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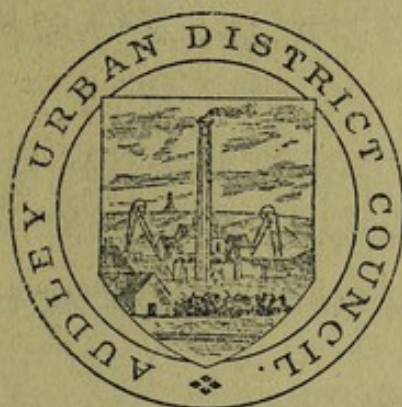
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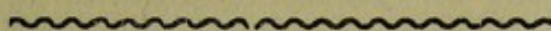
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AUDLEY URBAN  
DISTRICT COUNCIL.



ANNUAL REPORT

—OF THE—

MEDICAL OFFICER OF HEALTH.

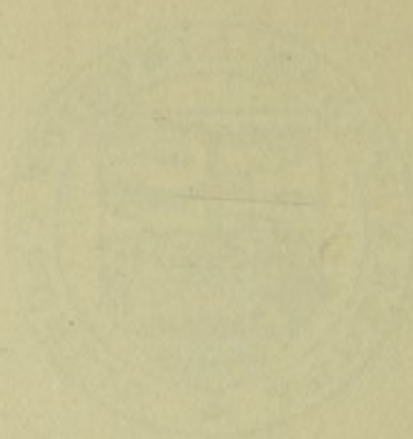
(W. F. YOUNG, M.B., Ch. B., D.P.H.)

**FOR THE YEAR**

**1928.**

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J. DODD, Printer, Audley.



ANNUAL REPORT  
OF THE  
MEDICAL OFFICER OF HEALTH  
FOR THE YEAR  
1911



# AUDLEY URBAN DISTRICT COUNCIL.

## ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

W. F. YOUNG, M.B., Ch. B., D.P.H.,

FOR THE YEAR 1928.

### STATISTICS & SOCIAL CONDITIONS OF THE AREA.

The extent of the area remains unchanged at 8,313 acres.

Population : 1928 (estimated) 15,140 ; 1921 (census) 14,731

Number of inhabited houses (1921) 3,184.

Number of families or separate occupiers (1921) 3,232.

Rateable value :—£49,820.

Gross produce of a penny rate £185.

### SOCIAL CONDITIONS (including occupations) :—

The area lies within easy reach of Newcastle-under-Lyme Borough and the Potteries, and is partly rural and partly urban in character.

The 1921 census gave particulars of occupations as follows :

TABLE I.

Percentage of Males occupied		Percentage of Females occupied	
Total	89	Total	17
Percentage of total males occupied engaged in		Percentage of total females occupied engaged in	
Mining and Quarrying ...	63	Personal service ...	29
Agriculture ...	5	Textile ...	16
Metal working ...	5	Brick, Pottery making, etc.	7



There appears to have been little change in the nature of occupations since 1921.

In June two collieries closed in the Talke area. Between 1,200 and 1,400 men were thrown out of employment, and there has been considerable distress in this area. Gradual absorption of some of the men into other collieries has taken place, but the degree of this is very small, and there seems unfortunately to be little or no prospect of improvement.

No particular occupation appears to have had an influence on the Public Health.

#### VITAL STATISTICS.

Births :—		Males	Females	Total
Legitimate	...	121	114	235
Illegitimate	...	7	5	12
Total		128	119	247
Birth-rate 16.3		Still-births 12.		

Deaths :—		Males	Females	Total
		71	72	143

Recorded Death-rate 9.4

Total number of women dying in consequence of child-birth 3.

Sepsis	...	2.
Other causes	...	1.

The deaths of infants under one year of age numbered 17, giving an Infantile Mortality rate of 69.

Deaths of illegitimate infants under one year of age :—1.

Deaths from Measles	...	0
" " Whooping-Cough	...	0
" " Diarrhoea (under 2 years of age)		1

#### INFANTILE MORTALITY RATE.

The numbers of deaths of children under one year of age per 1000 births for the whole district during the last three years are shown below :—

1926	...	50
1927	...	68
1928	...	69



Table 11 gives an analysis of these figures by Wards, stating the numbers of births, the numbers of deaths of children of under one year of age, and the corresponding Infantile Mortality Rates.

TABLE II.

Ward	Year	Births	Deaths	I.M.R.	Average I.M.R. for 3 yeass
Talke	1926	45	4	89	62
	1927	46	2	43	
	1928	55	3	55	
Halmerend	1926	77	3	39	56
	1927	59	3	51	
	1928	51	4	78	
Butt Lane	1926	56	3	54	71
	1927	58	6	103	
	1928	55	3	55	
Audley	1926	42	2	48	88
	1927	36	3	83	
	1928	45	6	133	
Bignall End	1926	51	0	0	20
	1927	35	1	29	
	1928	33	1	30	

NOTE. For purposes of simplification the numbers of births given are those shown on the local Registrar's weekly sheets, received by the Medical Officer of Health *during the calendar year*. These figures will therefore not agree with the Registrar-General's figures for each year, but will average out over a period of years.

## GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

### *Hospitals subsidised by the Local Authority.*

The Hospital for cases of infectious disease is situated at Bradwell in the Wolstanton Urban District, and is owned jointly by the Audley, Kidsgrove and Wolstanton Authorities.

Contribution is made by the County Council towards establishment expenses.



The 96 beds maintained are allocated as follows :—

Scarlet Fever	...	50
Diphtheria	...	20
Enteric Fever	...	20

The remaining six beds are held in reserve.

The accommodation has always proved adequate.

The Hospital for Smallpox is situated at Bagnall, and is owned jointly by the Local Authorities of North Staffordshire.

The area forms part of the Newcastle-under-Lyme Union. The Poor Law Infirmary is at Keele Road, Newcastle-under-Lyme.

There are no other Hospitals provided or subsidised by the Local Authority.

*Other Hospitals available for the Area :*

(1) Tuberculosis.

Cases in need of Sanatorium Treatment are sent to the Staffordshire County Institutions

(2) Maternity cases may be admitted to the Newcastle-under-Lyme Guardians' Hospital.

Complicated cases go to the North Staffordshire Royal Infirmary.

(3) Children requiring Hospital Treatment are admitted to the Children's Wards of the North Staffordshire Royal Infirmary at Stoke. Those in need of Orthopædic Treatment attend as out-patients at, or are admitted to the Cripples' Aid Hospital at Stoke. In necessitous cases the County Education Committee defrays all or part of the cost of treatment and apparatus.

*Ambulance Facilities :*

Infectious cases are conveyed by the Fever-Hospital Ambulance. Non-infectious and accident cases make use of an ambulance owned by Newcastle-under-Lyme Borough, and of a Police Ambulance.



*Institutional Provision for unmarried mothers, illegitimate infants  
and homeless children :*

There is no special provision.

CLINICS AND TREATMENT CENTRES.

A School Clinic, provided by the County Education Committee, is open one morning a week at each of the villages of Audley and Talke.

An infant Welfare Centre at Talke, and a combined Antenatal and Welfare Centre at Audley are open one afternoon a week.

All these Centres are under the supervision of the School Medical Inspector for the area, who is also Medical Officer of Health.

Particulars of the work at the Centres are given on page 27.

The Tuberculosis Dispensary is at Florence Street, Newcastle-under-Lyme.

Cases of Venereal disease are treated at the Venereal Disease Clinic at the North Staffordshire Royal Infirmary.

*Public Health Officers of the Local Authority.*

The Medical Officer of Health is a part-time officer, holding also the appointments of School Medical Inspector to the Staffordshire Education Committee, and of Medical Officer of Health to the Newcastle-under-Lyme Rural District Council.

The Sanitary Inspector and Inspector of Nuisances is a whole-time officer.

Three whole-time Health Visitors on the Staff of the County Council are normally employed in the district. The Health Visitor for the Talke area was transferred to another district in July, and by the end of the year had not been replaced. It is very unfortunate that this area, which has been the most severely hit by the depression in the coal-trade, should be left for so long without tuberculosis and maternity and infant welfare visiting. The work of the Health Visitor in the Schools is also at a standstill.



Particulars of the work of the Health Visitors are given on page 26.

### *Professional Nursing in the Home.*

#### (a) General.

There is no Nursing Association in the area.

The three County Council Health Visitors are also appointed Infant Protection Visitors under the Children's Act, 1908. The foster-parents of nursed children thus have the benefit of the advice of a trained nurse.

#### (b) Infectious.

Under the County Health Visiting Scheme arrangements have been made for the nursing of cases of measles where this is considered necessary by the Medical Officer of Health.

The County Council levies a special rate in its Health Visiting Area, of which the district forms part.

### *Midwives*

At the beginning of the year eight midwives (six trained and two untrained) notified the local Supervising Authority of their intention to practise in the area.

The Council makes no subsidy.

### *Maternal Mortality.*

The area is included in that embraced by the scheme of the County Council (as Local Supervising Authority) for investigation of Maternal deaths.

### *Legis'ation in force.*

#### LOCAL ACTS.

By virtue of the Kidsgrove Gaslight Act, 1871, and the Kidsgrove Gas Act, 1914, the Kidsgrove Gasworks are empowered to supply gas to the Ecclesiastical Parish of Talke.

#### SPECIAL LOCAL ORDERS.

Pemphigus Neonatorum was made notifiable throughout the district by the Council on the first of December, 1926.



Chickenpox was made notifiable in March for a period of two months, and again in September for a further period of six months.

#### GENERAL ADOPTIVE ACTS.

- (a) The Public Health Acts Amendment Act, 1890 : the whole Act.
- (b) The Private Street Works Act, 1892.
- (c) The Public Health Acts Amendment Act, 1907 ; Parts I, II, Sections 35 to 38 (inclusive,) and 43 to 51 (inclusive) of Part III ; Sections 52 to 57 (inclusive,) and 60 to 68 (inclusive) of Part IV ; Sections 87, 88 and 89 of Part VIII, and Section 95 of Part X.
- (d) Public Health Act, 1925. The whole Act has been adopted with the exception of Section 44. Sections 21 and 22 came into force on the first of March, 1926, and Parts II to V (inclusive,) with the exception of Sections 21 and 22 (see above) came into force on the first of June, 1926.

#### SANITARY CIRCUMSTANCES OF THE AREA.

##### WATER.

Particulars of the sources of supply have been given in the 1925 (Survey) and subsequent Annual Reports. The supply appears to be satisfactory as to quantity and quality. No analysis of the piped supply was made during 1928.

In August an extension of the main was carried to a group of cottages which had previously been supplied by a well discovered to be contaminated in 1926. Extensions were also made to three dairy premises.

##### RIVERS AND STREAMS.

Apart from ensuring that the best use was made of the land available for sewage purification, (see also under "Drainage and Sewerage,") no special action was taken to prevent pollution of streams.



## DRAINAGE AND SEWERAGE.

With the exception of the replacement of a few yards of old sewer in Church Street, Butt Lane, there has been no change.

The irrigation area at the Hollins, Talke, continues to be inadequate for the amount of sewage dealt with.

Nuisance is occasioned at various points by the primitive methods of sewage disposal practised, and although the best use is made of the land available by frequent diversion of the flow, streams are still rendered very foul.

In January a letter was received from the County Council to the effect that unless immediate steps were taken to carry out the existing scheme for sewerage of the District without delay, the County Council contemplated the service upon the Council of a statutory notice under the Rivers' Pollution Prevention Acts. The Council replied that owing to continued serious depression in the coal-trade (which is the principal industry of the district) the enforcement of an expensive sewerage scheme upon the district was unreasonable. It was suggested by the Council that the needs of the district could be met by a modified scheme to deal with the sewage of such parts of the district as were most urgently in need of attention.

At the end of January, statutory notice was given of the County Council's intention to take proceedings against the Council after two months unless steps were taken meanwhile to comply with the notice and prevent pollution of the streams of the district. The Council then wrote to the Ministry of Health, explaining their exceptional difficulties and asking if a grant might be made towards the cost of the scheme. A deputation from the Council was received at the Ministry in April, and was informed that the Ministry would request the County Council to delay action pending further inquiry and report by one of the Ministry's Inspectors. Intimation was also given to the effect that the unemployment in the district was not such as could be regarded as sufficiently exceptional to enable an application for assistance to be entertained.

## CLOSET ACCOMMODATION.

Table III shows the numbers of the different types of closets in use during the last three years :



TABLE III.

	1925	1926	1927	1928	1929
Brick Privy Vaults ...	1572	1559	1541	1526	1525
Earthenware Vessels ...	1269	1260	1254	1250	1238
Slop Water Closets ...	28	28	28	28	28
Water Closets ...	565	600	638	667	689

Defective privies, etc. are being replaced where possible by Water Closets, but Section 39 of the Public Health Acts Amendment Act, 1907, has not been adopted by the Council.

During the last <sup>9</sup>eight years <sup>296</sup>281 privies etc. have been converted to the water-carriage system. In 1928 there were 19 conversions. <sup>15</sup>

#### SCAVENGING.

There has been no change in the conditions described in last year's report. Considerable nuisance is still occasioned by the method of collection of both house-refuse and night-soil. An improvement in the manner of collection of house-refuse would be effected if the provision of a sanitary bin for each house were enforced, but until it is found possible to put the sewerage scheme into operation there can be no abatement of the very serious nuisance caused by the day-time collection and removal of excreta.

#### SANITARY INSPECTION OF THE AREA.

(a) Number and nature of inspections made by the Sanitary Inspector during the year :—

Dairies and Cowsheds	...	329
Slaughter-houses	...	419
Bake-houses	...	32
Infectious disease (disinfection of houses)	...	73
Nuisances	...	36

(b) Number of notices served during the year :—

Statutory—2.

Informal—17.

All notices have been complied with.



## OTHER SANITARY CONDITIONS REQUIRING NOTICE.

In June application was made for a Certificate that an area of land was suitable for the extension of Alsagers Bank Church Burial Ground. On inspection the ground was found to be satisfactory and a certificate was issued.

## SCHOOLS.

The Sanitary conditions of the Public Elementary Schools of the district continues on the whole to be satisfactory. All are supplied with water from the Council's Waterworks, and with the exceptions of two Church of England Schools the offices of all are on the water-carriage system.

Particulars of arrangements for preventing the spread of infectious disease were given in the 1927 report, and these are unchanged. No Schools were closed on account of infectious disease during the year.

By degrees the County Education Committee's Scheme of dental treatment is being extended. The results already achieved are remarkable, and the proportion of acceptances of treatment is very high.

The County Council Health Visitor and School Nurse for the Talke area was transferred to another district in July, and by the end of the year had not been replaced. The "following up" work in the schools and homes of this area has suffered considerably in consequence.

## CO-ORDINATION OF PUBLIC HEALTH WORK WITH THAT OF THE SCHOOL MEDICAL SERVICE.

It is to be noted that the School Medical Inspector for this district is also Medical Officer of Health. Co-ordination of work in connection with the control of infectious disease and of tuberculosis is naturally of a very close order. Special efforts have been made in the last three years to improve housing conditions in connection with cases of tuberculosis and where there are young infants. Particular attention has also been paid where cases of rheumatism have been observed.

(See also pages 15, 24 and 27.)



Arrangements have been made whereby extracts of the records at the Infant and Child Welfare Centres are made quarterly on to school "revision" cards, thus ensuring continuity in observation and treatment of defects discovered before children become of school age. The advantages gained from this arrangement are particularly marked in cases of squint, orthopaedic defects, both forms of Tuberculosis, and of adenoids and enlarged tonsils.

The County Oculist attends periodically in the district, and arrangements have been made whereby cases of squint in children under 5 are seen and treated.

The Welfare Centres are held in the same buildings as the School Clinics, and drugs and dressings are accordingly available for the treatment of cases of otitis, skin diseases, minor injuries, etc.

Special attention has been given during the year to the question of the care of debilitated children of less than school age. These have been summoned to the Welfare Centres at regular intervals so that accurate records of progress or otherwise are available for transfer to School Clinic and revision cards later.

Numerous cases come to mind where defects thus discovered have been remedied which would otherwise have passed beyond the range of effective treatment when discovered at the first Medical Inspection in the school.

#### HEALTH EDUCATION.

In October two lectures were given under the auspices of the County Insurance Committee, one at Talke by the County Dental Officer, and the other at Audley by one of the County School Medical Inspectors.

The County Insurance Committee has made arrangements with the National Association for the Prevention of Tuberculosis and the British Social Hygiene Council for the provision of lecturers, cinema films, lantern slides, photographs, models, etc. It is intended to take full advantage in 1929 of the valuable opportunity offered in both Audley and Talke areas.

#### RAG FLOCK ACTS, 1911 & 1928.

There are no premises in the district on which rag flock is manufactured, used or sold.



## HOUSING.

### GENERAL AND MISCELLANEOUS.

Sanitary work completed during the year —

New drains have been constructed for 17 houses.

Faulty back-yards paved—17.

Substitution of water-closets for defective privies or earthenware vessels—19.

### HOUSING STATISTICS.

Number of new houses erected during the year :—

(a) Total, including numbers given separately under (b)	10
(b) With state assistance under the Housing Acts	8
(1) By Local Authority	0
(2) By other bodies or persons	8

#### 1. *Unfit Dwelling-houses.*

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	793
(2) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925	116
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	1
(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	76

#### 2. *Remedy of defects without Service of formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	29
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### 3. *Action under Statutory Powers.*

#### A.—Proceedings under Section 3 of the Housing Act, 1925.

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	28
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a)	by owners ... ..	18
(b)	by Local Authority in default of owners	0
(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.—Proceedings under Public Health Acts.

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ..	3
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a)	by owners ... ..	2
(b)	by Local Authority in default of owners	0

#### C.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925.

(1)	Number of representations made with a view to the making of Closing Orders ...	1
(2)	Number of dwelling-houses in respect of which Closing Orders were made ... ..	1
(3)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ...	0
(4)	Number of dwelling-houses in respect of which Demolition Orders were made ...	0
(5)	Number of dwelling-houses demolished in pursuance of Demolition Orders ...	0



With regard to Housing in connection with Tuberculosis, maternity and infant welfare, and rheumatism, see pages 15, 24 and 27.

## INSPECTION AND SUPERVISION OF FOOD.

### (a) MILK SUPPLY.

Quarterly inspection of Cowsheds and Dairies is made by the Sanitary Inspector.

#### MILK AND DAIRIES ORDER, 1926.

During the year improvements were effected on sixteen premises, twelve by mutual agreement, three after informal notice, and one after formal notice. Although the district is partly urban in character, it contains about 70 cow-keepers, and it may be said that on the whole the premises are up-to-date. In the last eight years improvements have been carried out on 46 premises.

Grade A Milk is produced on one farm.

In no case was registration of a retailer refused or revoked.

### (b) MEAT AND OTHER FOODS.

Meat inspection, including inspection at the time of slaughter and inspection of stalls, shops, and vehicles in conformance with the 1924 Regulations is regularly carried out by the Sanitary Inspector. No carcasses were condemned during the year.

There are eight private slaughter-houses in the district, and no public slaughter-houses.

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

### SCARLET FEVER.

There has been a further fall in the number of cases, most of which have been mild. The majority occurred from March onward in the Bignall End area, where one or two were discovered in the peeling stage. It appears that several slight cases were missed, thus accounting for the persistence of the disease. All the children at the Ravens Lane School were examined on one occasion, but nothing beyond a few slightly inflamed throats was discovered. There was one definite "return" case.



### DIPHTHERIA.

These cases were markedly sporadic, and occurred throughout the year. In two cases definite contact was established. All were admitted to Hospital. There were three deaths, one occurring in a woman seven months pregnant.

A supply of anti-diphtheria serum is held available in the district, but no use was made of this during the year.

### ISOLATION HOSPITAL.

The question of Hospital accommodation was dealt with in the 1927 Report.

### OTHER DISEASES.

One case of acute anterior polio-myelitis, (which recovered completely) and one of pemphigus neonatorum (fatal) were notified.

Four cases of damp houses were referred to the department by the school-nurses where children were known to the County School Medical Officer to be suffering from rheumatism. In three cases the defect was remedied after informal notice.

### SMALLPOX.

Eight cases of this disease occurred in the district, all during the last four months of the year; all were admitted to the North Staffordshire Joint Smallpox Hospital. There were no deaths. None of the cases had been vaccinated within the previous ten years. No cases occurred among the school population.

### *Administrative Action.*

On account of the occurrence of cases of the disease in neighbouring districts early in the year, certain arrangements detailed in the Ministry's Memorandum of November, 1922 on the steps requisite to be taken by Sanitary Authorities on the occurrence of smallpox were made in March. In the main these consisted in the formulating of an agreement with the Newcastle Borough Hospital for the use of a steam disinfecter for the treatment of the clothing of contacts, (together with the use of a horse ambulance for transport of the clothing,) and in making chickenpox a notifiable disease.

(See also under "Chickenpox," page 18.)



Several intimations were received from Medical Officers of Health of neighbouring districts to the effect that people in this district had been contacts of actual cases, and a large amount of work was entailed by the watching of these contacts. Of those so watched one case only—that of a boy on whose behalf vaccination was refused—developed the disease. As a result of the close observation of this case it was possible to have him removed to hospital on the day that the rash first appeared.

It appears very probable that the other seven cases were all the result of undiscovered contacts of a group of cases of an ambulant form of the disease in a neighbouring district. Of these seven cases five were discovered by general practitioners, and the remaining two were close contacts of the five. Here again it was possible to keep a close watch on these last two; both were removed to hospital on the day of the appearance of the rash, and no further cases occurred as a result of contact with any of the three thus dealt with.

In a few serious cases of chickenpox consultations were held with general practitioners, and in addition a few miscellaneous diseases of the skin were the subjects of similar collaboration.

Vaccination and re-vaccination had been extensively performed in the area in February and March, when the first alarm was raised, but by the time that cases first occurred in this district in September, vaccination was very far from popular, and was even refused by a number of people who had been in immediate contact with severe cases of the disease. The three cases referred to at the end of the last paragraph but one were definite consequences of this refusal. It is singular that several close contacts of severe cases did not contract the disease; the majority of these had been vaccinated in infancy.

No difficulty was experienced in having cases removed to hospital. One man appeared to be glad to go, and his wife, the mother of eleven, fervently expressed the hope that she might benefit by the prolonged rest which would be conferred if she were taken.

In October notices were published giving warning of the penalties to be incurred by persons committing certain actions likely to spread cause of the disease.



### *Clinical Aspect.*

Little difficulty was experienced in diagnosis. Onset was rather severe in a number of cases, and was usually designated "Influenza." The distribution of the rash in all the cases was classical. One of the cases was of a very mild form, and had been going about for some time before it was discovered in a doctor's surgery. Of 35 contacts of this case traced in the district, one only, living in the same house, was found to have a contracted smallpox.

One case only was really severe ; at the time of discovery the rash was nearly confluent.

The conclusions to be drawn from this small epidemic seem to be as follows :—

(1) In spite of the care exercised by the Medical Officers of neighbouring districts in informing one of the tracing of contacts to this area, one case only was discovered by this means.

(2) Circumstances permitted of the close observation of three cases (that developed the disease) where the previous histories as to contact were known, and it may be considered highly satisfactory that as a result of this close observation and consequent immediate removal to hospital, no further cases occurred in the district as a result of secondary cases.

(3) Vaccination (or re-vaccination) was refused by the great majority of contacts. Even immediate contacts failed to take advantage of the protection offered, and although several of these did not contract the disease, such refusal, apart from the disablement and danger occasioned, was the definite cause of considerable expense to the Council. In the event of a widespread epidemic this attitude on the part of the population would assuredly cost the Council a very large sum. The chief objection raised to vaccination was disbelief in its efficacy, but as a result of the cross-examination of several adults it became sufficiently clear that the fear of temporary discomfort was the real reason for refusal, and that this outweighed the practical certainty of personal and communal protection from a disease which may readily prove to be disfiguring and even dangerous.



### INFLUENZA.

Administratively there are practically no means of controlling this disease. It is only along the lines of education in hygiene and by the exercise of common sense in the way of keeping clear of avoidable infection that any improvement in the incidence and fatality of the disease will be achieved. The eleven deaths recorded represent nearly eight per cent. of the total deaths in the district in 1928.

### CHICKENPOX.

There was an epidemic of this disease in the Butt Lane area in February and March, and sporadic cases occurred at Talke Pits. Owing to the presence of smallpox in neighbouring areas at this time, chickenpox, which may resemble smallpox closely, was made notifiable in the district in March for a period of two months, and again on the outbreak of actual smallpox in the district, for a period of six months. With very few exceptions the whole of the cases notified were visited by the Medical Officer of Health, and in addition most of the cases which came to light through the school notifications were seen. No cases of smallpox however were discovered by this means.

### MUMPS.

This disease was prevalent in the Wood Lane and Halmerend areas in March. Scattered cases occurred throughout the rest of the district.

### MEASLES.

No cases were learnt of through school notifications, and there seem to have been very few cases among young children. No deaths were recorded.

### WHCOPING-COUGH.

About twenty cases occurred in the Infant Department of Halmerend School in January. There were no deaths.

### DIARRHOEA.

It is gratifying to note that there was only one death from Infantile Diarrhoea.

Considerable use has again been made of school intimations of disease. Notifications by Head Teachers to the Medical Officer of Health are found to be of great value in connection with the examination of contacts of cases of scarlet fever and of diphtheria, and occasionally they have been of use in securing early action



in this direction when the receipt of the doctor's notification has for any reason been delayed. During the smallpox outbreak school intimations of chickenpox brought to knowledge many cases of the latter disease. On account of the similarity between the two diseases these intimations were of great potential value, as many of the cases were not seen by a doctor and were therefore not notified.

TABLE IV.

Age periods	Smallpox		Scarlet Fever		Diphtheria		Pneumonia		Erysipelas	
	Total Cases notified	Deaths	Total Cases notified	Deaths	Total Cases notified	Deaths	Total Cases notified	Deaths	Total Cases notified	Deaths
Under	...	...	...	...	...	...	...	...	...	...
1 year	...	...	1	0	...	...	9	4	...	...
1 "	...	...	1	0	1	1	5	1	...	...
2 years	...	...	...	...	...	...	7	0	...	...
3 "	...	...	1	0	1	0	...	...	...	...
4 "	...	...	2	0	1	0	2	0	...	...
5 "	2	0	15	0	7	1	8	1	...	...
10 "	...	...	8	0	1	0	3	0	3	0
15 "	1	0	2	0	1	0	4	0	1	0
20 "	4	0	4	0	2	1	4	1	9	0
35 "	...	...	1	0	1	0	3	1	5	0
45 "	1	0	...	...	...	...	4	1	11	0
65 & over	...	...	...	...	...	...	2	0	2	0
Totals	8	0	35	0	15	3	51	9	31	0



TABLE IV—Contd.

Age periods	Puerperal Fever		Puerperal Pyrexia		Acute Anterior Poliomyelitis	
	Total cases notified	Deaths	Total cases notified	Deaths	Total cases notified	Deaths
Under 1 year	...	...	...	...	1	...
1 „	...	...	...	...	...	...
2 years	...	...	...	...	...	...
3 „	...	...	...	...	...	...
4 „	...	...	...	...	...	...
5 „	...	...	...	...	...	...
10 „	...	...	...	...	...	...
15 „	...	...	...	...	...	...
20 „	...	2	8	...	...	...
35 „	...	...	1	...	...	...
45 „	...	...	...	...	...	...
65 & over	...	...	...	...	...	...
	0	2	9	0	1	0

Table V shows the comparative incidence of scarlet fever, diphtheria, and pneumonia during the last 8 years.

TABLE V.

Year	Scarlet Fever		Diphtheria		Pneumonia	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
1921	13	0	16	0	.	.
1922	11	0	13	3	9	8
1923	111	2	10	2	.	.
1924	138	0	41	2	.	.
1925	92	0	24	2	32	11
1926	74	2	10	0	29	8
1927	41	1	21	2	48	8
1928	35	0	15	3	51	9

Table VI shows the case-rate per thousand living for certain infectious diseases in the year 1928.

TABLE VI.

	England & Wales		Audley Urban District
Smallpox	...	...	0.32
Scarlet Fever	...	...	0.53
Diphtheria	...	...	2.31
			0.92



TABLE VI—Contd.

Enteric Fever ...	...	0.09	0.00
Puerperal Fever ...	...	0.06	0.13
Puerperal pyrexia ...	...	0.14	0.59
Erysipelas ...	...	0.42	2.04

TABLE VII.

Notifiable diseases (other than tuberculosis) during the year 1928 (notified cases only.)

Disease	Total cases notified	Cases admitted to hospital	Total deaths
Smallpox ...	8	8	0
Scarlet Fever ...	35	26	0
Diphtheria ...	15	15	3
Pneumonia ...	51	?	9
Enteric Fever (including Paratyphoid)	0	0	0
Erysipelas ...	31	?	0
Anterior poliomyelitis	1	0	0
Ophthalmia neonatorum	4	0	0
Puerperal fever	0	2	2
Puerperal pyrexia	9	0	0
Pemphigus neonatorum	1	0	1
Chickenpox	35	0	0

TABLE VIII. OPHTHALMIA NEONATORUM.

Cases			Vision un- impaired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	At Home	In Hospital				
4	4	0	4	0	0	0



# TABLE IX. TUBERCULOSIS.

New cases and Mortality in 1928.

Age periods	New cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females	Males	Females	Males	Females
0	.	.	.	.	.	.	.	.
1	.	.	2	2	.	.	.	1
5	1	.	2	4	.	.	.	.
10	.	.	.	1	.	.	.	.
15	.	2	.	2	.	2	.	.
20	.	4	.	.	.	1	.	.
25	2	2	.	1	1	.	.	.
35	.	.	.	.	.	.	.	.
45	2	.	.	.	.	1	.	.
55	1	1	.	.	1	1	.	.
65	.	.	.	.	.	.	.	.
Totals	6	9	4	10	2	5	0	1
	<hr/> 15		<hr/> 14		<hr/> 7		<hr/> 1	
	<hr/> 29				<hr/> 8			

One case of tuberculosis meningitis, which had previously been diagnosed as pneumonia, died two days before the notification of tuberculosis was received. The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was thus 12.5 100.

Of the remaining seven cases, one died within two days, one within three weeks, and one within one month of notification. The case that died within two days was known to be old-standing, but medical aid was not summoned until two days before death.

One new case only was by occupation a miner, and this was the only fatal case in this industry that occurred in the district during the year. Since 80% of the occupied males in the district are classified as miners it will be seen that the incidence and mortality of the disease in this class are both very small.

There is no indication of excessive incidence or mortality in other occupations.



Although the numbers dealt with are small it is satisfactory to note that an increase in the number of notifications is accompanied by a slight fall in the number of deaths. (See table X below.) It is only on the lines of increasing numbers of *early* notifications that our control of the disease will become effective, and in this connection the remarks made in the 1927 Report seem to be of sufficient importance to be repeated:—

“Notification of cases seems on the whole to have been satisfactory, but it is certain that some cases, for one reason or another, do not present themselves for diagnosis until it is too late for the treatment provided to have its greatest beneficial effect. The vital importance of early diagnosis is not nearly widely enough realised. Cases who feel increasingly sure that they are suffering from the disease hesitate to have sentence passed on them, disregarding the fact that they are thereby lessening the chance of reprieve. Those that are diagnosed early often do extremely well, and in addition, as soon as the case becomes known steps may be taken at once to give instruction as to the precautions to be taken in order to check the spread of the disease to those who are in contact with the case.”

TABLE X.

New Cases				Deaths		
	Pulmonary	Non-pulmonary	Total	Pulmonary	Non-pulmonary	Total
1925	28	30	58	10	2	12
1926	43	35	78	14	5	19
1927	11	13	24	7	3	10
1928	15	14	29	7	1	8

Proportion of new cases  
to deaths

1925	100:21
1926	100:24
1927	100:42
1928	100:28

Death-rate from  
all forms

.79 per 1000
1.30 per 1000
0.66 per 1000
0.53 per 1000



TABLE XI.

At the end of the years mentioned the numbers of cases on the Register were as follows:—

	Pulmonary		Non-pulmonary	
	Males	Females	Males	Females
1926	86	95	55	50
1927	82	96	62	49
1928	84	92	60	55

A large proportion of these are cases of quiescent or arrested disease. Under the Ministry of Health's regulations pulmonary cases cannot be removed from the Register for five years, and non-pulmonary for three years after all signs and symptoms have disappeared ; it is therefore probable that many of these cases are in reality cured, but no ready means are available of ascertaining that cases have been free from symptoms and signs during these periods.

Public Health (Prevention of Tuberculosis) Regulations, 1925.  
Public Health Act, 1925, Section 62.

No action was taken during the year.

#### HOUSING OF CASES OF TUBERCULOSIS.

Eleven cases of defective sanitation were reported by Health Visitors as a result of their investigations of the environment of patients under the County Council Tuberculosis Scheme. Of these nine were dealt with during the year, and in six other cases standing over from 1927 defects were remedied.



TABLE XII.—*Birth-rate, Death-rate, and Analysis of Mortality during the year 1928.*

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1928, but those for the towns have been calculated on populations estimated to the middle of 1927. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.

	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 BIRTHS		
	Live Births	Still-births	All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under two years)	Total Deaths under One Year
England and Wales	16.7	0.70	11.7	0.01	0.00	0.11	0.01	0.07	0.06	0.19	0.53	7.0	65
107 County Boroughs & Great Towns, including London	16.9	0.70	11.6	0.01	0.00	0.15	0.02	0.09	0.09	0.17	0.48	9.6	70
156 Smaller Towns (1921 Adjusted Populations 20,000-50,000)	16.6	0.73	10.6	0.01	0.00	0.08	0.01	0.06	0.08	0.21	0.41	4.8	60
London	15.9	0.53	11.6	0.01	0.00	0.30	0.02	0.09	0.09	0.13	0.55	10.2	67
Audley Urban District	16.3	0.79	9.4	0.00	0.00	0.00	0.00	0.00	0.20	0.73	0.40	4.0	69



TABLE X111.  
Maternity and Infant Welfare Work during the year 1928.

HEALTH VISITORS.

Area	FIRST VISITS			RE-VISITS			TOTAL VISITS			No. of cases of insanitary con- ditions reported to Medical Officer of Health
	Expectant Mothers	Children		Expectant Mothers	Children		Expectant Mothers	Children		
		Under 1 year	between 1 & 5 years		Under 1 year	Between 1 & 5 years		Under 1 year	Between 1 & 5 years	
Audley	15	70	3	13	633	1145	28	703	1148	7
Halmerend	45	104	34	33	755	2224	78	859	2258	15
Talke*	18	83	9	25	555	916	43	638	925	7
Totals	78	257	46	71	1943	4285	149	2200	4331	29

\*No Health Visitor available after July.



TABLE XIII—Contd.

## WELFARE AND ANTE-NATAL CENTRES.

Area	Number of Sessions during year	Total number of Attendances			No. of Cases Examined by Doctor
		Expectant Mothers	Children		
			Under 1 year	Between 1 & 5 years	
Audley	48	4	365	369	660
Talke	49	*	379	754	605
Totals	97	4	744	1123	1265

\*Not an Ante-natal Centre

The assistance of the voluntary workers at the Welfare Centres has been greatly appreciated.

## HOUSING IN RELATION TO MATERNITY AND INFANT WELFARE.

Particular attention has again been given to the question of housing conditions where there are expectant mothers and infants. Under the provisions of the Scheme of the County Council (as local supervising authority) County Council Health Visitors report cases of defective sanitation to the local Medical Officer of Health. During 1928 19 such cases were reported, and as a result six were remedied. In addition three cases standing over from 1927 were dealt with satisfactorily.



TABLE XIV.  
CAUSES OF DEATH IN AUDLEY URBAN DISTRICT, 1928.

	M	F
All causes ... ..	71	72
Enteric Fever ... ..	—	—
Smallpox ... ..	—	—
Measles ... ..	—	—
Scarlet Fever ... ..	—	—
Whooping Cough ... ..	—	—
Diphtheria ... ..	1	2
Influenza ... ..	6	5
Encephalitis lethargica ... ..	—	1
Meningococcal Meningitis ... ..	—	—
Tuberculosis of respiratory system ... ..	2	5
Other tuberculosis diseases ... ..	—	1
Cancer, malignant disease ... ..	8	10
Rheumatic Fever ... ..	1	—
Diabetes ... ..	—	3
Cerebral hæmorrhage, etc. ... ..	—	1
Heart disease ... ..	8	9
Arterio-sclerosis ... ..	11	2
Bronchitis ... ..	2	2
Pneumonia (all forms) ... ..	6	—
Other respiratory diseases ... ..	—	1
Ulcer of stomach or duodenum ... ..	—	1
Diarrhoea (under two years) ... ..	1	—
Appendicitis and typhlitis ... ..	—	1
Cirrhosis of liver ... ..	—	—
Acute and chronic nephritis ... ..	1	4
Puerperal sepsis ... ..	—	2
Other accidents & diseases of pregnancy, etc. ... ..	—	1
Congenital debility & malformation, premature birth ... ..	4	3
Suicide ... ..	—	—
Other deaths from violence ... ..	5	1
Other defined diseases ... ..	15	17
Causes ill-defined or unknown ... ..	—	—

NOTE—The classification of deaths given above is that supplied by the Registrar-General, who states that the classification of some deaths is modified in the light of fuller information obtained from the certifying practitioner in response to special inquiries. This source of discrepancy between the return of the Registrar-General and the figures given in the body of the Report must be borne in mind in regard to the causes of death dealt with in the above table.



ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH ON  
THE ADMINISTRATION OF THE FACTORY AND WORKSHOP  
Act, 1901.

During the year 28 inspections of Factories and 91 inspections of Workshops were made by the Sanitary Inspector.

In no case were defects found.



ANNUAL REPORT OF THE HISTORICAL COMMISSION  
THE PRESIDENT OF THE UNITED STATES  
ACT, 1891

During the year 1891 the Commission of Historical Research  
has been engaged in the study of the history of the United States

and has been able to secure the following results: