[Report 1955] / Medical Officer of Health, Bilston Borough.

Contributors

Bilston (England). Borough Council.

Publication/Creation

1955

Persistent URL

https://wellcomecollection.org/works/gqd7axff

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 https://wellcomecollection.org





BOROUGH OF BILSTON



REPORT

OF THE

Medical Officer of Health FOR THE YEAR 1955

To the Mayor, Aldermen and Councillors of the Borough of Bilston.

MR. MAYOR, MADAM AND GENTLEMEN,

I have the honour to present my Annual Report for 1955.

A. FOREWORD

The health of the community may be affected for the worse by unusual outside influences, *e.g.*, by exceptionally bad weather, by disasters such as earthquakes, or by unusual epidemics. This happened in Bilston in 1955. The town was visited by an epidemic of influenza during the winter and early spring, and as a result, the record of health compares unfavour-ably with that for 1954.

The main indications of this are the stillbirth rate and general death rate, both of which have risen sharply. Part of the rise in the stillbirth rate may be deceptive, as there has been a fall in the neo-natal death rate, so that the peri-natal death rate (stillbirth rate and neo-natal death rate combined) appears only slightly higher.

As might be expected, the unhealthiest Ward suffered most, and the gap between the death rate for the High Town Ward and those for the other Wards is wider than last year. A higher proportion than would normally be expected, of these deaths in the High Town Ward, are due to respiratory causes, and I am now inclined to the opinion that the atmospheric pollution in this Ward contributes much more to the ill health of the citizens, than do the admittedly bad housing conditions.

The rise in the tuberculosis death rate may be connected with the influenza epidemic, or may be due to the swing of the pendulum. The rate is only high when compared with the 1954 rate. It is no higher than that for 1952 or 1953. It may be that the good work done by the Mass X-ray Unit in the latter part of 1953 and the early part of 1954, in discovering infective cases, led to their removal from the pool of infection earlier than normal, and so reduced the death rate. If that were so, we could hope for a drop in the death rate from tuberculosis during 1956.

There is an exceptionally high death rate for Bilston during 1955, from coronary thrombosis, but respiratory infection may, of course, have contributed to the strain on the heart even in these cases. It is obvious, however, that this disease is now becoming fairly common in Bilston, but whether this is because the people of Bilston are working harder, smoking more cigarettes, or eating a richer diet, it is difficult to say.

1955 was also notable for a quite severe measles epidemic. The epidemic was, of course, expected, but the numbers were a little higher than was expected. There were 566 cases of measles, as against 459 in 1953. Measles is such a highly infectious disease, that the only hope of preventing epidemics of this nature lies in immunisation. An effective immunising agent

against measles has not yet been discovered, but it is possible that the work done on the polio virus may help in the years to come, in producing an effective protection against the equally dangerous virus of measles.

The atmospheric pollution as measured by soot fall was appreciably lower during 1955, but the lead peroxide cylinders did not record a marked reduction in the sulphur dioxide content of the atmosphere.

The programme of health talks to schools continued during 1955, and by the end of the year every school had been visited. I have noticed since then, an improvement in the cleanliness of the children at the periodic medical examinations at the schools, which may possibly be the result of these talks.

The sickness and death rates, of course, are unlikely to be immediately affected.

The Mass X-ray Survey was initiated during 1955, and the full report is therefore included in this Annual Report, in order to give as complete a picture as possible.

The response from the general public, despite intensive visiting by Health Visitors and School Nurses, was less than we had hoped for. Nevertheless, nine new cases were found, and the survey was, therefore, undoubtedly worthwhile.

As I feared, the number of deaths from road accidents increased during 1955, but this again is a swing of the pendulum, and does not indicate an increase in the average of three road deaths per year in Bilston.

The deaths from home accidents may likewise indicate a swing of the pendulum; the average number of home accidents per year in Bilston being five, and there having been seven in 1954 and three in 1955. The weekly figures of home accident cases treated at the Royal Hospital, Wolverhampton, however, showed a steady decrease during 1955, and I am therefore hoping that the deaths in 1956 will at least be no greater than those during 1955.

B. GENERAL PROVISIONS OF HEALTH SERVICES

1. SERVICES PROVIDED BY THE BOROUGH COUNCIL

Committees concerned with Health Matters:

HEALTH COMMITTEE...Councillor G. H. Evans
(Chairman)HOUSING COMMITTEE...Alderman E. W. Bold (Chairman)PREVENTION OF ACCIDENTS COMMITTEECouncillor H. Marriott (Chairman)PUBLIC WORKS COMMITTEE...Alderman J. V. Lavender
(Chairman)

FINANCE AND GENERAL PURPOSES COMMITTEE Alderman O. H. Jones (Chairman)

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health:

D. A. SMYTH, M.B., B.S., D.P.H. (Dunelm), Fellow of the Society of Medical Officers of Health, M.R.S.H.

> Chief Sanitary Inspector and Cleansing Superintendent: J. R. TART, Cert.S.I.B., M.S.I.A.

> > Senior Sanitary Inspector: J. RICHARDS, Cert.S.I.B.

Additional Sanitary Inspectors: J.W. BARBER, Cert.S.I.B.

T. C. MOSS, Cert.S.I.B. (Commenced 2nd May, 1955)

Pupil Sanitary Inspector: L. CAWDRON (Resigned 20th March, 1955)

Clerical Staff: Health:

B. J. BAKER Miss R. P. SHEFFIELD Miss H. PADDOCK

4

Cleansing: L. R. LITTLEWOOD (Part Time)

DUTIES OF THE SENIOR PUBLIC HEALTH OFFICERS

Medical Officer of Health

The duties are those laid down in the Public Health Acts of 1875 and 1936. The Local Government Act, 1933. The Housing Act, 1936. Factories Act, 1937. Food and Drugs Act, 1938, and certain other Acts, and the Orders and Regulations made thereunder, including in particular the Sanitary Officers (Outside London) Regulations, 1935. Six elevenths of my time is spent as Medical Officer of Health and five elevenths as School Medical Officer and Assistant County Medical Officer.

Chief Sanitary Inspector

The duties of the Chief Sanitary Inspector are those detailed in the above Acts and Regulations, and, in addition, he acts as officer of the Local Authority under the Rats and Mice (Destruction) Acts, 1919, Shops Act, 1934 and 1951, and Pet Animals Act, 1951; he also acts as the Local Authority's Cleansing Superintendent.

Senior Additional Sanitary Inspector

The Senior Sanitary Inspector acts as deputy for the Chief Sanitary Inspector, when the latter is absent through illness or other causes.

The Pupil Sanitary Inspector resigned on the 20th March.

As a fully qualified Sanitary Inspector, Mr. Moss, was appointed on the 2nd May, and for the second half of the year, therefore, the department was able to function fairly well.

2. GENERAL MEDICAL SERVICES

Fourteen family doctors practise in the Borough.

3. HOSPITALS

The area continues to be served by the Wolverhampton and Birmingham specialist and general hospitals and the Moxley and Kingswinford Isolation Hospitals.

SERVICES OF THE LOCAL HEALTH AUTHORITY

School Health

The School Health Service continued to work adequately.

I believe that it has been decided to supplement the work of the School Nurses with a Hygiene Assistant, and this should be a great help in 1956.

Maternal Health

The rise in the stillbirth rate is disquieting, although as I have indicated, some part of it may be balanced by the fall in the neo-natal death rate.

It is probably true to say of Bilston, as of the country in general, that the maternity service is good, but not good enough.

Child Health

I have been struck by the fact that while I seldom see children at the Welfare Centres with bad teeth, quite a number of the five and six year olds at school have three or more teeth with holes in. There could be a number of explanations for this, but one might be that mothers who attend the Welfare Centre learn to look after their children's teeth by providing an adequate diet, rationing sweets, and instituting toothbrush drill.

Immunisation

		Diphtheria				Smallpox				Whooping Cough			
		Ini	Initial Reinforcing			Va	Vacc. Re.Vacc.			Initial Re-inforcing			
		М.	F.	М.	F.	Μ.	F.	М.	F.	М.	F.	М.	F.
Under 1 2 3 4 5 6 7 8 9 10 11	··· ·· ·· ·· ·· ·· ·· ··	73 40 9 3 4 37 17 1 1 1 1 1 1	51 38 7 6 29 17 1 - -	- - 103 7 2 - - -	- - 2 67 9 8 - 1 -	35 1 1 - - 1 - - - -	23 4			54 4 2 1 - - - - -	29 7 3 3 1 2 		
12 13		_	_	-	_	_	_	-	_	_	-	_	-
14 15 and over	::	-	-	-	_	-	- 1	5	-1	-		-	-
TOTALS		187	156	112	87	39	29	5	3	63	45	-	-

Not enough children are being immunised to make absolutely sure that a diphtheria epidemic could not occur among the under-fives. So far, the odd cases of diphtheria that have occurred in the past two and a half years have been in schoolchildren, and as this section of the child population is fairly well protected, there has been no spread. The risk of spread among the younger children, however, remains, and there is also the risk of diphtheria in the young adult, who seldom bothers to renew his childhood immunity.

Ambulance Service

As far as I know, wireless control is still in abeyance, but I know of no case where life was lost or health unnecessarily endangered because the ambulance was over-long in arriving.

Mental Health

Much obviously remains to be done in this field. It is obvious from talks with housing applicants that there is a great deal of mental illness in Bilston, and though some of it may well be aggravated by housing conditions, the cause usually lies elsewhere. It seems probable that mental health like physical health depends a great deal upon upbringing in childhood.

C. STATISTICS AND SOCIAL CONDITIONS

Area (in	acres)		• ••				1,871
Populatio	n:						
(a)	1951 Cen	sus					33,464
(b)]	Registrar	Genera	l's Estin	mate fo	r mid-	year	
	1955						33,830
Population	n density	per acr	е				18
Rateable	Value of	District	1/4/55				£163,558
General H	Rate (195	5/56)					22s. 6d.

The total number of factories in the town is 171. These can be listed as follows:—

Holloware			 7
Iron and Steel			 21
Shoe Repairers			 14
Engineering			 72
Food Preparing I	Premise	es	 14
Woodwork			 8
Clothing Manufa	cturers		 3
Enamellers			 3
Undertakers			 1
Goods Transport			 1
Glassware			 1
Printers			 3
Brass Founders			 4
Builders			 4
Brush Manufactu	rers		 1
Petrol Storage		1.	 1
Stonemasons			 2
Laundry			 1
Coal Merchants			 . 3
Miscellaneous			 7

Action taken under Part 1 and Part 8 of the Factories Act, 1937, is tabulated as follows:----

TABLE A

Part 1 of the Act.

Inspections for purposes of provisions as to health.

	Number on	Number of					
Premises	Number on Register	Inspections	Written Notices	Occupiers Prosecuted			
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Autho- rities	16	-	-	-			
Factories in which Section 7 only is enforced by the Local Authority	157	34	6	-			
Other Premises in which Section 7 is enforced by Local Authority	17	-	-	-			

Cases in which defects were found.

			Refe	Number of cases in which	
Particulars	Found	Remedied	To H.M. Inspector	By H.M. Inspector	prosecutions were instituted
Want of cleanliness	1	1	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable Tem- perature	-	-	-	-	-
Inadequate Ventila- tion	2	2	-	-	-
Ineffective drainage of floors	_	_	_	_	-
Sanitary Conveni- ences unsuitable or defective	_	-	-	_	_
Insufficient	-	-	-	-	-
Not separate for sexes	-	-	-	-	-
Other Offences against the Act (Not including of- fences relating to					
outwork)	3	3	-	-	-

- -

TABLE C Part 8 of the Act. OUTWORK (Sections 110 and 111).

	Cosaques, Christmas Crac- kers, Christmas Stockings, etc	Carding, etc. of Buttons, etc	Wearing Apparel (making, etc.)	Nature of Work	
2	I	1	2	No. of outworkers in list required by Section 110 (1)(c)	
1	1	1	1	No. of cases of default in sending lists to the Council	Section 110
1	1	1	1	No. of prosecutions for failure to supply lists	
1	1	1	1	No. of instances of work in unwholesome premises	
T	1	,	1	Notices served	Section 111
1	1		1	Prosecutions	

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1955

		Bir	ths			
Live Births				Total	Males	Females
Legitimate				554	281	273
Illegitimate				21	10	11
	То	tal		575	291	284
Birth Rat	te per l	1,000	pop	ulation	16.99	
Comparal	bility F	actor	for	Births:	0.89	
Corrected	Birth	Rate:			15.12	
Still Births				Total	Males	Females
Legitimate				21	9	12
Illegitimate				-	-	-
	То	tal		21	9	12

Still Birth Rate per 1,000 total births: 35.23 Still Birth Rate per 1,000 population: 0.6

Infant Deaths under 1 year of age

		Total	Males	Females
Legitimate	 	 14	4	10
Illegitimate	 	 2	2	-
	Total	 16	6	10

Infantile Mortality Rate

Death Rate of infants under one year of age per 1,000 live births: 27.82

.

	Infant	De	aths und	ler Iou	ir weeks o	or age	
					Total	Males	Females
Legitimate				·	8	-	8
Illegitimate					1	1	-
			Total			-1	
			Total		9	1	0

-

Neo-Natal Mortality Rate

Deaths of infants under four weeks of age per 1,000 live births: 15.65

Infant Deaths during 1955—Taken from the Death Returns

Date	Age	Sex		Cause of Death
7. 1.55	5 months	Μ	1a)	Broncho pneumonia.
15. 1.55	2 months	Μ		
31. 1.55	5 months	Μ		Influenzal broncho pneumonia.
14. 2.55	3 months	F	1a)	Cardiac Failure.
			b)	Broncho pneumonia.
15. 2.55	2 months	Μ	1a)	Broncho pneumonia.
17. 3.55	3 days	F	1a)	Multiple congenital defects.
			b)	Hydrocephalus meningocele.
			c)	Spina bifida, horseshoe kidney.
12. 4.55	40 mins.	F	1a)	Cerebral haemorrhage.
			b)	Breech delivery.
19. 4.55	4 hours	F	1a)	Prematurity.
29. 4.55	3 months	Μ	1a)	Cardiac failure.
			b)	Broncho pneumonia.
			11)	Gastro enteritis.
18. 5.55	3 days	F	1a)	Congenital hydrocephalus and spina bifida.
14. 7.55	1 month	F	1a)	Gastro enteritis.
28. 7.55	2 weeks	F	1a)	Broncho pneumonia.
21. 9.55	1 week	Μ	1a)	Broncho pneumonia.
11.10.55	6 days	F	1a)	Bilateral basal broncho pneumonia.
			b)	Intra cranial neo-natal cerebral haemor- rhage due to
			c)	Parturition tear of the tentorium.
27.10.55	2 days	F	1a)	Broncho pneumonia.
1.12.55	2 days	F		Prematurity.

General Deaths

Total	Males	Females
Deaths (All Causes) 362	204	158
Crude Death Rate per 1,000 population:	10.7	
Comparability Factor for Deaths:	1.33	
Corrected Death Rate:	14.23	

Infantile Mortality

It will be seen that only two infant deaths were obviously unavoidable. I refer to the two deaths from congenital defects. It is possible that these two cases were originally due to physical inadequacies in the mothers, which might have been corrected, had they sought attention from their family doctors before conception took place; that, however, is pure speculation.

The deaths from prematurity need not be regarded as unavoidable. If the pregnancy is adequately supervised, and the mother understands and carries out the advice given to her, prematurity is unlikely. If it does occur, it is highly probable that the child could be saved, and in due course catch up with his stronger fellows. If every mother took proper care of herself during pregnancy, and proper care of her child after it was born, it is almost certain that the number of infant deaths in a year could be counted on the fingers of one hand. Nevertheless, it must be admitted that the Bilston mother has special difficulties.

During 1955 she had to contend with epidemics of measles and influenza, in addition to the usual hazards. The air is heavily smoke-laden. One mother in four is in a house that is overcrowded or damp. In some cases she is faced with the choice between leaving her baby in someone else's care while she goes out to work and being unable to feed it adequately. It is difficult to be a good mother in Bilston, but it is not impossible. Most of the Bilston mothers are good mothers.

The figures of births and still births tell us that the midwives, either as midwives or maternity nurses, had to take part in the supervision of at least 596 pregnancies. This would give each midwife a case load of 119. This is above the maximum which is usually thought wise. It is, therefore, highly probable that midwives were unable to give to every case, the supervision that they would have liked.

It appears during 1956 there may be less births, and the strain on the midwives will therefore probably be eased.

	М	Male			nale	Total		
	1954	1955		1954	1955	1954	1955	
0-4	11	11		7	11	18	22	
5—14	3	1		-	-	3	1	
15-24	1	2		3	2	4	4	
25-44	11	14		6	13	17	27	
45—64	74	64		30	34	104	98	
65 and over	97	112		90	98	187	210	
All deaths	197	204		136	158	333	362	

TABLE A Deaths during 1955 by age groups

TABLE B

Deaths from Certain Causes 1954 1955 Cardio-Vascular Diseases 95 106 . . Vascular Lesions of the Nervous System 49 47 . . Cancer ... 57 55 Bronchitis 24 26 Influenza 1 6 Pneumonia 18 26 Pulmonary Tuberculosis 10 6

	33, 34.		26.		23-24.		19, 20		18.		17.	12.		II.		10-15.		1.		A Real	140.	Abridged List
	Accidents		Ulcer of stomach and duodenum		Bronchitis and pneumonia		Other cardiac diseases		Coronary disease		Vascular lesion of C.N.S	Cancer of breast		Cancer of Lung. Bronchus		Cancer (all sites)		Tuberculosis of Respiratory System		All Causes		Cause of Death
F	M.	F.	M.	F.	M.	F.	·· M.	F.	M.	.F.	·· M.	:. F.	F.	M.	F.	M.	F.	M.	F.	: M.		
3	6	1	7	17	35	27	31	14	24	26	23	5	1	9	24	31	4	6	158	204		Total No. of deaths
52	206	1	148	493	1248	566	548	311	473	482	420	66	40	218	403	626	180	223			0-85	Total Years of life lost
2	110	1	32	254	649	174	172	49	92	111	84	27	19	66	51	189	96	86			0-64	Total Years of life lost
0.6	32	1	9	75	192	51	51	14	27	33	25	8	6	20	15	56	28	29			0-64	Years o
0.6	14	1	9	81	40	51	51	14	27	14	25	8	6	20	15	56	28	29			15-64	Years of life lost per 10,000 population
15	61	1	44	146	369	167	162	92	140	142	124	29	12	64	119	185	53	66			0-85	r 10,000

TABLE C Years of Life Lost due to Mortality from Certain Causes

Table 'A' shows significant increases in the deaths in the age groups 15 to 24, and 65 and over. Table 'B' shows that the increases were mainly among the respiratory diseases. Table 'C' brings this out much more clearly. From bronchitis and pneumonia, the years of life lost in 1954-0 to 85-were 1.233. For males 877 and for females 356. There was an increase in loss of life in 1955 in males, of nearly fifty per cent. The years of life lost from accidents remains much the same as before, but the loss of years of life from coronary disease is nearly doubled for males, and more than doubled for females. Less years of life were lost from cancer of the lung and bronchus, but slightly more from cancer in general. The loss of years of life from pulmonary tuberculosis was doubled, and that from ulcer of the stomach and duodenum trebled. Coronary thrombosis and peptic ulcer are both what may be called overtime diseases, *i.e.*, they are diseases associated with insufficient rest and nervous strain. Hurried meals are definitely an aggravating factor in peptic ulcer, and they may well contribute to the development of coronary thrombosis.

The increased cash acquired as a result of overtime, in the case of a workman, or burning the midnight oil, in the case of an executive, may well be too hardly earned if it results in death from either of these groups of diseases.

Ward	Electo- rate	Deaths	Death Rate per 1,000 electors	Live Births	Birth Rate per 1,000 electors	Popula- tion at 1951 Census
Ettingshall	4,457	62	14.0	106	23.78	6,124
High Town	2,141	52	24.3	45	21.0	3,241
New Town	4,117	63	15.3	99	24.0	6,748
Town Hall	7,860	110	14.0	188	23.9	10,744
Bradley	4,524	75	16.5	137	30.28	6,398

TABLE D

Causes of Death during 1955 in detail

TABLE E

Cause of Death	Males	Females	Total
Tuberculosis Respiratory	6	4	10
Tuberculosis Other	-	-	-
Syphilitic Diseases	-	- 100	-
Diphtheria	-	-	-
Whooping Cough	-	-	-
Meningococcal Infections	1	-	1
Acute Poliomyelitis	-	-	-
Measles	-	-	-
Other Infective and Parasitic Di-			
seases	-	1	1
Malignant Neoplasm (Stomach)	7	3	10
Malignant Neoplasm (Lung Bron-			
chus)	9	1	10
Malignant Neoplasm (Breast)	-	53	53
Malignant Neoplasm (Uterus)	-	3	3
Other Malignant and Lymphatic			
Neoplasms	15	12	27
Leukaemia, Aleukaemia	2	-	2
Diabetes	-	1	1
Vascular Lesions of Nervous Sys-		~	10
tem	23	26	49
Coronary Disease, Angina	24	14	38
Hypertension with Heart Disease	3	2	5
Other Heart Disease	28	25	53
Other Circulatory Diseases	5	5	10
Influenza	6	-	6
Pneumonia	13	13	26
Bronchitis	22	4	26
Other Diseases of Respiratory Sys-			-
tem	2	-	2 7
Ulcer of Stomach and Duodenum	/	-	
Gastritis, Enteritis and Diarrhoea	1	2	3 4 2
Nephritis and Nephrosis	1	3	4
Hyperplasia of Prostate	2	-	2
Pregnancy, Childbrith, Abortion	-	-	-
Congenital Malformation	-	2	2
Other defined or ill-defined diseases	19	25	44
Motor Vehicle Accidents	3 2 3	3	6 3 5
All other accidents	2	1	3
Suicide	3	2	5
Homicide and Operation of War	-	1	1
TOTAL	204	159	362
TOTAL	204	158	362

Table 'D' brings out quite clearly how unhealthy it is to live in the High Town Ward. Since a substantial part of the High Town death rate is due to respiratory disease, it is probably not unfair to assume that the smoky atmosphere in this Ward is the main factor in its unhealthy statistics. The railway and the steelworks share a responsibility for this pollution. The steelworks has brought much prosperity to the town, but the silver lining has its cloud (of smoke).

D. PREVENTABLE DISEASE AND ILL HEALTH

Tuberculosis

Perhaps the most interesting and revealing fact to be gleaned from the tuberculosis tables, is that the Ward the 1951 census showed to be most overcrowded, has almost the lowest incidence of tuberculosis. The lowest incidence in 1955 was in Ettingshall, which is, probably, on the whole, the best housed Ward, and in which the level of health education given by the parents and the schools, is, in my opinion, quite high. The New Town Ward which was, and probably still is, the most overcrowded Ward, has an incidence of new cases of tuberculosis of approximately 1.2 per thousand as compared with .96 for Ettingshall, 1.4 per thousand for the Town Hall Ward, 1.8 per thousand for the Bradley Ward, and 2.1 per thousand for the High Town Ward. The Bradley and High Town Wards are probably those that are the worst housed, but the only explanation I can give for the heavier incidence in the new cases in High Town is foul air.

The dust and sulphur from the railway, the closely packed houses, and the factories surrounding the Ward, must greatly weaken the resistance of the inhabitants to chest diseases in general and to pulmonary tuberculosis in particular.

Taking Bilston as a whole, three of the forty-nine notifications were taken from the death returns, and it can therefore be said that thirty per cent. of the deaths occurred in patients who were not undergoing treatment. None of these three patients were known to be suffering from tuberculosis, but one was a close contact of a tuberculosis case, who had refused repeatedly to submit himself to examination. On average, however, I understand that three to four contacts are successfully followed up, for every new case notified, and this was generally regarded as a fairly satisfactory figure.

A large proportion of deaths from tuberculosis occur in the winter months, and the exceptionally hard winter of 1954/55 may account in part for increase in the death rate.

The fall in notifications is gratifying; it is not due to slackness on the part of the Public Health Service, for the Mass X-ray Survey showed a considerable decrease in the number of cases found, and the rate of notification has continued to drop during 1956.

Tables 3 and 4 show that though new cases are notified twice as frequently in the 25 to 44 group as in the 45 to 64's, death is much more frequent in the middle aged patients. Possibly the middle aged take less kindly to medical supervision than the younger generation, though I find this difficult to believe. Undoubtedly the middle aged are the group now in which the disease is most serious, and they are also the group among which chronic infectious cases are most commonly found.

Measles

The expected measles epidemic took place during 1955. It appeared to be a rather larger epidemic than the 1953 one, but no deaths were attributed to measles. The disease became epidemic in Wolverhampton in December, 1954. Cases began to appear in the Ettingshall area during January, 1955. By February, measles was raging through the Ettingshall schools, and during March it spread South and East to the other schools. In Ettingshall, it was mainly the five and six year old children in the infant schools that were attacked, though some of them infected the older brothers and sisters, but as the disease spread through the town, the younger children began to be infected more widely and more seriously. Quite a number of babies and toddlers were admitted to Moxley Hospital for treatment. The epidemic was at its heaviest during May and June, it abated a little during July, and then tailed off during August and September.

No cases were notified to me during the last quarter of 1955.

Diphtheria

None of the cases notified as diphtheria were confirmed by bacteriological examination, but this is as it should be. Were a doctor who is in doubt, to wait the bacteriological confirmation of the diagnosis, the patient might well die, or at best, to be left with a serious paralysis due to the diphtheria toxin. It does not follow that these cases were not diphtheria. In the past, cases in which the classical paralysis has developed have been negative bacteriologically. They could have been cases of diphtheria, but it was not possible to prove it. The six cases were scattered throughout the town, and throughout the year.

The first was a boy of thirteen, attending Dudley Grammar School; the second a woman of fifty; the third a girl aged twelve months; the fourth a girl aged five years; the fifth a boy aged six years; and the sixth a woman of thirty. All made an uneventful recovery.

Poliomyelitis

The first suspected case was admitted to Moxley Hospital in May. The patient, a woman of twenty-five, developed no significant meningeal or encephalitic symptoms, and it was decided that the case was merely one of tonsillitis.

The second case was never suspected. The child, a girl of three years and three months, seemed perfectly well until October the 10th, when weakness of the left leg developed. The mother noticed a limp after some four days, and called in the family doctor on October the 14th. He confined the child to bed and she improved rapidly, but was left with weakness of the muscles of the left calf. She was subsequently examined by an orthopaedic surgeon who confirmed that the paralysis was of the type likely to be produced by acute anterior poliomyelitis. Though there were three schoolchildren in the family, no other cases were reported among their school mates, and the rest of the family did not subsequently suffer from any illness suggestive of poliomyelitis.

Dysentery

Of the eleven confirmed cases of dysentery, five were in two related families, the children from whom attended a school in Bradley. Two other confirmed cases occurred in children attending the same school. The first case notified was a child of two years. This child had fallen ill on March the 28th with vomiting and diarrhoea, and the usual feeling of shivering. A week before, the child's cousin and aunt had visited the family, and the cousin had been noticed to be somewhat loose; he had played with the two year old child guite a lot. Investigation of this eight year old boy showed that not only was he carrying the germ of sonne dysentery in his bowel, but also salmonella typhi-murium. He and his sister were excluded from school, and no further cases were subsequently notified, though the boy's three cousins and his grandmother remained positive for some weeks. All but two of the eleven confirmed cases of dysentery, and a number of food poisoning cases occurred in Bradley. It is quite possible that the bacilli may have been borne by flies from the house inhabited by this boy's family.

Food Poisoning

There were a number of food poisoning cases during the months of July and August in particular, but we were never able to find any infected food.

As is well known, food poisoning tends to be a mild infection, gradually getting worse, and the patient often does not seek medical attention until he has been ill for some days. This makes it almost impossible to get hold of any food that might have been responsible for the infection, except in cases of gross and visible contamination.

Pneumonia

I referred previously to the pneumonia epidemic; cases notified are, of course, acute primary or acute influenzal pneumonia. There were many other cases during the winter and early spring, of bronchial pneumonia and virus pneumonias which I am quite sure were not notified, and in many cases caused death. Pneumonia is still 'the captain of the men of death'.

Whooping Cough

There were again scattered cases of whooping cough throughout the year, and it appears that immunisation has not so far reduced the incidence of the disease, but rather changed it from an epidemic disease to one with epidemic peaks.

Only about twenty per cent. of the children under the age of twelve months are immunised against whooping cough so far, and until by one means or another the number of immunes in the population of children aged five or under is of the order of forty per cent., notifications of whooping cough will continue to average around one hundred a year.

Gastro Enteritis in Infants

This is an infectious disease, though notification is not generally required unless there is an obvious epidemic.

There were two deaths from gastro enteritis in infants during the year; one child being aged three months, who was also suffering from broncho pneumonia, and the other aged one month. It is possible that once the two diseases had struck the older child, there was little chance of saving him. The younger child should not have died.

The disease is grossly infectious, and indeed its infectivity has been compared with that of smallpox, but if this child had been nursed at a fever hospital, under the proper aseptic technique required, and given modern methods of treatment, it should not have died. The child did die in hospital, but not in an infectious diseases hospital.

Accidents, Suicide and Homicide

There were 15 deaths from violence in 1955—6 being from accidents in which motor vehicles were involved, one from attempted rape, and 5 from suicide. The remaining three were from accidents in the home in old people (two from coal gas poisoning and the third from pneumonia following fracture of the femur).

The fact that the number of deaths from home accidents during 1955 was half that for 1954 is not statistically significant due to the small numbers. The weekly returns kindly sent by the Royal Hospital, Wolverhampton, however, seem to bear out the suggestion that the home accident rate is declining in Bilston. A return is sent every week, of all accidents treated at the Royal Hospital. The figures are of some interest, as the pattern is different to those of the national death returns from home accidents.

None of the three patients who died as a result of home accident were treated at the Royal Hospital, which indicates, of course, that these figures do not tell the whole story. Of those that were treated, three were over 65, nine in the age group 6 to 65, and nineteen were 5 years or under. Of the last group, all but one were under the age of 5.

Three patients were treated for burns (one being an old person of 83, and two small children). Four small children were treated for scalds, thirteen people were treated for injuries following falls, and eleven for injuries from other causes. Of the injuries from falls, two were in old people, and eight in children under the age of five years. Of the injuries from other causes, four were to children under the age of five years, one to a child aged five, and six to older school children and adults.

The population of Bilston is, of course, abnormally young as compared with the country as a whole, but even so, it is somewhat surprising that the elderly and the aged escaped so lightly during 1955. It does indicate that the increased attention now being paid to old people, both by the local authorities and by voluntary organisations, is having some effect.

Disease	Total cases notified	Total cases confirmed	Cases admitted to hospital	Deaths
Tuberculosis—Respiratory Tuberculosis—Meninges	42	41	-	10
and C.N.S	-	-	-	-
Tuberculosis-Other	1	1	-	-
Scarlet Fever	15	13	11	-
Whooping Cough	76	77	2	-
Acute Anterior Poliomyelitis	2	1		-
Measles	568	566		-
Diphtheria	6	-	7 6 3	-
Pneumonia	33	33	3	26
Dysentery	30	11	-	-
Smallpox	3	3	-	-
Puerperal Pyrexia	3	3	1	-
Ophthalmia Neonatorum	2	2	2	-
Erysipelas Paratyphoid	2	2	2	-
Enteric or Typhoid Fever	-	- 1	2	-
E I D I I I I I I I I I I I I I I I I I	2 15	13	-	-
Meningococcal Infection	15	15	_	1
Meningococcar micetion				
Total	cases confir	med	. 762	
		med during 19		

Infectious Diseases notified during 1955

Infectious Diseases-Confirmed. In Wards. 1955

Enteric or Typhoid Fever .	Dysentery	Poliomyelitis	Ophthalmia Neonatorum	Food Poisoning	Erysipelas	Puerperal Pyrexia	Meningococcal Meningitis	Measles	Scarlet Fever	Diphtheria	Pneumonia	Whooping Cough	Disease	Disasa
·					·	·								7
I	1	1	ŀ	I	I.	1	1	29 4	1	1	7	ω	M.	New Town
1	1	1	1	1	I	1	1	41 7	1	1	3]	9 1	F. Total	Tow
1	1	1	1	1	1	1	I	70	1	1	10	12	otal	'n
1	I.	1	I-	1	I	1	I	22	1	1	2	s	M.	Hig
Ţ	-	1	E	I	1	I	I	20	I	1	I	S	F.	High Town
I	-	1	1	1	I.	1	I	42	1	I	2	10	F. Total	own
1	-	I	1	4	-	1	I	68	3	1.	5	13	M.	Tov
1	1	-	Ľ	ы	I.	2	E	84]	2	1	3	16	F.	Town Hall
1	-	-	1	6		2	I	152	S	I	∞	29	F. Total	all
1	1	1	I.	-	I	I	I	82	1	1	S	10	M.	Etti
ī	2	1	I.	1	I	I	I	69]	2	1	I	9	F. 7	Ettingshall
I	2	1	1	-	1	i.	ł	151	2	1	3	19	F. Total	all
1	-	1	1	S	1	1	ı	69	1	1	S	w	M.	Bi
-	6	1	I	3	-	-	I	82 1	S	1	s	4	F. T	Bradley
1	7	I	t	6	-	-	I	151	6	1	10	7	F. Total	Y
I	2	I	I	8	-	1	1	270 2	4	1	22	34	M.	T
-	9	-	I	S	-	ŝ	1	296 :	9	1	Ξ	43	F.	TOTAL
-	Ξ	-	1	13	2	3	1	566	13	1	33	77	F. Total	L

1955
1953
during
notified
Cases
ulosis
Tuberc
ulmonary
Non-P
and
Pulmonary

	-	1951 Census	IS	1953	53	1954	54	19.	1955	TOTAL	TAL
	Male	Male Female	Total	Male	Male Female	Male	Female	Male	Male Female	Male	Female
Under I. year	1	1	I	I	I	I	-	1	1	1	I
1-4	. 1,611	1,548	3,159	3	-	-	2	1	2	5	5
5—14	. 2,692	2,635	5,327	2	3		1	1	1	5	5
15—24	. 2,376	2,656	5,032	7	6	6	14	10	6	26	32
25-44	. 5,293	5,078	10,371	Ш	10	10	Ш	10	7	31	28
45—64	. 3,343	3,677	7,020	10	1	6	1	5	2	24	4
65 and over	. 1,159	1,390	2,549	1	I	I	1	1	I	•	Ι
Age unknown	1	1	1	I	I	7	1	1	1	2	2
	16,474	16,984	33,458	33	24	34	31	26	23	93	78

Deaths from Pulmonary and Non-Pulmonary Tuberculosis Cases during 1953 - 1955

	65 and over	45-64.	25-44	15-24	5—14	1-4	Under 1 year		
	over	:	:	:	:	:	year		
	:	:	:	:	:	:	:		
	 :	:	:	:	:	:	:		
9	I	4	1	2	1	1	1	Male	19
1	1	1	1	1	1	1	I	Female	1953
S	1	5	I	1	I	I	I	Male	1
-	1	1	I	I	I	1	1	Female	1954
9	1	5	1	1	I	1	I	Male	1
4	I	1	3	1	1	1	1	Female	1955
20	I	14	2	2	1	1	1	Male	TO
6	1	2	3	1	1	1	1	Female	TOTAL

Tuberculosis

There were 369 cases of pulmonary tuberculosis on the register at the end of 1955. 208 were males and 161 were females. There were 48 cases of non-pulmonary tuberculosis. 20 males and 28 females.

During the year 49 new cases of tuberculosis were notified, compared with 65 in 1954. 1 of the cases was non-pulmonary.

There were 10 deaths, all being pulmonary tuberculosis. 6 were males and 4 were females.

TABLE 5

Tuberculosis Statistics-Number on Register at

		Males	Females	Total
Pulmonary	Under 1 year	_	_	_
	1 to 5 years	7	6	13
	6 to 15 years	10	9	19
	16 to 25 years	51	66	117
	26 to 45 years	86	61	147
	46 to 65 years	47	13	60
	Over 65 years	5 2	4	9
	Ages unknown	2	2	4
	Total all ages	208	161	369
Non-				
Pulmonary	Under 1 year	-	-	-
	1 to 5 years	6 1	4	10
	6 to 15 years		4 4 8	10 5 17 12 2 2
	16 to 25 years	9 1 1	8	17
	26 to 45 years	1	11	12
	46 to 65 years	1	1	2
	Over 65 years	2	-	2
	Total all ages	20	28	48
Pu	Imonary all ages	208	161	369
	on-Pulmonary all ages	20	28	48
	GRAND TOTAL	228	189	417

31st December, 1955

Pulmonary Tuberculosis in Wards

Year	New	Town	High	Town	Town	Hall	Etting	gshall	Brad	iley	То	tal
	М.	F.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.
1951	6	3	-	1	12	10	8	2	7	5	33	21
1952	-	1	2	2	3	14	3	2	9	8	17	27
1953	8	3	3	2	11	9	4	2	6	5	32	21
1954	4	5	3	2	9	7	8	5	5	9	29	28
1955	3	5	7	-	4	11	3	3	8	4	25	23

1951-55

TABLE 7

Tuberculosis Notifications

YEAR	PULMO Male	DNARY Female	NON-PULM Male F	IONARY Female	TO Male	TAL Female
1948	16	11	2	1	18	12
1949	13	15	3	1	16	16
1950	25	10	1	1	26	11
1951	33	21	5	2	38	23
1952	. 17	27	1	2	18	29
1953	32	21	1	3	33	24
1954	29	28	5	3	34	31
1955	25	23	1	-	26	23

E. HOUSING

152 new houses were completed by the Council during 1955. This enabled 54 unfit houses to be closed. At the end of 1955 there were 1,732 unfit houses remaining, plus 131 houses not grossly unfit in themselves, which might have to be included in development areas, in order to enable those areas to be properly developed.

The Council's slum clearance plan was approved by the Ministry of Housing and Local Government in October, and a Sub-Committee of the Housing and Health Committees was then set up to consider ways and means of implementing it as soon as possible. As a result, it is hoped that clearance of the first compulsory purchase area will begin not later than June, 1957. In the meantime, a small number of the tenants in these worst areas continue to be rehoused on the points scheme, and certain other particularly bad houses are being dealt with by demolition orders.

Overcrowding, on the other hand cannot have abated greatly, since the Housing Manager's list has not appreciably diminished during the year, despite the fact that 98 new houses were occupied by tenants who had originally been lodgers. A few of the older houses were discovered to be overcrowded as a result of their use by commonwealth workers, as lodging houses. One old house in Oxford Street was found to be particularly overcrowded, and action was taken to abate this. Advice continues to be given to landlords of these houses, who are in the main, Indians, with varying success.

F. SANITARY CIRCUMSTANCES OF THE AREA

Water

The quality of the water continues to be satisfactory, and the quantity is adequate at the moment, but only just so.

The only answers to this problem are either considerably increased pumping at Tomhill, or a supplement to the supply by the construction of a further bore hole.

During the year 34 samples of water were taken, 6 of which were chemically analysed and 28 were bacteriologically tested. All the results were satisfactory and the following are typical examples of the bacteriological and chemical analysis.

W	ater from Tomhill Pumping Station
pH Value	6.3
•	Parts per 100,000
Total Solid Matter Dried at 212°F.	22.5
Free and Saline Ammonia	Nil
Albuminoid	Nil
Nitric Nitrogen	0.80
Chlorine present as Chloride	2.1
Oxygen absorbed in 4 hours at 80°F	F. 0.0042
Appearance	Clear and colourless
Metallic Contamination	Nil
Fotal Hardness	
Permanent Hardness	
Femporary Hardness	
Free Chlorine	0.06 parts per million

This water is chemically of satisfactory quality.

Water

Bacteriological Examination Report

Nature of Sample: Source: Bore. Main piped supply. Tap, Tomhill Pumping Station, Seisdon. (No. 2 Boost Pump).

Date and hour of collection: 19.1.55 1.25 p.m.

Date and hour of arrival: 19.1.55 3.55 p.m.

REPORT

Date of Report: 21.1.55

Plate Count. Yeastrel agar 2 days 37°C. aerobically Nil per ml.

Probable number of coliform bacilli, MacConkey 2 days 37°C. Nil per 100 ml.

Probable number of faecal coli

Nil per 100 ml.

The Corporation owns and operates its own undertaking. The statutory limits of supply are about 12,000 acres comprising the Borough of Bilston, part of the Urban District of Coseley and part of the Rural District of Seisdon.

Water is obtained from two sources of supply (a) deep wells and a borehole at the Bratch, Wombourn, and (b) a borehole at Tomhill, Bobbington, both in the Rural District of Seisdon.

The supply to Bilston and Coseley is pumped from source to two covered concrete service reservoirs at Coton Road, Goldthorn Hill, having a combined effective capacity of 1,590,000 gallons, and thence by gravitation to Bilston and Coseley.

The estimated population supplied in Bilston and Coseley is 46,621 and in the Seisdon District 7,221, a total of 53,842.

The average daily consumption for all purposes in the whole area of supply during the year was 3,681,939 gallons or 68.38 gallons per head per day. In the Bilston and Coseley area the average daily consumption was 3,300,747 gallons or 29.99 gallons per head per day for domestic supplies and 40.81 gallons per head per day for trade supplies.

Sewage

The population continues to increase and the sewage works is beginning to become progressively less adequate to their needs. It is possible that the proposed use of a composting system may reduce the need for a larger sewage works, but this is highly problematical. On the basis of present information, it seems that a new and modern sewage works will be required by the Borough in the very near future.

The Borough Surveyor supplies the following information:-

The sewage disposal works occupy an area of 43 acres at The Lunt, Bilston, and deal with the flow of sewage from the whole of the Borough, together with 1,663 acres of the northern part of Coseley Urban District, and also parts of the adjoining areas of Wolverhampton, Willenhall and Darlaston, a total of 3,588 acres.

The system of disposal is precipitation followed by continuous filtration; the sludge from the tanks gravitates to a well from which it is pumped to lagoons.

The disposal works were first constructed in 1905 to deal with a daily dry weather flow of 517,000 gallons. They were extended in 1924 and again in 1929 to deal with a daily dry flow of 1,379,000 gallons.

The dry weather flow exceeds 1,500,000 gallons a day and a scheme is under consideration for improvements and extensions to the works to bring them up to date for present requirements, and for a future estimated dry weather flow of 1,700,000 gallons a day.

Drains and Water Closets

1,579 choked drains and water closets were cleansed by the Health Department staff.

The tabular statement of the Chief Sanitary Inspector is as follows:--

(a) INSPECTIONS

(a) INSPECTIONS			
Natura of Inspaction	1st	Re-	Total
Nature of Inspection	inspections	Inspections	10101
Dwelling Houses			
Inspections—Routine	451	450	901
Complaints	437	394	831
Overcrowding	5	-	5
Dirty Condition	16	12	28
Rent Restriction Act	1	-	1
Disinfected	23	32	55
Disinfested	76	114	190
Rodent Control	302	983	1,285
Infectious Disease	25	5	30
Disinfestation—Visits	42	29	71
Removals	174	-	174
Verminous	10	-	10
Other Premises			
Houses let in lodgings	11	_	11
Tents, vans, sheds, sites	14	-	14
Common lodging houses	1	-	1
Factories-mechanical power	21	15	36
no power	5	-	5
Workplaces-ordinary	5 3	-	3
outworkers		-	-
Bakehouses	1	-	1
Dairies	-		-
Milk dealers	124	-	124
Ice cream—manufacturers	2	-	2
retailers	14	3	17
samples	17	-	17
Slaughterhouses—inspected	1	-	1
meat inspection	642	5	647
Private/emergency slaughter	-	-	-
Fried fish shops	7	-	7
Food preparing premises	38	-	38
Ice stores	-	-	-
Public houses	8	-	8
Cafes and restaurants	4	-	4
Works canteen	-	-	-
Market—visits	24		24
meat stalls	49	-	49
other food stalls	53	-	53

		1 <i>st</i>	Re-	
			Inspections	Total
	Shops ment and food	217	7	224
	Shops—meat and food	38	'	38
	rodent control	3	8	11
	Public conveniences	17	-	17
	Stables	1	_	1
	Premises re swine, fowl, etc	7	2	9
	Premises re offensive accumulation	33	2 2	35
	Drains-inspected	244	83	327
	colour tested	9	2	11
	water tested	-	-	-
	grenade tested	11	-	11
	smoke tested	7	-	7
	Sewers-inspected	28	3	31
	street gullies	17	-	17
	Canal boats-inspected	-	-	-
	visits to canal	-	- •	-
	Smoke observations—	39	-	39
	visits to plant	31	16	47
	Cinemas and theatres	2	4	6
	Water samples—chemical	5 17	-	5
	bacteriological		-	17
	inspections	4	-	4
	Food stalls and carts	8	-	8
	Milk—chemical	-	-	-
	bacteriological	4	-	4
	Other foods-formal	-	-	-
	informal	22	-	22
	Cleansing visits	24	-	24
	Miscellaneous visits	699	1	700
	Smoke measurement	155	7	155
	Food Poisoning	-	/	7
(b)	NOTICES			
	Informal Notices issued		256	
	Statutory Notices-Section 92-93			
	Public Health Act, 1936 Issue	d	132	
	Com	plied	104	
	Justic	ces Order	1	
(c)	IMPROVEMENTS MADE AS A	A RESULT	OF THE	SERVICE
	OF INFORMAL OR STATUTO	RY NOTI	CES	
		Bv	Without	
Dwe	elling Houses	Notice	Notice	Total
	iternal Rooms			
	Ventilation improved	1		1
	New windows provided	4	7	11
	indiana provided	-		

31

	By Notice	Without Notice	Total
Old windows repaired	28	7	35
Window cords renewed	27	14	41
Dampness in walls remedied	58	5	63
Plaster of walls repaired	42	9	51
Plaster of ceilings repaired	41	6	47
Floors repaired	19	-	19
New fireplaces provided	-	2	2
Old fireplaces repaired	7	1	8
Ovens provided	-	1	1
Doors repaired	- 6 2	1	7
Skirting boards	2	-	2
Flues repaired	1	-	1
Staircases			
Steps provided or repaired	3	1	4
Guard rails repaired	1	-	1
Sculleries and Wash-houses			
Wentiletien immend			
Windows repaired.	3	_	3
Plaster of ceilings repaired	3 4 2 3		4
New sinks provided	2	3	5
Old sinks repaired	3	-	5 3
Waste pipes trapped	_	1	1
Waste pipes repaired or renewed	4	2	6
Wash coppers provided	-	1	1
Wash coppers repaired	10	3	13
Floors repaired	-	1	1
Doors repaired	1	-	1
Water service pipes repaired	3	-	3
Service main repaired	1	-	1
Cellars			
Steps repaired	1	-	1
Flooding abated	4	_	4
Coverings repaired	1		1
External			
Roofs repaired	92	51	143
Eaves spouts repaired or provided	38	16	54
Down spouts repaired or provided	29	7	36
Walls repaired and/or repointed	38	22	60
Chimney stacks repaired and/or			
repointed	30	8	38
Doors repaired	2	5	7

	By Notice	Without Notice	Total
Steps repaired	2	-	2
Parapet walls	1	-	1
Under floor ventilation	1	-	1
General			
Yard paving or surface repaired	4	-	4
Yard drainage installed	1	-	1
Houses supplied with town's water	2	2	
Supply	2	22	3
water supply restored	1	2	3
Outbuildings			
Water Closets			
Roofs repaired	8	1	9
Walls repaired or repointed	12	1	13
Doors repaired	8	-	8
New cistern fixed or repaired	65	4	69
New pedestals and seats provided	21	2	23
Soilpipes repaired	11	-	12
Water supply provided/repaired New water closets provided	5	1	12 5
Flush pipes/pedestal joints repaired	4		4
Pedestals repaired	1	-	1
Coal Stores			
Roofs repaired	3	-	3
Waste Water Closets			
Converted into standard type			
W.C's	-	1	1
Ashbins			
Renewals	-	670	670
Provided for new houses	-	144	144
Provided for other premises	-	31	31
Drains			
Repaired or relaid	47	3	50
Cleansed	12	1	13
Disconnected from sewer	1	-	1
Inspection chambers built or re-	22	4	26
paired	1	4	20
Self cleansing gullies provided	6	1	7
Build provided in			
		Without Notice	Total
---	----	-------------------	-------
Offensive Accumulations			
Removed	8	5	13
Animals so kept as a nuisance			
Nuisance abated	1	-	1
Tents, Vans, Sheds and Sites			
Removed	10	1	11
Factories-Mechanical Power			
Conveniences cleansed and/or			
limewashed	-	1	1
Ventilation space provided	2	-	2
Conveniences— other improvements	2	1	3
Walahan			
Workplaces			
Improvements	1	-	1
Stables			
Cleansed	1	-	1
improved	1	-72	1
Smoke Observations			
Nuisances abated	1		1
Additions to plant or improve- ments	2	_	2
Slaughterhouses			
Lighting/ventilation improved	2	-	2
Floors repaired/repaved	1	-	1
vious	4	-	4
Drainage improved Running hot water provided	-1	1 -	1
Food Shops			
Improvements under Food and Drugs Act	1	1	2

		By Notice	Without Notice	Total
Fried Fish Shops				
Cleansed/limewashed/painted			-	-
Storage receptacles provided		1	-	1
Accumulations removed		2	-	2
Other improvements		1	-	1
Food Vans, Carts and Stalls Covering and screening of bac and sides provided or in	m-			
proved		-	-	-
Other improvements	•••	1	-	1
Pig Styes				
Accumulations removed		1	-	1
Cleansed		1	-	1

Disinfestation

76 houses were disinfested and 114 re-inspections were made of these houses. Treatment was by fumigant smoke or insecticide sprays. In addition, the majority of tenants from old property had their furniture and effects treated by HCN gas, and the bedding sterilised by steam in the steam disinfector. There were 174 removals, and the effects were treated in all of these.

Shops Act

38 visits were made to shops other than food shops, in connection with the Shops Act.

Rodent Control

The number of complaints received during the year was 206. 15 more than last year. The number of inspections made for the purposes of treatment was 1,285. In addition, sewer treatment was carried out in accordance with the instructions of the Ministry of Agriculture and Fisheries, necessitating 1,000 visits and inspections.

					Ist	2nd
Number of manholes	in sys	stem			929	929
Number of manholes	treate				86	164
Number of manholes	showi	ing in	festation		68	69
Number of manholes	showi	ng co	mplete p	ore-		
bait take					Nil	Nil
Actual bodies seen					40	69
Estimated kill					339	262
Dates of treatments					March	October

CLEANSING

The Cleansing Superintendent (Mr. J. R. Tart, M.S.I.A.) reports as follows:-

REFUSE COLLECTION AND DISPOSAL

(Period 1st April, 1955, to 31st March, 1956)

Collection frequency did not improve as had been hoped. A seven day collection has been possible for a few weeks in the summer, but the bad weather and heavier refuse has put winter collection frequency back to fourteen days. On occasion, it has fallen to sixteen days, due to the absence of men through sickness or otherwise. Recovery from such a fall back is the more difficult, as by the time a bin emptied fourteen days back is emptied again, it is full to overflowing and surrounded by boxes of refuse or loose refuse on the ground. This results in several journeys to the vehicle for the purpose of cleaning up, which causes a cumulative fall back. As a temporary expedient, extra bins were placed at those premises which proved to have a high refuse output. These bins were withdrawn when the situation eased.

A reorganisation of rounds was carried out in an endeavour to improve collection efficiency. An improvement has resulted, but it has been insufficient to achieve a seven day frequency. The purchase of another vehicle, and the establishment of another round, will soon be necessary to cope with the new housing estates. A suggestion to this end, though approved by the appropriate Committees, could not be implemented, as at the time the estimates were considered, it was thought that other methods would secure results. The purchase of another vehicle will have to be considered in the 1956/57 Estimates. There is still no spare vehicle to use when one of the regular collection vehicles is due for major overhaul.

Four vehicles have been engaged on collection-three Shelvoke and Drewry's and one Karrier. A nominal twenty-two men have been engaged on the collection side. Sometimes this number has been exceeded on the establishment as the only means of maintaining a service in the absence of men due to sickness.

Number of men engaged on collection	 	22
Possible number of man hours	 	48,840
Actual number of man hours worked	 	43,590
Number of man hours lost	 	5,250

The figure for 'actual man hours worked' is inflated by the necessity for Saturday morning overtime, to the extent of 1,802 hours. It could, therefore, be said that the man hours lost were 7,052 or 14.44%.

		E.C. and
Receptacles Emptied	Loads Removed	Estimated Tonnage
378,901	4,092	14,209

TABLE 1

Covering for Tips	Trade Refuse	Waste Paper	Kitchen Waste	Misc.	Total
Tons	Tons	Tons	Tons	Tons	Tons
37	290	118	254	4	703

TABLE 2 MISCELLANEOUS REFUSE REMOVED

Salvage

A further fall off in the figures for waste paper and cardboard collected, is due to a variety of causes. The full time paper collection vehicle is in the Transport Pool now, and the arrangement for its use for salvage for three days each week, has for various reasons not been implemented. The housewife still puts much paper in the bin, that could be salvaged. An increase in paper collection, beyond a certain point, would cause congestion at the Depot, where we are operating only one manual press. A greatly increased salvage collection would necessitate the purchase of a power press, or the bringing into use of another hand press and operative. The economics of this would need careful scrutiny if the service was not to be run at a loss.

Kitchen waste collection continues as usual at a loss, with a smaller quantity collected, as compared with previous years. There are two main causes for the decreased tonnage. In the first place, private pigkeepers are taking their toll of the street bins, and, secondly, the kitchen waste collection vehicle has had to be transferred to refuse collection at times of breakdown and overhaul of the regular refuse collection vehicles. This course was the lesser of two evils, and results from operating with no vehicle margin.

As will be seen from Table 3 glass is being salvaged now. An offer for glass was received and accepted, as no extra labour was involved in salvage at the tip face.

		1955-56			1954-55	
MATERIALS	We	eight	Value	We	eight	Value
	Tons	Cwts.	£	Tons	Cwts.	£
Paper	. 117	181	1,089	146	111	1,135
Kitchen Waste	. 253	18	1,004	333	-	1,230
Glass	. 10	164	24		_	
			2,117			2,365

Collection figures are given below:-

TABLE 3

Refuse Disposal

This year saw the completion of levelling at the Dudley Street site. The last month or so of life at this tip were not without incident. The small angledozer became more unreliable as time went on, and much time was lost in repairs. This led to an untidy tip, as there was no labour available for manual control. Interference by the public led to fires, and hired bulldozers and scrapers had to be called in. In November, on completion of the culverting of the brook, tipping commenced at Raglan Street.

Details of refuse disposal are as follows:-

TABLE 4

DUDLEY STREET TIP

		nsing rtment	Trades and C	people Others	тот	AL
	Loads	Tons	Loads	Tons	Loads	Tons
House Refuse—Dry Trade Refuse Coverings Industrial Refuse Miscellaneous	$\begin{array}{c} \cdot \\ \cdot $	14,209 290 37 4	334 310 66	 1,860 66	$\begin{array}{c c} 4,438 \\ 4,438 \\ 14 \\ 310 \\ 68 \\ 70 \\ \end{array}$	
Totals	4,120	14,540	710	2,093	4,830	16,633

Below I include Cost Statement 1955-56 and Operational Statistics, as furnished to the Ministry of Housing and Local Government.

TABLE 5

Item	Particulars 1	Collection	Disposal 3	Totals 4	Percen- tage of total gross expen- diture 5
	REVENUE ACCOUNT	£	£	£	%
1.	GROSS EXPENDITURE: (i) Labour	9,302 4,812	1,545 2,300	10,847 7,112	53 35
	 (iii) Plant, equipment, land and buildings (iv) Other items 	1,710	708 35	2,418 35	12
	(v) Total gross expenditure	15,824	4,588	20,412	100
2.	GROSS INCOME (inclu- ding £1,004 received from other local authorities)	159	2,338	2,497	
3.	NET COST	15,665	2,250	17,915	
4.	Capital expenditure met from revenue (included above)	_	129	129	_
	UNIT COSTS	s. d.	s. d.	s. d.	
5.	Gross cost per ton, labour only	12 6	1 10	14 4	
6.	Gross cost per ton, transport only	6 6	2 9	9 3	
7.	Net cost (all expenditure) per ton	21 1	2 8	23 9	
8.	Net cost per 1,000 population	£ 463	£ 67	£ 530	
9.	Net cost per 1,000 premises	1,482	213	1,695	

COST STATEMENT 1955-56

39

Operational Statistics

10.	Area (statute acres). :			1,871 acres
11.	Population at 30th June, 1955 (Registrar-General's Estimat	 (e)		33,830 persons
12.	T 1 C 11 1 1 ()	·		14,875 tons
13.	Weight (cwts.) per 1,000 pop	ulation	per day	
	(365 days to year)			24.093 cwts.
14.	Number of premises from which	refuse is	s collected	10,573 premises
15.	Premises from which daily collec	tion is	made	Nil % of total
16.	Average haul (miles) by colle	ction v	vehicle to	
	disposal point (single journ	ey)		$2\frac{1}{4}$ miles
17.	Kerbside collection, if practise			
	estimated percentage of tot	tal colle	ection	Nil
18.	Total refuse disposed of			16,633 tons
19.	Salvage and Trade Refuse. Ana and tonnage:	alysis c	of income	
	U U		Income	Tonnage
			(included in	
			Item 2)	(included in
				Item 12)
			£	Tons
	Salvage:		~	10115
	(a) Raw Kitchen Waste		1,004	254
	(b) Waste Paper		1,089	118
	(c) Other Salvage (Cullet)	••	24	
	Total		2,117	383
	Trade Refuse		404	457

Caravans and Moveable Dwellings

14 visits were made to various sites in the Borough, for inspection of caravans occupied by gypsies and other wanderers.

Atmospheric Pollution

The figures continue to show serious pollution of the atmosphere and I would again draw attention to the fact that pollution appears to be the most serious in the High Town Ward. This Ward has the misfortune to have a railway line running just outside its North Eastern boundary, and another one through its South Western boundary. Grit and black smoke from locomotives shunting, and arriving and departing from the two stations on these lines, are sent into the Ward and help considerably, I am sure, to shorten the lives of the people who dwell therein. The steelworks is also an offender, but, on the whole, I would say that this firm are more conscious of their obligations to humanity, in the matter of clean air, than are British Railways.

DEPOSIT GAUGES

Total solids are as follows:----

January	Park Site			25.80	tons	per	square	mile
••	Dudley Street	Site		28.71	"	••	"	••
February	Park Site		2	Figures not	10			
"	Dudley Street	Site	S	available due frost damage				
March	Park Site			19.67	"	••	.,	••
"	Dudley Street	Site		35.15	"	••	"	,,
April	Park Site			20.99	,,	••	"	,,
"	Dudley Street	Site		38.27	,,	••	"	,,
May	Park Site			29.95	"	,,	,,	"
	Dudley Street	Site		45.30	"	,,	"	,,
June	Park Site			9.45	"	,,	,,	,,
	Dudley Street	Site		30.18	,,	,,	"	"
July	Park Site			3.42	"	"	,,	"
,,	Dudley Street	Site		16.62	"	"	"	"
August	Park Site			12.23	"	"	"	,,
"	Dudley Street	Site		28.51	"	"	"	,,
September	Park Site			91.46	"	"	"	••
••	Dudley Street	Site		43.54	"	"	"	"
October	Park Site			23.87	,,	"	"	"
"	Dudley Street	Site		46.54	"	"	"	"
November	Park Site			21.23	"	"	"	"
,,	Dudley Street	Site		17.36	"	"	,,	"
December	Park Site			55.73	"	,,	"	"
••	Dudley Street	Site		47.19	"	,,	"	"



LEAD PEROXIDE CYLINDERS

Mg. of SO3 per day collected by 100 sq. cm. of Batch E.Pb02

Month 1955	Library	Park	280, Wellington Road	Etting- shall Road	Bradley Vicarage	Moxley Hospital	Fire Station	Lunt Road Depot	4, Freeman Place	Centre Health Clinic	Tomhill Water- Works
January	3.45	2.66	3.74	3.35	3.47	3.24	6.42	3.93	3.41	4.73	1.19
February	3.91	3.05	3.19	3.10	4.25	3.37	8.72	3.92	2.83	3.99	1.26
March	3.48	3.15	2.82	3.20	3.83	3.02	9.75	3.80	3.06	3.02	1.11
April	1.83	1.69	1.82	1	1.90	1.58	5.27	2.36	1.39	3.29	0.75
May	1.4	1.3	1.1	1.1	1.3	1.4	2.7	1.8	0.9	2.1	0.6
June	1.2	1.0	0.9	0.9	1.1	1.1	2.4	1.6	0.8	1.8	0.5
July	1.2	0.9	0.9	1.1	1.4	1.2	2.4	0.7	1.6	0.8	1.5
August	0.94	0.63	0.73	0.69	1.04	0.86	1.94	1.37	0.59	1.43	0.53
September	1.11	0.87	0.99	0.76	1.25	I	2.97	1.68	0.73	0.02	0.14
October	2.04	1.46	1.56	1.27	2.32	1.01	4.01	2.43	1.23	3.67	0.33
November	2.97	2.17	2.72	2.39	3.58	3.33	6.36	4.04	2.53	3.47	0.77
December	2.08	2.85	2.39	1.82	2.63	2.27	5.29	3.69	1.98	3.30	0.76

G. FOOD HYGIENE

The food hygiene booklet was distributed via the Public Library and doctors' surgeries, and by distribution to each child after the health talks in schools.

There has been some attempt by the larger food shops to keep their house in order during the year, but the level of hygiene in the small shops and far too many homes and kitchens, continues to be far too low. This is demonstrated beyond doubt by the notifications of infectious disease associated with the alimentary canal.

There were 11 confirmed cases of dysentery, 1 enteric fever, and 13 food poisoning (salmonellosis). In addition, cases of disease suspected but not confirmed, included 1 enteric fever, 2 food poisoning and 19 dysentery.

Although only person to person contact could be proved in most of these cases, it seems highly probable that most of the outbreaks were initiated by infected food. It is hoped that the implementation of the Food Hygiene Regulations during 1956 will considerably reduce the number of cases of this kind.

CARCASES AND OFFAL INSPECTED AND CONDEMNED

IN WHOLE OR IN PART

	Cattle Exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known)	15	24		111	40876	_
Number inspected	15	24	_	111	40876	_
All diseases except Tuber- culosis and Cysticerci Whole carcases con- demned	_	_	_	_	11	-
Carcases of which some part or organ was condemned	2	2	_	_	7819	_
Percentage of the num- ber inspected affected with disease other than tuberculosis and cysticerci	13.33	8.33	_	_	19.15	_
Tuberculosis only: Whole carcases con- demned	_	_	_	_	26	_
Carcases of which some part or organ was con- demned	1	3	_	6	1564	_
Percentage of the number inspected affected with tuberculosis	6.66	12.5	_	5.4	3.88	_
Cysticercosis: Carcases of which some part or organ was con- demned	_	_	_	_	_	_
Carcases submitted to treatment by refriger- ation	_	_	_	_	_	-
Generalised and Totally condemned	-	-	_	_	_	-

PIGS, SHEEP, COWS,

	Carcase and Organs	Heads and Collars	Lungs	Heart	Stomach and Intestines	Kidney
Abscesses	-	24		-	-	-
Acute Swine Erysipelas		-	-	-		-
Ascaris Lumbricoides	_	-	-	-	-	
Acute Peritonitis		_	-	_	-	-
Bruising	-	-	-	-	-	-
Calcification & Bruising .	-	-	-			-
Chronic Nephritis	_	-	-	_		7
Cirrhosis	-	-	-		-	-
Cloudy Swelling		-	-	-	-	-
Congestion	_	-	7-5	_	-	-
Contusions		_	-	_	-	-
Cysts		_	-	_		20 ¹ / ₂
Cysticercus Tenuicollis		-	-	-	-	
Echinococci	_	-	-		-	-
Endocarditis		-		3	_	-
Fatty Degeneration		_	_	-		-
Fatty Necrosis		_	-		-	-
Febrile		_		_		-
Fevered		_		-	-	-
Haematoma		_	_	_		_
Hepatitis				_	_	-
Hydronephrosis		_		_	_	7콜
Infarcts	<u> </u>		-	_	-	_
Jaundice		-		_		-
Lacerations		_		_		-
Liver Fluke		_			_	_
Mastitis		_				-
Moribund	1-35	_		_	10 10 <u>100</u> 0 10 10	
Nephritis	_					_
Parasites		_		_		-
Pericarditis		_		$3-28\frac{3}{4}$		-
Deritonitie		_			78	
Petechia		_			_	8
Pleurisy		_	19-0	_		_
Draumania			3-13-54	-		-
Ducamia	7-79					
Septicaemia	101					
Cantia Mastitia	101					
Strongelus Danadauus			1-104			
Suffocation	2-71					
Swine Erysipelas	5 22					_
Torsion						
Tuberculosis	1 17 27	8-14-1041	6-19		8-104	1111111
IIntigania			-			
Urticaria						and the second
	2-15-9	8-15-1612	5-7-70	3-31 3	9–70	43 <u>1</u>

TTLE (EXCLUDING COWS)

r	Splage	Spleen Omentum Udder	Uddar	Parts	Skin		TOTAL	
i Spicen	Spieen		Udder	of Carcase	SKIN	Tons	Cwts.	Lbs.
	_	_	2	94 <u>1</u>	_		1	16 <u>1</u>
73	-	—	—	—	-	-		273
73	_	_	_	_	_	1	-	373
	- /	_	_	47 15	_	_	11 	47
	—	-	—	15	-	=	-	47 15 7
	-	_	-	-	—	-	6	67
	_	_	_	_	_			0/ 11±
		_	_	_	_	_	7	5
	_	-	—	60	-	_	-	60
	—	_	—	—	—	—	-	$ \begin{array}{c} 11\frac{1}{2} \\ 5 \\ 60 \\ 20\frac{1}{2} \\ 22 \\ 72 \\ 3 \\ 26 \end{array} $
	_	2	_	_		_	8	72
	=	_			_	_		3
	-	_	-	_	_	_	1	26
	-	-	-	_	-	-	-	-
		_	_	Ξ	_			
	42		_		_	_	_	42
		_	-	_	_			
	$\frac{-3}{43\frac{1}{4}}$		-	-	-		-	$10\frac{3}{4}$
	431	-	-	-	-	-		10 ³ / ₄ 43 ¹ / ₄
	_	_	_	_	_	_	_	_
	_	_	-	_			_	34
	_	_	_	10	—	-		10 35
	-	-	-	-	-	-	1	35
	_	_	_	_	_	_	2	61
	_	_	_	_	_	_	2 3 18	283
2	$1-62\frac{1}{4}$	17	-	91 <u>±</u>	_	-	18	61 28 ³ / ₄ 106 ³ / ₄
	-	-	-	-	-	-	10	8
		_				3	19 13 7	54
	_	_	_	_	_	_	7	79
	—	_	_	-	—		-	101
	_	-	10	-	—	-	-	10
	_	_		_		_	2	71
		 4	-	1	_	_	1 2 5	22
	12	-	- 1		_	_	-	12
12	374	4	 10 2 	$11-21\frac{1}{2}$ 43	_	12	13	$ \begin{array}{r} 104 \\ 71 \\ 22 \\ 12 \\ 70\frac{3}{4} \\ 43 \end{array} $
83	2-873	23	14	14-461/2	_	22	10	12½

CARCASES AND ORGANS

Generalised T.B	 		 26
Moribund	 		 1
Acute Swine Erysipelas	 		 2
Pyaemia	 		 5
Suffocation	 		 2
Septicaemia	 		 1
		TOTAL	 37

Details of food examined, found to be unfit for human consumption and surrendered for destruction are as follows:---

Food	 Tons	Cwts.	lbs.	Reason for Condemnation
Overtano		10	2 25 27	Mould Decomposition Blown and damaged tins
		10	54	
Fresh Meat	 22	10	121	See Table
Total	 23	0	66 <u>1</u>	

Bakehouses and Other Food Premises

1 visit has been made to bakehouses and 38 inspections to other premises.

Milk

There are 127 licensed dealers selling sterilised milk, 9 selling sterilised and pasteurised milk, and 9 selling tuberculin tested milk.

Ice-Cream

There are 97 premises selling ice-cream in the Borough.

 		19
 		3
 		-
 		2
 	··· ·· ·· ··	··· ·· ·· ·· ·· ··

Street Food Vendors

6 street food vendors were licensed in the area.

Food Sampling

The sampling of milk and food under the Food and Drugs Act, 1938, is undertaken by the County Council who are the Food and Drugs Authority under the Act. Dr. G. Ramage, the County Medical Officer of Health, has kindly supplied the following details of samples taken throughout the year.

Milk	Milk Pasteurised		14	
	Milk Sterilised		16	
	Milk Pasteurised Jer		2	
	Milk T.T. Pasteurise		16	
	Milk T.T.		1	
	Ta	otal	40 4	ll Genuine.
	10	nai	49 A	n Genuine.
			_	
General F	oods			
	Number of samples taken			26
	Number of samples genuin			24

2

. .

Number of samples adulterated ...

Classification of General Foods

Custard Powder Margarine Grapefruit Segments White Pepper Pork Luncheon Meat (2 samples) English Butter Margarine (contains 10% Butter) Beef Suet Pure Ground Almonds Chocolate Butter Crunch Bread and Butter (2 samples) Pork Sausage (containing preservative) Ulster Fry Danish Butter Irish Stewed Steak Milk of Magnesia Ground Nutmeg Pork and Beef Luncheon Meat Tea Pure Malt Vinegar New Zealand Butter Currie Powder Pure Lard Lemon Flavouring

Particulars of Adulterated Samples

- (1) Chocolate Butter Crunch-Formal-certain ingredients not declared.
- (2) Bread and Butter—Formal—Fatty Spread consisting of 50% Butter and Margarine.

Action Taken

- (1) Labels amended.
- (2) Taken up with Cafe Proprietor.

Food Preparing Premises

Food shops and food preparing premises in Bilston can be classified as follows:---

Grocers, greengro	cers an	d genera	al shop	s			196
Food shops with	catering	g establis	shmets	attac	ched		12
Other catering est	tablishn	nents (in	cluding	y wor	rks' car	nteen	
and premises	of the	schools	meals	serv	ice)		45
Fried Fish Shops							17
Butchers Shops							33
Fish Shops							5
							308

H. HEALTH EDUCATION

As a result of suggestions by the Health Education Committee, arrangements were set in hand for litter baskets to be provided by a firm of advertising agents, and free use of the wash basins in the Lichfield Street public convenience was offered to the public for a trial period. One of the large poster boards outside the Town Hall was made use of for health posters, and specially designed large posters appeared on it at intervals of approximately four to five weeks. To begin with, a single cartoon poster 'Mr. Bilston Wants to Know' was put up, and Mr. Bilston asked different questions every two or three weeks, for about four months; after that, there were various posters on topical health subjects.

During February and the early part of March, a series of talks and films for health workers was given at the Town Hall. These were attended by school teachers, sanitary inspectors, health visitors, school nurses, and on two occasions, nursing students from the College of Further Education. The series included a talk by the Superintendent Health Visitor from South East Staffordshire; two films on tuberculosis; two on food hygiene; the Gas Board's film 'Guilty Chimneys'; a talk by Dr. Emrys Davies on 'Visual Aids and Health Teaching', and a further talk by Dr. Davies, which I am afraid was not very well attended, on health education in the schools; the latter being designed specially for teachers.

In my own health talks to school children and parents, I dealt mainly with cleanliness and simple nutrition. In my talks to the parents I discussed, besides these matters, the need for adequate sleep, adequately fitting shoes, and avoiding accidents.

Home Safety Committee

The Home Safety Committee continued their propaganda on home safety throughout the year.

A Conference on home safety was held on the 19th April in the Town Hall, Bilston. Representatives from Wolverhampton, Wednesfield, Rowley Regis and Smethwick, attended, in addition to the Bilston Health Visitors and School Nurses and representatives of the Bilston voluntary organisations. The Conference was addressed by Mrs. Duncan, former Manager of the Home Safety Department of the Royal Society for the Prevention of Accidents, who, in four short talks which occupied most of the day, covered fairly completely and extremely ably, the various home accident risks. I am sure that all who attended learned a great deal from this conference.

In June a stall was again taken at the Bilston Carnival Fete. Despite a windy day, the display attracted a good deal of attention and over two hundred leaflets were successfully distributed.

The school poster competition was again held in the Autumn. There were one hundred entries, many of them extremely good. I should add that the exhibition of the previous year's posters, held in January, 1955, attracted considerable attention, and, I trust, had a very good effect.

During November the Wolverhampton Transport Undertaking were good enough to show fluorescent posters for us, on the trolley buses plying to and from Bilston.

Road Safety Committee

The Prevention of Accidents Committee continued their talks to the school children. A Town Forum was held in early May, shortly before the General Election, and attracted quite a considerable audience. A Car Rally was held in September.

CONCLUSION

1955 has been, to some extent, a disappointing year. This, as I have indicated, is partly due to the influenza epidemic.

The increase in notifications of dysentery and food poisoning may have been an increase in notifications only, as discussions with patients and contacts often revealed cases of diarrhoea in earlier years, of which there is no mention in our records. On the other hand, a good summer always increases the fly population considerably, and fly-borne infection may be responsible for some of the increase in diarrhoea and disease.

I think there is little doubt that the health of the community will again improve. There are, so far, definite indications that the health record for 1956 will be considerably cleaner.

I must thank you, Mr. Mayor, the Chairman of the Health Committee, and the members of the Council, for your advice and guidance throughout the year.

I must also express my thanks to the Chief Sanitary Inspector and to the Sanitary Inspectors and clerical staff.

I have the honour to be,

Mr. Mayor, Madam and Gentlemen,

Your obedient servant,

D. A. SMYTH,

Medical Officer of Health.





