Contributors

East Suffolk (England). County Council.

Publication/Creation

1940

Persistent URL

https://wellcomecollection.org/works/datj8cs3

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

EAST SUFFOLK COUNTY COUNCIL.

reuluss



ANNUAL REPORT

OF THE

County Medical Officer

1940

PUBLIC HEALTH DEPARTMENT, COUNTY HALL, IPSWICH.



EAST SUFFOLK COUNTY COUNCIL.



ANNUAL REPORT

OF THE

County Medical Officer

1940

PUBLIC HEALTH DEPARTMENT, COUNTY HALL, IPSWICH. Digitized by the Internet Archive in 2017 with funding from Wellcome Library

https://archive.org/details/b29186274

ANNUAL REPORT

OF THE COUNTY MEDICAL OFFICER

1940.

CONTENTS.

						6	AGE
STATISTICS AND SOCIAL	L CON	DITIC	ONS O	F TH	E AR	EA	7
GENERAL PROVISION OF	FHEA	LTH	SERVI	CES			10
MATERNITY AND CHILI	D WEI	FARE	5				12
VACCINATION							14
SANITARY CIRCUMSTAN	CES O	F TH	E ARI	EA			14
HOUSING							14
INSPECTION AND SUPER	RVISIO	N OF	FOOL	D			16
SHOPS							16
PREVALENCE OF. AND	CONT	ROL	OVER.	INF	ECTIO	US	
							17
TUBERCULOSIS							17
VENEREAL DISEASES							20
CANCER							22
MENTAL DEFICIENCY							22
WELFARE OF THE BLIN	٩D						23
	GENERAL PROVISION OF MATERNITY AND CHILI VACCINATION SANITARY CIRCUMSTAN HOUSING HOUSING INSPECTION AND SUPEN SHOPS PREVALENCE OF, AND AND OTHER DISEASES TUBERCULOSIS VENEREAL DISEASES CANCER MENTAL DEFICIENCY	GENERAL PROVISION OF HEA MATERNITY AND CHILD WEI VACCINATION SANITARY CIRCUMSTANCES O HOUSING INSPECTION AND SUPERVISIO SHOPS PREVALENCE OF, AND CONT AND OTHER DISEASES TUBERCULOSIS VENEREAL DISEASES CANCER	GENERAL PROVISION OF HEALTH MATERNITY AND CHILD WELFARE VACCINATION SANITARY CIRCUMSTANCES OF TH HOUSING INSPECTION AND SUPERVISION OF SHOPS PREVALENCE OF, AND CONTROL AND OTHER DISEASES TUBERCULOSIS VENEREAL DISEASES CANCER	GENERAL PROVISION OF HEALTH SERVI MATERNITY AND CHILD WELFARE VACCINATION SANITARY CIRCUMSTANCES OF THE ARI HOUSING INSPECTION AND SUPERVISION OF FOOD SHOPS PREVALENCE OF, AND CONTROL OVER, AND OTHER DISEASES TUBERCULOSIS VENEREAL DISEASES CANCER	GENERAL PROVISION OF HEALTH SERVICESMATERNITY AND CHILD WELFAREVACCINATIONNACCINATIONSANITARY CIRCUMSTANCES OF THE AREAHOUSINGINSPECTION AND SUPERVISION OF FOODSHOPSSHOPSMENTAL DEFICIENCYMENTAL DEFICIENCY	GENERAL PROVISION OF HEALTH SERVICESMATERNITY AND CHILD WELFAREVACCINATIONSANITARY CIRCUMSTANCES OF THE AREAHOUSINGINSPECTION AND SUPERVISION OF FOODSHOPSMAD OTHER DISEASESTUBERCULOSISVENEREAL DISEASESCANCERIMENTAL DEFICIENCY	STATISTICS AND SOCIAL CONDITIONS OF THE AREAGENERAL PROVISION OF HEALTH SERVICESMATERNITY AND CHILD WELFAREWACCINATIONSANITARY CIRCUMSTANCES OF THE AREAHOUSINGINSPECTION AND SUPERVISION OF FOODSHOPSMAD OTHER DISEASESTUBERCULOSISWENEREAL DISEASESMAD OTHER DISEASESMAD OTHER DISEASESMAD OTHER DISEASESMAD OTHER DISEASESMENTAL DEFICIENCYMENTAL DEFICIENCY

For Index see page 24

3

TABLES.

NUMBER	P	AGE
I.	BIRTHS	8
II.	ILLEGITIMATE BIRTHS	8
IIIIV.	DEATHS	9
V	DEATHS OF CHILDREN UNDER ONE YEAR	9
VI.	INFANT MORTALITY	9
VII.	HOUSING (RURAL WORKERS ACT)	15
VIII.	INFECTIOUS DISEASES	17
IXXII.	TUBERCULOSIS 17-	-20
XIII. & XIV.	VENEREAL DISEASES 20-	-21
XV.	CANCER	, 22
XVI.	MENTAL DEFICIENCY ACT	22

FUBLIC HEALTH DEPARTMENT,

COUNTY HALL,

IPSWICH.

October, 1941.

To the Chairman and Members of the County Council.

My LORDS, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for 1940; this is restricted, as it was last year, on the instructions of the Ministry of Health.

Much of my time, and the time of the County Sanitary Staff and Clerical Staff has been devoted to Civil Defence duties.

I have the honour to be,

Your obedient Servant,

B. WOOD-WHITE,

County Medical Officer.

THE LATE ALDERMAN WILLIAM WADE.

It is with very great regret that I record the death of Mr. Wade, who has been Chairman of the Public Health Committee since 1927, when he succeeded the late Mr. A. Bernard.

Mr. Wade had a clear understanding and a wide experience of Local Government, for he had devoted a large part of his life to it, and his knowledge of its application to the County of East Suffolk was unsurpassed by anyone. His unswerving purpose was to promote a more extensive and intensive Public Health Service, and to remove from Public Assistance all those functions which could more properly be assumed by other departments.

No Medical Officer of Health had a kinder and more helpful Chairman, and I have sustained a personal loss. During war, death lurks around corners and life becomes cheap, and the passing of a man of full age is accepted and quickly forgotten. Mr. Wade, however, with his good humour, wisdom and jolly appearance, made all men his friends, and the memory of his personality will remain long in the minds of all those of us who knew him.

GENERAL STATISTICS.

Area : 548,607 acres.—1st April, 1934. Population 1940 : 199,500.

(As estimated by the Registrar-General).

Population, Census 1931 : 207,475.

Number of inhabited houses, Census 1931: 52,513.

Number of families or separate occupiers, Census 1931: 53,933.

Rateable Value : £1,026,579 (year commencing 1st April, 1940).

Sum represented by a penny rate : £4,093 (estimated). Year commencing 1st April, 1940.

Natural and Social Conditions of the Area.

Geology, Industry, Commerce. These subjects were considered in the Survey Report for 1930; there has been no alteration requiring comment, and those desiring information are referred to that Report.

	2 1 1	63	
19	÷	υ	

Extracts from Vital Statistics for the Year.

M.	F.	Total.	Birth rate per 1,000 of
1,377 70	1,270 72	2,647 142	estimated population :
48 6	35 3	83 9	Rate per 1,000 total (live and still) births :— 31.93.
1,478	1,346		Crude death rate per 1,000 of estimated popu- lation :
	1,377 70 48 6	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$

Deaths from Puerperal Causes :	No. of Deaths.	Rate per 1,000 total births.
Puerperal Sepsis Other Puerperal Causes	4 5	1.38 1.73
Total	9	3.11

Death Rate of Infants under one year of age :

All Infants per 1,000 live births Legitimate Infants per 1,000 legitimate live births Illegitimate Infants per 1,000 illegitimate live birth	 s	46.16 45.59 56.7
Deaths from Measles (all ages)		
" Whooping Cough (all ages)		
,, Diarrhoea (under 2 years of age)		5
,, Cancer (all ages)		366
Cancer Death Rate per 1,000		1.83
Tuberculosis Death Rate per 1,000		.48

Population.

Year.	Population.
1931	 207,475 Census return.
1939	 a. 205,540, for calculating births.
	b. 209,900, for calculating deaths.
1940	 199,500, for calculating births and deaths.

This year the population is estimated by the Registrar-General to be 199,500. During war the civilian population changes continually and a fall is natural, for men and women enter the Services and are lost to the civil population; as the war industries in the County are few, there is no influx of workers.

Evacuation has made little difference in East Suffolk.

TABLE I.

BIRTHS.

(Still Births are excluded).

		Bir	th Rate per	1,000 Populati	on.
Year.	Total.	Urban.	Rural.	Administra- tive County.	England and Wales
1939 1940	2897 2789	13.8 14.4	14.3 13.7	14.1 14.0	15.0 14.6

The birthrate for the County has been lower than 14.0 on four occasions, the lowest being in 1933.

TABLE II.

ILLEGITIMATE BIRTHS.

(Still Births are excluded).

		Bir	th Rate per	1,000 Populati	ion.
Year.	Total.	Urban.	Rural.	Administra- tive County.	
1939 1940	127 142	0.5 0.6	0.7 0.8	0.6 0.7	_

Illegitimate birthrate.—This is a rate which might reasonably be expected to rise in time of war, when life is cheap, and the possible consequences of indiscretion risked. The rate for 1916 was 1.5; for 1917, 1.6; but in neither 1939 nor 1940 has the rate showed any tendency to rise.

			9 TABLE II DEATHS			
	Death Rate per 1,000 Population.					Administra-
Year.	Total.	Urban.	Rural.	Administra- tive County.	England and Wales.	tive County Corrected Death Rate.
1939 1940	2649 2824	12.6 15.2	12.6 13.4	12.6 14.16	12.1 14.3	10.5 12.45

The death rate has risen suddenly. The rate remained stationary at 10.3 from 1934 to 1938, with an almost imperceptible rise to 10.5 in 1939. I cannot explain the high figure of 12.45; the figures of further years must be awaited before conclusions can be drawn.

r r 1 . 4	L T 1	T TY	TT	T
1 6	чк	LE	11	U
	x	LALA.		Y

Quinquennium.	Number of Deaths.	Number of Births.	Excess of Births over Deaths.
1926-30 1931-35	12,253 12,743	16,820 14,994	4,567 2,251
1936-40	13,243	14,388	1,145

Each five years the number of births in excess of deaths is halved. The deaths increase because the population is ageing and unless the births rise very much we may be faced soon enough with a falling population.

TA	RI	F	V	
111	DI	115	ν.	

DEATHS OF CHILDREN UNDER ONE YEAR.

		Rate per 1,000 Live Births.					
Year.	Total.	Urban.	Rural.	Administra- tive County.	England and Wales		
1939 1940	114 128	35 45	42 47	39 46	50 55		

Infant Mortality Rate.

This rate has risen and is high for the area, but the rate for England and Wales has risen correspondingly. The rate for Lowestoft, which is its own Maternity and Child Welfare Authority and responsible for the service in the Borough, should really be shown apart from the County rate. Lowestoft rate is 52.4 and the County rate, excluding Lowestoft, is 44.3, so that this year Lowestoft adversely affects the County rate.

TIA	DT	TN.	TTT	
1 A	BT	JE.	VI	
				-

INFANT MORTALITY OVER FIVE-YEARLY PERIODS.

Quinquennium.	Number of	Number of	Infant Mortality
	Births.	Deaths.	Rate.
1926–1930	16,820	895	53.2
1931–1935	14,994	676	45.1
1936–1940	14,388	625	43.4

This table shows an improvement since 1935; the periods 1935-9 and 1934-8 were better than the period 1936-40, but this is not shown in the table.

II.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

STAFF.

Medical Staff (whole-time):

County Medical Officer: B. Wood-White.

Deputy County Medical Officer: A. G. Atkinson.

County Bacteriologist: H. M. Cade, *P. H. Martin.

Assistant County Medical Officers: H. Pedler, W. M. Burns, C. M.

Whiteford, E. Graham and E. A. Parkinson.

*Dr. Martin acted for Dr. Cade from the 1st June, 1940.

Nursing Staff (whole-time):

Supervisor of Midwives: F. MacDonald. Assistant Supervisor of Midwives: D. Woolston.

1 Orthopaedic Nurse and 2 Health Visitors.

County Sanitary Staff (whole-time):

County Sanitary Officer: A. E. Chapman. Assistant County Sanitary Officers: G. H. Hine Ivon W. Fenn (on Service).

Clerical Staff:

Chief Clerk: A. Knight.

Blind Welfare Officer: C. E. Muirhead.

District Medical Officers of Health:

Urban Districts:

Croan	The root recor		
	Aldeburgh	 	C. D. Somers.
	Beccles	 	L. Gibson.
	Bungay	 	H. Pedler.
	Eye	 	H. Pedler.
	Felixstowe	 	G. J. Conford.
	Halesworth	 	W. M. Burns.
	Leiston	 	W. M. Burns.
	Lowestoft	 	V. R. Walker.
	Saxmundham	 	D. W. Ryder Richardson.
	Southwold	 	J. Borham for D. W. Collings.
	Stowmarket	 	E. Graham.
	Woodbridge	 	C. M. Whiteford.
Rural	Districts:		
	Blyth	 	W. M. Burns.
	Deben	 	C. M. Whiteford.
	Gipping	 	E. Graham
	Hartismere	 	H. Pedler.
	Lothingland	 	L. Gibson.
	Samford	 	E. Graham.
	Wainford	 	H. Pedler.

Dr. Cade, County Bacteriologist, who had passed the age for superannuation, gave up work during 1940, and retired from the staff officially at the end of March, 1941, after 21 years' service as an Officer of the County Council. Dr. Cade was an able Bacteriologist and a pleasant colleague, and I miss him after an association of 18 years; he was closely connected with the staff and was President of the N.A.L.G.O. for two years.

County Laboratory.

I think it would be useful to record the history of the County Laboratory from its inauguration to the present time.

The County Laboratory was established in 1912; the old Police Stables, a single-story building, were converted for the purpose. The first Laboratory Attendant was Mr. J. W. Yerrill, who had been on an investigation upon Bubonic Plague in the British West Indies under the auspices of the Local Government Board.

Soon after the outbreak of War in 1914, the County Laboratory was requisitioned by the Military Authorities and an arrangement was made whereby the Military Staff did the County work as well as their own, the County Council maintaining one Laboratory Attendant. The Military Bacteriologist was Captain Wade, who was soon followed by Captain Sheffield Neeve, a specialist in Cerebro-spinal Meningitis; he was appointed because the disease was rampant in the military camps spread over East Suffolk and he remained at the County Laboratory for about two years; he was followed later by Captain H. M. Cade, some time in 1918, who had returned from Mesopotamia. The Military Authorities retained the use of the County Laboratory as there was much work to be cleared up and it was not until the 11th July, 1919, that Captain Cade was appointed County Bacteriologist and became a member of the County Council's staff.

It was probably early in 1920 that the County Council came to an arrangement with the East Suffolk and Ipswich Hospital to do the pathological work for that institution; at that time, there were few facilities in the County Borough and most of the work was done by a private firm. From that time all the work of the Borough and the County was done at the County Laboratory. In 1927, the Hospital established their own Laboratory and from the end of that year onwards no hospital work was done at the County Laboratory.

Since 1927 the County Laboratory has become more and more a Public Health Laboratory and less a laboratory for pathological examinations. In the middle of 1940 it became an Emergency Public Health Laboratory and Dr. P. H. Martin, by arrangement with the Medical Research Council, has been acting County Bacteriologist since that time. This change which took place on the 1st June, 1940, has attracted to the County Laboratory a large amount of work which, until that time, had been carried out at the Emergency Laboratory at Colchester, which was closed when the change was made. The County Laboratory now does all the work of the Services in East Suffolk, part of West Suffolk and Essex. Recently, it was decided that Public Health work only should be done at the County Laboratory. Dr. Martin is a very skilled and experienced Bacteriologist and it is a privilege to have him here.

I am indebted to Mr. A. Ward, originally a member of the Public Health staff and now of the Education staff, for the information about the County Laboratory from its beginning to 1922, when I was appointed to the Council's staff.

There has been more work done at the Laboratory during this year. I give the number of examinations done there for the past three years.

1938	 	 7,823
1939	 	 7,416
1940	 	 11,220
P	 	 1 000

The main reason for the increase is that nearly 4,000 more throat swabs were examined this year than last.

III.

MATERNITY AND CHILD WELFARE.

This part of the Report deals with the Administrative County, excluding Lowestoft, which has its own Local Supervising Authority for Maternity and Child Welfare purposes.

Summary of Visits Paid by Health Visiting Staff.

		1939.	1940.
First visits to children under 1	year	 2,024	2,005
Re-visits to infants under 1 year	ar	 14,025	14,850
Visits to expectant mothers		 9,744	8,542
Visits to children 1-5 years		 26,418	25,573
Т	otals	 52,211	50,970

Nursing in the Home.

The number of District Nursing Associations is 64; 72 Nurses are employed by the District Nursing Association and 6 Emergency Nurses by the East Suffolk County Nursing Association—a total of 78, 42 of whom use a car for work.

Nursing Staff.

Nurses undertaking work for the County Council at the end of the year were:-

			Emergency Nurses.
Queen's Nurses		 19	3
Trained Nurses		 11	
District Nurses		 37	3
Vacancies		 5	_
	Totals	 72	6

The County Superintendent is beginning to find it difficult to secure Nurses for vacancies and candidates for training.

Summary for years 19	39 and	d 1940:—		1939.	1940.	
Number of openings				645	663	
Number of attendance	es:					
Ante-natal				1,010	964	
Post-natal				16	17	
Children				18,122	16,403	
Average attendance of o	childre	en a sessio	n	28.1	24.7	
Number of consultation				-		
Mothers, Ante-na	ital			765	835*	
Mothers, Post-na	tal			16	15	
Children				5,302	6,545*	
Average number of co	onsulta	ations per	child			
per session attende				11.4	11.7*	
*Figures for Wre	-			ust, 1940, on	ly.	

Twenty-one Infant Welfare Centres were in commission during the year. Eight were equipped as ante-natal centres. Special ante-natal clinics were held at Felixstowe and Stowmarket. Three new centres were opened during the year at Kesgrave, Newbourne and Southwold.

MATERNITY AND CHILD WELFARE CENTRES.

Institutional Provision for Maternity Cases.

Seventy-one women were confined in institutions under the Council's scheme, compared with 60 in 1939.

Unmarried Mothers.—The County Council contributed towards 6 cases under their agreement with the Diocesan Moral Welfare Association.

Provision of Milk for Children and Mothers.

22,318 gallo is of milk were provided to the 31st July, 1940. From the 1st August the Ministry of Food assumed responsibility for providing children and mothers with milk. The principle upon which the Ministry of Food worked was similar to that of the County Council, the necessity being decided by the means of the parent, without reference to the physical condition of the child. The transfer was advantageous because the income scale of the Ministry was more generous than that of the County Council.

Obstetric Consultant Service.

The Obstetric Specialists were called upon 11 times during the year.

Home Helps.

Home Helps were provided upon 14 occasions.

Maternal Mortality.

There were 4 deaths from Puerperal Sepsis and 5 from other Puerperal causes—9 in all. The County mortality rate for each 1,000 births was 3.12, compared with 3.34 for England and Wales; the County rate has risen from 2.61 last year to 3.12 this year, but the rate for the country has also risen from 2.82 in 1939 to 3.34 in 1940.

Ophthalmia Neonatorum.

Seven cases were notified, 6 were treated at home and 1 in hospital. In 6 cases the vision was unimpaired; 1 case was still in hospital at the end of the year.

Puerperal Pyrexia.

Thirty-nine cases were notified; of these, 17 were treated at home, 17 in hospitals provided by the County Council, and 5 otherwise in hospital. Four women died.

Midwives.

124 midwives practised during the year. There were 2,264 births in the administrative County, excluding Lowestoft, and of these, the midwives attended 961 as midwives and 999 as maternity nurses; a total of 1,960. For the first time for many years the midwives have increased the percentage of cases taken for midwifery as against maternity nursing. 86 per cent. of the births were attended by County midwives, either as midwife or maternity nurse; this is an improvement upon 81 per cent. last year.

Registration of Nursing Homes.

Fourteen homes were on the register as maternity or nursing homes during the year. Six hospitals and one nursing home were exempted.

Child Life Protection.

×

The number of children under supervision at the end of the year was 337, compared with 416 in 1939.

Orthopaedic Treatment.

Twenty-one cases required financial assistance as in-patients, outatients, etc.

IV.

VACCINATION.

The percentage of children successfully vaccinated in 1939 was 34.6, compared with 38.5 in 1938.

The percentage for the County, excluding Lowestoft, was 43.9.

The number of children vaccinated in the County continues to fall; there has been a big drop from 1932 to 1939 and in eight years the percentage has been reduced from 44.6 to 34.6.

V.

SANITARY CIRCUMSTANCES OF THE AREA. Water Supplies.

BLYTH.

Parham.—This village now has a public supply; water is taken from a borehole, pumped to a tank with a reservoir of a capacity of 4,800 gallons. The tank is capable of being duplicated. Pumping is by windmill with a stand-by engine. 3,911 yards of 3-in. and 684 yards of 2-in. mains extend from Parham North Green to Parham village, with branches along the Framlingham Road to Silverlace Green and to Whitehouse Farm; supply is mainly by standpipes, although several properties are connected with the mains.

Brandeston.—An 8-in. diameter borehole has been driven to a depth of 230 feet, giving a yield of 2,000 gallons an hour; the borehole at this place is to serve the parishes of Brandeston, Earl Soham and Kettleburgh.

Framlingham.—A chlorinating and de-chlorinating plant has been installed at the Pumping Station and is in operation.

GIPPING.

Great Bricett.—1,800 yards of 3-in. main has been laid for purposes of the Air Ministry and four standpipes have been taken off to supply residents of the parish.

HARTISMERE.

Both the Eastern and the Western schemes are nearing completion; the Eastern scheme is being pressed as the water shortage is more acute in that area. Both schemes are for standpipe supply, except in the parishes of Stradbroke and Laxfield, where sewerage schemes are being constructed.

Palgrave.—The main supply for this parish is finished; the water is available for the public from standpipes.

LOTHINGLAND.

Kessingland.—The water supply for this parish was almost completed at the end of the year; there was delay in delivering the pump and but for this the scheme would have operated in 1940.

Sewage Disposal.

HARTISMERE.

Laxfield.—The sewerage scheme for this village is finished and is working well.

Stradbroke.—The sewerage scheme is working well. When the main water supply is available there will be more collections from private property.

VI.

HOUSING.

Housing (Rural Workers) Acts.

The War has almost stopped work under this Act. There were no conversions of buildings previously used as dwelling houses and the improvement of existing dwellings was almost negligible. Only a little over f_{200} was made in grants by the County Council.

TABLE VII.

Progress of Scheme approved by the Minister of Health under the Housing (Rural Workers) Acts, 1926 and 1938. Position at 31st December, 1940.

ASSISTANCE BY WAY OF GRANTS BY THE COUNCIL.

	15			
Number of dwellings :	On which work has been commenced but not finished. (10)	1	8	8
Number of	On which work has been finished. (9)	29	915	944
iven by the cil :	Number of dwellings concerned. (8)	29	915	944
Assistance given by the Council :	Total Amounts of grants paid. (7)	£ s. d. 2,808. 4. 0	71,248. 19. 8	74,037. 3. 8
ance promised by the Council :—	Number of dwellings concerned. (6)	29	930	
Assistance promised by the Council :	Total Amounts of grants promised. (5)	£ s. d. 2,808. 4. 0	72,803. 2. 11	75,611. 6. 11 959
respect of grants have	Withdrawn by applicants. (4)	14	194	208
Number of dwellings in respect of which applications for grants have been :	Refused by the Council. (3)	9	118	124
Number of which appli	Made to the Council. (2)	49	1,243	1,292
	Purpose for which assistance required. (1)	(i) Conversion of buildings not previously used as dwellings in- to dwellings	(ii) Improvement of existing dwel- lings	Total at end of year 1,292

VII.

INSPECTION AND SUPERVISION OF FOOD.

Milk.

Ninety-nine samples of milk were taken and examined for tubercle bacilli; 3 were found to be positive, roughly, 3 per cent.

Ten investigations of herds were carried out by the Veterinary Inspector of the Ministry of Health. In three herds a cow was isolated; in two a cow had been slaughtered between the time of taking the bulk sample and the investigation, and, probably, was the cause of the infection. In four herds the cow responsible could not be discovered. In one case where a sample of milk was reported as positive (having been taken in another area) the Veterinary Officer on investigation, found that the wrong source had been reported.

Milk (Special Designations) Order.

Accredited Milk.—The number of licences in force at the end of 1940 was 279. Thirty-seven licences were suspended and 19 suspensions were revoked.

1,237 samples of milk were collected and examined, 406 were found to be unsatisfactory, a percentage of 32.8 which compares very unfavourably with the previous years' percentage of 18.7. 1940, however, had a long dry, hot summer, which must have helped to produce so many bad samples.

Again, it was impossible, owing to the amount of A.R.P. work placed upon the Sanitary Inspectors, for a proper number of inspections to be made.

Food and Drugs Act, 1938.

353 samples of food and drugs were taken for analysis by the Public Analyst; of these, 2 only were found to be adulterated and 9 otherwise unsatisfactory. Legal proceedings were taken in 3 cases:

- 1. Added water in milk. Case dismissed.
- Milk deficient in fat. do.
- 3. Milk deficient in fat. do.

VIII.

SHOP ACTS, 1912-1938.

Orders made suspending the weekly half-holiday will be found in the report for 1938. Orders made fixing the day for weekly half-holidays will be found in the report for 1938; one addition has been made—Felixstowe Partial Exemption Order, 1928.

The number of shops inspected was 150; re-inspected, 36. Found to comply with the Acts on first inspection 106; not to comply, 44; 32 special visits were paid; 44 notices were sent about various contraventions. Four general surveys were carried out in two parishes and two urban districts these included one Sunday survey.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES.

Isolation Hospital Accommodation.

(See Report for 1938).

INFECTIOUS DISEASES, 1940.

TABLE VIII.

	Number of	Number	Attack
se!	cases	of	per
	notified	deaths	1 000 1

Infectious Disease:	Number of cases notified.	Number of deaths.	Attack rate per 1,000 Pop.	Mortality rate (per cent.)
Smallpox			_	_
C L P	298		1.494	
Diphtheria	42	4	.211	9.5
** ***	7	1	.035	14.3
Puerperal Pyrexia	47	9	.235	19.1
D	209	85	1.047	40.6
Encephalitis Lethargica	3	5	.015	
Deliamanalitie	10	1	.05	.10

There was nothing remarkable about infectious diseases in 1940. The mortality rate for puerperal pyrexia was high.

Χ.

TUBERCULOSIS.

TABLE IX.

Cases certified as having died of Tuberculosis. Figures furnished by the Registrar-General.

Year.		Pulmonary.	Non-Pulmonary.	Total.		
				71	7	78
1939				79	16	95
1940		· · · ·		82	13	95

The number of deaths from tuberculosis has not increased this year, and continues to remain below 100. The fall from 108 to 78 in 1938 was artificial and was not expected to be maintained. Despite the war, the deaths from tuberculosis have not risen, but a rise is to be expected, probably next year, with a tendency to become higher as the war continues.

Deaths from Tuberculosis.

TABLE X.

(Figures furnished by the Registrar-General).

Five-yearly Period.		Deaths from Pulmonary Tuberculosis.	Deaths from Non-Pulmonary Tuberculosis.	Total.	
1926-1930			633	150	783
1931-1935			524	124	648
1936-1940			410	82	492

Death Rates-Tuberculosis.

TT	1.4	DI	F 1	P	37.1	r .
1	A	B1		В.	XI	

	All Forms.		Pulmo	nary.	Non-Pulmonary.		
Year.	Adminis- trative County.	England and Wales.	Adminis- trative County.	England and Wales.	Adminis- trative County.	England and Wales.	
1938 1939 1940	.38 .45 .48	.63	.35 .38 .41	.53	.03 .07 .07	.10	

Although the number of deaths remains the same, the death rate is higher; this is because the population of the County is lower, owing to young men and women joining the Services and leaving the area; nevertheless, if any of these persons gets tuberculosis whilst in the Service he is discharged to his home and if he subsequently dies from the disease his death is assigned to this County.

		Tuberculosis (All Forms).
Official County Rate		.48
Rate with immigrants excluded		.45
Rate with immigrants and deaths from causes excluded	other	.43

Deaths of notified cases of Tuberculosis during 1940.

Notified after death	 2
Within one week of notification	 7
1 week to 1 year after notification	 31
1 year to 5 years after notification	 22
From 5 years onwards after notification	 16
Total	 78

1,034 examinations were made by the Tuberculosis Officers during 1940, compared with 1,105 in 1939. 200 cases were on full time, 87 part-time work; 107 were able to get about and 56 were confined to bed.

496 specimens of sputum were examined, 143 being positive, which is 14 more than last year.

312 pulmonary and 110 non-pulmonary cases were removed from the register during the year.

Primary Notifications.—111 pulmonary cases and 52 non-pulmonary, a total of 163 for the year. There was an increase of 25 pulmonary notifications, and a decrease of 14 non-pulmonary, compared with 1939.

Artificial Pneumothorax Treatment.—4 new cases had this treatment. 2 completed treatment; 5 had advanced disease and treatment ceased. 25 patients were continuing treatment at the end of the year. 7 patients entered the County requiring refills and 5 others left to continue treatment elsewhere.

Institutional Treatment.

H

Pulmonary Tuberculosis.—111 patients were admitted to institutions; 81 were discharged; 27 died; 32 remained in the institutions at the end of 1940.

Non-Pulmonary Tuberculosis.—51 cases were admitted to institutions; 56 were discharged and none died; 16 patients remained in the institutions at the end of 1940.

Number of patients receiving residential treatment:-

	1938.	1939.	1940.
Pulmonary	 143	120	100
Non-Pulmonary	 69	68	52
Total	 212	188	152

Seventeen cases refused residential treatment during the year.

Pulmonary Tuberculosis.—When the enemy overcame France, the sanatorium at Oulton Broad was closed on the instruction of the Ministry of Health owing to its proximity to the coast, and the Ipswich Sanatorium was not allowed to take the full number of patients; this has made it difficult to obtain beds. The majority of our cases are now being treated at the East Anglian Sanatorium, Nayland. Non-Pulmonary Tuberculosis.—Owing to the restriction of admissions to the Ipswich General Hospital it has been hard to find beds for long stay cases; some are being treated in their homes under the supervision of the Orthopaedic Surgeon, whom they visit from time to time, who in ordinary times would be receiving hospital treatment. Others are scattered throughout the country.

TABLE XII.

1.	No. of cases on Dispensary Register, 1st January, 1940	538
2.	No. of cases transferred <i>from</i> other areas and cases returned after discharge under (3) below in previous years	36
3.	No. of cases transferred <i>to</i> other areas, cases not desiring further assistance under the tuberculosis scheme and cases "lost sight of"	115
4.	Cases written off as "dead" all causes in 1940	74
5.	No. of visits by Nurses or Health Visitors to homes for Dispensary purposes	
6.	No. of X-Ray examinations in connection with Dis- pensary work	136
7.	No. of recovered cases restored to Dispensary Register	3
8.	No. of "T.B. Plus" cases on Dispensary Register on 31st December, 1940	199
Th	o forme under boading 2 is smallen this years this is sayed l	

The figure under heading 3 is swollen this year; this is caused by evacuation and the number of minor cases, such as patients who have had tubercular glands whose condition is arrested, entering the Services.

It is cheering to find that the figure under heading 8 is less this year by 20, because the figure under this heading gives an indication of the number of deaths that will follow.

XI.

TREATMENT OF VENEREAL DISEASES.

TABLE XIII.

No. of New Total number Aggregate number Area from which Cases. of attendances. of in-patient days. Patients came. 1940 1939 1939 1940 1939 1940 East Suffolk 84 147 2626 2014 163 Great Yarmouth Norfolk 57 20 1381 818 22 ... 1 48 6 5 ...

Lowestoft V.D. Clinic.

There is a difference between the figures for the two years, which was probably caused by the influx of Service men and those in the North of the County attended the Lowestoft clinic. The Medical Officer of this clinic has not differentiated between the civilian and service cases on his return.

168

4055

2837

185

Total:

147

h	
-	
-	
×	
1	
r 1	
1-7	
<u> </u>	
_	
-	
m	
-	
-	
100	
-	

* . . .

1

-

Venereal Diseases. (East Suffolk Patients Only).

		No. of East seen for the found to be s		: Suffolk Persons e first time and suffering from:				
Centres.		Syphilis.	Soft Chancre.	Gonor- rhoea.	Conditions other than Venereal.	Total.	Total No. of Attend- ances at Out- patient Clinics.	Aggregate No. of In-patient days.
Lowestoft		55 (21)	() -	33 (27)	59 (40)	147 (88)	2014	1
Ipswich	1	12 (3)	1	22 (14)	19 (14)	53 (31)	1451 (243)	65
Other Treatment Centres	ient 	1		1	-	e	33	I
TOTALS	:	68 (24)	(-)	56 (41)	79 (54)	203 (119)	3498 (243)	65

N.B.--Figures in brackets relate to attendances of members of H.M. Forces and are included in all totals.

	1938.	1939.	194	υ.
	 64	43	68	(24)
	 	1	-	()
	 77	55	56	(31)
Total	 141	99	124	(55)
	 	64 <u>-</u> 77	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

1020 1020

1040

The following figures relate to the number of new cases seen for the first time at the Clinics:-

XII.

CANCER DEATH RATE.

	N	o. of Death	IS.	Death	Rate per	1,000 Popul	lation.
Year.	Males.	Females.	Total.	Urban.	Rural.	Adminis- trative County.	England and Wales.
1938 1939 1940	192 202 198	208 215 168	400 417 366	2.07 2.03 2.08	$ \begin{array}{r} 1.84 \\ 1.95 \\ 1.66 \end{array} $	1.94 1.98 1.83	

TABLE XV.

There is a welcome fall in the number of deaths from Cancer; this is caused by a remarkable decrease in female deaths. The number of male deaths has always been below the female, with the exception of 1931, and then the difference was slight; the number of male deaths has been gradually creeping up to the female deaths and this year is 30 in excess. The tendency is for male deaths to rise quickly and for female deaths to rise slowly, but it is necessary to go back to 1928 to find fewer female deaths from Cancer.

XIII.

MENTAL DEFICIENCY ACTS, 1913 to 1938.

TABLE XVI.

Mental Defectives in East Suffolk:

Number on boo	1939.	1940.		
Males	 		647	660
Females	 		686	680
	Total		1,333	1,340

In institutions				310	
On leave of absence from			28		
Under guardianship				25	
Under statutory supervis				148	
Dealt with at instance of parent of	or Suf	folk Men	tal We	lfare Ass	ociation
In training homes				12	
In Royal Eastern Countie	itution		26		
Under voluntary supervis	sion			692	
Defectives in Public Assistance In	stituti	ons:		32	males
				67	female
Т	otal			1,340	-

XIV.

EAST SUFFOLK COUNTY ASSOCIATION FOR THE BLIND.

Total blind persons: 441. 190 males and 251 females. Of these, 397 are unemployable; 18 are employed and 26 come into other categories. 30 blind persons are mentally defective; 15 physically defective; 36 are deaf.

INDEX.

							PAGE
Disthe and Disth	Datas						
Births and Birth Blind, Welfare of					 	 	7, 8
bind, wenare of	the				 	 	 23
Cancer					 	 	 22
Child Life Protect	ion				 	 	 13
Deaths and Death					 	 	 9
District Medical O	fficers	of He	alth		 	 	 10
DI IDI	. 1020						
Food and Drugs Ad					 	 	 16
Food, Inspection a	pervisi	ion of		 	 	 16	
Home Helps							13
Housing					 	 	 14
in a second					 	 	
Infant Mortality					 	 	 9
Infant Welfare Ce					 	 	 12
Infectious Diseases					 	 	 17
Isolation Hospital	Accom	moda	tion		 	 	 17
Laboratory					 	 	 11
Maternal Mortality	,				 	 	 13
Maternity and Chi	ld We	lfare			 	 	 12
Maternity Homes					 	 	 13
Mental Deficiency					 	 	 22
Midwives					 	 	 13
Milk, Provision of					 	 	 13
Milk (Special Desig	nation	s) Ord	er	1.1.1.1	 	 	 16
Natural and Social	Cond	itions					7
Nursing in the Ho					 	 	 12
Nursing Homes					 	 	 13
Nursing Staff					 	 	 10
Obstetric Consulta		vice			 	 	 13
Ophthalmia Neona					 	 	 13
Orthopaedic Treat	ment				 	 	 13
Dopulation							0
Population Puerperal Pyrexia					 	 	 8 13
i ucipetat rytexia					 	 	 15
Sanitary Circumsta	inces				 	 	 14
Sewage Disposal					 	 	 14
Shops Acts					 	 	 16
Staff					 	 	 10
Tuberculosis					 	 	 17
Vaccination							14
Vaccination Venereal Diseases					 	 	 14 20
Vital Statistics					 	 	 7
The orderation					 	 	
Water Supplies					 	 	 14

Printed by EAST ANGLIAN DAILY TIMES CO., LTD.



EAST SUFFOLK COUNTY COUNCIL.



ANNUAL REPORT

OF THE

County Medical Officer

1940

PUBLIC HEALTH DEPARTMENT, COUNTY HALL, IPSWICH,