

[Report of the Medical Officer of Health for Southall-Norwood].

Contributors

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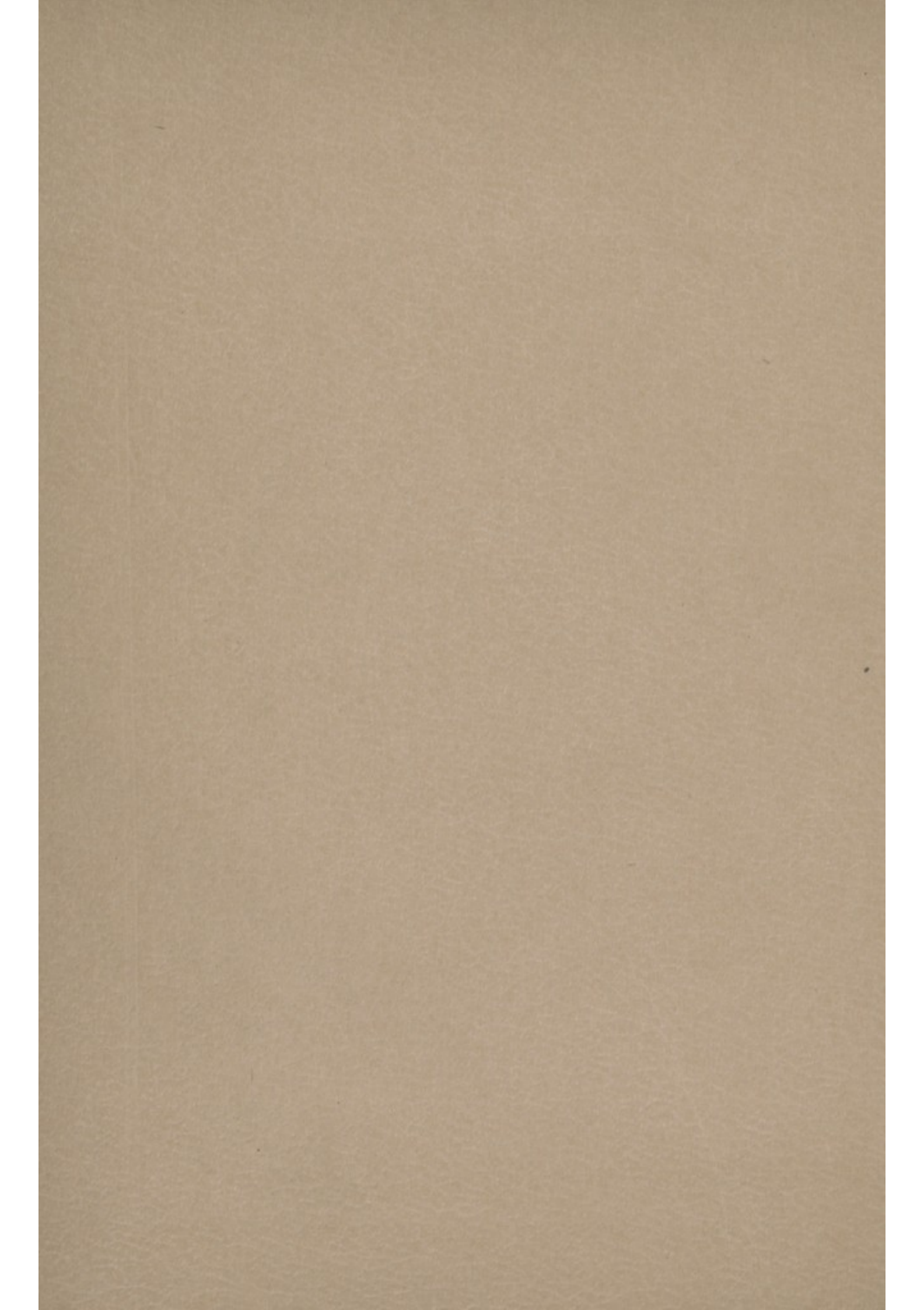
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THE URBAN DISTRICT COUNCIL
OF
SOUTHALL-NORWOOD

ANNUAL REPORT
OF THE
Medical Officer of Health
for the Year 1934.

E. H. R. SMITHARD, M.D., D.P.H.
Medical Officer of Health.



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THE URBAN DISTRICT COUNCIL OF SOUTHALL-NORWOOD.

For the Year 1934-1935.

THE PUBLIC HEALTH COMMITTEE.

*W. GARROD, Esq., J.P. (*Chairman*).

C. P. ABBOTT, Esq.

C. F. COLLINS, Esq.

*H. R. CURTIS, Esq.

E. J. EMERSON, Esq.

J. A. EVANS, Esq.

R. F. FRYARS, Esq., resigned July, 1934.

F. E. GARDNER, Esq., from August, 1934.

F. GOSNEY, Esq.

*E. B. HAMBLIN, Esq.

*J. HILL, Esq.

*J. H. HOLMES, Esq.

*Mrs. E. JACKSON.

J. MOGG, Esq.

*W. R. A. OLIVE, Esq., deceased July, 1934.

*F. G. SMITH, Esq., from August, 1934.

G. A. PARGITER, Esq.

*G. REED, Esq.

F. WEBSTER, Esq.

Major A. T. S. WHITE, J.P. (*Chairman of the Council*).

*THE MATERNITY AND CHILD WELFARE COMMITTEE,

to September, 1934.

The Members of the Council denoted by an asterisk above, together with the following co-opted members:—

Mrs. V. BELLWOOD.

Mrs. F. M. GIBBS.

Mrs. L. HARRISON.

Mrs. E. PARSLow.

From September, 1934, the Maternity and Child Welfare Committee was merged into the Public Health Committee with the same co-opted members.

MANOR HOUSE,
SOUTHALL.

May, 1935.

To the Chairman and Members of the

URBAN DISTRICT COUNCIL OF SOUTHALL-NORWOOD.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my first Annual Report (the thirty-eighth of the series) on the health and sanitary circumstances of the district.

The population of the Urban District, as estimated by the Registrar General to mid-1934, is 46,680 which shows an estimated increase for the year of 1,900 as compared with an estimated increase in the previous year of 3,250. Part of this increase is due to the natural increase, that is the excess of births over deaths, which in 1934 amounted to 409, and part of it is due to the excess of those taking up residence in the district over those leaving the district. Approximately 900 new houses were occupied during the year and it is possible that the Registrar General's estimate of the increase in the population may be somewhat short of the actual increase. It was at one time suggested that a census should be taken this year (half-way along the ordinary inter-censal period), an action which would be of more benefit in the case of a growing district like this than in the case of a district where the population is more stable, but mainly for reasons of economy the idea was abandoned.

As is pointed out in greater detail later in this report, on April 1st, 1934, there was an alteration in the *district boundaries* made under a scheme prepared by the County Council under the Local Government Act of 1929. This resulted in a small area being added to the district from Ealing at the extreme north end and a small area being transferred from the district to Heston on the south side of the canal at North Hyde. The difference in population at the time of the change was insignificant (see Note 1 on page 12) but shortly there will be a considerable number of new houses erected on the additional land at the north of the district with a consequent additional population and need for social services.

The *vital statistics* show that in 1934 the Birth Rate was 16.25 per 1,000 population (against 15.74 in 1933 and 17.16 in 1932), the crude Death Rate was 7.49 per 1,000 population (against 8.64 and 8.1) and the Infant

Mortality Rate was 46 per 1,000 births (against 44 and 48). These figures are quite satisfactory as far as they go and compare well with some other areas (see Table 3 on page 15).

Maternal Mortality gave some concern in the district as the result of the relatively high figure published for 1933 (11.3 per 1,000 births). However, as I pointed out in a report made on this subject, it is quite unsafe to take the figures for any one year in a relatively small population such as this, as the figures cannot be statistically significant. When taken over ten years they were found to give a result which was almost exactly the same as for the county as a whole and rather less than that for England and Wales. In 1934 the figure dropped to 1.41 per 1,000 births (one death only) which illustrates the fallacy of yearly figures in a population of about 50,000. Nevertheless it must not be thought that there is any complacency felt with regard to the position relative to maternal mortality, and while there is any morbidity or ill-health connected with childbirth, more especially of course if mortality should occur, the question must be a live concern for the Council. At the end of the year a sub-committee was appointed to consider the problem in relation to bringing the Council's maternity services to a more advanced state and it is hoped that additional services will be available during the present year.

During the year the *Middlesex County Council Act* received the Royal Assent (July 31st, 1934). The Act affects the Health Department in several ways, notably, refuse disposal, control over hairdressers' and barbers' shops and control over massage establishments, all of which are receiving attention in the Department. With regard to refuse disposal the protection given to Southall is small as the major portion of dumping as it affects Southall is just outside the Southall boundary, and under the Act, only the local authority in whose area the dumping takes place can together with the County Council make regulations with regard to that dumping. Representations have been made by the Council but, to the end of the year, with an unknown result.

At the *Isolation Hospital* Mrs. West, the Matron, retired at the beginning of the year. She was accorded an expression of thanks and good wishes from the Council. Miss James, the sister, was appointed the new Matron. The need for a cubicle block at the hospital remains acute. This was more especially in evidence in the autumn of 1934 when many cases of diphtheria from North Road School and the vicinity were admitted. The whole question of Isolation Hospital accommodation in the County is however still subject to discussion, but it is hoped that during this year a final decision will be reached.

The *Branch Clinic* which was held on the early closing afternoon at the Branch Library was, for reasons of space, moved elsewhere in September, 1934. Temporary premises were hired at Holy Trinity Mission Hall in Allenby

Road. These are of course by no means ideal and it is hoped that a permanent clinic on the North Side of the district will soon be proceeded with. A tentative site for this has been earmarked in an open space belonging to the Council and leading off Allendale Avenue.

A problem which is becoming more acute is that of *noise*. By this is not meant the inevitable increase in the "background of noise" which is part and parcel of increasing urbanisation, but the more specific causes of noise in so far as they affect health. Of particular concern to Southall is the noise from aeroplanes, especially at night time. Southall has two aerodromes, Hanworth and Heston, within a short distance, the latter being just over the boundary. It is stated that Heston will shortly increase greatly in its volume of traffic, and as advances are made there will undoubtedly be a great increase in the amount of night-flying. There is evidence to show that a mere background of noise, if excessive is injurious to health. Noise at such time and of such degree of intensity as to arouse sleepers and to keep them awake must be potentially even more injurious to health. Unfortunately all aeroplane constructive advance so far seems to have been in the direction of increased stability, speed and general efficiency; very little has been done with regard to the suppression of excessive sound. Motor cars and motor cycles were at quite an early stage in their development subjected to restrictive legislation with regard to noise and it certainly seems desirable, if not essential in the interest of health, that aircraft too should be controlled in this way.

Towards the end of the year a general scheme of *re-organisation* was introduced into the Department, and it says much for the co-operation and efficiency of the staff, both at the Manor House and at the Hospital, that the unavoidable difficulties and inconveniences necessarily associated with such a scheme were surmounted without any trouble. It is a great pleasure to pay a tribute to the Staff in this way, and also to Dr. Seccombe whose advice and assistance enabled me to take over the Department with a minimum of difficulty. It is also gratifying to record that the Council have appointed Dr. Seccombe as my official deputy.

The report which follows is in outline in accordance with the suggestions of the Ministry of Health. It is therefore necessarily in great part statistical.

STAFF,
for the year 1934.

Medical Officer of Health.

EDWARD H. R. SMITHARD, M.D., B.S., L.R.C.P. (Lond.), M.R.C.S. (Eng.), D.P.H.

Deputy Medical Officer of Health (part time).

C. W. SECCOMBE, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

Sanitary Inspection Staff :—

Chief Sanitary Inspector.

IVOR A. STEPHENSON, Cert. R.S.I., C.M.I.

Sanitary Inspectors :

C. G. ROTHWELL, M.R.San.I., resigned January, 1934.

P. G. WOODS, Cert.R.S.I., C.M.I., from February, 1934.

E. H. JENKINS, Cert.R.S.I., C.M.I., appointed November, 1934.

Health Visiting Staff :—

Miss E. S. BOYD, C.M.B., S.R.N. (*Senior Health Visitor*).

Miss E. L. PERRETT, S.R.N. (*Health Visitor*).

Miss B. M. STANBRIDGE, H.V.Cert., R.S.I., S.R.N. (*Health Visitor*).

Clerical Staff :—

J. W. CRONK, Cert.R.S.I. (*Chief Clerk*).

Miss P. ASHTON.

Mrs. K. M. MASTERMAN, resigned 24th December, 1934.

G. W. CASSIDY, from 27th December, 1934.

Consultant Obstetrician (Part time).

J. W. RAIT BELL, Esq., F.R.C.S.

Matron of the Isolation Hospital :—

Miss E. JAMES, S.R.N., R.F.N.

Part-time Medical Staff to April 1st, 1934.

Dr. C. W. SECCOMBE, *Temporary Medical Officer of Health.*

Miss A. E. BERYL HARDING, M.D., B.Ch.

Mrs. A. S. HALL-CRAGGS, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (acres) : Land, 2554.5 Water, 50. Total 2,604.5

Population—Registrar General's estimate—mid-1934	.....	.....	*46680
Number of inhabited houses according to Rate Book	.....	.....	11839
Rateable value	.....	.....	£356,401
Sum produced by a penny rate	.....	.....	£1,450

See Note 1 page 12.

The Urban District of Southall-Norwood is traversed by the main road from London to Oxford and is about nine miles from the Marble Arch. It is roughly triangular in shape and is bounded on the east and north by the Borough of Ealing, on the west by the Urban District of Hayes and Harlington, and on the south by the Borough of Heston and Isleworth. The greatest length of the district from north to south is 2.8 miles and the greatest breadth is 3.1 miles.

As the result of an Order of the Minister of Health, the following alteration of the boundaries of the District was effected as and from the 1st April, 1934: the area was extended by the addition thereto of 58.17 acres from the Ealing District, .17 acres from the Hayes and Harlington District and .65 acres from the Heston and Isleworth District, while on the other hand 29.49 acres were transferred to the Heston and Isleworth District. This resulted in an addition to the acreage of the District of 29.50 acres.

The soil is mainly gravel, overlaid with clay and brick earth.

The highest point in the district is at the Water Tower in Allenby Road, and is 143 feet above ordnance datum; the lowest point is at the Sewage Disposal Works and is 32 feet above ordnance datum.

The average rainfall over a period of nineteen years is 23.02 inches per annum. The rainfall during 1934 was 16.63 inches.

The Council control the following open spaces :—

Southall Park	.....	.....	.....	26 acres.
Recreation Ground	.....	.....	.....	18 acres.
Manor House Grounds (about)	.....	.....	.....	2 acres.
Norwood Green	.....	.....	.....	7.25 acres.
Frogmore Green	.....	.....	.....	.35 acres.
Wolf Green	.....	.....	.....	.18 acres.
Land rear of Wolf Inn	.....	.....	.....	.83 acres.

In addition the following sites have been purchased and will shortly be laid out as playing fields and open spaces :—

Spikes Bridge Field	.....	.....	.....	20 acres.
Allenby Road and Allendale Avenue, open space	.....	.....	.....	12.25 acres.
Adrienne Avenue, open space	.....	.....	.....	4.6 acres.

This information is by the courtesy of J. B. Thomson, Esq., the Engineer and Surveyor.

For general administrative purposes the district is divided into East and West Wards by a line running from the junction of Kings Avenue and Allenby Road, down the centres of Allenby and North Roads, High Street, South Road, the Green, Western Road, to a point east of the Grand Junction Arms, Western Road, adjacent to the North Hyde Bridge.

For the statistical purposes of this report, the district is divided into North and South sides, these sides being the districts north and south of the main Great Western Railway line.

The majority of the houses in the district are occupied by good-class working people, chiefly engaged in the local factories and workshops. These include food, jam and chemical works, engineering, hosiery, paint, dye and wood works, laundries, etc. There are no trades carried on which are at present scheduled as offensive trades.

It is impossible to give a correct estimate of the amount of unemployment in the district as for unemployment purposes the district is part

of a larger area of Middlesex and the figures are not kept distinct. It appears however, that there has been a definite decrease in the number of unemployed during the past year and this is reflected to some extent in the decrease in the number of applicants for assisted milk supplies at the Maternity & Child Welfare Centres.

The following table (Table No. 1), is appended to show the progressive increase in population of the district since 1883 :—

TABLE NO. 1.

YEAR.	Population.	No. of Houses.	Authority.
1883	4,164	—	—
1891	5,188	1,021	Census.
1901	13,200	1,920	"
1911	26,323	5,058	"
1921	30,287	5,405	"
1922	30,287	5,518	Registrar General's Estimate
1923	31,360	5,620	"
1924	31,800	5,758	"
1925	32,220	5,843	"
1926	32,870	6,074	"
1927	33,480	6,493	"
1928	35,340	6,838	"
1929	35,370	7,190	"
1930	37,560	8,101	"
1931	38,932	9,300	Census
1932	41,530	10,000 (approx.)	Registrar-General's Estimate
1933	44,780	11,000 "	"
1934	46,680	11,839	"

* EXTRACTS FROM VITAL STATISTICS.

	<i>Total.</i>	<i>Male.</i>	<i>Female.</i>
Live Births— Legitimate	732	377	355
Illegitimate	27	15	12
Stillbirths	21	15	6
Deaths	350	174	176

Birth rate per 1,000 of estimated population 16.25

Still-birth rate per 1,000 total (live and still) births 26.90

Crude Death rate per 1,000 of the estimated population 7.49

§ Comparability Factor 1.14

§ Comparable Death rate 8.53

Deaths from Puerperal Causes (Headings 29 and 30 of the Registrar-General's Short List) :

	<i>Deaths</i>	<i>Rate per 1,000 (live and still) births.</i>
No. 29. Puerperal Sepsis	Nil.	Nil.
No. 30. Other Puerperal Causes	1	1.28

Death rate of Infants under one year of age :—

All Infants per 1,000 live births 46.11

Legitimate Infants per 1,000 legitimate live births 43.7

Illegitimate Infants per 1,000 illegitimate live births 111.1

Deaths from Measles (all ages) 3

Deaths from Whooping Cough (all ages) 2

Deaths from Diarrhoea (under 2 years of age) 3

* See Note 1. on page 12.

§ See Note 2. on page 12.

Note 1. Vital Statistics.

Change of boundaries 1st April, 1934.

The statistics of births, deaths and notifiable diseases for the calendar year are composite figures combining the records for the first portion of the year prior to the date of change of boundaries with those for the altered area for the remaining portion of the year.

The normal mid-1934 estimate of population for the area as now constituted is 46,680 according to the Registrar-General's estimate, but for the compilation of the rates mentioned above a working population figure, modified to take account of the fact that the records do not wholly relate to the entire year, has been fixed by the Registrar-General at 46,693. The difference is insignificant.

Note 2. Comparability Factor.

The comparability factor is the figure by which the crude death rate of the area should be multiplied in order to make it comparable, from a mortality point of view, with the crude death rate of the country as a whole or with the mortality of any other local area the crude death rate of which has been similarly modified with its own factor for the purpose.

The Registrar-General points out that if the populations of all areas were similarly constituted as regards the proportions of their sex and age group components, their crude death rates could be validly compared, but as however populations are not thus similarly constituted their crude death rates fail as true comparative mortality indexes in that their variations are not due to mortality alone but arise also from differences in their population constitutions. In order to isolate the mortality factor it is first necessary to remove the population variable. This is done by means of the comparability factor which has been evaluated by the Registrar-General as follows :—

"The average mortality rates experienced in England and Wales during the three years 1930/2 divided into 11 sex-age groups have been adopted as the standard and have been applied to the corresponding sex-age groups in the 1931 census population of every borough, urban district and rural district in the country. The adjusting factor now supplied in respect of a given area represents a ratio of the resulting death rate for the national 1931 census population to the similarly obtained hypothetical death rate for the said area. The factor may be said to represent the population handicap to be applied to the area and, when multiplied by the crude death rate experienced in the area, modifies the latter so as to make it comparable with the crude death rate for the country as a whole or with the similarly adjusted death rate for any other area.

Strictly, the adjusting factor applies only to death rates experienced in the year 1931 on which the several population handicaps have been measured, but population constitutions change relatively slowly, and save in exceptional circumstances, the 1931 factor may be used for practical purposes until fresh population constitutions are available for the next census."

The comparable death rate for Southall is therefore the crude death rate (7.49) multiplied by the comparability factor (1.14) which gives a figure of 8.53.

TABLE No. 2.

Causes of Deaths, 1934.

	<i>All Causes</i>	<i>Male.</i> 174	<i>Female.</i> 176
1. Typhoid and Paratyphoid Fever	—	—	—
2. Measles	—	—	3
3. Scarlet Fever	2	—	—
4. Whooping Cough	—	—	2
5. Diphtheria	—	—	1
6. Influenza	3	2	—
7. Encephalitis Lethargica	—	—	—
8. Cerebro-Spinal Fever	—	—	—
9. Tuberculosis—Respiratory	17	10	—
10. Other Tuberculous Diseases	1	2	—
11. Syphilis	1	—	—
12. General Paralysis of the Insane	—	1	—
13. Cancer, Malignant Disease	22	27	—
14. Diabetes	—	5	—
15. Cerebral Haemorrhage, etc.	3	5	—
16. Heart Disease	36	36	—
17. Aneurysm	—	2	—
18. Other Circulatory Diseases	8	11	—
19. Bronchitis	8	5	—
20. Pneumonia (all forms)	8	13	—
21. Other Respiratory Diseases	2	3	—
22. Peptic Ulcer	5	—	—
23. Diarrhoea (under 2 years)	1	2	—
24. Appendicitis	4	1	—
25. Cirrhosis of Liver	—	—	—
26. Other diseases of the Liver	1	1	—
27. Other Digestive Diseases	9	6	—
28. Acute and Chronic Nephritis	6	7	—
29. Puerperal Sepsis	—	—	—
30. Other Puerperal Causes	—	1	—
31. Congenital Debility, Malformations, etc.	9	8	—
32. Senility	2	3	—
33. Suicide	5	1	—
34. Other Violence	7	2	—
35. Other Defined Diseases	14	16	—
36. Causes ill-defined or unknown :			
Special causes (included in No. 35)	—	—	—
Smallpox	—	—	—
Poliomyelitis	—	—	—
Polioencephalitis	—	—	—
TOTAL DEATHS		350	

Deaths and Death Rate—*Whole District.*

Total deaths 350. (Males 174, Females 176).

Crude Death Rate : 7.49 per 1,000.

The total number of deaths registered of persons belonging to the district and dying within the district at all ages and from all causes was 172 (males 83, and females 89).

For statistical purposes it is necessary to add to this figure the deaths of persons ordinarily resident in the district who died in various London Hospitals, the Hillingdon County Hospital, other Middlesex County Hospitals and elsewhere outside the district. These "outside" deaths were 178 in number—(males 91, and females 87).

The total number of deaths therefore belonging to the district is 350, and the crude death-rate 7.49.

The deaths of non-Southall residents in the Hanwell Mental Hospital (not included in the above figures) numbered 181—(males 65, and females 116).

Deaths—North and South sides.

On the North side, the deaths registered in the district were 85 (males 42, females 43); "the outside" deaths numbered 97 (males 49, females 48); the total deaths belonging to this side were therefore 182. On the South side, the deaths registered in the district were 87 (males 41, females 46); the "outside" deaths were 81 (males 42, females 39); and the total deaths belonging to this side were 168.

For the purpose of comparison the following table, Table No. 3, is given to show the more detailed birth and death rates and the rates of infantile and maternal mortality in England and Wales during the year 1934, the figures being provisional.

Table No. 3. BIRTH RATES, DEATH RATES and ANALYSIS OF MORTALITY in the YEAR 1934. England and Wales, 121 County Boroughs and Great Towns; and 135 smaller towns.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1934, but those for the Towns have been calculated on populations estimated to the middle of 1933.)

	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION										RATE PER 1,000 Births		PERCENTAGE OF TOTAL DEATHS			
	Live Births	Still Births	All Causes,	Typhoid and Para-typhoid Fevers,	Small-pox.	Measles,	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea. and Enteritis (under 2 years).	Total Deaths under 1 year.	Certified by Registered Medical Practitioners.	Inquest Cases.	Certified by Coroner after P.M., No Inquest	Uncertified Causes of Death.	
England and Wales	14.8	0.62	11.8	0.00	0.00	0.09	0.02	0.05	0.10	0.14	0.54	5.5	59	90.4	6.5	2.1	1.0	
121 County Boroughs and Great Towns, including London	14.7	0.66	11.8	0.00	0.00	0.12	0.02	0.06	0.11	0.12	0.47	7.4	63	90.5	6.1	2.9	0.5	
135 Smaller Towns (Estimated Resident Populations, 25,000-50,000 at Census 1931)	15.0	0.67	11.3	0.00	0.00	0.07	0.02	0.04	0.09	0.14	0.42	3.6	53	91.2	6.1	1.6	1.1	
London	13.2	0.50	11.9	0.00	0.00	0.20	0.02	0.07	0.11	0.12	0.56	12.6	67	87.7	6.3	6.0	0.0	
Southall-Norwood	16.25	0.44	*7.49	0.00	0.00	0.06	0.04	0.04	0.02	0.10	0.32	3.95	46	90.9	4.3	3.7	1.1	

The maternal mortality rates for England and Wales are as follows			Puerperal sepsis.	Other.	Total.
	Per 1,000 live births	2.03	2.57	4.60	
	Per 1,000 total births	1.95	2.46	4.41	
The maternal mortality rates for Southall are as follows					
	Per 1,000 live births	0.00	1.31	1.31	
	Per 1,000 total births	0.00	1.28	1.28	

*Comparable Death rate—8.53, (see Note 2, on page 12)

Births and Birth Rate.

The total number of births notified to the Health Department under the Notification of Births Acts was 685.

The total number of registered births under the Births and Deaths Registration Act (included in the notified births above) was 525.

The total number of births belonging to the district whether occurring within or outside the district was 759.

The illegitimate births were 27, and there were 21 still-births.

This gives a birth rate per 1,000 population of 16.25 and a stillbirth rate per 1,000 total (live and still) births of 26.9

The monthly registration of births classified as to districts is given in Table No. 4.

TABLE NO. 4.

Monthly Registration of Births.

	North Side.		South Side.		Totals.
	M.	F.	M.	F.	
January	19	10	9	12	50
February	8	15	14	13	50
March	12	6	9	9	36
April	17	8	7	5	37
May	15	15	13	13	56
June	14	13	14	9	50
July	8	13	9	4	34
August	14	14	8	10	46
September	11	10	8	6	35
October	16	23	4	8	51
November	15	15	5	5	40
December	11	8	13	8	40
Totals	160	150	113	102	525*

* This figure does not include 234 births which, although belonging to the district, were registered in other districts.

Table No. 5 gives an analysis of the places of confinement.

TABLE No. 5.

Total Confinements—759.

No. born in Hillingdon County Hospital	.....	56 or 7.3%
No. born in London voluntary hospitals	.....	102 or 13.44%
No. born in nursing homes or other hospitals	.....	133 or 17.53%
No. confined in their homes by midwives or doctors	.....	468 or 61.66%

Infant Mortality.

The total number of deaths under one year of age was 35.

The rate per 1,000 births was 46.11. The corresponding rate for England and Wales was 59, for London 67, and for the 135 smaller towns 53 per 1,000.

Seventeen of the 35 deaths were due to congenital defects and prematurity. Ten of these lived less than one week.

The various deaths from stated causes at ages under one year of age are as shown in Table No. 6.

TABLE No. 6.

Certified Cause of Death.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 year.
Prematurity, Congenital Malformation, &c.	10	1	2	—	13	4	—	—	—	17
Diarrhoea	—	—	—	—	—	1	1	1	—	3
Convulsions	—	1	—	—	1	1	—	—	—	2
Congenital Heart Disease	—	—	—	—	—	—	1	—	—	1
Pneumonia	—	—	—	1	1	3	3	—	—	7
Bronchitis	—	—	—	1	1	1	—	1	—	3
Accidental Suffocation	—	—	—	—	—	—	—	1	—	1
Acute Hepatitis	—	—	—	—	—	—	1	—	—	1
	10	2	2	2	16	10	6	3	—	35

Births.

Legitimate	.....	732
Illegitimate	.....	27

Infant Deaths.

Legitimate	.....	32
Illegitimate	.....	3

Maternal Morbidity.

The Council has an informal agreement with the London County Council for the admission of cases of puerperal pyrexia and puerperal fever to the North Western Hospital, Hampstead. Alternatively, admission can usually be obtained at Queen Charlotte's Hospital (Isolation Block), Shepherds Bush.

During the year four cases of puerperal pyrexia and one case of puerperal fever were notified. There was one death of a Southall resident. This patient was confined at home and was subsequently admitted to Hillingdon County Hospital.

All cases of puerperal pyrexia and of puerperal fever notified in the district are investigated by the Health Department. In the case of a death, the confidential information so obtained is communicated to the Ministry of Health for their collation with similar information obtained from other areas. It is hoped that in this way further light will be thrown on the problems of maternal morbidity and mortality, thus helping their solution.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Nursing in the Home.

General Nursing.

The local District Nursing Association provides two nurses, one on the north side and one on the south side of the district, for the home nursing of cases of ordinary sickness and accidents.

During 1934, 587 patients were treated and the total number of visits made by the nurses was 7363. A certain number of these patients were referred to the Nursing Association from the Maternity and Child Welfare Clinics.

The Council makes a monetary grant towards this service.

Infectious Disease (Measles).

The Health Visitors act if need be as nurses in the case of Measles outbreaks.

Clinic and Treatment Centres.

Table No. 7 shows the services provided in the district.

First Aid Dressing Station and Medical Comforts Depot.

These Departments of honorary public service, organised by the St. John's Ambulance Brigade, were started in 1928. The men of the 55th Division, No. 1 District are detailed for rotation duty, and a great deal of praiseworthy work continues to be done.

The Medical Comforts Depot, in charge of Nursing Sisters (55th Division Nursing), is open daily from 7.30 to 8.30 p.m., for the issue of all nursing requisites for the sick on presentation of a voucher signed by a District Nurse, a Certified Midwife, or a Medical Practitioner. A small charge is made for the loan of articles and such money is used towards replacements.

The work of the Men's Brigade and of the Nursing Division is not confined to the Station. All local sports meetings and public events are attended and members are also detailed for duty on important occasions in Greater London.

The Council makes monetary grants towards these services.

TABLE NO. 7.

CLINICS AND TREATMENT CENTRES, as at end of year.

CLINIC AND TREATMENT CENTRES.	SITUATION.	SERVICES PROVIDED.	DAY AND TIME.	BY WHOM PROVIDED
Ante-Natal Clinic	1. Manor House, 2. Allenby Road, Mission Hall	Medical Supervision	Thursday, 10 a.m. Tuesday 10 a.m.	Southall-Norwood U.D.C.
Maternity and Child Welfare Clinics	1. Manor House. 2. Allenby Road, Mission Hall	Supervision of Mothers and Children under 5 years. Ditto.	1. Monday and Wednesday 2 p.m. Wed- nesday, 10 a.m. 2. Tuesday, 11 a.m. Thursday, 2 p.m.	Southall-Norwood U.D.C.
M. & C. W. Dental Clinic.	Featherstone Road Schools.	Dental Inspection and Treatment of nursing and expectant mothers and children under 5 years.	Friday, 2 p.m. and by appointment.	Southall-Norwood U.D.C. by arrangement with the County Edu- cation Authority
M. & C. W. Birth Control Clinic.	Women's Welfare Centre, Telford Road, W.10.	Birth Control Advice etc.	Monday, 2.30 p.m. Tuesday, 6.30 p.m. Wednesday, 6.30 p.m. Friday, 2.30 p.m.	Southall-Norwood U.D.C. by arrangement.
School Clinics	Featherstone Road Schools	Medical Inspection and treatment of School Children.	Daily at 10 a.m.	Middlesex County Council.
Treatment Centres for V.D.	Various London Hospitals	Examination and treat- ment.	Daily, 7.30 a.m. to 7.30. p.m.	Middlesex County Council.
Tuberculosis Dispensary	Green Man Passage, Ealing, W.13.	Dispensary treatment and supervision.	Monday, 1.30 p.m. Tues., Wed. & Fri. 10 a.m.	Middlesex County Council.

Laboratory Work.

There has been no change in the arrangements for laboratory work since the last report.

The Council affords facilities to all medical men practising in the district for the examination of pathological specimens, and this work is carried out by the Lister Institute of Preventive Medicine.

The following table, Table No. 8, shows the work done during the year 1934, (exclusive of work done for the Isolation Hospital).

TABLE NO. 8.

	<i>Positive.</i>	<i>Negative.</i>
Swabs for diphtheria	75	677
Sputa for Tubercle	23	124
Widal Reaction	—	—
Wasserman Reaction	2	—
Urine for Tubercle	—	1
Swabs for Puerperal Pyrexia	—	9
Swabs for Cerebro-spinal meningitis	—	3
Smears for Gonococci	—	1
Pleural fluid for Tubercle	—	1
Total Examinations	100	816

Ambulance Facilities.

For Infectious Cases.

A Morris motor ambulance, purchased in October 1929, is in use for conveying infectious patients to hospital and for disinfection work. The ambulance was overhauled during the year and during the time it was out of commission one of the Fire Brigade ambulances was used.

The mileage for the year was 2,875.

For non-infectious and accident cases.

Two motor ambulances under the charge of the Chief Officer of the Fire Brigade are provided by the Council for the use of residents, to remove non-infectious and accident cases to hospital and for other ambulance work.

One ambulance is a W. & G. du Cros, purchased in January, 1930, and the other is a Commer De Luxe, purchased in July, 1932.

Prompt and efficient service continues to be rendered.

The following figures (Table No. 9) show the year's working of the Motor Ambulances for non-infectious and accident cases :—

TABLE NO. 9.

Ordinary cases removed to hospital	.....	952
Accidents	.....	216
Out of District cases	.....	—
	Total	1168
Miles travelled	.....	12,936
Cash received	.....	£7-9-11
Total expenditure	.....	£480-8-2
Cost per mile (exclusive of depreciation)	.....	7.2 pence

Poor Law Medical Relief.

The Relieving Officer issued 148 Medical Orders during 1934. Some of these cases also received out-door relief or institutional treatment.

Hospitals.

There are no hospitals at present in the district other than the Authority's own Isolation Hospital for fever cases and the Hanwell Mental Hospital which is governed by the London County Council.

The foundation stone of the Southall-Norwood General Hospital was laid on the 19th June, 1934, and it is hoped to open the Hospital in the early summer of 1935. The Hospital is situated at The Green, Southall, and will consist, in the first place, of about 18 beds.

The Isolation Hospital report is given on pages 57-61.

The Council makes grants to the following hospitals in the neighbourhood :—

King Edward's Memorial Hospital, Ealing.
Hounslow Cottage Hospital.
Hanwell Cottage Hospital.

An increasing use is being made of the Middlesex County Hospitals, more especially the Hillingdon County Hospital and the West Middlesex County Hospital at Isleworth. No formal arrangements however have been made with regard to the admission to these hospitals of cases sent by the Council.

MATERNITY AND CHILD WELFARE.

Heath Visiting.

Up to September, 1934, two of the Health Visitors had been employed purely for Maternity and Child Welfare Work, and the third Health Visitor purely for Infectious Disease visiting. This led to much overlapping of the district involved and a consequent waste of time in travelling and in other ways. The Council in September gave their approval in principle to an additional Health Visitor being appointed in the coming financial year because of the general expansion of the work, and meanwhile a re-arrangement was made of the Health Visitors' duties and their districts in order that their work might be more easily and more efficiently performed. As a result, each of the three Health Visitors now has a district of her own in which she does all health visiting work including infectious diseases home-visiting and visiting schools in connection with infectious disease, but excluding Infant Life Protection visiting which, as heretofore, is still done by the senior Health Visitor who has been appointed Infant Life Protection Officer.

The work done by the Health Visitors during the year is as shown in Table No. 10.

TABLE NO. 10.

Summary of Health Visiting Work for the Year 1934.

No. of livebirths notified	.....	.....	.....	.....	.....	667
No. of non-notified births	.....	.....	.....	.....	.....	74
No. of stillbirths notified	.....	.....	.....	.....	.....	18
No. of illegitimate births notified (<u>included in first figure</u>)	.....	.....	.....	.....	.....	9
Visits to Infants :						
1st. visits	.....	.....	.....	.....	.....	687
Re-visits	.....	.....	.....	.....	.....	671
Visits to Children :						
1st. visits	.....	.....	.....	.....	.....	226
Re-visits	.....	.....	.....	.....	.....	1706
Visits to Expectant Mothers	.....	.....	.....	.....	.....	277
Visits for infectious disease	.....	.....	.....	.....	.....	2129
Visits to Schools	.....	.....	.....	.....	.....	*64
Infant Life Protection Visits	.....	.....	.....	.....	.....	177
Miscellaneous visits	.....	.....	.....	.....	.....	189
Removals	.....	.....	.....	.....	.....	369
No access	.....	.....	.....	.....	.....	476
					TOTAL	6971

* At these visits a total of 4,749 children were examined.

Infant Life Protection.

Under the Local Government Act, 1929, the functions of Part I of the Children Act 1908, formerly discharged by the Poor Law Authorities, were transferred to this Council. This transfer occurred on 1st April, 1930, and the Senior Health Visitor was appointed Infant Life Protection Officer. Since that date the Act has been altered and implemented by the Children and Young Persons Act, 1932.

Below are the statistical particulars for the year :—

TABLE NO. 11.

(1) Number of foster parents on register :—				
(a)	At the beginning of the year	.....	.....	37
(b)	At the end of the year	.....	.....	41
(2) Number of foster parents receiving foster children :—				
(a)	At the beginning of the year	.....	.....	26
(b)	At the end of the year	.....	.....	24
(3) Number of children on the register :				
(a)	At the beginning of the year	.....	.....	51
(b)	At the end of the year	.....	.....	36
(4)	Number of children received by foster parents during the year	.....	.....	45
(5) Number of foster children :—				
(a)	Reached the age of nine during the year	.....	.....	Nil
(b)	Removed during the year to different foster parents	.....	.....	6
(c)	Adopted	.....	.....	31
(d)	Returned to parents	.....	.....	20
(e)	Died during the year	.....	.....	*3
(f)	On whom inquests were held	.....	.....	Nil
(6)	Total number of visits made during the year	.....	.....	177
(7)	Number of cases in which court proceedings were taken	.....	.....	Nil

*1. E.H.	19 mos.	Died in Hillingdon.	Broncho-pneumonia and Whooping Cough.
2. M.G.	3 yrs.	Died in Hillingdon.	Gastro-Enteritis. Tuberculous adenitis.
3. G.W.	1 mo.	Died in Hillingdon.	Gastro-Enteritis. Congenital heart disease.

All foster children, as soon as reasonably possible after arrival, are subjected to a medical examination by the Medical Officer of Health.

Orthopaedic Treatment.

There are no special arrangements for the prevention, treatment and after care of crippling conditions. Any such cases that come under notice are referred to the patient's own doctor or to the Orthopaedic Hospital or to the general hospitals.

Consultant Aid in Difficult Labour.

In July, 1934, it was decided to appoint a consultant obstetrician for difficult cases of labour, to be available to medical practitioners practising in Southall. Dr. J. W. Rait Bell of Ealing was appointed as consultant. Up to the end of the year no cases had occurred where Dr. Bell's services were required.

With regard to the payment of fees by the patient for this service, pending the adoption of a general economic circumstances scale, each individual case will be referred to the Finance Committee for consideration.

Birth Control.

In September, 1934, the Council decided to institute a birth control service in conformity with Circular 1408 of the Ministry of Health dated May 31st, 1934.

After a detailed review of the position, it was decided that Southall was too small an area to support a birth control clinic of its own and that the services required would best be obtained by arranging that suitable patients should be sent to a clinic held elsewhere. After investigation of three or four of these clinics, it was eventually decided to agree to an arrangement with the authorities of the North Kensington Women's Welfare Centre in Telford Road, North Kensington, whereby they would take any patients who might be referred from the district. In order to conform with the terms of the Ministry of Health's circular, prospective patients are referred either direct by the doctor at the clinic or may attend a special gynaecological clinic which is held on the first and third Mondays in the month at the Manor House at 4 p.m.

A grant has been made by the Council to the North Kensington Women's Welfare Centre in order to cover the services rendered by the Centre to the Council for the remainder of the financial year ending 31st March, 1935.

This service, when properly made known, should prove of great benefit to individual patients in the district and it has already met with a considerable measure of appreciation by the patients who have already made use of it.

The idea of a birth control clinic is by no means new, and a fair number of authorities run their own, but there have been many enquiries from other authorities and outside bodies since the scheme was first advertised for details of its working and copies of the posters, pamphlets, etc., used.

The number of attendances made at the North Kensington Women's Welfare Centre of Southall residents during 1934 was 54. It has been impossible to differentiate from these the number referred under this present scheme although these particulars will be available in future years.

Institutional Provision for Unmarried Mothers, Illegitimate Infants and Homeless Children in the district.

None.

Ante-Natal Clinic.

Until September, 1934, two ante-natal sessions were held weekly at the Manor House. In September, when the Branch Library was discontinued as a clinic and the clinic was transferred to the Mission Hall, Allenby Road, it was decided to hold a Tuesday morning ante-natal clinic there for one hour instead of two hours (as at the Manor House) and to hold a clinic for new infants on the same morning for another hour.

The number of patients seen at the ante-natal clinic during the year was 244 and the total number of attendances was 762. These figures show a small decrease in the number of new patients and a larger decrease in the number of re-visits compared with last year. This decrease, which occurred mainly in the first six months of the year, is probably in part due to there having been two changes in the medical officer in charge of the clinic during that time and also to the increased number of cases which are ultimately confined in hospital. The hospitals where they are to be confined prefer the patients to attend there for ante-natal supervision, and as no maternity hospital is maintained by the local authority, cases which first attend the clinic and then book up for hospital are usually persuaded to continue their ante-natal supervision at the hospital. This is theoretically ideal but has one practical disadvantage—the time, expense and discomfort of a journey up to London or to Hillingdon. For this reason one of the London hospitals, University College Hospital, asks to see patients on booking and also one month before they are due. Between these times the patients are asked to attend their local clinic and the local clinic acquaints the hospital with any abnormality which might occur. This is a system which might well be adopted by other hospitals with advantage to the patient.

The following table gives the figures for the last six years and the proportion of new cases to re-visits.

TABLE NO. 12.

	1st. Visits.	Re-visits.	Average number of re-visits per patient.
1929	186	278	1.49
1930	182	267	1.46
1931	260	528	2.03
1932	289	604	2.09
1933	264	782	2.96
1934	244	518	2.12

Maternity and Child Welfare Clinics.

Up to April, 1934, these were held as follows :—

At the Manor House by Dr. A. E. B. Harding on Mondays and Thursdays from 2 to 4 p.m. for re-visits and on Wednesdays from 10 a.m. to 12 noon for new cases only ; at the Branch Clinic by Dr. A. S. Hall-Craggs on Thursdays from 2 to 4 p.m. for both new cases and re-visits.

After April they were taken over by myself and the days of the Manor House clinics were as follows :—Mondays and Wednesdays from 2 to 4 p.m. for re-visits, and on Wednesdays from 10 a.m. to 12 noon for new cases. The Branch Clinic day and time remained the same.

In September, 1934, the Branch Library was discontinued as a branch clinic and temporary premises were hired at the Mission Hall in Allenby Road. It was then decided to hold for the time being an hour's session from 11 a.m. to 12 noon on Tuesdays for new infants, preceded by an hour's session for ante-natal cases.

The attendances at these clinics during 1934 are shown in the following table :—

TABLE NO. 13.

Manor House.

Seen by Medical Officer :

Infants	.....	.....	.....	.....	2253
Children	.....	.....	.....	.....	898

Weighing only :

Infants	.....	.....	.....	.....	822
Children	.....	.....	.....	.....	393

New cases (included in above) :

Infants	.....	.....	.....	.....	249
Children	.....	.....	.....	.....	132

Branch Clinic.

Seen by Medical Officer :

Infants	.....	.....	.....	.....	1253
Children	.....	.....	.....	.....	361

Weighing only :

Infants	.....	.....	.....	.....	564
Children	.....	.....	.....	.....	312

New cases (included in above) :

Infants	146
Children	57

Total attendances	6856
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The total attendances at the Clinics during the past six years have been as follows :—

1929	.....	5459	1932	.....	7105
1930	.....	5890	1933	.....	7427
1931	.....	5794	1934	.....	6856

It will be noted that there was a drop in the total number of attendances in 1934 compared with the figure for 1933. This drop occurred mainly in the first six months of the year. It was probably due to the various changes in medical personnel which took place in the first four months of the year and also to a drop of 579 in the number of applications for assisted milk supplies (from 1006 to 427) all of which cases have to be seen by the medical officer in order to continue their milk supply.

Voluntary Help at Clinics.

The voluntary workers include three members of the St. John's Ambulance Brigade and eleven other ladies in the district who help with the management of the Infant Welfare Clinics. This work, which is ungrudgingly given, is of great help to the efficient running of the clinics. In addition it saves much expense to the Council as otherwise more paid workers would have to be appointed. The Council very much appreciate the work so done and they hope that they may be able to rely on the voluntary workers for a continuance of this service.

Midwives.

The number of midwives who during January, 1934, gave notice of their intention to practice in Southall was fifteen. Of these ten were resident in Southall and five were resident outside the district. The number of midwives who were added to this list between the 31st January, 1934, and the end of the year was five. Of these four were resident in Southall and one was resident outside the district. The total number of midwives practising in Southall during the year was therefore twenty, of whom fourteen were resident in the district and six were resident outside.

No midwife is employed or subsidised by the Council.

Supervision of midwives is undertaken by the County Council.

The following table, on material kindly supplied by Dr. Tate, the County Medical Officer of Health, gives information which deals with notifications, relating to Southall, received from midwives resident in Southall during the year.

TABLE NO. 14.

Medical Help (a) Mother	.....	.....	.....	.....	55
(b) Child	.....	.....	.....	.....	11
Laying out dead body	.....	.....	.....	.....	0
Liability to be a source of infection	.....	.....	.....	.....	3
Death of child	.....	.....	.....	.....	2
Stillbirths	.....	.....	.....	.....	4
Artificial feeding	.....	.....	.....	.....	1

The reasons for sending the 66 notifications for medical help were as follows :—

TABLE NO. 15.

Ante-natal conditions	.....	.....	.....	7
High Temperature	.....	.....	.....	2
Inflammation of, or discharge from, infant eyes	.....	.....	.....	5
Ruptured perineum	.....	.....	.....	24
Difficult or prolonged labour	.....	.....	.....	17
Feeble or premature baby	.....	.....	.....	3
Retained placenta or membrane	.....	.....	.....	2
Other conditions (a) Mother	.....	.....	.....	3
(b) Child	.....	.....	.....	3

Maternity and Nursing Homes.

The Middlesex County Council is the local authority under the Acts relating to the registration of maternity and other nursing homes. There are two private nursing homes in the district.

The following information, relating to maternity and nursing homes in Southall, has been kindly supplied by the County Medical Officer :—

TABLE NO. 16.

Total no. of registered nursing homes in Southall	.....	.....	2
Total accommodation (Number of beds, 6 and 11)	.....	.....	17
No. of deletions during the year 1934	.....	.....	Nil
No. of additional applications <i>re</i> registration during the year 1934	.....	.....	1
No. so registered	.....	.....	*Nil
Refusals or cancellations of registration	.....	.....	Nil
No. of applications for exemption of registration	.....	.....	Nil
Results of such applications	.....	.....	—

*The application was received during 1934 but the nursing home was not registered by the County Council until 1.1.35, when the accommodation of the home was increased from 11 to 13.

Grants of Milk.

Milk is supplied free or at a reduced rate to expectant mothers (during the last three months of pregnancy), to nursing mothers, and to children under three years of age, and exceptionally to children under five years of age, according to a scale which has been adopted by the Council with the approval of the Ministry of Health.

There were 427 applications granted during the year, in respect of 125 families.

<i>Cows milk free.</i>	<i>Cows milk at 50 % cost.</i>	<i>Dried milk free.</i>	<i>Dried milk at 50 % cost.</i>
332	13	82	—

This shows a very great reduction on the number in 1933, when 1006 applications were granted. Presumably the major reason in this decrease in the number of applications is because of a decrease in local unemployment

Dental Treatment.

By arrangement between this Council and the County Education Authority, expectant and nursing mothers and children under five years of age attending the Maternity and Child Welfare Centres are enabled to have dental treatment and advice, including if necessary the provision of dentures. The cost of this service is charged to the patient according to the work done, but in the case of children under five years of age, an inclusive charge of 1s. 6d. is made for completed dental treatment in any one year.

In May, 1934, the Council decided to authorise dental treatment being carried out forthwith on patients who require it urgently and who appear to be unable to pay the necessary fees. Provision was made for such necessitous cases to be considered by the Committee at a later date in order to determine what proportion of the cost, if any, the patients should themselves pay.

TABLE NO. 17.

Below are the details of the year's working of the clinic :—

Expectant and Nursing Mothers :—

Number sent for inspection	.....	.....	.....	.....	13
Number inspected	.....	.....	.....	.....	13
Number receiving treatment	.....	.....	.....	.....	10
Number of completed dentures	.....	.....	.....	.....	8
Number of fillings	.....	.....	.....	.....	3
Number of extractions under local anaesthetic	.....	.....	.....	.....	22
Number of extractions under gas	.....	.....	.....	.....	54
Total number of attendances and re-attendances	.....	.....	.....	.....	48

Children under 5 years of age :—

Number sent for inspection	.....	.....	.....	.....	60
Number receiving treatment	.....	.....	.....	.....	60
Number of fillings	.....	.....	.....	.....	24
Number of extractions under local anaesthetic	.....	.....	.....	.....	41
Number of extractions under gas	.....	.....	.....	.....	102
Total number of attendances and re-attendances to dentist	.....	.....	.....	.....	71

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

Water is supplied to nearly the whole of the district by the South West Suburban Water Company. The Metropolitan Water Board supplies a small area in the southern part of the district.

Samples are taken from time to time from the mains of the companies supplying the district. During the year four such samples were taken and the results were satisfactory both bacteriologically and chemically.

Drainage and Sewerage.

The Middlesex County Council's main drainage scheme is now nearing completion and it is anticipated that during the coming year the District Council's Sewage Disposal Works will be closed down and all sewage will pass into the main sewers included in the above scheme. It is also anticipated that work will shortly be commenced upon a comprehensive scheme for the surface water drainage of the north side of the district.

Excepting in portions of the district not fully developed the whole of the houses are supplied with water closets and are drained to the sewerage system.

Public Cleansing.

Practically the whole of the district is scavenged directly by the Council. House refuse is collected in low-loading covered mechanically-drawn vehicles and is transported to an incinerator which deals adequately with the work. During the year a total of 7,425 tons of refuse were removed from the houses in the district.

Householders have been asked to keep separate their old newspapers and these are collected by the Council, baled and sold.

No cesspools are emptied or cleansed by the local authority, the few which remain in the district being supervised by their owners.

Closet Accommodation.

About twenty-five closets, from houses not on the water carriage system, still require to be emptied each week. This is done by the Surveyor's Department. Four closets were converted from the conservancy to the water carriage system during the year. The number of non water-closet systems remaining at the end of the year was as follows : 25 earth closets, no privies, and no pail closets. There are four cesspools still in the district.

Sanitary Inspection of the District.

The total number of inspections of premises made in connection with the work of the Health Department during the year was 9387.

The following table shows an analysis of the number and nature of such inspections :—

TABLE NO. 18.

Visits and re-visits to premises on complaints	456
Houses inspected <i>re</i> house-to-house inspections	1027
No. of inspections and re-inspections of houses and premises, &c.	3549
Slaughterhouses	139
Factories, workshops, workplaces and outworkers	287
Visits to canal for canal boat inspections	46
Drain tests	66
Petroleum and carbide stores	78
Food sampling	262
Dairies and milkshops	361
Bakehouses	84
Other premises where food is prepared	2226
Smoke observations	13
Piggeries	16
Tents, vans, sheds, &c.	34
Deposits and accumulations of refuse	279
Schools	16
Stables	22
Overcrowding	84
Vermin	41
Cinemas, cafes, public houses, &c.	16
Hairdressers' shops	29
Miscellaneous	235
TOTAL	9366*

*In addition, 84 inspections were made under the Shops Acts with regard to closing hours.

TABLE NO. 19.

Total number of defects or nuisances found during the year	2604
Total number of defects or nuisances abated during the year	1823
No. of notices served :	
Preliminary	573
Statutory	56

The following table shows the number and nature of complaints received during the year :—

TABLE NO. 20.

Choked drains	67
Dampness	11
Nuisance caused by the keeping of animals	6
In relation to house refuse	24
Offensive smells	30
Defective roofs, gutters, &c.	8
Dirty condition of houses	20
Defective condition of houses	69
Accumulation of refuse, &c.	29
Defective sanitary fittings	13
Vermin	26
Miscellaneous	35
	<hr/>
	338
	<hr/>

Verminuous Persons and their belongings.

As a result of a report put before the Committee in May 1934, it was decided to take steps with regard to the disinfection of premises and property infested by bed bugs. A charge is made for this service when performed by the Health Department except in necessitous cases when the disinfection is done free of charge. No centre for the cleansing of verminuous persons or their belongings has been established by the Authority.

Smoke abatement.

Thirteen smoke observations were made on chimneys during the year and no serious infringements were noted. In a few cases the cause of the nuisance was the improper stoking of the furnaces and the advice given to the stokers was effectual in causing an abatement.

Towards the end of the year many complaints were received with regard to smells and smoke in the neighbourhood of Beaconsfield Road.

Dr. Carter, the Inspector under the Alkali, &c. Works Regulations Act, in collaboration with the Health Department, started a series of experiments with the object of finding out the degree of the pollution of the atmosphere in different parts of Southall, and especially in the neighbourhood from which the complaints arose.

These experiments will probably continue until about July, 1935, and the results will not be properly assessable until their conclusion.

Schools.

There are seven Elementary Schools in the district maintained by the County Council and there are two Church Schools supervised by the County Council. In addition there are five private schools. Secondary education is provided for by the County Secondary School and by the Southall Technical College.

All the Schools were inspected during the year and were found to be in a satisfactory sanitary condition and to have a satisfactory water supply.

When infectious disease is reported from a school, the school is visited by the Health Visitor and if necessary the children are inspected and other measures, such as swabbing, exclusion from school, are taken for preventing the spread of the infection.

The total number of children examined in the schools was 4,749.

Canal Boats.

During the year 46 visits were paid to the canal and 42 boats were inspected. The general condition of the boats and their occupants was satisfactory. Three infringements of the regulations were found, and by the end of the year two certificates of their having been rectified had been received. There were no complaint notes issued by other authorities and no cases of infectious disease were notified upon any of the boats. It has therefore not been necessary to detain any vessel for the purpose of cleansing and disinfection.

Mortuary.

The Mortuary is situated in the Cemetery Ground, Havelock Road. It is antiquated and out of date.

PREMISES AND WORKSHOPS WHICH CAN BE CONTROLLED BY BYELAWS.

Tents, Vans, Sheds and similar structures.

There are still a few occupied caravans and similar structures in the District and these at the end of the year were engaging the attention of the Council.

Offensive Trades.

There are none at present scheduled in the District.

Underground sleeping rooms.

There are no underground sleeping rooms within the meaning of the Act.

Common Lodging Houses.

There are no common lodging houses in the District.

Factories and Workshops.

TABLE NO. 21.

The following table shows the number of inspections and the results thereof made during the year.

Premises.	No. of		
	Inspections.	Written Notices.	Occupiers Prosecuted
Factories, workshops and workplaces	287	4	—

The following table shows the number and nature of the defects found in connection with factories and workshops during the year :—

TABLE NO. 22.

Particulars	No. of defects.			No. of offences in respect of which proceedings were instituted.
	Found.	Remedied.	Referred to H.M. Inspector.	
Nuisances under the Public Health Acts: *				
Want of cleanliness	6	6	—	—
Want of ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage to floors	—	—	—	—
Other nuisances	7	7	—	—
Sanitary Accommodation :				
Insufficient	4	2	—	—
Unsuitable or defective	—	—	—	—
Not separate for sexes	—	—	—	—
Offences under the Factory and Workshops Acts:				
Illegal occupation of underground bakehouses	—	—	—	—
Other offences :	—	—	—	—
	17	15	—	—

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshops Act, 1901, as remediable under the Public Health Acts.

Petroleum and Carbide.

During the year 47 applications were received for the renewal of petrol licences for similar quantities as hitherto, and two applications were received for licences to store an increased quantity. In each instance the application was granted,

Ten new applications were received to store petrol, and nine were granted.

Three applications were received for the renewal of licences to store carbide of calcium and ten applications were received for new licences. These applications were also granted.

All the licensed premises have been regularly inspected and no infringements of the terms of the licences were recorded.

The number of licences in force at the end of 1934 within the district was 58 for petroleum and 13 for carbide. The quantity of petrol covered by the petrol licences was 295,190 gallons and the quantity of carbide covered by the licences was 1192 lbs.

Celluloid and Cinematograph Films Act, 1922.

There are only two licences issued by the Council in force. This is for the purpose of stripping and making celluloid solution from cinematograph films.

The premises were periodically inspected during the year.

HOUSING STATISTICS FOR THE YEAR 1934.

1. Inspection of Dwelling-houses during the year :—

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	1041
(b)	Number of inspections made for the purpose	3549
(2) (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	844
(b)	Number of inspections made for the purpose	1027
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	60
(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	551

2. Remedy of Defects during the Year without Service of formal Notices :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	414
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3. Action under Statutory Powers during the year:—

(a)	Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :	
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	6

(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	6
(b) By local authority in default of owners	0
(b) Proceedings under Public Health Acts :	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	50
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners	50
(b) By local authority in default of owners	0
(c) Proceedings under sections 19 and 21 of the Housing Act, 1930 :	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	0
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	0
(d) Proceedings under section 20 of the Housing Act, 1930 :	
(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 rendered fit	0

During the early part of the year, as a result of a previous review of housing conditions generally in the district, it was provisionally decided to schedule four clearance areas, two improvement areas and a certain number of individual unfit houses.

Towards the end of the year, as a result of a further review of the conditions and after consultation with officials of the Ministry of Health, it was

decided to retain in the slum clearance proposals three of the clearance areas and to include some of the houses previously scheduled in improvement areas with the other individual unfit houses.

At the end of the year the position was as follows :—

(a) Proposed Clearance Areas :

No.1.	Tildesley Low Cottages	8 houses.
No. 2.	Mount Pleasant Cottages	4 houses.
No. 4.	Havelock Road (1-6)	6 houses.

(b) Proposed Improvement Areas : None.

(c) Proposed Individual Unfit Houses :

Canalside Cottages	1 house.
Adelaide Cottages	6 houses.
Kingston Road	4 houses.
Jericho Cottages	1 house.
9-13, Woodbine Cottages	5 houses.
1-3, Archway Cottages	3 houses.
8-15 and 18-21, Havelock Road	12 houses.

At the beginning of 1935, official representations were made with regard to the various houses and the procedure under the Housing Act of 1930 was set in motion. At the same time, plans were advanced for the construction of about sixty houses on a site obtained in Allenby Road for the re-housing of the tenants displaced by the slum clearance proposals.

INSPECTION AND SUPERVISION OF FOOD.

Milk supply.

There are two cowkeepers on the register as producers of milk.

During the year 13 purveyors of milk were added to the register and five were removed, having ceased business. At the end of the year there were 41 purveyors of milk on the register. This number includes 11 purveyors who were registered with respect to premises occupied for other purposes for them to retail milk in sealed receptacles only, and three purveyors who had purchased businesses from others who were already on the register.

During the year three cases of contraventions of milk legislation were taken to the police court. The first was an offence under Article 6, of the Milk and Dairies Order 1926, and an offence under Section 6 of the Milk and Dairies (Consolidation) Act, 1915. The offences were for being an unregistered purveyor and also for having the cart and utensils improperly marked. A conviction was obtained and a fine of £2 imposed.

The second and third cases were for contraventions of Article 31 of the Milk and Dairies Order and were for filling bottles on unregistered premises. There was a conviction in each case and the defendants were both fined forty shillings.

Under the Milk (Special Designations) Order, 1923, twenty-three licences were granted during the year, four for the sale of Certified Milk, eleven for Grade A. (Tuberculin Tested) Milk, seven for Pasteurised Milk, and one for Grade A., Pasteurised Milk.

Samples of ordinary unclassified milk are examined for bacterial count. These examinations are performed at the National Institute of Research in Dairying, at Reading. Immediately after the samples are taken they are sent by train to the Institute and they are nearly always examined between four and six hours after being taken.

It is difficult to compare any two samples unless they are taken and examined under exactly the same conditions, and normally the general bacterial count is much higher in the summer than in the winter, and is much higher the longer the time that has elapsed since milking. A large count of general bacteria, together with the presence of *b.coli* in 0.01 c.c. is usually taken as an indication that the milk is unsatisfactory. In these cases the attention of the vendors is drawn to the fact, and advice is given to them in order to help them exercise more care in the handling of the milk and utensils.

On the whole a bacterial count is a very good indication of general cleanliness and this appears to be improving.

During the year 222 samples were taken in this way and it was considered that of these samples 45 were unsatisfactory.

Some purveyors of milk appear to have no difficulty in keeping their milk up to a high standard of cleanliness, while others do not succeed so easily. It is of course to these latter that more attention is paid by this Department.

Considerable attention continues to be given to improving the methods of cleansing and sterilising milk bottles and utensils. Under Article 21 of the Milk and Dairies Order the use of steam or boiling water for scalding all milk vessels is required. Boiling water means water at the temperature at which it boils and does not mean, as is often mistakenly thought, water from which watery vapour (sometimes erroneously called steam) arises. The cleansing of bottles in which milk is delivered is a matter which often receives insufficient attention. Milk bottles are included under Article 21 of the Order and therefore should be cleansed by means of steam or boiling water in the same way.

Exposure of milk bottles and utensils to steam is necessary for the protection of the public. It is also an advantage commercially as when the bottles and milk receptacles are sterilised the milk keeps better and the dairyman therefore gains thereby.

During the year, special attention was paid to the question of the installation of steam raising boilers and the provision of proper sterilising cabinets for bottles. At the end of the year all premises where bottles are cleansed and filled were equipped with steam raising boilers and sterilising cabinets in this way.

Meat and Other Foods.

There were two infringements of the Public Health (Meat) Regulations, part VI.

In these cases the meat carriers' carmen were not taking all reasonable precautions to prevent the contamination of the meat.

A warning letter was sent to each firm concerned and no further contravention was noted.

No meat is sold from stalls in the district.

There are two registered and one licensed slaughterhouses in the district. There is no public abattoir.

During the year, 364 animals were slaughtered in the slaughterhouses and all the meat was inspected.

In connection with the inspection of meat and other foods, the following were found to be diseased or unsound and were voluntarily surrendered for destruction :—

Meat, including offal and rabbits	.....	1869 lbs.
Fish	.....	259 lbs.
Fruit	.....	784 lbs.

Slaughter of Animals Act, 1933.

This Act came into force on the 1st January, 1934.

On 28th November, 1933, the Council adopted the following motion :—

“ That the Urban District Council of Southall-Norwood hereby resolve that Section 1 of the Slaughter of Animals Act, 1933, shall on and from the 1st day of January, 1934, apply to sheep, ewes, wethers, rams and lambs.”

Under Section 3 of the Act, fourteen licences each of three years duration were issued during the year to slaughtermen. No contraventions of the Act were noted during the year.

Adulteration.

The Food and Drugs (Adulteration) Act is administered by the County Council, and the following figures, which were kindly supplied by the Chief Officer of the Public Control Department of the County Council, show the number of samples taken during the year by the Council's Officers in Southall, and the result of the analyses :—

TABLE NO. 23.

<i>Article.</i>	<i>No. of Samples</i>	<i>Adulterated</i>	<i>Remarks.</i>
Milk	112	1	No action taken.
Chocolate coverture	1	1	Summons dismissed.
Confectionery	2	—	—
Cream pastry	1	1	No action as vendors were summoned elsewhere in the County for a similar infringement.
Gin	1	—	—
Meat, cooked	1	—	—
Meat Pies	5	—	—
Minced Beef	12	1	No action.
Paraffin wax	1	—	—
Sausages	1	—	—
	137	4	

In addition, under Section 16 of the above Act, the following samples were taken by the officers of the Health Department :—

TABLE NO. 24.

<i>Article</i>	<i>No of Samples.</i>	<i>Remarks</i>
Sausages	12	Satisfactory.
Peas	4	"
Pepper	1	"
Meat Paste	1	"

Chemical and Bacteriological Examination of Food.

The chemical or bacteriological analyses of samples taken by the Health Department are carried out either by the Clinical Research Association or by the Public Analyst.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Isolation Accommodation in the County.

Under Section 63 of the Local Government Act, 1929, the County Council in 1931 put forward a scheme for the division of the County into four areas for infectious hospital purposes. This scheme excited much opposition from nearly all the areas involved and, towards the end of 1934, it was made known that the Ministry of Health had suggested some fundamental alterations in the scheme.

Under the original scheme of the County, Southall was to be associated with Acton B, Brentford and Chiswick B, Ealing B, Hayes and Harlington U.D., Ruislip-Northwood U.D., Uxbridge U.D., and Yiewsley & West Drayton U.D. in the third of the four county areas.

Under the Ministry's draft alterations, the western half of this area was continued as a separate area of its own, and Southall remained with Acton and Wembley, Ealing, Brentford and Chiswick, as a composite area.

Early in 1935 this matter came before the Council, as the result of which it was decided to oppose as far as possible the absorption of Southall in this joint hospital district.

The Isolation Hospital.

The Isolation Hospital belonging to the local authority consists (on the Ministry of Health basis) of thirty-three beds. Owing to an outbreak of diphtheria at North Road School in the autumn, the hospital for a considerable time was overcrowded, the maximum number of patients on any one day being 52. An arrangement was entered into with the Borough of Willesden by which cases of scarlet fever and diphtheria which could not be admitted to Southall Isolation Hospital could be taken to the Willesden Municipal Hospital on payment of an agreed fee. (A similar agreement with Ealing could not be utilised as the Ealing Hospital was full at the time). The Southall Isolation Hospital in the same way agreed to accept Willesden cases (which could not be admitted to their own hospital) if accommodation were available in Southall. By this means or by an extension thereof, it should be possible to ensure against any future gross overcrowding.

During the early part of 1934 there was a considerable amount of cross-infection in the wards of the hospital due to cases being admitted with more than one disease and giving rise to other cases of a second disease in the ward. This, of course, cannot always be avoided, although measures are taken to try to ascertain whether any other disease is present in the house from which the patient is removed to hospital.

When cross-infection does occur however the condition can be helped, less patients need suffer, and the tension on the hospital can be lessened if there is sufficient cubicle accommodation.

This cubicle accommodation is also essential for the observation of patients who are merely suspicious cases of scarlet fever or diphtheria and who have been admitted pending confirmation of the diagnosis. This saves other patients in the ordinary wards from being possibly exposed to another disease. There is only one ward in the hospital containing one bed, and even this ward is part of a main block. It was suggested by my predecessor on many previous occasions that a block of ten or twelve cubicles should be erected at the hospital. For one reason or another, however, (mainly due to the uncertainty of the position under the Local Government Act 1929, by which there may be a re-arrangement of hospital areas in the county), nothing has been done with regard to this.

Towards the end of the year and at the beginning of 1935 it was realised more fully that this cubicle isolation block was essential and it was agreed to ask, as soon as the Ministry's attitude became known, for permission to go ahead with the erection of a block of cubicles. If such cubicles were erected it would also be possible, when the hospital was not filled with cases of scarlet fever or diphtheria, to admit bad cases or complicated cases of such diseases as whooping cough, measles and pneumonia which could be more easily and more efficiently looked after in hospital than at home. Bearing in mind the home conditions in parts of Southall, this suggested service is of some considerable importance in the proper treatment of the diseases in question.

Provision of antitoxin.

The Council provides antitoxin free to local medical practitioners for cases of diphtheria in the district. During 1934, 240,000 units were supplied in this way.

The Ministry of Health has also sanctioned the supply of tetanus antitoxin by the Council to local practitioners if such is required. In 1934, 8,000 units were supplied.

Diphtheria and tetanus antitoxins can always be obtained at the Health Department during office hours or at the Isolation Hospital at other times.

Vaccination.

Total number of successful Vaccination Certificates received during the year, 282.

Total number of Exemptions, 259.

Disinfection.

In cases of infectious disease, rooms, clothing, &c., are disinfected, rooms by sealing and fumigating with formalin or a formalin preparation; clothing, bedding, &c., and infected articles which can be removed for steam disinfection, in the disinfector at the hospital.

List of Articles Disinfected during the year.

TABLE NO. 25.

No. of rooms disinfected	.....	.....	378
No. of beds disinfected	.....	.....	357
No. of blankets disinfected	.....	.....	639
No. of bolsters disinfected	.....	.....	202
No. of books disinfected	.....	.....	187
No. of covers disinfected	.....	.....	313
No. of eiderdowns disinfected	.....	.....	119
No. of pillows disinfected	.....	.....	582
No. of sheets disinfected	.....	.....	506
No. of miscellaneous	.....	.....	129
TOTAL	.....	.....	3312

The following articles were destroyed :—

Beds	.....	.....	.....	26
Bolsters	.....	.....	.....	4
Blankets	.....	.....	.....	2
Covers	.....	.....	.....	3
Pillows	.....	.....	.....	13
Wearing apparel	.....	.....	.....	25
TOTAL	.....	.....	.....	73

Cancer.

It will be seen by the table of causes of death (page 13) that in 1934 forty-nine cases (22 males, 27 females) died from cancer. The following table shows the number of deaths from cancer (male and female), the estimated population of the district, and the deaths from cancer per 1,000 population since 1922.

TABLE NO. 26.

Year.	Male.	Female.	Total.	Estimated population.	Rate per 1,000 population.
1922	18	18	36	30,261	1.18
1923	21	14	35	31,360	1.11
1924	20	18	38	31,800	1.19
1925	?	?	40	32,220	1.24
1926	12	11	23	32,870	0.69
1927	13	13	26	33,480	0.77
1928	18	27	45	35,340	1.27
1929	12	10	22	35,370	0.62
1930	17	29	46	37,560	1.22
1931	20	28	48	39,280	1.22
1932	22	23	45	41,530	1.08
1933	23	28	51	44,780	1.13
1934	22	27	49	46,693	1.04

This total does not on the face of it show any significant increase in the death rate from cancer such as is generally supposed to be occurring in the country as a whole. In fact, bearing in mind the greater exactitude of diagnosis, it would appear that there is no evidence of an increase in Southall. As against this however it must be remembered that cancer is a disease of increasing years and the population statistics do not show how far the ratio of old persons to young persons alters in a growing population such as this. There is a tendency for the new-comers to be relatively young and it is this tendency which accounts for the fact (as is mentioned on page 12 of this report) that the crude death rate must, for comparative purposes, be modified by a factor called the comparability factor. All that can be said therefore with regard to these figures is that there is no evidence of any significant increase in the cancer mortality and this probably means that there is no significant increase in the cancer incidence.

Special Infectious Diseases.

Smallpox.

No patients with smallpox or contacts of cases of smallpox were notified to the Department during the year.

Scarlet Fever.

The number of notifications received during the year was 183 as compared with 226 for the previous year. Infection appears to have been mainly due to case-to-case contact. Most of the cases were of a very mild character. In some cases the rash was of fleeting duration; in other cases there were very few signs in the throat.

Two deaths from scarlet fever occurred in January, 1934, one in hospital and one at home. The disease in the former was complicated by pericarditis and the cause of the other death was recorded as post-scarlatinal debility.

Diphtheria.

There were 87 cases of diphtheria as compared with 23 for 1933. Of these, 86 were removed to the Isolation Hospital. The other case, which occurred in the Hanwell Mental Hospital, was nursed there.

There was one death from diphtheria in January 1934. This occurred in hospital and was a late admission.

Up to the end of the year no action had been taken with regard to artificial immunisation against the disease.

In September 1934, soon after the return of children to school, an outbreak of diphtheria occurred at North Road School. This, together with the cases directly infected from patients from the school, accounted for twenty-nine cases in all. Of these cases, five occurred in the week ending 15th September, eight in the week ending 22nd September, thirteen in the week ending 29th September, and three in the week ending 6th October. Of the school cases one was from the Infants' Department, Group 3, one from Group 4, and three from Group 6. In the Junior Department, two cases were from Class 2, four were from Class 3a, four from 3b, three from 4b, one from 4c, one from 5b, and one from 5d. This spread of the disease over many forms made its control more difficult.

The type of diphtheria in this outbreak was as follows:—

Nasal	.....	.....	9	cases.
Faucial	.....	.....	15	cases.
Laryngeal	.....	.....	1	case.
Mixed	.....	.....	4	cases.

On the whole, the epidemic was of a fairly mild character, although about five cases showed signs of a fairly serious heart involvement. These all eventually cleared up to a marked extent, although one boy was in hospital for upwards of twenty weeks.

Puerperal Fever and Puerperal Pyrexia.

One case of puerperal fever and four cases of puerperal pyrexia occurred during 1934. These are referred to on page 18.

Ophthalmia neonatorum.

There were four cases of ophthalmia neonatorum notified in 1934.

The Council has an arrangement with the London County Council by which cases of ophthalmia neonatorum are treated at St. Margaret's Hospital, Hampstead, N.W. In some cases the mothers are admitted with the child in order that breast feeding may be continued.

The following table shows the number of such cases notified and the results of treatment.

TABLE NO. 27.

Cases.			Vision unimpaired.	Vision impaired.	Total Blindness.	Deaths.
Notified.	Treated.					
	At Home.	In Hospital.				
4	1	3	4	—	—	—

The following table (No. 28) shows the various infectious diseases (other than tuberculosis) notified during the year and also their age incidence.

NOTIFIABLE DISEASES DURING THE YEAR
(other than Tuberculosis.)

DISEASES.	AGES.													TOTAL CASES NOTIFIED.	CASES ADMITTED TO HOSPITAL.	DEATHS.
	Un- der 1 year	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 25	25 to 35	35 to 45	45 to 65	65 and over				
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	1	2	10	11	5	87	26	19	13	3	6	—	183	165	2	—
Diphtheria	2	4	2	2	6	44	12	8	5	1	1	—	87	86	1	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	—	—	—	—	—	—	—	1	—	—	—	—	1	1*	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	2	2	—	—	—	4	4*	—	—
Erysipelas	—	—	—	—	—	—	—	—	3	4	7	4	18	5*	—	—
Pneumonia	1	—	1	1	—	8	3	3	2	5	3	3	30	2*	21	—
Ophthalmia Neonatorum	4	—	—	—	—	—	—	—	—	—	—	—	4	3*	—	—
Dysentery	—	—	—	—	—	—	—	—	1	2	—	1	4	—	—	—
Anterior Poliomyelitis	—	1	—	—	—	—	—	—	—	—	—	—	1	1*	—	—

*To London Hospitals or Institutions outside the District.

Table No. 29, shows the number of cases of infectious diseases (including tuberculosis) notified during the year, according to their locality.

TABLE NO. 29.

DISEASES.	Total	North Side	South Side.	Admitted to Hospital	Total Deaths.
Scarlet Fever	183	119	64	165	2
Diphtheria	87	52	35	86	1
Puerperal Fever	1	1	—	1*	—
Puerperal Pyrexia	4	2	2	4*	—
Pneumonia	30	17	13	2*	21
Dysentery	4	—	4	—	—
Ophthalmia Neonatorum	4	2	2	3*	—
Tuberculosis (all forms)	62	37	25	—	30
Anterior-poliomyelitis	1	1	—	1*	—
Erysipelas	18	5	13	5*	—
TOTALS	394	236	158	267	54

* To London Hospitals or Institutions outside the District.

The four cases of Dysentery occurred in the Hanwell Mental Hospital.

Cases of infectious diseases occurred during the year among school children as follows :—

TABLE NO. 30.

School.	Sc. Fv.	Diphth.
Beaconsfield Road	23	2
Clifton Road	6	10
County School	3	—
Dormers Wells	13	3
Featherstone Road.....	9	5
North Road	16	27
Tudor Road	5	7
Western Road	17	1
Crosby House	1	—
Miss Abdo's, Portland Road	1	—
Norwood Green Preparatory School	1	—
Beaconsfield Road Prep. School	1	—
Rutland School, Hanwell	1	—
Stanhope School, Greenford	1	—
Technical School	2	—
St. Anselms School	5	—
Biscoe's School	2	—
	107	55

TABLE No. 31.

Cases of infectious diseases notified from various institutions and hospitals (other than Sanatoria) during the year 1934.

Hospital or Institution.	Scarlet Fever.	Diphtheria.	Pneumonia.	Dysentery.	Erysipelas.	Pulmonary T.B.	Non-pul. T.B.	TOTAL.
Brompton Hospital	—	—	—	—	—	7	—	7
Hanwell Mental Hos.	—	1	4	4	8	—	—	17
Hillingdon County Hos.	—	1	—	—	3	6	4	14
Italian Hospital	—	—	—	—	—	1	—	1
King Edward's Hos.	1	—	—	—	—	—	—	1
London Hospital	—	—	—	—	—	1	—	1
Royal Sea Bathing Hospital	—	—	—	—	—	—	1	1
Royal Nat. Orthopaedic Hospital	—	—	—	—	—	—	1	1
St. George's Hospital	—	1	—	—	1	—	—	2
Springfield Hospital	—	—	—	—	—	2	—	2
West Middlesex Hos.	—	—	—	—	—	1	2	3
St. Mary's Hospital	—	—	—	—	—	4	1	5
TOTALS	1	3	4	4	12	22	9	55

Infectious Disease Visits.

During the year, the Health Visitors paid 2129 visits with reference to cases of infectious disease. Six hundred and seventy-six swabs were taken and 20 antitoxin injections were given. The total number of children examined by the Health Visitors in the schools was 4749.

The following table (No. 32) shows the number of children excluded from the schools and the reasons for their exclusion.

TABLE No. 32.

Measles contacts .....	.....	.....	.....	.....	40
Chickenpox contacts .....	.....	.....	.....	.....	30
Scarlet Fever contacts .....	.....	.....	.....	.....	49
Diphtheria contacts .....	.....	.....	.....	.....	125
Desquamating .....	.....	.....	.....	.....	2
Sore throat .....	.....	.....	.....	.....	12
Rhinitis .....	.....	.....	.....	.....	5
Various .....	.....	.....	.....	.....	33
					296

Prevention of Blindness.

No action has been taken under Section 66 of the Public Health Act, 1925, by this Authority for the prevention of blindness or for the treatment of persons suffering from any disease or injury to the eyes. Several persons are, however, receiving assistance from organisations who care for the blind.

Tuberculosis.

Pulmonary Tuberculosis.

The number of new cases notified during the year was 50. Twenty-six of these were notified from Institutions (Sanatoria 3, County Council Hospitals 7, General Hospitals 14, Mental Hospitals 2).

Other forms of Tuberculosis.

The number of new cases notified during the year was 12.

Deaths from Tuberculosis.

Tuberculosis of the respiratory system 27 ; other forms 3.

The following table shows the new cases notified and the deaths in 1934.

TABLE NO. 33.

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-	—	—	—	—	—	—	—	—
1-	—	—	1	1	—	—	—	—
5-	—	2	1	1	—	—	—	—
15-	10	6	2	2	3	3	—	—
25-	5	3	2	1	3	2	—	1
35-	9	6	—	1	5	1	1	1
45-	4	—	—	—	—	—	—	—
55-	3	—	—	—	6	2	—	—
65 and upwards	—	2	—	—	—	2	—	—
Totals	31	19	6	6	17	10	1	2

Of the 30 deaths, 28, or 93% were of notified cases.

The occupations of the new cases were as follows :—

TABLE NO. 34.

Occupations.	Pulmonary.		Non-Pulmonary.	
	Male.	Female.	Male.	Female.
Building & Decorating trades	5	—	—	—
School Children	—	2	2	1
Clerical Work	6	—	—	—
Clothing & Dressmaking	1	—	—	1
Domestic Duties	—	7	—	2
Factory Hands	2	4	—	1
Furnishing Trades	4	2	—	—
Sale of Food and Drinks	1	—	1	—
No Occupation	6	4	3	1
Various	6	—	—	—
Total	31	19	6	6

The table hereunder gives the number of Primary Notifications of Tuberculosis notified from the various Sanatoria and Hospitals during the year.

TABLE NO. 35.

HOSPITAL.	PULMONARY		NON-PULMONARY	
	Male.	Female.	Male.	Female.
Brompton Hospital	6	1	—	—
Clare Hall Sanatorium	1	—	—	—
Harefield Sanatorium	1	1	—	—
Hillingdon County Hospital	2	4	2	2
Italian Hospital	1	—	—	—
London Hospital	1	—	—	—
R. N. Orthopaedic Hospital	—	—	1	—
R. Sea Bathing Hospital	—	—	—	1
St. George's Hospital	—	1	—	—
St. Mary's Hospital	1	3	1	—
Springfield Mental Hospital	2	—	—	—
West Middlesex Hospital	1	—	1	1
Total	16	10	5	4

Public Health (Prevention of Tuberculosis) Regulations, 1925.

Public Health Act, 1925, Section 62.

Action under these powers was not necessary during the year.

REPORT ON THE ISOLATION HOSPITAL.

During the year 1934, 252 patients were admitted to the Isolation Hospital. Of these 166 were sent in as scarlet fever and 86 as diphtheria. Of the cases sent in as scarlet fever one was unconfirmed and was regarded as another disease (German measles).

Table No. 36 shows the figures for the year and table No. 37 shows the monthly figures.

TABLE NO. 36.

	Remaining on 1.1.34.	Admitted during yr.	Discharged recovered	Died.	Mort. per %	Remaining 31.12.34.
Scarlet Fever	29	165	176	1	0.66%	17
Diphtheria	1	86	68	1	1.16%	18
Other diseases	—	1	1	—	—	—

TABLE NO. 37.

	NUMBER ADMITTED		NUMBER DISCHARGED		DEATHS	
	Scarlet Fever	Diph- theria.	Scarlet Fever	Diph- theria	Scarlet Fever.	Diph- theria.
January	24	5	17	1	1	1
February	18	—	26	1	—	—
March	13	2	22	3	—	—
April	10	3	11	2	—	—
May	11	1	15	3	—	—
June	15	2	14	—	—	—
July	7	1	12	2	—	—
August	9	6	6	3	—	—
September	15	33	11	4	—	—
October	9	10	15	12	—	—
November	20	13	10	23	—	—
December	15	10	18	14	—	—
Total	166	86	177	68	1	1

Scarlet Fever.

The following table shows the incidence and age groups of 165 cases of scarlet fever which were nursed at the hospital :—

TABLE NO. 38

Age	0-5	5-15	15-25	25-35	35+
No.	25	108	16	9	7

The disease on the whole was fairly mild and some of the rashes were of short duration. It was noted however that marked desquamation seemed to have little connection with the degree of the rash; some cases with a very heavy rash had little desquamation, while other cases in which the rash disappeared in a few hours desquamated profusely. The complications noted were as follows :—

TABLE NO. 39.

Cervical adenitis	.....	.....	28
Nasal discharge	.....	.....	15
Ear discharge	.....	.....	10
Albuminuria	.....	.....	19
Joint pains	.....	.....	10
Septic fingers	.....	.....	5
Mastoiditis	.....	.....	2
Endocarditis	.....	.....	1
Acute nephritis	.....	.....	1

There was one death from scarlet fever, due to pericarditis and toxæmia.

Thirteen minor operations were performed, mostly for abscesses in the neck and superficial mastoiditis.

In the early part of the year there was some cross infection from cases of chickenpox which had been admitted suffering from scarlet fever but incubating chickenpox at the same time.

About the same time there were also a few cases of cross infection from a case of measles which was also admitted suffering in addition from scarlet fever. In view of this, the Council gave permission for a certain amount of measles convalescent serum to be purchased from the London Fever Hospital and to be used if necessary for the prophylaxis of cases if a further outbreak appeared imminent.

Diphtheria.

Eighty-six cases of diphtheria were admitted to the hospital. The clinical types were as follows :—

Faucial	.....	.....	.....	55
Nasal	.....	.....	.....	11
Laryngeal	.....	.....	.....	3
Faucial & nasal	.....	.....	.....	7
Faucial & laryngeal	.....	.....	.....	1
Faucial, nasal & laryngeal	.....	.....	.....	1
Bacteriological	.....	.....	.....	8

One of these cases required tracheotomy.

The following table, No. 40, shows the incidence of the disease in age groups :—

TABLE NO. 40.

Age	0-5	5-15	15-25	25-35	35+
Number	16	56	8	4	2

The relatively high proportion between ages 5-15 is due to the outbreak of the disease which occurred at North Road school in the early autumn. On the whole the type of the disease was fairly mild.

The complications recorded were as follows :—

TABLE NO. 41.

Paralyses : Palate	.....	.....	8
Eye	.....	.....	2
Heart involvement	.....	.....	10
Cervical adenitis	.....	.....	9
Tonsillitis	.....	.....	13
Albuminuria	.....	.....	22
Meningismus	.....	.....	1
Septic fingers	.....	.....	2

The relatively high proportion of tonsillitis and cervical adenitis was due to a mild infection going round two wards at a time when the hospital was over-full. Investigations were made as to the cause of this infection and in the course of these investigations it was found that both a wardmaid and one of the night nurses, although apparently healthy, had germs in their throats which might have caused the infection. These two members of the staff were treated and were transferred to another part of the hospital until they ceased to be infective.

Stay in Hospital.

The average duration of stay in the hospital was as follows :—Scarlet fever 40 days ; Diphtheria 43 days.

During the latter part of the year, in accordance with the recommendations of the Ministry of Health, a much shorter minimum period was allowed for the retention of cases of scarlet fever. In spite of this the resulting number of *return* cases (*i.e.* the number of cases from the same household occurring within 28 days of the patient's discharge from the hospital) remained about the same, or was if anything, slightly less.

Laboratory Work.

The laboratory work for the hospital continues to be done by the Lister Institute of Preventive Medicine. During the year, the following examinations were performed :—

TABLE NO. 42.

Swabs for Diphtheria bacilli	.....	.....	470
Swabs for virulence tests for diphtheria	.....	.....	3
Haemolytic streptococci	.....	.....	6
Cerebro spinal fluid	.....	.....	1
Blood for organisms	.....	.....	1

The need of the addition of a cubicle isolation block (also referred to on page 47) is still very acute and this was especially obvious during the autumn of 1934 when in addition to cases of diphtheria there was a mild throat infection. The Council however has decided to go ahead with the erection of a cubicle block as soon as the position with regard to the County scheme for infectious disease accommodation is clear. Meanwhile in cases of overcrowding there are arrangements by which any sick staff may be transferred to isolation hospitals belonging to neighbouring local authorities, and there are also arrangements by which any cases which we cannot take in may also be so transferred if accommodation is available for them elsewhere.

Sick Staff.

TABLE No. 43.

		Permanent	Temporary
No. of staff off duty for 24 hours or more	.....	4	3
Total no. of days off duty	.....	31	47
Causal conditions : Tonsillitis	.....	7	7
Others (various)	.....	24	40

Costs.

The following particulars, kindly supplied by Mr. H. J. Potter, the Accountant, show the expenditure in connection with the isolation hospital for the year ending 31.3.35 :—

	£	s.	d.
Salaries and Wages	1388	7	1
Loan Charges	11	10	1
Provisions	622	6	10
Furnishing and Equipment	168	12	7
Rates, Insurances, etc.	224	4	5
Establishment and other expenditure	773	19	11
Materials from Stores	374	0	0
Total	£3563	0	11

I am, Ladies and Gentlemen,

Your obedient Servant,

E. H. R. SMITHARD,

Medical Officer of Health.

APPENDIX A.

Adoptive Acts, Byelaws, etc., in force in the District.

The following Acts have been adopted by the Council and are in force in the area.

Infectious Diseases (Prevention) Act, 1890.

Public Health Acts (Amendment) Act, 1890, with the exception of Part IV.

Public Health Acts (Amendment) Act, 1907, Part II, Part III, Part IV (except sections 61 and 66), Part V, Part VI, Part VIII and Part X.

Public Health Act, 1925, Parts II to V.

Local Government and Other Officers Superannuation Act, 1922.

Baths and Wash-houses Acts, 1846-1925.

Small Dwellings Acquisition Acts, 1899-1923.

Public Libraries Acts, 1892 and 1893.

The following orders, byelaws, and regulations are in force in the area.

New Streets and Buildings.

Nuisances—Removal of Snow and Filth.

Cleansing of Earth Closets, Privies, Ashpits and Cesspools.

Common Lodging Houses.

Slaughter Houses.

Houses let in Lodgings.

Nuisances—Keeping of Animals, etc.

Early Closing Orders under Shops Acts.

Public Pleasure Grounds.

Regulations of Advertisements.

Regulations as to Public Baths.

Tents, Vans and Sheds.

In addition, the Middlesex County Council Act of 1934, confers certain powers on the District Council.

APPENDIX B.

Showing Acts of Parliament, Local Government Orders, Memoranda, and Circular Letters issued by Government Departments with regard to the Public Health and Maternity and Child Welfare Services during the Year 1934.

Statutes :—

Water Supplies (Exceptional Shortage Orders) Act, 1934.

Ministry of Health :—

Circulars :—

- No. 1139. (Revised) Housing Act, 1930.
- No. 1370. Nutrition.
- No. 1371. Public Health (Imported Food) Regulations, 1925.
- No. 1374. International agreement for the treatment of seamen suffering from venereal disease.
- No. 1374a. Venereal Diseases.
- No. 1378. Water Supplies.
- No. 1393. Rural Water Supplies.
- No. 1397. The Local Government Act, 1933.
- No. 1405. Water Supplies (Exceptional Shortage Orders) Act, 1934.
- No. 1406. Nutrition.
- No. 1407. Housing Act, 1930 : Part I.
- No. 1408. Birth Control.
- No. 1412. Housing Acts, Housing (Rural Workers) Act, etc.
- No. 1425. Housing Authorities.
- No. 1427. Public Health (Imported Food) Regulations, 1925.
- 13.4.34. Bacteriological examination with reference to Puerperal Sepsis.

Statutory Rules and Orders :—

- No. 674. Public Health (Treatment of Infectious Disease) Regulations, 1934.
- No. 1342. Public Health (Shell-fish) Regulations, 1934.

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