

[Report 1953] / Medical Officer of Health, Ruthin Borough.

Contributors

Ruthin Town (Clwyd, Wales). Borough Council.

Publication/Creation

1953

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RUTHIN BOROUGH COUNCIL

ANNUAL
HEALTH REPORT
1953



Medical Officer of Health

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Sanitary Inspector

T. G. EVANS

(Sanitary Inspector's Certificate of the Royal Sanitary Institute
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Town Hall, Ruthin. Tel. No. Ruthin 155.



TO THE MAYOR AND MEMBERS OF THE
RUTHIN BOROUGH COUNCIL

Mr. Mayor, Aldermen and Councillors.

I have pleasure in presenting to you the Annual Report on the health of the Borough for the year 1953. The report is made on the lines suggested in the Welsh Board of Health Memorandum with additions according to Circular 42/51 (Wales).

Matters dealing with the health of the Borough are dealt with by the General Purposes Committee and the Housing Committee. The Chairmen of these Committees during the year were as follows:—

Mayor of the Borough:—

January—May 1953:—

June—December 1953:—Alderman R. E. Beech.

Chairman of the Finance and General Purposes Committee:—

January—May 1953:—Councillor O. M. Williams.

June—December 1953:—Councillor G. Ross Thomas.

Chairman of the Housing Committee:—

January—May 1953:—Councillor J. Ll. Roberts.

June—December 1953:—Councillor R. James Jones.

The time of the Medical Officer of Health is divided between the five authorities in the Western No. 2 Health Area for 50% of the time. The other 50% is taken by duties as Assistant County Medical Officer of Health and these duties consist of medical examination of school children, examination of mentally and physically handicapped pupils, attendance at Infant Welfare and Ante-Natal Clinics, immunisation of school children against diphtheria, immunisation of babies against whooping cough and diphtheria, and the vaccination of babies against smallpox. Also any other work allocated by the County Medical Officer of Health.

The work of the Sanitary Inspector, who is also the Surveyor, consists of:—

Housing Inspector and Manager;

Meat Inspector at Ministry of Food Slaughter-house
serving Ruthin Borough, Ruthin Rural District and
Denbigh Borough;

Rodent Officer;

Water Engineer;

Highways Surveyor.

This year, in order to make the reading of the report easier, both the Medical Officer's and the Sanitary Inspector's reports have been combined, so that matters relating to the one subject have been placed together.

Both the Sanitary Inspector and myself would like to express our appreciation and thanks for the co-operation and assistance given to us at all times by the Chairmen of the various Committees, and also the other Officials and Office Staff. I would also like to express my personal thanks to the Sanitary Inspector who has always been ready to give me all the help that I have asked for.

I remain,

Your obedient Servant,

M. JONES ROBERTS,

Medical Officer of Health.

HOUSING

During the year, the building of houses on the Haulfryn Estate continued. Altogether it is planned to build 82 houses on this Estate. Of these, 31 are the two-bedroomed type, and 51 are the three-bedroomed type. By the 31st December 1953, nine of these houses were occupied. The remainder will be occupied during 1954. The completion of these houses will greatly alleviate the housing problem in the Borough.

The Land Army Hostel has been converted into 7 flats. These have served a very useful purpose. Preference in the letting of these has been given to aged couples, widows, and childless middle-aged couples.

The Sanitary Inspector reports :—

Number of visits to Houses — 104.

Housing conditions in the Borough generally are fairly good. The number of houses below standard are not likely to exceed 150 and it is proposed to carry out a survey during 1954.

Notices were served under Section II of the Housing Act, 1936, and in all cases the Council accepted the proposals submitted.

SCHOOL BUILDINGS

The condition of the School buildings in the Borough are more or less unchanged. The overcrowding will be alleviated at the beginning of 1954 when the children who are eleven years of age and over will be transferred to the Brynhyfryd Secondary School.

During 1954 the Sanitary Inspector and I hope to visit all the Schools in the Borough and make a full report on them again for transmission to the Principal School Medical Officer at Wrexham.

SEWAGE DISPOSAL

The sewage disposal of the Borough continues to be by irrigation on the Council's Sewage Farm.

Strict supervision is required if complaints from the Dee and Clwyd River Board concerning pollution are to be avoided.

The history of the Ruthin Borough proposals which were not proceeded with was that in 1946 your Consulting Engineers

put forward a scheme for new trunk sewers estimated to cost £25,000 and new disposal plant and treatment works estimated to cost £20,000, a total of £45,000. This latter figure, it is understood, provided for a pump to "lift" the sewage approximately 12 feet at a point near the present main outfall to permit it to gravitate through the treatment works which would be sited across the footbridge near the present main outfall.

Application for a grant under the Rural Water Supplies and Sewage Act 1944 was made to the Ministry in September 1948 (by which time the cost of the scheme had increased from the quoted £45,000 to £60,000). The scheme was approved in principle by the Denbighshire County Council who were prepared to make a grant towards the cost equivalent to the loan charges on one-fifth of the final approved cost of the scheme, less any Government grant received.

In April 1949 the then Welsh Board of Health stated that they were prepared to consider the scheme if the size of the main sewer was reduced in certain sections and the treatment works were modified to serve a population of 4,000 against the original 7,000. These adjustments would bring the cost down to a figure of £45,000 (1949).

In December 1949, and again more recently, the Department has ruled that the Scheme was not eligible for grant under the Rural Water Supply and Sewage Act 1944, but that they were prepared to hold a Public Enquiry into the Scheme on a Loan Consent Basis.

The whole scheme may not commend itself to the Council in view of the cost, but it is for consideration whether the pumping plant and disposal works could not be proceeded with (assuming all sewer outfalls can be converged at a point near the footbridge on the sewage farm).

The Sanitary Inspector reports as follows:—

The disposal of sewage at the Sewage Farm has not caused any serious complaint from the Rivers Board during the year. Close supervision is exercised and periodic flooding of fields is carried out.

WATER SUPPLIES

Samples of water sent for bacteriological examination have all been returned as Ministry of Health Classification—Class I. Highly Satisfactory.

The Sample sent for chemical analysis showed the fluorine content to be low—0.15 parts per million. It is thought that the amount of fluorine in the water supply has an effect on the teeth of children. The County Medical Officer of Health is hoping to investigate this matter in regards to the result of the examination of children's teeth by the School Dental Officers.

The Sanitary Inspector reports as follows on the water supply during the year.

The Water supply has not been satisfactory during the year, and in September water was cut off during the hours of 8 p.m. to 7 a.m.

Our supply during the early part of September dropped to 48,120 gallons per 24 hours and the emergency supply from the Birkenhead Corporation was reduced to 2,000 gallons per hour. The daily consumption was high, and although every effort was made to check waste, rationing was unavoidable.

It must be stressed that unless a supply is guaranteed from Birkenhead, or some other source, it is likely that rationing of water during the summer months of 1954 will again occur.

RODENT CONTROL

The Council employ a part-time rodent operator, and during the year treatment has been carried out on Sewers, Refuse Tip and various premises. No major problem has arisen during the year.

GENERAL STATISTICS OF THE BOROUGH

Area of the Borough	2,016 Acres.
Registrar General's estimated population (mid-1953)	3,598
Number of inhabited houses	1,083
Rateable Value	£21,966 (1.4 53)
Sum represented by a penny rate	£84 (1.4.53)

DEATHS

Comparability Factor 0.85

The number of deaths registered in the Borough during 1953 were 41 (22 Males and 19 Females) compared with 47 (20 Males and 27 Females) during 1952.

	<i>England and Wales</i>		
	1953	1952	1953
Crude death rate (per 1,000 population)	15.5	13.1	11.4
Corrected death rate (per 1,000 population)...	—	11.1	9.69
Still-birth rate (per 1,000 population)	0.35	0.83	0.56
Maternal Mortality rate	0.76	—	—
Infant Mortality rate	26.8	18.5	—

The causes of death are shown in the following table with the number of deaths for 1952 shown for comparison:—

	1952	Total.	1953	
	Total.		Males.	Females.
Tuberculosis—Respiratory	—	—	—	—
Tuberculosis—Other	—	—	—	—
Syphilitic Disease	—	—	—	—
Diphtheria	—	—	—	—
Whooping Cough	—	—	—	—
Meningococcal Infections	—	—	—	—
Poliomyelitis	—	—	—	—
Measles	—	—	—	—
Other infective and parasitic diseases	—	—	—	—
Malignant Diseases—Stomach	1	—	—	—
Lungs, etc.	—	1	1	—
Breast	—	—	—	—
Uterus	—	1	—	1
Other	5	1	—	1
	6	3	1	2
Leukaemia	—	1	1	—
Diabetes	—	—	—	—
Vascular lesions of the nervous system	13	7	3	4
Coronary Diseases	4	6	4	2
Hypertension with heart disease	—	—	—	—
Other heart diseases	3	12	5	7
Other circulatory diseases	4	1	1	—
Influenza	1	—	—	—
Pneumonia	2	—	—	—
Bronchitis	4	2	1	1
Other respiratory diseases	—	—	—	—
Ulcer of stomach, etc.	1	—	—	—
Gastritis, Diarrhoea, etc.	—	1	—	1
Nephritis and Nephrosis	1	—	—	—
Prostatic Hyperplasia	2	2	2	—
Maternal Causes	—	—	—	—
Congenital Malformations	—	—	—	—
Other defined and ill-defined diseases	5	3	1	2
Motor Vehicle Accidents	—	1	1	—
All other accidents	1	1	1	—
Suicide	—	1	1	—
Homicide	—	—	—	—
ALL CAUSES	47	41	22	19

The deaths occurred in the following age groups:—

Under 1 year	Nil.
1—10 years	Nil.
10—20 years	Nil.
20—30 years	1 (Male).
30—40 years	1 (Female).
40—50 years	1 (Male).
50—60 years	5 (3 Males and 2 Females).
60—70 years	7 (2 Males and 5 Females).
70—80 years	11 (8 Males and 3 Females).
80—90 years	13 (6 Males and 7 Females).
90 years and over	2 (1 Male and 1 Female).

Total 41

Of the 41 deaths registered during 1953, 33 deaths occurred in people aged 60 years and over and 8 in persons under the age of 60 years.

Twenty-six deaths were due to lesions of the heart and vascular system.

Three of the deaths were due to cancer and this figure compares with six deaths from cancer during 1952. One of these deaths was due to cancer of the lung.

Two of the deaths were caused by bronchitis. There were no deaths due to any of the infectious diseases.

One death was caused by a motor vehicle accident. The other accidental death in a person aged 84 years was caused by a fall in the home causing a fractured femur. Accidents in the home are becoming increasingly more frequent and everything should be done to avoid such accidents, especially where there are elderly people and children in the home. Stair covering should be properly held in place and the floors should not be too highly polished and have slippery mats on them. A good handrail on the stairs is essential and care should be taken that shoes and slippers fit properly. Any foot defects should be attended to.

It is gratifying to note that there were no maternal deaths again this year, giving a maternal mortality rate of Nil.

INFANT DEATHS

There were no Infant Deaths in the Borough during the year, giving an infant mortality rate of Nil compared with 18.5 in 1952.

There were 2 still-births registered during 1953, giving a still-birth rate of 0.55 compared with a rate of 0.83 in 1952.

The infant death rate is Nil during 1953 compared with 18.5 in 1952 and 26.8 for England and Wales. There were no deaths in infants under the age of 1 year compared with one during 1952, and these figures should be considered rather than the actual rate, which is misleading because of the small number of births. The actual number of births registered during 1953 was 44 compared with 54 in 1952.

The still-birth rate has been reduced to 0.55 during 1953 compared with 0.83 in 1952. Again it is easier to compare the actual number of still-births which numbered 2 in 1953 and 3 in 1952.

BIRTHS

Comparability Factor 1.03

The number of births registered in the Borough during 1953 were 44, being 25 Males and 19 Females. These were classified as follows:—

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Legitimate	24	19	43
Illegitimate	1	—	1
	25	19	44

*England and
Wales*

	1953	1952	1953
Birth rate per 1,000 population (crude) ...	15.5	15.1	12.2
Birth rate per 1,000 population (corrected)	—	15.6	12.6

INFECTIOUS DISEASES

The following table shows the number of cases of Infectious Diseases notified in the Borough during the year arranged in the various age groups and the figures for 1952 are given for comparison.

<i>Notifiable Disease.</i>	<i>At Ages</i>										
	<i>1952 Total.</i>	<i>1953 Total.</i>	<i>Under 1 year.</i>	<i>1—5 years.</i>	<i>6—15 years.</i>	<i>16—25 years.</i>	<i>26—45 years.</i>	<i>46—65 years.</i>	<i>65 years and over.</i>	<i>Ages unknown.</i>	<i>Number Admitted to Hospital.</i>
Erysipelas	—	1	—	—	—	—	—	—	1	—	—
Scarlet Fever	1	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis ...	2	8	—	1	—	4	1	1	—	1	—
Other form of Tuberculosis	—	1	—	1	—	—	—	—	—	—	—
Pneumonia	4	7	—	2	—	—	2	1	2	—	2
Measles	—	14	—	8	4	—	1	1	—	—	—
Whooping Cough	16	3	—	2	1	—	—	—	—	—	1
Totals	23	34	—	14	5	4	4	3	3	1	3

There were 34 cases of Infectious Diseases notified during 1953 compared with 23 cases in 1952.

The number of cases of Pneumonia notified were 7 during 1953 compared with 4 during 1952.

No cases of Measles were notified in 1952, whereas 14 cases were notified in 1953. In my opinion there were more than 14 cases of Measles in the Borough during 1953, as the history of babies obtained from the mothers attending the Infant Welfare Clinic was very suggestive. As the cases were mild, the Doctor

was not called in and therefore cases remained un-notified. The same thing applies to Whooping Cough. Only three cases were notified during the year compared with 16 cases the previous year, and I do not think that immunisation alone has accounted for the fall in the number of cases, although one hopes that immunisation has helped to prevent cases. Although publicity has been given to the fact that the head of the household should notify cases of Infectious Diseases under Section 144 of the Public Health Act 1936, this is rarely done.

One case of Chicken Pox and two cases of German Measles were notified by the Head Teachers of various schools. Although these are infectious diseases, they are not notifiable. One case of Whooping Cough was also notified by a Head Teacher.

PREVENTION OF INFECTIOUS DISEASES

IMMUNISATION

Immunisation against whooping cough and diphtheria is carried out at the Clinics and by the patient's own Doctor. It should again be stressed that it is as important as ever to have babies immunised against diphtheria, although no cases have occurred in the area for some time. The greater the number of children immunised, the better the immunity in the area. A child not having received the injection is in much greater danger now than formerly. The reason for this being that the immunised children carry the germ in their throats, but they will not suffer from the disease, whilst the un-immunised contacts will pick up the germ and become so ill that paralysis and death may ensue. The fact that so few cases are seen these days may defer the diagnosis until it is too late.

The following table shows how immunisation has reduced the number of cases of diphtheria and the deaths from this disease in England and Wales during recent years. The figures for Wales are those shown in parenthesis.

<i>Year.</i>	<i>Deaths.</i>	<i>Corrected Notifications.</i>
1944	934 (77)	23,199 (2,213)
1945	722 (57)	18,596 (1,411)
1946	472 (41)	11,986 (1,028)
1947	244 (19)	5,609 (441)
1948	156 (7)	3,575 (190)
1949	84 (1)	1,890 (102)
1950	49 (Nil)	962 (62)
1951	33 (1)	664 (53)
1952	32 (3)	376 (39)
1953	24* (Nil)*	240* (20)*

* *Provisional.*

Children are immunised soon after they have reached the age of 6 months and booster doses are given between the ages of 4 and 5 years, or when the child goes to school. Booster doses given at the age of 10 years at School have now been discontinued, but may be recommenced at a later date.

The number of children immunised during the year were as follows :—

Number immunised against Diphtheria :—	
Under 5 years	4
Over 5 years	Nil
Booster doses	41
Number immunised against Whooping Cough :—	
Under 5 years	Nil
Over 5 years	Nil
Number given combined injections against Diphtheria and Whooping Cough :—	
Under 5 years	35
Over 5 years	36

Most mothers are now having the combined whooping cough and diphtheria injection for their babies as this means only 3 injections instead of 5 injections if given separately.

VACCINATION

It is still very essential for all children to be vaccinated against smallpox during infancy. This service is given at the Clinics and by the patient's own Doctor, and all mothers should take advantage of this for their babies.

The number of vaccinations carried out during the year were as follows :—

Primary Vaccinations	48
Re-Vaccinations	7

The re-vaccinations were in respect of persons going abroad.

TUBERCULOSIS

Eight cases of Pulmonary Tuberculosis and 1 case of non-Pulmonary Tuberculosis were notified during the year compared with 2 cases of Pulmonary Tuberculosis notified in 1952. Apart from these, 2 further cases of Pulmonary Tuberculosis (both Females) were transferred to the Register during the year, one case from Stockport and one case returned to the Borough after having resided outside the area for a short time.

During the year, two cases of Pulmonary Tuberculosis (both Females) were admitted to Sanatoria.

Information that a patient has been admitted to Hospital is

received, but whether every case admitted to Hospital is notified, it is difficult to tell. This is a pity, as the opportunity for disinfection is missed.

All cases of tuberculosis notified during the year were visited. Immediately notification is received that a patient has been admitted to Hospital, disinfection is carried out. The Tuberculosis Health Visitor visits all patients suffering from tuberculosis and the examination of contacts, etc., is arranged.

It is very necessary for all contacts of cases of tuberculosis to be examined at regular intervals, especially when the housing conditions are such that it is difficult to isolate a patient. The Tuberculosis Health Visitor is able to arrange for assistance in various forms to be given to those in need of it. She is also doing a great deal to help the patients themselves, especially in educating them regarding the prevention of the spread of the disease. A local after-care committee in the Borough would serve a very useful purpose.

A note is made of all child contacts and sent to the Principal School Medical Officer with a request that a note be made on the child's School Medical Inspection Card. In this way the children can be brought up for examination when the Medical Officer visits the Schools for this purpose.

The number of cases of Tuberculosis on the register for the Borough at the beginning and end of the year were as follows:—

	<i>Pulmonary.</i>		<i>Non-Pulmonary.</i>	
	<i>Males.</i>	<i>Females.</i>	<i>Males.</i>	<i>Females.</i>
Beginning of January 1953	12	11	3	1
End of December 1953	12	15	2	—

B.C.G. VACCINATION OF SCHOOL CHILDREN

A circular has been issued by the Ministry of Health on this subject. I contacted the County Medical Officer of Health regarding the matter and he stated that the scheme will involve careful planning and he was not then in a position to say whether a comprehensive County Scheme would be acceptable to the County Council.

MASS RADIOGRAPHY UNIT

The Mass Radiography Unit visited the Borough during the month of April and the following Table gives the number of attendances in the various age groups:—

MASS RADIOGRAPHY SERVICE

Details of Mass Radiography Survey of Ruthin General Population and School Children

— May 1953

	Under 15		15—24		25—34		35—44		45—59		60 & Over		Totals	
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
Grand Total.	51	53	84	179	82	80	87	83	79	90	33	19	416	504
Total Number of persons examined. Normal and Abnormal.	1	1	1	3	2	3	3	6	5	6	6	8	18	27
Total number found to be Abnormal.	45 or 4.89%													
Classification of Abnormal Cases :—	Nil													
(a) Definite Pulmonary Tuberculosis	4 or 0.44%													
(b) Needing further Observation for Pulmonary Tuberculosis	41 or 4.45%													
(c) Other Abnormalities of the Chest.														

The following table shows the details of abnormalities found as a result of the visit of the Mass Radiography Unit.

	<i>Total.</i>	<i>Males.</i>	<i>Females.</i>
Bronchitis and Emphysema	15	8	7
Acquired Heart Disease	9	3	6
Bony Abnormality	8	2	6
Healed Post Primary P.T.	3	1	2
Pleural Thickening	2	1	1
Pneumociniosis	1	1	—
Basal Fibrosis	1	—	1
Bronchiectasis	1	—	1
Healed Primary P.T.	1	—	1
Totals	41	16	25

The attendance at the Mass Radiography Unit was very disappointing. The population of Ruthin is 3,598 and only 920 (including School Children) attended for X-ray examination. Everyone over 14 years of age should attend for examination, as the earlier a case is discovered, and with the new drugs now available for treatment, the earlier will be the cure and the patient will be able to return to work much sooner.

Some people appear to think that one examination by the Mass Radiography Unit is sufficient during a life-time, but this is not so. Everyone over 14 years of age should take advantage of this service and be examined at every visit of the Unit.

DISINFECTION OF BEDDING, &c.

Difficulty has been experienced in some areas regarding the disinfection of clothing, bedding, etc., following a case of infectious disease or the removal of patients suffering from tuberculosis to Hospital. Arrangements have now been made to have this work carried out in the disinfector at the Social Welfare Establishment at Ruthin. The charge of 7/6d. will be made for every disinfector load.

PUBLIC HEALTH (INFECTIOUS DISEASES) REGULATIONS, 1953

The Public Health (Infectious Diseases) Regulations, 1953, now supersede the Public Health (Infectious Diseases) Regulations, 1927, and came into operation on the 1st April 1953.

These Regulations differ from the others in some important respects concerning the prevention of food poisoning. They apply to typhoid fever, paratyphoid fever, or other salmonella

infections, dysentery and staphylococcal infection likely to cause food poisoning.

Under the 1927 Regulations the steps prescribed could only be taken in relation to a person suffering from the disease in question, and for the purpose of preventing such a person from continuing to work in an occupation connected with the preparation and handling of food and drink. The new regulations go further. They provide for action to be taken not only as regards a person suffering from the disease in question, but also a person shown to be a carrier of the disease, and a person in either class may now be prevented not only from continuing to work in an occupation connected with food or drink, but also from entering such an occupation. Under the 1927 Regulations, again, the prescribed steps concerned could not be taken until the Medical Officer of Health had reported the case concerned to the local authority. In the new regulations, while the same general principle is maintained (because action may involve the local authority in paying compensation under Section 278 (1) of the Public Health Act 1936), there is provision to enable a local authority to give its Medical Officer of Health such authorisation as will permit him to take the prescribed action in a particular case without waiting to report it—though he is required to report it at the earliest opportunity—if in his judgment this action needs to be taken as a matter of immediate urgency to prevent the spread of infection.

The Sanitary Inspector reports as follows:—

Number of visits paid regarding Infectious Diseases	12
Number of visits paid regarding cases of Tuberculosis ...	5
Disinfection of rooms, bedding, etc.	5

GENERAL PROVISIONS OF HEALTH SERVICES IN THE BOROUGH

LABORATORY SERVICES

The Public Health Laboratory is at Conway and specimens are sent there for bacteriological examination and diagnosis. Water, milk and ice-cream samples are also sent there for examination.

AMBULANCE SERVICES

The Ambulance Service is controlled by the County Medical Officer of Health.

There are five Ambulance Stations in the Western No. 2 Area. These are situated at Denbigh, Ruthin, Llangernyw, Llanrwst and Cerrig-y-Drudion, and there is one ambulance at each station, thus making a total of five for the area. Each station is manned by voluntary personnel. To supplement the ambulances, use is made of voluntary drivers of the W.V.S. Hospital Car Service and local taxi proprietors for the conveyance of sitting cases. Ambulances for the conveyance of infectious cases are sent from the hospitals concerned at Wrexham and Colwyn Bay.

The following is given for the information of the Council. These figures of cases conveyed by the various ambulances and the mileage is for the year commencing 1st December 1952 and ending 30th November 1953.

<i>Name of Ambulance.</i>	<i>Area Served.</i>	<i>No. of cases conveyed.</i>	<i>Total Mileage.</i>
Cerrig-y-Drudion.	Upper Hiraethog.	63	3,385
Denbigh.	Borough of Denbigh, Parts of Aled R.D. and Ruthin R.D.	318	8,490
Llangernyw.	Llangernyw, Gwytherin, Pandy Tudur and parts of Eglwysbach.	137	5,127
Llanrwst.	Llanrwst and District.	95	4,241
Ruthin.	Ruthin Borough and Ruthin Rural District.	301	9,712

CASES CONVEYED BY SITTING CASE CARS

<i>Period.</i>	<i>No. of Journeys.</i>	<i>No. of Cases.</i>	<i>Mileage.</i>
1952 December	186	426	7,685
1953 January	182	428	8,218
February	162	377	7,456
March	204	508	8,518
April	145	358	6,144
May	127	322	5,715
June	206	413	7,924
July	215	573	8,836
August	129	278	5,652
September	227	505	8,391
October	183	428	7,781
November	202	506	8,046
Totals	2,168	5,122	90,366

MENTAL HEALTH SERVICE

A full report on this Service will be given in the Annual Report of the County Medical Officer of Health.

ANTE-NATAL CLINICS

The Ante-Natal Clinic held at Ruthin was discontinued from the beginning of the year due to poor attendances. Patients may attend the Clinics held at Denbigh and do attend the Consultant Clinic there. If there were suitable Clinic premises for this purpose at Ruthin, cases could be seen during the Infant Welfare Clinic sessions, but this is not possible in the present premises.

INFANT WELFARE CLINICS

Until the end of October, this Clinic was held on the first and third Tuesday each month, but as and from the beginning of November it has been held every Tuesday afternoon with the Assistant County Medical Officer attending at each session. Babies from the Rural District attend this Clinic as well as babies from the Borough. Good use is made of this service as can be seen by the attendance figures shown below:—

1st Visits	85
Re-Visits	1,101

The Clinic is held at the Baptist Chapel Schoolroom, Park Road, Ruthin. These premises have served a useful purpose, but I feel that premises to be used for Clinic purposes only are essential in Ruthin as in other places such as Denbigh, Llanrwst and Abergele. A town like Ruthin should have Clinic premises used for medical purposes only. The Clinic would be used for the examination of staff or applicants for posts with the County Council, school teachers, school canteen workers, etc. Also minor ailments and physically or mentally handicapped pupils could be examined in good surroundings. Another useful Clinic would be a Dental Clinic where expectant mothers and toddlers could receive treatment and the school children could receive treatment under ideal conditions instead of in the schools as at present.

DENTAL CLINICS

An assistant Dental Officer for the County was appointed towards the end of the year and he attends Clinics at Denbigh for the examination of toddlers and expectant mothers and

treatment is carried out there if required. If there were good Clinic premises in Ruthin, perhaps this service could be given to residents of the Rural District as well as to residents of the Borough, as it is done in other areas.

ORTHOPAEDIC CLINICS

Orthopaedic Clinics are held fortnightly at Denbigh, and the Surgeons attend once every three months. Clinics are also held at the Hospital at Rhyl where the Surgeon attends weekly.

VENEREAL DISEASES

These Clinics are held at Llandudno, Chester and Bangor.

TUBERCULOSIS CLINICS

These Clinics are held at Denbigh, Wrexham and Rhyl.

NURSING SERVICES

The area is served by one Health Visitor who also covers part of the Ruthin Rural District and Hiraethog Rural District. She attends at the Clinics and carries out domicilliary visits. The Health Visitor is also the School Nurse.

The Tuberculosis Health Visitor working in the Borough also covers the Eastern half of the County and parts of Ruthin Rural District.

There is one midwife in the Borough who is a Queen's Sister and she also does home nursing.

HOME HELP SERVICE

The number of Home Helps in the Borough is 2.

CARE OF THE AGED

There is a Derby and Joan Club in the Borough which is very prosperous. The 100th member was enrolled at the end of the year. Here, the older people meet for tea and greatly enjoy meeting one another. Concerts, talks, etc., are arranged for their entertainment.

New Homes for the Aged have been opened in some places, but even though these Homes are ideally situated in the Country, are beautifully and comfortably furnished and the residents are well cared for and made to feel at home, somehow one cannot but feel that these old people would rather have more privacy, that is, their own small sittingroom and bedroom.

Also, it would be easier for them to live in a town or village where they could see and meet younger people, do their own personal shopping, etc. In fact, bungalows or flatlets in a large house in the town would be far better.

There are several aged persons in the Borough—both married couples and single persons—who need smaller and more suitable premises, and I would like to see a small community or bungalows built for the purpose. Such bungalows need not be elaborate affairs. A bedroom and sittingroom are essential, with a small kitchenette and a coal store under cover. Bathrooms need not be elaborate, hip-baths and foot-bath are more useful than large baths as old people find it difficult to get in and out of a bath without help. A house could be built, or a large flat provided above the bungalows, and set aside for a Caretaker or Home Help to care for the aged residents, help them with their housework and shopping, especially during illness or the very cold weather.

The aged living at the Social Welfare Establishment at Ruthin are lucky as they are able to do their shopping in the town and meet various friends for a chat and go for walks. In my opinion, these people are happier because of this than those in Homes for the Aged which are situated in a country area a few miles from a village or town.

NATIONAL ASSISTANCE ACT, 1948

SECTION 47

One aged person was detained at the Ruthin Social Welfare Establishment on a Court Order granted under this Act. Action was first taken in 1951, as he was aged and not able to give himself the proper care and attention required. Although his home conditions were not insanitary—he lived in a Council house—the house had become very neglected as there was no one to care for him. The circumstances at the house have been such that it was not considered advisable to let him return home. Application was made every three months to the Magistrates' Court for the extension of the period of the Order and this was granted until he died at the age of 76 years at the Ruthin Hospital.

Several aged persons were visited during the year, but no action was taken in respect of these persons under Section 47 of this Act. In one case, it was thought that it would be necessary to take action, but after several visits she went to the

Social Welfare Establishment voluntarily, where she has settled down well and is very happy.

SECTION 50

There were no burials during the year under this Section of the National Assistance Act 1948.

CLEAN FOOD CAMPAIGN

Local Authorities have been asked to play a major part in this Campaign throughout the whole Country. The number of cases of food poisoning that have been notified is alarming. If every case were reported, the number of people who have suffered from food poisoning would have reached a very large proportion indeed.

Suggestions for carrying out this Campaign were made to the Council at the end of the year. Stress is given to the fact that food must be prepared and served in a hygienic way both at the place where the customer can see and where the customer cannot see. The general public too can assist in this work by refusing foods that are not hygienically served to them. Any complaints of irregularities reported to the Sanitary Inspector or myself will be treated confidentially and we will gladly deal with them.

All cooked foods sold ready for consumption, e.g. cooked meats, pies, cakes, etc., should not be handled except with suitable clean tongs. Even if the salesman's hands look scrupulously clean, there may be a danger if the assistant has not washed his hands after using the toilet. Members of the public should demand this.

Goods sold in containers, e.g. paper bags to hold biscuits, cakes, etc., should be refused if the assistant has licked the fingers to separate the bags, or has blown into one to open it.

Bread should be wrapped in the shops. I am concerned at the delivery of unwrapped bread, especially when delivered by young messenger boys whose hands are often far from clean.

Unwrapped foods exposed for sale should be covered, thus preventing contamination of the food by dust, from customer's hands and breath, and from flies, etc.

People serving in the shops who are suffering from colds, or

have sores on the hands should not be allowed to sell food unless the food is pre-packed, e.g. in tins.

The general public must observe the rules of cleanliness at home as well as in a public place. There is no point in preventing the sale of such goods as cream cakes, etc., under bad hygienic conditions, if the mother, or whoever handles the food at home, does so without washing the hands thoroughly before handling all foodstuffs.

Regarding hotels and cafes, the conditions of the kitchen and places where the food is prepared must be scrupulously clean, and there should be plenty of hot water, clean towels and soap to ensure that the washing up of crockery, etc., is carried out with the least possible risk of contamination by dangerous germs.

In order to further this Campaign, the Ruthin Rural District Council and the Ruthin Borough Council have decided to join together to organise a Health Exhibition in conjunction with the County Council and the Ministry of Agriculture and Fisheries. This Exhibition is to be held in June 1954.

The Sanitary Inspector reports as follows:—

Number of visits to shops and bakehouses	12
Number of visits to Hotels	2
Milk and Ice Cream samples taken during the year	Nil

INSPECTION OF MEAT

Carcases inspected and condemned:—

	<i>Cattle.</i>	<i>Sheep.</i>	<i>Pigs.</i>	<i>Calves.</i>
Number killed	1,517	8,102	1,206	355
Number inspected	1,517	6,020	1,206	355
<i>All diseases except Tuberculosis.</i>				
Whole carcases condemned	20	144	10	32
Carcases of which some part or organ was condemned	600	820	56	15
Percentage	1.3	2.3	.8	.9
Tuberculosis only	8	—	2	—
Carcases of which some part or organ was condemned	10	—	10	—
Percentage53	—	.1	—



