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ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

Administrative County of Cambridge for the Year 1942



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INTRODUCTION

This report follows the abridged lines of former war years, and estimates of opulations and actual numbers of births and deaths are not published because t is thought that these details will give information useful to the enemy.

VITAL STATISTICS AND INCIDENCE OF INFECTIOUS DISEASE

INCIDENCE C	F	INFE	CT	IOUS	DISE	ASE
Birth Rate:				1940	1941	1942
Administrative County				11.9	13.0	16.0
Cambridge				11.3	13.0	16.1
Rural Districts				12.5	13.0	16.0
Chesterton				12.1	12.5	16.6
Newmarket				13.3	14.2	. 14.5
South Cambridgeshire				12.5	12.6	16.4
Illegitimacy Rate:						H. A. B.
Administrative County				3.8%	5.2%	6.1%
Cambridge				4.9%	5.6%	7.0%
Rural Districts				2.8%	4.8%	5.3%
Still-birth Rate:						
Administrative County				32.3	27.1	28.2
Cambridge				38.8	19.0	34.1
Rural Districts		***		26.2	34.7	23.3
General Death Rate:						
Administrative County				13.2	12.1	11.8
Cambridge				12.5	11.6	11.2
Rural Districts				13.9	12.5	12.5
Infant Mortality:						
Administrative County				42.4	42.6	40.1
Cambridge			***	39.4	37.9	38.8
Rural Districts				45.2	47.0	41.4
Maternal Mortality (Total b	pirths):				
(a) From sepsis:					0.0	****
Administrative Co	unty		***	2.0	0.9	Nil
Cambridge	***	***		2.0	0.9	Nil
Rural Districts	***	***		1.9	0.9	Nil
(b) From other puerperal						
Administrative Co	unty			1.5	1.3	1.5
Cambridge		***	***	1.0	2.6	0.8
Rural Districts		***		1.9	Nil	, 2.3
Tuberculosis:						
(a) Pulmonary:				0.05	0.40	0.21
Administrative Co	unty			0.35	0.42	0.31
Cambridge				0.30	0.48	0.28
Rural Districts				0.40	0.37	0.33
(b) Non-pulmonary:				0.00	0.00	0.00
Administrative Co	unty	· · · ·	***	0.03	0.08	0.08
Cambridge				0.03	0.05	0.06
Rural Districts			***	0.05	0.11	0.10
(c) All forms:				0.20	0.50	0.20
Administrative Co	unty			0.38	0.50	0.39
Cambridge				0.33	0.53	0.34 0.43
Rural Districts		***	***	0.45	0.40	0.43
Cancer:				20	20	1.0
Administrative County		***	***	2.0	2.0	1.9
Cambridge				1.7	2.0	2.1
Rural Districts		***		2.1	2.0	
		THE RESERVE TO STREET	4 10	1 1	THE RESERVE AND ADDRESS OF THE PARTY OF THE	

The birth rate has continued to rise and for the County as a whole was the highest figure recorded since 1923. In the case of the Borough of Cambridge and the Rural Districts of Chesterton and South Cambridgeshire, the rise

represented a very considerable increase over the figure for the previous year, but in Newmarket Rural District it appeared to be a continuance of a gradual rise and the actual figure reached was of a lower magnitude.

The illegitimacy rate has continued the trend of the previous year, more markedly in the Borough than in the rural area, but as was pointed out in the 1941 report, the precise significance of this is not certain and it does not neces-

sarily represent any loosening of moral standards.

The slight fall in the death rate is entirely due to a fall in the Borough. It is by no means the lowest recorded figure, but it may be regarded as satisfactory and as being in the neighbourhood of the minimum which can be expected

among a gradually ageing population.

Infant mortality is not high, but the figure still leaves something to be desired in an area of this character. It is, however, satisfactory to see a fairly substantial improvement in the rural area as compared with the figures for the previous two years. As usual in recent years, deaths due to prematurity, congenital malformations and birth injuries account for much the largest part of infant mortality both in the Borough and in the rural area, so that it is to the care of the expectant and parturient mother rather than to that of the infant that subsequent improvement will be due. The rate for England and Wales as a whole was 49, the lowest recorded figure.

The maternal mortality rate remains low, that for puerperal sepsis being nil throughout the County. Unless such a figure continues over a number of years, however, it should not be taken as representing anything more than a coincidence conditioned by the small total number of births and deaths under consideration. This is also the reason for the rather marked fluctuation in the figures for deaths from other puerperal conditions in the three years for which they are shown.

In view of the fears which have been expressed about a possible increase in the incidence of tuberculosis, the fall in the mortality from the pulmonary type of the disease is very gratifying. The figures are, as a matter of fact, the lowest ever recorded for either the Borough or the rural area. Unfortunately, however, the rate for the non-pulmonary type of the disease tends to remain at a higher level and therefore the rate for all forms has not touched a low record. It may not be amiss to point out that some of the deaths from non-pulmonary tuberculosis (though not all) would be eliminated by efficient pasteurisation of the milk supply and it is possibly significant in this connection that the death-rate from non-pulmonary tuberculosis in the rural area during the last three years has been nearly twice that in the Borough of Cambridge.

Probably the most that can be said about the cancer death-rate is that it may represent a maximum which has brought to an end the gradual increase of the

years immediately preceding the war.

The following figures show the incidence of the principal infectious diseases in the administrative county during the year, with those of the two previous years for comparison:—

comparison :—		1940	1941	1942
Scarlet Fever		301	139	194
		35	86	61
		19	10	5
(including para	typhoid)			
Smallpox		-	-	-
Cerebro-spinal Fever.		26	33	12
Pneumonia		122	91	85

The incidence of diphtheria has declined somewhat, though it still continues at a higher level than was the case for some years prior to 1941. Once again the great majority of the cases have been in the Borough, there having been only 10 in the whole of the rural area.

Cerebro-spinal fever also shows a notable decline and, unless there is a recurrence of the conditions akin to overcrowding which were in evidence at the beginning of the war, there is no reason why this decline should not continue.

Diphtheria Immunisation.—The arrangements detailed in previous reports for the immunisation of children of all ages continued during 1942 and in addition the three Rural District Councils instituted a scheme for the individual immunisation of children of under school-age by a private practitioner of the parents' choice. Under this scheme any child can be immunised by a private practitioner and, on being informed that a child has had both the required injections, the District Council pays the practitioner a fee of 7s. 6d. per child. The scheme has proved of great value in overcoming the difficulties associated with the immunisation of children of under school-age in schools which were described in the report for the year 1941. During the few months of 1942 in which it was in operation, 307 children were treated in this way.

The number of children of under school-age treated in schools during 1942 was 36.

The following table sets out the numbers of children treated in infant welfare centres, the figures in brackets indicating additional children who received one injection only:—

ie injection only			6	Children	treated.
Abington	 			13	
Bassingbourn	 			66	(2)
Bottisham	 			14	
Bourn	 			66	(12)
Burwell	 			47	
Cheveley	 			34	
Cottenham	 			26	
Coton	 			28	
Fordham	 			29	(3)
Fulbourn	 			26	(6)
Girton	 			27	
Great Shelford	 			21	
Harston	 			50	(2)
Histon	 			50	(5)
Linton	 			15	
Melbourn	 			-	
Sawston	 			-	
Soham	 			_	
Steeple Morden	 			33	
Waterbeach	 			55	
Willingham	 			12	
		TOTAL	BILLIA	612	(30)

Thus a total of 955 children of under school-age received two injections of A.P.T. during the year, a considerably smaller number than that of the previous year when 1,682 infants received both injections. Of course the children immunised in 1941 were those of parents who realised the importance of the matter and came forward readily, while most of those treated in 1942 were those of more reluctant parents who required a certain amount of stimulation to take advantage of the facilities. They were also those in whose case the difficulties detailed in the report for 1941 were most likely to operate and it is to be hoped that the scheme of individual immunisation when it has been in operation for a full year will have brought about an improvement in the acceptance rate for this very important group of children. The problem is to find some method of propaganda which will not only bring the existence of the scheme before the notice of parents but will also impress them with the urgent need of taking advantage of it.

The number of children of school-age receiving two immunising injections was 1,355 in Cambridgeshire schools and 29 in separate schools for evacuees, a total of 1,384. Of course this is a very much smaller figure than that of the previous year, but this is due to the fact that a large number of children had been dealt with in the previous two years and that it represents the consenting fraction of those remaining to be treated. Since the work in schools started, a total of 8,420 children have received immunising injections, a figure which cannot be regarded as unsatisfactory, but it would be quite misleading to express this as a percentage of the children of school-age in the County (9,650 on roll at March 31st, 1942, including evacuees), since the school population is constantly changing. In particular, of course, the addition of the children who have not been treated while under school-age from year to year creates a constantly increasing pool of non-immune children in school. Until several years have elapsed, the number of untreated children in any one school will be small and the arranging of immunisation sessions on the old lines is difficult in consequence. It is pleasing, therefore, to be able to report that, at the time of writing, the District Councils have extended the scheme of individual immunisation to children of school-age. As in the case of children of under school-age, the difficulty will be to keep the importance of the matter in the public eye and to induce those parents who have not hitherto seen the necessity for immunisation to take the required steps without delay.

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES

In 1942 notification of intention to practise was received from 44 midwives, this total including the usual small number notifying for an occasional case. The total number known to be practising at the end of the year was 42.

Midwives attended 782 confinements during the year, acting as midwives only in 470 cases and as maternity nurses under medical direction in 312. They found it necessary to summon medical aid in 199 of the cases in which they acted as midwives only.

Once again a considerable rise in the number of maternity cases admitted to the County Hospital, Mill Road, Cambridge, has to be recorded. The total number of such admissions was 823 as against 699 in 1941, of which 295 were from the rural area (277 in 1941). The rise so far as the rural area is concerned is the smallest for some time and it may be that the balance between domestic difficulties and transport difficulties has now been struck and that saturation point is at hand. No diminution in domestic difficulties was apparent in 1942 and in particular the supply of home-helps did not satisfy the demand. How far the end of the war will bring about improvement is problematical and it is possible that better transport facilities will bring about a further rise in the number of institutional confinements.

Sixty women from the rural area were admitted to Addenbrooke's Hospital for abnormalities connected with pregnancy or parturition. This figure brings to an end the steady fall in the number of such admissions which has been in evidence since 1937, though even now it is somewhat below the total of 81 cases admitted in that year. The corresponding figure for 1941 was 47.

Great and Little Chishill still present difficulties from the point of view of the working of the Midwives Act of 1936. Fortunately, the number of maternity cases there is very small and, after the trial and failure of the scheme of providing a hired car for the Melbourn nurse, recourse has had to be had to the rather unsatisfactory expedient of sending a midwife from Cambridge when necessary.

The total number of births notified in the rural area in 1942 was 826 of which 14 were still-births. Of these, 742 were notified by midwives and 84 by doctors or parents.

The number of women examined ante-natally under the Council's scheme was 449 of whom 16 were evacuees, while the number examined post-natally was 174, of whom 11 were evacuees. The following are the details:—

Ante-natal examinations at or about the 16th week:

12

51

Ame-matar exa	animations at 0	about the	TOTH WEEK.	
To be delivered by midwife	To be transferred to doctor	Referred to hospital	Consultant's opinion required	Institutional delivery recommended
260	3	6	2	5
Ante-natal ex	aminations at th	ne 32nd—3	6th week:	
304	2	9	. 6	3
Post-natal exa	minations (1):			
Cases taken normal course	Treatment re (excluding d	lental	Treatment being obtained	Reference to hospital desirable
125	6		5	1
Post-natal exa	minations (2):			

The number of obstetric consultations was 3 in 1942, 2 less than the figure for the previous year.

The following are the figures relating to visits paid by Health Visitors :-

To children under 1 year 1st visits ... 1,160
To children aged 1-5 Total visits ... 11,147
To children aged 1-5 Total visits ... 14,648

There has been no change in the arrangements for the supervision of boarded-out children and hereunder are the details of the work during 1942.

Homes inspected					9
Approved					9
Total number supervis	sed				124
Children on register at	begi	inning o	f vear		100
New cases					
Removed from register	(all	cases)			27
Remaining on register			ır	***	-
Orders of Court made					Nil

Cases of failure to comply with the provisions of the Act were as follows :-

Failure to notify intention to receive a child ... 2
,, ,, removal of child 4

Infant Welfare Centres.—The total number of centres increased from 20 to 21 during the year, a centre at Willingham being opened on February 5th, 1942. As the centre at Soham was open only for the distribution of fruit juice and codliver oil and for the weighing of some infants, only 20 were in full operation. Fortunately, it can be reported that at the time of writing the Soham centre has resumed full activity.

The number of children attending the centres throughout the year was 489 who were still under the age of 1 year at the end of the year and 1,513 who were over the age of 1 year at that time. Of these, 599 new children who at the date of their first attendance were under the age of 1 year and 301 who were between the ages of 1 and 5 years had actually commenced attendance in 1942.

Registration of Nursing Homes.—There was no change in the arrangements for the registration and inspection of nursing homes during 1942.

Two applications for the registration of small maternity homes in the rural area and 1 for the registration of a nursing home for general medical cases in the Borough of Cambridge were received and granted during the year.

No application which had to be refused was made.

At the end of the year the number of beds provided in registered nursing homes in the administrative county was 53 maternity and 66 others. These were contained in 14 homes.

TUBERCULOSIS

The following figures relate to new cases of tuberculosis coming to the knowledge of the Medical Officer of Health, by formal notification or otherwise, during 1942:—

Age Peri	ods		Pulmo	nary		Non-Pu	lmonary
			M.	F.		M.	F.
0			-	-		_	_
1			1	-		_	_
5			_	1		2	2
10			_	_		5	2
15			1	4		3	1
20			7	11		1	3
25			8	14		2	2
			13	20		3	7
35 45			25	10		3	
55			12 -	1		-1	_
	nd upw	vards	13	4		-	3
			80	65		20	20
			_		A CHARLES		

In 57 of these cases information was derived through channels other than formal notification, namely from the death-returns of local registrars, 24; posthumous notifications, 22, and transfers from other areas, 11. The first two of these figures are once again considerably higher than the corresponding figures for pre-war years.

The number of cases of pulmonary tuberculosis is 25 less than that of the previous year, though, unfortunately, it is still higher than that of the year 1940 and nearly twice as high as that of 1939. Practically the whole of the decrease as between 1941 and 1942 has taken place in male patients. In the age-group 25-35 there has been a fall from 36 to 13 cases, but of course some of this fall has been offset by rises in the other groups.

The number of non-pulmonary cases is 7 more than that of the previous year.

Thus there has been a decrease of 18 in the total number of cases of tuberculosis and this, taken in conjunction with the fall in the death-rate detailed earlier in the report may be taken as some slight ground for satisfaction at this stage of the war. It should be stressed, however, that the fall is small, that it may be fortuitous and that the most strenuous exertions in all directions will be required to prevent further rises in the figures.

Dispensary and Homes.—As was mentioned in the report on the year 1941, Dr. Paton Philip continued to act as Tuberculosis Officer until about the end of March, 1942. His health then broke down completely and he was granted a long period of sick leave. Dr. L. C. Martin kindly filled the gap as far as possible until the beginning of June, 1942, when Dr. B. Couts was appointed full-time acting tuberculosis officer. Towards the end of the year Dr. Philip returned to duty, but it was obvious that he was still far from well and a further period of

sick-leave was granted, Dr. Couts continuing to act for him. It is pleasing to bee able to report that at the time of writing Dr. Philip has returned to duty and that he is in good health and able to carry out his work with full efficiency.

Dr. G. S. Haynes resigned from his post as physician carrying out artificial pneumothorax work at the clinic as from December 31st, 1942. No new appointment has been made and the work is now being done by the Tuber-culosis Officer and his staff.

The following figures set out the work carried out during the year :-

1. Cases examined or treated at or in connection with the Clinic :-

	Borough	Rural	Total
New Cases	727	402	1,129
Old Cases	220	280	500
			300
	947	682	1,629
			,,,,,,
2. Visits by patients to Clinic	c :—		
Insured Persons	965	573	1,538
School Children	231	259	490
Other Uninsured Persons	479	301	780
		001	700
	1,675	1,133	2,808
3. Visits to Homes:—		-,	2,000
(a) By Tuberculosis Officer	-		
Insured Persons		200	422
School Children	67 31	365	432
Other Uninsured Persons	35	60	91
o modred reisons	33	57	92
Total 1942	133	482	615
,, 1941	128	753	615 881
	120	755	001
(b) By Clinic Nurse:—			
Insured Persons	232	266	100
Uninsured Persons	110	301	498
	110	301	411
Total 1942	342	567	909
,, 1941	458	602	1,060
		002	1,000
(c) By General Nursing Sta	ff:—		
Insured Persons	307	289	596
Uninsured Persons	124	386	
		300	510
Total 1942	431	675	1,106
,, 1941	400	582	982
		302	902
		1000	

In 1942 the total number of new cases examined was 1,129 as against 1,192 in 1941, of which 177 were found to be suffering from tuberculosis (204 in 1941). Of the 177 cases, 52 were transfers from other areas. Of the total number of new cases, 176 were contacts, 7 of whom proved to be infected.

At the end of the year 685 names remained on the register, 184 having at some time or other had tubercle bacilli in the sputum. The number on the register was 49 more than the corresponding number at the end of 1941.

The number of specimens of sputum examined was 332, tubercle bacilli being found in 73.

X-ray examinations numbered 2,499 (2,676 in 1941), of which 1,780 were cases in which films were taken and 719 required screen examination only.

Thirty-three cases received artificial pneumothorax treatment throughout the year (31 in 1941), the total number of refills being 521 (476 in 1941).

Three cases received dental treatment at the Clinic, the same number as in 1941.

Care and Aftercare.—The Cambridgeshire Tuberculosis After-Care Association continued its work during 1942, receiving a grant of £250 from the County Council for the financial year 1942-43, an increase of £50 over the figure for the previous year. Forty-one cases were assisted, 11 being men and 30 women. No increase in war-time difficulties of supplying extra nourishment to patients materialised in 1942, but of course the position remained very different from what it was in peace time.

Sanatorium Accommodation.—The demand for beds was in no way diminished during the year and the difficulty of providing them remained one of the major anxieties of the work. Advanced cases in particular could not be accommodated with reasonable rapidity on several occasions when their home circumstances urgently required it.

The following table gives the details of patients receiving sanatorium treatment:—

			Admitted during 1942	Total treated 1942
Adult males	 	36	42	78
Adult females	 	26	48	74
Children	 	6	3	9
		68	93	161

The 93 new admissions represent a further considerable rise as compared with those of recent years (79 in 1941 and 45 in 1940).

VENEREAL DISEASES

The following are the figures relating to the work of the venereal diseases clinic at Addenbrooke's Hospital. Attendances from the Isle of Ely, Hunting-donshire and other areas are included, and the cases comprise both military and civil patients:—

	Male	Female	Total
Under treatment on January 1st, 1942	86	47	133
Old cases re-admitted	15	8	23
"First time" patients during 1942	527	134	661
Total under treatment	628	189	817
Left without completing treatment	26	10	36
Completed treatment but not final tests	7	3	10
Completed treatment and tests	124	97	221
Transferred to other Treatment Centres	384	36	420
Under treatment at end of year	87	. 43	130
Out-patient attendances:			
	2,603	944	3,547
(b) On intermediate days	1,785	44	1,829
Aggregate "In-patient days"	370	155	525 .

It may be remembered that a comparison of the figures for the years 1940 and 1941 showed that there had been a very large increase in the number of patients receiving treatment for the first time (from 277 to 590). Fortunately, in 1942, though there has been a further increase, its magnitude is comparatively small, the actual increase having been from 590 to 661. Of the total, 450 were military cases so that the total of civilian cases is actually less than that of the year 1938 (211 as against 237). This does not, of course, mean that there has been an actual fall in incidence among civilians since many of the military cases might still have contracted infection had they remained in civil life and many of the civilian cases may be additional to those which would have occurred had there been no war.

Nevertheless, the detailed figures relating to Cambridgeshire residents do show improvement as compared with those for the previous year. There were 132 new patients as against 143 in 1941, comprising 12 cases of syphilis (26 in 1941), 19 cases of gonorrhoea (32 in 1941) and 101 cases of non-venereal conditions (85 in 1941). The last figure continues to rise (63 in 1940, 85 in 1941 and 101 in 1942) and may be regarded with satisfaction in so far as it indicates an increasing disposition to seek advice when the risk of intection has been run.

Once again comment may perhaps reasonably be made on the astonishingly low figure for cases of gonorrhoea and speculation as to how far this is due to the treatment of considerable numbers of cases outside the clinic may not be out of place.

The attendances of women suffering from gonorrhoea do not improve. From all areas there were only 4 new cases, including 1 military case, and the total number of attendances of women either at regular clinic sessions or for intermediate treatment was only 98.

Laboratory Diagnosis.—The number of specimens submitted for Wasserman reaction in 1942 was 1,382 (477 from the Clinic). The number examined bacteriologically was 374, (364 from the clinic).

MENTAL DEFICIENCY ACTS

In 1942, 22 new cases were considered by the Mental Deficiency Committee, 3 notified by the County Education Committee, 8 by the Borough Education Committee, 5 privately, 1 by the Cambridgeshire Voluntary Association for Mental Welfare, 2 by the Secretary of State, 2 by the Police and 1 by the London County Council.

The method of dealing with them was :-

Petition for Certified Institut	tion	 	 4
Statutory Supervision		 	 8
Voluntary Supervision .		 	 4
Order by Secretary of State		 	 2
Order of Court		 	 1
Left County		 	 1
Not mentally defective .		 	 1
No action		 	 1

At the end of the year there were 21 cases on leave of absence from institutions.

Although the above table shows that 7 new cases went to institutions during the year, this should not be taken as an indication that the difficulty of obtaining vacancies no longer exists. In point of fact it is as evident as ever and, if the working of the Mental Deficiency Acts is not to be reduced to a dead letter, it will have to be faced at the earliest possible moment after the war.

BLIND PERSONS ACTS

No changes in the mode of working of the above Acts took place in 1942. At the end of the year there were 230 blind persons on the register, the distribution as to situation and age periods being as follows:—

Borough Rural Area			0-5 —	5-16	Over 16 99 128	Total 102 128	
		-	-	3	227	230	-

Of these, 206 were regarded as unemployable. There were 9 homeworkers and 9 employed elsewhere in addition to 1 employed in a workshop for the blind. Three trained workers were unemployed. One blind person was under training and 1 was regarded as trainable but not under training.

R. FRENCH,
County Medical Officer.

