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EAST SUFFOLK COUNTY COUNCIL



ANNUAL REPORT
OF THE
County Medical Officer

1954

HEALTH DEPARTMENT
COUNTY HALL
IPSWICH



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EAST SUFFOLK COUNTY COUNCIL



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HEALTH DEPARTMENT
COUNTY HALL
IPSWICH

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To the Chairman and Members of the County Council.

MY LORDS, LADIES AND GENTLEMEN,

I have the honour to present to you the Annual Report on the health of the County of East Suffolk for the year 1954.

The report is prepared to conform generally with the requirements of the Minister of Health, and in this preamble I have confined myself to brief comments on some outstanding aspects of the report.

Staff.

It is with regret that I record in this report the death of Dr. A. G. Atkinson. He was for 26 years a whole-time officer in the county, retiring in 1946 after acting as County Medical Officer from December, 1943 until May, 1946. For the next 8 years he continued to work part-time carrying out specialist duties, and his clinical acumen and deep knowledge of humanity made him a colleague who will be much missed.

In the annual report for 1953, I reported the deaths of Mr. I. W. Fenn and Mr. D. W. Copperwheat, who were Assistant County Sanitary Officers. Although the date of their tragic accident was January, 1954, it proved difficult to replace the services of these two enthusiastic officers and it was not until July that Mr. R. E. Law took up his duties. During the intervening six months much help was received from Mr. A. E. Chapman, County Sanitary Officer and the various District Sanitary Inspectors.

Vital Statistics.

Once again there is a slight rise in both the birth rate and the death rate. The commonest causes of death were heart disease and cancer. Whilst the numbers are too small to be of significance, it is nevertheless interesting to note that the deaths from cancer of the lung are slowly creeping up from 53 in 1952 to 64 in 1953, and 66 this year. On the other hand the figures for the deaths from pulmonary tuberculosis for the corresponding years are 35, 24 and 14.

Nursing Services.

The various branches of the nursing service continued to function satisfactorily, notwithstanding occasional difficulties in staffing.

The number of domiciliary confinements showed little change over last year, though gas and air analgesia and pethidine were administered in a higher percentage of cases than previously.

The nurses employed on home nursing duties, particularly in the urban areas, were subjected to considerable pressure of work. This is partly accounted for by the increasing number of injections prescribed by doctors for their patients, and partly by the number of calls for nursing assistance to the aged.

The health visiting service continues to develop as visualised in last year's report. Two nurses have been sent to train as health visitors in order that they may take up duties as district nurse-midwife/health visitors.

In addition to their other duties, health visitors were during the year given the responsibility of visiting where appropriate those mental defectives who had been placed under Statutory Supervision.

Vaccination and Immunisation.

The introduction of the combined diphtheria/whooping cough prophylactic proved a popular move and most mothers have asked for this agent to be used. The figures for vaccination show that 48% of the children under one year in the county were protected against smallpox, and whilst this is certainly a big improvement on the national figure of approximately 34%, it still means that more than half the children are not vaccinated.

Ambulance Services.

During the year 3 new ambulances, 1 large and 2 small, were provided, and a Dormobile was also purchased for use as a sitting case car. Both the Ambulance and Hospital Car Services showed that there was an increase in the number of patients and miles.

I should once again like to acknowledge the very efficient and whole-hearted co-operation of the voluntary personnel of the St. John Ambulance Brigade, British Red Cross Society and the Hospital Car Service.

Prevention, Care and After-Care.

During the year the post of Tuberculosis Health Visitor for the north of the county was filled, and the arrangement appears to be working very satisfactorily. Whilst it has not been possible as yet to fill the second vacancy, excellent co-operation between the Chest Clinics and the Health Department has been maintained.

Home Help Service.

The cost of the Home Help Service has grown as the demand has continued to increase. The pattern has changed and most of the applications for help now come from the aged and infirm. Though the provision of a home help can well mean the difference between the infirm ill person being able to stay at home and the necessity for admission to a hostel or hospital, the burden on the rates is a heavy one.

Mental Health.

The increasing importance of the Mental Health Service has caused the Minister to ask for a special review of the work and this appears in the body of the report.

During the year, temporary admission to hospital of mental defective children has proved of very great benefit both to them and to their parents.

Sanitary Circumstances of the Area.

As will be seen from the table in the body of the report, progress has been maintained in the provision of water and sewerage schemes, but the rate of progress is still not as fast as one would like.

The position as far as housing is concerned is set out in other tables. It will be seen that here too there is still a lot of work to be done in the county.

The Census, 1951.

The Registrar General's report of his analysis of the 1951 Census figures for the County of Suffolk contains statistics of much local interest relating chiefly to populations, private households, dwellings and certain amenities available to house-holders.

Population.

The report shows that after a fall in the population from 211,623 in 1921 to 207,408 in 1931, the number of persons in the administrative county increased to 217,124, previously shown as 217,061 in the Preliminary Census Report in 1951. This represents an increase of 4.7% on the figure for 1931 and may be compared with the corresponding increase of 9.5% for England and Wales as a whole. The largest increases were recorded in Felixstowe, Bungay, Saxmundham, Stowmarket and Woodbridge as well as the Rural Districts of Deben and Samford.

Decreases were recorded in the Boroughs of Southwold, Lowestoft and Eye, the Urban Districts of Leiston and Halesworth and the Rural Districts of Hartismere and Blyth.

The density of the population for the county was 0.4 persons per acre, the average for the Municipal Boroughs and Urban Districts being 3.1 persons and for the Rural Districts 0.2 persons per acre.

Age and Sex Distribution.

The percentage of population in the various age groups differs little from the corresponding figures for England and Wales, though both the proportion of children under 15, namely 22.6%, and persons over 65, namely 13.8%, are higher than the national figures of 22% and 10.9%. As compared with the national figure of 1,085 females per thousand males, the administrative county had only 1,049 females per thousand males, the difference in the ratio increasing in the higher age groups so that at 65 years and over there are 1,288 females for every thousand males.

Marital Conditions.

In the administrative county the 1951 figures show that both men and women are marrying earlier in life than was the case 20 years ago. This is in accordance with the national trend. Of those living in the county aged 15 years and over, 26.2% are single, 64.1% married, 9.2% widowed and 0.5% divorced.

Birthplace and Nationality.

The proportion of the population born outside the United Kingdom and the Irish Republic was lower than the average for England and Wales, though of the total of 217,124 for the county, 146,377 only gave their birthplace as Suffolk.

Dwellings, Rooms and Private Households.

Dwellings occupied by private householders numbered 64,319 whilst in addition there were 3,290 unoccupied dwellings, making a total of 67,609. These dwellings were occupied by 65,651 private households.

The household arrangements were investigated for the first time in the 1951 Census. The figures show that 34% of all private households in East Suffolk had exclusive use of piped water, cooking stove, kitchen sink, water closet and fixed baths, whilst a further 16% had all except a fixed bath. These figures compare with 53% and 20% respectively for England and Wales as a whole. There are, of course, wide variations in the availability of amenities in different parts of the county and the following table shows the position in urban and rural areas and the county as a whole.

	ADMINISTRATIVE COUNTY.				BOROUGH AND URBAN DISTRICTS.				RURAL DISTRICTS.			
	Households, 65,621.				Households, 29,737.				Households, 35,884.			
	With exclusive use of	Shared	Without		With exclusive use of	Shared	Without		With exclusive use of	Shared	Without	
Piped Water ...	39,362	3,720	22,539	...	25,151	2,455	2,131	...	14,211	1,265	20,408	...
Cooking Stove ...	58,498	1,226	5,897	...	28,015	887	835	...	30,483	339	5,062	...
Kitchen Sink ...	49,107	1,399	15,115	...	26,445	1,010	2,282	...	22,662	389	12,833	...
Water Closet ...	36,907	1,934	26,780	...	26,130	1,635	1,972	...	10,777	299	24,808	...
Fixed Bath ...	25,747	1,448	38,426	...	14,907	1,105	13,725	...	10,840	343	24,701	...

N.B.—Households enumerated on house-boats are omitted from the table.

It will be noted from the above figures that 60% of the rural households are without piped water supply, and that 70% are without a water closet or fixed bath. Only 7% however, of the urban households are without a piped water supply or water closet, though 40% have no fixed bath.

Health Visiting Service and Problem Families.

Problem families—an often used but seldom defined expression—have had a good deal of publicity in the last few years. Administratively one of the important factors has been to achieve co-ordination of effort in tackling the problems which arise and preventing over-visiting, because many officials and representatives of voluntary organisations frequently have an interest in the one particular family. During the year the Ministry of Health issued a circular, emphasising the role to be played by the health visitor. This matter has had adequate attention by the various Committees of the Council which are in any way concerned, so that it is not necessary to comment in detail on the Ministry's circular. It may well be that time will show the necessity for appointing one or two officers adequately trained in health work, but with special bias to case-work, but at the present time the resources of the Health Department through its health visitors, welfare officers, district nurses and home helps, are considerable and are being used to good advantage.

Otherwise, during the year there has been no special feature in relation to the Health Visiting Service. The full complement of staff required has not yet been reached and, because of this and the policy in relation to the employment of district nurse-midwives/health visitors, it has not yet been possible to settle permanent districts for all the staff concerned. Consideration is still being given at national level to the future training, qualifications and role of the health visitor and this in some way gives rise to an air of uncertainty as to the future and best use of the health visitor.

Co-operation in Health Service.

Reference was made in a previous Annual Report to the danger of the partners to the National Health Service being so heavily engaged in developing their own work that only too often the tendency was to overlook the importance of full co-operation, and the fact that we were all partners in one National Health Service rather than responsible for running separate health services. I am glad to report that during the year greater co-ordination has been achieved, particularly between the health visitors, nurse-midwives and general practitioners, and by the representation which has been afforded to the County Medical Officer on the Local Medical Committees and by attendance at meetings of the Executive Council. The liaison with the Regional Hospital Board's Chest Physicians has been of real value in the development of the Tuberculosis Service.

Welfare Services.

In an earlier report a fairly detailed survey of the work of the welfare services under the National Assistance Act, 1948 was made. The welfare services do not normally form part of the Annual Report of a County Medical Officer, but as they are administered by the Health Committee it is felt that some reference should be made to them. This year it will suffice to say that their development has progressed steadily and the employment of the "all-purpose" welfare officer has done much to enable us to cope with the in-

creasing work without a corresponding increase in the staff, and with a reduction in the amount of time spent in travelling.

* * * *

The year under review has been one of steady, although perhaps limited progress. What has been achieved has entailed real effort by the staff of the department, but the work has been made easier by the knowledge that we have always had the kindly interest and support of the Chairman and members of the Health Committee and its Sub-Committees.

I would therefore like to conclude by expressing deep appreciation of this kindness and co-operation and also that shown by many of my colleagues in the Local Government Service of East Suffolk. I would also like to record the very great help which has been given by the Administrative Deputy and County Welfare Officer, Mr. L. J. Bowling, and, indeed, all the staff of the Health Department whether engaged in the central office or in the field.

I have the honour to be,

Your obedient Servant,

S. T. G. GRAY,

County Medical Officer.

HEALTH DEPARTMENT,
COUNTY HALL,
IPSWICH.

July, 1955.

I.

GENERAL STATISTICS.

Area : 548,608 acres (*Census*, 1951).

547,397 acres.

Population 1954: 219,900 (As estimated by the Registrar-General).

Population, Census 1951: 217,124.

Number of dwellings (occupied and vacant); Census 1951: 67,609.

Number of private households; Census 1951: 65,651

Rateable Value : £1,193,661 (*year beginning 1st April*, 1954).

Estimated product of a penny rate : £4,748 (*year beginning 1st April*, 1954).

TABLE I.

Extracts from Vital Statistics for the Year.

<i>Live Births :</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>	
Legitimate	1,612	1,542	3,154	} Birth rate per 1,000 of estimated population :— 15.1.
Illegitimate	82	92	174	
Total live births	1,694	1,634	3,328	
<i>Stillbirths :</i>				} Rate per 1,000 total births (live and still- births) :—21.5.
Legitimate	30	39	69	
Illegitimate	—	4	4	
Total stillbirths	30	43	73	
<i>Deaths :</i>	1,397	1,318	2,715	} Crude death rate per 1,000 of estimated popu- lation :—12.3.

	No. of Deaths.	Rate per 1,000 total births.
<i>Deaths from Puerperal Causes :</i>	1	0.29

Deaths of infants under one year of age:

	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Legitimate ...	37	34	71
Illegitimate ...	3	3	6
Total ...	40	37	77

Deaths from Measles (all ages)	....	....	....	....	1
„ Whooping Cough (all ages)	....	....	....	....	—
„ Diarrhoea, Gastritis and Enteritis (under 2 years of age)	....	....	....	....	—
„ Cancer (all ages)	....	....	....	....	463
Cancer Death Rate per 1,000 population	....	....	....	....	2.1
Tuberculosis Death Rate per 1,000 population	....	....	....	....	0.08

TABLE II.

BIRTHS.

(Still Births are excluded).

Year.	Total.	Birth Rate per 1,000 Population.			
		Urban.	Rural.	Administrative County.	England and Wales.
1950	3292	15.3	15.2	15.2	15.8
1951	3326	14.7	15.6	15.2	15.5
1952	3139	14.7	14.1	14.4	15.3
1953	3221	14.9	14.5	14.7	15.5
1954	3328	14.6	15.6	15.1	15.2

TABLE III.

ILLEGITIMATE BIRTHS.

(Still Births are excluded).

Year.	Total.	Birth Rate per 1,000 Population.		
		Urban.	Rural.	Administrative County.
1950	167	0.8	0.7	0.77
1951	171	0.7	0.8	0.78
1952	181	0.8	0.8	0.8
1953	180	0.8	0.8	0.8
1954	174	0.8	0.8	0.8

TABLE IV.

DEATHS.

Year.	Total.	Death Rate per 1,000 Population.			
		Urban.	Rural.	Administrative County.	England and Wales.
1950	2639	12.7	11.8	12.2	11.6
1951	2873	14.2	12.3	13.1	12.5
1952	2563	11.8	11.6	11.7	11.3
1953	2649	12.5	11.8	12.1	11.4
1954	2715	11.7	12.8	12.3	11.3

TABLE V.

MATERNAL MORTALITY.

DEATHS FROM PUERPERAL CAUSES.

Year.	Total	Death Rate per 1,000 total births
1950	1	0.28
1951	1	0.29
1952	1	0.31
1953	2	0.61
1954	1	0.29

TABLE VI.

INFANT MORTALITY RATE.

DEATHS OF CHILDREN UNDER ONE YEAR.

Year.	Total.	Rate per 1,000 Live Births.			
		Urban.	Rural.	Administra- tive County.	England and Wales.
1950	78	25	23	24	30
1951	95	27	29	28	30
1952	81	25	26	26	27.6
1953	60	24	14	18.6	26.8
1954	77	25	21	23.1	25.5

TABLE VII.

INFANT MORTALITY OVER FIVE-YEARLY PERIODS.

Quinquennium.	Number of Live Births.	Number of Deaths.	Infant Mortality Rate per 1,000 Live Births.
1945	3,462	117	29.4
1946	3,919	131	
1947	4,295	140	
1948	3,762	74	
1949	3,497	95	
	18,935	557	
1950	3,292	78	23.9
1951	3,326	95	
1952	3,139	81	
1953	3,221	60	
1954	3,328	77	
	16,306	391	

TABLE VIII.

CAUSES OF DEATH IN EACH DISTRICT.

CAUSE OF DEATH.	URBAN DISTRICTS.										RURAL DISTRICTS.								Grand Total			
	Aldeburgh	Beccles	Bungay	Eye	Felixstowe	Halesworth	Leiston	Lowestoft	Saxmundham	Southwold	Stowmarket	Woodbridge	Total	Blyth	Deben	Gipping	Hartismere	Lothingland		Samford	Wainford	Total
All causes	38	103	52	19	183	30	45	476	19	38	62	73	1138	276	374	274	184	175	201	93	1577	2715
1. Tuberculosis, respiratory ...		1			2			5				1	9		4		1				5	14
2. Tuberculosis, other ...					1								1		1				1		2	3
3. Syphilitic disease ...								1					1		2			1			3	4
4. Diphtheria ...																						14
5. Whooping cough ...																						
6. Meningococcal infections ...																						
7. Acute poliomyelitis ...															1					1	1	1
8. Measles ...																				1	1	1
9. Other infective and parasitic diseases ...		1						1		1			3		1	2		1			4	7
10. Malignant neoplasm, stomach ...	2	1	3	2	4		1	15	1	1	2	4	36	3	12	7	5	4	2	2	35	71
11. Malignant neoplasm, lung, bronchus ...	1	2	2	1	5	2	1	21		1	2		38	3	3	7	4	5	2	4	28	66
12. Malignant neoplasm, breast ...	1	3			7			7	1	1		3	23	3	8	2	3	4	5	1	26	49
13. Malignant neoplasm, uterus ...		1			3			2		1			7	3		2	2	1		1	9	16
14. Other malignant and lymphatic neoplasms ...	2	12	7	3	22	3	1	45	2	6	3	6	112	20	35	26	20	23	19	6	149	261

[illegible]

TABLE IX.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE.

CAUSES OF DEATH.	SEX.	AGGREGATE OF URBAN DISTRICTS.									AGGREGATE OF RURAL DISTRICTS.								
		All Ages	0—	1—	5—	15—	25—	45—	65—	75—	All Ages	0—	1—	5—	15—	25—	45—	65—	75—
ALL CAUSES	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1. Tuberculosis, respiratory	M	548	16	2	2	2	28	133	158	207	849	24	4	3	9	31	137	209	432
	F	590	20	3	1		14	78	157	317	728	17	2	4	2	20	113	184	386
2. Tuberculosis, other	M	6					1	4	1		3					1	2		1
	F	3					2		1		2					1	1		
3. Syphilitic disease	M	1					1				1					1	1		
	F	—									2					1	1		
4. Diphtheria	M	—									1					2		1	
	F	—									—					—			
5. Whooping Cough	M	—									—					—			
	F	—									—					—			
6. Meningococcal infections	M	—									—					1			
	F	—									—					—			
7. Acute poliomyelitis	M	—									1								
	F	—									—								
8. Measles	M	—									—								
	F	—									—								
9. Other infective and parasitic diseases	M	3		1				2			2			1		1			
	F	—									2					1			
10. Malignant neoplasm, stomach	M	18				1	4	4	4	9	18					7	7	7	4
	F	18					7	5	6	6	17					5	5	6	7
11. Malignant neoplasm, lung, bronchus	M	32				2	14	14	14	2	22					1	8	7	6
	F	6					2	3	3	1	6					3	2	2	1
12. Malignant neoplasm, breast	M	2					1	8	4	2	1						9	6	3
	F	21					1	3	2	8	25					4	3	2	6
13. Malignant neoplasm, uterus	M	7					1	14	17	1	9					1	16	30	39
14. Other malignant and lymphatic neoplasms	M	59		1			4	18	15	23	90			1		4	23	15	18
	F	53					1	18	15	19	59					3	1	1	
15. Leukaemia aleukaemia	M	2						1	1	1	2								
	F	—									—								

II.

STAFF.

Medical Staff.

County Medical Officer: S. T. G. Gray, M.B., Ch.B., D.P.H.

Assistant County Medical Officers:

M. A. Dawson, M.B., Ch.B., D.P.H. (resigned 28.2.54).
 A. C. Gee, M.R.C.S., L.R.C.P., D.P.H.
 K. M. Harding, M.D., D.P.H.
 C. H. Imrie, T.D., M.B., Ch.B., D.P.H.
 J. B. Kershaw, M.B., Ch.B., D.P.H. (resigned 10.10.54).
 I. Sim, M.B., Ch.B., D.P.H.
 E. A. Parkinson, M.B., Ch.B., D.P.H. (part-time).
 G. E. Pryce, M.B., Ch.B., B.A.O. (part-time).
 J. F. Morrison, M.D., D.C.H. (part-time) (from 14.6.54).

Consultant Chest Physicians:

C. J. Stewart, M.D., B.S., D.Obst.R.C.O.G.
 I. M. Young, M.B., Ch.B.

Administrative Deputy to County Medical Officer and County Welfare Officer:

L. J. Bowling.

Nursing Staff.

County Nursing Officer:

Miss M. Vaughan Jones., S.R.N., S.C.M., H.V. Cert.

Deputy County Nursing Officer:

Vacant

Health Visitors:

At the end of the year, the staff of Health Visitors was 18 whole-time (2 of whom were holding combined appointments as district nurse/midwife-health visitor), and 2 part-time, and 1 whole-time Tuberculosis Health Visitor.

District Nurse/Midwives:

At the end of the year, 66 district nurse/midwives (including 2 who were also district nurse/midwives-health visitors), and 7 district nurses were being employed.

County Sanitary Staff.

County Sanitary Officer (seconded to Clerk of Council's Department as Officer in charge of Water Supplies and Sewerage Section):

A. E. Chapman, F.S.I.A.

Assistant County Sanitary Officers: I. W. Fenn, M.S.I.A. (died 8.1.54).

D. W. Copperwheat (died 8.1.54).

R. E. Law, M.S.I.A. (from 1.7.54).

Dental Staff.

Senior Dental Officer: C. D. Macpherson, L.D.S.

Dental Officers: J. E. Benfield, L.D.S.

Miss J. Hepburn, L.D.S.

Mrs. H. A. Bell, L.D.S.

District Medical Officers of Health.*Boroughs and Urban Districts:*

Aldeburgh	...	Dr. C. H. Imrie.
Beccles	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.
Bungay	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.
Eye	...	Dr. M. A. Dawson (resigned 28.2.54). Dr. K. M. Harding (from 1.4.54).
Felixstowe	...	Dr. C. H. Imrie.
Halesworth	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.
Leiston	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.
Lowestoft	...	Dr. A. C. Gee.
Saxmundham	...	Dr. D. W. Ryder Richardson.
Southwold	...	Dr. A. C. Gee.
Stowmarket	...	Dr. M. A. Dawson (resigned 28.2.54). Dr. K. M. Harding (from 1.4.54).
Woodbridge	...	Dr. C. H. Imrie.

Rural Districts:

Blyth	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.
Deben	...	Dr. C. H. Imrie.
Gipping	...	Dr. M. A. Dawson (resigned 28.2.54). Dr. K. M. Harding (from 1.4.54).
Hartismere	...	Dr. M. A. Dawson (resigned 28.2.54). Dr. K. M. Harding (from 1.4.54).
Lothingland	...	Dr. A. C. Gee.
Samford	...	Dr. M. A. Dawson (resigned 28.2.54). Dr. K. M. Harding (from 1.4.54).
Wainford	...	Dr. J. B. Kershaw (resigned 10.10.54). Vacant.

III.

NATIONAL HEALTH SERVICE ACT, 1946.

Section 21—Health Centres.

Action under this Section remains in a state of suspended animation, and there is nothing further to report at present.

Section 22—Care of Mothers and Young Children.**Infant Welfare Centres.**

Increased attendances at Carlton Colville, Southwold and Wattisham R.A.F. Camp Centres merited holding these Centres fortnightly instead of monthly, and a new Centre was started at Orford during the year. At

Bramford and Brantham, where ante- and post-natal clinics had been held for some long time, attendances declined so much that it was decided to cease examinations of that nature at these two Centres.

TABLE X.
Infant Welfare Centres.

Twice weekly.	Weekly.	Twice monthly.
Lowestoft (i) (a)	Aldeburgh Beccles Bungay Felixstowe (i) (a) do. (ii) Stowmarket (a) Woodbridge (a) Lowestoft (ii) (a) do. (iii)	Bramford Brantham Carlton Colville Claydon Eye Halesworth Kesgrave Leiston Southwold Wattisham R.A.F. Camp Wrentham Yoxford

(a) Centre also functions as ante-natal and post-natal clinic.

Monthly.

Belton	Laxfield
Blundeston	Lt. Bealings
Charsfield	Lound
Chelmondiston	Metfield
Copdock	Nacton
Corton	Needham Market
Debenham	Newbourne
Earl Soham	Orford
Farnham	Otley
Framlingham	Peasenhall
Friston	Saxmundham
Grundisburgh	Somerleyton
Hollesley	Somersham
Kessingland	Waldringfield
Kirton	Wenhaston
	Wickham Market

Summary of Attendances for 1954.

INFANT WELFARE CENTRES.

Centres provided.	Sessions per month.	No. of Children attending during year.	Total number of attendances made.
53	98	4,336	25,863

ANTE-NATAL AND POST-NATAL CLINICS.

<i>Clinics provided.</i>	<i>Sessions per month.</i>	<i>No. of Women attending during year.</i>	<i>Total number of attendances made.</i>
5	16	228—A 18—P	830—A 27—P

A=*ante-natal*. P=*post-natal*.

The valuable help of the voluntary workers who support these Infant Welfare and Weighing Centres is again gratefully acknowledged.

The Rhesus Factor.

In co-operation with the National Blood Transfusion Laboratory, arrangements for the examination of specimens of blood from expectant mothers attending ante-natal clinics continued, and reports were received on 35 specimens submitted.

Care of Unmarried Mothers and their Children.

Under arrangements made with the Moral Welfare Associations responsibility was accepted for the maintenance in Mother and Baby Homes of 32 unmarried mothers and they were admitted as under:—

St. Paul's Lodge, Gt. Yarmouth	...	...	6
Bedford Girls' Home, Bedford	...	...	6
Ely Diocesan Home, Cambridge	...	...	4
Sunnedon House, Coggeshall	...	...	4
Heigham Grove, Norwich	...	...	3
Salvation Army Home, Hackney, E.8.	...	...	3
St. Mary's Home, Stamford Hill	...	...	1
St. Joseph's Lodge, Grayshott	...	...	1
Beacon Lodge, East Finchley	...	...	1
The Haven, Yately, nr. Camberley	...	...	1
Methodist Home, Streatham	...	...	1
Salvation Army Home, Sapsworth House, E.5.	...	...	1

Care of Premature Infants.

As recommended in Circular 20/44, any infant weighing 5½ lbs. or less at birth is regarded as premature. Fully equipped cots are located in various parts of the county for use if the baby remains at home, or if transfer to hospital is necessary. Special follow-up visits are made to each infant to ensure that progress is maintained.

182 premature live-births were notified during the year, of whom 84 were born at home. Thirteen of these babies were transferred to hospital for treatment, and 4 of them survived beyond 28 days. The remaining 71 were nursed at home, and 64 of them survived.

Dental Care.

Most of the work summarised in the following table has been done by the two Lowestoft dental officers, but included in the totals is a small number (7 expectant/nursing mothers and 8 pre-school children) who have been treated by the other two dental officers.

TABLE XI.
Numbers provided with dental care.

	Examined	Needing treatment	Treated	Made dentally fit
Expectant/Nursing Mothers	15	15	22	10
Children under 5 ...	77	65	81	41

Forms of dental treatment provided.

	Extractions	Anaesthetics		Fillings	Scalings or gum treatment	Silver Nitrate treatment	X-rays	Dentures provided	
		Local	General					Complete	Partial
Expectant/Nursing Mothers	6	—	2	22	1	—	1	—	1
Children under 5	102	—	40	39	1	2	—	—	—

Nurseries and Child Minder's Regulations Act, 1948.

The first registration to be effected under this Act was made during the year, when after inspection approval was given for the reception of not more than 12 children in The Marian Nursery School, Combs, near Stowmarket.

Women's Welfare Clinic.

Slightly fewer patients attended the clinic in Ipswich—facilities for which are made available by the County Borough of Ipswich. 69 women visited for the first time during the year, and total attendances made numbered 139.

More patients attended the two clinics in Lowestoft—Connaught House and Southwell Road—conducted by Dr. Sim. 127 women made 188 visits during the year.

Welfare Foods.

In April, 1954, the Department was given comparatively short notice that it was to take over the whole distribution arrangements of welfare foods. This obviously entailed a heavy addition to the work of the department, which at no time had a surfeit of staff. No good purpose would be served now by reviving criticism of the way in which this additional work was placed on local health authorities, and the fact that the transfer of functions could have been made much more easily. It is enough to say that many real difficulties were overcome solely through the keenness and willingness of the staff to work long hours in order to ensure a smooth transition and, above all, the ready co-operation which was shown by individuals who have long been responsible for distribution in the villages, various voluntary organisations of which special reference should be made to the Women's Voluntary

Service, and also in one or two cases by District Councils whose help was sought.

The distribution of welfare foods is still a necessary part of the work in relation to the care of mothers and young children, but the "paper work" involved is considerable and it is perhaps not possible to have the same enthusiasm for this work at the present time when there is a much more ready availability of adequate foods and vitamin sufficiency than applied in the war and early post-war years.

A precis of the return made for the last six months of 1954 showed that there were at the end of December 182 distribution centres, and that during the period issues (in round figures) had been made as follows:—

National Dried Milk (tins)	...	...	52,700
Orange Juice (bottles)	...	...	68,100
Cod Liver Oil (bottles)	...	...	14,900
Vitamin A & D (packets)	...	...	4,000

Section 23—Midwifery.

During the year the Council's midwives attended 1,058 patients as midwives, and 730 patients as maternity nurses.

Of the total of 1,788 confinements attended, in 105 instances only was a doctor not booked.

Medical aid under the Midwives' Act was summoned in 89 cases.

Gas/Air Analgesia.

Analgesia was administered at 1,559 domiciliary confinements; in 900 cases by midwives acting in that capacity, and in 659 cases by midwives acting as maternity nurses.

Pethidine was given to 553 patients by midwives acting as such, and to 481 patients by midwives acting as maternity nurses.

Housing Programme.

In contrast to the past three years, it is at last possible to report some real progress in the provision of midwives' houses. Building was begun on three sites—at Hollesley (1950/51 programme), at Kesgrave (1951/2), at Mendlesham (1952/53); and at Tunstall (1952/3) a tender had been accepted and the site was ready for the builder. Certainly in respect of the first two named, delays have seemed interminable, but subject to any other unforeseen circumstance, 1955 should see these four projects completed and occupied.

Refresher Courses.

Four midwives attended refresher courses during the year.

Registration of Nursing Homes.

For the first time, the Council had to exercise the powers contained in Section 188(1) of the Public Health Act, 1936 and cancel the registration of the Chatsworth Nursing Home, Felixstowe, which was without adequate nursing staff.

Registration as a Home for Old People under the National Assistance Act, 1948 in respect of Otley Hall, Otley was cancelled, and the premises were registered as a nursing home for the reception of not more than 9 people.

At 31st December, the following premises remained registered:—

<i>Name.</i>	<i>Number of beds available.</i>		
	<i>Maternity</i>	<i>Other</i>	<i>Total</i>
St. Monica's, Felixstowe ...	1	—	1
Lyncote, Felixstowe ...	2	—	2
Orme House, Lowestoft ...	2	7	9
Otley Hall, Otley ...	—	9	9
Field Stile, Southwold ...	—	8	8
	—	—	—
	5	24	29
	—	—	—

Section 24.—Health Visiting.

TABLE XII.

Summary of visits made
(excluding School Health Service visits).

	<i>1st Visit.</i>	<i>Total Visits.</i>
Expectant mothers ...	486	620
Children under 1 ...	3,480	20,281
Children over 1 but under 2 ...	—	10,453
Children over 2 but under 5 ...	—	20,329
Tuberculosis households ...	—	2,633
Other visits ...	—	1,362

Student Health Visitors.

Scholarships were awarded to two candidates, one of whom was a nurse-midwife on the Council's staff. At the successful conclusion of their studies, both these candidates will return to take up combined health visitor/district nurse-midwife areas.

Refresher Courses.

One health visitor attended a refresher course during the year.

Problem Families.

Emphasis on the role to be played by health visitors was given in Ministry of Health Circular 27/54, and comment on this and the health visiting services generally is given in the preamble to this report.

Tuberculosis Health Visitor.

Miss R. V. Stiles, one of the Council's Health Visitors, was appointed whole-time Tuberculosis Health Visitor attached to the Lowestoft Chest Clinic with effect from 18th October, 1954.

During the ten weeks remaining to the end of the year she made visits to 123 households.

Section 25. Home Nursing.

Except in Lowestoft where 8 nurses were employed whole-time in this service, home nursing was provided by the district nurse/midwives.

TABLE XIII.

Summary of visits made.

			<i>Patients attended.</i>	<i>Total visits.</i>
Medical	...	...	3,610	81,579
Surgical	...	...	1,470	25,324
Infectious Diseases	...	...	6	24
Tuberculosis	...	...	49	1,142
Maternal complications	...	...	53	318
Other	...	...	265	4,803

Except in the indefinite "other", under which heading an increase was recorded, the number of patients seen and visits made remained substantially the same as in previous years. Nursing care of the aged in their own homes again absorbed an appreciable amount of the nurses' time; of 5,453 total patients seen, 3,692 were aged 65 or more, and 32,097 visits were made to them out of a total number of 113,190 visits.

Section 26—Vaccination and Immunisation.

Vaccination.

TABLE XIV.

Number of Persons Vaccinated (or Re-vaccinated) during year.

<i>Age at date of vaccination.</i>	<i>Under 1</i>	<i>1</i>	<i>2-4</i>	<i>5-14</i>	<i>15 or over</i>	<i>Total.</i>
Primary ...	1,155	562	99	70	120	2,006
Re-vaccination	—	—	26	83	300	409

Diphtheria Immunisation.

TABLE XV.

Number of children at 31st December 1954 who had completed a course of immunisation at any time before that date (i.e. at any time since 1st January, 1940).

Age at 31.12.54 i.e., born in year	Under 1 1954	1—4 1953-50	5—9 1949-45	10—14 1944-40	Under 15 Total
Last complete course of injections (primary or booster)					
A. 1950-1954 ...	420	8,879	9,953	2,535	21,787
B. 1949 or earlier ...	—	—	4,002	3,468	7,470
Estimated mid-year child population ...	3,310	13,090	34,800		51,200
Immunity Index ...	12.69	67.83	35.89		42.55

The immunity index included in this year's statistics is designed to show a percentage of children considered to be in a state of immunity, i.e., those who have completed a course of immunisation during the past five years.

In arriving at the index figures in the columns 5 to 9—10 to 14, and total, the index is obtained by expressing the figures in line A as a percentage of the estimated mid-year child population.

Section 27—Ambulance Service.

TABLE XVI.

Ambulances.

Summary of Mileage, Journeys and Patients Carried.

<i>Month.</i>	<i>Total Miles.</i>	<i>No. of Journeys.</i>	<i>No. of Patients Carried.</i>
January ...	20,172	712	1,390
February ...	19,225	635	1,308
March ...	19,960	713	1,457
April ...	20,317	671	1,384
May ...	21,984	736	1,551
June ...	18,622	712	1,443
July ...	20,619	725	1,343
August ...	18,118	617	1,408
September ...	20,069	625	1,398
October ...	21,591	710	1,489
November ...	19,559	656	1,466
December ...	20,974	696	1,449
	<hr/> 241,210 <hr/>	<hr/> 8,208 <hr/>	<hr/> 17,086 <hr/>

TABLE XVII.

Hospital Car Service.

Summary of Mileage, Journeys and Patients Carried.

<i>Month.</i>	VOLUNTARY CAR POOL.			C.C. SITTING CASE CAR.		
	<i>Total Miles.</i>	<i>No. of Journeys.</i>	<i>No. of Patients Carried.</i>	<i>Total Miles.</i>	<i>No. of Journeys.</i>	<i>No. of Patients Carried.</i>
January	34,159	935	2,244	3,232	73	120
February	32,996	956	2,290	3,655	86	139
March	38,188	1,093	2,687	3,374	91	131
April ...	35,648	964	2,415	3,832	68	110
May ...	37,091	1,015	2,561	3,488	104	178
June ...	37,169	1,035	2,608	3,105	88	126
July ...	40,176	1,081	2,587	3,836	78	114
August	38,265	942	2,416	3,277	66	86
September	38,750	1,023	2,568	2,953	80	118
October	40,707	1,034	2,464	2,287	83	113
November	37,242	951	2,485	2,722	86	129
December	32,714	830	2,071	1,870	55	82
	<hr/> 443,105 <hr/>	<hr/> 11,859 <hr/>	<hr/> 29,396 <hr/>	<hr/> 37,631 <hr/>	<hr/> 958 <hr/>	<hr/> 1,446 <hr/>
Total Mileage ...	...	...	...	...	480,736	
„ Journeys ...	...	...	...	...	12,817	
Average Monthly Mileage	...	...	...	...	40,061	
„ Miles per Journey	...	...	...	...	37.5	

Section 28—Prevention of Illness, Care and After-care.

TABLE XVIII.

Tuberculosis Register, 1954.

		<i>Pulmonary</i>	<i>Non-pulmonary</i>
Cases on Register at 1.1.54	...	891	352
New (Primary) Notifications during 1954	...	95	38
Inward transfers and cases restored to register in 1954	...	52	4
Total	...	1038	394

Cases written off register in 1954:

	<i>Pulmonary</i>	<i>Non-pulmonary</i>		
Non-tuberculous	4	2		
Died	8	2		
Recovered	26	23		
Removed or lost sight of	49	7		
Total	87	34	87	34
Cases remaining on register at 31.12.54	...	...	951	360

B.C.G. Vaccination.

Reports were received from the Consultant Chest Physicians on 186 persons successfully vaccinated during the year.

Provision of Milk.

At 31st December, 86 patients (44 in Lowestoft) were being helped under the scheme for the provision of one pint of milk daily free to tuberculosis patients on recommendations made by the Consultant Chest Physicians or the Council's health visitors.

Provision of Nursing Equipment.

The medical loans depots organised under the auspices of the St. John Ambulance Brigade and the British Red Cross Society—and manned by their voluntary personnel, whose help is gratefully acknowledged—have continued to work satisfactorily.

Section 29—Home Help Service.

At 31st December, 211 part-time workers (24 more than in 1953) were being employed, and the types of cases to which help has been given during the year was as follows:—

(i) Maternity (including expectant mothers)	...	253
(ii) Tuberculosis	...	11
(iii) Chronic sick, including aged and infirm	...	369
(iv) Other	...	45

More women were employed to give help to many more households than in the previous year, and this, coupled with increased wages for Home Helps, has meant that expenditure has reached a new high level.

Sections 28 and 51—Mental Health.

Administration.

No special Sub-Committee has been appointed to deal with the work relating to Mental Health and the work has been delegated to the Health Services Sub-Committee of the Health Committee.

Staff.

The County Medical Officer and the Assistant Medical Officers are all approved for the purpose of giving certificates under Section 5 of the Mental Deficiency Acts, 1913. They also carry out other medical examinations as in the ascertainment of cases. The County Medical Officer is approved by the Minister to give recommendations under Section 5 of the Mental Treatment Act, 1930.

The supervision of boys up to the age of 16 years and girls up to the age of 20 years under Statutory Supervision has, since the middle of the year, been carried out by the County Council's health visitors.

The supervision of the remainder of the patients under Statutory Supervision and of those under Friendly Supervision is given by the welfare officers of the County Council.

The male welfare officers of the County Council are appointed as duly authorised officers under the Lunacy and Mental Treatment Acts. Members of the staff of the Health Department are also authorised to act and do so when a welfare officer is not available. Home teaching under the Mental Deficiency Acts is given by those welfare officers who are qualified home teachers.

Co-ordination with Regional Hospital Boards and Hospital Management Committees.

The following arrangements obtain:—

1. With the Management Committee of the Royal Eastern Counties Hospital, Colchester, which is in the area of the North-East Metropolitan Regional Hospital Board for the supervision by the officers of the Council of patients on licence from the hospital, and for the provision of the necessary reports upon the home circumstances of patients.
2. With the East Anglian Regional Hospital Board for the supervision of patients on licence from hospitals in the Hospital Board's area, and for the provision of reports on home circumstances.

Admissions to Mental Hospitals.

During the year the duly authorised officers attended on the admission of 50 male and 114 female patients to mental hospitals, as follows:—

<i>Under the Lunacy Acts:</i>		<i>Males</i>	<i>Females</i>	<i>Total</i>
On certification	...	24	69	93
On "three day" Orders under				
Section 20	...	1	4	5
Under Criminal Justice Act	...	—	1	1
<i>Under the Mental Treatment Act:</i>				
As voluntary patients	...	25	39	64
As temporary patients	...	—	1	1
		50	114	164

The duly authorised officers have given help in the cases of a number of patients discharged from mental hospitals where it was felt that after-care and assistance in coping with the problems involved in returning to normal community life were necessary.

Mental Deficiency Acts.

Admissions to Hospitals.

During the year arrangements were made for the admission of 12 male and 4 female patients. The numbers remaining on the waiting list on 31st December, 1954 were 17 males and 20 females.

During the year 14 males and 10 females were admitted for periods of temporary care.

Supervision.

The numbers under supervision on 31st December, 1954 were:—

			<i>Males</i>	<i>Females</i>
Statutory Supervision	...	...	135	131
Friendly Supervision	...	...	38	37

Occupation Centres.

The Lowestoft Occupation Centre continues most successfully as a full-time one with meals provided by arrangement with the Local Education Authority. At the end of the year there were 12 boys and 7 girls in attendance.

Two girls and 1 boy were attending the Ipswich Occupation Centre by arrangement with the Ipswich Mental Welfare Association.

Home Training.

On 31st December, 1954, 12 males and 39 females were receiving home training.

The training class at Ipswich continues to be held on alternate Thursday afternoons and at the end of the year it was attended by 1 boy and 17 girls.

Three male and 4 female patients attend a weekly handicraft class at Lowestoft.

Ascertainment.

During the year 31 new cases (18 males and 13 females) were ascertained.

Guardianship.

There are 2 males and 3 females of East Suffolk origin under Guardianship.

IV.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supplies and Sewerage.

This section of the report has been prepared by the County Sanitary Officer, who is responsible for examining and reporting upon schemes of water supply and sewerage submitted for the approval of the County Council for financial assistance.

Water Supplies.

Considerable progress has been made during 1954 in the construction of the major regional water supply schemes for the various Rural Districts. The Deben Rural District Council have virtually completed their schemes and those of the Blyth and Hartismere Rural District Councils are entering the final stages. Work is proceeding in all the other districts.

During the year 117 miles of water mains were laid, and already about 66 per cent. of the ultimate network of mains has now been completed. The following table shows the position with regard to each Rural District.

TABLE XIX.

District	Length of Water Mains in Miles.				Proportion of Ultimate Network completed
	Pre 1945	1946 to 1954	Approved Proposals	Ultimate Network	
Blyth	12	120	29	161	82%
Deben (incl. Stat. areas)	85	87	2	174	99%
Gipping	35	22	125	182	31%
Hartismere	65	97	49	211	77%
Lothingland (incl. Stat. areas)	23	21	32	76	58%
Samford	13	31	47	91	48%
Wainford	5	38	47	90	48%
Totals	238	416	331	985	66%

Very good progress has also been made on the headworks and water towers of the various schemes. In the Blyth Rural District the Walpole pumping station has been completed and tested and will start to function early in 1955. The building of the Barsham pumping station for the Barsham Bores Joint Water Committee is nearing completion and the installation of the machinery has started. Work is about to start on the Raydon headworks in the Samford Rural District, and it is hoped that work will also be put in hand on the Redgrave headworks for Hartismere Rural District Council. At the Pettistree pumping station in Deben District work is well advanced on the provision of additional plant for the treatment of the water. Work has also been completed, or is nearing completion, on water towers at Sibton, Blythburgh, Framlingham, Dennington and Saxmundham in the Blyth Rural District, at Shadingfield in Wainford District and at Raydon in the Samford District.

Sewerage.

The provision of schemes of sewerage and sewage disposal has not progressed as water schemes have done, due not to the lack of need but to restrictions on capital expenditure.

Two schemes were completed during the year but only two others have been started. The following summary shows the present position with regard to those schemes which were scheduled in the Programme of Sewerage Development for the County for the period 1951-55.

Scheme.	State of Progress.
Alderton—Deben Mendlesham—Hartismere Bradwell Kessingland (part) } Lothingland Shotley—Samford	Completed.
Debenham—Gipping Fressingfield & Weybread—Hartismere	Under construction.
Kelsale—Blyth Haughley—Gipping Hopton Kessingland (remainder) } Lothingland Brantham—Samford	Starting date granted for 1955.
Melton—Deben Bramford Needham Market } Gipping Stowupland Palgrave—Hartismere Carlton Colville } Lothingland Wrentham East Bergholt } Samford Holbrook Sroughton	Approved in principle and awaiting starting dates.
Framlingham—Blyth Yaxley—Hartismere	Awaiting result of Ministry Inquiry.
Botesdale } Hartismere Hoxne	Awaiting Ministry Inquiry.
Thorpeness—Blyth Kesgrave & Martlesham } Deben Kesgrave & Rushmere Grundisburgh Chelmondiston—Samford	Schemes not yet submitted.

It will be noted that of the 30 schemes scheduled for this period there are 10 which have been fully approved but await sanction to proceed. It is hoped that a wider programme of construction of sewerage schemes may be sanctioned during 1955.

Housing.

The provision of new houses, repair of old ones and the demolition of those considered unfit for habitation give rise to problems the solution of which in recent years has been difficult and sometimes impossible. Much has been done by District Councils to improve housing conditions, but it is evident that many families are still occupying unsatisfactory houses.

The position is obviously realised by the Ministry and in the Housing Repairs and Rents Act, 1954, Local Authorities have been asked to submit proposals for dealing with unfit houses.

It is to be hoped that with the passing of the new Act and the gradual improvement in the housing situation, work on slum clearance will increase in the near future.

Work carried out by the various local authorities is shown in the following tables.

TABLE XX (a).

Summary of Housing Activities of Rural Districts.

	Rural District.					
	Blyth.	Deben.	Gipping.	Hartismere	Lothingland	Samford.
A. Existing Houses.						
(1) Houses inspected for all purposes ...	241	227	63	115	294	38
(2) Houses in which sanitary defects were found ...	126	203	41	76	181	34
(3) No. rendered fit—by informal action ...	88	203	34	18	46	17
(4) No. of dwellings in respect of which Statutory notice served under Public Health Act ...	—	—	2	1	13	3
(5) No. of dwellings in respect of which Statutory Notice served under Housing Acts ...	—	—	—	—	—	—
(6) No. of dwellings in respect of which Demolition Orders were made either as—	—	—	—	—	—	—
(a) Individually unfit ...	—	—	5	1	8	2
(b) In Clearance areas ...	—	—	—	—	—	—
(7) No. of houses demolished in pursuance of Orders made under 5(a) or 5(b) above ...	—	9	2	6	4	12
(8) Houses occupied on 31.12.54 in respect of which Demolition or Clearance Orders have been made ...	64	18	6	1	8	10
(9) Overcrowding						
No. of houses overcrowded at end of year ...	7	Not known	22	Not known	Not known	Not known
No. of cases of overcrowding relieved during year ...	4	11	4	—	—	6
B. New Houses.						
(1) No. of New Houses completed by Local Authorities during 1954 ...	94	116	62	42	78	110
(2) Total No. of permanent houses and flats owned by Councils on 31.12.54	842	1051	966	770	599	544
(3) Housing Act, 1949						
No. of applications for grants ...	73	61	18	27	22	24
No. of applications approved during year ...	73	43	6	27	12	22

TABLE XX (b).

Summary of Housing Activities in Boroughs and Urban Districts.

	Alde burgh M.B.	Beccles M.B.	Bungay U.D.C.	Eye M.B.	Felix- stowe U.D.	Hales- worth U.D.	Leiston U.D.	Lowes- toft M.B.	Sax- mundm U.D.	South- wold M.B.	Stow- market U.D.	Wood- bridge U.D.
1. Houses inspected for all purposes	105	327	62	20	76		194	1,880	25	85	50	—
2. No. found to be unsatisfactory	36	41	32	3	28		187	122	11	25	45	—
3. No. rendered fit:												
(a) By informal action	30	41	12	—	25		26	145	1	23	30	11
(b) By action under Public Health Act	1	—	—	—	—		—	1	—	—	—	—
(c) By action under Housing Act	—	—	—	3	3		—	48	—	—	12	—
4. No. of Demolition Orders secured	—	2	8	3	—		—	3	—	—	—	—
5. No. of dwellings included in Clearance Orders secured	—	—	—	—	—		—	—	—	—	—	—
6. No. of dwellings demolished under Demolition Orders	—	6	8	—	—		—	8	—	—	—	—
7. No. of dwellings demolished under Clearance Orders	—	—	—	—	—		—	—	—	—	—	—
8. No. of cases of Overcrowding relieved during 1954	—	2	9	1	No record		1	4	—	1	2	—
9. No. of cases of Overcrowding known to exist at the end of 1954	—	2	—	—	—		1	6	—	—	—	—
10. No. of new houses erected:												
(a) by Local Authority	12	61	23	8	107		17	150	14	6	—	38
(b) by Private Enterprise	13	5	4	1	68		4	95	4	4	37	18

Return not made as during the greater part of 1954 the post of Sanitary Inspector was vacant.

Inspection and Supervision of Food.

Food Inspection.

(a) Meat.

In this respect, 1954 will be remembered for the de-control of meat and the ending of meat rationing after 14 years of control by the Ministry of Food. The ending of rationing was undoubtedly an event welcomed by everyone, but I doubt if it was generally realised that the responsibility to provide adequate slaughtering facilities was placed, without too much warning, on local authorities. As a result many County District Sanitary Inspectors found themselves faced with a greatly increased meat inspection problem; in this county at the end of the year there were 58 licensed slaughterhouses. That the change-over took place as smoothly as it did was a matter for some congratulation to the Inspectors concerned.

It has meant, however, that the standard of inspection has been uneven. Not only has the number of slaughterhouses licensed varied from District to District, but not all the Inspectors have the advantage of possessing the additional qualification in Meat and Food Inspection.

The following table gives an indication of the amount of work carried out in this connection during the year.

Inspection of Meat for Human Consumption.

	Cattle (including Calves)	Sheep	Pigs
Number of Animals Inspected ...	10,878	8,778	27,259
Whole Carcases Condemned:			
Tuberculosis ...	178	—	25
Other causes ...	58	12	83
Carcases of which some part or organ was Condemned:			
Tuberculosis ...	1,505	—	696
Other causes ...	2,867	96	1,537

(b) Other Food and Food Premises.

In addition to the meat inspection service, very large quantities of other food were found on inspection to be unfit for human consumption, including such divers articles as tinned goods, cheese and fish.

A great deal of attention has also been paid to Food Premises; more than 4,000 inspections were made, 131 premises were found to be unsatisfactory of which 104 were rendered satisfactory by informal action. Nearly 600 Ice Cream premises are registered in the county, though in 16 cases only is the product actually manufactured; an indication of a trend in this trade over the past few years which has been welcomed in many ways from the public health view.

Food and Drugs.

During 1954 the total number of samples taken for analytical examination was 237; of these 48 proved unsatisfactory, giving an overall adulteration figure of 20%.

Milk.

Total number of samples taken	...	...	119
Number submitted to Public Analyst	...	...	39
Number unsatisfactory by reason of—			
(1) Fat content below required standard	...	...	9
(2) Solids not fat content below required standard	...	...	14
(3) Fat and Solids below required standard	...	...	18
Adulteration figure	...	...	34.4%
Number found to contain added water	...	...	15

Other Food.

Total number of samples taken	...	...	118
Number submitted to Public Analyst	...	...	116
Number unsatisfactory	...	...	4
Adulteration figure	...	...	3.4%

Drugs.

Total number of samples taken	...	...	12
Number submitted to Public Analyst	...	...	12
Number unsatisfactory	...	...	1
Adulteration figure	...	...	8.3%

Details of Unsatisfactory Samples.

Sample No.	Nature of Sample.	Nature of Adulteration	Result of Action
J.43	Milk ...	24.5% added water	Fined £2 on each charge with £4 9s. 6d. costs.
J.44	Milk ...	31.6% added water	
J.45	Milk ...	20.0% added water	
J.46	Milk ...	11.2% added water	
J.47	Milk ...	26.2% added water	
J.48	Milk ...	16.8% added water	
J.49	Milk ...	29.0% added water	
J.50	Milk ...	21.9% added water	
J.51	Milk ...	14.6% added water	
J.52	Milk ...	4.7% added water	
J.53	Milk ...	13.5% added water	Fined £2 with £4 19s. 0d. costs.
J.85	Milk ...	11.2% added water	
F.133	Non-alcoholic port flavour wine ...	Label seriously misleading ...	Vendor (Market Stall holder) warned verbally.
F.134	Fruits for salad in syrup ...	Label seriously misleading ...	Vendor (Market Stall holder) warned verbally.
L.25	Beef and Vegetable Weaning Food ...	Misleading 'description' ...	Letter sent to Manufacturer who agreed to amend label.
L.87	Milk Chocolated Raisins ...	Prepared from separated milk.	Formal sample taken.
L.96	Gelatine ...	Excess of lead present	Formal sample taken, subject to later legal proceedings.
L.100	Milk Chocolated Raisins ...	Prepared from separated milk ...	Manufacturers notified and have agreed to alter their recipe.
L.10	Sting Lotion ...	52% deficient in ammonia ...	Letter sent to Manufacturer. Stocks withdrawn.

General.

The adulteration figure for milk is extremely high, due to the fact that owing to unavoidable staff difficulties routine sampling was not carried out on the same scale as in previous years.

Throughout 1954 the composition of a sausage continued to be a matter for speculation both in Parliamentary and Local Government circles. Cases have been heard in various Courts, and generally speaking, it has been held that it is reasonable to expect a meat content which complies with the original legal standards repealed in February, 1953 (i.e., 65% of meat for pork sausages and 50% for beef sausages). The Minister of Food stated during the year that he did not feel that the re-introduction of compulsory standards was justified, but he would keep the position under review.

Twenty samples of pork sausages and 3 samples of beef sausages were taken during the year and the average meat content and prices are as follows.

		Average Meat Content	Average Price per lb.
Pork Sausages	...	76.25%	2/7
Beef Sausages	...	69.5%	2/4

These figures compare very favourably with the averages for the country for 1953-4 revealed by the Minister in July, 1954.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

Eight Dealers' (Pasteurisers') Licences were in force at the beginning of the year; one licence was surrendered in October and one issued in October.

On 1st October, 1954, Regulations came into force requiring pasteurised milk to be bottled at the premises of pasteurisation. As a result one licence holder, United Dairies (Wholesale) Ltd., Halesworth, ceased to pasteurise milk.

The one additional licence was issued in respect of Devonshire Dairy, Beccles. The low temperature plant installed in these premises has proved quite satisfactory.

During the year 129 samples of pasteurised milk and 74 samples of Tuberculin Tested (Pasteurised) milk were taken and a summary of results of statutory tests carried out is given in the following table.

Designation.	Test.	No. of Samples	
		Passed	Failed.
Pasteurised	Phosphatase ...	128	1
	Methylene Blue ...	116	5
Tuberculin Tested (Pasteurised)	Phosphatase ...	71	3
	Methylene Blue ...	64	6

The failures to pass the prescribed tests were distributed between 4 only of the dairies as follows:

Dairy.	Type of Plant.	No. of samples failed.	
		Phosphatase.	Methylene Blue.
A.D. ...	Holder ...	1	4
H.F.D. ...	Holder ...	3	1
S.D. ...	Holder ...	—	5
C.F.D. ...	Holder ...	—	1

Cleaning and Sterilisation.

Swabs were taken from the surfaces of pasteurising apparatus of all licensed plants during the year. On the whole this procedure revealed a very satisfactory state of affairs; where the swabs indicated that certain equipment was not being adequately sterilised, sterilising practices were improved, with the full co-operation of the dairymen concerned.

Specimens of washed bottles were also taken and these were generally satisfactory.

Biological Examination of Milk.

During the year 123 samples of milk were taken for biological examination. No samples were found to contain tubercle bacilli, 5 samples were found to contain brucella organisms.

In all these cases the District Medical Officers were informed and the milk was diverted for heat treatment.

Milk Production—General.

The number of Registered Dairy Farms in the county at the end of 1954 was 1,463, slightly more than those so registered at the end of 1953, viz., 1,457.

There was a very marked increase in the number of licensed T.T. producers, the number so licensed at the end of the year being 1,004; 244 more than the previous year.

During the year the designation Accredited was abolished, the only raw milk designation now being Tuberculin Tested.

Tuberculosis Order, 1938.

The following figures relate to the number of cows slaughtered under the Order during the year and are supplied by the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries.

Chronic cough and definite clinical signs	...	—
Tuberculosis with emaciation	...	—
Tuberculosis of the udder or excreting tubercle bacilli	...	4

Specified Areas.

At the end of 1954 there was still no part of the county included in a Specified Area; our observations had been requested, however, on the inclusion of 2 small areas in the north of the county in the proposed Norwich and Norfolk area, and I am optimistic that in the near future the bulk of the county will be so scheduled.

Provision of Milk for School Children.

A full report is contained in my report as School Medical Officer for the year. At the end of the year only one school in the county was receiving non-designated milk.

Rats and Mice Destruction.

During the year a great deal has been done in the county in attempts to clear infestations of rats and mice. 5,470 dwelling houses and 623 other premises have been treated.

Refuse Collection and Disposal.

In the urban areas weekly collection services have been carried out with a few exceptions: in the rural districts fortnightly or monthly services have been maintained. Disposal of refuse is mainly by tipping; destructors are available only in two districts.

V

PREVALENCE OF, AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

TABLE XXI.

Notifications of Infectious Diseases.

Infectious Disease.	Number of cases notified	Number of deaths.
Scarlet Fever	234	—
Whooping Cough	803	—
Poliomyelitis—paralytic	9	1
do. —non-paralytic	6	—
Measles	1,210	—
Diphtheria	1	—
Pneumonia	121	83
Dysentery	10	—
Smallpox	—	—
Encephalitis—infective and post infective	—	—
Enteric or typhoid fever	1	—
Paratyphoid fever	—	—
Erysipelas	14	—
Meningococcal infection	2	—
Food poisoning	33	—
Puerperal pyrexia	59	—
Ophthalmia neonatorum	—	—
Infective hepatitis	13	—
Malaria	1	—

VI.

EPILEPTICS AND SPASTICS.

Details of the general arrangements and work undertaken in relation to epileptics and spastics was given in last year's Report. Those engaged in the outside health and welfare work of the department are very mindful of the desirability of ensuring that the varying needs of the epileptic and spastic are brought to notice and met wherever possible, but otherwise the development of the work has continued on the same lines.

VII.

BLIND PERSONS.

(a) Retrolental Fibroplasia in Premature Infants.

(b) Ophthalmia Neonatorum.

No such cases were reported during the year.

(c) Registered Blind and Partially Sighted Persons.

	Cause of Disability.			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends:—				
(a) No treatment ...	21	2	—	23
(b) Treatment (medical, surgical or optical)	12	—	—	21
Number of cases at (b) above which on follow-up action have received treatment ...	7	—	—	20

Seventy-nine patients were newly registered during the year, the greater number of whom were not recommended for treatment. Of the 12 recommended for treatment for cataract, 5 either refused this or were considered—for medical reasons—unlikely to benefit therefrom.

1. The following are the names of the persons who have been appointed to the various committees of the Council of the East Anglian Daily Times Co. Ltd. for the year 1911-12:
- (a) Editorial Committee: Mr. J. H. Smith, Mr. J. H. Jones, Mr. J. H. Brown, Mr. J. H. White, Mr. J. H. Black, Mr. J. H. Green, Mr. J. H. Grey, Mr. J. H. Gold, Mr. J. H. Silver, Mr. J. H. Copper, Mr. J. H. Lead, Mr. J. H. Tin, Mr. J. H. Zinc, Mr. J. H. Iron, Mr. J. H. Steel, Mr. J. H. Nickel, Mr. J. H. Cobalt, Mr. J. H. Nickel, Mr. J. H. Cobalt, Mr. J. H. Nickel, Mr. J. H. Cobalt.
 - (b) Finance Committee: Mr. J. H. Smith, Mr. J. H. Jones, Mr. J. H. Brown, Mr. J. H. White, Mr. J. H. Black, Mr. J. H. Green, Mr. J. H. Grey, Mr. J. H. Gold, Mr. J. H. Silver, Mr. J. H. Copper, Mr. J. H. Lead, Mr. J. H. Tin, Mr. J. H. Zinc, Mr. J. H. Iron, Mr. J. H. Steel, Mr. J. H. Nickel, Mr. J. H. Cobalt, Mr. J. H. Nickel, Mr. J. H. Cobalt, Mr. J. H. Nickel, Mr. J. H. Cobalt.
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EAST SUFFOLK COUNTY COUNCIL



ANNUAL REPORT
OF THE
County Medical Officer

1954

HEALTH DEPARTMENT
COUNTY HALL
IPSWICH