Contributors

Dunstable (England). Borough Council.

Publication/Creation

1970

Persistent URL

https://wellcomecollection.org/works/a65aaw3v

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection 183 Euston Road London NW1 2BE UK T +44 (0)20 7611 8722 E library@wellcomecollection.org https://wellcomecollection.org

BOROUGH OF DUNSTABLE

les untilications in no

OF THE

ANNUAL REPORT

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1970

Medical Officer of Health

D.S.JOSEPHS, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

8

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

https://archive.org/details/b29172780

His Worship the Mayor, Aldermen and Councillors of the Borough of Dunstable

Ladies and Gentlemen;

I have the honour to submit my Annual Report on the health and sanitary circumstances of the Borough during 1970, a period in which my predecessor, Dr.H.A.A.Pargeter, held office. I am certain that the Members will join with me in thanking Dr.Pargeter for his long service to Dunstble and I must also thank him for his help in introducing me to my new duties.

During 1970 there was no major outbreak of infectious disease, but it should be noted that measles notifications do not yet show any decline despite the ready availability of vaccine. It is to be hoped that 1971 will mark a turning point with regard to measles, the complications of which not infrequently cause prolonged disability and can even kill an ailing child.

The "smoking diseases" now pose the greatest challenge to preventive medicine in developed countries and an article on this subject appears in the report.

Once again the stillbirth and infant mortality rates for the Borough stand up well to comparison with the rest of Bedfordshire and with the figures for England and Wales.

I am grateful to Members of the Council for the consideration they have shown to me and particularly to Mr.H.Stew, Dr.M.C.Macleod and Dr.E.E.Henderson for all their assistance and advice.

I am,

Your obedient servant,

D.S.Josephs Medical Officer of Health

STATISTICS OF THE AREA

Area (in acres) census 1961	2,092
Population:	
Census for 1961	25,645
Registrar General's estimate of home population mid-year 1970	30,000

VITAL STATISTICS

	Live Births			
		Male	Female	Total
Legitimate Illegitimate		349 19	287 16	636 <u>35</u>
	Totals	368	303	671
Crude Birth Rate	22.4 per 1,000	home po	pulation	1

Adjusted Birth Rate 19.3 " " " " " (The comparability factor for the district being .86)

As compared with Adjusted Rate for Bedfordshire 17.7 per 1,000 home population Rate for England and Wales 16.0 " " " " "

and the second data and	Still Births			
		Male	Female	Total
Legitimate		1	2	3
Illegitimate			1	_1
an debroited	Totals	_1	3	4

Still Birth Rate 6 per 1,000 total (live and still births)

As compared with Rate for Bedfordshire 8.7 " " Rate for England and Wales 13 " " "

Dea		Male	Female	Total
Deaths in the District		56	62	118
Transferred into the District		84	68	152
Transferred from the District		4	8	_12
Tot	als	136	122	258

Crude Death Rate 8.6 per 1,000 home population Adjusted Death Rate 11.5 " " " " (The comparability factor for the District being 1.34)

As compared with Adjusted Rate for Bedfordshire 10.2 per 1,000 home population Rate for England and Wales 11.7 " " "

Deaths of Infants under One Year of Age

			Male	Female	Total
Legitimate			3	5	8
Illegitimate			-		
	Totals		3	5	8
Infant Mortality Rate	12 per	1,000	related	live b	irths
As compared with					
Rate for Bedfordshire	15.9	"	"		"
Rate for England and Wales	18	"	"	"	"
	Deaths Con	nnected	d with C	hildbir	th
Maternal Mortality	there was	1 mate	ernal de	ath	

		CAUSES OF	F DEATH	AT D	LFFERENT	NT PERIODS	LODS 0	TA	LFE DUR	DURING 1970	0							1
	Total all	Under 4	5 00	weeks						Age in	years	8						
Cause of Death	ages	weeks	-	year	1-4	5-14	15-2	4	25-34	35-44	F	45-54	-22-	+9-	65-	14	75 & 0	over
	MF	MF	M	F	MF	MF	M	-	M F	MF	W	24	N	(H	W	54	W	<u>F</u>
	1		1	1	1	Е. 1	1	1	- 1	1	1	1	1	1	1	-		1
Malignant neoplasm, oesophagus		i	1	1	1	1	1	1	i i	-	-4	1	1	•	1	1		1
	2 2		1	1	1	1	1	1	•	1	1	1	-	1	1	1		5
	4 3		1	1	1	1	1	1	1		1	1	1	1	2	1	1	2
	17 2		1	1	1	1	1	1	- 1	1	-	1	5	1	6	2	1	1
	- 2	•	1	1	1	•	1	1	1	1	1	1	1	-1	1	1		1
	- 1	-	1	1	1	1	1	1	•	1	1	1	1	1	1	1	1	1
	2 -		1	1	1	1	1	1	1	- 1	1	1	1	1	1	1		1
	1 1		1	1	1	1 -	1	1		1	1	1	1	1	1	1		1
Other malignant neoplasms	7 2		1	1	1	1	1	-	•		1	1	4	1	1	1	1	1
Diabetes mellitus	- 1	1	•	1	1	1	1	1	1		1	1	1	1	1	1	1	1
Multiple sclerosis	- 1	,	•	1	1	1	1	1	1	-	1	1	1	1	1	1		1
Other diseases of nervous system	1 -		,	1	1	1	1	1	•		1	1	1	1	1	1	1	1
Chronicrheumatic heart disease	2 -		1	1	1	1	1	1	1		-	1	-	1	1	1	1	1
Hypertensive disease	1 2			1	1	1	1	1	1	1	1	1	1	1	1	2		1
Ischaemic heart disease	39 25		•	1	1	1	1	1	•	-	5	1	00	1	17	01	8	13
Other forms of heart disease	2 8		1	1	1	1	1	1	•		1	1	1	1	1	2	1	9
Cerebrovascular disease	13 30		1	1	1	1	1	1	1	1	2	1	3	-	2	2	9	22
Other diseases of circulatory system	9 4		1	1	1	1	1	1	1	1	-1	1	1	1	2	5	9	5
Influenza	2 -		1	1	1	1	1	1	•		•	1	i	1	-	1	1	•
Pneumonia	5 14	1	1	1	1	1	1	1	1		1	-		1	3	-1	1	12
Bronchitis and emphysema	10 4	1	1	1	1	1	1	-	•	1	1	-	m	1	3	1	4	5
Asthma	1 -		1	1	1	1	1	1	1		1	1	1	1	1	1	1	1
Other diseases of respiratory system	1 2	1	1	1	1	1	1	1	1		1	•	1	•	1	1	1	1
Peptic ulcer	2 -	1	1	1	1	1	1	1	1	1	1	1	2	1	1	1	1	1
Other diseases of digestive system	1 -		1	1	1	1	1	1	1	1	1	1	-	1	i.	1	1	1
Mephritis and nephrosis	- 1		1	1	1	1	1	1	1		1	1	1	1	1	1	1	1
Other diseases, genito-urinaryssystem	1 1		1	1	1	1	1	1	1		1	1	1	1		1	1	1
Other complications of pregnancy etc.	- 1	,		1	1	1	1	1			1	1	1	1	1	1	1	1
Diseases of musculo-skeletal system	- 1		1	1	1	1	•	1	1	1	1	1	1	1	1	1	1	1
Congenital anomalies	1 1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1
injury,			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
of perinatal	2 2	2 2		1	1	1 1	1	1	1		'	•	1	1	1	1	1	1
	2 -		1	1	1	1	1	1	1		1	1	1	1	1	1	2	1
Motor vehicle accidents	3 3		1	1	1	1	1	2	- 1	1	1	1	-1	1	1	1	1	1
All other accidents	1 4		1	1	1 -	1	1	1	1	1	1	1	ı	-	1	2	1	1
Suicide and self-inflicted injuries	1 1	,	1	1	1	-			-	1	'	-	1	L	1	1		1
Total all causes	136 122	3 4	1	1	+ 1	- 1	1	4	3 1	4 3	11	5	32	4	45	31	35	69
								-										I

- 3

SMOKING AND HEALTH

It is the duty of the Medical Officer of Health to identify preventable illness in his district, particularly that which is responsible for extensive disability and premature death.

- 4 -

Cigarette smoking has become by far the largest single avoidable cause of death in the United Kingdom. It is believed to be responsible for nine out of ten deaths from lung cancer, three out of four deaths from chronic bronchitis and one out of four deaths from coronary artery disease. Smoking probably causes as many as twenty working days to be lost through sickness for every one lost as a result of industrial dispute.

The Chief Medical Officer at the Department of Health and Social Security has recently declared "There is no other agent in our environment which approaches the cigarette in menace to health and life".

Examination of the table of Causes of Death during 1970, reveals that twenty-seven Dunstable residents, aged between twenty-five and sixty-four,died AS a result of lung cancer, coronary artery disease or chronic bronchitips. Thirteen of these young and middle-aged people would probably still be alive were it not for the smoking habit.

Put another way, smoking killed at least 13 out of 63 people who died in Dunstable Borough before reaching retirement age. Road accidents were responsible for only 3 of these deaths.

Smoking plays an important, though smaller part, in the causation of several other diseases and it may well be that the real toll from the habit amounted to as much as a quarter of all premature deaths during 1970.

With relatively small numbers there is always a risk of statistical error, but this is unlikely to be affecting the picture substantially since the 1970 figures do not differ greatly from those for the previous four years.

The Royal College of Physicians, in their recent report "Smoking and Health Now", urge health authorities to consider means of countering this scourge. Public disapproval of a habit that upsets many non-smokers must be promoted. Much depends on action at Central Government and County Council level, but the "Report" suggests two measures that could be taken locally in Dunstable.

"Most children obtain their cigarettes from shops; but one in five of the younger children who smoke get them from vending machines. Further consideration should be given to strengthening and extending the regulations that forbid the selling of cigarettes to children and the abolition of all cigarette vending machines in public places. This would not only make it less easy for children to acquire cigarettes but would also show that the community is determined to discourage young people from starting a dangerous habit."

The question of smoking in public places is controversial but the District Council might wish to consider discouraging smoking in its own premises. A good example by the local authority might be followed by retail stores and other privately owned establishments.

INFECTIOUS DISEASES

(a) Notifications by Age Group

Disease	0-4	5-14	15 and over	Age unknown	Total
Measles	128	68	4 4	2	202
Infective jaundice	1	11	10	ī	23
Scarlet fever	2	8	-	-	10
Whooping cough	3	3	-	9	6
Paratyphoid fever	1	-	2	-	3
Food poisoning	-	1	1	-	2
Dysentery	1	-	-	-	1

(b) Tuberculosis

Tuberculosis in Age Groups

100		New	cases		Deaths				
Age	Pulmo	nary	Non-Pu	lmonary	Pul	monary	Nor	-Pulme	nary
	M	F	M	F	M	F	M		F
Under 1 year	-	-	-	-	-	-	-		-
1 - "5 years	-	-	-	-	-	-	-		-
5 - 15 years	-	-	-	-	-	-	-	1.2	-
15-35 years	-	-	-	-	-	=	-		-
35-65 years	-	-	-	-	-	-	-		-
Over 65 years	1	-	-	1	-	-	-		-
Totals	1.	-	-	1	-	-	-		-

Number on Register at End of Year

	Malee	Female
Pulmonary	21	13
Non-Pulmonary	2	1

MASS RADIOGRAPHY

A mobile x-ray unit, provided by the Mass Radiography Service of the Regional Hospital Board, visits Dunstable on Wednesday afternoons from 2.45 to 3.15 p.m. and during this period patients sent by general practitioners can be x-rayed.

CLEANSING OF VERMINOUS PERSONS

Section 85 of the Public Health Act 1936 refers principally to school children with head lice infestations and these are dealt with by the Health Visitors as a matter of routine.

NATIONAL ASSISTANCE ACT 1948 - Section 47

Section 47 of the National Assistance Act provides for the removal to hospital or Part III accommodation on a Court Order of sick or old people who are unable to look after themselves.

It was not found necessary to use this legislation for the compsulory removal of any persons during the year.

	-		
		and the	
forking 1975. That to but an gerbi			
with alarma nature in eastern			

and a solution of the second solution for a solution of the so

series at at he has that the lite and the sole wat there are dealer of the

the set the version different set of the set

the second of second of the unable of the second states of a Court Order of

to whe hat found medawary to use this legislation for the to