[Report 1937] / Medical Officer of Health, Andover R.D.C.

Contributors

Andover (England). Rural District Council.

Publication/Creation

1937

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Andover

Rural District Council

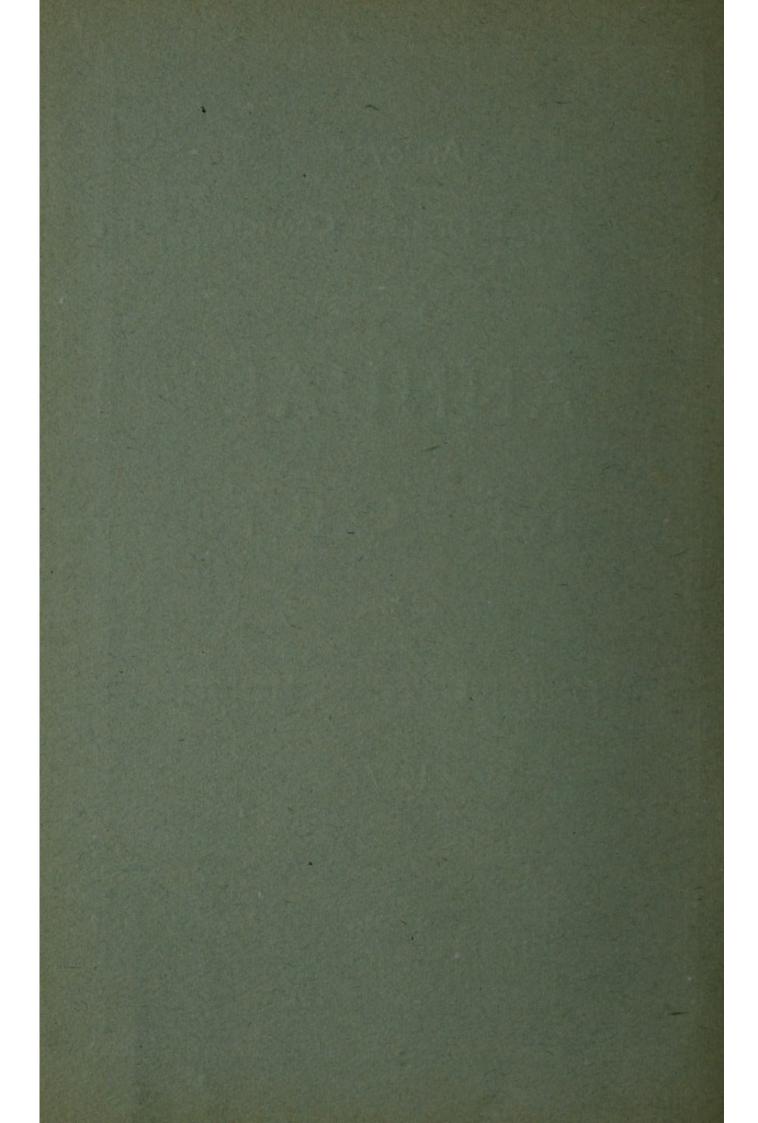
ANNUAL

OF THE

Medical Officer of Health

1937

ANDOVER
STANDARD PRESS, 19 HIGH STREET
1938



Andover

Rural District Council

Medical Officer of Health's Report

For 1937

Chairman: Rev. H. E. CLATWORTHY

Vice-Chairman: Mr. E. J. BEAUMONT-NESBITT

Chairman of Sanitary Committee: Rev. H. E. CLATWORTHY

Officers of Sanitary Department:

Sanitary Inspector: Mr. A. W. JOHNSON

Assistant Sanitary Inspector: Mr. H. G. SMITH

Clerk: Col. F. L. FOOTNER

Medical Officer of Health: Dr. W. SIMPSON

Medical Officer-in-charge Fever Hospital: Dr. J. A. BALCK FOOTE

ANDOVER RURAL DISTRICT COUNCIL OFFICES, JUNCTION ROAD,

ANDOVER.

Year 1937.

To the Andover Rural District Council.

MR. CHAIRMAN, LADIES AND GENTLEMEN-

I present the Annual Report for the year 1937. It has been drawn up to include the information and statistics asked for in Circ. 1650 from the Ministry of Health. Copies have been forwarded to the Minister of Health, the Home Office, M.O.H. of the Hampshire County Council, and the M.O.H. of the Borough of Andover.

STATISTICS AND SOCIAL CONDITION OF THE AREA.

Area-67,811 acres

Population—Census, 1931—11,910 (civil)

Estimated Resident Population, mid. 1936—15,360

Number of Inhabited Houses (end of 1937) according to Rate Books-3,018

Number of Families or Separate Occupiers (1931 Census)—2,736

Rateable Value—£75,308

Sum represented by a penny rate—£304

Social Conditions.

There is hardly any change to report. Tidworth is largely a Military Centre, and here, and at Shipton Bellinger, War Office property is occupied by civilians and is exempt from supervision by this Council.

The main occupation is Agriculture, including dairy and chicken farming. The Colony for unemployed Durham miners at Little Park continues to develop. Training Stables exist at Weyhill and Kimpton. There are also several Water Cress beds in the area.

Other industries are the Engineering Works in the Anna Valley, and a National By-Products Factory at Grateley.

Unemployment is not serious in this area.

Vital Statistics.

1. Births.

Birth Rate for England and Wales, 14'9 per 1,000.

Andover R.D.C.-

TOTAL M.

89) Birth Rate 14'13 per 1000 Live Births-Legitimate ... 208 119 of the estimated resident population. Illegitimate... 9 7

Still Births-Legitimate ... 10 9 1) Rate per 1000 total (live Illegitimate... — — — and still) births 46'08.

2. Deaths.	тота	L M.	F.	
Deaths (all causes)	126	69	9 57	
Death Rate per 1000 of the estimat Andover R.D.C 8'9	ed resident p	opulati	ion :—	12.4
Deaths from Puerperal Causes (Hea				
Short Eist) .—		RATE	PER 1000	TOTAL
(20) D	NUMBER		& STILL)	
(29) Puerperal Sepsis			1.6	
(30) "Other" Puerperal Cau	ises 1		4.6	
Total	1		4.6	
Death Rate of Infants under One Y		_	10	
		NDOVE	R ENGL	AND
		R.D.C.	AND V	VALES
All Infants per 1000 Live Bi		16.08	58	
Legitimate Infants per 1000		48.09		
Live Births (actual deaths	10)			
Illegitimate Infants per 1000 I Live Births (actual deaths		No		
Live Birtiis (actual deaths	<i>((1)</i>	eaths	NUMB	ED.
Deaths from Cancer (all ages	(2)		20	EK
" Measles (all age			Nil	
" Whooping Coug			Nil	
" Diarrhœa (unde		ge)	1	
3. Chief Causes of Death:			M. 1	F.
Diphtheria			1	
Influenza				1
Respiratory Tuberculosis			2 5	2
Cancer				10
Diabetes			2	2
Cerebral Hæmorrhage			1	4
Heart Disease				12
Other Circulatory Disease			5	6
Bronchitis Pneumonia (all forms)			3	2 3
Diarrhœa under 2 years			3	1
Appendicitis		•••		1
Other Liver Diseases (Cirrho	sis excluded)		2	
Other Digestive Diseases			-	2 2
Acute and Chronic Nephritis			1	1
Other Puerperal Diseases			-	1
Congenital Causes			8	2
Senility			3	4
Other Violence (Suicide excl	uded)	•••	1 5	1
Other defined Diseases	***	•••	3	1
			70 5	57
Total			127	
For 193	6		139	

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

1. Staff.

Medical Officer of Health (part time)—W. Simpson, M.B., B.S. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

Medical Officer in charge of Weyhill Isolation Hospital (part time)—J. A. Balck Foote, M.B., Ch.B. (Edin.), D.P.H.

Sanitary Inspector, Building Surveyor, Housing Architect, Petroleum Officer and Shop Inspector—Mr. A. W. Johnson (whole time).

Assistant Sanitary Inspector-Mr. H. G. Smith (whole time).

Clerk in Sanitary Dept.—Mr. K. J. W. Burnett (whole time).

There has been no alteration in the Staff in the Sanitary Department during the year.

2. Laboratory Facilities.

These remain as previously reported. The Health Department of the County Council examines and reports upon clinical materials and water supplies. The Medical Practitioner interested is informed of the results and also the M.O.H. when such results require administrative action.

3. Ambulance Facilities.

(a) For Infectious Cases.—The Ambulance is kept at Weyhill Isolation Hospital and is available for cases in this Area, and also by arrangement, within the area of the Urban District of Andover and parts of the Kingsclere and Whitchurch R.D.C. from which patients are removed to this Hospital.

A new "Morris" Ambulance was obtained towards the end of year, since the old one did not comply with existing regulations relating to motor vehicles with respect to brakes, glass and lights. The expense of reconditioning the old ambulance so as to comply with these regulations was considered too great taking the age of the ambulance into consideration. In the new Ambulance there is a separate compartment for infected bedding, etc., which is removed for disinfection.

Address: Weyhill Isolation Hospital. (Tel.—Weyhill 214.)

(b) For Non-Infectious and Accident Cases.—The Andover Town Ambulance is available for these kind of cases. Accident cases on roads are frequent. It may be required to remove cases to Andover War Memorial Hospital, Public Assistance Institution and elsewhere. Address: Macklin Bros., Bridge Street, Andover. (Tel—Andover 59.)

The arrangements are unchanged. Both services are prompt and efficient.

4. Nursing at the Home.

Private nurses, living in Andover, or obtained from various Nursing Associations, may nurse cases in this District. The County Council Health Visitors may be called upon to nurse (under the direction of the general practitioner attending) cases of Discharging Eyes in babies, and maternity cases with Puerperal complications, when not sufficiently severe for treatment in Hospital. They also "follow up" children absent from school on account of infectious disease, but do no actual nursing of these cases.

District Nurses. The Area is covered satisfactorily by District Nurses. The table below shows the Nurses District, Nursing Association, and means of transport provided:—

Area served by District Nurse	District Association	Transport Facilities provided by Association
Faccombe, Hurstbourne Tarrant Linkenholt, Vernham Dean Tangley, Hatherden, Smannell	Hurstbourne Tarrant Vernham Dean Andover	Car. Bicycle.
and Longparish Appleshaw, Fyfield, Penton Mewsey, Kimpton, S. Tidworth,	(3 Nurses)	Car.
Shipton Bellinger Monxton, Thruxton, Quarley,	Weyhill	Car. Bicycle
Grateley Quartey,	Amport	provided by Associa- tion. Nurse's own Car.
Upper, and Goodworth Clatford, Abbotts Ann Wherwell and Chilbolton Barton Stacey, Bullington	Abbotts Ann Leckford Sutton Scotney	Car. Car. Car.

The area and population for the Weyhill Nurse seems very large when compared with others. The C.C. is the Local Authority for the Midwives' Act, 1936.

5. Treatment Centres and Clinics.

No clinic nor treatment centres are provided by this District CouncilThe County Council provides the following for the area around Andover:

Clinic Place Time For Treatment or Advice

Tuberculosis... C.C. Health Centre, Weds. (weekly)

Junction Road, at 10.00 a.m. Children

Andover

Orthopædic C.C. Health Centre, Junction Road, Andover	Tues. (weekly) Children at 10.00 a.m. up to 16 Orthopædic years Surgeon attends on 4th Tues.
School Clinic ,, (Minor Ailments)	Thurs. (weekly) Children at 9.30 a.m. up to 14 years old
Eye Clinic ,, Dental Clinics ,, and also in some villages	By appointment ,, By appointment Children up to 14 years old and Adults referred from Ante-Natal Clinics
Ante-Natal C.C. Health Centre Junction Road, Andover	1st Wed. in Expectant month, 3rd Mothers & 4th Mon. in month
CHILD WELFARE CENTRES :-	
(1) C.C. Health Centre, Thurs. (wee Junction Road, Andover	ekly) at 2.00 p.m. Mothers and Children under 5 years old
(2) Amport Hut 1st Mond. (mor	
(3) Appleshaw, Church Hall 3rd Wed. (mon (4) Chilbolton,	nthly) 2.30 ,,
Village Hall 2nd Mond. (mon	nthly) 2.00 ,,
(5) Hatherden, Hatherden Manor 4th Tues (mon	nthly) 2.30 ,,
(6) Longparish,	
Village Hall 2nd Wed. (mon (7) Upper Clatford,	nthly) 2.30 ,,
Methodist Chapel Hall 1st Tues. (mon	nthly) 2.30 ,,
(8) Vernham Dean, Village Hall 3rd Tues. (mon	nthly) 2.00 ,,
(9) Weyhill,	
Village Hall 2nd Tues. (mon (10) Hurstbourne Priors,	nthly) 2.30 ,,
Village Hall 1st Wed. (mon (11) Over Wallop,	nthly) 2.30 ,,
Church Hall 4th Wed. (mon	nthly) 2.00 ,,
(12) St. Mary Bourne, Parish Room 2nd Thurs. (mon	nthly) 2.00 ,,
(13) Stockbridge, Town Hall 3rd Tues. (mon	n(hle) 2.30
(14) Sutton Scotney,	
Jubilee Hall 3rd Fri. (mon	nthly) 2.00

The last five Child Welfare Centres, mentioned above, are outside this district, but parents residing within it may attend them if it is more convenient to do so.

The nearest Venereal Disease Clinic is at the Royal County Hospital, Winchester. Women attend on Tuesdays at 3.00 p.m., and men, on Saturdays at 2.30 p.m., weekly. At Salisbury Infirmary women attend on Wednesdays at 6.00 p.m., or Saturdays at 11.30 a.m., men, Tuesdays, at 11.30 a.m., and Fridays at 6.00 p.m.

6. Hospitals. (a) Owned by the R.D.C.

ISOLATION HOSPITAL, WEYHILL.—This is the Isolation Hospital for this district. Arrangements have been made with the Andover Urban District Council and for parts of the Kingsclere and Whitchurch R.D.C. to admit infectious diseases. The parts of the latter Authority are Ashmansworth, East Woodhay, Highclere, Hurstbourne Priors, Laverstoke, Litchfield, St. Mary Bourne and Whitchurch.

Dr. Balck Foote is in charge of this Isolation Hospital.

I have much pleasure in including Dr. Balck Foote's Report to the Andover R.D.C. on the Weyhill Hospital.

REPORT ON ISOLATION HOSPITAL, WEYHILL, 1937 General.

The scheme for the enlargement and improvement of the Hospital was completed during the year, and the formal opening took place on November 15th, in the presence of a large and representative gathering.

The new ward block is in every way a vast improvement on the old. The cubicle system allows complete segregation of cases. Large windows permit the supervision of every cubicle from the centrally situated Duty Room, while screens and small curtains maintain the necessary privacy. Both curtains and screen coverings are changed after every occupant, and washed and disinfected before being again taken into use. It was found that the large French windows facing south and their upper lights admitted too much sun and glare shining directly on patients in bed. Sun blinds have consequently been authorised by the Council, and will be in position before next summer.

The ward furnished as an emergency operating room has been fitted with the necessary equipment and lighting.

An even temperature of about 60 F. is maintained throughout the building by the radiators, and the hot water supply is ample and adequate.

A dinner wagon on wheels with special arrangements for preserving heat allows meals to be brought from the kitchen and served hot in the coldest weather. The old ward block has been temporarily vacated pending reconditioning. This will include central heating, re-roofing, re-flooring and redecorating. Other minor improvements, mentioned in my last report, have been postponed for the present.

The addition of the two wings has greatly improved the outward appearance of the administrative block. Of the internal arrangements the new kitchen is a great improvement on the old, and its Aga cooker functions admirably. The former kitchen has been converted into a maids' sitting-room. There is also on the ground floor the staff dining-room. On the first floor are the nurse's bedroom and an office and bathroom. The second floor contains four bedrooms for the domestic staff. The mattress store in one of the wings is warmed by pipes from the main building.

The lodge has been handed over to the Matron and her husband.

The new sewage scheme has been completed.

Some concern was caused by the discovery in the latter part of the year of bacillus coli in rather high concentration in the water supply. Chlorination was immediately instituted. The matter was still under investigation at the end of the year, but it may be said here that the cause of contamination was found to be seepage from a soak away for surface water, and that the matter is being remedied.

Some minor improvements were carried out at the laundry, and the new mortuary has been completed.

The staffing of the hospital was a source of difficulty throughout the year. It will be recalled that the provision of a second permanent nurse had been sanctioned by the Council, but right up to the end of the year it had been found impossible to find one. The enlargement of the domestic staff to a cook and three other maids was achieved towards the end of the year.

Clinical Notes.

A summary of the cases admitted is given in an appendix. The total number is 42 as compared to 79 in 1936. The drop is almost entirely due to the Kingsclere and Whitchurch Rural District, which furnished only 11 cases as compared to 47 in the previous year. The figure for Andover Borough remained unchanged, that for Andover Rural District dropped by one.

As regards classes of disease the most marked difference was in scarlet fever, where the total admissions dropped from 52 to 7. The Borough was unaffected, but in Andover Rural District the drop was from 16 to 4, and in Kingsclere and Whitchurch District from 34 to one. There were no deaths in hospital from scarlet fever.

There was a rise in the number of cases of diphtheria from 11 to 19. For this Andover Rural District was responsible by furnishing 9 cases as compared to none in the previous year. Kingsclere and Whitchurch had 9 compared to 10 in 1936, and the Borough in both years only one. All these cases were confirmed bacteriologically. There were 3 deaths from diphtheria, all very severe cases.

There were 2 cases of erysipelas, both from the Andover Rural District. One of these died. There was one case of enteric from the Borough, bacteriologically confirmed as paratyphoid B.

Of the 13 cases admitted for observation, 8 were suspected as diphtheria, 2 had meningeal symptoms, one of which was subsequently transferred to Alton, 2 had scarlatiniform rashes, and 1 had all the symptoms of enteric, but failed to respond to any bacteriological test. There was one death among the observation cases, a boy who was sent in as suspected diphtheria, but actually had a large retropharyngeal abscess.

A point of some interest which appears from these figures is the apparent freedom of the Borough from infectious disease. In 1936 it only furnished 8 admissions out of a total of 79, and this year again only 8 out of 42.

J. A. B. FOOTE,

Medical Superintendent.

APPENDIX.

Admissions to Weyhill Isolation Hospital, 1937.

Andrew P.D.	Scarlet Fever	Diph- theria	Erysi- pelas	Enteric	Observa-	22
Andover R.D.	 4	9	4	_	0	23
Andover Borough Kingsclere and	 2	1	-	1	4	8
Whitchurch	 1	9	_	-	1	11
m . 1	-					
Total	 1	19	2	1	13	42
				-	-	-

(b) Other Hospitals.

ANDOVER WAR MEMORIAL HOSPITAL.—This is within the Andover Urban District, and is used for Surgical, Medical and Maternity Cases.

Andover Public Assistance Institution.—This is also within the Andover Urban District and used mainly for senile and chronic types of cases.

Other hospitals which admit cases from this district are the County Hospitals at Winchester and Salisbury.

SANITARY CIRCUMSTANCES OF THE AREA.

1. (i) WATER SUPPLY.

Wells-New wells sunk			15
Well cleansed and repaired			2
Closed as polluted			-
Piped Supplies-Areas supplied : Shipto	on Bellir	nger, Tidwo	orth,
Faberstown, Applesh		ernham D	ean,
Faccombe and Linker	shalt		
z necombe ma zime	more.		
New Supplies provided Number of Samples taken for analys			8 31

No shortage of water has been reported during the year. Thirty-one samples of water have been taken during the year from all sources, two private wells were cleansed and repaired.

A sample of water taken from the Appleshaw Water Supply in January, 1937, was reported to be not quite satisfactory for a Public Supply owing to the presence of coliform bacilli in 20 m.l. An area near the top of the Ludgershall Water Works well, where water was allowed to collect, was concreted over and further samples taken in the period under review have been satisfactory.

There is no doubt that the provision of sewers for the hamlet of Faberstown, in conjunction with the Pewsey R.D.C. scheme for Ludgershall, would considerably lessen the possibility of pollution of the Water Company's well which is situated in Faberstown, where now sewerage disposal is by cess pits.

A number of samples of water taken from the borehole of the Weyhill Isolation Hospital showed the water to be hardly satisfactory, B. Coli. being present in 10 m.l. to 30 m.l. The pollution was surmised to come from surface soil and rainwater soakaways from the roof of the pumping engine shed. The ground around the shed and soakaways adjacent were treated with chloride of lime, and free chlorine was detected in the water from the bore (twice out of three tests) which confirmed the suspicion. The rainwater soakaways are being taken out and the rain water will be discharged at a distance of at least 60 feet from the well. This work is now in hand. Recent samples of water have been satisfactory (March, 1938).

The Water Supply at Vernham Dean continues to be satisfactory.

(ii) DRAINAGE AND SEWERAGE.

Drains examined, tested, exposed, etc.		109
Drains unstopped, repaired, trapped, etc.		19
Waste pipes, rainwater pipes disconnected,	repaired	-
Drains re-constructed		22
New soil pipes or ventilating shafts fixed		78
Sewers—new lengths laid		_

2. RIVERS AND STREAMS.

The drainage of one large house which emptied into the River Test has been disconnected and a proper disposal system installed.

3. (i) CLOSET ACCOMMODATION.

Number	of pail	closet	s substituted for	privy	vaults	2
"	11 11					
,,	" water	close	ts substituted for	dry re	eceptacles	16
11	11 11	11	provided			59

(ii) Public Cleansing.

Parishes in which house refuse is removed by the Public Scavenger:—Shipton Bellinger (by R.D.C.) and Tidworth (by War Department).

Shipton Bellinger: Frequency of Removal: Night Soil, twice weekly Ashes, etc., once weekly Cesspools, once weekly where required Number of complaints Method of Final Disposal (for Shipton Bellinger On Land CESSPOOLS. Cesspools rendered impervious emptied, cleansed, etc. 18 abolished SCAVENGING. The Scavenging of Shipton Bellinger is carried out by contract and there have been no complaints with the present Contractor. The emptying of cesspits during the daytime cannot be considered satisfactory; the number of cesspits is increasing and owing to the erection of Council Houses with baths and water closets, the provision of a sewerage scheme is necessary. UNBURNABLE REFUSE. There are fourteen parishes providing means for the disposal of unburnable refuse. Eleven have either mouthly or bi-monthly collections and three provide a dump for the use of the village. (iii) SANITARY INSPECTION OF THE AREA. General Inspections made during the course of the year ... Total Number of Nuisances abated during the year Abated as the result of Informal Notice by the Sanitary Inspector 7 Reported to the Council:-Statutory Notices issued Statutory Notices not issued (iv) Shops Act, 1934. Number of Shops Inspected 24 Number of Shops without sufficient ventilation and temperature Number of Shops without sufficient sanitary accommodation (v) SMOKE ABATEMENT. No action found necessary (vi) SWIMMING POOLS AND BATHS. There are no Swimming Baths in the Area to which the public have access. (vii) ERADICATION OF BED BUGS. (1) Number of houses found to be infected:-(a) Council Houses (b) Other Houses Number of houses disinfested :-

(a) Council Houses (b) Other Houses (2) The method adopted for freeing infested houses from bed bugs ... No Cases

(3) The method employed for ensuing that the belongings of tenants are free from vermin before removal to Council Houses-inspection of belongings prior to removal.

(4) Whether the work of disinfestation is carried out by the Local Authority or by a Contractor ... No action was required

5) The measures taken by way of supervision of education of tenants to prevent infestation of re-infestation after cleansing ... No action was required

(viii) OFFENSIVE TRADES.

Number in the district 1
Number of Inspections 2
Contraventions of Regulations

4. Schools.

The Hants County Council is the Local Education Authority. No Schools were closed for Infectious Disease during the year. Several cases of Diphtheria occurred in the Hatherden Area towards the end of the year. The School at Hatherden was visited by the M.O.H. and all children and teachers swabbed. Also all absentees were followed up by the Heath Visitors and were also swabbed in cases where no doctor was attending. No carrier was discovered. The close contacts in the homes where cases occurred were swabbed, more than once in most cases, and this resulted is finding additional clinical cases of Diphtheria.

The practice of the Head Teachers informing both the District and the County M.O.H. of children absent with Infectious Disease, has been continued and is a valuable help in controlling these diseases. The District M.O.H. visits the Schools and if necessary the County M.O.H. arranges for a Health Visitor to follow up all absentees. In this way missed or overlooked cases are less likely to arise. The Health Visitors report any information, obtained by the following up, directly to the District M.O.H. as well as the County Medical Officer.

Fairly localised epidemic of Mumps has occurred at Hurstbourne Tarrant and at Hatherden, Whooping Cough at Barton Stacey, Influenza at Amport and Abbotts Ann and Chicken Pox at Shipton Bellinger. Very few cases of Measles have occurred.

WATER SUPPLY AT SCHOOLS.

The County Medical Officer arranges for the periodical examinations of Water Supplies to Schools. Two are reported as fairly satisfactory, Hatherden and Quarley, and are being kept under observation. The remainder are classed as satisfactory.

The conditions at Shipton Bellinger School are not very satisfactory with regard to overcrowding. Infectious illness apppears to be more prevalent in this School than any in the Area. I understand a Central School for senior scholars has been under consideration for a number of years, but has not materialised. When it does the overcrowding should be relieved.

HOUSING.

	NEW HOUSES ERECTED DURING THE YEAR:-		
	By the Local Authority		20
	By Private Enterprise		30
	Houses reconstructed under the Housing (Rural		
	Workers) Acts, 1926-1931		15
	COMMON LODGING HOUSES None in the	dist	rict
	CANAL BOATS USED AS DWELLINGS None in the	dist	rict
	MOVEABLE DWELLINGS, TENTS, VANS, ETC. :		
	Number of Inspections during the year		9
	Number of Nuisances abated therefrom		1
	Number removed from the District		0
1.	Inspection of Dwelling-houses during the year:		
	(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or		
	TT - 1 1 1		139
	(b) Number of inspections made for the purpose		239

	(2) (a) Number of dwelling-houses (included under sub-head (1) above which were inspected		
	and recorded under the Housing Consoli-		
	dated Regulations 1925)		22
	(b) Number of inspections made for the purpose		32
	(3) Number of dwelling-houses found to be in a		-
	state so dangerous or injurious to health		
	as to be unfit for human habitation		21
	(4) Number of dwelling-houses (exclusive of those		-
	referred to under the preceding sub-head)		
	found not to be in all respects reasonably		
	fit for human habitation		36
2.	Remedy of Defects during the Year without Servi	-	
	of Formal Notices.	Ce	
	Number of defective dwelling houses rendered fit in consequence of informal action by the Local		
	Authority or their Officers		21
		•••	21
3.	Action under Statutory Powers during the year:		
(A)	PROCEEDINGS UNDER SECTIONS 9, 10 AND 16 OF THE HOUSING	3	
	Аст, 1936.		
	(1) Number of dwelling-houses in respect of which		
	notices were served requiring repairs		0
	(2) Number of dwelling-houses which were rendered		
	fit after service of formal Notice		0
	(a) By Owners	•••	0
	(b) By Local Authority in default of Ow	ner	s 0
(B)	PROCEEDINGS UNDER THE PUBLIC HEALTH ACTS:		
	(1) Number of dwelling-houses in respect of which		
	notices were served requiring defects to be		1
	remedied		0

	(2)	were remedied after service of formal		
		Notices:— (a) By Owners (b) By Local Authority in default of own	er:	0 0
(c)	Pro	CEEDINGS UNDER SECTIONS 11 AND 13 OF THE HOUSING ACT, 1936:—		
	(1)	5 11.1 6.1		3
	(2)	Number of dwelling-houses demolished in per- suance of Demolition Order		3
(D)	PRO	CEEDINGS UNDER SECTION 12 OF THE HOUSING ACT, 1936:		
	(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made		2
	(2)	rooms in respect of which Closing Orders were determined, the tenement or room		0
	**		•••	U
	Но	uses rendered fit on an undertaking being given in lieu of Demolition Order		9
	Ho	uses demolished in Clearance Areas		5
4.	Ho	using Act, 1936—Part IV.—(Overcrowding.)	7	
(a)	1.	Number of dwelling-houses overcrowded at the end of		
		year		17
	2.	Number of families dwelling therein		17
	3.	Number of persons dwelling therein		103
(b)		Number of new cases of overcrowding reported during the year		4
(c)	1.	Number of cases of overcrowding relieved during the		
				14
	3.	Number of persons concerned in such cases .		69
Ov	ercr	owding.		

During the year there were four new cases of overcrowding reported, all of which were abated. A total of fourteen cases were relieved, ten of these being overcrowded at the commencement of the vear. Two families were re-housed by the R.D.C. in houses erected by the Council under the Housing Programme, by converting two pairs of three bedroom houses into four and two bedroom types, the overcrowded families occupying the larger types.

Three cases which arose during the year were relieved by service of notice on the owner who gave the tenants notice to quit. Two cases were relieved by the provision of larger premises and the remaining seven by removals from the area and removal of lodgers. The number of cases known to be existing at the end of the year were seventeen.

Housing.

Two Clearance Areas, comprising five houses, have been demolished, which include three houses at Barton Stacey and two at Shipton Bellinger. The tenant in the Shipton Bellinger Area was re-housed in an existing Council House, erected under the Housing Act, 1924. Of the remaining three Areas, comprising sixteen houses at Barton Stacey and Longparish, the tenants have been re-housed and the houses are due for demolition.

At Longparish an undertaking was given by the owner not to use the premises for human habitation; one tenant was re-housed by the R.D.C. and the other found his own accommodation.

The Council erected twenty dwelling houses during the year to re-house the tenants to be displaced from Clearance Areas and Individual Unfit Houses. Twelve of these are at Barton Stacey and eight at Longparish. These are comprised of three four-bedroomed, fourteen three-bedroomed and three two-bedroomed types, and the average rents at which they are let, exclusive of rates are 5/7, 4/6 and 3/5 per week respectively, except in one case of an agricultural worker with a large family of young children where the rent of a four-bedroomed house was reduced by the Council to 3/6.

Contracts have been let for the erection of eight cottages at Upton and four at Clanville to re-house persons to be displaced from Clearance Areas. The eight cottages at Upton are nearing completion and will be ready for occupation early in 1938. These consist of one four-bedroomed type, six three-bedroomed and one two-bedroomed types. The four houses at Clanville are all of the three-bedroomed type.

Housing (Rural Workers) Acts, 1926-1931.

Fifteen houses have been re-constructed under the Housing (Rural Workers) Acts by the County Council.

Four at Goodworth Clatford, after proposals had been made to deal with the cottages as a Clearance Area and the Council accepted an undertaking from the owner to re-construct. Two at Ragged Appleshaw, where the owner gave an undertaking in lieu of demolition order being made. Eight at Amport after informal notice had been served requiring repairs and one at Kimpton.

INSPECTION AND SUPERVISION OF FOOD.

(a) MILK SUPPLY.			
Number on Register (Producers a	and Who	lesale Trade	rs) 104
" (Retailers an	d Milk S	Shops)	42
Number of Inspections			146
Frequency of Inspections			Yearly
Contraventions of Regulations			12
Defects remedied			12
Number of Milk Samples taken			19
Arrangements for Veterinary Ins	pections	of CowsCo	unty Council
Any instances of Disease attribut	ed to Mi	lk	Nil

(b) MEAT AND OTHER FOODS.

TT.			7	Tr -	od.
114	1001	1.41	18	HO	011
		* / /	u	1 0	vice.

Chistinity 2 dott.			
Animals seized			 1
Articles seized			
Condemned by Magistrate			 -
Articles surrendered			 -
Bakehouses.			
Number in the District			 12
Number of Inspections			 12
Contraventions of Factory	Act		
Defects remedied			 -
Number of underground Ba	akehouses regis	stered	 -
Slaughter-Houses.			
Number on the register			 4
Number of inspections			 15
Contraventions of Bye-laws			 1
Defects remedied			 1
Number of Vehicles Inspec	ted		 6

(c) ADULTERATION.

Under the various Acts controlling this, the following articles were taken during the year within this Area:—

		No. of
		Samples taken Remarks
Brandy		2
Cheese Biscuits		1
Condensed Skir		1
Flour, Self Rais		1
Gin		2
Jelly Crystals		1
Jam		2—1 unsatisfactory
Jam		
		10% deficient in fruit
		No prosecution
Lard		1
Lemon Cheese		1
New Milk		36—3 unsatisfactory
Sausage		1
Skim Milk		1
Shredded Beef	Suet	1
Tinned Irish St		1
Tinned Veal &		
Vinegar		1
		2
Whiskey		3

The above were examined at the C.C. Laboratory, Winchester.

Proceedings were taken with regard to one of the three unsatisfactory milk samples (60.0% dificient in fat) and a fine of 5/and 25/- costs was imposed. The other two cases showed fat to be deficient by 27.3% and 12.3% respectively and no proceedings were instituted.

(d) NUTRITION.

No special action has been taken by this Council. Close observation is kept on School children by the C.C. Medical Staff at School Inspections. In this area malnutrition is not common nor serious.

(e) Shell Fish (Molluscan).

There are no shell fish beds or layings in the Area.

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

Notifiable Disease during the Year, 1937 :-

Disease		Total 1936	Total 1937	Cases admitted to Hospital	Total Deaths
Small Pox			_	—	
Scarlet Fever		24*	7*	Weyhill 4 and 1 case	
	777	-	The state of the s	not confirmed	
				Military Hosp. 3	_
Diphtheria		9†	12*	Weyhill 9 and 1 case	
Dipineneria	4000			not confirmed	
				Military Hosp. 3	1
Enteric Fever (incl	nd-			minuty 1105p. 5	
Paratyphoid)		1			
Puerperal Fever		2			
Puerperal Pyrexia	•••	1	1		
Tuerperat Tyrexia	•••	1	1	Andones Wes	
Duamania		7*	12*	Andover War	
Pneumonia		,	12-	Memorial 1	2+
F			•	Military Hosp. 6	2†
Erysipelas	•••	1	2	Weyhill 2	1
Ophthalmia					
Neonatorum	•••	1	3.		-
Malaria (relapse)		-	5†	Military Hosp. 5	
Dysentry (Bacillary			1†	Military Hosp. 1	-
* Includ	es Mi	litary Ca	ases.	† Military Cases.	

Scarlet Fever.

Only five cases were notified during the year amongst civilians, and one of these (from Little Park) was not confirmed after admission to Weyhill Isolation Hospital. One case occurred at Tidworth, Weyhill, Monxton and at the Isolation Hospital a Ward maid contracted the disease.

Uncomplicated cases are retained in Weyhill Hospital for 24 days. No "return cases" have occurred.

Diphtheria.

Ten civilian cases were noted but one, from Grateley, was not confirmed after admission to Weyhill Hospital. Of the other cases, one occurred at Longparish and was connected with cases occurring at Laverstoke within the Kingsclere and Whitchurch R.D.C. Also there were four cases at Tangley and four at Hatherden. As the children from Tangley attend Hatherden school it was considered that

these cases at these two villages had a common source of infection, but no carrier was discovered after swabbing all children and staff at Hatherden School, and absentees at their homes. With the first case at Tangley there was delay in seeking medical attention and as a result serum could not be given early, and the patient died.

Pneumonia.

Twelve cases were notified, three of which were Influenzal. In the earlier part of the year there was Influenza scattered throughout the area, but as it is not notifiable exact figures cannot be given. Epedimics of Influenza was reported from Amport and Abbotts Ann Schools.

Puerperal Pyrexia.

One case was notified which quickly responded to treatment.

Ophthalmia Neonatorum.

Three cases were notified and all treated at home without the assistance of the County Council Health Visitors. In each case the eyes are reported to be satisfactory.

Disinfection.

PREMISES DISINFECTED:		
Ordinary Infectious Diseases		 14
Tuberculosis		 5
Houses Disinfected		 9
Articles Disinfected by Steam !	Disinfector	 14

Diphtheria Immunization.

The scheme was given in detail in the Report for 1936. In brief two doses of 1 c.c. of T.A.F. are given by the General Practitioner selected by the parent at about one month's interval between injection. Schick testing is not done. It has been agreed to offer this to all children when they become 1 year old and as a temporary measure to extend it to all children born after 1st April, 1931, so as to build up protected children more quickly.

PROGRESS OF WORK, DOWN TO 31ST DECEMBER, 1937:	_
Number of children completed during 1936	. 129
Number of children whose treatment began during 1936 and were completed during 1937	22
Number of children completed during 1937	. 54
Number of children whose treatment began during 1937 and were not completed on 31st December 1937	
Total	. 222
Approximate number of children born 1931—1936	. 1261

The above figures are extended and analysed in greater detail in the table below:—

			Year of	Birth			
1937	1936	1935	1934	1933	1932	1931	Total
	222	218	197	189	210	225	(1931-36) 1261
		M. 2 5	M. 2 5	M. 3 5	м. 1 ₄	M. 1 2	M.10 F. 12
M. 1 1 F. 0 1	M. 5 8 F. 3 8	M.13 19	M. 5 F. 3 8	M. 1 5 F. 4 5	M. 6 10	M. 2 F. 1	M.33 54
-	M. 4 12	M. 2 F. 3 5	_	_	_	_	M. 6 F. 11 17
1	9·5%	29 13·3%	13 6.6%	10 5·3%	14 6·7%	5 2.2%	93 9·1%
	-	17	24	25	40	23	129
1	21	46	37	35	54	28	222
	M. 1 1 1 F. 0 1 - 1	222 - M. 1 \ 1 \ F. 0 \ 1 M. 1 \ 1 \ F. 0 \ 8 - M. 4 \ 12 1 21 9.5%	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$

It will be seen that in 1936, 129 children were treated, whereas in 1937 there were 76 (22 cases incompleted on December 31st, 1936 and 54 cases completed during 1937), and that 17 cases were incompletely treated on December 31st, 1937.

There is some falling off in numbers done during 1937 and progress is rather slow, but the figures as shown above do not, I think, completely represent the position, because, I am informed by the County Medical Officer, that his Health Visitors have given him information of over 500 "consents," whereas I know of only 222. This undoubtedly is due to parents neglecting to return the "Consent Card" quickly to me. This delay may be due to a variety of causes—the parent may change her mind, or the father may object, the card may be "mislaid," the child may be ill, or merely the job is "put off." It not frequently happens that the mother may consent while the father objects, in some cases at least because he does not quite realise what it is all about. To remedy this I propose to prepare a leaflet to be left by the Health Visitor stating simply why Immunization is desirable and what the parent should do.

At the end of 1936 the County Medical Officer had knowledge of 350 "consents" now contrasted with about 500.

The cost of this is given below, and applies to the 76 completed cases in 1937 only:—

TOTAL H	EXPENSES			1	937			19	36	
Doctor's Fees a Cost of T.A.F. Postages, etc.	nd Travelling 	Expenses		£33 £11	0 1 19	3 10 2		£60 1 £20 £1 1	0 4 7	9 6 6
		Total		£45	1	3		£82 1	2 1	10
Averag	e Cost per C	ASE	1	937		15	936	Esti Cos incep Sci	st e	at m of
			8			8.				d,
Doctor's Fees a		Expenses	 8	8:25		9	7.3		9	0
Cost of T.A.F. Postages, etc.			 3	3.12		3	3·6		4	0 4
			12	2.43		13	1.4	1	3	4

I think the fall in Doctor's fees may be accounted for by fewer parents requesting the Doctor to visit at their homes, and more parents attending the Doctor's Surgery. Some undoubtedly realise that the District Council is saved expenses by so doing and are prepared to help, even though at some inconvenience to themselves.

During the year the County Medical Officer has made two suggestions in connection with this Immunization scheme. He suggests:—(1) That a material known as A.P.T. be substituted for T.A.F. which is the material in present use. It is claimed for this A.P.T. to have a higher degree of protection, and to be somewhat cheaper, but it may cause more reaction than T.A.F. The reaction is usually slight and amounts to a painless thickening at the site of injection but very occasionally a more general reaction occurs. With T.A.F. the great majority of cases are without any reaction whatsoever, and moreover its protection is high. A.P.T. is a newer material and is being used rather widely and doubtless some official pronouncement on its particular merits will be made before long. I suggest the material T.A.F. be continued, but other materials, including A.P.T., be kept under review and substituted when proved definitely superior.

(2) His second suggestion was that the scheme be extended to include "the younger children attending school." As above mentioned the existing scheme is to immunise children on reaching the age of 1 year, and as a temporary extension to include all children born after April 1st, 1931.

As the cost of the scheme is below what was estimated (13/4 per case) I strongly suggest that the scheme be extended to include permanently all children under 5 years of age. In this way a protected population will be built up more quickly. I am, in my own mind, quite certain an Immunization Scheme should be continued. It should however be fully realised that Immunization does not claim to be a

perfect and absolute protection against Diphtheria, but it gives undoubtedly a high degree of protection. If I am pressed for figures I should say roughly that 9 out of every 10 are protected. It may, therefore mean that in the future we shall have a case of diphtheria in the 10th child even in spite of being immunized and I think it is well for the Council to realise this fact. Of course, the 10th child must be exposed to infection before he contracts the disease.

I should like again to thank the General Practitioners engaged in this scheme for that co-operation and help.

Finally, I should again draw attention, as I did last year, that the cost of this scheme should be assisted, in my opinion, by a grant from Government funds or by the County Council. One is attempting to reduce, if not actually abolish, diphtheria. This cannot be done if it is only considered to be merely a local attempt. The whole subject of Immunization against Diphtheria should be dealt with on a national basis.

Tuberculosis.

The following table shows the number of new cases, and deaths from Tuberculosis during 1937 split up into age groups:—

					New	CASES		DEATHS				
	Age Periods			Respi	ratory	Respi	n- ratory	Respi	ratory	Non- Respiratory		
				м.	F.	м.	F.	м.	F.	м.	F.	
0	_											
1	-											
5	-							1				
15	-			3	1	1						
25	-			6	3			2				
35	_								1			
45	-						1	1				
55	_				1			1	1			
65	and	upwards										
		Totals 1937		9	5	1	1	5	2	_	_	
		Totals 1936		5	_	2	1	1	1	_	_	

Number of Cases on Register, end 1937 ... 37

The above figures include notification from Military sources.

New cases are notified by the district M.O.H. to the County Medical Officer each week, and a return is also made of the number on the Tuberculosis Register at the end of each Quarter. One death occurred for which no notification had been received, but the General Practitioner gave as a satisfactory reason that he did not know the case resided within this area and also thought another general practitioner in attendance some years previously had already notified.

No case was removed to hospital by compulsion.

No action was required in relation to a Tuberculosis patient employed in the Milk Trade.

In conclusion, I should like to express my appreciation of the help and assistance given me by Mr. Johnson, the Sanitary Inspector. He has prepared a report of his inspections, etc., during the year which is incorporated in this. I should also like to mention Mr. Smith and Mr. Burnett who have also been very helpful, and have shown great keenness in their work.

I am, Ladies and Gentlemen,

Your obedient servant,

WILLIAM SIMPSON,

Medical Officer of Health.

