[Report 1956] / Medical Officer of Health, Ashington U.D.C.

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Urban District of Ashington

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

and the

Senior Public Health Inspector

for the Year

1956

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
FOR 1956.

To the Chairman and Members of the Urban District of Ashington.

Mr. Chairman and Councillors,

I have the honour to present to you, my report for the year 1956.

In almost all respects, the vital statistics are, regrettably, less satisfactory than in the previous year. The birth rate remains practically unchanged and is still slightly higher than the corresponding rate for England and Wales which is 15.7 per 1,000 of the population. The still-birth rate shows a decline, 18.75 as against 24.79 per 1,000 live and still births, and is lower than the national average. The total number of deaths, however, increased by 46, from 283 in 1955 to 329 in 1956 and this gives an increase in the crude death rate from 9.968 to 11.6 per 1,000, and in the standard death rate from 11.86 to 14.96 per 1,000 of the population. The national death rate was 11.7 per 1,000. The main causes of the increase in the number of deaths were diseases of the heart and circulation, 27 more than in 1955, malignant neoplasms, 16 more, bronchitis, 6 more, and accidents, 8 more.

There were 16 fatal accidents but none was due to vehicular traffic. Nine were due to falls sustained by elderly people, four were due to suffocation from food entering the air passages (two of these were infants), one was due to drowning, one to burns (a child of 3 years) and one was industrial. The infantile mortality rate also shows an increase from 29.66 to 36.09 per 1,000 live births and is considerably higher than the corresponding figure of 23.8 for the whole of England and Wales.

It is more satisfactory to be able to report that there were only two deaths from tuberculosis and that the death rate from this cause was, therefore, the lowest ever recorded in Ashington.

The only notifiable infectious diseases which occurred in any numbers were food poisoning and dysentery. Details of the outbreaks of these infections are given later in the appropriate section of the report.

In conclusion, I wish to thank you for the consideration you have shown me and to thank the various Departments of the Council for the assistance I have received from them.

I am,

Mr. Chairman and Councillors,

Your obedient Servant,

C. B. McGREGOR,
M.B., D.P.H.
Medical Officer of Health,
Urban District of Ashington.

OFFICERS OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health	CATHERINE B. McGREGOR, M.B., Ch.B., D.P.H.
Assistant Medical Officer	KATHLEEN DICK, M.B., B.S., B.Hy., D.P.H.
Public Health Housing Inspector	G. W. TATE, F.A.P.H.I., M.R.S.H.
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SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

The area and boundaries of the Urban District remain unchanged. The vast majority of the population is employed in the coal mining industry but there are factories engaged in the manufacture of electrical equipment, clothing, and cake decorations and these provide employment for several hundreds. There are, also, within the district, 11 farms.

Ashington is fortunate in having almost no slum clearance problem but very many of the houses are sub-standard and lacking in facilities such as a piped internal water supply. Only one house is still supplied by standpipe but considerable number have taps in the yards or in the wash-house.

The provision of an internal water supply, both hot and cold, and the installation of bathrooms would greatly improve the lot of the housewives. The owner principally concerned with these highly desirable and, indeed urgently necessary, improvements is the National Coal Board which should be urged to carry them out at an early date.

Area in Acres	6,057
Registrar-General's estimate of resident population mid-1956	28,360
Rateable Value	£236,130
One Penny rate produces	£895
Number of inhabited houses (end of 1956)	8,466

VITAL STATISTICS

BIRTHS

Live Births:	Total	Male	Female
Legitimate	458	244	214
Illegitimate	13	7	6
	471	251	220

Birth Rate per 1,000 of the estimated population	16.61
(Comparability Factor 0.98) Standard Birth Rate	16.28

Still Births:	Total	Male	Female
Legitimate	9	4	5

Rate per 1,000 total (live and still) Births	18.75
Rate per 1,000 of the estimated resident population	0.32

DEATHS

Total	Male	Female
329	175	154

Death Rate per 1,000 of the population	11.6
(Comparability Factor 1.29) Standard Death Rate	14.96
Deaths from Puerperal Causes (heading 30 of the Registrar-General's Short List):	
Pregnancy, Childbirth and Abortion	Nil
Rate per 1,000 total (live and still) Births	Nil

Death Rate of Infants under 1 year:

All Infants per 1,000 live births	36.09
Legitimate infants per 1,000 legitimate live births	37.12
Illegitimate infants per 1,000 illegitimate live births	Nil
Deaths from Measles (all ages)	Nil
Deaths from Whooping Cough (all ages)	Nil
Deaths from Diarrhoea (under 2 years)	Nil

The Registrar-General supplies the following:

CAUSES OF DEATH, 1956.

		Male	Female
1.	Tuberculosis, Respiratory	1	1
2.	Tuberculosis (other forms)	—	—
3.	Syphilitic Disease	—	—
4.	Diphtheria	—	—
5.	Whooping Cough	—	—
6.	Meningococcal Infections	—	—
7.	Acute Poliomyelitis	—	—
8.	Measles	—	—
9.	Other infective and parasitic diseases	—	—
10.	Malignant Neoplasm, stomach	3	3
11.	Malignant Neoplasm, lung, bronchus	11	1
12.	Malignant Neoplasm, breast	—	9
13.	Malignant Neoplasm, uterus	—	5
14.	Other Malignant and Lymphatic Neoplasms	14	11
15.	Leukaemia, Aleukaemia	1	1
16.	Diabetes	1	4
17.	Vascular Lesions of Nervous System	31	29
18.	Coronary Disease, Angina	27	19
19.	Hypertension with Heart Disease	—	6
20.	Other Heart Diseases	13	26
21.	Other Circulatory Diseases	13	12
22.	Influenza	—	1
23.	Pneumonia	4	4
24.	Bronchitis	19	3
25.	Other Diseases of Respiratory System	2	—
26.	Ulcer of Stomach and Duodenum	3	—
27.	Gastritis, Enteritis and Diarrhoea	1	—
28.	Nephritis and Nephrosis	1	—
29.	Hyperplasia of prostate	2	—
30.	Pregnancy, Childbirth, Abortion	—	—
31.	Congenital Malformations	3	1
32.	Other Defined and Ill-defined Diseases	14	13
33.	Motor Vehicle Accidents	—	—
34.	All other Accidents	11	5
35.	Suicide	—	—
36.	Homicide and Operations of War	—	—
		175	154

Deaths of Infants under 1 year:	Male	Female
Legitimate	12	5

CHIEF CAUSES OF DEATH IN ASHINGTON

	Total No.	% of Total Deaths
Diseases of the Heart and Circulation	116	35.26
Vascular Lesions of Nervous System	60	18.24
Malignant Neoplasms	58	17.63
Bronchitis	22	6.69
	257	78.12

INFANTILE MORTALITY, 1956

The total number of infants who died under the age of 1 year was 17, an increase of three on the number who died in the previous year. This gives a death rate of 36.09 per 1,000 live births, the corresponding figure for 1955 being 29.66. It may be noted, however, that 12 of the deaths occurred under the age of 1 month, 9 of them occurring within the first week of life. This means that neonatal deaths accounted for 70.59 per cent of the deaths and in the present state of knowledge they were probably unavoidable.

The following table shows the comparative mortality rates during the past ten years:

	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Infantile deaths under 1 year	30	29	29	16	21	24	20	9	7	14	17
Infantile Mortality	49.9	46.9	58.1	30.01	39.1	45.8	41.75	18.59	15.49	29.66	36.09

The following table gives details of the cause of death in the different age groups under 1 year:

Cause of Death	Under 1 day	1 - 6 days	1 week	2 weeks	3-4 weeks	Total under 1 month	1 - 3 mths	4 - 6 mths	7 - 9 mths	10 - 12 mths	1 - 12 mths	Total under 1 year
Prematurity	2	1	—	1	—	4	—	—	—	—	—	4
Pneumonia	—	—	—	—	—	—	1	1	—	—	2	2
Embolism of mesenteric artery	—	1	—	—	—	1	—	—	—	—	—	1
Congenital Malformations	—	1	2	—	—	3	1	—	—	—	1	4
Atelectasis	—	1	—	—	—	1	—	—	—	—	—	1
Birth Injury	2	1	—	—	—	3	—	—	—	—	—	3
Asphyxia (Inhalation of vomit)	—	—	—	—	—	—	2	—	—	—	2	2
Total	4	5	2	1	—	12	4	1	—	—	5	17

SECTION B

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

Laboratory Facilities

These are provided by the Public Health Laboratory Service at the Newcastle General Hospital and additional facilities are now available atAshington General Hospital.

The extent to which these facilities have been utilised is shown below:

Specimen sent by	Specimen	Pos.	Neg.
Regional Hospital Board Physician	Sputum for B. Tuberculosis	13	112
General Practitioner	Throat Swabs for C. Diphtheriae	—	2
Regional Hospital Board Physician	Throat Swabs for C. Diphtheriae	—	1
General Practitioner	Throat Swabs for Haemolytic Streptococci	1	1
Regional Hospital Board Physician	Throat Swabs for Haemolytic Streptococci	—	1
Medical Officer of Health	Swabs for Staphylococci	—	12
General Practitioner	Faeces for Pathogenic Organisms	41	32
Regional Hospital Board Physician	Faeces for Pathogenic Organisms	1	—
Medical Officer of Health	Faeces for Pathogenic Organisms	280	648
General Practitioner	Blood for Paul Bunnell Test	1	—
General Practitioner	Throat Swabs for Vincent's Organisms	—	1
Regional Hospital Board Physician	Throat Swabs for Vincent's Organisms	—	1

Ambulance Service.

This is provided by the Northumberland County Council. The Ambulance Depot is situated at West View where there are 5 ambulances stationed and 9 drivers, employed working shifts providing a 24 hour service. All vehicles are fitted with radio transmitting and receiving sets and there is a fixed radio transmitter and receiver at the depot. A radio control assistant is employed during the day to receive and send messages controlling the movement of vehicles. During the evening and night radio control is maintained from the Wideopen Depot where there is a 24 hour service.

Ambulances stationed at Ashington also serve the Newbiggin area and Lynemouth, Ellington and Linton.

Nursing in the Home.

Domiciliary nursing and midwifery services are provided by the Northumberland County Council. The staff stationed at Ashington consists of 1 Superintendant, 2 Midwives, 1 Pupil Midwife and 3 General Nurses.

Hospitals.

There are two hospitals in the district, the Ashington General Hospital, and North Seaton Hospital, and both are controlled by the Newcastle Regional Hospital Board. North Seaton Hospital was formerly the Isolation Hospital and is now used for general nursing of medical cases and for surgical cases transferred from the General Hospital.

Treatment Centres and Clinics.

A Chest Clinic, under the control of the Regional Hospital Board, and dealing with cases of Tuberculosis is situated at Lintonville Terrace. A Chest Physician attends twice weekly and a public X-ray session using an "Odelca" camera is held weekly.

Maternity and Child Welfare Services.

These are provided by the Northumberland County Council at the Child Welfare Centre, South View, and the facilities provided include the following:

Ante-natal and Post-natal clinics.
Child Welfare, Sun-Ray, Diphtheria Immunisation.
Toddlers and Opthalmic Clinics.
Dental Clinics for expectant mothers, pre-school and school children.

SECTION C

SANITARY CIRCUMSTANCES OF THE AREA

General Inspection.

Personal contact, letters and informal notices have as usual been the means of securing the abatement of most nuisances. Twelve statutory notices were served during the year.

In two cases, applications were made to the Court to obtain Nuisance Orders.

Eight of these statutory notices were complied with by the end of the year, as also were four notices served late in the previous year.

Applications for Improvement Grants under the Housing Act totalled 38, of which 37 were approved by the Local Authority.

Again, practically no advantage has been taken of the provisions of the Rent and Repairs Act, while applications for Improvement Grants have once more been confined to owner occupiers. Improvement of the N.C.B. property in the Hirst on the lines of the model shown in the last Civic Exhibition would raise the Housing standards tremendously but as yet, there is nothing to report in this direction.

Four houses have been discontinued as dwelling houses, two by conversion to business premises, and two houses in the Sixth Row were voluntarily closed by the National Coal Board on being vacated.

The following table summarises the notices served:

Nuisances dealt with and work required to be done.	Verbal or Written Notices	Defects Remedied
Choked or defective drains	7	12
Defective W.C. basins	1	1
Defective W.C. cisterns and service pipes	8	11
Defective water supply	8	7
Defective sinks and waste pipes	4	9
Defective or missing ashbins	16	17
Defective roofs	19	22
Damp walls	11	14
Defective spouts	28	32
Defective wallplaster	8	15
Defective ceilings	12	17
Defective doors, windows and floors	28	53
Defective ranges, fireplaces and setpot boilers	24	37
Defective chimneys and flues	8	5
Defective paving and yard surfaces	2	3
Defective outbuildings	34	35
Defective food stores	1	3
Offensive accumulations	6	6
Other defects	6	7

Water.

There are 8,466 occupied houses in the district, and of these only one is supplied by standpipe, which represents 0.012% of the total. The whole of the supply is by Tynemouth Corporation, and regular sampling undertaken both by them and by us, shows that it continues to be excellent drinking water of the highest purity.

41 samples were taken during the year by the Department, 37 of which were reported to be in Class 1, and four in Class 2.

Drainage and Sewerage.

85 drainage systems were repaired or reconstructed during the year, and these were all tested and approved by the department. The aim, which is largely reached, is to have consultation and discussion with owners or builders before the work commences, thus giving maximum benefit to all concerned.

The provision of a Sewage Disposal Plant for the village of Bothal was completed during the year, though the conversion of buildings to the water carriage system has not yet been carried out.

Swimming Baths and Pools.

The Institute Baths, open to the Public as well as to Institute members, were visited regularly during the year. Examinations of the Chlorine content and bacteriological examinations of the Bath water were found to be satisfactory. Regular sampling and testing is also undertaken by the Scientific Department of the National Coal Board.

Schools.

All the schools in the district have a main water supply and a water carriage system.

Cinemas and Public Buildings.

Routine Inspections of all such buildings were carried out during the year.

Atmospheric Pollution.

A Modern fireplace continues to be a prideful possession of an increasing number of householders but without reduction in smoke and soot emission. Interest in the subject is general rather than specific. A smokeless area is unlikely to be attained in Ashington so long as the subject of concessionary coal (this is a matter entirely between the mineworkers and the National Coal Board) cannot be adjusted so that a smokeless fuel is provided in place of coal.

Meanwhile, the "fouling of one's own nest" continues.

A number of complaints was received about smoke nuisances which were found to be caused by emissions from low chimneys of dwelling houses. This was in fact due to the removal of set-pots and installation of a range and the conversion of the scullery to a kitchenette. In these cases the set-pot flue is asked to carry a burden for which it was never intended and was not constructed. Its lack of height gave rise to strong and justified complaints and the offending householders, because a considerable amount of money had been spent on improvements were loath to see the need for heightening the chimney, but such cases which came under review during the year were satisfactorily resolved.

On the ever-present problem of colliery spoilbanks the position is substantially that of previous years excepting that about three quarters of a million tons has been added to the "Pyramids" and the "Alps" in the past year.

During the year an application to extend the washery heaps northwards was made by the National Coal Board and several meetings between the Council and the Board took place to discuss this. Arising out of the discussions, the Cuncil offered as a practicable alternative to the Board's application, land north of New Moor Shaft which had considerable subsidence which should be soil stripped and reclaimed, meanwhile bulldozing and consolidating the existing heaps (this would entail no extension of the potential for dust nuisance), and would provide a sufficient lease of life to enable the project of the land reclamation to be worked out and introduced. Agreement to this had not been reached at the end of the year.

The conference of the East Northumberland Local Authorities convened by Bedlingtonshire Urban District Council to discuss the question of spoilbanks met during 1956 and further meetings were to take place during 1957.

Co-operation between ourselves and the Alkali, etc., Inspector of the Ministry of Housing and Local Government was again of considerable value and appreciation thereof must be recorded.

Rodent Control.

Considerably fewer complaints have been received this year, which is no doubt due to the policy of free service to the General Public, which has resulted in the early eradication of rats and mice, thus preventing the building up of reservoirs.

Many of the complaints from business premises are apparently due to the introduction of mice in cases of goods from wholesale markets and prompt notification of such outbreaks has helped the department to take swift action, and prevent any increase in the infestation.

Infestations in the Colliery Rows are often reported after attempts by the occupiers have been made to clear the vermin and have resulted in the rats moving to other sites.

Swill bins, and the throwing out of waste bread also encourage infestations in this area.

Test baiting of the sewers indicated that only one section was infested, and this was successfully treated. Defective sewer connections were repaired at Alexandra Court and First Avenue, and no further trouble has been reported in these areas.

The following table summarises the work done.

		TYPE OF PROPERTY			
	L.A.	Dwelling Houses	Agricultural	All other (inc. Bus. Premises)	Total
Total numbers of properties in district	8	8466	27	972	9473
No. inspected because of:					
(a) Complaint	4	25	—	24	53
(b) as routine surveys	4	97	27	231	359
No. of Rat infestations:					
(a) Major	—	—	1	1	2
(b) Minor	2	10	3	12	27
No. of Mouse infestations:					
(a) Major	1	1	—	3	5
(b) Minor	1	18	—	25	44
No. of infested properties treated by Local Authority	4	29	4	41	78

Burial Grounds.

The diminution of available ground for earth burial was again brought to the notice of the Council during the year, and while it was deferred to a later date, it will require serious consideration in the immediate future.

Pet Animals Act.

There are once again no shop premises in Ashington licensed under these provisions.

	No. of Inspections during year.	No. of Defects or Contraventions of Bye-laws.	No. of Informal notices served.	Defects remedied by Informal Action.	No. of Statutory Notices Served.	Defects remedied by Statutory Action.	Legal Proceedings.
HOUSING							
Structural Defects	514	122	77	127	45	45	2
Defective Food Store	7	1	—	2	1	1	—
Dampness	171	58	48	60	10	8	—
Overcrowding	—	—	—	—	—	—	—
WATER SUPPLY							
Insufficient	—	—	—	—	—	—	—
Unsatisfactory	37	16	14	17	2	1	—
DRAINAGE							
Insufficient	—	—	—	—	—	—	—
Defective	174	65	13	63	2	3	—
SANITARY CONVENIENCES							
Insufficient	—	—	—	—	—	—	—
Defective	112	26	16	24	10	8	—
GENERAL							
Food Premises	372	396	—	271	—	—	—
Other Registered Food Premises	313						
Dairies	13	2	—	2	—	—	—
Slaughterhouses	762	17	—	17	—	—	—
Tents, Vans, etc.	8	3	—	3	—	—	—
Offensive Trades	31	1	—	1	—	—	—
Factories and Workplaces	161	19	—	19	—	—	—
Keeping of Animals	21	7	—	7	—	—	—
Insanitary Ashpits and Bins	48	16	16	17	—	—	—
Offensive Accumulations	15	6	—	6	—	—	—
Smoke Nuisances	51	11	—	11	—	—	—
TOTALS	2810	766	184	647	70	66	2

FACTORIES ACTS 1937 to 1948

There are 112 factories and Workshops in the district. The following tables give details of the inspections made and the defects found during the year under review.

There are no outworkers in the district.

The "other" premises included in Section (3) of Table 1 are four building sites on which sanitary accommodation had to be provided.

1. Inspections.

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4and 6 are to be enforced by Local Authorities	37	41	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	71	78	—	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	4	11	—	—
Total	112	130	—	—

2. Cases in which defects were found.

Particulars	No. of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness	5	5	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences :					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	7	7	—	—	—
(c) Not separate for sexes.....	—	—	—	—	—
Other offences against the Act	2	2	—	—	—
Total	14	14	—	—	—

SECTION D

TABULAR STATEMENT OF HOUSING FOR THE YEAR 1956.

Houses completed during the year:

(a) By Local Authority 66
(b) By other bodies or Persons 3

Closing and Demolition.

1.	Houses demolished in Clearance Areas	—
2.	Houses demolished not in Clearance Areas	—
3.	Houses closed, not demolished	—
4.	Any other houses permanently discontinued as dwellings and not included in above	4

Repairs.

Houses made fit by procedure under either Housing or Public Health Acts:

1.	By Informal Action	66
2.	By owners, following statutory notice	11
3.	By Local Authority in default of owners	—
4.	Demolition Orders revoked after reconstruction	—

IMPROVEMENT GRANTS, HOUSING ACT, 1949

		No. of Separate Houses
1.	Applications submitted to Local Authority during year	38
2.	Applications rejected	1
3.	Applications approved	37
4.	Total number of applications approved in area since inception of scheme	110

SECTION E

INSPECTION AND SUPERVISION OF FOOD

Ice Cream (Heat Treatment) Regulations, 1947-1952

Seven premises in the area are registered for the manufacture of ice-cream. They have all been regularly inspected, and found to comply with the above regulations and with the Food Hygiene Regulations.

During the year 20 samples of ice cream were taken and submitted to the prescribed tests under the Regulations. Reports were returned as follows:

Grade 1—12 samples.	Grade 3—None.
Grade 2— 7 samples.	Grade 4— 1 sample

Food Shops and Food Preparing Premises

The number of food premises by type in the area is as follows:

Confectionery	24
Grocers and General Dealers	112
Butchers	26
Greengrocery	18
Bakery	13
Temperance Bars	8
Fish (wet)	2
Fish and Chips	18
Cafes	4

The number of food premises by type, registered under Section 16 of the Food and Drugs Act 1955 is as follows:

Grocers and General Dealers	61
Temperance Bars	8
Confectionery	13
Greengrocery	6
Butchers	12
Fish (wet)	1

Of these, 86 premises are registered for the sale and/or manufacture of ice cream, and 21 for the manufacture of sausage, preserved meat, etc., of which 6 premises are registered for both purposes. Inspections of registered premises during the year totalled 313.

Three premises are registered as dairies, six persons registered as distributors of milk, and 60 licenses were issued to milk dealers including one supplementary licence.

Food Hygiene Regulations 1955-1956.

685 visits to food premises were made during the year. 396 contraventions of the above regulations were found, and of these 271 were remedied during the year after letters or interviews.

With the new regulations coming into force at the beginning of the year, even more attention was directed to Food Hygiene in shops, food preparing premises and canteens, and the response from the occupiers of food premises was, in the main, very good.

One of the most frequent faults, was found to be the failure of shop owners to protect unwrapped food. This was most prevalent in the smaller shops, mainly with regard to trays of pies and cakes, and in some cases the practice was for customers to help themselves from the trays.

The provision of water supply and drainage to lock-up shops often presents a problem, particularly as in most cases these shops are merely rented. It is unfortunate that no legislation exists to compel a landlord who lets a building as food premises, to see that the building is structurally suitable in the first instance, and provided with a water supply and drainage, to comply with the regulations, or alternatively the occupier should be granted security of tenure for at least a given period where the cost of provision of the necessary water supplies and drainage, etc., are borne exclusively by him.

Lectures on Food Hygiene have been given to food traders and Women's Organisations, and are regularly given to school leavers.

Foreign Matter in Food.

Cautions were given to bakers following the finding of foreign bodies in foodstuffs the Committee being satisfied in two cases that all reasonable care in food preparation was being exercised. The foreign matters were:

Steam Beetles in bread.
Edible Oil in bread.
Rat faeces in milk.
Part of cigarette in bread.

In the case of the cigarette in bread, the complainant was not desirous of appearing as a witness in any proceedings which might have been instituted. This is not an uncommon state of affairs, and is no doubt the reason why many legitimate complaints fail to reach this office.

A further case of defective icing on a wedding cake could not be reasonably pursued as several days had elapsed before the matter was brought to our notice, and the cake had meanwhile been demonstrated in various places and was by then somewhat the worse for wear.

Foreign Matter in Fruit.

From time to time during the year our attention was called by bakers to the condition of cases of imported fruit and indeed pieces of metal, nails, glass, gravel, etc., removed after sorting were sent to the office, this it should be noted, from "7 Star" fruit.

Our own observation has shown both a nail and a piece of wire embedded in the centre of a box of currants, showing quite clearly in this case, that it is a hazard with which no baker should be expected to cope.

This is not an isolated case, and some allowance should be made when it is found by the consuming public, but it does not remove from the baker the need to exercise reasonable diligence in ensuring that so far as is possible, foreign matter should be removed before making up. If the wholesaler or importer bore a measure of responsibility in these cases, extra pressure might be brought to bear on the place of origin, with some prospect of a reduction of the risk of foreign matters in food.

Meat and Other Foods.

The five slaughterhouses licensed on the return to Private Slaughtering remain in use and are operating satisfactorily.

Number of Animals Slaughtered during the Year.

	Bullocks	Heifers	Cows	Bulls	Calves	Pigs	Sheep
Normal Kill	888	1325	4	2	4	1886	3684
Casualties	—	—	—	—	—	2	8
Total	888	1325	4	2	4	1888	3592

The amount of meat and organs condemned together with the reasons for condemnation is set out in the following tables. All meat and offal condemned is processed for the extraction of fat, glues, etc.

Meat and Other Organs Condemned, Surrendered and Destroyed

For Tuberculosis:

Bovine:

Heads and Tongues	40
Lungs	62
Livers	11
Skirts	2
Spleens	1
Mesenteries	5
Tripes	5
Gut	5
Beef	294 lbs.
Carcases	2

(Total Weight 79 stones)

Swine:

Heads	24
Pork	61 lbs.

For other Defined Diseases:

Bovine:

Heads and Tongues	Actinomycosis 1, Abscesses 1, C. Bovis 12.
Lungs	Pleurisy 12, Parasites 37, Abscesses 12, Pentastomes 3.
Livers	Cirrhosis (whole) 42, (part) 781, Hydatids 3, Abscesses 53, Cavernous Haemangioma 1, Perihepatitis 1.
Kidneys	Nephritis 1.
Hearts	C. Bovis 1, Pericarditis 4.
Skirts	Abscesses 2, Inflammation 4.
Spleens	Peritonitis 1.
Mesenteries	Pentastomes 14.
Tripes	Inflammation 3.
Gut	Inflammation 1.
Beef	Abscesses 44 lbs., Bruising 52 lbs.

Sheep:

Plucks	Pleurisy 7, Pneumonia 2.
Livers	Parasites 25, Perihepatitis 5, C. Tennuicollis 3, Abscesses 4.
Hearts	Pericarditis 4.
Mutton	Bruising 10 lbs., Abscesses 14 lbs.
Carcases (both casualties)	Acute Septic Peritonitis 1, Ill-setting and Oedema 1.

(Total Weight 7½ stones)

Swine:

Heads	Abscesses 2.
Lungs	Pleurisy 49, Pneumonia 127.
Livers	Parasites 38, Perihepatitis 26.
Hearts	Pericarditis 49.
Kidneys	Retention Cysts 1.
Mesenteries	Inflammation 1.
Gut	Inflammation 1.
Stomach	Inflammation 1.
Pork	Abscesses 5 lbs.
Carcases (one of which was a casualty)	Septicaemia 1, Acute Swine Erysipelas 1.

Total Weight 13 stones).

Carcases and Offal inspected and condemned in whole or in part.

	Cattle exc. Cows	Cows	Calves	Sheep and Lambs	Pigs
No. killed and inspected	2215	4	4	3692	1888
All Diseases except Tuberculosis and Cysticerci.					
Whole Carcases condemned	—	—	—	2	2
Carcases of which some part or organ was condemned	176	1	—	48	190
Percentage affected with disease other than Tuberculosis and Cysticerci	7.9	25	—	1.4	10.2
Tuberculosis only:					
Whole Carcases condemned	2	—	—	—	—
Carcases of which some part or organ was condemned	83	—	—	—	24
Percentage affected with Tuberculosis	3.8	—	—	—	1.3
Cystercosis:					
Carcases of which some part or organ was condemned	12	—	—	—	—
Carcases submitted to treatment by refrigeration	12	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Other Foods

The following foods were found to be unfit and were condemned and destroyed:

Canned Goods	1188 tins	Bacon	145 lbs.
Bread, Cereals and Cakes	3129 lbs.	Fruit	62 lbs.
Butter, Lard and Cheese	23 lbs.	Sausage	62 lbs.
Meat Pies	50	Meat	207 lbs.

Disposal of unfit food is carried out according to the circumstances and its character. Tinned meat, where suitable, is used as rat bait.

Other foods are burned, when suitable arrangements can be made to use some of the large boilers in the district, or buried, or when suitable, used for pig food.

SECTION F

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Hospital accommodation for cases of infectious disease is now provided by the Regional Hospital Board at Walkergate Hospital, Newcastle.

TABLE SHOWING ANALYSIS OF NOTIFIED CASES OF INFECTIOUS DISEASES UNDER AGE GROUPS.

Disease	Age unknown	Under 1 year	1—2 years	3—4years	5—9 years	10—14 years	15—24 years	25—34 years	35—44 years	45—54 years	55—64 years	65—74 years	75 years & over	Total	Admitted to Hospital
Pneumonia	—	—	—	—	—	—	—	—	—	1	—	—	1	2	—
Measles	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—
Whooping Cough	—	1	5	4	2	—	—	—	—	—	—	—	—	12	—
Food Poisoning	11	—	—	—	38	22	1	—	—	2	1	—	—	75	—
Dysentery	—	13	31	26	41	21	12	26	16	10	8	4	1	209	—

Dysentery (Sonne).

As will be seen from the above table this was much the most prevalent notifiable infectious disease in 1956.

Sporadic cases were notified during the first four months of the year but four cases, notified at the end of May, marked the beginning of an epidemic which continued through the month of June and gradually abated in July.

The following table sets out the numbers notified or discovered in each month of the year in different age groups.

Age.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Total
0—4 years	2	—	—	1	—	46	18	—	2	1	—	70
5—9 years	—	3	3	1	1	28	2	1	1	1	—	41
10—14 years	—	—	—	—	2	13	1	—	1	4	—	21
15 years and over	—	—	—	3	1	50	17	3	1	1	1	77
Totals	2	3	3	5	4	137	38	4	5	7	1	209

The first cases notified, occurred among a troop of Cubs, and were taken ill at a week-end camp. It was at first thought that the infection had been contracted outside the area but investigation brought to light the fact that at least one boy had been ill before leaving home. Other cases in Ashington quickly followed and it seems almost certain that the cases among the Cubs were all part of one outbreak.

It soon became evident that the epidemic was following a pattern quite different from that shown by all other epidemics, both in Ashington and other districts in my area, in recent years.

In contrast with previous experience, there was no evidence that the infection was occurring in any particular school or, indeed that school children were the chief victims. Moreover, Sonne Dysentery seems now-a-days to be a disease of the Autumn and Winter months. Cases were notified from all parts of the town, and a distinct impression was received that the proportion of adult males among the victims was unusually high. This impression is confirmed by the analysis of the figures which shows that, of the patients, aged 15 years and over, notified during June, 29 were males and 21 were females. It is much more usual to find that more females are affected because children are chief sufferers and those who look after them, viz, their mothers, also pick up the infection.

The number of pre-school children affected was also high and it will be seen from the table that of the 137 cases notified in June only 41 were school children, while of the 38 cases in July only 3 were of school age.

Inquiries and investigations were actively pursued and one factor common to the vast majority of the affected households, at least in the early part of the epidemic was found to be the milk supply. The dairy in question was visited and samples of stools were obtained from all members of the staff, with negative results. It then became necessary to extend the field of the inquiry and investigations were carried out at all the farms, seven in number, which supplied milk to the dairy.

Specimens of stools, from all the farm workers handling the milk, were sent for examination, again with negative results. It was, however, found that the 14 year old son of one of the farmers had been off school with diarrhoea. He had not received any medical treatment and was reported to be well and on the point of returning to school. Despite considerable opposition from the boy's mother who scouted the idea that he could have had dysentery, a specimen stool was insisted on and on examination, it was found to contain the germ responsible for Sonne Dysentery. All other members of the family were tested with negative results.

Bacteriological examination of samples of the milk proved negative but strict instructions were given, that no member of the household was to handle the milk in any way until the boy had had three consecutive negative results and was considered free from infection.

He continued to carry the infection for several weeks.

The epidemic abated quite rapidly considering its initial explosive and widespread character and it may have been assisted to do so, by the fact that the school children were on holiday from mid-July and the schools were, thus prevented from becoming foci of infection.

Of the 38 cases notified in July, 29 occurred in the first half of the month.

While there was no definite proof that this epidemic was due to the infection on the farm there was very strong circumstantial evidence that it was due to a milk-borne infection. On this assumption, the numbers of adult males affected early in the epidemic is explained by the fact that the men were miners who were in the habit of taking milk with them to work.

Pre-school children may, also, be expected to be large consumers of milk, while the school children probably drank most of their milk at the schools, which had a different milk supply.

A final point of interest is that, of the 17 adults notified in July, 5 were males and 12 were females. A possible explanation of this is that, the milk having ceased to be a source of infection, the epidemic was reverting to the usual course of events, in which the mothers are more liable to infection than are the fathers. Of the 12 adult females notified in July 5 were mothers and two were older sisters of children previously notified In addition to the cases, 20 symptomless carriers were found in households where cases of the disease occurred.

Food Poisoning.

Of the 75 cases of illness due to food poisoning all except three occurred in one outbreak which was caused by a dinner cooked and served at one of the schools in Ashington.

This meal consisted of vegetable broth, cold boiled beef with potatoes and sponge with coconut. As a result of inquiries at the school it was ascertained that the probable vehicle of infection was the broth. This had been prepared from stock made the previous day and left overnight in the kitchen where presumably the rate of cooling would be slow.

The meal was eaten by 368 persons of whom 137 were affected — 46 girls 46 boys and 34 infants, 8 members of the teaching staff and 3 women who helped to serve the meal.

Symptoms consisted almost entirely of abdominal pain and diarrhoea and the interval between consumption of the meal and the onset of symptoms varied between 5 and 20 hours with an average of about 14 hours. The illness lasted for periods varying from 1 or 2 hours to 18 hours with an average of 6 hours. Some 64 pupils were absent from school for the whole or part of the following day but only 10 children were still absent on the day after that. One teacher and one meals helper were still absent on the second day.

The illness was in the majority of cases mild and many of the children were quite well by the time they were seen at school. This accounts for the fact that there is a discrepancy between the number affected and the number whose names and addresses were noted and entered in the register. No case was formally notified as in only one instance, that of a teacher who lived in another area, was medical advice sought. Investigations were directed particularly towards the kitchen staff which consisted of a cook supervissor, an assistant cook and three kitchen hands. The early onset of symptoms in some cases made the presence of a pre-formed toxin a possibility and swabs were taken from the noses, hands and wrists of the kitchen staff. All results were negative.

Specimens of stool were sent for examination but reports stated that no food-poisoning organisms were present. The presence of a heat resistant organism had then to be considered and tests for this were requested. An organism of this type viz. Cl. Welchii was subsequently isolated from two of these five specimens.

Specimens from the three meals helpers who had been affected and from the teacher who was off duty produced the same germ.

Owing to the mild nature of the illness andthe rapid recovery of the children little co-operation was obtained from the parents and only one specimen was submitted from a child. This, too, showed the presence of Cl. Welchii.

The cook was the only one who had handled the meat from which the stock was made and she was not one of those found to be excreting the offending organism. No food was available for examination.

It was possible to say, only, that the immediate cause of the outbreak was Cl. Welchii and that the probable vehicle of infection was the broth but the method by which the broth was infected had to remain a matter for conjecture. It was impossible to determine whether the meat had been infected before delivery to the school or whether the kitchen staff, two of whom were symtomless carriers of the organism, had somehow infected the broth although careful inquiries failed to show just how this could have happened.

The history of this outbreak again underlines the dangers involved in re-heating food and the importance of rapid cooling of cooked food which is either to be eaten cold or re-heated (if this is unavoidable). The organism involved in this case is one which can resist heat and form spores and the slow cooling of the stock would provide ample opportunity for the multiplication of the germs. A greater use of refrigeration would prevent many outbreaks of food-poisoning.

Apart from this outbreak, three other cases of food-poisoning occurred, all in members of one family. The causative organism was Sal Typhi murium but there was no indication of the source of infection.

TUBERCULOSIS

New Cases and Mortality during 1956.

Age Groups	NEW CASES					DEATHS				
	Resp.		Non-Resp.			Resp.		Non-Resp.		
	M	F	M	F	Total	M	F	M	F	Total
Under 1 year	—	—	—	—	—	—	—	—	—	—
1 - 4 years	—	—	1	—	1	—	—	—	—	—
5 - 14 years	1	1	2	—	4	—	—	—	—	—
15 - 24 years	2	3	—	—	5	—	—	—	—	—
25 - 34 years	1	2	—	—	3	—	—	—	—	—
35 - 44 years	3	1	—	—	4	—	—	—	—	—
45 - 54 years	2	1	—	—	3	1	—	—	—	1
55 - 64 years	1	—	—	—	1	—	1	—	—	1
65 - 74 years	—	—	—	1	1	—	—	—	—	—
75 years and over	1	—	—	—	1	—	—	—	—	—
Age Unknown	—	—	—	—	—	—	—	—	—	—
Total	11	8	3	1	23	1	1	—	—	2

The number of notified cases of respiratory tuberculosis was 19, a decrease of 2 on the figure for the previous year, while the number of non-respiratory cases was 4, an increase of two on the previous year. The total number of cases notified was, therefore, exactly the same as in 1955, viz, 23.

There were only two deaths from tuberculosis, both respiratory cases, and this gives a death rate of 0.0705 per 1.000 of the population — the lowest rate ever recorded in Ashington.

The corresponding figure for England and Wales was 0.121 per 1,000 (respiratory tuberculosis deaths — 0.109 per 1,000).

Diphtheria.

For the seventh consecutive year no case of this disease occurred and for 10 years no fatal case has been reported.

Diphtheria Immunisation.

During 1956 there were treated for the first time at the Child Welfare Centre, at the schools and by private doctors, 364 pre-school children and 131 school children. In addition, reinforcing injections were given to 229 pre-school children and 1,295 school children.

At 31.12.56. it was estimated that 5,024 children under the age of 15 years had completed a course of treatment during the five years 1952-1956 and a further 1,123 had been immunised in 1951 or earlier.

This gives an immunity index for the different age groups as follows :

Under 1 year	18.22
1—4 years	78.55
5—14 years	79.96
All children under 15 years	75.51

These figures show a considerable improvement on the corresponding figures at the end of 1955.

Malignant Neoplasms.

The number of deaths from Cancer and other malignant neoplasms rose sharply from 43 in 1955 to 58 in 1956 and the death rate increased from 1.514 per 1,000 to 2.045 per 1,000 at which figure it is almost the same as that for England and Wales as a whole.

Death rate from malignant neoplasms 2.045 per 1,000 of the population.

MALIGNANT NEOPLASMS

Site	MALES									FEMALES								
	5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75+	Total	5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75+	Total
Brain	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—
Skin	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Parotid	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Larynx	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	1	—	1
Oesophagus	—	—	—	—	1	—	—	—	1	—	—	—	—	1	—	—	—	1
Lung	—	—	—	1	1	4	4	1	11	—	—	—	—	—	1	—	—	1
Breast	—	—	—	—	—	—	—	—	—	—	—	—	2	3	1	3	—	9
Stomach	—	—	—	—	—	—	3	—	3	—	—	—	—	1	—	1	1	3
Pancreas	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—
Intestine	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—
Colon	—	—	—	—	—	—	2	—	2	—	—	—	—	—	1	—	—	1
Ovary	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	2
Uterus	—	—	—	—	—	—	—	—	—	—	—	1	1	—	1	2	—	5
Prostate	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
Rectum	—	—	—	—	—	—	—	2	2	—	—	—	—	—	2	—	1	3
Vulva	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Haematopoietic System	1	—	—	—	1	—	—	—	2	—	—	—	—	1	—	—	—	1
Kidney	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—
Thyroid	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
Totals	1	—	—	1	3	5	11	7	28	1	—	1	3	7	7	9	2	30

Malignant Neoplasms of the Lung and Bronchus.

Death Rate in Ashington	0.388 per 1,000.
Death Rate in England and Wales	0.407 per 1,000.

Malignant Neoplasms of All Other Sites.

Death Rate in Ashington	1.657 per 1,000.
Death Rate in England and Wales	1.668 per 1,000.

Malignant Neoplasms of All Sites.

Total Death Rate in Ashington	2.045 per 1,000.
Total Death Rate in England and Wales	2.075 per 1,000.