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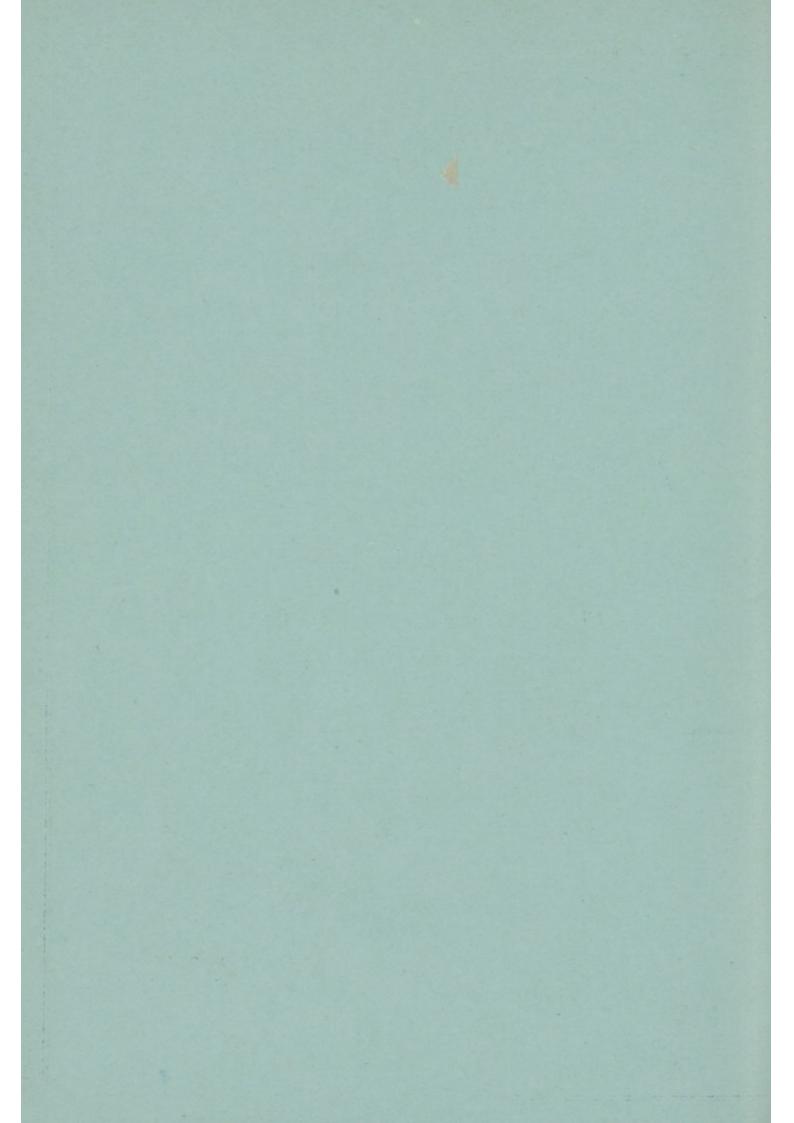
BOROUGH OF SOUTHALL

ANNUAL REPORT

OF THE

Medical Officer of Health for the Year 1952

> MARGARET A. GLASS, Medical Officer of Health





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Medical Officer of Health

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THE COUNCIL OF THE BOROUGH OF SOUTHALL, 1952

*ALDERMAN J. LOWE, J.P.

Deputy Mayor: COUNCILLOR J. G. P. DORMER.

Aldermen:

*Dane, A. T. Douglas, H. C.

GARDNER, F. E. HOPKINS, W. H.

Lowe, J., J.P. Marks, F. J., J.P.

Councillors:

*Barrett, J.

†*Bidwell, S. J.

†*Cavell, Mrs. I., J.P.

Cullingworth, F. A.

Dormer, J. G. P.

*Errington, F. G.

*Godman, A. S. Haigh, J. †*Love, P. J. (Chairman, Public Health Committee). Lye, A. E. *Salmon, J. Sheil, E. J. SHEPHERD, A. H.
*SOUTHEY, P. G.
STEELE, T. J.
*WARD, J. H.
WHITE, H. J.
*WILLIAMS, MRS. V. G. I.

* Members of the Public Health Committee.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present the 56th Annual Report on the health and circumstances of the population of the Borough of Southall, for the year 1952. The health of the people continued to be good.

The birth rate, which has been falling over the years since 1946, showed another slight decrease, the total number of births being identical with that in 1951, *i.e.* 706, and this, calculated against an increased total population, produces a birth rate for the year of 12.94.

The death rate fell from 9.91 in 1951 to 9.33 in 1952. This compares favourably with the death rate for the whole country, which was 11.3. Heart disease and cancer were again the principal causes of death and although there was a reduction in the number of deaths from respiratory diseases, it is noteworthy that 17 out of the total 74 deaths from

this cause occurred in the month of the great London fog.

A satisfactory fact to be able to record is that the infant mortality rate of 19.83 deaths per 1,000 live births is the lowest ever recorded for Southall, comparing favourably with the national infant mortality rate of 27.6. It is interesting to look back on the Annual Report for 1943 in which the infant mortality was 53.01, and in which it was suggested that an infant mortality of 27 per 1,000 which had then been obtained in New Zealand was an ideal to be aimed at and not likely to be achieved very rapidly. Since among the infant deaths are included three from pneumonia and five from prematurity, causes which could be considered to be preventable, it is reasonable to hope for still further reduction in the infant mortality rate.

The total number of infectious diseases notifications was very much lower than during the previous year. This was principally due to a fall in the number of notifications of measles and whooping cough. No case of diphtheria has been notified in the Borough of Southall since 1948, and although the number of notifications of scarlet fever was slightly increased the type of illness was not severe and few secondary cases occurred. There was an increase in the number of cases of poliomyelitis and seven out of the eight notified

patients had the paralytic form of the disease.

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

Although the number of notifications of tuberculosis was higher, this did not mean that all cases notified were new as a number of the people concerned had previously been notified in other districts and subsequently admitted to a hospital in Southall. The number of deaths from tuberculosis, *i.e.* 9, was the lowest ever recorded in the Borough and is a more satisfactory guide to the effectiveness of tuberculosis prevention and control than the notification figure, as it seems possible that cases are now being diagnosed sufficiently early for their lives to be saved by proper treatment; but the fact that the disease is still occasionally discovered after death or notified very shortly before death gives urgency to the need for Mass X-ray examination of the general population. During the last two years an analysis has been made of the housing conditions of new cases of tuberculosis and no evidence has come forward to suggest that statutory overcrowding or poor quality of housing has any material effect on the incidence of this disease. The number observed so far is however still too small for a confident deduction to be made.

Work on the welfare of the aged and chronic sick increases each year and these cases require a considerable amount of visiting and investigation. The County Welfare Authority, the Hospital Almoners, the National Assistance Board and the local Old People's Welfare Committee are all helpful and every effort is made for old people referred to this Department as being in need of care and attention to be aided in all ways in order to prevent action having to be taken for their compulsory removal under the National Assistance Act. There is a new awareness of the value of certain services for old people which can be provided at little cost and which may result in a great improvement in the physical and mental well-being of the people concerned. The new chiropody service operated by the Old People's Welfare Committee, meals on wheels, holidays and excursions for old people and home visiting, combined with the service provided by the County Home Helps may often enable a previously house-bound or bed-ridden person to become mobile and able to live a fuller and happier life.

The number of visits paid by the Sanitary Inspectors shows an increase of 526 over the previous year. As the need for attention to defective housing was lower during the year evidenced both by the number of visits required and by the figures for the number of dwelling houses found not to be in all respects fit, *i.e.* 680 for 1951 and 612 in 1952, more concentrated attention on hygiene of food by visits paid to food shops, food factories, etc., was possible, and intensification of the work on rodent control is shown by the fact that the number of visits paid for this purpose were more than double those for 1951.

The observations of atmospheric pollution maintained throughout the year were showing extremely satisfying results and new record low figures had been obtained during the months of July and August but these were vitiated during November and December

by the occurrence of heavy atmospheric pollution during the great London fog.

In an endeavour to make this report a comprehensive one information has been requested from many sources and I should like to thank the County Medical Officer, the Area Medical Officer, the Secretary of the Uxbridge Group of the North-West Metropolitan Regional Hospital Board, the Medical Superintendent of St. Bernard's Hospital, the Physician of Uxbridge Chest Clinic, the County Public Control Officer, Chief Officers of the Borough Council and all those who have supplied statistics and reports. I should like also to extend my sincere thanks to the Chief Sanitary Inspector and to all members of the Departmental Staff in acknowledgement 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,

Margant a. Glass

Medical Officer of Health.

HEALTH DEPARTMENT STAFF

for the year 1952

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:

J. H. WILLIS, Cert. S.I.B., Cert. M. & F., R.S.I. Smoke Certificate. (Resigned 30.9.52).

K. W. SKEATES, Cert. S.I.B., Cert. M. & F. (Resigned 17.2.52).

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

D. G. MARTIN, Cert. S.I.B., Cert. M. & F. (Promoted District Sanitary Inspector from 1.4.52.)

F. G. S. Hill, Cert. S.I.B., Cert. M. & F., Cert. I. San. E., R.S.I. San. Sc. (Appointed 12.12.52.)

Additional Sanitary Inspector:

D. G. MARTIN, Cert. S.I.B., Cert. M. & F. (Until 1.4.52.)

B. J. Parsons, Cert. S.I.B. (Appointed 5.5.52.)

General Assistant:

B. J. TOLWORTHY.

Clerical Staff:

Senior Clerk:

MRS. K. JONES.

Clerks, Shorthand-Typists:

MRS. W. M. CROSFIELD.

Miss J. S. Snow. (Resigned 31.8.52.)

MISS S. MCALLISTER.

MISS K. M. THORPE. (Appointed 25.8.52.)

GENERAL STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH

Area (acres)	 	 	2,607.762
Population—Registrar-General's estimate (Mid-1952)	 	 	55,430
Number of inhabited houses according to Rate Book	 	 	14,435
Average number of occupants per house	 	 	3.23
Sum produced by a penny rate	 	 	£1,716

The Council control the following parks and open spaces:—

Brent Meadow		 	 	4.7 acres
Cranleigh Gardens		 	 	2 acres
Dormers Wells Housing	Site	 	 	2.99 acres
Dudley Road Island		 	 	·13 acres

GENERAL STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH-continued.

Durdans Park				 		29.55 acres
Football Ground	, Wes	stern Roa	d	 		3.51 acres
Frogmore Green				 		·35 acres
Jubilee Park				 		II-I3 acres
Lady Margaret I				 	(appro	ox.) ·25 acres
Lee Road				 		·125 acres
North Road Islan				 		·35 acres
Norwood Green				 		7.25 acres
0 0 1				 		·125 acres
Recreation Grou				 		18 acres
Southall Municip						19.778 acres
0 1 11 10 1				 		26·77 acres
Swimming Bath			Wells	 		10.5 acres
The Manor Hou				 		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	l	255.404 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 one, the attendance varies to a great extent according to weather conditions. During 1952, the total number of persons using the bath was 42,683. The average number of persons attending per day (wet or fine) was 279. The maximum number at any one session was 500.

HEALTH SERVICES PROVIDED BY OTHER AUTHORITIES

North-West Metropolitan Regional Hospital Board

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

St. Bernard's Hospital is managed by its own committee and is for the reception of cases of mental and nervous disorders, it has 2,421 beds and takes patients from an extensive area, comprising parts of Berkshire, Buckinghamshire and Middlesex, including the Borough of Southall. Voluntary, temporary and certified patients of all types are admitted, and all modern forms of treatment are carried out.

Other hospitals outside the Borough which are used to a considerable extent by patients from Southall are Hillingdon Hospital, West Middlesex Hospital, and King Edward Hospital, Ealing.

The Uxbridge Chest Clinic is the regional centre to which residents of the Borough of Southall may be referred regarding chest disorders. It is also the regional centre for the diagnosis, treatment, after-care and the prevention of tuberculosis (both pulmonary and non-pulmonary). Persons may be referred there by their own doctors, from Borough Clinics, etc. Special "X-ray only" Clinics are available without appointment, otherwise persons are seen by appointment. There are female beds under the surveillance of clinic physicians at Hillingdon Hospital and male beds at Mount Pleasant Hospital. At this latter Hospital special treatment clinics are available for the convenience of Southall patients.

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
Infant Welfare Clinics
Diphtheria Immunisation, Vaccination and Whooping Cough Immunisation Clinics
Ultra Violet Light Clinics

At Jubilee Gardens Centre, North Road and Featherstone Road School Clinics.

Day Nurseries

No. 2. Recreation Ground.
No. 3. Jubilee Gardens. (Closed 15th April, 1952.)
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 vaccination and 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 recognised recuperative 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, or a child not over compulsory school age within the meaning of the Education Act, 1944, 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
Orthopædic treatment
Ophthalmic treatment
Physiotherapy
Ultra Violet Light treatment

North Road School Clinic. Featherstone Road School Clinic. Jubilee Gardens Clinic.

Speech therapy

North Road and Featherstone Road School Clinics.
Talbot Road School.

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, 517. (Males 257; Females, 260.) Crude Death Rate, 9.33.

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

Deaths and Death Rate

The death rate was lower this year, being 9.33 as compared with 9.91 in 1951. The corresponding rate for the whole country was 11.3. Heart disease and cancer were the principal causes of death, though there was no significant increase over the 1951 figures in either case. It is noteworthy that the deaths caused by diseases of the circulation, and particularly those resulting in cerebral vascular lesions, rose by about 50% over the 1951 figure. This, however, may be partly due to better definition of the cause of death, since

a reduction is to be seen in the number classified as "other defined and ill-defined diseases." It is satisfactory to note also that the number of deaths from tuberculosis fell from 15 in 1951 to 9 in 1952. The figure of 6 dying in motor vehicle accidents emphasises the need for continued work on the improvement of safety on the roads. There were no deaths from poliomyelitis.

Deaths from respiratory diseases were lower, i.e. 74 in 1952 and 97 in 1951. This is an interesting figure in view of the fact that the great fog of December was blamed for causing an increase in the number of deaths from respiratory diseases, but as 17 of the 74 deaths from this cause did occur during the month of December, the size of this number in proportion does suggest an increased incidence; the corresponding number for December, 1951, being 6.

The total number of deaths registered during 1952 of persons belonging to the district and dying within the district, at all ages and from all causes was 281 (males 136 and females 145). 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 236 in number (males 121 and females 115). The total number of deaths, therefore, belonging to the district was 517.

The deaths of non-Southall residents but dying within the Borough (not included in the above figures) number as follows: St. Bernard's Hospital, 154 (males 57 and females 97); at Mount Pleasant Hospital, 12 (all male); Southall-Norwood Hospital, 2 (1 male and 1 female); Norwood Hall, 26 (all female); Vine House, 3 (all female); at private addresses, 8 (5 male and 3 female).

For 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 A shows the trend of the death rate since 1944.

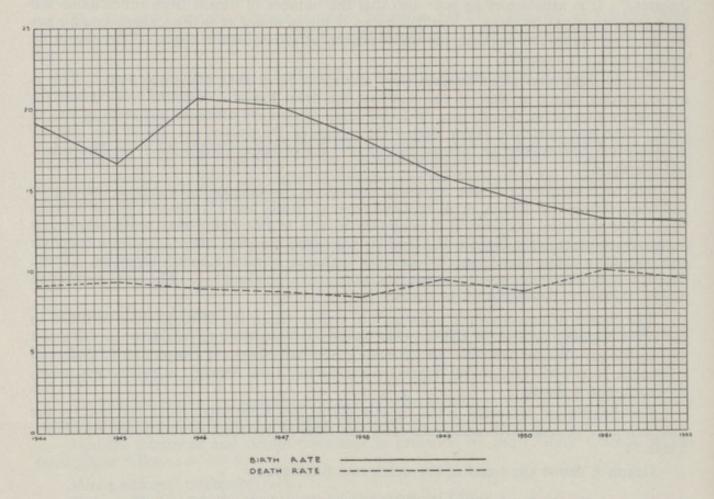
Births and Birth Rate. (Figures for 1951 are given in brackets.)

The total number of registered births in the district (as notified under the Births and Deaths Registration Act) was 136 (150). The total number of live births belonging to the district, whether occurring within or outside the district, was 706 (706). The illegitimate live births were 26 (28). There were 11 stillbirths (18) and these were all legitimate.

A slight fall in the birth rate is recorded from 13.02 in 1951 to 12.94 in 1952. This rate has been falling annually since 1946. The corresponding rate for the whole of England and Wales for 1952 was 22.6.

Graph A shows the trend of the birth rate since 1944.

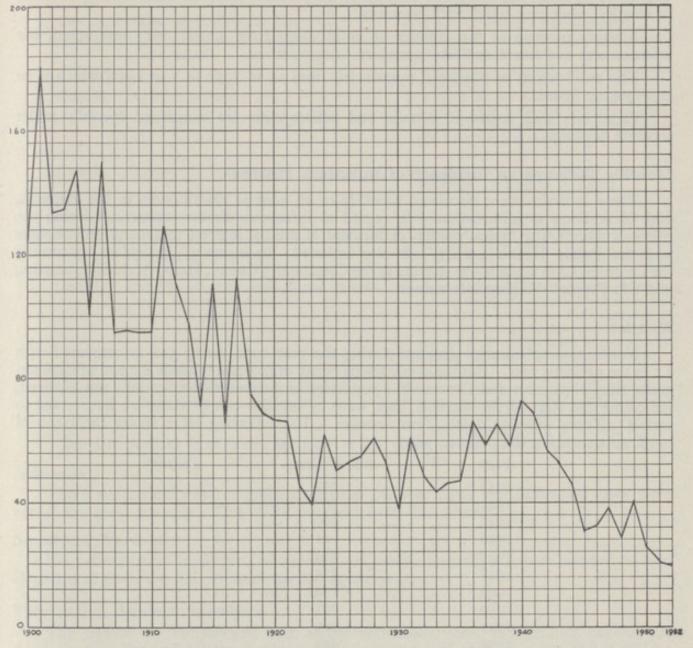
GRAPH A



COMPARISON OF BIRTH AND DEATH RATES FROM 1944 TO 1952

Infant Mortality

The infant mortality rate during 1952 fell to 19.83 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 1952 was 14, 13 of which took place in hospital. The national infant mortality rate for 1952 was 27.6. Table VI gives the classification of causes of infant deaths under the age of one year.



INFANT MORTALITY RATE FROM 1900 TO 1952

Premature Infants

Forty premature infants were born during the year, all of them in hospital; of these 35 survived to the end of one month. The classification of premature infant is given to a child born prematurely, or which weighs less than $5\frac{1}{2}$ lbs. at birth.

Maternal Morbidity

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

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

During 1952 the only new legislation with regard to infectious disease consisted of a set of tuberculosis regulations, entitled the Public Health (Tuberculosis) Regulations, 1952. These were merely for the purpose of bringing the system of notification into line with the structure of the National Health Service Act.

The total number of infectious disease notifications received during the year was lower than in 1951, being 844 compared with 1,835 the previous year, the main reductions being in measles, whooping cough and dysentery.

A slight increase in the number of notifications from scarlet fever was noted, but infection was not severe and few secondary cases occurred.

The notifications of puerperal pyrexia fell from 11 in 1951 to 7 in 1952, which is an encouraging figure.

Particulars with regard to measles and poliomyelitis are mentioned specially under separate headings.

Monthly Bulletins on Incidence of Infectious Disease

These bulletins were circulated monthly to all general practitioners in the Borough, and, in addition to information with regard to infectious diseases occurring during the previous month, any topical matter, or incident of mutual interest to general practitioners and the Public Health Service, was also included; for instance, particulars concerning the Cripples' Club when it was starting at the Community Centre, Home Accidents statistics, and Old People's Welfare information.

Measles

Notifications of measles dropped during the year 1952, being 528 as compared with 1,129 the previous year. But the notifications began to increase towards the end of October, and during November and December, a considerable number of notifications was received, indicating the start of the biennial high wave of measles cases, which we have come to expect. There were no deaths from measles. The following table shows the trend of notifications during the past ten years.

Year	Λ	No. of Case	es		Deaths
1943	 	293			2
1944	 	367			-
1945	 	500			I
1946	 	21			-
1947	 	334			-
1948	 	825			I
1949	 	194		***	-
1950	 	701			-
1951	 	1,129			-
1952	 	528			-

Poliomyelitis

Eight notifications were received of acute anterior poliomyelitis; seven paralytic and one non-paralytic. No deaths occurred from this disease, and particulars of the paralytic cases are as follows:—

1952:		
Case A.	Paralysis of right leg, abdominal muscles and left arm	Adult female. This patient was a visitor to the district having presumably obtained her infection in Leeds. Her condition improved and she returned to Leeds with some paralysis of the left arm remaining.
Case B.	Paralysis of both legs	Adult male. Good recovery, but left hospital with some weakness of the right leg, to continue physio-therapy treatment.
Case C.	Paralysis of left leg	Boy aged one year. Paralysis remaining, transferred to orthopædic hospital for further treatment.

Case D.	Paralysis of both legs	Boy aged 3 years. Improved, but paralysis continuing, has physio-therapy
C F	Clinto	treatment.
Case E.	Slight paralysis right leg	Boy aged 5 years. Fully recovered.
Case F.	Very severe case—paralysis of limbs and trunk	Adult female. Progress slow, but recovery gradually taking place. Admitted to orthopædic hospital for continuing treatment.
	Paralysis of legs	Boy aged 12 years. Left leg improved rapidly, but right leg continued para- lytic. Transferred to orthopædic hos- pital for further treatment.
1951 :		
Case A.	Paralysis of both legs	Boy aged 6 years. Almost complete recovery. Removed to Kent.
1950:		
Case A.	Paralysis of left leg	Adult male. Paralysis of left leg still showing some improvement. Has resumed light work.
Case B.	Paralysis of both legs	Boy now aged 5 years. Continuing weak- ness of one leg.
	Paralysis in arms, legs, dorsal, lumbar and abdominal muscles	Girl now aged 17 years. Some progress during the year, increased movement in hips, knees and feet. Full recovery of use in arms and hands, practically full recovery of use of back muscles, still having treatment by physio-therapy.
1949:		
Case B.	Paralysis anterior tibials, quadriceps, hamstrings and abductors	Girl now aged 12 years. Continues to make progress. Is walking almost normally with slight limp. Attends school regularly and is seldom absent.
Case D.	Paralysis of abductors and glutei of the	Adult female. Recovery practically com-

left leg

plete.

There was no outbreak of influenza during the year 1952, and individual cases were not of any great quantity. One death occurred from this disease.

Smallpox (Variola)

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

Vaccination Against Smallpox

The figures for vaccination, both infant and other, show the greatest decline yet during 1952. For comparison the 1951 table is shown with that for 1952, and it will be seen that primary vaccinations fell by nearly 50%. Out of 706 children born, only 195 received vaccination during their first year of life; this is about one fifth of the children born as compared with about one third in 1951. This can be compared with 1947, the last year before the National Health Service Act came into operation when the number of successful vaccinations in the first year of life was 44% of the number of children born. It seems clear that the population in general no longer fears smallpox as a disease, which is rather surprising in view of the fact that there have been outbreaks in the country, not only of illness caused by smallpox, but fatalities resulting from this disease.

	100	Age Groups						
		Under 1 year	1-2 years	2-4 years	5 - 14 years	15 years and over	TOTAL	
Primary Vaccination Re-vaccination		195	8	15 2	25 20	30 94	273 120	

13

	Age Groups						
	Under 1 year	I-2 years	2-4 years	5-14 years	15 years and over	TOTAL	
Primary Vaccination Re-vaccination	249 I	38	40 I	73 16	74 140	474 159	

Scarlet Fever (Scarlatina)

The number of notifications received during the year was 104 as compared with 87 for the previous year. 19 cases were admitted to hospital for isolation and treatment, and 85 were nursed at home. Secondary cases occurred in two families where the first case was nursed at home.

Diphtheria

No cases of diphtheria were notified to the Department.

The following information supplied by the County Medical Officer shows the number of children immunised against diphtheria during the year.

	Children who nunisation in So Residents) de	Number of Children who were given Secondary or Reinforcing Injection during the year (i.e. having in a previous year received		
Age at Date of Final Injection				a complete full course)
Under 1 1-4 5-14	5-14	Total	particular management	
277	236	27	540	317

In the following table is shown the number of children at 31st December, 1952, who had completed a course of immunisation against diphtheria at any time before that date (i.e. since 1st January, 1938) together with the estimated mid-year population.

Age at 31.12.52:—	Under	I	2	3	4	5-9	10-14	Total under 15
Number immunised	274	404	565	530	442	3,207	2,716	8,138
Estimated Mid-Year Child Population, 1952			3,966		7,3	165	11,331	

A fall in the number of children immunised for the first time was recorded, the number being 540 this year as compared with 605 in 1951. The number of children obtaining reinforcing injections also dropped from 330 to 317. It appears from the second table that there was a fairly good response for immunisation of children under the age of one, but a big drop in the number being immunised at the ages above that. The total percentage of children under 15 who have, at one time or another, received a course of immunisation has not yet appreciably diminished, and it is encouraging that the figure is so satisfactory for the children under one year of age.

Ophthalmia Neonatorum

No cases of ophthalmia neonatorum were notified during the year.

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 470 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 109.

Other Forms of Tuberculosis

The number of new cases notified during the year was 14.

Of the total notifications 7 were received from Medical Practitioners; 55 from the Uxbridge Chest Clinic; 23 from General Hospitals; 2 from Special Hospitals; and 36 from St. Bernard's Hospital.

Deaths from Tuberculosis

Tuberculosis of the respiratory system, 8; other forms, 1.

For details of new cases notified and deaths in 1951, see Appendix, Table XI, and for the occupation 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 rose from 80 in 1951 to 123 in 1952. Thirty-six of these were cases of tuberculosis in St. Bernard's Hospital, and these were not necessarily new cases as many of the St. Bernard's cases had been notified previously in other areas. It had been assumed by the Hospital authorities that duplicate notification to Southall was unnecessary so a complete check of the Hospital records was made during the year. Cases not previously notified in this Department had new notification forms completed.

The number of deaths from tuberculosis was 9, the corresponding number for 1951 being 15. Of the 9 deaths one had not previously been notified as a case of tuberculosis and three notifications were received within three weeks of the death notification. 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. It is hoped that an extension of the use of the Mass X-ray Unit will put an end to such tragic occurrences. A visit of the Mass X-ray Unit is due for Southall during the autumn of 1953.

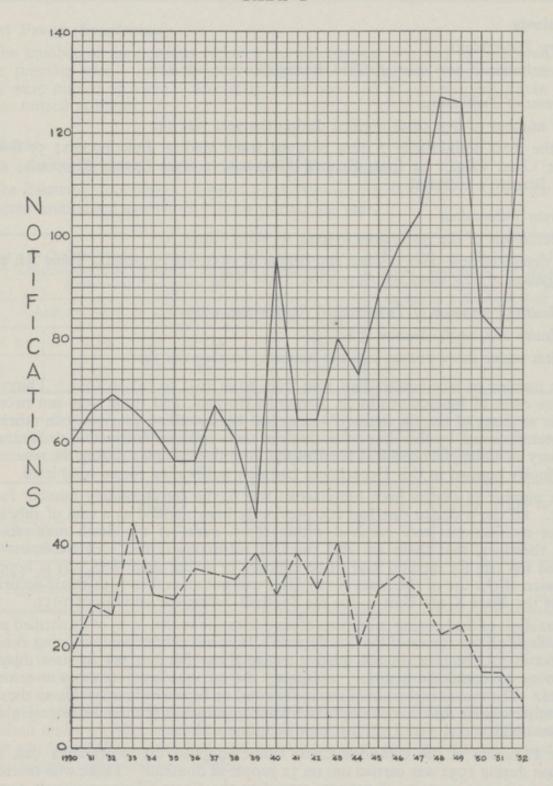
An analysis of the housing conditions of new cases shows that in 75 of 87 notified patients living in Southall (exclusive of the St. Bernard's Hospital notifications) housing conditions were good in 71 instances, in the other 4 housing was fair but not in such dilapidated condition as to constitute statutory nuisance. In no case was statutory overcrowding confirmed. The remaining 12 could not be followed up because of removal from the district or some other similar reason. Multiple notifications occurred in three instances, in each of which two notifications were received from the same address.

The Physician of the Uxbridge Chest Clinic supplied the information that B.C.G. vaccination during 1952 was carried out on 32 people of Southall. Those who received the treatment were case contacts of patients attending the Chest Clinic previously tested for their reaction, found to be sensitive to tuberculosis germs, and, therefore, more readily liable to be infected, and the figure includes 17 newly-born infants.

A visit to Taylor Woodrow's factory by the Mass X-ray Unit took place on the 13th January. Three hundred and forty-one persons were X-rayed, 266 males and 75 females, and all of the employees were found to be tuberculosis negative.

Graph C is a pictorial representation of the statistics of tuberculosis in the Borough from 1930 to 1952 and shows a falling death rate from this disease since 1949.

GRAPH C



Tuberculosis (All Forms)—Notifications and Deaths from 1930 to 1952

Cancer

It will be seen by the table of causes of death (page 30) that in 1952 95 cases (46 males and 49 females) died from cancer. (See Appendix, Tables VII and VIII.)

Below is set out in tabular form a classification of the cancer deaths according to the site of the primary growth and in ages.

SITE		Here	AGE GROUPS												
		MALE						FEMALE							
		20-30	30-40	40-50	50-60	60-70	70-80	80+	20-30	30-40	40-50	50-60	60-70	70-80	80+
Breast		_	- :	-	_	_	_	_	-	_	3	5	2	4	2
Lung	***	-	-	I	6	7	-	-	-	-	-	I	I	-	I
Stomach		-	-	2	4	2	2	-	-	-	-	I	2	3	-
Uterus		-	-	-	-	-		-	-	-	-	-	I	2	I
Intestine		-	-	I	-	2	2	2	-	-	I	-	2	I	I
Bladder		-	-	-	I	2	-	-	-	-	-	-	-	-	-
Prostate		-	-	-	-	-	I	2	-	-	-	-	-	-	-
Other		-	-	I	2	2	3	I	I	-	I	3	4	6	-

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 disinfector at Salisbury Road Depot.

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

Rooms		 	17	Eiderdowns	I
Beds		 	8	Pyjamas (pairs)	2
Blankets		 	26	Plimsolls (routine disin-	
Mattress	es	 	5	fection during holiday	
Sheets		 	14	for Featherstone School)	
Books	***	 	56	(pairs)	50
Pillows		 	3	Miscellaneous articles	IO

Smallpox Disinfection. It was considered desirable that, in the event of smallpox occurring within the district and disinfection being required on a considerable scale, arrangements should be made whereby this could be carried out. The North-West Metropolitan Regional Hospital Board was approached and an agreement was made whereby in such an event the staff of St. John's Hospital, Uxbridge, would carry out this work.

Provision of Antitoxin and Vaccine Lymph

The Council provides diphtheria antitoxin and tetanus antitoxin free to local practitioners in the district. These antitoxins are obtainable from the Public 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, they are obtainable at very short notice.

Vermin and Scabies

The number of people being infested with these conditions has diminished annually since the war, and the Public Health Committee decided that it was no longer economic to maintain a full-time cleansing station for the purpose of treating these patients. Negotiations were commenced with neighbouring Boroughs which continued to maintain such stations and an arrangement was come to whereby Hammersmith Borough Council would treat any patients sent from Southall Public Health Department, at an agreed cost. The cleansing station at Crosby House was closed down at the end of June, 1952. Table XIII shows details of the work carried out during the first six months of the year.

General practitioners and all other people concerned were notified of the new arrangements. Since the cessation of the facilities at Crosby House 6 patients have been referred to Hammersmith for treatment. It would seem from these figures that the majority of people infested must be obtaining treatment from their private practitioners, since it is very unlikely that all infestation has ceased following the cleansing station closure. However, if the information (Table XIV) given by the County Medical Officer concerning vermin infestation found at school head inspection sessions is studied and compared with figures from previous years, there would seem to be a considerable and continuing decline in the spread of head lice.

OLD PEOPLE'S WELFARE

The difficulties and requirements of 35 cases of old people living in difficult circumstances were investigated during 1952, and the action taken is recorded in the following list:—

Removed to hospital						12
Removed to hospital (under National	Assist	ance A	ct powe	ers)		I
Removed to mental institution						2
Removed to old people's home						4
Removed to nursing home (private)						I
Died at home						5
Remained at home						IO
(a) Home Help provided					I	
(b) Awaiting admission to old pe	eople's	home			I	
(c) Blind pension obtained	***				I	
(d) Period of convalescence obta	ined				I	
(e) Awaiting housing in Ealing					I	
(f) Provision of comforts					I	
(g) Refused to enter home					I	
(h) Awaiting housing					2	
(i) Arrangements made for visit	by Ho	using D	epartm	ent	I	

This list records the position at the end of 1952, but throughout the year these individual cases had required provision of Home Help, District Nursing and/or other form of assistance. The Old People's Welfare Committee, a voluntary association supported by the Borough Council's Public Health Committee, carried out a good deal of visiting of old people during the year and helped in obtaining walking sticks, fire guards, etc. An interesting figure connected with Old People's Welfare obtained from the Area Home Help Organiser is that 365 Southall people were given home help during the year and of these a considerable proportion consisted of old people.

At Christmas there was again a good response from voluntary associations in the provision of Christmas parcels, or special comforts, or vouchers with which to buy Christmas fare.

The Old People's Welfare Committee decided that it would make it easier for the members to assess the needs of the old people if a census could be made and a register prepared containing the names of all the old people in the Borough, and listing their particular problems. The help of the Round Table members was obtained for the organisation of this, and a scheme prepared to be carried out during 1953.

Chiropody

A new activity started by the Old People's Welfare Committee during the year was the provision of a chiropody service for old people. The services of a number of local chiropodists were obtained and a rota was prepared of these practitioners. The names of old people who wished to avail themselves of the service were obtained, visits paid by members of the Old People's Welfare Committee to their homes, and the needs and circumstances of the patients were assessed. Those who could paid a small fee of 1s. od. per case, but in needy cases the fee was paid by the Old People's Welfare Committee.

Holidays

The Old People's Welfare Committee arranged also a holiday scheme whereby old people could get to a seaside resort during the months of May and September, at reduced rates.

Meals on Wheels Service

This service, a very valuable one, continued throughout the year assisted by a grant from the Borough Council. Meals are provided once a week to old people at a cost of 9d. per meal to the recipient. Those in necessitous circumstances were able to have their meals free of charge. During the year 1,832 meals were supplied to 51 individual persons.

National Assistance Act, 1948, Section 47 National Assistance (Amendment) Act, 1951

One case was dealt with under these powers, a woman, aged 76, living alone in conditions of dirt and neglect and requiring medical treatment. She was removed to West Middlesex Hospital and benefited greatly by this action.

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; Miss F. M. Gibbs, 41, Waxlow Crescent, Divisional Superintendent, Nursing Division; and Mr. H. S. King, 44, Northcote Avenue, Southall, Divisional Superintendent, Ambulance Division.

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.

Hospital duty during epidemics.

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

Welfare visits.

Hospital Library facilities.

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 aged and sick.

HEALTH PROPAGANDA

Education of the public in matters of health continued throughout the year by means of poster publicity, the distribution of leaflets, talks to householders, to canteen workers, to food handlers in shops and factories, and to meetings of associations.

The need for education is considerable, particularly for hygiene in the proper handling of food to be consumed by the public. Licking of fingers by shop assistants dealing with sticky articles, the handling of food on display by customers, the leaving of food which will not be subsequently cooked open to the air for long periods and thus having it subjected to risk of fly contamination, the continuous use of dirty working clothes or overalls, touching food with long dirty finger nails, coughing over food by shop assistants and customers, blowing into paper bags, are all practices which still, unfortunately, appear to be fairly widespread and requiring education by word of mouth to obtain discontinuance of them. There is no doubt that the individual talk by a member of the Health Department to a food handler, or the small discussion group where everyone can raise questions and have them answered are the best methods for teaching hygiene, as there is an appreciable amount of resistance on the part of the public to poster and leaflet publicity, as also to publicity in newspapers and cinema films. There has been a surfeit of advertisement publicity which results in members of the public literally being unable to see advertisements unless they are of a most startling and unusual nature.

An alphabet of hygiene is being published in the Council's Civic News Sheet, each letter linked to a particular item of Public Health work and an explanatory paragraph attached to it couched in non-technical language. The circulation of this Civic News Sheet is considerable. About 2,000 copies are printed. It is issued free in the Town Hall, Information Office, Libraries, etc., to the general public and to organisations who wish to have it. Some of the organisations may have two to three hundred members so the potential reading public for this Sheet is very large.

Special subjects for poster publicity during the year were influenza, measles, nutrition, fresh air and exercise, food poisoning and venereal diseases.

ESTABLISHMENTS FOR MASSAGE AND SPECIAL TREATMENT

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

Details are as follows:-

Purpose		No.	of Licences
Chiropody only	 		4
Massage, Chiropody and Electrical Treatment	 		6

MEDICAL EXAMINATION OF BOROUGH COUNCIL EMPLOYEES

During 1952, a total of 99 medical examinations were carried out on members of the Borough Council staff. Forty-seven examinations were carried out with regard to suitability for employment on the Council's permanent staff, and 44 for entry into the Sickness Pay Scheme.

Eight employees reaching completion of their Sickness Pay entitlement, received special medical examinations 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.

Reports on sampling carried out by the Metropolitan Water Board are issued from time to time. All inhabited houses are supplied from public water mains and there are no standpipes in use on mains.

Sanitary Inspections of the District

The total number of inspections of premises made during the year by the Sanitary Inspectors was 11,299, an increase of 526 accounted for by extended activities, particularly in connection with the hygiene of food, rodent control, and ice cream sampling.

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

Complaints of housing defects and disrepair received the same immediate attention as in previous years.

Completion of work was at a quicker rate, tending to reduce the number of inspections necessary.

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 unchecked decline in standard.

School Sanitation

Following the initial full scale inspection of sanitary facilities in Southall schools, regular visits have been paid to observe progress in major adaptations required and to supervise the maintenance of these premises. Major items of defect have been remedied and this work has assumed the form of routine inspections.

Eradication of Bed Bugs

Statistics for the year:-

(a)	Number of Council houses (1) Found to be infested (2) Disinfested during the year	 	 3 3	
(b)	Number of other houses (1) Found to be infested (2) Disinfested during the year	 	II	Total 14

Canal Boats

Visits were paid to the canal, and 5 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. Five 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 Promises	Number on	Number of				
Factory Premises	Number on Register	Inspections	Written Notices	Occupiers Prosecuted		
Non-Mechanical Mechanical	15 162	35 278	3 18	Nil Nil		
Totals	177	313	21	Nil		

of room pulsary, the designer	N	lumber of cas	ses in which	defects were	e found
Particulars	SOUR MA		Refe	erred	Number of cases in which
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	Prosecutions were instituted
Want of cleanliness	I	I	_		_
Overcrowding	_	_	_	_	_
Unreasonable temperature	_	_	-	_	-
Inadequate ventilation	_	-	_	-	_
Ineffective drainage of floors Sanitary Conveniences—	-	-	_	_	-
(a) Insufficient	2	I	-	I	_
(b) Unsuitable or defective	32	29	-	-	-
(c) Not separate for sexes Other offences against the Act (not including offences relating to out-	-	-	-	_	_
work)	_	_	-	-	_
Totals	35	31	-	I	-

OUTWORKERS

		SECTION 110		SECTION III			
Nature of Work	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 Prosecu- tions for failure to supply Lists	No. of Instances of Work in Unwhole- some Premises	Notices served	Prosecu- tions	
Wearing Apparel—Making Toys—Making	12 I		d 2 = 4			=	

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. Attention has been given to these to check any extension of work.

Petroleum and Carbide

During the year licences were in force in respect of 60 installations for petroleum and 4 for 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

Demolition Orders were made in respect of 8 houses and the question of rehousing of the tenants of these properties was referred to the Housing Committee to be included in the housing programme. The number of cases of overcrowded families known to the Health Department was reduced considerably during the year, principally by tenants finding their own housing accommodation outside of the Borough Council's facilities.

Particulars of the numbers and types of dwellings erected in Southall during 1952 are as follows, and also the number of houses, including those built in 1952, built since the end of the War. In addition to these, 22 four-bedroomed type houses have been converted into 44 flats.

	DURING TI	HE YEAR 1952		O OF THE WAR NG 1952)
	Within the Borough	Outside the Borough	Within the Borough	Outside the Borough
Old People's Dwellings	_	_	27	_
Houses	-	_	100	40
Flats	18	12	113	40 36
Prefabs	_	_	299	_

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.

Pet Animals Act, 1951

This Act came into operation on the 1st April, 1952. Prior to the licensing of the establishments a schedule of conditions prepared by the Royal Society for the Prevention of Cruelty to Animals was adopted by the Council for the traders to read and agree, prior to obtaining their licences. Seven establishments are licensed and have on routine inspection been found to be satisfactory. Protective barriers to keep the public out of reach of animals exposed for sale have been fitted where necessary.

HYGIENE OF FOOD

Food Poisoning

During 1952 there have been no outbreaks of food poisoning. Twenty-seven cases were notified and followed-up; the organisms identified in two cases were salmonella typhi murium, and in one case shigella flexner. No secondary cases occurred.

Sampling of Canteen Meals

The procedure adopted during 1951 for the retention for 24 hours of samples of all food served in the canteens of the local schools and in one large factory was continued throughout the year. As there was no outbreak of food poisoning the examination of these specimens was not required at any time.

Personal Hygiene

The free washing facilities in the public conveniences, which were brought into operation in September, 1950, continued to be available throughout 1952. During that period, 10,700 paper towels were issued free in addition to 3,161 linen towels, which are provided at a cost of 2d. per person. The total issue of towels is substantially the same as in 1951, but the use of paper towels is lower by 1,884, whereas the linen towel issue has increased from 1,645 in 1951.

Examination of Food Handlers

On receipt of certain information concerning a sample of a meat processed by a local factory, it was decided to take a survey of all the employees concerned. 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 the management gave facilities for examination to be carried out at the factory welfare centre and using the welfare staff. Throat swabs, nasal swabs, urine specimens, fæces specimens and nail scrapings were taken from management and employees. The results of the bacteriological examinations were most satisfactory, no serious infection being found in any of the persons tested. A certain proportion were, as expected, found to be harbouring cold germs in the nose or throat or some contamination of the finger nails, and these have all had confidential letters urging the importance of personal hygiene, and a recommendation made that when any members of the food handling staff are showing symptoms of catarrh they should be transferred to work which does not involve coming into direct contact with food in its final stages of preparation. No carriers of infectious disease were found, and the investigations gave the opportunity for a good deal of propaganda on the rules of personal hygiene.

Milk

Licences

The following licences under the Milk (Special Designation) (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	Milk	 		 12
for the sale of Pasteurised Milk		 		 22
for the sale of Sterilised Milk		 	***	 20
Supplementary Licences	***	 		 21
				-
			Total	 75

Food Sampling

The bacteriological analyses of 335 food samples taken during the year were carried out by the Public Health Laboratory Service.

One hundred and fourteen of these specimens were ice-cream samples, covering 22 makes of ice-cream, and following bacteriological analyses the ice-creams were graded as follows:—

Grade I	 	 	89
Grade II	 	 	II
Grade III	 	 	12
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.

Meat Inspections

Inspections are made of the carcases of slaughtered animals at St. Bernard's Hospital 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

Catering Establishments and Food Shops

The aggregate inspections of these premises during the year was 1,587.

Particular attention was given to exposed food stuffs, food handling, and the provision of hot water. It is gratifying to be able to report that excellent co-operation was obtained in the covering of foodstuffs and no formal action was necessary to secure the provision of hot water. This work must be regarded, however, as of constant importance in the routine of the Sanitary Inspectors, particularly to secure continued compliance with Food Byelaws.

	Total		So	UND		Unsound				
	Inspected (lbs.)	Total (lbs.)	Stock (lbs.)	Pro- duction (lbs.)	Con- sumption (lbs.)	Total (lbs.)	Animal Feeding (lbs.)	By- Products (lbs.)	Destruc- tion (lbs.)	
Canned	164,898	737	547	-	190	164,161	120,171	-	43,990	
Raw	43,481	4,295	548	_	3,747	39,186	35,035	_	4,151	
Totals	208,379	5,032	1,095	_	3,937	203,347	155,206	_	48,141	

RODENT CONTROL

There was no change in the Council's policy during the year of carrying out work free of cost at domestic premises; offering technical services to business and industrial premises where a commercial operator is retained, or carrying out the work at economic charge where it was within the scope of the Council's staff.

At one large factory, dissatisfaction was recorded on inspection with methods of a commercial operator and prescribed technique was applied at an accepted charge with good effect.

Block treatment was carried out on a large factory estate. After explanation of plans and technique at a meeting of directorates concerned, with the commercial operator available at, but not in, the meeting, to agree methods, and measures, the work proceeded under the supervision of the Council's staff to a satisfactory conclusion.

NOISE NUISANCE

In an industrial neighbourhood such as Southall there are bound to be occasional complaints of noise nuisance arising from the operations of factories in close proximity to residential property. It is not always possible to obtain satisfactory abatement of such nuisance, as there is no legal remedy if the management of the factories concerned are taking all practicable means to mitigate noise.

During 1952 complaints of noise nuisance were received concerning five firms, in one case no nuisance was established; in one there was definite nuisance from noise but the house concerned was very close to the factory and the management was taking all practicable means to reduce the noise. In two cases noise was remedied by alteration to plant and increased sound-proofing, and in one instance the nuisance will be remedied, but at the end of 1952 material for alterations to structure was still being awaited.

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, measurements of solids deposited from the air was 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.

At the Recreation Ground station there is an overall decrease in the amount of atmospheric pollution recorded by the lead peroxide method for the first seven months of 1952, as compared with the corresponding figures for 1951. The abnormal weather conditions resulting in the production of the most dense fog recorded for very many years, produced high figures for sulphur dioxide pollution in November and December at both stations.

Graph E, which demonstrates the results obtained from the deposit gauge, shows a general improvement throughout the year 1952, the highest point reached on the graph during 1951 being 19·3 as compared with the highest point in the same month of the year, i.e. June, of 17·3 in 1952; while in the months of April and July record low readings were obtained, i.e. 7·1 in April and 5·7 in July, the lowest point reached during 1951 being 7·9. Weather conditions make a considerable difference to the readings obtained by this method but the fact that there is a consistent reduction on the whole year except for the period of abnormal fog seems to suggest an improvement in the general atmospheric conditions of the Borough. The general improvement noted from both types of pollution continues on an improvement noted in last year's Annual Report on the figures for 1950.

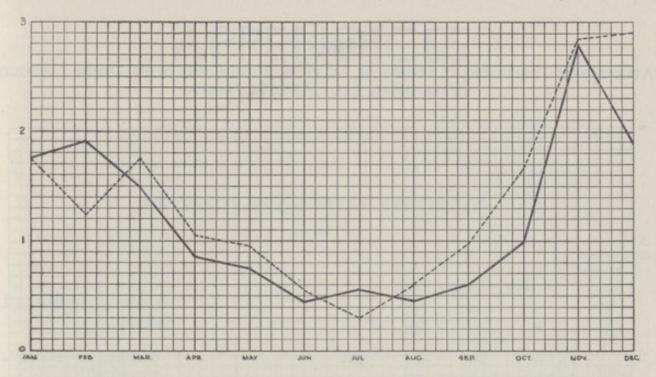
Graph F is a representation of the comparative figures for pollution with oxides of sulphur for Southall, Central London, a northern industrial town and Godalming, Surrey, which constantly returns the best figures throughout the year. From this graph it can be seen that, even at the time of the great fog, pollution in Southall due to oxides of sulphur was not so intense as in Central London, or even in the northern industrial area, which presumably was not so heavily attacked by fog at that time. The marked seasonal variations seen in this graph in the highly populated districts as compared with Godalming emphasise the need for the reduction of pollution from domestic sources.

Factories in the west and south of the Borough were kept under observation at various times during the year to observe the emission of smoke, chemical products or products of manufacture, from their chimneys. Although on occasion black smoke was observed from two factories in particular, this never lasted for the two minutes which would render the firms liable to prosecution. On approaches being made to the firms concerned in all smoke emissions, co-operation was obtained and new methods of stoking or new equipment for better consumption of smoke were adopted. Assistance was obtained from the officers of the Ministry of Fuel and Power on two occasions. Complaints concerning the pollution by grit and dust caused by the large-scale stocking of fuel by one of the nationalised industries were followed-up, and, as a result of negotiations, other arrangements were made to limit the nuisance being caused in this way.

ATMOSPHERIC POLLUTION ESTIMATION

1952	Peroxide Milligrams	method. per day per centimetres	Deposit Gauge								
			HORTUS CEMETERY								
Month of	Jubilee	Recreation	Rainfall	Tons per	square mile po	er month					
year	Gardens	Ground	mm.	Insoluble	Soluble	Total					
January	1.75	1.76	45	4.26	3.98	8.24					
February	1.91	1.27	19	8.59	3.12	11.74					
March	1.49	1.76	56	11.45	4.96	16.41					
April	0.87	1.07	42	2.04	5.08	7.13					
May	0.73	0.97	29	6.46	3.44	9.90					
June	0.46	0.58	41	11.67	5.66	17.33					
July	0.57	0.31	10	3.20	2.45	5.65					
August	0.46	0.60	62	10.08	6.07	16.15					
September	0.59	0.99	68	9.30	4.87	14.17					
October	0.99	1.66	58 81	6.64	5.06	11.70					
November	2.80	2.83		6.82	6.02	12.84					
December	1.88	5.91	67	6.94	4.94	11.88					

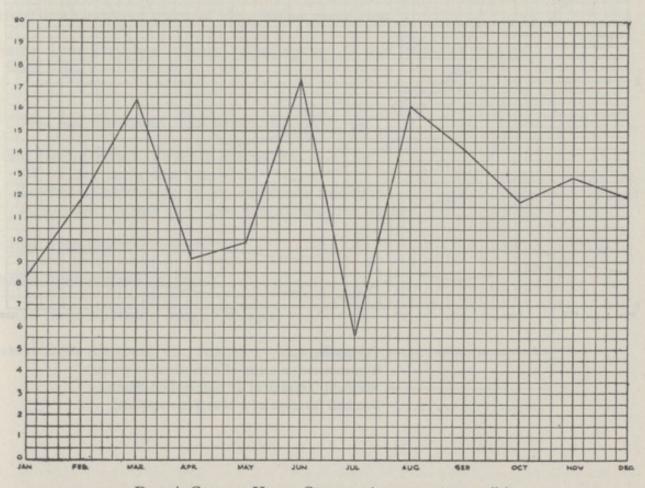
GRAPH D
ATMOSPHERIC POLLUTION ESTIMATION (LEAD PEROXIDE METHOD)



Lead Peroxide Gauge at Jubilee Gardens
[Atmospheric Sulphur Dioxide SO₃(Mgs/Day/100 Cms²)]

----- Lead Peroxide Gauge at Recreation Ground
[Atmospheric Sulphur Dioxide SO₃(Mgs/Day/100 Cms²)]

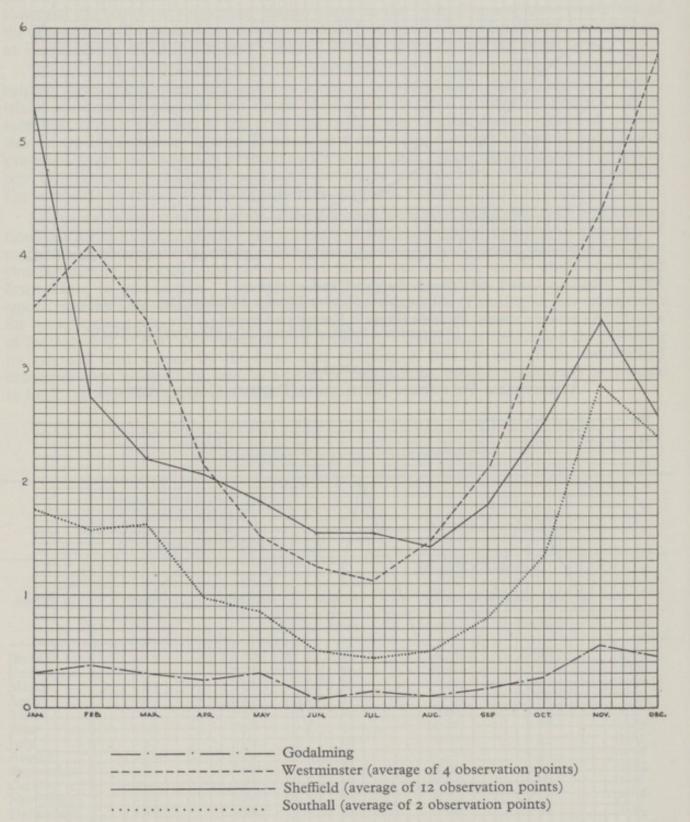
GRAPH E
ATMOSPHERIC POLLUTION ESTIMATION (DEPOSIT GAUGE METHOD)



Deposit Gauge at Hortus Cemetery (tons per square mile)

GRAPH F

ATMOSPHERIC POLLUTION BY OXIDES OF SULPHUR; COMPARISON WITH OTHER DISTRICTS (YEAR 1952); LEAD PEROXIDE METHOD



APPENDICES

EXTRACTS FROM VITAL STATISTICS

TABLE I.

Live Births—	Legitimate Illegitimate					Total 680 26	Male 343 12	Female 337 14		mparative gures for 1951 678 28
Stillbirths—Le	egitimate egitimate					6	5		}	18
Deaths						517	257	260		551
Birth rate (live	and stillbirt	hs) per 1	,000 of	the e	stimated	l popula	ation	12.94		13.02
Stillbirth rate	per 1,000 to	otal (live	and s	still) l	oirths			15.34		24.86
Crude death	rate per 1,00	o of the	e civili	an po	pulation	1		9.33		9.91
Deaths from Short List)		Causes (Headin	g 30	of the	Regis	trar-Ge	neral's		
	Pregnancy,	Childbir	th, Ab		Deaths —		er 1,000 nd still)			_
Legitimat	infants und is per 1,000 e infants per te infants per	live bir	ths legitim	ate li	ve birth			19·83 17·65 76 · 92		21·25 22·12
Deaths from	cancer (all a	ges)						95		94
Deaths from	measles (all	ages)						-		-
Deaths from	whooping co	ough (all	ages)					-		-
Deaths from	diarrhœa, et	c. (unde	r 2 ye	ars of	age)			-		I

Causes of Deaths, 1952

TABLE II

		Male	Female	Total 1952	Tota 1951
1. Tuberculosis, respiratory		4	4	8	15
2. Tuberculosis, other		I	_	I	_
3. Syphilitic disease		I	I	2	6
4. Diphtheria		_	-	_	-
5. Whooping cough		_	-	-	_
6. Meningococcal infections		-	_	_	-
7. Acute poliomyelitis		_	_	_	_
8. Measles		_	-	_	_
9. Other infective and parasitic diseases		_	3	3	_
o/15. Cancer (all forms)		46	49	95	94
6. Diabetes		I	2	3	3
7. Vascular lesions of nervous system		29	42	71	49
8. Coronary disease, angina		42	26	68	63
9./20. Heart disease		28	52	80	91
1. Other circulatory disease		21	15	36	23
2. Influenza		I	_	I	7
3. Pneumonia		19	16	35	36
4. Bronchitis		22	II	33	51
5. Other diseases of respiratory system		2	3	5	3
6. Ulcer of stomach and duodenum		2	4	6	13
7. Gastritis, enteritis and diarrhœa		I		I	4
8. Nephritis and nephrosis		2	_	2	5
9. Hyperplasia of prostate		4	-	4	3
o. Pregnancy, childbirth, abortion			_		_
1. Congenital malformations, birth injuri	ies,				
etc			5	5	II
2. Other defined and ill-defined diseases		19	22	41	54
3. Motor vehicle accidents		5	I	6	7
4. All other accidents		7	4	II	II
5. Suicide			NO TO DEE	PARTIES.	2
6. Homicide and operations of war		_	_		
TOTAL DEATHS		257	260	517	551

Deaths in Wards

TABLE III

		,	Ward			79	Male	Female	Total
Waxlow Manor					 		26	27	53
Northcote				***	 		34	41	53 75 97 77
Hambrough					 		34 50	41 47 42	97
Dormers Wells	***	***	***		 		35	42	77
Glebe					 		59	54	113
Norwood Green					 		53	49	102
					Total		257	260	517

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 1952.

(Provisional Figures based on Quarterly Returns)

		England and Wales	Boroughs and Great Towns including London	Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Adminis- trative County	Southall
			Rates pe	r 1,000 Home	Population	
BIRTHS:						
Live		15.3	16.9	15.5	17.6	12.74
C+111		5 0.35	5 0.43	∫ 0.36	5 0.34	5 0.20
Still		(22.6(a)	(24·6(a)	(23·0(a)	(19·2(a)	(15·34(a)
DEATHS:						
All causes		11.3	12· I	11.5	12.6	9.33
Typhoid and paratyphoid		0.00	0.00	0.00	_	_
Whooping cough		0.00	0.00	0.00	0.00	_
Diphtheria		0.00	0.00	0.00	0.00	_
Tuberculosis		0.24	0.28	0.22	0.31	0.19
Influenza		0.04	0.04	0.04	0.05	0.02
Smallpox		0.00	_	_	_	_
Acute poliomyelitis (includ	ing					
polioencephalitis)		0.01	0.01	0.00	0.01	_
Pneumonia		0.47	0.52	0.43	0.58	0.63
Typhoid Paratyphoid fever Meningococcal infection Scarlet fever Whooping cough Diphtheria Erysipelas Smallpox Measles Pneumonia Acute poliomyelitis (includ polioencephalitis): Paralytic Non-paralytic Food poisoning Puerperal Pyrexia	ing	0.00 0.02 0.03 1.53 2.61 0.01 0.14 0.00 8.86 0.72 0.06 0.03 0.13 17.87(a)	0.00 0.02 0.03 1.75 2.74 0.01 0.15 0.00 10.11 0.80	0.00 0.03 0.03 1.58 2.57 0.03 0.12 0.00 8.49 0.62	0·00 0·01 0·02 1·56 1·66 0·01 0·14 — 9·23 0·57	0·02 0·02 1·88 1·06 — 0·27 — 9·53 1·10 0·13 0·02 0·49 9·76(a)
		27 37(2)		per 1,000 Live		7,-(-
			Rates	per 1,000 Live	Dittis	
DEATHS:						
All causes under 1 year of Enteritis and diarrhœa u			31. 2	25.8	23.8	19.83
6			1.3	0.5	0.7	200

⁽a) Per 1,000 Total (Live and Still) births.

⁽b) 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	 I	4	I	I	2	I	10
February	 I	I	2	3	5	I	13
March	 5	2	I	I	2	I	12
April	 _	2	I	I	I	6	II
May	 _	5	4	2	2	-	13
June	 4	I	_	_	4	I	IO
July	 I	3	I	2	3	3	13
August	 _	I	I	I	_	4	7
September	 4	2	3	4	3	3	19
October	 2	I	_	3	I	2	9
November	 I	_	5	I	2	I	IO
December		2	2	2	3	-	9
Total	 19	24	21	21	28	23	136

TABLE VI

CAUSES OF DEATH UNDER ONE YEAR OF AGE.

Certified Causes of Death		Under I week	I-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	I-3 months	3-6 months	6-9 months	9-12 months	Total deaths
Asphyxia (Atelectasis) Bronchitis, pneumonia, etc		I	-	-	-	I	-	-	-	-	I
Congenital malformations		I	I	_	_	1 2	- I	I	I	_	5
Gastro-enteritis, diarrhœa, etc.		-	-	-	-	-	-	-	-	-	-
Prematurity		5	-	-	-	5	-	-	-	-	5
T	otal	8	I	-	-	9	I	2	2	-	14

Live Births.	Legitimate	 680	Infant Deaths.	Legitimate	 12
	Illegitimate	 26		Illegitimate	 2

TABLE VII

DEATHS FROM CANCER

Yes	ar		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	0.21
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
1952			46	49	95	55,430	1.71

TABLE VIII

AGE DISTRIBUTION OF DEATHS FROM CANCER

	Age												
	0-15	15-30	30-40	40-50	50-60	60-70	70-80	80+	Total				
Male Female	 -	_ 	=	5 5	13	15 12	8 16	5 5	46 49				
Total	 _	I	-	10	23	27	24	10	95				

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)

						A	ges							cases	60
Diseases		Under 1 year	I to 2	2 to 3	3 to 4	4 to 5	5 to ro	TO to IS	15 to 25	25 to 35	35 to 45	45 to 65	65 and over	Total cas notified	Deaths
Dysentery Erysipelas		2	2	2	-	5	9	I	I	4	2	3	-	31	-
Food Poisoning		I	2	_	2	_	7	I	3	2	4	3	3 2	15 27	_
Malaria		-	-	-	-	-	-	-	2	-	_	-	-	. 2	-
Measles		IO	36	54	65	76	271	8	3	3	I	I	-	528	-
Meningococcal Infection	on	I	-	-	-	-	-	-	-	-	-	-	-	I	-
Paratyphoid		-	-	-	-	-	-	-	-	I	-	-		I	-
Pneumonia		-	-	2	-	2	7	I	4	4	7	21	13	61	35
Poliomyelitis	***	-	I	-	I	-	2	I	I	-	I	I	-	8	-
Puerperal Pyrexia		-	-	-	-	-	-	-	5	I	I	-	-	7	-
Scarlet Fever		-	-	4	15	IO	63	9	2	I	-	-	-	104	-
Whooping Cough		4	3	8	5	10	27	2	2	-	-	-	-	59	-
Total		18	44	70	88	103	387	24	22	17	17	36	18	844	35

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	31	2	I	2	I	7	18	-
Erysipelas	15	2	I	2	4	4	2	-
Food Poisoning	27	I		4	12	5	5	-
Malaria	2	-	-	-	-	-	2	-
Measles	528	25	58	150	IOI	118	76	-
Meningococcal Infection	I	-	-	-	I	-	-	-
Paratyphoid	I	-	-	-	- 1	I	-	-
Pneumonia Poliomyelitis	61	7	9	7	10	14	14	35
Paralytic	7	-	I	-	3	I.	2	-
Non-Paralytic	I	I	-	-	4	-	-	-
Puerperal Pyrexia	7	I	3	-	-	I	2	-
Scarlet Fever	104	19	16	3	32	18	16	-
Tuberculosis	123	14	II	14	49	25	10	9
Whooping Cough	59	2	12	6	26	4	9	-
Total	967	74	II2	188	239	198	156	44

TABLE XI
TUBERCULOSIS NOTIFICATIONS—AGES AND CLASSIFICATIONS

				Pulm	New onary		ulmonary	DEATHS Pulmonary Non-Pulmonar			
Age Periods				Male	Female	Male	Female	Male	Female	Male	Female
0-I				_	_	_	_	-	_	-	-
1-5		***		4	I	I	-	-	-	-	-
5-10				-	-	I	-	-	-	-	-
10-15				I	I	-	2	-	-	-	-
15-25		***		6	16	I	I	I	2	-	-
25-35				II	9	I	2	-	I.	-	-
35-45	***	***		14	14	-	2	-	-	-	-
15-65				22	7	I	I	3	I	-	-
55+				-	3	I	-	-	-	I	-
		Total		58	51	6	8	4	4	I	-

TABLE XII
The occupations of the new cases are as follows:—

		0				9019	Pulm	ionary	Non-Pr	ulmonary
		Occupa	tion				Male	Female	Male	Female
Assembler							_	I	-	_
Baker							I	-	-	-
Bus Conductress							-	I	-	-
Cabinet Maker							I	-	-	-
Cashier							-	I	_	-
Civil Servant							2	_	-	_
Clerk							2	I	-	-
Coach Driver							I	_	_	_
Domestic							_	I	_	T
actory Hand							_	I	-	_
actory Manager	***					300	I	2	_	_
itter				***			ī	_	_	_
General Dealer	***	***	***	***			Î		_	_
Y . 1 . 1	***	***	***		***	***	1	I		
Water State of the Control of the Co		***		***	***	***	I	_		
		***	***	***		***			Ţ	
House Painter		***	***	***			2	-7	I	_
Housewife	***	***	***	***	***	***	7	14	-	3
abourer	***	****	***	***		***	4	-	-	-
Lorry Driver		***		***			I	100		
		***	***	***		***	-	3	-	I
Mental Patient			***	***			21	15	-	-
Nurse			***			***	-	I	-	の日本山
old Age Pensioner		***	***		***	***	-	-	I	-
lasterer							I	-	-	
olice Constable			***				I	-	-	-
re-schoolchild							3	I	I	-
roduction Control	ller						I	-	-	-
ublican							-	I	-	-
Representative							I	-	-	-
schoolchild				***			2	2	I	2
Shop Assistant							_	I	-	I
tock Controller							_	_	I	-
torekeeper							2		_	
Caral Caral Caral		***					I	_	_	_
Tymint			***	***			_	1	_	
Jnknown							7	4 2	I	_
Tare Section 1	100			145/15/1	Total		58	51	6	8

TABLE XIII

VERMIN AND SCABIES CLINIC ATTENDANCES

January to June, 1952

					First Visit	Re- attendances	Total
Scabies			 	 	21	62	83 873 78 306
Other skin conditions			 	 	75	798	873
Verminous heads			 	 ***	49	. 29	78
Baths (225 treatment baths	, 81 0	rdinary)	 	 	-	_	306
Total attendances for all	purpo	ses	 	 	_	-	1,115
Total attendances for trea	tment		 	 	_	_	1,034

TABLE XIV

EXAMINATIONS FOR VERMINOUS CONDITIONS AND CHILDREN FOUND TO BE VERMINOUS ATTENDING MAINTAINED SCHOOLS IN SOUTHALL DURING 1952.

School	Total Number of Examina- tions	Total Number of individual pupils found to be infested for the first time during the year	of instances of infestation among	Number of individual pupils in respect of whom cleansing notices were issued (Sec. 54 (2) Educ. Act, 1944)	orders were is- sued (Sec. 54
Beaconsfield Road, J.M.	1,087	-	_	_	- 1
Beaconsfield Road, I.	543	3	3	3	2
Clifton Road J.M.	910	3 8	II	8	4
Featherstone Road J.M.	1,012	4	6	4	3
Featherstone Road I.	704	2	2	2	I
Lady Margaret Road J.M.	1,497	8	II	7	3
Lady Margaret Road I.	1,190	I	I	I	I
North Road J.M.	1,374	II	II	10	4
North Road I.	866	-	-	-	-
St. Anselm's R.C. J.M.	1,195	4	4	4	4
Tudor Road J.B.	421	-	-	-	-
Tudor Road J.G.	405	I	I	-	-
Tudor Road I.	1,213	I	I	-	-
Western Road J.M. & I.	1,183	9 3	9	8	5
Dormers Wells S.B.	963	3	3	I	I
Dormers Wells S.G.	1,614	15	18	II	5
Featherstone Road S.B.	978	-	-	-	-
Western Road S.G.	686	3 2	3 6	3	Ι.
Talbot Road Special	379			2	2
Clifton Road I. Routine Medical	756	2	2	2	2
Inspections	5	5	5	3	-
Total	18,981	82	97	69	38

TABLE XV

SANITARY INSPECTIONS—CLASSIFICATION OF VISITS

Houses, Public H	ealth A	ct, 193	6	 	 	 5,764
Houses, Housing	Act, 19	936		 	 	 54
Overcrowding				 	 	 235
Disinfestation				 	 	 184
War Damage				 	 	 4
Pet Animals Act,	1951			 	 	 25
Vans, Sheds				 	 	 II
Shops Act, 1950				 	 	 505
Food Shops				 	 	 1,199
Fried Fish				 	 	 40
Cafes, etc				 	 	 388
Factories (Mechan	nical)			 	 	 278
Factories (Non-M	lechani	cal)		 	 	 35
Outworkers				 	 	 47
Food Factories				 	 	 241
Smoke				 	 	 158
Offensive Trades				 	 	 23
Bakehouses				 	 	 59
Dairies				 	 	 25
Water Sampling				 	 	 24
Ice-cream Sampli	ng			 	 	 134
Other Foods Sam	pling			 	 	 162
Schools				 	 	 57
Stables				 	 	 22
Offensive Accumu	lations			 	 	 13
Hairdressers				 	 	 4
Petrol				 	 	 80
Canal Boats				 	 	 5
Slaughterhouses					 	 59
Rats and Mice						 897
Infectious Disease	s			 		 470
Atmospheric Pollu			***	 	 	 97
						11,299

TABLE XVI

Statistics

HOUSING-GENERAL

I.	inspection of dwelling-houses during the year:—	
	(1) (a) Total number of dwelling-houses inspected for housing defects (under	
	Public Health or Housing Acts)	1,561
	(b) Number of inspections made for the purpose	5,818
	(2) (a) Number of dwelling-houses (included under sub-head (1) above) which	3,020
	were inspected and recorded under the Housing Consolidated Regu-	
	lations, 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 pre-	
	ceding sub-head) found not to be in all respects recently for factors	
	ceding sub-head) found not to be in all respects reasonably fit for human	
		612
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	685
3.	Action under statutory powers during the year:—	
Э.	(a) Proceedings under Sections of the Housing Act and	
	(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	240
	(2) Number of dwelling-houses in which defects were remedied after	
	service of formal notices	
	(a) By owners	279
	(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	8
	(2) Number of dwelling-houses demolished in pursuance of Demolition	
	Orders	
	Orders	
	(1) Number of separate tenements or underground rooms in respect of	
	(2) Number of separate tenements or underground rooms in respect of	
	which Closing Orders were determined the terrories to 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	118
	(2) Number of families dwelling therein	133
	(3) Number of persons dwelling therein	578
	(b) Number of new cases of overcrowding reported during the year	67
	(c) (1) Number of cases of overcrowding relieved during the year	94
	(2) Number of persons concerned in such cases	404
	(d) Particulars of any case in which dwelling-houses have again become over-	404
	crowded after the local authority have taken steps for the abatement of	
	overcrowding	

