		***	***		***	***		10
32	Senility		. 8	15	***	***		***	1	"	9	3		3	12
33	Suicide		10	9	1	5	1	3	1 2	1 4	2 3	3	4	1 2	9
34	Other violence			25 42	1 5	***	1 2	4	4	3	5	3	4	3	2 9
35	Other defined diseases	3 26	16	42	9	***	2	4	4	0	0	0	-	0	9
36	Causes ill-defined or														
	unknown	***			***	***	***	***	***	***	***	***	***		***
		281	228	509	53	7	10	15	18	21	28	44	80	105	128

TABLE 4.

	Collier Row and Havering Ward	Gidea Park and Noak Hill Ward	South Ward	Town Ward	West Ward
Death Rate per 1,000 Esti- mated Resident Population	8.04	5.17	11.02	10.38	10.38
Infant Mortality Rate	54.59	27.02	73.17	51.28	114.58

This year the Registrar-General has given his estimate of the mid-year population of Romford as 54,600, which compares with 51,830 last year, an increase of 2,770. The main development of the Town has undoubtedly been in the Collier Row Area, and this development would have every appearance of continuing for several years yet. Building is also active, however, in other parts, and there is at present no sign of our reaching a saturation point in population.

Last year, I set out in detail the various factors that influence the trend of a population. In addition to these there is the question of the increased chance that individuals nowadays have of surviving to a later age. In this respect, as the Chief Medical Officer of the Ministry of Health states, it has been estimated throughout the Country as a whole that about three-quarters of the inhabitants will live from school age to about 60 years of age, an improvement of nearly 38% for Males, and 43% for Females, compared to conditions prevailing about a century ago. Regarding the chance a person aged 60 years of age has of surviving another 25 years, it has been estimated that the improvement for Women is almost as great as in respect of survivorship from school age to 60, but for Men it is much less, only 8%, instead of 38%. For Men the chance of surviving from boyhood to 60 is much greater than it was for their great-grandfathers, but a Man now aged 60 has not a much greater chance of living to be 85 than his great-grandfather enjoyed.

Although it is not possible to calculate the details for Romford itself, I have no reason to believe that the circumstances here are in any way different from those of the Country in general.

In previous reports I have pointed out the difficulty we have in a district such as this in compiling accurate statistics, and how this difficulty is increased the further we get from the accuracy of a Census year. This is particularly the case when we try to compile the information for Table 4 above. In this Table we give the Death Rate and Infant Mortality Rate for the individual wards, but the true resident population of these wards is an unknown factor, and can only be worked out approximately. Then again, the Age and

Sex distribution may be different in each Ward which renders comparison difficult. Furthermore, the numbers with which we deal in each ward are comparatively small, and this, in itself, results in erroneous conclusions.

During 1938, the total number of live births registered was 1,005, and the total number of deaths registered was 509. The difference of 496 gives the natural increase in the population. As this number falls short of the Registrar-General's estimated increase of 2,770, it follows that the remainder, 2,274 is made up of excess of Immigration over Emigration. Last year the excess was 2,229.

For 1938 we estimate the Birth Rate to be 18.4 per 1,000 of the estimated resident population, an increase of 2.1 compared to 1937.

The Rate for England and Wales for 1938 is given as 15.1, and for the 148 smaller towns with populations ranging from 25,000 to 50,000 at the 1931 Census, the Rate is 15.4.

The Death Rate for the Town is estimated at 10.0 per 1,000 of the estimated resident population. This figure is obtained by multiplying the Crude Death Rate of 9.3 by the Areal Comparability Factor for Romford, which is 1.08.

The Death Rate last year for the District was 10.4. The Rates for England and Wales, and for the 148 smaller towns referred to above are 11.6 and 11.0 respectively.

The chief causes of death in order of frequency are:— 1. Diseases of the Heart and Circulation; 2. Cancer; 3. Bronchitis, Pneumonia, and Other Respiratory Diseases; 4. All Forms of Tuberculosis. The order remains the same as for last year.

The Maternal Mortality Rate is 1.93 per 1,000 registered (live and still) births, an increase of 0.80 on last year. The corresponding rate for England and Wales is 2.97.

The Infant Mortality Rate, or the Death Rate of Infants under 1 year of age per 1,000 registered live births, is 53.7, an increase of 0.7. The corresponding figures for England and Wales, and the 148 smaller towns are 53.0 and 51.0 respectively.

To summarize, it will be noted that, compared with England and Wales as a whole and Towns of a population equivalent to that of Romford, we have a much higher Birth Rate, a lower Death Rate, and only a slightly higher Infant Mortality Rate. The Maternal Mortality Rate for the other towns is not yet available, but compared with England and Wales in general, we have a lower rate.

Regarding the age of death, those residents, who have escaped the ups and downs of the first year of life, and who spend all their days in Romford, would appear to have slightly more than an even chance of reaching 65 years of age, and approximately a 1 in 3 chance of living to more than 75 years.

From the above statistics I think I am correct in assuming that the Health outlook for the population is a good one.

# 1.—GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

### (i) Public Health Officers of the Authority.

For particulars of these, see the list at the beginning of this Report.

### (ii) Laboratory Facilities.

- (a) Under our arrangement with the Essex County Council, the greater portion of the clinical material from the District is sent to the Counties Public Health Laboratories, Queen Victoria Street, London for analysis. When a report is sent to a practitioner, the Health Department here receives a duplicate, and, in this manner, we are kept informed of the results of various specimens submitted from patients in the district.
- (b) Under an arrangement with the Essex County Council, specimens to be examined in connection with Venereal Diseases are submitted to the L.C.C. Laboratory, Whitechapel Clinic, Turner Street, Mile End, London.
- (c) Under an arrangement with the Essex County Council in pursuance of the Circular of the Ministry of Health dated 30th March, 1938, and entitled "Bacteriological Investigation with Reference to Puerperal Sepsis," specimens to be examined are sent to the Department of Pathology, Chelmsford and Essex Hospital, Chelmsford. There, they are examined by Dr. F. E. Camps.
- (d) Under an arrangement with the Romford Joint Hospital Board, swabs to be examined for Klebs Loeffler Bacilli can be taken by hand to the Isolation Hospital, and dealt with at the laboratory there.

#### (iii) Ambulance Facilities.

The Ambulances available for use in the District are :-

(a) For Infectious Diseases—Two, which are stationed at the Isolation Hospital.

- (b) For General and Accident Cases—Two. One of these is stationed at the Car Park in Church Lane. The other is stationed at the Town Yard, Market Place, and is used for reserve purposes only.
- (c) For Oldchurch Hospital Three, which are stationed at the Hospital.

Regarding the question of co-ordination of services, this remains as before, and the Ambulance service in the District is adequate and satisfactory.

### (iv) Nursing in the Home.

#### (a) GENERAL NURSING.

There are in the District 4 District Nurses who devote their time to domiciliary nursing. Two of these are provided by the Romford District Nursing Association, and two by the Collier Row District Nursing Association. In each case the nurse also undertakes midwifery duties, but, in the case of the Collier Row District Nursing Association, so far as practicable, one of the nurses carries out all the general duties, and one all the midwifery duties. The Romford Council during the year granted a donation of £10 10s. to each of the above Associations.

#### (b) MIDWIVES.

The scheme for a domiciliary service of salaried midwives was given in detail in my report of last year. Since then there has been no alteration to the service, or in the personnel of the service.

There are in addition to the above, 4 midwives in independent practice in the District, and the 4 District Nurse Midwives. Twelve midwives resident outside the area, also undertook cases within the area.

## (v) Treatment Centres and Clinics.

### (a) Tuberculosis.

The arrangements of the Essex County Council for the supervision of patients suffering from Tuberculosis and contacts remain as before. Once again, I am indebted to Dr. J. E. Stokes, the District Tuberculosis Officer for this area, for his willing co-operation throughout the year.

The Tuberculosis Care Association has, as usual, carried out its good work by the provision of Extra Nourishment, Convalescent Holiday Treatment, the provision of Fares and Clothing, and Boarding out of Children. The Romford Council has placed the Committee Room at the Town Hall at the disposal of the Association for their monthly meetings, free of charge, and has increased the annual donation to the funds to £21.

#### (b) VENEREAL DISEASES.

Venereal Diseases' Schemes are administered by the County Council. During the year, particulars were submitted from the County Medical Officer stating that full facilities for the diagnosis and treatment of venereal diseases had been made available in the County Council's Venereal Diseases' Clinic at the Oldchurch County Hospital, Romford. Following on this, plaques were received from the County Council advertising this service, and these were sent to the Surveyor for display in the public conveniences.

#### (c) MATERNITY AND CHILD WELFARE CLINICS.

Particulars of these are given under the appropriate section later in the report.

## (vi) Hospitals: Public and Voluntary.

#### (a) Infectious Diseases.

The Infectious Diseases' Hospital at Rush Green, under the jurisdiction of the Romford Joint Hospital Board, continues to serve this District, the District of the Dagenham Borough Council, and Hornchurch Urban District, and now draws from a population of approximately 235,000. Although the Hospital is not actually within the geographical area of Romford, yet its situation at about two to three hundred yards from the South-West boundary is sufficiently near to make it accessible for the immediate admission of urgent cases.

The extensions to the Hospital completed in 1937 were described in my report for that year. This Hospital now provides 235 beds on an estimate of 144 square feet per bed. During the year under review there were no alterations of any extent carried out at the Hospital.

There is adequate provision here for the carrying out of surgical treatment, and for laboratory work.

### (b) SMALLPOX.

The Essex County Council is the Authority for the provision of accommodation in the Administrative County, and the agreement between the Essex County Council and the Borough of Colchester for the use of a Smallpox Hospital of 24 beds adjacent to the Colchester Isolation Hospital remains in operation.

In addition, the Essex County Council still have an informal arrangement with the London County Council whereby the latter would receive Essex patients into their Smallpox Hospital, in so far as they would have accommodation available.

#### (c) MATERNITY.

Our arrangement for the institutional treatment of cases with complications arising during pregnancy or confinement, and for cases where the home environment is unsatisfactory remains as before.

Arising out of the discussions mentioned in last year's report with regard to the acceptance of financial responsibility by this Council for non-destitute cases admitted in emergency to Oldchurch County Hospital, it was agreed during the year that the Romford Council would be responsible for such of those cases as were admitted from this District, provided that, if patients present themselves at the Hospital at an early stage of pregnancy for the purpose of booking accommodation for confinement, they should be referred by the Medical Superintendent to this Department, if the patient resides in this area, so that the necessary arrangements for ante-natal supervision could be made at one of the clinics of the Department.

Cases of Puerperal Pyrexia, and Ophthalmia Neonatorum are, if necessary, admitted to the Romford Isolation Hospital, under a scheme of treatment. Cases of Puerperal Pyrexia arising in Oldchurch Hospital, and suspected of being septic in origin are similarly transferred to the Romford Isolation Hospital.

#### (d) CHILDREN.

The facilities in this category remain as before.

## (e) OTHER CASES.

Accident cases, and non-infectious cases can be catered for either at the Victoria Hospital, a voluntary hospital with 31 beds, or at Oldchurch County Hospital, which is under the jurisdiction of the Public Health Committee of the Essex County Council, and which has 860 beds. Both these Hospitals are situated within the boundary of Romford. In addition, many large London Hospitals are within easy mileage of Romford.

During 1938, the Romford Council granted a donation of 10 guineas to the Victoria Hospital, and 20 guineas to the King George Hospital, Ilford.

## 2.—MATERNITY AND CHILD WELFARE.

## (i) ANTE-NATAL CLINICS.

The services of the Council available for Expectant Mothers remain the same, and the statistics for the year again show that a satisfactory standard is being mainained.

During the year under review Mr. W. S. O'Loughlin, upon whose services we could call as Obstetric Consultant, resigned, and in his stead Mr. S. Henderson, M.B., M.C.O.G., M.M.S.A., F.R.C.S., was appointed. Mr. Henderson holds the appointment of Full Time Obstetrician and Gynæcologist to Oldchurch County Hospital.

At the request of practitioners in the Town, an arrangement was made with the Essex County Council whereby patients can be referred by the practitioners to the Consultative Ante-natal Clinic held at Oldchurch County Hospital, under the supervision of Mr. S. Henderson. Patients can also be referred to this Clinic by the Medical Officer at our Ante-natal Clinics. This should prove of great value, as a full clinical unit, including X-ray plant, is available. The Romford Council accepts financial responsibility, and the sums involved will be reclaimed from the persons concerned in accordance with the Council's scale.

During the year 1938, 653 individual expectant mothers attended the Clinics, representing 67.5 per cent. of the total notified births (live and still). In addition 141 mothers attended for postnatal advice, representing 14.6 per cent. of total notified births.

In all 147 sessions were held during the year. The total number of attendances of the 794 mothers mentioned above was 2,986 giving an average of 3.8 attendances per patient. The average number attending at each session was 20.3.

### (ii) Infant Welfare Clinics.

This service continues on the same lines as last year.

During 1938, we were informed by the County Medical Officer that the School Clinic, previously held at the Combined Treatment Centre, Oldchurch County Hospital, had removed to temporary premises in another part of the Town. This, in consequence, had led to a re-arrangement for the Orthopædic Clinic, as accommodation was limited at the temporary premises. The County Medical Officer suggested that the visit of the Orthopædic Surgeon might take place at the Romford M. & C.W. Centre in Marks Road. The Romford Council agreed to the suggestion upon suitable terms being arranged.

Regarding Dental arrangements, it was felt by the Dental Practitioners in the Borough that a rota system would be preferable to that pertaining in the District, whereby the dental work for the M. & C.W. Clinics had been performed by two practitioners only, for a number of years. In consequence, it was agreed by the Council that a yearly rota be compiled from the Dentists, and this commenced on April 1st with the appointment of Mr. N. S. Farnes, L.D.S., the dental work being carried out at his own surgery.

Regarding the provision of Milk, there were 1,805 applications for receiving cow's milk free, or at less than cost price—198 had to pay a proportion of the cost, and remaining 1,607 received it free.

In a similar manner 1,449 applications were received regarding dried milk, and other foods, 142 had to pay a proportion, and 1,307 received free grants.

When recommended, dried milk and accessories can also be purchased at the Clinics at cost price.

During 1938, 401 Child Welfare sessions were held, and the following table gives a summary of the attendances.

#### TABLE 5.

Individual Children attending	 2,595
Children attending for the first time	 1,069
Medical Consultations	8,734
Attendances of Children under 1 year	
Attendances of Children between the ages	
	8,094
Average attendance per session	 56.6

The percentage of notified live births, represented by the total number of children who attended for the first time during the year, and who on the date of their first attendance were under 1 year of age was 79.6.

Ultra-violet Ray Therapy has continued as before. Altogether, during the year 85 individual patients were treated. Of these 21 had had less than 6 doses by the end of the year. Dr. Hadaway has kindly tabulated statistics relative to this form of treatment, and has excluded those patients who have received less than 6 doses.

#### TABLE 6.

Group 1. Debilitated and Nervous Children.

,, 2. Anæmic Children.

,, 3. Children under weight.

, 4. Children suffering from Respiratory Defects.

,, 5. Rickety Children.

		I.	II.	III.	IV.	V.
No. of Individual Patients treated	***	14	11	19	13	7
Total No. of Exposures		226	182	286	220	134
Total No. of Minutes		1880	1596	2352	1812	1124
Average period of treatment in weeks	***	8	8.3	7.5	8.4	9.6
Minimum period of treatment in weeks	***	3	3.5	3	3	3
Maximum period of treatment in weeks		12.5	16.5	13	20.5	17
Average No. of doses		16.1	16.6	14	17	19.1
Minimum No. of doses	***	6	7	6	6	6
Maximum No. of doses		25	33	26	41	34
Average strength of dose in minutes	***	8.3	8.7	8.1	8.4	8.4
Minimum strength of dose in minutes		4	4	4	4	4
Maximum strength of dose in minutes	***	10	10	10	10	10
Average increase of weight in lbs	***	0.70	0.70	0.78	0.9	1.4
Average increase in height in inches		0.61	0.75	0.89	1.13	1.46

Table 7 relates to the Home Visits paid by the Health Visitors.

#### TABLE 7.

(a)	To Expectant Moth	ners.		
	First Visits			 74
	Total Visits			 98
(b)	To Children under	One Year of	f age.	
	First Visits			 799
	Total Visits		***	 2,450

(c) To Children between the Ages of 1 and 5 years.
Total Visits ... 4,733

#### (iii) CHILD LIFE PROTECTION.

In Romford, each Health Visitor also holds the appointment of Child Protection Visitor under Sections 206 to 220 of the Public Health Act, 1936.

#### TABLE S.

	TABLE S.	
(a)	Number of persons who were receiving children for reward at the end of the year	48
(b)	Number of children:—  (1) At the end of the year  (2) Who died during the year  (3) On whom inquests were held during the year	62 2 0
(c)	Number of Child Protection Visitors at the end of the year who were:—  (1) Health Visitors  (2) Female, other than Health Visitors  (3) Male	3 0 0
(d)	Number of persons (in addition to or in lieu of Visitors under (c) above) or Societies authorised to visit under the proviso to Section 209 (2) of the Public Health Act, 1936	0
(e)	Proceedings taken during the year:—  (1) Number of Cases  (2) Act and Section under which proceedings were taken	0
(f)	Number of cases in which the Local Authority has given a sanction during the year under Section 210 of the Public Health Act, 1936	0
(g)	Number of Orders obtained during the year under Section 212 of the Public Health Act, 1936	0

In the case of one of the deaths enumerated under (b) (2) above the foster-mother failed to give notice to the Coroner as required by Section 213 of the Public Health Act, 1936. This offence was reported to the Public Health Committee, which decided that a strong letter of warning be sent to the foster-parent.

#### (iv) LEGAL ADOPTION.

The practice of legal adoption is growing in this area, and this Department is willing on request to give any information to a Society as to the suitability, or otherwise, of environmental conditions to which the child will be subject. Opportunity is also taken by the Department of scrutinising the Certificates of Adoption, so as to check any tendency to evasion of requirements in connection with Child Life Protection.

Before a child is legally adopted, parents should clearly understand their responsibility, and one cannot but view with concern the growth of this practice in recent years.

#### (v) Midwives Act, 1936.

This year, we are able to show the results of a complete twelve months' working of the Act, and the following gives a summary of the cases attended by the Council Midwives, as Midwives, and as Maternity Nurses.

As Midwives ... ... ... ... 224
As Maternity Nurses ... ... ... 58

Under the requirements of Section 7 of the Act, which relates to the necessity for Post-Certificate Training, the Essex County Council made arrangements for two of the Midwives to attend a Course of one month's duration at the General Lying-In Hospital, York Road, Lambeth. The other two Midwives will have an opportunity of taking this course at a later date.

## (vi) Emergency Unit for Midwifery.

On the appointment of Mr. S. Henderson as Full-Time Obstetrician at Oldchurch County Hospital, arrangements were made for utilisation of his services in connection with an Emergency Unit, or "Flying Squad," to attend to complications arising in the course of a confinement where the circumstances would be such that the mother could not with safety be removed to Hospital. On the inauguration of the service the practitioners in the District were notified accordingly, and it was pointed out that this Council would be financially responsible for such cases as might arise in Romford. The fee agreed was £3 3s. per visit, to be recovered from those concerned according to the scale of the Council.

#### (vii) Inspection of Nursing Homes, Etc.

Quarterly inspections have again been carried out during the year on behalf of the Essex County Council, which is the Local Supervising Authority, and investigations have been made in respect of Maternal Deaths, Cases of Puerperal Pyrexia, Eye Discharges of an Infant, and Liability of the Midwives to be a Source of Infection, etc.

#### 3.—SANITARY CIRCUMSTANCES OF THE AREA.

#### (i) WATER.

During the year there was again sufficient rainfall to enable us to have an adequate supply of water to meet all requirements in spite of the remarkably mild and dry weather in the early Spring. As recorded at Raphael Park, the total rainfall for 1938 was 21.01ins., compared with 27.33ins. during 1937.

Mr. Bernard W. Bryan, Engineer to the South Essex Waterworks Company has once more kindly supplied me with information, relative to the Company's water supply, which is as follows:

"During the year 1938, the following mains were laid in your Borough:—

4in.	 	 	5,788 yards.
6in.	 	 	1,498 yards.
9in.	 	 	59 yards.

The analytical reports on all analyses made of the water supplied in your Borough showed that the water was pure and wholesome and suitable for the purposes of a public supply.

It is anticipated that the Stour Supply Scheme (1935) will come into supply during the Spring of 1940.

A laboratory has been built and equipped at the Company's Langham Works, and a whole-time chemist and bacteriologist has been engaged; analytical work is about to be commenced."

In addition to the above analyses, samples of water taken from premises in the District by the Sanitary Inspectors were submitted for Chemical and Bacteriological examination. These invariably showed the water to be pure and wholesome in character and suitable for drinking and domestic purposes.

Arising out of Circular 1684 of the Ministry of Health, dated 12th March, 1938, several conferences were held of the Medical Officers of Health of districts supplied by the South Essex Waterworks Company, and, in conjunction with the Company, it was agreed that supplementary to the analyses of the public water supplies carried out frequently and regularly by the Company, monthly samples as from November 1st, 1938, should also be taken in each of the eight districts concerned. It was also understood that for the Annual Report of each Medical Officer of Health, the Company would give a statement as to the purity of the water supply during the year, and in the interval each Medical Officer of Health would be informed of the result of any analysis, which in the opinion of their bacteriologist is unsatisfactory, and likely to be of the slightest menace to health. With regard to the samples taken by the Public Health Departments, should any sample prove unsatisfactory the other Medical Officers would be immediately informed, as well as the Waterworks Company.

#### (ii) Drainage and Sewerage.

Mr. F. V. Appleby, Borough Engineer and Surveyor, has kindly supplied me with the following information relative to the above:—

- (1) Extension of sewerage during 1938.

  New foul sewers—5,956 yards

  New surface water sewers—6,174 yards.
- (2) Number of premises re-drained and connected to sewers— 33.
- (3) Improvements in present sewerage and sewage disposal arrangements included new surface water outfall constructed to serve Chase Cross Road area; the piping of an open ditch through Rise Park Playground; and the overhaul and repair of the filteration plant at Liberty Cottages.

## (iii) Public Cleansing.

This work is undertaken by the Surveyor's Department. The experiment of collecting waste newspapers and other papers from householders separately from the ordinary domestic refuse, which commenced in September, 1937, was continued throughout the year 1938. This was sold, and proved to be well worth while.

## (iv) CLOSET ACCOMMODATION.

During the year, 15 closets were converted to water closets, in accordance with Section 47 of the Public Health Act, 1936.

The following indicates the numbers of the various types of sanitary conveniences, other than Water Closets connected to Sewers, existing in the Borough at the end of the year:—

Water Closets not connected to the Sewer—204. Pail Closets—169.

#### (v) SANITARY INSPECTION OF THE AREA.

The Chief Sanitary Inspector has furnished me with the following Tabular Statement as required by Article 27 (18) of the Sanitary Officers (Outside London) Regulations, 1935.

#### TABLE 9.

/ 1 37 / 337 1 47				
(a) Nature and Number of Ins	spections	during	the yes	
Bakehouses				23
Butchers' Shops and Stalls	***			95
Common Lodging Houses				7
Cowsheds, Dairies, and Milk	shops		***	153
Drainage				649
Factories				64
Food Preparing Premises				104
Fried Fish Shops				38
Ice Cream Premises				77
Infectious Diseases				292
Markets				142
Piggeries				30
Public Baths and Swimming	Pools			21
Public Conveniences	***	***		10
Public Houses				11
Rag and Bone Dealers				10
Rats and Mice (Destruction)	Act, 191	19		1,737
Shops Acts				319
Slaughter-houses				1,700
Smoke Observations				9
Stables				38
Tents, Vans, Sheds				49
Water Supplies				104
P				101
(b) Informal Notices (Number				512
Statutory Notices (Number	r served)		***	8

(c) As the result of the service of notices, the necessary works were completed by the owners or occupiers in all cases except 98, the works for which were still in hand at the end of the year.

#### (vi) SHOPS AND OFFICES.

98 routine inspections were carried out during the year under the provisions of the Shops Act, 1934, relating to ventilation, and temperature of shops, and to sanitary conveniences, and under the Public Health Act, 1936, the result being that 20 informal notices were served. These were all complied with.

#### (vii) Camping Sites.

One site in the area was used for camping purposes during the year. In this district Camping Sites are controlled by the Romford Urban District Council Act, 1931, and therefore no licences were issued by the Local Authority under Section 269 of the Public Health Act, 1936.

The estimated maximum number of campers resident in the area referred to above at one time during the Summer season, 1938, was 50. It should be noted that the occupation was limited mainly to week-ends.

#### (viii) SMOKE ABATEMENT.

During the year, 9 observations were carried out, all proving satisfactory.

#### (ix) SWIMMING BATHS AND POOLS.

Particulars of the Public Baths, and the Privately owned Swimming Pool which is open to the Public, were given in my Annual Report for 1935. There are no alterations to record this year.

As before, several visits have been paid to both premises, and samples of water have been taken for Chemical and Bacteriological Analyses.

As regards the Public Baths, each of the reports stated that the water could be considered suitable and safe for swimming bath purposes. During the course of the year, however, the Borough Engineer carried out a series of experiments in order to get the maximum efficiency from the plant, and the best possible conditions in the pool itself.

Samples taken from the Privately Owned Pool have also shown the water to be suitable for swimming bath purposes. Some difficulty, however, has been experienced in maintaining a suitable Chlorine content, and it has been suggested that a plant for the administration of Chloramine would probably overcome this difficulty. The addition of Ammonia seems to increase not only the efficiency of the Chlorine, but the length of time during which it is able to produce its disinfecting action. The expense of installation of a plant of this nature is, of course, somewhat greater than the installation for Chlorine gas alone, but eventually repays itself in the case of open air pools, where free Chlorine can be rapidly dissipated.

At both the Public Baths, and the Privately Owned Pool, simple routine tests are performed daily by those in charge to determine the Chlorine content, and the Hydrogen Ion Concentration of the water.

#### (x) Eradication of Bed Bugs.

When a house is found to be bug-infested, the occupants are advised by the staff of the Sanitary Department what steps to take to secure eradication of the bugs.

This advice depends largely on the degree of infestation, and was described in detail in my report for 1936.

When a house has been rendered free from bugs, the tenant is advised to communicate with us if any more are seen.

During the year, 7 Council houses, and 31 other houses were found to be infested. These were all disinfested, with the exception of 2 cases, which will receive attention at the beginning of 1939.

The Insecticide used for the above purpose was "Cimex."

Regarding the method employed for ensuring that the belongings of tenants are free from vermin before removal to Council houses from condemned properties, mention was also made in the Report for 1936, and recapitulated in my Report for 1937.

## (xi) Disinfection After Infectious Diseases.

After cases of infectious diseases have been removed to Hospital, or after the termination of illness, if they have been treated at home, the sick room and contents are fumigated with Formalin vapour.

The bedding is exposed to the vapour at the time the room is disinfected, routine steam disinfection not being employed.

## (xii) Rats and Mice (Destruction) Act, 1919.

During the year, the Sanitary Inspectors have continued their endeavours to get occupiers of premises that are rat infested to take the necessary steps to get rid of these vermin.

The rat-catcher, who works under the direction of the Sanitary Inspectors, paid 1,737 visits and re-visits to private houses, slaughter-houses, bakehouses, timber yards, stables, poultry farms, hedgerows, etc., and has employed ferrets, dogs, traps, and baits.

#### (xiii) Factories Act, 1937.

#### TABLE 10.

#### 1. Inspections.

Premises	Ins	spections.		Occupiers Prosecuted.
Factories with mechanical power		51	2	_
Factories without mechanical pow		13	2	
Other Premises under the Act		-		_
			-	
Total		64	4	

#### 2. Defects Found.

			-			
Ni	1100	hor	OF	De	fects	

			Transfer of French			
Particulars.		Found.	Remedied.	Referred to H.M. Inspector.	Prose- cutions.	
Want of Cleanliness		6	5		_	
Overcrowding		_	_		_	
Unreasonable Temperature		_	_		_	
Inadequate Ventilation		-	1		_	
Ineffective Drainage of Floors		-	-		-	
Sanitary Conveniences:						
Insufficient		-		PRE-71-2	-	
Unsuitable or Defective		2	1		_	
Not Separate for Sexes		_			_	
Other Offences		1	1		-	
Total		9	7	-		

## 3. Outwork in Unwholesome Premises-NIL.

The un-remedied defects were outstanding at the end of the year.

## (xiv) Common Lodging Houses.

There is only one Common Lodging House in the District. This has accommodation for 45 persons, and is being administered in a satisfactory manner.

## (xv) TENTS, VANS, SHEDS.

There are only 10 such in the District. Constant supervision is maintained so as to prevent those that may come into the District from remaining in the District for any length of time.

# 4.—PREMISES AND OCCUPATIONS CONTROLLED BY LOCAL ACT, BYELAWS, REGULATIONS, ETC.

#### (i) Fried Fish Shops.

Fish Frying is an offensive trade in Romford under the provisions of the Romford Urban (Offensive Trades) Confirmation Order, 1929. During the year, 3 applications were received for the establishment of this trade, and licences were granted. One was in respect of the transfer of a business to new premises. The other 2 were in respect of new premises. One of these was granted at the end of the year, but the business was not actually commenced during 1938.

Business of this nature is now being carried on in 13 shops in the District.

#### (ii) Ice Cream.

Traders and manufacturers of ice-cream have to be registered under the provisions of the Romford Urban District Council Act, 1931. There are now 50 manufacturers, and 140 vendors on the register.

31 samples of ice-cream were taken for analysis during the year. Of these, 26, or 84% proved to be satisfactory from a bacteriological point of view. Last year, the corresponding percentage was 96.

Investigations were made in respect of the unsatisfactory samples, and after the necessary precautions had been taken, further samples proved satisfactory.

## (iii) Rag and Bone Dealers.

Such business is an offensive trade in Romford, under the provisions of the Romford Urban (Offensive Trades) Confirmation Order, 1929. There are 4 dealers in the District.

## 5.—HOUSING STATISTICS FOR THE YEAR, 1938.

#### TABLE 11.

No. of h	ouses erected	during the	e year :	_		
(1)	By Local Aut	thority		***		68
(2)	By Private E	nterprise				1,706
(1) (a) To ho	n of dwelling- otal Number o ousing defects g Acts)	f Dwelling	g-houses ablic He	s inspecte	ed for Hous-	1,158

(b) Number of inspections made for the purpose ... 2,425

257 596	<ul> <li>(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932</li> <li>(b) Number of inspections made for the purpose</li> </ul>
12	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation
475	(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation
475	tion
	2. Remedy of defects during the year without service of Formal Notices:—
373	Number of dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers
	3. Action under Statutory powers during the year:—
	(a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:
0	(1) Number of dwelling-houses in respect of which notices were served requiring repairs
	(2) Number of dwelling-houses which were rendered fit after service of Formal Notices:
0	(a) By Owners (b) By Local Authority in default of Owners
	(b) Proceedings under Public Health Acts:
	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be
8	remedied
	(2) Number of dwelling-houses in which defects were remedied after service of Formal Notices:
0	(a) By Owners (b) By Local Authority in default of Owners
	(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:
7	(1) Number of dwelling-houses in respect of which Demolition Orders were made
12	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders

	(d) Proceedings under Section 12 of the Housing Act, 1936:
7	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
0	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been made fit
	. Housing Act, 1936, Part IV—Overcrowding.
11 11 89	(a) 1. No. of dwellings Overcrowded at end of year 2. No. of Families dwelling therein 3. No. of persons dwelling therein
18	(b) No. of new cases of Overcrowding reported during year
41 279	(c) 1. No, of cases of Overcrowding relieved during year 2. No, of persons concerned in such cases
	(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the local authority have taken steps for the abatement of overcrowd-
Nil.	ing

Official Representations were made during the year under Section 11 of the Housing Act, 1936 in respect of 14 dwelling-houses. In 7 instances Demolition Orders were made, and in 7, Closing Orders.

Altogether 12 houses were demolished during the year, 10 of these as a result of Orders made during 1937, and 2 as a result of Orders made during 1938. Five now remain to be demolished under existing orders.

In addition, 8 houses were Closed, 1 in respect of property represented in 1936, and 7 in respect of property represented in 1938.

During 1938, 14 families, consisting of 43 individuals were rehoused by the Council on the housing estate at Rush Green.

To relieve overcrowding, 11 families, consisting of 89 individuals were also re-housed on the Rush Green Estate.

For the purpose of ascertaining likely overcrowding in the district, 475 visits were paid to houses during the year.

#### 6.—INSPECTION AND SUPERVISION OF FOOD.

#### (i) MILK SUPPLY.

On examination of the register which is kept at this office of all producers of milk, and retail purveyors of milk in the District, we find that at the end of 1938 there were 24 persons registered as producers, and 68 as retail purveyors. Of these 68 retail purveyors, 10 were also registered as producers in this area.

The various farms and dairies have again been closely inspected, and, where necessary, improvements have been advised and carried out to ensure that the requirements of the Milk and Dairies Orders, 1926 and 1938 are being complied with.

Periodically, samples of milk have been taken, and subjected to bacteriological analysis. During 1938, 64 samples were analysed, 22 of these being for Designated Milks. Of the 42 samples of Ordinary Milk, 18 only proved satisfactory, giving a percentage of 43, which compares with 92 for last year. The explanation of this lower percentage lies partly in the fact that we have adopted a more rigid standard, so as to conform with modern practice elsewhere, and partly because the fault would appear to lie with some producers outside the district.

Of the 22 samples of Designated Milks analysed, 18 proved satisfactory, giving a percentage of 82, which compares with 94, last year. The 4 unsatisfactory samples were in respect of Accredited Milks, the Pasteurised Milks being satisfactory.

When unsatisfactory samples are obtained the Sanitary Inspector goes into the details of production, and distribution, and points out any defects that may exist. Further samples are then taken till they prove satisfactory. When the place of production is outside the District a copy of an unsatisfactory report is sent to the appropriate Medical Officer of Health, who follows up the matter in his own area.

Routine Veterinary Inspections are now carried out by the Ministry of Agriculture and Fisheries by virture of the Agriculture Act, 1937, which transferred the functions of veterinary inspectors of local authorities to veterinary inspectors appointed by the Ministry.

## (ii) MILK (SPECIAL DESIGNATIONS) ORDERS, 1936 AND 1938.

Under these Orders the main designations are 1, Tuberculin Tested Milk; 2, Accredited Milk; and 3, Pasteurised Milk.

When the Essex County Council receive an application for a producer's licence, or renewal of a producer's licence it is the custom to communicate with the Local Authority in whose area the farm is situate in order to ascertain if the producer is complying with the Milk and Dairies Orders, 1926 and 1938. Not until a satisfactory reply has been received can the licence be granted, or renewed.

There are now 40 licences in force within the District under the Milk (Special Designations) Orders, 1936 and 1938.

Of these, 11 firms or individuals retail Tuberculin Tested Milk, 1 retails Accredited Milk, and 23 retail Pasteurised Milk. Three milk producers hold licences to produce Accredited Milk.

#### (iii) MEAT AND OTHER FOODS.

A considerable amount of the Sanitary Inspector's time has again been taken up with the important duty of inspecting meat in slaughter-houses, and butchers' shops and stalls. For this purpose 1,700 visits were paid to slaughter-houses, and 95 visits to other premises. Suitable precautions have again been taken for the destruction of meat found to be diseased.

The following tables set out the post-mortem findings in respect of Cattle, Calves, Sheep and Lambs, and Pigs, also the quantities of foodstuffs surrendered from slaughter-houses, and other premises.

 $\begin{array}{c} \text{TABLE 12.} \\ \text{CARCASES INSPECTED AND CONDEMNED.} \end{array}$ 

	Cattle, excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	Total.	
Number killed (if known)	468	886	284	6,498	3,115	11,251	
Number inspected	468	886	284	6,498	3,115	11,251	
all diseases except Tuberculosis:—							
Whole carcases condemned	-	_	-	12	1	13	
Carcases of which some part or organ was condemned	25	138	_	317	46	526	
Percentage of the number inspected affected with disease other than Tuberculosis	5.3	15.6	_	5.1	1.5	_	
'uberculosis only:							
Whole carcases condemned	1	***	~~	_	6	7	
Carcases of which some part or organ was condemned	69	371	1	_	243	684	
Percentage of the number inspected affected with Tuberculosis	15.0	41.9	0.4	_	8.0	_	

35

TABLE 13.

QUANTITY OF FOOD SURRENDERED FROM SLAUGHTERHOUSES DURING 1938.

		Beasts.	Calves.	Sheep and Lambs.	Pigs.		То	tal.	
Tuberculosis		 10,291 lbs.	10 lbs.	_	3,184 lbs.	Tons.	. Cwts.		Lbs.
Distomatosis	***	 1,306 lbs.	-	518 lbs.			16	1	4
Cirrhosis and Necros	is	 _	_	28 lbs.	155 lbs.	-	1	2	15
Swine Erysipelas		 -	-	_	36 lbs.	-		1	8
Oedema		 _	- 11	484 lbs.			4	1	8
Other Conditions		 1,403 lbs.		132 lbs.	97 lbs.	-	14	2	8
Total		 Tons. Cwts. Qrs. Lbs. 5 16 - 8	Tons. Cwts. Qrs. Lbs.	Tons. Cwts. Qrs. Lbs 10 1 14	Tons. Cwts. Qrs. Lbs.		Cwts.	Qrs.	Lbs.

TABLE 14.

QUANTITY OF FOOD SURRENDERED FROM PREMISES OTHER THAN

SLAUGHTERHOUSES DURING 1938.

	Beasts.	Calves.	Sheep and Lambs.	Pigs.	Rabbits.	Fish.	Shell Fish.	Corned Beef.		Tota	1.	
l'uberculosis		_	_	_	_	_			Tons.	Cwts	. Qrs.	Lbs
Distamatosis		_	-	_	_	MIN-	100			10		
Cirrhosis and Necrosis	_	_		_	_							
Swine Erysipelas	_	_	_	_	_	_		1000				
Dedema	-	-	-			-	pie					
Decomposition	3,169½ lbs.	-	296 lbs.	-	270 lbs.	166 lbs.	205 lbs.	30 lbs.	1	16	3	20
Other Condtiions	852 lbs.	158 lbs.	591½ lbs.	181 lbs.	141 lbs.	47 lbs.	100-ba	-	-	17		10
Total	Tons. Cwts. Qrs. Lbs. 1 15 3 17½	Cwts. Qrs. Lbs. 1 1 18	Cwts. Qrs. Lbs. 7 3 19½	Cwts. Qrs. Lbs. 1 2 13	Cwts. Qrs. Lbs. 3 2 19	Cwts. Qrs. Lbs. 1 3 17	Cwts. Qrs. Lbs. 1 3 9	Cwts. Qrs. Lbs.		Cwts.		Lbs.

## (iv) NUTRITION.

During the year at our Ante-natal and Child Welfare Clinics we have again continued to lay emphasis on the importance of adequate nutrition, and to impress on all the value to be obtained from the simpler foodstuffs.

# 7.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

For purposes of description it is convenient to divide the Infectious Diseases into two groups when dealing with this section, viz.: the Notifiable and the Non-Notifiable.

## (1). Notifiable Diseases.

#### (a) DIPHTHERIA.

This disease has again remained in endemic form, without at any time showing epidemic prevalence.

During 1938, throughout the District, 39 cases were notified but 9 of these were notified from Oldchurch County Hospital. From enquiries made it was ascertained that these latter had acquired the infection outside the District, but were not diagnosed prior to admission, the patient being removed to Hospital for a condition believed to be non-infectious. Under these circumstances the cases have had to be included in the returns for this area. Last year, excluding the Oldchurch cases, there were 62 notifications.

There has been no alteration in the method of dealing with the removal of cases, or in the method of providing antitoxin to practitioners, if they desire a supply.

#### DIPHTHERIA IMMUNISATION.

The details of this scheme are as outlined in my report for 1935, and there have been no alterations in the procedure. Below is a Table setting out the work, and the results that have been achieved during 1938.

#### TABLE 15.

		acceptances nunising Injection		34 Clinics 1,869
		School age who l 2 injections 14		
		age, and over, 2 injections 16		
Totals	37	30	580	8

In addition to the above, during the same period, approximately 83 persons received injections from private practitioners, making a grand total of 738 persons who have received injections under the scheme during the year.

SCHICK TEST.

Number of Schick Test Injections given at the	
Clinics, including Control Injections	1,186
Number who have received such injections at the	
Clinics	593
Percentage found to be immune after receiving 3	
immunising injections	96.5

It is not the practice to give a Primary Schick Test unless there is some definite reason for believing that the individual may be immune, e.g. if there is a previous history of having had an attack of Diphtheria, or a history of having been artificially immunised at some remote period.

Those found to be Schick Positive after 3 immunising injections have been given a 4th immunising injection, which in all cases except 2 has been found to render them Schick Negative. One of these did not proceed further after the 5th injection proved Positive but the other continued with injections, with a Schick Test a month after each. This patient has now had 7 immunising injections altogether, and is still Positive. At the end of the year arrangements were being made to obtain a sample of the blood so that the antitoxin content could be ascertained.

Some of the adolescents received 4 immunising injections as a routine instead of 3 in order to minimise sensitivity. In these cases the first injection consisted of 0.5 c.c. of material instead of 1 c.c.

In connection with this work, my best thanks are again due to the teachers of the various schools for their willing co-operation, and for the enthusiasm which they have shown.

## (b) SCARLET FEVER.

During the year, 125 cases of Scarlet Fever were notified, 4 of these being reported from Oldchurch County Hospital under circumstances similar to those described under the heading "Diphtheria." Last year, excluding Oldchurch cases, 222 were notified. The type on the whole has again been mild.

Towards the end of August, there was a slight epidemic, the result of infection of milk. Fortunately, we had notification at the very commencement of cases at one particular farm. On receipt of this notification steps were immediately taken to pasteurise the

milk, and again we were fortunate, because the retailer had at his premises a pasteurising plant, which he used frequently during periods of warm weather.

On making enquiries at the farm we found that one of the farmer's sons had returned from a holiday at the early part of August. Whilst on holiday, he had developed a sore throat, which was diagnosed as tonsilitis. For a day or two he was confined to bed, and apparently was quite well after that till the end of August when he developed another sore throat. He was removed to the Romford Isolation Hospital, but, in the interval between returning from holiday till he developed his second attack, he had been milking. Another son, and a friend of the family who was residing at the farm for a few days, also developed sore throats, and were removed to Hospital. Both these had been milking. The farmer himself, and one of his employees also had sore throats about this time, and were likewise removed. Both had been milking.

Altogether, we had 18 cases which could definitely be associated with this outbreak. None of these had an onset of symptoms after the milk had been pasteurised. Swabs taken from the patients admitted to the Isolation Hospital were sent for typing purposes to Dr. F. E. Camps at the Department of Pathology, Chelmsford and Essex Hospital, Chelmsford, and the results of all were returned as positive to Streptococcus Pyogenes, Type 2.

The Ministry of Health was informed immediately of the possibility of a milk borne epidemic, and valuable advice was received from Dr. J. R. Hutchinson, one of the Senior Medical Officers. A Veterinary Officer of the Ministry of Agriculture and Fisheries carried out an inspection of the herd at the farm, but nothing having a material bearing on the epidemic was found. Batch samples of milk were taken by the Chief Sanitary Inspector, and these were forwarded to the Ministry of Health Pathological Laboratory for examination. Dr. F. Griffith of this laboratory reported that Haemolytic Streptococci of the human pathogenic group had not been found in any of the samples. The medical practitioners were circularised at an early stage, as also were the Medical Officers of Health of the adjacent districts.

There is no doubt but that many cases of apparently simple sore throat without manifestation of rash might have been present at this time without being brought to our notice, but from the foregoing it will be seen that in tackling epidemics of this nature we can put into operation a closely co-ordinated, and highly technical system for the prevention of spread.

## (c) Enteric Fever.

During 1938, 4 cases were notified. The number for 1937 was 10. Of the 4 cases, 1 proved on blood examination to be Paratyphoid B, and the remaining 3 proved to be Typhoid. Two of the Typhoid cases were notified from Oldchurch County Hospital.

## (d) SMALL POX.

Once more I have to report an absence of cases from the District, but several times I have been called out for consultation by practitioners on doubtful cases. On each occasion the condition has proved to be Chickenpox. When there are few lesions present these two diseases look very similar, hence the necessity for constant vigilance during a Chickenpox epidemic, more especially as, at the present day, the percentage of successfully vaccinated persons is small.

## (e) PUERPERAL PYREXIA.

During the year, 13 cases were reported. Of these 7 were reported from Oldchurch County Hospital.

## (f) OPHTHALMIA NEONATORUM.

Three cases of Ophthalmia Neonatorum were notified, particulars of which are given in Table 22.

## (g) PNEUMONIA.

Thirty-four cases of Pneumonia were reported. Of these, 3 were stated to have been of Influenzal origin.

# (h) Acute Poliomyelitis.

This disease was present in epidemic form in several parts of the Country, but more especially in Essex, during the latter half of the year. In consequence, the practitioners were informed to be on the outlook for early symptoms and signs, especially the Spinal Sign and Amoss' Sign. Arising out of this, I was asked to look at several possible cases. Some of these could be diagnosed at the patient's home as not being Acute Poliomyelitis, but in one or two instances it was considered desirable to have the patient removed to the Isolation Hospital for further observation.

During the year, there were 3 definite cases, and in one instance the patient unfortunately died. None of our cases, so far as we could ascertain, had any connection with the epidemic in the Eastern part of the County.

# (i) Encephalitis Lethargica

No cases of this disease were notified.

## (j) Tuberculosis.

Table 21 sets out the number of notified cases of Tuberculosis, and the number of deaths during the year at certain age periods, distinguishing separately the pulmonary and non-pulmonary forms, male and female.

Of the 32 deaths from Tuberculosis, 9 were un-notified during life, but were discovered from the returns of the Registrar of Deaths. This gives a percentage of 28.1 which compares with 26.7 last year.

It was not found necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or Section 172 of the Public Health Act, 1936.

## (ii) Non-Notifiable Diseases.

The statistics given here are obtained from the returns of the head-teachers of the schools, and give a fair indication of the relative prevalence of these diseases. They are as follows:—-

## TABLE 16.

Measles		 	583 cases.
Chickenpox		 	252 cases.
Whooping	Cough	 	86 cases.
Mumps		 	54 cases.
Rubella		 	8 cases.
Influenza		 	5 cases.

Measles and Chickenpox were in epidemic form during the first quarter of the year—Mumps and Chickenpox during the last quarter.

Mention was made in my last report of the request of the Medical Superintendent of the Romford Isolation Hospital for early intimation of Adult Cases of Measles, so that Convalescent Serum might be obtained at the appropriate time for use for prophylaxis or attenuation. A stock of such serum was actually obtained, and used primarily for patients at the Hospital, but, on request, a supply was given out for the use of practitioners in the Borough.

Regarding the practice adopted in this area for the exclusion of home contacts of patients suffering from infectious diseases, we make use of the Essex County Council Form M.I. 57, which is based on the "Memorandum on Closure of and Exclusion from School," 1927.

#### 8.—SUPPLEMENTARY.

## (i) "Better Health."

2,000 copies of the publication "Better Health," the Official Journal of the Central Council for Health Education were again supplied to this Department each month, and distributed to the Members of the Council, to various schools in the District, to the Maternity and Child Welfare Centres, to the Public Library, and to the Equiry Offices of the various departments of the Council. This booklet continues to be very popular, and is much in demand.

## (ii) Health Posters.

During the year, we again made use of the 5 Poster Frames in the District for the display of Posters, relating to Health matters as supplied monthly by the Central Council for Health Education.

Posters are also received periodically from the Health and Cleanliness Council, and are shown at the Clinics, and at the offices of the Health Department at the Town Hall.

## (iii) National Health Campaign.

Our activities in this respect during the initial part of the campaign in 1937 were outlined in my report for that year.

During January, 1938, prominence was given to the School Medical and Dental Services, including the Milk in Schools Scheme.

During February, attention was given to Special Services for Adolescents and Adults, including those relating to Tuberculosis, and Social Hygiene. In March, the subject was the National Fitness Campaign. Throughout the different months, propaganda was carried out by way of Leaflets, Bookmarks, Mounted Display Cards, Posters, etc.

## (iv) Medical Examinations.

100 medical examinations were carried out for Superannuation purposes, and 96 in connection with the Air Raid Precautions Services.

# (v) Air Raid Precautions.

In pursuance of the requirements of the Air Raid Precautions Act, 1937, a considerable amount of work has devolved on this Department.

At the July meeting of the Air Raid Precautions Committee, I submitted a Scheme outlining the Casualty Services required for this Area. This embraced First Aid Parties, Ambulance Services, First Aid and Decontamination Posts, Hospitals, Launderies, and Records.

During the Crisis, in September, I based my Emergency plans on the Scheme already submitted, and purchased a stock of equipment. The greatest difficulty at that time was the finding of sufficient trained personnel, but other difficulties also presented themselves.

Since then, steady progress has been made in the preparation of the General Scheme, and in the training of personnel, both in Anti-Gas measures, and First Aid.

TABLE 17.

MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES.

	014	D					Ophth-						Tube	rculosis	
Month.	Scarlet Fever.	Diph- theria.	Fever.	Puerperal Pyrexia.	Ery- sipelas.	Pneu- monia.	almia Neona- torum.	Cerebro Spinal Fever.	Dysen- tery.	Polio- enceph- alitis.	Polio- myelitis.	Malaria.	Respi- ratory.	Non-res- piratory.	Total.
January	4	-	_	-	1	5	_	1	2	_	_	-	9	1	23
February	7	1	-	-	1	1	-	_	2	-	_	-	5	1	18
March	11	2	-	1	2	3	_	1	4	-	_		9	_	33
April	11	5	-	-	2	1	1	-	-	_	_	-	5	_	25
May	9	3	-	1	-	4	1	-	-	1	_		16	1	36
June	18	4	-		1	1	_	-	-	-	_	_	7	1	32
July	8	6	-	-	5	3		-	-	-	1	_	5	1	29
August	24	1	3	2	-	1	-	-	-	-	1	1	8	1	42
September	6	5	-	1	7	-	-	-	-	1	_	-	5	2	27
October	10	6	-	2	4	2	1	-		-	1	-	10	2	38
November	12	4	_	5	3	2	-	-	-	-	-	-	13	3	42
December	5	2	1	1	3	11	-	1	1	-	-	-	4	2	31
Total	125	39	4	13	29	34	3	3	9	2	3	1	96	15	376

TABLE 18.
DISEASES NOTIFIED DURING THE YEAR, DIVIDED INTO AGE GROUPS.

Disease				Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	Total
Scarlet Fever				1	1	3	8	8	63	13	10	12	4	2	-	125
Diphtheria	***			-	1	1	7	3	14	4	3	4	2	-	-	39
Enteric Fever				-	-	-	-	-	-	-	-	3	-	1	-	4
Puerperal Pyrexia	***			-	-	-	-	-	-	-	-	12	1		-	13
Erysipelas	***	***	-41	-	-	1	-	-	1	-	1	7	8	9	2	29
neumonia	***			5	1			1	7	2	1	9	6	1	1	84
phthalmia Neonatoru	m			3	_	-		-	_	-		-			-	3
Cerebro-Spinal Fever	***			-	-		-	1	-	1	-	1	_	-	-	3
Dysentery				-	_	-	-	1	2	1	1	2	2	-	_	9
Polioencephalitis	***			-	_		-	-	-	1	_	1	-	-		2
Poliomyelitis	***				_	-	-	1	_	1	-	1	-	_	-	3
Malaria	***			-	-	-	-	_	-	-	-	1	_	_	_	1
Total				9	3	5	15	15	87	23	16	53	23	13	3	265

TABLE 19.

DISEASES NOTIFIED DURING THE YEAR, DIVIDED INTO WARDS.

Disease.		Gidea Park and Noak Hill Ward.	South Ward.	Town Ward.	West Ward.
Scarlet Fever	 . 32	30	25	17	21
Diphtheria	 . 6	3	22	5	3
Enteric Fever	 . 1	- 31	3	_	-
Puerperal Pyrexia	 . 3		9	_	1
Erysipelas	 . 13	5	4	6	1
Pneumonia	 . 21	5	5	1	2
Ophthalmia Neonatorum	 . 2		1		-
Cerebro-Spinal Fever	 	2	1 '		
Dysentery	 . 1	5	8	_	
Polioencephalitis	 . –	_	2	-	-
Poliomyelitis	 	1	-	1	1
Malaria	 . –	_	1	_	-
Tuberculosis: Respiratory	 . 32	19	23	12	10
Non-Respiratory	 . 7	7	-	1	-
Total	 118	77	99	43	39

TABLE 20.

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1938, AND HOSPITAL ADMISSIONS.

Disease	Disease.		Cases Notified.	Cases Admitted to Hospital.	Total Deaths	
Scarlet Fever			 125	93	1	
Diphtheria			 89	39	5	
Enteric Fever			 4	3	-	
Puerperal Pyrexia			 13	13		
Erysipelas			 29	17	1	
Pneumonia			 84	25	28	
Ophthalmia Neonatoru	m		 3	2	_	
Cerebro-Spinal Fever			 3	2	1	
Dysentery			 9	3	_	
Polioencephalitis			 2	2	1	
Poliomyelitis			 3	3	-	
Malaria			 1	DALANT DESIGNA	1000	
Total			 265	202	87	

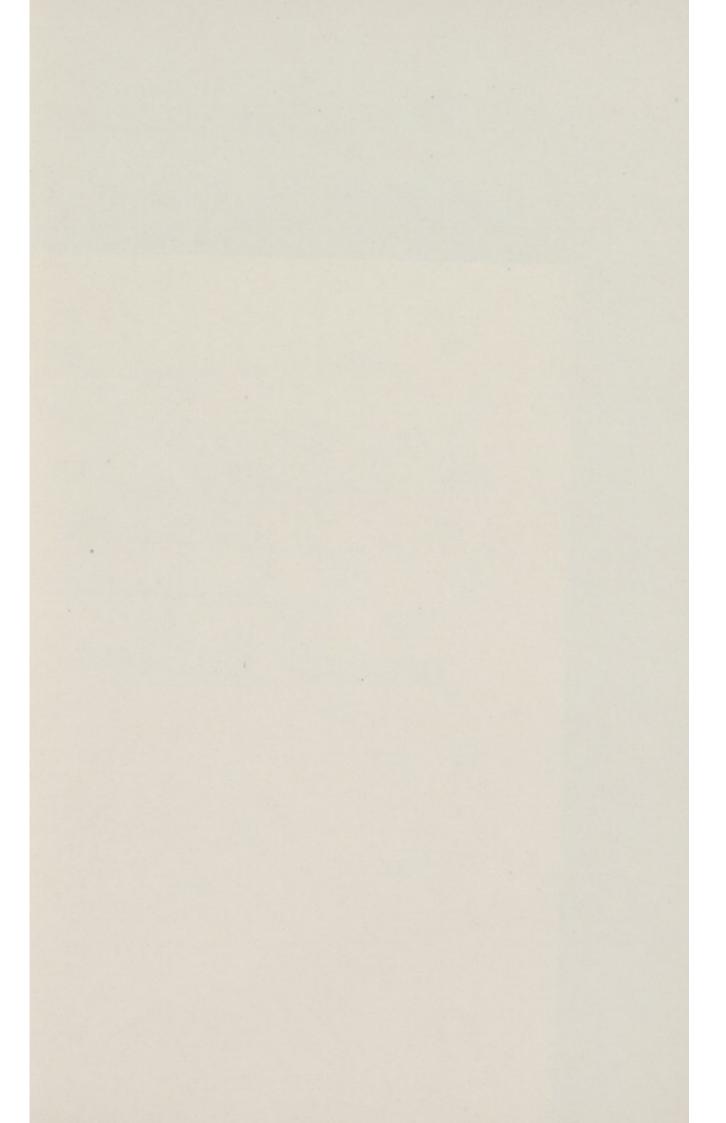
TABLE 21.

TUBERCULOSIS—NEW CASES AND MORTALITY DURING 1938.

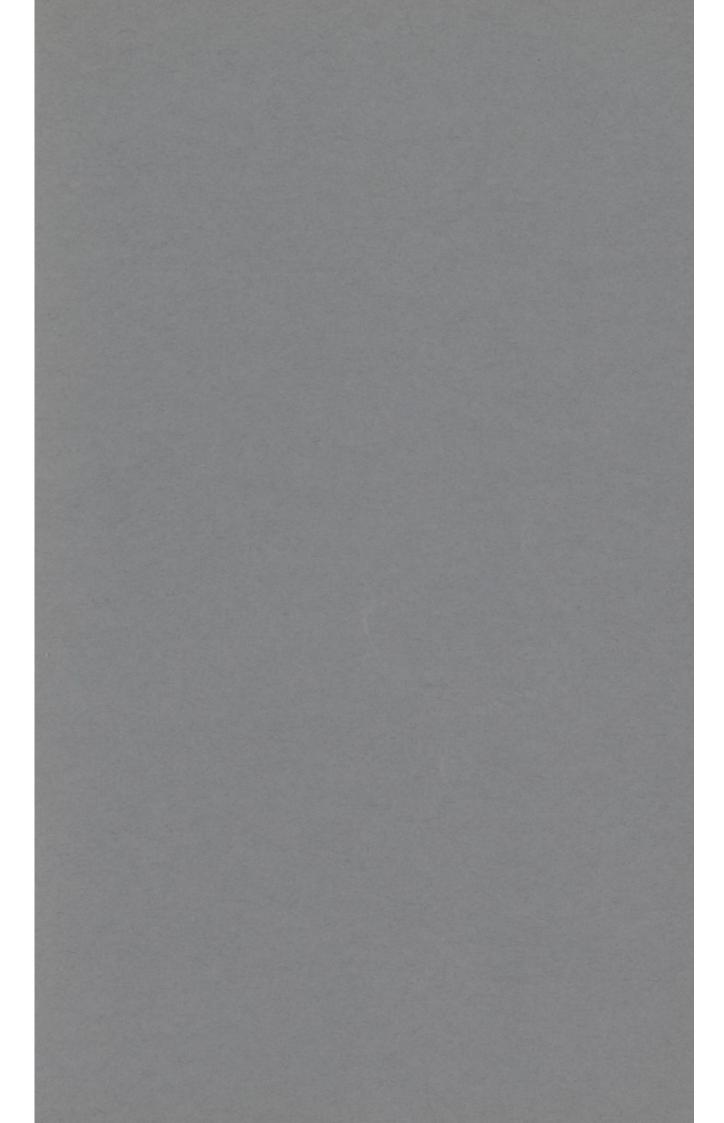
					NEW	CASES			DEA	DEATHS			
	Age Peri	ods		Resp	iratory	Non-Respiratory			atory	Non-Respiratory			
				M.	F.	M.	F.	M.	F.	M.	F.		
0				-	-	-	-	-	-	1	_		
1			***	1	-	-	-	-	-	-	1		
5				-	4	6	1	-	-	1	-		
15				12	11	1	-	2	2	-	_		
25				13	19	1	4	-	5	1	_		
35				11	7	1	1	5	2	-	_		
45				6	2	- 10	-	2	1	1	_		
55				7	2		-	4	2	-	-		
65 an	d upwarda			7000	1	7	-	1	1		-		
	To	tal		50	46	9	6	14	13	4	1		

TABLE 22.
OPHTHALMIA NEONATORUM.

CASES		Y7:-:	77:-i	(Patal	
Trea	ated	Unimpaired	Impaired	Blindness	Deaths
At Home	In Hospital				
1	2	3	_	_	_
	Trea	Treated  At Home   In Hospital	Treated Vision Unimpaired  At Home In Hospital	Treated Vision Vision Unimpaired Impaired  At Home In Hospital	Treated Vision Vision Total Unimpaired Impaired Blindness







Brentwood U. acmount?

Chelmoford M. B.

Chingford B.

Hornshurch U w/T.

Romford B.

Hertford R. Herto CD.

