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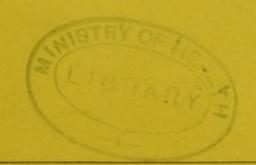
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BRIXWORTH RURAL DISTRICT COUNCIL

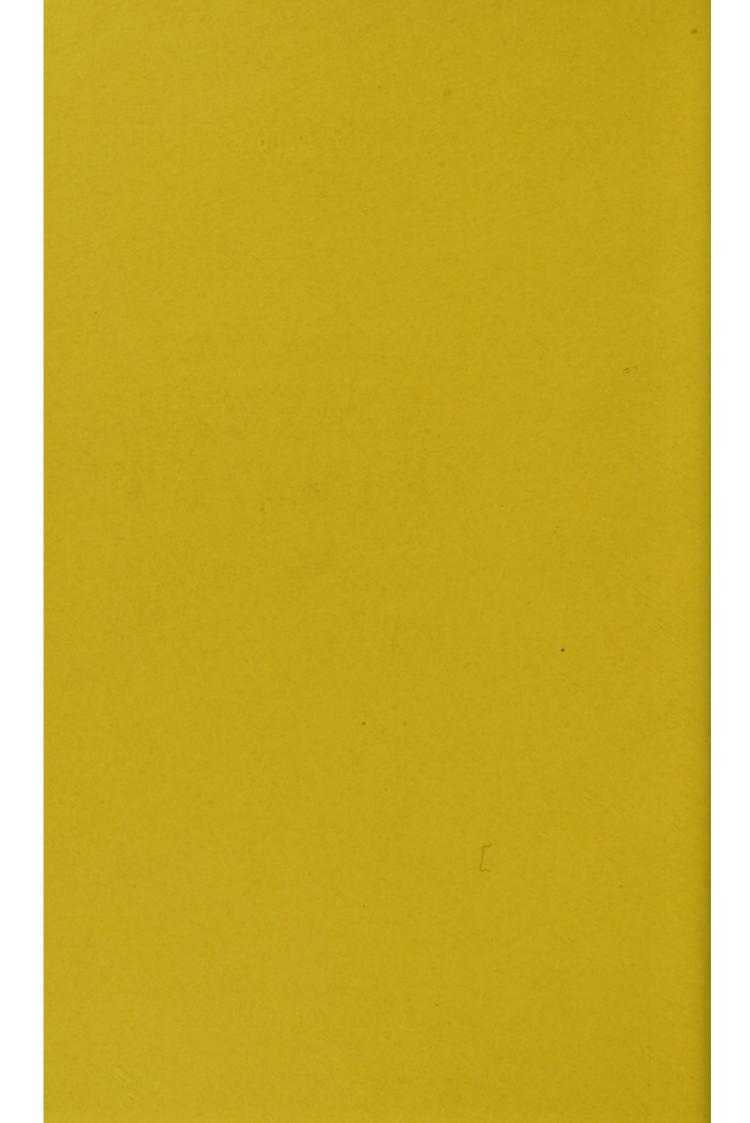


ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1950



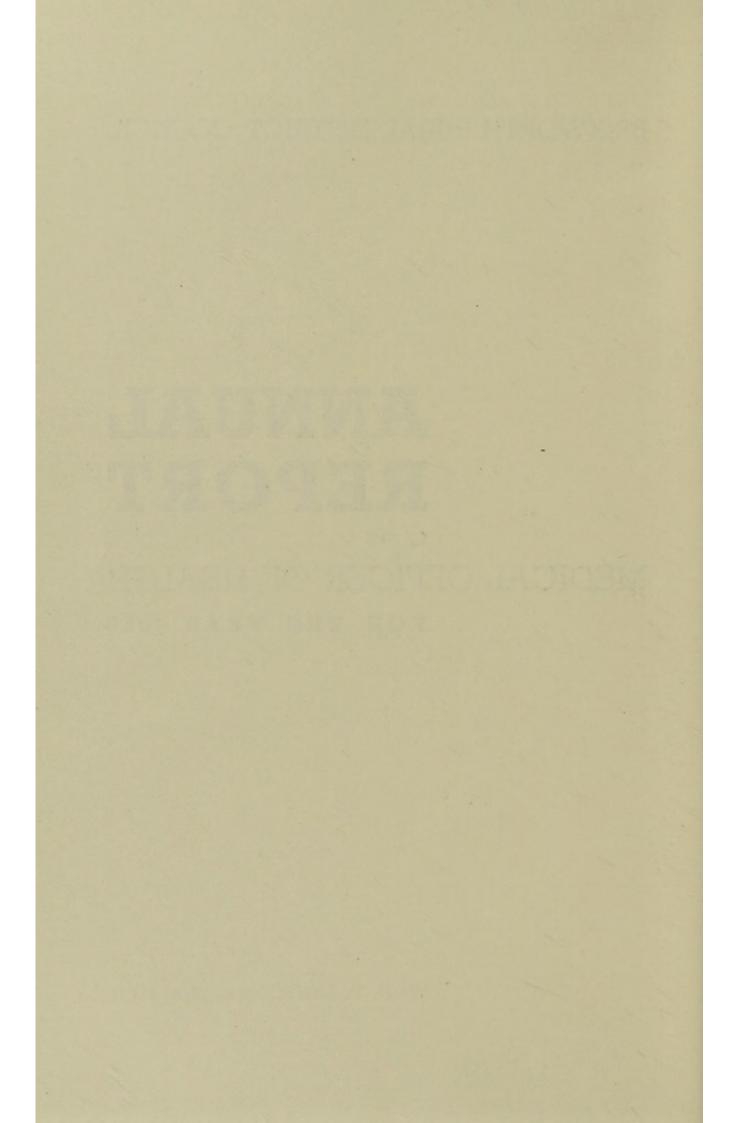
BRIXWORTH RURAL DISTRICT COUNCIL

ANNUAL REPORT

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MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1950



SUMMARY OF VITAL STATISTICS

Area (in acres)				82,9	944
Population				17,5	240
Number of Separate D	wellings	occupied		5,3	332
Rateable Value 1950 (A	April)			£95,3	370
Product of a Penny Ra	ate			£370 13	0
Live Births	Total		Female	Rate per 10 estimated population	l
Legitimate		124	126	15.37	
Illegitimate	15	0	9		
	265	130	135		
Still Births.	Total	Male	Female	Rate per 10 estimated population	d
	4	2	2	0.23	
Deaths (all causes)	201	100	101	11.66	
Deaths (all causes) Deaths from Puerper			101	11.66	
Deaths from Puerper	al Caus	es.	101	11.66	
	ral Caus	es.	101	11.66	
Deaths from Puerper	ral Caus t abortiv	es.	101	11.66	
Deaths from Puerper Puerperal and post sepsis	ral Caus t abortiv	e Nil	101	11.66	
Deaths from Puerper Puerperal and post sepsis	ral Caus t abortiv	e Nil	101		. Pate
Puerperal and post sepsis Other Puerperal ca	t abortiv	e Nil Nil Nil		R	Cate
Deaths from Puerper Puerperal and post sepsis	t abortiv	e Nil Nil Nil		R	
Puerperal and post sepsis Other Puerperal ca	t abortiv	e Nil Nil Nil		R	.19
Puerperal and post sepsis Other Puerperal ca	ral Caus t abortiv tuses aths unde	e Nil Nil Nil	per 1,000	R live births	.19
Puerperal and post sepsis Other Puerperal ca	t abortiv auses aths unde	e Nil Nil Nil	per 1,000 Male	Rive births Female To	.19
Deaths from Puerper Puerperal and post sepsis Other Puerperal car Infant Mortality—(Deaths from Cancer (and Montality) (and Montality)	t abortiv auses aths unde	e Nil Nil r 1 year p	per 1,000 Male	Rive births Female To 21	.19 otal 37
Deaths from Puerper Puerperal and post sepsis Other Puerperal ca Infant Mortality—(Deaths from Cancer (a) , , Measles (a) Whooping	al Cause abortive auses aths under	e Nil Nil Nil er 1 year p	per 1,000 Male	Rive births Female To 21	.19 otal 37 Nil

Brixworth Rural District Council

Members of the Public Health Committee

MR. W. WOOD (Chairman)

MR. C. M. NEWTON

Mrs. V. G. Borwick

MRS. ST. JOHN MILDMAY

MR. H. KIMBELL

MR. C. H. GRAVELEY

HON. MRS. MACDONALD-

BUCHANAN

MR. A. E. CURTIS

MR. E. A. TURNEY

MR. O. E. P. WYATT

MR. N. HEEPS

MR. A. S. TARRANT

MR. W. A. HOLLAND

MR. E. T. GARDNER

CANON J. HOTINE

MR. C. G. CARRUTHERS

MR. L. CAVE

MR. C. L. FRASER

MR. J. R. HART

Public Health Officers of the Local Authority

Medical Officer of Health:

W. H. P. MINTO, M.B., CH.B., D.P.H., also holds appointments of

Medical Officer of Health, Northampton Rural District Council and

Assistant County Medical Officer of Health

Senior Sanitary Inspector:

F. A. RUSSELL, F.F.S., M.S.I.A.

Assistant Sanitary Inspector:

R. S. LINLEY

To the Chairman and Councillors of the Rural District of Brixworth.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health and sanitary circumstances of the rural district for the year 1950.

The health of the people in the district, as far as can be judged by vital statistics, has remained satisfactory. The standardised birth rate of 16.34 per thousand compares favourably with the rate for the country, and is above the pre-war rates; too much weight should not be given to small variations in this rate from one year to another, but attention should rather be paid to the trend of the rate over a period of years. The crude death rate of 11.66 per thousand is satisfactory, but the rate may well rise as the proportion of old people in the district increases. From the table on page 8 it will be seen that the four main causes of death are again Heart Disease, Cancer, Intra Cranial Lesions, that is Cerebral Haemorrhage, and Bronchitis, all diseases which, in the most part, affect persons in their later decades of life.

To come now to infectious diseases. Measles was prevalent with 124 cases being reported. Whooping Cough followed with 47 cases, and Scarlet Fever with 34. There were 4 cases of Poliomyelitis. As a rule the infectious diseases were of a mild type.

One can justifiably conclude then that the health of the district for 1950 was satisfactory.

As regards sanitary circumstances, progress was maintained and details are given in the report (Section C).

In the field of housing, the Council has continued with their post-war programme. 82 Houses were completed during the year, making a total of 282 since the beginning of the programme and a further 90 were started. The Council has started a campaign

of slum clearance and rehousing (details are given in the report—Section D) and it is hoped that concurrently, steps will be taken to secure the improvement of property which can be made fit.

I wish to thank the Surveyor and Senior Sanitary Inspector, the Assistant Sanitary Inspector and the clerical staff of the Department for their valued assistance througout the year and for the work they have put into the preparation of this report.

In conclusion, I should like to express my appreciation of the help and encouragement I have received from the Council and in particular from the Chairmen and Members of the Public Health and Housing Committees during the year.

I have the honour to be,

Your obedient Servant,

W. H. P. MINTO,

Medical Officer of Health.

AUGUST, 1951.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area—(in acres) 82,944. The district is almost entirely rural in character, with agricultural and dairy farming as the main industries. In addition open-cast workings for iron-stone are to be found in the vicinity of Brixworth and Pitsford.

Population. The Registrar General has estimated the population for the mid-year 1950 to be 17,240, an increase of 70 in the population for the previous year. The natural increase in population the excess of births over deaths, was 64.

Deaths. The total number of deaths assigned to the district for the year was 201 compared with 203 in 1949. The crude death rate based on the mid-year population was 11.66 compared with 11.82 in the previous year. The following table has been compiled for comparison with previous years:—

Years	Total	Male	Female	Recorded Rate
1944	242	114	128	15.06
1945	187	87	100	12.04
1946	203	96	107	13.01
1947	211 ·	110	101	13.46
1948	212	108	104	11.76
1949	203	99	104	11.82
1950	201	100	101	11.66

In order to compare the mortality in the District with the mortality for England and Wales it is necessary to make a correction, to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as 0.81 for this District.

The Standardised Death Rate, therefore, is 9.44 which compares favourably with that of 11.6 for England and Wales.

Mortality Table.

Classified in accordance with 36 headings based on the Abbreviated List of the International Statistical Classifications of Diseases, Injuries and Causes of Death, 1948.

	Causes of Death	$Mal_{\mathcal{E}}$	Female	Total
1.	Tuberculosis, respiratory	1	1	2
2.	Tuberculosis, other	_	1	1
3.	Syphilitic disease	_	-	_
4.	Diphtheria	_	-	_
5.	Whooping Cough	_	_	_
6.	Meningococcal infections	-	_	_
7.	Acute Poliomyelitis	-	-	_
8.	Measles	-		-
9.	Other infective and parasitic diseases	_	_	-
10.	Malignant neoplasm, stomach	3	2 2	5
11.	Malignant neoplasm, lung, bronchus	4	2	6
12.	Malignant neoplasm, breast	_	4	4
13.	Malignant neoplasm, uterus	_	3	3
14.	Other malignant and Lymphatic neoplasms	9	10	19
15.	Leukaemia, aleukaemia	_		_
16.	Diabetes	1	4	5
17.	Vascular lesions of nervous system	16	17	33
18.	Coronary disease, angina	12	8	20
19.	Hypertension with heart disease	1	5	6
20.	Other heart disease	20	21	41
21.	Other circulatory disease	4	- 3	7
22.	Influenza		_	
23.	Pneumonia	3	3	6
24.	Bronchitis	7	6	13
25.	Other diseases of respiratory system		1	1
26.	Ulcer of stomach and duodenum	_		_
27.	Gastritis, enteritis and diarrhoea	1	_	1
28.	Nephritis and nephrosis	4	1	5
29.	Hyperplasia of prostate	_		_
30.	Pregnancy, childbirth, abortion			
31.	Congenital malformations	9	1	3
32.	Other defined and ill-defined diseases	7	7	14
33.	Motor vehicle accidents	2 7 2	,	2
34.	All other accidents	3		3
35.	Suicide	3	1	1
36.	Homicide and operations of war		1	
50.	Tronneide and operations of war			
		100	101	201
	Still births	2	2	4
	Deaths of infants under 1 year of age	4	1	5
		-		
	Deaths of infants under 4 weeks of age	1	1	2

Births. The number of live births assigned to this district was 265 compared with 259 in 1949. The rate per thousand of the population was 15.37. When the Registrar General's Area Comparability Factor for births (1.05) is applied to this figure, the Standardised Birth Rate of 16.14 for this district compares favourably with 15.8 for England and Wales.

Still Births. The number of still births during 1950 was four (2 males and 2 females). The rates for the past five years are given in the following table (per 1,000 live and still births):—

Still Birth Rate.

	1946	1947	1948	1949	1950
Brixworth	30.96	11.69	41.9	11.45	15.09

Illegitimate Births. There were 15 illegitimate births assigned to the district during the year (6 males and 9 females), compared with 11 in 1949. Shown as a proportion of the total number of live births this represents 5.66 per cent.

Maternal Mortality. It is pleasing to record that no deaths occurred from puerperal causes, or conditions allied to childbirth since 1943.

Infant Mortality. The number of infants who died before reaching their first birthday was five (4 male and 1 female). None were illegitimate. The causes of death are set out in the table below:—

Causes of Death of Children under one year.

Causes of Death	Age in Weeks						
Causes of Death	-1	-2	-3	-4	5-52	Total	
Congenital malformations	1	-	-	-	2	3	
Premature Birth	1	-	_	_	-	1 -	
Gastro-Enteritis	-	-	-	_	1	1	
Total	2	_	_	_	3	5	

Deaths under 1 year per 1,000 live births.

	1945	1946	1947	1948	1949	1950
Brixworth	53	31	30	44	31	19

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES

Laboratory Service. Laboratory work in connection with the diagnosis and control of Infectious Diseases is carried out at the Emergency Public Health Laboratory in Northampton under Dr. Hoyle.

Infant Welfare Centres. The following centres are held at the places and dates indicated. Your Medical Officer of Health is in attendance in his capacity as Assistant County Medical Officer.

Brixworth Infant Welfare—

3rd Friday each month at Village Hall.

Welford Infant Welfare—
4th Thursday each month at Village Hall.

Boughton Infant Welfare—
2nd Wednesday each month at Boughton Institute.

Moulton Infant Welfare—
1st Tuesday each month at Manfield Hall.

Ambulance Services. General medical and surgical cases are removed by the St. John Ambulance Brigade from North-ampton, the Brigade acting as agents of the County Council under the arrangements made under Section 27 of the National Health Service Act, 1946. Infectious disease cases are also removed by the St. John Ambulance Brigade under the same arrangements.

Nursing in the Home. The County Council became responsible for these duties as from 5th July, 1948.

Isolation Hospital. Cases of Infectious Disease which require Isolation are treated at the Harborough Road Isolation Hospital, Nerthampton, which comes under the administration of the Oxford Regional Hospital Board.

SECTION C.

SANITARY CIRCUMSTANCES OF THE DISTRICT

Water Supplies.

During the year, schemes for the provision of a piped water supply throughout the district have been further advanced to a stage where all parishes now have a piped water supply either in operation or nearing completion leaving only the augmentation of existing inadequate supplies to be dealt with in the future. The supply at present made available by the Earl Spencer to the parishes of Great Brington, Little Brington and Harlestone comes into this category and application has been made to the Water Board to extend its mains to supply these parishes, leaving the existing private supply for agricultural purposes. The Water Board has agreed to comply as early as possible with this request.

The scheme for the Eastern parishes—Lamport, Draughton, Maidwell, Kelmarsh, Hanging Houghton and Arthingworth, was completed during the year.

The scheme for the Western parishes—Cold Ashby, Thornby, Naseby, Haselbech, Guilsborough, Hollowell, Creaton, Spratton, Ravensthorpe, East Haddon, Teeton and Holdenby which was commenced last year proceeded satisfactorily and is nearing completion.

The Council's functions as water undertakers were transferred on 1st July, 1949 to the Mid-Northamptonshire Water Board, whose area of supply includes the whole of the Brixworth Rural District. The Council continued to act under delegated powers as Agents for the Board as far as day to day maintenance was concerned until 30th September, 1950, when the Board took over complete control of the supplies and installations.

Although, as a result of the transfer of functions to the Water Board, the question of liability for the maintenance of the considerable number of Public Wells in the District has been under consideration during the year, agreement has not yet been reached. It should be stressed that the proper maintenance of these wells, and their closure as they become redundant, is a matter of importance to the health of the community and it is therefore hoped that the question of liability will be decided as expeditiously as is possible.

Sewerage and Sewage Disposal.

As the water supply schemes are completed the urgency for new schemes of sewerage and sewage disposal becomes more and more apparent. In view of the unsatisfactory condition of many of the existing sewage outfalls, the Council has approved new schemes for most parishes and these will be proceeded with as speedily as possible.

The sewerage scheme for Cold Ashby was completed and put into operation in June, 1950, and a similar scheme for the Kettering Road, Moulton and the parish of Overstone was commenced in November, 1950.

During the year, Public Inquiries were held on the proposed schemes for the parishes of East Haddon, Great Oxendon, Clipston and Sibbertoft and these schemes have been approved by the Minister of Health.

Schemes of sewerage and sewage disposal were approved by the Minister of Health last year for the parishes of Hannington, Holcot, Naseby, Old, Scaldwell, Walgrave and Welford, and an active start on schemes for Naseby, East Haddon, Walgrave and Welford is to be made in 1951.

The Council has also approved schemes for Boughton Village, Moulton Village, Church and Chapel Brampton, Boughton (Welford Road), Harlestone, Maidwell, Draughton, Lamport, Spratton and Ravensthorpe.

Disinfection. Concurrent and terminal disinfection by means of gaseous and liquid disinfectants is carried out in homes where certain infectious diseases are notified. In the course of the year, a number of requests for disinfection of premises were received and dealt with.

Disinfestation. Disinfestation of premises was carried out following complaints by owners or tenants of the presence of verminous conditions.

Eradication of Bed Bugs. No cases of infestation by bed bugs received treatment during the year.

Prevention of Damage by Pests Act, 1949. Consideration was given by the Council to the appointment of a full time rodent operator and the provision of the necessary transport in order to discharge the functions conferred on the local authority by this Act. Existing arrangements appeared adequate for discharging the Council's duties under the Act but as existing contracts with the Northamptonshire Agricultural Executive Committee were terminated the question would be reviewed. The A.E.C. terminated their contracts early in September, 1950, and it was decided that existing staff could adequately discharge the Council's responsibilities under the Act. There were no major rat infestations on the Council's properties at the end of the year.

Moveable Dwellings. No licences were granted by the Council under the Public Health Act, 1936, Sec. 269.

Public Cleansing. Collection of household refuse is carried out fortnightly, by direct labour, throughout the District.

National Assistance Act, 1948. No certificate under Section 47 of this Act was submitted to the Council by the Medical Officer of Health.

HOUSING

In 1947 a survey of all Working Class Houses in the District was completed under the terms of the Hobhouse Report. In that survey, of a total of 3,444 houses inspected, 745 houses were placed in Category V (Houses which were unfit for human habitation and beyond repair at reasonable cost), and 976 houses in Categories 111 and IV (Houses requiring repair, structural alteration or improvement).

The great majority of these houses are still occupied, and, although, in some cases, works have been carried out, other properties must have slipped into the lowest category.

In some cases, several families have been rehoused from each of the worst of these houses and there appears to be a constant stream of people from both inside and outside the District ready and indeed eager to occupy such properties with a hope that the Council may rehouse them at an early date. In such a desperate situation, one cannot readily discount strong rumours that "key money" has exchanged hands to secure the tenancy of an unfit house from which a family has recently been rehoused.

During the year, the Council resolved that houses should not be let to any more tenants from this class of property unless other circumstances, e.g., overcrowding by two or more families, justified such a course. Instead, occupants of Category V houses would be rehoused under Slum Clearance procedure, so that, such houses could not be reoccupied unless they had been made in all respects fit for habitation.

From a review of the outstanding list of applications for houses it appeared that in the parishes where houses were being built in the 1950 Housing Programme, the most urgent general needs were being largely satisfied and a modified programme of Slum Clearance was commenced in those parishes where the number of applicants having real immediate need of accommodation was insufficient to fill all the houses under construction.

In planning the next year's Housing Programme, it is proposed to allocate a proportion of new houses for general need, and a proportion for Slum Clearance. In this way, it is hoped to make the best use of the number of new houses allocated to the District.

HOUSING STATISTICS

1.	Inspe	ections	of Dwe	lling He	ouses du	ring the	year	:
1	. (a)				or Hous	cted for d	efects	583
	(b)	Inspect	ions ma	de for t	he purpo	se		993
2	. (a)		ded und	der Hous	sing Cons	inspected olidated 	Regs.	_
	(b)	Inspect	ions ma	de for t	he purpo	se		_
3.	d		or inju	urious to	health a	o be in a as to be		38
4.	SI		ng) not			nder prec reasonabl 		121
2.					he year otice :—	without	the	
N				ered fit i		ience of a	ction	
	Hous	ing Act						_
	Public	c Health	Act					165
3.	Actio	n under	Statu	tory Po	wers du	ring the	year :	_
A		oceedings Act, 1936		Sections	9, 10 an	16 Ho	using	
	1.		_		pect of w	hich noti	ces	_
	2.		g house al Notic		red fit at	fter servi	ce of	
		(a) By	Owners					-
		(b) By	Local A	uthority	in defau	lt of own	ers	-

B. Proceedings under Public Health Acts:—	
1 Dwelling houses in respect of which notices were served requiring defects to be remedied	. 2
2. Dwelling houses in which defects were remedied after service of formal notices:—	
(a) By Owners	2
(b) By Local Authority in deafult of Owners	-
C. Proceedings under Sec. 11 and 13 of the Housing Act, 19	936 :
1. Dwelling Houses represented under Section 11	18
2. Dwelling Houses in respect of demolition order	9
3. Dwelling Houses demolished	_
4. Dwelling Houses rendered fit by owner	_
5. Dwelling Houses where undertakings not to relet at end of present tenancy were accepted from	
the owner	9
D. Proceedings under Sec. 12 of the Housing Act, 1936:	
1. Separate tenements or underground rooms in respect of which Closing Orders were made	_
No. of separate tenements or underground rooms in respect of which Closing Orders were	
determined	-
E. Proceedings under Sections 25 and 26 of Housing Act, 19	936 -
1. Number of houses dealt with under Section 25	2
2. Number of Clearance Orders made under Section 26	1
3. Number of families living in Clearance Areas	
5. Transfer of families fiving in Clearance Areas	2

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

Milk. As a result of the transfer in 1949 of the control of milk production on the farm to the Ministry of Agriculture and Fisheries and the placing of the licensing and supervision of pasteurising plants in the hands of the County Council, the District Council retains only the duty of controlling the distribution and sale of milk.

Food Premises. Food premises were inspected at frequent intervals throughout the year.

Food and Drugs Act, 1938-Section 15.

After consideration of the Model Byelaws issued by the Ministry of Food, the Council decided to make such Byelaws as to the Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air. These Byelaws, having been approved by the Minister of Food came into operation on 10th July, 1950.

Clean Food.

During the year, at the instigation of the Northamptonshire County Council, conferences were held with reference to the formation of a Clean Food Association to be known as the Northamptonshire Clean Food Guild. Ultimately the County Council decided not to proceed with the proposal, as some of the larger Urban Authorities had declined to join the Guild.

This Council resolved not to form a Clean Food Guild independently.

It is felt that, in a Rural District, the formation of such an association would achieve nothing which could not be obtained by the local authority in the carrying out of its statutory obligation in regard to the hygiene of food premises and food distribution supplemented by the Byelaws referred to above.

With regard to Health Education, experience has shown that this instruction can most conveniently be introduced informally in the course of inspection of village shops.

Meat Inspection.

Owing to the fact that the slaughterhouses are situated in Northampton and Market Harborough and meat is sent out to the various butchers within the District, very little meat is now inspected. From time to time unsound meat is examined as it is reported to the Sanitary Inspector.

Special attention is being paid to the method of delivering meat to the District. In some cases, the vans delivering meat have been found to be unsatisfactory, but, during the year, the general standard of cleanliness has shown some improvement.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Notification of the following cases of infectious disease was received during the year. Period distribution and parish distribution tables are to be found at the end of the report.

Disease	Male	Female	Total	Rate per 1,000 population		
Discuse	. Mate			Brixworth	England and Wales	
Acute Primary						
Pneumonia	6	4	10	0.56	0.70	
Measles	60	64	124	7.20	8.39	
Scarlet Fever	17	17	34	1.97	1.50	
Erysipelas	3	6	9	0.52	0.17	
Whooping Cough	20	27	47	2.73	3.60	
paralytic	2	1	3	0.17	0.13	
non-paralytic	1	-	1	0.06	0.05	
Dysentery	3	3	6	0.35	_	
Food Poisoning	2		2	0.12	0.17	
Totals	114	122	236			

Notification of Infectious Diseases—Transmission of information from Hospital to Medical Officer of Health.

Considerable confusion as to procedure has existed since the transfer of Hospitals to the Regional Hospital Board under the National Health Service Act, 1946.

The County Medical Officer has made a local arrangement whereby he is informed daily by telephone of any case of suspected or confirmed notifiable disease which is admitted to the Isolation Hospital. This information is passed on to the District Medical Officer of Health who thus has the opportunity of taking preventive measures.

This arrangement works well, as far as it is goes, but the situation can only be regarded as satisfactory if **all** hospitals also act in accordance with the procedure set out in the Ministry of Health Circular 94101/2/69 dated 7th March, 1950, viz.:—

"The Medical Officer of Health of the Borough or County District from which the patient has been admitted should be informed by letter or card under sealed cover at the time of admission to hospital or sanatorium of the name, address, age and diagnosis of each patient then suffering from a notifiable disease including tuberculosis. A similar communication should be sent if and when the diagnosis is changed and on the patient's discharge from hospital or sanatorium."

With the commendable exception of the sanatoria (with regard to the notification of Tuberculosis), the hospitals do not appear to be following this recommended course of action and apart from the statistical errors which do occur, it seems that a danger to the health of the community can thus arise, particularly when the diagnosis is made or changed in hospital.

Smallpox. No case was notified. However several outbreaks have occurred recently elsewhere, as a result of persons who were incubating smallpox arriving in this country and with the modern rapid means of travel available, this danger is likely to increase. The danger to an unvaccinated or partly vaccinated population is a very real and alarming one and the vaccination figures for the district in 1950 (set out below) although they show an improvement, give no cause for complacency.

Vaccination 1950 (Figures supplied by County Medical Officer of Health.)

	Under 1	1-4	5–14	15 or over	Total
Primary	50	47	27	22	146
Revaccination	_	1	8	42	51

Maximum publicity must be given to the advisability of parents having their babies vaccinated at about the age of 4 months, when primary vaccination carries the least risk of complications.

Scarlet Fever. Thirty-four cases were reported during the year, infection being of a mild type in the majority of cases.

Diphtheria. No cases were notified during the year and none has been reported in the district since 1946 when three cases occurred, all of them adults who had not been immunised.

Diphtheria Immunisation.

The following table gives the number of children who had completed a full course of immunisation against Diphtheria up to 31st December, 1950.

Age at 31–12–50 i.e., Born in Year	Under 1 1950	1 1949	2 1948	3 1947	4 1946	5-9 1941 -45	10-14 1936 -40	Total under 15
Number immunised	9	148	206	253	191	965	1009	2781
Estimated mid-year population 1950			1432			24	53	3885
Percentage			56			8	0	72

Number of Children immunised during the year 1950

Total	Total Under 5 years		Booster doses
-221	207	14	91

These tables are based on figures supplied by the County Medical Officer of Health and do not allow for the numbers of children who may be immunised by general practitioners under private arrangements.

With the coming into force of the National Health Service Act, 1946, responsibility for providing diphtheria immunisation was transferred from the District Authority to the County Council.

Immunisation is carried out at all Infant Welfare Centres in the District, and also at sessions of school medical inspection when required.

Application for immunisation can be made to the County Council Health Visitor or arrangements can be made with general medical practitioners under the National Health Service Act, 1946.

Measles. 124 Cases were notified during the year, compared with 123 in 1949. The infection was of a mild type and no deaths occurred.

Whooping Cough. 47 Cases were notified compared with 107 in 1949. There was no deaths.

Acute Poliomyelitis. This district was comparatively fortunate in its experience during the widespread epidemic of poliomyelitis which occurred in England and Wales during the summer and autumn of 1950. None of the four cases notified (3 paralytic and 1 non-paralytic) proved fatal.

Food Poisoning. One outbreak was reported during the year, two cases being notified. The casual organism was not isolated and the food involved was not found. The patients both recovered.

Tuberculosis.

· · · · · · · · · · · · · · · · · · ·	N	Iales	Females		
	Pul.	Non. Pul.	Pul.	Non. Pul.	
Cases on Register at					
31-12-49	24	11	16	7	
Number of cases notified					
during the year	2	_	1	_	
No. of cases restored					
during the year	_	_	_	_	
Inward Transfers	-	_	1	1	
Cases removed	3	- 4	4	2	
Cases on Register at					
31-12-50	23	11	14	6	

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172, of the Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.

VITAL STATISTICS.
SUMMARY FOR PREVIOUS YEARS

	Estimated	Births		Deaths Under 1 Year All Ages					
	Population -	No.	Crude Rate	No.	Rate	No.	Crude Rate		
1939	14990	243	16.3	_	28	199	13.0		
1940	16170	246	15.2		40.8	210	12.9		
1941		_	_	_	_	_	_		
1942	16510	290	17-56	_	31.03	195	11.8		
1943	-	282	17-47	_	49.64	241	14.93		
1944	-	325	20.23	_	39.91	242	15.06		
1945	15530	279	17.9	_	53.0	187	12.04		
1946	15600	321	20.58	10	31.15	203	13.01		
1947	15740	338	21.47	10	29.58	211	13.46		
1948	18020	262	14.54	6	22.90	212	11.76		
1949	17170	259	15.08	8	31	203	11.82		
1950	17240	265	15.37	5	19	201	11.66		

FACTORIES ACT, 1937.

Prescribed Particulars on the Administration of the Factories Act, 1937, for the Year 1950.

Classified List of Registered Factories as at 31st December, 1950.

	Power	Non- Power
1.—Food manufacture	10	6
(a) Boots and Shoes	2	_
(b) Outfitting	_	1
3.—Carpentry, Joinery and Sawmilis	14	5
4.—Garages, Repair Shops and Engineers	11	5
5.—Laundries	3	_
3.—Monumental Masons	_	1
7.—Gas Works	_	3
8.—Plumbers	-	2
Total	40	23

Part I. of the Act.

1. Inspections for purposes of provisions as to health.

	N	Number of					
Premises		Written Notices	Occupiers Prosecuted				
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	23	14	_	_			
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	40	26	_	_			
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	_	_		-			
	63	40	_	_			

2.—Cases in which Defects were found.

		No. of cases in which			
Particulars	Found	Re- medied	Refe to H.M. Inspector	rred by H.M. Inspector	prosecu- tions were instituted
Want of cleanliness (S.1)	2	2	_	1	0 _ 0
Overcrwding (S.2) Unreasonable	-	-	-	-	-
temperature (S.3) Inadequate ventila-	-	-	-	-	-
tion (S.4)	-	-	-	-	
of floors (S.6) Sanitary Conveniences (S.7)	_	_	_	-	-
(a) Insufficient (b) Unsuitable or	-	-	-	_	_
defective (c) Not separate	-	-	-/	-	_
for sexes Other offences against the Act (not including	-	-	-	_	-
offences relating to Outwork)	_	_	_	_	-
Total	2	2	-	1	-

Part VIII. of the Act-OUTWORK

	5	Section 11	10	Section 111			
Natue of Work	No. of out-workers in August list required by Sec. 110 (i) (c)	No. of cases of default in sending list to the Council	No of prose- cutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prose- cutions	
Making Wearing Apparel	29	_	_	_	_	_	
Umbrellas, etc. handbags and travel goods	2	_	_	-	_	_	
Total	31	_	_	_	_	_	

SUMMARY OF SANITARY INSPECTIONS

Housing						993
Butcher's Shops						59
Bakehouses						23
Shops						104
Factories and Wor	kshops					17
Water Supplies						206
Infectious Diseases						52
Verminous Premise	s					4
Defective Drainage						212
Defective Premises						311
Tents, Vans and S	heds					6
Overcrowding						1
Offensive Trades						2
Pests Destruction						36
						2026
Notices served—						
Informal—Sec	tion 92,	Public	Health	Act, 19	36	70
Statutory	,,		,,		,,	2

TUBERCULOSIS

Age and Sex distribution of Cases and Deaths, 1950.

Table I.

		New	Cases		Deaths			
Age Groups	Pulmonary		Oth	Other		onary	Other	
	M	F	M	F	M	F	М	F
0—	_	_	_			_	_	_
1	_	_	_	_	_	_	_	_
5—	-	_	-	-	_	_	_	_
5—	-	1	-	-	-	1	_	-
0—	1	_	-	_	_		_	_
5—	1	_	_	-	-		_	_
5—	-	-	-	_	-	_	_	_
5—	-	-	-	-	-	_	_	_
5—	_	_	_	_	1	_	_	1
5 and over	-	_	_	-	_	_	_	
ige Unknown	-	-	-	-	-	-	-	_
Total	2	1	_	_	1	1	_	

MONTHLY INCIDENCE OF NOTIFIABLE DISEASES

(Other than Tuberculosis)

Table II.

Total	34	47	10	124	61	9	4	6	236
Dесешрет	1	9	1	14	1	1	1	-	22
November	œ	1	1	32	1	-	1	8	44
October	3	-	-	16	1	1	1	1	21
September	8	3	1	2	1	1	5	1	10
August	1	1	1	7	1	1	1	1	œ
July	5	1	1	16	1	-	1	1	19
June	-	1	-	00	1	1	1	1	10
May	7	6	4	21	1	4	1	-	46
lingA	4	9	1	9	-1	1	1	61	18
Матсһ	4	3	1	-	2	1	1	-	12
February	-	œ	-	1	1	1	1	1	10
January	-	10	1	1	1	1	2	-	16
	Scarlet Fever	Whooping Cough	Pneumonia	Measles	Food Poisoning	Dysentery	Poliomyelitis	Erysipelas	Totals

INCIDENCE OF INFECTIOUS DISEASES IN PARISHES Table III.

Althorp										200
Arthingworth		Acute Primary Pneumonia	Measles	Scarlet Fever	Erysipelas	Whooping Cough	10 (3.00)	Non- paralytic	Dysentery	Food Poisoning
Totals 10 104 04 0	Arthingworth Boughton Brampton, Chapel Brampton, Church Brington Brixworth Clipston Cold Ashby Cottesbrooke Creaton Draughton East Farndon East Haddon Guilsborough Hannington Harlestone Hazelbeach Holcot Holdenby Hollowell Kelmarsh Lamport Maidwell Marston Trussell Moulton Naseby Old Overstone Pitsford Ravensthorpe Scaldwell Sibbertoft Spratton Sulby Thornby Walgrave		1 3 2 6 1 -1 1 1 2 10 1 -3 -5 1 -2 18 4 -3 5 2 -1 2 4 1 1	1 2 - 1 3 - 2 - 1 1 2 - 1 1 - 1 - 1 - 1 - 1 - 1 -		- 4 - 1 - 1 2 - 3 1 3 - 7 1 1 1				
	Totals	10	124	34	9					

Total number for District ... 236

