

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

Contributors

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BOROUGH OF WEMBLEY.

I N T E R I M R E P O R T

of the

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1941

A.G. MORISON, M.A., M.D., D.P.H.,

Medical Officer of Health.

WEM 22

INTERIM REPORT

of the

MEDICAL OFFICER OF HEALTH

for the Year 1941

To the Mayor, Aldermen and Councillors of the Borough.

Mr. Mayor, Ladies and Gentlemen,

In accordance with Ministry of Health Circular No. 2604, the Annual Report on the Health Services of the Borough must again be an Interim one for the year, 1941; and as were the reports for 1939 and 1940 the present one is brief, details and figures already presented in monthly reports not being repeated. In accordance with the instructions of the Circular, too, certain essential statistics are omitted at present.

During 1941 the activities of the Public Health Department continued to increase and intensify themselves, plans were set for possible war emergencies, the Casualty Civil Defence Organisation was called upon for constant adjustment in the light of experience, and in due course a story may be told of the various health services which, at any rate for the first three years of the war, were carried on with successful expansion and of the health of the community remaining good in spite of the total war now being waged. As the war goes on the public, in fact, must depend upon having wider and still more detailed health services, and the

statistics now submitted record the results of an endeavour on the part of one and all to rise to the responsibilities placed upon them.

Health education has continued to be very readily received. Diphtheria immunisation, however, has not yet passed the 50% mark in children. Much attention has been paid to distributing detailed information regarding basic food principles. Such new activities as the opening of Day Nurseries, (December 1941), the distribution of supplementary clothing coupons for expectant mothers, co-operation with the Ministry of Food in their scheme for the distribution of fruit juices and Cod Liver Oil to young children at the Health Clinics, have all been a means of bringing the Health Department before the public, and the figures are proof that the public have readily received the services offered.

1.

CIVIL DEFENCE.

Civil Defence has of course continued to call for much responsibility in the Department, and those individual families either who have suffered in Wembley or who have been moved into the Borough have brought their special problems. The following information is disseminated as appropriate:-

"The following particulars relate to the various health services available in this Borough. Anyone who has been having medical treatment is strongly advised to seek to have it continued as appropriate.

Those entitled to medical benefit under the National Health Insurance Acts are able to obtain treatment from Doctors who are on the

Insurance list. In Wembley practically all the Doctors in general medical practice are on this list, a copy of which may be seen at the General Post Office, High Street, Wembley, or at the Public Health Department. When a person without sufficient means to provide a private Doctor either desires to attend a Doctor's Surgery or requires a Doctor to visit, the services of the local Relieving Officer should be sought and the Relieving Officer will pass on the request to the District Medical Officer. Relieving Officers:-

Mr. Pedel, 2, Oxford Villas, Harrow Road, Sudbury, Wembley	- ARNold 3253
Mr. Walton, 48, Station Road, Harrow	- HARrow 1252
Mr. Ashmead, 168, The Broadway, West Hendon	- HENdon 1302

and the District Medical Officers (also Public Vaccinators):-

Dr. Dyson, 5, High Road, Wembley.
Dr. Routledge, 1, Colin Close,
Sheaveshill Avenue, N.W. 9.

HOSPITALS. Hospital advice and treatment is generally most appropriately sought through the doctor who has been consulted, as the doctor is aware of the various specialities treated at certain hospitals in and around London.

Middlesex County Council's General Hospitals with out-patient departments:- Redhill County Hospital, Edgware, and The Central Middlesex County Hospital, Acton Lane, N.W. 10.
Voluntary Hospitals:- The Wembley Hospital, Fairview Avenue.

In-patient accommodation available for approved cases, and attention available for sudden accident cases.

TUBERCULOSIS or suspicion thereof:-

Tuberculosis Dispensary,

Pound Lane, Willesden

Mondays - 2.00 p.m.

Tuesdays - 10.00 a.m.

Thursdays - 10.00 a.m.

Fridays - 10.00 a.m.

Chest Clinic,

Redhill Hospital, Edgware.

Patients seen by appointment

only - PHONE EDGware 3406

VENEREAL DISEASES or suspicion thereof -

Special Clinics:-

Central Middlesex County Hospital,

Acton Lane, Willesden, N.W. 10.

Monday - Friday - 8.30 a.m. - 6.30 p.m.

Saturday - 8.00 a.m. - 12 noon.

West Middlesex County Hospital, Isleworth.

As at Central Middlesex Hospital

except Thursday - 8.30 a.m. - 7.00 p.m.

In addition a list of London Hospitals is known to all doctors and the list may also be consulted at the Public Health Department.

HEALTH CLINICS of the Wembley Borough Council for expectant and nursing mothers and children under 5 years. Dental services - clinics for women requiring advice in the special women's diseases - diphtheria immunisation. Information regarding days and hours of attendance available at the Public Health Department, Town Hall.

One Tree Hill Clinic - Bridgewater Road.
Ealing Road - St. Andrews Hall, Ealing Road.
Perrin Road Clinic - Perrin Road.
College Road Clinic - College Road.
Monks Park Clinic - Monks Park.
Stag Lane Clinic - 247, Stag Lane, N.W. 9.
Slough Lane Clinic - Kingsbury Free Church,
Slough Lane.

SCHOOL CLINICS of Middlesex County Education
Committee:-

Wembley Hill School, Wembley Hill.

Minor ailments - Monday at 9.30 a.m.
Ophthalmic - Tuesday at 9.30 a.m.
(by appointment only).
Dental - Daily except Monday
& Tuesday mornings
(by appointment only).

County Clinic, Stag Lane.

Minor ailments - Monday at 9.30 a.m.
Ophthalmic - Wednesday at 9.30 a.m.
(by appointment only).
Dental - Daily at 9.30 a.m.
(by appointment only).
Orthopaedic - 3rd Friday in every month
in afternoon.
Massage - Tuesday & Friday in the
afternoon (by appointment
only).

AMBULANCE SERVICE. Contact:-

No. 1 - Headquarters, Fire Station, Harrow Road,
Wembley. WEMbley 2222.

or

No. 2 - Kingsbury Sub-Station, The Mall,
Kenton Road, Harrow. WORDsworth 2096.

Apart from accidents or sudden illness, a medical
certificate is required that the patient is not
in a fit state to travel in a vehicle other than
an ambulance.

DISTRICT NURSING ASSOCIATIONS:-

Wembley District Nursing Association,
80, Wembley Park Drive.
WEMbley 4913.

Kingsbury District Nursing Association,
1, Mersham Drive, N.W. 9.
COLindale 6445.

REGISTRAR OF BIRTHS AND DEATHS:-

Mr. F.H. Doubtfire,
26, Lowlands Road, Harrow - BYRon 2300
Mr. C.S. Wyles, 182, Burnt Oak
Broadway, Edgware - EDGware 0024
Mrs. J. Clough, 55, Church Road,
Hanwell - EALing 3331.

A considerable amount of administrative duty has been called for with regard to the Casualty Services. These services were tested in the Battle of London and it may be justly claimed that the services proved themselves capable of giving all that was expected of them. As an indication of the multiplicity of the matters dealt with in circulars from the Central Authorities, and of the necessity for constant reconsideration it may be stated that during the year 361 "instructions" were issued to Depot Superintendents, the largest number in any one month being 56 and the smallest number 20; to the Sisters at the First Aid Posts 225 "instructions" were issued, the largest number in any one month being 42 and the smallest number 12; while 26 letters dealing with details of medical treatment referred to in circulars, with equipment and with the training of personnel and with other administrative matters were issued to the Medical Officers in Charge of the First Aid Posts.

2. CERTAIN VITAL STATISTICS 1941, as
supplied by the Registrar General.
 (Comparative 1940 figures within brackets).

Live Births.

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	810 (824)	737 (766)	1,547 (1,590)
Illegitimate	32 (27)	44 (25)	76 (52)

Stillbirths.

	<u>Male</u>	<u>Female</u>	<u>Total</u>	
Legitimate	27 (22)	18 (20)	45 (42)	(Rate per 1,000 - total
Illegitimate	1 (2)	1 (-)	2 (2)	(Live & Stillbirths) 28.14) (1940 - 32.32).

Maternal Mortality.

Deaths from Puerperal Sepsis ..	3 (2)
Other Puerperal Causes	4 (3)
Maternal Mortality Rate per 1,000 live births	4.42 (3.05)
Maternal Mortality Rate per 1,000 total (Live & Still) Births	4.30 (2.97)

Infantile Mortality.

Deaths of Infants under 1 year of age:-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	38 (54)	22 (39)	60 (93)
Illegitimate	4 (2)	4 (-)	8 (2)

Death rate of infants under 1 year of age:-

All infants per 1,000 live births	42.89	(57.86)
Legitimate infants per 1,000 legitimate live births	37.79	(58.49)
Illegitimate infants per 1,000 live Illegitimate births	105.2	(38.46)
Deaths from Cancer (all ages)	202	(185)
" " Measles (all ages)	2	(1)
" " Whooping Cough (all ages) ..	1	(1)
" " Diarrhoea (under 2 years) ..	8	(20)

Causes of Deaths during the year.

1940 total.	<u>Causes of Death</u>	<u>M</u>	<u>F</u>	<u>Total</u>
1159	All causes	536	519	1055
1	Typhoid & Para-typhoid Fevers	-	-	-
1	Measles	1	1	2
-	Scarlet Fever	-	-	-
1	Whooping Cough	1	-	1
-	Diphtheria	-	3	3
9	Influenza	6	5	11
-	Encephalitis Lethargica	-	-	-
3	Cerebro-spinal Fever	3	2	5
42	Tuberculosis of respiratory system	37	27	64
7	Other Tuberculosis	-	3	3
4	Syphilis	4	3	7
-	General paralysis of insane etc.	-	-	-
185	Cancer	98	104	202
7	Diabetes	5	10	15
-	Cerebral Haemorrhage	39	37	76
243	Heart disease	97	124	221
-	Aneurysm	-	-	-
38	Other circulatory diseases	20	20	40
49	Bronchitis	26	22	48
55	Pneumonia	36	32	68
17	Other respiratory diseases	11	10	21
14	Peptic Ulcer	6	3	9
20	Diarrhoea (under 2 years)	5	3	8
8	Appendicitis	2	4	6
29	Other digestive diseases	10	12	22
28	Nephritis	9	11	20
2	Puerperal Sepsis	-	3	3
3	Other Puerperal Causes	-	4	4
21	Premature Births	13	8	21
28	Congenital Malformation; Birth Injury; Infant Dis.	7	4	11
10	Suicide	4	6	10
11	Road Traffic Accidents	8	2	10
121	Other violent causes	28	16	44
102	All other causes	60	40	100

The number of deaths, other than from suicide and road traffic accidents, from violent causes is 44. Similar numbers in 1939 and 1940 were 48 and 121 respectively. The increase in 1940 was, of course, due to air raid casualties.

3. CERTAIN OTHER ESSENTIAL STATISTICS.

Birth Notifications.

	<u>At home.</u>	<u>In Hospital.</u>	<u>In Nursing Home.</u>	<u>Totals.</u>
Doctors	61	758	151	970
Midwives	466	23	78	576
Parents	2	-	-	2
Totals	529	781	229	1,539
Percentages	34.37	50.75	14.88	100.00

Deaths.

	Percentage of total deaths under 1 year.	Percentage of total deaths under 50 years of age.	Percentage of deaths taking place in Hospitals.
1937	9.46	36.65	43.80
1938	9.78	34.60	50.99
1939	7.96	31.73	33.56
1940	7.00	33.61	35.37
1941	6.45	30.14	43.00

Infantile Mortality.

Of the 67 deaths which occurred in children who never celebrated their first birthday, 26 occurred within the first week of life (38.8%) while 41 occurred within the first four weeks of life (61.2%). In the following table are shown the numbers of infant deaths from the various causes, according to age at death.

Deaths from stated causes at various ~~ages~~ under
1 year of age.

Cause of Death (extracted from weekly returns of local Registrars, or from inward transfers of Registrar General.)	Under 1 week	1 - 2 weeks	2 - 3 weeks	3 - 4 weeks	Total under one month	1 - 3 months	3 - 6 months	6 - 9 months	9 - 12 months	Total deaths under 1 year
Prematurity	15	1	-	-	16	-	-	-	-	16
Congenital defects	1	-	1	-	2	-	-	-	-	2
Gastro Enteritis	-	1	3	1	5	-	1	1	-	7
Broncho Pneumonia	2	-	3	1	6	-	2	1	4	13
do. with Gastro-Enteritis	1	-	-	-	1	-	2	-	-	3
Broncho Pneumonia with Prematurity	2	1	-	1	4	1	-	-	-	5
Bronchitis	-	-	-	-	-	1	2	-	1	4
Atelectasis	1	-	-	-	1	-	-	-	-	1
Haemorrhage of the new born	-	1	-	-	1	-	1	-	-	2
Intra-cranial haemorrhage	1	-	-	-	1	-	-	-	-	1
Accident	-	-	-	-	-	-	-	1	-	1
Marasmus	1	-	1	-	2	3	-	-	-	5
Asphyxia Neonatorum	2	-	-	-	2	-	-	-	-	2
Meningitis	-	-	1	-	1	2	-	-	-	3
Tuberculosis	-	-	-	-	-	-	1	-	-	1
Lobar Pneumonia	-	-	-	-	-	-	-	-	1	1

26 4 9 3 41 7 9 3 6 67

Infantile Mortality 1937 - 1941.

<u>Year.</u>	<u>Wembley.</u>	<u>England & Wales.</u>
1937	43.62	58
1938	43.31	53
1939	39.12	50
1940	57.86	55
1941	42.32	59

Infantile Mortality during 5 years (8753 births -
394 deaths under 1 year).
45.01

In the previous year comment was made on the sudden rise to 57.86 per 1,000 in the Infant Mortality rate. Its return in 1941 to just over 40 is probably an indication that the 1940 figure was in fact, due to abnormal war and climatic conditions - (1) Gastro-Enteritis from the combination of the climatic conditions with the beginning of air raid conditions, and (2) the still further rise due to pneumonia, bronchitis and other respiratory complaints contemporaneous with hard weather conditions and the upset to normal family life by air raids and shelter conditions.

Prematurity.

In the analysis submitted on page 12 prematurity has been considered to be the first cause of death, if no abnormality or birth injury, congenital or otherwise, was mentioned in the death certificate. There were 16 such cases.

Prematurity accounted for more than half of the deaths of infants in the first week of life, and in the second week period one other death occurred from prematurity. Of the neo-natal mortality in the first month of life prematurity accounted for 39% of the deaths.

The stubborn core of infant mortality is still in the first week of life and its greatest cause

is prematurity. This is the greatest single factor in human mortality and possibly in human illness and so far it has not had the systematic study it deserves. While it is known that in the mother toxæmia, hydramnios and multiple pregnancy are the causes of premature confinement, and much research has been done on the prevention and treatment of illness in the ante-natal mother, the effect of such conditions on the unborn child are not yet understood to the same extent.

In America (Chicago) it has lately been claimed that the infant mortality rate has been reduced to the 20's instead of remaining in the 50's by giving special consideration to the provision of facilities for "immature" infants under 5 lbs. in weight at birth. Such provision appears to consist of full hospital facilities for the mother and premature baby with adequate warmed conveyance and specially trained staff and equipment on arrival at the hospital. New Zealand has also been giving special attention to the problem. Material reduction in the infant mortality rate must now depend upon research into the cause of the premature infant and its prevention or treatment.,

Maternal Mortality.

Three deaths from puerperal sepsis were recorded in 1941, and four deaths occurred from other puerperal causes.

Rate per 1,000 total births (Live and Still) 1937-1941

<u>Year.</u>	<u>Wembley.</u>	<u>England & Wales.</u>
1937	1.03	3.11
1938	1.55	2.97
1939	6.15	2.93
1940	2.63	2.16
1941	4.19	2.23

Maternal Mortality during 5 years (9029 births -
28 Maternal Deaths)
3.10

Marriages.

In Churches	1,035
At Registry Office ..	336

Ambulance Service.

(1) Infectious Diseases.

Removals carried out:-

Quarter ending	<u>31.3.41</u>	<u>30.6.41</u>	<u>30.9.41</u>	<u>31.12.41</u>
	51	24	10	32
Total	117.			

(2) Non-infectious cases.

General removals (Sickness, etc.) ..	2,206
Maternity removals	173
Accidents	466
Illness (Sudden)	119
Not required on arrival	56
Malicious calls	3
Passed to Infectious Diseases Ambulance	1
Carried out by other Authorities ..	3
Carried out for other Authorities ..	1
Accidents carried out by other Authorities	1
Enemy Action Calls	3

Total: 3,032

The general rule with regard to this service is that the journey is not to be more than 15 miles in any one direction beyond the Borough boundary. In order to make the fullest use of the hospital service throughout the London Region several of the hospitals have been grouped not only geographically but also from the point of view of the type of case which the hospitals may most appropriately admit, and occasionally the hospital quite appropriate for

a Wembley patient may now be beyond the above-mentioned 15 miles limit. In such cases the Civil Defence and Fire Brigade Committee have agreed that the ambulance service may be provided for a journey up to about 30 miles from Wembley, provided the Medical Officer of Health and the Chief Officer of the Fire Brigade be satisfied that arrangements have been made by the doctor in charge of the patient in accordance with the various war-time agreements existing between hospitals either Voluntary, Municipal or other Local Authority.

Maternity and Child Welfare Clinics.

Number of attendances by children	
under 1 year of age	28,771

Number of attendances at all the	
Health Centres by children	
between the ages of 1 - 5	19,541

The percentage of notified live births represented by the number of children who first attended at the centres during the year and who on the first attendance were under 1 year of age in 1941 was	96.9
(in this figure is excluded the number of children who were known to have previously attended a centre in another district).	

Number of attendances made by women	
at the ante-natal clinics	7,199

Total number of women who attended	
for the first time	1,364

Percentage of total notified births (live and still) represented by the total number of women who attended the clinics for the first time during the year	88.6
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Infant Welfare Clinics.

Attendances of children under 1 year of age.

Clinic.	Total Attendances.	Average attendance per session.
Ealing Road	5,078	49
Monks Park	2,993	30
One Tree Hill	4,101	36
Perrin Road	4,165	40
Slough Lane	4,944	48
Stag Lane	7,130	47

Toddlers Clinics.

Attendances of children of between the ages
1 - 5 years.

Clinic.	Total Attendances.	Average attendance per session.
Ealing Road	3,532	28
Monks Park	2,414	24
One Tree Hill	1,950	15
Perrin Road	3,554	30
Slough Lane	3,986	38
Stag Lane	3,886	26

Special Eye Examination of children under 5 years.

90 children referred to Middlesex County
Ophthalmic Surgeon.

(1940 - 69).

Ante-Natal Clinics.

Attendances of expectant mothers.

Clinic.	Total Attendances.	Average attendance per session.
Ealing Road	1,130	22
Perrin Road	1,100	22
Slough Lane	837	16
Stag Lane	1,796	18
One Tree Hill	1,501	15
Monks Park	811	16

Number of attendances of ante-natal patients
at the Harrow Clinic during 1941 79

Special consideration has been given to the development of the ante-natal clinic services and the co-operation existing with the doctors and midwives in family practice is particularly gratifying.

The main aim of the ante-natal clinic is the maintenance of good health and the prevention of the illnesses or complications of pregnancy. The advice given falls mainly under the following headings:-

- (1) The maintenance of good health and the prevention of illness.
- (2) The preparation for motherhood.
- (3) The dissemination of information regarding social welfare.
- (4) Consideration of the arrangements for confinement, and
- (5) Co-operation with the family medical attendant or midwife, and with the County and other hospitals.

The endeavour is that the advice always be topical and during the war the officers, especially the Health Visitors, have kept themselves up to date regarding the policy of the Ministry of Food. Advice is given upon the milk schemes and priority egg schemes and mothers are assisted in their applications for such special foods. Accessory vitamin and mineral foods are advised as necessary. The importance of cleanliness of the mouth is stressed and proper dental treatment is available. The importance of rest and exercise and of suitable clothing is pointed out; when necessary special maternity belts may be supplied at cost price.

Talks on the general hygiene of the body are given. Books are lent and booklets sold. Baby garments are displayed, suitable patterns being available. The economy of home-made garments, cot mattresses, etc. is discussed. The washing of baby garments is demonstrated. The necessity of a cot and pram for the baby is pointed out and practical assistance is available - especially through the Voluntary Helpers Association. The mothers are assisted in their applications for supplementary clothing coupons. Appropriate cases may be referred to Societies such as The Army, Navy and Air Force Families Association, to The Army Welfare Officer, to The Citizens Advice Bureau and to The Poor Man's Lawyer.

Advice is given regarding maternity benefit under the National Health Insurance Acts as well as there being a miscellany of appropriate addresses, forms of certificates and such-like pertinent information.

If a hospital confinement be appropriate, assistance to find a hospital is given, and the ambulance service explained.

The various services of the Council such as the Home Help Service are considered and explained. If a home confinement be desired, the suitability of the home and the best arrangements possible are discussed at a visit to the home by the Health Visitor. Special sterilised Maternity Outfits are provided according to the Council's Economic Circumstances scale.

Various reports regarding home circumstances and records of progress are given to the hospitals, while the family doctor or midwife is always informed of any deviation from the normal throughout the pregnancy.

During the year 522 women were referred to various hospitals for arrangements regarding confinement:-

For medical reasons	140
Home conditions unsuitable.. ..	133
Patients desired hospital accommodation	249

Wembley births taking place in Hospital -

(a) Middlesex County Council.

Redhill	351
Central Middlesex	34
Hillingdon	1
Middlesex County Maternity Hospital, Bushey.. ..	221
West Middlesex.. ..	1

608

(b) Other Hospitals.

City of London	5
Queen Charlotte's	28
Middlesex	4
St. Mary's.. .. .	11
Queen Mary's	83
University College	3
Royal Northern	1
Bearstead Memorial	3
Hammersmith	1
Paddington.. .. .	2
Willesden Maternity	27
Emergency Hospital, Wokingham ..	1
County Hospital, Huntingdon ..	1
Twyford House Emergency Hospital, Thorley	1
Davenport House, Oxford (Evacuee Hospital)	1
Oldchurch County Hospital, Romford	1

173

Year.	Total No. of Births notified.	No. of births at home.	No. of births in hos- pital.	No. of births in M.C.C. hospitals (inc. pre- ceding column.)	Births in Private Nursing Homes and at Private Addresses.
1937	1,846	772 41.8%	734 39.8%	175 9.5%	340 18.4%
1938	1,821	648 35.6%	854 46.9%	368 20.2%	319 17.5%
1939	1,782	505 28.3%	960 53.9%	619 34.7%	318 17.8%
1940	1,576	578 37.3%	749 47.5%	607 35.5%	240 15.2%
1941	1,539	529 34.4%	781 50.7%	608 39.5%	229 14.9%

Since 1938 about half the births has been taking place in hospital and the percentage of births in Middlesex County Hospitals has risen very quickly from 20.2% in 1938 to 39.5% in 1941. The figure mentioned as the "target" one by the County Council (the Hospital Authority) is 40%. While the figure 40% is sufficient to include all women in whose cases it has been considered necessary to admit to hospital for medical reasons or for serious unsuitability of the home environment, it is far from accommodating all women who have desired admission to hospital. Quite apart from war conditions there has been, in recent years, a growing demand on the part of women themselves to have their confinements in hospital. Apart from the necessity of a hospital bed for certain medical abnormalities and illness and unsuitable home environment the problem as to the general policy - confinement at home or confinement in hospital - is not entirely a medical one, but there is no doubt at all upon the attitude of the women themselves, and if that demand is to be met the Hospital Authority must look forward to having to provide many additional maternity beds.

Post-Natal Clinics.

Clinic.	Total Attendances.	Average attendance per session.
Stag Lane	73	4
One Tree Hill	168	8

Gynaecological Clinics.

Clinic.	Total Attendances.	Average attendance per session.
Stag Lane	53	3
One Tree Hill	115	10

Birth Control Sessions.

Clinic.	Total Attendances.	Average attendance per session.
Perrin Road	150	13
Stag Lane	90	8

Maternity Outfits.

Number of Maternity Outfits supplied
during the year 382

Home Helps.

No. of cases attended 38
No. of Home Helps (Dec. 1941)
on panel 4

Prior to the entry of women into war-time industry this scheme was developing in a way much appreciated by the public, but during the last twelve to eighteen months it has become increasingly difficult to obtain a sufficient number of women to undertake this important service.

Convalescent Home Treatment.

Convalescent home treatment has been arranged for 8 persons.

Ultra Violet Light and Massage.

Number of children treated during
the year - 38

Milk.

Number of milk grants renewed	511
Number of new grants made	138
	<hr/>
	649
	<hr/>

Government Milk Scheme introduced in
July, 1940.

Obstetric Consultant Service.

Consultant called in by private
medical practitioners - 10

Dental Services.

Numbers referred to the dental clinic by
Medical Officers.

<u>Expectant Mothers.</u>	<u>Nursing Mothers.</u>	<u>Pre-School Children.</u>
721	170	513

	<u>Expectant Mothers.</u>	<u>Nursing Mothers.</u>	<u>Pre-School Children.</u>
Nos. who received treatment	593	159	482
Nos. made dentally fit	534	137	396
Nos. of treatments -			
(a) Fillings			
(i) in temporary teeth	-	-	327
(ii) in permanent teeth	228	77	-
(b) No. of teeth extracted	1,698	476	685
(c) No. of administrations of general anaesthesia	404	100	219
(d) No. of patients supplied with dentures	95	35	-
(e) No. of dentures supplied	141	54	-

Total attendances at Dental Clinics.

			<u>Children.</u>	<u>Mothers.</u>
1939	..	..	1,093	1,772
1940	..	..	1,171	1,729
1941	..	..	972	1,709

The above figures for 1941 may be divided as follows:-

	Consultations.	Conservative treatment.	Extractions.
Children	430	323	219
Expectant Mothers	646	254	499
Nursing Mothers	138	63	110

Domiciliary Visits by Health Visitors.

(1) HOME VISITS:

(a) To children under 1 year	1,908 - First visits 4,810 - Revisits
(b) To children between the ages of 1 - 5 years	580 - First visits 11,171 - Revisits
(c) To Expectant Mothers	1,087 - First visits 1,735 - Revisits
(d) To Nursing Mothers	716 - First visits 704 - Revisits
(e) Other special visits	4,559

Analysis of Special Cases included in (e) above.

Children: Ophthalmia Neonatorum	
(Notified)	16
Other eye conditions	10
Pemphigus Neonatorum	4
Measles	2,048
Whooping Cough	788
Tuberculosis -	
Pulmonary	-
Non-Pulmonary) Glands	4
) Bones	-
) Skin	-

Ringworm	1
Dysentery	3
Poliomyelitis	5
Infantile deaths	31
Other special	
e.g. Vermin -)Head pediculi	73
)Body	6
Scabies	562
Mothers: Puerperal Pyrexia (Notified)	15
Still Birth	44
Home Help Supervision	106
Other Special	843
(e.g. Day Nursery; Diphtheria Immunisation; Home condition Forms, re: A.N. Patients; Hospital arrangements).	

5. INFECTIOUS DISEASES.

Diphtheria Immunisation.

<u>Year.</u>	<u>0 - 5</u>	<u>5 - 10</u>	<u>10 - 15</u>	<u>Over 15</u>	<u>TOTALS.</u>
1937	129	174	36	3	342
1938	238	267	65	5	575
1939	181	214	63	4	462
1940	249	152	44	5	450
1941	2454	2102	998	32	5586
<hr/>					
	3251	2909	1206	49	7415
<hr/>					

Even with the intensive drive for the public to be protected against diphtheria having gone on unabated since the very beginning of 1941 over half of the children under 5 years of age and over half of the children between 5 and 15 years of age in Wembley have not yet had this protective treatment by which diphtheria

might be practically abolished (August, 1942). Parents are advised to consider seriously having their children immunised when about 10 or 11 months of age. Up to the end of June, 1942, just over 2,500 Wembley children under 5 years of age and just over 5,500 children between the ages of 5 and 15 years had been protected. In May 107, in June 108 and in July 101 children under 5 years of age were treated, and of the children between 5 and 15 years in May 74, in June 94 and in July 76 were treated. These numbers are still not big enough. The Public Health Committee has consistently made every endeavour to bring before the public the fact that this safe and easy treatment is available from the family doctor or free at the Health Clinics, and while it may truly be stated that in Wembley the position is as satisfactory as in most of the Middlesex Local Authorities it is still short of the desideratum that at least 75% of the child population be protected for the incidence of diphtheria to be reduced at all comparably to what has been effected in Canada and in the United States of America.

Measles.

Number of Notifications	-	1,750
Number Admitted to Hospital	-	23
Number of Deaths	-	2

According to pre-war experience, it was expected that 1940 would be a measles year but not till the last week of November, 1940, was the number of cases 21, and the typical epidemic peak of 219 cases in a week was reached in February, 1941. The epidemic continued until the end of April (5 months epidemic period).

CASES OF INFECTIOUS DISEASES NOTIFIED IN WARDS, 1941.

	Alpertton	Central	Tokyington	Sudbury	Sudbury Court	Wembley Park	Chalkhill	Preston	Kenton	Fryent	Roe Green	The Hyde	Empire Pool	Emergency War	Occupation	TOTAL	Total removed to Hospital	% of cases removed to Hospital
Scarlet Fever	38	5	7	8	4	4	3	6	5	13	14	20	-	-	-	127	92	72.4
Diphtheria	14	2	4	-	4	3	2	2	3	5	6	5	1	1	-	51	37	90.2
Enteric Fever	-	-	-	2	-	-	-	1	2	1	2	2	1	1	-	11	10	90.9
Pneumonia	12	20	8	6	4	12	6	16	5	13	11	25	5	5	-	143	51	35.6
Erysipelas	3	1	2	3	-	3	-	2	-	2	2	4	-	-	-	22	5	22.7
Ophthalmia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Neonatorum	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-
Puerperal Pyrexia	1	-	1	4	-	2	1	1	1	1	-	1	-	-	-	13	8	61.5
Acute Poliomyelitis	2	-	2	-	1	-	-	3	-	-	-	-	-	-	-	8	7	87.5
Dysentery	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	1	100.0
Polio Encephalitis	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	100.0
Cerebro-spinal	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fever	3	2	-	2	1	1	-	1	-	2	3	-	-	-	-	15	14	93.3
Measles	148	90	171	273	123	66	103	117	165	164	146	183	1	1	-	1750	23	1.3
Whooping Cough	116	34	86	108	52	28	26	40	43	65	101	43	5	5	-	747	11	1.4
Food Poisoning	2	-	1	1	-	-	-	-	-	1	2	-	-	-	-	7	2	28.5
Encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lethargica	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	1	100.0

At the time of writing (September, 1942) a second epidemic has just faded out which commenced at the end of March, had a peak incidence in June of 110 cases in a week and lasted until the end of August (5 months epidemic period). The number of cases in this epidemic, however, has been much smaller than in that of 1941. A similar smaller epidemic has occurred in other areas and it is difficult to suggest an explanation for it, especially in a neutral area as is Wembley, in which the child population has not moved to any extent comparable with that going on in evacuation or reception areas.

Whooping Cough.

In the second half of 1940 the number of cases of whooping cough began to increase, but the largest number in any one week was 18. Throughout 1941 the disease, however, was very prevalent, several peaks of about 30 cases per week being recorded during 1941 and on to March, 1942.

At the time of writing, the rather prevailing incidence of whooping cough seems to have disappeared.

Cerebro-spinal Meningitis.

During the year 15 cases were notified. In 1940 the figure was 17. In both the war years, then, there was considerable rise in the number of cases locally. This is in confirmation of the position in the Country as a whole and in accord with the previous war-time experience.

Typhoid or Enteric Fever.

In war-time the occurrence of one case of typhoid fever or of the para-typhoid

diseases is an anxiety as the possibility of water or food spread must ever be borne in mind. While being still satisfied that up to the present there has been no occasion for panic or mass immunisation against the enteric group of diseases in this Borough, the opinion has been expressed to the Public Health Committee that the chances of falling a victim to the germs of the enteric group of illness seem to be greater now than they were at the beginning of the war. This risk can undoubtedly be reduced by protective inoculation.

In Wembley in 1937 there were 3 cases of enteric illness, in 1938, 4; in 1939, 3; in 1940, 5; and in 1941, 7.

While the number of food poisoning cases has remained small, there have been one or two circumstances in which the possibilities of food poisoning in association with communal canteens had to be carefully examined. In one or two of the large provincial towns such occurrences, definitely proved to be due to the food poisoning organisms, have occurred.

The possibility of serious disturbance to the public health services with regard to environmental hygiene and the interference with normal day-to-day personal hygiene undoubtedly adds to the potentiality of the risk of enteric or enteric-like diseases.

Experience points to the wisdom of accepting the offer of the Ministry of Health through local health authorities, of inoculation against the typhoid and para-typhoid group of illnesses. Such inoculation treatment is available free at the Council's Health Clinics. The number accepting this service so far has been very small - during the year, 1941, the number was 345, and between 1st January and 8th August, 1942, 33.

Food Poisoning.

Much misunderstanding exists in the minds of the public as to the cause of food poisoning. Contrary to popular belief, in none of its forms is it necessarily associated with decomposing foods.

The illness may be due to the consumption of food infected with disease-producing bacteria as specific for example as those causing typhoid fever and bearing no relation to the saprophytic organisms generally found in dead organic matter. Food contaminated with harmful metal or other chemicals has given rise to cases of food poisoning while poisonous plants have been eaten in the belief that they were the wholesome food which they resembled, with dire results.

In the course of the year, seven cases were notified. There was no single outbreak involving the public at large, nor indeed, the members of more than one family. The cases, which included examples of each type mentioned above, demanded very full enquiries and careful investigation, but satisfactory conclusions were not always reached because of the difficulty of obtaining either bacteriological or chemical confirmation. Often by the time the cases were brought to the notice of the Public Health Department, the person had recovered from the malady, which is frequently of sudden onset and generally of brief duration so that the suspected food was not available for examination and bacteriological proof had become impossible.

In December 1940 four persons of one family became ill, suffering from vomiting and diarrhoea about four hours after the Sunday dinner. At first their joint of beef was suspected but a

sample submitted to the Bacteriologist did not contain disease producing organisms. Detailed enquiry and questioning revealed that the daughter on preparing the meal in her mother's absence had flavoured it with daffodil bulbs instead of onions, with the unfortunate illness notified.

A woman and her daughter noticed a metallic taste on taking some lemonade and were attacked with diarrhoea and vomiting. The dregs of the drink smelt strongly of paraffin and gave the solution of the cause of the illness. Full enquiry exonerated the premises where the lemonade was manufactured.

In the majority of cases illness or discomfort was merely transient but two persons, a mother and daughter, suffered so severely that removal to hospital was necessary and the daughter's illness proved fatal. These two cases were, in fact, the only ones in which the presence of food-poisoning organisms (*bacillus enteritidis* of Gaertner) were clearly demonstrated as the cause of the illness. In spite of the most careful search of the house and yard for any suspicious article or circumstances no sample of any suspicious food could be found for examination, but the fullest enquiry showed that the public food supplies remained unaffected and this particular occurrence was limited to the one household.

Tuberculosis.

<u>No. of Notifications.</u>			
<u>Pulmonary.</u>		<u>Non-Pulmonary.</u>	
<u>Male.</u>	<u>Female.</u>	<u>Male.</u>	<u>Female.</u>
89	53	9	10
<u>No. of Deaths.</u>			
<u>Pulmonary.</u>		<u>Non-Pulmonary.</u>	
<u>Male.</u>	<u>Female.</u>	<u>Male.</u>	<u>Female.</u>
40	24	2	1

No. admitted to Hospitals
or Sanatoria.

92

No. discharged from
Hospitals or Sanatoria.

84

A detailed analysis of the statistics for the 5 years 1937-1941 confirms the observation already made that for the female the danger period regarding tuberculosis is in young womanhood.

5 year period 1937-1941.

Pulmonary.
Male. Female.

No. of Notifications	359	252
No. of Deaths	132	102

<u>Notifications.</u>		<u>Age Periods.</u>	<u>Deaths.</u>	
<u>Pulmonary.</u>			<u>Pulmonary.</u>	
<u>Male %.</u>	<u>Female %.</u>		<u>Male %.</u>	<u>Female %.</u>
0.00	0.00	Under 1 year.	0.76	0.00
1.11	.40	1 - 4 years.	0.00	1.96
3.06	5.16	5 - 14 years.	1.52	1.96
25.07	34.92	15 - 24 years.	18.94	22.55
26.44	37.30	25 - 34 years.	21.97	38.24
18.94	9.52	35 - 44 years.	21.97	14.71
17.24	9.13	45 - 54 years.	16.67	10.78
5.57	2.38	55 - 64 years.	12.12	6.86
2.51	1.19	65 and over.	6.06	2.94

The Middlesex County Council is the responsible authority for the treatment of tuberculosis.

6. ENVIRONMENTAL HYGIENE, FOOD AND WATER.

Number of complaints received and
investigated 1,401

(a) Visits to dwelling houses, including
billets 6,595

(b) General sanitation inspections
(including 1,874 visits to air
raid shelters) 12,381

(c) Meat and other food inspections.. .. 3,290

Notices served: Verbal .. 345
Written .. 521
Statutory 20

Nuisances abated and improvements effected.

(a) Dwelling Houses 825

(b) General sanitation (including air
raid shelters, 267) 2,349

(c) Meat and other food premises 319

Some Housing Details.

"Permitted Number" certificates issued 29

Number of dwellings overcrowded at
the end of the year 18

Number of new cases of overcrowding
reported during the year 9

Number of cases of overcrowding
relieved during the year 6

In consequence of a number of complaints made regarding overcrowding, and requests for housing accommodation the Public Health Committee early in 1942 caused a survey to be made of overcrowding conditions in the Borough. It was not possible to carry out a detailed survey such as was done in 1935/36, but use

was made of the current records in the possession of the Rehousing Officer. These records give the number of rooms ~~and the~~ number of persons occupying each house in the Borough in September, 1941, and cases which appeared to be on the threshold of overcrowding were investigated by the Sanitary Inspectors. As a result 63 cases of overcrowding of which the Public Health Department had no previous knowledge were found, making a total of 79 overcrowded dwellings known in the Borough. Particularly in view of such overcrowding the Council decided to make representation to the Ministry of Health for permission to erect new houses but so far such consent has not been received.

Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	2,735
Number of inspections made for the purpose	4,926
Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations 1925/1932	12
Number of inspections made for the purpose	12
Number of dwelling houses found not to be in all respects reasonably fit for human habitation	791

Remedy of defects during the year without service of formal notices.

Number of defective dwelling houses rendered fit in consequence of informal action	773
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Outworkers.

Number on the register 31.12.41 ..	128
Number of visits paid to premises ..	79

Offices.

Number on the Register	223
Number of visits paid	130

Defects found 2; Defects remedied 2

Dairies and Milk Shops.

Number of Dairies Registered ..	28
Number of purveyors of milk registered with premises in the Borough, selling milk in properly closed and unopened receptacles	48
Number of purveyors of milk registered whose premises are outside the Borough	24
Number of Dairies (included above) where milk is bottled, etc. ..	8

Milk (Special Designations) Regulations
1936 to 1942.

	<u>Licences issued.</u>	<u>Samples taken.</u>	<u>Samples not satisfactory.</u>
Pasteurised	34	49	7
Tuberculin Tested	23	34	10
T.T. (Pasteurised)	-	8	2
Accredited	1	12	-
	<hr/>	<hr/>	<hr/>
	<u>58</u>	<u>103</u>	<u>19</u>

The percentages of unsatisfactory samples of the designated milks during the last five years are as follows:-

<u>1937.</u>	<u>1938.</u>	<u>1939.</u>	<u>1940.</u>	<u>1941.</u>
5	8	3.3	11	18

For some time it has been felt that there has been deterioration due to war conditions, in the condition of milk as supplied to the consumer. The interval between the milking at the farm and delivery of milk to the consumer together with the care in the handling and processing of milk at milking and up to the time of delivery are the points upon which the condition of milk as received by the consumer depends.

The recent White Paper (Cmd. 6362) gives the Government policy with regard to milk. The interval between milking at the farm and delivery of the milk to the consumer is a matter concerning which the new rationalisation scheme should give help. The care in the handling and processing of milk at milking and up to the time of delivery is a matter in which the advisory assistance to be made available should assist. The labour difficulties of purveyors of milk, concerning which representation has been made on various occasions to the Public Health Committee is also referred to in the Command Paper, which takes note of the appreciable reduction in the number of dairymen available throughout the country. The Government policy is declared to be for as much milk as is possible to be pasteurised, either at a collection depot or by wholesalers or retailers. Perhaps it is owing to war-time conditions and limitations that the policy of compulsory pasteurisation of all milk has not been adopted. The protection necessary to prevent milk being a vehicle for the spread of

certain diseases (e.g. tuberculosis) is efficient pasteurisation or, in its absence, the boiling of milk.

CONCLUSION.

The efficiency of a Health Department cannot be gauged by figures alone; but it must be particularly gratifying to the Council to have proof of the acceptance by the public of their still expanding health services.

The war has fostered a mutual understanding greater than ever between those interested in health and social welfare. The Public Health Department has had added duties and responsibilities since the war commenced with regard to the health and morale of the community. The staff are keenly appreciative of their opportunity.

Again it is a very pleasant duty to record the assistance and co-operative attitude of the Voluntary Workers in the clinic services.

May I respectfully thank the Council for their ready understanding of the endeavour of the members of the Department to administer the Council's services to the best of their ability.

I have the honour to be, Mr. Mayor,
Ladies and Gentlemen,

Your obedient Servant,

A.G. MORISON,

Medical Officer of Health.

7.9.42.