

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

Contributors

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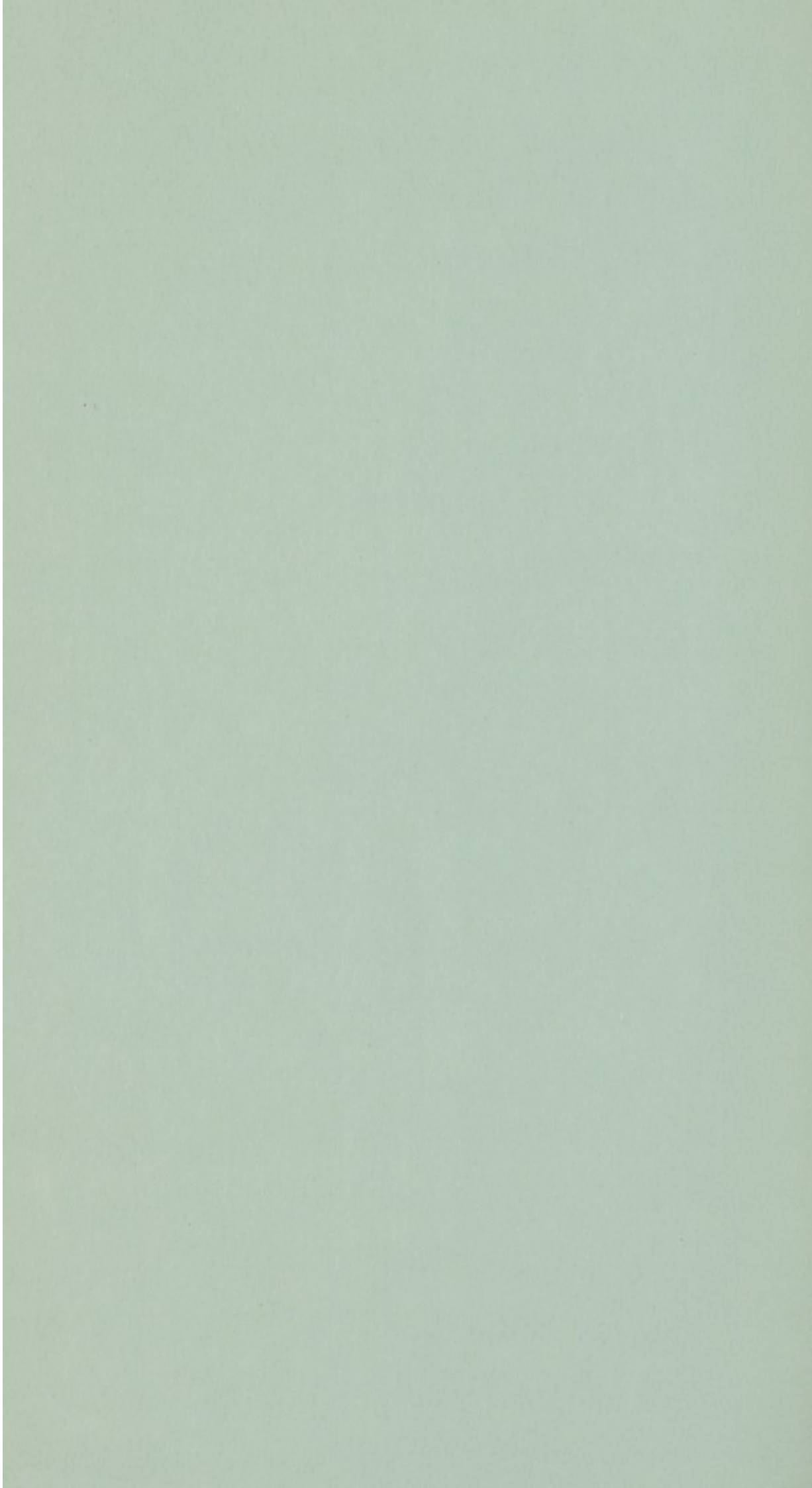
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TOTTENHAM'S HEALTH

1952

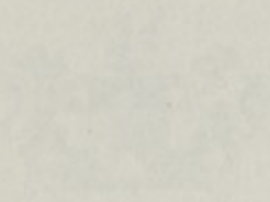
The Annual Report of the
Medical Officer of Health, Borough of Tottenham.





TOTTENHAM'S HEALTH 1952

The Annual Report of the
Medical Officer of Health, Borough of Tottenham.



TO THE HONORABLE

THE SENATE

1933

REPORT OF THE
COMMISSIONER OF THE
BUREAU OF
LABOR AND INDUSTRY

MADE PUBLIC BY THE
GOVERNMENT PRINTING OFFICE

Health Department,
Town Hall,
Tottenham, N.15.

To His Worshipful the Mayor,
Aldermen and Councillors of the
Borough of Tottenham.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my Annual Report on the health of the Borough and the work of the Public Health Department for the year ended the 31st December, 1952.

The *Statistics* as shown in this Report help us to assess past progress and promote future endeavour in a changing pattern of health and disease.

The *birth rate* of 13.24 though lower than the national figure 15.3 (per thousand population) continues, as it has done in the past three years, to show a stabilising trend towards the level noted before the last World War. The *infantile death rate* fell to 20.41 per thousand live births, the *lowest ever recorded* in this Borough.

The *general death rate* showed a slight fall, as spread over the whole year, from 11.99 to 11.25 per thousand of the population. There was, however, a sharp rise in the last quarter of the year of deaths among elderly people, in particular, and associated with the toxic effects of one of the severest fogs experienced in the Greater London area. The main causes of death otherwise were cancer, coronary disease, and other cardio-vascular conditions. Deaths from *Cancer* numbered 271 (158 males, 113 females). This showed a rise over the previous year of 19 in the number of males, the increase reflecting deaths from cancer of the lungs. *Coronary disease* again showed an upward trend, 180 deaths (107 males, 73 females) from this cause.

Deaths from *heart disease* numbered 422 (214 males, 208 females) showing a decrease on the figure of 467 for the previous year. Deaths from *tuberculosis* were the lowest (28) ever recorded in the Borough, though there was no diminution in the number of new cases notified to the Department.

Control of *infectious disease* continued to be satisfactory. No confirmed case of *Diphtheria* was notified during the year, and no death has occurred from this disease during the past seven

years. The number of notified cases of *scarlet fever* was above the average but infection was of a mild character and no deaths were recorded. An epidemic of *measles* occurred during the year but the nature of the illness gave no cause for alarm and no deaths following an attack of *measles* were recorded. Other infectious diseases notified during the year such as *food-poisoning* (9) and *poliomyelitis* (8) called for careful investigation and prompt action by the public health department.

The tables shown in Part III of this Report give a clear picture of the progress made in the *improvement of housing conditions* including the welcome resumption of "clearance area" procedure; and vigorous action to secure the repair of unfit and insanitary houses under sections 9 and 10 of the Housing Act, 1936. The *Tottenham Corporation Act, 1952* will give additional powers to the health department in accelerating procedure for the remedy of urgent sanitary defects. Also new powers in combating *atmospheric pollution* including the setting up of certain specified areas as "smokeless zones".

Special consideration has been given during the year to the subject of *occupational health*. A pilot survey of occupational needs in factory premises has been carried out in active co-operation with the Tottenham Chamber of Commerce and the management of firms concerned. Its findings are included in the body of this Report.

Mention too is made of the growth of the work of the *Old Peoples' Welfare Committee* and its close link with the functions of the Health Committee in relation to the local operation of sections of the National Assistance Acts.

Again I take this opportunity of warmly thanking all members of the Health Department for their excellent work during the year.

To the Chairman (Alderman R.H. Warren) and members of the Health and Housing Committee I wish to express my appreciation of their helpful support in a service of expanding functions and interest.

I am,

Your obedient Servant,

G. HAMILTON HOGBEN,

Medical Officer of Health.

1st September, 1953.

MEMBERS OF THE COUNCIL

Councillor K.A.E. Gregg, J.P.

MAYOR

Alderman The Rt. Hon. The Lord Morrison, P.C., D.L., J.P.

DEPUTY MAYOR

Alderman	E.J. Field	Alderman	J.J. Pagin
"	W.S. Herbert	"	A. Reed, A.C.I.I., J.P.
"	Mrs. M.C. Irving	"	A.R. Turner
"	Mrs. A. Kitchener	"	H.W. Turner
"	Mrs. J.D. Lynch	"	R.H. Warren
Councillor	F.G. Bohringer	Councillor	Mrs. F.C. Ilsley
"	E. Brown	"	F.A.F. Keay, J.P.
"	J.W.H. Brown	"	S.E. Kemp
"	E.J.J. Carter	"	H. Langer
"	A.W. Catley	"	Mrs. A.A. Miller
"	A. Clark	"	The Lady Morrison
"	Douglas Clark	"	I.L. Peirce
"	P.F. Collins	"	A.A. Pawson
"	E.J. Clook	"	P. Readings
"	C.H. Colyer	"	Mrs. A.F. Remington
"	A.J. Davies	"	W.T. Richards
"	T.A. Dutton	"	T.A. Riley
"	R.W.H. Ford	"	P.H. Roberts
"	Mrs. F.E. Haynes	"	G.W. Rowley
"	Mrs. M.W. Holland	"	A.E. Soall
"	J.W. Hollingsworth	"	C. Wise

Town Clerk:

M. Lindsay Taylor, LL.B.

HEALTH AND HOUSING COMMITTEE

Alderman R.H. Warren
Chairman

HIS WORSHIPFUL THE MAYOR, Councillor K.A.E. Gregg, J.P.

THE DEPUTY MAYOR, Alderman The Rt. Hon. The Lord
Morrison, P.C., D.L., J.P.

(ex-officio members)

Alderman	A. Reed, A.C.I.I., J.P.	Alderman	A. R. Turner
Councillor	F.G. Bohringer	Councillor	The Lady Morrison
"	J.W.H. Brown	"	Mrs. A.F. Remington
"	E.J. Clook	"	T.A. Riley
"	R.W.H. Ford	"	P.H. Roberts
"	Mrs. M.W. Holland	"	G.W. Rowley
	Councillor A.E. Soall		

METROPOLITAN WATER BOARD

Council's representative - Alderman E.J. Field

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health	...	G. Hamilton Hogben, M.R.C.S., D.P.H.
Deputy Medical Officer of Health	...	F. Summers, M.B., B.S., D.P.H. (Commenced 1/12/1952)
Chief Sanitary Inspector	...	E.T. Jenkins, F.S.I.A.
Chief Clerk	...	A.W. Lawrence, M.S.I.A.

Sanitary Inspectorial Staff

Senior District Sanitary Inspector - E.S. Glegg (a) (b) (c)

C.J. Cattell (a) (b)	L.J. Kerridge (a) (b)
A.E. Clarke (a) (b) (c) (d)	E. Kipping (a) (b)
D.R. Howe (a)	G.W. Maidlow (a) (b)
C.J. Johnson (a) (b)	W. Openshaw (a)
W.P. Kent (a) (b)	F.J. Parsons (a) (b)

NOTE: (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors' Joint Examination Board.

(b) Meat Inspectors Certificate.

(c) Institution of Sanitary Engineers' Certificate.

(d) Sanitary Science Certificate.

Shops Acts Inspector

F.T.G. Lock

Public Health Nurse

Mrs. W. Mathias, S.R.N.

Clerical Staff

W.E. Lawson (Senior Clerk: General)	D.J. McLintic, B.Com., (Senior Clerk: Housing)
C.J. Lemon	Mrs. E.K. Parker (Left 27/9/52)
C.S. Clark	Mrs. C.E. Moody
Mrs. E.D. Whittle	R. Hull
Miss J. Whillock (Commenced 26/11/52)	

Outside Staff

Foreman	S.H. Reid	Disinfectors:	Apparatus
Disinfecting		Attendants	W. Butcher
Van Driver	E.E. Mannell		A. Dowse
Drain Testers	A.E. Crow		A.E. Moon
	F.T. Dowse	Rodent	
	R.E. Hobbs	Operatives	J. Lawrence
	B. Joscelyn		G.W. Percival
	F.J. Slater	Labourer	A. Ferridge
	R.C. Wilson		

GENERAL STATISTICS

AREA OF DISTRICT IN ACRES	...	...	...	...	3,013
POPULATION: Census 8th April, 1951	...	...	...	...	126,921
Estimate of Registrar General of Population -					
Mid-year, 1952	...	...	...	...	125,800
Pre-War Population	...	...	...	...	144,400
APPROXIMATE NUMBER OF DWELLINGS IN DISTRICT	...	...	...	...	29,277
RATEABLE VALUE OF DISTRICT AT 1ST APRIL, 1952	...	...	...	...	£1,018,284
SUM REPRESENTED BY PENNY RATE AT 1ST APRIL, 1952	...	...	...	...	£4,000
LIVE BIRTHS -					
Legitimate	...	1,589	...	...	1,666
Illegitimate	...	77	...	...	...
Birth Rate (per 1,000 population)	...	...	...	...	13.24
STILL BIRTHS	...	...	...	...	36
DEATHS	...	...	...	...	1,415
Death Rate (per 1,000 population)	...	...	...	...	11.25
Infantile death rate (per 1,000 live births)	...	...	...	...	20.41
Maternal death rate (per 1,000 live and still-births)	...	...	...	...	1.175
COMPARABILITY FACTORS -					
Deaths	...	...	...	...	1.06
Births	...	...	...	...	0.93

(NOTE: Detailed vital statistics appear on pages 64 to 76 in the Statistical Summary).

CONTENTS

	PAGE
PART I CONTROL OF DISEASE	6
" III FOOD CONTROL	19
" III SANITARY CIRCUMSTANCES OF THE AREA	27
" IV FACTORIES AND SHOPS	41
" V GENERAL	58
" VI STATISTICAL SUMMARY	64
APPENDIX STATISTICAL RETURN OF THE WORK OF THE LOCAL AREA HEALTH COMMITTEE NO. 3 OF THE MIDDLESEX COUNTY COUNCIL	77

The underlying cause of the "stress" diseases is not fully understood but lies within the social and working environment of the individual. Control necessitates study of the social and economic environment as well as the physical.

Tuberculosis

The Public Health (Tuberculosis) Regulations, 1921, came into force on the 1st May, 1922, replacing those made in 1903. The statutory obligation for the Medical Officer of Health to keep a

GENERAL STATISTICS

PART I

CONTROL OF DISEASE

The present century has seen a reduction in the incidence of many infectious diseases and in the case of some, such as smallpox, typhoid fever and diphtheria, an almost complete disappearance. The occurrence however of small epidemics of these diseases points to the need for the public health services to be ever mindful of a possible outbreak and to keep before the public the known means for protection against them.

Other infectious diseases such as food-poisoning and poliomyelitis have shown an increase in recent years; calling for prompt recognition and action by the public health department.

Many non-infectious diseases also appear to be on the increase particularly cancer and such "stress" diseases as peptic ulcer, coronary thrombosis and psychoneurosis. The actual increase is difficult to assess as none of them is notifiable and mortality figures alone cannot give a true picture of their incidence.

The underlying cause of the "stress" diseases is not fully understood but lies within the social and working environment of the individual. Control necessitates study of the social and economic environment as well as the physical.

Tuberculosis

The Public Health (Tuberculosis) Regulations, 1952, came into force on the 1st May, 1952, replacing those made in 1932. The statutory obligation for the Medical Officer of Health to keep a

tuberculosis register was removed but in the accompanying Ministry circular the hope was expressed that the register would continue to be maintained. As the requirements for the notification of the transfer of cases from one district to another was removed at the same time, it seemed unlikely at first that an accurate register could be maintained. Medical Officers of Health generally have continued to exchange information on cases and, in Tottenham, the Chest Physician (Dr. T.A.C. McQuiston) continues to co-operate fully so that there has been little change in the information reaching the Department, ensuring that an approximately accurate register remains.

The principal difficulty experienced continues to be in respect of those cases who fail to maintain contact with the Chest Clinic. These may move from the district or may die from a cause other than tuberculosis without the information coming to the notice of the department.

For this reason a review is made periodically of the register and in all cases where no recent entry is recorded the name is checked against the register of electors. Where it is found that the person is no longer registered, the Chest Clinic is notified and the register corrected. In this way 102 cases were removed from the register during 1952.

The number of cases on the register continues to rise. At the 31st December there were 1,682 (1,503 pulmonary and 179 non-pulmonary) which represented an increase of 87 on the previous year.

There were 179 new cases of tuberculosis notified in 1952, 163 being pulmonary cases, compared with 201, 192 of which were pulmonary cases in 1951.

Distribution of New Tuberculosis Cases notified
during 1952

Age Periods	New Cases				Deaths			
	Pulmonary		Non-pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 1 Year	-	1	-	-	-	-	-	-
1 to 4 Years	1	5	1	-	-	-	-	-
5 to 9 "	-	3	1	1	-	-	-	-
10 to 14 "	2	3	2	-	-	-	-	-
15 to 19 "	7	10	1	-	-	-	-	-
20 to 24 "	10	18	3	2	-	-	-	-
25 to 29 "	14	12	-	-	-	-	-	-
30 to 34 "	13	6	1	1	1	-	-	-
35 to 39 "	9	5	-	2	3	-	-	-
40 to 44 "	3	2	-	-	1	1	-	-
45 to 49 "	7	2	-	1	2	-	-	-
50 to 54 "	6	-	-	-	1	-	-	-
55 to 59 "	7	1	-	-	5	-	-	-
60 to 64 "	8	-	-	-	5	-	1	-
65 to 69 "	3	-	-	-	4	-	1	-
70 to 74 "	3	1	-	-	-	-	-	-
75 years and over	1	-	-	-	1	1	1	-
Total	94	69	9	7	23	2	3	-

The following is an analysis of new cases of non-pulmonary tuberculosis notified during 1952:-

	Male	Female	Total
Peritoneum ...	-	1	1
Genito-urinary system	2	1	3
Sternum ...	1	-	1
Meninges ...	1	1	2
Spine ...	2	2	4
Glands ...	1	2	3
Hip ...	2	-	2
	<u>9</u>	<u>7</u>	<u>16</u>

Ward Distribution of Cases of Tuberculosis on the Register at
31st December, 1952.

Ward	Estimated Population	Male		Female		Total	Rate per 1,000 population
		Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary		
White Hart Lane	12,211	123	7	119	12	261	21.4
Park	11,799	80	19	73	15	187	15.8
Coleraine	12,021	52	7	55	2	116	9.7
West Green	11,665	58	8	60	11	137	11.5
Bruce Grove & Central	11,311	71	5	45	3	124	10.9
High Cross & Stoneleigh	11,137	77	12	56	8	153	13.7
Green Lanes	11,179	77	7	61	5	150	13.4
Chestnuts	11,556	65	5	49	10	129	11.2
Seven Sisters	10,678	80	8	52	7	147	13.8
Town Hall	11,175	75	5	50	12	142	12.7
Stamford Hill	11,068	80	4	45	7	136	12.3
Total	125,800	838	87	665	92	1,632	13.4

Note: To obtain the estimated population for each ward, the Registrar-General's estimate for the Borough has been divided in the same proportions as number of persons on the Register of Electors for each ward.

The White Hart Lane Ward is comprised mainly of London County Council and Tottenham Borough Council housing estates, and the priority that has been given to rehousing necessitous tuberculous cases is reflected in the high tuberculosis rate in that Ward. Park Ward which has the second highest rate also takes in part of the L.C.C. estate.

Mass Radiography

In 1952 Mass Radiography Unit No. 6A of the North East Regional Hospital Board visited Tottenham and conducted a general survey in the Borough. The unit was set up at the Territorial Drill Hall and in addition to sessions for organised groups from factories, schools etc., many sessions were arranged for the general public. With the co-operation of the Corporation's Public Relations Officer the visit was widely publicised and the response of the public was most gratifying. Altogether 15,582 persons were X-rayed and I am indebted to Dr. Hugh Ramsey, the Medical Director of the Unit, for the following analysis of the Survey, namely:-

Total number X-rayed	15,582
Recalled for large film	591

Final Analysis of Figures

Groups	Male	Female	Total
Schoolchildren			
No. of miniature films	941	710	1651
No. of large films	19	7	26
School Staffs			
No. of miniature films	18	30	48
No. of large films	1	1	2
Organised Groups (<i>including local factories</i>)			
No. of miniature films	6,329	4,223	10,552
No. of large films	252	118	370
Public Sessions			
No. of miniature films	1,303	2,028	3,331
No. of large films	87	106	193
Cases of Pulmonary Tuberculosis found			
Active primary	1	-	1
Active post primary	15	11	26
Inactive primary	98	55	153
Inactive post primary	103	61	164
Pleural effusion (refused to attend clinic)	-	1	1
Among interesting abnormalities discovered			
Bronchiectasis	6	2	8
Pulmonary fibrosis	25	5	30
Cardiovascular lesions (acquired)	22	37	59
Cardiovascular lesions (congenital)	3	3	6
Diaphragmatic hernia	1	-	1
Transposition of Viscera	-	1	1
Pneumokoniosis	2	-	2
Pneumotocoele	1	-	1
Calcified aortic aneurysm	-	1	1
Cystic disease R. upper lobe	-	1	1
Sarcoidosis	1	1	2
Carcinoma of bronchus	2	1	3
Neoplasm	-	1	1

The cases of active pulmonary tuberculosis were discovered in the following groups:-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Organised Groups (active post primary)	7	9 & 1 pleural effusion	16 & 1
Public Sessions (active post primary)	8	2	10
Schoolchildren (active primary)	1	-	1

B.C.G. Inoculation

A unit of the Medical Research Council continued their investigations and the scheme for B.C.G. inoculation of the volunteer school leavers at the Lordship Lane Medical Centre, Tottenham. Follow-up of the children after leaving school was carried out by health visitors. (Details of this service are set out in the appendix under the work of the Area Health Committee - page 100).

Diphtheria

During 1952 there was not a single confirmed case of Diphtheria, and it is over 7 years since the last death occurred from this disease.

12 diphtheria notifications were received during the year, but in each case the diagnosis was corrected by the hospital authorities. The amended diagnoses were as follows:-

Glandular Fever, 1; Tonsillitis, 10; Tonsillar Abscess, 1.

Diphtheria immunisation facilities are provided at all the health centres under the control of the local County Area Health Committee and arrangements have also been agreed between the majority of general practitioners and the County Council for the family doctor to give the injections. The following table shows the number of children of each age group who have had a complete course of injections:-

Number of Children at 31.12.52. who had completed a course of immunisation at any time before that date

Age at 31.12.52. i.e. Born in year	Under 1	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938
Number Immunised	141	825	1025	1219	1492	1889	1730	1469	1674	1426	1448	1101	1056	1198	1381
Group Totals	4,702					8,188					6,184				
Grand Total	19,074														

Scarlet Fever

The number of cases of scarlet fever notified during 1952 was above the average. The total of 356 cases exceeded the previous year's figure by 111. However, the illness continued to be mild in character, and no deaths were attributed to the disease. 158 confirmed cases were admitted to hospital. The diagnosis in 36 other cases admitted as suffering from scarlet fever was amended as follows:-

Bronchitis, 2; Broncho-Pneumonia, 1; Catarrhal Sore Throat, 1; Chickenpox, 2; Crystalluria, 1; Enteritis, 1; Erythema, 2; Measles, 4; Meningococcal Meningitis, 1; Mumps, 1; Osteomyelitis, 1; Otitis Media, 1; Rubella, 10; Tonsillitis, 6; No obvious disease, 2.

Details of the cases treated in hospital are as follows:-

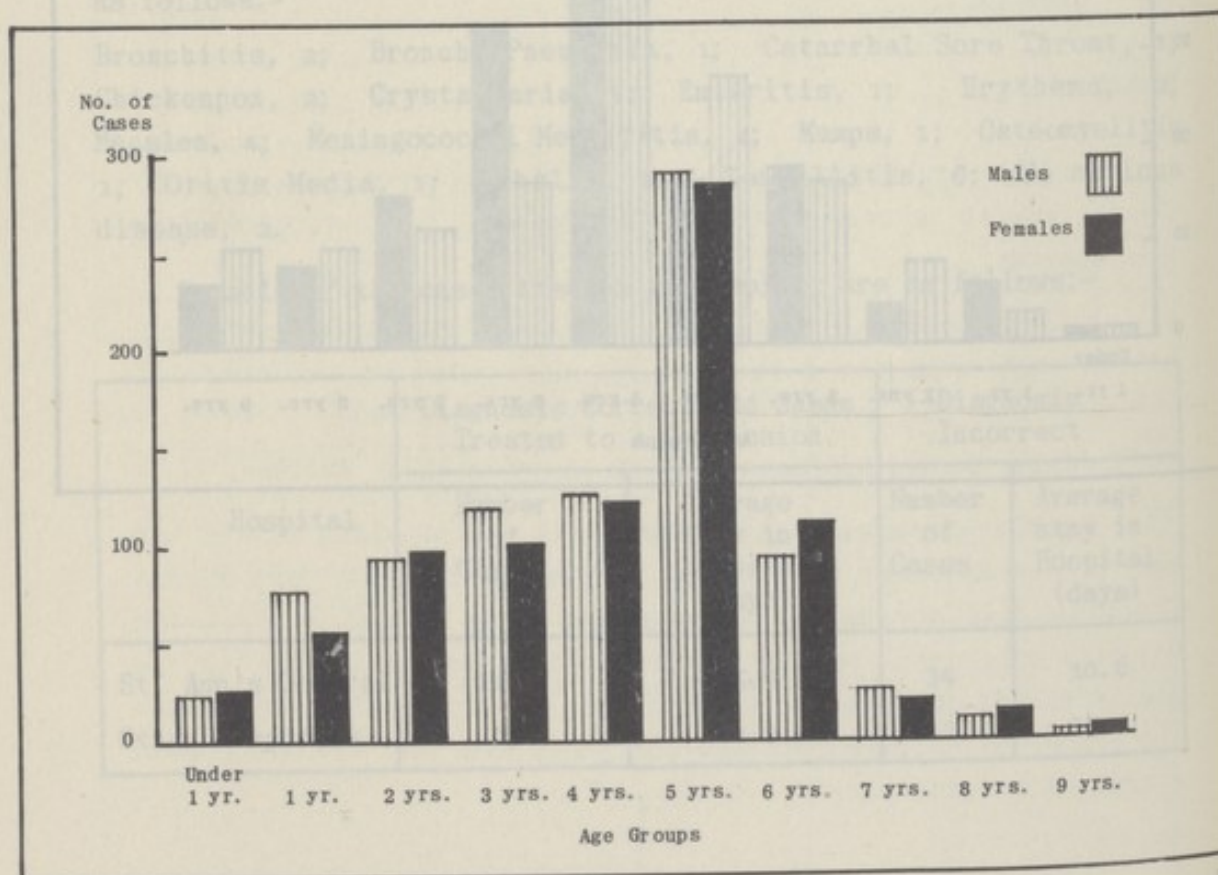
Hospital	Diagnosis Correct and Cases Treated to a Conclusion.		Diagnosis Incorrect	
	Number of Cases	Average stay in Hospital (days)	Number of Cases	Average stay in Hospital (days)
St. Ann's General	129	15.9	34	10.6
Other Hospitals	29	20.9	2	13.0

Measles

There were 1739 cases of measles notified during 1952, the highest figure recorded for the Borough since the disease was made notifiable in 1940. This reflects the increased susceptible child population resulting from the high birth rate at the end of the war. As the principal sufferers of this disease are 5 year old children and the birth rate reached its peak five years ago it is to be expected that future years will see a diminution in the number of cases notified.

Ninety cases of measles with complications were removed to hospital and the average length of stay in hospital was just over 15 days. No death was attributed to this disease.

Measles - Age and Sex Distribution in Children under 10 years.

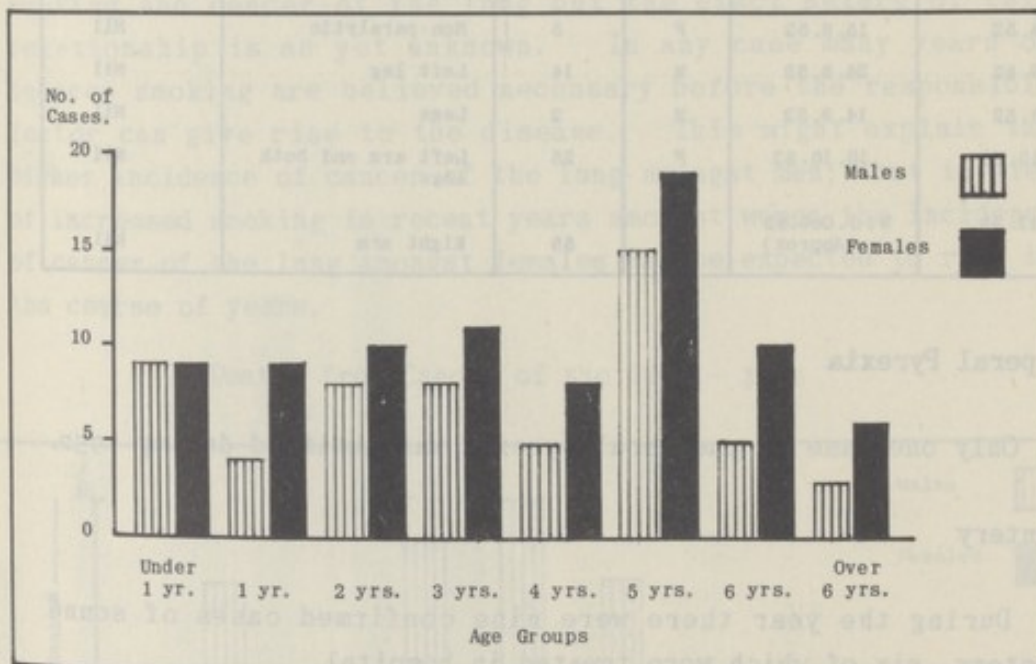


Whooping Cough

During the year 139 notifications of this disease were received. In the case of one baby girl aged 10 months the illness proved fatal.

Free whooping cough vaccination is available at all County Council immunisation clinics. Further details on this subject will be found in my report as Area Medical Officer which is printed as an appendix to this report. (See page 93).

Whooping Cough - Age and Sex Distribution



Poliomyelitis

8 cases of poliomyelitis were confirmed during 1952, and in seven there was associated paralysis. In two cases the disease was of a mild character and was only discovered when they attended hospital as out-patients with "stiffness in the limbs".

In one case there was a history of an inoculation about two weeks before the commencement of the illness.

Details of Cases of Poliomyelitis during 1952

Date of Notification	Date of Commencement Illness	Sex	Age (Years)	Site of Paralysis	Recent History of Inoculations
4.2.52	30.12.51 (Approx).	F	18	Right shoulder	Nil
5.8.52	30.7.52	F	5½	Left shoulder and arm; some weakness in right arm	Inoculated 11.7.52
15.8.52	12.8.52	F	5	Left hand and right leg	Nil
18.8.52	15.8.52	F	5	Non-paralytic	Nil
1.9.52	24.8.52	M	14	Left leg	Nil
25.9.52	14.9.52	M	2	Legs	Nil
13.10.52	10.10.52	F	25	Left arm and both legs	Nil
1.11.52	Mid.Oct.52 (Approx)	M	55	Right arm	Nil

Puerperal Pyrexia

Only one case of puerperal pyrexia was notified during 1952.

Dysentery

During the year there were nine confirmed cases of sonne dysentery, six of which were treated in hospital.

Paratyphoid Fever

Three cases of paratyphoid "B" were notified during 1952. All three cases occurred amongst Army Cadets after a period of training at camp at the beginning of August. Upon examination of faeces specimens from the remainder of the cadets who were at the camp, a fourth Tottenham boy was found to be infected. All 4 boys were treated in hospital.

Food Poisoning

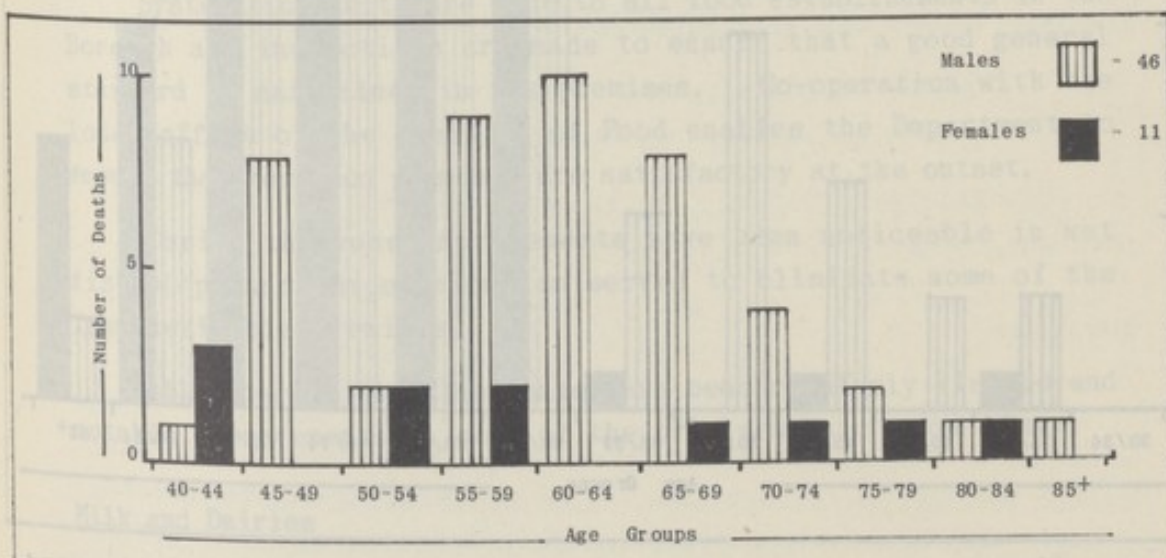
There were nine notified cases of food poisoning during 1952. The cases were scattered and seven occurred in the third quarter of the year and the remaining two in the second quarter. Four cases were confirmed as salmonella infections but in the remainder no organism was isolated.

In one case a duck egg which was implicated was traced back to a farm in a nearby district. It was subsequently learned that the Medical Officer of Health of the district had traced 2 other cases connected with the consumption of duck eggs from the same farm.

Cancer of the Lung

In 1952 there were 57 deaths in the Borough from this disease. Of these 46 were males as against 11 females. There is some evidence to show that there is a relationship between smoking and cancer of the lung but the exact nature of this relationship is as yet unknown. In any case many years of tobacco smoking are believed necessary before the responsible factor can give rise to the disease. This might explain the higher incidence of cancer of the lung amongst men; but in view of increased smoking in recent years amongst women the incidence of cancer of the lung amongst females may be expected to rise in the course of years.

Deaths from Cancer of the Lung - 1952



Coronary Disease

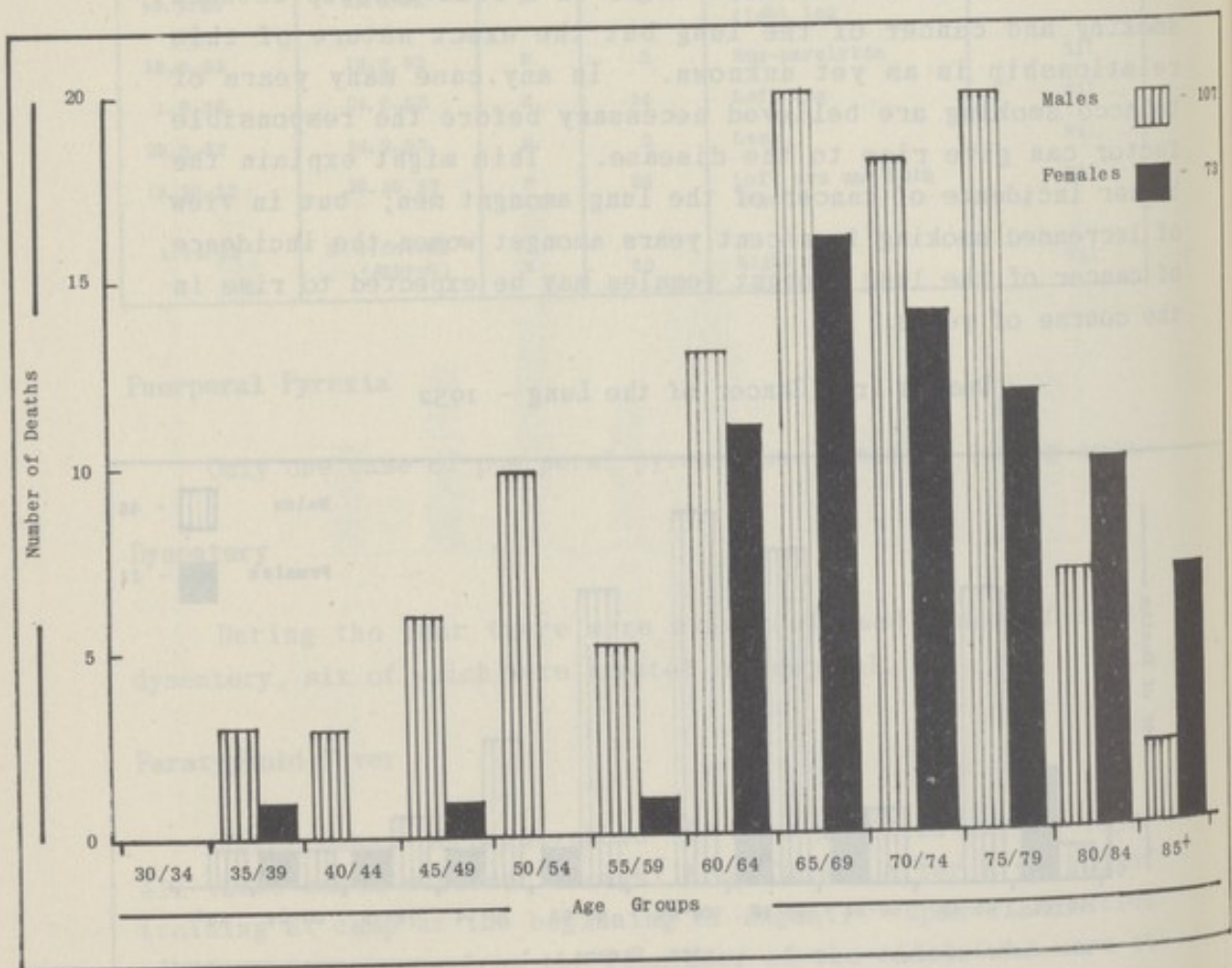
This affection of the heart has shown a steady rise over the past few years. Whilst some of the increase may result from improved diagnosis it is certain that there is a real increase in the incidence of the disease.

The following chart of deaths from coronary disease in Tottenham in 1952 shows a preponderance of males.

Too much reliability cannot be placed on the age distribution figures. Death may not occur for a number of years after an initial attack.

Diagnosis is sometimes made only in the post-mortem room after death has occurred from some intercurrent disease.

Deaths from Coronary Disease



PART II

FOOD CONTROL

During the year the Health Department has paid particular attention to the needs of Health Education in all matters concerning food hygiene, and talks and demonstrations have been arranged with various organisations in the Borough. Of first importance is the routine work of the sanitary inspector in his supervision of food establishments, which brings him into direct contact with the management and the food handler. The value of such practical work on the spot is becoming increasingly evident in this Borough.

Food Premises

Systematic visits are made to all food establishments in the Borough and inspections are made to ensure that a good general standard is maintained in the premises. Co-operation with the local office of the Ministry of Food enables the Department to ensure that new food premises are satisfactory at the outset.

During the year improvements have been noticeable in wet fish shops and competition has served to eliminate some of the less desirable premises.

All catering establishments have been regularly visited and notable improvements in some of the premises have taken place.

Milk and Dairies

On the 1st October, 1951, a Ministry of Food Order came into force specifying that all milk sold by retail within the Greater

London area (which includes Tottenham) must be specially designated milk, that is, "sterilised", "pasteurised", "tuberculin tested" or "accredited" milk.

Every milk dealer known to the Department holds a licence under the Milk (Special Designation) Regulations, and the following is a summary of the licences issued for 1952, namely:-

Milk (Special Designation) (Pasteurised and Sterilised
Milk) Regulations, 1949

Dealers' Licences - "Pasteurised"	...	...	...	65
Dealers' Licences - "Sterilised"	...	...	...	145
Dealers' Supplementary Licences - "Pasteurised"	...	...	...	14
Dealers' Supplementary Licences - "Sterilised"	...	...	...	16

Milk (Special Designation) (Raw Milk) Regulations, 1949

Dealers' Licences - "Tuberculin Tested"	...	...	...	34
Dealers' Licences - "Accredited"	...	...	...	3
Dealers' Supplementary Licences - "Tuberculin Tested"	...	...	...	14
Dealers' Supplementary Licences - "Accredited"	...	...	...	1

During the year 22 applications for registration as milk distributors were dealt with. No applications were received in respect of dairies. Of the 22 new registrations 18 were for new premises and the other 4 were in respect of the change of proprietorship of previously registered premises. The sale of milk from 3 premises was discontinued during the year.

The number of premises and distributors registered at 31st December, 1952, was as follows:-

Number of Distributors registered	...	153
Number of Dairies registered	...	11

The Middlesex County Council is the licensing authority for premises at which milk is processed.

Ice Cream

More and more ice cream is now being sold as a pre-packed article. During recent months two large manufacturers have ceased production altogether. One other manufacturer devotes almost the whole of his plant to the production of ice lollies.

The following ice cream premises were registered in accordance with Section 14 of the Food and Drugs Act, 1938, during

1952, namely:-

Sale only	...	...	29
Manufacture and Sale	...	...	0
Total			<u>29</u>

5 premises which ceased to be used for the sale of ice cream were removed from the register. In one case registration was refused.

The total number of premises on the register at 31st December, 1952 was as follows:-

Sale only	...	...	261
Manufacture and Sale	...	...	34
Storage	...	...	2
Total			<u>297</u>

Samples of Ice Cream submitted for Bacteriological Examination

	Results				Total
	Grade 1	Grade 2	Grade 3	Grade 4	
Samples of ice cream produced in Tottenham.	13	1	1	-	15
Samples of ice cream produced outside of Tottenham.	40	3	1	-	44
Total	53	4	2	-	59

Preserved Foods

110 premises used in connection with the manufacture and/or preparation of preserved foods are registered under Section 14 of the Food and Drugs Act, 1938. During the year 9 new registrations were made. One registration was cancelled when it was found that the business had been discontinued.

The following is a summary of the processes carried on at the registered premises, namely:-

Cooking of Hams and other Meats	...	39
Fish Frying	...	12
Sausage Manufacture	...	55
Preparation of Jellied Eels	...	2
Boiling Shell Fish	...	2
Total	...	<u>110</u>

**Middlesex County Council Act, 1950: Section 11 -
Registration of Hawkers**

Section 11 of the Middlesex County Council Act, 1950, requires the registration of all food hawkers and their storage premises. 10 new applications were investigated by the sanitary inspectors in 1952 and found to be satisfactory. 14 registrations were cancelled where it was found that the businesses had been discontinued.

The following is a summary of the registered hawkers and their storage premises at the 31st December, 1952:-

Articles	Number of persons registered for sale	Number of registered storage premises
Fruit and Vegetables	110	106
Shell Fish	14	9
Fish	7	7
Ice Cream	2	2
Peanuts	2	2
Light Refreshments (Mobile Canteen)	2	2
Total	137	128

Slaughterhouses and Knackers' Yards

Five premises are licensed as slaughterhouses under Section 57 of the Food and Drugs Act, 1938. Regular slaughtering is carried on at only one of these and this establishment deals solely with the slaughter of horses for human consumption.

The number of horses slaughtered in the slaughterhouse during the past five years is as follows:-

<u>1948</u>	<u>1949</u>	<u>1950</u>	<u>1951</u>	<u>1952</u>
3,189	2,889	2,750	2,856	2,454

Another section of the premises is licensed as a knacker's yard and during 1952, 2,442 animals were dealt with there.

Regular visits are made by the district sanitary inspectors to ensure compliance with the regulations.

During the year 14 licences to slaughter were issued under the provisions of the Slaughter of Animals Act, 1933.

Food Condemned

The following tinned articles were condemned during the year, namely:-

Apple Pulp	...	6	Greens	...	21	Plums	...	1,046
Apple Puree	...	3	Hams	...	371	Pork Brawn	...	4
Apple and Blackcurrant	...	1	Ham Loaf	...	2	Potted Meat	...	18
Apples	...	139	Hearts	...	1	Prunes	...	226
Apricot Pulp	...	114	Herring Roes	...	12	Raspberries	...	50
Apricots	...	62	Herrings	...	12	Rhubarb	...	8
Baby Food	...	83	Irish Stew	...	10	Rhubarb Pudding	...	18
Beans	...	391	Jam	...	96	Roes	...	1
Beetroot	...	19	Kidneys	...	7	Salmon	...	62
Blackberries	...	84	Lobster	...	11	Sardines	...	116
Blackcurrants	...	49	Loganberries	...	2	Sausages	...	23
Brawn	...	7	Luncheon Meat	...	702	Silds	...	5
Brislings	...	32	Macaroni	...	18	Soup	...	177
Broth	...	5	Macedoine	...	2	Soup Powder	...	11
Carrots	...	31	Marmalade	...	11	Spaghetti	...	38
Celery Hearts	...	2	Milk	...	1,279	Spinach	...	8
Cherries	...	416	Minced Beef Loaf	...	128	Steak Pudding	...	1
Chicken	...	33	Oranges	...	122	Stewed Steak	...	205
Christmas Pudding	...	5	Orange Juice	...	34	Strawberries	...	69
Corned Beef Hash	...	1	Parsnips	...	19	Tomato Juice	...	7
Crabmeat	...	12	Peaches	...	48	Tomatoes	...	529
Damsons	...	80	Peach Pulp	...	22	Tomato Paste	...	9
Fruit Salad	...	91	Pears	...	386	Tomato Pulp	...	2
Gherkins	...	11	Peas	...	963	Tomato Puree	...	105
Gooseberries	...	32	Pease Pudding	...	2	Tongue	...	15
Grapefruit	...	29	Pilchards	...	84	Tunny Fish	...	1
Grapefruit Juice	...	18	Pineapple	...	122	Veal	...	83
Grapes	...	13	Pineapple Jelly	...	1	Veal and Ham Loaf	...	9
Grape Juice	...	103	Pineapple Juice	...	9	Veal, Pork and Beef Loaf	...	3
Greengages	...	100	Pineapple Pulp	...	2	Veal Loaf	...	31
						Vegetables, Mixed	...	58

Other articles of food condemned were as follows:-

Apricots	...	...	1 jar	Macaroons	...	...	199
Apricots, Dried	...	...	554-lbs.	Marmalade	...	...	1 jar
Beef	...	...	1,301-lbs. 10 oz.	Matzos	...	...	1 pkt.
Biscuits	...	...	97½-lbs.	Milk Chocolate Crunch	...	...	4-lbs.
Butter	...	...	2-lbs.	Milk Chocolate Tea Cakes	...	...	519
Cake	...	...	68-lbs.	Mutton	...	...	312½-lbs.
Cake Mixture	...	...	3 pkts.	Noodles	...	...	8 oz.
Cashew Nuts	...	...	1-lb. 3oz.	Oats	...	...	6½-lbs.
Cheese	...	...	23lbs. 4 oz.	Orange Juice	...	...	2,920 gallons
Cheese Spread	...	...	7 boxes	Pastry Mixture	...	...	12 oz.
Chocolate	...	...	40-lbs. 6oz.	Peaches	...	...	16 jars
Chocolates	...	...	5-lbs.	Peanuts	...	...	4-lbs.
Chocolate Caramels	...	...	8-lbs.	Pears	...	...	185 jars
Christmas Pudding	...	...	2-lbs.	Piccalilli	...	...	10 jars
Cocoa	...	...	2-lbs.	Pickles	...	...	7 jars
Cod	...	...	9 stone	Pigs' Heads	...	...	13-lbs.
Cod Roes	...	...	9 stone	Pigs' Maw	...	...	70-lbs.
Coffee	...	...	7½-lbs.	Pineapple	...	...	1 jar
Conger Eel	...	...	6 stone	Pork	...	...	96½-lbs.
Desiccated Coconut	...	...	2-lbs.	Prunes	...	...	3,172½-lbs.
Dogfish	...	...	5½ stone	Pudding Mixture	...	...	8 pkts.
Eggs	...	...	260	Puffed Wheat	...	...	8 oz.
Figs	...	...	11-lbs. 4oz.	Rice	...	...	1-lb.
Flour	...	...	48-lbs.	Rock Eel	...	...	9 stone 3-lbs.
Fruit Cocktail	...	...	1 jar	Rock Salmon	...	...	3 stone
Fruit Pastilles	...	...	4½-lbs.	Salad Cream	...	...	39 jars
Haddock	...	...	10 stone	Sandwich Spread	...	...	1 jar
Ham	...	...	27½-lbs.	Sausages	...	...	1½-lbs.
Hearts	...	...	103½-lbs.	Semolina	...	...	6-lbs.
Horseradish Cream	...	...	1 jar	Skate	...	...	15 stone
Ice Cream Cones	...	...	2,700	Sponge Mixture	...	...	10 pkts.
Jam	...	...	31 jars	Tapioca	...	...	3-lbs.
Lamb	...	...	45-lbs. 4 oz.	Tomato Ketchup	...	...	1 bottle
Lemon Squash	...	...	1 bottle	Tongue	...	...	8½-lbs.
Liver	...	...	118-lbs.	Veal	...	...	4-lbs.
Lollies	...	...	10	'Vitawheat'	...	...	2 pkts.
Macaroni	...	...	10-lbs.	Walnuts	...	...	102-lbs.
				Whiting	...	...	8 stone

Legal Proceedings

Legal proceedings were taken in 3 cases in respect of contaminated foods, namely:-

(1) Paper in Bread.

Defendants pleaded guilty and were fined £2.0.0. with £1.1.0. costs.

(2) Ants in Sponge Cake.

Defendants pleaded guilty and were discharged absolutely on the payment of £3.3.0. costs.

(3) Cockroach in Bread.

Defendants pleaded guilty and, in view of the fact that it was a first offence, the justices granted an absolute discharge on the payment of £2.2.0. costs.

Food Sampling

The Public Control Department of the Middlesex County Council has supplied the following information of food and drugs sampling in the Borough during 1952:-

FOOD AND DRUGS ACTS, 1938 - 1950

Lists of samples procured in the Borough of Tottenham during the year 1952

Article	Total samples procured	Unsatisfactory
Milk (Various) ...	172	3
Beer ...	1	-
Cakes ...	26	-
Cheese ...	1	-
Cinnamon ...	1	-
Cooked Meats ...	7	-
Curry Powder ...	1	-
Drugs ...	21	5
Fish ...	17	-
Fish Paste ...	1	-
Flour ...	1	-
carried forward	<u>249</u>	<u>8</u>

Article			Total samples procured	Unsatisfactory
brought forward			249	8
Ice Cream	...	...	4	-
Jams	...	...	3	-
Jelly	...	...	7	-
Meat Paste	...	...	2	-
Meat Pie	...	...	7	-
Mincement	...	...	3	-
Non-Brewed Condiment	...	...	1	-
Pickled Herrings in Wine Sauce			1	1
Salad Cream	...	...	2	-
Sausages	...	...	26	-
Soup (Tinned)	...	...	1	-
Sweets	...	...	1	-
Tomato Ketchup	...	...	1	-
Victoria Plums	...	...	4	1
Vinegar	...	...	21	5
Whisky	...	...	25	-
White Pepper	...	...	1	-
Yogurt	...	...	8	-
Total			367	15

The Chief Officer of the Public Control Department makes the following comments on the samples listed as unsatisfactory:-

"The 3 milk samples were each slightly deficient in fat, which on investigation I was satisfied were natural deficiencies. The 5 drug samples were all cases of camphorated oil deficient in camphor. Two official cautions were issued by my Council. The sample of pickled herrings in wine sauce was unsatisfactory because the amount of proof spirit was so small as to make the description 'in wine sauce' false. The packers were cautioned.

The sample of Victoria plums proved to be Pond's Seedling plums. An official caution was issued. In the 5 cases of vinegar, non-brewed condiment was sold for the genuine article. There was one prosecution which resulted in a fine of 3 guineas and an award of £1.15.0d. costs, and three official cautions were issued by my Council".

PART III

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The Metropolitan Water Board has continued to supply water to the Borough and I am indebted to the Director of Water Examination for the following information:-

"The supply to the Tottenham area has been satisfactory both in quantity and quality during the year 1952. Details of the analytical results of the water passing into supply are given in the tables appended.

The area is supplied from two sources:-

- (a) Water from the New River and treated at the Board's filtration works at Hornsey and Stoke Newington.
- (b) River Thames water in Walton reservoir and treated at the Board's filtration works at Walton.

Samples are collected on five days in every week, or more often if required, at each stage of the purification process and tests include physical, chemical and microbiological examination.

The water supplied to this area is not plumbo-solvent.

All new and repaired mains are chlorinated before being restored to use and samples of water from them are tested bacteriologically to ensure that its quality is up to that normally supplied.

Average Results of the Chemical and Bacteriological Examinations of the Water Supplied to the Borough of Tottenham
for the Year 1952

Parts per Million (Unless otherwise stated)

Description of the Sample	No. of Samples	Ammoniacal Nitrogen	Albuminoid Nitrogen	Oxidised Nitrogen	Chlorides as Cl.	Oxygen abs. from Permanganate 3hrs at 27°C	Turbidity in Terms of Silica	Colour, m.m. brown 2ft. Tube Burgess's Tintometer	Hardness (Total)	Hardness (Non-carbonate)	pH. Value	Phosphate as P. O. 111 4	Silica as SiO ₂	Conductivity
New River water filtered at Hornsey works	240	0.038	0.072	6.2	36.4	0.66	0.1	7	302	78	7.7	0.36	13	600
New River water filtered at Stoke Newington works	243	0.038	0.075	6.1	36.5	0.68	0.1	7	300	75	7.8	0.35	13	600
River Thames water filtered at Walton works	245	0.032	0.096	4.3	25.3	1.18	0.2	13	252	60	7.8	0.34	11	475

Bacteriological Results

Description of Sample	No. of microbes per ml. Colonies counted on agar after 20-24 hrs. at 37°C.	Bact. coli Test	
		Percentage of samples negative to Bact. coli in 100 ml.	Bact. coli per 100 ml.
New River water filtered at Hornsey works	17.4	100.0	Nil
New River water filtered at Stoke Newington works	27.3	100.0	Nil
River Thames water filtered at Walton works	15.9	99.6	0.008

Defective Water Pipes and Fittings

A problem which for many years has confronted the Health Department is to obtain the prompt reinstatement of the water supply to private houses, where the Water Board have exercised their power to cut off the supply because of waste taking place due to burst pipes and/or faulty fittings. Under the powers given to the Council by the Tottenham Corporation Act, 1952, the Council may now remedy the defect and recover the cost of the work from the owner. The following is a copy of the relevant section of the Act, namely:-

"Where the Metropolitan Water Board in the exercise of
"their right to cut off the water supply to any inhabited
"house cease to supply any such house in the Borough by
"reason of the defective state of a supply pipe or fittings
"the Corporation may execute such works as they think
"expedient in the circumstances of the case to remedy the
"defect and the expenses reasonably incurred by the Corpora-
"tion in executing repairs shall be recoverable by them
"summarily as a civil debt from the owner of the premises
"supplied but without prejudice to the rights and obliga-
"tions as between themselves of the owner and the occupier
"of the premises"

Drainage and Sewerage

Soil and surface water drainage continues to be operated throughout the Borough in separate systems.

Surface water pollution in the Moselle and Stonebridge Brooks continues to engage the attention of the Health Department staff. With the heavily industrialised portions of the Borough, tracing such pollution is frequently a matter of extreme difficulty. We are glad to acknowledge the assistance and forbearance of the Lee Conservancy Board in this connection.

Closet Accommodation

The water-carriage system operates throughout the Borough.

Steps are now being taken to deal with the lack of closet accommodation in houses which are sub-let. Section 44 of the Public Health Act, 1936, provides power to deal with buildings without "sufficient" closet accommodation. Further assistance

to the Department is given by the Tottenham Corporation Act, 1952, which provides that where two or more parts of a building are occupied as dwellings by separate families, each part shall be treated as a separate building.

During the year there was one appeal by an owner against the requirements of a notice under section 45 of the Public Health Act for the repair of a water closet. The appeal was dismissed.

Atmospheric Pollution

Cases of atmospheric pollution by factory chimneys continue to occupy the attention of the department. The most consistent offenders are still the factories where the fuel is wood waste. Intermittent complaints arise from time to time which involve plants burning coal.

In our experience the cause is usually to be found in the fact that the normal output of the plant is not enough to meet the demand. Efforts to meet the increased demand result in the plant being overworked or forced and, whilst some increase in output is obtained, a resulting loss in combustion efficiency is evident by the emission from the chimney.

In order to minimise the smoke nuisance in any future re-development of the Borough, powers for the adoption of positive measures for preventing atmospheric pollution are now contained in the Tottenham Corporation Act, 1952. This provides for:-

(i) Prior approval by the Corporation of solid fuel burning appliances; and

(ii) The setting up of certain specified areas as Smokeless Zones.

Housing

The Council's responsibilities as a Housing Authority are many and varied and the Public Health Department continues to make its contribution with increasing endeavour.

While the provision of new housing accommodation is still much needed, the repair of unfit and insanitary houses is of paramount importance if the health and well-being of the community is to be maintained.

As has been pointed out in my previous Annual Reports, some

of the operative provisions of the Housing Act, 1936, appear unrelated to many of the problems of the present time.

Housing Act, 1936: Sections 9 and 10

These sections which enable the Council to secure the repair of unfit and insanitary houses continue to be used. It is surprising, how infrequently appeals are lodged against the requirements of notices served under these sections and against demands made for payment.

Consistent with rendering the house fit for human habitation the requirements of the notices are kept to a minimum and this may well be the reason for the lack of litigation.

In some cases where work has been carried out in default, the Council have made orders under section 10 making the cost repayable by owners over a period of years. Legal proceedings were instituted in four cases in respect of sums outstanding and judgement was obtained in each case.

Two appeals were made during the year against notices under section 9, but one was later withdrawn and the Corporation's costs, £7.15.0d. paid by the appellant. In the other case the Judge ruled that as both parties had agreed that all the work properly required had been carried out, he was not prepared to order either party to pay the other's costs and that there seemed to be no purpose in proceeding with the hearing.

The following is a summary of work carried out under sections 9 and 10 in the owners' default during the past 15 years, namely:-

Year	Number of Houses	Cost		
		£	s.	d.
1938	5	66	13	11
1939	31	605	3	5
1940	3	25	4	4
1941	19	319	7	0
1942	21	543	4	10
1943	114	2,559	7	3
1944	45	1,026	6	9
1945	17	658	3	11
1946	152	7,329	16	8
1947	241	14,272	16	9
1948	181	13,160	8	4
1949	106	6,593	6	5
1950	77	4,035	8	5
1951	72	3,186	3	4
1952	47	2,445	1	9

The steady decrease in the value of work done in default noticeable since 1948 has continued during the year. The reasons for this are not at first sight obvious, but if any conclusions can be drawn, they are:-

- (i) The vast amount of war damage repairs carried out has served to improve many houses;
- (ii) The work done by the department immediately following the end of the war in overcoming arrears (in 1947 and 1948 some £27,000 was spent in work in default);
- (iii) The bulk of the complaints are probably made in respect of the older houses, which are dealt with under the Public Health Act provisions.

Housing Act, 1936: Sections 11 and 12

The provisions of section 11 enable the Council to secure the demolition of insanitary houses not repairable at reasonable cost. This section has not been applied so extensively as hitherto. Piecemeal demolition of isolated houses is unsatisfactory where such houses are in areas which require re-development as a whole and the question of clearance area procedure must shortly arise.

Repeated complaints from The Hale area for instance are causing the department concern, particularly where the complaints concern houses in terraces.

PREMISES THE SUBJECT OF DEMOLITION ORDERS - NOT DEMOLISHED

AS AT 31ST DECEMBER, 1952

PREMISES	DATE OF ORDER
10, The Hale	5. 4. 50.
12, The Hale	25. 1. 52.
16, The Hale	2. 3. 51.
16a, The Hale	7. 7. 52.
55, The Hale	2. 4. 48.
57, The Hale	2. 4. 48.*
31, Langham Road	6. 8. 52.*
8a, Lawrence Road	13. 10. 48.
4, Stanley Grove	1. 6. 43.*
5, Union Row	11. 8. 48.
6, Union Row	11. 8. 48.
7, Union Row	11. 8. 48.
8, Union Row	11. 8. 48.

* These premises were still occupied at 31.12.52.

PREMISES DEMOLISHED DURING 1952

PREMISES	DATE OF ORDER	DATE DEMOLISHED
9, Charles Street	7. 1. 52	13. 8. 52
1, Railway Terrace	3. 2. 50	6. 3. 52
2, " "	3. 2. 50	6. 3. 52.
3, " "	3. 2. 50.	6. 3. 52.
4, " "	3. 2. 50.	6. 3. 52.
180, Tewkesbury Road	31. 7. 51.	- . 2. 52.
22, Whitehall Street	31. 7. 51.	10. 4. 52.

PREMISES THE SUBJECT OF CLOSING ORDERS MADE DURING 1952

PREMISES	PART OF PREMISES CONCERNED	DATE OF ORDER
183, Clyde Road	Basement front and rear rooms	7. 7. 52

Housing Act, 1936: Part III

In my Annual Report for last year I emphasised the need for reviving procedure for the clearance of areas under Part III. Confirmation of the Arthur Road Clearance Order was received during the year and it is gratifying to know that a start has been made.

My official representations this year dealt with parts of Broad Lane, Newton Road and Victoria Road. These were submitted in October.

The lack of land for re-development makes it difficult to submit a planned programme, and it is necessary to stress that re-development as a whole must have regard to the areas which are in urgent need of clearance.

It is hoped that proposals for re-development in the Mark-field Area will provide a basis on which the work of dealing with other clearance schemes can be carried out.

Tottenham Corporation Act, 1952

My Annual Report for the year 1952 would be incomplete without special mention of the Tottenham Corporation Act, 1952, in relation to the operation of the Public Health Act, 1936. Administration of the Public Health Act, 1936, may at times be slow and the procedure for securing the remedy of certain conditions not so speedy as could be desired. In the Tottenham Corporation Act, 1952, which received Royal Assent in August of that year, powers were taken to assist in the speeding up process, without at the same time, depriving the Council of its prerogatives.

Part V of the local Act applies in particular to sanitation and buildings and here certain functions are delegated to the Medical Officer of Health or the Sanitary Inspector. By virtue of these new provisions the Medical Officer of Health or the Sanitary Inspector can now deal with stopped-up drains and have them remedied within 48 hours.

Further provisions enable the Council to deal with defective premises by serving on the person concerned a notice that the Corporation themselves intend to remedy the defect. The section also makes provision for the owner to serve a counter notice. While the use of this section must be exercised with discretion, its effectiveness has already been demonstrated.

Abatement Notices - Legal Proceedings

20 Summonses were issued in respect of Abatement Notices, as follows:-

Case No.	No. of days allowed in Order	Fine	Costs	Remarks	
1. } 2. } 3. } 4. }	-	-	5. 5. 0.	Adjourned Sine Die as work commenced.	
5.	28	-	1. 1. 0.		
6.	28	5. 0. 0.	2. 2. 0.		Daily penalty of £2 if order not complied with.
7.	28	-	1. 1. 0.		
8.	42	2. 0. 0.	2. 2. 0.	Two summonses against owner were heard in respect of failure to comply with a nuisance order. A daily penalty of 10/- imposed. Also fined £30 for failing to attend Court on 2 previous hearings and a tenant who acted surety fined £5.	
9.	28	-	2. 2. 0.		
10.	28	-	2. 2. 0.		
11.	28.	1. 0. 0.	2. 2. 0.		
12.	28.	2. 0. 0.	3. 3. 0.		
13.	-	104. 10. 0.	10. 10. 0.		
14.	28	-	2. 9. 6.		
15.	28	-	2. 2. 0.		
16.	28	-	2. 2. 0.		
17.	-	-	2. 2. 0.		Adjourned Sine Die as work completed.
18.	28	10. 0.	1. 7. 6.	Withdrawn on payment of costs as work completed.	
19. } 20. }	-	-	2. 2. 0.		

Rodent Control

Ministry of Agriculture and Fisheries methods of rodent control continue to be observed in all treatment carried out. The Health Department is glad to acknowledge the help and advice of the Ministry's officers and to voice its appreciation of the technical information obtained at the workable area committee. Meetings of this Committee are held three or four times a year and two representatives from the department attend.

From the figures below it will be seen that there is no great variation in the work done as compared with previous years. It would, however, be right to assume that the systematic sewer treatment carried out twice per year helps to keep surface infestations down to reasonable limits. The introduction of a new poison, Warfarin, has enabled us to adopt a new technique in dealing with surface infestations.

Sewer Maintenance - Results of Baiting Manholes

Poison take at Manholes	Treatment No. 15. April/May, 1952.	Treatment No. 16. Oct./Nov. 1952.
Complete	-	-
Good	177	165
Small	257	301
Nil	575	544
Total treated	1,009	1,010
Estimated number of rats killed	5,300	5,305

The following is a summary of dwellinghouses and business premises treated during 1952:-

(1) Dwellinghouses	...	619
(2) Business and Factory Premises		113
(3) Total charge for (2) above	...	£93.6.9d.

Insect Pests

Insect pests continue to be dealt with by the use of D.D.T. and we are satisfied that its application is both cheap and efficient when compared with earlier methods.

From complaints and enquiries received in the department there appears to be an increase in the activities of the wood beetle family. One of the difficulties in dealing with this pest is the unawareness of its presence until the damage has been done.

SUMMARY OF DISINFESTATION WORK DURING 1952

Cause	Private Houses		Council Houses		Other Premises	Totals		
	Houses	Rooms	Houses	Rooms		Houses	Rooms	Other Premises
Ants	7	1	-	-	1 School Canteen	7	1	1
Beetles	34	39	-	-	3 Bakehouses 2 Schools 2 Clubs 1 Canteen	34	39	8
Bugs	224	471	29	72	-	253	543	-
Fleas	10	24	-	-	1 Shop	10	24	1
Flies	3	5	-	-	-	3	5	-
Lice	-	-	-	-	1 Hospital Cubical	-	-	1
Slugs	1	4	-	-	-	1	4	-
Wasps	9	-	-	-	-	9	-	-
Wood Beetle	5	6	-	-	-	5	6	-
Totals	293	550	29	72	11	322	622	11

Disinfestation upon removal to Council dwellings was carried out in 165 instances.

Inspections Carried out by the Sanitary Inspectors

Appointment and Interviews	...	1,131
Cinemas and Halls	...	53
Complaints Investigated	...	4,158
Conveniences and Urinals	...	88
Drains Defective	...	331
Drains Tested	...	508
Factories with Mechanical Power		568
Factories without Mechanical Power		65
Food Poisoning	...	20
Food Premises		
Bakehouses	...	149
Butchers	...	282

Cafes	...	278	
Dairies	...	242	
Factories	...	37	
Factory Canteens	...	64	
Fishmongers	...	147	
Greengrocers	...	147	
Ice Cream Premises	...	301	
Slaughterhouses	...	60	
Other Food Premises	...	524	2,231
House to House	...		46
Infectious Disease	...		429
Other Visits	...		2,797
Outworkers	...		469
Rat Infestation	...		864
Reinspections	...		11,761
Schools	...		37
S.D.A.A. and Housing Act Advances			177
Smoke observations	...		103
Stables and Mews	...		25
Tuberculosis	...		23
Workplaces	...		43

Notices Served.

Statutory:-

Housing Act, 1936:

Section 9	...	344
" 11	...	5
" 12	...	2

Public Health Act, 1936:

Section 24	...	12
" 39	...	44
" 45	...	19
" 79	...	2
" 84	...	1
" 94	...	243

Tottenham Corporation Act, 1952:

Section 35	...	1
" 36	...	1
" 43	...	2
" 46	...	1

brought forward 677
 Tottenham Urban District Council Act, 1900:

Section 48	...	...	2
			679
Informal	...	...	2,096

Defects Remedied

Drains reconstructed	...	45
Drains repaired	...	293
Drains cleared	...	194
W.C. Cisterns repaired or renewed		229
W.C. pans renewed	...	164
W.C. Pans cleansed	...	53
Waste pipes repaired or renewed		159
Rain water pipes repaired or renewed		393
Roofs repaired or renewed	...	898
Eaves gutters repaired or renewed		544
Drinking water cisterns renewed		15
Drinking water cisterns covered		14
Water service pipes repaired	...	115
Water supply reinstated	...	57
Yards repaired or reconstructed		129
Sinks renewed or provided	...	59
Floors repaired or renewed	...	498
Floors ventilated	...	198
Dampness remedied		
by insertion of damp-proof courses		147
by pointing of brickwork		153
by internal rendering	...	318
by miscellaneous remedies		250
Window frames and sashes repaired or renewed or painted	...	619
Coppers repaired or renewed or provided		26
Fireplaces, stoves and ovens repaired or renewed	...	376
Flues and chimney stacks repaired		168
Brickwork of walls repaired and walls rebuilt	...	192
Ventilated food stores provided		3
Rooms cleansed	...	1,322
Staircases, passages and landings cleansed	...	312

Staircases, balconies and steps	
repaired or renewed	130
Noxious accumulations removed	33
Nuisances arising from animals abated	5
Miscellaneous defects remedied	839

Repair of Houses by the Council

Work carried out in default or by agreement with the owners during 1952:-

Housing Act, 1936:

				£	s	d
Section 9	...	47 premises		2,445.	1.	9.
" 11	...	1 "		70.	3.	4.

Public Health Act, 1936:

" 39	...	13 "		231.	5.	2.
" 45	...	2 "		5.	18.	2.
" 79	...	1 "			12.	0.
" 94	...	1 "		3.	12.	10.

£2,756. 13. 3.

PART IV

FACTORIES AND SHOPS

Tottenham has a large number of diverse industries in its area. Altogether there are 726 factories on the Factories Register varying from small businesses with one or two employees to large concerns employing two or three thousand people. Close co-operation is maintained with H.M. Inspector of Factories and systematic and regular inspections are carried out by the sanitary inspectors to ensure compliance with those parts of the Factories Acts which are enforceable by the local authority.

Factories Acts, 1937 and 1948

Inspections for purposes of provisions as to health
(including inspections made by Sanitary Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupier prosecuted
(i) Factories in which Section 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	65	65	2	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	661	568	20	
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	3	3		
Total	729	636	22	

During the year 6 non-mechanical and 63 mechanical factories were found to have been discontinued, and 47 mechanical and 10 non-mechanical factories were started.

Summary of Defects found in Factories

Particulars	Number of cases in which defects were found			
	Found	Remedied	Referred to Factories Inspector	Referred by Factories Inspector
Want of cleanliness (S.1).	3	3		3
Overcrowding (S.2).				
Unreasonable Tempera- ture (S.3).				
Inadequate Ventilation (S.4).				
Ineffective drainage of floors (S.6).				
Sanitary Conveniences (S.7).				
(a) Insufficient	2	2		1
(b) Unsuitable or defective	25	25		2
(c) Not separate for sexes				
Other offences (not including offences relating to Outwork)	5	5		
Total	35	35		6

Outworkers (Sections 110 and 111)

Regular visits are made by the Sanitary Inspectors to the homes of persons notified to the Department as outworkers. It has been found that the home conditions are generally satisfactory and that the cleanliness in such homes is usually above average.

The following is a summary of the types of outwork carried on in the Borough:-

Wearing apparel	262
Artificial flowers	18
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	50
Brush making	5
Feather sorting	3
Carding, etc., of buttons, etc.	12
Stuffed toys	14
Cosaques, Christmas crackers, Christmas stockings, etc.	4
Lampshades	1
Total	<u>369</u>

During the year, 469 visits were made to outworkers' premises. No contraventions of the "Factory Acts" were reported.

A Pilot survey of occupational health

In order to better understand the occupational health needs of employees in local industry, a pilot survey, covering only a part of the Borough, has been carried out by members of the Public Health Department. The locality selected has seventy three factories employing from two or three to a thousand and more men and women. The survey covers a variety of industries ranging from motor garages to furniture factories, from chocolate manufacturers to brass founders. No heavy industry is included other than a firm of civil engineering contractors.

In assessing the number of employees, office staff has been excluded, and employers included only if taking an active part in production.

Employment of Women

A large amount of female labour is employed in work which is light and clean such as gown manufacturers and in the production of radio valves. Many of the women are married and generally do not work a full day. Opinion expressed as to the advisability of employing married women varied. Some firms preferred them on account of their greater sense of responsibility while others complained that the curtailed working day, irregular time-keeping and absenteeism for domestic reasons created administrative and production problems.

Employment of Young Persons

The employment of young persons is general, but the proportion varies according to the nature of the industry. In only two instances has mention been made of an apprentice system. This may be a reflection of the unwillingness of young people to commit themselves to one class of employment over a period of years, and in the case of boys to the realisation of the possible disruption of their subsequent career by compulsory military service. The relatively low wages paid to apprentices no doubt also influence young people in this respect. It must be said, however, that it is likely in this survey that the majority of industries studied did not lend themselves to the apprentice system.

Employment of Old People

No accurate figure has been obtained of the number of employees over pensionable age in the various factories covered by this survey. Some industries do not lend themselves to the employment of aged persons except in such capacities as watchmen, cleaners or caretakers.

One light engineering firm, however, has some 5% of its employees over pensionable age. This is a firm of which the founder recently died. Up to the time of his death he had taken an active part in the running of the firm and no doubt influenced the policy of retention of aging employees. The work carried out in this firm is highly skilled and it may be assumed that the experience of older men is of utmost value in an advisory or supervisory capacity.

Two other firms employing a high proportion of elderly women, on such jobs as sorting and packing, find it better to group them together rather than have them dispersed amongst younger workers of dissimilar interests and abilities. One of these firms before the last World War employed juvenile labour for packing but now finds it more expedient to employ elderly women on this task. Though the wages expected are more than those paid to juveniles and the work generally carried out more slowly, elderly people are said to be more steady and reliable. One firm making screws tried as an experiment to employ mainly elderly men, but abandoned the scheme on account of the poorer vision and slower reactions of these workers.

Employment of Disabled Persons

The percentage of disabled is in general above the statutory quota.

No firm appears to have a system of job placement based upon medical examination, though it must be assumed that the employment of disabled persons is influenced by the nature and degree of disability. In fact one firm in which the post of factory nurse is combined with that of welfare officer, an attempt is made by the nurse to put disabled persons in suitable employment. In another instance a works manager has adapted a machine so that it could be used by a crippled person. It was reported that this employee had been crippled for many years and after a period at the adapted machine she slowly gained confidence and a brighter outlook on life. The manager said he had been assured by efficiency experts that her output was as good as any in the factory. By co-operation between engineer, works foreman and a qualified medical man others might receive similar benefit.

Arrangements for Medical Attention

The appointed factory doctor visits all factories employing "young persons"; and he also visits periodically those factories where there is a statutory requirement for him to do so in respect of industrial hazards.

(a) Firms with One Hundred Employees and Over

Some eight factories out of the twenty-three in this group have no first-aid room and of these four have no trained first-aid personnel available. No firm covered by this survey has a full-time medical officer. One receives a weekly visit by the whole-time medical officer of the parent company outside the Borough. The same firm has a trained nurse (S.R.N.) who shares her time between the firm and another subsidiary. In another instance two contiguous factories share doctor and nurse - consisting of a weekly visit by a local general medical practitioner and the services of a full-time trained nurse and a full-time Red Cross worker. The same firms have an arrangement with the local hospital for emergency treatment.

Two other firms in this group have first-aid rooms with a trained (S.R.N.) nurse in charge, but in both cases the nurse undertakes other duties in connection with welfare and personnel management.

In the remaining ten firms of this group, four of the first-aid rooms are staffed by persons with first-aid certificates and undertaking other duties. The other six firms have no fixed staffing for first-aid purposes, and rely on a number of employees having first-aid training. No extra pay is given for possession of a first-aid qualification.

(b) Firms with Fifty to Ninety-nine Employees

Of the nine factories in this group none has any first-aid room and none employs a doctor or nurse to visit the factory. Seven provide a first-aid box in the charge of an employee holding a first-aid certificate. Two have first-aid boxes but no trained personnel. One of these factories has cutting and stamping machinery and the other carries out processes involving risk of serious burns.

(c) Firms with Twenty to Forty-nine Employees

Of the twenty factories in this group only one has a first-aid room with trained person in charge. Seven have a first-aid box in the charge of a first-aid trained employee. The remainder have a first-aid box but no trained person in charge. One of these factories employing over 40 men is carrying out welding of heavy equipment and sheet metal work.

(d) Firms with Ten to Nineteen Employees

Of the six factories in this category two have a first-aid box with a trained employee in charge and the remaining four have a first-aid box but nobody trained.

(e) Firms with Five to Nine Employees

All provide first-aid boxes but in four out of the six factories in this group there is no first-aid trained person in charge.

(f) Firms with Under Five Employees

All provide first-aid boxes but in only one of the nine factories in this group is there a first-aid trained person responsible.

With one or two notable exceptions first-aid arrangements appear haphazard and the employment of persons holding a first-aid certificate fortuitous rather than a matter of policy.

In only two instances is a medical examination on entry required by the firm, and in both cases the factories are branches of larger concerns and the examination necessary for purposes of a pension scheme.

Welfare and Personnel Management

In the factories covered by this survey the functions of welfare and personnel management generally devolve on employer or

works manager. In two instances the nurse includes some of these functions in her duties.

The interest of employers in the welfare of workers, outside their occupation, varies from the employer who appears to regard his employees as so many units for production and the one who knows all his ninety employees by their Christian names and much of their personal history - more frequently in an old established firm with the family tradition.

Policy with regard to pension and sick-pay schemes varies from firm to firm. Two at the time of visit contemplated starting such schemes in conjunction with insurance companies. A few of the larger firms already have schemes in operation, others a pension scheme only and usually after a qualifying period. In some cases sick employees are paid for a varying period at the discretion of the employer. Generally, however, the sick employee receives only his national insurance benefits, the attitude of the employer being that he had already contributed to the National Insurance Fund.

Wages and Bonus Schemes

Wage levels are difficult to compare. Many employers were at pains to point out that union rates or above are always paid. The principal difficulties in comparing wage levels are due to varying methods of payment, time work, piece work and the operation in some cases of bonus schemes. The latter varies from a few pence a week to as much as two to three pounds. Some firms give a bonus of a week's wages at Christmas time, others give a production bonus twice a year. As one employer pointed out the basic wage is the sum which employees use in comparing their wages with those obtainable elsewhere. The same employer adopts a scheme whereby small increments are given quarterly instead of a larger sum bi-annually or annually.

Labour Turnover and Absenteeism

In trying to assess these two factors it has been found impracticable to examine but a few of the records necessary for accurate information. The view generally expressed by employers is that the numbers are "low". Most of the firms made the point that they have a solid core of long standing employees with the remainder a constantly changing population. In the case of firms whose records were made available to us the labour turnover is high. No sickness records or other causes of absenteeism were available.

Industrial Hazards

Occupational risks cover a wide field and the standard of the precautions taken against them varies from minimal statutory requirements to taking every possible means to safeguard the health and safety of employees.

Dust

In those factories where dust is produced, in general, every effort is made to extract it. The process where this is most difficult of achievement is sanding of wood in furniture factories. There does not appear to be at the moment a really satisfactory solution to this problem.

Fumes

In factories where cellulose spraying is carried out as a routine process, spraying booths are in general use but in only one case masks were being worn.

Other fumes and liquids encountered include ammonia, nitric acid, tar and bitumen, cyanide, carbon monoxide, sulphuric acid and trichlorethylene. The special risks associated with these agents are in general fully understood and statutory notices concerning them posted in the various work-shops.

Eyes

The industrial hazards likely to affect the eyes of workers may be divided into:-

- (a) traumatic (physical and chemical)
- (b) physiological

(a) includes such conditions as foreign bodies from grinding and splashes of corrosive liquids. (b) includes conditions resulting from considerable ocular strain. Two examples encountered in this survey concerns the manufacture of radio valves and the process of cutting dies.

In the case of radio valves, lenses are provided for inspection of the assembled "stems"; but no such aid is given to those assembling the stems. Another important eye hazard met with is "arc eye" in welding. Both employers and employees appear well aware of this risk.

Noise

Processes involving excessive noise, observed during the survey, include sanding wood, metal beating and engine testing.

This hazard could be mitigated by better segregation of the process which in the case of engine testing is to some extent being achieved. In other cases such suggestion may be impracticable owing to possible interruption of the work cycle. Workers appear to acquire a surprising tolerance to the noise.

Weight Lifting

In a number of factories considerable weights have to be lifted from place to place. Special apparatus is installed in many cases ranging from mobile cranes to hand trolleys.

Exposure to Weather

Two firms, a civil engineering contractor and a welding firm have employees exposed to bad weather conditions; and in both cases the firm provides protective clothing.

Dermatitis

The incidence of occupational dermatitis appears to be low, the chief risk occurring in the factories observed, appears to be with synthetic glues. One firm dealing with dyes made the point that dermatitis was a risk of using the agents provided to remove the stains. Several firms using cutting oils recorded no cases of dermatitis in recent years. All the firms in which this hazard exists appear to be very "barrier cream conscious".

Buildings and Plant

With the exception of a few mainly small workshops the factory premises are generally in modern type buildings in a good state of maintenance and repair. In all cases where accommodation is old or of rambling development, the management are making the best of the facilities at their disposal.

Overcrowding

No overcrowding of plant or personnel appears to exist, though in some instances there is a certain amount of congestion due to finished and partly finished work awaiting removal. This is said to be due to seasonal demands.

Sanitary Accommodation

In all cases the facilities provided are in accordance with the Sanitary Accommodation Regulations, 1938, although in some instances the number of water closets appears insufficient.

Washing Facilities

In all cases some provision is made for washing. This ranges from a single basin with a cold tap to elaborate arrangements including provision of shower-baths. For drying the hands the majority of firms have roller towels and in some, individual towels are provided. One firm has installed electric hand driers and another, individual paper towels.

In some of the engineering firms we were told that the men preferred to have a bucket of really hot water in the workshop for washing their hands rather than use the normal facilities.

Lighting

Natural or artificial lighting is generally good in the factories under review, and mostly above statutory requirements. Managements seem fully conscious of the need for efficient illumination. In some cases the colour schemes of decoration materially affect the brightness ratios and the environment is appreciably improved.

Cleanliness of Premises

Having in mind the processes and trades being carried on the standard of cleanliness is generally high.

GENERAL

Special Clothing

In most instances the employee has to find his own overalls although in a few very dirty jobs overalls are provided by the employers. One firm allows an annual sum to employees for the purchase of overalls. Protective clothing of other types is provided where necessary.

Seating

Where seating is practicable it is provided and used. Only one firm appears to have considered the relation of the seat to production and the comfort of the worker.

Smoking

Generally speaking smoking on factory premises is not allowed where it constitutes a risk of fire as in paint works, furniture and paper factories. One furniture factory however does allow smoking, their argument being that employees would smoke anyway either in the lavatory or surreptitiously at the job. The firm

prefers to take the risk of fire from permitted smoking rather than from a hurriedly discarded cigarette end. Another firm with a lesser fire risk permits smoking up to 1½ hours before finishing work so that any likely fire would be spotted before closing the premises.

Social Activities

The smaller firms have little or nothing in the way of social activities. The larger firms vary widely in the facilities provided. One works manager stated their social club was a failure because of the situation of the firm's premises some distance from public transport. In the same road however another firm has a very flourishing social club.

Major considerations in the success of social activities appear to be suitable premises, canteen facilities and enthusiasm on the part of some member or members of the firm.

Canteens

The provision of works canteens as might be expected varies with the size of the firm. Most of the large firms provide well equipped kitchens and dining rooms usually run by an outside caterer. One firm expressed the view that the canteen was worth while in ensuring that employees could have at least one square meal a day. This firm has made a special effort in decorating and constructing the dining room in such a way as to avoid the factory atmosphere. The standard of hygiene in the canteen kitchens is generally high. Some firms share canteen facilities and one firm arranged a "meal voucher scheme" at a local restaurant.

Summary of Findings

- (1) Positive methods for safeguarding the health of employees in many factories particularly the smaller ones, is at present haphazard and unorganised.
- (2) First-aid equipment is very nearly useless unless associated with trained personnel to use it.
- (3) In the smaller factories particularly, there is evidence of the need for health education in matters relating to industrial processes and working environment.
- (4) The useful employment of able aged persons in local factories shows there is scope for further discussion with managements in tackling this problem on a broader scale.

(5) While not attempting to give a complete picture of factory conditions generally in the Borough, the findings of this small pilot survey give clear evidence of the need for further inquiry and ultimate action.

(6) The need for an organised local industrial health service, largely supervisory and advisory is apparent. There is evidence too that such a service would be welcomed and used.

List of Industries Covered by the Survey

Furniture	4
Ladies Clothing	8
Footwear	4
Illuminating engineers and light engineering	1
Light engineering and woodwork	1
Motor repairs and light engineering	4
Precision machinery and fine machine tools	1
Engineers (Internal Combustion Engines)	1
General Engineering	1
Sheet Metal and general engineering	1
Engineers and foundry	1
Civil Engineering contractors	1
Screw machine products, plastic mouldings	1
Welding	1
Metal Containers	1
Saws	1
Die Sinker	1
Screws	1
Electric cables and accessories	1
Electrical switchgear assembly	2
Electrical power engineers	1
Repair of heavy electrical equipment	1
Servicing petrol pumps and bulk meters	1
Accumulator makers and repairers	1
Carbon papers, ribbons and inks	2
Cartons and colour printing	2
Household stationery	1
Paper goods (albums, jigsaw puzzles, etc.)	1
Magazine binding	1
Book binding	1
Paper bags	1
Moulded fibre goods	1
Luggage manufacture	1
Leather dressers	1
Paints and varnishes	2
Pianos	1
Coopers	1
Beer bottling	1
Bread and Confectionery	1
Chocolates	1
Pencils	1
Radio Valves	1
Fur Dressers and dyers	1
Buttons	1
Loose covers (car seats)	1
Mirrors	1
Brilliant cutting	1
Shop fitter	1
Advertising display manufacturer	1
Wholesale motor factors	1
Store (packing and dispatch of toys)	1
Toy maker	1
Tiled fireplace maker	1
Total	<u>73</u>

Appendix (ii)

POPULATION OF FACTORIES

Population	Mechanical Factories		Mechanical Bakehouses		Factories	
	Total	Population	Total	Population	Total	Population
Under 5	9	26	-	-	9	26
5 - 9	6	40	-	-	6	40
10 - 19	6	106	-	-	6	106
20 - 49	19	596	1	30	20	626
50 - 99	9	586	-	-	9	586
100 and over	23*	6451*	-	-	23*	6451*
Total	72	7805	1	30	73	7835

- * This includes a civil engineering contractor's depot with a "resident" population of just over 200 and a population of over 1000 based on the depot. Both figures are included in the total.

FIRST AID WITHIN FACTORIES

Service Provided	100 and over	50 - 99	20 - 49	10 - 19	5 - 9	Under 5	Total
First Aid Room - Trained nurse (SRN), visiting Medical Officer	3*	-	-	-	-	-	3
First Aid Room - trained nurse (SRN)	2	-	-	-	-	-	2
First Aid Room - first aid trained person - room staffed	4	-	-	-	-	-	4
First Aid Room - first aid trained person available in works	6	-	1	-	-	-	7
First Aid Boxes - first aid trained person responsible	4	7	7	2	2	1	23
First Aid Boxes - no trained person responsible	4	2	12	4	4	8	34
TOTALS	23	9	20	6	6	9	73

* Two of these factories share facilities so that the actual number of first aid rooms is one less than shown in the table.

Shops

The supervision of shops and effective administration of the Shops Act are secured by systematic visitation by the Shops Act Inspector, who maintains a register of all classes of shop premises in the Borough.

In the general administration of the Shops Act 2,603 inspections were made during the year. Most contraventions recorded have been of a minor character, such as failure to exhibit statutory notices and keep proper records of the hours of employment of young persons. Verbal warnings and notices to the number of 320 were issued in this connection.

Shops in Tottenham (Remainder) Area are closed for the weekly half-holiday on Thursday, and in the Harringay Area on Wednesday at 1.0 p.m., with the exception of Butchers who close on Monday at 1.0 p.m. throughout the Borough, subject to the alternative day (Saturday) in all cases. Close supervision is exercised in order to see that the weekly half-holiday is correctly observed, 201 visits being made for this purpose.

Half-Holidays for Shop Assistants

Every shop assistant must be allowed a half-holiday once a week commencing not later than 1.30 p.m. The rule applies whether the shop is required to be closed for a weekly half-holiday or not.

Meal Times

The requirements in respect of assistants' meal-times are as follows:-

Dinner:- If the hours of employment include the hours from 11.30 a.m. to 2.30 p.m., every assistant must be allowed an interval of $\frac{2}{3}$ hour within that time if the meal is taken on the premises, or an interval of a full hour within that time if the meal is taken off the premises.

Tea:- If the hours of employment include the hours from 4.0 p.m. to 7.0 p.m., each assistant must be allowed an interval of half-an-hour within that time.

No assistant shall be employed more than 6 hours (5 hours if under 18) without an interval of at least 20 minutes being allowed during the course thereof.

It has become the practice in many shops to allow assistants a tea break of 10 minutes during the morning and afternoon.

General Closing Hours

An order in Council was made by the Secretary of State revoking the provisions of the Shops Act, 1950, relating to the general closing hours of shops during the winter months.

There was no suspension of the General Closing Hours during the Christmas period 1952.

Sunday Trading

The provisions of the Shops Act restricting Sunday trading are effectively enforced by means of investigations and observations. 78 visits were made for this purpose, and 3 warning notices were sent in respect of contraventions.

Shops Act and Young Persons Employment Act, 1938

Regular investigations and inspections were made in connection with these Acts, and it has been ascertained that the conditions of employment have improved, both as to the hours of employment of young persons and the arrangements made for the health and comfort of shop workers generally. 236 visits were made in connection with these Acts.

It is gratifying to note that the provisions of the Act have been well observed.

PART V

GENERAL

Medical Examination of Council's Staff

During the year 168 candidates were medically examined for the purposes of the superannuation scheme. Six persons failed to pass the examination.

Nine employees were medically examined in connection with the Sick Pay Scheme.

Establishments for Massage and Special Treatment

Part XII of the Middlesex County Council Act, 1944, provides for the annual licensing of establishments of this description. These are defined by the Act as "premises used for the reception or treatment of persons requiring:-

- (a) massage, manicure or chiropody; or
- (b) electric treatment or radiant heat, light, electric, vapour or other baths for therapeutic treatment; or
- (c) other similar treatment."

Five new establishments were licensed during the year and at the 31st December, 1952, there were twelve licences in force in the Borough.

A proposal to make byelaws prescribing qualifications on the lines recommended in the Cope Report on Medical Auxiliaries, failed to gain Home Office approval.

Rag Flock and other Filling Materials Act, 1951

At the 31st December, 1952, one establishment was licensed for the manufacture of rag flock. Samples of the rag flock product submitted for laboratory examination were found to pass all

the tests prescribed in the regulations.

24 premises were registered for the use of filling materials.

Pet Animals Act, 1951

At the 31st December, 1952, 13 premises were licensed as Pet Shops in accordance with the Pet Animals Act, 1951. Regular visits are made to the premises by the district sanitary inspectors to ensure that the requirements of the Act and the licensing conditions are complied with.

Public Health Laboratory Service

The Public Health Laboratory Service provides a comprehensive service for the bacteriological examination of specimens submitted by general practitioners and local authorities.

The existing system for the supply of containers and the delivery of specimens by the Public Health Department remains unchanged. Specimens may be sent to the Public Health Department and providing they reach there not later than 3.0 p.m. on Monday to Friday and 11.0 a.m. on Saturday, they will be sent on the same day by special messenger to the Hornsey branch laboratory. As it is not possible to send a second messenger on any one day, it is essential that specimens be delivered to the Town Hall before the times stated. Alternatively, specimens may be sent direct to the Hornsey laboratory, which remains open until 5.0 p.m. on Monday to Friday and 12 noon on Saturday. The address is:-

Public Health Laboratory,
Coppett's Wood Hospital,
Coppett's Road,
N.10

A 24-hour emergency service is maintained by the Central Laboratory at Colindale.

The following is a summary of the work carried out during 1952, namely:-

Record of Examinations

Throat/Nose Swabs: Total Specimens	...	...	...	180
Diphtheria Bacilli	...	...	...	-
Haemolytic Streptococci	...	...	...	41
Negative	...	...	...	139
Faeces: Total Specimens	...	...	...	201
Shigella	...	...	...	7
Salmonella	...	...	...	6
Negative	...	...	...	188
Sputum: Total Specimens	...	...	...	7
T.B. Smear	...	...	...	-
Other Organisms	...	...	...	6
Negative	...	...	...	1
Pertussis: Total Specimens	...	...	...	79
Postnasal Swabs	...	...	...	15
Negative	...	...	...	64
Ice Cream: Total Specimens	...	...	...	59
Water: Total Specimens	...	...	...	9
Domestic Supplies, etc.	...	...	...	3
Swimming Pools	...	...	...	6
Miscellaneous Specimens	...	...	...	289
Total Number of Specimens				<u>824</u>

Old People's Welfare

The welfare of the aged is of growing concern to local authorities. In Tottenham, to meet this need, the Council sponsored the establishment of an Old People's Welfare Committee. Serving on this Committee, in addition to members of the Council, are representatives of all voluntary and religious organisations who have some function in the welfare of the community. The Town Clerk acts as Honorary Secretary and, in addition, the Council have appointed a full-time Old People's Welfare Officer. The work of the Committee is financed by donations and money raised by various activities, such as concerts and garden parties, but the major portion of the cost is met by a grant to the Committee by the Tottenham Borough Council, which amounted to just over £2,000 in the year ended 31st March, 1953.

The following brief summary of some of the work carried out by the Committee has been extracted from the annual report of the Hon. Secretary for the year ended 31st March, 1953:-

(a) Clubs

Three clubs are organised by the Committee and these have maintained a steady and active membership of about 200 each. Members are charged a weekly subscription of 2d. Meals, charged at one shilling per meal, are served at the clubs on Tuesdays and Thursdays and an average of 300 are served each week. Film shows, socials, concerts, etc., have been arranged, the artistes giving their services voluntarily. The old people take an active interest in the clubs, which play an important part towards the happiness and well-being of the elderly.

(b) Outings and Parties

A number of outings were organised during the summer and, in the winter, theatre and circus visits were arranged. The cost in each case was met either by the individuals or out of the club funds. Three very successful Christmas parties were arranged by the clubs.

(c) Chiropody Service

This very successful service which commenced during the year is greatly appreciated by the aged and there is a heavy demand for appointments. Since starting in May, 680 patients have received treatment, the charge being one shilling per foot. Sessions are held twice weekly at Lordship Lane Medical Centre, and Lealand House, High Road.

(d) Boot and Shoe Repairing Service

This is another service which has started during the year. With the co-operation of the "St. Crispin Group" of Shoe Repairers it is now possible for all aged folk in the Borough to have footwear repaired at reduced prices. The seven repairers are well spread around the Borough, making it possible for the old people to take the footwear to the shop nearest their homes.

(e) Christmas Parcels

Over 600 parcels were packed and despatched to the sick and housebound at Christmas. The flood of letters of thanks received showed how the old people appreciated the contents.

(f) Holidays

A number of holidays at reduced rates were arranged through the medium of the Committee.

(g) Handicrafts

Old people are encouraged to continue their handicrafts which are a great factor in helping them to lead an active and interested life. Exhibitions of the work produced is evidence of the skill and craftsmanship of many of the aged. Although they may not be as quick as younger persons, there is little doubt that this is largely offset by the pride they take in their work.

(h) General Welfare

The problems of the aged are varied and during the year 1,557 interviews took place at the office of the Old People's Welfare Officer and 522 domiciliary visits were made by this Officer. In addition to this figure many visits were made by voluntary effort. A very large number of problems by letter and telephone are not included in these figures. Three local hospitals have co-operated by giving notification of any aged person likely to need help after being discharged. Many visits are paid to hospital to discuss these problems with the Almoners and the patients.

The individual help given to the old people by voluntary effort should not be forgotten: the helpers on the "Meals on Wheels" Service and Club meals, "Knights of St. George" and local Scouts in digging up gardens and carrying coal, also the tradesmen of the Borough for their various gifts.

Persons in need of Care and Attention

The number of cases investigated as persons likely to be in need of care and attention was 190. The actual visits made were much in excess of this number.

As in the past, these cases are notified to the department from various sources but the majority have been visited at the request of or in conjunction with St. Ann's Hospital.

In work of this kind a very close liaison is observed between the department and the Old People's Welfare Organiser also with the Home Help Service and the Area Welfare Officer of the Middlesex County Council.

National Assistance Acts, 1947 and 1951.

The following are details of the only two cases where it was necessary to take formal proceedings under these acts, namely:-

Case 1. Information was received from a resident that an old lady, aged 76 years, was ill and refusing to eat or to see her doctor. The house was generally in a filthy condition. The old lady was visited and persuaded to see her doctor who advised removal to hospital on the grounds of senile exhaustion, but she refused to agree and repeated visits failed to change her mind.

An application was finally made to a magistrate under the National Assistance (Amendment) Act, 1951, and the old lady was admitted to hospital where she subsequently agreed to stay as a voluntary patient.

Case 2. A voluntary society notified the department that two females, mother and daughter, were living in a ground floor flat which was filthy, dirty and infested with vermin. The daughter, although only 35, was bedridden and crippled, the mother, aged 76, was hard put to cope with household duties and care for her daughter.

In an effort to help, visits were made and it was suggested that the daughter should go into hospital while the flat was cleansed and decorated. Discussions took place with the owners and they agreed to carry out the work. In spite of every effort, both mother and daughter were obstructive and often abusive and it finally became necessary to apply to the Court for an order to remove the daughter to hospital. This was done and the flat was cleansed and redecorated and the daughter finally discharged and returned home. A home help is now visiting regularly.

National Assistance Act, 1948, Section 50: Burials

During the year it was necessary to arrange six burials where deaths occurred and suitable arrangements for burial would not otherwise have been made.

Births	1,000	1,000
Deaths	1,000	1,000
Estimated population	1,000	1,000
Birth rate per 1,000 estimated population	100	100
Death rate per 1,000 estimated population	100	100
Total	200	200
Male	100	100
Female	100	100
Total	200	200

PART VI

STATISTICAL SUMMARY

The classification of deaths is in accordance with the International List of Diseases, Injuries and Causes of Death as revised in 1948 under the auspices of the World Health Organisation.

	1951	1952
Area of District in acres	3,013	3,013
Population:		
Census, April, 1951	126,921	
Mid-year: Registrar General's estimate	126,800	125,800
Rateable Value	£1,017,402	£1,018,284
Sum represented by penny rate	£4,076	£4,000
<i>Births:</i>		
Registered live-births -		
(a) Legitimate:		
Males	844	815
Females	751	774
Total:	<u>1,595</u>	<u>1,589</u>
(b) Illegitimate:		
Males	37	37
Females	41	40
Total	<u>78</u>	<u>77</u>
(c) Total Live-births:		
Males	881	852
Females	792	814
Total	<u>1,673</u>	<u>1,666</u>
Birth-rate per 1,000 estimated population	13.19	13.24

Tagdilat Pag291

1951

1952

Stillbirths:

(a) Legitimate:	Males	21	24
	Females	21	10
	Total	<u>42</u>	<u>34</u>
(b) Illegitimate:	Males	1	1
	Females	1	1
	Total	<u>2</u>	<u>2</u>
(c) Total Stillbirths:	Males	22	25
	Females	22	11
	Total	<u>44</u>	<u>36</u>

Stillbirth rate per 1,000 total
(live and still) births

25.63

21.15

Deaths

Males	795	786
Females	<u>725</u>	<u>629</u>
Total	<u>1,520</u>	<u>1,415</u>

Death-rate per 1,000 estimated
population

11.99

11.25

Maternal Deaths

Puerperal Sepsis	0	0
Other puerperal causes	3	2
Total	<u>3</u>	<u>2</u>

Maternal Death-rate per 1,000 total
(live and still) births

1.747

1.175

Deaths of Infants under 1 year of age

(a) Legitimate:	Males	24	23
	Females	17	11
	Total	<u>41</u>	<u>34</u>

Rate per 1,000 legitimate live births

25.70

21.40

(b) Illegitimate:

Males	2	0
Females	0	0
Total	<u>2</u>	<u>0</u>

Rate per 1,000 illegitimate live births

25.64

0.00

(c) Total Infantile Deaths:

Males	26	23
Females	17	11
Total	<u>43</u>	<u>34</u>

	1951	1952
Infantile Death-rate per 1,000 live births	25.70	20.41
<i>Neo-Natal Deaths</i>		
Deaths of infants under 4 weeks	30	27
Neo-natal Death-rate per 1,000 live births	17.93	16.21
<i>Comparability Factors</i>		
Births	0.93	0.93
Deaths	1.06	1.06

The Great Fog

In common with the whole of the Greater London area, Tottenham suffered from the effects of a very severe fog which lasted from Friday, 5th December until the following Tuesday. The particularly toxic nature of this fog was associated with a sharp rise in the sickness rate as compared with the previous week. The number of deaths registered in the Borough was nearly trebled, the increase being almost entirely due to deaths from respiratory and circulatory diseases.

The following table shows the age distribution of recorded deaths compared with the same period last year:

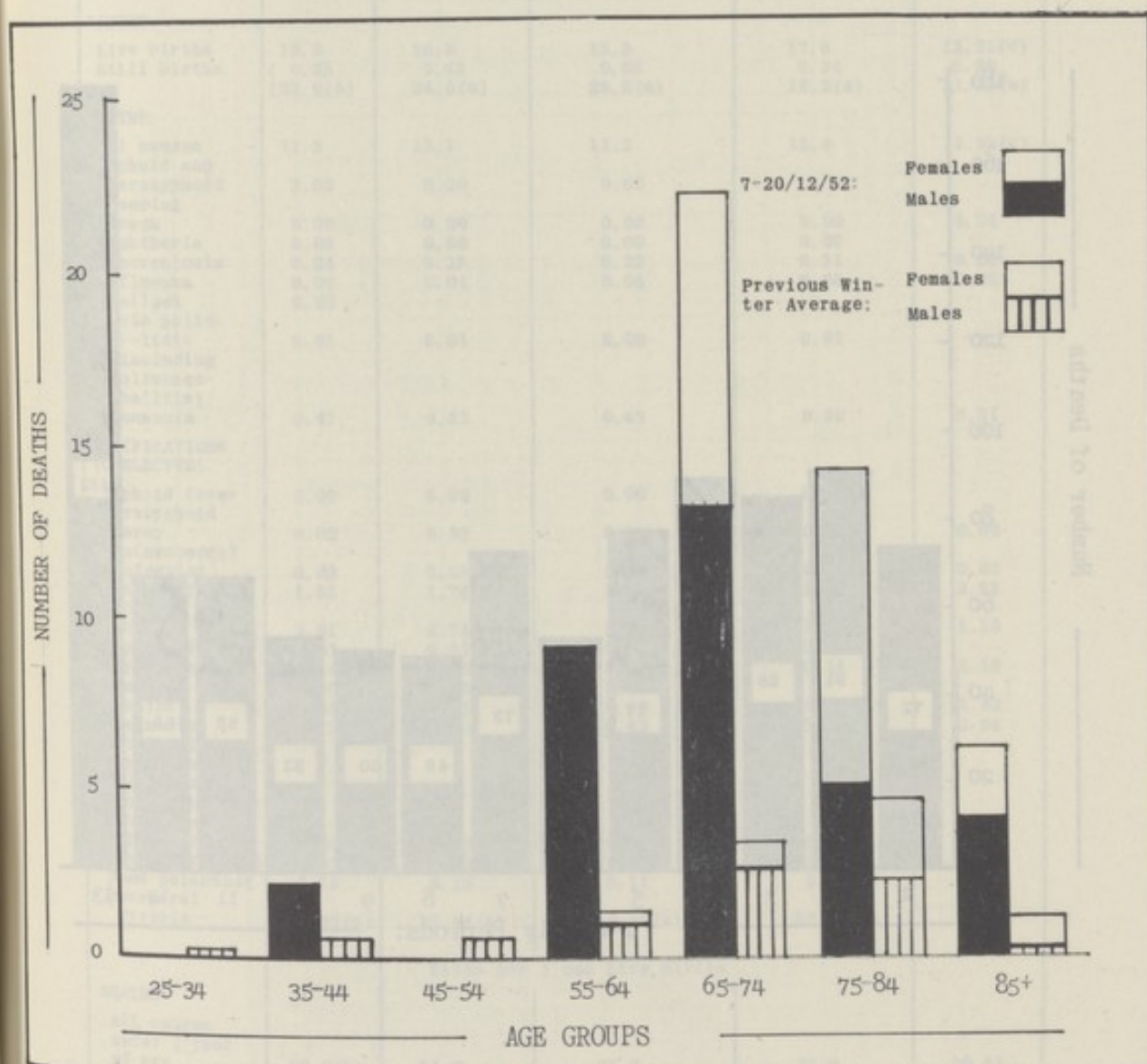
THE FOG, 5th-9th DECEMBER, 1952

Deaths of Tottenham residents from Influenza, Pneumonia and Bronchitis for the fortnight, 7th-20th December, 1952, compared with average for previous Winter months.

AGE GROUP	DEATHS DURING PREVIOUS WINTER												WEEK ENDED 13. 12. 52		WEEK ENDED 20. 12. 52		TOTAL FOR FORTNIGHT		
	NOV.		DEC.		JAN.		TOTAL			FORTNIGHTLY AVERAGE									
	M	F	M	F	M	F	M	F	Total	M	F	Total	M	F	M	F	Total		
Under 1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1 year	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
2 - 4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
5 - 14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
15 - 24	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
25 - 34	-	-	-	-	1	-	1	-	1	.15	-	.15	-	-	-	-	-	-	
35 - 44	-	-	1	-	3	-	4	-	4	.62	-	.62	1	-	1	-	2	-	
45 - 54	1	-	1	-	2	-	4	-	4	.62	-	.62	-	-	-	-	-	-	
55 - 64	3	-	3	1	1	1	7	2	9	1.08	.31	1.38	7	-	2	-	9	-	
65 - 74	7	1	7	1	2	2	16	4	20	2.46	.62	3.08	8	6	5	3	13	9	
75 - 84	4	1	4	9	6	4	14	14	28	2.15	2.15	4.31	5	5	-	4	5	9	
85+	-	-	1	2	-	4	1	6	7	.15	.92	1.08	1	2	3	-	4	2	
TOTAL	15	2	17	13	15	11	47	26	73	7.23	4.00	11.23	22	13	11	7	33	20	

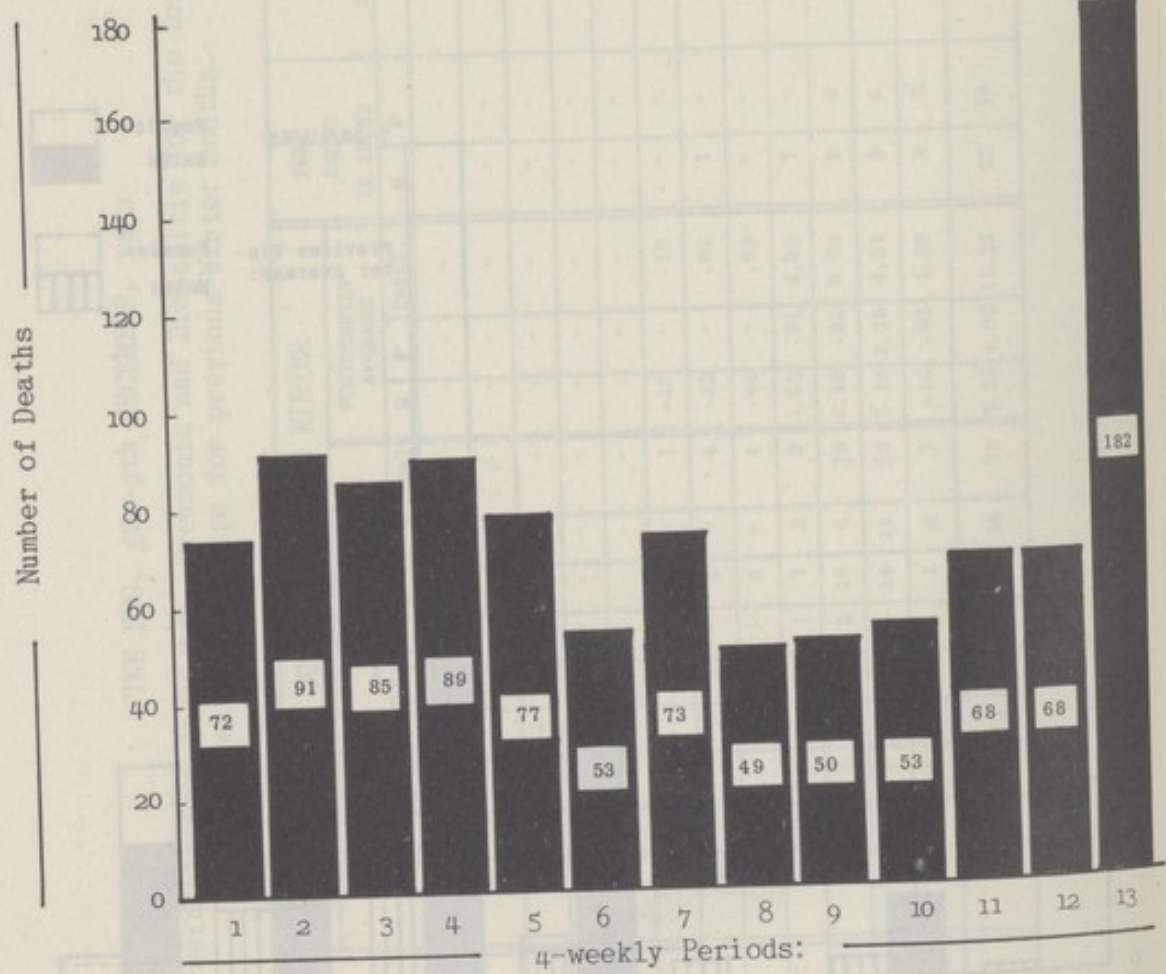
The Fog, 5th-9th December, 1952.

Deaths of Tottenham residents from Influenza, Pneumonia and Bronchitis for the fortnight, 7th-20th December, 1952, compared with average for previous winter months.



DEATHS REGISTERED IN 1952.

(NOTE: This chart shows the number of deaths which actually occurred in the Borough during each 4-weekly period. It does not show the number of deaths of Tottenham residents)



Birth-rates, Death-rates, Analysis of Mortality,
Maternal Mortality and Case - rates for Certain
Infectious Diseases in the year 1952 for Tottenham
compared with the Registrar-General's provisional
figures based on Quarterly Returns

	England and Wales	160 County Boroughs and Great Towns (including London)	160 Smaller Towns (Resident Population 25,000-50,000 at 1951 Census)	London Administrative County	Tottenham
Rates per 1,000 Home Population					
BIRTHS					
Live births	15.3	16.9	15.5	17.6	12.31(c)
Still births	(0.35 22.6(a)	0.43 24.6(a)	0.36 23.0(a)	0.34 19.2(a)	0.29 21.15(a)
DEATHS					
All causes	11.3	12.1	11.2	12.6	11.92(c)
Typhoid and paratyphoid	0.00	0.00	0.00	-	-
Whooping Cough	0.00	0.00	0.00	0.00	0.01
Diphtheria	0.00	0.00	0.00	0.00	-
Tuberculosis	0.24	0.28	0.22	0.31	0.22
Influenza	0.04	0.04	0.04	0.05	0.05
Smallpox	0.00	-	-	-	-
Acute polio- myelitis (including polioence- phalitis)	0.01	0.01	0.00	0.01	-
Pneumonia	0.47	0.52	0.43	0.58	0.51
NOTIFICATIONS (CORRECTED)					
Typhoid fever	0.00	0.00	0.00	0.00	-
Paratyphoid fever	0.02	0.02	0.03	0.01	0.02
Meningococcal infection	0.03	0.03	0.03	0.02	0.03
Scarlet fever	1.53	1.75	1.58	1.56	2.83
Whooping Cough	2.61	2.74	2.57	1.66	1.10
Diphtheria	0.01	0.01	0.03	0.01	-
Erysipelas	0.14	0.15	0.12	0.14	0.10
Smallpox	0.00	0.00	0.00	-	-
Measles	8.86	10.11	8.49	9.23	13.82
Pneumonia	0.72	0.80	0.62	0.57	0.64
Acute polio- myelitis (including polioence- phalitis)					
Paralytic	0.06	0.06	0.06	0.06	0.06
Non-paralytic	0.03	0.03	0.02	0.03	0.01
Food poisoning	0.13	0.16	0.11	0.18	0.07
Puerperal Pyrexia	17.87(a)	23.94(a)	10.22(a)	30.77(a)	0.01
- Rates per 1,000 Live Births					
DEATHS					
All causes under 1 year of age	27.6(b)	31.2	25.8	23.8	20.41

(a) Per 1,000 Total (Live and Still) Births

(b) Per 1,000 related Live Births

(c) Corrected by comparability factors

Statistics of Tottenham for the last Twenty Years

Year	Population	Deaths	Death Rate	Births	Birth Rate	Infantile Deaths	Infant Death Rate	Number of Cases				
								Puerperal Fever and Puerperal Pyrexia	Scarlet Fever	Diphtheria	Typhoid Fever	Smallpox
1933	154,700	1,618	10.5	2,138	13.8	118	55.2	35	551	194	5	4
1934	152,694	1,572	10.3	2,091	13.7	108	51.6	34	628	300	1	
1935	150,310	1,456	9.7	1,969	13.1	108	54.8	41	577	286	3	
1936	148,600	1,600	10.8	1,931	13.0	100	51.8	37	430	227	5	
1937	146,200	1,617	11.1	1,973	13.5	126	63.9	36	306	236	7	
1938	144,400	1,512	10.5	1,893	13.1	89	47.0	23	186	221	-	
1939	(142,400*) (136,000)	1,406	10.3	(1,776*) (1,739)	12.5	66	37.95	15	335	60	-	
1940	119,400	1,703	14.26	(1,666*) (1,559)	13.95	64	41.05	20	103	28	5	
1941	105,620	1,418	13.43	(1,560*) (1,316)	14.77	61	46.35	13	103	73	4	
1942	110,100	1,349	12.25	1,819	16.52	79	43.43	12	295	75	1	
1943	110,350	1,513	13.71	1,970	17.85	86	43.65	9	340	107		
1944	108,180	1,356	12.53	2,066	19.09	87	42.11	13	206	44		
1945	110,600	1,371	12.40	1,988	17.97	78	39.24	14	214	47		
1946	124,830	1,491	11.94	2,580	20.67	88	34.11	13	323	83		
1947	129,140	1,461	11.31	2,785	21.57	76	27.29	24	272	22	1	
1948	130,000	1,377	10.59	2,233	17.18	53	23.73	5	260	3		
1949	130,040	1,440	11.07	2,009	15.45	50	24.89	15	251	4		
1950	129,400	1,382	10.68	1,727	13.35	41	23.74	9	356	3		
1951	126,800	1,520	11.99	1,673	13.19	43	25.70	5	245			
1952	125,800	1,415	11.25	1,666	13.24	34	20.41	1	356			

* For the years 1939 - 1941 alternative birth figures were given by the Registrar General:-

- (a) for calculation of birth rates; and
- (b) for calculation of death rates or the incidence of notifiable diseases.

Likewise for the year 1939 only, two population figures were given:-

- (a) for calculation of birth rates; and
- (b) for calculation of death rates, etc.

INFANTILE DEATHS IN AGES AND SEXES DURING THE YEAR 1952.

CAUSE OF DEATH	DAYS												MONTHS											
	0	1	2	3	4	5	6	7-	14-	21-	Total Under 4 Weeks	1	2	3	4	5	6	7	8	9-	11-	Total Deaths Under 1 Year	Male	Female
Whooping Cough											-									1		1		1
Pneumonia and Bronchitis											-		1									1	1	-
Gastroenteritis and Diarrhoea											-											-	-	-
Congenital Malforma- tion. Birth Injuries Atelectasis	4	2	1						1	1	1	10	1	1								12	8	4
Prematurity	5	2	1	1	3	1					13											13	10	3
Other Causes				2			1			1	4	1	1								1	7	4	3
Total	9	4	2	3	3	1	1	1	1	2	27	2	3							1	1	34	23	11

CLASSIFIED DEATHS OF TOTTENHAM RESIDENTS SHEWING AGE-GROUP AND SEX DISTRIBUTION

DISEASE	TOTAL		0-4		5-9		10-14		15-19		20-24		25-34		35-44		45-54		55-64		65-74		75-84		85+
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Tuberculosis, respiratory	23	2	-	-	-	-	-	-	-	-	-	-	1	-	4	1	3	-	10	-	4	-	1	1	-
Tuberculosis, other	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	-	-	
Syphilitic disease	3	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	2	-	-	-	-	
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Whooping cough	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Meningococcal infections	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Acute poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other infective and parasitic diseases	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Malignant neoplasm, stomach	23	18	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2	2	6	2	10	7	3	7	-
Malignant neoplasm, lung, bronchus	46	11	-	-	-	-	-	-	-	-	-	-	-	-	1	3	10	2	19	2	12	2	3	2	1
Malignant neoplasm, breast	-	21	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	3	-	6	-	5	-
Malignant neoplasm, uterus	-	11	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	4	-	2	-	2	-
Other malignant and lymphatic neoplasms	89	52	1	-	-	-	-	-	-	1	1	-	1	1	1	4	10	11	20	10	26	15	27	9	2
Leukaemia, aleukaemia	4	2	-	-	1	-	1	1	-	-	1	-	-	-	-	-	-	-	-	-	1	1	-	-	-
Diabetes	3	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	2	1	-	1	-
Vascular lesions of nervous system	72	101	1	-	-	-	-	-	-	-	-	-	-	-	2	1	6	3	12	15	18	38	27	35	6
Coronary disease, angina	109	74	-	-	-	-	-	-	-	-	-	-	-	-	6	1	16	1	18	13	40	30	27	22	2
Hypertension with heart disease	13	14	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	6	3	5	9	1
Other heart disease	92	120	-	-	-	-	-	-	1	-	-	-	1	1	1	5	7	12	7	22	27	32	46	19	-
Other circulatory diseases	31	22	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	8	10	13	7	5	-
Influenza	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	2	1	-	-
Pneumonia	41	23	2	-	-	-	-	-	-	-	-	-	2	-	2	1	3	1	7	3	9	6	13	10	2
Bronchitis	82	55	-	1	-	-	-	-	-	-	-	-	-	-	1	-	3	-	19	6	35	19	19	21	5
Other diseases of respiratory system	12	3	-	-	-	-	-	-	-	-	-	-	-	-	3	1	1	-	3	1	2	-	3	-	-
Ulcer of stomach and duodenum	14	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	4	-	6	4	2	2	-
Gastritis, enteritis and diarrhoea	1	5	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	1	-	-	2	-
Nephritis and nephrosis	7	6	1	-	-	-	-	-	-	-	-	1	1	1	1	1	2	1	1	-	1	2	-	-	-
Hyperplasia of prostate	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	-	5	-	1	-
Pregnancy, childbirth, abortion	-	2	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-
Congenital malformations	6	2	5	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other defined and ill-defined diseases	65	45	17	7	-	-	1	-	1	-	-	-	2	1	1	1	13	6	9	5	13	7	7	13	1
Motor vehicle accidents	10	3	-	-	-	2	-	-	1	-	-	-	2	-	1	1	-	-	2	-	-	-	3	-	1
All other accidents	10	12	1	1	-	-	-	-	-	-	-	-	-	-	2	-	1	-	1	1	2	3	3	5	-
Suicide	10	8	-	-	-	-	-	-	-	-	-	-	1	1	-	1	1	1	8	2	-	3	-	-	-
Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	786	629	30	12	2	2	2	1	3	1	2	1	10	6	28	21	78	44	161	80	227	186	196	200	47

CANCER DEATHS 1952

Classification of Deaths showing Age and Sex distribution and System affected

	TOTAL		0 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 34		35 - 44		45 - 54		55 - 64		65 - 74		75 - 84		85 & up	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Buccal cavity and pharynx	6														1				1		1		3			
Digestive Organs and Peritoneum	69	50							1	1					2	3	9	6	20	7	19	18	18	14		1
Respiratory system	47	13	1												1	3	9	3	18	3	12	2	5	2	1	-
Breast and Genito-urinary system	20	42													2		8	4	9	10	12	4	9	2	2	
Other and unspecified sites	11	8											1				4	5	1	2	4		2			
Lymphatic & Haematopoietic Tissues	9	2			1		1	1			1		1						1		3	1	1			
TOTAL	162	115	1		1		1	1		1	2		1	1	4	8	22	22	45	21	49	33	33	25	3	3

Table of Cases of Infectious Disease coming to the knowledge of the Medical Officer of Health during the year 1952, in the Borough of Tottenham, classified according to Diseases and Ages

	Under 1		1		2		3		4		5-9		10-14		15-19		20-34		35-44		45-64		65 & Up		Total	Total cases removed to Hospital
	M F		M F		M F		M F		M F		M F		M F		M F		M F		M F		M F					
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Scarlet Fever	1	1	3	6	9	4	17	18	28	17	106	117	3	21	1	2	-	2	-	-	-	-	-	-	356	158
Measles	25	26	79	57	95	98	118	102	123	121	426	439	5	15	1	3	3	3	-	-	-	-	-	-	1739	90
Whooping Cough	9	9	4	9	8	10	8	11	5	8	23	31	-	-	-	-	3	-	-	-	-	-	-	1	139	13
Pneumonia	1	3	1	2	3	-	-	1	-	1	3	3	2	-	1	-	5	5	5	4	8	5	17	11	81	16
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	1	1	4	-	3	12	5
Scabies	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	1	-	-	1	-	-	-	5	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1	2	3	-	1	-	9	3
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-
Meningococcal Infection	1	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	4	4
Acute Encephalitis-Infective	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Post-Infectious	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	2	2
Acute Poliomyelitis - Paralytic	-	-	-	-	1	-	-	-	-	-	-	2	1	-	-	1	-	1	-	-	1	-	-	-	7	5
Non-paralytic	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	-	-	-	-	-	3	3
Dysentery	-	-	-	-	1	-	-	-	-	-	-	2	-	-	1	-	1	-	1	-	-	-	1	2	9	6
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis, Pulmonary	-	1	1	-	-	2	-	1	-	2	-	3	2	3	7	10	37	36	12	7	28	3	7	1	163	-
Tuberculosis, Other forms	-	-	-	-	-	-	1	-	-	-	1	1	2	-	1	-	4	3	-	2	-	1	-	-	16	-
TOTAL	37	40	88	74	117	115	144	133	157	150	559	600	16	40	16	17	53	55	20	15	40	17	25	19	2547	306

APPENDIX

MIDDLESEX COUNTY COUNCIL

LOCAL AREA HEALTH COMMITTEE No. 3
(HORNSEY AND TOTTENHAM)

STATISTICAL RETURN
FOR
THE YEAR ENDED
31ST DECEMBER 1952

JOINT POPULATION OF AREA - 224,940

MEMBERS OF LOCAL AREA COMMITTEE NO. 3

AS AT

31ST DECEMBER, 1952

MEMBERS OF MIDDLESEX COUNTY COUNCIL

County Alderman Mrs. K.M. St.P. Crump.
 County Councillor Mr. M.W. Burns.
 County Councillor Mr. R.A. Clarke.
 County Councillor Mr. W. East.
 County Councillor Mr. E. Harrison, S.de L., F.R.G.S., A.G.S.A.
 County Councillor Mrs. J. Thexton.

MEMBERS OF HORNSEY BOROUGH COUNCIL

Councillor Miss O.R. Anderson (Vice-Chairman).
 Councillor Mrs. D.F. Nott.
 Councillor Miss J. Richardson.
 Councillor Mr. C.V. Tipping.
 Councillor Miss M. Toyne.

MEMBERS OF TOTTENHAM BOROUGH COUNCIL

Alderman Mr. A. Reed, A.C.I.I., J.P.
 Councillor Mr. R.W.H. Ford.
 Councillor The Lady Morrison.
 Councillor Mrs. A.F. Remington (Chairman).
 Councillor Mr. P.H. Roberts.
 Councillor Mr. G.W. Rowley.

NOMINATED MEMBERS

MEMBERS NOMINATED BY APPROPRIATE HOSPITAL MANAGEMENT COMMITTEES

Mrs. R.M. Fry.

MEMBER WITH KNOWLEDGE AND EXPERIENCE OF HOME NURSING

Mr. A.E. Stevens.

MEMBER NOMINATED BY ROYAL COLLEGE OF MIDWIVES

Miss V. Eady.

MEMBER NOMINATED BY MIDDLESEX LOCAL MEDICAL COMMITTEE

Dr. E.C. Girling.

MEMBER NOMINATED BY MIDDLESEX LOCAL DENTAL COMMITTEE

Mr. R.W.D. Brownlie.

MEMBER NOMINATED BY MIDDLESEX LOCAL PHARMACEUTICAL COMMITTEE

Mr. L. Hayward.

AREA HEALTH STAFF 1952

Area Medical Officer	G. Hamilton Hogben, M.R.C.S., D.P.H.
Deputy Area Medical Officer	J.L. Patton, M.B., Ch.B., D.P.H.
Senior Assistant Medical Officer	Mrs. J.H. Garrow, M.B., Ch.B., D.P.H.
Area Dental Officer	V. Sainty, L.D.S., R.C.S.
Superintendent Health Visitor	Miss H. Townsend, S.R.N., S.C.M., H.V.
Deputy Superintendent Health Visitor	Miss E. Lloyd, S.R.N., S.C.M., H.V.
Non-medical Supervisor of Midwives and Home Nursing Superintendent	Miss. F.E. Curtis, S.R.N., S.C.M., H.V.
Supervisory Matron of Day Nurseries	Miss J. Pearse, S.R.C.N.
Home Help Organiser	Miss A.G. Alcock
Assistant Home Help Organisers	Mrs. W.E. Pickard, S.R.N. Mrs. F.G. Wills.
Area Chief Clerk	W.L.N. Relleen, T.D., D.P.A.
Deputy Area Chief Clerk	T.W. Hadley.
Sectional Heads	N.P. Child. G. Cree. H.J. Dunham, B.A.

CARE OF MOTHERS AND YOUNG CHILDREN

(SECTION 22)

Care of the Expectant Mother

The well-being of the expectant mother from early pregnancy until confinement is the aim of all in attendance at ante-natal clinics. In this we have the co-operation locally of general medical practitioners, regional hospital obstetric consultants, almoners and others concerned in this service and who recommend mothers to attend local clinics to save time and unnecessary travelling. Abnormal cases are few in number and are referred to hospital for treatment.

Where necessary, appointments can be made for X-ray and dental care and an ambulance booked to convey a mother between clinic and home.

The card report system which was extended to Clapton Mothers' Hospital last year has operated successfully. Arrangements for domiciliary confinement or the reservation of a hospital bed are made for the mother at each local clinic. The services of a home help are available if required for all domiciliary confinements and temporary nursery accommodation can be provided for pre-school children in certain cases.

In Hornsey, where the majority of hospital cases are booked for the Alexandra Maternity Home, there is a useful link in that two part-time ante-natal clinicians are also medical officers to the Home and general practitioners in the town.

The health visitor in attendance at the clinic discusses arrangements with each mother and makes known to her the various services which are available to her during her pregnancy, confinement and puerperium.

The maintenance of all these aids does much to prevent unnecessary worry and ill-health at a time when the mother is in most need of relief and support.

Blood Tests .

All expectant mothers attending ante-natal clinics have specimens of blood taken for Wasserman reaction, blood grouping and determination of Rhesus factor. At some clinics patients

have their haemoglobin estimated at the first visit and regularly every four weeks thereafter whether they are hospital or home confinements. The haemoglobin estimation is done by the Sahli method in the clinic by the same health visitors and checks are made on the accuracy of the estimations from time to time by co-operation with the Pathologist of the Post-Graduate Medical School, Ducane Road, W.12. The results have been accurate within 5%. A record is kept of the patient's ability to take iron and the type most easily tolerated.

Relaxation and Mothercraft Classes

This service is now operating in three Hornsey and three Tottenham Clinics and is much appreciated by expectant mothers. The group teaching is in all cases given by a health visitor whose aim is to dispel fears associated with pregnancy and confinement and to instruct mothers on those matters associated with the well-being of themselves, normal childbirth and the preparation for the care of their children.

The classes are kept as informal as possible and time is allowed for questions and answers as well as for a cup of tea. Many mothers return post-natally for exercises and to consult the Health visitor.

Notification of Births - Home and Institutional Confinements

It will be observed from the table set out below that more than 80% of the births which occurred last year were in hospital and nursing homes.

The number of home confinements has dropped steadily since the peak birth rate year of 1947. It is interesting to note that this drop continued over the last three years even though the number of births has remained fairly steady.

It would appear that while the hospitals are able to provide a sufficient number of beds for maternity cases, mothers are being discouraged from having their babies at home, especially as it is less expensive for them to go into hospital. Because of the lack of discrimination in favour of admission to hospital on purely obstetric or social grounds difficulty sometimes arises in finding a bed in an emergency, as all hospital accommodation has been taken up.

The number of institutional confinements in Hornsey is undoubtedly increased by the existence in that borough of the Alexandra Maternity Home which accommodates over 600 Hornsey births each year. In Tottenham, on the other hand, there is evidence that hospital accommodation is more limited and is always taken up. The Tottenham patients make use largely of the North Middlesex Hospital and the Mothers' Hospital, Clapton. These, together with the Alexandra Maternity Home, take nearly two-thirds of the institutional births of the area, and with all of them there is close co-operation. The majority of the remainder of the institutional confinements take place in hospitals in Central London, although some 47 mothers were last year confined at private or voluntary assisted nursing homes in Hornsey.

The trend to hospital confinements is a National one and the Minister of Health issued a circular on the subject in August 1951 stating that though it was not possible to lay down a proportion of births for which hospital or maternity home beds should be provided, in general, hospital provision is required on medical or social grounds for about half the confinements. In this area well over half of the confinements are in institutions, but at the same time some of the 17% of home confinements should have been in hospitals and closer co-operation than already exists is needed to ensure that the right patients are admitted to maternity beds.

TABLE 1

	1952	1951	1950	1949	1948	1947
Total Births (Live and Still)	3265	3162	3261	3672	4059	4935
Institutional Births	2679	2487	2394	2706	2754	2684
% age of Total	82.1	78.6	73.4	73.7	67.8	54.4
Domiciliary Births	586	675	867	966	1305	2251
% age of Total	17.9	21.4	26.6	26.3	32.2	45.6

Ante-natal Clinics

The average attendance at ante-natal clinics continues to decline but has not yet reached the stage where any curtailment in the number of sessions held is desirable. The following table

shows the attendance at clinics during 1952 and the totals for the preceding three years are given for purposes of comparison. Separate post-natal clinics are not held.

TABLE 2

Ante-natal Clinic	No. of sessions held	No. of new cases		Total attendances		Average attendances per session
		A. N.	P. N.	A. N.	P. N.	
Burgoyne Road	50	141	87	987	91	25.6
Church Road	78	145	58	1287	62	17.3
Portis Green	61	223	148	1540	161	27.9
Hornsey Town Hall	211	313	177	2893	181	14.6
Mildura Court	62	199	64	1363	64	23.0
Stroud Green Road	51	158	72	891	74	18.9
The Chestnuts	256	511	253	3326	265	14.0
Lordship Lane	206	405	228	2758	233	14.5
Park Lane	103	366	246	2018	246	21.9
Totals 1952	1078	2461	1333	17063	1377	17.1
1951	1038	2439	1330	16999	1332	17.7
1950	1082	2594	1303	19006	1331	18.7
1949	1074	2714	1438	20617	1491	20.6

Midwives Clinics

Domiciliary midwives assist at all but two of the ante-natal clinics. An attempt is made to ensure that this work is done by the midwife who is likely to deliver the patient in each case. In four centres separate midwives clinics are held and the following table shows the attendances made during the year.

TABLE 2a

Midwives Clinics	No. of sessions held	No. of new cases	Total No. of attendances	Average attendance per session
Burgoyne Road	49	15	239	4.9
Portis Green	42	5	278	6.4
Park Lane	101	-	1145	11.3
Stroud Green Road	47	2	304	6.5
Totals	239	22	1966	8.2

Post-natal Care

An appointment is made for each mother to attend for a post-natal examination at the clinic which she attended as an expectant mother, approximately six weeks after the confinement. Here she is seen by the doctor who undertook her ante-natal care and who knows her and any special features connected with the case. The hospital's or midwife's report on the confinement is held in readiness for this examination so that the examining doctor knows all the facts connected with the case.

Each mother is encouraged to keep this appointment so that any defects which may have resulted from her confinement are detected and treated at once so as to avoid future disability.

Care of Premature Infants

There is an agreement with the North Middlesex Hospital for the admission of any woman in premature labour, to avoid delivery at home and later transfer to hospital. The hospital will admit the case on a midwife's or doctor's request, and this applies also to the need to transfer a premature child born at home.

Premature babies delivered at home. The case is graded according to the baby's requirements. More frequent visits and a special nurse, if necessary, special clothing, hot water bottles and breast milk (when available) are loaned out. Special cots are not provided. Supervision of the infant is continued for as long as required.

Infant Welfare Centres

In nine centres doctors and health visitors with special qualifications in child health attend to give advice to mothers of healthy infants on normal development and progress. Regular weighing and physical examination brings to light the smallest deviations from normal growth and well-being, and these deviations are investigated with the mother so that they can be remedied.

In the early months of life advice on feeding is frequently sought, particularly for infants who are artificially fed and those who have reached the weaning age.

This service does much to ensure the growth of a healthy child and is a means of educating mothers on the proper care of their children.

Sessions are also held at which the Health Visitor alone is in attendance and where time can be given to test-feeding, etc.

These clinics have a vital part in promoting child health. Attendances have been well maintained during the year and the first attendances of children under one year of age represent 87% of the notified live births. All children, especially new babies, are followed-up by health visitors' home visits.

The inter-relationship of infant welfare clinics and home visiting are obvious as is also the fact that with the present staff of health visitors it would be impossible to supervise the health of so many children by visiting only.

Toddlers Clinics

Toddlers clinics are now held at all nine centres. This is an increase of one over 1951.

Appointments are made for a six monthly or more frequent medical overhaul for those children who do not receive medical examination at other clinics or at day nurseries, nursery schools or classes.

Appointments are welcomed by parents. The purpose of these examinations is to detect and correct mental or physical defects and maintain the good health of children in the 2-5 years age group so that they are in good condition before attendance at school.

TABLE 3

Infant Welfare Centres	No. of sessions held	First Attendances		Total Attendances		Seen by Doctor	Average attendances
		Under 1	Over 1	Under 1	Over 1		
Burgoyne Road	156	205	16	3771	959	1325	30.3
Church Road	153	199	10	3619	969	1656	29.9
Fortis Green	203	250	2	4271	1116	1555	26.5
Hornsey Town Hall	208	402	25	5709	2206	3323	38.0
Mildura Court	106	166	8	3005	1469	1675	42.2
Stroud Green	104	187	8	2963	997	802	38.8
The Chestnuts	257	566	34	7204	1804	2349	35.6
Lordship Lane	258	432	35	6391	1773	1480	31.2
Park Lane	207	379	14	5530	1362	1571	32.3
<u>Toddlers Sessions</u>							
Burgoyne Road	24	-	7	-	439	439	18.3
Church Road	46	-	8	-	486	480	10.5
Fortis Green	26	-	15	-	378	378	14.5
Hornsey Town Hall	50	-	27	-	584	575	11.7
Mildura Court	41	-	17	-	721	607	17.6
Stroud Green	6	-	9	-	89	88	14.8
The Chestnuts	53	-	-	-	698	698	13.1
Lordship Lane	51	-	16	-	822	822	16.1
Park Lane	106	-	2	-	897	892	8.5
Totals 1952	2055	2786	253	42463	17769	20715	29.3
1951	1918	2754	453	37759	18253	19008	29.2
1950	1781	2735	290	41171	18625	18427	34.1
1949	1810	3212	1575	47009	20351	20197	37.2

Child Life Protection

The Area Children's Officer and his staff are responsible for adoption arrangements and the care of children deprived of a normal home life, but there are 'border-line' cases of child neglect which are watched carefully by health visitors in the normal course of the supervision of child health and well-being. This usually acts as a deterrent but if necessary the health visitor warns careless or neglectful mothers of the consequences of their behaviour. Only a few of these cases deteriorate and those and any doubtful cases are reported to the Area Children's Officer or the N.S.P.C.C.

Daily Guardian Scheme

This scheme, by which working and other special categories of mothers are assisted in finding suitable daily minders for their children, operates exceedingly well. In spite of a certain wastage in daily guardians, the number of women who offer their services, considerably exceeds the present demand. At the end of 1952 there were 161 daily guardians on the register of whom 76 were minding 88 children. The number of individual children minded during the year was 148 and they were in the care of guardians for 18,876 days. These figures compare with 129 and 15,710 respectively for 1951. Health Visitors undertake to approve guardians for registration and are responsible for vigilance in seeing that the scheme's safeguards are carried out.

Day Nurseries

The County Council's new policy on the admission of children to day nurseries and the charges for admission, which came into operation on the 1st December, had the effect of drastically reducing the numbers on the registers and the daily attendances by the end of the year. The following table shows the number of children on the registers at the end of the year and the attendances during the year. Comparative totals for 1951 are also shown.

TABLE 4

Day Nursery	No. of approved places at end of year		No. of children on register at end of year		Attendances		Average daily attendances	
	0 - 2 years	2 - 5 years	0 - 2 years	2 - 5 years	0 - 2 years	2 - 5 years	0 - 2 years	2 - 5 years
Ladywell	24	50	19	33	4672	10367	18	40
Stonecroft	15	45	13	27	3155	9652	12	38
Red Gables	23	23	14	16	4317	5623	17	22
Park Lane	20	30	16	21	3408	6131	13	24
Lordship Lane	10	30	9	22	2452	5419	10	21
Plevna Crescent	20	30	12	34	2517	8974	10	35
Totals 1952	112	208	83	153	20521	46166	80	180
1951	112	208	114	232	21867	45479	85	177

Priority Dental Service

The following table shows the work carried out by the dental officers during the year. The work done during 1951 is also given for purposes of comparison.

TABLE 5

	1952		1951	
	Expectant & Nursing Mothers	Children under 5	Expectant & Nursing Mothers	Children under 5
No. examined by dental officer	226	1127	43	879
No. referred for treatment	211	992	42	795
New cases commenced treatment	179	876	37	715
Cases made dentally fit	77	663	21	462
Forms of dental treatment provided:-				
Teeth extracted	200	879	53	893
Anaesthetics:-				
(a) Local	64	192	10	196
(b) General	40	308	9	275
No. of fillings	234	1562	35	1005
No. of root fillings	-	-	1	-
No. of crowns and bridges	-	-	-	-
No. of inlays	2	-	-	-
Scalings and gum treatment	72	-	16	-
Silver nitrate treatment	-	1165	-	944
Dressings	81	752	6	687
Other operations	11	106	1	94
No. of Radiographs:-				
(a) at County Council Clinics	5	2	-	2
(b) at hospital	2	-	-	-
Denture dressings	73	-	55	-
Dentures fitted:-				
(a) full	5	-	6	-
(b) partial	14	-	8	-
No. of attendances	468	2114	104	1663
No. of appointments not kept	170	306	16	230
No. of ½ days devoted to service	379½		212	

MIDWIFERY SERVICE (SECTION 23)

During 1952, one of the domiciliary midwives retired and another retired at the beginning of 1953. A third midwife has submitted her resignation and will have left the County Council's service by the end of February 1953, so that the number of midwives employed has fallen from 15 to 12 in less than a year.

It has not been considered necessary to replace them as the decline in the number of home confinements, to which reference was made in my annual report for 1951, has continued.

Supervision of Midwives. Inspections of registers of births, equipment and drug books are carried out at six-monthly intervals. Once yearly a visit is made to the midwife's home by the senior assistant medical officer and routine inspection carried out. Supervision of practical work at six-monthly intervals, also attendance of non-medical supervisor at any confinement where the midwife becomes anxious or is out over a period of many hours. A weekly meeting of domiciliary midwives is held for the purpose of general discussion of cases, problems connected with the work and matters of interest connected with midwifery. In addition, the non-medical supervisor is in touch with each midwife daily, either personally or by telephone.

Co-operation with general practitioners. New general practitioners are visited by the midwife working in his area, or by the non-medical supervisor, and his wishes regarding care of ante-natal patients ascertained. The degree of care of practitioners' cases by the midwife is based on the individual requirements of each doctor.

In Hornsey most of the practitioners' cases attend the local authority clinics. This is also done in Tottenham but to a lesser degree.

Relations between doctors and midwives in this area are extremely cordial.

TABLE 6

Maternity cases attended by County Council Domiciliary Midwives:-

	1952	1951	1950
As Midwife	496	589	708
As Maternity Nurse	59	71	154
Totals	555	660	862

Administration of Gas and Air Analgesia by County Council Domiciliary Midwives:-

	1952	1951	1950
As Midwife	360	368	352
As Maternity Nurse	36	30	89
Totals	396	398	441

Medical Aid:-

	1952	1951	1950
(a) No. of domiciliary cases in which medical aid was summoned:-			
(i) where the medical practitioner had arranged to provide the patient with maternity medical services under the National Health Service	34	12	24
(ii) Others	100	166	162
(b) For cases in institutions	11	13	5
Totals	145	191	191

HEALTH VISITING (SECTION 24)

Each health visitor is attached to a maternity and child welfare centre in the area which is near to the district which she covers for home visiting. By this means each mother associates the health visitor with the ante-natal, infant welfare, school health and other special clinics which are held in the centre near to her home. This arrangement makes for accessibility, ease of approach and confidence in continuity on both sides when visiting, advice or assistance are required.

Apart from home visiting and clinic duties health visitors have been engaged on completing questionnaires for special investigations for such bodies as the Ministry of Health, the Medical Research Council, the National Birthday Trust and the

Institute of Child Health, and have provided other reports for no less than twenty-two different hospitals in or near the London area.

Health visiting in schools also takes up a proportion of each health visitor's time. This includes attendance at routine hygiene examinations and medical inspections. Requests for health education in schools are increasing and during the year no less than 73 talks were given by health visitors to classes of school leavers at secondary modern schools in the area. Health talks were also given to outside bodies such as Young Wives Clubs, Wesley Guilds, the Women's Branch of the British Legion and the Girls Life Brigade.

Clinic nurses have undertaken some of the routine work in clinics and schools to give health visitors time for their more essential duties.

TABLE 7

No. of visits paid by all Health Visitors working in the area to:-	1952		1951	
	First Visits	Total Visits	First Visits	Total Visits
Expectant Mothers	2077	3332	1721	4544
Children under 1 year	3204	15241	3158	13825
Children 1 - 5 years	15	20804	27	18146
Children of school age	1	3417	5	2367
Other persons	3101	4010	1969	3253
Totals		46804		42135

No. of health visitors employed at end of 1952:-

- (a) Whole time on health visiting
- (b) Part time on health visiting 29
- (c) Equivalent whole time health visiting service provided under
 - (b) - including attendances at clinics 22

Co-operation of General Medical Practitioners

One factor which must influence the working of the local health services is the growing co-operation between the family doctor and health visitor. This is developing in the following

ways. Health visitors have called upon or contacted general medical practitioners by telephone on such matters as feeding difficulties of babies, illness of mothers, including mental disturbances, illness of aged persons, to discuss departures from normal health of mothers and children of pre-school or school age, to report the illness of a child suspected of neglect.

General medical practitioners have assisted the Health Department by referring expectant mothers to local clinics for additional ante-natal care, by requesting the services of home helps for sick people or for the aged, by referring cases for convalescence, by reporting cases of persons who were not able to care for themselves properly and for whom hospital accommodation was unobtainable, and also for passing on advice or information to the health visitor on those cases in which the health visitor sought the family doctor's advice.

In my opinion this interchange of information and assistance is to be commended as providing a better service for the public and more cordial relations between members of the local health service.

Ministry of Health Food Survey

This survey was undertaken with the assistance of health visitors in January and about 25 Tottenham mothers took part in it with the field workers of the Ministry.

Virus Infection During Pregnancy

Health visitors and medical staff are assisting in keeping records of a group of mothers in this and other areas from pregnancy until the child's second birthday. This information is being obtained for the Ministry of Health investigation of virus infections during pregnancy.

HOME NURSING (SECTION 25)

The demands on the home nursing service continued to increase during 1952 and at the end of the year the nursing staff was very nearly up to full establishment. It was not found any easier to recruit resident nurses to live in Bruce Grove Nurses Home, Tottenham and, in fact, by the end of the year, the numbers in residence (including the Superintendent) had fallen from 6 to 4.

TABLE 8

	Males over 14	Females Over 14	M. & F. 14 & under	Total
Cases on register on 1.1.52.	136	304	9	449
New cases during the year	869	1632	237	2738
Cases completed during the year	867	1584	244	2695
Cases remaining on register on 31.12.52.	138	352	2	492

Total No. of visits during 1952 - 77113

Total No. of visits during 1951 - 62124

Co-operation with general practitioners. Work from the doctors is received at Bruce Grove Nurses Home or the Area Health Office and the visits are distributed from those points. Co-operation is good and the doctor is able to make any special point when he requests the services of a nurse. A message sheet is left at the patient's house for the exchange of notes between doctor and nurse.

No service has been arranged for night work but requests have been very few. The emergency calls for a nurse between the hours of, say, 7 and 10 p.m. are also few and have been met without great difficulty.

VACCINATION AND IMMUNISATION (SECTION 26)

Vaccination

During the year the Minister of Health approved an amendment to the County Council's Proposals as to Vaccination and Immunisation made under the National Health Service Act to the effect that facilities would be made available at the clinics for infant vaccination by medical officers in addition to the service provided by general practitioners. This scheme has been well received by the mothers and it is hoped that with its gradual development the percentage of infants vaccinated will steeply rise; but even more intensive education of parents on the importance of vaccination is required. Vaccination is being carried out on infants, preferably at four months but not over 12 months old.

The following table records the number of persons known to have been vaccinated or re-vaccinated during 1952:-

TABLE 9

	Under 1 year	1 year	2 - 4 years	5 - 14 years	15 years and over	Total
(i) No. of persons primarily vaccinated	937	55	38	54	135	1219
(ii) No. of persons re-vaccinated	-	-	10	101	379	490

Immunisation

As stated in my last annual report the County Council agreed to make available free whooping cough vaccination at all immunisation clinics following the success achieved by the controlled experiments carried out in this and other districts by the Medical Research Council at the request of the Ministry of Health from 1950 to 1952.

The introduction of the new combined diphtheria pertussis vaccine suspension now gives protection against diphtheria and a degree of protection against whooping cough in a total of three injections. This reduced total of injections is very popular with the mothers and it is anticipated that the percentage of immunised children will show a satisfactory increase during 1953. The series of three injections is commenced at the age of six months wherever possible. The mothers are informed that while a degree of protection against whooping cough will be obtained it is less certain than protection against diphtheria. It is felt that this warning is necessary to prevent immunisation against diphtheria falling into disrepute should the child subsequently develop an attack of whooping cough.

The following table records immunisations carried out by area medical staff as well as general medical practitioners during 1952:-

TABLE 10

Age at date of immunisation	No. of Children immunised			No. of children given re-inforcing injections	
	Diphtheria only	Combined Diphtheria & Whooping Cough	Whooping Cough only	Diphtheria only	Combined Diphtheria & Whooping Cough
Under One	1094	115	218	-	-
One	690	77	642	-	-
Two	96	3	98	-	-
Three	52	4	41	5	-
Four	41	1	23	347	4
Five to Nine	66	3	10	868	7
Ten to Fourteen	14	-	-	42	-
Totals	2053	203	1032	1262	11

PREVENTION OF ILLNESS, CARE AND AFTER CARE (SECTION 28)

Recuperative Holiday Homes

During the year, area health staffs continued to be responsible, on behalf of the County Health Department, for dealing with applications for admissions to recuperative holiday homes.

The following table shows the cases dealt with during the year:-

	Applications received	Admissions to recuperative holiday homes recommended
Adults	323	266
Children	21	12
	344	278

DOMESTIC HELP SERVICE (SECTION 29)

The County Council's scheme for the provision of home help in accordance with the rules governing priorities is being

operated. There has been a falling off in the demand for this service which was sharply accentuated in 1952. There is good liaison with the Old People's Welfare Committees in Tottenham and Hornsey and with the W.V.S. regarding the provision of meals on wheels.

The following table is of interest in demonstrating the falling demand in new applications coupled with the increase in the number of old cases being served.

TABLE 11

	Maternity	T. B.	Others	Total 1952	Comparative Totals		
					1951	1950	1949
No. of approved applications for service of home help received.	126	39	514	679	853	925	1013
No. of new cases in which help has been provided.	93	35	510	638	812	884	1011
No. of old cases in which help has been provided.	4	74	527	605	531	430	372

No. of helps employed at 31.12.52. (whole-time)	7
No. of helps employed at 31.12.52. (part-time)	116
Equivalent No. of whole-time helps employed at 31.12.52.	70

MENTAL HEALTH SERVICES (SECTION 51)

During the year the County Council delegated to the Area Committee, for an experimental period of twelve months, certain functions relating to the day-to-day administration of the Hornsey Occupation Centre. It is considered that the arrangement has worked satisfactorily and it provides a link between the Mental Health Sub-Committee and the Area Committee.

SCHOOL HEALTH SERVICE

Routine Medical Inspections

Three times in the child's school career the routine medical inspection brings together child, parent, teacher, nurse and doctor and the routine medical examination achieves best results

when first, the child is seen by the nurse; second, the doctor interviews the head teacher, and finds out if the head teacher from his or her day to day observation of the child suspects any deviation from normal health.

The doctor, having the nurse's report, then interviews parent and child, questions are invited and problems relating to health explored, the child is examined and if a defect is discovered the parent is advised. However, in most cases the doctor and parent agree that the child is healthy, sometimes the mother needs to be re-assured that her anxieties are unfounded.

The mother is advised to accept the first year of school life as a period when upper respiratory tract infections are common and to accept that the apparent thinness of the junior school child (ages 8, 9 and 10) is compatible with good health.

When the routine medical inspection is completed the doctor reports relevant findings to the head teacher and makes any necessary arrangements for the disposal, treatment or follow-up observation of defects found.

Dental Service

During 1952 the dental staff was increased to seven full-time dental surgeons so that all dental surgeries were fully staffed. It is hoped that during 1953 two additional dental clinics may be set up and staffed so as to allow a complete school dental and priority dental service for expectant and nursing mothers and children under school age to be maintained.

The scheme for evening dental sessions which commenced on the 1st January 1952 enabled a total of 136 additional treatment sessions to be held at which 890 attendances were made. This contribution was equivalent to another full-time dental surgeon being employed for three months during the year.

Tottenham Day Special School for the Deaf

The nursery block was completed during the year and 11 deaf children of nursery school age are now being accommodated.

Vale Road Day Special School for Physically Handicapped Children Spastic Unit

The formation of the spastic unit at Vale Road Special

School for Physically Handicapped Children, by building additional classrooms, has not yet materialised owing to unforeseen building difficulties. It is hoped that a start will soon be made on the building work so that the unit may come into full operation.

During the year in spite of many difficulties more physiotherapy and speech therapy sessions have been devoted to cerebral palsy cases attending the school. In addition, arrangements were made for some of the children to receive physiotherapy during the school holidays. Children whose parents were agreeable, were transported by the ambulance service during the Christmas holiday to a school clinic, thus ensuring continuity of treatment. It is hoped to continue these holiday arrangements during 1953.

Some of the special equipment required for the use of the unit has been obtained. Other equipment, including special desks and chairs, will be obtained when the additional accommodation is available.

Physiotherapy

The approved establishment of physiotherapists for the area is three. Their work is not only concerned with orthopaedic cases attending one or other of the clinics, but is essential for the needs of spastic children attending the special school for physically handicapped children. Between February and June 1952, two full-time and two part-time physiotherapists were employed, equivalent to two and seven-elevenths full-time staff. At the time of writing the strength is one and nine-elevenths, the children at Vale Road are now receiving totally inadequate treatment and the inability to fill the vacancies is causing grave concern to the orthopaedic surgeons and the staff of the school.

Speech Therapy

A second speech therapist for Tottenham was appointed in April 1952. Two others work part-time in Hornsey. This increase in staff has made possible a daily session at Vale Road Special School for Physically Handicapped Children, where two therapists, one with specialist training, treat children suffering from cerebral palsy.

The importance of the preventive aspect of the work is becoming increasingly recognised. More pre-school children are seen. An indirect approach, through parent education, has proved

of value in the treatment of early stammer, or delayed speech development, while suspected sensory loss or organic lesion requires the earliest expert investigation.

Work with a recording apparatus has shown the possibilities of such equipment as an aid to treatment.

Report on the Rheumatism Supervisory Scheme for the year 1st August 1951 to 31st July 1952

This rheumatism supervisory scheme was inaugurated on 1st August 1951 under the overall direction of Dr. I.M. Anderson, Paediatrician, Prince of Wales's Hospital, with the close co-operation of the local Public Health and Area Health Departments.

The children are referred to the clinics by their private doctors and through the School Health Service. A number of children are also admitted directly to the paediatric wards of the Prince of Wales's Hospital and St. Ann's General Hospital suffering from acute rheumatic fever and allied conditions. After discharge from hospital these patients attend the supervisory clinic.

The supervisory clinics for follow-up are held on alternate Monday mornings in the Out-patients Department of the Prince of Wales's Hospital. The routine examinations are carried out by the paediatric registrar and an assistant medical officer, assisted by a sister-in-charge and a clerk from the Area Health Office. Both new and old patients are seen at each session. In the case of new patients a full history is taken and a complete clinical examination is carried out. The various forms are then completed and other investigations, where necessary, such as X-rays and electrocardiographs are performed. After these preliminary procedures the patients are seen by Dr. Anderson on Tuesday and Thursday mornings at the Prince of Wales's Hospital. At this examination and from the results and reports previously obtained the diagnosis and clinical assessment are made and recommendations regarding future schooling are sent to the School Health Authorities.

After this initial assessment the patients are seen at regular intervals at the supervisory clinic by the paediatrician or local authority medical officer and should any significant change appear in the clinical condition they are again referred to Dr. Anderson for further discussion regarding treatment or

special educational requirements.

During the year 37 patients suffering from acute rheumatism, chorea or recurrences were treated in the wards. While the number of long-stay in-patients was increasing it became apparent that some educational provision would become necessary and arrangements were made through the Borough Education Officer for Tottenham to provide a hospital teacher.

The following table gives details of the patients referred to the supervisory centre during the year:-

	Rheumatism and allied disorders	Congenital heart lesions
No. of patients - Male	35	27
Female	40	20
	<u>75</u>	<u>47</u>
Resident in Area 3 (Tottenham and Hornsey)	56	30
Resident in other areas	19	17
Diagnosis - 1. Rheumatic pains without heart disease	18	-
2. Rheumatic heart disease (active)		
(a) Alone	12	-
(b) With polyarthritis	13	-
(c) With chorea	3	-
3. Rheumatic heart disease (quiescent)	24	-
4. Rheumatic chorea (alone)	5	-
Referred by - Family Doctor	54	27
School Health Service	20	19
Hospital	1	1
Reason for reference to clinic - Symptoms	69	11
Accidental finding	6	36
Health in 1st year of life - Satisfactory	55	21
Unsatisfactory (chiefly respiratory infections)	20	25
No record	-	1
Disposal - Admitted to hospital (St. Anns)	37	17
" " " (pre-scheme)	3	2
Out-patient supervision only	35	28
School Attendance - Ordinary - Full	60	29
Limited	10	1
Special - Day	2	3
Residential	-	1
Pre-school	3	10
Still in-patient in hospital	-	3

ANALYSIS OF SOME FACTORS IN THE RHEUMATIC GROUP

Significant family history of rheumatic disorders	25
<u>Housing conditions</u> - Satisfactory	33
Unsatisfactory	16
No report	26
<u>Psychosomatic assessment</u> (by clinical judgement and school reports)	
Stable, well-balanced personality	54
Emotionally disturbed or unstable	21
<u>Health in 1st year of life</u> - Satisfactory	55
Unsatisfactory (chiefly respiratory infections)	20
<u>Significance of blood anti-streptococcal titres</u>	
No. of patients suffering from non-rheumatic disease	
Titres between 1/40 and 1/80	20
No. of patients suffering from rheumatic fever or recurrence, of the following titres:-	
1/40	1
1/160	3
1/320	4
1/640	4
1/1280	3

Child Guidance

A proposal to establish a child guidance centre in Tottenham, within the existing accommodation at the Cornwall Road School Clinic, was approved during the year. The necessary alterations to the premises have, at the time of writing, been almost completed and it is anticipated that the centre will commence operations in April, 1953. Such a centre will be of great benefit to Tottenham mothers and children and will save them the long journey to the Child Guidance Training Centre in London.

Mass Radiography of School Children

In February, 1952 the Mass Radiography Unit visited Tottenham. 1651 school children (941 boys and 710 girls) attended for miniature chest films. Of these, 26 (19 boys and seven girls) were recalled for large films. Of these, one boy was found to be suffering from active primary tuberculosis.

B.C.G. Inoculations

The Medical Research Council continued their investigation

in the area into the prevention of tuberculosis by B.C.G. vaccination.

In 1951 the investigation had been concerned with accepting "school leaver" volunteers into the scheme. In 1952 the important task of following up the inoculated and the control groups was commenced. It can easily be appreciated that the success of the trial depends on the completeness of the follow-up, for without being able to assess the results of B.C.G. vaccination by comparing a large inoculated group with a control group no estimate of the value of the vaccine can be obtained.

The follow-up is carried out in three ways:-

1. *An annual X-ray and skin test:-* Sessions are held at a convenient centre between 4.30 p.m. and 8 p.m. to enable young people who are at work to attend with the minimum of disruption to their employers. The employers themselves are encouraged, by means of letters sent out by the Youth Employment Officer, to release any of their employees who are included in the trials. Publicity is also given in the press and by slides at local cinemas.
2. *Visits by Health Visitors:-* Prior to the annual X-ray the health visitors visit the volunteers to complete questionnaires concerning their state of health. Particular regard is paid to illnesses of more than two days duration and to any visits to hospitals or clinics. The opportunity is also taken to remind them of the importance of attending for annual X-ray.
3. *Co-operation with Chest Clinics:-* The Chest Physicians supply information to the Medical Research Council with regard to children in the age groups covered by the investigation who are known to the Chest Clinics.

In 1952 the Lordship Lane Medical Centre was used for the follow-up and out of 213 children who left school at the end of the 1951 summer term, 172 returned for X-ray. This represents a figure of 81% and in the words of Dr. Pollock who is in charge of the trials on behalf of the Medical Research Council "is a very good figure and we have every reason to be pleased with the success achieved".

SCHOOL HEALTH SERVICE STATISTICS FOR 1952

TABLE 12 - Periodic Medical Inspection

Periodic Medical Inspections				Other Periodic Inspections	Other Inspections	
Infants	Second Age Group	Third Age Group	Total		Special Inspections	Re-inspections
2523	2245	2217	6985	2417	2515	3225

TABLE 13 - Classification of the General Condition of Pupils

COUNTY COUNCIL OF MIDDLESEX				C (Feet)			
Age Group	Number	%	Number	%	Number	%	Number
Infants	2523	36.1	15513	47.2	54	1.1	1.1
Second Age Group	2245	33.1	13550	41.2	54	1.2	1.2
Third Age Group	2217	33.1	13550	41.2	54	1.0	1.0
Other periodic inspections	2417	36.1	13550	41.2	54	1.7	1.7
Total	11512	36.1	13550	41.2	170	1.9	1.9

AREA NO. 3 - HORNSEY AND TOTTENHAM

Table 14 - Defects found by Medical Inspection

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of defects		No. of defects	
	1	2	1	2
Defect	130	35	762	20
Group	SCHOOL HEALTH SERVICE		STATISTICAL RETURN FOR	
Defect	THE YEAR ENDED		31ST DECEMBER 1952	
Defect	31ST DECEMBER 1952		31ST DECEMBER 1952	
Head and Throat	240	2	240	2
Appendix	20	2	20	2
Cardiac Defects	20	2	20	2
Blood and Circulation	20	2	20	2
Lungs	20	2	20	2
Developmental	20	2	20	2
a. Heredity	20	2	20	2
b. Other	20	2	20	2
Orthopaedic	20	2	20	2
a. Posture	20	2	20	2
b. Flat Feet	20	2	20	2
c. Other	20	2	20	2
Nervous System	20	2	20	2
a. Epilepsy	20	2	20	2
b. Other	20	2	20	2
Psychological	20	2	20	2
a. Developmental	20	2	20	2
b. Stability	20	2	20	2
Other	20	2	20	2

1. Requiring treatment.

2. Requiring to be kept under observation but not requiring treatment.

SCHOOL HEALTH SERVICE STATISTICS FOR 1952

TABLE 12 - Periodic Medical Inspection

Periodic Medical Inspections				Other Periodic Inspections	Other inspections	
Entrants	Second Age Group	Third Age Group	Total		Special Inspections	Re-inspections
3533	2248	2319	8100	3413	5515	6239

TABLE 13 - Classification of the General Condition of Pupils

Age Groups	No. of pupils inspected	A (Good)		B (Fair)		C (Poor)	
		No.	%	No.	%	No.	%
Entrants	3533	1195	33.8	2294	64.9	44	1.3
Second Age Group	2248	726	32.3	1478	65.8	44	1.9
Third Age Group	2319	737	31.8	1559	67.2	23	1.0
Other periodic inspections	3413	1025	30.0	2329	68.3	59	1.7
Total	11513	3683	31.9	7660	66.6	170	1.5

Table 14 - Defects found by Medical Inspection

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of defects		No. of defects	
	1	2	1	2
Skin	130	35	782	10
Eyes	410	219	233	4
a. Vision	67	18	32	4
b. Squint	46	34	360	9
c. Other	23	22	70	1
Ears	12	30	44	-
a. Hearing	17	36	238	-
b. Otitis Media	156	237	246	3
c. Other	30	34	34	3
Nose and Throat	14	83	58	2
Speech	22	79	31	2
Cervical Glands	51	106	248	4
Heart and Circulation	51	106	248	4
Lungs	51	106	248	4
Developmental -				
a. Hernia	4	9	2	-
b. Other	1	22	21	-
Orthopaedic -				
a. Posture	50	100	21	3
b. Flat Foot	95	67	25	1
c. Other	196	111	243	9
Nervous System -				
a. Epilepsy	2	5	3	-
b. Other	16	22	33	3
Psychological -				
a. Development	1	30	84	1
b. Stability	8	62	92	13
Other	207	238	2390	39

1. Requiring treatment.

2. Requiring to be kept under observation but not requiring treatment.

TABLE 15 - Pupils found to require treatment

Number of individual pupils found at periodic medical inspection to require treatment (excluding dental disease and infestation with vermin).

Group	For defective vision (excluding squint)	For any of the other conditions recorded	Total individual pupils
Entrants	12	297	303
Second Age Group	108	252	341
Third Age Group	122	207	310
Total (prescribed groups)	242	756	954
Other periodic inspections	167	303	434
Grand Total	409	1059	1388

TABLE 16 - Minor Ailments

(a) Diseases of the Skin
(excluding uncleanliness)

Ringworm - (i) Scalp
(ii) Body

Scabies

Impetigo

Other skin diseases

Total

Number of cases treated or under treatment during the year

by the Authority	Otherwise
-	-
9	-
4	-
48	2
916	14
977	16

(b) Other treatment given no covered by other Tables

(i) Miscellaneous minor ailments

(ii) Other (Specify)
Heart Circulation

Lungs

Psychological

Developmental

Total

Number of cases treated

by the Authority	Otherwise
2237	67
30	33
251	117
128	25
15	4
2661	246

TABLE 17 - Eye Diseases, Defective Vision and Squint

	Number of Cases dealt with	
	by the Authority	Otherwise
External and other, excluding errors of refraction and squint	459	228
Errors of Refraction (including squint)	558	1550
Total	1017	1778
Number of pupils for whom spectacles were		
(a) Prescribed	288 *	807 *
(b) Obtained	268 §	458 §

* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

§ Known to be incomplete as glasses supplied direct to patients by National Health Service Opticians.

TABLE 18 - Diseases and Defects of Ear, Nose and Throat

	Number of Cases treated	
	by the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	-	-
(b) for adenoids and chronic tonsillitis	-	99
(c) for other nose and throat conditions	-	-
Received other forms of treatment	990	470
Total	990	569

TABLE 19 - Orthopaedic and Postural Defects

(a) Number treated as in-patients in hospital

9	
by the Authority	Otherwise
553	863

(b) Number treated

(c) Council Orthopaedic Clinics

Clinics	No. of new cases	No. of cases receiving treatment	Total Attendances
2	1332	1900	7092

TABLE 20 - Child Guidance and Speech Therapy

No. of pupils treated	Child Guidance	Speech Therapy
	41	232
	30	1

TABLE 21 - Dental Inspections and Treatment

Age Groups:-	No. inspected (i)	No. found to require treatment (ii)	No. referred for treatment at the County Council's Dental Clinics (iii)
Under 5 *	394	199	164
5 - 16 and over	13594	9016	5830
Specials	4583	4426	4411
Total	18571	13641	10405

* Nursery Schools only

iv. Number of pupils commenced treatment	8990
iva. Number of pupils treatment completed	7369
v. Number of attendances made by pupils for treatment	19383
vi. Number of appointments not kept	4105
vii. Number of half days devoted to	
(a) Inspection	111
(b) Treatment	2595
Total	2706
viii. Fillings. Permanent Teeth	9026
Temporary Teeth	3377
Total	12403
ix. Number of teeth filled. Permanent Teeth	8045
Temporary Teeth	3163
Total	11208
x. Extractions. Permanent Teeth	1274
Permanent Teeth for Orthodonture	148
TOTAL Permanent Teeth	1422
Temporary Teeth	9657
Total	11079
xi. Anaesthetics (a) General	1743
(b) Local	4123
(c) Regional	704
Total	6570
xii. Other operations (a) Permanent Teeth	2933
(b) Temporary Teeth	5295
Total	8228

TABLE 21 (cont.) - Special Dental Treatment undertaken by Dental Officers

Number of impressions, etc.	269
Number of Dentures fitted	43
Number of crowns and bridges	30
Number of inlays	2
Number of radiographs	
(a) at Dental Clinics	146
(b) at Hospitals	-

TABLE 22 - Orthodontic Examination and Treatment

	AGE GROUPS										TOTALS
	5	6	7	8	9	10	11	12	13	14	
Number of pupils examined	-	-	2	11	18	8	4	6	7	5	61
Number of pupils selected for treatment	-	-	2	11	17	8	4	6	7	5	60

Number of pupils commenced treatment (first attendance)	88
Number of attendances made for treatment	1429
Number of consultations	30
Number of impressions, etc.	275
Number of fixed appliances fitted	8
Number of removable appliances fitted	103
Number of radiographs	
(a) at Dental Clinics	13
(b) at Hospitals	-
Number of pupils treatment complete	24
Number of orthodontic sessions ($\frac{1}{2}$ days)	101

TABLE 23 - Infestation with Vermin

Total number of examinations	108879
Total number of pupils found to be infested	1038
Total number of individual pupils found to be infested for the first time during current year	491
Number of individual pupils in respect of whom cleansing notices were issued. (Section 54/2, Education Act 1944)	-
Number of individual pupils in respect of whom cleansing orders were issued. (Section 54/3, Education Act 1944)	-

TABLE 24 - Employment of Children and Young Persons

1. Number of children medically examined in order to ascertain whether they were physically fit to undertake employment of a light nature outside school hours	257
2. Number of instances in which the state of health was found to be such that certificates were withheld.	1
3. Number of children examined as to fitness to take part in entertainments.	20
4. Number of cases in which certificates to take part in entertainments were withheld.	-

TABLE 25 - Education Act 1944 - Sections 57(3), 57(4) and 57(5)

Cases dealt with under Section 57, Education Act 1944:-	
Sub-Section 3:	14
Sub-Section 4:	-
Sub-Section 5:	8
Cases de-notified under Section 8, Education (Miscellaneous Provisions) Act 1948:	

TABLE 26 - Medical Examination of Teachers

(a) Number of Teachers examined as to fitness for appointment	24
(b) Number of Students examined as to fitness for first appointment	10
(c) Number of Students examined as to fitness to undertake Training Course	32

RETURN OF HANDICAPPED PUPILS, YEAR ENDED 31st DECEMBER 1952

ASCERTAINMENT

DISTRIBUTION (as at last day of year)

CATEGORY	No. of ascertained Cases known 1st day of year		No. of New Cases ascertained during year		No. of ascertained Cases known last day of year		In Special Day Schools		In Special Residential Schools		In Maintained Primary & Secondary Schools		In Independent Schools		Not at School		Total	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G
Blind Pupils	2	6	2	1	4	6	-	-	4	6	-	-	-	-	-	-	4	6
Partially Sighted Pupils	5	11	3	4	7	14	5	11	-	2	2	-	-	-	-	1	7	14
Deaf Pupils	13	5	-	-	12	5	8	4	3	1	-	-	-	-	1	-	12	5
Partially Deaf Pupils	35	32	20	10	44*	29 ø	6	4	3	2	35*	22 ø	-	-	-	1	44*	29 ø
Delicate Pupils	32	23	28	17	21	13	3	3	14	10	4	-	-	-	-	-	21	13
Diabetic Pupils	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Educationally Sub-Normal Pupils	73	51	12	17	64	58	35	41	7	1	21	14	-	-	1	2	64	58
Epileptic Pupils	3	4	1	-	2	3	-	-	2	2	-	1	-	-	-	-	2	3
Maladjusted Pupils	64	20	5	3	41	13	-	-	10	5	31	8	-	-	-	-	41	13
Physically Handicapped Pupils	27	23	10	1	29	16	23	16	-	-	2	-	-	-	4	-	29	16
Pupils with Speech Defects	158	58	113	46	196	74	-	-	-	-	178	73	2	-	16	1	196	74
Pupils with Multiple Defects	8	4	1	1	9	4	3	4	2	-	3	-	-	-	1	-	9	4
Totals	420	237	195	100	429*	235 ø	83	83	45	29	276*	118 ø	2	-	23	5	429*	235 ø
Grand Totals	657		295		664 * ø		166		74		394 * ø		2		28		664 * ø	

Children not ascertained as H.P. but recommended convalescence in a Holiday Home or Camp School during Year ended 31st December, 1952.

B	G
99	77

* Includes 33 boys ascertained during the year as result of Audiometry Survey and recommended a favourable position in the class.
ø Includes 19 girls ascertained during the year as result of Audiometry Survey and recommended a favourable position in the class.

ORTHOPTIC TREATMENT

Number of New Cases	Number of Cases receiving treatment	Total Attendances
68	97	771

30 children were referred to the Royal Eye Hospital for Orthoptic treatment.

CHIROPODY

Expectant and Nursing Mothers and School Children

	Expectant and Nursing Mothers	Boys				Girls			
Ages		0-5	5-10	10-15	Total	0-5	5-10	10-15	Total
Attendance - FIRST	11	10	20	43	73	6	25	154	185
- SUBSEQUENT	62	14	73	222	309	18	86	671	775
CONDITIONS - Cases treated at Clinic									
Flat Feet	4	1	-	1	2	-	3	10	13
Callosity	32	-	-	8	8	1	3	34	38
Corns	34	6	15	16	37	3	17	57	77
Bursa of Heel	-	-	-	-	-	-	-	1	1
Deviation of Great Toe	1	-	1	-	1	-	-	13	13
Foot Wart	35	2	40	141	183	4	54	450	508
Pain in Forefoot	17	-	-	1	1	-	-	1	1
Ingrowing Nail	9	2	1	6	9	3	-	12	15
Pain in Hallux Joint	-	-	-	-	-	-	-	3	3
Hooked Nail	-	-	-	1	1	-	1	-	1
Exostosis of Heel	-	-	1	-	1	-	-	1	1
Valgus Feet	-	-	1	-	1	-	1	2	3
Ramshorn Nail	-	-	-	-	-	-	1	1	2
Hammer Toes	-	-	-	-	-	-	-	1	1
Epidermophytosis	-	-	-	-	-	-	-	2	2
Club Foot	-	-	-	1	1	-	-	-	-
Toes Clawed	-	-	-	1	1	-	-	5	5
Excessive Perspiration	-	-	1	1	2	-	-	-	-
Nails Club	1	1	4	3	8	1	2	1	4
Valgus Ankles	1	1	1	2	4	1	2	12	15
Knock Knees	-	1	1	-	2	-	-	1	1
CONDITIONS - Cases referred to Orthopaedic Clinic									
Flat Foot	-	1	-	2	3	-	3	10	13
Deviation of Great Toe	-	-	-	-	-	-	-	6	6
Pain in Hallux Joint	-	-	-	-	-	-	-	3	3
Valgus Feet	-	-	1	-	1	-	-	2	2
Hammer Toes	-	-	-	-	-	-	-	1	1
Knock Knees	-	1	2	-	3	-	-	1	1
Retracted Toes	-	-	-	1	1	-	-	2	2
Pain in Forefoot	-	-	-	1	1	-	-	-	-
Valgus Ankles	-	1	2	1	4	1	2	10	13
Club Foot	-	-	-	1	1	-	-	-	-
Polydactylism	-	-	1	-	1	-	-	-	-

COUNTY COUNCIL DAY SPECIAL SCHOOLS

County District in which children reside	No. of new recommendations received during year	No. of children admitted during year	No. of children on waiting list on last day of year
<u>Vale Road School for Physically Handicapped Children</u>			
Tottenham	6	11	2
Hornsey	3	3	-
Edmonton	1	-	1
Hendon	6	6	3
Wood Green	4	3	1
Enfield	5	4	2
Friern Barnet	1	-	1
Southgate	2	2	1
Totals	28	29	11
<u>Tottenham School for the Deaf</u>			
Tottenham	-	4	1
Hornsey	2	5	-
Edmonton	3	4	-
Enfield	1	3	-
Hendon	5	2	2
Wood Green	-	1	-
Friern Barnet	1	2	-
Southgate	1	2	-
Uxbridge	1	1	-
Totals	14	24	3

AUDIOMETRY

<u>Children tested by Gramophone Audiometer</u>	
School Population (31.12.52)	33000
Total tested	5372
Absentees	377
Referred to Medical Officer at Minor Ailment Clinic	76
Referred direct to Aurist	36
Referred by Medical Officer to Aurist	39
<u>Children referred to Medical Officer at Minor Ailment Clinic</u>	
Referred to Aurist	39
Cleared up without reference to Aurist	27
Waiting further gramophone audiometer test after attending Minor Ailment Clinic	1
Investigation incomplete (Parents unwilling, left school, left district, etc.)	9

I N D E X

Page

Ante Natal Clinics	...	...	...	...	81
Area Health Service	.....	...	...	...	77
Atmospheric Pollution	...	...	...	...	30
B.C.G. Inoculation	...	...	...	...	11, 100
Births and Deaths	...	...	...	...	71
Burials	...	...	...	...	63
Cancer	...	...	...	...	75
of the Lung	...	...	...	...	17
Catering Establishments	...	...	...	...	19
Child Guidance	...	...	...	...	100
Child Life Protection	...	...	...	...	85
Closet Accommodation	...	...	...	...	29
Closing Orders	...	...	...	...	33
Confinements - Home and Institutional	...	...	...	...	80
Coronary Disease	...	...	...	...	18
Council, Members of	...	...	...	...	1
Daily Guardian Scheme	...	...	...	...	86
Day Nurseries	...	...	...	...	86
Deaf, School for	...	...	...	...	96
Deaths	...	...	...	...	74
Defects Remedied	...	...	...	...	39
Demolition Orders	...	...	...	...	32
Dental Service, Priority	...	...	...	...	87
School	...	...	...	...	96
Diphtheria	...	...	...	...	10
Diphtheria Immunisation	...	...	...	...	93
Disinfestation	...	...	...	...	37
Domestic Help Service	...	...	...	...	94
Drainage and Sewerage	...	...	...	...	29
Dysentery	...	...	...	...	16
Expectant Mothers, Care of	...	...	...	...	79
Factories	...	...	...	...	41
Fog, The Great	...	...	...	...	67
Food - Condemned	...	...	...	...	23
Hawkers	...	...	...	...	22
Hygiene	...	...	...	...	19

	Page
Food Legal Proceedings	25
Poisoning	17
Premises	19
Preservation	21
Sampling	25
Guardian Scheme, Daily	86
Hawkers of Food	22
Health & Housing Committee	2
Health Visiting	89
Holiday Homes	94
Home Nursing	91
Horses, Slaughter of	22
Housing	30
Housing Act, 1936, s.9	31
s.11 & 12	32
Part III	34
Ice Cream	20
Immunisation, Diphtheria	93
Infant Welfare Centres	83
Infantile Deaths	73
Insect Pests	36
Knackers' Yards	22
Laboratory Service	59
Legal Proceedings	25, 35
Mass Radiography	9
Massage and Special Treatment Establishments	58
Maternal Deaths	65
Measles	14
Medical Examination of Staff	58
Metropolitan Water Board	27
Midwifery Service	87
Midwife's Clinics	82
Milk and Dairies	19
Mothercraft Classes	80
Mothers and Young Children, Care of	79

	Page
National Assistance Act, 1948, s. 47	63
s. 50	63
Notices served	38
Nurseries, Day	86
Nursing, Home	91
Occupational Health, Pilot Survey	43
Old People's Welfare	60
Outworkers	42
Paratyphoid Fever	16
Persons in need of Care and Attention	62
Pet Animals Act, 1951	59
Physically Handicapped Children, Special School	96, 109
Physiotherapy	97
Poliomyelitis	16
Post-natal Care	83
Premature Infants	83
Preserved Foods	21
Prevention of Illness, Care and After-care	94
Public Health Act, Part III	34
Public Health Department, Staff	2
Puerperal Pyrexia	16
Rag Flock and other Filling Materials Act, 1951	58
Repairs in Default	31, 40
Rheumatism Supervisory Scheme	98
Rodent Control	36
Sanitary Inspectors, Summary of Inspections	37
Scarlet Fever	12
School Health Service	95
Statistics	103
Sewerage and Drainage	29
Shops	56
Slaughterhouses	22
Smoke Nuisances	30
Spastic Unit	96
Speech Therapy	97
Statistical Summary	64
Stillbirths	4

	Page
Toddler Clinics 	84
Tottenham Corporation Act, 1952 	34
Tuberculosis 	6
Vaccination and Immunisation 	92
Virus Infection during Pregnancy 	91
Water Supply 	27
Defective Pipes and Fittings 	29
Whooping Cough 	15
Vaccination 	92
Work in Default 	31, 40

