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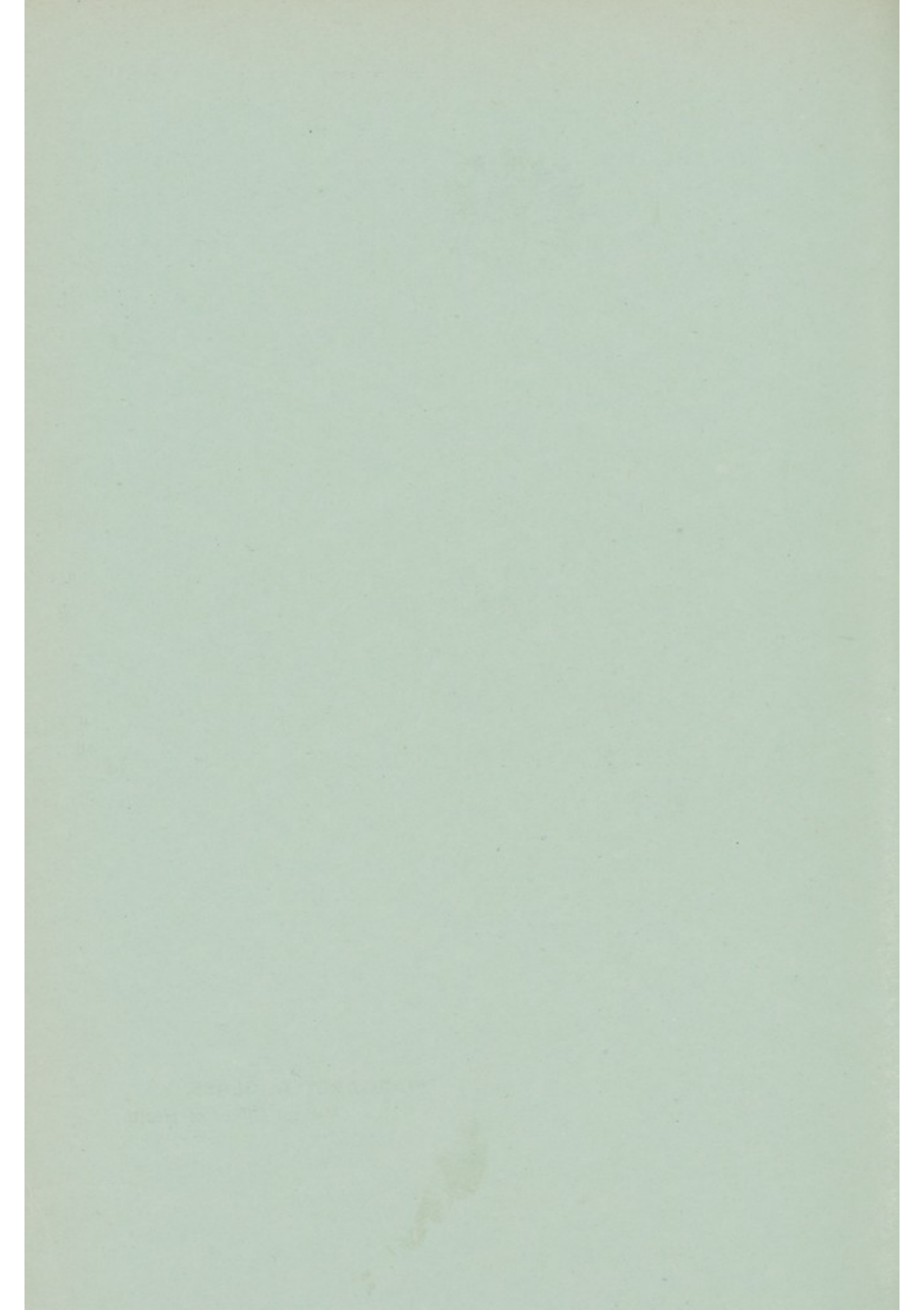
BOROUGH OF SOUTHALL

ANNUAL REPORT

OF THE

Medical Officer of Health
for the Year 1951

MARGARET A. GLASS,
Medical Officer of Health





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THE COUNCIL OF THE BOROUGH OF SOUTHALL, 1951

HIS WORSHIP THE MAYOR
*ALDERMAN F. G. SMITH, J.P.

Deputy Mayor :
ALDERMAN J. LOWE.

Aldermen :

†*GARDNER, F. E.
HAMBLIN, E. B.

HOPKINS, W. H.
*LOWE, J.

*LUCKETT, F. H.
SMITH, F. G., J.P.

Councillors :

BARRETT, J.
†*BIDWELL, S. J.
†*CAVELL, MRS. I., J.P.
(*Chairman, Health
Committee.*)
CULLINGWORTH, F. A.
*DANE, A. T.

DORMER, J. G. P.
DOUGLAS, H. C.
*ERRINGTON, F. G.
*HAIGH, J.
LOVE, P. J.
LYE, A. E.
MARKS, F. J.

*SALMON, J.
*SHEPHERD, A. H.
STEELE, T. J.
WARD, J. H.
WHITE, H. J.
*WILLIAMS, Mrs. V. G. I.

* Members of the Public Health Committee.

† Members of the Area Health Committee (Area No. 9).

**To the Mayor, Aldermen and Councillors of the
Borough of Southall.**

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present the 55th Annual Report on the health and circumstances of the population of the Borough of Southall, for the year 1951. The health of the people continued to be good.

The birth rate which has been falling every year since 1946 was 12.69, as compared with 14.19 in 1950. It was well below the national birth rate which in 1951 was 15.5 for the whole of England and Wales. The fall in the birth rate which is causing concern in many quarters because of the likelihood of an ageing population creating social difficulties in the course of the next 20 or 30 years is not, however, to our disadvantage at the present time, as it is to be hoped that the fall recorded over the past few years will enable some of the ravages of war, and problems, occasioned by the high birth rate which occurred towards the end of the war years, and in the immediate years following, to be overcome. For example a falling birth rate will lessen the overcrowding of houses, providing the building programme is maintained, and will improve conditions of school overcrowding which have had such bad effects on the education of the children.

There was an increase in the death rate from 8.52 in 1950 to 9.91 in 1951. This, however, compared very favourably with the corresponding figure for the whole country, which was 12.5. Heart disease and cancer were again the principal causes of death. The infant mortality rate of 21.25 deaths per 1,000 live births is the lowest ever recorded in the Borough, and considerably below the national figure for infant mortality in 1951, which was 29.6. Four of the 15 deaths on which the infant mortality is calculated died because of congenital malformation which would not be preventable in the present state of medical knowledge.

It is a matter for regret that the number of confinements carried out in the patient's own home is becoming less each year. In 1951, only 150 infants were born at home, whereas five years previously the figure was 408. By thus making confinement appear like an illness requiring hospital treatment, the family relationship to both mother and infant is affected often with serious psychological effect on the older children. The occurrence of puerperal pyrexia in home cases is compared with that in hospital cases, and it is noteworthy that out of 11 notifications of puerperal pyrexia, 10 occurred in hospital cases while only one was a home case.

The total of infectious disease notifications, i.e., 1,835, excluding tuberculosis, showed an increase over the previous year's figure. This was principally occasioned by the very high incidence of measles which assumed epidemic form in the latter end of 1950, and continued to spread widely during the first part of 1951. Although measles was widely spread, the character of the disease was, on the whole, mild and no deaths occurred from this disease. The incidence of pneumonia was almost double that of 1950, and was attributable no doubt, in part to the epidemic of influenza which occurred in January. The number of cases of poliomyelitis notified was 11, but only one assumed the paralytic form, and there were no deaths from this disease. There was no diphtheria in the Borough, and scarlet fever continued to be of a mild type, many cases being nursed at home without secondary infection occurring.

An improvement is shown in the number of new cases of tuberculosis notified. This declined from 84 in 1950 to 80 in 1951. The number of deaths from this disease was 15; this was not an improvement on the previous year, as the number occurring in 1950 was also 15, and it is a cause for anxiety that of the persons who died, four had not previously been recognised as suffering from tuberculosis. Certain special groups of the population were examined by Mass X-Ray during the year, or were tested for tuberculosis sensitivity in order that B.C.G. vaccination might be given to those found to require it.

An outbreak of sickness in school children was traced to infection with Sonn  dysentery, and energetic measures were taken to eradicate this completely by the tracing of all germ carriers and obtaining treatment for them until they were completely clear. Only one outbreak of food poisoning occurred during the year in a local factory canteen. The number of persons affected was not large, and no one was made seriously ill, but this occurrence and the investigation of the Sonn  dysentery outbreak gave an opportunity for further propaganda in the maintenance of hygiene in catering establishments.

Overcrowding of families in their homes is still a very serious problem. At the end of 1951, 145 cases, comprising over 250 families, still living in overcrowded conditions were known to the Public Health Department and as overcrowding is not usually brought to the notice of this Department unless some additional circumstance is causing mental anxiety or physical distress, it will be appreciated that this is a real public health problem.

The number of complaints received with regard to housing defects was less in 1950, and it will be seen from Table XVI that the number of inspections required as a result of these complaints was 6,385. This compares with a figure of 6,809 in 1950. The number of defective dwelling houses found was 680, a considerable reduction on last year's figure of 1,043.

The results of the investigation of atmospheric pollution which continued throughout the year shows the amount of smoke and sulphur deposited in the Borough to be slightly less than in 1950, and that the air of Southall is not heavily polluted although there is still plenty of room for improvement.

Health propaganda continued throughout the year, talks and displays of film strips on hygiene being given to many societies and health education by word of mouth, propaganda posters, leaflets, and personal interviews being maintained. Articles on hygiene were published in the Council's Civic News Sheet for free distribution throughout the Borough. With regard to the clean handling of food, catering establishments and shops were kept under supervision and the importance of wrapping food and keeping it from human contact explained and encouraged by the sanitary inspectors. The provision of covered fish display

cabinets in three of the fish shops was welcomed as a sign of the trader's willingness to help in our work.

An opportunity was given during the summer months for the public to view the health services in operation. Tours of the Department and Clinics were organised, and the visitors were given facilities for free discussion at the end of each tour.

Information has been included in this report with regard to services of other authorities concerned with the health of the people. It is important that the work being carried out in an endeavour to obtain a high standard of physical and mental well-being in the community should be considered as a whole, and I am very grateful to the County Medical Officer and all those who have supplied information to assist me in the preparation of my report, which I have tried to make as comprehensive as possible.

I should like to extend my sincere thanks to the Chief Sanitary Inspector and to all the departmental staff in acknowledgment of their help in the preparation of this report, and also for their loyal support at all times.

I am, Your Worship, Ladies and Gentlemen,

Your obedient Servant,

Margaret A. Glass

Medical Officer of Health.

MANOR HOUSE, SOUTHALL.

HEALTH DEPARTMENT STAFF

for the year 1951

Medical Officer of Health :

MARGARET A. GLASS, B.Sc., M.B., Ch.B.(Glasgow), D.P.H.(Cantab.).

Sanitary Inspection Staff :

Chief Sanitary Inspector :

R. W. McDONALD, Cert. S.I.B., Cert. M. & F.

Deputy Chief Sanitary Inspector :

S. SADLER, Cert. S.I.B., Cert. M. & F., R.S.I. Smoke Certificate.

District Sanitary Inspectors :

W. BOWLES, Cert. S.I.B., Cert. M. & F. (Resigned 14.1.51.)

J. H. WILLIS, Cert. S.I.B., Cert. M. & F., R.S.I. Smoke Certificate.

K. W. SKEATES, Cert. S.I.B., Cert. M. & F. (Appointed 1.3.51.)

R. STOCKLEY, Cert. S.I.B., Cert. M. & F.

Additional Sanitary Inspector :

R. STOCKLEY, Cert. S.I.B., Cert. M. & F. (Appointed District Sanitary Inspector 11.1.51.)

P. W. JOLLY, Cert. S.I.B. (Appointed 15.1.51. Resigned 26.9.51)

D. G. MARTIN, Cert. S.I.B., Cert. M. & F. (Appointed 1.12.51.)

General Assistants :

K. F. KEEGAN. (Resigned 14.10.51.)

B. J. TOLWORTHY. (Completed National Service 23.7.51.)

Clerical Staff :

Senior Clerk :

MRS. K. JONES.

Clerks, Shorthand-Typists :

MRS. P. M. DIX. (Resigned 7.11.51.)

MRS. W. M. CROSFIELD. (Appointed 26.11.51.)

MISS J. S. SNOW.

MISS S. McALLISTER.

GENERAL STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH

Area (acres)	2,607.762
Population—Registrar-General's estimate (Mid-1951)	55,620
Number of inhabited houses according to Rate Book	14,427
Average number of occupants per house	3.85
Sum produced by a penny rate	£1,700 approx.

The Council control the following parks and open spaces :—

Brent Meadow	4.7 acres
Clearmount Farm... ..	7.5 acres
Cranleigh Gardens	2 acres
Dormers Wells Housing Site	2.99 acres
Dudley Road Island ... ..	.13 acres
Durdans Park	29.55 acres
Football Ground, Western Road	3.51 acres
Frogmore Green ... ..	.35 acres

GENERAL STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH—*continued.*

Jubilee Park	...	...	...	...	...	...	11.13 acres
Lady Margaret Road	...	...	...	...	...	(approx.)	.25 acres
Lee Road	...	...	...	...	...	...	.125 acres
North Road Island	...	...	...	...	...	...	.35 acres
Norwood Green	...	...	...	...	...	...	7.25 acres
Queens Road	...	...	...	...	...	...	.125 acres
Recreation Ground	...	...	...	...	...	...	18 acres
Southall Municipal Sports Ground	...	...	...	...	...	...	19.778 acres
Southall Park	...	...	...	...	...	...	26.77 acres
Swimming Bath Site, Dormers Wells	...	...	...	...	...	...	10.5 acres
The Manor House	...	...	...	...	...	...	2 acres
Viaduct Field	...	...	...	...	...	...	4.22 acres
West Middlesex Golf Course	...	...	...	...	...	...	108 acres
Western Road	...	...	...	...	...	...	.166 acres
Wolf Fields	...	...	...	...	...	...	3.33 acres
Wolf Green	...	...	...	...	...	...	.18 acres
Total							258.204 acres

For general administration purposes and for the main statistical purposes of this report, the district is divided into six wards, Waxlow Manor, Northcote, Hambrough, Dormers Wells, Glebe and Norwood Green.

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, medical and toilet preparations, paint, dye, and wood works, laundries, etc. There are no trades carried on which are at present scheduled as offensive trades.

Southall Borough Council maintains a swimming bath situated in the Recreation Ground, Southall, which is one of the public parks. The surface area of the bath is 3,600 square feet (120 feet by 30 feet), cubic capacity 16,500 cubic feet (110,000 gallons). The water is treated by break point chlorination, and a normal chlorine content of 1.0 parts per million at the shallow end, and 0.7 at the deep end is maintained. During peak periods this is increased to 4.0 parts per million at the shallow end in order to obtain 2.0 parts per million at the deep end. Three samples of the water are taken daily by the staff for chlorine testing. As this bath is an open air one, the attendance is affected to a great extent by weather conditions. During 1950, the total number of persons using the bath was 30,287. The average number of persons attending per session (wet or fine) was 50. The maximum number at any one session was 500.

HEALTH SERVICES PROVIDED BY OTHER AUTHORITIES

North-West Metropolitan Regional Hospital Board

Through its Uxbridge Group this Authority maintains two hospitals in Southall. The Southall-Norwood Hospital (30 beds) for treatment of general medical and surgical cases and casualties, and Mount Pleasant Hospital (50 beds) for the treatment of male patients suffering from tuberculosis.

County Council of Middlesex—Health Department

The County Council of Middlesex is the Local Health Authority under the National Health Service Act, 1946, and provides the following services in the Borough.

(a) *Care of Mothers and Young Children.*

Ante-Natal Clinics	} At Jubilee Gardens and at Manor House. Manor House Clinics were transferred to North Road and Featherstone Road School Clinics in September, 1951.
Post-Natal Clinics	
Infant Welfare Clinics	
Diphtheria Immunisation Clinics	
Ultra-Violet Light Clinics	

Day Nurseries

- No. 2. Recreation Ground.
- No. 3. Jubilee Gardens.
- No. 4. Spikes Bridge, Municipal Sports Ground.

Priority Dental Service for expectant and nursing mothers and children under school age.

(b) *Midwifery Service.*

Certified Midwives are employed for attendance on women in their homes in the Borough as midwives or as maternity nurses during childbirth.

(c) *Health Visitors.*

Health Visitors are employed to undertake home visiting for the purpose of giving advice on the care of young children, to persons suffering from illness, to expectant and nursing mothers and on the measures necessary to prevent the spread of infection. (The Health Visitors also act as School Nurses.)

(d) *Home Nursing and Nursing Equipment*

Home Nurses are employed to undertake the nursing of persons in their own homes. (This work was formerly undertaken by "District Nurses.")

Where nursing equipment is required for use in the home, it is available on loan through the British Red Cross Society.

(e) *Vaccination and Immunisation.*

In addition to the immunisation of infants and young children carried out at the clinics already referred to, vaccination against smallpox and immunisation against diphtheria is carried out by those general practitioners who have agreed to co-operate in the County Council scheme.

(f) *Prevention of Illness, Care and After Care.*

The County Council's scheme includes provision for the admission of suitable cases to holiday rest homes. (Such cases should not be in need of medical or nursing care.)

The care and after care of tuberculous persons is dealt with through the Welfare Officer at the Chest Clinic.

(g) *Domestic Helps.*

Home Help for householders where this is required owing to the presence of a person who is ill, lying in, an expectant mother, mental defective, disabled or aged is provided under the County Council's scheme.

(h) *Ambulance Service.*

An Ambulance Service is provided for the removal to hospital, where necessary, of accident and sickness cases. This service is organised in association with the Fire Service. There is one Ambulance Sub-Station situated in Southall beside the Town Hall.

(i) *Mental Health Service.*

The Mental Health Service deals with persons suffering from mental deficiency or mental illness.

(j) *School Medical Service.*

Medical inspection and dental inspection of school children is arranged by the County Council through the Southall Divisional Executive.

Medical treatment and dental treatment is provided by the County Council in the Borough as follows :—

Minor ailments treatment	}	North Road School Clinic. Featherstone Road School Clinic.
Orthopaedic treatment		
Ophthalmic treatment		
Physiotherapy		
Ultra Violet Light treatment	{	North Road and Featherstone Road School Clinics. Talbot Road School.
Speech therapy		

County Council of Middlesex—Children's Department

The County Council through the Children's Department is also concerned in caring for children deprived of a normal home life. Area Children's Officers have been appointed to deal locally with such cases as they arise.

VITAL STATISTICS

Whole District

Total deaths, 551. (Males 289 ; Females, 262).

Crude Death Rate, 9.91.

For extracts from vital statistics and causes of death, see Appendix, Tables I and II.

Deaths and Death Rate

The death rate, which has been decreasing over the last few years, showed an increase from 8.52 in 1950 to 9.91 in 1951. The corresponding rate for the whole country was 12.5. Heart disease and cancer were again the principal causes of death. The numbers dying from heart diseases and diseases of the circulation increased from 214 to 226, and there was a slight rise in the number of deaths from cancer since the previous year. There were no deaths from poliomyelitis.

The total number of deaths registered during 1951 of persons belonging to the district and dying within the district, at all ages and from all causes was 308 (males 145 and females 163). For statistical purposes it is necessary to add to this figure the deaths of persons ordinarily resident in the district who died in Hillingdon Hospital, other Middlesex hospitals and hospitals outside the County boundaries, including various London hospitals. These "outside" deaths were 243 in number (males 144 and females 99). The total number of deaths, therefore, belonging to the district was 551.

The deaths of non-Southall residents but dying within the Borough (not included in the above figures) number as follows : St. Bernard's Hospital, 168 (males 58 and females 110) ; at Mount Pleasant Hospital, 12 (all male) ; Southall-Norwood Hospital, 4 (1 male and 3 female) ; Norwood Hall, 12 (all female) ; Vine House, 5 (all female) ; at private addresses, 8 (4 male and 4 female).

For the distribution of deaths in the various Wards, see Appendix, Table III, and for the comparison of general birth and death rates and rates of maternal mortality, see Appendix, Table IV.

Graph B shows the trend of the death rate since 1946.

Births and Birth Rate. (Figures for 1950 are given in brackets.)

The total number of registered births in the district (as notified under the Births and Deaths Registration Act) was 150 (178). The total number of live births belonging to the district, whether occurring within or outside the district was 706 (787). The illegitimate live births were 28 (36). There were 18 stillbirths (12) and these were all legitimate.

The birth rate for Southall continues to fall. It has decreased every year since 1946, and was 12.69 for 1951, compared with 14.19 in 1950. The corresponding rate for the whole of England and Wales in 1951 was 15.5.

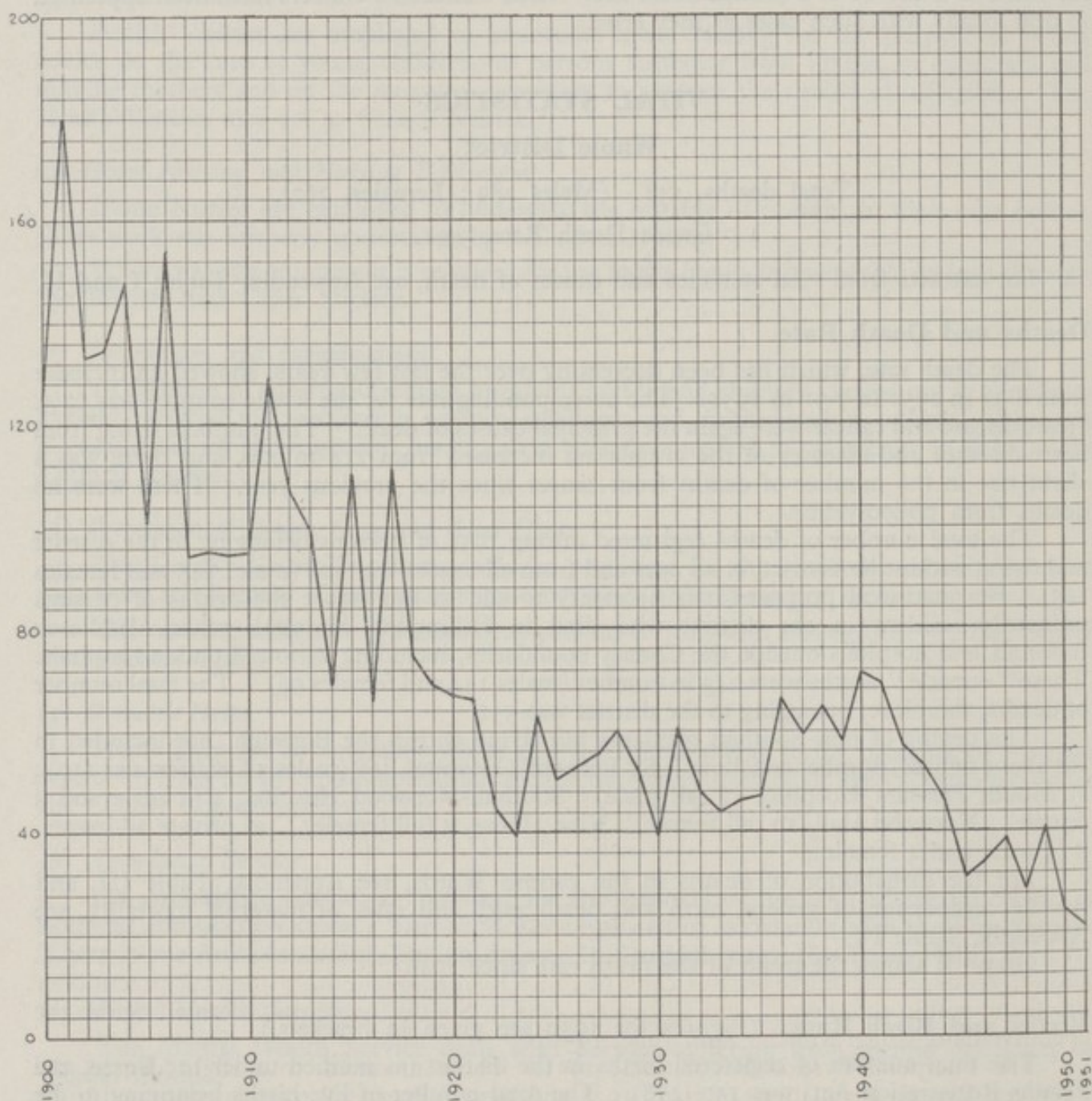
Graph B shows the trend of the birth rate since 1946.

Infant Mortality

The infant mortality rate during 1951 fell to 21.25 deaths per 1,000 live births. This is the lowest rate to be recorded in Southall. The graph on infant mortality, appended, shows the trend of the infant mortality rate since 1900. The actual number of deaths occurring in 1951 was 15, 11 of which took place in hospital. The national infant mortality rate for 1951 was 29.6. Table VI gives the classification of causes of infant deaths under the age of one year.

GRAPH A.

INFANT MORTALITY RATE FROM 1900 TO 1951.



Premature Infants

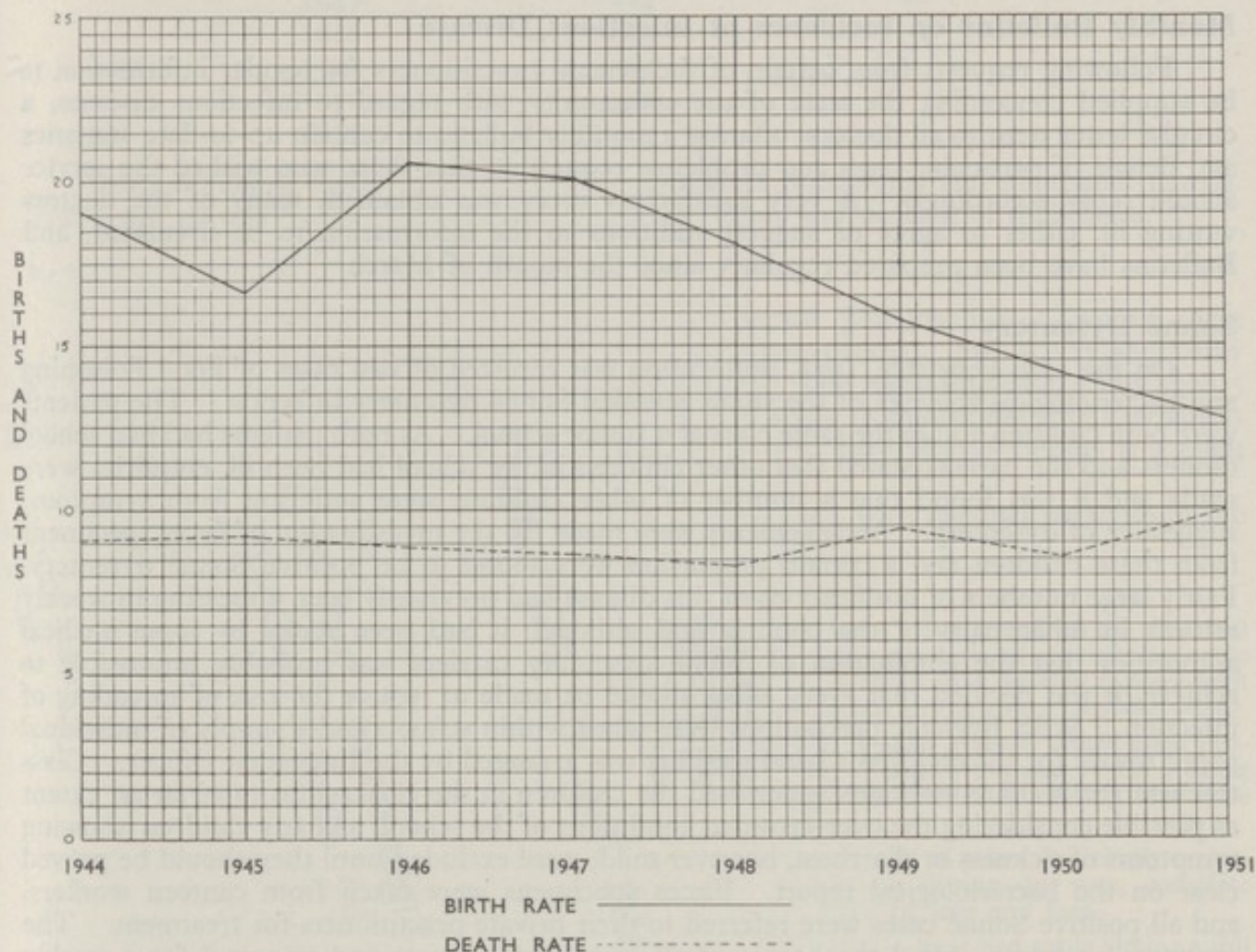
Twenty-seven premature infants were born during the year, 6 at home and 21 at hospital ; of these 22 survived to the end of one month. The classification of premature infant is given to a child born prematurely, or which weighs less than 5½ lbs. at birth.

Maternal Morbidity

During the year 11 cases of puerperal pyrexia were notified. There were no maternal deaths and no deaths associated with abortion.

GRAPH B.

COMPARISON OF BIRTH AND DEATH RATES FROM 1944 TO 1951.



PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Certain new Regulations came into force in 1951, altering the methods of notification of infectious disease.

The Public Health (Leprosy) Regulations, 1951, required that a medical practitioner attending, or called on to visit, a person suffering from leprosy should notify the Chief Medical Officer of the Ministry of Health by certificate on a prescribed form. The local authority was instructed to send a copy of these Regulations to each medical practitioner practising within the district, and all practitioners in Southall were duly notified before the operative date, which was the 22nd June, 1951.

The Puerperal Pyrexia Regulations, 1951. These modified, to a slight degree, the Puerperal Pyrexia Regulations of 1926, 1928 and 1939. Puerperal pyrexia continued to be a notifiable disease, but the definition of the disease was altered, medical practitioners being required to notify to the Medical Officer of Health any febrile condition occurring in a woman in whom a temperature of 100.4°F . (38°C .), or more, took place within fourteen days of childbirth or miscarriage. The local authority was instructed to send a copy of these Regulations to the general practitioners, and this was done before the operative date, which was 1st August, 1951.

Infectious Diseases and Food Poisoning. In a circular from the Ministry of Health a recommendation was put forward that instead of the different types of notification forms formerly used for different kinds of infectious disease, a comprehensive form should be used, to include tuberculosis, food poisoning, puerperal pyrexia and poliomyelitis. It was suggested that the use of this form should be brought into practice at a reasonably early date. The scheduled type of form was obtained and issued to general practitioners.

Monthly Bulletins on Incidence of Infectious Disease

Following requests from certain of the general practitioners for regular information to be supplied concerning the state of the community with regard to infectious diseases, a circular letter went to all doctors, offering a monthly bulletin to contain up-to-date statistics and details of particular cases and problems, requesting that those who wished the service should reply accordingly. A very satisfactory reply was obtained, many of the doctors writing in, either to agree or suggest additions to the information to be circulated, and Bulletins have been prepared regularly since the month of March.

Sonné Dysentery

On the 12th February, 1951, notification was received of two cases of Food Poisoning and bacteriological analyses of the stools revealed Sonné dysentery infection. The patients were both children and in the same class at a Junior school. As both patients had had school dinners and the parents stated that other children in the school had been ill, enquiries were made and it was found that a number of other children were suffering from symptoms suggestive of dysentery. Arrangements were made for the investigation of faeces specimens from these children and a certain proportion were found to be positive Sonné dysentery. Fairly large numbers of notifications of this disease had previously been appearing in weekly returns in other parts of the country and although it had been stated by some medical authorities that the elimination of Sonné dysentery carriers was probably impossible to achieve, it was decided that every effort should be made to reduce the risk of spreading of infection. Strict hygienic precautions were taken within schools and a supply of individual paper towels for the children's hand washing was arranged by the Education Officer. Class teachers and welfare assistants supervised the children in the cloakrooms to as far an extent as possible considering the over-crowded conditions of the school, and any children showing symptoms of sickness or diarrhoea, however mild, were excluded until they should be proved clear on the bacteriological report. Faeces specimens were taken from canteen workers, and all positive Sonné cases were referred to their private practitioners for treatment. The sanitary inspectors visited the homes of all cases and contacts and arranged for a weekly submission of faeces specimens. No child found to be Sonné positive was allowed to return to school until two negative specimens had been obtained. The kitchen staff were required to have 3 negative specimens before they were allowed to resume work. Individual cases occurring in other schools were dealt with in the same manner.

In all, 1,205 visits were paid by the sanitary inspectors over the whole of the Borough, and 274 persons tested, of whom 248 were positive, and we were able to consider the incident closed at the end of July as all carriers and contacts had by that time returned the required number of negative specimens. In all, 1,850 faeces specimens were examined, a few persistent carriers requiring up to 11 specimens to be analysed before they could be certified as free from infection. All specimen results were notified in writing to the patient, and to the private practitioners concerned.

Measles

There was again a heavy incidence of measles in the district during 1951, following a sharp rise in notifications towards the latter end of 1950. The number of cases notified was 1,129, compared with 701 in 1950. The measles figures for the past few years are shown below for comparison with the 1951 figures. There were no deaths from measles and the type of case was mild. It is noteworthy that the incidence in 1951 was the greatest since measles became a notifiable disease.

<i>Year</i>	<i>No. of Cases</i>				<i>Deaths</i>
1941	575	...	—
1942	333	...	—
1943	293	...	2
1944	367	...	—
1945	500	...	1
1946	21	...	—
1947	334	...	—
1948	825	...	1
1949	194	...	—
1950	701	...	—
1951	1,129	...	—

Other notifiable diseases showing an increase were pneumonia and puerperal pyrexia. There was no increase in the incidence of Scarlet Fever and no case of diphtheria.

Poliomyelitis

Eleven notifications were received of acute anterior poliomyelitis. Two of these were not confirmed as poliomyelitis, eight cases were non-paralytic, had a very short stay in hospital, and were discharged completely recovered. The remaining case, a boy aged 5 years, was a case of paralytic poliomyelitis and was discharged from hospital with a weakness not amounting to paralysis of both legs. He continued to have physio-therapy treatment and is now walking almost normally.

The information now available concerning the cases left with residual paralysis in the years 1949 and 1950 is as follows :—

1950 :

Case A.	Paralysis of left leg	...	...	...	Adult male. At the end of the year still showing paralysis of the left leg—able to get about in a walking calliper with sticks but still unable to resume work.
Case B.	Paralysis of both legs	...	...	...	Boy now aged 4 years. Made good progress at end of the year. Still a slight weakness of the leg causing him little trouble.
Case C.	Paralysis in arms, legs, dorsal, lumbar and abdominal muscles				Girl now aged 16 years. Practically no improvement during the year, complete paralysis of legs and feet.
Case D.	Paralysis of right leg, dorsal, lumbar and abdominal muscles				At end of the year had made almost a full recovery after her paralysis but with some residual weakness remaining in the back and legs, almost no restriction of movements at slow speed.

1949 :

Of two cases remaining with residual paralysis reported last year, at the end of 1951 the conditions were :—

Case B.	Anterior tibials, quadriceps, hamstrings, and abductors	Paralysis remaining, to have operative treatment.
Case D.	Abductors and glutei of the left leg	Recovery practically complete—only slight remaining weakness.

Influenza

There were some signs in the early months of 1951 that influenza was likely to assume epidemic form. Information from local practitioners and from the office of the Ministry of National Insurance seemed to show that the incidence of sickness in the working population was increasing abnormally during January, and that the increase was mainly in cases of influenza of a mild type. The Regional Officer of the Ministry of National Insurance kindly arranged for regular figures of local sickness certificates to be supplied for a time, and



BOROUGH OF SOUTHALL

WITH THE COMPLIMENTS OF THE
MEDICAL OFFICER OF HEALTH

PUBLIC HEALTH DEPT.
MANOR HOUSE
SOUTHALL



although the districts of this Ministry do not correspond with Borough boundaries, the information enabled us to assess, in a general way, the rise and fall in the amount of sickness compared with the corresponding periods the previous year. The epidemic quickly died down and no special health measures had to be brought into operation to limit the spread. There were 6 deaths in January directly attributable to influenza or its complications.

Smallpox (Variola)

No patients with smallpox, but 7 contacts of cases of smallpox were notified to the Department from the Port Authorities during the year. The contacts were kept under supervision for the requisite period, but no illness developed.

During the year a medical practitioner asked for advice in a case of a child showing symptoms suggesting smallpox. The visit of a Consultant Specialist from the Ministry of Health was arranged. Smallpox was not confirmed.

Vaccination Against Smallpox

It is a matter of some concern that since the abolition of compulsory vaccination on the coming into operation of the National Health Service Act in 1948, the number of vaccinations being carried out is falling considerably, and to a greater extent every year.

There are various reasons given why infants are not brought forward for vaccination, *i.e.* that smallpox does not occur in this country now ; parents do not like the child to be hurt ; fear of harmful effects following vaccination ; and in many cases just carelessness or laziness prevents the protection from being obtained.

Although smallpox has not affected this country to any great extent for very many years, the risk of its introduction from countries where the disease is widespread is ever with us, and in spite of rigorous control at sea ports and air ports a case sometimes gets through with distressing results in an unvaccinated population. This has happened once or twice in recent years, and when it does occur there is no hesitation on the part of the public to take advantage of vaccination facilities offered to them.

The figures for vaccination carried out in Southall during 1951 were obtained from the County Medical Officer and are as follows :—

	AGE GROUPS					TOTAL
	Under 1 year	1—2 years	2—4 years	5—14 years	15 years and over	
Primary Vaccination ...	249	38	40	73	74	474
Re-vaccination ...	1	1	1	16	140	159

It will be seen that although over 700 children were born during the year 1951, only 250 were vaccinated, or only about a third of the children born, whereas in 1947, the last year before the National Health Service Act came into operation, the percentage of successful vaccinations in the first year of life to the number of children born was 44%.

Scarlet Fever (Scarlatina)

The number of notifications received during the year was 87 as compared with 89 for the previous year.

Diphtheria

No cases of diphtheria were notified to the Health Department.

Information concerning immunisation against diphtheria was supplied by the County Medical Officer.

The following table shows the number of children immunised against diphtheria during the year.

Number of Children who completed a full course of Primary Immunisation in the Authority's Area (including Temporary Residents) during the year				Number of Children who were given Secondary or Reinforcing Injection during the year (<i>i.e.</i> having in a previous year received a complete full course)
AGE AT DATE OF FINAL INJECTION				
Under 1	1—4	5—14	Total	
210	370	25	605	330

In the following table is shown the number of children at 31st December, 1951, who had completed a course of immunisation against diphtheria at any time before that date (*i.e.* since January 1st, 1937) together with the estimated mid-year child population.

Age at 31.12.51:—	Under 1	1	2	3	4	5—9	10—14	Total under 15
Number immunised	210	543	518	431	643	3,376	2,473	8,194
Estimated Mid-Year Child Population, 1951	4,501					7,167		11,668

It has been thought the number of persons taking advantage of the facilities for anti-diphtheria immunisation is gradually decreasing as with vaccination for smallpox. The fact that no cases are occurring, which is considered to be entirely due to the good state of immunisation at present in the population, is no guarantee of security since there are still a number of cases occurring throughout the country, persons carrying diphtheria germs unsuspectingly in their throats, and still people dying from this disease.

Ophthalmia Neonatorum

No cases of ophthalmia neonatorum were notified during the year.

Acute Poliomyelitis

Eleven cases of poliomyelitis were notified in the Borough during the year. One was left with residual paralysis and further treatment by physiotherapy was arranged.

Distribution of Infectious Disease Notifications

For the incidence of various infectious diseases notified during the year, under age groups and locality see Appendix Tables IX and X.

Infectious Disease Visits

During the year, the Sanitary Inspectors paid 1,365 visits with reference to cases of infectious disease. In addition, the County Health Visitors did a certain amount of home and school visiting in connection with infectious diseases.

Tuberculosis

Pulmonary Tuberculosis

The number of new cases notified during the year was 74.

Other Forms of Tuberculosis

The number of new cases notified during the year was 6.

Of the total notifications 3 were received from Medical Practitioners ; 45 from the Uxbridge Chest Clinic ; 14 from General Hospitals ; 18 from Special Hospitals.

Deaths from Tuberculosis

Tuberculosis of the respiratory system, 15 ; other forms, nil.

For details of new cases notified and deaths in 1950, see Appendix, Table XI, and for the occupations of new cases see Appendix, Table XII.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

Public Health Act, 1936, Section 172.

Action under these powers was not necessary during the year.

The number of new notifications declined from 84 in 1950 to 80 in 1951. The number of deaths from tuberculosis, *i.e.* 15, was the same as the number recorded in 1950. Of the 15 deaths, four had not been previously notified as cases of tuberculosis. It appears, therefore, that there are still cases of tuberculosis who seek treatment or are discovered too late for medical skill to be effective in saving their lives ; in view of the success resulting from treatment of early cases, this is a tragic and unnecessary state of affairs.

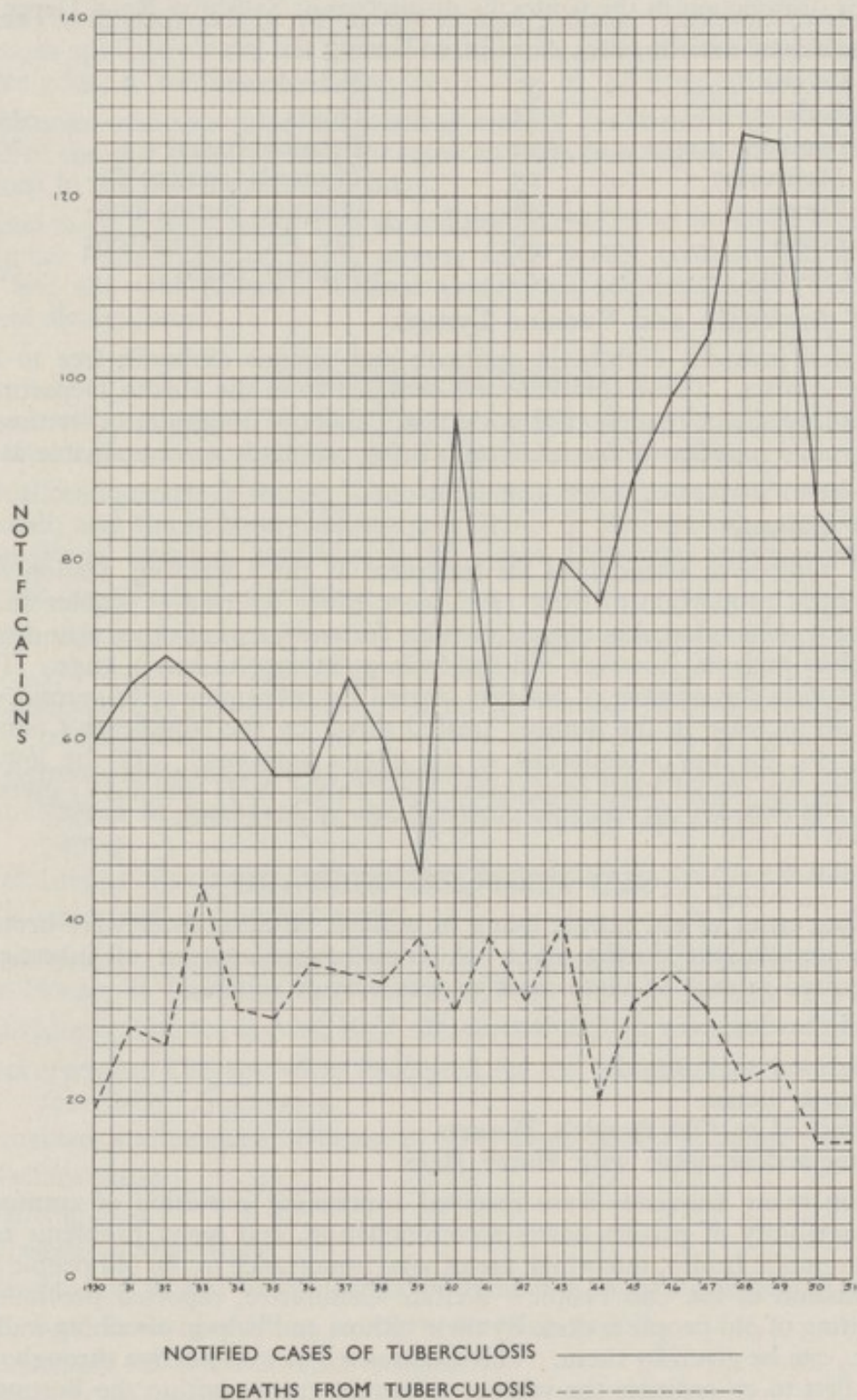
The analysis of the housing particulars of 52 of the 80 cases of tuberculosis notified in 1951 shows that in one case only were the premises in poor condition. Statutory overcrowding was not confirmed in the homes of these new cases. Of the 28 cases remaining, 16 were permanent residents of an institution at the time of the development of the disease or were inward transfers from other districts, and the other 13 could not be followed-up because of removal from the district or some similar reason. In one house there were two cases of tuberculosis, in one house three, and in one house four. Apart from these there were no multiple notifications from any single dwelling.

The Physician of the Uxbridge Chest Clinic supplied the information that B.C.G. vaccination during 1951 was carried out on 11 people of Southall. Those who received the treatment were case contacts previously tested for their reaction, found to be sensitive to tuberculosis germs, and, therefore, more readily liable to be infected.

Tests were carried out also on groups of school leavers and hospital nurses within the Borough ; it was found that not one of these was sensitive and, therefore, no B.C.G. vaccination was required for them.

Two special groups were examined by Mass X-Ray during the year. One was of the employees of the North Thames Gas Board, a group not previously examined, and the number examined from this group was 416 (408 men and 8 women). The other examination was on the children and staff at one of the Southall Schools because tuberculosis had been discovered in a member of the staff. The number examined was 318.

GRAPH C.
TUBERCULOSIS (ALL FORMS)—NOTIFICATIONS AND DEATHS FROM 1930 TO 1951



Cancer

It will be seen by the table of causes of death (page 30) that in 1951 94 cases (48 males and 46 females) died from cancer. (See Appendix Tables VII and VIII.)

Disinfection

In cases of infectious disease, rooms, clothing, etc., were disinfected—rooms by sealing and fumigating with formalin preparation; clothing, bedding and other infected articles by removal for disinfection in the Council's disinfectant at Salisbury Road Depot.

List of premises, articles, etc., disinfected during the year :—

Rooms	30	Eiderdowns	6
Beds	25	Quilts	10
Blankets	70	Pyjamas (pairs) ...	20
Mattresses	23	Plimsolls (routine disinfection during holiday for Featherstone School) (pairs) ...	50
Sheets	48		
Books	36		
Pillows	35		

Provision of Antitoxin and Vaccine Lymph

The Council provides diphtheria antitoxin and tetanus antitoxin free to local practitioners in the district. These antitoxins are obtained from the Health Department during office hours and by direct request to the Medical Officer of Health at other times. In the event of emergency supplies of vaccine lymph being required, it is obtainable at very short notice.

Vermin and Scabies

The total number of attendances for treatment at the Cleansing Station rose during 1951. The largest proportion of these cases were either referred as scabies and found to be suffering from some other skin disease or came for treatment of other skin disease. The number of scabies patients, however, did rise from 99 in 1950 to 122 in 1951. There was a considerable drop in the number of patients treated for infestation with vermin. This was partly due to an increase in the number treated direct by the Middlesex County Council school clinics, but the low attendances at the clinics combined with the low figures of infestation found on school head inspections (see Tables XIII and XIV) gives reason to hope that there has been a real decline in the spread of pediculosis.

OLD PEOPLE'S WELFARE

Twenty-four cases of old people living in difficult circumstances were brought to the notice of the department during 1951. A considerable amount of investigation and enquiry is required in each of these cases as they vary so much.

Details of the cases are as follows :—

- 6 admitted to hospital.
- 5 died at home.
- 2 admitted to Old People's Homes.
- 11 remained at home with Home Help.

In addition many enquiries were received concerning provision of comforts for old people, the availability of private hostel accommodation, and many problems not directly concerned with public health, but which are of vital importance to the old people concerned. Since the formation of the Old People's Welfare Committee, reported previously, a good deal of the visiting of old people is done by their visitors and help in obtaining walking sticks, fireguards, etc., can be given by them. This Committee was very active throughout the year endeavouring first to co-ordinate the various voluntary groups within the Borough working for the welfare of old people, and in arranging for a rota of voluntary visitors who could call on home-bound aged persons brought to the notice of the Committee. The Committee started also to formulate plans for a voluntary chiropody service for old people, which, it was hoped, would be started in the new year.

Meals on Wheels Service. This Service was continued throughout the year, and a grant was given by the Borough Council to assist with the provision of meals, once a week, to old people, and during the year 1951 the number of meals supplied was 1,766, at a cost of 9d. per meal to the recipient. Those persons unable to pay even that amount were able to have the meal free of charge.

During the year facilities were provided for the bathing of old people or the chronic sick in their own homes by means of a portable bath with a hot water supply and pumping arrangements, to be conveyed in a Borough Council vehicle. This Scheme, however, was not a success, as applications did not come forward, presumably because the idea of a Borough baths vehicle going to the person's home was a form of publicity which was unwelcome.

At Christmas, many voluntary associations assisted in the provision of special comforts for the aged of the Borough, not only for those in their own homes, but for those removed to Institutions in the near neighbourhood.

I am glad to be able to report that no old person had to be removed under Section 47 of the National Assistance Act, 1948, powers since by the co-operation of the Welfare authorities and the Old People's Welfare Committee solutions other than compulsory removal were always found.

WELFARE—GENERAL

A considerable amount of Welfare Work is carried out by the organisations of the St. John Ambulance Association and the British Red Cross Association.

The local headquarters of the St. John Ambulance Association are situated at Hartington Road, Southall, and the honorary officers are Dr. C. J. P. Seccombe, 20, Western Road, Southall, Divisional Surgeon ; and Miss F. M. Gibbs, Divisional Superintendent.

The work carried out is as follows :—

- Attendance of men and women of the Brigade at sports meetings, public entertainments and organised gatherings.

- Maintenance of medical comforts depot for the loan of items of medical equipment to the sick.

- Transport by ambulance to supplement the County Ambulance Services.

- Attendance by members of the Nursing Division at old people's meetings and outings.

- Provision of instructors in first aid or Home Nursing for Civil Defence volunteers.

- Voluntary aid in hospital wards.

The headquarters of the British Red Cross Association, Ealing Division, is Florence Nightingale House, 85 Uxbridge Road, Ealing, W.5.

The Divisional Director is Mrs. E. V. Bruce, and the work carried out is as follows :—

- Occupational Therapy when requested for the disabled ex-service pensioners and for Chest Clinic cases.

- Provision and carriage of books to T.B. home-bound patients.

- Welfare visits.

- Nursing Aid.

- Nursing in the Home.

- Escort duty to and from Hospitals for the sick, aged blind people and children.

- Medical Loan, providing comforts for sick people.

- Transport for the sick when requested.

- Blood Transfusion.

- Civil Defence Basic First Aid training.

- Accommodation in Red Cross Homes for chronic sick and aged.

The local depot for the issue of comforts is situated at Green Drive, Southall.

Health Propaganda

The spread of health information is a most important part of the work of the Health Department, and new methods of teaching the people how to live healthy lives are constantly being devised. Voluntary societies and youth organisations are eager to learn about their local health services and about ideas on healthy living. Requests from these societies for talks on health subjects are frequently received, and arrangements are made for lectures or film strip talks to be given by a member of the Health Department. Time is always given after these lectures for discussion, and during these discussions many problems are brought to the notice of the Health Department which might have been hidden and unsuspected for a very long time. In fact I found this so notable that at one meeting the whole of the time was given to discussion, the audience being asked to put questions on any health subject or subject allied to health, which were then straightway answered. This form of personal propaganda is most successful of all and it is carried out during conversation when visits to factory canteens, shops and private homes are made by Medical Officer of Health or Sanitary Inspectors.

Poster displays on the public notice boards were altered frequently to illustrate seasonal topical subjects, and a special supply of leaflets on poliomyelitis was obtained to be used as and when individual cases occurred, for the information of relatives, school teachers, factory employees or other contacts.

As part of the celebrations in the Festival year, the Health Committee decided that the public of Southall should be given the opportunity to visit all the health service departments and see preventive medicine in operation. By agreement with the Regional Hospital Board and the Middlesex County Council, the local hospitals, clinics and day nurseries were made available for inspection and fortnightly tours were arranged of the services ; these were carried on throughout the months from May to September inclusive. The scheme was advertised and the public asked to apply in advance for places on these tours in order to ensure that the number attending on any one occasion would not be so great as to interfere with the working of any of the services. The visitors were taken by coach, and starting from the Manor House Public Health Department as the operational centre, were taken by the coach with the Medical Officer of Health as guide, around the health services in a pre-arranged itinerary. At the end of each tour time was available for questions and discussions. 150 persons took advantage of the scheme and appreciation was expressed by all members of voluntary associations and individual visitors who attended. It was noticeable that on each occasion a high proportion of the visitors had not previously been fully aware of the extent of the work that is carried on for their benefit by the various sections of the Health Service.

During the year articles on the work of the Health Department and letters of advice on matters of health preservation were broadcast by means of the Civic News Sheet, published at bi-monthly intervals by the Council's Information Department. This propaganda reached a fairly large section of the public as the leaflets were issued free and distributed amongst the voluntary societies as well as to the general public by means of the Public Libraries, Information office, Health Service clinics and Town Hall.

ESTABLISHMENTS FOR MASSAGE AND SPECIAL TREATMENT

Seven establishments were inspected for licence under this heading and all were found satisfactory for the purpose which was intended.

Details are as follows :—

<i>Purpose</i>							<i>No. of Licences</i>	
Chiropody only	4
Massage, Chiropody and Electrical Treatment	1
Massage and Electrical Treatment	2

MEDICAL EXAMINATION OF BOROUGH COUNCIL EMPLOYEES

During 1951, a total of 115 medical examinations were carried out on members of the Borough Council staff. 44 examinations were carried out with regard to suitability for employment on the Council's permanent staff, and 64 for entry into the Sickness Pay Scheme.

Seven employees reaching completion of their Sickness Pay entitlement, received special medical examination and reports were made to the appropriate Committee of the Council.

SANITARY CIRCUMSTANCES OF THE BOROUGH

Water Supply and Water Services

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, and the Rickmansworth & Uxbridge Valley Water Company a small area in the northern part. The supply is satisfactory, both in quality and quantity. Sampling : One sample suspected of chemical contamination was taken during the year and found to be satisfactory, though unpalatable. Reports on sampling carried out by the Metropolitan Water Board are issued from time to time.

Number of houses supplied from public water mains ...	...	14,427
Per cent. of houses supplied from public water mains ...	...	100%
Number supplied direct to houses ...	...	14,427
Number of standpipes on mains ...	...	Nil

Sanitary Inspections of the District

The total number of inspections of premises made during the year by the Sanitary Inspectors was 10,773.

Table XV gives an analysis of the number and nature of such inspections.

Housing defects and disrepair received the same prior attention as in previous years. Although statistically, inspections were lower at 6,358 as against 6,809 for 1949, there was no pause in abatement work up to legal proceedings.

Intensive work on districts, enabling tenants to report immediately any item requiring attention and, in the main, excellent co-operation from property agents, have secured against any decline in standard.

School Sanitation

The survey made during 1951 of sanitary facilities in Southall Schools was continued at six-monthly intervals and schedules of defects supplied to the Divisional Education Officer. Progress was made in removing outstanding defects and items of disrepair received prompt attention, certain major works were carried out, *i.e.*, on improvement of canteen kitchens, and in the provision of new ablution and water closet facilities to replace obsolete and unhygienic types.

Eradication of Bed Bugs

Statistics for the year :—

(a) Number of Council houses				} Total 21
(1) Found to be infested ...	...	...	6
(2) Disinfested during the year ...	...	...	6
(b) Number of other houses				} Total 21
(1) Found to be infested ...	...	...	15
(2) Disinfested during the year ...	...	...	15

Canal Boats

Visits were paid to the canal, and three boats were inspected. The condition of boats and occupants was satisfactory.

There were no complaint notices issued by other authorities.

Mortuary and Post-Mortem Room

The mortuary, situated in Havelock Road, provides adequate accommodation for the Borough. Six bodies were deposited in the mortuary during the year.

Factories Act, 1937

The following tables give details of the work done in connection with the factories and outworkers in the Borough :—

INSPECTIONS

Factory Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
Non-Mechanical	12	26	1	Nil
Mechanical	164	211	24	Nil
Totals ...	176	237	25	Nil

DEFECTS FOUND

Particulars	Number of cases in which defects were found				
	Found	Remedied	Referred		Number of cases in which Prosecutions were instituted
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness	1	1	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	1	—	—	—	—
Sanitary Conveniences—					
(a) Insufficient	3	3	—	1	—
(b) Unsuitable or defective	43	13	—	3	—
(c) Not separate for sexes	2	—	—	—	—
Other offences against the Act (not including offences relating to out-work)	—	—	—	—	—
Totals ...	50	17	—	4	—

OUTWORKERS

Nature of Work	SECTION 110			SECTION 111		
	No. of outworkers in August List required by Section 110 (1) (c)	No. of Cases of Default in sending Lists to the Council	No. of Prosecutions for failure to supply Lists	No. of Instances of Work in Unwholesome Premises	Notices served	Prosecutions
Wearing Apparel—Making ...	21	—	—	—	—	—
Artificial Flowers—Making ...	1	—	—	—	—	—
Toys—Making ...	3	—	—	—	—	—
Wigs—Making ...	1	—	—	—	—	—
Furrier ...	1	—	—	—	—	—

The Rag Flock and Other Filling Materials Act, 1951

There are no premises in the Borough subject to registration or licence under this Act.

There are, however, premises where upholstery is reconditioned and second-hand articles are sold, in respect of which it is felt there should be some control.

Petroleum and Carbide

During the year 66 applications for licences to store petroleum were granted and 4 applications were granted to store carbide of calcium.

Celluloid and Cinematograph Films Act, 1922

There are two licences in force for the purpose of stripping and making celluloid solution from cinematograph films.

Housing

Two hundred and forty-eight investigations revealed 38 cases of statutory overcrowding (Housing Act, 1936). Other cases of overcrowding, though not statutory, were recommended on social grounds in the interests of public health. Of the 121 cases of statutory overcrowding remaining in the Health Department records at the end of 1950, 14 have been relieved at the end of 1951, leaving 107 cases which, with 38 new cases, 3 of which were also relieved during the year, makes a total of 145 cases now awaiting relief.

For statistics see Table XVI in the Appendix.

Administration of the Shops Acts

As a result of routine visits improvements have been effected in the standard of washing facilities and sanitary accommodation, and the provision of appropriate records and notices.

Markets

The only market held in Southall is a small weekly one for the sale of horses, pigs, poultry and other livestock. This is kept under supervision. Action was taken to secure the regular removal of manure.

HYGIENE OF FOOD

Food Poisoning

On 2nd October, 1951, information was received from one of the local factories that a number of employees had developed symptoms of food poisoning following a meal in the works canteen. 32 persons were affected out of a total at risk of 315. The symptoms occurring from 2–12 hours after the mid-day meal at the canteen, were not unduly severe as

two days' absence from work was the longest period of invalidism. Pre-cooked and re-heated minced beef was suspected to be the cause, but there was none of the food eaten at the suspected meal remaining for sampling.

At the time of this incident a number of improvements in the canteen facilities and methods were suggested by this Department, and the management of the firm agreed very readily to all that was proposed.

Sampling of Canteen Meals

Difficulty occurs very often in the obtaining of samples for analysis of food which has been suspected to be the cause of illness, so on the occurrence of food poisoning at a factory arrangements were made that in future small portions of all food cooked should be kept for 24 hours in containers supplied by the Health Department ; each item, *i.e.* meat, pudding, gravy, etc., to be separate. With the co-operation of the Divisional Education Officer and the School Meals Organiser this same scheme was adopted for the School canteens in the Borough.

The free washing facilities in the public conveniences, which were brought into operation in September, 1950, continued to be available throughout 1951. During that period, 12,616 paper towels were issued free in addition to 1,645 linen towels, which are provided at a cost of 2d. per person. As this is the first full year in which the scheme has been working, it is not possible to assess as yet whether there has been any increase of the use of washing facilities because of the new provision, but it seems that considerable use has been made of the service.

On receipt of certain information concerning the possibility of easy infection of synthetic cream since it is an excellent nutritive medium for germs, it was decided to take a survey of all the employees in a large factory manufacturing this cream. A meeting was arranged with the directors and staff, and the reasons explained for the examinations which were to be carried out. All agreed to co-operate, and subsequently throat swabs, nasal swabs, urine specimens, faeces specimens and nail scrapings were taken from management and employees. The results of the bacteriological examinations were most satisfactory. No carriers of infectious disease were found and the investigation gave the opportunity for a good deal of propaganda on the rules of personal hygiene.

Milk.

Licences.

The following licences under the Milk (Special Designations) (Raw Milk) Regulations, 1949 and 1950, and Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 and 1950, were issued :—

for the sale of Tuberculin Tested (Pasteurised) Milk...	...	5
for the sale of Tuberculin Tested Milk...	... ..	13
for the sale of Pasteurised Milk ... ..	...	22
for the sale of Sterilised Milk ... ..	...	19
Supplementary Licences ... ..	...	22
		—
	Total ...	81
		—

Sampling.

Two samples of milk were sent during the year for bacteriological and chemical analysis, which were reported as satisfactory. The bacteriological examinations are carried out by the Public Health Laboratory Service.

Food Sampling

The bacteriological analyses of 248 food samples taken during the year were carried out by the Public Health Laboratory Service.

Thirty-seven of these specimens were ice-cream samples, covering 31 makes of ice-cream, and following bacteriological analyses the ice-creams were graded as follows :—

Grade I	...	...	...	...	21
Grade II	...	...	...	...	6
Grade III	...	...	...	...	8
Grade IV	...	...	...	...	2

Chemical analyses of milk and other foods are secured as and when necessary by liaison with the County Council, which is the Food and Drugs Authority.

Food Inspections

Inspections are made of the carcasses of slaughtered animals at St. Bernard's Hospital (L.C.C.) slaughterhouse and pig clubs, and of premises where meat and other foods are sold or prepared for sale. There is no registered slaughterhouse or public abattoir in the district, and most of the meat supplied comes from the Ministry of Food Distribution Centre.

FOOD INSPECTIONS

	Total Inspected (lbs.)	SOUND				UNSOUND			
		Total (lbs.)	Stock (lbs.)	Pro-duction (lbs.)	Con-sumption (lbs.)	Total (lbs.)	Animal Feeding (lbs.)	By-Products (lbs.)	Destruc-tion (lbs.)
Canned ...	474,170	31,650	—	21,535	10,115	442,520	363,014	328	79,178
Raw ...	87,706	19,388	—	—	19,388	68,318	65,698	1,615	1,005
Totals ...	561,876	51,038	—	21,535	29,503	510,838	428,712	1,943	80,183

Catering Establishments and Food Shops

All catering establishments in the Borough were regularly visited during the course of the year, and no contraventions of a serious nature were encountered. In 21 cases defects were dealt with following verbal or preliminary notices and the service of statutory notices was not required. Under the provisions of the Byelaws, made under the Food & Drugs Act, 1938, on the Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air good progress has been made in obtaining the protection of exposed food both in catering establishments and general foodshops.

Refrigerated display cabinets were installed at three fishmongers' shops subsequent to a general meeting of local fish merchants and an exhibition of various types of such cabinets.

Undoubtedly, local traders are keeping pace with growing public consciousness of food hygiene standards.

RODENT CONTROL

During the year approval, co-ordination and supervision of extermination methods at factories and business premises was maintained and the Council has continued the policy of not entering into "agreements" to keep factory premises clean. Arrangements are made between the factory managements and private pest destruction firms, the Health Department

staff exercising control and supervision only. No charges were made for the treatment of private dwellings.

Regular sewer treatments as recommended by the Ministry of Agriculture and Fisheries were carried out.

ATMOSPHERIC POLLUTION

The measurement of atmospheric pollution was continued throughout the year at three sites in the Borough. At Jubilee Gardens in the north, at the Recreation Ground in the south, measurements were taken by the lead peroxide method which provides a relative measure of the average amount of sulphur dioxide in the atmosphere from month to month. At Hortus Cemetery, also in the southern part of the Borough, measurement of solids deposited from the air were carried out by means of a deposit gauge. The results are tabulated below, and on Graphs D and E the seasonal variation can be seen. It will be noted that the peak for sulphur pollution occurs during the winter months and that it falls to a very low level during the months of July and August; since in general industrial plants continue to function with less seasonal variation in fuel consumption than does the average home, these figures suggest that the greater part of the local air pollution by sulphur dioxide comes from the burning of domestic fires.

Graph E which gives pictorial results by the deposit gauge method shows a fairly even distribution of deposit of sulphur compounds throughout the year and indicates that there is a constant and fairly heavy pollution of the atmosphere with dust and grit, although the figure compares very favourably with the rest of London and the industrial towns of the Midlands and the North.

Graph F is a representation of the comparative figures for Southall, Central London, a Northern industrial area, and Godalming, Surrey, which constantly returns the best figures throughout the year.

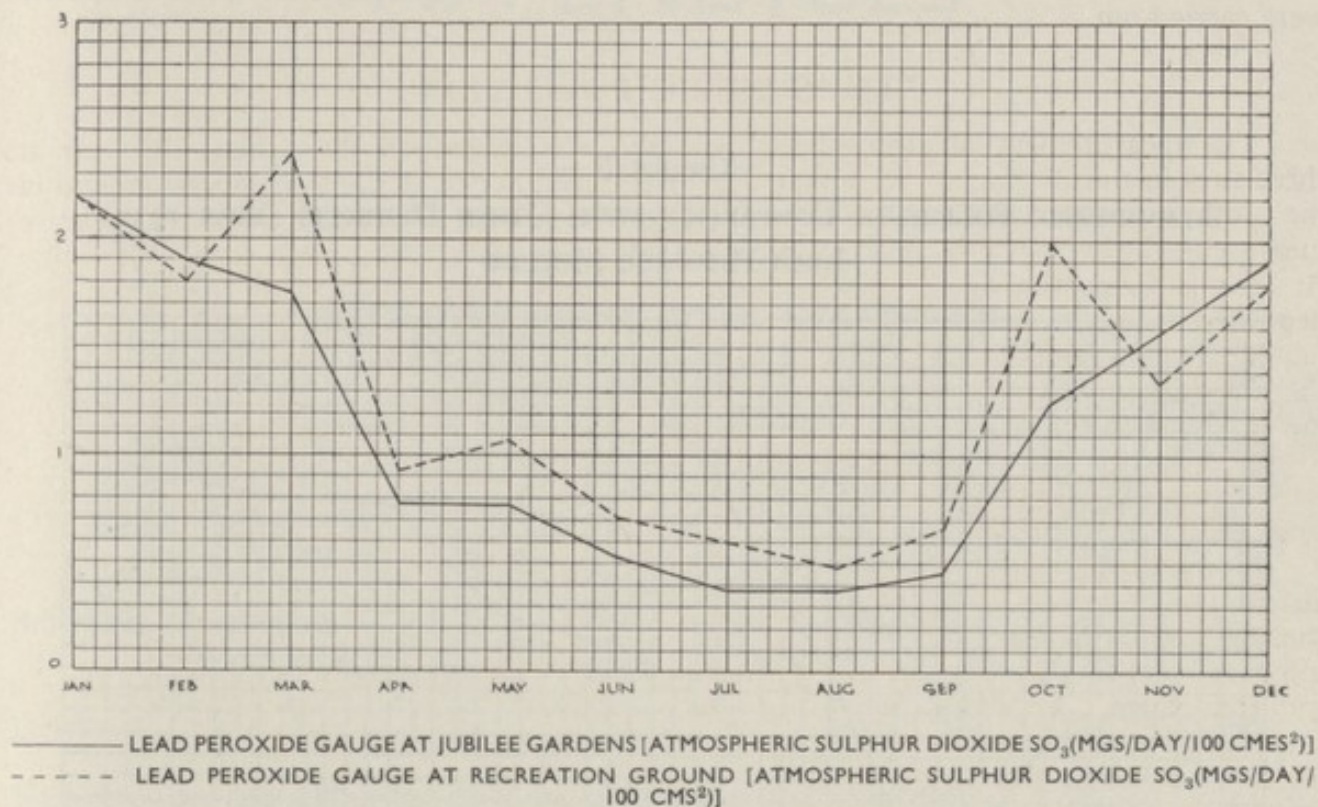
There is an overall improvement on the figures resulting from both methods of estimation over those of 1950. The improvement on the sulphur pollution figures was fairly constant throughout the year.

Particular sources of possible smoke nuisance were kept under observation throughout the year, and abatement of pollution obtained by the issuing of instructions on efficient stoking of boilers and in two cases by the installation of new boilers.

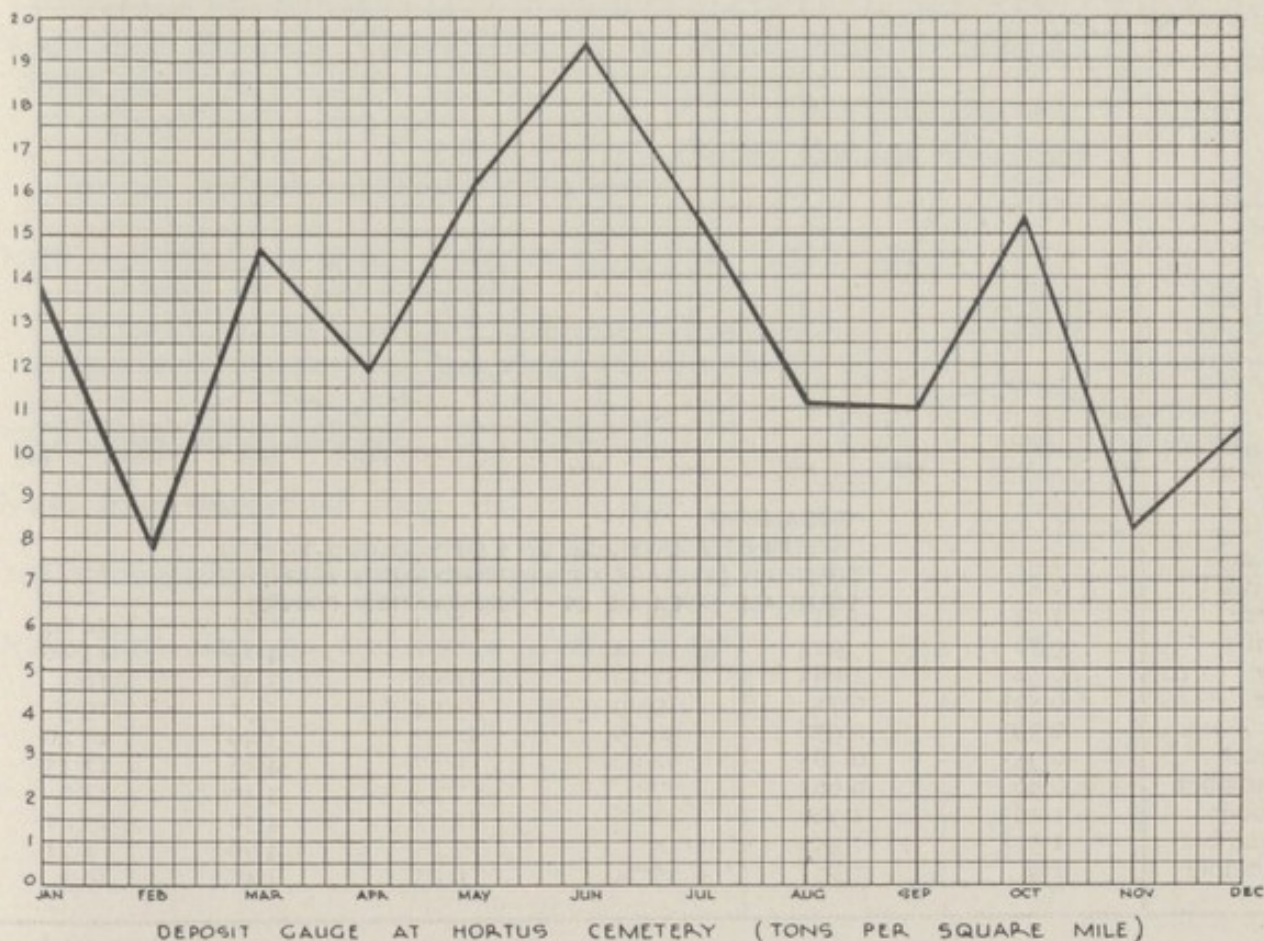
ATMOSPHERIC POLLUTION ESTIMATION

1951	Sulphur Trioxide-Lead Peroxide method. Milligrams per day per 100 square centimetres		DEPOSIT GAUGE			
	Jubilee Gardens*	Recreation Ground	HORTUS CEMETERY			
Month of year			Rainfall	Tons per square mile per month		
			mm.	Insoluble	Soluble	Total
January ...	2.22	2.2	75.51	7.86	5.87	13.73
February ...	1.87	1.80	117.2	3.48	4.46	7.94
March ...	1.74	2.41	88	8.43	6.21	14.64
April ...	0.76	.914	57.24	7.71	4.15	11.86
May ...	0.52	1.083	53.23	12.98	3.32	16.3
June ...	0.523	0.71	19.99	13.94	5.36	19.3
July ...	0.393	0.572	30.19	11.97	3.49	15.46
August ...	0.353	0.385	92.92	6.87	4.28	11.15
September	0.46	0.662	77.6	7.54	3.46	11.0
October ...	1.263	1.992	21.86	11.17	4.30	15.47
November	1.578	1.354	124	3.25	4.96	8.21
December	1.9	1.81	35.74	6.05	4.45	10.5

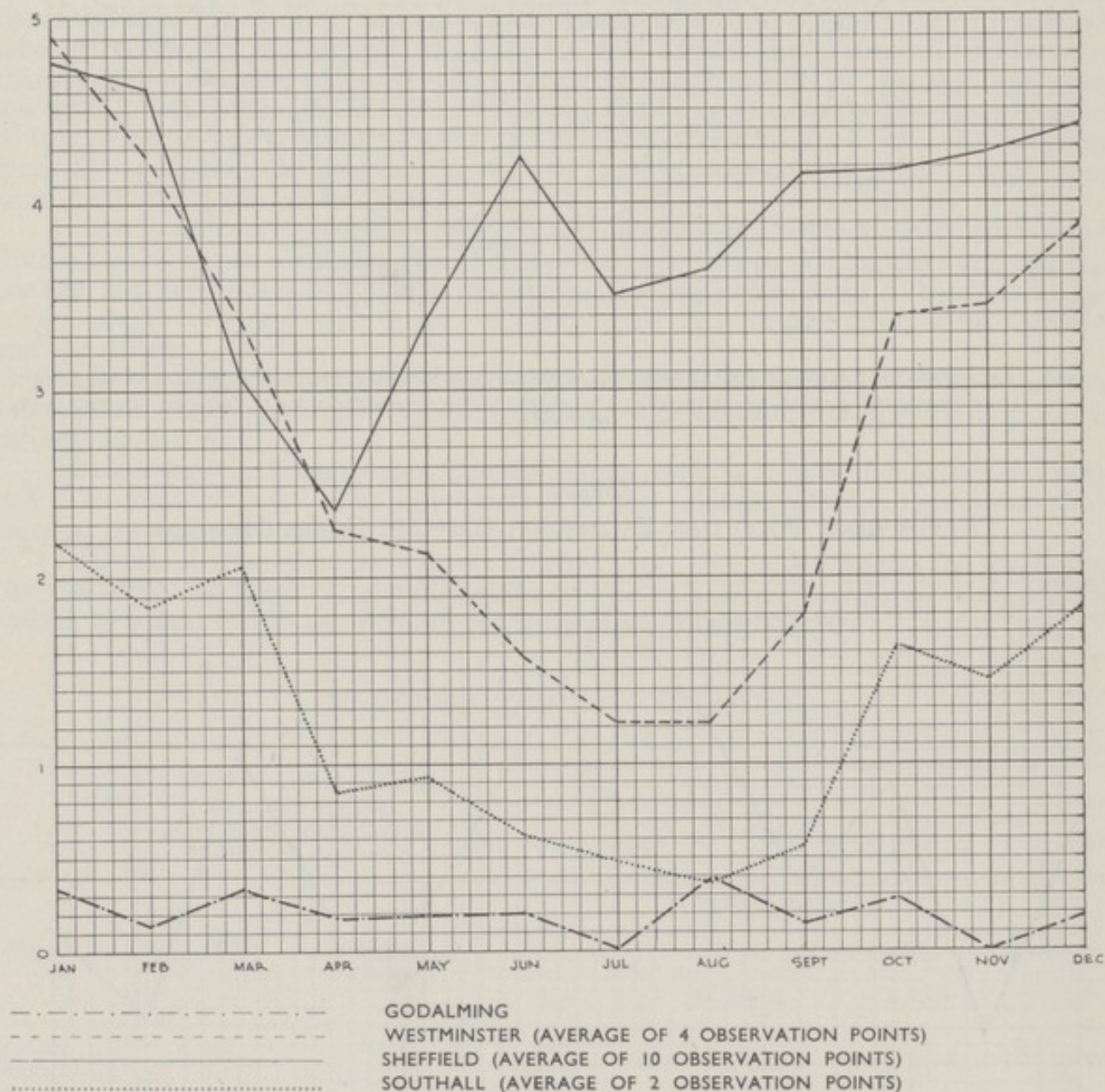
GRAPH D.
ATMOSPHERIC POLLUTION ESTIMATION (LEAD PEROXIDE METHOD)



GRAPH E.
ATMOSPHERIC POLLUTION ESTIMATION (DEPOSIT GAUGE METHOD)



GRAPH F
ATMOSPHERIC POLLUTION COMPARISON WITH OTHER DISTRICTS (YEAR 1951)
LEAD PEROXIDE METHOD



APPENDICES

EXTRACTS FROM VITAL STATISTICS

TABLE I.

							<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Comparative Figures for 1950</i>	
Live Births—Legitimate	...	...	...	...	...	...	678	361	317	751
Illegitimate	...	...	...	...	...	...	28	14	14	36
Stillbirths—Legitimate	...	...	...	...	...	...	18	7	11	} 12
Illegitimate	...	...	...	...	...	...	—	—	—
Deaths	...	...	...	...	...	...	551	289	262	480
Birth rate (live and stillbirths) per 1,000 of the estimated population									13·02	14·19	
Stillbirth rate per 1,000 total (live and still) births									...	24·86	15·02
Crude death rate per 1,000 of the civilian population									...	9·91	8·52
Deaths from Puerperal Causes (Heading 30 of the Registrar-General's Short List) :—											
							<i>Deaths</i>	<i>Rate per 1,000 total (live and still) births</i>			
No. 30. Pregnancy, Childbirth, Abortion							—	—		1·25	
Death rate of infants under 1 year of age :—											
All infants per 1,000 live births							...	...	21·25	25·41
Legitimate infants per 1,000 legitimate live births							...	...	22·12	23·97
Illegitimate infants per 1,000 illegitimate live births							...	...	—	55·56
Deaths from cancer (all ages)							...	...	94	90
Deaths from measles (all ages)							...	...	—	—
Deaths from whooping cough (all ages)							...	...	—	1
Deaths from diarrhoea, etc. (under 2 years of age)							...	...	1	1

Causes of Deaths, 1951

TABLE II

	Male	Female	Total 1951	Total 1950
1. Tuberculosis, respiratory	13	2	15	14
2. Tuberculosis, other	—	—	—	1
3. Syphilitic disease	5	1	6	4
4. Diphtheria	—	—	—	1
5. Whooping cough	—	—	—	1
6. Meningococcal infections	—	—	—	—
7. Acute poliomyelitis	—	—	—	—
8. Measles	—	—	—	—
9. Other infective and parasitic diseases ...	—	—	—	2
10/15. Cancer (all forms)	48	46	94	90
16. Diabetes	2	1	3	2
17. Vascular lesions of nervous system ...	21	28	49	53
18. Coronary disease, angina	36	27	63	60
19./20. Heart disease	37	54	91	82
21. Other circulatory disease	9	14	23	19
22. Influenza	5	2	7	2
23. Pneumonia	19	17	36	22
24. Bronchitis	31	20	51	40
25. Other diseases of respiratory system ...	1	2	3	2
26. Ulcer of stomach and duodenum ...	11	2	13	4
27. Gastritis, enteritis and diarrhoea ...	3	1	4	1
28. Nephritis and nephrosis	3	2	5	7
29. Hyperplasia of prostate	3	—	3	7
30. Pregnancy, childbirth, abortion	—	—	—	1
31. Congenital malformations, birth injuries, etc.	7	4	11	9
32. Other defined and ill-defined diseases ...	24	30	54	36
33. Motor vehicle accidents	5	2	7	5
34. All other accidents	6	5	11	12
35. Suicide	—	2	2	3
36. Homicide and operations of war ...	—	—	—	—
TOTAL DEATHS ...	289	262	551	480

Deaths in Wards

TABLE III

Ward	Male	Female	Total
Waxlow Manor	40	29	69
Northcote	36	40	76
Hambrough	57	46	103
Dormers Wells	48	37	85
Glebe	54	55	109
Norwood Green	54	55	109
Total ...	289	262	551

TABLE IV

Vital Statistics compared with other Areas

BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL MORTALITY AND CASE-RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1951.

(Provisional Figures based on Quarterly Returns)

	England and Wales	126 County Boroughs and Great Towns including London	148 Smaller Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Administrative County	Southall
Rates per 1,000 Home Population					
BIRTHS :					
Live	15.5	17.3	16.7	17.8	12.69
Still... ..	0.36	0.45	0.38	0.37	0.32
DEATHS :					
All causes	12.5	13.4	12.5	13.1	9.91
Typhoid and paratyphoid	0.00	0.00	0.00	—	0.00
Whooping cough	0.01	0.01	0.01	0.01	0.00
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.31	0.37	0.31	0.38	0.27
Influenza	0.38	0.36	0.38	0.23	0.13
Smallpox	0.00	0.00	0.00	—	0.00
Acute poliomyelitis (including polioencephalitis)	0.00	0.01	0.01	0.00	0.00
Pneumonia... ..	0.61	0.65	0.63	0.61	0.65
NOTIFICATIONS (corrected) :					
Typhoid fever	0.00	0.00	0.00	0.01	0.00
Paratyphoid fever	0.02	0.03	0.02	0.01	0.00
Meningococcal infection	0.03	0.04	0.03	0.03	0.04
Scarlet fever	1.11	1.20	1.20	1.10	1.56
Whooping cough	3.87	3.62	4.00	3.11	3.99
Diphtheria	0.02	0.02	0.03	0.01	0.00
Erysipelas	0.14	0.15	0.12	0.15	0.07
Smallpox	0.00	0.00	0.00	0.00	—
Measles	14.07	13.93	14.82	14.64	20.30
Pneumonia... ..	0.99	1.04	0.96	0.72	1.96
Acute poliomyelitis (including polioencephalitis) :					
Paralytic	0.03	0.03	0.03	0.02	0.02
Non-paralytic	0.02	0.02	0.03	0.02	0.18
Food poisoning	0.13	0.15	0.08	0.23	0.59
Rates per 1,000 Live Births					
DEATHS :					
All causes under 1 year of age ...	29.6(a)	33.9	27.6	26.4	21.25
Enteritis and diarrhoea under 2 years of age	1.4	1.6	1.0	0.7	1.42
Rates per 1,000 Total (Live and Still) Births					
NOTIFICATIONS (corrected) :					
Puerperal fever and pyrexia ...	10.66	13.77	8.08	14.90	15.19

(a) per 1,000 related live births.

TABLE V

Monthly Registration of Births.

The monthly registration of births classified as to Wards is given in the following table :—

	Waxlow Manor	Northcote	Ham-brough	Dormers Wells	Glebe	Norwood Green	Total
January ...	5	2	1	1	—	1	10
February ...	2	2	2	3	2	1	12
March ...	3	2	2	8	3	3	21
April ...	6	4	—	3	4	1	18
May ...	—	5	2	5	2	—	14
June ...	3	3	1	2	5	3	17
July ...	2	1	—	2	1	1	7
August ...	3	3	2	4	1	1	14
September ...	—	1	1	—	3	1	6
October ...	3	3	2	—	3	3	14
November ...	1	2	1	—	4	3	11
December ...	1	—	3	1	1	—	6
Total ...	29	28	17	29	29	18	150

TABLE VI

CAUSES OF DEATH UNDER ONE YEAR OF AGE.

Certified Causes 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
Asphyxia (Atelectasis) ...	5	1	—	—	6	—	—	—	—	6
Bronchitis, pneumonia, etc. ...	1	—	1	—	2	1	—	—	—	3
Congenital malformations ...	3	1	—	—	4	—	—	—	—	4
Gastro-enteritis, diarrhoea, etc. ...	—	—	—	—	—	—	1	—	—	1
Prematurity ...	1	—	—	—	1	—	—	—	—	1
Totals ...	10	2	1	—	13	1	1	—	—	15

Live Births. Legitimate ... 678
 Illegitimate ... 28

Infant Deaths. Legitimate ... 15
 Illegitimate ... —

TABLE VII
DEATHS FROM CANCER

Year	Male	Female	Total	Estimated Population	Rate per 1,000 population
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
1935 ...	30	27	57	48,270	1.18
1936 ...	22	30	52	49,550	1.05
1937 ...	42	28	70	51,560	1.35
1938 ...	27	30	57	52,400	0.51
1939 ...	33	41	74	52,430	1.41
1940 ...	28	36	64	51,670	1.23
1941 ...	34	37	71	50,280	1.41
1942 ...	34	38	72	50,350	1.43
1943 ...	51	46	97	49,730	1.95
1944 ...	37	32	69	48,970	1.41
1945 ...	39	44	83	49,880	1.88
1946 ...	40	54	94	54,440	1.64
1947 ...	45	32	77	56,240	1.36
1948 ...	48	36	84	56,130	1.49
1949 ...	46	54	100	56,350	1.77
1950 ...	52	38	90	56,310	1.60
1951 ...	48	46	94	55,620	1.69

The following table shows the age distribution of the cancer deaths :—

TABLE VIII
AGES AT DEATH OF CANCER CASES

	Age								Total
	0-15	15-30	30-40	40-50	50-60	60-70	70-80	80+	
Male ...	—	—	1	7	7	13	19	1	48
Female ...	1	—	2	3	9	14	13	4	46
Total ...	1	—	3	10	16	27	32	5	94

The following table shows the various infectious diseases (other than Tuberculosis) notified during the year and also their age incidence :—

TABLE IX
NOTIFIABLE DISEASES DURING THE YEAR (OTHER THAN TUBERCULOSIS)

Diseases	Ages												Total cases notified	Deaths
	Under 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		
Dysentery	2	4	12	11	15	72	22	11	42	22	11	2	226	—
Erysipelas	—	—	—	—	—	—	—	—	—	1	2	1	4	—
Food Poisoning	—	1	1	2	4	9	3	1	5	3	3	1	33	—
Measles	53	99	143	171	206	433	18	2	—	3	1	—	1,129	—
Meningococcal Infection...	—	—	1	—	1	—	—	—	—	—	—	—	2	—
Paratyphoid	—	—	—	—	—	—	—	1	—	—	—	—	1	—
Pneumonia	2	3	4	1	3	10	1	7	12	15	28	23	109	—
Poliomyelitis	—	—	—	1	1	5	2	2	—	—	—	—	11	—
Puerperal Pyrexia	—	—	—	—	—	—	—	4	6	1	—	—	11	—
Scarlet Fever	1	3	7	7	9	52	6	1	—	—	1	—	87	—
Whooping Cough	18	24	27	38	31	75	2	5	1	1	—	—	222	—
Totals	76	134	195	231	270	656	54	34	66	46	46	27	1,835	—

The number of cases of infectious diseases (including Tuberculosis) notified during the year, according to their locality, are shown below :—

TABLE X

Diseases	Total	Waxlow Manor	North-cote	Ham-brough	Dormers Wells	Glebe	Norwood Green	Total Deaths
Dysentery	226	13	51	71	40	36	15	—
Erysipelas	4	1	—	1	1	—	1	—
Food Poisoning	33	1	4	—	25	3	—	—
Measles	1,129	264	107	64	182	314	198	—
Meningococcal Infection	2	—	1	—	1	—	—	—
Paratyphoid	1	—	—	1	—	—	—	—
Pneumonia	109	20	25	12	9	26	17	—
Poliomyelitis								
Paralytic	1	1	—	—	—	—	—	—
Non-Paralytic	10	3	—	2	2	2	1	—
Puerperal Pyrexia	11	—	3	3	3	—	2	—
Scarlet Fever	87	30	18	11	14	11	3	—
Tuberculosis	80	9	12	14	26	8	11	18
Whooping Cough	222	56	31	25	50	40	20	—
Totals	1,915	398	252	204	353	440	268	18

TABLE XI
TUBERCULOSIS NOTIFICATIONS—AGES AND CLASSIFICATIONS

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
0-1	—	—	—	—	—	—	—	—
1-5	1	—	—	—	—	—	—	—
5-10	1	1	—	—	—	—	—	—
10-15	1	—	1	—	—	—	—	—
15-25	11	15	—	1	2	—	—	—
25-35	7	10	1	1	—	—	—	—
35-45	9	4	—	—	4	1	—	—
45-65	7	2	1	1	4	—	—	—
65+	3	2	—	—	3	1	—	—
Totals ...	40	34	3	3	13	2	—	—

TABLE XII

The occupations of the new cases are as follows :—

Occupation	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
Aircraft Woodworker	1	—	—	—
Book-keeper	1	—	—	—
Baker's Roundsman	1	—	—	—
Builder and Decorator	1	—	—	—
Building Worker	1	—	—	—
Clerk	1	3	—	—
Cellulose Paint Sprayer	1	—	—	—
Cashier	—	1	—	—
Carpenter	1	—	—	—
Civil Engineer's Assistant	1	—	—	—
Child	1	—	—	—
Carpenter and Joiner	1	—	—	—
Dressmaker	—	1	—	1
Domestic Duties	—	—	—	1
Draughtsman	1	—	—	—
Electronic Assembler	1	—	—	—
Engineer	1	—	—	—
Electrical Engineer	1	—	—	—
Fitter's Mate	2	—	—	—
Factory Hand	1	1	—	—
Housewife	—	9	—	2
Instrument Maker	2	—	—	—
Librarian	—	1	—	—
Labourer	2	—	1	—
Machine Operator	—	1	—	—
Nurse	—	4	—	—
No Occupation	—	2	—	—
Old Age Pensioner	1	—	—	—
Office Cleaner	1	—	—	—
Packer	1	—	—	—
Postman	1	—	—	—
Schoolchild	1	1	2	—
Storekeeper	1	—	—	—
Spotter (Cleaning)	—	1	—	—
Salesman	—	—	1	—
Shorthand-Typist	—	1	—	—
Sawyer	1	—	—	—
Time Study Trainee	1	—	—	—
Unknown	9	6	—	—
Wireless Engineer	1	—	—	—
Totals ...	40	32	4	4

TABLE XIII
VERMIN AND SCABIES CLINIC ATTENDANCES

	First Visit	Re-attendances	Total
Scabies	33	89	122
Other skin conditions	114	1,131	1,245
Verminous heads	162	124	286
Baths (264 treatment baths, 139 ordinary)...	—	—	403
Total attendances for all purposes	—	—	2,056
Total attendances for treatment	—	—	1,653

TABLE XIV
EXAMINATIONS FOR VERMINOUS CONDITIONS AND CHILDREN FOUND TO BE VERMINOUS
ATTENDING MAINTAINED SCHOOLS IN SOUTHALL DURING 1950.

School	Total Number of Examinations	Total Number of Pupils found to be infested	Total number of individual pupils found to be infested for the first time during the year	Number of individual pupils in respect of whom cleansing notices were issued (Sec. 54/2 Educ. Act, 1944)	Number of individual pupils in respect of whom cleansing orders were issued. (Sec. 54 (3) Educ. Act, 1944)
Beaconsfield Road, J.M.	1,582	6	5	5	3
Beaconsfield Road, I.	1,211	3	2	1	1
Clifton Road ... J.M.	1,183	7	7	6	1
Clifton Road ... I.	1,106	12	10	10	2
Featherstone Road J.M.	1,302	13	5	5	8
Featherstone Road I.	907	5	4	3	1
Lady Margaret Road J.M.	1,644	16	15	10	8
Lady Margaret Road I.	1,276	2	1	1	1
North Road ... J.M.	1,534	5	4	4	—
North Road ... I.	791	11	8	9	1
St. Anselm's R.C. J.M.	1,801	22	13	4	4
Tudor Road ... J.B.	824	5	4	4	3
Tudor Road ... J.G.	727	10	9	7	2
Tudor Road ... I.	1,210	7	5	2	2
Western Road J.M. & I.	1,425	4	4	3	2
Dormers Wells S.B.	1,004	5	5	4	—
Dormers Wells ... S.G.	2,221	24	14	5	9
Featherstone Road S.B.	755	—	—	—	—
Western Road ... S.G.	1,550	12	9	9	5
Talbot Road Special	576	16	11	1	9
Total ...	24,629	185	135	93	62

TABLE XV

SANITARY INSPECTIONS—CLASSIFICATION OF VISITS.

Houses, Public Health Act, 1936 ...	...	...	...	...	...	6,277
Houses, Housing Act, 1936 ...	...	...	...	...	...	81
Overcrowding ...	...	...	...	...	...	248
Disinfestation ...	...	...	...	...	...	103
Vans, Sheds ...	...	...	...	...	...	23
Shops Act ...	...	...	...	...	...	64
Food Shops ...	...	...	...	...	...	826
Fried Fish ...	...	...	...	...	...	17
Cafes, etc. ...	...	...	...	...	...	144
Factories (Mechanical) ...	...	...	...	...	...	211
Factories (Non-Mechanical) ...	...	...	...	...	...	26
Outworkers ...	...	...	...	...	...	50
Food Factories ...	...	...	...	...	...	193
Smoke ...	...	...	...	...	...	101
Offensive Trades ...	...	...	...	...	...	8
Bakehouses ...	...	...	...	...	...	45
Dairies ...	...	...	...	...	...	19
Water Sampling ...	...	...	...	...	...	19
Milk Sampling ...	...	...	...	...	...	1
Other Foods Sampling ...	...	...	...	...	...	204
Schools ...	...	...	...	...	...	40
Stables ...	...	...	...	...	...	31
Slaughterhouses ...	...	...	...	...	...	65
Rats and Mice ...	...	...	...	...	...	364
Petrol ...	...	...	...	...	...	108
Canal Boats ...	...	...	...	...	...	3
Infectious Diseases ...	...	...	...	...	...	1,365
Atmospheric Pollution ...	...	...	...	...	...	127
						<hr/> 10,773 <hr/>

TABLE XVI
HOUSING—GENERAL

Statistics

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)	1,596
	(b) Number of inspections made for the purpose	6,358
(2)	(a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	—
	(b) Number of inspections made for the purpose	—
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(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	680
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	608
3.	Action under statutory powers during the year :—	
(a)	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—	
	(1) Number of dwelling-houses in respect of which notices were served requiring repairs	—
	(2) Number of dwelling-houses which were rendered fit after service of formal notices	
	(a) By owners	—
	(b) By local authority in default of owners	—
(b)	Proceedings under Public Health Acts :—	
	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	238
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices	
	(a) By owners	274
	(b) By local authority in default of owners	—
(c)	Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—	
	(1) Number of dwelling-houses in respect of which Demolition Orders were made	—
	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	—
(d)	Proceedings under Section 12 of the Housing Act, 1936 :—	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement room having been rendered fit	—
4.	Housing Act, 1936—Overcrowding :—	
(a)	(1) Number of dwellings overcrowded at the end of the year	145
	(2) Number of families dwelling therein	208
	(3) Number of persons dwelling therein	819
(b)	Number of new cases of overcrowding reported during the year	38
(c)	(1) Number of cases of overcrowding relieved during the year	14
	(2) Number of persons concerned in such cases	59
(d)	Particulars of any case in which dwelling-houses have again become overcrowded after the local authority have taken steps for the abatement of overcrowding	—

