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**URBAN DISTRICT OF
BENFLEET**

ANNUAL REPORT

OF THE

**MEDICAL OFFICER OF
HEALTH**

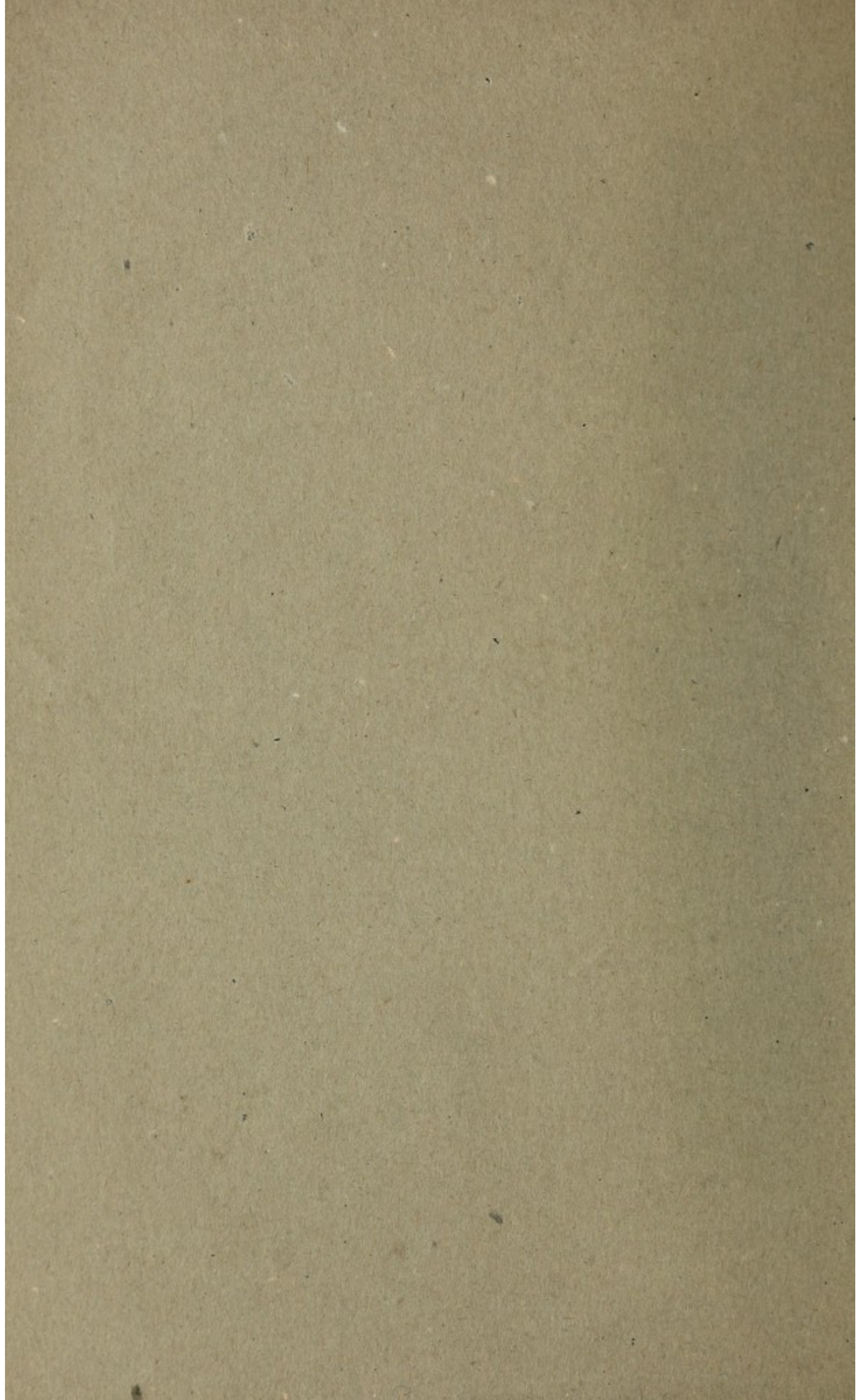
(Norman Lorraine, M.D., Ch.B., D.P.H., F.R.S.E.)

including **THE REPORT** of the

Sanitary Inspector

(J. E. GILBERT, M.R., San. I., M.S.I.A.)

for 1947



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Annual Report of the Medical Officer of Health for the Year 1947

PUBLIC HEALTH DEPARTMENT,
LONDON ROAD,
HADLEIGH, ESSEX.

To the Chairman and Members of the
Urban District Council of Benfleet.

Mr. Chairman and Gentlemen,

I have the honour of presenting for your consideration my Eighteenth Annual Report on the health and sanitary circumstances of your Urban District for the year 1947.

In accordance with Ministry of Health Circular 170/47 of the 31st December, 1947, this report is prepared on the lines of that for 1946, and is intended to be an interim report.

The Additional Sanitary Inspector to the Council—Mr. R. D. Prichard—resigned in October in order to take up another appointment. The vacancy was advertised and Mr. K. N. Price, Additional Sanitary Inspector of Bridgend Urban District Council was subsequently appointed. Mr. Price commenced duty in January, 1948.

Throughout the year, the sympathetic consideration and assistance of the Council has been a great help.

I am especially indebted to all members of the staff of the Department for their loyal co-operation and assistance.

I beg to remain,

Your obedient Servant,

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

June, 1948.

SECTION "A"—STATISTICS AND SOCIAL CONDITIONS
OF THE AREA.

Area (in acres)	6,360
Number of inhabited houses at 31st December, 1947 (accord- to Rate Book)	6,347
Registrar-General's estimate of resident population	19,720
Rateable Value	£112,960
Sum represented by a penny rate	£450

In the above and following statistics, several routine details are omitted as non-essential.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

		<i>Total</i>	<i>M.</i>	<i>F.</i>	
<i>Live Births :</i>	...	383	197	186	Birth Rate per 1,000 of the estimated resident population = 19.4
Legitimate	...	364	190	174	
Illegitimate	...	19	7	12	
<i>Still Births :</i>	...	5	2	3	Rate per 1,000 total (live and still) births = 12.9
Legitimate	...	4	1	3	
Illegitimate	...	1	1	—	
<i>Deaths :</i>	...	308	162	146	Death Rate per 1,000 of the estimated resident population = 15.6
<i>Deaths from puerperal causes :</i>					
Puerperal sepsis	...	...	...	...	—
Other maternal causes	...	...	...	...	—
<i>Death Rate of Infants under one year of age :</i>					
Total number of infant deaths	...	...	...	...	8
All infants per 1,000 live births	...	...	...	...	20.9
Legitimate infants per 1,000 legitimate live births	...	...	...	...	22.0
Illegitimate infants per 1,000 illegitimate live births	...	...	...	...	—

COMPARATIVE TABLE OF BIRTH AND DEATH RATES
DURING THE YEAR 1947.

	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 ...	20.5	12.0	41
126 County Boroughs and Great Towns (in- cluding London) ...	23.3	13.0	47
148 Smaller Towns Resi- dent Pop. 25,000-50,000	22.2	11.9	36
London Adm. County ...	22.7	12.8	37
Benfleet U.D. ...	19.4	15.6	21

The Infant Mortality Rate is the most sensitive index of the health of a community and the 1947 figure of 20.9 for the Urban District is most creditable. Although the death rate was a little higher than the Country generally, it is pointed out that a large number of residents are elderly people who have moved to the District from more congested city areas on retirement and 74% of recorded deaths were among those over 65 years of age.

TABLE OF BIRTH, DEATH AND INFANT MORTALITY RATES.

<i>Year</i>	<i>Birth Rate</i>	<i>Death Rate</i>	<i>Infant Mortality Rate</i>
1943 ...	16.3	16.2	47.2
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

DEATHS AT VARIOUS AGES DURING 1947.

Age	Deaths			Number of deaths which apply to District
	Number in District	Outward Transfers	Inward Transfers	
Under 1 year ...	1	—	7	8
1 and under 2	—	—	—	—
2 " " 5	—	—	1	1
5 " " 15	1	—	—	1
15 " " 25	—	—	1	1
25 " " 35	2	—	2	4
35 " " 45	3	1	3	5
45 " " 55	7	—	8	15
55 " " 65	28	2	18	44
65 " " 75	57	4	40	93
75 and upwards	107	5	34	136
TOTALS ...	206	12	114	308

CAUSES OF DEATH IN THE URBAN DISTRICT OF
BENFLEET DURING 1947.

	<i>Male</i>	<i>Female</i>	<i>Total</i>
All causes	162	146	308
1. Typhoid and Paratyphoid fevers	—	—	—
2. Cerebro-spinal fever	—	—	—
3. Scarlet fever	—	—	—
4. Whooping Cough	—	—	—
5. Diphthera	—	—	—
6. Tuberculosis of respiratory system	6	2	8
7. Other forms of Tuberculosis	—	—	—
8. Syphilitic diseases	—	1	1
9. Influenza	1	—	1
10. Measles	—	—	—
11. Acute polio-myelitis and polio-encephalitis	—	—	—
12. Acute infective encephalitis	—	—	—
13. Cancer of buccal cavity and oesophagus (M) uterus (F)	1	—	1
14. Cancer of stomach and duodenum	2	3	5
15. Cancer of breast	—	8	8
16. Cancer of all other sites	20	11	31
17. Diabetes	—	1	1
18. Intra-cranial vascular lesions	21	28	49
19. Heart diseases	57	52	109
20. Other diseases of circulatory system	8	5	13
21. Bronchitis	8	2	10
22. Pneumonia	9	9	18
23. Other respiratory diseases	2	2	4
24. Ulcer of stomach or duodenum	3	2	5
25. Diarrhoea under 2 years	—	—	—
26. Appendicitis	1	—	1
27. Other digestive diseases	3	1	4
28. Nephritis	3	4	7
29. Puerperal and post-abortive sepsis	—	—	—
30. Other maternal causes	—	—	—
31. Premature birth	2	—	2
32. Congenital malformation, birth injury, infantile distortion	2	—	2
33. Suicide	1	—	1
34. Road traffic accidents	—	1	1
35. Other violent causes	3	5	8
36. All other Causes	9	9	18

SECTION " B "—GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

(a) *Laboratory Service.*

By arrangement with the Ministry of Health the County Medical Officer is the Administrative Controller of all Laboratories at County Council Hospitals in Essex.

The Laboratory serving this area is located at St. Andrew's Hospital, Billericay, and deals with swabs and specimens relative to infectious diseases and associate conditions.

The County Council also have an arrangement with The Counties Public Health Laboratories, of Victoria Street, London, S.W.1, whereby all Local Authorities in the Administrative County can, without cost to themselves, send samples of water, food or sewage for bacteriological examination.

Examination of milk is undertaken by the Essex Institute of Agriculture at Writtle by arrangement with the Essex County Council.

(b) *Ambulance Service.*

Cases of general illness, etc., continue to be served by the Council's own ambulance and the ambulance located at the Billericay Isolation Hospital is available for the removal of cases of infectious disease.

This service will become a County Council commitment under the National Health Service Act.

(c) *Nursing in the Home.*

Arrangements for this service are at present in the hands of the different District Nursing Associations functioning in the area.

(d) *Treatment Centres and Clinics.*

These are provided by the Essex County Council and Centres operate in each Parish in the Urban District. Regular sessions under County Council arrangements are held and include Ante-Natal, Maternity & Child Welfare, Minor Ailments, Dental and Eye Clinics.

(e) *Hospitals.*

General medical and surgical cases are admitted to either the Southend General Hospital at Westcliff or the Southend Municipal Hospital at Rochford.

Cases of infectious disease are hospitalised as necessary in the Billericay Isolation Hospital by arrangement with the South East Essex Joint Hospital Board, of which the Benfleet Urban District Council is a constituent member.

Tuberculosis patients are dealt with by the District Tuberculosis Officer who arranges for patients to be admitted to certain hospitals and sanatoria as necessary. The Essex County Council are the responsible Authority for dealing with cases of Tuberculosis in the area.

Under the National Health Service Act the Hospital Service, embracing all hospitals serving the area, will be transferred to the North East Metropolitan Regional Hospital Board in July, 1948.

SECTION " C "—SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

Approximately 96% of the dwelling-houses and of the population of this District are supplied with water from the mains of the Southend Waterworks Company, and in all but eight cases, the water is supplied direct to the houses; the eight properties mentioned being served by standpipes. The supply is constant, sufficient in quantity and of high quality. Five samples of this water were taken during the year and all were highly satisfactory. Bacteriological and chemical examinations were also made of the raw water by the Analyst employed by the Southend Waterworks Company and by the Counties Public Health Laboratories. The results have been consistent with a pure and wholesome water suitable for public supply purposes.

Of the 4% of the dwelling-houses and population of this District 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 is outside the " Urban Fence " for town planning purposes. During the drier months of the year drinking water was delivered on 84 occasions to assist householders when their private supplies failed.

15 samples from private sources were taken during the year, 6 were reported as satisfactory, and 9 as unsatisfactory. The unsatisfactory samples were from 8 private dwellings. 2 were connected to a water main and remedial works were carried out in the case of the remaining 6.

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

Drainage.

17 premises were connected to the sewer and 2 to cesspools, and extensions or improvements were carried out to the drainage of 7 existing buildings.

Public Cleansing.

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 £1,236 was received for the sale of such materials.

Factories Act, 1937.

There are a total of 45 factories on the Register, 33 of these employ mechanical power. 20 inspections were made and 10 defects found were remedied by the occupiers. No legal proceedings were taken. Also, 5 work-places were inspected.

Infectious Diseases.

41 visits were made to premises after notifications of infectious diseases and 15 visits were made to contacts of such diseases. 6 houses were disinfected.

Rats and Mice Destruction.

The survey of the District was completed during the year, and the Rodent Operative visited a further 2,591 premises. 71 minor infestations were discovered and the necessary measures of eradication carried out. In addition, 7 premises were disinfested after the termination of the survey.

General.

A total of 2,037 visits and inspections were made during the year

SECTION " D "—HOUSING.

Fitness of Houses.

House-to-house inspections under the Housing (Consolidated) Regulations, 1925 and 1932 were suspended in September, 1939, owing to the difficulty owners would experience in obtaining building materials where extensive repairs were needed.

During the year 188 complaints regarding housing defects were received and 146 notices were served. 145 notices were complied with. There were 38 notices outstanding on the 31st December. Despite the very high building costs prevailing, property owners generally carried out the works required with reasonable despatch.

Re-housing.

There were 931 applications for Council houses on the waiting list at 31st December, 1947. Since the end of the war 32 Council houses have been completed and occupied. In addition, 40 families are housed

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.

152 visits were made to premises occupied by applicants for housing accommodation and reports were submitted to the Committee for consideration.

Issue of Licences.

The Department is responsible for the issue of Building Licences for all building operations except new dwelling houses. The following licences were issued:—

	<i>No. of Licences</i>	<i>Value</i>
Repairs	902	£55,192
War damage re-builds	10	£16,766
Conversions and adaptations	10	£2,808
Other building repairs	111	£6,131

Licences for repairs were issued only where the work involved would not conflict with the needs of new houses. 10 additional units of accommodation were provided. A total of 85 new houses were built during the year.

SECTION " E "—INSPECTION AND SUPERVISION OF FOOD. *Milk.*

At December, 1947, 4 farms used for the production of milk and 22 retailed purveyors of milk were registered. Two of the producers are licensed by the Essex County Council to produce Accredited Milk and are periodically visited by officers of the County Council. Six samples of milk were taken for bacteriological examinations; all were satisfactory. Six visits were made to cowsheds and five to dairies and milk shops.

Dealers' licences were issued under the Milk (Special Designations) Orders, 1936 and 1938 as follows:—

Tuberculin Tested Milk	5
Pasteurised Milk	8

Meat Inspection.

267 visits were made to the Ministry of Food slaughter-house at Cross Farm, Hadleigh, and the carcasses and organs of 8,069 food animals were examined as follows:—

	Number examined	% affected with Tuberculosis	% affected with other diseases
Cattle (excluding cows) ...	1,880	14.89	16.75
Cows	1,898	43.09	20.28
Calves	1,353	—	0.15
Sheep	2,874	—	1.04
Pigs	64	3.12	1.56

Food & Drugs Act, 1938.

154 visits were made to various food premises during the year and the following foods were surrendered by food traders as being unfit for human consumption.

Eggs, 1,048; fish, 330 cans; milk, 332 cans; vegetables, 89 cans; fish, 213 stone; meat, 188 cans; fruit, 51 cans; imported meat, 167 lbs.; miscellaneous foodstuffs, 530 lbs.

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

The facts and figures shown under Sections C, D and E have been provided by the Senior Sanitary Inspector.

SECTION " F "—PREVALENCE OF, AND CONTROL OVER,
INFECTIOUS AND OTHER DISEASES.

Generally speaking, it is with confidence that I can report a very satisfactory year in relation to the continued high standard of the District's health, especially when it is noted that there is almost a complete absence of the more serious infectious diseases. This is indeed remarkable when consideration is given to the fact that Acute Poliomyelitis (Infantile Paralysis) was more prevalent throughout the Country in 1947 than ever before in its recorded history.

A summary of the 401 cases of Infectious Diseases notified during the year will be found on page 18. Of these, 42.75% were under 5 years of age, 44.25% between 5 and 14 years and 13% over 15 years.

The number of notified cases of Infectious Diseases occurring within the Urban District admitted to the area Isolation Hospital at Billericay during the year was 18 as compared with 23 for 1946.

Diphtheria.

The complete absence of confirmed Diphtheria is very noteworthy and speaks well for the effect of Diphtheria Immunisation among a community where a high percentage of all children under 15 years have received protective inoculations (see separate report on page 14). Of the three suspected cases of Diphtheria admitted to hospital during the year, two were diagnosed as Tonsillitis and one as a sore throat. One of the former was a non-civilian.

Smallpox.

Although no cases were notified in the District, the outbreak at Grimsby in March was reflected locally when a merchant seaman, domiciled in Benfleet, became notified to me as a contact of a case—probably emanating from Grimsby—at a seaman's hostel at Stepney. This man was kept under observation during his local movements and I am glad to say that there were no developments.

Acute Poliomyelitis.

Owing to the serious nature of the Poliomyelitis outbreak—over 7,500 confirmed cases were notified in England and Wales during the months of July to December—the Ministry of Health initiated a special detailed questionnaire which was required to be completed for each confirmed case reported so that all relevant information would be available to assist those engaged in research as to the source of infection and control of the disease. This questionnaire was completed and submitted through the appropriate channels in respect of the one definite case notified in the District.

The case concerned was a male, aged 12 years, who was a physically defective child. He was admitted to the area Isolation Hospital at Billericay in October and subsequently transferred to another hospital owing to the development of complete Intercostal Paralysis and the necessity for the use of a Drinker's Respirator. Paralysis of both legs and the right arm was also present. He remained in a very dangerously ill condition for many weeks, but finally, he gradually improved and by agreement between the hospital authorities and the parents he was discharged home in January, 1948, to continue treatment privately. It is regretted, however, that information has since come to my knowledge that the boy died at home in March, 1948.

Numerous contacts of Poliomyelitis, in respect of cases notified outside the District, were brought to my notice during the epidemic period. Routine observation and careful investigation of all contacts was made by the Inspectorial Staff, with particular attention to those engaged in the handling of food, and I am glad to say that no developments occurred.

Enteric Group.

It will be noticed from the table of Infectious Diseases already referred to, that no cases of Typhoid or Paratyphoid occurred during the year, but it is desirable to mention that a case of Paratyphoid Fever was brought to my notice during the year by another Authority. It was stated that the patient, a resident of a Surrey Borough, had consumed some cockles at Benfleet whilst on a holiday visit. Investigations were made locally and samples taken and submitted for bacteriological examination. These specimens proved to be of a satisfactory standard. Other associates of the patient consumed cockles at the same time but suffered no adverse effects. Accordingly, there was no evidence to show that the consumption by the patient of cockles purchased in this District was connected with the particular case.

Comparative Table of Infectious Diseases.

From the following comparative table of certain infectious diseases dealing with the incidence in the District during the years 1943 to 1947, it will be observed that on an average, the number of cases of Scarlet Fever and Infective Hepatitis occurring during the year were well down, whereas Measles and Whooping Cough were appreciably up, especially the former.

The question of periodicity would seem to be largely responsible for the marked increase in the incidence of Measles during the year.

With regard to Whooping Cough, I am unable to say to what cause the increase in the number of cases can be attributed. It is widely known that outbreaks of this disease occur at irregular intervals, and by way of coincidence, this often happens when Measles is prevalent.

It is considered that the number of cases of Scarlet Fever compare very favourable with the incidence for England and Wales.

With regard to Infective Hepatitis (Jaundice) which became notifiable in the Eastern Region in 1943, I am glad to say that there were fewer cases notified than in 1946, the incidence being comparable with that for 1944 and 1945.

Infectious Disease	1943	1944	1945	1946	1947
Measles	186	20	372	13	254
Scarlet Fever	54	18	40	14	16
Whooping Cough	19	143	12	20	87
Diphtheria	2	—	—	3	—
Cerebro-spinal Meningitis..	—	—	1	—	—
Acute Poliomyelitis	—	—	1	1	1
*Infective Hepatitis	—	20	26	56	20

* First became notifiable locally in December, 1943.

NOTE.—This table does not cover the incidence of all infectious diseases, but is intended to give a comparison between those which are more generally active. A table of all infectious diseases occurring in the District during 1947 will be found on page 18.

Infectious Diseases among residents notified outside the area.

The cases included under this heading involve either those who contracted an infectious disease whilst receiving normal general hospital treatment or those who were admitted to such hospitals for investigation associated with conditions allied to certain infectious illnesses. Altogether, 5 children and 2 adolescents were involved and represented 4 cases of Measles and 3 cases of Cerebro-spinal Meningitis, one of these latter having Poliomyelitis as well.

In addition to the above mentioned cases, a soldier stationed at a Benfleet Camp was notified outside the District as suffering from Acute Poliomyelitis. It was ascertained that he made a satisfactory recovery and I am glad to state that no known cases developed among the many contacts involved.

Non-Notifiable Infectious Diseases.

Information on the incidence of infectious diseases within this category, e.g., Chicken Pox, Mumps, and Rubella (German Measles), is necessarily incomplete, but judging from reports submitted from Head Teachers of local maintained schools on the absences of children through infectious illness, Chicken Pox was particularly prevalent during the months of February and November when a total of over 60 cases were said to have occurred in the District.

Scabies.

The issue of Ministry of Health Circular 180/47 in December, 1947, announced that the Scabies Order, 1941—a regulation that was introduced as a War-time measure to combat an exceptional increase in Scabies which threatened to be detrimental to the war effort—would cease to operate after 31st December, 1947.

The effect on present procedure is that any cases of Scabies officially brought to the notice of the Department will be dealt with in the manner exercised before the introduction of the Scabies Order referred to, this being that normal statutory powers conferred on Local Authorities by the Public Health Acts will again be made applicable.

Only one case of Scabies was brought to my notice under the Scabies Order during 1947 and this was dealt with in the appropriate manner.

Venereal Disease.

Regulation 33B does not come within the purview of the Local Sanitary Authority.

Tuberculosis.

The total number of cases not previously recorded locally, coming to notice during the year was 37, representing 15 males and 22 females. 31 of these cases were connected with the lungs (Pulmonary) and 6 cases affecting other parts of the body (Non-Pulmonary).

Further, of this number, 20 were notified locally for the first time in accordance with the provisions of the Public Health (Tuberculosis) Regulations, 1930, and 17 came to notice by other means, chiefly as inward transfers from other areas, London and Southend being the most common places of previous residence. 20 cases transferred away from the Urban District to other areas during the year.

It is regretted that 6 men and 2 women died from Tuberculosis during the year. Of these, one was brought to notice on the local Registrar's Death Return, the case not having been previously notified, and two were notified by medical practitioners only a few weeks before death. The others had all been notified since 1944.

Anthrax.

During the month of May, a case of suspected Anthrax at the Ministry of Food Slaughter-house in Hadleigh was reported to me during the night hours.

The animal concerned—a young heifer—was found dead in a field and subsequently removed to the slaughter-house where it was "dressed." The Veterinary Surgeon in attendance suspected Anthrax and accordingly the carcass was destroyed by burning. On my advice, the three men engaged in "dressing" the animal took all necessary precautions as it was thought they may be possibly infected.

I am glad to record that the result of pathological investigations carried out by the Ministry of Agriculture and Fisheries proved to be inconclusive. The three men were kept under observation, but there were no developments.

Diphtheria Immunisation.

The immunisation against Diphtheria of all children up to and including the age of 14 years will wholly become the responsibility of the Essex County Council as Local Health Authority for the area after the National Health Service Act of 1946 comes into operation on the 5th July, 1948.

During 1947, regular sessional clinics were held centrally in the Urban District and co-operation of the parents generally was very good.

There was a slight drop in the number of children who received primary immunisation treatment as compared with the previous year but the figure of 293 was higher than the average for the last four years. However, the increasing number of children coming into the age groups suitable for immunisation is outpacing the number of children who come forward for immunisation. This is associated, of course, with the birth rate, migration, sense of responsibility of parents and factors over which it is difficult to exercise any control.

Since the issue to Local Authorities of a circular from the Chief Medical Officer to the Ministry of Health in June, 1947, on the question of reinforcement or boosting doses, a considerable number of children have come forward for this treatment. In his circular, Sir William Jameson recommended that a reinforcement dose of 1.0 cc. of T.A.F. (Toxoid Antitoxin Floccules) prophylactic should be given to children who had previously been immunised during infancy, on attaining the age of 5 years and again at 10 years. This reinforcement is considered necessary to ensure complete protection during the years of life when susceptibility is greatest and when the effect of infant immunisation is diminishing. In my opinion, this is a further important safeguard in the protection of the health of our children and against the continued menace of Diphtheria.

The revised practice advocated by the Ministry of Health recommends that advice as to Diphtheria Immunisation should be sought by parents when the infant is 8 months old and suggests that it is most desirable that primary immunisation should be completed before the first birthday.

A total of 537 injections against Diphtheria were given during the year, consisting of:—

First injections	...	...	234
Second injections	...	...	216
Booster injections	...	...	87

Since 1941, when the A.P.T. (Alum Precipitated Toxoid) scheme of Diphtheria Immunisation was introduced in the District, 2,963 children have received primary immunisation treatment at sessional clinics held centrally by arrangements through this Department. In addition to this figure, a considerable number have been immunised by private arrangement with family doctors. At the end of the year it was estimated that 675 of those immunised since 1941 were over 15 years of age and therefore outside the scope of the percentage figures mentioned below.

The estimated percentage of the child population considered to be immunised at 31st December, 1947, was as follows:—

Under 5 years	...	...	56.0
5—14 years	...	...	84.3

I would like to place on record my appreciation and thanks for assistance given by Voluntary Helpers from time to time at the Diphtheria Immunisation Clinics.

GENERAL REMARKS.

Deputy Medical Officer of Health.

In my Annual Report for 1946 I referred to the urgent necessity of appointing a permanent Deputy to act for me when I was unable to act. This matter came to fruition during the year and it is with pleasure that I record that Dr. J. C. T. Fiddes, Assistant County Medical Officer of Health in this area took up duty as my Deputy on 1st December, 1947.

Rainfall.

Rain fell on 132 days during the year and a total of 19.26 inches was recorded at the Southend Waterworks Company's Depot at Thundersley. March was the wettest month with 4.55 inches and August the driest with 0.14 inches.

Road Accidents.

The following are the details relating to road accidents occurring in the Urban District during 1947.

Group of Road User	Killed	Seriously Injured	Slightly Injured
Pedestrians under 15 years ...	—	3	4
Pedestrians 15 years and over ...	1	6	3
Drivers	—	1	5
Motor Cyclists	—	9	4
Pillion Passengers	—	2	5
Pedal Cyclists under 15 years ...	—	3	4
Pedal Cyclists 15 years and over	—	2	19
Other persons	—	6	19
TOTALS	1	32	63

Extension of Boundaries of County Borough of Southend-on-Sea.

The case for the Urban District Council's opposition against the Southend Corporation's application for the extension of boundaries to include the Urban Districts of Benfleet, Canvey Island and Rayleigh and the Rural District of Rochford was placed before the Assistant Commissioner of the Local Government Boundary Commission—Colonel C. W. G. Walker, C.M.G., D.S.O.—when he visited the District and met representatives of the Council in October.

This matter made considerable involvements for my Department, both in the necessity for making available of numerous statistical records and in the submission of detailed reports in support of the Council's case.

The Commission's Report for 1947 gives a very comprehensive review of Local Government policy throughout the Country, but although inference is made to the possible future of Local Government in Southend and District, no direct reference is made as to the outcome of Southend's application for the extension of her boundaries.

National Health Service Act, 1946.

Under this Act, the Essex County Council will become the Local Health Authority as from the Appointed Day—5th July, 1948.

During the year numerous reports have been submitted by me to the County Medical Officer giving information necessary for the compilation of the proposals which the County Council was required to submit to the Minister of Health in respect of Health Centres, Vaccination and Immunisation, Ambulance Services, the Prevention of Illness, Care and After Care, and other services under Part III of the Act.

Further, negotiations have taken place between your Council, the Essex County Council and neighbouring Authorities in respect of Decentralisation of Administration following the issue of Ministry of Health Circular 118/47 in July.

It would appear that radical changes in the administration of local health services are likely in this proposed Scheme whereby the Urban District will become a constituent member of a Divisional Area for the administration of the majority of the local health services under Part III of the National Health Service Act.

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1947

Notifiable Disease	Cases included in Weekly Returns													Admitted to Hospital	Total Deaths	Distribution			Sex	
	At Ages															Hadleigh	South Benfleet	Thundersley	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							
Scarlet Fever ...	16	—	—	1	2	—	9	3	1	—	—	—	—	6	—	5	9	2	6	10
Diphtheria ...	(3)	—	—	—	—	(1)	—	(1)	(2)	—	—	—	—	(3)	—	—	(1)	(2)	(2)	(1)
Measles ...	254	11	20	21	31	34	119	9	5	2	1	1	—	3	—	81	116	57	147	107
Whooping Cough ...	87	11	12	10	11	8	31	—	1	1	2	—	—	2	—	47	13	27	45	42
Cerebro-spinal Fever ...	(1)	—	—	—	—	(1)	—	—	—	—	—	—	—	(1)	—	—	(1)	—	—	(1)
Acute Poliomyelitis ...	2 (1)	—	—	—	—	—	—	2 (1)	—	—	—	—	—	2 (1)	—	(1)	—	1	2 (1)	—
Acute Pneumonia ...	6	—	—	1	—	—	2	—	1	—	1	—	—	—	—	4	—	2	3	3
Infective Hepatitis ...	20	—	—	1	—	2	2	3	5	7	—	—	—	—	—	12	2	6	15	5
Erysipelas ...	8	—	—	—	—	—	—	—	1	—	2	3	2	—	—	2	2	4	1	7
Dysentery ...	(1)	—	—	—	—	—	(1)	—	—	—	—	—	—	(1)	—	—	(1)	—	(1)	—
Malaria (contracted abroad)..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1	—
Puerperal Pyrexia ...	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	1
Ophthalmia Neonatorum ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—

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

