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THE URBAN DISTRICT OF DISS

*Ref.*

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH AND THE  
PUBLIC HEALTH INSPECTOR FOR THE YEAR 1961



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HEALTH COMMITTEE 1961/62

CHAIRMAN - Councillor A. Wood

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Councillor Miss B.F. Oakes

Councillor A.J. Pipe

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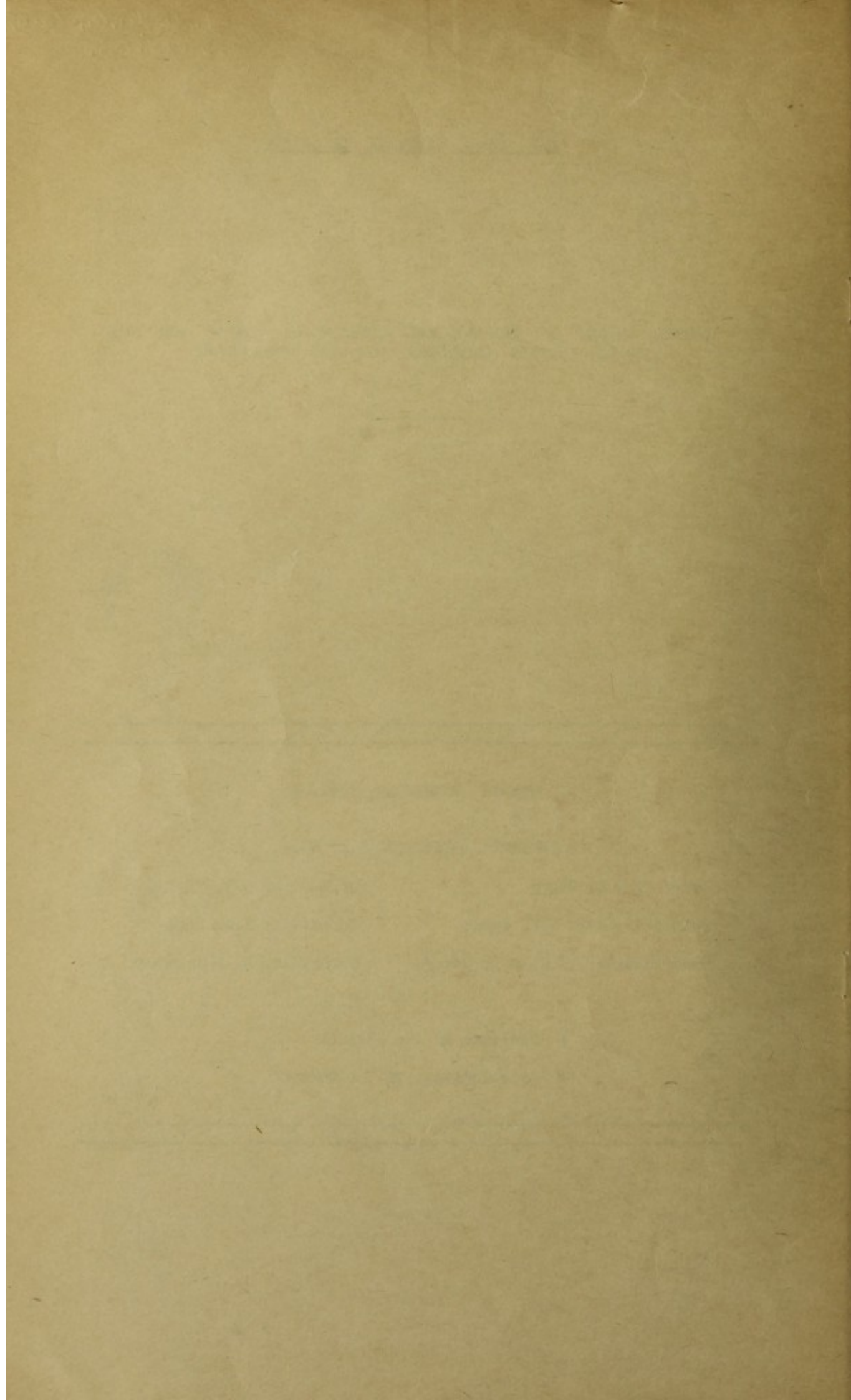
Councillor E. Pursehouse

*+* Chairman of the Council

*ø* Vice-Chairman of the Council

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THE URBAN DISTRICT OF DISS

THE ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1961.

Mr. Chairman, Miss Oakes and Gentlemen,

I have the honour to present my Annual Report for the year 1961.

FAIR DO'S!

The long arm of preventive medicine is concerned with the arrest of many social evils; accidents have a prominent position on the Evils list particularly those arising from ignorance, carelessness, or gross negligence.

Society rejects the placing of intolerable restrictions on the individual or the community in an effort to secure better accident prevention. The basic tenet of the Royal Society for the Prevention of Accidents is that "the most potent cause of accidents is failure of the human element for which Education (through Training and Information) is the main and frequently the only remedy".

Unfortunately there has been a serious failure in education as a remedy for accident prevention. The Society is so concerned with the casualty details of the 1961 fireworks session (in spite of vigorous propaganda) that it has urged the Home Secretary to introduce legislation to prohibit the retail distribution of



fireworks except for organised displays. During the Guy Fawkes celebrations in England there were over 400 hospital admissions and more than 3,000 out-patient treatments for fireworks accidents; cases treated by general practitioners are not recorded but no doubt they were considerable.

Fireworks are just one of the causes of disaster brought about by stupid and irresponsible behaviour; the boy who pops a lighted banger into his pal's pocket may be classed with the leather-jacketed youth who does a "ton" on his motorcycle hoping that a broken bone or two will enhance his prestige. Drunken drivers must here be mentioned and all those who flirt with accident just for "kicks". Naturally enough much sympathy is felt for the victims of these avoidable "accidents". Little thought is given, however, to the high medical cost of such escapades and for which, incidentally, the community must pay.

We need all the hospital beds, nurses and surgeons we can get for those who meet with general misfortune and patiently await the long expected hospital admission ticket; there is no margin for victims of unnecessary "accidents" which by their nature claim priority treatment. A Guy Fawkes burns case may require months of hospital treatment and many hours of attention by a plastic surgeon and his nurses.

Education, we are told, cannot halt the foolish violence which results in personal injuries. The recognised remedy in these circumstances, is to bring offenders before a court of law and impose on a convicted person penalties which may include heavy damages and costs.

But even so justice is not fully satisfied. There is still another account to be settled; the cost, borne by the Health Service, of the medical treatment of the offender's victims and possibly of himself. It is true that under the Road Traffic Act a hospital administration can claim up to a maximum of £50 for medical expenses in cases where damages are awarded in motor accidents on a public highway, but this small sum must contribute little to the hospital expenses of the 85,000 persons seriously injured on our roads in the course of a year. In the eyes of the tax-payer and the hospital administrator it would appear as simple justice if the court awarded an additional sum to cover the full costs of medical treatment when assessing damages in all accident cases.

#### SMALLPOX AND VACCINATION.

More and more air travellers are getting about more and more rapidly, consequently there is an ever increasing hazard from imported disease. This was well illustrated by the outbreak of smallpox which caused much public alarm in England in the Autumn of 1961. The outbreak gave rise to a widespread public demand for vaccination but the policy of the Ministry of Health was to use all resources and energies in vaccination campaigns designed to check spread from positive sources of infection and at the same time provide cover vaccination, in other areas, for potential front-line contacts such as doctors, nurses, public health inspectors and those travelling into infected areas.



Negligible though the risk may be in all forms of immunisations the possibility more or less of serious complications arising from smallpox vaccination cannot be completely overlooked. Such a risk may be less than one in fifty thousand vaccinations and applies for the greater part to adults who are being vaccinated for the first time. The risk, small as it is, is further diminished if vaccination is carried out in infancy.

The conclusion to be drawn is that all fit infants should be vaccinated early in life; should danger from smallpox arise in adult life then a re-vaccination can be undertaken with little discomfort or danger from serious complications. In other words the chief recommendation for routine infant vaccination is that it minimises the hazards of primary vaccination in adult life. Here perhaps is the place to mention that complete protection can only be obtained by periodical re-vaccinations.

How does our infant vaccination rate stand today? The truth is that the national infant vaccination rate is little more than 40% (41% in 1960). The rate for Area 5 is 75%. This figure includes children up to four years of age but the majority of these are vaccinated during the first year of life.

#### ORAL VACCINE FOR THE PREVENTION OF POLIOMYELITIS

"Tens of millions of doses of oral vaccine have been administered in many countries, and the evidence so far suggests that it is one of the best preventive measures that have yet been devised against a serious disease" (Editorial, British Medical Journal).

In the autumn of 1961, epidemic poliomyelitis occurred in Kingston-upon-Hull; there were 84 confirmed cases of which 74 were paralytic. This epidemic appears to have been dramatically arrested by the widespread use of oral vaccine.

This success together with the satisfactory results of the Public Health Laboratory Services trial was largely responsible for the Ministry's decision to adopt the oral (Sabin) vaccine for routine use in the prevention of poliomyelitis.

After entering the body dangerous strains of the poliomyelitis virus settle down and grow in the intestinal tract. Harmless strains taken in oral vaccine prevent such growth; in this way the oral vaccine not only gives general protection to the individual but also eliminates healthy intestinal carriers from the community.

In spite of the somewhat alarming situation caused by epidemic conditions in a number of centres in England in 1961, the overall incidence of the disease was not very dissimilar to that of 1959 (considered at the time to be a "good" year). Figures (England and Wales) for the past



five years are as follows:-

<u>Year</u>	<u>Cases</u>	<u>Deaths</u>
1957	4,481	226
1958	1,992	129
1959	1,002	91
1960	378	46
1961	1,086	69 (uncorrected)

No cases of poliomyelitis were notified in Norfolk (Administrative County), in 1961.

#### MEASLES VACCINE.

During 1961 763,848 cases of measles were notified in England and Wales. Over the years there has been no decline in the incidence of this disease which, bearing in mind its complications, still remains a major threat to the health of children. In the autumn of 1961 the first trials of a British vaccine have brought the abolition of measles within sight. However, there still remains a good deal to be done before the vaccine reaches a standard of perfection which will make it acceptable for general use.

#### HOPE FOR THE SCHOOL CHILD.

Investigations are going on regarding the use of lozenges as a vehicle for giving reinforcing doses of diphtheria toxoid to school children. The results so far justify further study of this method of immunisation.

The key to success lies in the presence in the toxoid lozenges of a substance which has the power of increasing the rate of absorption of fluids through the mucous membrane of the mouth.

#### IODINE - 131.

In October 1961, public health departments throughout the country were, for the first time in history, faced with the problem of taking practical steps to control a radioactive hazard on a national scale.

As a result of fall-out from Russian nuclear tests it was feared that radioactive iodine in cows' milk might reach a level constituting a serious menace to the health of infants under one year of age. Radioactive iodine (iodine - 131) when ingested settles in the thyroid gland; the thyroid gland of newborn infants is relatively large and remains constant in size up to the age of six months. Consequently infants drinking increasing quantities of fresh cows' milk would be exposed to a radiation dose greater than that suffered by older children and adults.

To meet this danger the Ministry of Health arranged to supply stocks of processed milk to local authorities and detailed arrangements were made for distribution, through the welfare milk schemes, to eligible babies. Fortunately the need to put this scheme into practice did not arise.



## SUMMARY OF HEALTH OF DISS DISTRICT DURING 1961

The population of Diss District at mid-year 1961 was estimated at 3,600 and is based on the census population of 3,682 carried out in April of that year. The corrected birth rate (16.4) was lower than that of England and Wales (17.4); the corrected death rate (10.6) was also lower than the death rate for England and Wales (12.0).

The infant mortality rate (17.5) compared favourably with the rate for England and Wales as a whole (21.4).

Of the 149 notified cases of infectious diseases, 140 were recorded as measles. A family outbreak of Some Dysentery (five cases notified) was caused by a visitor who was a healthy carrier. There were no notifications of Scarlet Fever, Whooping Cough, Food Poisoning or Poliomyelitis; there were no cases of Tetanus.

The tables in the latter part of this report provide detailed statistical information concerning the health of the District and are designed, for the most part, to meet the requirements of the Ministry of Health.

### STAFF

Mr. D. Newson, C.R.S.I., S.I.E.J.B., continued duty as Public Health Inspector throughout the year.

### VITAL STATISTICS

(a) The Registrar General estimated the mid-year population of Diss Urban District, in 1961, at 3,600. The Census figure (April 1961) was 3,682. The estimated population in 1960 was 3,630.

#### (b) Births.

There were 57 live births during 1961; 29 boys and 28 girls. The crude birth rate was 15.8 compared with 15.4 in 1960.

#### (c) Deaths.

Deaths numbered 45 compared with 38 in 1960; the crude death rate was, therefore, 12.5 compared with 10.5 in 1960. There were only two deaths of persons under 50 years of age (including one infant death). The greatest number of deaths (34) occurred in the age group 70-89 years.



The principal cause of death was from diseases of the heart and circulation (29); deaths from cancer were 5; there were 3 deaths from bronchitis and one case of suicide; there were no accident deaths.

(d) Infant Mortality.

The infant mortality rate for Diss District (deaths of infants under one year per 1,000 live births) was 17.5. The rate for England and Wales was 21.4 (the lowest on record). There was, in fact, only one infant death, the result of congenital malformation.

COMMUNICABLE DISEASES

(a) One hundred and forty-nine cases of communicable diseases (excluding tuberculosis) were notified by general practitioners during 1961; of these, 140 were notified as measles. Of the remaining notifications, 5 were dysentery, 2 pneumonia, one infective jaundice and one puerperal pyrexia.

(b) Diphtheria.

The district remained free from this disease but the disease has not been completely suppressed throughout the country; there were 49 notifications in England and Wales in 1960 with 5 deaths, but the national diphtheria immunisation rate for children under 15 years of age is less than 50% (1960) whereas the local (Area 5) rate is between 80 and 90%.

(c) Scarlet Fever.

No cases were notified.

(d) Whooping Cough.

No cases were notified. Infant immunisation has led to the suppression of this disease.

(e) Poliomyelitis.

No cases were notified in Diss District; neither were

any notifications received in the whole of the administrative county of Norfolk.

Poliomyelitis vaccination of children continued at a high level and the vaccination rate amongst eligible adults improved. Details of all vaccinations carried out since the scheme was introduced six years ago are shown in Table 20 appended to this Report.

Oral vaccine for the control of epidemic poliomyelitis was used in England for the first time in 1961.

The poliomyelitis immunisation rate of Diss District now stands approximately as follows:- school children 95%; eligible adults 70%.

(f) Dysentery.

There were five cases - all of which occurred in one household. Fortunately the disease was detected early and stringent precautions prevented any spread of the infection. The likely cause was a visit to the household of a healthy carrier.

(g) Tuberculosis.

"It is well to recall that in 1921 over eleven hundred children under five years of age died of abdominal tuberculosis, almost certainly contracted by drinking infected cow's milk in the raw state. Now the number of deaths from tuberculosis amongst school children in this age group is negligible owing to the gradual elimination of tuberculosis from dairy herds and the growing practice of pasteurizing milk before it is marketed" (Annual Report of the Chief Medical Officer, Ministry of Health, 1960).

In England and Wales the steady decline in deaths from all forms of tuberculosis continued in 1960; deaths were eleven per cent less than in 1959. New notifications also show a steady fall year by year.

In Diss District there was one new notification in 1961. Apart from the investigation of new cases and their contacts general measures include mass radiography and B.C.G. vaccination of senior school children.

(h) Cancer.

The number of cancer deaths in Diss District was 5 compared with 7 in 1960, or 11 per cent of the total deaths. Of the total cancer deaths, two were caused by lung cancer (all males). Table 14 shows the District record for all cancer deaths and lung cancer deaths during the past five



years. From this table it may be seen that there is no serious increase in lung cancer deaths in Diss District.

### HOUSING

The first phase of the Mere Manor housing estate was completed in 1961. Action was taken to extend the scheme and contracts obtained for thirty-nine additional dwellings i.e. twenty-seven three-bedroom houses and twelve two-bedroom maisonettes. The number of new private dwellings completed during the year was sixteen.

### WATER SUPPLIES

With improving social conditions the public demand for purewater in good quantity steadily increases. This increasing demand was apparent in Diss District during 1961, consequently extreme care was necessary in order to avoid serious shortage. However your Council took action to improve the water supply to the town by constructing a new bore which was in production before the end of the year; action was taken also for the construction of a new water tower.

Bacteriological tests of your Council's water supply (including water from the new bore) carried out during the year proved entirely satisfactory; the standard of purity of the water used in your Council's swimming pool continued to prove satisfactory judging by results of bacteriological examinations.

### SEWAGE AND REFUSE DISPOSAL

"Your Council's problem of the future system of refuse disposal is serious and urgent; the statements made by your Public Health Inspector in his appended Report deserve careful attention" (My Annual Report to your Council, 1960). Since the foregoing was written your Public Health Inspector has submitted a report on the various methods of dealing with this problem. The position is now more serious and more urgent. The simplest and least expensive method is the acquisition of suitable land on which excavations can be made for the reception of refuse.

### CONCLUSION

In conclusion I should like to thank the Chairman of the Council and the Chairman and members of the Public Health Committee for their continued support and kindness. I wish also to thank the Clerk of the Council, the Public Health

Inspector and the Council staff for the generous help they have given me throughout the year. Finally I am very grateful to the Senior Clerk and staff in the Norwich office for their loyalty and efficiency at all times and for the considerable work carried out in preparation of Annual Reports.

I have the honour to be,

Your obedient servant,

W.E. HOLMES

Local Health Office,  
Aspland Road,  
Norwich.





Table 1. GENERAL STATISTICS

Area (in acres) (including water)	3,628
Estimated Resident Population	3,600
Rateable Value	£47,576
Sum produced by a Penny rate	£196

Table 2. LIVE BIRTHS

	Males	Females	Total
Legitimate	28	26	54
Illegitimate	1	2	3
Totals	29	28	57

Live Birth Rate per 1,000 of estimated Resident Population  
= 15.8

Table 3. STILL BIRTHS

	Males	Females	Total
Legitimate	1	1	2
Illegitimate	-	-	-
Totals	1	1	2

Still Birth Rate per 1,000 total births = 33.9

Table 4. TOTAL BIRTHS

	Males	Females	Total
Live	29	28	57
Still	1	1	2
Totals	30	29	59

Table 5. INFANT DEATHS

(a) Infant Mortality (Deaths of Infants under 1 year)

	Males	Females	Total
Legitimate	-	1	1
Illegitimate	-	-	-
Totals	-	1	1

Infant Mortality Rates:

Total = 17.5 (per 1,000 live births)  
 Legitimate = 18.9 (per 1,000 legitimate births)  
 Illegitimate = Nil (per 1,000 illegitimate births)



(b) Neo-Natal Mortality (Deaths of Infants during first four weeks)

	Males	Females	Total
Legitimate	-	1	1
Illegitimate	-	-	-

Neo-Natal Mortality Rate (per 1,000 live births) = 17.5

(c) Early Neo-Natal Mortality (Deaths of infants under 1 week)

	Males	Females	Total
Legitimate	-	1	1
Illegitimate	-	-	-

Early Neo-Natal Mortality Rate (per 1,000 live births)  
= 17.5

(d) Perinatal Mortality (Still births and deaths under 1 week)

	Males	Females	Total
Legitimate	1	2	3
Illegitimate	-	-	-

Perinatal Mortality Rate (per 1,000 total births) = 50.8

Table 6. ILLEGITIMATE BIRTHS

Males - 1. Females - 2. Total - 3 = 5.3 per  
cent of total live births

Table 7. MATERNAL DEATHS (including abortion) = Nil

Maternal Mortality Rate (per 1,000 total births) = Nil

Table 8. DEATHS (All ages)

Males	Females	Total
27	18	45

Crude Death Rate (per 1,000 of estimated Resident Population)  
= 12.5

Table 9. CAUSE OF DEATH OF INFANTS UNDER ONE YEAR

Cause	Males	Females	Total
Congenital malformations	-	1	1
Totals	-	1	1



Table 10. NOTIFICATIONS OF DEATHS RECEIVED DURING THE YEAR  
(According to Age Groups)

	Males	Females	Total
Under 1 year	-	1	1
1 and under 5	-	-	-
5 " " 10	-	-	-
10 " " 20	-	-	-
20 " " 30	-	-	-
30 " " 40	-	-	-
40 " " 50	1	-	1
50 " " 60	5	-	5
60 " " 70	3	-	3
70 " " 80	11	6	17
80 " " 90	7	10	17
90 " " 100	-	1	1
100 and over	-	-	-
Totals	27	18	45

Table 11. CAUSE OF TOTAL DEATHS (Registrar - General)

Cause	Males	Females	Total
1. Tuberculosis, respiratory.	-	-	-
2. Tuberculosis, other.	-	-	-
3. Syphilitic disease.	-	-	-
4. Diphtheria.	-	-	-
5. Whooping Cough.	-	-	-
6. Meningococcal infection.	-	-	-
7. Acute poliomyelitis.	-	-	-
8. Measles.	-	-	-
9. Other infective and parasitic diseases.	1	-	1
10. Malignant neoplasm, stomach.	1	-	1
11. Malignant neoplasm, lung, bronchus.	2	-	2
12. Malignant neoplasm, breast.	-	-	-
13. Malignant neoplasm, uterus.	-	-	-
14. Other malignant and lymphatic neoplasms.	-	2	2
15. Leukemia, Aleukemia.	-	-	-
16. Diabetes.	-	-	-
17. Vascular lesions of nervous system.	3	7	10
18. Coronary disease, angina.	9	3	12
19. Hypertension with heart disease.	-	-	-
20. Other heart diseases.	2	4	6
21. Other circulatory diseases.	1	-	1
22. Influenza.	1	-	1
23. Pneumonia.	-	-	-
24. Bronchitis.	3	-	3
25. Other diseases of respiratory system.	1	-	1
26. Ulcer of stomach and duodenum.	1	-	1
27. Gastritis, enteritis and diarrhoea.	-	-	-
28. Nephritis and nephrosis.	-	-	-
29. Hyperplasia of prostate.	-	-	-
30. Pregnancy, childbirth and abortion.	-	-	-
31. Congenital malformations.	-	1	1
32. Other defined and ill-defined diseases.	2	-	2
33. Motor vehicle accidents.	-	-	-
34. All other accidents.	-	-	-
35. Suicide.	-	1	1
36. Homicide and operations of War.	-	-	-
Totals	27	18	45



Table 12. SUMMARY OF BIRTH AND DEATH RATES

	1955	1956	1957	1958	1959	1960	1961
<u>Live Births (per 1,000 pop)</u>	(64)	(53)	(64)	(68)	(69)	(56)	(57)
Diss U.D.	17.8	14.8	17.8	18.7	19.1	15.4	15.8
Area 5.	14.3	14.2	13.3	14.9	13.7	14.1	14.2
England & Wales (provisional)	15.0	15.7	16.1	16.4	16.5	17.1	17.4
<u>Still Births (per 1,000 total births)</u>	(Nil)	(Nil)	(1)	(Nil)	(1)	(2)	(2)
Diss U.D.	0.0	0.0	15.4	0.0	14.3	34.5	33.9
Area 5.	20.8	23.7	22.0	9.9	19.9	20.7	8.9
England & Wales (provisional)	23.1	23.0	22.4	21.6	20.7	19.7	18.7
<u>Crude Deaths (per 1,000 pop)</u>	(34)	(44)	(42)	(45)	(48)	(38)	(45)
Diss U.D.	9.5	12.3	11.7	12.5	13.3	10.5	12.5
Area 5.	11.8	11.4	11.1	12.1	12.4	11.8	12.4
England & Wales (provisional)	11.7	11.7	11.5	11.7	11.6	11.5	12.0
<u>Infant Mortality (per 1,000 live births)</u>	(Nil)	(1)	(Nil)	(2)	(1)	(3)	(1)
Diss U.D.	0.0	18.9	0.0	29.4	14.5	53.6	17.5
Area 5.	19.0	20.8	15.0	8.3	25.4	14.1	9.0
England & Wales (provisional)	24.9	23.8	23.0	22.5	22.0	21.7	21.4

NOTE: 1. Figures in brackets are the actual numbers for Diss U.D.

2. Area 5 comprises Depwade &amp; Loddon R.Ds. and Diss &amp; Wymondham U.Ds.

Table 13. DEATHS DUE TO CANCER - Diss U.D.

	1955	1956	1957	1958	1959	1960	1961
Number of deaths.	5	9	10	5	19	7	5
Percentage of total deaths.	14	20	23	11	39	18	11

Table 14. CANCER DEATHS DURING LAST FIVE YEARS - Diss U.D.

Year	Male			Female		
	Total Deaths	Total Cancer Deaths	Cancer of Lung	Total Deaths	Total Cancer Deaths	Cancer of Lung
1961	27	3	2	18	2	-
1960	18	3	1	20	4	-
1959	30	11	5	18	8	-
1958	25	2	1	20	3	-
1957	18	5	2	24	5	-
Totals	118	24	11	100	22	-



Table 15. NOTIFICATION OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) ACCORDING TO AGE GROUPS - Diss U.D.

	Under 1	1 - 4 yrs.	5-14 yrs.	15-24 yrs.	Over 25	Total
Measles	3	60	76	-	1	140
Dysentery (Sonne)	-	2	1	1	1	5
Pneumonia	-	-	-	-	2	2
Puerperal Pyrexia	-	-	-	-	1	1
Jaundice	-	-	1	-	-	1
Totals	3	62	78	1	5	149

Table 16. INCIDENCE OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) DURING LAST FIVE YEARS - Diss U.D.

	1957	1958	1959	1960	1961
Scarlet Fever	2	-	1	-	-
Measles	141	2	5	1	140
Whooping Cough	22	-	-	-	-
Pneumonia	-	-	2	-	2
Erysipelas	-	1	-	-	-
Dysentery (Sonne)	1	-	-	-	5
Food Poisoning	-	-	-	-	-
Infective Jaundice	-	-	2	-	1
Puerperal Pyrexia	-	-	1	-	1
Totals	166	3	11	1	149

Table 17. DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS - Diss U.D.

		1957	1958	1959	1960	1961
Pulmonary	Male	-	-	-	1	-
	Female	-	-	-	-	1
Non-Pulmonary	Male	-	1	-	-	-
	Female	-	-	-	-	-
Diss U.D.	Totals	-	1	-	1	1
Area 5.	Totals	18	8	7	13	12



Table 18. DIPHTHERIA IMMUNISATION.

The following is the number of primary immunisations and booster injections given during the last five years in respect of Area 5.

	Primary Injections			Booster Injections		Totals
	Under 1	Total Under 5	Age 5-14	Under 5	Age 5-14	
1961	295	498	157	89	766	1,510
1960	357	472	314	27	1,233	2,046
1959	302	466	23	20	74	583
1958	283	401	60	28	416	905
1957	347	447	76	54	773	1,350

Table 19. VACCINATION AGAINST SMALLPOX

Vaccination of children (under five years of age) during the last five years resident in the District and Area 5, are shown in the following table.

	Diss U.D.					Area 5.				
	1957	1958	1959	1960	1961	1957	1958	1959	1960	1961
Number of live births registered.	64	68	62	56	57	533	599	551	567	556
Number of vaccinations recorded (0-4 years)	43	31	63	47	62	410	445	472	508	458
Percentage vaccinated.	67	46	100	84	100	77	74	86	89	82

Table 20. VACCINATION AGAINST POLIOMYELITIS

The following is the number of primary immunisations and booster injections given in Area 5 from 1956 when this scheme commenced.

	Primary			Booster (3rd)			Booster (4th)
	Age 0-4	Age 5-14	Adults	Age 0-4	Age 5-14	Adults	Age 5-11
1961	601	535	2,068	427	228	824	3,017
1960	397	227	853	660	566	1,636	-
1959	593	677	2,220	1377	3,261	864	-
1958	1,648	3,159	154	32	1,284	2	-
1957	197	1,115	-	-	-	-	-
1956	40	121	-	-	-	-	-

Table 21. IMMUNISATION AGAINST WHOOPING COUGH

The following is the number of whooping cough primary immunisations recorded in Area 5. Although whooping cough was included in the County Council's immunisation scheme in May 1953, notification was on a voluntary basis until August 1957, when the combined vaccine (diphtheria/whooping cough) was officially approved.

Year	Under 1	Age 1-4	Age 5-14	Totals
1961	291	300	26	617
1960	368	100	124	592
1959	318	227	16	561
1958	265	106	8	379
1957	329	89	7	425

Table 22. IMMUNISATION AGAINST TETANUS

The following is the number of tetanus immunisations recorded in Area 5 during the last three years. Immunisation against this disease was included in the County Council's Immunisation scheme in September 1958.

Year	Primary				Booster		
	Age Under 1	Age 1-4	Age 5-14	Age 15+	Age 1-4	Age 5-14	Age 15+
1961	282	329	1,651	580	73	80	63
1960	374	198	1,823	691	22	56	87
1959	307	258	218	144	11	27	39





THE ANNUAL REPORT OF THE PUBLIC HEALTH  
INSPECTOR FOR THE YEAR 1961

Mr. Chairman, Miss Oakes, and Gentlemen,

I submit for your perusal my Annual Report for the year 1961.

I would like to thank the Chairman and Members of the Health Committee for their interest and assistance during the year and to express my appreciation for the assistance given by Dr. W.E. Holmes, Mr. C.R. Williamson and the other members of the Council staff.

D. Newson

Public Health Inspector.



THE ANNUAL REPORT OF THE BOARD OF  
DIRECTORS FOR THE YEAR 1901

W. C. Calkins, President, and Directors

I submit for your review the annual report for the year

1901.

I would like to thank the members and directors of the  
Board of Directors for their interest and assistance during  
the year and to express my appreciation for the work done  
by Mr. W. C. Calkins, Mr. J. A. Williams and the other  
members of the Board of Directors.

J. A. Williams

W. C. Calkins, President

## SEWERAGE, CONSERVANCY AND DRAINAGE.

During the year the new relief sewer from the bottom of Uplands Way through to Victoria Road was completed and has helped to relieve existing sewers which tended at times to be surcharged. The new sewer appears to have overcome the flooding which on occasions occurred in Church Street during heavy rain.

The Walcot and Heywood areas of the district, together with other smaller areas, still have no sewers available. These areas cannot be sewered without the expenditure of a considerable sum of money. The number of properties in such areas at present is hardly sufficient to warrant such expenditure and it is unlikely such works would be undertaken until such time as large scale development is contemplated. It is becoming increasingly difficult to find vacant sites to develop with sewers available and yet there would seem to be large areas of land in the eastern part of the town very suitable for such purpose.

It has again been necessary during the year to approve plans for some residential development with septic tank drainage although this is not entirely desirable except, perhaps, in single, isolated cases.

No major works of repair had to be carried out on any of the existing sewers during the year.

The sewage disposal works have continued to function satisfactorily during the year although extra industry has added a not inconsiderable load to the works. Your Surveyor has had difficulty all the year with the disposal of sludge from the sewage beds. Even though this sludge is a fairly useful substance for enriching the land, few local farmers seem inclined to take advantage of it and disposal has been quite a problem.

All new drainage is inspected and tested and builders generally comply with the requirements of notifying when such works are being carried out.

During the year a further twelve houses which had pail closets have been connected to the sewer or had septic tank drainage installed and a further nine houses should be so dealt with in the coming months. The number of properties which still have pail closets and which are worth connecting to existing sewers is now very small - probably not more than 20-25.

The emptying of pail closets, cesspools and septic tanks has continued under contract quite satisfactorily.

## WATER SUPPLIES.

It is inevitable that with the coming to the town of more industry that considerably more water should be required. New houses and the improvement of older houses (hot water systems, flush toilets and baths) mean more water being required by the domestic consumer.



It is, therefore, not altogether surprising that during 1961 the greatest possible economies had to be exercised in the use of water. In the late spring circulars had to be sent to all consumers urging the greatest possible economy in the use of water and later a ban had to be imposed on the use of private hoses for an indefinite period.

Whilst demand has exceeded rate of supply, your Council are aware of the situation and are taking active steps to remedy this rather serious situation. Work commenced in May on the sinking of the new 18" borehole and was completed in late October. Water from this bore had hurriedly to be put into supply when one of the existing pumps failed. Fortunately the water from this bore was found to be of good bacterial quality so that no extra treatment was necessary.

During the year your Council agreed to go ahead with the erection of a new water tower of 200,000 gallons capacity and were also considering possible ways of improving the distribution system in the town.

During the year the Depwade Rural District Council has taken approximately 40% of all the water from the Diss Waterworks. It is to be hoped that the further development of their Rushall works will ultimately mean their requiring less from the Diss source.

The quality of the water continues to be very satisfactory as the analysts' report set out below shows.

#### CERTIFICATE OF ANALYSIS OF WATER

Sample received from Diss U.D.C. and marked Mains Water Supply.

Appearance when received - clear.  
Nature of deposit - nil.

Colour - nil.                      Odour - nil.

Reaction - slightly alkaline.              pH 8.3

Taste - satisfactory.

#### Results of the Chemical Analysis in parts per million.

Ammoniacal nitrogen	0.02	Hardness as $\text{CaCO}_3$	
Albuminoid nitrogen	0.02	Total	170
Nitrate nitrogen	0.5	Carbonate (temporary)	130
Nitrite nitrogen	Nil	Non - carbonate (permanent)	40
Chlorine as chlorides	58	Alkalinity as $\text{CaCO}_3$	130
Oxygen absorbed (4 hrs. $27^\circ\text{C}$ )	Nil	Free carbon dioxide	Nil
		Total solids (at $180^\circ\text{C}$ )	505
		Iron (total)	0.05
		Metals in solution	absent

## OPINION

The organic quality of this water is very good and the analysis as a whole shows no sign of pollution. The total hardness is approximately 12° Clark, all but 3° of which is temporary. The reaction of the water is alkaline and it would not be expected to have any corrosive action on metals. In our opinion, this water is very suitable for use as a public supply.

for Lincoln, Sutton and Wood.

(signed) Eric C. Wood.

Samples of water submitted to the Public Health Laboratory during the year for bacteriological examination have also been very satisfactory.

## REFUSE COLLECTION AND DISPOSAL.

The weekly collection of refuse was maintained throughout the year except in the more remote rural parts of the district where either a fortnightly or monthly collection was made.

The volume of refuse to be collected has again slightly increased and, with more new houses becoming available during 1962, will increase still further. If the weekly collection service is to be maintained consideration will soon have to be given to the provision of additional labour. At present there is very little time available for proper tip maintenance - refuse cannot be regularly covered, it is difficult to keep decent access to the tip, and even difficult to find time to carry out regular spraying with insecticide to keep down flies etc.

The remarks which I made in last year's Annual Report with regard to the disposal of refuse apply even more forcefully. During the year tipping was carried out at three different sites - two of which were not ideally situated whilst the third was outside your area and had to be shared with Depwade Rural District Council.

Mechanical plant for the treatment of refuse is very expensive to install and entails additional labour charges to operate. With tentative consideration being given to possible expansion of the town in the coming years, it might be unwise to invest a considerable sum of money in treatment plant which might eventually be too small for its purpose. I feel that the policy for the next few years should be to continue to use tipping as a means of disposal of refuse and to acquire a suitable site to excavate for such use.

## HOUSING.

### (a) New Housing Accommodation.

During the year the Council approved a scheme for the



extension of the Skelton Road housing estate. The existing road has been extended through to Frenze Road, providing a useful through road and opening up more land for the provision of much needed housing accommodation. Plans were approved by the Council for the next stage of the development of this land by the building of 39 dwellings in blocks of houses and maisonettes, and work on these commenced before the end of the year.

A further twelve houses or bungalows were built privately in the town and a further five units of living accommodation made available by conversion of existing properties. This brings the total number of separate units of living accommodation to 1,374 (including flats over shops, etc.). Of this number 365 are Council owned houses, bungalows and flats.

During the year a further 38 applications were received for Council housing accommodation, whilst it was only possible to rehouse 8 families into Council accommodation.

(b) Unfit properties.

In view of the fact that no new Council housing accommodation was to become available during the year, it has been necessary to go slow in the dealing with unfit properties. As there were still several families awaiting rehousing from properties subject to Closing or Demolition Orders it was, in my opinion, rather unwise to formally deal with unfit properties too far in advance of being able to rehouse the occupants of such properties. Two properties were made subject to Closing Orders during the year and another four had demolition orders placed on them.

With only a small number of properties becoming available for re-letting, it was only possible to rehouse 2 families (total of 5 persons) from properties already dealt with as unfit. Another 2 families (total of 14 persons) from unfit properties obtained accommodation outside the U.D.C. area.

(c) Improvement Grants.

During the year a further 15 applications were approved for Standard Improvement Grants bringing the total number of such grants approved to 49. Twenty-one properties approved for grants had the works completed during the year and payments of £2,163.3.9. were made. At the end of the year the number of applications approved but not yet completed was 7.

Of the grants so far approved, 25 are in respect of owner/occupied properties and 21 for tenanted houses.

(d) Rent Act, 1957.

One application was received for the issue of a Certificate of Disrepair. In this case the owners gave a written undertaking to carry out the necessary repairs and the works were satisfactorily completed.



## FOOD HYGIENE

Periodic routine visits were made during the year to all types of food premises. Such premises generally are kept in satisfactory condition although certain of the older premises are in need of repairs and improvements. Certain improvements have in some cases been carried out during the year and in one case this involved quite extensive works being done. It is anticipated that other premises will be improved during the coming year following discussions with owners of food shops.

My remarks last year about the display and handling of food seemed to create certain discussion and comment. The press helped quite considerably in this but it might have been more interesting had they also obtained the views of the shopping public as well as those of the shop keepers. There has, I feel, been some improvement in the display and handling of open food although it could still be further improved - not that I am suggesting matters are any worse in Diss than elsewhere.

## SECTION 16, FOOD AND DRUGS ACT, 1955.

24 retailers and 1 manufacturer of ice cream have their premises registered as suitable for the storage and sale of ice cream. A further 12 premises are registered for the manufacture and sale of preserved foods.

## MEAT INSPECTION

The total number of animals slaughtered at the Chapel Street slaughterhouse is seen from the comparative table for the last three years.

Year	Cattle	Pigs	Sheep	Calves	Total
1961	917	937	351	2	2207
1960	725	862	378	5	1970
1959	698	869	235	2	1804

Meat and offal condemned has amounted to 9 cwts. 2 qtrs. 15 lbs.

Although the total amount of meat and offal condemned has increased by 50% on last year, it is still a negligible amount when related to the number of animals slaughtered. The butchers who use the Chapel Street slaughterhouse all buy top quality animals and no "casual ties" are dealt with apart from the occasional animal which may be injured at the sale yard.

There has again been no T.B. in cattle during the year and only a small number of pigs have been found to be infected and then only slightly. One case of cysticercus bovis was found during the year and the affected steer was put into cold store for 21 days. The meat and offal which was rejected as unfit was



condemned chiefly because of parasitic infections, pneumonia, actinomycosis, extensive bruising and injuries, etc.

SLAUGHTERHOUSE (HYGIENE) REGULATIONS AND SLAUGHTER OF ANIMALS  
(PREVENTION OF CRUELTY) REGULATIONS, 1958.

The Council's report on the Chapel Street Slaughterhouse was approved by the Minister of Agriculture, Fisheries and Food with one slight amendment. The date fixed for the coming into force of the regulations in the Urban District Council area was the 1st January, 1962.

Several discussions were held with the owner and his builder and a scheme approved for the reconstruction of the premises. This entailed extensive works being carried out and the expenditure of a considerable sum of money. Due to delays in the obtaining of necessary equipment, work was not commenced until the end of the year but the premises were kept closed until all the necessary improvements and repairs had been completed.

RODENT CONTROL

In common with many other areas, the number of complaints of rat infestations was higher during the last year. Eighty premises were found to be infested although only in two cases was the infestation of a really serious nature. In two cases it was necessary to carry out a survey of, and treatment at, a whole block of premises.

SWIMMING BATH

Your Council own the "Blue Wave" swimming pool and during the 1961 season it was fairly well patronised in spite of rather uncertain weather. Throughout the season the water was kept in a satisfactorily clean condition and regular samples were sent for bacteriological examination.

FACTORIES ACT, 1957.

Forty-five visits were made to factory premises in the district and one written informal notice was served requiring the provision of additional sanitary accommodation.

PUBLIC HEALTH ACT, 1936.

SECTION 75 - PROVISION OF DUSTBINS.

During the year the Council's hire scheme for dustbins has operated smoothly and continues to be quite popular with the ratepayers. Thirty-two complaints were received of the lack of, or the defective condition of, dustbins and in all cases new bins were provided. Where bins have been renewed, it is found that the average life of the bin has been in the region of 9 years.

SECTION 83 - FILTHY OR VERMINOUS PREMISES.

One house was disinfested during the year, the property concerned being occupied by an elderly person living alone. The person concerned was persuaded to go into an old persons' home but only remained there a month and then discharged himself back to very sub-standard living conditions and remains somewhat of a problem. One other case which was quite a problem last year was improved with the help of regular assistance from the Norfolk County Council Home Help Service.

SECTION 92 - NUISANCES.

Sixty-three complaints were received during the year and fifty-two of them were found to be justified. In all cases it has been possible to get these nuisances abated without having to resort to the service of legal notices, although great difficulty was experienced in getting one particularly obnoxious nuisance abated.

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960.

Six applications were received for the stationing of caravans and licences were issued subject to the conditions laid down by the Council. One such licence was never made use of, and in another case the licence was only required as a temporary measure for a period not exceeding six months. Satisfactory conditions were maintained at all the licensed sites. There was again some trouble with caravans parking on land on Fair Green. Unfortunately these vans are often used by the type of person who is not too particular as to



how the site is left when he leaves and on two occasions last year certain difficulties were encountered with rubbish being left on the Green and also being improperly tipped on the Council dump.

PREScribed PARTICULARS REQUIRED BY  
SECTION 128 (3) FACTORIES ACT, 1937.

Premises	Number on Register	Number of Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories in which Sects. 1,2,3,4 and 6 are to be enforced by Local Authority	8	5	Nil	Nil
(ii) Factories not included in (i) in which Sect. 7 is enforced by the Local Authority	52	40	1	Nil
(iii) Other premises in which Sect. 7 is enforced by the Local Authority	3	1	Nil	Nil

SUMMARY OF VISITS MADE BY THE PUBLIC HEALTH INSPECTOR

(A) GENERAL

Complaints investigated.....	63
Visits re nuisances.....	122
Visits re insanitary conditions.....	30
Ditches, watercourses, etc.....	40
Accumulations of rubbish, etc.....	5
Swimming Pool.....	7
Water Supplies.....	35
Factories.....	45
Public Conveniences.....	6
Smoke nuisances.....	10
Wasp nests destroyed.....	17
Game Licences.....	2
Pet Animals Act Licences.....	1
Petroleum Regulations.....	8
Shops.....	11
Rodent Control.....	161
Miscellaneous.....	30

(B) HOUSING

Visit under the Housing Acts.....	83
Housing Survey.....	165
Rent Act.....	8
Improvement Grants.....	167
Overcrowding.....	2
Caravans.....	29
Visits under Public Health Acts.....	76
Council Houses - change of tenancy.....	18
Council Houses - disrepairs etc.....	941

(C) INFECTIOUS DISEASES

Investigations.....	6
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(D) VISITS TO FOOD PREMISES

Bakehouses.....	12
Grocers.....	17
Fish Shops.....	8
Ice cream manufacturers.....	6
Food manufacturing premises.....	12
Butchers shops.....	16
Milk shops.....	3
Cafes and restaurants.....	18
Market stalls.....	9
Visits re unsound food.....	25

(E) MEAT INSPECTION

Visits to Slaughterhouse.....	341
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(F) DRAINAGE AND CONSERVANCY

Drains inspected and tested.....	218
Obstructed drains cleared.....	41
Drains found defective.....	13
Septic tanks and cesspools.....	19
Visits re pail closets.....	13

(G) REFUSE COLLECTION

Visits re collection and disposal.....	129
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WORKS OF REPAIR AND IMPROVEMENT CARRIED  
OUT FOLLOWING INFORMAL ACTION BY HEALTH  
INSPECTOR

Drains renewed or repaired.....	43
New sinks provided.....	20
Properties connected to sewer.....	8
New septic tanks installed.....	3
New W.C. pans provided.....	18
New flushing cisterns provided.....	14
New baths put in.....	15
New wash basins put in.....	26
New kitchens built.....	10
New bathrooms formed.....	14
Hot water systems provided.....	21
Wall plaster repaired.....	26
Ceilings repaired or renewed.....	17
Floors repaired or renewed.....	27
Doors repaired or renewed.....	15
New windows put in.....	41
New fireplaces put in.....	11
Roofs repaired.....	21
Chimney stacks repaired.....	4
External walls repaired.....	23
Stairs repaired or renewed.....	4
New food stores provided.....	8
Eaves, gutters and rain water pipes repaired or renewed.....	2

