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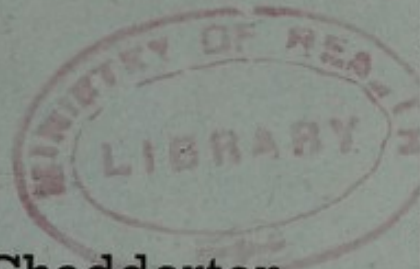
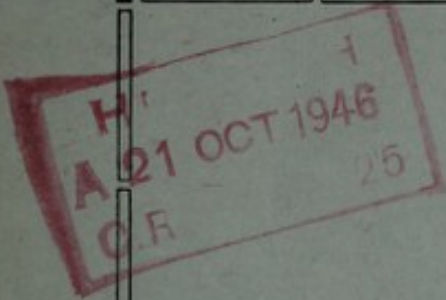
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Urban District of Chadderton

ANNUAL REPORT

of the

Medical Officer of Health

for the year

1945

J. S. G. BURNETT, M.D., D.P.H.

Medical Officer of Health.

OLDHAM:

E. J. Wildgoose Ltd., Printers and Stationers, 41, Union Street.





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THE BOARD OF HEALTH

ANNUAL REPORT

OF THE

CITY OF NEW YORK

1913

NEW YORK: THE CITY OF NEW YORK

1914

"Virtue, if not in action, is a vice ;
And, when we move not forward, we go backward".

MASSINGER.

To the Chairman and Members of the Urban District Council.

With our thoughts turned from that which was ugly and vicious to the happier tasks of the future it is with pleasure that one is able to report an auspicious beginning to the period of peace. The factors of death against which we wage unceasing war were in full retreat during 1945. Infectious disease killed fewer than ever before, maternal mortality was non-existent, infant mortality reached what even a few years ago would have been considered the irreducible minimum, tuberculosis deaths have at last turned downwards in the direction of the levels existing before the war and even cancer deaths have, by some curious unexplained freak, statistically lessened in number this year.

These facts give justifiable cause for satisfaction even when full allowance is made for climatological and other non-local factors and suggest that there may be some merit in the smaller unit of local government administration that can score an infant mortality rate of half that of each of its two large neighbours.

During the war years environmental defects have been discussed vigorously and fully in the Health Committee and impatience has been expressed at the inability to give practical expression to theoretical views. 1945 has seen the beginnings of practical work. Much of this however revolves round the question of slum clearance. The houseless and the grossly overcrowded obviously must have their needs satisfied urgently and as a first consideration but it seems illogical to rehouse families on grounds of ill health, among which rheumatism and tuberculosis justifiably rank high, whilst permitting reletting of the property that has materially contributed to that state of health. The housing problem is a national one but at present the type of problem varies from locality to locality and consideration should be given to a lifting of the embargo on slum clearance where local conditions warrant it.

The problem of the unpaved street is in my own view one of extreme urgency and requires immediate practical attention as does the unkempt adopted road. It is surprising but true that the only reasonably trim and tidy portion of Broadway is that part which lies within the boundary of Royton, the smallest of the four authorities through whose areas runs that main arterial highway. Much has been written and said about the creation of magnificent new neighbourhood units possessing all the amenities but it is a hard fact that the mass of population will spend its remaining days in its present surroundings and it is vitally concerned to see that these surroundings are as attractive as possible. Slums are the product of neglect and the aphorism prevention is better than cure applies to the public health with no less force than it does to the individual well being.

I am, Ladies and Gentlemen,

Your obedient Servant,

August, 1946.

Public Health Department,
Town Hall,
Chadderton.

J. S. G. BURNETT.

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CHADDERTON URBAN DISTRICT.

Health Committee.

Chairman :

Councillor Arthur Tongue, J.P.

Vice-Chairman :

Councillor George Lister Renshaw, J.P.

Councillor Edwin Buckley.

Councillor Harry Greenwood.

Councillor Fred Halkyard.

Councillor John Kirk (Deceased).

Councillor Victor Lamb.

Councillor Harold Halford Newton.

Maternity and Child Welfare Committee.

Chairman :

Councillor Arthur Tongue, J.P.

Vice-Chairman :

Councillor George Lister Renshaw, J.P.

Councillor Edwin Buckley.

Councillor Harry Greenwood.

Councillor Fred Halkyard.

Councillor John Kirk (Deceased).

Councillor Victor Lamb.

Councillor Harold Halford Newton.

Mrs. E. Friend.

Mrs. C. Halkyard.

Mrs. M. Johnson.

Mrs. C. E. Buckley.

Staff.

Medical Officer of Health ...	*J. S. G. Burnett, M.D., D.P.H.
Assistant Medical Officer of Health.	*V. Settle, M.B., Ch.B., B.Sc., D.C.H.
Visiting Orthopædic Surgeon.	M. Johnstone, M.B., Ch.B.
Consultant Obstetric Surgeon.	R. Newton, M.D., M.R.C.O.G.
Dental Surgeon ...	†N. Wild, L.D.S. (Manc.).
Sanitary Inspector ...	... A. Ashworth, A.R.S.I.
Additional Sanitary Inspector.	H. W. Potter, A.R.S.I.
Health Visitors ...	... E. E. Tudge, S.R.N., S.C.M. M. Scholes, S.R.N., S.C.M.
Orthopædic Nurse ...	... E. J. Bromley, C.S.S.M.G.
Day Nursery Matrons ...	Mrs. B. W. Turnbull. S.R.N., S.C.M. Mrs. N. Livingstone. S.R.N.
Dental Attendant ...	... Miss E. L. Lloyd.
Assistants to the Sanitary Inspector.	Mr. H. Prenton. †Mr. N. Bamforth.
Senior Clerk ...	... †Mr. D. V. Prothero.
Clerks ...	... Miss S. Barker. Mrs. N. Horrocks. Miss M. Heyes. Miss M. Shepherd.

* These Officers carry out similar duties for the Borough of Middleton.

† Part-time.

† On Active Service.

VITAL STATISTICS.

The main vital statistics for the year, after correction for inward and outward transfers, as furnished by the Registrar-General, are given in Table 1.

TABLE 1.						
		Total	M.	F.		
Live Births :—						
Legitimate ...	...	455	239	216	Birth-rate per 1,000	
Illegitimate ...	...	20	11	9	estimated population	
					mid-1945 ...	16.1
Total ...	...	475	250	225		
Stillbirths ...	...	24	10	14	Rate per 1,000 total	
					(live and still)	
					births ...	48
Deaths ...	...	339	163	176	Death-rate per 1,000	
					estimated population	
					... ..	11.5
Deaths from Puerperal causes :—						
				Deaths	Death-rate per 1,000	
					total (live and still)	
					births	
Puerperal and post-abortive sepsis				Nil	Nil	
Other maternal causes ...	...			Nil	Nil	
Total ...	...			Nil	Nil	
Death-rate of infants under one year of age :—						
All infants per 1,000 live births ...	...					27
Legitimate infants per 1,000 legitimate live births ...	...					28
Illegitimate infants per 1,000 illegitimate live births ...	...					Nil
Deaths from Cancer (all ages) ...	...					34
Deaths from Measles (all ages) ...	...					Nil
Deaths from Whooping Cough (all ages) ...	...					1
Deaths from Diarrhoea (under 2 years of age) ...	...					Nil

POPULATION.

The Registrar-General's estimate of population for the year 1945 is 29,360 which is 910 below that of 1938 and 140 below that of 1944. The curve of natural population increase continues upward and in the eight years 1938-1945 the births have exceeded the deaths by 1,054. This busy industrial area has seen no material efflux of population due to war causes and the likelihood is that the actual resident population is rather higher than the Registrar-General's estimate indicates.

TABLE 2.
NATURAL INCREASE OF POPULATION.

1945	.....	+ 136	1932	.....	— 29
1944	.....	+ 189	1931	.....	— 23
1943	.....	+ 184	1930	.....	— 17
1942	.....	+ 147	1929	.....	— 105
1941	.....	+ 87	1928	.....	+ 6
1940	.....	+ 43	1927	.....	+ 48
1939	.....	+ 117	1926	.....	— 6
1938	.....	+ 151	1925	.....	+ 66
1937	.....	+ 82	1924	.....	+ 134
1936	.....	— 28	1923	.....	+ 95
1935	.....	— 61	1922	.....	+ 158
1934	.....	+ 10	1921	.....	+ 220
1933	.....	— 68			

BIRTHS.

The number of live births assigned to the town was 475, representing an annual birth rate of 16.1 per 1,000 of the population as compared with a figure of 16.1 for England and Wales and 19.2 for the 148 Smaller Towns. The material drop in the number of births occurring in 1945 is presumably related to the factors producing the fall in the national rate and there is no factor peculiar to this area which can be said to apply.

MARRIAGES.

The number of marriages occurring within the district plus those taking place at the District Registry Office, Oldham, where both participants are or the woman only is resident in Chadderton numbered 254. The corresponding figure for the previous year was 208.

TABLE 3.

Year	Birth Rate	Crude Death Rate	Zymotic Death Rate	Infant Mortality Rate	Cancer Death Rate
1912	24.2	17.0	1.43	130	1.0
1913	25.0	13.7	1.57	116	0.6
1914	24.1	15.2	1.86	101	1.0
1915	22.1	15.4	1.43	124	0.9
1916	18.6	14.3	1.19	88	0.9
1917	16.6	15.0	1.14	86	1.1
1918	15.7	20.6	0.99	117	1.0
1919	13.3	13.9	0.35	126	1.2
1920	23.2	11.8	0.74	98	1.2
1921	20.2	12.7	0.57	104	1.3
1922	18.9	13.5	0.64	66	1.1
1923	17.0	13.7	0.47	110	1.2
1924	15.1	10.5	0.27	79	1.4
1925	15.3	14.0	0.59	110	1.0
1926	13.4	14.0	0.32	134	1.3
1927	15.7	13.9	0.29	92	1.2
1928	12.9	12.7	0.21	74	1.6
1929	12.0	15.7	0.66	116	1.4
1930	11.7	12.3	0.25	80	1.6
1931	12.3	13.2	0.18	78	1.4
1932	12.5	13.3	0.50	60	2.0
1933	10.8	13.3	0.25	66	1.3
1934	13.0	12.6	0.36	61	1.4
1935	11.4	13.6	0.28	63	1.9
1936	12.3	13.3	0.45	77	1.8
1937	14.9	12.1	0.30	68	1.5
1938	16.3	11.3	0.19	42	1.9
1939	15.6	11.8	0.19	50	1.7
1940	15.8	14.4	0.13	59	2.4
1941	15.6	12.7	0.10	42	1.8
1942	17.7	12.7	0.13	51	1.7
1943	18.6	12.3	0.10	46	1.8
1944	18.7	12.3	0.10	47	2.0
1945	16.1	11.5	0.07	27	1.2

DEATHS.

The number of deaths recorded for Chadderton during 1945 was 339 giving a crude death rate of 11.5 per 1,000 of the population. Some remarkable results have appeared this year. The persistent downward trend in infectious disease mortality which has been going on since before the Four Years War and which seemingly had reached its practical nadir since 1938 actually touched a new low record of 0.07 per 1,000 of population made up of an infant death probably due to meningococcal meningitis and a death from diphtheria in an unimmunised adult.

TABLE 4.

Age and Ward Incidence of Deaths Occurring in 1945

Ward	Under 1	1-4	5-14	15-24	25-44	45-64	65 and upwards	Total
North ...	5	—	2	1	12	32	33	109
Central ...	2	—	—	1	5	36	28	105
South ...	6	—	1	3	2	9	35	125
Total...	13	—	3	4	4	26	106	339

TABLE 5.

Seasonal Incidence of Deaths Occurring since 1937

Deaths occurring during :—	1937	1938	1939	1940	1941	1942	1943	1944	1945
1st Quarter	121	94	113	165	131	136	98	121	117
2nd Quarter	73	75	80	89	83	87	67	79	71
3rd Quarter	79	84	71	103	85	67	65	66	61
4th Quarter	85	90	99	84	87	86	129	97	90
Total ...	358	343	363	441	386	376	359	363	339

The infant mortality rate, concerning which more has been said in the chapter dealing with Maternity and Child Welfare, has achieved the record low level of 27 per 1,000 live births in part almost certainly due to the relative absence of infective factors and the cancer death rate at 1.2 per 1,000 of the population is lower than it has been for 20 years, a record which in my view has occurred by chance and is very unlikely to be repeated in the current year.

TABLE 6.
COMPARATIVE CANCER DEATH RATES PER 1,000
POPULATION SINCE 1925.

Year	Crompton	Royton	Middle- ton	Chad- derton	Oldham	Man- chester	England & Wales
1925	2.0	1.4	1.4	1.0	1.4	1.4	1.3
1926	1.4	1.5	1.3	1.3	1.6	1.5	1.4
1927	1.5	0.9	1.5	1.2	1.5	1.5	1.4
1928	1.5	1.8	1.2	1.6	1.5	1.5	1.4
1929	1.6	1.3	1.3	1.4	1.6	1.6	1.4
1930	1.6	1.7	1.6	1.6	1.6	1.5	1.5
1931	1.7	0.6	1.7	1.4	1.5	1.6	1.5
1932	1.3	1.4	1.5	2.0	1.7	1.7	1.5
1933	1.0	1.4	1.9	1.3	1.5	1.6	1.5
1934	1.5	1.7	1.8	1.4	1.6	1.7	1.6
1935	2.0	1.5	1.5	1.9	1.8	1.8	1.6
1936	1.4	1.6	1.9	1.8	1.9	1.7	1.6
1937	1.8	1.4	1.3	1.5	1.8	1.7	1.6
1938	1.3	1.9	2.0	1.9	1.9	1.8	1.7
1939	1.8	1.6	1.8	1.7	1.9	1.8	1.6
1940	2.0	1.5	1.3	2.4	1.8	2.0	1.7
1941	1.5	1.9	2.1	1.8	1.9	2.1	1.7
1942	2.4	2.7	2.0	1.7	2.0	2.1	1.7
1943	2.5	2.3	1.9	1.8	2.0	2.1	1.7
1944	1.8	2.1	2.1	2.0	1.8	2.1	1.7
1945	2.3	2.2	2.1	1.2	2.1	2.1	1.7

When we turn to the classified causes of death it is seen from Table 7 that fully two-fifths of the deaths are ascribed to cardio vascular lesions and one-fifth to respiratory diseases excluding influenza and tuberculosis. The primary factor either in respiratory or cardio vascular deaths might be an infecting agent or it might be that the wear and tear of life on these organs has predisposed them to disease or fatal injury. Grouping the 140 deaths ascribed to cardio vascular lesions shows that 70% of the deaths occurred at 65 years of age and over and 88% occurred at 55 years and over. A similar grouping of the 67 respiratory deaths gives corresponding figures of 48% and 78% respectively.

TABLE 7.
Causes of Death Expressed as a Ratio of
Total Chadderton Deaths.

Cause of Death	Proportion per 1,000 deaths from all causes.								
	1945	1944	1943	1942	1941	1940	1938	1935	1930
Diseases of the heart and circulatory system ...	410	366	312	353	401	242	324	307	264
Bronchitis, pneumonia and other respiratory diseases (excluding influenza)	198	151	161	165	142	186	108	119	162
Cancer, malignant disease	100	165	150	138	145	165	163	138	131
Tuberculosis (all forms)	44	55	56	45	28	23	55	26	57

TABLE 8.
Corresponding Figures—England and Wales.

Cause of Death.	* Proportion per 1,000 deaths from all causes.				
	1944	1940-41	1938	1935	1930
Diseases of the heart and circulatory system	317	292	327	295	245
Bronchitis, pneumonia and other respiratory diseases (excluding influenza) ...	108	135	91	99	114
Cancer, malignant disease ...	147	124	143	135	127
Tuberculosis (all forms) ...	49	51	55	62	79

The implication is that severe acute infection was not present in the area to any great extent during 1945, probably in association with absence of prolonged severe weather and that in consequence a corresponding saving of life occurred especially in infancy but also in middle life.

It is unlikely that the death rate in the future will be brought much lower than this figure because apart from a further reduction in the tuberculosis death rate and the infant mortality rate and a possible specific cure of cancer the principal factor in the production of death is wear and tear of vital organs and at best we can hope for delay in the process of wear and tear. It is likely that the prolongation of the expectation of life will continue, but with the gradual ageing of the population as a group a lower crude death rate than that occurring in a favourable year, such as the one under review has been, is not in the least likely.

TABLE 9.
Causes of Death in Chadderton during the year 1945.

Causes of death				Males	Females
1.	Typhoid and paratyphoid fevers	...	...	—	—
2.	Cerebro-spinal fever	...	...	—	1
3.	Scarlet Fever	...	...	—	—
4.	Whooping Cough	...	...	1	—
5.	Diphtheria	...	...	—	1
6.	Tuberculosis of respiratory system	...	...	5	3
7.	Other forms of tuberculosis	...	...	3	4
8.	Syphilitic diseases	...	...	1	—
9.	Influenza	...	...	—	2
10.	Measles	...	...	—	—
11.	Acute poliomyelitis and polioencephalitis	...	...	—	—
12.	Acute infectious encephalitis	...	...	—	—
13.	M.—Cancer of buccal cavity and œsophagus	...	...	3	—
13.	F.—Cancer of uterus	...	...	—	2
14.	Cancer of stomach and duodenum	...	...	3	2
15.	Cancer of breast	...	...	—	2
16.	Cancer of all other sites	...	...	11	11
17.	Diabetes	...	...	1	2
18.	Intra-cranial vascular lesions	...	...	14	16
19.	Heart disease	...	...	37	64
20.	Other diseases of circulatory system	...	...	5	4
21.	Bronchitis	...	...	24	23
22.	Pneumonia	...	...	8	8
23.	Other respiratory diseases	...	...	4	—
24.	Ulcer of stomach or duodenum	...	...	5	—
25.	Diarrhœa (under 2 years)	...	...	—	—
26.	Appendicitis	...	...	—	1
27.	Other digestive diseases	...	...	6	4
28.	Nephritis	...	...	3	5
29.	Puerperal and post-abortive sepsis	...	...	—	—
30.	Other maternal causes	...	...	—	—
31.	Premature birth	...	...	1	1
32.	Congenital malformation, birth injury, infantile diseases	...	...	3	—
33.	Suicide	...	...	5	—
34.	Road traffic accidents	...	...	2	—
35.	Other violent causes	...	...	4	3
36.	All other causes	...	...	14	17
All causes				163	176

GENERAL PROVISION OF HEALTH SERVICES.

The policy of disseminating information in support of public and personal hygiene by means of the film, the press, and by public poster and handbill has been continued and exhibitions of films were held in the Town Hall for public audiences, in welfare centres for parents and in schools. The subjects dealt with in their appropriate age groups included environmental problems, e.g. atmospheric pollution, social problems such as the rehabilitation of the injured, welfare problems associated with the maintenance of maternal and child health and problems relating to the physical and mental health of the school child.

In the field of maternity and child welfare the Council decided to support in principle a scheme for the establishment of a chair of Child Health at the University of Manchester and reviewing its arrangements with St. Mary's Hospitals agreed to substitute a per capita payment of not more than £5 5s. 0d. per week in respect of approved admissions in lieu of the previous honorarium of £20 per annum. Arrangements were made further for the provision of convalescent home therapy for children under five years of age where accommodation is available.

The inadequacy of the buildings utilised for general clinic purposes is materially greater than in 1938 owing to the expansion of services that has occurred in the interim and a revised and modernised scheme for new clinic premises is a matter for immediate consideration. The completely unsatisfactory provision for the cleansing of verminous persons is an obvious example of the urgency of the problem before us. It is indeed fortunate that with the lessening hours of work there has been a corresponding decrease in the amount of head louse infestation in young women. The infestation however seems merely to have subsided to its pre-war level and there are still reservoirs that await mass destruction. Scabies also is much less prevalent than it was a few years ago.

MATERNITY AND CHILD WELFARE.

NOTIFICATION OF BIRTHS.

Under Section 203 of the Public Health Act, 1936, 486 live births and 24 stillbirths were notified.

MIDWIFERY AND MATERNITY SERVICES.

The regular attendance of pupil midwives at the ante-natal sessions has caused these to become to some extent teaching in character, a function which is advantageous to patient, staff and pupil alike. With the likelihood that health visiting personnel will be at full strength during 1946 for the first time since 1943 it is intended that a health visitor shall also attend this clinic to coordinate the work of pre-natal hygiene and to facilitate the supervision of the new born child in the transition period at the end of its first two weeks of life.

MATERNITY SERVICES.

As noted above new financial arrangements were entered into with St. Mary's Hospitals for the in-patient treatment of approved patients. The lowered birth rate reduced the total demand for hospital accommodation somewhat but the ratio of hospital to domiciliary confinements continues at about 2: 1.

TABLE 10.
Number of Chadderton Births Notified.

Year	Boundary Park Municipal Hospital	Woodfield Nursing Home	St. Mary's	Greenacres	North Manchester Maternity Home	Others	Total Hospital Births	Total Domiciliary Births	Total
1933	78	—	13	2	—	8	101	224	325
1934	98	—	16	16	1	16	147	221	368
1935	105	—	7	16	5	15	148	217	365
1936	107	—	15	21	6	14	163	210	373
1937	143	—	23	20	14	37	237	233	470
1938	146	—	16	29	12	35	238	308	546
1939	160	—	16	34	18	30	258	266	524
1940	158	—	12	31	17	30	248	246	494
1941	215	—	9	—	11	19	254	240	494
1942	276	—	12	—	9	26	323	198	521
1943	289	—	15	—	7	38	349	221	570
1944	314	37	13	—	4	10	378	221	599
1945	271	33	13	—	8	5	330	180	510

Table 10 shows the number of notified confinements at hospitals, nursing homes and at home in each year since 1933.

MATERNAL MORTALITY.

No maternal death was registered during the year 1945.

In the eight years that have elapsed since the establishment of an ad hoc ante-natal service in Chadderton 1,114 women, practically all subsequently confined in their own homes and representing 26% of the total confinements notified in the period, made use of the service and were subsequently confined without a single maternal fatality. Amongst the remaining 74% there occurred 14 maternal deaths.

The two major factors in the success of the service are the regular attendance at the sessions and the active co-operation of the County Council midwives who subsequently undertake the management of the confinement in the patient's home and the personal supervision at least once in the course of confinement of every case by the consultant obstetric surgeon through whom there is immediately available for every potentially or actually abnormal case all the facilities of St. Mary's Hospitals, Manchester.

ANTE-NATAL CLINIC.

180 women were confined in their own homes during 1945 when 105 women attended the ante-natal clinic, of whom 4 were referred and subsequently delivered at St. Mary's Hospitals.

271 women were confined at Boundary Park General Hospital, Oldham, and the practice has been continued of referring immediately for ante-natal supervision at that hospital any woman found to come within this group.

POST-NATAL SERVICES.

No ad hoc clinic has been established but 3 cases were seen at the ante-natal clinic by the obstetric surgeon for special advice.

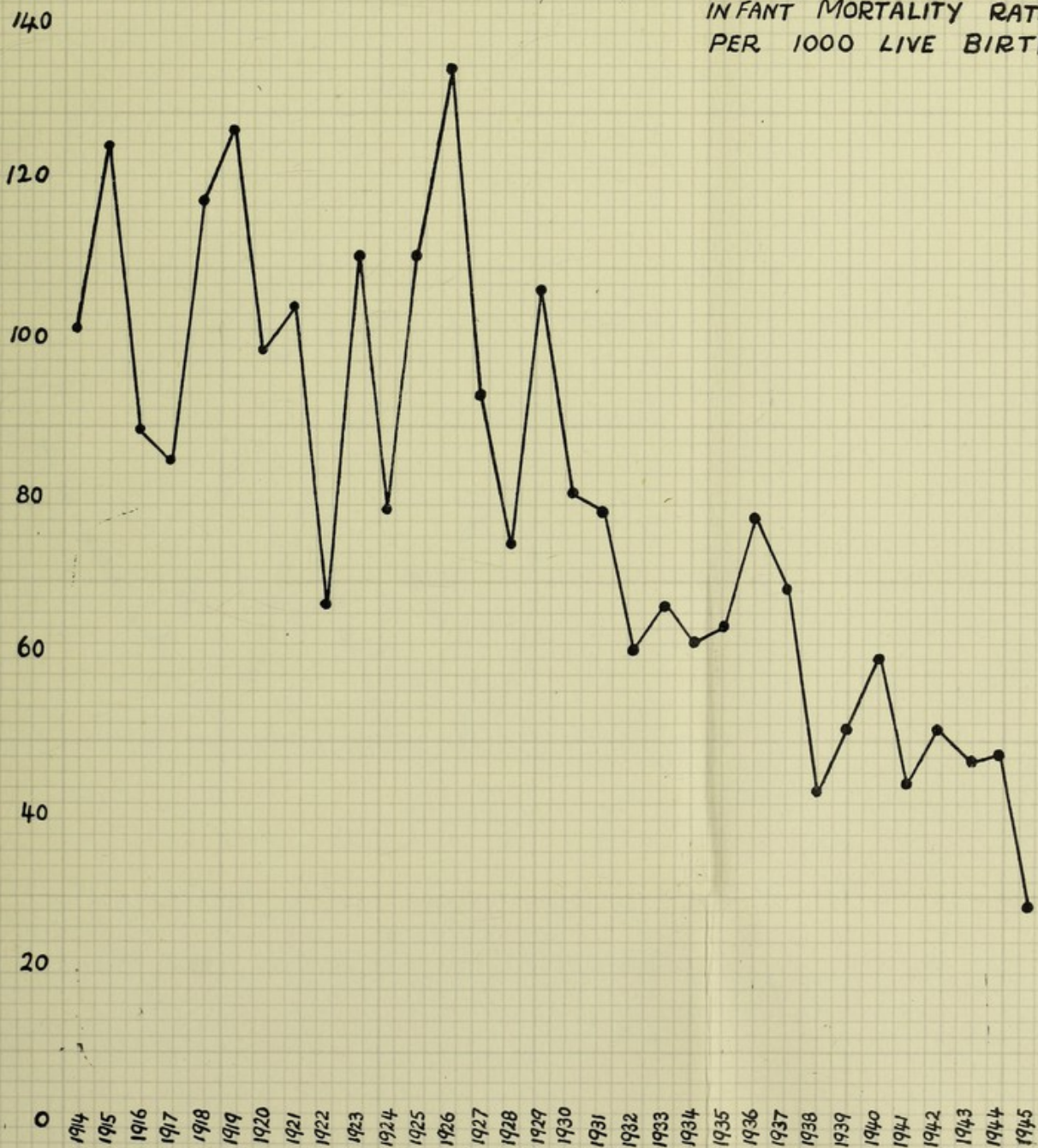
STILLBIRTHS AND INFANT MORTALITY.

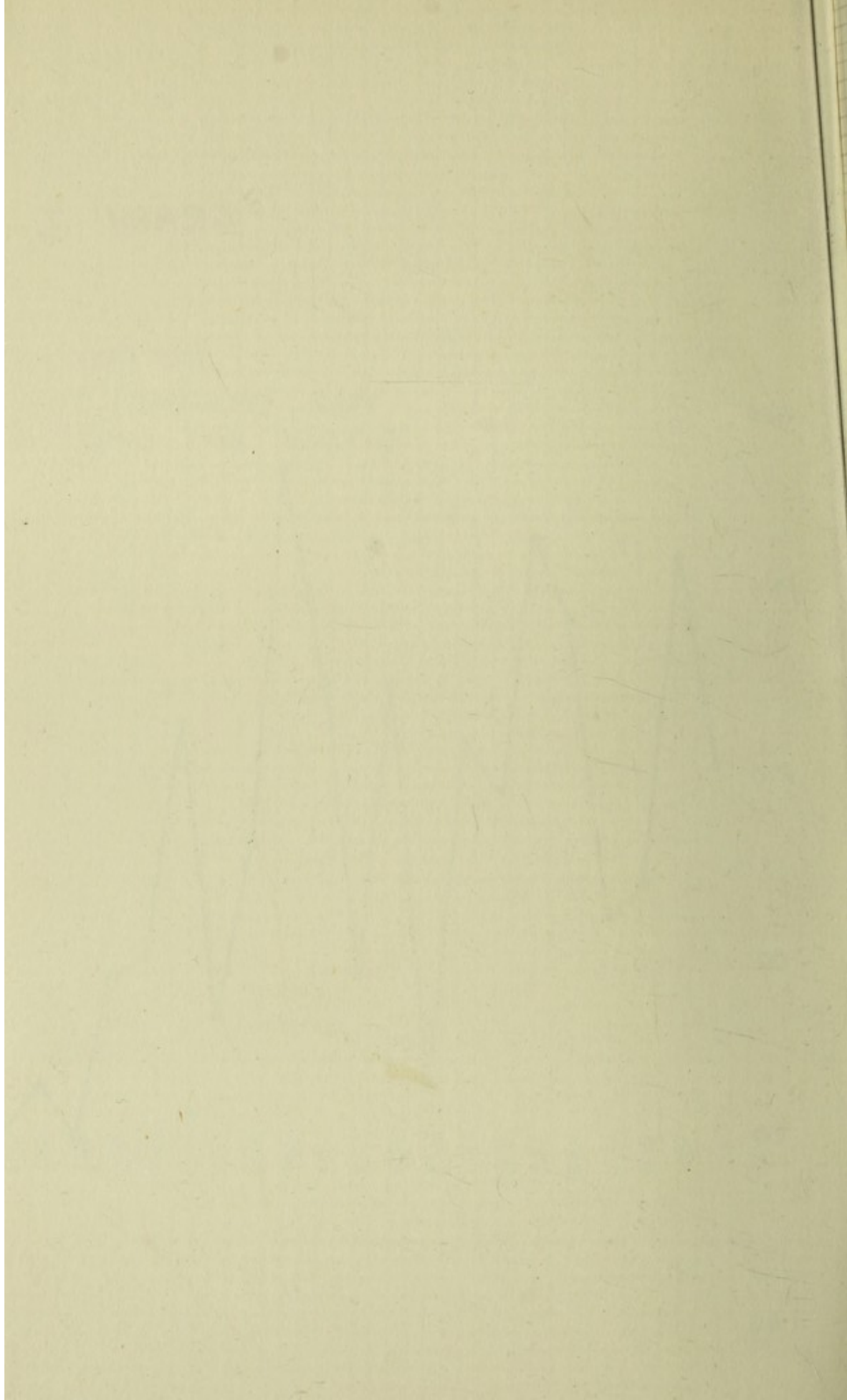
Stillbirths during 1945 totalled 24 representing a rate of 48 per 1,000 total births or 1.12 per 1,000 of population. The corresponding figure for England and Wales is 0.46 and for the 148 Smaller Towns 0.53. Infant deaths amounted to 13 giving an infant mortality rate of 27 per 1,000 live births as compared with rates of 46 for England and Wales and 43 for the 148 Smaller Towns.

Gratification at the magnificent figure for infant mortality which, as can be seen from Table 3, far transcends any previous result and is little beyond half the national rate must be tempered by the unsatisfactory nature of the still-birth rate. Examination of the causes of infant death as set out in Table 12 reveals that deaths under one month totalled four in which, as they are

GRAPH I

CHADDERTON.
INFANT MORTALITY RATE
PER 1000 LIVE BIRTHS

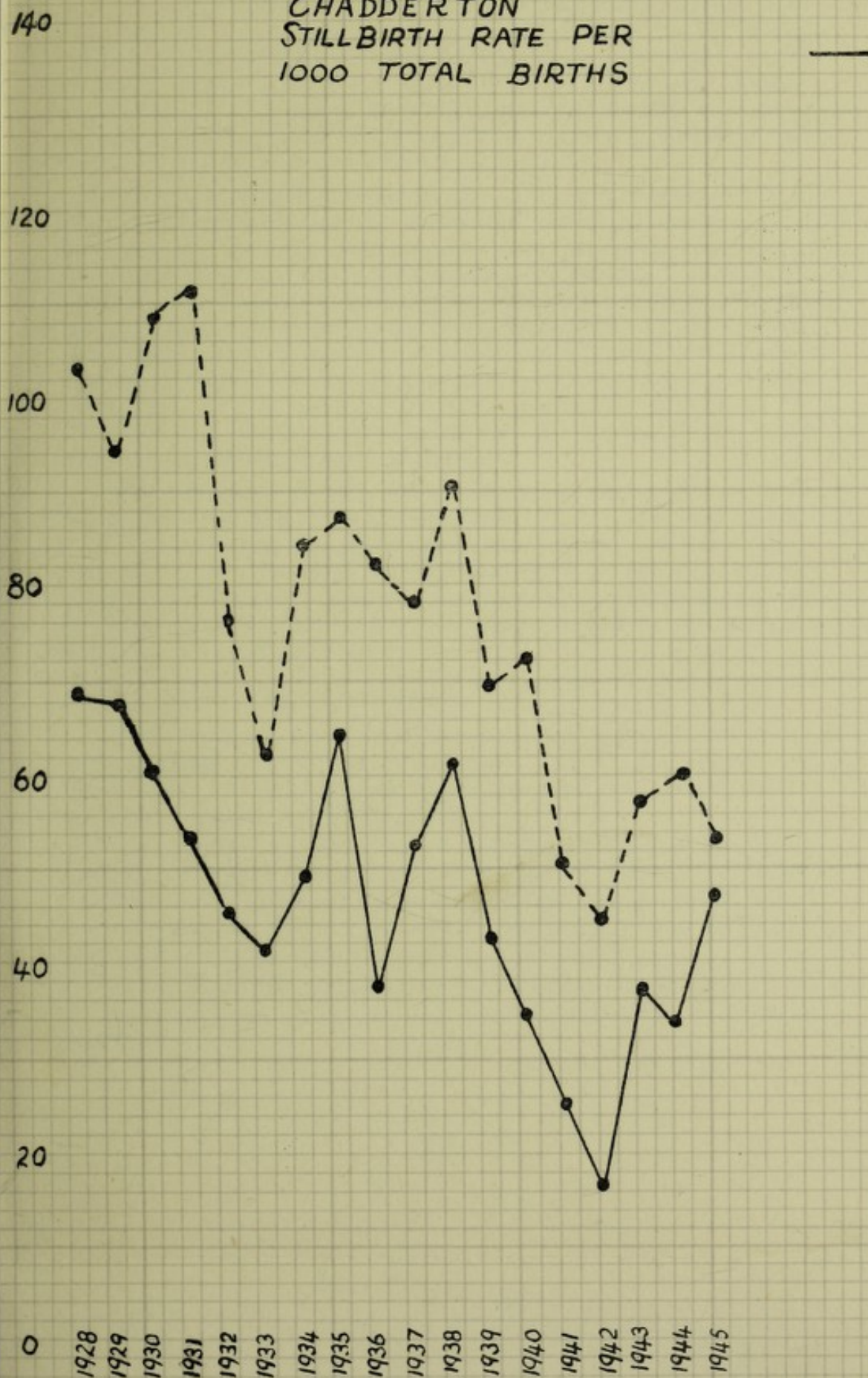


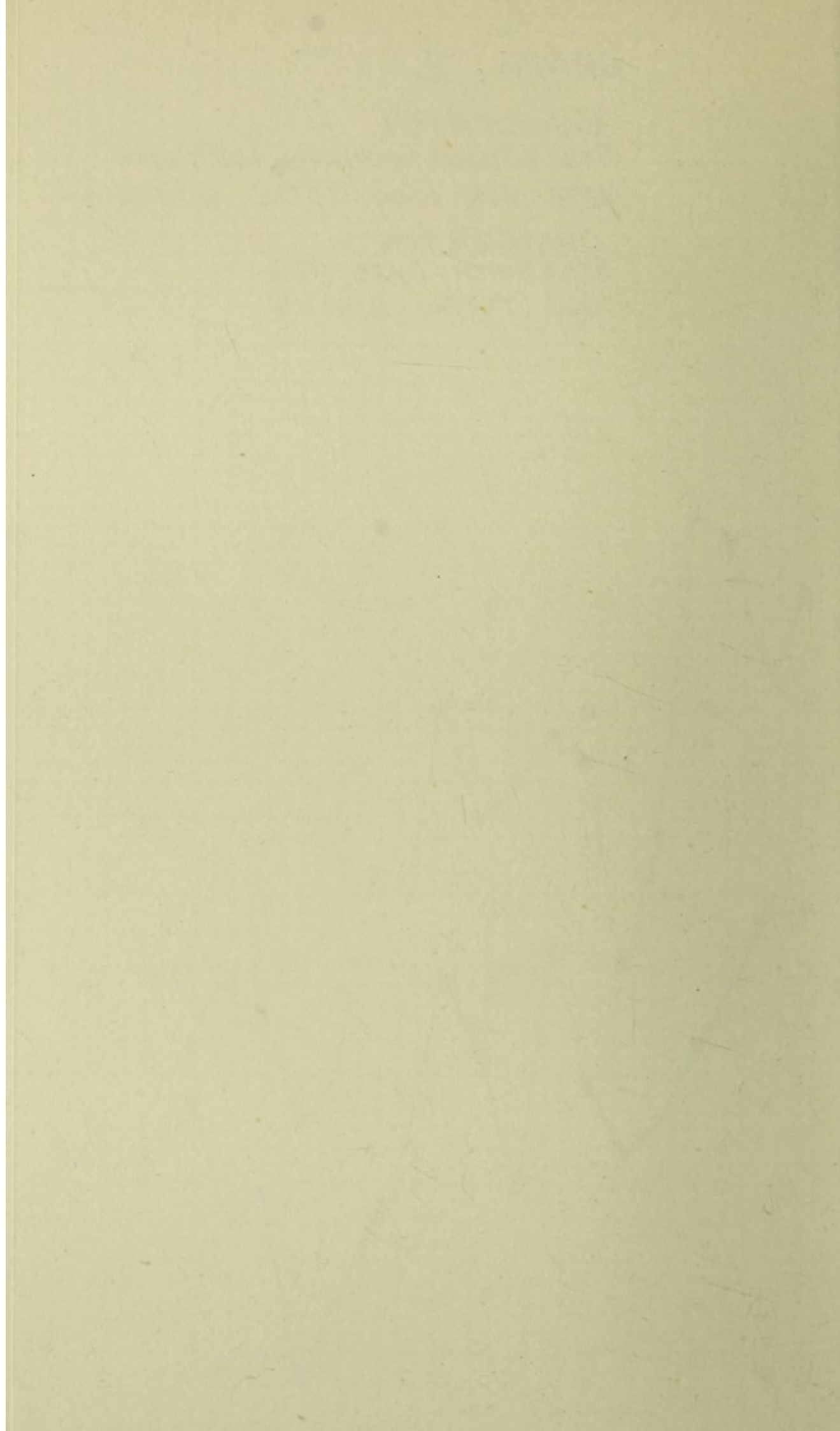


GRAPH II

CHADDERTON
STILLBIRTH & NEONATAL MORTALITY
RATE PER 1000 TOTAL BIRTHS ---

CHADDERTON
STILLBIRTH RATE PER
1000 TOTAL BIRTHS —





certified; infection did not play any part. Of the remaining nine deaths 2 were related to congenital debility and malformation and 7 to infection. Part of the saving of infant life, therefore, is due to lessened infection or less probably to greater resistance to infection but there is also an apparent reduction in the group related to prematurity, debility and malformation which group is closely linked with stillbirths. If then the neonatal deaths, none of which happens to be attributable to infection, are added to stillbirths the total of 28 equals a combined stillbirth and neonatal rate of 56.1 per 1,000 total births.

Graph I shows the persistent fall in the infant mortality rate since 1929 whilst Graph II shows the combined stillbirth and neonatal rate and the stillbirth rate each per 1,000 total births since 1928 when stillbirths first became registrable. Whilst the combined rate has fallen from a peak 112 in 1931 to 54 in 1945 the stillbirth rate has receded only from 69 in 1928 to 48 in 1945. This would seem to imply that providing the child survives the process of birth even though premature or immature its chances of survival beyond one month are appreciably increased. On the other hand the hazards of birth itself or of intra uterine death have not diminished nearly so much.

The conclusion is that the spearhead of the attack must be directed at the health of the expectant mother and her unborn child. Her nutrition must be adequate, her rest must be reasonable and after the birth of the first child it is rarely so, her physical environment must be encouraging and helpful and her mental environment peaceful and happy. This is the problem that we are required to solve.

CHILD WELFARE SERVICES.

Four welfare sessions continue to be held weekly, two at the Central Clinic and two at Washbrook. Dental, orthopaedic and ultra violet therapy continue to be provided and visual defects are treated at the refraction clinic.

The two day nurseries have continued to function effectively and the end of the war has seen an increasing demand for accommodation. The average attendance during 1945 at Brook Street nursery was 31 and at Coalshaw Green nursery was 28, representing 77.5% and 70% of capacity respectively.

A record of home visits by Health Visitors and of attendances at Maternity and Child Welfare centres since 1939 is given in Table 11.

TABLE 11.

CHILD WELFARE CLINICS.	1939	1940	1941	1942	1943	1944	1945
Number of children who attended for the first time during the year and who, on the date of their first attendance were :—							
(i) under 1 year of age	363	381	356	459	435	437	395
(ii) between the ages of 1 and 5 years	43	88	59	32	47	28	33
Percentage of notified births represented by the number of children who on the date of their first attendance were under 1 year of age	72.6	80.0	75.3	87.8	79.4	75.2	81.4
Number who attended and at the end of the year were :—							
(i) under 1 year of age	324	278	263	336	342	337	330
(ii) between the ages of 1 and 5 years	638	536	502	492	545	558	523
Number of attendances by children :—							
(i) under 1 year of age	6888	6270	6962	7243	8194	8628	7574
(ii) between the ages of 1 and 5 years	6144	4496	5769	4453	4659	4614	3695
ANTE-NATAL CLINICS.							
Number of expectant mothers attended	119	162	159	134	130	115	105
Number of attendances by expectant mothers	393	443	575	380	382	391	286
Percentage of total notified live and still births represented by the number of expectant mothers who attended the Ante-Natal Clinics	21.0	30.5	32.7	24.7	23.8	19.1	20.6
GYNÆCOLOGICAL AND POST-NATAL CLINICS.							
Number of mothers attended	10	10	9	4	9	10	3
Number of attendances	11	24	11	5	21	11	3
HEALTH VISITING.							
(i) To expectant mothers :—							
First visits	212	205	252	214	203	215	208
Total visits	370	366	447	292	305	397	329
(ii) To children under 1 year of age :—							
First visits	492	463	472	503	545	556	491
Total visits	2922	3098	3286	3041	3161	3171	3423
(iii) To children between the ages of 1 and 5 years :—							
Total visits	3842	4457	5198	4819	5219	5441	5110

Seven premature births occurring in domiciliary practice were nursed at home and survived the first month of life. An eighth premature domiciliary birth admitted to hospital on the day of birth died there one week later. 24 premature births belonging to the area occurred in hospital and all survived the first month of life.

TABLE 12.

Infant Mortality, 1945

Cause of Death	1 day	1-7 days	1-4 w'ks	Total	1-3 m'ths	3-6 m'ths	6-12 m'ths	Total
Meningitis	—	—	—	—	1	—	—	1
Whooping Cough...	—	—	—	—	—	—	1	1
Pneumonia	—	—	—	—	2	1	—	3
Acute Bronchitis...	—	—	—	—	1	—	—	1
Ludwig's Angina...	—	—	—	—	1	—	—	1
Prematurity	—	2	—	2	—	—	—	2
Congenital Debility, Malformations, etc.	2	—	—	2	1	—	—	3
Post-operative Fæcal Fistula ...	—	—	—	—	1	—	—	1
Total	2	2	—	4	7	1	1	13

PUERPERAL PYREXIA.

No case was notified during 1945.

PEMPHIGUS NEONATORUM.

No case was brought to notice during 1945.

OPHTHALMIA NEONATORUM.

No case was notified during 1945.

OTHER INFECTIOUS DISEASES.

The number of cases occurring and deaths from infectious diseases are shown in Table 13.

TABLE 13

Infectious Diseases in Children under Five Years

Disease	0-1 year		1-5 years	
	Cases	Deaths	Cases	Deaths
Diphtheria	—	—	4	—
Scarlet Fever	—	—	24	—
Pneumonia	1	3	—	—
Non-Pulmonary Tuberculosis	—	—	3	2
Whooping Cough	7	1	32	—
Measles	10	—	97	—

PROVISION OF MEALS AND MILK.

7,291 pounds of dried milk were disposed of, 650 packets being supplied without charge to the recipient.

Vitamins and iron products are available also at the Welfare Centres.

CHILD LIFE PROTECTION.

No legal proceedings were taken and no person was registered as receiving children for reward at the end of 1945.

TABLE 14.

Number of persons on the Register who are receiving children for reward at the end of the year	...	...	...	...	...	—
Number of children on the Register :—						
(i) at the end of the year	...	...	...	...	...	—
(ii) who died during the year	...	...	...	...	...	—
(iii) on whom inquests were held during the year	...	...	...	...	...	—
(iv) Number of visits made during the year	...	...	...	...	...	—

PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASE.

The number of cases of infectious disease notified in each year since 1915 is shown, classified according to the particular disease in Table 17, whilst the ward incidence of certain of the notifiable diseases during each of the last twelve years is shown in Table 18. The number of deaths from certain diseases occurring in each year since 1915 is shown in Table 19.

So far as the infectious diseases are concerned the year 1945 was a healthy one. Diphtheria, which has continued smouldering in recent years, flared up in one ward to remind us that vigilance is as necessary as ever and a small outbreak of dysentery in a nursery was aborted by rigid hygienic measures and a follow up of contacts. Mortality as can be seen from Table 19 was lower than ever.

SMALLPOX.

No case of this disease has occurred in the area since 1930.

SCARLET FEVER.

As was prognosticated in last year's report scarlet fever declined rapidly to 118 cases during 1945 from the heavy incidence recorded in the previous two years, and in the fourth quarter when the expected incidence is heaviest only half the number of cases occurred as compared with the corresponding period for 1944.

The epidemic that first made its appearance in the South ward in the second half of 1942 produced 610 notifications in the four years. The whole area of the urban district was involved at one time or another and 21.47% of cases were under 5 years of age. It is likely that notification of the disease amongst adults was less strict than amongst children. The disease was in the main mild in character and no death from scarlet fever has occurred since 1935. Once a school became materially involved it was extremely difficult to control infection in it. The most successful procedure seemed to consist in repeated inspections of all pupils in attendance at the school involved with exclusion and home follow up of any showing the earliest clinical evidence of upper respiratory infection. This onerous and rigid routine proved reasonably if not absolutely effective in abating school outbreaks.

60% of notified cases were treated in hospital during 1945.

DIPHTHERIA

The potential danger still existing in diphtheria was dramatically revealed in a sharp outbreak of the disease occurring on the north-eastern boundary of the district. Three cases occurred in rapid succession, two in the same family, and all attending the same school. Later a further case was diagnosed as late faucial and nasal diphtheria, the child having been mildly ill for at least a week previously. A whole train of events developed from this last case, 6 cases including 4 adults occurring all, on investigation, proving to be directly linked with the boy in question by family contact. One other case was linked indirectly by school and four transient carriers appeared in the family of this last child. 4 of the 11 cases fell within the age group 20-25 years and of the 7 cases under 15 years 4 had been immunised at some previous date, none being severely ill. One unimmunised adult female died from severe toxic faucial diphtheria. The causal organism was isolated from several cases and found to be of the "gravis" type.

In addition to the eleven cases involved in this outbreak 8 other sporadic cases occurred during the year without further fatality.

TABLE 16.
Diphtheria Attack Rate :—

Year	Chadderton	England and Wales	Smaller Towns
1938	1.91	1.58	1.53
1939	0.62	1.14	1.16
1940	0.36	1.16	1.21
1941	0.30	1.25	1.19
1942	0.71	1.05	0.91
1943	0.65	0.88	0.77
1944	0.34	0.58	0.69
1945	0.64	0.46	0.56

Diphtheria Death Rate :—

1938	0.16	0.07	0.06
1939	0.06	0.05	0.04
1940	0.00	0.06	0.05
1941	0.00	0.07	0.06
1942	0.04	0.05	0.04
1943	0.03	0.03	0.04
1944	0.00	0.02	0.03
1945	0.03	0.02	0.02

The influence of this outbreak in a small area is sharply brought out by its marked effect on the local attack and death rates both of which as can be seen from Table 16 exceed the national rates for the first time for some years.

TABLE 15.
DIPHTHERIA IMMUNISATION.
Persons inoculated each year from 1936-1945.

Age at date of inoculation	1936	1937		1938		1939		1940		1941		1942		1943		1944		1945	
		*1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
Under 1	6	6	3	—	—	1	—	—	6	12	17	42	49	49	60	48	67	66	85
1	27	12	6	2	20	24	35	18	54	60	70	81	55	75	80	59	112	46	112
1½	11	5	3	—	7	3	11	—	13	24	9	26	20	23	12	10	7	10	13
2	21	3	2	1	8	8	6	1	10	19	16	17	24	9	7	9	8	5	9
2½	15	3	2	—	8	1	4	2	13	25	16	9	15	12	7	2	3	2	10
3	12	7	2	1	3	1	2	1	15	29	19	13	30	20	10	3	5	1	7
3½	17	2	1	—	—	4	5	—	5	20	14	7	20	10	5	2	1	6	4
4	20	5	6	1	7	3	2	—	9	22	15	18	27	14	9	1	1	—	1
4½	7	3	—	—	1	3	2	—	11	18	15	15	18	12	6	5	1	2	2
5	70	25	31	12	27	29	10	4	38	38	38	28	37	41	20	16	13	6	5
5½	82	12	3	1	10	16	10	—	31	22	19	10	19	14	6	13	3	—	4
6	79	10	2	2	4	12	9	—	25	25	10	20	21	18	3	14	9	2	1
6½	64	12	2	—	2	21	5	1	17	27	13	13	12	8	2	4	1	2	2
7	78	14	3	—	3	17	3	1	11	24	8	11	11	7	4	7	2	2	1
7½	86	8	1	1	4	2	3	—	4	16	9	4	7	2	—	2	—	—	1
8	78	7	—	—	4	5	1	—	5	30	5	7	14	3	1	—	1	—	—
8½	90	6	3	—	2	—	—	2	5	30	4	4	15	2	—	—	—	—	3
9	91	5	3	—	3	1	—	—	3	20	2	3	16	5	2	—	—	—	2
9½	82	3	2	—	4	—	—	—	3	18	3	3	15	2	2	1	—	—	—
10	75	1	—	—	3	—	1	—	3	19	1	2	25	4	2	—	—	—	—
10½	80	1	1	—	—	—	—	—	—	15	—	2	11	—	—	—	—	—	—
11	88	1	1	—	—	1	—	—	3	18	1	1	9	3	1	1	—	—	—
11½	80	1	2	—	—	1	—	—	5	21	1	6	13	—	—	—	—	—	1
12	75	1	2	—	—	1	—	—	1	13	—	7	5	2	3	—	—	—	1
12½	83	1	5	—	—	1	—	—	1	15	—	6	5	1	1	—	—	—	—
13	68	2	—	—	—	—	—	—	2	6	—	7	4	3	—	—	—	—	1
13½	73	5	—	—	—	—	1	—	3	12	1	1	4	1	1	—	—	—	2
14	10	—	—	—	—	—	—	—	1	3	—	—	2	—	—	—	—	—	—
14½	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15+	—	—	—	—	—	—	1	—	—	—	—	—	3	—	1	—	—	—	—
Total each yr.	1568	247		141		266		327		907		869		585		431		417	

*1= Jan. to June. 2= July to Dec.

Appendix to page 24.

TABLE 17.
Number of Cases Notified Annually.

	Smallpox	Diphtheria	Erysipelas	Scarlet Fever	Measles	Whooping Cough	Enteric Fever	Puerperal Pyrexia	Puerperal Fever	C.S.F.	Poliomyelitis	Ophth. Neon	Malaria	Dysentery	Enceph. Letharg.	Pneumonia	Pulmonary Tuberculosis	Non-Pulmonary Tuberculosis
1915.....	—	14	14	93	—	—	2	—	4	—	—	—	—	—	—	—	57	25
1916.....	—	18	25	33	312	—	2	—	1	—	—	—	—	—	—	—	76	29
1917.....	—	15	27	36	535	—	2	—	1	—	—	11	—	—	—	—	49	51
1918.....	—	31	36	49	131	—	3	—	—	—	—	7	—	—	—	—	54	44
1919.....	—	26	25	80	418	—	—	—	1	—	—	2	5	6	—	60	44	23
1920.....	—	31	10	109	—	—	1	—	2	—	—	3	—	—	—	28	39	17
1921.....	—	22	13	189	—	—	2	—	2	—	—	3	1	—	1	48	39	12
1922.....	1	18	19	132	—	—	—	—	5	—	—	4	1	—	—	60	30	17
1923.....	—	12	9	64	—	—	—	—	—	—	—	2	2	—	—	70	35	23
1924.....	—	35	16	53	—	—	—	—	1	—	—	3	1	—	5	27	68	24
1925.....	—	16	9	105	—	—	—	—	—	—	—	—	—	—	3	34	34	23
1926.....	—	15	11	82	—	—	—	—	—	—	3	—	—	—	6	37	30	21
1927.....	1	64	9	52	—	—	1	4	—	—	—	1	—	—	2	35	32	15
1928.....	3	48	14	79	—	—	2	4	—	—	—	6	—	—	—	29	36	8
1929.....	3	25	17	123	—	—	—	4	—	—	—	9	—	—	—	74	12	8
1930.....	15	22	18	101	—	—	—	4	1	—	—	4	—	—	—	33	26	17
1931.....	—	5	11	32	—	—	3	3	—	—	—	8	—	—	1	32	17	10
1932.....	—	8	14	58	—	—	1	—	1	—	—	5	—	—	1	44	29	13
1933.....	—	6	8	54	—	—	—	1	2	—	—	4	—	—	—	50	24	13
1934.....	—	30	9	84	—	—	—	3	—	—	—	1	—	—	—	40	25	18
1935.....	—	39	15	106	—	—	—	1	—	—	2	2	—	—	—	42	22	12
1936.....	—	39	9	54	—	—	—	—	1	3	2	2	—	—	—	32	20	16
1937.....	—	13	5	70	—	—	—	—	—	1	—	6	—	2	—	25	28	16
1938.....	—	58	14	82	—	—	—	—	—	—	—	1	—	—	—	32	22	16
1939.....	—	19	11	66	17	4	—	3	—	—	—	2	—	—	—	19	30	13
1940.....	—	11	6	43	618	102	8	—	—	3	2	4	—	5	—	32	20	10
1941.....	—	9	5	47	75	115	3	2	—	1	—	2	—	—	—	30	23	11
1942.....	—	21	6	113	530	39	—	1	—	2	1	3	1	—	—	34	33	20
1943.....	—	19	6	185	168	127	—	—	—	3	—	2	—	—	—	41	23	16
1944.....	—	10	6	194	304	68	—	—	—	1	1	1	—	1	—	26	31	11
1945.....	—	19	8	118	177	54	—	—	—	1	—	—	—	10	—	12	31	9

Immunisation continued to be carried out at the Welfare Centres during the year when 417 children were immunised. The shortage of nursing staff prevented systematic home visitation being carried out and more than three-quarters of the children immunised were approximately one year old and attending regularly the welfare centres. It is estimated that at the end of 1945 56.5% of children under 5 years of age and 74.8% of children between the ages of 5 and 14 years inclusive had been immunised through the medium of the authority's scheme. In addition an appreciable number of children are immunised under private arrangements. Table 15 records the progress of the scheme since its inception in 1936.

Moreover 118 children received a reinforcing dose of prophylactic during 1945, 668 children having been so reinoculated since January, 1941.

PNEUMONIA.

12 cases of pneumonia were notified in 1945. Two-thirds of the cases were males and 7 developed the disease in the first seven weeks of the year. Two cases were admitted to hospital and both recovered, 2 deaths occurring among the 10 cases nursed at home. In addition a further 14 deaths were recorded from all forms of pneumonia of which 2 occurring in hospital and 1 at home could be classified as having suffered from primary pneumonia. It might reasonably be assumed that in 1945 15 cases of primary or influenzal pneumonia had their origin in this area among which 5 deaths occurred.

DYSENTERY.

10 cases of dysentery were notified during 1945.

A small outbreak of bacillary dysentery of the *sonné* variety occurred at a day nursery, five cases occurring in a period of 72 hours. One secondary case, a home contact school child, was discovered and later the organism was recovered from the *fæces* of a healthy mother who admitted having diarrhoea coincidentally with her child's illness. All the cases recovered under treatment. The nursery had a full complement of children in attendance and the abrupt cessation of the outbreak following the introduction of stringent hygienic measures in the nursery is a reflection of the care and industry of the matron and staff in combating the outbreak.

Four other cases unconnected with the outbreak were notified during the year. One adult male died in hospital from bacillary dysentery, no causal organism having been isolated.

TABLE 18.

WARD INCIDENCE OF INFECTIOUS DISEASES NOTIFIED SINCE 1934.

Disease	Ward	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
Diphtheria	N	7	8	11	4	23	8	1	1	7	10	2	7
	C	11	7	10	4	14	4	4	2	1	5	2	9
	S	12	23	18	5	21	7	6	6	13	4	6	3
	T	30	38	39	13	58	19	11	9	21	19	10	19
Scarlet Fever	N	39	34	19	34	34	28	13	25	19	31	68	35
	C	27	39	18	19	12	19	5	14	19	27	48	37
	S	17	33	17	17	36	19	25	8	75	127	78	46
	T	83	106	54	70	82	66	43	47	113	185	194	118
Enteric Fever	N	0	0	0	0	0	0	2	1	0	0	0	0
	C	0	0	0	0	0	0	4	0	0	0	0	0
	S	0	0	0	0	0	0	2	2	0	0	0	0
	T	0	0	0	0	0	0	8	3	0	0	0	0
Pulmonary Tuberculosis	N	9	5	7	8	4	7	1	3	5	7	13	10
	C	9	8	6	9	5	10	7	11	9	7	5	13
	S	5	8	8	12	14	13	12	9	19	9	13	8
	T	23	21	21	29	23	30	20	23	33	23	31	31
Non-Pulmonary Tuberculosis	N	4	7	6	4	8	5	3	2	9	5	3	3
	C	7	3	6	5	2	2	3	4	5	6	3	2
	S	7	3	4	6	5	6	4	5	6	5	5	4
	T	18	13	16	15	15	13	10	11	20	16	11	9
Cerebro Spinal Fever	N	0	0	2	1	0	0	1	0	0	0	0	0
	C	0	0	1	0	0	0	0	1	2	0	0	0
	S	0	0	0	0	0	0	2	0	0	2	1	1
	T	0	0	3	1	0	0	3	1	2	2	1	1
Pneumonia	N	15	11	9	10	9	7	6	7	5	10	3	4
	C	18	20	13	12	9	4	9	12	11	12	11	4
	S	7	13	10	4	14	8	17	11	18	19	12	4
	T	40	44	32	26	32	19	32	30	34	41	26	12

MEASLES.

177 cases of measles were notified during 1945 the cases occurring mainly in the North ward during the first half of the year. One case was admitted to hospital and no death from this disease occurred.

ERYSIPELAS.

8 cases occurred in 1945 two being treated in hospital. No death occurred.

WHOOPING COUGH.

54 cases of whooping cough were notified amongst which there was one death. Two cases were admitted to hospital both of which recovered.

CEREBRO SPINAL FEVER.

One notified case recovered after treatment in hospital and one unnotified case died at home from meningitis certified to be meningococcal in character.

ENTERIC FEVER, OPHTHALMIA NEONATORUM,
ACUTE POLIOMYELITIS, PUERPERAL PYREXIA,
ACUTE POLIOENCEPHALITIS, ACUTE ENCEPHALITIS
LETHARGICA AND MALARIA.

No case of these diseases was notified during 1945.

CHICKEN POX.

58 cases of chicken pox were known to have occurred in 1945. All cases were nursed at home and no death took place.

TUBERCULOSIS.

New cases of pulmonary tuberculosis continue to be notified at the higher rate established during the war years 31 cases being notified, though new non-pulmonary disease continued to lessen and only 9 cases were notified. 15 deaths ascribed to tuberculosis occurred.

At the end of 1945 65 males and 51 females were listed in the register as suffering from pulmonary tuberculosis and 36 males and 33 females as suffering from non-pulmonary tuberculosis making a total of 185 residents in the district formally registered as suffering from this disease.

TABLE 19. NUMBER OF DEATHS FROM CERTAIN DISEASES.

YEAR	Smallpox	Puerperal Fever	Measles	Scarlet Fever	Enteric Fever	Diarrhoea	Whooping Cough	Diphtheria	Tuber- culosis	Canc r	Cerebro Spinal Fever	Pneumonia (All forms)	Influenza
1915	—	1	13	1	3	18	5	—	31	25	—	22	—
1916	—	2	11	1	1	4	10	5	39	25	—	22	1
1917	—	—	17	1	1	5	2	4	45	31	—	20	5
1918	—	—	2	1	—	4	11	7	38	29	—	41	119
1919	—	2	2	—	—	6	—	1	22	36	—	36	36
1920	—	2	2	—	1	11	3	3	26	35	1	20	7
1921	—	—	—	—	1	8	1	4	33	39	—	16	14
1922	—	1	5	—	—	5	2	5	33	33	—	25	19
1923	—	1	3	—	—	2	5	3	21	36	—	43	13
1924	—	—	1	—	—	5	—	2	25	40	—	24	7
1925	—	1	2	—	—	6	4	4	24	28	—	28	12
1926	—	—	—	—	—	3	4	2	27	36	—	27	18
1927	—	2	—	—	1	3	1	3	28	33	—	30	18
1928	—	—	1	—	—	—	1	4	25	45	—	13	11
1929	—	—	2	—	—	3	14	—	23	41	—	33	39
1930	—	1	4	—	—	3	—	—	20	46	—	28	2
1931	—	—	—	—	1	1	2	—	19	40	—	17	10
1932	—	—	8	—	1	3	2	—	17	56	—	27	4
1933	—	1	—	—	1	1	3	1	21	37	—	13	20
1934	—	2	—	—	—	3	1	4	25	39	—	17	6
1935	—	1	—	—	—	3	1	4	10	52	—	31	6
1936	—	1	3	—	—	2	3	5	14	51	2	22	8
1937	—	1	1	—	—	4	2	2	13	45	1	14	14
1938	—	1	—	—	—	1	—	5	19	56	—	22	4
1939	—	1	—	—	—	4	1	2	17	52	—	14	4
1940	—	—	2	—	—	2	—	—	10	73	2	21	11
1941	—	—	1	—	—	2	—	—	11	56	2	17	4
1942	—	—	—	—	—	2	1	1	17	52	1	23	4
1943	—	—	—	—	—	2	—	1	20	54	—	16	6
1944	—	—	—	—	—	3	—	—	20	61	1	11	2
1945	—	—	—	—	—	—	1	1	15	34	1	16	2

TABLE 20.
Cases Notified and Deaths from Tuberculosis during 1945

		New Cases				Deaths			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
Ages		M.	F.	M.	F.	M.	F.	M.	F.
0-1	...	—	—	—	—	—	—	—	—
1-5	...	1	1	2	1	—	—	1	1
5-10	...	—	—	1	1	—	—	—	—
10-15	...	—	—	—	—	—	—	—	—
15-20	...	—	—	—	—	1	1	—	—
20-25	...	3	1	—	1	—	—	—	—
25-35	...	6	5	1	—	1	2	—	—
35-45	...	5	—	—	—	2	—	1	1
45-55	...	5	1	—	1	1	—	1	1
55-65	...	2	—	—	1	—	—	—	1
65 and over...		—	1	—	—	—	—	—	—
		22	9	4	5	5	3	3	4
		31		9		8		7	

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

PUBLIC HEALTH ACT, 1925, SECTION 172.

No action was found necessary under these enactments during 1945.

TABLE 21.

NOTIFIABLE DISEASES

Number of cases of infectious diseases notified, number of deaths from these diseases, number of cases removed to hospital, and deaths in hospital during the year 1945.

Disease	Cases Notified											Hospital	
	Total Cases at all ages	Years									Total Deaths	Total Cases Re- moved to Hos- pital in district	Deaths in Hospital of persons belonging to district
		Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over
Smallpox	...	...	3	...	...	...	5	3	1	6	1	...	...
Diphtheria	19	...	3	...	...	...	...	...	...	...	...	19	1
Erysipelas	8	...	...	...	...	...	...	...	...	...	...	2	...
Scarlet Fever	118	...	2	7	12	3	44	28	14	4	2	71	...
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Fever	1	...	...	...	...	1	...	...	...	...	...	1	...
Acute Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	...
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...
Trench Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	10	...	5	...	...	1	1	1	...	...	1	8	1
Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	12	1	...	...	...	...	...	1	...	4	1	2	9
Measles	177	10	17	24	28	28	69	1	...	...	...	1	...
Whooping Cough	54	7	8	7	11	6	13	2	...	...	...	2	...
Pulmonary Tuberculosis	31	...	...	1	1	...	...	...	...	15	5	26	3
Non-Pulmonary "	9	...	...	3	...	...	2	...	...	2	2	6	5
Totals	439	18	35	42	52	39	134	36	15	31	12	138	19

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The water supply to the area is ample in sufficiency and excellent in quality. It is derived mainly from the Oldham Corporation, but in part also from the Middleton and Heywood Water Board and the Manchester Corporation Reservoirs. All the three supplies are chlorinated. Almost all, over 99%, of the dwelling houses in the area have a piped water supply direct to the house. No houses derive their water supply from stand pipes but 44 premises comprised of farms and dwelling houses are supplied from well and spring water.

DRAINAGE AND SEWERAGE.

NEW STREET WORKS. No new street works were carried out during 1945.

CLOSET ACCOMMODATION.

Five waste water closets were converted to fresh water closets during the year. 1,225 complaints of blocked closets were received, 1,150 of these affecting the waste water type of closet. This figure corresponds to 37.87% of the total number of waste water closets in the district. On the other hand 75 blockages of fresh water closets occurred, equivalent to 1.05% of the total in the area. In addition 355 blocked drains were cleared.

The conversion of pail closets has been the subject of discussion by the Committee from time to time and with the ending of hostilities a report was called for towards the end of the year and preliminary measures initiated to effect, so far as is possible, the complete elimination of this antiquated sanitary utensil.

TABLE 22.

Type of Closet	No. of closets, 1943	No. of closets, 1944	Con- verted 1945	No. of closets
Pail Closets	339	336	—	336
Waste Water Closets ...	3,089	3,088	5	3,083
Fresh Water Closets ...	7,019	7,103	—	7,108
Total	10,447	10,527	5	10,527

The conversion of waste water closets to the fresh water type is no less urgent in my view and a scheme for their conversion should immediately succeed the resumption of slum clearance work.

ERADICATION OF BED BUGS.

During 1945, 18 houses were disinfested all being dealt with by the Hydrogen Cyanide method. No council houses required to be treated.

RATS AND MICE DESTRUCTION.

24 premises privately owned were found to be infested and treated whilst the sewage disposal works and the Council's controlled tip were kept under observation.

SWIMMING BATHS.

16,137 attendances were made by schoolchildren in conducted parties to the baths as part of their organised education.

SANITARY INSPECTION.

The following table, furnished by the Senior Sanitary Inspector, gives a summary of the work carried out by the inspectorate staff during 1945.

TABLE 23.			
Summary of Work Done			
Number of investigations made in Notifiable diseases	...	...	346
Number of statutory notices served	...	...	2
Number of statutory notices complied with	...	...	2
Number of informal notices served	...	...	1283
Number of informal notices complied with	...	...	964
Number of houses disinfected	...	...	178
Number of houses disinfested	...	...	18
Number of Pail Closets converted to Fresh Water Closets	...	...	—
Number of Waste Water Closets converted to Fresh Water Closets	...	...	5
Number of visits to factories	...	...	31
Number of visits to slaughter-houses, Butchers' shops and places where food is prepared for sale	...	...	230
Number of visits to farms	...	...	30
Number of samples of milk examined (Biologically)	...	...	96
Number of Smoke observations	...	...	—
Number of houses inspected and recorded (Housing Consolidated Regulations)	...	...	—
Number of premises licensed for storage of petroleum	...	...	46
Number of premises licensed for storage of Carbide of Calcium	...	...	2
Number of complaints dealt with under Rats and Mice Destruction Act	...	...	91
Number of families displaced from Clearance Areas	...	...	—
Number of families transferred from Clearance Areas	...	...	—
Number of nuisances arising from blocked closets abated	...	...	1225
Number of nuisances arising from blocked drains abated	...	...	355

SMOKE ABATEMENT.

Consideration continued to be given during the year to the problem of atmospheric pollution when it was felt that the time was ripe for resuming actively such measures for its suppression as might be practicable. The contribution of domestic smoke to the problem is well recognised and the Health Committee resolved to recommend the Housing Committee to consider the desirability of arranging, as far as possible, for the installation of smokeless grates in all future houses erected by the Council, a recommendation with which the Housing Committee has shown itself to be in complete agreement and whose underlying principles it is putting into practice.

A sound film dealing with atmospheric pollution as part of the general environmental problem was exhibited and the subject ventilated in discussion at club meetings in the area by interested members of the committee as well as by officers of the department.

The Council has continued its membership of the National Smoke Abatement Society.

HOUSING.

Plans were approved for the erection of 111 permanent brick houses on the north-east side of Long Lane on the Yew Tree site and preparation of the site began during 1945.

An exhibition showing a modern housing lay-out planned for the permanent brick houses to be erected on the above site by the Local Authority was held in the Town Hall during the year. The exhibition, which was organised by the Council's Surveyor on the instructions of the Council, demonstrated many up-to-date features including modern kitchen equipment and smokeless fuel appliances.

TABLE 24.

No. of new houses erected during the year :—

(a) Total (including numbers given separately under (b)) ...	Nil
(i) By the Local Authority	Nil
(ii) By other Local Authorities	Nil
(iii) By other bodies and persons	Nil
(b) With State assistance under the Housing Acts :—	
(i) By the Local Authority (included under (a) (i) above)	Nil
(ii) By other bodies or persons (included under (a) (iii) above)	Nil

1.—INSPECTION OF DWELLING HOUSES, DURING THE YEAR :—

(1) (a) Total number of dwelling houses inspected for Housing defects (under Public Health or Housing Acts)	740
(b) Number of inspections made for that purpose ...	1607
(2) (a) No. of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ...	Nil
(b) Number of inspections made for that purpose ...	Nil
(3) No. of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(4) No. of dwelling houses (exclusive of those referred to under the preceding sub-head found not to be in all respects reasonably fit for human habitation) ...	740

2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—

No. of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	785
---	-----

TABLE 24—continued.

3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A.—Proceedings under Sections 9, 10 and 16 of Housing Act, 1936 :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of which notices were served requiring repairs | Nil |
| (2) No. of dwelling houses which were rendered fit after service of formal notices :— | |
| (a) By owners | Nil |
| (b) By Local Authority | Nil |

B.—Proceedings under Public Health Acts :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of defects to be remedied | Nil |
| (2) No. of dwelling houses in which defects were remedied after service of notices :— | |
| (a) By owners | Nil |
| (b) By Local Authority in default of owners ... | Nil |

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of which Demolition Orders were made | Nil |
| (2) Number of dwelling houses demolished in pursuance of Demolition Orders | Nil |

D.—Proceedings under Section 12 of the Housing Act, 1936

- | | |
|---|-----|
| (1) Number of tenements or underground rooms in respect of which Closing Orders were made | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been rendered fit ... | Nil |

HOUSING ACT, 1936, PART IV—OVERCROWDING :—

- | | |
|---|------|
| A.— (i) Number of dwelling houses overcrowded at the end of the year | 29 |
| (ii) Number of families dwelling therein | 30 |
| (iii) Number of persons dwelling therein | 195½ |
| B.—No. of new cases of overcrowding reported during the year | Nil |
| C.— (i) Number of cases of overcrowding relieved during the year | Nil |
| (ii) Number of persons concerned in such cases ... | Nil |

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

The number of dairy farms in the area at the end of the year was 28, these possessing some 487 cows. One farm is licensed to produce and bottle accredited milk. 16 licences were issued in respect of the distribution of pasteurised milk.

TABLE 25.

Dairy Farms	28
Dairymen and shopkeepers registered as retail purveyors ...	137
Farmers and Dairymen from out-districts registered as retail purveyors in Chadderton	17
Shops licensed to sell pasteurised milk	16
Vendors licensed to sell pasteurised milk	4
Dairymen from out-districts licensed to sell Tuberculin Tested Milk (Certified)	Nil
Dairymen from out-districts licensed to sell Accredited Milk ...	Nil

During the year 96 samples of milk were examined for the presence of tubercle bacilli and in 7 of these, organisms were found. The samples of milk sold under licence as pasteurised were free from tubercle bacilli. The results of examinations carried out during each of the past 14 years are shown in Table 26.

TABLE 26.
Results of Random Sampling, for the Presence of Tubercle Bacilli, of Milk Sold in the District

Year	Positive	Negative	Total Samples	% Positive
1932	2	8	10	20
1933	1	17	18	5.5
1934	2	17	19	10.5
1935	0	11	11	—
1936	3	18	21	14.3
1937	8	50	58	13.7
1938	6	42	48	12.5
1939	0	24	24	—
1940	5	57	62	8.1
1941	4	26	30	13.3
1942	9	53	62	12.9
1943	10	82	92	10.9
1944	4	74	78	5.1
1945	7	89	96	7.3

Milk was also sampled in 96 instances in respect of its cleanliness and Table 28 sets out in detail the source of the milk sampled and the character and result of the tests carried out. 34.3% of the samples failed to pass a standard of bacterial cleanliness and safety as represented by the tests indicated in the table.

These results bring out the unsatisfactory character of milk as generally sold to-day and demonstrate the need on the one hand for efficient pasteurisation and on the other for effective technique of production. The farmer has many difficulties to contend with to-day. Difficulties with feeding stuffs, shortage of labour and shortage of new equipment are still acute but none of these constitutes an excuse for the sale of milk which is hygienically unsafe to drink.

MEAT AND OTHER FOODS.

During 1945, 230 visits were paid by sanitary inspectors to meat shops, bakehouses and places where food is prepared for sale and 47 visits were paid to other warehouses where food is stored.

Table 27 shows the type and quantity of foodstuffs condemned as unfit for human consumption.

Licences were renewed in respect of 6 slaughterhouses though slaughtering continues to be carried out at a central slaughterhouse outside the district.

TABLE 27.						lbs.	ozs.
131 tins of Meat	...	...	...	...	...	379	10
Meat and Offal	...	...	...	...	...	64	8
124 tins of Fish	...	...	...	...	...	119	11
Prepared Meat and Fish Products	...	...	...	...	...	159	14
211 packages Cereals	...	...	...	...	...	240	8
6 tins Vegetables	...	...	...	...	...	7	8
Butter	...	...	...	...	...	62	7
Cheese	...	...	...	...	...	260	—
13 tins Evaporated Milk	...	...	...	...	...	11	2½
Bacon	...	...	...	...	...	20	—
1 jar of Jam	...	...	...	...	...	1	—
Plain Flour	...	...	...	...	...	360	—
Self-Raising Flour	...	...	...	...	...	324	—
Raisins	...	...	...	...	...	28	—
Eggs	...	...	...	...	...	(360) 48	—
						1 ton, 46lbs., 4½ozs.	

TABLE 28.

ANALYSIS OF MILK SAMPLES WHICH HAVE BEEN EXAMINED
BIOLOGICALLY DURING THE YEAR 1945.

Source of Supply	Total No. of samples	Bacterial Count		B. Coli present in			T.B. Positive	T.B. Negative	% T.B. Positive	Samples		% Unsatisfactory
		under 200,000	over 200,000	1.0 cc.	0.1 cc.	0.01 cc.				Satisfactory	Unsatisfactory	
Chadderton Farmers.	52	24	2	Absent	.	.	—	26	11.53	24	2	26.92
		7	—	+	.	.	1	6		6	1	
		11	—	+	+	.	3	8		8	3	
		7	1	+	+	+	2	6		—	3	
Dairy Milk, Chadderton.	9	3	—	Absent	.	.	—	3	Nil	3	—	55.55
		1	—	+	+	.	—	1		1	—	
		2	3	+	+	+	—	5		—	5	
Out-District Farmers.	23	5	—	Absent	.	.	—	5	4.34	5	—	43.47
		2	1	+	.	.	—	3		2	1	
		7	2	+	+	.	1	8		6	3	
		5	1	+	+	+	—	6		—	6	
Dairy Milk Out-Districts.	6	2	1	Absent	.	.	—	3	Nil	2	1	50.00
		1	—	+	+	.	—	1		1	—	
		2	—	+	+	+	—	2		—	2	
Pasteurised.	5	under 100,000	over 100,000						Nil			20.00
		4	—	Absent	.	.	—	4		4	—	
		—	1	+	+	+	—	1		—	1	

Source of Supply	No. Samples	Methylene Blue Test		Coliform Test		No. of samples satisfying both tests	T.B. Positive	% of samples unsatisfactory
		No. of samples which failed the test	No. of samples which satisfied the test	No. of samples which failed the test	No. of samples which satisfied the test			
Accredited Chadderton Farms.	1	Nil	1	Nil	1	1	Nil	Nil

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOODSTUFFS.

Sampling of foodstuffs is carried out by an inspector of the Lancashire County Council with the active assistance and co-operation of the sanitary staff of this Authority. The results of analysis of samples investigated have been supplied by the County Medical Officer of Health and are shown grouped in Table 29.

TABLE 29.						No. of Samples taken	No. of Samples genuine
Sample							
Milk	...	...	...	...	...	12	12
Other Goods	...	...	...	...	...	3	3

It was not necessary to institute legal proceedings in any case.

