

**[Report 1948] / Medical Officer of Health, Benfleet U.D.C., Canvey Island U.D.C., Rayleigh U.D.C.**

**Contributors**

Benfleet (England). Urban District Council.

**Publication/Creation**

1948

**Persistent URL**

<https://wellcomecollection.org/works/n9tbhuts>

**License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>

LIBRARY

# ANNUAL REPORT



of the

## Medical Officer of Health

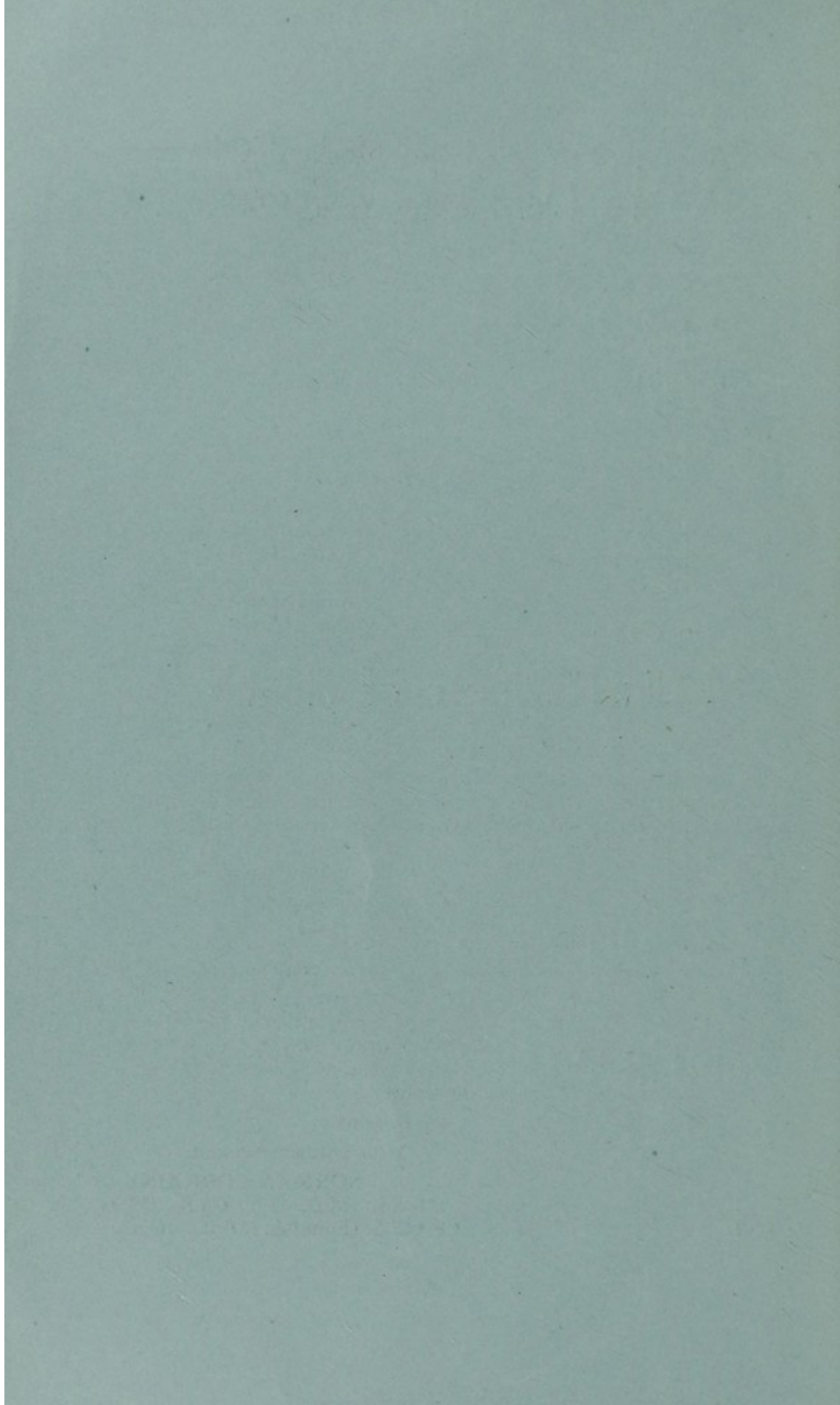
(Norman Lorraine, F.R.S.E., M.D., ChB., D.P.H.)



For the URBAN DISTRICTS OF  
BENFLEET, CANVEY ISLAND  
and RAYLEIGH

for  
1948





# Annual Report of the Medical Officer of Health for the Year 1948

PUBLIC HEALTH DEPARTMENT,  
LONDON ROAD,  
HADLEIGH, ESSEX.

To the Chairman and Members of each of the Urban  
District Councils of Benfleet, Canvey Island and Rayleigh.

Ladies and Gentlemen,

I have the honour of presenting for your consideration my Annual Report on the health and sanitary circumstances of each of your Urban Districts for the year 1948.

With a view to economy, I have departed from my usual procedure of making three separate reports and have consolidated my remarks for the three Districts into one volume. However, it is hoped that the advantages of a combined report will be readily appreciated. Apart from its tendency to make for easier reading, this report will, it is hoped, facilitate the growing interest between the Members and Officers of the three Councils concerned and the peculiarities of each particular area.

This endeavour represents my twenty-first Annual Report in respect of the Canvey Island District and my nineteenth in respect of Benfleet and Rayleigh.

I am especially indebted to the Inspectorial Staff of the three Districts for their energetic co-operation throughout the year and for their contribution in sections C, D & E of this report. I would also like to record my appreciation to all members of the staff of each of the Public Health Departments for their loyal support during the past year.

Throughout the year the sympathetic consideration and assistance of each District Council has been a great help, especially in view of the involvements and additional responsibilities thrust upon the Department generally through the coming into force of the National Health Service Act, 1946 on 5th July, 1948.

This report is prepared in accordance with the requirements of the Minister of Health as contained in Ministry of Health Circular 3/49 of the 17th January, 1949 and for various reasons is essentially brief and is still in the nature of an interim report.

I beg to remain,

Your obedient Servant,

NORMAN LORRAINE,  
F.R.S.E., M.D. M.B., Ch.B., D.P.H.,  
R.C.P.S. (Edin.) & R.F.P.S. (Glas.)

June, 1949.

## SECTION "A."

### STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

	<i>Benfleet</i>	<i>Canvey Is.</i>	<i>Rayleigh</i>
Area (in acres) ... ..	6,360	6,350	5,732
Number of inhabited houses at 31st December, 1948 (according to Rate Book) ... ..	6,668	4,040	2,825
Registrar-General's estimate of the resident population ... ..	19,600	10,500	9,237
Rateable Value ... ..	£119,123	£45,311	£57,207
Sum represented by a Penny Rate	£474	£177	£240
Rateable Value per head of the estimated population ... ..	£6.1	£4.3	£6.2

The social conditions of these areas have much to commend them.

The geographical position provides many advantages. Canvey Island has a natural provision for seaside activities and the South Benfleet area is also able to share these privileges. Hadleigh and Thundersley, whilst being a little inland, have easy access to the water either at Leigh-on-Sea or South Benfleet and Canvey Island. The Woodlands, Downs and Commons are very picturesque and provide many pleasant walks. Rayleigh, furthest away from the Estuary, enjoys a very healthy position and the highest point is 255 feet above sea level. From this and similar vantage points there are grand views in both easterly and westerly directions and the wide rural stretches of the Rochford Hundred area provide relaxation for many happy hours if the amenities of Southend are not the taste of all.

As mentioned elsewhere in this Report, these Districts attract large numbers of elderly people and the natural amenities are no doubt ideal for those seeking repose and a quiet retirement.

Although a considerable number of residents are employed outside the area, chiefly in Greater London and to a lesser degree in Southend, a good number of people are absorbed in local industries which have developed in recent years. In the Benfleet Urban District there are two large clothing factories employing some hundreds of workers, a shoe factory and a large dry cleaning works where many workers are engaged.

A very interesting and unique industry in the Rayleigh area is a large Mousery where innumerable species of mice are bred for scientific research purposes and are understood to have a very wide distribution. About 20 persons are believed to be employed on this unusual work. Rayleigh also has a cooked meat factory where sausages and pies are manufactured under modern hygienic conditions. Since the recent war

a large furniture factory has been erected on the Rayleigh side of the Arterial Road.

Much of the local employment at Canvey Island is seasonal although there are a few factories which employ quite a number of persons. Over 50 persons are understood to be employed at the Clothing Factory in the High Street and many workers are engaged in a Mat Making Factory, a Radio Component Factory and a Sheet Metalwork Factory. Shipbuilding is also active adjacent to the Creeks around the Island.

In normal times, building is one of the chief industries and the general development in these areas was very rapid until the restrictions of the recent war brought matters to a stand-still. However, the post-war recovery in this craft is progressing.

Agriculture and market gardening also provide employment for quite a number, especially in the Thundersley, Rayleigh and Rawreth areas, and much of the produce finds its way into the usual commercial channels, both locally and away.

#### EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	<i>Benfleet</i>			<i>Canvey Island</i>			<i>Rayleigh</i>		
	<i>M.</i>	<i>F.</i>	<i>Total</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>
<i>Live Births :</i> ...	170	145	315	105	85	190	81	79	160
<i>Legitimate</i> ...	165	142	307	98	83	181	79	76	155
<i>Illegitimate</i> ...	5	3	8	7	2	9	2	3	5
<i>Still Births :</i> ...	2	2	4	1	3	4	5	—	5
<i>Legitimate</i> ...	2	1	3	1	3	4	4	—	4
<i>Illegitimate</i> ...	—	1	1	—	—	—	1	—	1
<i>Deaths :</i> ...	161	120	281	84	70	154	39	49	88
Birth Rate per 1,000 of the estimated resi- dent population ...	16.1			18.1			17.3		
Stillbirth Rate per 1,000 total (live and still) births ...	12.5			20.1			30.3		
Death Rate per 1,000 of the estimated resi- dent population ...	14.3			14.7			9.5		

There were no deaths from puerperal causes in any of the three Districts during 1948.

*Death Rate of Infants under one year of age :*

	<i>Benfleet</i>	<i>Canvey Island</i>	<i>Rayleigh</i>
Total number of infant deaths ... ..	13	8	2
All infants per 1,000 live births ...	41.3	42.1	12.5
Legitimate infants per 1,000 legitimate live births ... ..	42.4	38.7	12.9
Illegitimate infants per 1,000 illegitimate live births ... ..	—	111.1	—

COMPARATIVE TABLE OF BIRTH AND DEATH RATES  
DURING THE YEAR 1948.

	Rate per 1,000 resident population		Deaths under one year per 1,000 registered live births
	Live Births	Deaths from all causes	
England and Wales ...	17.9	10.8	34
126 County Boroughs and Great Towns including London ... ..	20.0	11.6	39
148 Smaller Towns. Resident population 25,000-50,000 at 1931 Census	19.2	10.7	32
London Administrative County ... ..	20.1	11.6	31
BENFLEET U.D. ...	16.1	14.3	41
CANVEY ISLAND U.D. ...	18.1	14.7	42
RAYLEIGH U.D. ...	17.3	9.5	13

## TABLE OF BIRTH, DEATH AND INFANT MORTALITY RATES

<i>Benfleet U.D.</i>				<i>Infant Mortality</i>	
<i>Year</i>		<i>Birth Rate</i>		<i>Death Rate</i>	<i>Rate</i>
1944	...	17.3	...	13.9	53.2
1945	...	16.3	...	14.9	10.6
1946	...	19.0	...	12.2	16.6
1947	...	19.4	...	15.6	20.9
1948	...	16.1	...	14.3	41.3
<i>Canvey Island U.D.</i>					
1944	...	19.6	...	14.0	67.1
1945	...	17.2	...	10.4	43.7
1946	...	22.7	...	13.8	33.8
1947	...	23.8	...	13.1	29.3
1948	...	18.1	...	14.7	42.1
<i>Rayleigh U.D.</i>					
1944	...	15.2	...	13.7	35.4
1945	...	16.3	...	15.9	16.2
1946	...	17.5	...	12.7	6.8
1947	...	22.0	...	15.9	26.2
1948	...	17.3	...	9.5	12.5
<i>Comparative average for last 5 years</i>					
England & Wales	18.2	...	11.5	...	42
Benfleet U.D.	17.6	...	14.2	...	29
Canvey Island U.D.	20.3	...	13.2	...	43
Rayleigh U.D.	17.7	...	13.5	...	19

### *Comments on Vital Statistics.*

*Birth Rate.* It will be noticed that during 1948 the Birth Rate has dropped considerably in each District, especially in Canvey Island and Rayleigh. This falling off of the Birth Rate is evident throughout the whole Country, and it would appear that the post-war peak has been reached and passed. Canvey Island's Birth Rate for the last five years has, on the average, been much higher than the Rate for England and Wales, whereas in Benfleet and Rayleigh, the Rate has been a little below the Country's average. This high Birth Rate at Canvey Island, together with large scale migration from the Metropolis explains why the population has increased more rapidly there than in most other areas.

*Death Rate.* With the exception of Rayleigh where the Death Rate during 1948 was well below that for the whole Country, the number of deaths in these Urban Districts has remained above the average for some years, the average Rate being on a similar level in each District. As often mentioned in my Annual Reports, this high rate is attributable to the fact that many elderly people seek refuge for their retirement in these healthy and peaceful areas after a busy life in the congestion of a city atmosphere and environment. This explanation is supported by



the following figures showing the average percentage of deaths among people over 65 years of age, during the last five years—

Benfleet U.D. ... ..	72.25
Canvey Island U.D. ... ..	59.7
Rayleigh U.D. ... ..	68.8

*Infant Mortality Rate.* This is considered to be the most sensitive index on the health and well-being of a community. As will be observed in the foregoing table, Rayleigh has the lowest figure over the past five years although the over-all position for the three Districts is very favourable and well below the average for the whole Country for the same period. It may be significant that Canvey Island, which has the highest Birth Rate and the lowest Death Rate—both very commendable factors, has the highest Infant Mortality Rate, but even so, it is no worse, practically speaking, than the figure for England and Wales.

Of the 23 infants reported to have died during the year under one year of age, 12 occurred within 24 hours of birth, 6 between one day and one month and 5 between one and six months. According to available information all the infants died of prematurity or congenital conditions with the exception of four who died from the following causes—Gastro-enteritis, Broncho-pneumonia, Pneumococcal Peritonitis and Toxaemia. One set of premature triplets were among the infants who died.

#### DEATHS AT VARIOUS AGES DURING 1948.

Age	DEATHS			Number of deaths which apply to District
	Number in District	Outward Transfers	Inward Transfers	
<i>Benfleet U.D.</i>				
Under 1 year	3	—	10	13
1 and under	2	1	3	4
2 " "	5	—	—	—
5 " "	15	2	1	1
15 " "	25	1	1	2
25 " "	35	4	—	3
35 " "	45	4	—	5
45 " "	55	9	1	4
55 " "	65	23	2	15
65 " "	75	53	3	26
75 and upwards	92	6	35	121
Totals for Benfleet	192	14	103	281

Age	DEATHS			Number of deaths which apply to District
	Number in District	Outward Transfers	Inward Transfers	
<i>Canvey Island U.D.</i>				
Under 1 year	1	—	7	8
1 and under	2	—	1	2
2 " "	5	—	—	—
5 " "	15	—	1	3
15 " "	25	1	3	4
25 " "	35	1	—	1
35 " "	45	—	6	10
45 " "	55	—	5	11
55 " "	65	1	10	18
65 " "	75	1	15	48
75 and upwards	34	1	16	49
Totals for Canvey Is.	95	5	64	154

Age	DEATHS			Number of deaths which apply to District
	Number in District	Outward Transfers	Inward Transfers	
<i>Rayleigh U.D.</i>				
Under 1 year	—	—	2	2
1 and under	2	—	—	—
2 " "	5	—	—	—
5 " "	15	—	1	1
15 " "	25	—	1	1
25 " "	35	—	—	—
35 " "	45	2	—	2
45 " "	55	2	2	4
55 " "	65	11	5	15
65 " "	75	14	10	23
75 and upwards	28	—	12	40
Totals for Rayleigh	57	2	33	88

CAUSES OF DEATH DURING 1948.

	Bensfleet U.D.			Canvey Island U.D.			Rayleigh U.D.		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
1. All causes ...	161	120	281	84	70	154	39	49	88
2. Typhoid and Paratyphoid fevers ...	—	—	—	—	—	—	—	—	—
3. Cerebro-spinal fever ...	—	—	—	1	—	1	—	—	—
4. Scarlet fever ...	—	—	—	—	—	—	—	—	—
5. Whooping Cough ...	—	—	—	—	—	—	—	—	—
6. Diphtheria ...	—	—	—	—	—	—	1	—	1
7. Tuberculosis of respiratory system ...	8	7	15	5	1	6	—	2	2
8. Other forms of Tuberculosis ...	1	—	1	1	1	2	—	—	—
9. Syphilitic diseases ...	—	—	—	—	—	—	1	1	2
10. Influenza ...	—	—	—	—	—	—	—	—	—
11. Measles ...	—	—	—	—	—	—	—	—	—
12. Acute Poliomyelitis & Polioencephalitis ...	—	—	—	—	—	—	—	—	—
13. Acute infective Encephalitis ...	—	—	—	—	—	—	—	—	—
14. Cancer of buccal cavity & oesophagus (M) uterus (F) ...	2	3	5	1	1	2	1	—	1
15. Cancer of stomach and duodenum ...	7	—	7	5	—	5	3	5	8
16. Cancer of all other sites ...	—	4	4	—	1	1	—	2	2
17. Diabetes ...	24	8	32	7	6	13	3	2	5
18. Intra-cranial vascular lesions ...	—	—	—	1	1	2	—	2	2
19. Heart diseases ...	13	23	36	5	12	17	8	8	16
20. Other diseases of circulatory system... ..	50	48	98	18	21	39	8	14	22
21. Bronchitis ...	8	5	13	3	—	3	4	1	5
22. Pneumonia ...	8	6	14	9	2	11	2	1	3
23. Other respiratory diseases ...	10	3	13	5	3	8	1	—	1
24. Ulcer of stomach or duodenum ...	2	2	4	—	1	1	—	—	—
25. Diarrhoea under 2 years ...	2	1	3	1	—	1	—	—	—
26. Appendicitis ...	—	—	—	1	—	1	—	—	—
27. Other digestive diseases ...	1	—	1	—	—	—	—	—	—
28. Nephritis ...	3	3	6	—	2	2	1	—	1
29. Puerperal and post-abortive sepsis ...	1	2	3	2	4	6	—	1	1
30. Other maternal causes ...	—	—	—	—	—	—	—	—	—
31. Premature birth ...	6	1	7	—	—	—	—	—	—
32. Congenital malformation, birth injury, infantile disease ...	—	—	—	—	—	—	—	—	—
33. Suicide ...	4	1	5	3	3	6	—	—	—
34. Road traffic accidents ...	4	1	5	1	3	4	1	—	1
35. Other violent causes ...	—	—	—	1	1	2	—	—	—
36. All other causes ...	2	—	2	2	1	3	—	1	1
	5	7	12	12	6	18	5	8	13

## SECTION " B. "

### GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

#### (a) *Laboratory Service.*

In addition to the Laboratory facilities provided at St. Andrew's Hospital, Billerica; The Counties Public Health Laboratories, London, S.W.1.; and the Essex Institute of Agriculture, a Public Health Laboratory has been established during the year at the Southend Isolation Hospital, Balmoral Road, Southend-on-Sea by the Public Health Laboratory Service as directed by the Medical Research Council for the Ministry of Health. At this Laboratory, the following bacteriological examinations are carried out free of charge to the Local Sanitary Authorities—

Nose and Throat Swabs, Sputum, Faeces, Urine, Blood, Cerebro-spinal fluid, Exudates, Water, Shell Fish, Sewage, Milk, Ice Cream, Foods and all other material suspected of carrying disease.

#### (b) *Ambulance Service.*

The three ambulance vehicles previously owned and controlled by the Benfleet U.D.C., Canvey Island U.D.C. and the Rayleigh Ambulance Committee respectively, together with all ambulance personnel, were transferred to the County Council as Local Health Authority under the provisions of Section 26 of the National Health Service Act, 1946 as from the 5th July, 1948.

The Ambulance Service is now administered by the County Council from Chelmsford through the County Ambulance Officer under the guidance and control of the County Medical Officer.

Infectious Disease cases are now carried in the ordinary ambulances of the County Ambulance Service, subject to adequate precautions being afterwards taken against the danger of the spread of infection. Small-pox and Typhus cases, however, are removed by special ambulance transport set apart for the purpose.

#### (c) *Nursing in the Home.*

This is now a function of the Essex County Council as Local Health Authority under the provisions of the National Health Service Act.

The recently appointed Non-Medical Supervisor of Midwives and Superintendent Health Visitor for the South-East Essex Health Area is understood to be responsible together with the Area Medical Officer, for dealing with applications for nursing assistance.

(d) *Treatment Centres and Clinics.*

There are five Combined Treatment Centres in these areas provided by the Essex County Council as Local Health Authority, and are located at Canvey Island, South Benfleet, Thundersley, Hadleigh and Rayleigh.

Regular sessional clinics are held for the following—

Expectant Mothers, Child Welfare, Minor Ailments, Teeth, Eyes and Immunisation against Diphtheria.

Since the 5th July, 1948 Tuberculosis Clinics come within the purview of the North-East Metropolitan Regional Hospital Board.

(e) *Hospitals.*

In accordance with the requirements of Part II of the National Health Service Act all hospitals serving this area were transferred to the North-East Metropolitan Regional Hospital Board as from 5th July, 1948.

General medical and surgical cases continue to be admitted to the General Hospitals at Southend and Rochford, the latter being hitherto known as the Southend Municipal Hospital. Cases of Infectious Disease are sent to either the Billericay Isolation Hospital or the Southend Isolation Hospital, the latter being previously known as the Southend Borough Sanatorium.

The care of Tuberculous persons is dealt with initially by the local Chest Physician who is jointly engaged by the Regional Hospital Board and the Essex County Council.

T.B. Hospitals and Sanatoria previously provided by the Essex County Council and now transferred to the Hospital Board, continue to serve the area.

(f) *Domestic Help Service.*

Although it is desirable that a Health Department should not become a Domestic Agency, it is evident that this Service which is provided by the County Council under the provisions of the National Health Service Act, is rapidly becoming an essential part of the Health Services as a whole.

By this means, chronic and acute sick are relieved of the worries of domestic affairs during illness. The allocation of whole-time and part-time Domestic Helps to the appropriate and most necessitous cases by the Domestic Help Organiser for the area is no doubt assisting with the present-day difficulties of the shortage of hospital beds. It is understood that maternity cases are given priority, thus enabling Confinements to be carried out at home and at the same time freeing hospital accommodation for urgent cases where hospital treatment is necessary.

All enquires received by the Public Health Staff of the Local Sanitary Authorities are referred to the Area Health Office for the attention of the Domestic Help Organiser.

## SECTION "C."

### SANITARY CIRCUMSTANCES OF THE AREA.

#### **Water Supply**

*General.* The water supply for the three Districts is provided by the Southend Waterworks Company. The supply for the Rayleigh District and in a large measure the Benfleet and Canvey Island Districts, is derived from the main source of supply for the whole South-East Essex area at Langford although there are two deep wells at Canvey Island and one at Benfleet which supplement the Company's main supply. It is understood that the electrification of the pumping equipment at the Hole Haven well at Canvey Island is well in hand and should be completed during 1949.

The Southend Waterworks Company's Resident Chemist makes daily tests of the treated water going into the supply from river sources and fortnightly analyses of the water from their local deep wells. In addition, quarterly samples are examined by the Counties Public Health Laboratories. The results obtained show waters of normal chemical character and good bacteriological quality. The water is pure and wholesome and suitable for public supply purposes. During 1948 the supply was satisfactory both as regards quality and quantity.

No lead contamination of water supplies was encountered during the year.

*Benfleet U.D.* At the end of the year 96.5% of the dwelling-houses and of the population were supplied with water from the Company's mains, and in all but seven cases, the water was supplied direct to the houses; the seven properties mentioned being served by stand-pipes.

Of the 3.5% of the dwelling-houses and population not supplied with main water, the majority rely upon supplies from rain-water tanks, although a few dwellings are supplied by shallow wells. In general, these dwellings are scattered throughout the New Thundersley area, which is mainly undeveloped and outside the "Urban Fence" for town planning purposes. During the drier months of the year drinking water was delivered on 40 occasions to assist householders when their private supplies failed.

Two extensions of the water mains were made by the Waterworks Company during the year, enabling 21 dwellings to be connected thereto.

10 samples were taken from private sources during the year, of which six were reported as satisfactory and four as unsatisfactory. The

unsatisfactory samples were from private dwellings. Of these, two were connected to a water main and an alternative source was provided in one other case. A notice is outstanding in respect of the remaining property.

*Canvey Island U.D.* A total of 3,159 or 78.2% of all dwelling-houses were connected to the Company's mains at the 31st December, 1948. This represents an increase of 194 or 4.8% over the figures of the previous year. The number of the population supplied with water direct to their houses from the mains of the Waterworks Company is estimated to be 8,214.

343 properties are provided with water by means of stand-pipes situate at convenient positions on the Island. This shows a decrease of 13 from the figure at 31st December, 1947. The number of the population supplied from public water mains by means of stand-pipes is estimated to be 891.

During the year under review an extensive scheme was formulated for the laying of new water mains and of extensions to existing mains. Extensions affecting eighteen roads involving the laying of 4,222 yards of mains were completed during 1948 or the early part of 1949. Furthermore, arrangements are in hand for the laying of another 2,124 yards in seven different roads.

*Rayleigh U.D.* At the end of the year approximately 97.9% of the dwelling-houses in the District, affecting approximately 98.3% of the resident population, were provided with a main water supply by the Southend Waterworks Company. The method of supply was direct to the houses apart from 1.1% of the properties and 0.8% of the population when the supply was by means of stand-pipes or from other premises where there was a main supply.

Samples of water were taken during the year from two shallow wells serving dwelling-houses in the District. Unsatisfactory results were obtained and negotiations were in progress at the end of the year to extend the main supply to these two properties.

During the year 8 houses formerly relying upon well and rain-water supplies were connected to the mains of the Waterworks Company. In additions, all the 26 new houses were connected to the main supply.

### **Drainage and Sewerage.**

*Benfleet U.D.* It is estimated that over 90% of the properties in the District are connected to the main drainage system. Nearly 150 dwelling-houses have their drains connected to Cesspools and some 400 houses and bungalows are provided with earth closets. These latter

are largely confined to the New Thundersley area which is mainly undeveloped.

During the year three premises were connected to the main sewer and seven to cesspools. Extensions or improvements were carried out to the drainage of 10 existing buildings.

*Canvey Island U.D.* There is a total of 766 connections to the main sewer affecting 1,449 properties. 122 connections were made during the year affecting 272 properties.

The 1939-45 War curtailed the continuation of the Council's policy of sewerage the areas of the District where this essential service is lacking. Main sewers are most necessary in a district such as Canvey Island with its peculiar circumstances of heavy clay sub-soil and the fact that it is below sea level at high water.

The post-war progress with regard to the extension of the main sewers as outlined in the special Supplement to my Annual Report for the Canvey Island Urban District for 1947 has been energetically pursued and it is gratifying to record that during 1948 a total of 2,924 yards were completed, embracing areas on the Maisonwyck and Clifton Estates. Almost all the properties on these two Estates affected by the new extensions have now been connected to the main sewer.

It is anticipated that at least another 2,200 yards of main sewer will be laid during 1949.

*Rayleigh U.D.* Most of the built up area is now sewerage and it is estimated that 87% of all properties in the area are connected to the main sewer. There still exists, however, several groups of houses which are too congested to rely on their present conservancy system of drainage and where extension of the sewer is the only solution to the nuisances which frequently arise. Unfortunately, no extensions took place during the year to deal with this problem, although it is hoped that the worst of these cases will be dealt with during the coming 12 months.

During 1948, 93 yards of new sewer were laid, this being an extension to a new housing estate. 25 new houses and 29 existing houses were connected to the main sewer during the year, the latter previously relying on a conservancy system of drainage.

There are approximately 330 properties connected to cesspools within the District.

#### **Public Cleansing.**

*Benfleet U.D.* Refuse was collected weekly from all accessible parts of the District and the service functioned satisfactorily.



Efforts to salvage all materials of value were continued and £1,350 was received from the sale of such materials.

*Canvey Island U.D.* For some years house refuse has been collected from communal bins sited at convenient positions throughout the Island. This system was superseded in June 1948, when a house-to-house collection was commenced, although only the built-up areas were affected. However, the system was later extended to cover the whole of the District.

*Rayleigh U.D.* Refuse and salvage are collected from house-to-house throughout the District, the collection being at weekly intervals in the main shopping area and at fortnightly intervals elsewhere. Regular collections were maintained throughout the year.

The refuse is disposed of by controlled tipping on the "Bradford" system in accordance with the recommendations of the Ministry of Health.

Night soil is collected at weekly intervals by the Council from 83 premises.

The collection of Salvage is undertaken by two women in conjunction with the refuse collection service. These employees have shown great enthusiasm for their work and it is largely through their efforts that the co-operation of the householders has been obtained. During the year 107 tons of salvage were collected, consisting of 96 tons of waste paper, 5 tons of rags, 16 cwt. of bones and 5½ tons of miscellaneous scrap. The income from the sale of these salvaged materials was £857 which represented an increase of £27 on the previous year.

#### **Factories Act, 1937.**

*Benfleet U.D.* There is a total of 58 factories on the Register and 37 of these employ mechanical power. 57 inspections were made and three defects found were remedied by the occupiers. No legal proceedings were taken. Also, 15 work places were inspected.

*Canvey Island U.D.* There are 11 factories on the Island and routine inspections were carried out during the year. One Informal Notice outstanding from 1947 was complied with during the year under review.

*Rayleigh U.D.* There are 49 premises registered as Factories within the District. Apart from one large furniture factory employing about 200 workers which opened during the year, all the factories are small and employ only a few workers. During the year 31 inspections of factories were made and as a result five defects were found which were later remedied.

### **Storage of Petroleum.**

Routine inspections in each of the three Districts were made during the year in respect of applications to store petroleum spirit. The number of licences issued during 1948 was as follows—Benfleet 24, Canvey Island 9, and Rayleigh 19.

### **Infectious Diseases.**

*Benfleet U.D.* 34 visits were made to premises after notifications of infectious diseases and 14 visits were made to contacts of such diseases. 27 houses were disinfected.

*Canvey Island U.D.* 62 visits were made to premises after notifications of infectious diseases. Of this number 35 visits were in connection with contacts of such diseases.

*Rayleigh U.D.* During the year 45 visits were made to premises for the purpose of investigating the circumstances associated with the occurrence of infectious diseases in the District and of contacts living locally of cases of infectious diseases occurring in other areas. Also, 15 properties were disinfected in connection with the occurrence of infectious diseases.

### **General.**

*Benfleet U.D.* The Sanitary Inspector's Department received 184 complaints during the year and these necessitated over 700 visits by the Inspectorial Staff. As a result, 164 Informal and 41 Statutory Notices were served and it was necessary to take proceedings in 6 cases. At the end of 1948 some 49 Informal Notices had not been complied with.

Altogether, a total of 2,831 visits and inspections were made during the year. Those matters which involved the majority of the visits and inspections were complaints, housing, drainage, refuse disposal, salvage, cleansing, meat inspection and visits under the Factories Act and the Shops Act.

*Canvey Island U.D.* A total of 2,748 inspections and visits were made for Public Health purposes during the year. As a result, 104 Informal Notices were served of which 73 were complied with by the end of the year. Also, 21 Informal Notices outstanding from 1947 were complied with during 1948. 4 Statutory notices were served during the year.

Of the total number of inspections and visits mentioned, a high proportion were in connection with extensions of the main sewer, housing investigations and the brown-tail moth nuisance.

*Rayleigh U.D.* During the year 1,770 visits and inspections were made with the result that 140 cases necessitated the serving of Notices including 54 Statutory Notices. By the end of the year 38 Notices were still to be complied with.

The above mentioned visits and inspections were made in connection with the repair and improvement of houses, the abatement of overcrowding, the re-housing of persons inadequately housed, building licence applications, the requisitioning of property, the storage of petroleum, the keeping of animals, eradication of rats and mice, the administration of the Factories Act, Food and Drugs Act, Shops Act, and the Milk and Dairies Order, enquiries into cases of infectious diseases, food poisoning, water supplies, moveable dwellings, inspection of food, etc.

## SECTION "D."

### HOUSING.

#### **Benfleet U.D.**

During the year 131 complaints regarding housing defects were received and 121 notices were served. On the 31st December, 1948 there were still 43 notices which remained outstanding. Property owners generally carried out the works required with reasonable despatch.

There were 511 applications for Council Houses on the waiting list on 31st December 1948. Since the end of the war 82 Council Houses have been completed and occupied. In addition, 29 families were rehoused in requisitioned dwellings. No houses are allocated until the Housing Committee has considered a report from the Senior Sanitary Inspector as to the housing conditions of the applicants, and priority is given to families overcrowded within the meaning of the Housing Act, 1936.

The Sanitary Inspector's Department is responsible for the issue of Building Licences for all building operations, except new dwelling-houses. During 1948 a total of 551 licences were issued for housing repairs and the value of such repairs was estimated to be £44,810. Also, 2 licences were issued in respect of War damage rebuilds, 3 in respect of conversions and adaptations and 69 for other building repairs. These involved a further combined value of £7,754. Licences for repairs were issued only where the work involved would not conflict with the needs of new houses. Three additional units of accommodation were provided by means of conversions or adaptations to existing dwellings. A total of 38 new houses were built during the year.

### **Canvey Island U.D.**

A total of 88 new houses were erected during 1948. Of these, 39 were built by private enterprise and 49 by the Urban District Council. A further 11 Council Houses were under construction at the end of the year.

113 inspections and visits were made in respect of repairs carried out under the Housing Acts. 4 Statutory and 2 Informal Notices outstanding from 1947 and 2 Statutory Notices outstanding from 1946 were complied with during the year.

Every effort has been made to re-house cases of serious overcrowding and this has been achieved by accommodating such families in new Council Houses or in property requisitioned by the Council. Altogether, 10 inspections were carried out during 1948 in respect of people living in overcrowded conditions. At the end of the year there were nearly 400 applicants on the Council's housing list and the large majority of these were local residents.

The number of people awaiting housing accommodation does not represent the true housing position on Canvey Island as there are a large number of properties now used as permanent dwellings that were originally erected and used as summer holiday accommodation and week-end bungalows. These properties are not satisfactory for winter occupation and for continuous use as homes. Furthermore, the large influx of summer visitors adds considerably to the Island's housing difficulties.

### **Rayleigh U.D.**

There was a noticeable improvement during the year in the general fitness of houses within the District and the deterioration of properties which resulted from neglect and enemy action during the War years has now been largely made good. Owing to the shortage of alternative accommodation it has not been possible to deal by way of demolition with the remaining sub-standard dwelling-houses within the District, although this class of property forms only a small proportion of the whole. During 1948 repairs and improvements affecting 126 dwelling-houses were completed as a result of action by the Sanitary Inspector's Department.

The Council's housing list of persons requiring alternative housing accommodation was reviewed during the year and on the 31st December, 1948 there were 350 families awaiting re-housing.

14 Council Houses were built during the year and also 7 houses were erected by private enterprise. Furthermore, 4 houses previously destroyed by enemy action were re-built. Since May, 1945 a total of 157 new houses have been built in the Rayleigh Urban District. Of these, 58 were Council Houses, 88 were built privately and 11 were war damage rebuilds.

A total of 86 families have been rehoused by the Local Authority since May 1945. 61 of these were in Council Houses and the remainder in requisitioned properties.

The District Council during 1948 issued 364 licences for the repair of dwelling-houses which involved a building value of £28,966. 68 licences were also issued for the repair of other buildings representing a value of £2,692.

## SECTION "E."

### INSPECTION AND SUPERVISION OF FOOD.

#### **Benfleet Urban District**

##### *Milk.*

At December, 1948, four farms used for the production of milk and 22 retail purveyors of milk were registered. Two of the producers are licenced by the Essex County Council to produce Accredited Milk and are periodically visited by Officers of that Authority. Ten samples of milk were taken for bacteriological examination and all proved to be satisfactory. 13 visits were made to cowsheds and 15 to dairies and milk shops.

Under the Milk (Special Designations) Orders, 1936 to 1946 three Dealers' Licences were issued in respect of Tuberculin Tested Milk and eight in respect of Pasteurised Milk.

##### *Meat Inspection.*

261 visits were made to the Ministry of Food Slaughter-house at Cross Farm, Hadleigh, and the carcasses and organs of 8,723 food animals were examined as detailed below:—

		Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	...	2,439	1,133	2,213	2,874	64
Number Inspected	...	2,439	1,133	2,213	2,874	64

*All diseases except  
Tuberculosis :*

Whole carcasses con- demned	...	1	Nil	5	4	3
Carcases of which some part or organ was condemned	...	569	214	4	68	3
Percentage of the number inspected affected with dis- ease other than Tuberculosis	...	23.37	18.88	0.4	0.4	0.25

*Tuberculosis only :*

Whole carcasses con- demned	...	7	23	1	Nil	2
Carcases of which some part or organ was condemned	...	342	404	3	Nil	3
Percentage of the number inspected affected with Tuber- culosis	...	14.02	38.57	0.02	Nil	7.8

*Food & Drugs Act, 1938.*

During the year 219 visits were made to various food premises and the following foods were surrendered by food traders as being unfit for human consumption:—

Eggs, 1,289; milk, 172 tins; bacon, 38lbs.; canned meat, 90 tins; fresh meat, 55lbs.; butter and margarine, 182½lbs.; fish, 76½ stone and 98 tins; vegetable foods, 177 tins; fruit and preserves, 149 tins; oranges, 471lbs.; apples, 28lbs.; dates, 2 boxes; miscellaneous foodstuffs, 14 jars and 36 tins.

Proceedings for non-compliance with the provisions of Section 13 of the Food and Drugs Act, 1938—Precautions against the contamination of Food—were taken in one instance and a fine of £2 was imposed.

The usual sampling was carried out by the Essex County Council who are the Food & Drugs Authority for the area.

#### *Ice Cream.*

At the end of 1948 there were a total of 33 premises in the Benfleet Urban District registered for the sale of Ice Cream in accordance with the provisions of the Food & Drugs Act, 1938. Two of these premises were registered in connection with the preparation of Ice Cream by the Cold Mix system. In all but these two cases, supplies of Ice Cream were obtained in bulk from outside the District.

16 samples of Ice Cream were submitted for bacteriological examination during the year and the results obtained showed that six were placed in Grade 1, four in Grade 2, two in Grade 3 and four in Grade 4. Results showing Grades 1 and 2 are considered to be satisfactory and those in Grades 3 and 4 as unsatisfactory. In addition, one sample of water ice was submitted for examination and the result obtained showed that it was of excellent bacteriological purity.

### **Canvey Island Urban District**

#### *Milk.*

At the end of the year six farms and other premises used for Dairies were registered. In addition, 20 retail purveyors were also registered.

Under the Milk (Special Designations) Orders 1936 to 1946 two licences to sell Tuberculin Tested Milk and two licences to sell Pasteurised Milk were granted during the year. In each case the licence issued was supplementary for the retail sale of the milk within the Canvey Island U.D.

#### *Ice Cream.*

There were 30 premises registered for either the sale or manufacture of Ice Cream at the end of 1948.

#### *Meat and other Foods.*

There are no slaughter-houses in the District.

Butchers' shops were periodically inspected throughout the year and the meat therein examined.

Other food shops have been inspected during the year and the food examined. As a result, the following foods have been surrendered by traders as being unfit for human consumption:—

Canned meat, 67 tins; fish, 424lbs, 31 tins; milk, 134 tins; fruit, 4,774lbs., 32 tins; vegetables, 35 tins; sugar, 14lbs.; eggs, 48; miscellaneous foodstuffs, 40 tins, 56 jars.

### Rayleigh Urban District

#### Milk.

On the register of dairymen at the 31st December, 1948 there were 16 producers (including 3 producer retailers), 2 shops from which milk is sold in sealed bottles as received from a registered dairy, and 4 firms who retail milk in the District from vehicles and who are registered at dairies situate outside the District.

The following licences have been issued by the District Council and the Essex County Council for the production and distribution of Graded Milks.

	<i>Tuberculin Tested</i>	<i>Accredited</i>	<i>Pasteurised</i>
Producers	2	3	—
Retailers	2	—	2

156 visits were made to producers' and retailers' premises and samples of milk were taken and submitted for analysis as to the cleanliness of production, bottling and distribution, with the following results:—

	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Tuberculin Tested Milk	16	—
Accredited Milk	21	1
Pasteurised Milk	16	—
Ungraded Milk	48	1

Samples of milk were also taken by the Essex County Council's Officers from producers' premises which are licenced by that Authority for the production of Graded milk. These were examined as to cleanliness of production with the following results:—

	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Tuberculin Tested Milk	15	—
Accredited Milk	17	1

Most of the milk sold within the District is pasteurised and 16 samples were taken and submitted to a phosphatase test which records the adequacy of the heat treatment. With the exception of one, all the samples were reported as having been adequately heat treated.



### Meat Inspection.

A Ministry of Food Slaughter-house is situated within the Urban District and serves a population of approximately 120,000. The following table gives a summary of the carcasses inspected and condemned during the year:—

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed ...	1,789	973	440	4,009	352
Number Inspected ...	1,789	973	440	4,009	352
<i>All diseases except Tuberculosis :</i>					
Whole carcasses condemned ...	1	7	1	13	7
Carcasses of which some part or organ was condemned ...	416	150	2	12	9
Percentage of the number inspected affected with disease other than Tuberculosis ...	23.3	16.1	0.6	0.6	4.5
<i>Tuberculosis only :</i>					
Whole carcasses condemned ...	9	25	1	—	8
Carcasses of which some part or organ was condemned ...	131	267	—	—	18
Percentage of the number inspected affected with Tuberculosis ...	7.8	30.0	0.2	—	7.3

### Ice Cream.

There were no manufacturers of ice cream within the District on the 31st December, 1948 although eight premises were registered for the sale of Ice Cream. Ice Cream is also sold in three Cafes and a Cinema, but these are exempt from registration.

During the year 7 samples of Ice Cream were taken from retailers and the results obtained showed that four were placed in Grade 1, one in Grade 2 and two in Grade 4.

#### *General Foodstuffs.*

The following foodstuffs weighing approximately 15 cwts. were voluntarily surrendered by shopkeepers during the year as being unfit for human consumption.

Canned Meat, 163lbs.; Other Canned Foods, 142lbs.; Fish, 1,365lbs. and Miscellaneous Foods, 32lbs.

#### *Adulteration of Food & Drugs.*

The Essex County Council administer those portions of the Food & Drugs Act, 1938 which relate to adulteration. During 1948 it is understood that 27 samples were taken and analysed and all were found to be genuine.

## SECTION "F"

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

#### **Benfleet Urban District**

I am very pleased to report that there has been no major incidence of any infectious disease in the Benfleet Urban District throughout the past year.

Altogether, there were 144 cases of infectious disease notified during the year. This compares very favourably with the 401 cases which occurred during 1947 and represents an incidence of 0.73 for the whole population for the year. From the classified summary of these 144 cases to be found on page 40 it will be noticed that 57% were under 5 years of age, 31.25% were between 5 and 14 years and 11.75% over that age. It is gratifying to note that there is a complete absence of any confirmed case of the more serious infectious diseases.

The Measles incidence would appear to be in keeping with the usual biennial periodicity which is peculiar to this infectious disease. The number of cases of Whooping Cough is a little less than last year and is about the average for the past five years.

Among the 18 cases of Scarlet Fever notified, the contacts of two separate cases were engaged in connection with food. One was employed

in a retail grocery shop and the other in a dairy farm, both outside the District. Another contact was employed as a School-teacher in one of the Essex Education Authority's schools.

A total of 10 cases were admitted to the Billericay Isolation Hospital from the Urban District during the year. One of these cases was suffering from Whooping Cough and was transferred from the Rochford General Hospital. The child was not notified locally and is therefore not shown on the classified summary on page 40. In addition, one case of suspected infectious disease was admitted to the Southend General Hospital for investigation.

The following summary of certain infectious diseases gives a ready comparison with previous years.:—

<i>Infectious Disease</i>	1944	1945	1946	1947	1948
Acute Pneumonia ...	16	14	5	6	7
Cerebro-spinal Fever ...	—	1	—	—	—
Diphtheria ...	—	—	3	—	—
Erysipelas ...	6	6	4	8	6
Infectious Hepatitis ...	20	26	56	20	3
Measles ...	20	372	13	254	38
Poliomyelitis ...	—	1	1	1	—
Scarlet Fever ...	18	40	14	16	18
Whooping Cough ...	143	12	20	87	69

#### *Poliomyelitis.*

There were no confirmed cases of Infantile Paralysis in the District during the year.

One suspected case was notified by a general practitioner and removed to the Billericay Isolation Hospital for investigation. The patient was a boy aged seven years and the signs were suggestive of paralysis. However, the hospital authorities were unable to confirm that the child was suffering from Poliomyelitis.

#### *Smallpox.*

Although there were no cases reported during the year, the following contacts of imported cases required very careful surveillance and supervision by the Inspectorial Staff.

In March I was notified that the m.v. RAKAIA had docked at the Port of London from New Zealand and that a suspected case of Modified Smallpox had been removed to hospital on the ship's arrival. One of the crew, a Steward, proceeded to his home in this District, thus necessitating supervision.

The same month, an Army Officer and his family were notified to me by the Medical Officer of Health for the Port of Southampton as being possible contacts of a case of Smallpox which had occurred on the h.m.t. ASTURIAS and which had been landed at a foreign port some 19 days previously. This Officer was a member of the Indian Army and was proceeding to South Benfleet with his family. Routine surveillance was requested and carried out.

During October the Medical Officer of Health of the Port of London advised me that the s.s. STRATHNAVER had arrived in the United Kingdom and that a case of Smallpox had been landed at a foreign port some seven days previously. Two contacts who were proceeding to this area were accordingly brought to my notice.

#### *Typhoid Fever.*

One contact of a case which occurred in the Southend General Hospital was brought to my notice. The necessary precautions were taken and there were no developments.

At the request of the Ministry of Health a local resident who had been employed by a London firm in the manufacture of synthetic cream and who was suspected to be a typhoid "carrier," was kept under observation locally for some weeks.

The suspicion that this man was a "carrier" of disease arose out of the fact that an outbreak of Paratyphoid Fever, which occurred at Eastbourne, had been attributed to infection thought to have emanated from a synthetic cream manufactured by the alleged "carrier's" employers. Further, as a result of the bacteriological examination of specimens taken from the employees at the factory, evidence was shown that this particular individual may have been responsible for the infection.

The directions of the Ministry of Health were closely followed with the whole-hearted co-operation of the suspected "carrier." Numerous specimens of faeces and urine were submitted to the local Public Health Laboratory for bacteriological examination and it was with a considerable sense of relief, particularly for the individual, that all results proved negative and showed that there was no further cause for suspicion.

#### *Infectious Diseases occurring among residents notified outside the area.*

It will be recalled that in my Annual Report for last year, reference was made to a case of Cerebro-spinal Meningitis with Poliomyelitis occurring under this heading.

This patient, a girl aged 15½ years and a resident of the Thundersley Parish, was first admitted to the Rochford Hospital in December, 1947. There she was diagnosed as Cerebro-spinal Meningitis and transferred

the following day to the Billericay Isolation Hospital. Whilst at Billericay, it was discovered that the girl was suffering from Infantile Paralysis as well. In January, 1948 she was transferred once more, this time to the Oldchurch Hospital, Romford. There she remained until being discharged home in August, 1948. The paralysis which, at the onset, developed in the patient's left arm and leg, had been remedied considerably by the time she left the hospital as an In-patient. However, since that time she has continued to attend a local hospital for exercises and physiotherapy. In February, 1949 there was a great improvement although she continues to receive treatment for her "dropped foot" as a result of the paralysis.

#### *Non-notifiable Infectious Diseases.*

The only source of available information for collating details of cases coming within this category is the reports of Head Teachers from local Maintained Schools of the Essex Education Authority on the absence of children through infectious illness. These reports revealed that Mumps and Chicken Pox were more prevalent than the previous year. Nearly 40 cases of Mumps and 120 cases of Chicken Pox were brought to notice in this way. These figures, coming as they do from non-medical sources, are necessarily incomplete and do not include children below School age who so often contract disease from other members of the family of school age. However, the figures provided are a very useful guide.

#### *Tuberculosis.*

A total of 23 new cases were notified locally for the first time during the year, in accordance with the Public Health (Tuberculosis) Regulations, 1930. In addition, 14 cases were brought to notice by other means. Of these latter, two were discovered from the death returns, one through an admission notice from one of the Tuberculosis Hospitals and the remaining eleven were inward transfers from other areas. The areas concerned were Middlesex (2), East Ham (1), Stepney (1), West Ham (1), Ilford (1), Pitsea (1) and County Borough of Southend (4). All these cases are classified in the table below.

It is regretted that 16 people died from Tuberculosis during the year as shown on the following table. Of these cases, 14 were notified since 1945. The male death from Non-pulmonary Tuberculosis refers to a child aged 1½ years who was notified by the London Hospital on the 14th July, 1948 as suffering from Tuberculous Meningitis and who died four days later in that same hospital.

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
Notifications	8	11	1	3
Inward Transfers, etc.	8	5	1	—
Deaths	8	7	1	—

### *Diphtheria Immunisation.*

During the year 265 children received a full course of primary immunisation through attendance at sessional clinics and 67 children were immunised by private arrangement with family doctors. Also, 56 school-children received reinforcing injections. A total of 556 injections were given at sessional clinics during the year.

Since 1941, 3,228 children have received a full course of immunisation treatment at sessional clinics and many others have been immunised privately by their own doctor. Of this figure, 834 are now over 15 years of age and are therefore outside the scope of the percentages mentioned below.

At the end of the year it was estimated that the percentage of the child population considered to be immunised against Diphtheria was as follows:—

Under 5 years	...	...	...	...	61.6
5 - 14 years	...	...	...	...	75.2

### **Canvey Island Urban District**

The total number of cases of infectious diseases notified by general practitioners during the year was 147. This represents an incidence of less than 1½% for the whole population.

From the classified summary of these 147 cases to be found on page 41 it will be noticed that 45% were under 5 years of age, 51% were between 5 and 14 years and 4% over that age.

As mentioned in the special Supplement to my Annual Report of last year, the incidence of infectious diseases on Canvey Island has, for many years been at a very low level. The following table will provide a useful comparison of the position over the past five years, although the increase in population is a factor which must also be considered when making the comparison. Between 1944 and 1948 the population increased by almost 3,000.

<i>Infectious Disease</i>	1944	1945	1946	1947	1948
Acute Pneumonia	14	8	2	6	3
Cerebro-spinal Fever	—	—	—	—	1
Diphtheria	1	—	1	—	1
Erysipelas	—	2	1	3	—
Infectious Hepatitis	3	4	12	8	2
Measles	1	125	66	31	137
Poliomyelitis	—	—	—	—	—
Scarlet Fever	6	6	1	1	—
Whooping Cough	3	—	—	2	1

It will be observed that the number of cases of Measles reported shows a marked increase and is the highest since 1945. Usually, Measles is prevalent in two yearly cycles, but for reasons which it is not possible to explain, there is a three year gap in the peak incidence for the year under review.

The exceedingly low incidence of the other main infectious diseases once again supports the fact of the healthy conditions prevailing.

#### *Diphtheria.*

One case of Vulvar Diphtheria occurred in January, the patient being a school girl of eight years old. Her small brother was also removed to hospital as a suspected case of Diphtheria, but pathological investigations proved negative as far as he was concerned. The confirmed case was very slight and the fact that she had been immunised during infancy probably helped in an uneventful and rapid recovery.

#### *Cerebro-spinal Fever.*

It is regretted that the one notified case of Cerebro-spinal Fever proved fatal. The patient was a male, aged 17 years, who was admitted to the Isolation Hospital the same day as the private doctor reported the case. Pathological investigation—the usual aid to confirmation of this disease—proved of no assistance to diagnosis in this case and the patient died after seven days in hospital.

Another suspected case—a lad of 13½ years—was admitted to the Isolation Hospital in June, but was later transferred to the Southend General Hospital where he died shortly afterwards from Tuberculous Meningitis.

#### *Acute Poliomyelitis.*

Only one case was notified during the year which regretfully proved fatal, but death was finally attributed to Tuberculous Meningitis and not Infantile Paralysis. The case—a girl of 15 years—was first admitted to the Billericay Isolation Hospital where her condition was diagnosed as Acute Poliomyelitis. As the use of a Drinker's Respirator was necessary, she was immediately thereafter transferred to Rush Green Hospital, Romford, for treatment for respiratory paralysis. At this latter hospital the girl was considered to be a case of Poliomyelitis until an examination of the Cerebro-spinal fluid revealed tubercle bacilli, thus enabling the Physician in charge of the case to establish a definite diagnosis of Tuberculous Meningitis. Streptomycin was administered for five days without avail.

### *Smallpox.*

It is gratifying to note that Smallpox was completely absent from the District during the year and no contacts of imported cases were brought to my notice.

### *Non-notifiable Infectious Diseases.*

The only source of available information for collating details of cases coming under this heading is the reports of Head Teachers from local Maintained Schools of the Essex Education Authority on the absence of children through infectious illness. These reports revealed that 59 cases of Mumps and 29 cases of Chicken Pox occurred during the year. Such information, being from non-medical sources, is necessarily incomplete and does not include children under school age who often contract infectious complaints from their older brothers and sisters. However, the figures provided by the School Authorities are a very useful guide.

### *Infectious Diseases occurring among residents notified outside the area.*

Only one such case was reported during the year. The patient was a girl of 17 years who was admitted to the Rochford Hospital by a local doctor as a possible case of Acute Appendicitis. A specialist is understood to have been called in and gave a tentative diagnosis of Paratyphoid Fever. Accordingly, the case was removed to the Billericay Isolation Hospital where appropriate investigations were carried out. These investigations proved negative and it was thought that excessive consumption of certain food may have been responsible for the girl's illness. She was discharged home after 12 days in hospital.

### *Tuberculosis.*

The Tuberculosis Register for Canvey Island showed a reduction of four cases at the end of the year as compared with the position at the end of 1947.

In accordance with the Public Health (Tuberculosis) Regulations, 1930, eight persons were notified locally for the first time as suffering from Tuberculosis. In addition, seven cases were brought to notice by other means. Of these latter, one was discovered when an admission notice was received from one of the Tuberculosis Hospitals and the remaining six were transfers from other areas, the previous places of residence being London (4), Brighton (1) and Nottingham (1). All these cases are classified in the table below.

It is regretted that eight deaths occurred from Tuberculosis during the year, and are summarised below. Two of these—a lad of 13 years and a girl of 15 years—died from Tuberculous Meningitis and are the



subject of a separate report earlier in this Section. Six of the cases which died had been notified since 1945.

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
Notifications	2	3	1	2
Inward Transfers, etc.	1	4	—	2
Deaths	5	1	1	1

#### *Diphtheria Immunisation.*

A total of 187 children completed a full course of primary Immunisation through attendance at sessional clinics and in addition, 15 children were immunised by private arrangement with family doctors. Furthermore, 29 school children who had previously been immunised during infancy received reinforcing injections. Altogether a total of 404 injections were given at sessional clinics during the year.

Since 1941, 1603 children have received a full course of immunisation treatment at sessional clinics and many others have been immunised privately by their own doctor. The following percentage figures in respect of the position at the 31st December, 1948 are based on the present estimate of the child population and only include those immunised locally who are now within the age limits. In addition, many children who have migrated with their parents from the Greater London area no doubt received immunisation treatment in their previous area of residence. This question of migration at Canvey Island is more clearly understood when it is appreciated that the population for the District has been increasing almost at twice the rate of any other normal area.

Percentage of children immunised—under 5 years=56.2.  
5 - 14 years=57.0.

#### **Rayleigh Urban District**

The Rayleigh Urban District has kept free from any undue incidence of infectious disease during the past year. The total number of notified cases was 116, and although considerably more than last year, represents a percentage of only 1.2 for the whole population over the twelve months. Of these cases, 30.4% were under 5 years of age, 57.4% were between 5 and 14 years and 12.2% above that age.

From the following summary of certain infectious diseases occurring during the past five years, it will be seen that the number of cases of Measles for 1948 was twice that of the previous year. Measles usually runs in two yearly cycles, but as remarked in respect of the incidence at Canvey Island, there is no apparent explanation for the fact that the latest periodicity covers a period of three years.

One case of Measles was admitted to the Isolation Hospital on account of the child developing Broncho-pneumonia—a common but serious complication of this infectious disease. Two children suffered from both Measles and Whooping Cough, one of whom was admitted to hospital.

Scarlet Fever shows the highest number of notifications since 1943. Most of the cases occurred in March and October and were chiefly confined to children of school age. One boy soldier developed Scarlet Fever whilst on leave.

A total of 13 cases were admitted to the Isolation Hospital during the year. This represents 11.3% of all notified cases of infectious disease. As will be seen below, only one such case regretfully terminated fatally.

<i>Infectious Disease</i>	1944	1945	1946	1947	1948
Acute Pneumonia ...	8	11	11	5	3
Cerebro-spinal Fever ...	—	—	—	—	—
Diphtheria ...	1	—	1	—	1
Erysipelas ...	3	6	7	13	6
Infectious Hepatitis ...	4	—	2	—	—
Measles ...	4	84	31	34	68
Poliomyelitis ...	—	—	—	—	1
Scarlet Fever ...	2	5	6	4	11
Whooping Cough ...	30	3	27	15	25

#### *Diphtheria.*

It is regretted that the one case of Diphtheria reported during the year proved fatal. The patient, a lad of 14 years and 10 months, worked in his father's shop at Hornchurch. He felt unwell on Friday on return from work and his private doctor was called in the next day. He was admitted to the Billericay Isolation Hospital on the Sunday afternoon and died late that same evening. He had not been immunised against Diphtheria.

Precautions were taken against the spread of infection and no further cases were reported.

#### *Poliomyelitis.*

A case of Infantile Paralysis was reported in early January, the patient being a little girl aged 3 years, who had been seen by the Orthopaedic Specialist at the Southend General Hospital as an Out-patient at the request of the private doctor.

The child first became unwell in December, 1947, and later developed a partial paralysis of the right leg. However, it would appear that the attack was slight and the patient was nursed at home.

The contacts of this case were kept under observation by the Inspectorial staff and there were no developments.

#### *Non-notifiable Infectious Diseases.*

The returns to Local Sanitary Authorities from Head Teachers of locally maintained schools on the absence of school-children through infectious illness is the only reliable source from which information can be collated concerning infectious diseases which are not compulsorily notifiable.

Through this means I was advised that 18 cases of Chicken Pox occurred during the year among children of school age. However, these figures are necessarily incomplete, coming as they do from non-medical sources and do not include children below school age who might contract an infectious illness when brought into the home by older brothers or sisters.

#### *Tuberculosis.*

During 1948 only three new cases were added to the Register and all were notified locally for the first time.

Six notified cases of Tuberculosis moved away from the District during the year and two persons were reported by the Tuberculosis Officer as having recovered from the disease. Unfortunately two women died from Pulmonary Tuberculosis during the year, one having been notified in 1941 and the other in 1947. This is the lowest death rate from Tuberculosis that Rayleigh has shown since 1944.

Accordingly, the register of persons suffering from Tuberculosis showed a reduction of seven names at the end of the year, as compared with 1947.

#### *Diphtheria Immunisation.*

A total of 187 children completed a full course of primary immunisation during 1948 through attendance at sessional clinics. In addition, 43 children received immunisation treatment by private arrangement with family doctors. Furthermore, 11 school children who had previously been immunised during infancy received reinforcing injections. Altogether a total of 540 injections were given at sessional clinics during the year.

Since 1941, 1488 children have received a full course of immunisation treatment at sessional clinics and many others have been immunised privately by their own doctor. The following percentage figures in respect of the position at 31st December, 1948 are based on the present

estimate of the child population and only include those immunised locally who are now within the age limits.

Percentage of children immunised—under 5 years=71.3.  
5 - 14 years=~~57.0~~ 79.3

---

### *Scabies.*

With reference to the reversion to pre-war procedure as referred to in my Annual Reports for 1947, it may be interesting to note that the treatment of Scabies is now considered by the Ministry of Health to be a responsibility of the private practitioner under the latter's terms of service in the provision of General Medical Services under Part IV of the National Health Service Act. However, at the doctor's discretion it is understood that cases can be referred to the Local Health Authority's Cleansing Station wherever this is practicable. At the moment, the County Council have no Cleansing Stations functioning in these Districts.

Section 85 of the Public Health Act, 1936 relating to the Cleansing of Verminous Persons (including Scabies) is still under the purview of the Local Sanitary Authorities.

## GENERAL REMARKS.

### *Rainfall.*

Details of the rainfall have been provided by the Southend Waterworks Company in respect of the records maintained at the Thundersley Reservoirs and by the Surveyor's Department of the Canvey Island Urban District Council in respect of that area.

The Thundersley record shows that rain fell on 154 day during the year, the wettest months being January and August and the driest being March and September. A total of 20.4 inches was recorded.

Rain fell on 149 days at Canvey Island and a total of 20.1 inches was recorded. The wettest and driest months were the same as those recorded at Thundersley except that a half inch more rain fell at Canvey in August.

### *Road Accidents.*

The following details provided by the Police Authorities relate to road accidents occurring in the three Urban Districts during 1948:—

Group of Road User	Killed	Seriously Injured	Slightly Injured
<i>Benfleet U.D.</i>			
Pedestrians under 15 years ...	—	3	5
Pedestrians 15 years and over...	—	3	19
Drivers ... ..	—	3	10
Motor Cyclists ... ..	—	7	7
Pillion Passengers ... ..	—	1	2
Pedal Cyclists under 15 years ...	—	—	6
Pedal Cyclists 15 years and over	—	7	10
Other persons ... ..	—	6	18
TOTALS ... ..	—	30	77

Group of Road User	Killed	Seriously Injured	Slightly Injured
<i>Canvey Island U.D.</i>			
Pedestrians under 15 years ...	2	—	5
Pedestrians 15 years and over...	—	2	3
Drivers ... ..	—	—	—
Motor Cyclists ... ..	1	1	2
Pillion Passengers ... ..	—	—	2
Pedal Cyclists under 15 years ...	—	—	—
Pedal Cyclists 15 years and over...	—	3	5
Other persons ... ..	—	1	4
TOTALS ... ..	3	7	21

Group of Road User	Killed	Seriously Injured	Slightly Injured
<i>Rayleigh U.D.</i>			
Pedestrians under 15 years ...	—	2	3
Pedestrians 15 years and over...	—	3	7
Drivers ... ..	—	—	9
Motor Cyclists ... ..	—	5	4
Pillion Passengers ... ..	—	—	1
Pedal Cyclists under 15 years ...	—	6	2
Pedal Cyclists 15 years and over...	—	6	12
Other persons ... ..	—	1	23
TOTALS ... ..	—	23	61
Totals for three Districts ...	3	60	159

*Brown-tail Moth—Canvey Island.*

With reference to my report for the Canvey Island Urban District for 1947 I am pleased to mention that the investigations which were in progress at the time of going to print for that Report have now been completed.

The great interest that has been taken in this matter by Baron Charles de Worms of the Department of Entomology of the British Museum and the officials of the Ministry of Agriculture and Fisheries and later on representations from the District Council, have resulted in a survey of the whole Island being carried out in relation to the areas of infestation. The survey which was completed by the end of 1948 was undertaken by the Ministry of Agriculture and Fisheries without cost to the Local Authority.

Although the Ministries of Health and of Agriculture and Fisheries had no power to grant financial assistance for the eradication of the pest, the menace caused by the damage to fruit and other trees and the irritating rash caused by human beings coming into contact with the hairs of the grub became so real that the Council considered and finally approved of an expenditure, which was estimated at £800, for the elimination of this pest. The work involved required that the whole of the infested areas should be sprayed with a 0.1% solution of D.D.T. At the time of going to print, the work has just been completed and it is believed that the undertaking was successful, although full details of the results are not yet known.

It is interesting to note that the spraying of such a large area for the eradication of a pest is a pioneering effort and the first ever to be attempted in this Country.

**Changes effected by the National Health Service Act, 1946.**

The following is a brief summary of the changes in administrative procedure of certain branches of the Health Services in these Districts since the National Health Service Act, 1946 came into operation on the 5th July, 1948.

(a) *Infectious Disease.*

Under the Tenth Schedule of the Act, the District Medical Officer of Health is required to send, within 12 hours of receipt, a copy of each notification of Infectious Disease and Food Poisoning received from local Medical Practitioners to the Local Health Authority, this being the Essex County Council.

District Councils are still required to make appropriate payments for notifications received to the doctors concerned, but the Local Health Authority undertakes to reimburse the Local Sanitary Authority for each copy of notification submitted by the Medical Officer of Health.

(b) *Tuberculosis.*

The clinical side of the prevention of Tuberculosis now comes

under the purview of the North-East Metropolitan Regional Hospital Board whose scheme provides for diagnosis and treatment of persons suffering from Respiratory and Non-Respiratory Tuberculosis.

The Tuberculosis Clinic at South Benfleet, previously administered by the Essex County Council, is now part of the Hospital Board's services and serves the Canvey Island, South Benfleet and Thundersley areas. The Chest Physician (previously known as Tuberculosis Officer) in weekly attendance at that Clinic is Dr. J. T. Brown, who is jointly in the employ of the Hospital Board and the Essex County Council. His administrative headquarters are at Thurrock Hospital, Grays.

The Hadleigh area, which was previously covered by the Tuberculosis Clinic at South Benfleet, has now been transferred to the Lancaster House Chest Clinic, Southchurch Road, Southend-on-Sea. This is the Regional Hospital Board's Tuberculosis Clinic for the Southend area. Residents from the Rayleigh Urban District also attend this Clinic and the Chest Physician in attendance is Dr. E. G. Sita-Lumsden.

Arrangements for Hospital and Sanatoria accommodation for persons suffering from Tuberculosis are now made by the Regional Hospital Board through the appropriate Chest Physician.

The Essex County Council, as Local Health Authority, have certain duties in respect of the prevention of Tuberculosis under Section 28 of the Act. The facilities at present provided in this connection include the provision of Open Air Shelters and the provision of convalescent and residential accommodation for the children of infected parents, and in due course, suitable rehabilitation facilities will be provided for those who are recovering from the malady. The County Council also carry out propaganda by Press and Film under the provisions of this Section.

(c) *Vaccination.*

The Vaccination Acts, 1867 to 1907 were repealed by the National Health Service Act, 1946. Vaccination against Smallpox is now entirely voluntary, as in the case of Immunisation against Diphtheria, and parents are no longer required to obtain the assistance of certain responsible persons if they do not wish to have their child vaccinated.

(d) *Ambulances.*

As is now generally known, all ambulance services operating in these Districts were taken over by the Essex County Council on 5th July, 1948, and further details relating thereto are shown on page 9 of the report.

(e) *Nursing.*

All midwifery and nursing staff of District Nursing Associations were taken over by the Essex County Council when the Act came into force and it is understood that a Non-Medical Supervisor of Midwives, etc. has recently been appointed to co-ordinate the Home Nursing and Health Visiting services in the South-East Essex Health Area.

(f) *Domestic Helps.*

This service has enlarged considerably since the 5th July, 1948 and the Local Health Authority have recently engaged a Domestic Help Organiser for South-East Essex to supervise this growing and important branch of the Health Services. Further details are to be found on page 10 of this report.

(g) *Administrative.*

Whereas the Essex County Council, before 5th July, 1948, administered centrally from Chelmsford all the branches of the Health Services coming within their purview as Welfare Authority, many are now administered locally through the County Council's Scheme of Decentralised Administration.

Under the Act, the Administrative County has been divided into eleven Health areas, 6 covering the Extra-Metropolitan Boroughs and 5 covering the remainder of the County. The South-East Essex Health Area covering these three Districts, also includes the Urban District of Billericay and the Rural District of Rochford. The South-East Essex Health Area Sub-Committee has a membership of 29 which includes three Councillors from the Benfleet Council, two from Canvey Island and two from Rayleigh. At present one member of a Voluntary Organisation in these Districts is also serving on the Sub-Committee.

The Decentralisation of those sections of the Health Services of the Local Health Authority which have been included in the Scheme is not yet complete, but it is understood that much will be accomplished in this direction during 1949. It is envisaged that decentralisation, when fully functioning, will more readily facilitate the residents of South-East Essex in taking full advantage of the Local Health Authority Services, e.g. Maternity & Child Welfare, Home Nursing, Health Visiting, Domestic Helps, Vaccination and Immunisation and the After Care of those suffering from Tuberculosis.

The administration of the Ambulance and Mental Health Services is still being maintained centrally by the Essex County Council at Chelmsford.



(h) *Local Sanitary Authority Aspects.*

The duties falling to the Medical Officer of Health of the Local Sanitary Authority and his staff have increased rather than decreased since the 5th July, 1948.

Strict vigilance must continue to be exercised in the prevention of the spread of infectious disease.

Liaison and co-operation with the Local Health Authority in the interests of the health of the local community is not only necessary, but essential for the success of the Health Service at large, and in particular its effectiveness in the interest of the private individual.

Part III of the Act (that falling to the Essex County Council as Local Health Authority) is not the only sphere in which liaison and co-operation is necessary. Part II embracing the Hospital and Specialist Services (administered by the Regional Hospital Boards and Hospital Management Committees) and Part IV covering the General Medical Services (administered by Local Executive Councils) also call for much co-operative assistance from the Local Medical Officer of Health to an enquiring public.

Furthermore, the bringing into force during 1948 of the National Assistance Act and the National Insurance Act has also called for more liaison work on the part of the local Health Department.

**Care of the Aged.**

It will be seen from my remarks on page 5 that there are many aged persons who permanently reside in these areas and many are not only aged but sick. Apart from the quiet and peaceful amenities to be found in these Districts, the predominance of the bungalow style of housing accommodation may be one of the factors which attracts large numbers of elderly retired people to South-East Essex.

With the average expectation of life rising throughout the Country it will be obvious that the urgent need for making adequate provision for the care of the aged is most necessary and the problem is a growing one. It is estimated that there are nearly seven million people in the Country who are over 60 years of age.

One particular problem in these Districts is the fact that there is no hospital. Another is the question of transport and of access in the winter months to cases living in unmade roads. Indeed, it would appear to me that the situation concerning the aged and chronic sick is a serious one and the problems involved will undoubtedly be difficult to overcome. However, the whole problem is being dealt with on a national level and the peculiar needs of these Districts will no doubt receive fair consideration although it is feared that the shortage of

hospital beds caused by the lack of medical and nursing staff may present serious difficulties as far as the chronic sick are concerned.

Many old people have illnesses which, if discovered earlier in life could have been remedied. Accordingly, I am of the opinion that the first step should be the investigation and assessment of the persons concerned at the onset of symptoms. This could only be done by admission to a General Hospital.

These people, the more chronic they become the less likely they are to be admitted to hospital and further, the longer they continue without treatment the longer they will take to respond to any treatment when it is given. If they are being treated at home by a general practitioner it is very likely that they will get less attention and treatment than if they went to hospital, because the general practitioner has fewer facilities and is more over-worked than the hospital doctor.

At St. Helier's Hospital, Carshalton, Surrey, there is at present in vogue a Department of Physiotherapy and Occupational Therapy catering specially for Out-patients. Many of the Out-patients attending have been assessed earlier at that Hospital as In-patients. To facilitate matters, the local social services have been mobilised—Red Cross, Women's Voluntary Services, Domestic Helps, etc.—and the patients are collected by suitable transport from their homes, taken to the hospital for the necessary treatment, and then returned to their homes at the end of the session. "Take the hospital to the home" is the theme behind this project. Such Clinics can be partly for treatment and partly for diagnosis. The doctor concerned at a Clinic of this nature should be of Consultant rank.

Another aspect on this problem of the care of the aged is the provision of suitable hostels for old folk under Section 21 of the National Assistance Act and the Essex County Council as Local Health Authority are already dealing with the matter.

There are many problems associated with the removal of non-sick old people from their homes. Many are not prepared to be uprooted during the eventide of their lives and tenaciously retain their independence and their right to remain in their own "castles."

Further developments are to be made by the County Council after 1950 whereby they propose, either by the construction of new or the acquisition and, if necessary, the adaptation of existing buildings, to provide further residential accommodation. The general intention is that each building will accommodate approximately 30 persons, both men and women, and to cater for the aged and infirm. Provision will also be made for married couples in these new buildings.

---

"Through the battle, through defeat  
Moving yet and never stopping.  
Pioneers! O pioneers!"

---

CLASSIFIED SUMMARY OF ALL INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1948  
(OTHER THAN TUBERCULOSIS)

Benfleet Urban District

Notifiable Disease	Cases included in Weekly Returns														Admitted to Hospital	Deaths	Distribution			Sex	
	At Ages																Hadleigh	St. Benfleet	Thundersley		
	At all ages	0 to 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over	M.							F.
Acute Pneumonia	7	2	—	—	—	1	—	—	—	—	2	1	1	—	—	7	—	—	5	2	
Cerebro-spinal Fever	(1)	—	(1)	—	—	—	—	—	—	—	—	—	—	(1)	—	—	(1)	—	—	(1)	—
Erysipelas	...	6	—	—	—	—	—	—	—	—	1	5	—	—	—	3	1	2	1	5	—
Infectious Hepatitis	3	—	—	—	—	1	1	—	1	—	—	—	—	—	—	—	—	1	2	1	2
Measles	...	38	2	5	2	9	4	14	—	1	1	—	—	—	—	10	14	14	17	21	—
Polio-myelitis	...	(1)	—	—	—	—	(1)	—	—	—	—	—	—	(1)	—	—	—	—	(1)	(1)	—
Scarlet Fever	...	19	—	(1)	2	3	1	8	1	1	1	—	—	8	—	5	8	6	12	7	—
Whooping Cough	(1)	69	8	9	14	13	6	17	1	1	—	—	—	(1)	—	28	15	26	26	43	—

N.B. The figures in parenthesis indicate the number of cases in which the diagnosis was corrected.

**CLASSIFIED SUMMARY OF ALL INFECTIOUS DISEASES NOTIFIED DURING THE YEAR  
1948 (OTHER THAN TUBERCULOSIS)  
Canvey Island Urban District**

Notifiable Disease	Cases included in Weekly Returns														Admitted to Hospital	Deaths	Sex	
	At Ages																M.	F.
	At all ages	0 to 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over					
Acute Pneumonia	3	—	2	—	—	1	—	—	—	—	—	—	—	—	—	—	1	2
Cerebro-spinal Fever	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	1	—
Diphtheria	2	—	—	(1)	—	1	—	—	—	—	—	—	—	—	—	2	—	1
Infected Hepatitis	2	—	—	—	—	—	1	—	—	—	—	—	—	—	—	(1)	—	1
Measles	137	4	9	16	20	14	72	—	1	1	—	—	—	—	—	—	67	70
Poliomyelitis	(1)	—	—	—	—	—	—	—	(1)	—	—	—	—	—	—	(1)	(1)	—
Whooping Cough	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

N.B. The figures in parenthesis indicate the number of cases in which the diagnosis was corrected.

CLASSIFIED SUMMARY OF ALL INFECTIOUS DISEASES NOTIFIED DURING THE YEAR  
1948 (OTHER THAN TUBERCULOSIS)

Rayleigh Urban District

Notifiable Disease	Cases included in Weekly Returns														Admitted to Hospital	Deaths	Sex			
	At Ages																M.	F.		
	At all ages	0 to 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over							
Acute Pneumonia ...	3	—	—	—	—	1	—	—	—	—	1	1	—	—	—	—	2	1		
Diphtheria ...	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1	1	—	
Erysipelas ...	6	—	—	—	—	—	—	2	2	—	—	1	1	—	—	—	—	2	4	
Measles ...	68 (1)	3	3	5	4	8	45 (1)	—	—	—	—	—	—	—	2	(1)	—	41	27	
Poliomyelitis ...	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Scarlet Fever ...	11 (1)	—	—	—	—	—	7	2	1	1	—	—	—	—	9	(1)	—	5	6	
Whooping Cough ...	25	1	3	2	3	2	14	—	—	—	—	—	—	—	—	—	—	17	8	
Food Poisoning ...	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1

N.B. The figures in parenthesis indicate the number of cases in which the diagnosis was corrected.

## INDEX

---

Acreage ... ..	2
Ambulance Service ... ..	9, 16, 36
Births ... ..	3-5
Brown-tail Moth ... ..	35
Building Licences ... ..	16, 18
Care of the Aged ... ..	38
Cerebro-spinal Fever ... ..	25, 28
Clinics ... ..	10
Condemned Food ... ..	19, 21-23
Deaths ... ..	3-8
Diphtheria ... ..	28, 31
Domestic Helps ... ..	10, 37
Drainage and Sewerage ... ..	12, 13
Factories Act, 1937 ... ..	14
Home Nursing ... ..	9, 37
Hospitals ... ..	10
Housing ... ..	16-18
Ice Cream ... ..	20, 22
Immunisation against Diphtheria ... ..	27, 30, 32
Infant Mortality ... ..	4-6
Infectious Diseases ... ..	15, 23-32, 35
Inspections .....	15, 16
Laboratory Service ... ..	9
Measles ... ..	23, 28, 30
Meat Inspection ... ..	18-20, 22
Milk ... ..	18, 20, 21
National Health Service Act ... ..	35-38
Non-notifiable Diseases ... ..	26, 29, 32
Notices, general ... ..	15, 16
Nursing in the Home ... ..	9, 37
Overcrowding ... ..	16, 17
Penny Rate, product of ... ..	2
Petroleum, storage of ... ..	15
Poliomyelitis ... ..	24, 25, 28, 31
Population ... ..	2
Public Cleansing ... ..	13, 14
Rainfall ... ..	33
Rateable Value ... ..	2

INDEX

Refuse Collection	...	...	...	...	...	13, 14
Road Accidents	...	...	...	...	...	33, 34
Salvage	...	...	...	...	...	14
Scabies	...	...	...	...	...	33
Scarlet Fever	...	...	...	...	...	23, 31
Sewerage and Drainage	...	...	...	...	...	12, 13
Smallpox	...	...	...	...	...	24, 29
Social Conditions	...	...	...	...	...	2
Stillbirths	...	...	...	...	...	3
Treatment Centres	...	.....	...	...	...	10
Tuberculosis	...	...	...	...	...	26, 29, 32, 35
Typhoid Fever	...	...	...	...	...	25
Unfit Food	...	...	...	...	...	19, 21, 23
Vital Statistics	...	...	...	...	...	3
Vaccination	...	...	...	...	...	36
Water Supply	...	...	...	...	...	11, 12
Whooping Cough	...	...	...	...	...	23, 24, 31





---

---

W. H. HOULDERSHAW LTD.

• Printers •

49-55, London Rd., Southend

---

---