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#### **Contributors**

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### Ashby-de-la-Zouch

## Urban District Council.

## ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

For the Year ending 31st December, 1923.

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# Ashby-de-la-Zouch Urban District Council.

# Medical Officer's Report for 1923.

TO THE CHAIRMAN AND MEMBERS OF THE ASHBY-DE-LA-ZOUCH URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have the honour to present you with my first Annual Report.

1. GENERAL STATISTICS.

Area (acres) 3949.

Population (1923) as estimated by the Registrar-General 5077.

Number of Inhabited Houses (1921) 1098.

Number of families or separate occupiers (1921) 1119.

Rateable Value £27285.

Sum represented by a penny rate £88.

#### 2. VITAL STATISTICS.

There were 55 male and 49 female births, giving a total of 104 and a Birth Rate of 20.5. Of these births 51 male and 47 female were legitimate, giving a total of 98 legitimate births and a Legitimate Birth Rate of 19.3, while 4 male and 2 female births were illegitimate, making a total of 6 illegitimate births and an Illegitimate Birth Rate of 1.2. The above rates and those given below, are expressed as per 1000 population, except where it is stated otherwise.

The total number of deaths was 56, of which 26 were males and 30 females, thus the Death Rate was 11.0. As compared with the corresponding rates for England and Wales (Birth Rate 19.7 and Death Rate 11.6), it will be noted that they are satisfactory, the Death Rate in particular being slightly lower.

No woman died of, or in consequence of childbirth, either from sepsis or other causes.

The Deaths of Infants under 1 year numbered 9, of which 5 were males and 4 females. The Infantile Mortality Rate as calculated from these figures is, as all these deaths occurred among legitimate infants, Legitimate 91.8, Illegitimate nil, total 86.5 per 1000 births. As this rate for England and Wales was 69, this cannot be considered to be thoroughly satisfactory. In the older parts of the town, however, the conditions as regards housing and overcrowding are poor, and have an unfavourable influence on the Infantile Mortality Rate.

Deaths from Measles (at all ages) Male 2, Female 4, total 6. The Death Rate calculated for this disease is 1.9, as contrasted with 0.14 for England and Wales. This unduly high figure points to considerable prevalence of Measles in the district.

As the disease is not now notifiable to the Medical Officer of Health, no actual statistics of the number of cases can be given. It would be a great improvement if the general public could be made to realise the serious nature of Measles. At present there is a tendency to regard it as an inevitable event in a child's life, and no effort is made to isolate a child from the, as yet, unaffected members of the family. Every year that an attack can be put off improves the child's prospects of recovery. Notification, which was in force from 1916 to 1919, although costly to the Local Authority concerned, has the advantage that it impresses the parents and public generally that Measles is not a trivial matter. The provision of a few beds in Isolation Hospitals for the nursing of such cases as are complicated by Bronco-Pneumonia, would also help to lower the fatality.

Deaths from Whooping Cough (at all ages) 1, giving a Death Rate of 0.2, as against the Rate for England and Wales of 0.1. As only one death is responsible for the Ashby Rate, it will be apparent that the excess is not of importance, and is only due to the small population of the district.

There were no deaths from Diarrhoea (under 2 years of age).

The Causes of Death during the year were as follows:—

CAUSE.	MALE.	FEMALE.	TOTAL.
Measles	2	4	6
Cerebral Haemorrhage, etc.	3	3	6
Cancer, maligant disease	2	3	5
Heart Disease	3	2	5
Congenital debility, etc.	2	3	5
Bronchitis	2	1	3
Pneumonia (all forms)	0	3	3
Respiratory Tuberculosis	1	0	1
Non-Respiratory do.	2	0	2
Whooping-cough	0	1	1
Arterio-sclerosis	0	2	2
Ulcer of stomach or duodenum	1	0	1
Violence other than Suicide	0	1	1
Other defined diseases	8	7	15

I have commented above on the Measles mortality. Cerebral Haemorrhage is a disease of old age, as Arterio-sclerosis also is, and these diseases are not to any marked extent preventable. The only means at our disposal is by correct diet and avoidance of undue exertion in late middle and old age—especially by reducing the consumption of meat and alcohol. A heavy mortality from these causes merely indicates rather more than the usual proportion of old people in the population.

Cancer, etc., is an increasing cause of death in all civilised communities and, until its cause is known, all that can be done is to point out that it is curable in its earliest stages and to encourage people to consult a doctor immediately any abnormal lump or discharge is noticed.

#### 3. NOTIFIABLE DISEASES.

Disease.	Total Cases notified.	Cases admitted to Hospital.	Total deaths.
Pueumonia	16	0	3
Chicken-Pox	8	0	0

Chicken-Pox is permanently notifiable in the Urban District and this notification, although it entails a small extra expense, is of great value in ensuring that no case of Small-Pox shall escape notice through being regarded as a case of Chicken-Pox.

Although Small-Pox was present at no great distance from Ashby, no case occurred in the Urban District in 1923.

The Case Rate—i.e., the number of cases per 1000 persons living in the district, of Pneumonia was 3·1. The rate for the whole country is not available, but this is undoubtedly rather a higher incidence than usual. The mortality from the disease was only 18·7 per cent, indicating that the disease was, on the whole, of a mild type.

As one case notified as Pneumonia died, and was afterwards certified as having died from (1) Measles, (2) Pneumonia, probably some of the excessive amount of the disease is due to cases of Secondary Pneumonia, complicating Measles having been notified. Further support is given to this supposition by the age incidence given below, in which it is seen that half of the cases notified were under two years of age, agreeing with the age-incidence of Measles rather than with that of Primary Pneumonia. It should be understood that such cases of Secondary Pneumonia are not notifiable. It is only Acute Primary and Acute Influenzal Pneumonia cases which come under the Notification Regulations.

On the other hand, 2 out of the 3 persons who were certified to have died from this disease, had not been notified.

INCIDENCE OF CASES IN VARIOUS AGE-GROUPS.

Age-group.	Pneumonia.	Chicken-Pox.	Pneumonia Deaths.
0 - 1	2	3	0
1 - 2	6	1	0
2 - 3	1	0	0
3 - 4	1	1	0
4 - 5	1	0	0
5 -10	1	3	0
10-15	0	0	0
15-20	0	0	1
20-35	3	0	1
35-45	1	0	0
45-65	0	0	0
65-	0	0	1

#### Tuberculosis.

			LUBE	RCCLOSI	5.				
			New Cas	es.		1	Deaths.		
Age Periods.	Pulm	onary.	Non-Pul	monary.	Pulm	onary	. Non-Pu	lmon	ary.
	M.	F.	M.	F.	M.	F.	M.	F.	
0 - 1	0	0	0	0	0	0	1	0	
1 - 5	0	0	0	0	0	0	0	0	
5 -10	1	0	0	0	0	0	1	0	
10-15	0	0	0	0	0	0	0	0	
15-20	1	0	0	0	0	0	0	0	
20-25	0	0	0	0	0	0	0	0	
25-35	1	1	0	0	0	0	0	0	
35-45	1	0	0	0	0	0	0	0	
45-55	0	1	0	0	0	0	0	0	
55-65	0	0	0	0	0 .	0	0	0	
65-	0	0	0	0	0	0	0	0	

In the case of the deaths from Pulmonary Tuberculosis the table is incomplete owing to the absence of information. I am unable to trace the notification of the two cases of Non-Pulmonary Tuberculosis, which died.

#### OPHTHALMIA NEONATORUM.

Notified. Treated. Vision Vision Total Deaths
At home. In hospital. Unimpaired. Impaired. Blindness.

2 0 2 2 0 0 0

#### 4. CAUSES OF SICKNESS.

There is nothing to report under this heading beyond what has been noted above.

#### 5. NURSING ARRANGEMENTS, HOSPITALS, ETC.

General Professional Nursing in the Home is done by the District Nurse. There are no arrangements for the nursing of such Infectious Diseases as Measles at home. The District Nursing Association provides the District Nurse.

Only one midwife, the District Nurse, practises in the district.

The County Council provides an Infant Welfare Centre in Ashby, a School Clinic at Coalville, a Tuberculosis Dispensary at Coalville and a Venereal Disease Clinic at Loughborough. There is no Day Nursery. A Venereal Disease Clinic is also available at Burton-on-Trent General Infirmary.

Tuberculosis Sanatoria and Residential Dispensaries are provided by the County Council, the nearest being at Coalville.

The Leicester Maternity Hospital is available for difficult confinements requiring Institutional treatment.

There are no special Children's Hospitals near, but sick children are received in the Hospitals receiving general diseases mentioned below.

Fever Hospitals are provided by the Leicestershire Isolation Hospitals Committee, the nearest being at Coalville.

Small-Pox Hospitals at Snarestone and Syston are provided by the County Council.

There is a General Hospital of the first importance at Leicester, and smaller Hospitals of the same type at Loughborough and Burton-on-Trent. The Cottage Hospital at Ashby and the Poor Law Infirmary at Ashby take general cases.

There is no special Institutional Provision for unmarried mothers, illegitimate infants, and homeless children in the district.

Infectious cases are removed in the ambulances of the Leicestershire Isolation Hospitals Committee, whilst non-infectious cases are removed by the Ashby St. John's Ambulance Brigade.

#### 6. LABORATORY WORK.

The County Council Bacteriological Laboratory examined the following specimens from the Urban District in 1923 —

Throat Swabs for Diphtheria	 4
Hairs for Ringworm	 4
Sputa for Tubercle Bacilli	 3
Sewage and Water Analysis	 1
Total	 12

Diphtheria Antitoxin is provided, in accordance with the Diphtheria Antitoxin Order 1910, for the treatment of the disease.

#### 7. SANITARY ADMINISTRATION.

The following Act has been adopted: —
Public Health Act Amendment Act, 1907.

The following Bye-Laws and Regulations are in force: -

New Streets and Buildings	_	1896
Cleansing of Footpaths	_	do.
Nuisances —	_	do.
Common Lodging Houses	_	do.
Markets —	_	do.
Slaughter Houses -		do.
Offensive Trades —	-	do.
Sanitary Conveniences	_	do.
Dairies, Cowsheds and Milks	hops	1886
Water Supply Regulations	-	1891

22 complaints were received during the year. 163 inspections were made for all purposes, and 137 notices were served, of which 101 were informal, and 36 were statutory.

32 insanitary houses were inspected, and 26 were cleansed, 10 houses were inspected for overcrowding, and the nuisance was abated in 2 instances, and 7 offensive accumulations were found, and the nuisance abated in every case.

No observations were taken with a view to smoke abatement, but such action is hardly necessary in Ashby.

There are 24 privies, 98 pail closets, and 539 W.C's. 1 privy was converted to a pail closet and 4 to W.C's. 8 pail closets were converted to W.C's. and 4 new W.C's. provided. It is scarcely necessary for me to point out the importance of abolishing the remaining privies at an early date.

18 drains, etc. were inspected, and 7 nuisances abated, 6 cesspools were cleansed.

Refuse is disposed of by being carted to a tip and burnt, ashbins are emptied weekly and ashpits periodically. No refuse destructor is available. 2 new ashpits were provided and 8 converted to ashbins. No new ashpits should be provided, as they are much inferior to ashbins in sanitary cleanliness. 32 new ashbins were provided.

1 sample of water was taken from 1 well and condemned, the well was closed, and the public supply was instituted for the well.

18 houses were inspected, and 34 inspections made on the occurrence of Infectious Diseases, 6 houses were disinfected and also 1 schoolroom. Disinfection is carried out by spraying and fumigation.

There are 2 registered Common Lodging Houses, of which 8 inspections were made. 6 contraventions were found, and their general condition is not satisfactory.

There are no Canal Boats, and no offensive trades.

4 parcels of food were surrendered. There are 5 registered Slaughter Houses, and 1 licensed Slaughter House. Their general condition is good. 12 inspections were made, and 4 contraventions of the bye-laws found. There is no public abbattoir.

8 inspections were made of places where food is kept or prepared for sale, but no contraventions were found. There are 13 retail milk purveyors on the Register, of whose premises 26 inspections were made, 4 contraventions were found, 3 required cleansing, and 1 structural or sanitary improvements.

15 wholesale traders and producers are on the Register, and 30 inspections have been made of their premises, 1 was found to require cleansing, and 2 to require structural or sanitary improvements.

There are 400 milch cows in the district.

#### 8. FACTORY AND WORKSHOPS ACT 1901.

There are 16 Workshops on the Register. 4 nuisances were abated. 6 Bakehouses are registered and 4 nuisances were abated in respect of them. As regards homework, there are 10 outworkers.

No legal proceedings became necessary.

#### 9. PUBLIC WATER SUPPLY.

This is provided by the Swadlincote and Ashby Joint Water Board, and is satisfactory.

#### 10. SEWAGE DISPOSAL.

This is done at the Packington Sewage Farm, and the resulting effluent is satisfactory.

#### 11. PUBLIC HEALTH STAFF.

One Medical Officer of Health and one Sanitary Inpector, both part time For a large part of the year there was no Medical Officer of Health, but I found when I took over the duties that the work had been carried on very satisfactorily by the Sanitary Inspector.

#### 12. Housing.

Number of new houses erected during the year:-

- (a). Total 5.
- (b). With State assistance under the Housing Acts, 1919 or 1923:—
  - (1). By the Local Authority Nil.
  - (2). By other bodies or persons Nil.

Unfit Dwelling-houses.
Total number of dwelling-houses inspected 49
Number of dwelling-houses inspected and recorded under
the Housing (Inspection of District) Regulations 1910 14
Number unfit for human habitation 1
Number not in all respects reasonably fit for human
habitation 38
Number of defects remedied by informal action - 4
Action under Statutory Powers.
(a). Under section 28 of the Housing, Town Planning Act 1919.
(1). Number of dwelling-houses in respect of which notices were served requiring repairs - 34
(2). Number of dwelling houses which were rendered
fit:- (a). By owners 29
(b). By Local Authority in default of Owners - Nil.
(3). Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close 1
(b). Under Public Health Acts.
(1). Number of dwelling-houses in respect of which notices were served requiring defects to be remedied - 21
(2). Number of dwelling-houses in which defects were remedied:-
(a). By owners - 13
(b). By Local Authority in default of owners - Nil.
(c). Under sections 17 and 18 of the Housing and Town Planning, etc., Act 1909.
No action taken.

From a consideration of the general statistics given above, it will be seen that the average number of persons per inhabited house is 4.6. This is certainly higher than is desirable.

In concluding this Report, I should like to state that I am aware that in some respects the information given is not so full as it might be. As I only commenced duty as M.O.H. on 1st Sept. of the year under review, it has been very difficult to write a full report. I am under great obligation to the Sanitary Inspector, Mr. G. E. Marlowe, for his able assistance, and the sections of this Report on Sanitary Administration and Housing are mainly compiled from the details given in his Annual Report.

I remain, Gentlemen,
Your obedient Servant,
W. E. ROPER SAUNDERS,
M.R.C.S., L.R.C.P., D.P.H.(Hons.),
Medical Officer of Health.

