

**[Report of the Medical Officer of Health for Tottenham].**

**Contributors**

Tottenham (England). Borough Council.

**Publication/Creation**

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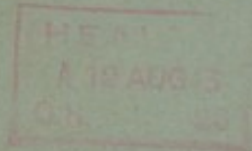
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BOROUGH OF TOTTENHAM

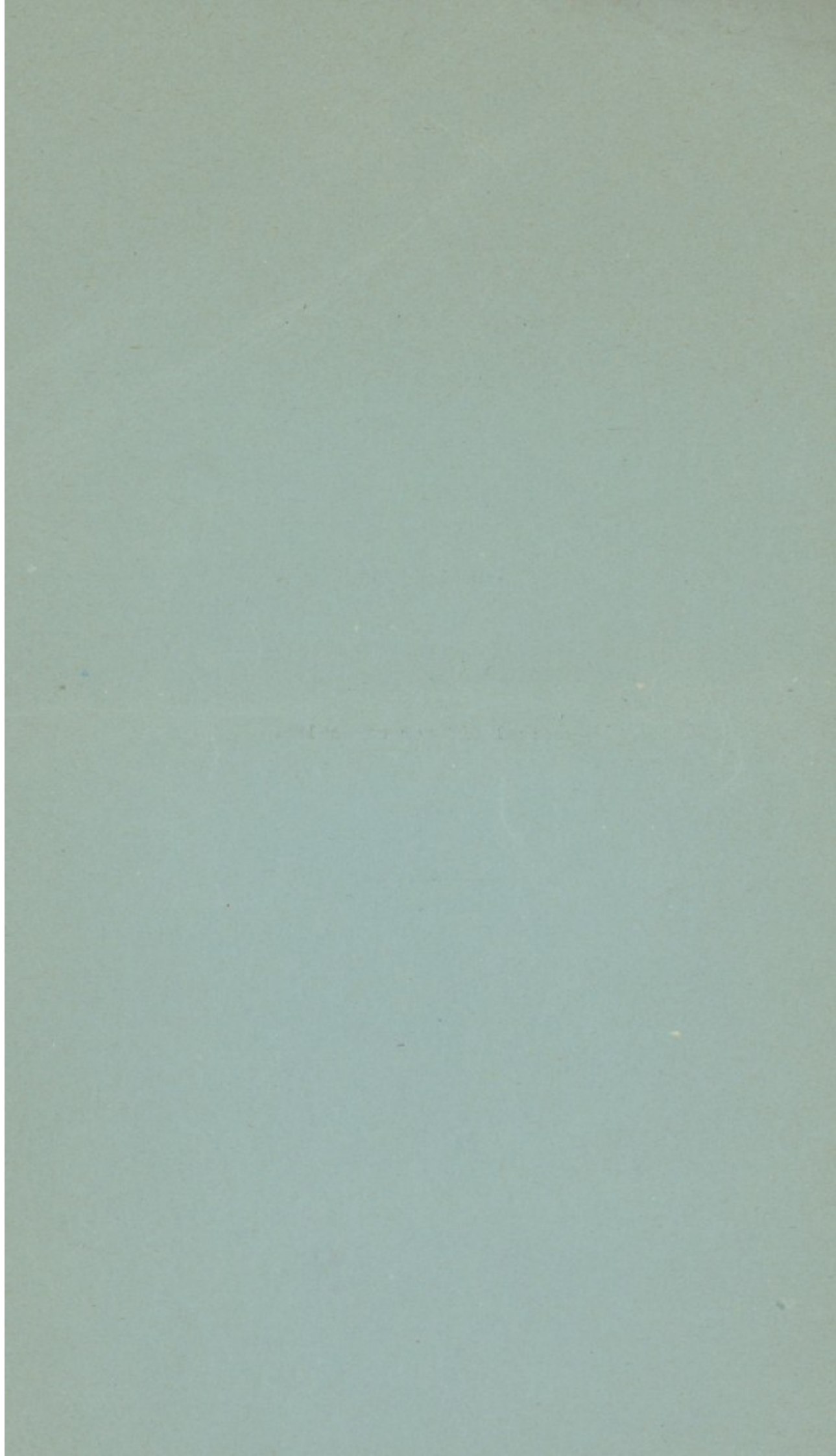
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Annual Report of  
the  
Medical Officer of Health  
for  
1941.

(4) Ld

FOR

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BOROUGH OF TOTTENHAM.

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Annual Report  
of the  
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1941.

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THE UNIVERSITY OF CHICAGO

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PUBLIC HEALTH DEPARTMENT

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HEALTH AND HOUSING COMMITTEE.

(As at 31st December, 1941)

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Chairman:

Alderman R.H. Warren (Deputy Mayor)

Members:

(Ex-officio) His Worship the Mayor  
(Councillor Mrs. A.E. Lyons, J.P.)

Alderman C.D. Grant

" Mrs. W.A. Kent, J.P.

" Mrs. A. Kitchener.

" J.H. Morrell, J.P.

" A. Reed, A.C.I.I., J.P.

" A.R. Turner.

Councillor G.A. Armfield.

" Mrs. M. Berry.

" A. Clark.

" Miss R.F. Cox.

" R.W.H. Ford.

" Mrs. G.E. Morrison.

" H.W. Pearce.

" J. Wallace.

STAFF.

PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health:  
G. Hamilton Hogben.

Deputy Medical Officer of Health:  
J. Landon (until Nov. 30th, 1941).  
B. Broadbent (from December 8th, 1941).

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Chief Sanitary Inspector:

J.B. Smith.

Sanitary Inspectors.

W.P. West	J.A. Shillito (until 13.11.41)	E.S. Glegg.
L.J. Kerridge	E.T. Jenkins	R.H.T. Chappell
W.L. Morris	C.J. Cattell	A.S. Muncey (from 31.3.41)
F.J. Parsons (from 3.11.41)	R. Garvey.	

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Shops Acts Inspector - F.T.G. Lock.

Assist. Shops Acts Inspector - A.A. Sendall.

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Nurses for Infectious Disease.

S. Swaffield      W. Mathias.

Clerical Staff.

Acting Chief Clerk - W. Potter.

H.R. Gilbert	A.W. Lawrence (H.M. Forces)	L.R. Perry (Seconded to Rehousing Dept.)
H. Thomas (H.M. Forces)	W.P. Kent	D.J. Legge (H.M. Forces, since 31.7.41)
H.F. Smith	Miss J. Cadd	Miss M.R. Erwood.
	Miss B.M. Miller (since 28.7.41.)	

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# STATISTICAL SUMMARY, ETC.

Area of the District in acres.	3,014
Registrar-General's estimate of civilian population, mid-year 1941.	105,620
Rateable Value.	£972,770
Sum represented by a penny rate.	£3,880

## Births and Deaths.

Registered live births:-	<u>Total</u>	<u>Males</u>	<u>Females.</u>
Legitimate	1,490	743	747
Illegitimate	<u>70</u>	<u>37</u>	<u>33</u>
	1,560	780	780

Birth Rate per 1,000 estimated population ... .. 14.77

Total live births for calculation of Infant Mortality Rate,

	<u>Total</u>	<u>Males</u>	<u>Eto:- Females</u>
Legitimate	1,248	622	626
Illegitimate	<u>68</u>	<u>36</u>	<u>32</u>
	1,316	658	658

## Still Births.

(a) Registered	<u>Total</u>	<u>Males</u>	<u>Females.</u>
Legitimate	50	30	20
Illegitimate	<u>1</u>	<u>1</u>	<u>-</u>
	51	31	20

(b) Total Still Births for calculating Still Birth Rate.

	<u>Total</u>	<u>Males</u>	<u>Females</u>
Legitimate	46	27	19
Illegitimate	<u>1</u>	<u>1</u>	<u>-</u>
	47	28	19

Still Birth Rate per 1,000 total (live and still) births.

(a) 31.66  
(b) 34.48

<u>Deaths.</u>	Males	732	
	Females	686	Total 1,418.

Death Rate per 1,000 estimated civilian population. 13.43.

## Maternal Deaths.

	<u>Deaths.</u>	<u>Rate per 1,000 total (Live and still) births.</u>
Puerperal		
sepsis.	2	1.47
Other puerperal		
causes	<u>1</u>	<u>0.73</u>
	3	2.20

Death Rate of Infants under one year of age:-

All infants per 1,000 live births ... ..	46.35
Legitimate infants per 1,000 legitimate live births ..	44.87
Illegitimate infants per 1,000 illegitimate live births ..	73.53



Deaths from	- Cancer (all ages) ...	194
	Measles (all ages)...	4
	Whooping Cough (all ages) ..	8
	Diarrhoea (under 2 years) ..	8

Table of Deaths during the year 1941 in the Borough  
of Tottenham, classified according to Diseases.

Cause of Death.	Males	Females	Totals.
Typhoid & paratyphoid fevers.	-	-	-
Measles	1	3	4
Scarlet Fever	-	-	-
Whooping Cough	3	5	8
Diphtheria	3	2	5
Influenza	7	9	16
Encephalitis Lethargica	-	1	1
Cerebro-Spinal Fever	1	-	1
Tuberculosis of Respiratory System.	68	38	106
Other Tuberculous Diseases	6	8	14
Syphilis	6	3	9
General Paralysis of the Insane	-	-	-
Tabes Dorsalis	-	-	-
Cancer, Malignant Disease	96	98	194
Diabetes	2	12	14
Cerebral Haemorrhage, etc.	40	74	114
Heart Disease	170	174	344
Other Circulatory Diseases	16	15	31
Bronchitis	63	53	116
Pneumonia (all forms)	54	50	104
Other respiratory diseases	6	5	11
Peptic Ulcer	21	2	23
Diarrhoea (under 2 years)	4	4	8
Appendicitis	7	5	12
Other Digestive Diseases	13	7	20
Acute and Chronic Nephritis	17	15	32
Puerperal Sepsis	-	2	2
Other Puerperal Causes	-	1	1
Congenital Debility, Premature Birth, Malformations.	16	14	30
Road traffic accidents.	7	4	11
Other violent causes	38	34	72
Suicide	7	5	12
All other causes.	60	43	103
	732	686	1,418



Infantile Deaths in Ages and Sexes during the year 1941.

Cause of Death.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 yr.	Males	Females
Measles	-	-	-	-	-	-	-	-	1	1	-	1
Whooping Cough	1	-	-	-	1	1	1	-	-	3	-	3
Meningitis	-	-	-	1	1	-	-	-	3	4	1	3
Bronchitis	-	-	-	-	-	2	2	1	-	5	3	2
Pneumonia	-	-	-	-	-	2	-	2	-	4	2	2
Diarrhoea & enteritis	-	-	-	1	1	2	3	2	-	8	5	3
Premature Births, congenital malformation, etc.	23	3	-	-	26	1	2	1	-	30	16	14
Other causes.	-	-	-	-	-	2	2	1	1	6	6	-
Totals -	24	3	-	2	29	10	10	7	5	61	33	28

Table of cases of Infectious Disease coming to the knowledge of the Medical Officer of Health during the year 1941 in the Borough of Tottenham, classified according to Diseases & ages.

Notifiable Disease.	Males.	Females.	Under one	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 & over.	Total cases removed to Isolation Hospital by Council.
Scarlet Fever	41	62	1	-	5	11	6	41	18	7	11	2	1	-	59
Diphtheria	30	43	-	1	7	6	8	18	16	8	7	1	1	-	67
Pneumonia	60	38	8	5	5	7	1	7	1	6	9	12	27	10	-
Erysipelas	12	12	-	-	-	-	-	-	-	1	5	4	12	2	5
Puerperal Pyrexia	-	13	-	-	-	-	-	-	-	-	12	1	-	-	3
Dysentery	-	2	-	-	-	-	-	-	-	-	1	-	1	-	1
Ophthalmia Neonatorum	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-
Cerebro-Spinal Meningitis.	11	11	-	2	2	1	1	3	1	4	4	2	1	1	9
Poliomyelitis	1	1	-	-	-	-	1	1	-	-	-	-	-	-	-
Typhoid	2	2	-	-	-	-	-	-	2	1	-	-	1	-	1
Food Poisoning	3	4	-	-	-	-	1	-	-	1	1	1	3	-	-
Whooping Cough	240	225	35	60	57	56	75	169	7	3	2	-	1	-	41
Measles	539	505	18	92	111	110	129	542	23	12	7	-	-	-	65
Pulmonary Tuberculosis	98	63	-	-	-	1	1	3	1	22	75	20	35	3	-
Other forms of Tuberculosis.	11	17	-	1	1	-	-	6	1	4	10	1	3	1	-
	1,049	999	64	161	188	192	223	790	70	69	144	44	86	17	251

## GENERAL PROVISIONS OF HEALTH SERVICES.

### LABORATORY FACILITIES.

The following is a statement of the examinations made during the year:-

<u>Swabs.</u>	<u>Negative</u>	<u>Positive</u>	<u>Total.</u>
Diphtheria contacts, discharged cases, Convalescent Home cases, etc.	311	24	335
Medical Practitioners	238	28	266
Totals.	549	52	601
<hr/>			
Specimens of Sputa examined for Tuberculosis:-		Positive 8 Negative 76	84
<hr/>			
Faeces examined for Typhoid & Dysentery		2 (negative)	
" " " Typhoid.		1 (positive)	
Stool examined for Food Poisoning.		1 (negative)	

### AMBULANCE FACILITIES.

The Borough Ambulance Service continues to be controlled by the Public Health Department.

Five motor ambulances are available for accident and non-infectious cases, and there are two buses for conveying children to Special Schools.

The buses are also used for transporting meals to the various School Feeding Centres, and this branch of the service was augmented early in the year by an additional vehicle - a Utility Van - provided by the Tottenham Education Committee. The Education Committee also pay for a driver for this vehicle.

Total mileage for the year - Ambulance Vehicles and buses.	40,866
Total mileage for the year - Utility Van	4,463
Number of accident and hospital cases, etc. conveyed during the year ....	4,139
Number of occasions on which the oxygen resuscitator was used ....	7

### SANITARY CIRCUMSTANCES.

#### WATER SUPPLY.

The Borough water supply, controlled by the Metropolitan Water Board, has been satisfactory in all respects.

#### SANITARY CONDITIONS AND HOUSING.

During the whole of the year, the Sanitary Inspectors were engaged on the repair of war damage.



These duties included

the inspection of properties immediately after an incident occurred;  
classification of properties in category 'A', 'B', or 'C';  
arrangement for the carrying out of first aid repairs (roofs, windows, doors, etc) & supervision of this work;  
detailed surveys to ascertain more permanent repairs required, and arrangement and supervision of this work; and  
checking of Builders' accounts.

This work claimed the greater part of the Inspectors' time, and their normal statutory duties were of necessity curtailed.

No details can at present be given, regarding the repair of war damage, but other inspections are summarised below.

Number of houses inspected after Infectious Disease.	201
" " " " under the Housing Act	-
" " " " on complaint.	942
	<u>1,143</u>

Informal notices served numbered 1,179, and Statutory Notices under the Public Health and Housing Acts 177.

Drains examined and tested	121
Drains reconstructed and repaired	92
Drains found stopped	109
Soil pipes repaired or renewed	28
Gullies renewed	26
Fresh air inlets renewed	14
W.C. cisterns and pans repaired or renewed	185
Waste pipes repaired or renewed	68
Rain-water-pipes repaired or renewed	123
Roofs repaired or renewed	215
<b>Gutters</b> repaired or renewed	109
Drinking water cisterns repaired or renewed	11
Number of houses where water was provided from the main.	5
Yard paving repaired or renewed	37
<b>Sinks</b> repaired or renewed	28
Floors repaired or renewed	58
Floors ventilated	14
Window frames & sashes repaired or renewed.	94
Coppers repaired or renewed.	17
Fireplaces, stoves, etc. repaired or renewed	87
Number of houses where walls and ceilings were cleansed.	225
Miscellaneous defects remedied.	272

Damp proof courses were inserted in 15 houses, 16 houses were rendered externally, and 7 houses were pointed.

Reinspections totalled 2,036

Other inspections were:-

Inspections of Stables and Mews	...	...	...	...	15
" " Schools	...	...	...	...	4
" " Pawnbrokers' premises	...	...	...	...	4
" " Public House Urinals.	...	...	...	...	36
" " Knackers' Yards	...	...	...	...	10

There is only one Common Lodging House in the district, and this was visited monthly.

The Moselle Brook gave cause for complaint during the summer months.

The surface water sewers from Wood Green and Tottenham discharge into this open brook, and examinations of samples of the effluent showed that there was some sewage pollution.

Further investigations are proceeding.

## Repair of Houses by the Council.

### Work carried out in default -

Section 9, Housing Act, 1936 - 19 premises:  
cost £319. 7. 0.

Section 39, Public Health Act,  
1936 - 2 premises:  
cost £14. 9. 1.

### Work carried out for maintenance of public sewers -

Section 24, Public Health Act,  
1936 - 34 premises:  
cost £470. 2. 7.

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## Housing Act, 1936: Section 11.

Demolition orders with respect to 2 dwelling houses were made under this Section.

## Infectious Disease.

### Disinfection Work.

In addition to the normal terminal disinfection of rooms carried out with the Formalin Spray, an increasing amount of disinfection work has been undertaken at the Steam Disinfector.

Blankets, pillows, etc. used by the firewatchers of private firms, A.R.P. personnel, etc., have been disinfected regularly at the Markfield Road Disinfecting Station, and the Baths there have been used for cleansing persons suffering from Scabies.

The complete renovation of these baths, in order to render them more suitable for the increasing number of cases required to be dealt with, was arranged in the last month of the year, and the work was completed early in 1942.

The accommodation here cannot, however, be regarded as providing permanent cleansing facilities.

Full details of the Disinfection work carried out, are set out below.

Rooms disinfected after Scarlet Fever, Diphtheria, and Tuberculosis.	258
Bedding, etc. from 484 houses (Infectious Disease - incl. Scabies)	
Wards or School Rooms.	19
Verminous rooms (incl. disinfection process) and miscellaneous.	324

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	Blankets.	Pillows.	Overlays.	Other articles.
Private Firms in the district.	2,120	102	66	18
Civil Defence and Fire Watchers.	3,144	76	127	18

206 Library Books were disinfected with Formaldehyde Gas.

Disinfection of 60 houses on the Council's Housing Estates was also completed during the year.



## SHOPS ACTS, 1912-1938.

The Shops Acts are administered by two Whole-time officers.

By means of systematic visitation of shops throughout the borough, effective administration of the Shops Acts is secured, and the necessary information obtained for the purpose of keeping up to date a register of all shops in the borough.

During the year a complete survey of shops was made. In the various roads visited, it was noted that there are:-

21 shops empty (damaged by enemy action)	.6%	) of total shops
599 shops empty (other reasons)	20.00%	) in Tottenham.
71 shops demolished (62 by enemy action,	2.06%	) (Approx.
9 for road improvements, etc.	.3%	) 3,000)

Percentage of total number of shops empty and demolished for various reasons - 23.0%

It is interesting to note the small percentage demolished or empty due to enemy action.

Regular visits on the weekly half holiday and in the evening, are made to ensure that the provisions of the Shops Acts and the various closing orders made thereunder are complied with.

Many shopkeepers are desirous of having the earlier evening closing hours imposed under the Defence Regulations, made permanent by legislation after the war.

In the administration of the Acts and closing orders, 3,881 inspections have been made. Most of the offences have been minor irregularities and the non-exhibition of statutory notices in respect of which 252 verbal warnings and notices were issued.

## Shops (Sunday Trading Restriction) Act, 1936.

In spite of the opportunities for Sunday Trading, due to exemptions, exceptions and High Court decisions, it is pleasing to be able to state that very few shops open on Sunday in Tottenham. The conditions relating to the employment of assistants on Sunday, and the compensatory holidays in lieu of Sunday employment are being complied with.

## Shops Act, 1934 & Young Persons Employment Act, 1938.

The provisions of the Acts relating to the employment of shop workers have been effectually applied during the course of routine visitation of shops, and it has been ascertained that the conditions of employment have improved as a result, in respect both of the hours of employment of young persons, and the arrangements for the health and comfort of shop workers.

Shopkeepers generally are desirous of taking reasonable measures to comply with the requirements of the Act, and are ready to obtain and act upon the advice given by the Shop Inspector.

Owing to so many older shop assistants being engaged on work in connection with the war, the number of young persons employed at present is above the normal.

It is gratifying to record that with the co-operation of shopkeepers, the Acts generally have been well observed.

During 1941, 7 first warning notices were issued in respect of contraventions of the above Acts.

## INSPECTION OF FACTORIES.

Inspections of factories and workplaces totalled 140.

48 visits were paid to Outworkers' premises.

## INSPECTION AND SUPERVISION OF FOOD.

### MILK SUPPLIES.

There are no Farms or Cowsheds in the District, but 83 visits were paid to premises retailing milk supplies.

### MILK (SPECIAL DESIGNATIONS) ORDERS, 1936 and 1938.

These designations may only be used under licence from the local authority. In 1941, the following licences were granted.

#### Tuberculin Tested Milk Licences:

Bottlers' Licences	2
Dealers' Licences	10
Supplementary Licences	3

#### Accredited Milk Licences -

#### Pasteurised Milk Licences:

Pasteurisers' Licences	2
Dealers' Licences	16
Supplementary Licences	4

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### MEAT AND OTHER FOODS.

None of the Slaughter Houses in the District are in use.

97	visits	were	paid	to	Butchers' Shops.
32	"	"	"	"	Fish Shops
30	"	"	"	"	Fruiterers' Shops
43	"	"	"	"	Bakehouses.

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### Miscellaneous Unsound Foodstuffs dealt with.

1,346 tins milk; 47 tins peas; 18 tins baked beans; 16 tins stewed steak; 2 tins chopped ham; 3 tins sausage meat; 22 lbs. luncheon sausage; 1½ lbs. sausage meat; 4 tins luncheon meat; 6 lbs. luncheon meat; 1 tin canned meat; 1 tin emergency meal; 15 tins salmon; 5 tins pilchards; 3 tins sardines; 3 tins herrings; 34 tins fruit; 151 cases dried apricots; 10 tins carrots; 1 tin and 50 lbs. brawn; 15 tins spaghetti; 8 tins soup; 3 bottles pickled onions; 3 bottles pickles; 1 jar pickles; 32 tins jam; 20 jellies; 2 cwt. sweets; 2½ cwt. biscuits; 108 lbs. slab cake; 26 lbs. cake; 2 jars sandwich paste; 2 jars fish paste; 1,758 eggs; 164 duck's eggs; 22 lbs. cheese; 1 box cheese; 2 cwt. potatoes; 61 lbs. onions; 202 oranges; 112 lbs. pears; 5 boxes apples; 9 lbs. ox liver; 5 stone cod roes; 6 stone cod; 2 qurs. skate wings; 3 stone skate; 5 boxes kippers; 8 stone witches; 6 stones lemon soles; 5 stone cod fillets; 7 stone rock eel; 2 bags rice; 38 lbs. 11 oz. bacon; 4 hind qrs. beef; 2 fore ends beef; 12 lbs. 4 oz. fore end; 1 chicken; 2½ lbs. chicken; 3 qrs. 10 lbs. butter; 41 rabbits; 19 qrs. 18 lbs. rabbits; 1 pig's head.



PREVALENCE OF, AND CONTROL OVER, INFECTIOUS  
AND OTHER DISEASES.

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Scarlet Fever.

The number of cases notified was 103, compared with 103 in 1940, 335 in 1939, and 186 in 1938. 59 cases were removed to Isolation Hospital.

Diphtheria.

The number of cases notified was 73, compared with 28 in 1940, 60 in 1939, and 221 in 1938. There were 5 deaths from this disease.

Immunisation is carried out by two doses alum precipitated toxoid; 0.2 c.c., followed 3 weeks later by 0.5 c.c.

Total attendances	12,367
Schick Tests	3,829
Cases completed during the year.	2,739

DIABETES.

With the approval of the Ministry of Health, Insulin was supplied to 10 patients suffering from Diabetes. The number of units amounted to 138,536, and the cost was £49. 2. 8.

# TUBERCULOSIS.

The County Council are responsible for the treatment of Tuberculosis.

189 notifications were received during 1941 - Pulmonary, 161: other than Pulmonary, 28.

Cases remaining on the register at the end of the year were - Pulmonary, 516: Non-Pulmonary, 154.

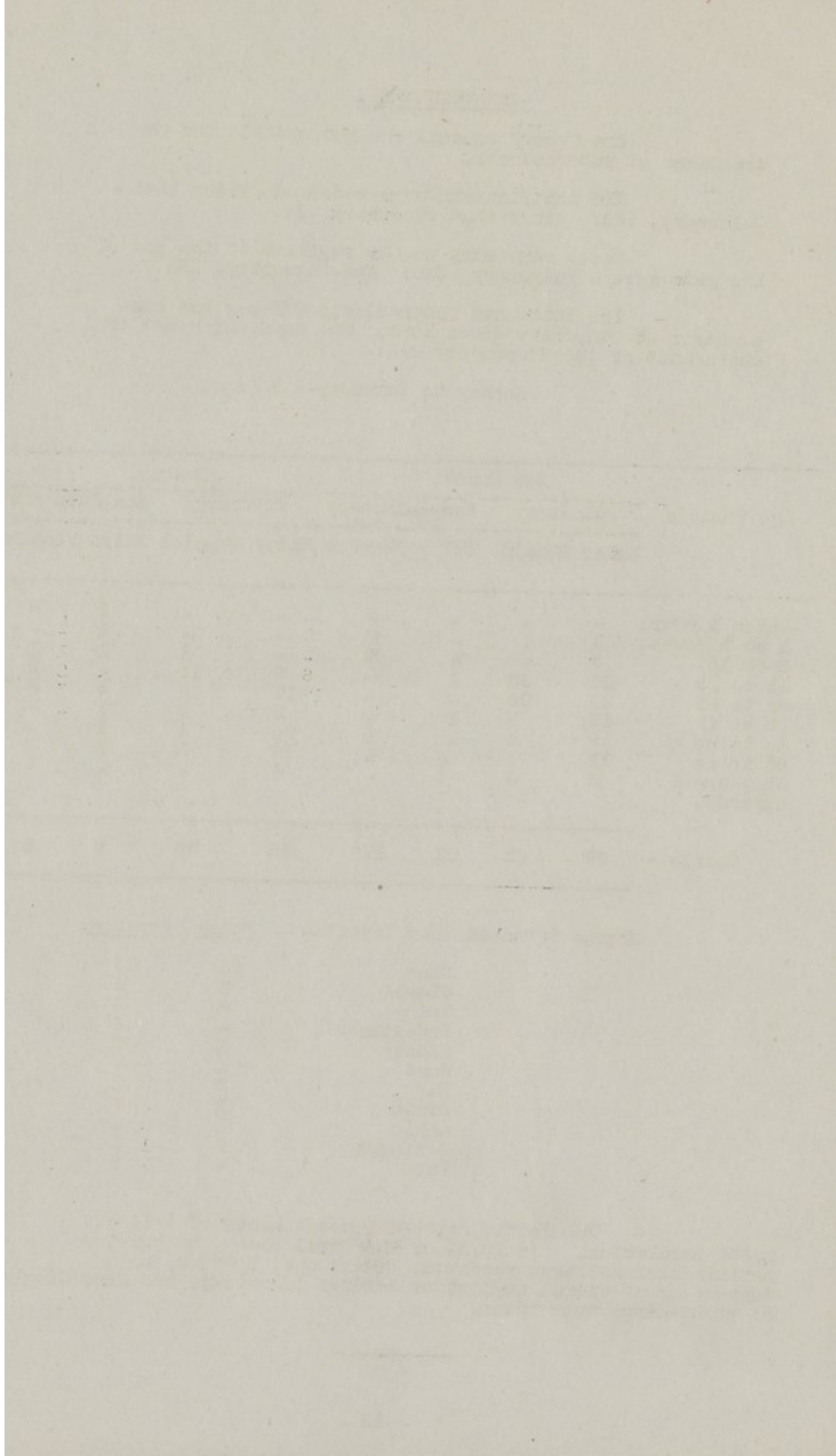
The Tottenham Tuberculosis Officer has his premises at 140, West Green Road. The days and hours of attendance at the dispensary are:-

Monday to Saturday - 10 a.m.

Age Periods	New Cases.				Deaths.			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year.	-	-	-	-	-	-	1	2
1 to 5 years.	1	1	-	2	-	-	1	-
5 to 15	4	-	4	3	-	1	1	1
15 to 25	26	30	4	6	6	11	-	2
25 to 35	21	20	-	4	12	15	-	3
35 to 45	13	7	1	-	8	5	1	-
45 to 55	19	4	1	1	20	4	1	-
55 to 65	11	1	-	1	18	2	1	-
65 years & upwards.	3	-	1	-	4	-	-	-
Totals -	98	63	11	17	68	38	6	8

Organs affected (New Cases):-	Males	Females.
Lung	98	63
Glands	2	3
Spine	2	5
Intestines	-	4
Kidney	1	2
Knee	1	-
Hip	2	1
Groin	1	-
Ankle	1	-
Meninges	1	1
Face	-	1

The deaths represent a deathrate of 1.14 per 1,000 population. In 22.5% of the fatal cases, no previous notification had been received. There was, however, no suggestion of wilful neglect or refusal to notify, and accordingly, no proceedings were taken.





An examination of Vital Statistics for the Years 1935/41,  
with special reference to the Mortality Rate  
among illegitimate infants.

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Press publicity has been given recently to the illegitimate birth rate generally, and particular reference has been made to specific sections of the community.

The inference to be drawn from the various statements which have been made is that the illegitimate birth rate among civilian women has increased in recent times, and because of this inference the relevant statistics relating to this area have been carefully examined to determine the position locally.

The statistics for the years 1935/41, so far as they affect the Borough of Tottenham, are set out in tabular and graphic form herewith. It will be seen on examination that in fact while the birth rate is by no means constant the number of illegitimate children born since 1938 has steadily reduced, and there is no close relation between the general birth rate and the illegitimate birth rate.

Generally, it can be stated quite definitely that any suggestion that there has been an increase is without factual foundation.

Examination of the figures, however, discloses that the death rate of illegitimate children is alarmingly high as compared with legitimate children. This merits special examination.

For example, in 1937 the infant mortality rate of legitimate children under 1 year was 62.3 per 1,000, while that of illegitimate children was 111.1 per 1,000. In 1938, the infant mortality rate among legitimate children had fallen to 43.7 per 1,000, while the illegitimate mortality rate had risen to 116.3 per 1,000.

There are several inferences to be drawn from this disclosure, but two questions are postulated as being worthy of special enquiry in the immediate future.

They are:-

- (1) Do unsuccessful attempts at abortion have a material effect upon the chances of survival of the infant? and
- (2) Has the lack of ante-natal care in the case of unmarried mothers a material effect upon the chances of survival of the infant?

It is recognised that in order to obtain any reliable information on such matters, very careful and tactful approach on the part of those conducting any enquiry will be required.

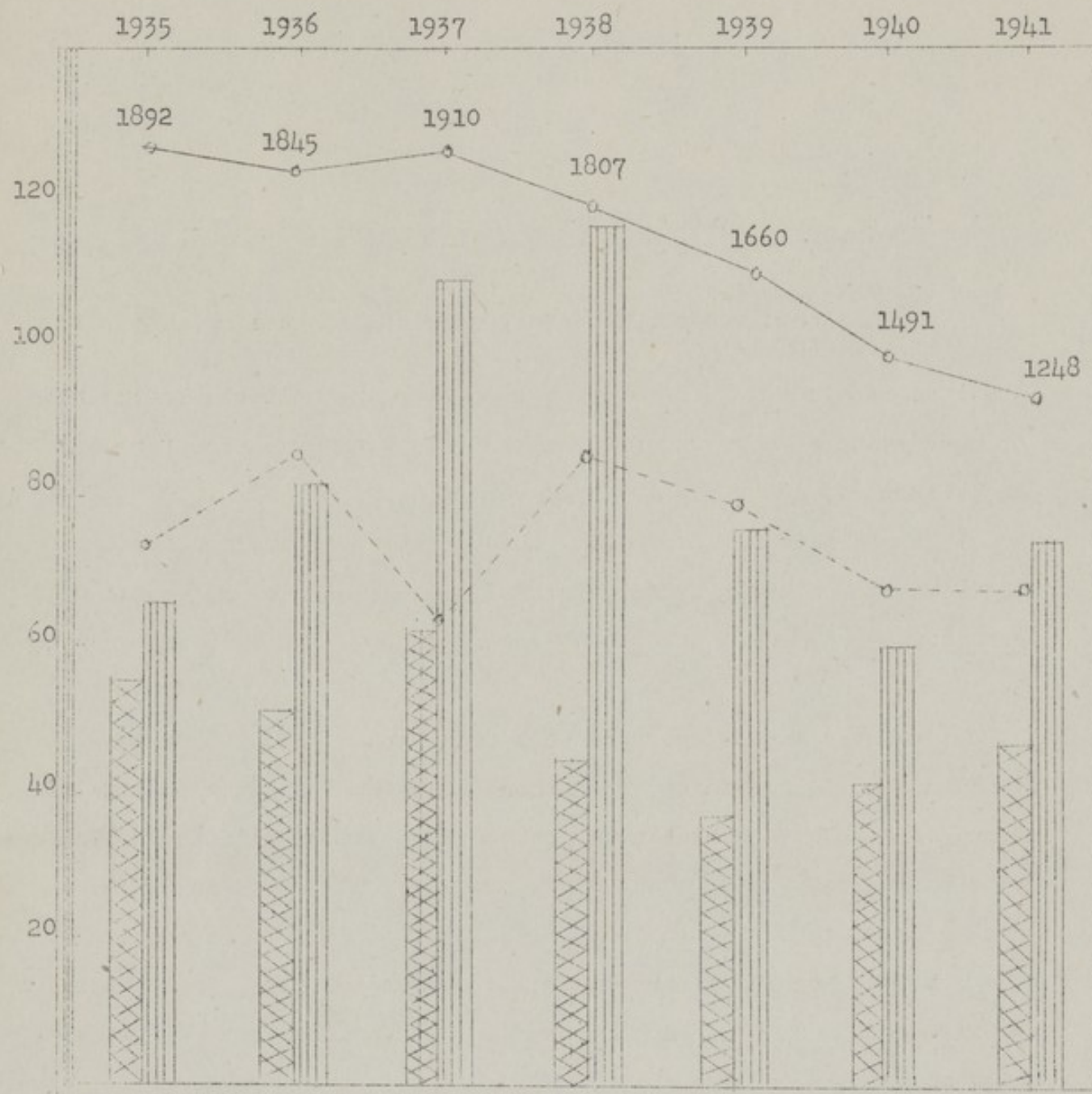
It may be said, however, that these statistics indicate that illegitimate children suffer, not only from economic and social handicaps, but from a materially lower basic health standard than do legitimate infants.

The enquiry can be extended to include an examination of the incidence of illegitimacy among those children who later in life are found to have been mentally defective or feeble-minded, and would seem to indicate that in the wider plan for the education of the public in Citizenship and Positive Health, consideration should be given to the problem of the unmarried mother not alone from the point of view of the care of the mother but additionally from the point of view of the care of the child.

Detailed examination of the Registrar General's figures shows that the greater proportion, probably 60%, of illegitimate infants are born away from home, e.g. in Institutions, etc., so that it would seem that this is an added reason for supposing that the lack of ante-natal care is responsible for this high mortality rate.

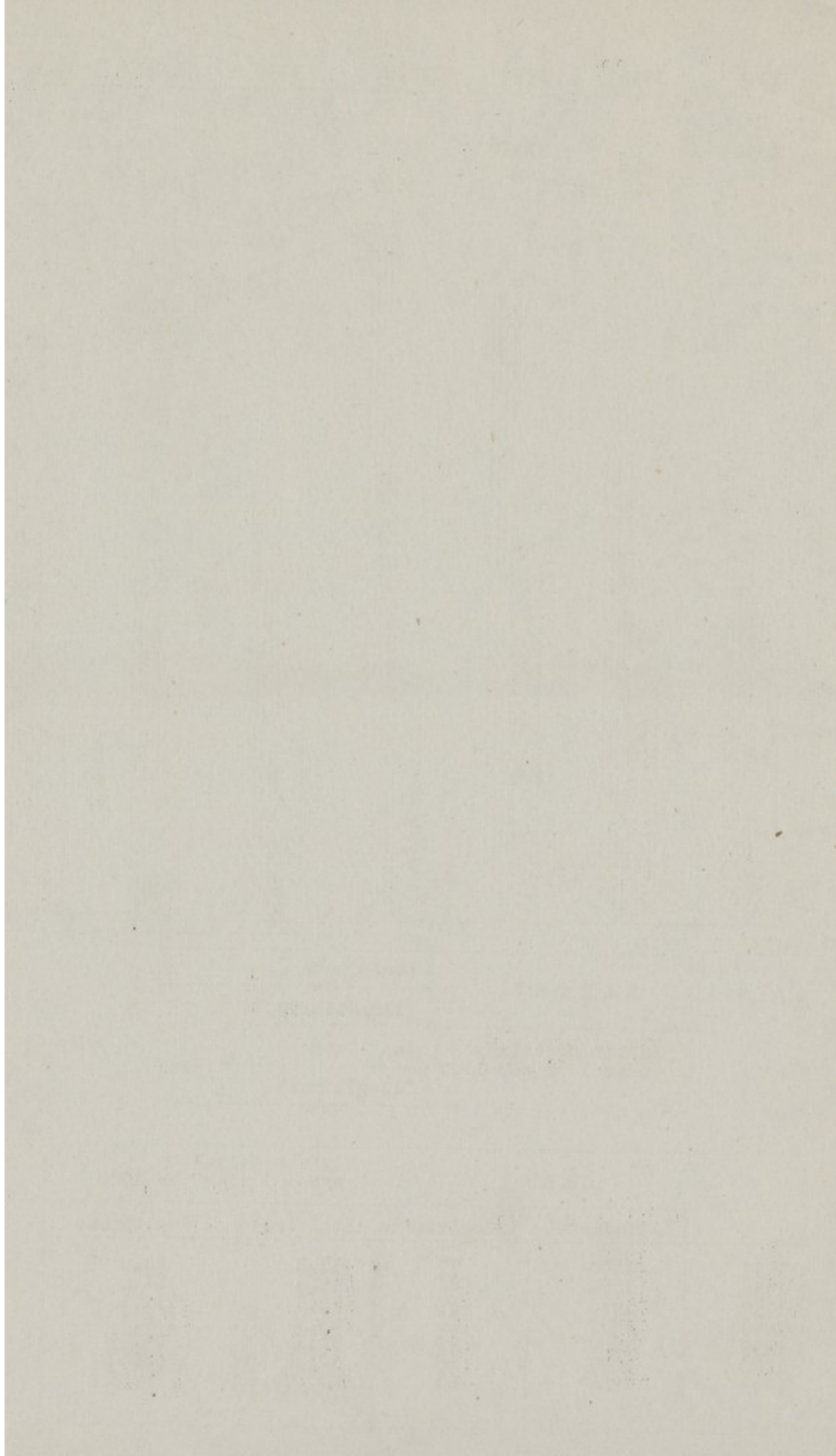
The trends indicated by the statistics herein examined have been compared with the relevant national statistics and sufficient evidence has been thus obtained to indicate that these local implications have national significance.





B I R T H S	Legitimate	Illegitimate
	—●—	- - -○-
Infant Mortality under 1 yr per 1000	Legitimate	Illegitimate
	▒	▒

	BIRTHS		Infant Mortality under 1 year per 1000	
	Legitimate	Illegitimate	Legitimate	Illegitimate
1935	1892	77	54.4	64.9
1936	1845	86	50.4	81.4
1937	1910	63	62.3	111.1
1938	1807	86	43.7	116.3
1939	1660	79	36.1	75.95
1940	1491	68	40.24	58.82
1941	1248	68	44.87	73.53



Public Health Department,

Town Hall, N.15.

November, 1942.

A Survey of the incidence of Tuberculosis  
in Tottenham during the past ten years.

Since the war there has been a marked increase in Tuberculosis figures for the Country as a whole, and for this reason the position in Tottenham has been examined and the relevant statistics collated.

The statistical Table beneath shows the pulmonary and non-pulmonary cases notified and the mortality figures in Tottenham for 1931 and the following ten years.

Year	Total cases on Register	New Cases	Pulmonary	Non-Pulmonary	Deaths	% of fatal cases to Total Deaths.
1931	392	280	235	45	151	9.3
1932	897	262	227	35	116	7.3
1933	874	224	202	22	136	8.4
1934	804	207	181	26	131	8.3
1935	819	235	203	32	123	8.4
1936	675	252	222	30	128	8.0
1937	694	212	178	34	105	6.5
1938	712	216	178	38	103	6.8
1939	712	212	182	30	100	7.1
1940	707	197	178	19	109	6.4
1941	670	189	161	28	120	8.4

From this Table and the appended graphs it will be seen that the number of Deaths bears no strict relation to the number of new cases. The importance of early diagnosis has recently been emphasised by the Minister of Health in launching a new campaign for mass miniature radiography. Early diagnosis, while statistically overloading the number of new cases, should by inference and in fact produce a corresponding reduction in the number of deaths.

The peak of new cases shown in 1931 has never since been reached and this is supported by the statistical curve showing the total cases on the Register, which has progressively fallen.



With regard to the war years the position in Tottenham is that the number of new cases, the total number of cases on the Register and the number of deaths, with the exception of 1941, have fallen.

Two significant facts are, however, revealed from a study of the graphs which demand special consideration:-

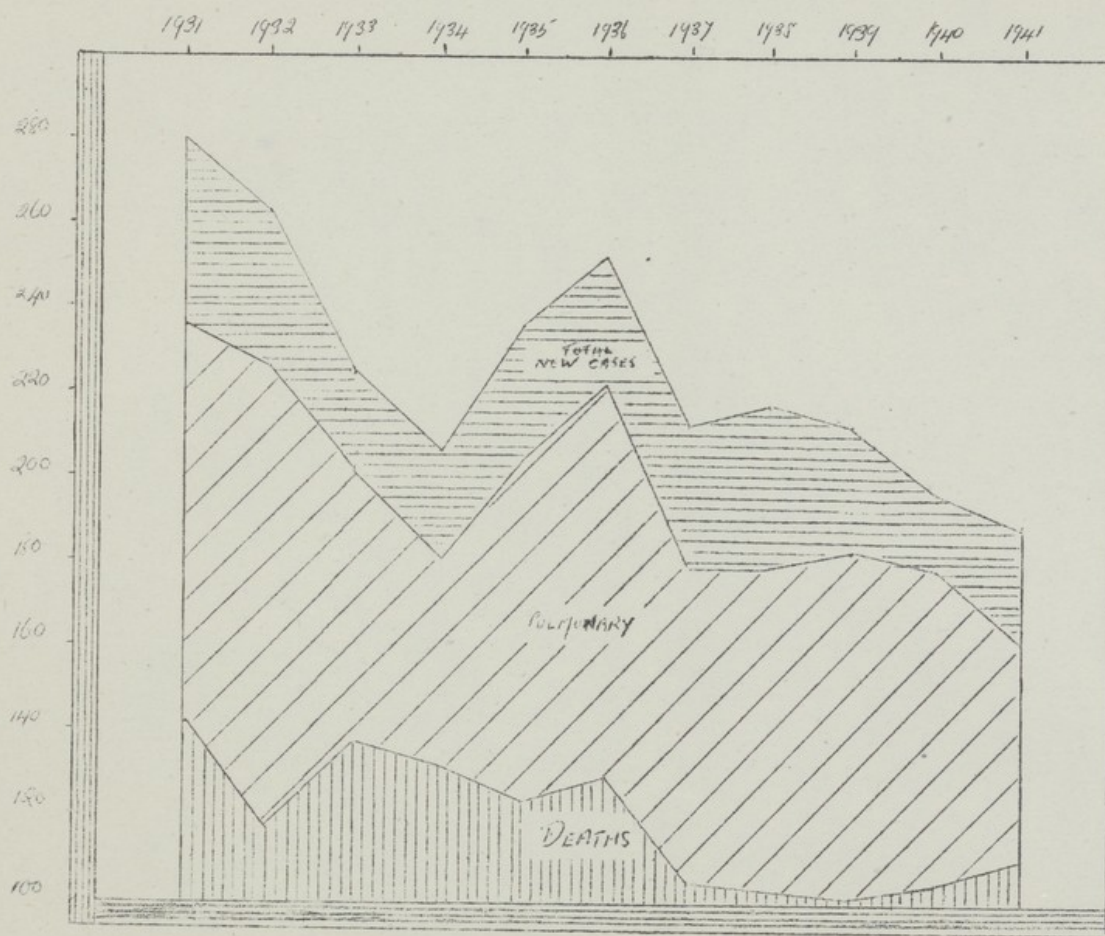
- (1) In 1941 the number of deaths rose while the number of new cases notified actually fell. By inference it would seem that unchecked this movement might continue until both lines met (always a signpost of danger) and the number of deaths equal the number of new cases.
- (2) In 1941 the percentage of deaths from tuberculosis among the total deaths from all causes has risen.

Many factors contribute to the possible explanation of these increased rates among which are:- lessened facilities for early treatment, dietetic and nutritional deficiencies, defective ventilation under blackout conditions at home and at work, mental stress and physical strain of war-time conditions.

The position then in Tottenham is not such as to cause alarm, but the statistical information shown in 1941 requires careful watching; and close co-operation is necessary with the County Council, who is responsible for the control and treatment of tuberculosis throughout Middlesex.

In conclusion I wish to acknowledge my indebtedness to Mr. T. E. Cowan, Rehousing Officer in the Homeless Persons section of my Department, for the preparation and helpful interpretation of the statistical information and graphs produced in this report.

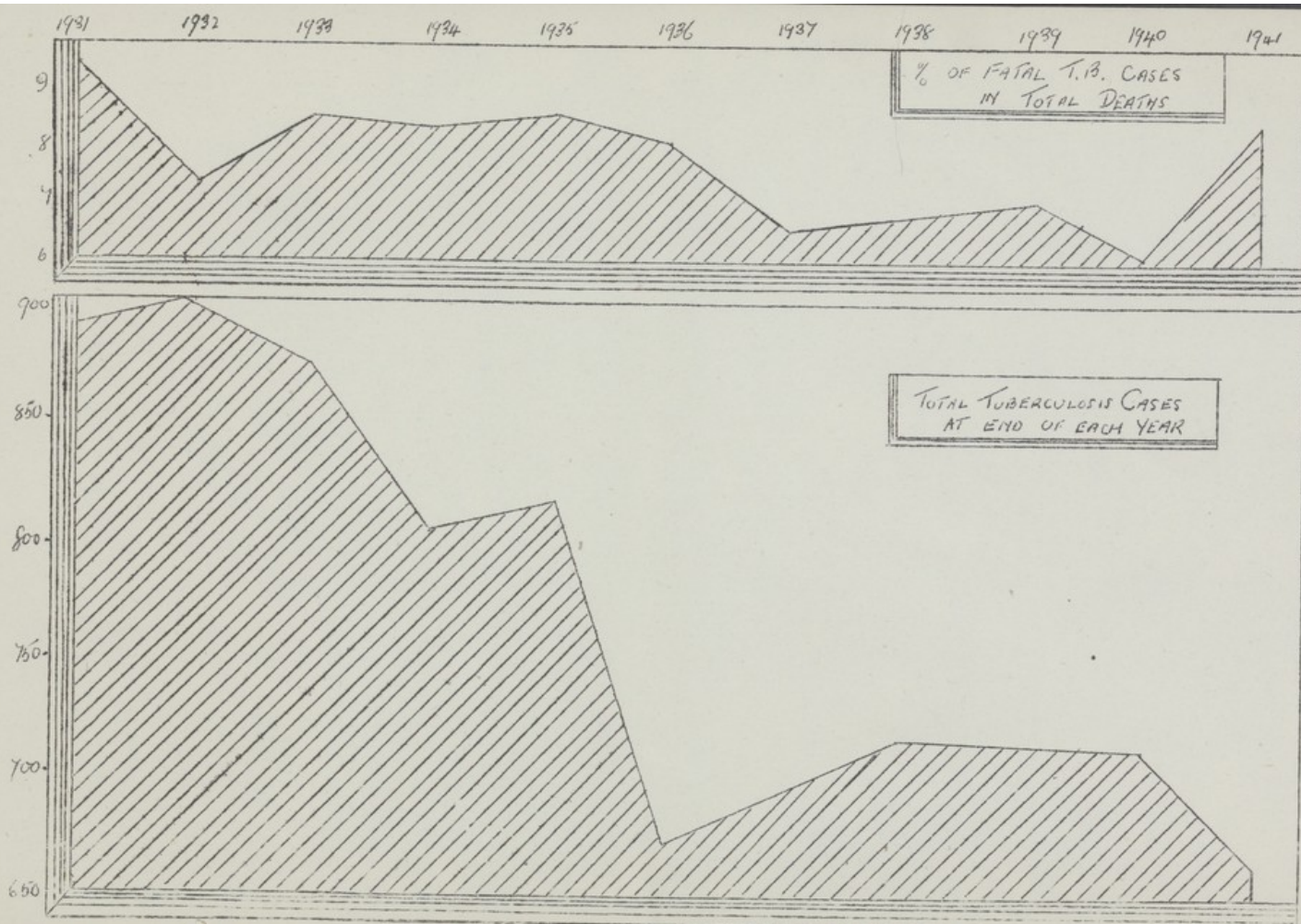
G. HAMILTON HOBGEN.  
Medical Officer of Health.



TUBERCULOSIS  
IN  
TOTTENHAM:  
1931 - 1941











BOROUGH OF TOTTENHAM EDUCATION COMMITTEE.

Town Hall,  
Tottenham, N.15.

August, 1942.

To the Chairman & Members of the  
Education Committee.

Ladies and Gentlemen,

I herewith submit in abridged form the Annual Report of the School Medical Service for the year ending 31st December, 1941.

Staff.

In December, 1941, Dr. J. Landon resigned his position as Deputy Medical Officer to take up the post of Medical Officer of Health and School Medical Officer at Stockton-on-Tees. Dr. B. Broadbent, late Assistant Medical Officer at Willesden was appointed in his place and commenced duty on the 8th December, 1941.

Owing to the increase of work entailed by the return of children from reception areas, the part-time post of temporary Assistant Medical Officer held by Dr. Nora Webster became a whole-time position as from February, 1942.

No further changes occurred in the staff during 1941.

Medical Inspection.

At the commencement of the year the majority of the children evacuated still remained in the Reception Areas, but as the year progressed and the danger from air-raids became less evident, a large number of the children began gradually to return to their homes in Tottenham.

Routine Medical Inspection of all "Entrants" and the majority of the children in the "Intermediate" and "Leavers" age-groups was carried out, the number examined being slightly in excess of that of the previous year.

The following table gives a summary of these inspections and the number of special inspections and re-inspections:-

A. Routine Medical Inspection.

Entrants.	1,209.
Second Age Group.	651.
Third Age Group.	525.
	<hr/>
Total.	2,385.
Other routine Inspections.	327.
	<hr/>
	2,712.
	<hr/>

B. Special Inspections  
and Re-Inspections. 13,762.

In addition to routine medical inspections, rapid medical surveys of school children have been continued by the medical and nursing staffs, with particular regard to the state of nutrition and the cleanliness of the children concerned. As in previous years, those children found to be of sub-standard nutrition were referred to the Nutrition Clinic and given supplementary cod liver oil, iron, etc. according to their needs, and thus lifted to higher nutritional grades.

#### Nutrition - School Meals, etc.

The School Medical Officers are provided with many opportunities at the routine and special medical inspections of forming an opinion of the general effect of the war on the physical and mental welfare of the children. On the whole it can be said that the health of the children has been well maintained. As far as can be ascertained very few children show signs of any physical or mental deterioration as the result of war conditions, and in a great number of cases the physical and nutritional standard has been found to be much improved. This is probably largely due to the special facilities provided for the provision of school meals at the meals centres and for the supply of milk in school (especially now that, by local arrangement, the milk is delivered at the schools by 9.30 a.m., thus ensuring that appetites have returned in time for the midday meal).

#### Provision of Solid Meals.

During the year the new scheme for the Provision of School Meals, referred to in last year's Report - i.e. on a sliding scale of payment, not exceeding 4d per meal - continued with ever increasing success, as proved by the following table, in which the daily average is shown month by month.

<u>Month.</u>	<u>Free.</u>	<u>On Payment.</u>
January.	288	1904.
February.	327.	1975.
March.	372.	1996.
April.	403.	1992.
May.	357.	2071.
June.	413.	2233.
July.	420.	2228.
August.	420.	2055. *
September.	441.	2068. *
October.	464.	2147.
November.	460.	2294.
December.	445.	2464. *

\* Months during which school holidays occurred.

At the end of the year, according to figures prepared by the Board of Education, Tottenham had a larger proportion of school children receiving a daily hot meal in school than any other area in the country.

An interesting development was the introduction, jointly with the School Meals Scheme, of the British Restaurants, which, in conjunction with the Ministry of Food, was undertaken, at the request of the Council, by the Education Committee under a scheme prepared and controlled by the Director of Education. The already existing organisation and equipment of the School Meals Scheme made possible this expansion to the larger purposes of general Community Feeding, and the successful association of the preparation of meals for adults with that of meals for children.



The growth of British Restaurants also made it possible, through that Service, to provide children, from the latter part of the year, with meals both free and on payment, during school holidays.

#### Provision of Milk.

The provision of milk, both free and on payment, continued throughout the year in spite of the difficulty caused by lack of bottles, which resulted from the "Blitz". In December the Education Committee, in accordance with suggestions made in Board of Education Circular 1569, introduced a much enlarged provision of help and equipment, and by the end of the year the proportion of children taking milk in school had reached 80 per cent.

#### Uncleanliness.

Special attention has been given by the School Nurses, both at the clinics and at the school cleanliness inspections, to the detection, prevention and treatment of uncleanliness and verminous conditions. The school nurses visit the schools at frequent intervals and the children are submitted to a thorough examination to detect any sign of uncleanliness. Those children discovered to be in a verminous condition are followed up by the School Nurses both at school and in their homes. In those cases, where, owing to special circumstances, there was a difficulty in the cleansing being effected at home, the children were cleansed by the School Nurses at the Clinics, and in this connection 140 children were cleansed during the year.

Every child evacuated during the year was thoroughly examined with regard to his or her state of cleanliness and every precaution was taken to ensure that at the time of evacuation each child was in a clean condition. Those children found to be in a verminous condition were either cleaned by their parents or by the school nurses, and again inspected prior to their departure.

Table V (Appendix) shows the number of children found to be unclean and the action taken.

#### Scabies.

During 1941, efforts were redoubled to get as many as possible of the infested persons diagnosed and treated. A valuable contribution, resulting from the Board of Education Circular, 1575 led to the co-operation of Head Teachers, by a daily inspection of hands and wrists of all children, with direct reference to the School Medical Officers of all doubtful cases. In each case diagnosed, home visits followed, and pressure was brought to bear on other members of the family to come for treatment at the various centres. The difficulty of contacting members working away from home has recently been diminished by the employer allowing the worker to attend for diagnosis and treatment.

Thus, in considering the relative figures as between 1940 and 1941, the fact must be remembered that there are not only fewer missed cases in school children, but more treatment of their relatives, as well as a considerably increased local population resulting from the steady return to the London area.

### Ophthalmic Clinic.

During the year there was a total of 486 errors of refraction, including 58 children suffering from squint. In 349 instances spectacles were prescribed, and in every case these were obtained.

The difficulty usually experienced in causing a sensitive school child to wear spectacles was minimised by a periodic checking on the part of the school nurses, and by ensuring through the medium of Toddler Clinics, that treatment was instituted before the child actually commenced attendance at school. In many instances, a potential squint was treated before the actual development of asymmetry, thus forestalling all risk of amblyopia at a later date.

### Aural Clinic.

The Visiting Aural Surgeon, Dr. Clarke, reports that - "The Aural Clinic has been carried on without interruption during the year 1941 at the Municipal Medical Centre, Park Lane. For the greater part of the year there was one session weekly - (a wartime measure) - but as the numbers increased towards the latter end of the year it was decided to revert to the original two sessions weekly. One of these, once a fortnight, is now devoted to the special treatment of tonsils by Tonsil Suction.

For the first five months of the year there was a rather large number of absentees from the Treatment Clinics, no doubt largely due to the continued air raids and evacuation during this period. As conditions quietened down during the latter half of the year, the attendances noticeably improved.

As a fixed objective, for some time, special attention has been given to the sorting out, and detection of pre-disposing causes of aural and nasal troubles in pre-school children. In 1941, 42 pre-school children were examined and prescribed for at the Clinic for nasal defects, alone. This is an increase of 40 over the normal pre-war year of 1938. Whether it is just a coincidence or not, a parallel fall has occurred in the number of similar group children seen for Acute Otitis (middle ear inflammation). There were 4 in 1941 as against 28 in 1938.

There is no doubt that the best way of "treating" Otitis or ear inflammation in children is by prevention, and as practically all acute ear troubles in young children arise through predisposing factors in the nasal mechanism, the early detection and efficient treatment of these nasal factors is the method of choice towards prevention.

There has been a steady decline in the number of cases of Chronic Otorrhoea. The total number seen at the Clinic for the year was only 29, and of these 11 were cases where a radical mastoid operation had been done, in some cases, years previously. The tendency to chronicity in this type of case is well known. Zinc Ionisation has been the main method of treatment and its results in our experience, far outweigh that of any other known to us.

We wish again to emphasise the great importance of including infants and pre-school children in the scheme of approved aural and nasal treatment.



The other methods of treatment which we might now describe as standard at the Clinic, have been fully availed of. Proetz "Displacement" has proved invaluable in the many cases in which it was used. Also, Diastolisation, with its complementary Oscillator-Vibration has been extensively used, and its effects in cases of deafness in children has been quite remarkable.

We might add a word here of recommendation for a rather new method of aural douching which we have used for the last year with gratifying results. It is done by a special type of aural douche (known as Fowler's Douche, U.S.A.) - Bell-shaped arrangement of either glass or rubber (we prefer the rubber) - which fits tightly round and includes the aural canal and pinna, with a long lead-in rubber tube, fitted with stopcock from a douche can at a height of about 6 or 7 feet and a lead-away tube to the sink. The effect is a mild suction which thoroughly cleanses the ear without any risk of injury or discomfort. Using from one to two pints of a warm solution, this affords great relief of pain in cases of acute otitis, as well as providing free drainage which is so important. It is by far the most satisfactory method of treating infants. With one or two applications of this douche, followed by daily applications of suitable "antiseptic drops", with due attention to nasal factors where indicated, the vast majority of cases of acute otitis clear up rapidly.

Since 1938 the subject of the most suitable treatment for enlarged tonsils, as met with in a general school population has received special attention. The Medical Officer of Health has been of the opinion judging from the end results he has observed that far too many cases of "tonsils" have been subjected to operation - done on a kind of "hit or miss" system - and that full due clinical and pathological consideration, with due regard to any associated defects, has not always been taken into account before cases are referred for operation.

In this opinion he is supported by other Medical Officers of Health, many leading Laryngologists and Clinicians. In 1938 at his suggestion, that some recognised, satisfactory conservative method should receive a thorough trial and investigation, we decided with the advice and recommendation of Mr. E. A. Peters, F.R.C.S. to try out the newer method of Tonsil Suction as practised by Mr. Peters. The general outline and technique of this method has been referred to in previous Reports. We started with a small number of selected cases in 1938 and the results were most satisfactory. In 1939 and 1940 we were able to increase the numbers, but unfortunately the dislocation caused by the outbreak of hostilities considerably disorganised our scheme. However, we were able to carry on and steadily increase the numbers. In 1941, in all, 84 cases of "enlarged tonsils", which in the ordinary sense would be referred for operation, were seen at the clinic and we did a full course of Tonsil Suction in 70 of these, who continued attendance, as required.

We cannot do more than refer briefly, in this Report to the general results obtained. We consider that we have done now, a sufficient number of various types of cases as met with in school children, to allow us to come to fairly definite conclusions as to the value of this line of treatment.

We can fully recommend this method as the most suitable for the majority of cases of "Enlarged" or "unhealthy" tonsils amongst school children. We are careful not to allow the pendulum to swing too far on one side and regard suction as a panacea for "all and sundry" types of "diseased" tonsils. In the course of the year we referred 21 cases for operation.



One great advantage of this method is that a child can have a course of suction without any risk, discomfort or expense, and if at the end of this we are satisfied that the tonsils are still "diseased" or septic, or the conditions for which it was undertaken are not showing signs of relief, we can always have recourse to operation.

The method is diagnostic as well as curative. The presence of pus in the tonsil crypts is easily demonstrated. It is well tolerated by children as young as four or five years of age. As it is repeated at only fortnightly intervals for six to twelve sessions, there is no great loss of time from school, or much inconvenience in attendance and there is no "in-between" treatment. One very well worked effect that we have noticed is the reduction in what the parents describe as "the constant tendency to colds".

We wish to point out here that in nearly all the tonsil suction cases, we also do, as a routine, Proetz "Displacement". This is in accordance with the theory that nearly all cases of "diseased tonsils" arise from infections in the nasal sinuses. If after one displacement we find the sinus "clear", we discontinue, but it will be surprising in how many cases - (otherwise unsuspected) - mucopus will be found in the nasal sinuses. Treatment is continued until this is cleared up, roughly about half a dozen applications, concurrently with the tonsil treatment.

One thing to be kept constantly in mind in order to get the best results, is, not to regard the ear, the nose or the throat as separate entities. They are all inter-related and each, as influencing the other, must receive appropriate attention, even when the physical signs and symptoms point only towards the one.

We have not been able to make a complete audiometric survey of all the schools as we had hoped, but a large number have been done and a special session is set aside, once a month for all cases attending the aural clinic with any special cases referred from the schools or other clinics.

The majority of the parents are grateful and appreciative of what is being done, and the teachers are also very helpful in getting the children to attend for their treatment."

The following are the tables of classification:-

MISCELLANEOUS.

CONDITION.	TOTAL.	TREATMENT.	RESULT.
1. Wax in the ear.	15	Removed.	Cured.
2. Epistaxis (nose bleeding).	5	Cauterised.	do
3. Furuncle. (boil in the ear).	6	Treated.	do.
4. Referred for examination.	12	No treatment required.	-
5. Foreign body in the ear.	2.	Removed.	do.
6. Foreign body in the nose.	3.	do	do.
7. Nasal Polypii.	1.	do.	do.
Total.	44.		

T A B L E      A.  
ACUTE OTITIS MEDIA (1) Children over 5.

Diagnosis.	Total (Ears)	Tonsils & Adenoids.	TREATMENT					RESULT.				
			Zinc Ionisation.	Antiseptic Treatment.	Tonsils & Adenoids Conservative: Nasal Diastolisation.	Tonsils & Adenoids Operation.	Cured.	Improved.	Still under treatment or observation.	Left or treat- ment lapsed.	Referred to Hospital for Operation.	Did not attend for or declined treatment.
Acute non-suppurative Otitis Media.	(3) 10	3	Operation before Clinic.	-	3	-	3	-	-	-	-	-
		7	No Operation.	-	7	-	7	-	-	-	-	-
Acute non-suppurative otitis media with Nasal conditions: Enlarged Tonsils & Adenoids.	(2) 9	2	Operation before Clinic.	-	2	-	2	-	-	-	-	-
		7	No Operation.	-	7	4	7	-	-	-	-	-
Acute Suppurative Otitis Media.	(3) 20	5	Operation before Clinic.	-	4	-	4	-	-	-	1	-
		15	No Operation.	-	15	-	13	-	-	-	2	-
Acute suppurative Otitis Media with Nasal conditions: Enlarged Tonsils & Adenoids.	(3) 16	1	Operation before Clinic.	-	1	1	1	-	-	-	-	-
		15	No Operation.	3	14	13	12	-	-	3	-	-
TOTALS.	(11) 55			3	53	18	-	49	-	3	3	-

The figures in brackets indicate the number of cases with Bi-lateral Otorrhoea.

T A B L E    A.  
ACUTE OTITIS MEDIA.    (ii) Children under 5.

	Total (Ears)	Tonsils and Adenoids.	TREATMENT								RESULT.	
			Zinc Ionisation.	Antiseptic Treatment.	Tonsils & Adenoids Conservative: Nasal Diast.	Tonsils & Adenoids Operation.	Cured.	Improved.	Still under treat- ment or observation	Left or treatment lapsed.	Referred to Hosp. for operation.	Did not attend for or declined treatment.
Acute non-suppurative Otitis Media.	-	-	Operation before Clinic.	-	-	-	-	-	-	-	-	-
		-	No Operation.	-	-	-	-	-	-	-	-	-
Acute suppurative Otitis Media.	2 *(1)	-	Operation before Clinic.	-	-	-	-	-	-	-	-	-
		2	No Operation.	-	2	-	-	1	-	1	-	-
Acute Suppurative Otitis Media with Nasal conditions: Enlarged Tonsils and Adenoids.	2	-	Operation before Clinic.	-	-	-	-	-	-	-	-	-
		2	No Operation.	-	2	-	-	2	-	-	-	-
Totals.	4 *(1)			-	4	-	-	3	-	1	-	-

\* The figures in brackets indicate the number of cases with  
Bi-lateral Otorrhoea.



TABLE B -- CHRONIC SUPPURATIVE OTITIS MEDIA.

DIAGNOSIS.	Totals (Ears)	DIAGNOSIS.						TONSILS AND ADENOIDS.	TREATMENT					RESULT.			
		Granulations: Simple Polypi.	Mastoid Disease.	Old Operation.	No Operation.	Enlarged Tonsils and Adenoids.	Nasal Catarrh: Rhinitis: Sinusitis		Primary (Ear)	Collateral (Nose and Throat).							
Children over 5 Chronic Tympanic Sepsis. Complicated by:-									Zinc Iodisator.	Antiseptic Treatment or Cautery.	Tonsils & Adenoids. Conservative Nasal: Diastolisa- tion.	Tonsils & Ads. Operation.	Cured.	Improved.	Still under treat- ment or observ- Left or lapsed treatment.	Refr. to Hospital for operation.	Did not attend for or declined treatment.
Granulations: Simple Polypi.	1	-	1	-	-	-	-	Operation before Clinic.	1	1	-	-	-	-	1	-	-
Mastoid Disease.	10	-	-	-	-	-	-	No operation.	-	-	-	-	-	-	-	-	-
		-	6	-	-	-	-	Operation before Clinic.	6	1	-	-	4	1	-	-	1
		-	4	-	-	-	-	No operation.	2	3	-	-	4	-	-	-	-
Enlarged Tonsils and Adenoids.	2(1)	-	-	-	-	-	-	Operation before Clinic.	-	-	-	-	-	-	-	-	-
		-	-	-	-	2	-	No operation.	2	-	-	-	-	-	-	2	-
Nasal Catarrh: Rhinitis: Sinusitis:	5 (1)	-	-	-	-	-	2	Operation before Clinic.	2	-	2	-	2	-	-	-	-
		-	-	-	-	-	3	No Operation.	3	-	2	-	3	-	-	-	-
External Otitis: Eczema.	-	-	-	-	-	-	-	Operation before Clinic.	-	-	-	-	-	-	-	-	-
		-	-	-	-	-	-	No operation.	-	-	-	-	-	-	-	-	-
TOTALS.	18	-	11	-	2	5	-		16	5	4	-	13	1	1	-	3
Chronic Suppurative Otitis Media Solely.	(1) 11	Children over 5 years.						Operation before Clinic.	5	-	-	-	5	-	-	-	-
								No operation.	6	-	-	-	6	-	-	-	-
Chronic Suppurative Otitis Media Solely.	(1) 5	Children under 5 years.						Operation before Clinic.	-	-	-	-	-	-	-	-	-
								No operation.	2	3	-	-	3	-	2	-	-
Chronic Suppurative Ot: Media with Nasal Condi- tions. Tons. & Ads.	(1) 1	Children under 5 years.						Op. before Cl.	-	-	-	-	-	-	-	-	-
								No operation.	-	1	-	-	1	-	-	-	-
GRAND TOTALS.	35.	17							29	9	4	-	28	1	1	2	3

The figures in brackets indicate the number of cases with Bi-lateral Otorrhoea, with the exception of Mastoid Disease:- Mastoid Disease - Bi-lateral Otorrhoea. (a) Post-operation ... 3. (b) No Operation ... Nil.

TABLE C.  
NOSE AND THROAT CONDITIONS.  
(1) Children over 5.

Diagnosis.	Totals	Tonsils and Adenoids.	Secondary Conditions.					Treatment.			Result.						
			Deafness.	Nasal Catarrh.	Enlarged Tonsils & Adenoids.	Diastolisation.	Antiseptic Treatment.	Proetz Displacement.	Tonsils & Adenoids.								
Primary.									Conserv- ative Treatment.	Operative Treatment.	Cured	Improved.	Still under treatment or observation.	Left or treat- ment lapsed.	Referred to Hospital for Operation.	Declined or did not attend for treatment.	
Sinusitis: Rhinitis.	22	Operation before Clinic.	10	-	6	-	5	7	7	-	-	5	-	1	1	2	
		No operation.	12	-	6	4	5	8	8	3	-	8	-	-	-	1	3
Nasal Obstruction: Rhinitis.	28	Operation before Clinic.	8	1	-	-	8	6	-	-	-	8	-	-	-	-	-
		No operation.	20	1	-	4	17	11	-	3	1	10	2	3	2	1	2
Nasal Catarrh	59	Operation before Clinic.	16	4	-	-	13	2	-	-	-	10	-	-	1	-	3
		No operation.	43	6	-	11	29	7	-	4	1	20	3	4	2	1	13
Enlarged Tonsils and Adenoids.	84	Operation before Clinic.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		No Operation.	84	-	36	-	25	9	15	54	19	45	-	5	6	9	19
TOTALS.	193		12	43	19	102	50	30	64	21	106	7	13	12	13	42	
(11) PRE-SCHOOL (under 5)																	
Nasal Conditions: Sinus Rhinitis.	12	Operation before Clinic.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		No operation.	12	-	-	-	7	6	-	-	-	6	1	-	-	-	5
Enlarged Tonsils & Adenoids.	26	Operation before Clinic.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		No Operation.	26	-	-	-	1	-	-	6	-	3	3	-	1	9	10
Enlarged Tonsils & Ads. with nasal conditions.	4	Operation before Clinic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		No operation.	4	-	-	-	3	2	-	1	-	1	-	-	1	1	1
GRAND TOTALS.	235		235	12	48	19	113	58	30	78	21	116	11	13	14	23	58



Dental Treatment, Elementary and Secondary  
School Children.

Comparison with 1940 is not possible in the same way as it would be between two years under peace-time conditions. During 1941 two dental surgeons have carried out the work as against three during 1939 and 1940, and owing to a steady flow of children back to Tottenham from reception areas, giving a school populations of some twelve thousand by the end of the year, it will be realised that the two clinics have been kept as busy as under normal conditions. The third Dental Clinic at Park Lane Centre (normally run solely by a dental surgeon now on Military Service) has been open for treatment on four sessions per week, both dentists paying two visits, and all patients, adult and children, living in that area, have received treatment at that Clinic.

Owing to the reduction in staff, the total number of children treated in 1941 is, of course, somewhat less than in 1940 - actually averaging 80% of the 1940 figure.

During the year under review, there has been a noteworthy increase in the percentage of acceptances of treatment, and in the numbers submitting themselves to orthodontic treatment.

Details giving statistics of the various forms of dental inspections and treatment will be seen on Tables IV.

By arrangements with the Maternity and Child Welfare Committee facilities are provided at the School Dental Clinic for the treatment of expectant and nursing mothers and children under school age.

This latter provision is much appreciated and ensures that the dental and general physical condition of entrants to the schools is at as high a level as possible.

Orthopaedic Clinic.

During the past year there has been a 30% increase in the attendance at the Orthopaedic Clinic, though the number of treatments given is about 1/3rd of that in the last full pre-war year. An analysis of the new cases examined shows that there were very few cases of rickets, and none of those referred were severe; this is especially commendable in these days of food restrictions. Five new cases of infantile paralysis were examined, some of them having received treatment in Stanmore. In no case was the paralysis very extensive. There was a surprising increase in the number of new cases of congenital deformities - nearly 100%. This may possibly be due to the number of patients now attending the clinic who in normal times visited children's hospitals in Inner London.

Arrangements have now been made for secondary school children to be eligible to attend the clinic; this is a great advance, as foot and back defects, in particular, often first develop or become definitely noticeable between the age of 14 and 16 years, and early recognition and treatment may save much disability in later life.

Surgical appliances were supplied and repairs and replacements effected in 62 instances.



### Infectious Disease.

Measles, Whooping Cough, Chicken Pox and Mumps cause a considerable loss of school attendance, especially in Infant Departments, and in order to keep a check upon the incidence of these complaints in school children, the Head Teachers supply the Medical Department with a weekly list of absences due to infectious diseases. This enables the nursing staff to visit the homes and give appropriate advice in each case. When considered necessary, the school nurse makes a general survey of all the scholars attending any particular class affected, with a view to discovering any newly attacked or missed cases. In the case of diphtheria, swabs are taken from the throats and noses of any suspected children. If the examinations give a positive result the children are excluded until either the swabs prove negative or the diphtheria bacilli are shown to be avirulent.

### Diphtheria Immunisation.

Throughout the year the ordinary sessions were held at the Immunisation Clinics. Every opportunity was taken of impressing upon the parents the advisability of having their children immunised against diphtheria as early as possible.

Much headway has been made in this crusade of educating the parents to realise the vital necessity of immunisation, and increasing numbers took advantage of the facilities offered.

Early in the year an intensive effort was made to secure the immunisation of as many school children as possible, and to this end a scheme was put in hand for a mobile clinic, complete with Calor gas sterilisation plant, to visit each individual school. A special form of consent was sent, with the full co-operation of the Head Teachers and their staffs, to the parents of all school children, informing them that one of the School Medical Officers would attend each school in the near future to carry out immunisation, and asking for their consent as soon as possible.

The steps taken as outlined above proved to be a great success, and a large number of children were speedily inoculated.

In the course of the year 2,739 children were immunised either at the Special Clinics or at the Schools themselves.

### Bacteriological Examinations.

Examinations of swabs (after culture) are carried out daily in the Council's Laboratory, and three negative swabs for diphtheria are always insisted upon before contacts or Hospitalised patients are allowed to return to school - thus minimising the "carrier" population.

Despite this care an unsuspected carrier has caused an occasional small outbreak of the disease, but the above measures, together with the increased percentage of immunised children, have not yet allowed a local epidemic to affect as many as 20 children (and none of these had been immunised).

Vale Road Nursery School.

This Nursery School was evacuated at the commencement of the war to Elvedon Hall, but, as these premises were required by the military authorities, similar suitable accommodation was found at Braunston Manor, Near Oakham, the children being transferred there in October, 1941.

Medical attention and treatment for the children is carried out by a Visiting Medical Officer, appointed for this purpose, and periodical visits are made by the Committee's School Medical and Dental Officers.

All new entrants to the school are submitted to special medical and dental inspection before evacuation, and immunisation against diphtheria is carried out as far as possible prior to their departure.

An outbreak of measles occurred in the early part of the year while the children were at Elvedon Hall. One of the Medical Officers visited the school and all the children were given an injection of immune globin with a view to controlling the spread of infection, with beneficial results. A School Nurse was sent from Tottenham to assist with the nursing of the children.

Later in the year there were a few cases of mumps, but apart from this and the outbreak of measles, the children appeared to derive much benefit from their country surroundings and regularised lives.

School for the Deaf.

As reported last year the deaf children evacuated from this district are accommodated at suitable premises at Rustington, Sussex.

The deaf children remaining in Tottenham are receiving instruction and training in temporary quarters at West Green School. Speech training sessions for both stammerers and other defects of speech are held at this school, but shortage of staff renders impossible the ideal of having a full-time school for these children.

Oak Lodge Special School.

Mentally defective children who are educable, attend the Special Day School at Oak Lodge Finchley. This school is under the management of a Joint Board consisting of representatives of Finchley, Wood Green and Hornsey, and still remains limited in its scope, owing to partial occupation by Fire Service personnel.

Special Day School for Partially Sighted Children.

Those Tottenham children certified by the Committee's Ophthalmic Surgeon as requiring education for the partially blind attend the White Hart Lane Special Day School which is situated in the administrative district of Wood Green.

Special School for Physically Defective Children.

Children found to be physically defective attend the Special Day School which is now accommodated temporarily at West Green School.

G. HAMILTON HOGGEN.

School Medical Officer.







# E L E M E N T A R Y      S C H O O L S.

## TABLE 1.

Medical Inspections of Children attending Public Elementary  
Schools - Year ended 31st December, 1941.

### A. ROUTINE MEDICAL INSPECTIONS.

(1) No. of Inspections in the prescribed Groups:

Entrants ... ..	1,209
Second Age Group ... ..	651
Third Age Group . ... ..	525
Total .. ...	<u>2,385.</u>

(2) No. of other Routine Inspections.. ... 327.

Grand Total... 2,712.

### B. OTHER INSPECTIONS.

No. of Special Inspections and Re-Inspections 13,762.

## TABLE 11.

Classification of the Nutrition of Children Inspected during  
the year in the Routine Age Groups.

No. of Children Inspected.	A. ... (Excellent):		B. (Normal).		C (Slightly Sub-Normal).		D. (Bad).	
	No.	%	No.	%	No.	%	No.	%
2712.	450.	16.5.	1949.	71.9.	295.	10.9.	18.	.7.

## TABLE 111.

### GROUP 1.      Treatment of Minor Ailments (excluding uncleanliness)

Total number of defects treated or under treatment  
during the year under the Authority's Scheme ... 3198.

### GROUP 11.      Treatment of Defective Vision and Squint.

Errors of Refraction (including Squint)...	Under the Authority's Scheme. 486.
Other defects or diseases of the eyes (excluding those recorded in Group 1) ...	11.
Total ...	497.
No. of Children for whom spectacles were	Under the Authority's Scheme.
(a) Prescribed ... ..	349.
(b) Obtained ... ..	349.

Received Operative Treatment ..... 89.  
 Received other forms of treatment ..... 392.  
 Total number treated ..... 481.

TABLE IV.DENTAL INSPECTION AND TREATMENT.

- (1) No. of children inspected by Dentist.  
 (a) Routine Age Groups.

<u>AGE.</u>	5	6	7	8	9	10	11	12	13	14	<u>TOTAL.</u>
<u>Number.</u>	1220	820	894	958	859	1053	884	826	878	293	8685.

(b) Specials ..... 814.

(c) Total ..... (Routine & Specials) ... 9,499.

(2) No. found to require treatment ..... 7,074.

(3) No. actually treated ..... 2,860.

(4) Attendances made by children  
 for treatment ..... 6,291.

(5) Half days devoted to:-

Inspection .....	62.
Treatment .....	605.
Total .....	<u>667.</u>

(6) Fillings:-

Permanent Teeth .....	1,444.
Temporary Teeth .....	728.

Total .....	<u>2,172.</u>
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(7) Extractions:-

Permanent Teeth .....	1,141.
Temporary Teeth .....	5,288.

Total .....	<u>6,429.</u>
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(8) Administrations of general  
 anaesthetics for extractions ..... 491.

(9) Other operations .... Permanent  
 Teeth ..... 421.  
 Temporary Teeth ..... 437.

Total .....	<u>858.</u>
-------------	-------------

TABLE V.VERMINOUS CONDITIONS.

- (1) Average No. of visits per school made during the year  
 by the School Nurses or other authorised persons .... 18.7.
- (2) Total number of examinations of children in the  
 Schools by School Nurses or other authorised persons .. 82,320.
- (3) No. of individual children found unclean ..... 991.



TABLE V (Contd.)

VERMINOUS CONDITIONS. (Contd.)

(4) No. of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921.	140.
(5) No. of cases in which legal proceedings were taken:-	
(a) Under the Education Act, 1921	27.
(b) Under School Attendance Byelaws.	-.

S E C O N D A R Y      S C H O O L S .

No. of pupils inspected - 1st January, 1941 to 31st December, 1941.

ROUTINE MEDICAL INSPECTION.

Age.	10.	11.	12.	13.	14.	15.	16.	17.	Total.
Boys.	3.	65.	121.	57.	43.	75.	5.	1.	370.
Girls.	1.	79.	111.	54.	38.	29.	2.	-	314.
Total.	4.	144.	232.	111.	81.	104.	7.	1.	684.

T E C H N I C A L      S C H O O L S .

No. of pupils inspected - 1st January, 1941 to 31st December, 1941.

ROUTINE MEDICAL INSPECTION.

Age.	12.	13.	14.	15.	16.	Total.
Boys.		16.	49.	24.	21.	110.
Girls.	1.	13.	27.	1.	-	42.
Total.	1.	29.	76.	25.	21.	152.

TABLE 11.

Classification of the Nutrition of Children Inspected during the year in the routine age groups - Secondary and Technical Schools.

No. of children Inspected.	A.		B.		C.		D.	
	No.	%	No.	%	No.	%	No.	%
988.	250.	25.2.	662.	67.0.	72.	7.2.	4.	.4.

TABLE 111.      (Group 11)

<u>Treatment of Defective Vision and Squint.</u>	<u>Under the Authority's Scheme.</u>
<u>Errors of Refraction (including squint.)</u>	171.
<u>Other defect or disease of the eyes.</u>	2
<u>Total.</u>	<u>173.</u>
<u>No. of children for whom spectacles were:-</u>	
(a) Prescribed .....	128.
(b) Obtained .....	93.



TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1) No. of children inspected by the Dentist.

(a) Routine Age Groups.

AGE.	12	13	14	15	16	17	Total.
Number.	190	200	235	168	105	30.	928.

(b) Specials. 41.

(c) Total (Routine & Specials.) 969.

(2) No. found to require treatment. 644.

(3) No. actually treated. 424.

(4) Attendances made by children for treatment. 1,383.

(5) Half-days devoted to:-  
     Inspection. 9.  
     Treatment. 97.

Total. 106.

(6) Fillings:-  
     Permanent Teeth. 952.  
     Temporary Teeth. 2.  
     Total. 954.

(7) Extractions:-  
     Permanent Teeth. 191.  
     Temporary Teeth. 60.  
     Total. 251.

(8) Administrations of general anaesthetics for extractions. 11.

(9) Other Operations:-  
     Permanent Teeth. 237.  
     Temporary Teeth. -  
     Total. 237.

# MATERNITY AND CHILD WELFARE DEPARTMENT.

## ANNUAL REPORT 1941.

### STATISTICAL INFORMATION.

#### Number of Births:

Male .. .. .	780
Female .. .. .	<u>780</u>
	1560

Birth Rate(per 1,000 population) .. ..	14.77
Number of Deaths under one year of age..	61
Number of Still Births registered .. ..	51
Infantile Death Rate per 1,000 live births	46.35
Number of Maternal Deaths .. .. .	3
Maternal Death Rate per 1,000 total births	2.2

#### Cost of Maternity & Child Welfare Services:-

Gross Cost(to 31st March 1942) .....	£ 32,276. 9s. 9d.
Total receipts including specific Govt.Grants	<u>11,021. 0s. 11d.</u>
Net Cost:	<u>£ 21,255. 8s. 10d.</u>

Cost in terms of rate in the £1 - net 5.6 pence.

### CO-ORDINATION.

The interweaving of the Maternity and Child Welfare Service with the School Medical Service has continued during the year under review, in the same smooth manner as previously, in that all Specialist and Dental Sessions have catered for both departments and thus ensured the maximum possible supervision even during the periods of aerial attacks as in the earlier part of the year.

The co-operation of all hospitals as well as Social Service Associations in the area has remained a constant source of help.

### MATERNITY HOSPITAL SERVICE.

For patients desiring or requiring hospitalisation the facilities provided by the Mothers' Hospital, Clapton, and the North Middlesex County Hospital have proved adequate as in former years. These were distributed as follows:-

#### The Mothers' Hospital, Clapton:-

Under the Council's Scheme .. ..	44
Own arrangements .. .. .	12
The North Middlesex County Hospital .. ..	113
Other Outside Institutions .. .. .	<u>60</u>

229



THE HEALTH VISITORS' DEPARTMENT.

The Health Visitors were kept fully occupied throughout the year, -not only with the clinics for infant welfare, ante and post natal, toddlers and dental, -but also with evacuation, home visiting, (as Child Protection Officers as well as nurses) following up and supervising all clinic patients, birth notifications etc.

As their duties associated with air raids diminished during the latter half of the year, so they became more occupied with propaganda, day nursery supervision and the complexities of coupons.

DETAILS OF HOME VISITING BY HEALTH VISITORS.

<u>Expectant Mothers</u>		<u>Children</u> <u>under 1 year.</u>		<u>Children</u> <u>Over 1 year.</u>	<u>TOTALS.</u>
<u>First visits</u>	<u>Re-visits</u>	<u>First visits</u>	<u>Re-visits</u>	<u>No. visits</u>	
1195	2855	1284	6335	16175	27,844
Other visits:-		Infantile deaths . . . . . 28 Still Births . . . . . 72 Ophthalmia Neonatorum . . . . . 4 Pneumonia . . . . . 5 Infectious diseases . . . . . 1142 Special visits-mothers.. 1437 children     397			2,995 70,839

ANTE-NATAL CLINICS.

<u>Centre.</u>	<u>Sessions.</u>	<u>Attendances</u> <u>Mothers.</u>	<u>New Cases.</u>	<u>Post-Natal.</u>
Lordship Lane Municipal Medical Cent.	104	1943	468	128
The Chestnuts Centre, St. Ann's Road.	129	2363	616	140
Park Lane Municipal Medical Centre	103	1683	352	81.
1941 Totals:	336	5989	1436	349
1940 Totals:	314	5210	901	297

I am indebted to Dr. Rickards for the following report on the Maternity Clinics:-

"During 1941, the work undertaken at the Ante Natal Clinics has shown a marked increase at each centre.

At the Chestnuts, the new patients increased from 572 in 1940 to 616 in 1941; at Park Lane from 207 to 352, and at Lordship Lane from 122 to 468. This shows an increase of over 500 new patients during the year; and of course this increase in patients is continued in the repeat visits and post natal visits. The number of sessions was only increased by 22 (336 as compared with 314) and therefore the service has been strained to the utmost.

The evacuation scheme continues to be widely used and is much appreciated by the mothers, and the hospitals in the neighbourhood work in close co-operation with the clinics and assist materially in taking patients developing abnormalities."

Continued.



INFANT WELFARE CENTRES.

Centre.	Sessions.	Attendances Infants weighed.	New Cases.	Over 1 yr.	New Cases.	Examined by Dr.
Lordship Lane Mun. Med. Centre.	246	3614	373	2323	112	1582
The Chestnuts Cen. St. Ann's Road.	257	4493	553	2623	175	2396
Park Lane Mun. Med. Centre.	103	2175	227	1161	81	875
Town Hall.	52	466	54	202	13	---
1941 Totals :	658	10748	1207	6309	381	4853
1940 Totals :	649	12423	1132	7356	800	4774.

I am indebted to Dr. King for the following report on the Infant Welfare Clinics:-

"The numbers attending the Welfare Centres during 1941 showed a steady increase on the previous year. This may not be altogether a matter for congratulation, as it indicates the return to the London area of large numbers of mothers and children. Some of the former have commented upon the paucity or lack of welfare facilities in rural districts and a few have returned to London for short spells, at intervals, partly to seek advice and help.

War conditions have created various domestic problems which the Health Visitors have been able to solve or ease and the Invalid Children's Aid Association, as always, has invariably responded to appeals for children needing convalescence. Courses of ultra-violet light and medicinal iron, in addition to the Government-supplied fruit juices and vitaminised oil, have been administered where indicated, to keep the general standard of health as good as possible.

Mothercraft classes for "leavers" at School, also sewing and Social Classes have been revived during the year."

CHILD LIFE PROTECTION.

The Health Visitors, in their role of Child Life Protection Officers, have, during the year, paid 173 visits to the 22 foster-mothers in the area, who have co-operated in maintaining the health of these children by attending the Welfare Centres.

The 22 children concerned maintained their health despite the rigours of war.

SPECIAL CLINICS FOR CHILDREN UNDER FIVE.

Attendances were well maintained, especially in the Immunisation Clinics, where the numbers were multiplied many times.

Clinic.	No. of consultations.	No. of treatments.
Minor Ailments	36	39
Dental	332	430
Orthopaedic	77	264
Ophthalmic	117	38
Ear, nose & throat	60	132
Artificial Sunlight - No. of Children.	195	2173
Immunisation	Final Schick Tests, 566 (93 in 1940)	Immunised. 883 (107 in 1940).

Most of these clinics are held at more than one centre in the Borough, so that parents are thereby more likely to avail themselves of them during these days of the war-working mother.

The various centres are at (1) The Municipal Medical Centre, Park Lane; (2) The Municipal Centre at Lordship Lane; (3) The Chestnuts Centre, St. Ann's Road; and (4) The Town Hall; each being in a separate quarter of the Borough.

#### HOSPITAL TREATMENT FOR CHILDREN UNDER FIVE YEARS.

For children requiring urgent hospital treatment the agreement already existing with the Prince of Wales' Hospital has continued; and occasionally the aid of the Queen's Hospital for Children has been sought through the medium of Dr. Alice King at the Infant Welfare Centres.

The prior arrangement with the Prince of Wales' Hospital and the North Middlesex County Hospital for consultation and treatment of tonsils and adenoids, (especially where operation is required), has continued to work effectively through the Welfare Centres.

#### BREAST FEEDING.

As the result of the health visitors' enquiries, it was ascertained that 1264 infants have been fed as follows:-

Breast fed .. .. .	784
Part Breast-fed, plus milk, dried milk, or condensed milk	393
Bottle feeding - cow's milk ..	32
dried milk ..	50
Other artificial foods .. ..	5
	<hr/> 1264
Feedings unknown .. .. .	87
	<hr/> 1351
* Total	

\* These refer to notified births and not registered births.

#### DAY NURSERIES.

During the year under review, Tottenham's largest day nursery (for 60 children) was opened; and all three nurseries not only remained full to capacity, but, as the year advanced so their waiting lists swelled. Facilities for the opening of more wartime day nurseries were eagerly sought, but were difficult to find. However, before the end of the year, plans were submitted for the erection of a modified hutted nursery behind the Municipal Medical Centre in Lordship Lane; and it is certain that at least two more wartime day nurseries will be opened during 1942.

Continued.



TOTTENHAM DAY NURSERY  
(evacuated to Bengoe House, Bengoe, Hertford)

This evacuated day nursery continues to be a source of health as well as nursery nurture to Tottenham children requiring residential as opposed to day nursery attention. The quota is made up largely of children requiring constant supervision, either because of a further confinement of the mother, or because of debility in the child. The benefit derived from a period of country air and regular hours is almost miraculous, especially in these times of complete blackout at night.

The register shows that the number of children in residence rose from 32 in January to 37 in December during which period 40 fresh children were admitted; while 35 (including 10 who had reached school age), were discharged.

Of the 37 remaining at the end of the year, there were none under the age of one year; with four under 2; thirteen under 3; twelve under 4; and eight under five years of age - thus maintaining the tradition that the place for a breast-fed child is with its mother.

PARK LANE MUNICIPAL DAY NURSERY.

Though not recognised as a wartime day nursery, this building has been constantly filled to capacity, almost exclusively with the children of war-working mothers; and the fees have been brought into line with those of wartime nurseries.

The health of the children was maintained at a high level throughout the year, and the physical and mental development of each child progressed at rates well above the average for the area.

The average daily attendance throughout the year was 37.85 which reflects the keenness of all concerned.

VALE ROAD WARTIME DAY NURSERY.

This nursery, opened on the 28th April, 1941, is the largest in the Tottenham area, and caters for 60 children, all of whose mothers are engaged in vital war work.

Being in the midst of a district in which factories are more abundant, its entrants tend to be of a lower physical standard than at the Park Lane Nursery, so that an average daily attendance of 40 children for the whole of 1941 may be considered extremely good.

The improvement in the health of each child after a short period in the nursery has been remarkable, and, apart from mild catarrhal conditions the sickness rate has remained very low.

TODDLERS' CLINICS.

Clinics for the supervision of children not in regular attendance at the infant welfare sessions were held weekly at the Park Lane Municipal Medical Centre, and bi-weekly at the Lordship Lane and the Chestnuts Centres, with a view to ensuring that, when these children attain school age, their general resistance and physical condition shall be at an optimum.

Out of a total of 275 attendances since April 1941, 124 of these toddlers were found to have defects requiring treatment.



MIDWIFE SERVICE.  
(Midwives Act 1936)

During 1941 the 8 Municipal Midwives continued their onerous work with undiminished vigour despite all wartime difficulties, and participated in 670 confinements without the loss of a mother, as well as accompanying expectant mothers each Friday to evacuation areas.

RECORD OF WORK.  
(not including work in reception areas)

Cases.	Attended by Municipal Midwives.	Attended by The District Nursing Assoc.	Total.
Deliveries.	603	2	605
Attended as ) Maternity Nurse)	67	6	73
Primipara	212	5	217
Multipara	458	3	461
Ante natal visits	1692	47	1739
Nursings	10457	116	10573
Total home visits	12149	163	12312
No. of Deaths of) Mothers at home)	-	-	-
Patients admitted to hospital:			
(a) during pregnancy	25	-	25
(b) during labour	7	-	7
(c) during puerperium	2	-	2
Ante Natal Clinic)	included in	22	22
Attendances )	clinic figures.		

(In October, 1940, the Tottenham Branch of the Maternity Nursing Association was posted to an Emergency Maternity Hospital in the Midlands.)

PUERPERAL PYREXIA.

The following table shows the final result in each of the 13 cases of Puerperal Pyrexia mentioned below:-

In attendance at the confinement.			Total.	Final Results.	
Doctors' Cases	Midwives Cases.	Occurred in hospitals outside the district.		Recovered.	Died.
3	-	10	13	13	-

Continued.

### MATERNAL MORTALITY.

A Special Report is forwarded to the Ministry of Health of each death of a mother, directly or indirectly connected with child-birth. This report is based on the result of the enquiries made of every nurse, midwife or doctor in attendance upon the mother.

#### Maternal Deaths.

The Registrar General's records show that three deaths were attributed to Tottenham.

The Death Rate per 1,000 live and still births was:-

From Puerperal Sepsis .. .. .	1.47
From Other Puerperal Causes . . .	<u>0.73</u>
Total	<u>2.20</u>

### MATERNITY AND NURSING HOMES.

The number of Nursing Homes on the register at the beginning of the year was 1.

- (1) Application for registration - nil.
- (2) Registered during the year - nil.
- (3) Orders made refusing or cancelling registration - nil.
- (4) Appeals against such orders - nil.
- (5) Number confirmed on appeal - nil.
- (6) Application for exemption - nil (new cases)
- (7) Application for exemption granted - nil
- (8) Closed voluntarily; or owing to removal from district - nil.
- (9) Carried forward from previous year - as above.

\* Hospital exempt from registration -  
The Prince of Wales's General Hospital.

### HOME HELPS.

Assistance towards the services of home helps was granted to 132 mothers.

At the Town Hall a list of suitable women who are prepared to act in this capacity is supplied to expectant mothers and in necessitous cases the cost of a home help may be defrayed by the Maternity and Child Welfare Committee.

### ACCOUCHEMENT BAGS AND MATERNITY OUTFITS.

Accouchement bags are available at the centres and are loaned to the mothers in suitable cases. Necessitous cases are given appropriate consideration in the matter of payment, and maternity outfits are provided and may be had at cost price.

OPHTHALMIA NEONATORUM  
AND  
CASES OF DISCHARGING EYE.

Three cases of Discharging Eye occurred during the year, of which two were notified as Ophthalmia Neonatorum.

Hospital treatment, whenever necessary, is provided at various hospitals, including St. Margaret's Hospital, Kentish Town, and whenever possible, mother and child are admitted together.

Home nursing of these cases is undertaken by arrangement with the District Nursing Association. During the year under review, however, no hospital treatment was required.

The following table shows the final result in the cases above enumerated:

Notifications.	In attendance at the confinement.			Eyes clear.	Died.	Removed. No trace.
	Doctors' Cases.	Midwives' Cases.	Occurred in hospitals outside the district.			
Ophthalmia Neonatorum.	1	1	-	2	-	-
Discharging Eye.	-	1	-	1	-	-
Total	1	2	-	3	-	-

EVACUATION OF EXPECTANT MOTHERS.

During 1941 this scheme was more successful than in 1940 when "blitz" conditions might have been expected to produce a greater response.

372 mothers were evacuated during the year as opposed to 99 during the previous twelve months, with corresponding increases in the number of places reserved at the Bengo House Residential Nursery for older children of these mothers.

Continued.



M. & C.W./9.

#### DENTAL TREATMENT FOR MOTHERS AND CHILDREN.

It is notable that the number of expectant and nursing mothers who have received dental treatment during 1941 was 676 as against 458 the previous year. Of these, 550 were ante-natal and 126 post-natal, all of whom were rendered dentally fit by fillings where preservation was possible, and otherwise, by extraction under local or general anaesthesia. Unfortunately a number of these patients were in a deplorable dental condition when they presented themselves for treatment, so that 156 dentures were supplied, of which 80 were given free and 76 at part-cost.

Treatment of toddlers and Infant Welfare children has continued as in previous years, and led to 332 consultations with 430 treatments.

#### ASSISTED MILK SUPPLY.

The arrangements for the supply of milk at the homes of expectant and nursing mothers and children under 5 continued as in the latter half of 1940, and was supplemented by the Welfare Authority when indicated on medical grounds.

#### \* DISTRIBUTION OF FRUIT JUICES AND COD LIVER OIL.

Following the inception of this scheme by the Ministry of Health, depots were begun at the four infant welfare centres, and resulted in 9 busy sessions in the course of each week.

