Contributors

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BOROUGH OF CLITHEROE

ANNUAL REPORT

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J. H. FAIRWEATHER, M D., M R.C.P., D.P.H.

MEDICAL OFFICER OF HEALTH

AND

E. COATES, C.S.I.B., A.R.SAN.I.

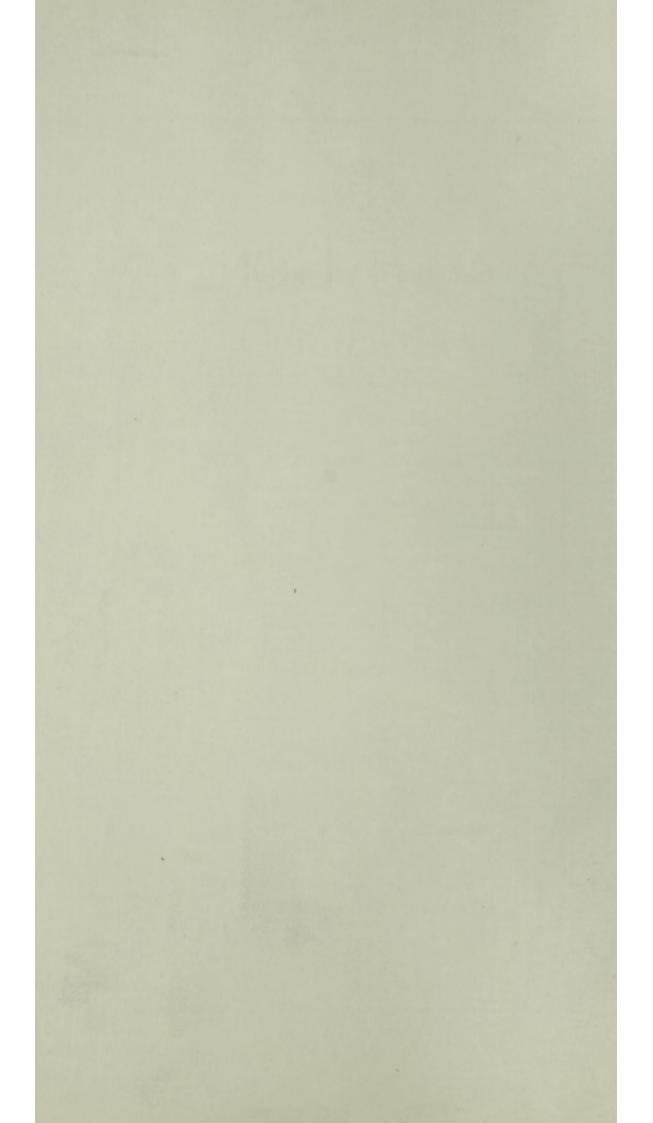
SENIOR PUBLIC HEALTH INSPECTOR

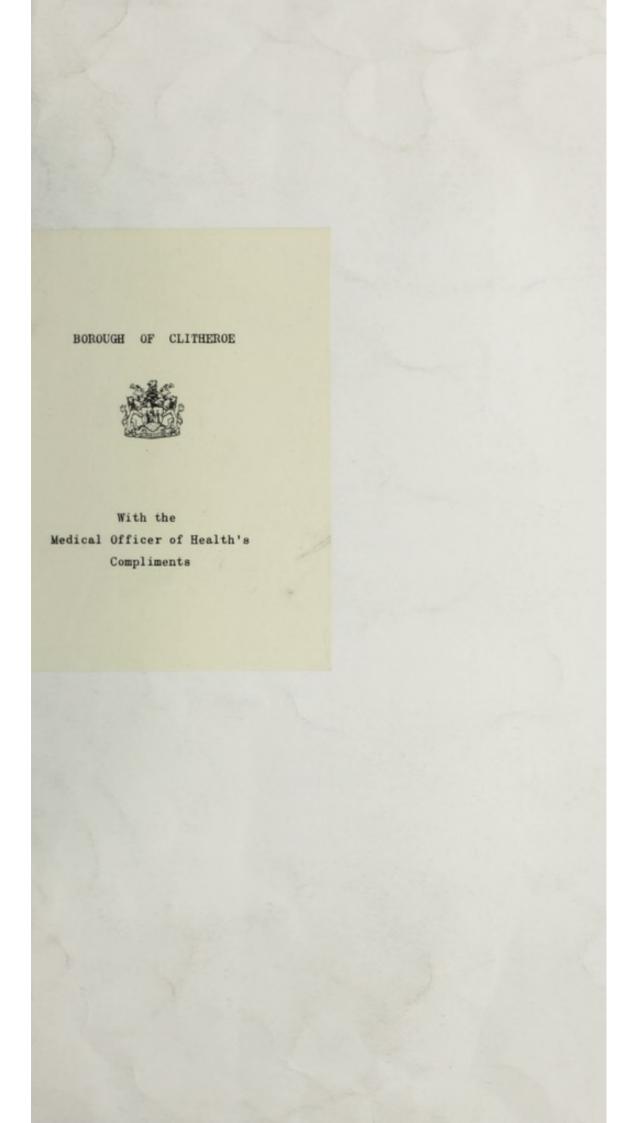
FOR

THE YEAR ENDED



31st DECEMBER, 1956





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MEMBERS OF THE FUBLIC HEALTH COMMITTEE.

1956-57.

Councillor J.W.D.CRITCHLEY, J.P., MAYOR.

Chairman:

Councillor B. SHARPLES.

Vice-Chairman:

Alderman W. WILKINSON.

Alderman F.BENTHAM. J.P.

F.DUGDALE. J	J.	P.
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J.H.SATTERTHWAITE. J.P.

Councillor G.CALVERLEY.

- " C. CHATBURN.
- " E.CROSSLEY.

" J.ENTWISTLE.

" J.HALL.

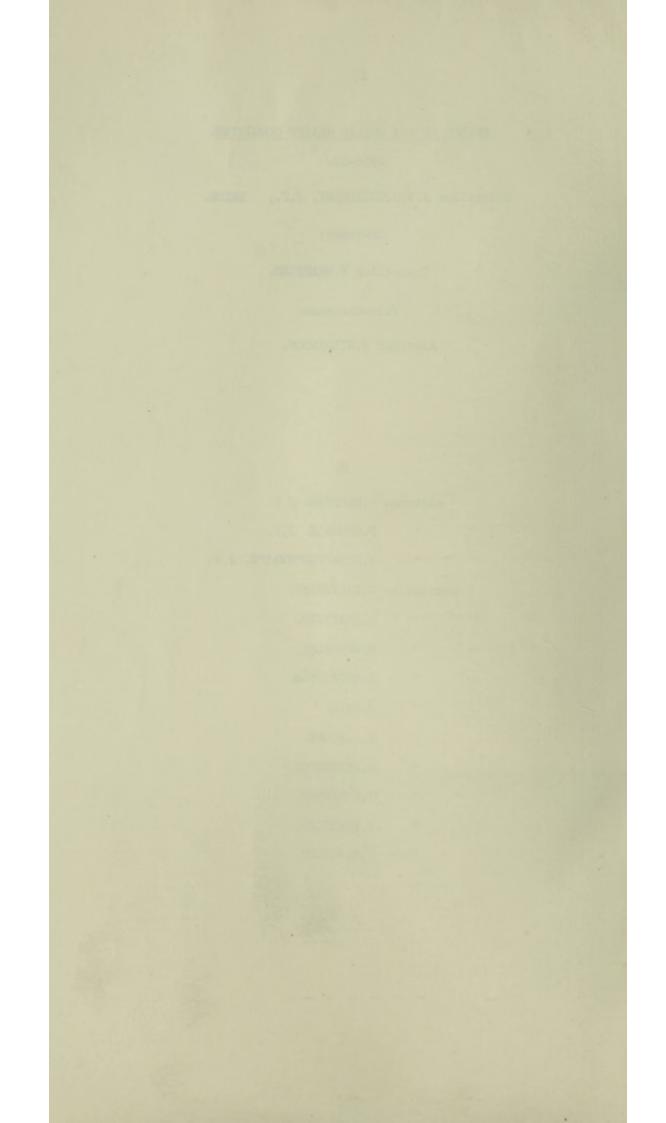
" S.J.MOORE.

" H. PEMBERTON.

- " T.ROBINSON.
- " W.SHARPLES.

" J.S.WRIGHT.

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STAFF OF THE PUBLIC HEALTH DEPARTMENT

(Part-time)

SENIOR PUBLIC HEALTH INSPECTOR E. COATES, C.S.I B., A R.S.H. FOOD INSPECTOR SHOPS INSPECTOR CLEANSING SUPERINTENDENT

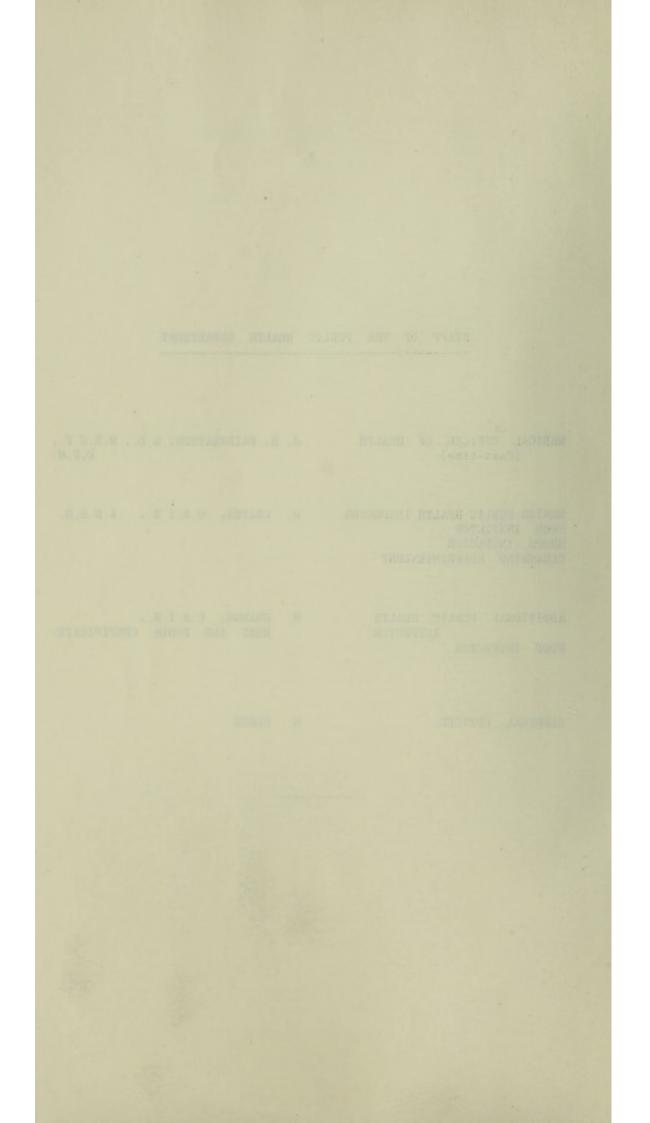
MEDICAL OFFICER OF HEALTH J. H. FAIRWEATHER, M D., M.R.C.P., D.P.H.

ADDITIONAL PUBLIC HEALTH INSPECTOR W. GRANGE, C.S.I.B., MEAT AND FOODS CERTIFICATE

CLERICAL OFFICER

FOOD INSPECTOR

N. CLEGG



PART I.

4.0

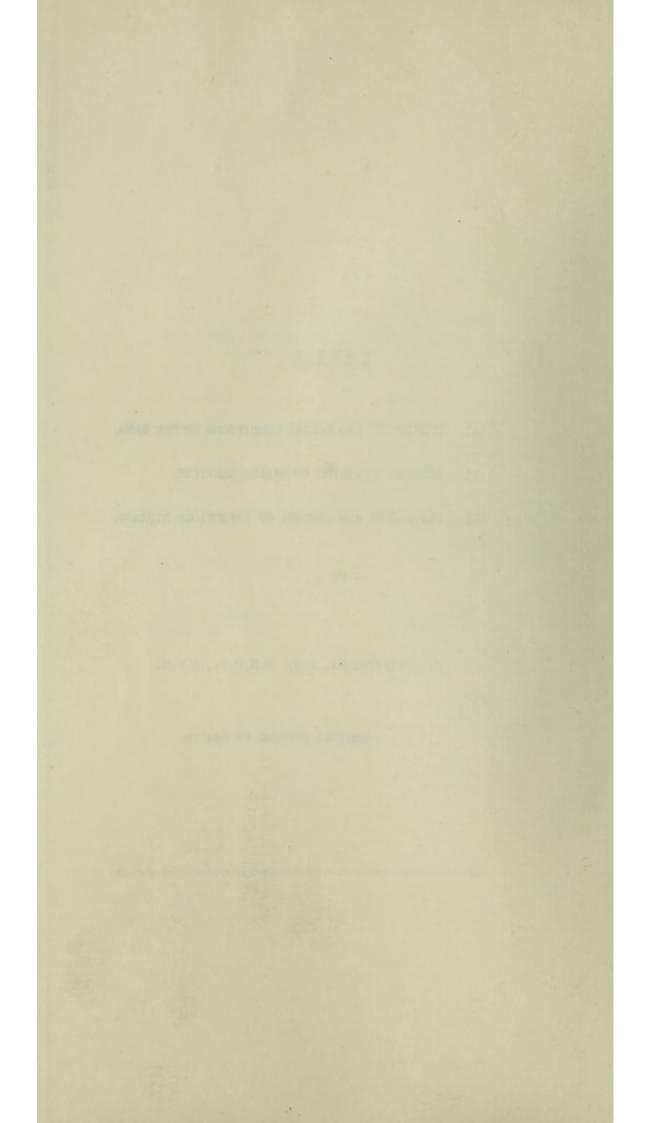
A) STATISTICS AND SOCIAL CONDITIONS OF THE AF	A)	STATISTICS	AND SOCIAL	CONDITIONS	OF THE	AREA
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- (B) GENERAL PROVISION OF HEALTH SERVICES.
- (C) FREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

- BY -

J.H.FAIRWEATHER, M.D. M.R.C.P., D.P.H.

MEDICAL OFFICER OF HEALTH.



Fublic Health Office, CLITHEROE.

February, 1958.

To:- The Chairman & Members of the Public Health Committee of the Borough of Clitheroe.

Gentlemen,

I have the honour to submit to you my annual report for 1956. There has been some delay in its production and so it has been possible for comparative purposes to incorporate in it, figures from the report for 1956 of Sir John Charles, Chief Medical Officer to the Ministry of Health. Extracts relating to Clitheroe from the 1956 Report of the Divisional Medical Officer, Dr. R.C.Webster, are also incorporated. The Report also includes the Annual Report of our Chief Public Health Inspector, Mr. Edward Coates.

The Ministry have asked at times that the Medical Officer of Health should treat some subjects in more than statistical form, and in this report, the opportunity has been taken to review some of the work in more detail.

Thanking the Chairman, Members of the Council, and the officials for their unfailing courtesy and kindness at all times.

> I have the honour to be, Gentlemen, Your faithful servant

> > J.H. FAIRWEATHER.

Medical Officer of Health

5.

A. SUMMARY OF STATISTICS AND SOCIAL CONDITIONS

Area of Borough (in acres)	2,386	
Population - Census, 1951 Estimated Population - Mid 1956	12,057 11,960	
Number of Inhabited House, Census, 1951 Number of Inhabited Houses, end of 1956	···· 3,886 ··· 4,347	
Rateable Value Sum represented by a Penny Rate	£124,666 £ 497	

The principal Industries carried on in the area are Cotton and Rayon Weaving, Cotton Bleaching, Cement Manufacture, Chemical Manufacture, Agricultural and Precision Engineering, Domestic Heater Manufacture, Garment Manufacture, Limestone Quarrying, and Plastics Manufacturing.

SUMMARY OF VITAL STATISTICS

LIVE BIRTHS.	Male.	Female.	Total
Legitimate Illegitimate	75 1	65 6	140 7
	76	71	147

BIRTH RATE per 1,000 of estimated Population.

Crude......12 . 3 Adjusted......13 . 9.

STILLBIRTHS.

Legitimate	5	1	6
	-	-	-
		1	6

RATE per	1,000	total	(live	and still)	Births	39
DEATHS				106	146	252

DEATH RATE per 1,000 of estimated resident Population.

INFANTILE MORALITY (under 1 year)

Legitimate	1	-	1
Illegitimate.	-	-	-
	The other setting to the		

RATE per 1,000 Live Births.....7

NEO-NATAL MORTALITY (under 4 weeks) - NIL

RATE per 1,000 Live Births NIL

MATERNAL MORTALITY.

Deaths from Pregnancy, Childbirth, etc.....Nil. RATE per 1,000 total (live and still) Births. Nil.

BIRTH RATE.

It will be seen that the number of LIVE BIRTHS registered during the year was 147, giving an adjusted Rate of 13.9 per 1,000 of the population, which is a decrease of 1.4 per 1,000 on the figure for the previous year (1955).

The trend of this Rate over the past ten years, in comparison with the rate for England and Wales is shown in the following Table:-

	Cli	theree.	Rate	England & Wales	
Year	Number of Births.		per 1,000	Rate per 1,000	
	М.	F.	Total		
1947 1948 1949 1950 1951 1952 1953 1954 1955	124 108 115 121 80 88 106 79 84	116 103 113 113 79 73 85 80 78	240 211 228 234 159 161 191 159 162	21.9 17.7 18.6 20.4 14.4 14.5 17.2 14.9 15.3	20.5 17.9 16.7 15.8 15.5 15.3 15.5 15.2 15.0
1956	76 ge - Year	71	147	13·9 16·9	15.7

STILLBIRTHS.

Six stillbirths were assigned to the Borough during 1956, an increase of three on the figure for the previous year.

The Table given below sets out details relating to stillbirths for the past ten years:-

		Number of Rate per Stillbirths. 1000 (live		Rate per 1000 of population.		
Year	Leg.	I11.	Total	& still) Births.	Clitherce.	England & Wales.
1947	6	-	6	24	0.55	0.50
1948	10	-	10	45	0.84	0.42
1949	2	-	2	9	0.16	0.39
1950	8	-	8	33	0.64	0.37
1951	7	-	7	42	0.58	0.36
1952	4	-	4	24	0.33	0.35
1953	3	-	3	15	0.25	0.35
1954	ĩ	-	i	6	0.08	0.34
1955	3	-	3	18	0.25	0.35
1956	6	-	6	39	0.51	0.37
Av	erage -	Year	s 1947	-1956	0.42	0.38

DEATH RATE

The number of deaths of Clitheroe residents which occurred during the year was 252, representing an adjusted DEATH RATE of 16.0 per 1,000 of the population, an increase of 0.9 per 1,000 on the figure for the previous year.

	Clit	neroe	England & Wales	
Year. Tot	Total Deaths	Rate per 1,000	Rate per 1,000	
1947	156	14.2	12.0	
1948	179	15.0	10.8	
1949	180	14.7	11.7	
1950	183	12.6	11.6	
1951	184	13.0	12.5	
1952	151	10.7	11.3	
1953	202	14.3	11.4	
1954	166	11.6	11.3	
1955	215	15.1	11.7	
1956	252	16.0	11.7	
Average .	- Years 1947-1956	13.7	11.6	

The Death Rate for the Borough for the past ten years is shown below in comparison with the rate for England and Wales:-

INFANTILE MORTALITY RATE.

One Infant Death (under 1 year) was registered during the year, a decrease of five on the previous year. This gives a RATE of 7 per 1,000 live Births.

The following Table gives the Mortality Rate per 1,000 live births for the past ten years compared with the Rate for England and Wales:-

Year.	Clitheroe.	England and Wales.
1947	25	41
1948	37	34
1949	35	32
1950	21	29+8
1951	. 38	29.6
1952	25	27.6
1953	10	26.8
1954	25	25.5
1955	37	24-9
1956	7	23.8
Average - 1947-1956	26	29.5

OTHER INFANT DEATHS

Deaths from Measles (all ages).....Nil. Deaths from Whooping Cough (all ages).....Nil. Deaths from Diarrhoea (under 2 years).....Nil.

Cause of Death.	М.	F.	TOTAL.
All causes - Certified Uncertified	106 -	146 -	252 -
Diphtheria. Whooping Cough. Measles. Tuberculosis (Respiratory). Other Tuberculous Diseases. Acute Poliomyelitis. Influenza. Malignant neoplasm, stomach. Malignant neoplasm, uterus. Malignant neoplasm, uterus. Malignant neoplasm, breast. Other malignant Neoplasms. Diabetes. Vascular Lesions of Nervous System. Coronary Disease, angina. Hypertension with Heart Disease. Other Heart Disease. Other Diseases of Circulatory System. Pneumonia. Bronchitis. Other Dis. of Respiratory System. Ulcer of Stomach or Duodenum. Gastritis, Enteritis, and Diarrhoea Nethritisand Nephrosis. Pregnancy, Childbirth, Abortion. Congenital Malformations. Motor Vehicle Accidents. All Other Causes.	- - - - - - - - - - - - - - - - - - -	- - - - - - - - - - - - - - - - - - -	- - - 2 - 1 - 4 6 6 7 21 2 39 38 2 67 12 2 6 - 5 1 3 - - 6 3 19
Totals	106	146	252

The following Tables shows the causes and sex distribution of Deaths of Clitheroe residents during the year 1956:-

It will be seen that some 190 (88%) of the 252 deaths registered were attributable to three groups of disease, viz. Vascular lesions of Nervous System, Heart Disease and Cancer. There were 107 deaths from Heart Disease, an increase of 21 over the figure for 1955 (86) and from Cancer, 44 deaths as against 37 in 1955.

During the year, 56 deaths occurred in Clitheroe Hospital (chronic sick females). Such deaths are not transferable but are assigned to the Borough area.

COMMENT ON VITAL STATISTICS & SOCIAL CONDITIONS

POPULATION: - It will be seen that there is an increase of 20 since 1955, and that the population was the same in 1956 as it was in the years 1917 and 1927.

YEAR	POPULATION	YEAR	POPULATION	YEAR	POFULATION
1877	9,735	1937	11,300	1952	12,000
1887	11,000	1947	10,950	1953	12,010
1897	11,700	1948	11,890	1954	12,010
1907	12,500	1949	12,240	1955	11,940
1917	11,960	1950	12,530	1956	11,960
1927	11,960	1951	12,010		

The above are the Registrar General's estimate for June of each year. The last census return, however, in 1951, gave a population of 12,057.

It will be noted that there are now 4,347 inhabited houses, an increase of 461 houses compared with 1951, and averaging 2.75 persons per house for 1956 and 3.0 persons per house in 1951.

The increase of rateable value from £80,932. to £124,666 is of course largely due to re-assessments, as is the sum represented by a penny rate £497. compared with £332. in 1955.

BIRTH RATE: - 13.9 per 1,000.

This is the lowest since 1947, but taking the average of the last 10 years, we are still higher than the average for England & Wales. 16.9 per 1,000 for Clitheroe compared with 16.3 per 1,000 for England & Wales.

DEATH RATE: - As there were 252 deaths in the Borough, this gives an adjusted death rate of 16 per 1,000. If we exclude deaths in the local Hospital for persons not normally resident in Clitheroe. the figure would be about 13.5 per 1,000.

INFANT MORTALITY: - The infant mortality deaths per annum per thousand live births is generally taken as a good index of the health of a community. The average for England & Wales over the last 10 years is 29.5., and for Clithero e 26.00. For 1956, the figure was 7.00 but that year's figure chances to be phenomenally low.

MATERNAL MORTALITY: - Pregnancy is becoming safer. Although before the war there was one maternal death for every 250 children born, it is encouraging to find that in England & Wales, this figure has been reduced to 1 per every 2,000 children born. So pregnancy and child-birth are eight times as safe as they were pre-war.

It is gratifying to report that Clitheroe has had no maternal death for some years.

GENERAL DEATH RATE (ENGLAND & WALES: - Sir John Charles, Chief Medical Officer to the Ministry of Health in his Annual Report for 1956, says that the death rate for England & Wales has remained stationary at 11.7 per 1,000 for some time now, and is not likely to alter much.

Owing to better ecconomic and housing conditions, advances in medical treatment, and increased welfare services, people are living longer.

GENERAL DEATH RATE (ENGLAND & WALES) continued.

The greatest toll of life is now taken by the degenerative diseases, as would be expected in a nation where the expectation of life at birth is now 73 years for females, and 67 years for males - as contrasted with 40 for males, and 42 for females in 1850.

It is now stressed that people are not only living longer, but are fit to work longer, and work makes for longer living, and increased happiness. Sir John Charles continues in his report - "The majority of elderly persons can earn their livelihood until they are well over 65, and a good proportion of those over 70 are still capable of useful work".

He adds, also, that it is a recognised fact that unless people become so frail or senile as to need the type of care which only an institution can provide, they do best at home.

In connection with the Welfare of Old People in this district, during 1956 the Lancashire County Council launched "Operation Sunshine" - a scheme for the care of the aged in their own homes, and in July 1956, a meeting was held for Division 5. of which Clitheroe is a part, and to which a number of Clitheroe health representatives were called.

A welfare committee was to be appointed for each area, and reference was made by the Chairman of the County Health Committee to the good work done by Clitheroe Old Peoples' Welfare Centre.

It was stressed that attention should first be given to persons living alone.

We are informed that there are 333 such persons in Clitheroe Borough, and that 2,269 (about one fifth of our population) are of pensionable age.

A new and attractive housing accommodation scheme for old people at Worsley was described which comprised 16 bungalows, conveniently placed near the centre of the town (for purposes of shopping etc.) with accommodation for a Warden, two Communal Rooms, and a Communal Laundry. As a follow up to this, a deputation of the Council's Health Committee with Officials, visited Worsley to inspect the scheme, and found it interesting and worthwhile.

"B" - GENERAL PROVISION OF HEALTH SERVICES

A comprehensive range of services is maintained for the town by various authorities as follows:-

THE LANCASHIRE COUNTY COUNCIL HEALTH SERVICES

Dr. R.C.Webster, as Divisional Medical Officer, gives the following particulars for 1956 regarding Clitheroe:-

(i) Child Welfare Clinic - This is conducted by Dr. Royle and the Health Visitors (Miss Bates and Miss Wilson) on Tuesday afternoons when immunisation sessions are also held.

The Health Visitors also hold child Welfare Clinic on Wednesday afternoons from 2.0 p.m., until 4.0 p.m., for infants and "Toddlers". THE LANCASHIRE COUNTY COUNCIL HEALTH SERVICES continued.

(i) "Child Welfare Clinic" ... continued.

The number of children who attend the Child Welfare Clinic, and the number of attendances at the Centre for 1956 was as follows:-

(ii) Ante and Post Natal Clinic:- This is conducted by Mr. R.M.Corbett, F.R.C.O.G., of Preston. There were 12 sessions in 1956, and 102 individual women attended. It is held on the afternoon of the second Thursday of each month. There is an average attendance of 17 per session.

Apart from Mr. Corbett's Clinic, there is an Ante-Natal Clinic conducted by the Mid-Wives and Health Visitors every Thursday afternoon from 2.0 p.m. to 4.0 p.m.

(iii) Ante-Natal Relaxation Class - This is held every Thursday afternoon except the 2nd Thursday of the month.

It is conducted by Mrs. D.M.Dickson. In 1956, there were 38 sessions; 34 individuals attended; and there were 213 attendances.

These classes are most useful, especially in the last few months of pregnancy, and it would be to the advantage of expectant mothers to avail themselves more fully of the facilities, education, and guidance offered.

(iv) Dental Clinic - This is held on Friday mornings.

Under the County Council scheme for the care of mothers and young children, expectant and/or mursing mothers and young children under the age of 5 years, may receive priority dental care and treatment free, provided by the County Council.

(v) Clinics Associated with the School Medical Services

Nurses attend to minor ailments from 9.0 a.m. to 10.0 a.m. each morning. Dr. C.Royle is in attendance each Friday morning at 9.45 p.m. (v) Clinics Associated with the School Medical Services ... contd.

There are also Specialist Clinics monthly, as follows :-

Eye Clinic.....Dr. E.J.Mitchell.

Ear Clinic.....Dr. John Evans.

Dental Clinic Mr. J. Higson.

Foot Clinic Mr. E.I.Hunt.

All the above clinics provided by the County Council are held at:-

THE SCHOOL CLINIC & CHILD WELFARE CENTRE, "EASTHAM HOUSE" 8, ESHTON TERRACE, CLITHEROE.

Arrangements are also made for children needing Speech Therapy, and those requiring Child Guidance, to be sent to appropriate specialists when required.

(vi) Clitheroe Day Nursery - "Bright Street".

Accommodation provided - 19 places for children aged 0-2 years; and 31 places for children aged 2-5 years.

No. of Children on the registers at the end of the year.

0-1 years.....11.

No. of Children on the waiting list at the end of the year

0-1 years.....1.

2-4 years.....Nil.

(vii) The Ambulance Service.

Clitheroe is well provided for by the County Council scheme. At the depot there are two ambulances and one "Car for Sitting Cases".

Cases and mileage for 1956 were as follows :-

On an average, the Clitheroe Ambulances travel 228 miles each day, and each day transfers 18 patients.

(2) - HEALTH SERVICES FROVIDED FOR THE TOWN BY THE REGIONAL HOSPITAL BOARD.

(i) <u>General Hospital Services</u> - These are provided by the Manchester Regional Hospital Board in Blackburn, Accrington, Preston, Burnley and Nelson. There is also access where required to Manchester, Liverpool, and other hospitals.

Chest surgery is now based on Blackpool Victoria Hospital. This Thoracic Unit being under the direction of Mr. P.Jewsbury F.R.C.S., who also visits the hospitals of the Blackburn and Burnley group, whilst brain surgery etc. is now based on Preston Royal Infirmary under the Neuro-Surgical Unit conducted by Mr. G.K.Tutton, F.R.C.S., who also visits the hospitals in the Blackburn and Burnley Group.

Maternity cases are provided for at Bramley Meade, Whalley; Queen's Park Hospital Blackburn; and Preston Royal Infirmary:

Infectious diseases are accommodated where required at Park Lee Hospital Blackburn, and the Marsden Hospital, Burnley.

(ii) <u>The Chest Clinic</u> - This was held for many years at Accrington, but is shortly to be transferred to a new unit at Blackburn Royal Infirmary under the direction of the Chest Physician, Dr. R.Ward.

(iii) Pathological and Bacteriological Services

The Pathological and Bacteriological Departments of the Blackburn and East Lancashire Royal Infirmary, and the Preston Royal Infirmary, do the Public Health Laboratory work in accordance with the Government Scheme officially carried out by the Manchester Regional Hospital Board.

A sub-laboratory, under the direction of Dr. Spink, Pathologist to the Blackburn Group of Hospitals, functions in a suite of rooms at the Clitheroe Hospital, and is open between 9.0 a.m. and 9.30 a.m. each Wednesday.

The local Medical Practitioners can refer Clitheroe patients for any necessary tests and thus obviate the tiresome travel to more distant hospital centres.

(iv) X-ray Facilities

Blackburn Royal Infirmary, Victoria Hospital Accrington, Victoria Hospital Burnley, and Reedyford Hospital Nelson, all have "Open Access Departments" to which any general medical practitioner can send cases for x-ray examination direct, without the patient having to be sent first to a hospital clinic, thus saving the time of the patient and the consultant when it is appropriate to deal with the case in this manner.

This facility also enables the general medical practitioners to maintain their medical interest because they do not necessarily have to lose the oversight of their cases when direct reference to the x-ray department is appropriate.

(i) Physiotherapy Centre, New Market Street.

This is a voluntary organisation supported by Public Subscription and small payments made by patients, and also from funds derived from the funds of the former "District Nursing Association". It continues to render useful service. A wide variety of treatments are available, and appropriate physiotherapy is given to an increasing number of patients, when recommended by their medical attendant.

The Centre relieves the pressure on the physiotherapy departments of local hospitals; these departments are grossly under-staffed because of the great shortage of trained personnel.

The Clitheroe Centre also saves patients time and trouble. It has no connection with the National Health Service.

(ii) Old Peoples' Welfare Centre - This was begun in 1954, and is now housed in commodious premises in Lowergate. It continues to be a beneficial and popular social centre much appreciated by the older generation of townspeople.

It is supported by voluntary subscriptions and "efforts" and has encouragement from the Borough Council and County Council.

Consideration is to be given to the provision of a Chiropody Service for old people, subsidised by the Centre - This would be a great boon.

"C"	PREVALENCE	AND	CONTROL	OF	INFECTIOUS	DISEASES
-----	------------	-----	---------	----	------------	----------

The incidence of Infectious Diseases during 1956 is shown in the following Table, which includes particulars of cases, other than Tuberculosis, notified to the Authority, cases removed to hospital, and deaths from these diseases. Cases of the non-notifiable minor infectious diseases are not included:-

Notifiable Disease.	Total Cases		Ci Age	Total Deaths	Cases removed to				
Disease.	All Ages.	0-1	1-5	5-10	10- 25	25- 65	65 & over	S	hospital
Smallpox	-	-	_	_	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-
Scarlet Fever	26	-	8	15	3	-	-	-	
Measles	-	-	-		-	2	-	-	-
Wh. Cough.	70	7	34	29	-	-	-	-	-
Ac. Pneumonia	5		-		2	3	-	2	-
Puer. Pyreyia.	-	-	- 1	-	-	-	-	-	-
Poliomyelitis(P)	8	1	4	-	2	1	-	1	8
Poliomyelitis(NP)	6	-	6	-	-	-	-	-	6
Encephalitis	-	-	-	-		-	-	-	-
Dysentery.	-	-	-	-	-	-	-	-	-
Oph. Neonatorum.	-	-	- 1		-	-	-	1 22.0	-
Erysipelas	3	-	-	-	1	1	1	-	-
Food poisoning	-	-	-	-	-	-	-	-	-
Totals.	118	8	52	44	8	5	1	3	14

It will be seen from the foregoing Table that 118 cases of notifiable diseases were reported during the year, an increase of 34 cases on the previous year.

I give the following table for five years for comparative purposes.

Disease.	1952	1953	1954	1955	1956
Smallpox	-	_		_	_
Diphtheria	1		-	-	-
Scarlet Fever	55	53	12	14	26
Measles	135	206	257	40	-
Whooping Cough	53	15	22	27	70
Typhoid Fever	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-
Poliomyelitis - P	1	1	-	-	8
-do- N.P	_	1	-	-	6
Infective Encephalitis	-	1	-	-	-
Erysipelas		2	1	1	3
Acute Pneumonia	7	11	6	1	5
Dysentery		-	-	-	-
Ophthalmia Neonatorum	-	-	-	-	-
Malaria - all forms	-	-	-	-	-
Food Poisoning	-	-	1	1	-
Puerperal Pyrexia	4	-	-	-	-
Puberculosis - Respiratory	4	13	9	3	9
-do Other Forms	2	4	2	2	í
and the second of the second					
Totals	262	307	31.0	89	128

There were increases in the number of cases of Scarlet Fever and Whooping Cough notified, but the town was free from Measles during this period.

The above outbreaks proved to be of a fairly mild type and no deaths resulted.

It is pleasing to report that Clitheroe was again free from Diphtheria during 1956. Only one case of this has occured in the Town, since 1946.

DIFHTHERIA AND IMMUNISATION

In England and Wales there were only eight deaths from diphtheria and 53 actual cases, whereas as recently as 1949, there were 84 deaths and 1,890 notifications. Clitheroe parents have a splendid record as regards immunisation.

Parents don't come across diphtheria nowadays, and many fail to realise what a terrible scourge it used to be, but this scourge will recurr unless a high rate of immunisation is maintained.

The percentage of children immunised in England and Wales generally in 1956 varied from over 70% of the annual number of births, down to under 30%. It is gratifying that in Clitherce, the acceptance rate is generally over 70%, thanks to the enthusiasm of the local doctors, and the staff of the Clinic, and the good sense of the parents.

Immunisation can be had at the local clinics or can be given by the patient's own doctor.

WHOOPING COUGH AND IMMUNISATION

In 1946, the Lancashire County Council extended an opportunity to every medical practitioner in the area to provide immunisation against whooping cough, generally at the same time as immunisation against diphtheria. These facilities are available at the Clinic or at their own doctors' surgeries, for all children.

In many cases, immunisation against tetamus is provided and the time is probably not far distant when most children will be immunised in their first year against Small Pox; Whooping Cough; Tetamus; Foliomyelitis; and perhaps at about school leaving age - against Tuberculosis also (by use of the B.C.G.) Protection against these six serious diseases will constitute a great advance in Preventive Medicine.

SMALL FOX AND VACCINATION.

Primary Vaccination: All of this is done by general practitioners. In Clitheroe, there were 147 children born, but only 59 children under the age of 1. were vaccinated - This represents about 40% of children born. The average for England and Wales was 38.4% and fortunately the acceptance role is going up.

It is hoped that this upward trend will continue because air travel has increased the risk of epidemics due to infection being imported, also because/a child is not vaccinated in infancy (by far the best time) so often it has to be vaccinated in its teens because of many occupations, emigrations &c. It is hoped that more Clitheroe parents will avail themselves of vaccination. By present methods, complications are practically unknown.

In 1956, in Clitheroe, 9 children were vaccinated between the ages of 1 & 5 years; 4 between the ages of 5 & 15 years; and 12 from 15 years of age and upwards - a total of 84 when the 59 children under the age of one are included.

36 people were re-vaccinated, 29 of them were over 15 years of age.

WATER-BORNE DISEASES AND BACTERIOLOGICAL EXAMINATION OF WATER SUPPLIES

In 1956, the Ministry of Health issued their report on this subject. With increasing demand on our supply - both for domestic and industrial purposes - we have been working under conditions of strain, and it is not surprising that often we have fallen short of the Ministry's target as set out in that report.

Samples are taken from five different points - 129 bacteriological examinations were made in all and 80 out of these 129 specimens were reported as Class I. However, a number fell into lower classes and so a close watch is being kept on the gathering grounds, wells, collecting chambers and reservoirs.

It is of interest that the best reports relate to the new borehole. We shall be greatly helped by the output of the new borehole in the supply of a purer raw water but these 129 analyses do point strongly to the great need for chlorination, and it is gratifying that arrangements for this essential measure are now in hand.

FOOD INFECTIONS

There was a slight outbreak of diarrhoea at the Day Nursery in May. Three children and two of the staff were affected. The attacks began about May 24th but all had recovered by May 28th and none were severely affected. Investigations were made regarding the food, the food handlers, and the consumers. The FOOD INFECTIONS continued.

standards of food preparation and hygiene were found to be high.

FOLIOMYELITIS EPIDEMIC - CLITHEROE M.B. NOV. - DEC. 1956

Most of the facts are summarised in the following table :-

	PA	RALY	TIC CASES			NON-	PARALYTIC	CASES	
Age Groups	M	P41	Total at Age Groups	Ratio of Males to Females.	M	[Fe]	Total <u>at</u> <u>Age</u> Groups	Ratio of Males to Females.	Total Paralytic and Non- Paralytic at age Groups.
0-4	4	2	6	2:1	4	2	6	2:1	12
5-9	0	0	0	-	0	l	1	0:1	1
10-14	1	1	2	1:1	0	0	0	assol free	2
15-24	0	0	0	-	1	0	1	1:0	1
25 & over.	1	0	1	1:0	0	0	0	-	1
Totals All ages	6	3	9	2:1	5	3	8	1.66:1	17

The following figures indicate the proportion of cases of poliomyelitis occurring in the different age groups:-

0-4 years	-	70%	of	all	the	cases.
5-14 years	-	18%	of	all	the	cases.
15 years and over	-	12%	of	all	the	cases.

Seventeen cases occurred between November 20th and December 29th 1956, but only 14 were notified in 1956 as 3 of the notifications were not received until the first week of January 1957.

At the same time, 3 cases occurred in a neighbouring rural district. As usual in poliomyelitis epidemics, males (11 cases) preponderated over females (6 cases). Fortunately only half the cases were paralytic -(52.3% paralytic and 47.7% non-paralytic). This figure corresponds to that for England and Wales generally for 1956 (53.7% paralytic and 46.3% non-paralytic.)

Twelve of the cases were under 4 years of age.

There was one fatal case - a man of 30, the first case to be notified this was of the bulbar type. All the cases were treated in hospital,

An average town of Clitheroe's size (about 12,000) would expect 0.84 cases a year, instead of the 17 cases recorded in this epidemic.

The town had been free from Poliomyelitis since 1953.

ASSESSMENT OF CASES AT FEBRUARY 28TH, 1957.

Patients Deceased	1.
Patients recovered with no obvious functional limitations.	10.
Patients recovered with some functional limitations but treatment	
ceased.	3.
Patients recovered with some functional limitation and still on treatment.	3
	17

Fortunately the three children most affected are making good progress and none is expected to be handicapped to any great extent.

As far as we can estimate mortality rate, from our one fatal case in seventeen cases, the death rate was 5.9%. Over England and Wales generally, the figure was 4.3% in 1956.

Sir John Charles in his 1956 report records the average duration of these outbreaks in small areas to be about eight weeks, which is slightly longer than this particular epidemic (Nov. 20th to Dec. 29th).

It would seem significant that six of the cases attended the Nursery School and all these six had their onset between November 19th and December 4th. It would seem likely that most of these were infected from a common source. The unusual measure of school closure was resorted to, and school Christmas Parties were restricted. Three cases resided in the same street as the original fatal case, but although repeated attemps were made, it was not possible to trace any connection between this fatal case and the others. Had all four cases in that street been infected by an unknown common carrier?

The original patient was frequently in Manchester at the time of the Manchester epidemic and it is possible he contracted his affection there.A Clitherce co-worker of his became affected on about December iith and two further cases were neighbours of this last mentioned case, and fell ill two weeks later, in District "C" (see below).

It is of interest that a feature of the epidemic was its association with three separate districts of the town.

DISTRICT "A" had four cases. Two of them were relations and in very close contact. One of these two began 4 days after the other.

DISTRICT "B" had eight cases. One of them began on December 2nd, his sister on December 20th (both paralytic) and a baby next door began on December 10th (non-paralytic).

DISTRICT "C" had three cases. One of them began on December 11th and the others - close neighbours - began about 16 days later.

MEASURES OF CONTROL - The usual methods were followed. Early notification by the local doctors, hospitalisation of every case, quarantine, disinfection, instructions to parents, and the tracing and instructing of contacts.

MEASURES OF CONTROL OF FOLIOMYELITIS continued.

General practitioners, parents and teachers were very alert to the situation and most helpful in segregating suspects at once and ensuring rest to the muscles at the onset of the illness.

We had the help of the Epidemiology Medical Officer of the Ministry of Health, Dr. A.L.Roden of London. He made a full enquiry and survey on December 14th and 15th. He described the outbreak as of the "Narrow Stream" variety, and was struck by its close association with one school.

In conjunction with Dr. Moss, Paediatrician of Blackburn, tests were taken from the Nursery School children and a group of comparable children, and also from the sewers. This was - with a view to finding out how many of these children who were in contact with poliomyelitis cases, became infected with the virus, and yet never developed the disease. The results of this investigation will not be available until 1958.

The epidemic did bring home to people the dangers of poliomyelitis. Only 30% of parents had accepted the offer of immunisation before the epidemic, but there has been a much better response since, and it is to be hoped that full advantage will be taken of the facilities provided. Hundreds of Clitheroe children have now been immunised with no untoward effects.

Out of 11 million cases inoculated in the United States and Canada in 1956, there were no mishaps. Of the 4,000 Manchester children immunised in 1956 during the subsequent epidemic, not one died of policyelitis, and only two were slightly affected by the disease. The vaccines now being used have been subjected to the most stringent tests.

INCIDENCE AND MORTALITY OF TUBERCULOSIS, 1956

Cases of Tuberculosis were admitted to various Sanatoria under the Regional Hospital Board which administers the general scheme. Close liaison is still maintained between the Board and the local Public Health Department.

All the necessary disinfections following these cases are carried out by our own Department.

The following Table shows the age group incidence of new cases of Tuberculosis notified, and the deaths therefrom in 1956:-

Age	New Ca.	ses.	Deaths.				
Periods.	Respiratory	Non-Respy.	Respiratory	Non-Respy			
Years.	M. F.	M. F.	M. F.	M. F.			
0-							
1-							
2-							
5-							
10-	- 1						
15-							
20-	- 1						
25-			- 1				
35-	- 1						
45-	4 -						
55-	1 1						
65-							
75+							
1.51							
	5 4		- 1				
Totals	9	_	1	-			

INCIDENCE AND MORTALITY OF TUBERCULOSIS, 1956 continued

It will be seen from the foregoing table that 9 cases of Respiratory Tuberculosis were notified during 1956, an increase of 6 on the 1955 figure, but this increase was almost entirely contributable to new cases detected during the Mass Radiography Survey in May, June, and July. No cases of Non-Respiratory tuberculosis were notified.

MASS RADIOGRAPHY CAMPAIGN

INCIDENCE AND MORTALITY:- The Mass Radiography Unit of the Regional Hospital Board undertook the second mass survey of the Borough and part of the Rural District in May, June, and July. The response of the townspeople was excellent and the figures of the first survey in 1951 were exceeded considerably.

Whilst it is not possible at the moment, to give comparisons with other towns of similar size, it is felt that the Clitheroe figures will be difficult to improve upon.

The final Report on the survey will not be available until 1958, but the preliminary Report forwarded to the Council in October by Dr. Capper gave the following statistics:-

Number of person x-rayed in Clitheroe Borough	(1951 - 5,157)
Number of persons x-rayed in Clitheroe Rural District1,228	(1951 - 718)
Total x-rayed in District	(1951 - 5,875)

ANALYSIS & COMPARISON BY EXAMINATION GROUP: -

	1956	1951
Factories and Offices General Public Volunteers School Children	3,300	2,957. 2,440. 442.
General Practitioner Referrals Ante Natal CasesI	ncluded in	(14 and over) 20
G	eneral Public Sessions.	16
Destric	8,298	5,875

In Clitheroe Borough, the population is 12,010 (1951 Census). If a fifth is taken out for children under 11 years, and old people this roughly leaves 10,000 of whom 70.7% were x-rayed in 1956 against 50% in 1951. PART II.

ENVIRONMENTAL HYGIENE

1. SANITARY CIRCUMSTANCES OF THE AREA (including Refuse Collection & Disposal)

2. HOUSING.

3. INSPECTION AND SUPERVISION OF FOOD

BY

E.COATES, C.S.I.B., A.R.S.H. SENICE FUBLIC HEALTH INSPECTOR

AND

CLEANSING SUPERINTENDENT

1. SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLY

This is from upland springs and from a sub-terranean source by pumping from a borehole. This latter which was put into operation during the summer of 1955 proved to be a great asset and allayed the fear of shortage experienced over the years during spells of drought.

Schemes for the construction of a new main from the gathering grounds to the town, the sinking of a second borehole, and the provision of chlorination plant, have been sanctioned and work on these new projects will commence in the not far distant future.

With one exception, an old house on the extreme north boundary of the town, all houses have a direct supply from the public mains.

WATER SAMPLING

During the year, 129 Bacteriological examinations were made with generally satisfactory results. Occasional samples indicated some pollution of animal origin but remedial measures were taken to remedy the contamination.

DRAINAGE AND SEWAGE

New house construction called for some extension of water mains and sewers during the period under review.

The new Scheme for the more efficient treatment of the town's sewage, so phased as to meet the requirements of the Borough for many years to come, was still in the hands of the Consultant Engineers at the end of the year.

SANITARY ACCOMMODATION

There are in the Borough some 15 Pail Closets, 1,260 Waste-water or "Tipper" Closets, and 3,293 Fresh-water Closets.

During the year under review, 20 waste-water closets were converted to the freshwater system. The remaining closets of this type should be abolished as soon as possible as a Public Health measure.

A considerable number of these are in properties scheduled in the Slum Clearance Programme which will be put into operation in the near future, and the number will be reduced in this way, but a still greater clearance of this undesirable type of closet is anticipated by the inauguration, in the near future, of a Grant Scheme under Section 47(4) of the Public Health Act, 1936.

A scheme for the abolition of obsolete sanitary accommodation at one of the Schools in the Borough was approved by the Education Authority, but the actual work had not been commenced at the end of the year.

RIVERS AND STREAMS

No special action was called for during the year under review.

REFUSE REMOVAL AND DISPOSAL

The following is a summary of the work done in the removal of House and Shop Refuse, etc. (excluding salvage Loads) during the year ended 31st. December, 1956. -

1.	House and Shop Refuse removed	loads.
2.	Offal removed from Public Abattoir205	
3.	Fish and Vegetable Offal removed144	
4.	Nightsoil from Pail Closets	**

3,981

There were some 4,856 dustbins in use in the Borough area at the end of 1956. The control of replacement bins is in the hand of the Local Authority under a scheme which has been operated for many years past.

A weekly collection of refuse is always aimed at, but it was not possible to maintain this regularly throughout the year. For the most part, a 7-10 day collection was given, but unfortunately this period was extended following holiday periods (2 full weeks in July and September), and during the winter months when staff was depleted through sickness. In these days of almost full employment it is most difficult to obtain replacement labour during the absence of sick workmen, and a depleted staff, thus meaning a longer collection period.

The output of house refuse could still be reduced at the source, that is in the homes of the people. Material of an organic nature, which can quickly cause muisance when deposited in the dustbin, should be burned in the household grate, and bulky material such as paper and cardboard should be bundled separately and handed to the collector. Much of the garden refuse placed in the dustbins would make a good fertiliser if composted on the garden or dug directly into the soil. During certain seasons of the year, a "full dustbin" is too often an accumulation of these types of refuse, together with a very small ash content. If these rules were carried out by householders, the dustbin would then be available for ashes only and the innocuous contents would present no danger to health even when the period of collection is prolonged at times owing to staff difficulties.

SALVAGE

The collection of salvage material continued satisfactorily during 1956. The prices of waste paper and cardboard remained steady during the year and there was no disposal difficulty.

		We	ight		1 1 3	Revenue			
Material	Τ.	С.	Q.	LBS.	£	:	S	:	D.
Waste Paper	67.	1.	3.	0.	493	:	18	:	8.
Cardboard	37.	19.	2.	0.	303	:	10	:	5
Baled Dest. Tins	31.	18.	3.	0.	127	:	15	:	0
Textiles	1.	3.	3.	15.	22	:	5	:	10
Ferrous Metal	1.	17.	0.	0.	4	4	11	:	6
Non-Ferrous Metal	-	4.	1.	0.	4	:	2	:	2
Totals	140.	5.	0.	15.	966	:	3	:	7

The following Table shows the total weight of salvage disposed of and the income derived therefrom during the year ended 31st. December, 1956:- SANITARY INSPECTION OF THE DISTRICT

Number of Premises visited		2,979	
Number of Nuisances discovered		432	
Number of Nuisances abated		430	
No. of House Inspections under Housing Acts		155	
Number of Re-inspections		65	
Number of Other House Inspections		104	
Number of Bakehouse Inspections		26	
Number of Factory Inspections		124	
Number of Factory Visits "Means of Escape"		18	
Number of Visits to Food Shops and Stalls	•••		
		268	
Number of Visits to Dairies.	•••	10	
Number of Visits to School and School Cante	ens.	12	
Number of Visits to Slaughterhouses		532	
Number of Visits to Ice Cream Shops		44	
Number of Visits under Shops Act		42	
Number of Visits to Offices Under P.H.Acts		5	
Number of Visits to Infected Houses		42	
Number of Visits re Works in Progress		40	
Miscellaneous Visits re Complaints, etc		246	
Number of Houses disinfected		17	
Number of Houses disinfested		2	
Informal Notices to owners, etc		348	
Statutory Notices served		3	

MOVEABLE DWELLINGS & CAMPING SITES

Fermission was given during the year for the siting of two caravans for a limited period only. In both cases, the owners were experiencing housing difficulties.

SHOPS - Routine inspection, and special inspection as occasion required, continued during the year. In 9 cases, occupiers of shops were given warning as to minor contraventions of the Shops Acts.

New sanitary conveniences for male and female employees and washing facilities were installed in one retail shop during the year under review.

FACTORIES

There are at present 11 Non-Power and 128 Power Factories, a total of 139 premises, on the Register and coming within the purview of the Factories Acts.

Inspection during the year proved that the standard generally was satisfactory, but it was found necessary to give informal notice in four cases - two for want of cleanliness of walls, etc., and two for unsuitable or defective sanitary accommodation.

SCHOOLS.

The general sanitary condition of the Schools in the Town is considered satisfactory.

A scheme for the abolition of out-dated sanitary conveniences and the erection of modern accommodation together with a kitchen annexe in one school received the consent of the Education Authorities but work had not commenced at the end of the year.

FUBLIC CONVENIENCES. - The close pebble-dash treatment of the walls of one Convenience was carried out during 1956. This method of treatment is most effective in eliminating the offensive and indecent writings and drawings previously in evidence in all the Public Conveniences.

There is still the need for a centrally situated convenience in which facilities for washing, etc. can be provided.

ATMOSPHERIC POLLUTION

It was found necessary to take six Smoke Observations of factory chimneys during the year 1956. In two cases the black smoke emissions were considered to be excessive and notices were issued to the Firms concerned.

The cupola furnace of a local Foundry has given trouble from time to time. The owners have taken practical steps to minimise the emission of grit to the atmosphere by the erection of a grit arrester on such furance.

The Managements of other works in the area, concerning which we had serious complaints as to dust and fumes over a period of years, have been most co-operative and have gone to considerable expense in taking all practicable means to prevent atmospheric pollution and no special action was called for during 1956.

There is close co-operation at all times between H.M. Inspector of Alkali etc. Works and the officials of the Department in respect of atmospheric pollution.

FREVENTION OF DAMAGE BY PESTS ACT, 1949

The Health Department employs a full-time Operator on Rodent Control, etc. The town is divided into eight sections and regular tours of inspection of premises and land are made within these sections, and treatments carried out where necessary. One test baiting and two maintenance treatments of the Town's sewers were carried out during the year. Several refuse tips and other premises were treated at intervals during the year on behalf of the Bowland Rural District Council.

Householders and occupiers of industrial premises now co-operate well with the Department by giving prompt notice of infestation by rats or mice.

The following Table gives a summary of the work done during the year under review: -

Number of Inspections of Fremises	Number of Premises found to be Infested.	Number of Treatments carried out.	Fatimated Kill of Rats.	Cumulative total of rats killed since inception of Service
1,801	94	125	544	16,318
			Actual Bodies Found (249)	Actual Bodies Found (4,218)

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

Two sets of premises are registered in accordance with this act.

PET ANIMALS ACT, 1951

Under this Act one Licence was issued during the year. Conditions on the premises of the Firm concerned were quite satisfactory.

DEALERS IN OLD METAL ETC.

In accordance with Section 86 of the Public Health Acts (amendment) Act, 1907, six dealers are registered with the Health Department. In this matter the Department's Officials co-operate with the Police Authority when necessary.

CHIEF SANITARY REQUIREMENTS OF THE DISTRICT

- The building of new houses to serve applicants still on the Council's Waiting List.
- The abolition of sub-standard housing accommodation considered unfit for human habitation, and the provision of new housing for displaced persons.
- The re-conditioning of other properties in the town.
- The conversion to the freshwater system of the remaining pail closets and waste-water closets.
- The provision of a Public Convenience which is centrally situated, and equipped with facilities for washing, etc.

HOUSING CONDITIONS

The general standard of housing accommodation in the Borough is good, but there are several areas of out-worn and out-dated property which call for clearance.

Under a revised Scheme of Clearance drawn up by the Borough Engineer and myself in 1955, and later approved by the Ministry, some 145 houses are to be dealt with under Section 25 and a further 6 under Section 11 of the Housing Act, in the first FIVE YEARS. A further 128 houses are included in a 5-10 YEARS GROUP, giving a total of 279 houses to be cleared during the next 10 years.

It is anticipated that definite action on the first group will be taken fairly early in 1957.

The building of further houses and bungalows on the Littlemoor and Manor Road Sites for the re-housing of persons displaced under our Clearance Programme was being considered at the end of the year.

During 1956, 54 houses on the Littlemoor Road Site and 12 bungalows on the Standen Road Site were completed and no municipal building was in progress at the end of the year.

OVERCROWDING in the Borough area cannot be accurately assessed unless a Survey is undertaken, but it is considered that it is not of a dimension which is regarded as serious.

IMPROVEMENT SCHEMES

Under the Housing Acts, 1949 & 1954, 20 Improvement Schemes brought forward from the previous year were completed satisfactorily and Certificates of Completion issued.

During 1956, 19 new schemes were submitted to the Council. In 16 only of these cases were Grants made, the remaining 3 schemes being considered not suitable. Eight of these approved Schemes were completed and Certificates issued. In the remaining 8 schemes the works were in hand but not completed at the end of the year.

It is a pleasing feature that many of these older properties which are structurally sound, are being brought up to modern standards and will thus provide better living conditions for many years to come at a fraction of the cost of new building

HOUSING STATISTICS

Number	of Houses, Flats and Bungalows erected by Local Authority during the year
Number	of Houses, Flats and Bungalows erected by other persons during the year
Number	of Houses inspected for housing defects 112
Number	of Houses found to be unfit for habitation 49
Number	of other houses found not to be in all respects fit for habitation 12
Number	of houses rendered fit in consequence of informal action by L.A. or Officers 10
Number	f houses demolished or closed during the

year 5

Number of cases of Overcrowding relieved -

3. INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY

The Local Authority is responsible for milk distribution and the supervision of dairymen only, the inspection of farms, cowsheds, etc., being the responsibility of the Ministry of Agriculture, Fisheries and Food.

Three sets of premises in the Borough are registered as Dairies. Routine inspections of these premises proved them to be satisfactorily maintained.

Five Dealers' Licences for the sale of "Tuberculin Tested" Milk and one for the sale of "Pasteurised" Milk were issued during the year.

MEAT AND OTHER FOODS

There are no Private Slaughterhouses in the Borough and all slaughtering is carried out at the Authority's Abattoir. A 100% inspection service of meat carcases is maintained by the Council's Inspectors.

The disposal of condemned meat and offals is under the control of the Local Authority. All such meat is dyed and is sold to a reputable firm of Processors who have given an undertaking as to appropriate ultimate disposal.

The following shows the amount of food condemned and removed from the food supply during the year ended 31st. December, 1956:-

Non-Tubercu	lar	Card	case	Me	at	·	 	• •		534	lbs.
Non-Tubercu	lar	Offe	als.				 		3	,489	lbs.
Tubercular	Card	ase	Meat	t.,			 			,124	lbs.
Tubercular	Offe	ls.					 			. 786	lbs.

Canned	Beef	and	Mat	tto	n				 	340	lbs.
Canned	Ham								 	.14	lbs.
Canned	Fish.								 	2	lbs.
Tomato	Paste								 	7	lbs.
Canned	Fruit	Jui	.ce.						 	6	lbs.
Canned	Milk.	• • • •				•••	•••	•••	 •••	8	lbs.

Under Section 14 of the Food and Drugs Act, 16 premises are registered for the preparation and manufacture of sausages, or potted, pressed, pickled, or preserved meat foods intended for sale. Fifty-three premises are also registered for the sale of Ice Cream.

Seven Hawkers of food and their premises are registered under Section 14 of the Lancashire County Council (General Powers) Act, 1951.

Byelaws made under Section 15 of the Food and Drugs Act, 1938 are in force in the Borough, and copies are supplied to the occupiers of food shops and stalls.

Notices requesting customers not to bring dogs into food shops are still displayed in a large majority of these premises. These notices are generally appreciated by the traders and customers alike.

Routine inspections, and special inspections as called for, are carried out in respect of food shops and stalls, and food preparing premises generally.

The new Food Hygiene Regulations came into operation at the beginning of the year under review. These Regulations lay down requirements in respect of the Cleanliness of Food premises and stalls, etc., and of apparatus and equipment, the hygienic handling of food, the cleanliness of persons engaged in the handling of food, and of their clothing, and the action to be taken where they suffer from, or are carriers of certain infections. The construction, the repair and maintenance of food premises, stalls, vehicles etc., the facilities to be provided, and the temperatures at which certain foods that are particularly liable to transmit disease are to be kept in food premises, are also subjects which are covered by the Regulations.

It will be seen that these Regulations replace and very considerably extend the control of local authorities over food establishments, previously exercised under Section 13 of the Food and Drugs Act, 1938. They apply to a wider range of premises than hitherto, as these provisions must be complied with in relation to all premises where a "food business" is carried on.

The general inspection of premises, and discussions with traders for the implementation of the Regulations, entails a considerable amount of work for the Public Health Staff, but a most pleasing feature so far is that many traders who have been made aware of their obligations through excellent publicity in many of the trade journals etc., have voluntarily approached us as to any necessary improvements in premises or the adoption of better methods in future so as to ensure a higher standard of food handling.

In my last Report, I pointed out that housewives who are the customers of the food shops could do much to help the public health official, and further their own interests, by calling the attention of traders on the spot to any practices which tend to lower the standard which is desired. I am now of the opinion that many housewives have become mich more hygiene conscious and are ready to support the trader on whose premises the higher standards are maintained Moreover, I think that many members of the Public, when visiting cafes and restaurants in these days, are much less diffident about a complaint concerning dirty or cracked crockery or dirty eating utensils, and are demanding a higher standard of service. This concerted effort is all to the good and is an important contribution to the Campaign for Clean food in an endeavour to stem the rise in food infections, particularly in premises where communal feeding is carried on.

e	Cattle excluding Cows.	Cows.	Calves	Sheep and Lambs.	Pigs.
Number killed Number inspected	822 822	39 39	20 20	4,855 4,855	1,174 1,174
All diseases except Tuberculosis and Cysticercosis :-					
Whole carcases condemned.,	Nil	Nil .	2	2	2
Carcases of which some part or organ was condemned	448	27	-	24	23
Percentage of number in- spected affected with disease other than T.B.					
and Cysticerci	56%	69%	10%	0.5%	2%
Tuberculosis only :-					
Whole carcases condemned	Nil	Nil	-	-	Nil
Carcases of which some part or organ was					10
condemned	34 4%	3	-	-	12 1%
Percentage affected	4,70	7%	-	-	7%
Cysticercosis :-	-				
Carcases of which some part of organ was condemned	1	-	-	_	-
Carcases submitted for treatment by refrigeration.	1	-	-	-	-
Generalised & totally condemned	NIL	-	-	-	-

