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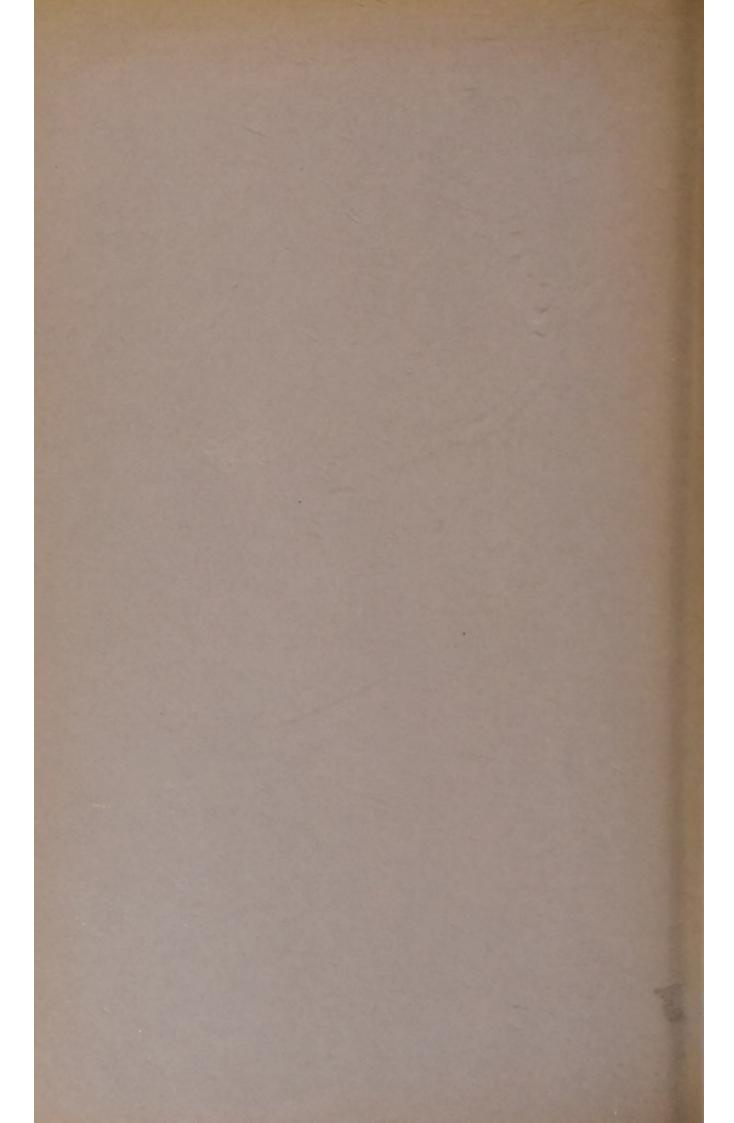
ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

ADMINISTRATIVE COUNTY OF CAMBRIDGE FOR THE YEAR 1953



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HEALTH COMMITTEE

as at December 31st, 1953

Chairman-Alderman R. Ellis*+

Alderman M. Carter*+§	Councillor J. A. Dayt
" L. M. H. Clark*+§	" P. F. Dennard
,, E. G. G. Frost*+	" E. Farmer†
" E. W. Parsonst	" H. Hartley*
" C. D. Rackham*§	" E. Hepher*§
" R. H. Parker*†	" F. H. Jeeps
Councillor E. W. Bullman†	" H. R. Mallett+§
" F. Bunnett†	" J. A. Patterson
" M. C. Burkitt*	" C. Walston*†
" C. H. Careless	" R. E. Way
" J. B. Collins	" C. Webb*
	" E. Whitehead†

Chairman of the City M.C.W. Sub-Committee.

Vice-Chairman of the City M.C.W. Sub-Committee.

Dr. A. Brown*
Mr. B. McN. Truscott*
Dr. D. Cameron†

Nominated by the Cambridgeshire Local Medical Committee.

Miss D. K. Bell* Nominated by the Royal College of Nursing.

*Member of Maternity and Child Welfare Sub-Committee.

Member of Mental Health Sub-Committee.

§Member of Home Help Service Sub-Committee.

The following were co-opted members of the Mental Health Sub-Committee:—

Mrs. H. A. Adrian, Mrs. E. Blackman, Mrs. E. Rawdon Briggs, Mrs. R. Rootham, Mrs. H. Wilson.

The following constituted the City Maternity and Child Welfare Sub-Committee:—

Appointed by the City Council:-

The Mayor, Mr. E. H. Cherrys, Mr. J. B. Collins, Mrs. P. Clarke, Mrs. M. E. Henn (Vice-Chairman), Mr. H. R. Mallett†s (Chairman), Mrs. L. A. Thompson, Mr. G. Wilding.

Appointed by the County Health Committee :-

Alderman M. Carter, Alderman C. D. Rackham, Councillor E. Hepher.

Co-opted Members :-

Mrs. D. Greaves, Mrs. E. Patterson§, Dr. M. G. P. Reed.

VITAL STATISTICS AND INCIDENCE OF INFECTIOUS DISEASE

The following figures set out the principal facts relating to the Administrative County for the year 1953 and for the two previous years.

Populations	(Registrar	General's	Estimates):
-------------	------------	-----------	-------------

Administrative C Cambridge Rural Districts Chesterton Newmarket South Cambridge		90,7 85,5 39,3 20,1	00 40 60 70 20	1953 177,100 90,910 86,190 39,450 20,110 26,630
Births (live):				
Administrative C Cambridge . Rural Districts . Chesterton . Newmarket . South Cambridge	Rate per 1,000 Number	2,577 14.7 1,249 14.0 1,328 15.5 597 15.3 271 13.4 460	2,570 14.6 1,302 14.3 1,268 14.8 597 15.2 279 13.9 392	2,771 15.6 1,314 14.5 1,457 16.9 623 15.8 334 16.6 500
	Rate per 1,000	17.6	15.0	18.8
Illegitimate Births:				
Administrative County Cambridge Rural Districts	Number	60 4.8 4.8	126 4.9 80 6.1 46 3.6	128 4.6 80 6.1 48 3.3
Still Births:				
Administrative County Cambridge Rural Districts	Number Rate per 1,000 total birt Number	hs 18.9 22	56 21.3 29 21.8 27 20.8	58 20.5 25 18.7 33 22.1
Deaths:				
Administrative County Cambridge Rural Districts	Number	n 11.7 935 n 10.4 1,113	1,855 10.5 913 10.6 942 11.0	1,807 10.2 887 9.8 920 10.7

	Administrative County Cambridge Rural Districts	Number	55 21.3 23 18.4 32 24.1	41 16.0 24 18.4 17 13.4	54 19.5 31 23.6 23 15.8
	From Sepsis:				
(4)	All Areas	Number	Nil Nil	Nil Nil	Nil Nil
(b)	From other puer Administrative County Cambridge	Number	Nil Nil	Nil Nil 1	0.35 Nil Nil 1 0.67
Tub	erculosis Deaths :				
	Pulmonary: Administrative County Cambridge Rural Districts	Number	27 0.15 14 0.16 13 0.15	31 0.18 18 0.20 13 0.15	25 0.14 10 0.11 15 0.17
	Non-pulmonary: Administrative County Cambridge Rural Districts	Number	6 0.03 4 0.04 2 0.02	7 0.04 2 0.02 5 0.06	0.02 2 0.02 1 0.01
A	Administrative County Cambridge Rural Districts	Number	33 0.18 18 0.20 15 0.17	38 0.22 20 0.22 18 0.21	28 0.16 12 0.13 16 0.18
Car	Administrative County Cambridge Rural Districts	Number	340 1.9 149 1.7 191 2.2	337 1.9 171 1.9 166 1.9	324 1.8 161 1.8 163 1.9

The estimated rise in the population between mid-year 1952 and mid-year 1953 is 800, a considerably lower figure than that representing the rise between 1951 and 1952. In contrast to the position as between the two earlier years, the greater part of the rise has been in the rural area

and almost the whole of that rise has taken place in South Cambridgeshire where there had previously been a fall. The rises in the City and in Chesterton Rural District were comparatively small and the falling

tendency in Newmarket Rural District was not checked.

There was a rise in the birth rate in the County as a whole and each constituent part shared in the rise, but to a very different extent. The rise in Cambridge and Chesterton Rural District was small, but there was a considerable rise in Newmarket Rural District and a very marked one in South Cambridgeshire. The rise in the last mentioned area is such as to call in question the possible influence of the American Hospital in Wimpole Park, where large numbers of births to the wives of American service personnel take place. Theoretically only those of children whose parents actually reside in South Cambridgeshire should be credited to that area, but it may be that the transfer mechanism is not perfect in its working.

The illegitimate birth rate has fallen slightly, the whole of the fall having been in the rural area while the rate in Cambridge has remained

stationary at a level considerably above that of pre-war years.

The still birth rate has also fallen but in this case the fall has been entirely in Cambridge and there has been a slight rise in the rural area.

The general death rate continued to fall in the County as a whole and the improvement took place in both the City of Cambridge and in the rural area, though it was of greater extent in the former place. If, however, the rates are standardised by the use of the comparability factor supplied by the Registrar General, it is found that the rate in Cambridge is 9.6, while that in the rural area is 9.1, which might at first glance be taken to indicate better environmental conditions outside the City, but, when it is remembered that the same procedure gave almost exactly the opposite result in the previous year, it may be concluded that there is no significant difference.

As might have been expected, it was not possible to maintain the infant mortality rate at quite the record low level of the previous year, but the figure of 19.5 for the County as a whole is still the lowest rate except for that of 1952. The rate rose in both City and rural area, that in the former area having been bettered in several previous years. In the rural area, as in the County as a whole, the rate was the lowest except for the 1952 rate. There were no deaths from diarrhoea in either City or rural area but there were two deaths from pneumonia, one in the City and one in the rural area, as against the total of 4, of which all were in the rural area, of the previous year. In 1953 there was also a death from bronchitis in the rural area and one of the deaths in the City was classified as due to "other infective and parasitic diseases" so that there was a total of four deaths of an infective, and presumably preventable, nature. Of a preventable nature must also be mentioned three infant deaths ascribed by the Registrar General to "all other accidents". There were two deaths in Cambridge due to "other malignant and lymphatic neoplasms", a rather unusual cause at this age. As usual, the bulk of the infant deaths is comprised in the headings "congenital malformations"

and "other defined and ill defined diseases". The former had risen from its very low level of the previous year to 13, a figure of approximately the same magnitude as that of 1951, while there were 31 deaths of the latter

category on which no comment is possible.

The City of Cambridge has now experienced its fourth successive year without any maternal death, but there was again one death from a cause other than sepsis in the rural area, making the maternal death rate 0.35 per 1000 total births in the County as a whole and 0.67 in the rural area. The County has been without deaths from sepsis for four years.

The death rate from pulmonary tuberculosis fell in the County as a whole, and was very slightly lower than the 1951 rate which had previously constituted a record. The whole of the fall was in the City of Cambridge where the record low figure of 1950 was again achieved, but the rate in the rural area rose somewhat to be slightly above the previous best.

The death rate from non-pulmonary tuberculosis was equal to the previous best figure for the County as a whole and the same can be said of the figures for the two individual areas, though that of the City was twice that of the rural area. This resulted in a record low rate for all forms in the Administrative County and the City, but the rate in the rural

area remained slightly over the previous best.

There were 13 fewer deaths from cancer in 1953 than there were in 1952 in the County as a whole, 10 less in the City and 3 less in the rural area, resulting in a slight fall in the death rate in the Administrative County and in the City and a stationary rate in the rural area. Out of the total of 324 deaths from cancer, 20 took place at ages below 45, 2 less than in the previous year, and 126 at ages below 65 as against 132 in the previous year. There was a rise in the number of deaths from cancer of the lung and bronchus from 45 to 51, making the figure one less than it was in 1951.

The incidence of the principal infectious diseases in the year 1953 and

the two previous years is shown below :-

Scarlet Fever		1951 72	1952 160	1953 219
Diphtheria Enteric Fever	• •	3	5	-
(including paratyphoid) Smallpox		1	2	_
Cerebro-spinal Fever		1	2	3
Pneumonia		154	59	94

There was a further rise in the incidence of scarlet fever, though fortunately the very high incidence of 1950 was not repeated. As has been pointed out before cases of scarlet fever are really cases of streptococcal throat infection which happen to have developed a toxaemic rash. The figures are no indication of the extent of streptococcal throat infection as whole and no measures directed to the control of those cases with a rash only can be fully effective. The problem is complicated by the fact that considerable numbers of people carry the relevant streptocci in their throats and noses without displaying any symptoms at all.

There were no confirmed cases of diphtheria in the County in 1953,

though one case in which the diagnosis was subsequently altered was notified in Chesterton Rural District.

By far the highest number of cases of poliomyelitis ever recorded in Cambridgeshire in a single year occurred in 1953. The total number was 45 of which 23 (17 paralytic and 6 non-paralytic) occurred in the City and 22 (14 paralytic and 8 non-paralytic) in the rural area. In the latter part of the County, a number of the notifications received came from the American Hospital at Wimpole Park and related to cases admitted there from places outside Cambridgeshire. This made the Cambridgeshire incidence appear higher than it actually was, but even so it would have been high compared with that of other years, not excepting 1947, a year of very high incidence in the country generally, though it may be remembered that Cambridgeshire suffered comparatively lightly.

Diphtheria Immunisation.—The arrangements in force in the City and in the rural area have been fully described in previous Reports and there was no change in 1953. The following figures show the work done in

the infant welfare centres of the rural area :-

ire centres	OI tile	Tulai	aica		
	Childre	n Trea	ated		
Abington				 	8
Balsham				 	12
Barrington				 	11
Bassingbourn	1			 	17
Bottisham				 	23
Bourn				 	2
Burwell				 	28
Castle Camp	os			 	5 2 7 5
Cheveley				 	2
Chippenham				 	7
Coton				 	5
Cottenham				 	-
Croydon				 	
Dullingham				 	17
Duxford				 	18
Elsworth				 	10
Fordham				 	
Fowlmere				 	3
Fulbourn				 	47
Gamlingay				 	
Girton				 	14
Gt. Shelford				 	19
Gt. Wilbrah	am			 	9
Harston				 	29
Histon				 	_
Isleham				 	5
Linton				 	4
Longstanton				 	11
Melbourn				 	5
Sawston				 	16
Soham				 	_
Steeple Mor	den			 	20
Swavesey				 	25
Waterbeach		* *		 	22
Wicken				 	_
Willingham				 	9
				T-1-1	402

403

Total

In addition, 79 children in attendance at infant welfare centres received "booster" doses to reinforce the effect of injections given in earlier years.

Records were received in respect of an additional 860 children of under school age living in the rural area who were immunised in their own homes or in the surgeries of medical practitioners making a total of 1,263 immunised under school age with a further 48 children of school age. There were also 381 "booster" doses given in places other than infant welfare centres.

In the City of Cambridge a total of 715 children of under school age and 39 children of school age was immunised in clinics or otherwise.

There were 997 "booster" doses given in the City.

Vaccination against Smallpox.—Records were received as shown

hereunder for the year 1953 :-

			Vaccinated	Re-vaccinated
Under 1	year	 	1,547	_
Age 1-4		 	90	25
Age 5-15		 	51	49
Over 15		 	97	373
			1,785	447

The total number of people vaccinated is substantially the same as that of the previous year but it is satisfactory to be able to record a further small increase in the number of children under 1 year who were vaccinated. In view of the rather larger number of births, however, the percentage of children under 1 year who were vaccinated remains the same, namely 56. This figure is not altogether unsatisfactory as compared with those of the years when so-called compulsory vaccination was in force, but obviously there is room for further improvement.

Once again the number of re-vaccinations has fallen considerably.

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES

The following paragraphs give the details separately for the City of Cambridge and the rural area of the County.

City of Cambridge.

During 1953 five whole time midwives notified their intention to practise outside hospitals of whom three were employed by the Authority, one was in domiciliary private practice and one was in a nursing home.

The midwives employed by the Authority attended 96 cases as midwives and 102 cases as maternity nurses under the direction of medical practitioners, one more in the former category than in the previous year and 28 more in the latter. The midwives in private practice attended 58 cases as midwives and 31 as maternity nurses as against a total of 44 as midwives and 95 as maternity nurses in the previous year when there were two more midwives in practice.

The three midwives employed by the Authority and the midwife in domiciliary private practice were all qualified to administer gas and air analgesia, the total number of cases being 185, 29 more than in the previous year.

Pethidine was used as an analgesic in labour in 157 cases as against

147 in the previous year.

Midwives working outside hospitals found it necessary to summon medical aid in 24 cases, in 21 of which the practitioner concerned had already arranged to provide the patient with maternity medical services under the National Health Service Act.

The total number of births notified in the City during the year was 1,254 including 21 stillbirths, to which must be added 65 births to women normally resident in Cambridge taking place elsewhere, making a final

figure of 1,319.

At the combined ante-natal and post-natal clinics 103 women made 344 attendances in 1953. Twenty-two women attended for post-natal examination involving 23 attendances. These figures are a little lower than those of the previous year.

Premature Infants.—There were 11 live births of children with a birth weight of $5\frac{1}{2}$ lbs. or under in private nursing homes or at home during 1953 (two in nursing homes and 9 at home). The total number of premature live births in the area was 70, the remainder having taken place in hospital. One of the children born in a nursing home weighed between 4 lbs. 6 ozs. and 4 lbs. 15 ozs. and the other between 4 lbs. 15 ozs. and 5 lbs. 8 ozs. Both survived more than 28 days. Three of the premature births taking place at home were of children between 3 lbs. 4 ozs. and 4 lbs. 6 ozs. and of these 2 survived more than 28 days. Six of the births taking place at home were of children weighing between 4 lbs. 15 ozs. and 5 lbs. 8 ozs. and five survived more than 28 days. None of these premature children was transferred to hospital.

Illegitimate Infants.—The Council continued its contribution of £150 per annum to the funds of the Association for the Care of Girls for work in the City of Cambridge during 1953.

Health Visiting.—The number of visits paid by Health Visitors in the City of Cambridge during 1953 was as follows:—

To children under 1 year	 1st visits	1,362
	Total visits	5,823
To children age 1-5	 Total visits	6,068
To expectant mothers	 1st visits	144
	Total visits	251

Infant Welfare Centres.—The nine infant welfare centres continued their work during 1953. A total of 57 sessions per month was held and 3,177 children attended. At the end of the year 916 children were still under the age of 1 year. The number of children under the age of one year who first attended a centre during the year was 1,050. The total attendances by children of all ages was 21,390.

Day Nurseries.—The two day nurseries in existence in the City provided 14 approved places for children aged 0-2 and 81 full-time places and eight part-time places for children aged 2-5. The average daily attendance throughout the year was 10 children below the age of 2 years and 56 full-time and 3 part-time children between the ages of 2 and 5 years. All these figures represent some decrease as between 1952 and 1953.

Rural Area.

In the rural area notification of intention to practise was received from 47 midwives or maternity nurses of whom 37 were known to be in

practice at the end of the year.

Midwives attended 492 confinements during the year, 73 more than in the previous year, acting as midwives only in 337 cases and as maternity nurses under medical direction in 155. All of these confinements were attended by midwives employed by the Authority.

In addition to attendance at confinement midwives attended 587 cases which had been confined in hospital and discharged before the 14th day.

At the end of the year there were 37 midwives qualified to administer gas and air analgesia representing all those in the full time employ of the Authority and three in private practice. The number of cases in which the method was used was 342 as against 285 in the previous year. Pethidine was administered in 175 cases.

Midwives found it necessary to summon medical aid in 30 cases, in 12 of which the practitioner concerned had arranged to provide the patient with maternity services under Part IV of the National Health Service Act.

The total number of births belonging to the rural area which were notified during 1953 was 1,464 including 29 stillbirths. This figure includes transferred notifications of which the bulk comprised babies born in hospitals or nursing homes in Cambridge and Newmarket.

The number of women examined ante-natally by medical practitioners of their own choice under the arrangements provided by the County Council was 39 as against 47 in the previous year and the number examined post-natally was 17 as against 24 in the previous year. The fall in these figures mentioned in the previous year's Report has continued but at a very much lower rate. The numbers now examined under this scheme are very small and, as has been pointed out before, the reason is that more women engage medical practitioners under Part IV of the National Health Service Act. This engagement makes practitioners responsible for the ante-natal work involved but does not necessarily entail attendance at the confinement. The following are the details of the examinations carried out:—

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

To be delivered by midwife transferred to doctor 21 — Referred to hospital opinion required recommended

Ante-natal examinations at the 32nd-36th week:

Post-natal examinations at 10th-14th day:

Cases taken normal course	Treatment required (excluding dental treatment)	Treatment being obtained	Reference to hospital desirable
14	3	3	-
Post-nata	l examinations at about th	e 6th week:	
15	3	3	-

The absence of the need for reference to hospital or for institutional delivery as a result of ante-natal examination is noteworthy. A higher proportion than usual of women found to require treatment as a result of post-natal examination is evident but the figures themselves are so small as to make this of doubtful significance.

Premature Infants.—The number of infants born at home in the rural area with a birth weight of $5\frac{1}{2}$ lbs. or less was 12. Of these one had a birth weight of between 2 lbs. 3 ozs. and 3 lbs. 4 ozs., one had a birth weight of between 3 lbs. 4 ozs. and 4 lbs. 6 ozs., three between 4 lbs. 6 ozs. and 4 lbs. 15 ozs., and seven between 4 lbs. 15 ozs. and 5 lbs. 8 ozs. The child with the lowest birth weight and one of those in the highest group required transfer to hospital. All of the others remained at home and all but one survived more than 28 days. Of the two admitted to hospital the child with the lowest birth rate died within 24 hours but the other survived more than 28 days. One premature birth of a child with a birth weight of between 4 lbs. 6 ozs. and 4 lbs. 15 ozs. took place in a nursing home. The child was nursed entirely there and survived more than 28 days.

Illegitimate Infants.—The arrangements for illegitimate infants in the rural area remained unchanged from those of the previous year.

Health Visiting.—The following are the numbers of visits paid by health visitors to children under the age of five:—

To children under 1 year	 1st visits	1,267
	Total visits	13,538
To children aged 1-5	 Total visits	13,016

Infant Welfare Centres.—The number of infant welfare centres in the rural area remained unchanged during 1953 at 36. The number of children who attended during the year was 2,572 of whom 717 were still under the age of 1 year at the end of the year. Eight hundred and eighty four new children who were under the age of 1 year at the date of their first attendance visited the centres. The total number of attendances made by children under the age of 1 year was 5,994 and by children over the age of 1 year was 6,866.

The following figures give details of the work done at individual

centres :-

		New Cases	Total in
		under 1 year	attendance 54
Abington	 	16	73
Balsham	 	14	
Barrington	 	14	33
Bassingbourn	 	32	134
Bottisham	 	42	98 81
Bourn	 	16	
Burwell	 	32	93
Castle Camps	 * *	17	22
Cheveley	 	14	32
Chippenham	 	11	30
Coton	 	12	56
Cottenham	 	18	71
Croydon	 	5	13
Dullingham	 	21	63
Duxford	 	34	108
Elsworth	 	29	72
Fordham	 	18	66
Fowlmere	 	22	55
Fulbourn	 	29	60
Gamlingay	 	16	39
Girton	 	42	105
Gt. Shelford	 	54	107
Gt. Wilbraham	 	5	21
Harston	 	44	103
Histon	 	26	73
Isleham	 	17	36
Linton	 	23	55
Longstanton	 	28	89
Melbourn	 	38	73
Sawston	 	50	155
Soham	 	35	57
Steeple Morden	 	34	102
Swavesey	 	19	151
Waterbeach	 	35	105
Wicken	 	5	28
Willingham	 	17	59

Dental Treatment of Mothers and Young Children.—The full time dental surgeon who was mentioned in the 1952 report as having been appointed on December 1st of that year continued to work throughout the whole of 1953, but as was prophesied then the amount of school work in the area was more than sufficient to occupy the whole of the time of two dental surgeons and therefore no work for mothers and young children was done in the rural part of the County. Work in the City continued on the same lines as in previous years and the following tables set out the figures:—

(a) Numbers provided with dental care:

	Examined	Needing treatment	Treated	Made Dentally fit
Expectant and Nursing mothers	125	125	125	125
Children under five	255	216	216	216

(b) Forms of dental treatment provided:

	Extrac-	Anaesthetic		Fillings	Scalings or Scaling	Silver Nitrate treat-	Dress-	Radio-	Dentures provided		
	tions		General		& gum treat- ment	ment	ings	graphs	Com- plete	Partial	
Expectant and Nursing mothers	171	159	12	66	16	-	-	1	28	26	
Children under five	58	58		232	-	193	_	_	_	-	

In addition 16 repairs of dentures were carried out.

REGISTRATION OF NURSING HOMES

There was a further reduction in the actual number of nursing homes in operation during 1953. This was brought about by the closure of a maternity home in the City of Cambridge. On the other hand, a nursing home in the City of Cambridge which had previously been registered for 12 general medical cases became registered for 23 medical and surgical cases. The result was that at the end of the year there were four nursing homes in the City of Cambridge and two in the rural area providing between them three maternity beds and 36 medical and surgical beds as against 5 maternity beds and 25 others at the end of 1952.

HOME NURSING

There was no change in the general arrangements for home nursing which were described in the 1952 Report during the year. In the City of Cambridge at the end of 1953 the staffing position was not quite so good as it had been at the end of 1952, when there were eight whole time nurses employed. At the end of 1953 there were six whole time nurses and one half time nurse. Of the whole time nurses one devoted a considerable proportion of her time to administrative work.

In the rural area there were 34 nurses engaged part time on home nursing and combining their nursing duties with maternity work and health visiting, with a separate superintendent doing administrative work

only. This position was the same as at the end of 1952.

In the City the number of cases attended during the year was 1,813 as against 1,538 in the previous year and the number of visits paid was 29,859 as against 25,955 in 1952. In the rural area the number of cases was 3,457 as against 2,572 in 1952 and the number of visits was 47,823 as against 55,372 in 1952.

The nurses of both areas continued to deal with cases discharged from Addenbrooke's Hospital under the Home Care and Nursing Scheme. This provides that if suitable arrangements can be made at home for the treatment and nursing of cases occupying hospital beds, they are discharged at an earlier date than would otherwise be the case. As in the previous year by far the greatest proportion of patients considered suitable for discharge under the scheme was constituted by those who had had appendicectomy or herniorraphy. In the City 152 patients in all were discharged and in the rural area 89 patients, a considerable increase over the figures of 63 and 54 respectively in the previous year though obviously they still represent a very small proportion of the actual work done by the nurses of each area. In the whole of the area covered by the scheme (including districts outside the Administrative County of Cambridgeshire) 91 discharges followed appendicectomy and 101 herniorraphy.

THE DOMESTIC HELP SERVICE

The domestic help service continued to operate in both areas of the County on exactly the same lines as it had done in 1952. It may be remembered that in the report for that year it was pointed out that nationally agreed scales of payment to domestic helps had been adopted by the Council with retrospective effect to September 1952 but 1953 was the first complete year during which experience of their working could be gained. So far as the number of domestic helps in employment was concerned it cannot be said that their effect was striking since at the end of 1952 there were 26 whole time home helps and 99 part time home helps in the employ of the Council whereas at the end of 1953 the figures were 30 and 125.

The demand for the service continued as before, and once again it was not always easy to satisfy all requirements. Nevertheless there was a definite increase in the amount of work done and the following figures give particulars and the types of case attended:—

Maternity	 	 327
Tuberculosis	 	 36
Other	 	 737

TUBERCULOSIS

The following figures relate to new cases of tuberculosis coming to the notice of the Medical Officers of Health by formal notification or otherwise but not including transfers from other areas during 1953:—

Age Periods	Pulmo	onarv	Non-Pulmonary					
2.80 2 0.1011	М.	F.	M.	F.				
0	_	_	_	_				
1	1	1	1	-				
2	3	1	1	1				
5	5	4	1	2				
10	4	3	2	2				
15	11	6	1	_				
	11	8	2	_				
25	20	20	_	5				
35	9	7	-	2				
45	7	6		_				
20 25 35 45 55	6	3		1				
65	7	6	2	_				
75 and upwards	1	_	_	1				
	85	65	10	14				
	-							

In 16 of these cases information was derived from sources other than formal notifications namely from posthumous notifications 1, from death returns of local registrars 14, from transferable deaths notified by

the Registrar General 1.

In previous years the main table has included cases coming to the notice of Medical Officers of Health as a result of transfers from other areas but as it is not considered that this gives a true picture of the incidence of tuberculosis within the County it was decided to alter the table this year and not to include such cases. In actual fact, however, there were 30 pulmonary males, 23 pulmonary females, 4 non-pulmonary males and 1 non-pulmonary female coming to notice in this way, or 58 cases in all as against 55 of a similar nature in the previous year.

The actual failures to notify are contained in the figures relating to posthumous notifications, death returns of Local Registrars and transferable deaths notified by the Registrar General, a total of 16 as against 17

in the previous year.

In order to make comparison with the figures of the previous year possible it is necessary to add the cases transferred from other areas to the figures relating to Cambridgeshire only. If this is done the number of pulmonary male cases placed on the notification registers in 1953 was 115 as against 122 in 1952. The number of pulmonary female cases was 88 as against 76 in 1952 making a total of pulmonary cases of 203 as against 198 in 1952. The number of non-pulmonary male cases was 14 in 1953 as against 12 in 1952 and the number of non-pulmonary female cases 15 as against 24 in 1952, a total of 29 non-pulmonary cases as against 36 in the previous year.

The total number of ascertained cases of tuberculosis was 232 or 2 less than the figure for the previous year. Since the number of cases transferred from other areas was 3 more than that of the previous year,

this would seem to represent a reduction of 5 in the number of cases actually belonging to Cambridgeshire and, while this reduction may not be a large one, it is obviously satisfactory to be able to record that it exists and that there has been no increase in notifications.

A full account of the care and after care arrangements was given in the report for the year 1952 and work continued on exactly the same lines

in 1953.

No new cases were admitted to Papworth for rehabilitation during

1953 and the total since the arrangement started remained at 35.

The Chest Physician and his Staff vaccinated 62 persons with B.C.G. under the Council's scheme approved by the Minister of Health in accordance with the terms of Section 28 of the National Health Service Act of 1946.

The number of visits paid by nurses or health visitors during the year was 461 in the City and 1,023 in the rural area a total of 1,484 as against

1,362 in 1952.

Assistance was given by the After Care Committee to 47 patients (30 men and 17 women). Of these 22 returned to work, 19 remained under treatment at home, 4 were in sanatoria, 1 had died and 1 had left the area. Grants varied in value from 7/- to 27/- weekly.

As will be seen earlier in the report the Council was able to assist through its Domestic Help Service 36 families where a case of tuberculosis

was the cause of the need.

VENEREAL DISEASES

The following figures as to attendances at the clinic at Addenbrooke's Hospital have been supplied by the Physician in Charge:—

	Male	Female	Total
Patients under treatment on January 1st,			
1953	69	66	135
Old cases re-admitted	1	1	2
"First time" patients during 1953	156	83	239
Total under treatment (including trans-			
fers from other clinics)	233	154	387
Left without completing treatment	-	2	2
Transferred to other centres	5	2	7
Out-patient attendances:			
(a) On clinic days	1,218	840	2,058
(b) On intermediate days	-	_	_

There has been a rise in the number of new patients as compared with the figure for the previous year. Many of the post-war years had figures very substantially higher than this but there have been 4 years since 1938 with lower figures. There were 39 new cases of syphilis in Cambridgeshire patients representing a very considerable rise over the figure of 16 for the year 1952. The fact that there is now a rising tendency in this figure is disappointing although there have been several years since the end of the war with higher figures still.

There were 44 new cases of gonorrhoea in Cambridgeshire patients as against 34 in the previous year. Here again the tendency seems to be towards a rise in incidence so far as figures for attendances at the clinic are any indication but as has been pointed out in previous reports many cases of gonorrhoea are treated outside the clinic and it is very difficult

to make comparisons of value as between one year and another.

Out of 52 new cases of gonorrhoea for the whole of the area served by clinic, 17 were in women, a somewhat higher proportion than that of the previous two years. This figure is ground for satisfaction in that it indicates that a greater number of infected women are being treated and that previously existing sources of infection are being eliminated.

There were 18 new cases of congenital syphilis in 1953, a very considerable rise as compared with the figure of the previous year. The precise significance is not apparent since all the cases were over the age of 1 year

and there were again no cases in children under the age of 1 year.

The total of 20 contacts attending for examination during the year cannot be said to be very satisfactory and it may be noted that none of these attended as a result of the work of health visitors and social service workers. Apparently all were persuaded to attend by the patients alleging contact.

MENTAL HEALTH

Towards the end of the year some change took place in the arrangements which were described in the Report for the year 1948. The Enquiry Officer under the Mental Deficiency Acts who had also been Deputy Duly Authorised Officer gave up the former part of his work and continued as part time Deputy Duly Authorised Officer only. His duties as Enquiry Officer for the purpose of the Mental Deficiency Acts were taken over by the Duly Authorised Officer who became a full time officer of the Health Department and relinquished his duties as a part time member of the Finance Department.

The following figures set out details of the work of the Duly Authorised

Officer and his Deputy :-

as Departy.		
Cases Certified	 	76
Urgency Orders	 	4
Admitted under Sec. 20	 	31
Admitted under Sec. 21(1)	 	18
Voluntary Patients	 	225
Temporary Patients	 	1
Other cases	 	36

There has been an increasing tendency towards the admission of patients under Section 21(1) of the Lunacy Act with a corresponding decrease in other categories except that Voluntary Patients have increased

by 6 and there were 7 more cases in which no action was taken.

The work of the Psychiatric Social Workers appointed by the Cambridgeshire Mental Welfare Association on the County Council's behalf continued during 1953 and its volume was substantially unaltered. During the year they dealt with a total of 181 cases as compared with a total of 173 in 1952, 91 being new (89 in 1952) and 90 remaining on the books from previous years.

In 1953, 43 new cases of mental deficiency were considered by the Mental Health Sub-Committee of which 8 were notified by the County Education Committee, 23 by the City Committee for Education, 3 by

the Police, 5 privately and 4 by other Local Authorities.

The method of dealing with them was :—

Of the 5 cases in which the presentation of a petition was recommended, 2 were actually admitted to certified institutions during the year, making a total of 5 with the cases admitted by Order of the Court under Section 8 of the Mental Deficiency Act. At the end of the year there was still the same pressure on institutional vacancies as had existed for many previous years and without the provision of new accommodation it will never be possible to say that the work envisaged by the Mental Deficiency Acts is proceeding on satisfactory lines.

The number of cases still awaiting admission at the end of 1953 was 46, or 5 more than at the end of 1952 of which 7 were in Linton Hospital

and 13 in the Mental Hospital at Fulbourn.

At the end of the year there were 26 cases on licence from institutions. The number of cases under Guardianship was 7 of whom only 2 had guardians in Cambridgeshire. Of the remaining 5, the Brighton Guardianship Society had placed 3, 1 was in a home in Surrey and 1 in a home in Oxfordshire.

The Occupation Centre continued its activities on the usual lines in

1953 and at the end of the year the total number on the roll was 70.

The annual camp was held as usual and Bottisham Village College was again chosen as the place. The kindness of the Governors in making it available was greatly appreciated.

BLIND PERSONS

The Home Teachers in the City of Cambridge and the rural area continued their work without any break during 1953. There was a further slight increase in the number of registered blind persons, the number remaining on the register at the end of the year being 344 as against 341 at the end of the previous year. The following table sets out their distribution as to area and age periods.

	0-5	5-16	Over 16	Total
City Rural area	1	4 2	177 160	182 162
	1	6	337	344

Of the 337 cases of blindness over the age of 16, 292 were regarded as unemployable. There were 10 home workers and 27 employed elsewhere as well as 1 employed in a workshop for the blind. One blind person was under training and 4 more were regarded as trainable. Two were trained but unemployed.

The home teachers paid 2,102 visits to blind persons during the year

(City 1,129, Rural area 973).

It was decided not to hold the Christmas party which had been held in previous years during the winter months because of the difficulties caused by weather conditions which had been encountered. Actually it was not held until April 1954 and therefore would properly form a subject of the next Report.

A blind outing was arranged as usual, the greater part of the cost being defrayed by the County Council, and in 1953 the destination was

Walton on the Naze.

The following table shows the number of cases newly certified on Form B.D.8. during 1953 together with the action taken with regard to them:—

Number of cases registered during the year in respect of				
which para. 7 (c) of Forms B.D.8. recommends:—	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	11	-	-	17
(b) Treatment (medical surgical or optical)	2	-	mano-salah	5
Number of cases at (b) above which on follow up action have received treatment	1	-		5

There were no cases of retrolental fibroplasia reported amongst premature infants and no instances of persons blinded by glaucoma.

It is perhaps surprising that in so many cases of cataract no treatment was advised, but perusal of the Forms B.D.8. seems to indicate that good reason existed in each case of the kind. The one case of cataract in which no treatment was carried out in the face of advice that it would be of benefit refused to agree to the operation.

There were no cases of ophthalmia neonatorum notified during the year under the Public Health (Ophthalmia Neonatorum) Regulations 1926-1937.

AMBULANCE SERVICE

The following figures give details of the work of the ambulance service in 1953:—

	The following figures give details of the	
n	1953 :—	-
	Ambulances directly provided	1
	Cars directly provided	4
	Number of journeys by above	
	Ambulances	8,931
	Cars	4,254
	Patients carried by above	
	Ambulances	10,205
	Cars	6,914
	Accident and emergency journeys included in	
	above	
	Ambulances	947
	Cars	64
	Mileage run by above	
	Ambulances	110,647
	Cars	89,499
	Journeys by supplementary vehicles	100000000000000000000000000000000000000
	Ambulances	250
	Cars	9,459
	Patients carried by supplementary vehicles	
	Ambulances	260
	Cars	13,700
	Accident and emergency journeys by supple-	
	mentary vehicles	
	Ambulances	2
	Cars	Nil
	Mileage run by supplementary vehicles	
	Ambulances	6.691
	Cars	1052 22

The number of full time staff on December 31st, 1953 was 22.

There have been no great changes in either an upward or a downward direction in the figures relating to the work of the ambulance service during 1953. So far as ambulances are concerned, the tendency towards an increasing use of the Council's own vehicles has continued. Strangely enough, although the number of journeys and the mileage run by ambulances seems to have increased, the number of patients carried has decreased somewhat. In the case of cars there has been an increase in all the figures whether relating to the Council's own vehicles or to supplementary vehicles and in so far as the increased use of cars saves the use of ambulances, this is obviously of advantage on the score of smaller expense.

TABLE I.—Causes of Death at Different Periods of Life in the Administrative County of Cambridge, 1953

	AGGREGATE OF URBAN DISTRICTS					TS		AG	GREC	SATE	OF R	URAI	L DIS	TRIC	CTS		
		All							All								-
	Sex	Ages 0)— 1-	- 5-	15—	25—	45 6	5- 7	5— Age	s 0—	1—	5— 1	5— 2	5— 4	5— 65	5— 7	5—
ALL CAUSES	М	442	16	5 5	4	15	108	108	181 455	13	2	2	15	21	95	111	196
1 Tuberculosis, respiratory	F	445	15	2 1	3	18	73	109	224 465	10	3	3	3	16		121	233
2 Tuberculosis, other	F	2	_ :		_	1	_	i	- 6 - 1	=	-	_	-	2	2	2	_
3 Syphilitic disease	F	2		1 -	_	=	1	-		_	_	_	=	_	_	_	_
4 Diphtheria	F	_	= :		_	=	_	-		_	_	_	=	_	_	_	=
5 Whooping Cough	F	_	_ :	= =	_	=	_	-	_ =	=	=	_	-	_	_	_	_
6 Meningococcal infections	F	_	= :	= =	=	=	=	-	= =	=	_	_	_	_	_	=	_
7 Acute poliomyelitis	F	-	- :	= -	=	=	_	-		=	_	_	=	_	_	=	_
8 Measles	F	1	= :	1	_	=	=	-	_ 2	_	=	1	_	1	_	=	_
9 Other infective and parasitic diseases	F		1		=	_	-	-	= -	_	=	-	=	=	1	_	-
10 Malignant neoplasm, stomach	F	1 9	_	= =		1	4		- î	-	_	_	-	-	-3	4	1 7
11 Malignant neoplasm, lung, bronchus	F	8 24	_			-	1 13	4 8	3 13 21	=	_	_	_	-	13	4 5	7 2
12 Malignant neoplasm, breast	F	2	_			1	1	-	_ 4	_	_	_	=	1	=	2	1
13 Malignant neoplasm, uterus	F	22	_		=	2	9	7	4 17	=	=	_	=	_	4	8	5
14 Other malignant and lymphatic neoplasms	F	9 48				2 2	13	2 8	3 9 22 44	=	=	_	=	1	5	12	1 20
15 Leukaemia, aleukaemia	F	39	i		_	3	11	11	13 41	_	=	1	-	2	14	10	14
16 Diabetes	F	2				=	î	1	_ 1	_	-	_	_	-	1	=	- 2
17 Vascular lesions of nervous system	F	67	_		- 1	- 2	-6	18	3 I 41 33	=	_	_	_	_		12	19
18 Coronary disease, angina	F	108	_	= =		1	14 22	28	65 76 25 74	-	_	_	1	3	8	18	46 32
19 Hypertension with heart disease	F	54	_				8	21	25 40		_	_	=	=	4	21	15
20 Other heart disease	F	8	_	= =			1 4	16	7 7	_	_	_	-	- 2	10	2	61
21 Other circulatory disease	F	58 26	_	= =		=	5	14	39 114 16 26	-	=	_	_	- 2	11	22 22 7	81 14
22 Influenza	F	19	=	= =		2	2	5	10 18		=	_	-	_	5	4	9
23 Pneumonia	F M	6 26	-	= =			-5	1 5	5 5	=	-	_	_	=	1 5	1 2	3 4
24 Bronchitis	F	15	=			_	2	7 9	6 17	1	_		-	_	2	4 8	10 13
25 Other diseases of respiratory system .	F	8	_			-	1 5	2	5 11	-	_	_	_	=		3	7
26 Ulcer of stomach and duodenum .	F	5 5	_	_ :		1	-2	2 2	2 1	=	-	_	=	=	_	1	1
27 Gastritis, enteritis and diarrhoea	F	2	_	= :		=	1	=	1 8	1	-	_	_	_	2	2	3 2
28 Nephritis and nephrosis	. F	3 2	=		1	_	2	=	2 2	=	_	_	_	=	=	1	1
29 Hyperplasia of prostate	. M	1 4	=	= =			-	2	2 5	=	-	=	-	=	2	1 2	6
30 Pregnancy, childbirth, abortion	. M	=	=	_ :	= =		=	I	= =	_	_	_	=	=	_	_	_
31 Congenital malformations	. M	7	5		2 _	_	=	_		3	=	=	1	_	_	_	_
32 Other defined and ill defined diseases .	. F		5	1 -	_ 1	1 2	7	10	9 34	8	1	1	-	4	7	7	7
33 Motor vehicle accidents	. F	34	8			=	4	1	20 51		_	2	1	4	8	10	19
34 All other accidents	. F	1 8	-	3 -	1	- 1	1	1	2 1	_	1	_	10	1 3	2	-	-
35 Suicide	. F	8	1	1 -		1	4	-	6 2	5 -	_	=	1	2	1	1	4
36 Homicide and operations of war	F M	11	_	_ :		1	7	1	2 -	-	_	_	_	1	1	2	-
	F	-	-			-	-	-			-	-	-	-	-	-	

