[Report 1953] / Medical Officer of Health, Ruthin R.D.C.

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RURAL DISTRICT OF RUTHIN.

ANNUAL HEALTH REPORT 1953

Medical Officer of Health

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Sanitary Inspector

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Printed at the "Free Press" Office, Denbigh.

To the Chairman and Members of the

Ruthin Rural District Council.

Mr. Chairman and Gentlemen,

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

Matters dealing with the Health of the Rural District are dealt with by the Public Health and Housing Committees. The Chairmen during the year were as follows:—

Chairman of the Council:—

January—May 1953:—W. R. Jones, Esq.

June—December 1953:—G. Ll. Edwards, Esq.

Chairman of the Public Health Committee:—

January—May 1953:—I. Ab Iorwerth, Esq.

June—December 1953:—I. Ab Iorwerth, Esq.

Chairman of the Housing Committee:—

January—May 1953:—Edward Roberts, Esq.

June—December 1953:—D. M. Williams, Esq., J.P.

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 up 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.

The work of the Sanitary Inspector consists of the duties as specified in the Sanitary Inspector's Order.

The Engineer and Surveyor is responsible for the Maintenance of public water supplies (collection, purification and distribution), sewerage and sewage disposal schemes, refuse

collection and disposal, the maintenance of Council houses, the supervision of private building proposals, and the enforcement of building byelaws.

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 by 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.

SCHOOLS

Some Schools in the District are in need of alterations to bring them up to standard. Elaborate Technical Colleges are being built at a great expense and I feel that some of this money would be well spent on Infants and Junior Schools where the largest percentage of our young people have to spend a great deal of their youth.

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

The Sanitary Inspector reports as follows:—

The Council have been seriously concerned with the drainage and sanitary accommodation of the schools at Graianrhyd and Llanelidan. The work of converting the pail closets to water closets at Graianrhyd School was completed during the year, and it is sincerely hoped that a start will soon be made on converting the pail closets at Llanelidan School.

HOUSING

During the year 25 Council houses were erected, making the total of houses 305. Of these, 265 houses have been built during the post-war period.

The Sanitary Inspector reports as follows on the housing conditions :—

Thirty-six new houses were erected during the year, 25 of these being built by the Council, and 11 by private enterprise. Progress was made on other sites and it is hoped that next year will see a larger number of houses erected by private enterprise. Three premises were converted into dwelling houses during 1953.

Concerning the maintenance of property, it is obvious that house owners are having great difficulty in meeting the high cost of building repairs. The high cost of maintenance is certainly the cause of the serious decline in the standard of maintenance of houses generally, and if many houses now rapidly falling into decay are to be saved, some revision of the present method of rent control is necessary.

CLASSIFICATION OF VISITS

Visits made under Public Health and Housing Acts	504
Visits in respect of Drainage Work	286
Visits in respect of Water Supplies	15
Visits to Bakehouses	6
Visits for Food Inspection	56
Visits to investigate Infectious Disease	23
Disinfections	6
Visits to Factories and Workshops	40
Visits to Slaughterhouses (apart from Meat Inspection)	0

WATER SUPPLIES

No samples of water were sent for chemical examination, but the sample sent for examination of the fluorine content showed the amount of fluorine 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 regard to the result of the examination of children's teeth by the School Dental Officers.

Samples of water sent for bacteriological examination were classified as follows :—

Name of place where samples were taken.	Date.	Results.
Bryneglwys (old supply)	13/10/53	Class 1; Highly Satisfactory.
Bryneglwys (old supply)	2/11/53	This sample showed a considerable number of coliform bacilli, some of which appeared to be recent excretal origin.
Bryneglwys (new supply)	13/10/53	Class 1; Highly Satisfactory.
Bryneglwys (new supply)	2/11/53	This sample was considerably contaminated.
Gyffylliog	28/4/53	Class 4 ; Unsatisfactory.
Gyffylliog	9/6/53	Class 4 ; Unsatisfactory.
Gyffylliog	13/10/53	Moderately contaminated.
Llanferres (main supply)	31/3/53	Class 1; Highly Satisfactory.
Llanferres (main supply)	5/10/53	Class 1; Highly Satisfactory.
Llanferres (main supply)	2/11/53	Class 1; Highly Satisfactory.
Nant y Ne and Birkenhead joint	28/4/53	Class 1; Highly Satisfactory.
Piped supply (Rhewl village	7/7/53	Class 1; Highly Satisfactory.
do.	5/10/53	Class 1; Highly Satisfactory.
do.	24/11/53	Class 1; Highly Satisfactory.
Birkenhead Main Piped Supply (Graigfechan Village)	3/1/53	Class 1; Highly Satisfactory.
Llandegla (private supply)	2/11/53	This sample appeared to be satisfactory for a private supply.
Llandegla (main supply)	31/3/53	Class 1; Highly Satisfactory.
	13/10/53	Class 1; Highly Satisfactory.
	2/11/53	This sample showed a small number of faecal coli only. In view of the previous satisfactory results it would appear to be reasonably satisfactory for a small supply.
Llanelidan (Cricor main piped supply)	31/3/53	Class 1; Highly Satisfactory.
	9/6/53	Class 1; Highly Satisfactory.
	7/7/53	Class 1; Highly Satisfactory.
	5/10/53	Class 1; Highly Satisfactory.
	24/11/53	Class 1; Highly Satisfactory.
Llanelidan (private supply	31/3/53	Highly Satisfactory.
to school)	9/6/53	Reasonably satisfactory for a private supply.
	5/10/53	Class 1; Highly Satisfactory.
Llandyrnog (Borehole	28/4/53	Class 1; Highly Satisfactory.
main piped supply)	4/8/53	Class 1; Highly Satisfactory.
	4/8/53	Class 1; Highly Satisfactory.
	24/8/53	Class 1; Highly Satisfactory.

Name of place where samples taken.	Date.	Remarks.
	5/10/53	Class 1; Highly Satisfactory.
	2/11/53	Class 1; Highly Satisfactory.
	21/12/53	Class 1; Highly Satisfactory.
Llanynys (main piped supply)	20/7/53	Class 1; Highly Satisfactory.
	24/8/53	Class 1; Highly Satisfactory.
	21/12/53	Class 1; Highly Satisfactory.
Nantglyn (Denbigh Mental Hospital Supply)	28/4/53	Class 1; Highly Satisfactory.
	24/11/53	Class 1; Highly Satisfactory.
Llangwyfan Hospital (Prion main piped supply)	10/3/53	Class 1; Highly Satisfactory.
	9/6/53	Class 3; Unsatisfactory for chlorinated water.
	7/7/53	Class 1; Highly Satisfactory.
	20/7/53	Class 1; Highly Satisfactory.
Prion main piped supsupply)	10/3/53	Class 1; Highly Satisfactory.
	9/6/53	do.
	7/7/53	do.
	20/7/53	do.
	4/8/53	do.
	24/8/53	do.
	5/10/53	do.
	24/11/53	do.
	21/12/53	do.
Raw Water from Meifod Filter House (Prion Supply)	10/3/53	Highly Satisfactory.
	7/7/53	Not Classified.
	20/7/53	do.
	4/8/53	do.
	24/8/53	do.
	24/11/53	Highly Satisfactory.
	21/12/53	Highly Satisfactory.
Filtered water treated with aluminoferric and chalk taken from Meifod Filter House (Prion supply)	10/3/53	Highly Satisfactory.
	7/7/53	Class 1; Highly Satisfactory.
	20/7/53	Not Classified.
	4/8/53	Not Classified.
	24/8/53	Not Classified.
	24/11/53	Class 1; Highly Satisfactory.
	21/12/53	Highly Satisfactory.
Waen, Aberwheeler	28/4/53	Moderately contaminated.
	9/6/53	Contaminated.
	13/10/53	Contaminated.

The Engineer followed up these results and reports as follows:—

The Waen, Aberwheeler, source has now been abandoned, a piped supply from the Prion source being put into use early in 1954.

The two Bryneglwys supplies, and the Llandegla supply are to be discontinued as soon as a new scheme, utilising water from the Brymbo Water Co., is put into operation—probably in 1955.

The Gyffylliog supply will be discontinued as soon as new mains are laid from the Prion supply—the contract for this work is now about to be put out to tender.

The Bore-hole Scheme at Llanynys was completed during the year. Samples of this water have proved to be Class I — Highly Satisfactory on examination.

An Enquiry was held regarding Scheme I, Ia and II — Llanarmon, Llanferres, Llandegla and Bryneglwys, and it is hoped that this Scheme will be commenced early in 1954.

Scheme V—Waen, Aberwheeler, Gyffylliog, Llandegla and Bontuchel—is also hoped to be commenced early in 1954.

These schemes will supply large areas including villages and farms for which water is essential.

The Welsh Office has already sanctioned the laying of a main between Llanarmon and Llandegla and a start has been made on the Waen (Aberwheeler) Scheme.

SEWAGE DISPOSAL

The disposal of sewage has caused concern in some places.

During the year the Llanferres sewerage and sewage disposal scheme was completed.

Regarding the Llandyrnog Joint Sewerage Scheme, it is hoped that this scheme will be completed in March 1954. Several complaints have been received from tenants living in the vicinity of the Creamery. These complaints have been due to nuisances caused by bad smells. This nuisance will be remedied when the scheme has been completed.

The disposal scheme for Rhewl and Gellifor has been approved and tenders have been invited. It is hoped that this

scheme will be completed during 1954.

Plans are going ahead to provide a sewage disposal scheme for Waen-Aberwheeler area, and it is hoped to carry out the scheme during the coming year.

Several other villages are waiting for a proper means of sewerage disposal.

The Sanitary Inspector reports as follows:—

CLOSET ACCOMMODATION

During the year 21 new water closets were provided for existing premises.

DRAINS

Twenty-three cases of defective drainage were dealt with, and in 11 cases new drains were laid.

GENERAL STATISTICS OF THE RURAL DISTRICT

Area of the District	101,032 (acres)
Registrar General's Estimated Population (mid 1953)	9,567
Number of inhabited houses	3,020
Rateable Value	£44,377
Sum represented by a penny rate	£179 9 8

DEATHS

Comparability Factor	0.87

The number of deaths registered in the Rural District during 1953 were 96 (51 Males and 45 Females) compared with 47 Males and 54 Females during 1952.

			England and Wales
	1953	1952	1953
Crude death rate (per 1,000 population)	11.4	10.5	10.0
Corrected death rate (per 1,000 population)	—	9.1	8.7
Still-birth rate (per 1,000 population)	15.5	0.31	0.20
Maternal Mortality rate	0.76	—	6.3
Infant Mortality rate (per 1,000 live births)	26.8	18.4	25.3

The causes of death are shown in the following table and the number of deaths for 1952 are given for comparison.

	1952 Total.	1953 Total	Males.	Females.
Tuberculosis—Respiratory	—	1	1	—
Tuberculosis—Other	1	—	—	—
Syphilitic Diseases	—	—	—	—
Diphtheria	—	—	—	—
Whooping Cough	—	—	—	—
Meningococcal Infections	—	—	—	—
Poliomyelitis	—	—	—	—
Measles	—	—	—	—
Other infective and parasitic diseases	—	—	—	—
Malignant diseases—				
Stomach	3	2	2	—
Lungs, etc.	3	1	—	1
Breast	2	1	—	1
Uterus	—	—	—	—
Other	9	8	3	5
TOTAL CANCER DEATHS	17	12	5	7
Leukaemia	1	3	2	1
Diabetes	1	—	—	—
Vascular lesions of the nervous system	18	19	7	12
Coronary diseases	11	9	7	2
Hypertension with heart disease	2	—	—	—
Other heart diseases	19	17	10	7
Other Circulatory Diseases	3	4	2	2
Influenza	—	—	—	—
Pneumania	2	7	4	3
Bronchitis	3	2	—	2
Other respiratory diseases	—	—	—	—
Ulcer of Stomach, etc.	1	1	—	1
Gastritis, Diarrhoea, etc.	—	—	—	—
Nephritis and Nephrosis	2	3	2	1
Prostatic Hyperplasis	1	3	3	—
Maternal Causes	—	1	—	1
Congenital Malformations	1	1	—	1
Other defined and ill-defined diseases	13	7	4	3
Motor Vehicle Accidents	—	1	1	—
All other accidents	4	4	2	2
Suicide	1	1	1	—
Homicide	—	—	—	—
ALL CAUSES	101	96	51	45

The deaths occurred in the following age groups:—

Under 1 year	4 (2 Males and 2 Females)
1—10 years	3 (All Females)
10—20 years	1 (Male)
20—30 years	1 (Female)
30—40 years	Nil.
40—50 years	4 (3 Males and 1 Female)
50—60 years	15 (8 Males and 7 Females)
60—70 years	21 (12 Males and 9 Females)
70—80 years	23 (13 Males and 12 Females)
80—90 years	21 (10 Males and 11 Females)
90 years and over	3 (2 Males and 1 Female)
Total	96

Of these 96 deaths registered during 1953, 68 deaths occurred in persons aged 60 years and over.

There was one death due to pulmonary tuberculosis and this had not been notified during the patient's lifetime, but was notified on the death returns.

There were twelve deaths due to cancer compared with seventeen deaths from the same cause in 1952. Of these, 1 death was caused by cancer of the lungs and two deaths were due to cancer of the stomach. Research is going on into the cause of cancer. Each death is followed up and notes are made regarding the mode of life, type of food eaten, etc., and the condition of the soil and atmosphere are investigated. I would again stress that early treatment of a case of cancer can lead to a cure.

Forty-nine deaths were due to lesions of the heart and cardio vascular system. Pneumonia was the cause of 7 deaths and bronchitis the cause of another two deaths. There were no other deaths due to any infectious diseases.

There was only one maternal death, which occurred in hospital, and this death appears to have been unavoidable. This gives a maternal mortality rate of 6.3 compared with Nil in 1952 and 0.76 in England and Wales.

There was one death caused by a motor vehicle accident.

Of the four deaths due to all other accidents, two occurred in Quarries. The other two were in persons aged 82 and 58 years following a fall in the home. Accidents in the home are becoming very frequent and everything should be done to avoid them, especially in the case of elderly people and children. Care should be taken that floors are not too highly polished and have slippery mats on them. Stair covering should be such that a person cannot trip over it, and there should be a good handrail available. It is important that shoes are well fitting, and any foot defects, especially in elderly people, should be attended to.

There were 4 infant deaths in the Rural District during the year. These deaths, together with the two still-births, made a total of six infant lives lost. The infant deaths were followed up by the Health Visitors and were reported on as follows:—

Case 1. Male child aged 3 hours. The cause of death was insufficient vitality due to prematurity—10 weeks. The Health Visitor states that this death was unavoidable. The mother had been well cared for during the ante-natal period.

Case 2. Male child aged 36 hours. The cause of death was inanition due to prematurity. The mother had had good ante-natal supervision and the home conditions were satisfactory. This death was unavoidable.

Case 3. Female child aged 1 week. This death was due to prematurity and defects caused before birth. The mother had been well cared for during the ante-natal period and the death was unavoidable.

Case 4. Female child aged 3 weeks. The cause of death was lobar pneumonia. The home conditions were satisfactory and everything was done for the child.

The infant mortality rate for 1953 was 25.3 compared with 18.4 in 1952 and 26.8 in England and Wales. The actual number of deaths was 4 in 1953 compared with 3 in 1952—these figures give a better guide to the number of deaths than do the rates because of the smaller number of births which was 158 in 1953 compared with 163 in 1952.

The still-birth rate was 0.20 in 1953 compared with 0.31 in 1952 and 15.5 for England and Wales. The actual number of still-births was 2 in 1953 compared with 3 in 1952.

BIRTHS

Comparability Factor 1.11

The number of births registered in the Rural District during 1953 was 158, being 73 Males and 85 Females. These were classified as follows:—

	Males.	Females.	Total
Legitimate	70	82	152
Illegitimate	3	3	6
... ...	—	—	—
... ...	73	85	158

Birth rate per 1,000 population

	England and Wales		
	1953	1952	1953
(crude)	15.5	16.9	16.5
Birth rate per 1,000 population (corrected)	—	18.8	18.3

INFECTIOUS DISEASES

The following table shows the number of cases of Infectious Diseases notified in the different age groups during 1953 and the figures for 1952 are given for comparison:—

Notifiable Disease.	1952 Total.	1953 Total	At Ages. Under 1 year	1—5 years	6—15 years	16—25 years	26—45 years	46—65 years	65 years and over	Ages unknown	Number admitted to hospital
Scarlet Fever	2	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Meningitis—Observation	1	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	13	14	—	—	1	2	7	3	1	—	—
Other form of Tuberculosis	4	2	—	—	2	—	—	—	—	—	—
Pneumonia	6	7	—	—	3	1	2	1	—	—	2
Measles	6	115	—	48	57	3	1	—	—	6	—
Poliomyelitis	2	—	—	—	—	—	—	—	—	—	—
Dysentry	15	—	—	—	—	—	—	—	—	—	—
Encephalitis	1	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	2	1	—	—	—	—	1	—	—	—	1
Whooping Cough	8	39	5	21	12	—	—	—	—	1	—
Food Poisoning	—	1	—	—	1	—	—	—	—	—	—
	60	179	5	69	76	6	11	4	1	7	3

There were 179 cases of Infectious Diseases notified during 1953 compared with 60 cases in 1952. The increase is due mainly to the epidemics of Measles and Whooping Cough which occurred in the Rural District during the year. There were 115 cases of Measles notified compared with 6 cases in 1952, and to this must be added 51 cases which were reported by the Head Teachers of the various Schools in the District. These 57 cases were followed up and it was found that the patients had not been seen by a Doctor as the parents thought they were mild cases. One of the cases of Measles reported by the Head Teachers was also notified verbally by a parent, but it is still not realised by parents that they should report cases of Infectious Diseases to the Medical Officer of Health as requested under Section 144 of the Public Health Act 1936, although this matter has been given publicity.

Thirty-nine cases of Whooping Cough were notified against eight cases during the previous year. It may be a fact that

more cases would have occurred if immunisation had not been introduced. It will take a few more years to judge the efficiency of immunisation against Whooping Cough.

There were 7 cases of Pneumonia notified during the year, six cases having occurred in persons under 45 years of age.

The one case of Puerperal Fever which was notified during the year occurred in Hospital.

One case of Meningococcal Infection was notified and the patient was admitted to Hospital where a change of diagnosis was made to Tonsillitis.

Seven cases of Chicken Pox, one case of German Measles, three cases of Mumps and one case of Ringworm were notified by the Head Teachers of various Schools in the District. These diseases, although infectious, are not notifiable.

Regarding the case of Food Poisoning, the Medical Officer of Health of another area informed me that a contact of a case of Salmonella Typhi-Murium had come into this area. This contact was followed up and found to have symptoms of the infection. Her Doctor was called in, and after bacteriological tests were carried out the case was notified as one of Salmonella Typhi-Murium. All precautions were taken and advice regarding the danger given. No further cases were reported.

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.

Year.	Deaths.	Corrected Notifications.
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)
1848	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 (59)
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	13
Over 5 years	Nil
Booster doses	119

Number immunised against Whooping Cough :—

Under 5 years	Nil
Over 5 years	Nil

Number given combined injections against Diphtheria and Whooping Cough :—

Under 1 year	79
1—5 years	72

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

VACCINATION

It is still very necessary 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 service for their babies.

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

Number of Primary Vaccinations	92
Re-Vaccinations	14

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

TUBERCULOSIS

Fourteen cases of Pulmonary Tuberculosis and 2 cases of non-Pulmonary Tuberculosis were notified during 1953 compared with 13 cases of Pulmonary Tuberculosis and 4 cases of non-Pulmonary Tuberculosis in 1952. There were 2 further cases of Pulmonary Tuberculosis transferred on to the register during the year, one from Flintshire and one from Aled Rural District.

Two cases of non-Pulmonary Tuberculosis were transferred to this area, one from Breconshire and one from Denbigh Borough.

The number of cases of Pulmonary Tuberculosis and non-Pulmonary Tuberculosis on the register for this District at the beginning and end of 1953 were as follows:—

	Pulmonary.		non-Pulmonary.	
	Males.	Females.	Males.	Females.
Begining of January, 1953	36	49	12	14
End of December, 1953	30	29	9	13

Three cases of Pulmonary Tuberculosis (2 Males and 1 Female) were admitted to various Sanatoria during the year, and 5 cases of Pulmonary Tuberculosis (3 Males and 2 Females) were discharged during the year.

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 of bedding, room, etc., is missed.

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

It is very important that all contacts of cases of Tuberculosis should 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 Rural District 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.

B.C.G. VACCINATION OF SCHOOL CHILDREN

A circular has been received from the Ministry of Health on this subject. I contacted the County Medical Officer of Health regarding this matter, and he states 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 of Ruthin during the year and an opportunity was given to the inhabitants of the Rural District to attend for X-ray examination.

A letter was sent to the Administrative Officer of the Welsh Regional Hospital Board at Cardiff asking whether it was possible for the Unit to visit villages in the Rural Area. The reply stated that they were not able to state as to what villages the Unit would be visiting during 1954 as the programme of visits for that year had not yet been made out.

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 every time the disinfector is used.

PUBLIC HEALTH (INFECTIOUS DISEASES) REGULATIONS, 1953

The Public Health (Infectious Diseases) Regulations, 1953, now supersede the Public Health (Infectious Diseases) Regulation, 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, and other salmonella infections, dysentry 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 or 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:—

No. of visits to investigate cases of Infectious Disease	23
No. of premises disinfected	6

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA

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 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 milage is for the year commencing 1st December 1952 and ending 30th November 1953.

Name of Ambulance.	Area Served.	No of Cases Conveyed.	Total Mileage.
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 Eglwys-bach	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

	Period.	No. of Journeys.	No. of Cases.	Mileage
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 SERVICES

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 closed at the beginning of the year due to poor attendance. Patients may attend the Clinics held at Denbigh and Wrexham or the Consultant Clinic held at Denbigh if referred by their own Doctor. If there were clinic premises suitable 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 in 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 at 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 present at the Baptist Chapel Schoolroom, Park Road, Ruthin. I feel that, as good use is made of this Clinic, there should be a building set up for this purpose and owned by the County Council.

Use could be made of the building for other examinations, e.g., examination of school children, staff on appointments, teachers, school canteen workers, etc., and for minor ailments. Such a clinic could also be equipped for dental treatment as in other areas.

Ruthin and Denbigh Clinics are the only Clinics serving the Rural District and this means a great deal of travelling for mothers to bring their children. A mobile clinic would serve a useful purpose, or transport facilities should be arranged where there is no convenient public transport.

DENTAL CLINICS

An Assistant Dental Officer 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 at Ruthin, perhaps this service could be given to residents of the Ruthin Rural District as well as the residents of Ruthin Borough, as is done in other areas.

ORTHOPAEDIC CLINICS

These Clinics are held at Denbigh, Wrexham and Corwen and patients from the Rural District attend at one of these Clinics depending on which is the most convenient for them. The Clinics are held fortnightly and the Surgeons attend once every three months.

Cases are also referred to the Orthopaedic Clinics held at a Hospital in Rhyl where the Surgeon attends weekly.

VENEREAL DISEASES

These Clinics are held at Llandudno, Chester, Bangor and Wrexham.

TUBERCULOSIS CLINICS

These Clinics are held at Denbigh, Wrexham and Rhyl.

NURSING SERVICES

The area is served by three Health Visitors who also cover parts of Hiraethog Rural District, Aled Rural District, Denbigh Borough, Ruthin Borough and Llanrwst Urban District. These Health Visitors attend at the Clinics and carry out domicilliary visits. The Health Visitors are also the School Nurses.

The two Tuberculosis Health Visitors serving in the District also cover the whole County.

There are four Midwives in the Rural District and they also do Home Nursing.

HOME HELP SERVICE

The number of Home Helps in the District is 7.

CARE OF THE AGED

New Homes for the Aged have been opened at some places, but although these Homes are ideally situated, 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 personal shopping, etc. In fact, bungalows or flatlets in a large house in a town or their own village would be far better.

There are several aged persons in the District—both married couples and single persons—who need smaller and more suitable premises, and I would like to see a small community of bungalows built for this 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-baths are more useful than large baths, as old people find it difficult to get in and out of a bath without help.

If a few bungalows were built near Council houses, a house could be put aside for a Home Help to care for the aged people, particularly when they are ill, to do their shopping and help them with their housework when necessary.

NATIONAL ASSISTANCE ACT, 1948. SECTION 47.

One aged person was detained at the Geriatric Unit of the Maelor General Hospital, Wrexham, following a Court Order granted at the Magistrates' Court held at Ruthin on 15th December 1952. She was very old and passed away on March 2nd, 1953.

Several other cases of aged persons who were reported as requiring care and attention were investigated. In no instance was action taken to obtain a Court Order for their removal, as I did not consider their condition sufficiently bad for this.

NATIONAL ASSISTANCE ACT, 1948. SECTION 50.

No action was taken under this section of the Act during 1953.

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 cakes, biscuits, 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 under bad hygienic conditions if the mother or whoever handles the food at home does so without washing the hands thoroughly before handling all food stuffs.

Regarding hotels and cafes, the condition of the kitchen and places where the food is prepared should be scrupulously clean. 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.

The Sanitary Inspector reports as follows:—

ICE CREAM

There are no manufacturers of ice cream within the district, but 20 premises are registered for the sale of pre-packed ice cream, and vehicles from adjoining districts retail ice cream in the area during the summer months. Vehicles and premises were periodically inspected and found to be satisfactory.

FOOD

The following articles of food were condemned during the year, being unfit for human consumption.

10 x 1lb. 13ozs. Tins of Smedley's Victoria Plums.
26lbs. of Bacon.
23 x 16 oz. Tins of Libby's Full Cream Unsweetened Milk.
14 x 14¼ oz. Tins of Rondisa Red Cherries in Syrup.
2 x 16 oz. Tins of Morjon Pilchards in Tomato Soup.
2 x 14½ oz. Tins of Olida Luncheon Meat.
6 Tins of Ideal Milk (Unsweetened).
3 Tins of Grapefruit in Syrup.
8 x 12 oz. Tins of Hillhall Damsons in Syrup.
3 x 11 lb. Tins of Pickering's Sliced Apples.
1 x 11¼ oz. Tin of Santa Clara Prunes.
9 x 8 oz. Tins of W.B. Pilchards.
3 x 1 lb. Tins of Ocean Battle Pilchards.
1 x 1 lb. Tin of Golden Glory Beans.
1 Tin of Morjon South African Pilchards.
1 x 14 oz. Tin Felice del Forno Tomatoes.
2 x 12 oz. Tins of Pork Luncheon Meat.
5 x 1 lb. 4 oz. Tins of Farrows Victoria Plums.

FACTORIES AND WORKSHOPS

Garages	6
Flour Mills	6
Electric Light Works	2
Sawmills	4
Bakehouses	2
Building Trades	5
Milk Factory	1
Others	7

The above were periodically inspected.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BY-LAWS OR REGULATIONS

There were no offensive trades or hop-pickers in the district.

RAG FLOCK ACT 1951

There were no premises within the district on which Rag Flock is manufactured, used or sold.

RIVERS AND STREAMS

Apart from pollution of the stream at Llandyrnog, no complaints were received regarding the pollution of other streams in the district.

REFUSE COLLECTION

The Council's scheme for the fortnightly removal of refuse continues to function well. All complaints received were investigated and promptly dealt with.

COUNTY OF DENBIGH

Particulars of samples taken under the Food and Drugs Act 1938 in the RUTHIN RURAL DISTRICT during the year ended 31st December 1953.

Article.	No. Taken.	Genuine.	Not Gennine or Sub-Standard.
MILK	8	5	3
Butter	1	1	—
Bread	1	1	—
Flour	1	1	—
Jam	2	2	—
Condensed Milk	1	1	—
Sweets	1	—	1
Fish Paste	1	1	—
Tinned Fish	1	1	—
Tinned Carrots	1	1	—
Salt	1	1	—
TOTALS	19	15	4

Of the three milk samples shown in the Table as being "Not Genuine," two of them contained a percentage of added water and were samples taken from milk in transit from farm to wholesale dairy. The farmer responsible was brought before the Ruthin Justices and fined £10 together with £10 10s. 0d.

costs, a total of £20 10s. 0d. The othere "Not Genuine" Milk sample was one in which there was a deficiency in fat, but on an "Appeal to Cows" sample being taken it was found that the milk as it came from the cows was also below the standard.

The only other sample taken in your Area to be certified as "Not Genuine" was one of sweets. These sweets when sold were wrongly labelled "Butter Mints" when, in fact, owing to the very small percentage of butter-fat found in them, they should have been described as "Butter Flavoured Mints." I communicated with the manufacturing confectioners responsible who freely acknowledged their error and undertook to make the necessary correction in all future supplies.

All other samples were certified by the Public Analyst to be genuine and free from all prohibited preservatives and colouring matter.

THOS. H. EVANS,

Chief Inspector,
County of Denbigh.

17 Vicarage Hill,
Wrexham.
26th April 1954.