

[Report 1953] / Medical Officer of Health, Epsom & Ewell Borough.

Contributors

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Publication/Creation

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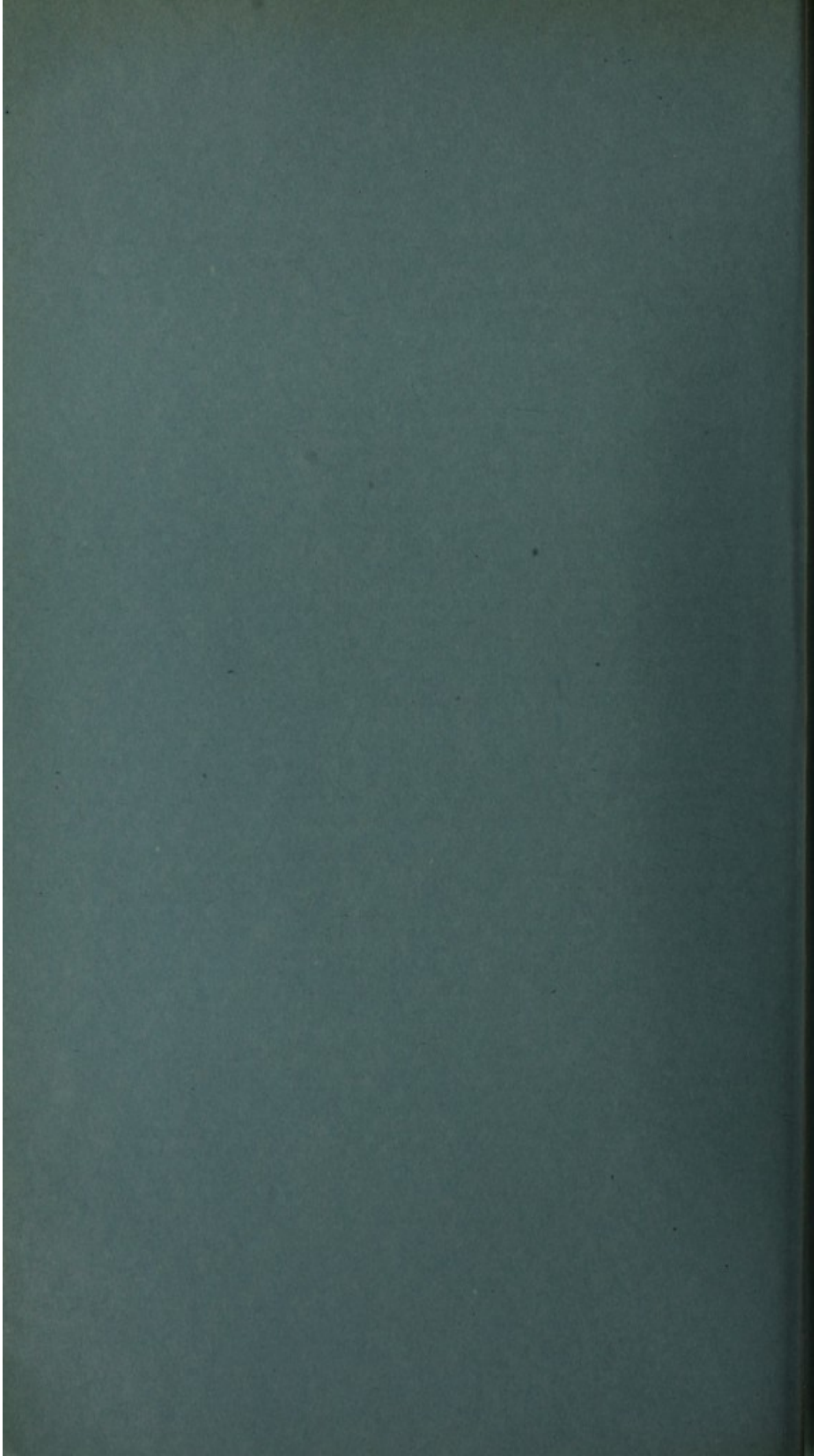
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Borough of Epsom and Ewell.



ANNUAL REPORTS
of the
MEDICAL OFFICER OF HEALTH
and of the
CHIEF SANITARY INSPECTOR
for the year
1953
-----oOo-----



Public Health Department,
West Hill House,
West Hill,
Epsom, Surrey.

July, 1954.

To the Mayor, Aldermen and Councillors
of the Borough of Epsom and Ewell.

Ladies and Gentlemen,

I have the honour to submit an Annual Report for the year 1953, which has been prepared in accordance with the Ministry of Health Circular 1/54. Under the same cover will be found the Annual Report of the Chief Sanitary Inspector.

The first section of the report deals with vital statistics. Two factors make it necessary to devote more space than usual to this section. In the first place, the report of the Registrar General on the 1951 Census as relating to the County of Surrey has been published and contains much important detail. Figures of special interest to this district have been abstracted, and comparisons have been made with conditions found at the Census taken in 1931. In the second place, a ruling of the Registrar General on the assignment of transferable deaths has had a profound effect on local figures, almost doubling the general death rate and the death rate from tuberculosis. These results are caused by the unusual concentration of hospitals in the Borough.

Section 2 is largely a repetition of the contents of previous reports, setting out briefly details of the local health services. One new item gives particulars of the opening of an infant welfare centre on the Wells Estate in a building erected by the Council.

In section 3 two items of great interest to public health are mentioned. One is the extension of sewers and water mains on the Downs, so that the much needed provision of sanitary arrangements for visitors to race meetings and for others taking recreation there should materialise in the coming year. The other item relates to the Hogsmill Valley Joint Drainage Scheme, work on which has now commenced. When completed this scheme will bring about a great improvement in environmental conditions for those areas of the district in the vicinity of the sewage works or traversed by the Hogsmill stream.

Section 6 is devoted to the incidence of infectious diseases and the steps taken with a view to their prevention. Among other items it includes a short account of outbreaks of food poisoning in schools due to a supply of contaminated dried milk and to a small but dangerous outbreak of poliomyelitis among schoolchildren which appears to have been terminated abruptly by the prompt decision of the owners to close the school until further risk of infection had passed.

1890
1891
1892

1893

of the year, January and February
of the month of March and April.

London and Baltimore

The first part of the report is devoted to a general survey of the country of the United States and its population, and to a description of the principal cities and towns. The second part is devoted to a description of the principal rivers and streams of the country, and to a description of the principal lakes and ponds. The third part is devoted to a description of the principal mountains and hills of the country, and to a description of the principal valleys and plains. The fourth part is devoted to a description of the principal forests and woods of the country, and to a description of the principal minerals and metals of the country.

The fifth part is devoted to a description of the principal cities and towns of the country, and to a description of the principal ports and harbors. The sixth part is devoted to a description of the principal roads and canals of the country, and to a description of the principal bridges and ferries. The seventh part is devoted to a description of the principal manufactures and industries of the country, and to a description of the principal agricultural products of the country. The eighth part is devoted to a description of the principal educational institutions of the country, and to a description of the principal scientific and literary societies of the country. The ninth part is devoted to a description of the principal religious denominations of the country, and to a description of the principal religious buildings of the country. The tenth part is devoted to a description of the principal public buildings of the country, and to a description of the principal public works of the country.

The eleventh part is devoted to a description of the principal public works of the country, and to a description of the principal public buildings of the country. The twelfth part is devoted to a description of the principal public works of the country, and to a description of the principal public buildings of the country.

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After an enforced interval of many years the Ministries concerned are drawing attention to the need for dealing with old or neglected properties, either by reconditioning or by demolition. In this Borough a small proportion of houses have passed the state when repairs can bring them into a satisfactory living state again. Dampness, faulty ventilation, lack of light and lack of conveniences such as food storage, inside sanitation, baths and other amenities throw them into sharp contrast with the modern houses on the Council's estates.

The population of the Borough has now passed the figure which qualifies it to become the local administration of the Food and Drugs Act, the duties of which have hitherto been carried out by the Surrey County Council. The result will be an increased interest in matters affecting the preparation and sale of foodstuffs.

As has now become customary, the report of the Chief Sanitary Inspector is included under this cover. The work of his department, under his able guidance, has been marked by keeness and a willingness to assist in every way in the promotion of health - often in matters far removed from what could be considered the normal duties of a sanitary inspector.

I am grateful to the Council, and particularly to the Chairman and members of the Public Health Committee, for their encouragement.

I am, Mr. Mayor, Aldermen and Councillors,

Your obedient Servant,

CYRUS IVE.

Medical Officer of Health.

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BOROUGH OF EPSOM AND EWELL

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health:

- o Cyrus Ive, M.B., B.S., (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

Chief Sanitary Inspector:

- / Wm. H.C. Hagger, M.R.San.I., F.S.I.A.

Deputy Chief Sanitary Inspector:

- x/ L.H. Grace, A.R.San.I., M.S.I.A

Additional Sanitary Inspectors:

- / W.C. Alder, M.R.San.I., M.S.I.A.
x/ P.E. Kinton, M.R.San.I., M.S.I.A. (Resigned 1.8.53.)
/ K.J. Tyler, M.R.San.I., M.S.I.A. (Appointed 14.9.53.)

Trained Nurse engaged on Public Health Duties:

- Miss E. Hauxwell S.R.N. (Devotes 5/11ths of her time to duties
(with the Surrey County Council.))

Medical Officer of Health's Clerical Staff:

- Senior Clerk: C.H. Argent.
Shorthand/Typist: Mrs. F.I. Holt.
Telephonist: Mrs. M.E. Joseph.

Chief Sanitary Inspector's Clerical Staff and Outside Staff:

- Chief Clerk: H.J.T. Woolford, A.R.San.I.
Shorthand/Typist: Miss D.D. Wood.
Clerk: Mrs. J. Bulezuik.
Junior Clerk: R. J. Grinstead.

- General Assistants and
Mortuary Attendants: W. Goodenough.
J. Stephens.

- Rodent Operatives: A.E. Read.
E. Merrett.

- o The Medical Officer of Health and his clerical staff act in a similar capacity for the Dorking and Leatherhead Urban Districts and for the Dorking and Horley Rural District.
- / Holds the Royal Sanitary Institute Certificate as Inspector of Meat and Other Foods.
- x Holds Sanitary Science Certificate of the Royal Sanitary Institute.

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR

THE YEAR 1953

1. STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (acres)	8,427
Population (Census 1951)	68,055
Population (Estimated mid-year 1953)	67,600
Density (persons per acre)	8.0
Number of inhabited houses according to the Rate Books at 31st December, 1953	18,107
Rateable Value at 31st December, 1953	£763,054
Sum represented by a Penny Rate	£3,128

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

Live Births

Total Male Female

Total Live Births	679	361	318	Birth rate per	
Legitimate "	650	347	303	1,000 population	10.0
Illegitimate "	29	14	15		
				Standardised	
				Birth rate	11.2

Still Births

Total Still Births	13	10	3	Rate per 1,000	
Legitimate "	12	9	3	total live &	
Illegitimate "	1	1	-	still births	18.8
				Rate per 1,000	
				population	0.19

Deaths

(not)	1,146	543	603	Crude death	
				rate	17.0
				Standardised	
				death rate	14.9

Deaths of Infants under 1 year of age

Total infant deaths	14	9	5
Legitimate	14	9	5
Illegitimate	-	-	-

Deaths of Infants under 1 month of age

Total Neonatal deaths	11	6	5
Legitimate	11	6	5
Illegitimate	-	-	-

STATISTICAL BULLETIN OF THE BUREAU OF ECONOMIC RESEARCH
 DEPARTMENT OF AGRICULTURE
 WASHINGTON, D. C.

STATISTICS AND SOCIAL INDICES OF THE AREA

Area (square miles)	1,100
Population (1937)	100,000
Population (Estimated mid-year 1937)	100,000
Density (persons per acre)	90.9
Number of farms and houses according to the Farm Census of 1935	10,000
Median value of farm property, 1935	\$1,000
Area represented by a Farm Unit	110 acres

STATISTICS FROM THE BUREAU OF ECONOMIC RESEARCH

Year	Total Area (sq. miles)	Total Population	Density (per acre)	Farms (Number)	Value of Farm Property (Millions)
1937	1,100	100,000	90.9	10,000	10,000
1936	1,100	98,000	89.1	9,800	9,800
1935	1,100	96,000	87.3	9,600	9,600
1934	1,100	94,000	85.5	9,400	9,400
1933	1,100	92,000	83.7	9,200	9,200
1932	1,100	90,000	81.8	9,000	9,000
1931	1,100	88,000	80.0	8,800	8,800
1930	1,100	86,000	78.2	8,600	8,600
1929	1,100	84,000	76.4	8,400	8,400
1928	1,100	82,000	74.5	8,200	8,200
1927	1,100	80,000	72.7	8,000	8,000
1926	1,100	78,000	70.9	7,800	7,800
1925	1,100	76,000	69.1	7,600	7,600
1924	1,100	74,000	67.3	7,400	7,400
1923	1,100	72,000	65.5	7,200	7,200
1922	1,100	70,000	63.7	7,000	7,000
1921	1,100	68,000	61.8	6,800	6,800
1920	1,100	66,000	60.0	6,600	6,600
1919	1,100	64,000	58.2	6,400	6,400
1918	1,100	62,000	56.4	6,200	6,200
1917	1,100	60,000	54.5	6,000	6,000
1916	1,100	58,000	52.7	5,800	5,800
1915	1,100	56,000	50.9	5,600	5,600
1914	1,100	54,000	49.1	5,400	5,400
1913	1,100	52,000	47.3	5,200	5,200
1912	1,100	50,000	45.5	5,000	5,000
1911	1,100	48,000	43.7	4,800	4,800
1910	1,100	46,000	41.8	4,600	4,600
1909	1,100	44,000	40.0	4,400	4,400
1908	1,100	42,000	38.2	4,200	4,200
1907	1,100	40,000	36.4	4,000	4,000
1906	1,100	38,000	34.5	3,800	3,800
1905	1,100	36,000	32.7	3,600	3,600
1904	1,100	34,000	30.9	3,400	3,400
1903	1,100	32,000	29.1	3,200	3,200
1902	1,100	30,000	27.3	3,000	3,000
1901	1,100	28,000	25.5	2,800	2,800
1900	1,100	26,000	23.7	2,600	2,600

STATISTICS OF FARM PROPERTY IN 1937

Total farm property	10,000
Value of farm property	10,000
Number of farms	10,000

Death Rate of all infants per 1,000 live births	20.6
Death Rate of legitimate infants per 1,000 legitimate live births	21.5
Death Rate of illegitimate infants per 1,000 illegitimate live births	-

	No. of Deaths	Rate per 1,000 total (live and still) births
Maternal Mortality	2	2.89

Deaths from:	No. of deaths.
Measles (all ages)	-
Whooping Cough (all ages)	-
Diarrhoea (under 2 years of age)	1
Neoplasm (Cancer etc.) (all ages)	152

Table I shows a comparison of vital statistics of the year for the district with those of England and Wales.

Table II shows a comparison of birth, death and infant mortality rates for the district since 1931, with the figures of England and Wales for the same period.

CENSUS 1951

The following details of the population of the Borough are extracted from the report of the Registrar-General on the County of Surrey on information obtained at the Census taken in 1951. The figures relating to the Borough of Epsom and Ewell are for that area as it was constituted in 1933.

Growth of Population

The table shows the growth of population which has taken place in the period 1921 - 1951.

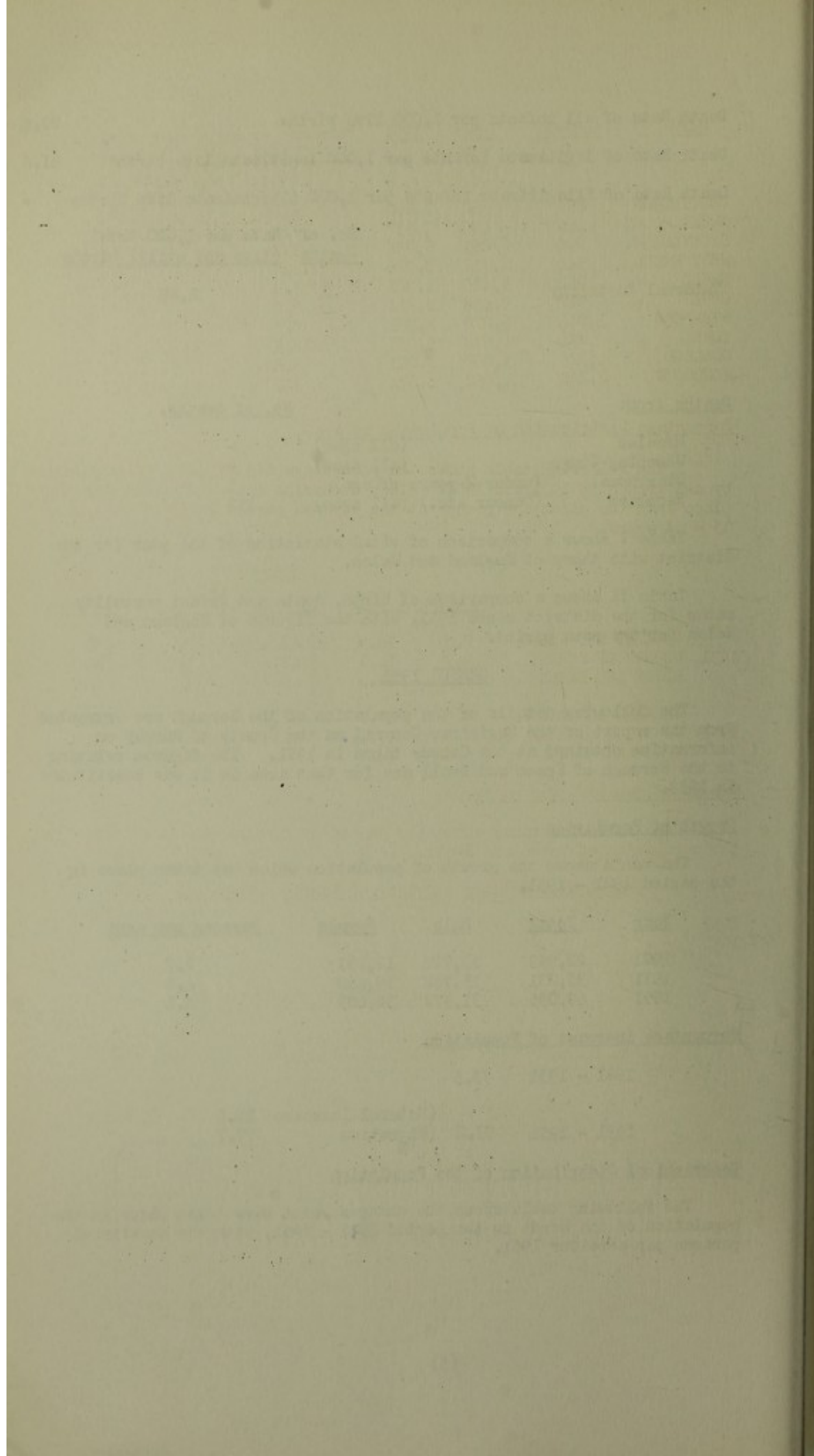
Year	Total	Male	Female	Persons per acre
1921	22,953	10,722	12,231	2.7
1931	35,231	15,762	19,469	4.2
1951	68,055	31,372	36,683	8.1

Percentage increase of Population

1921 - 1931	53.5		
		(Natural Increase	15.5
1931 - 1951	93.2	(Migration	77.7

Geographical Distribution of the Population

The following table shows the changes which have taken place in the population of the Wards in the period 1931 - 1951, with the density of persons per acre for 1951.



Ward	Acreage	Population		Persons per acre 1951	Population in Private Households
		1931	1951		
CUDDINGTON	455	60	7,260	16.0	7,120
EWELL COURT	456	495	7,937	17.4	7,937
STONELEIGH	238	651	5,034	21.2	4,955
WEST EWELL	544	2,312	8,926	16.4	8,926
EWELL	952	3,485	4,921	5.2	4,854
COURT	917	9,458	8,214	9.0	4,092
STAMFORD	1,046	6,078	8,981	8.6	5,253
TOWN	274	4,978	5,057	18.5	4,952
COLLEGE	1,325	3,062	5,051	3.8	4,851
WOODCOTE	2,220	4,652	6,674	3.0	5,727

Percentage Distribution of Population by Age.

The following table shows the percentage distribution of population by age groups in 1931 and 1951. They emphasise the shift which has taken place into the older age groups at the expense particularly of the group 15 - 44 years.

		Years				
		0 - 4	5 - 14	15 - 44	45 - 64	65 & over
1931	ENGLAND AND WALES	7.5	16.3	47.1	21.7	7.4
	COUNTY OF SURREY	6.7	14.1	48.4	22.8	8.0
	EPSOM AND EWELL	5.3	10.6	48.7	25.3	9.9
1951	ENGLAND AND WALES	8.5	13.7	42.7	24.2	10.9
	COUNTY OF SURREY	7.8	13.1	41.5	25.7	11.9
	EPSOM AND EWELL	6.6	12.1	40.6	28.3	12.4

Excess of females over males

The following table shows the number of females per 1,000 males in the population of Epsom and Ewell.

	England and Wales	County of Surrey	Epsom and Ewell
1931	1,088	1,171	1,235
1951	1,085	1,158	1,169

POPULATION IN NON PRIVATE HOUSEHOLDS

Nine thousand three hundred and eighty-eight or 13.8% of the population are classified as living in non-private households, the principle subdivisions being as follows:

	Total Population	Resident Staff	Patients
General Hospitals	599 (0.9%)	177	422
Hospitals for the Mentally Sick	7,819 (11.5)	620	7,199
Hospitals for Disabled or Aged	483 (0.7%)		
Nursing Homes, Hotels, Schools and others	487 (0.7%)		

Boarding schools were on holidays at the time of this census, and only that part of their population which is permanently resident is included.

Category	Population		Percentage
	1911	1921	
Male	1,200	1,300	108.3%
Female	1,100	1,200	109.1%
Total	2,300	2,500	108.7%
Male	1,100	1,200	109.1%
Female	1,000	1,100	110.0%
Total	2,100	2,300	109.5%

The following table shows the percentage distribution of population in the groups in 1911 and 1921. It may be seen that the proportion of the population in the various groups has remained fairly constant during the period.

Age Group	1911		1921	
	Population	Percentage	Population	Percentage
0-4	100	4.3%	110	4.4%
5-9	120	5.2%	130	5.2%
10-14	150	6.5%	160	6.4%
15-19	180	7.8%	190	7.6%
20-24	200	8.7%	210	8.4%
25-29	220	9.6%	230	9.2%
30-34	240	10.4%	250	10.0%
35-39	260	11.3%	270	10.8%
40-44	280	12.2%	290	11.6%
45-49	300	13.0%	310	12.4%
50-54	320	13.9%	330	13.2%
55-59	340	14.8%	350	14.0%
60-64	360	15.7%	370	14.8%
65-69	380	16.5%	390	15.6%
70-74	400	17.4%	410	16.4%
75-79	420	18.3%	430	17.2%
80-84	440	19.1%	450	18.0%
85-89	460	20.0%	470	18.8%
90-94	480	20.9%	490	19.6%
95-99	500	21.7%	510	20.4%
100-104	520	22.6%	530	21.2%
105-109	540	23.5%	550	22.0%
110-114	560	24.3%	570	22.8%
115-119	580	25.2%	590	23.6%
120-124	600	26.1%	610	24.4%
125-129	620	26.9%	630	25.2%
130-134	640	27.8%	650	26.0%
135-139	660	28.7%	670	26.8%
140-144	680	29.6%	690	27.6%
145-149	700	30.4%	710	28.4%
150-154	720	31.3%	730	29.2%
155-159	740	32.2%	750	30.0%
160-164	760	33.0%	770	30.8%
165-169	780	33.9%	790	31.6%
170-174	800	34.8%	810	32.4%
175-179	820	35.7%	830	33.2%
180-184	840	36.5%	850	34.0%
185-189	860	37.4%	870	34.8%
190-194	880	38.3%	890	35.6%
195-199	900	39.1%	910	36.4%
200-204	920	40.0%	930	37.2%
205-209	940	40.9%	950	38.0%
210-214	960	41.7%	970	38.8%
215-219	980	42.6%	990	39.6%
220-224	1000	43.5%	1010	40.4%
225-229	1020	44.3%	1030	41.2%
230-234	1040	45.2%	1050	42.0%
235-239	1060	46.1%	1070	42.8%
240-244	1080	46.9%	1090	43.6%
245-249	1100	47.8%	1110	44.4%
250-254	1120	48.7%	1130	45.2%
255-259	1140	49.6%	1150	46.0%
260-264	1160	50.4%	1170	46.8%
265-269	1180	51.3%	1190	47.6%
270-274	1200	52.2%	1210	48.4%
275-279	1220	53.0%	1230	49.2%
280-284	1240	53.9%	1250	50.0%
285-289	1260	54.8%	1270	50.8%
290-294	1280	55.6%	1290	51.6%
295-299	1300	56.5%	1310	52.4%
300-304	1320	57.4%	1330	53.2%
305-309	1340	58.3%	1350	54.0%
310-314	1360	59.1%	1370	54.8%
315-319	1380	60.0%	1390	55.6%
320-324	1400	60.9%	1410	56.4%
325-329	1420	61.7%	1430	57.2%
330-334	1440	62.6%	1450	58.0%
335-339	1460	63.5%	1470	58.8%
340-344	1480	64.3%	1490	59.6%
345-349	1500	65.2%	1510	60.4%
350-354	1520	66.1%	1530	61.2%
355-359	1540	66.9%	1550	62.0%
360-364	1560	67.8%	1570	62.8%
365-369	1580	68.7%	1590	63.6%
370-374	1600	69.6%	1610	64.4%
375-379	1620	70.4%	1630	65.2%
380-384	1640	71.3%	1650	66.0%
385-389	1660	72.2%	1670	66.8%
390-394	1680	73.0%	1690	67.6%
395-399	1700	73.9%	1710	68.4%
400-404	1720	74.8%	1730	69.2%
405-409	1740	75.6%	1750	70.0%
410-414	1760	76.5%	1770	70.8%
415-419	1780	77.4%	1790	71.6%
420-424	1800	78.3%	1810	72.4%
425-429	1820	79.1%	1830	73.2%
430-434	1840	80.0%	1850	74.0%
435-439	1860	80.9%	1870	74.8%
440-444	1880	81.7%	1890	75.6%
445-449	1900	82.6%	1910	76.4%
450-454	1920	83.5%	1930	77.2%
455-459	1940	84.3%	1950	78.0%
460-464	1960	85.2%	1970	78.8%
465-469	1980	86.1%	1990	79.6%
470-474	2000	86.9%	2010	80.4%
475-479	2020	87.8%	2030	81.2%
480-484	2040	88.7%	2050	82.0%
485-489	2060	89.5%	2070	82.8%
490-494	2080	90.4%	2090	83.6%
495-499	2100	91.3%	2110	84.4%
500-504	2120	92.2%	2130	85.2%
505-509	2140	93.0%	2150	86.0%
510-514	2160	93.9%	2170	86.8%
515-519	2180	94.8%	2190	87.6%
520-524	2200	95.7%	2210	88.4%
525-529	2220	96.5%	2230	89.2%
530-534	2240	97.4%	2250	90.0%
535-539	2260	98.3%	2270	90.8%
540-544	2280	99.2%	2290	91.6%
545-549	2300	100.0%	2310	92.4%

The following table shows the number of females per 1,000 males in the population of India and West Bengal.

Year	India	West Bengal
1911	950	950
1921	950	950

POPULATION IN NEW PRIVATE SCHOOLS

The following table shows the number of children in new private schools in West Bengal in 1911 and 1921.

Year	Total	Boys	Girls
1911	1,000	500	500
1921	1,000	500	500

Only that part of their population which is permanently resident is included.

For comparison in the County of Surrey as a whole 5.1% of the population is resident in non-private households, of which 2.6% is in hospitals.

The fact that such a high percentage of the population is in hospitals has a considerable effect on local vital statistics, particularly on the birth and death rates and the incidence of certain infectious diseases.

BIRTHS

Live births numbered 679, of which 361 were males and 318 females, representing a birth-rate of 10.0 per 1,000 of the population, compared with the rate of 15.5 for England and Wales. A comparability factor (1.12) has been supplied by the Registrar General, allowing for variations in age and sex distribution of the population in different areas. This permits comparison of the local rate with those of other districts. After application of the factor a standardised birth rate of 11.2 is obtained.

There are two obvious reasons for the low birth rate. In the first place the proportion of the population in the higher age group is greater in the Borough than in the County as a whole. In the second place 7,726 persons are patients in hospitals for mental illnesses, and have a negligible effect on the reproductive life of the community. If this group is excluded from the total population on which the birth rate is estimated, a figure of 12.6 is obtained, this being about the level of the rate in other districts in Surrey.

Thirteen still births were registered during the year giving a still birth rate of 0.10 compared with the rate of 0.35 per 1,000 population for England and Wales.

DEATHS

The deaths registered in the area after correction for inward and outward transfers numbered 1,146 representing a crude death rate of 17.0 per 1,000 of the estimated resident population, compared with the figure of 11.4 for England and Wales. The total included 543 males and 603 females.

A comparability factor (0.88) has been provided by the Registrar-General which may be applied to the crude death rate for use in comparing the local death rate with those of other areas. The factor makes allowance for the differing age and sex distribution of local populations. Application of the factor to the local crude death rate give a standardised death rate of 14.9.

A rise of 8 per 1,000 in the death rate for the district calls for explanation, and is to be found in new administrative arrangements in the Registrar-General's office, which came into operation in January, 1953. In the past the great majority of deaths which occurred in the mental hospitals, and to a less extent in hospitals for chronic illnesses, and institutions for the old or infirm, were transferred for enumeration to the districts in which the deceased had formerly lived, no matter how long the absence from home. Under the revised arrangements, this transfer

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Deaths (cont.)

is no longer made, and its effect on the first year of its working is that 562 deaths are retained which would previously have been assigned elsewhere. The population in which these deaths occurred is about 8,000 (approximately 11% of the Borough's population) in contrast to the 584 deaths which occurred in the remainder (approximately 60,000) of the population. If the population in private households and its deaths were considered alone, a death rate of between 9 - 10 per 1,000 would be obtained, this being within the expected limits.

Approximately 51% of deaths of persons normally resident in private households took place in hospital or nursing home. The average age at death for males was 66.8 years and for females 71.5 years. These figures concern all deaths which took place during the year.

Regarding the deaths of patients in the mental hospital, the average age at death for males was 69 years and for females 71.6 years, and the main causes of death were

Tuberculosis	13
Cancer and other neoplasms	22
Diabetes	4
Vascular lesions of the Nervous system	39
Diseases of the Heart and Circulation	266
Respiratory Diseases	106
Ulceration of Stomach and Duodenum	2
Nephritis	1
Hyperplasia of Prostate	1
Other defined and ill- defined diseases	35
Accident	9
Suicide	4
	<hr/>
	502
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INFANT MORTALITY

Deaths of children under 1 year of age numbered 14, giving an infant mortality rate of 20.6 per 1,000 live births. These figures are almost identical with those for 1952, and compare favourably with the rate of 26.8 for England and Wales.

Eleven of the deaths occurred within 28 days of birth, and 10 of these within 7 days. Eight deaths were ascribed to congenital malformations, 3 to prematurity, 1 to pneumonia, 1 to otitis media and 1 to injury at birth.

MATERNAL MORTALITY

Two deaths from maternal causes were assigned to the district by the Registrar-General, though it is possible to trace details of only one in local records. In this case death was caused by an unavoidable haemorrhage associated with an extra-uterine gestation.

The first part of the report deals with the general situation of the country and the progress made during the year. It is followed by a detailed account of the work done in each of the various departments.

The second part of the report contains a list of the names of the various departments and the names of the persons who have been appointed to the various posts in each of them.

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2.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

LABORATORY FACILITIES

The Public Health Laboratory service is maintained by the Medical Research Council on behalf of the Ministry of Health. A local laboratory of the service is situated at West Hill House, West Hill, Epsom. During the year 1953 the number of specimens submitted by practitioners in this district was as follows:-

Nose and Throat Swabs	207
Faeces	343
Urine	3
Sputum	88
Blood	1
Cough Plates	1
Others	<u>24</u>
	667

In 1952 the comparable number of specimens examined was 575.

The staff of the laboratory also examine and report on the bacteriological conditions of samples of milk, food and water taken by local authorities' Public Health Departments. In the course of the year 155 samples of water, 183 of milk and 47 of ice-cream taken in this district were examined. The results of the examination of water and milk supplies are summarised in later sections of this report, and those relating to ice-cream are dealt with in the Chief Sanitary Inspector's report.

AMBULANCE FACILITIES

The public ambulance service is under the control of the Surrey County Council, who have given the following information regarding the use of the service in this area:-

The Borough is in Kingston area of control, the main ambulance station being situated in Malden (Telephone No. Malden 1173). There is a sub-station in Langton Avenue, Ewell.

In accidents in the home or elsewhere or in sudden illness in streets and public places, any responsible person may call the ambulance to remove the patient (if by telephone dial 999). Normal maternity cases will be removed if the applicant can give evidence that a maternity bed has been booked. Maternity cases with serious complications, or where birth is imminent, will not normally be moved without the authority of a doctor or certified midwife who should travel with the patient in the ambulance. The removal of other cases of illness or accident will be arranged by the hospital concerned, or by the medical practitioner in charge of the patient. For private removals a written request accompanied by a Doctor's certificate should be made to the County Medical Officer for his consideration. Providing that these requirements are fulfilled no charge will be made to users.

STATISTICAL SUMMARY

The public health laboratory services provided by the National Health Service are detailed in the following table. A total of 100,000 specimens were analyzed during the year 1955 and the major categories are listed below.

Category	Number of Specimens
General	45,000
Special	15,000
Public Health	20,000
Research	10,000
Reference	10,000
Total	100,000

In 1955 the percentage of specimens analyzed was 100%. The results of the laboratory services are reported in the following table. The total number of specimens analyzed is 100,000. The results are reported in the following table.

LABORATORY SERVICES

The public health laboratory services provided by the National Health Service are detailed in the following table. A total of 100,000 specimens were analyzed during the year 1955 and the major categories are listed below.

In addition to the services provided by the National Health Service, the following services are provided by the State Health Department. The total number of specimens analyzed is 100,000. The results are reported in the following table.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

In these Acts powers are given to local authorities to seek court orders for the compulsory temporary removal to hospital or institution of persons in ill health or in a senile state who are in a state of neglect. No action was required during the year.

Since the Acts came into operation, three Orders for compulsory removal have been asked for, the applications having been successful in each case.

NURSING IN THE HOME

GENERAL NURSING - The National Health Service Act placed on local health authorities, in this case the Surrey County Council, the duty to provide nurses, employed either by themselves or by voluntary organisations, to attend persons who require nursing in their own houses. The service to be provided free of charge to the users of it. In this Borough the County Council carries out its duties through the agency of the Epsom and Ewell District Nursing Association, 19 Alexandra Road, Epsom, (Telephone No. Epsom 1153), which employs 8 whole-time nurses and 2 part-time nurses.

PROVISION OF NURSING EQUIPMENT AND APPARATUS - The Surrey County Council being the local health authority have a Medical Loan Depot situated at West Hill House, Epsom, which is open Monday, Wednesday and Friday from 11 a.m. - 1 p.m., and is administered for them by the Epsom, Ewell and Stoneleigh Division of the British Red Cross.

The equipment has a wide range of all that is necessary for nursing in the home, and includes water beds, bed tables and rests, and wheel-chairs. This service is free and fulfils an important need, particularly at a time when admission to hospitals is becoming more difficult.

HOME HELP SERVICE - This service is administered locally by the Divisional Medical Officer of the Surrey County Council. Details of the service can be obtained from the supervisor at Ashley House, Ashley Road, Epsom, (Telephone No. Epsom 9512).

THE NATIONAL BUREAU OF STANDARDS

In this case, the Bureau has been requested to issue a report on the progress of the work done in the field of the standardization of the units of length, mass, and time.

The work done in this field during the past few years has been of a very important nature, and it is hoped that the results of this work will be of great value to the scientific community.

THE METRE

The metre is the unit of length in the International System of Units. It is defined as the distance between two points on the Earth's surface, one at the North Pole and the other at the equator, measured along the meridian passing through Paris. This definition is based on the Earth's circumference, which is approximately 40,000 kilometres.

The metre is a derived unit, and it is defined in terms of the speed of light. The speed of light in a vacuum is a constant, and it is defined as 299,792,458 metres per second. This definition is based on the fact that the speed of light is the same in all directions and in all frames of reference.

The metre is a unit of length, and it is used to measure the distance between two points. It is a derived unit, and it is defined in terms of the speed of light. The speed of light in a vacuum is a constant, and it is defined as 299,792,458 metres per second.

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CLINICS AND TREATMENT CENTRES

CARE OF MOTHERS, YOUNG CHILDREN, ETC. - The provision of services relating to the care of mothers and young children, midwifery, health visiting, home nursing, immunisation and vaccination, ambulance and domestic help are the responsibility of the Surrey County Council as local health authority. Day-to-day administration is carried on by the Central Divisional Health Sub-Committee with offices in this Borough.

County Council Health Centres are situated at 44 Waterloo Road, Epsom and at Ewell Court House. The Epsom Health Centre also serves as a tuberculosis dispensary for Epsom and Ewell, Leatherhead and part of Banstead, and will continue to do so until its new accommodation, now in course of erection at the Epsom District Hospital, is ready for use.

Some of the outlying parts of the Borough are served by Health Welfare Centres situated in adjacent districts, and for the isolated area of Langley Vale, clinics are held twice a month at conveniently situated premises. The erection of a prefabricated hall on the Wells Estate by the Borough Council has provided suitable accommodation for the purposes of a welfare clinic which is held at weekly intervals.

DIPHTHERIA IMMUNISATION - Immunisation against diphtheria can be obtained from general practitioners under the terms of the National Health Service Act or from County Council Clinics. Figures relating to the numbers treated will be found in Section 6 of this Report.

FAMILY PLANNING ASSOCIATION'S CLINIC - A branch of the Family Planning Association is active in the Borough. It provides a weekly clinic at the Epsom District Hospital with the consent of the Hospital Management Committee and the Medical Superintendent. The medical staff is appointed by the Association and is assisted by voluntary workers. The work of the Association is concerned with the teaching of contraception to married persons, and also with the investigation of sub-fertility.

Information has been received from the Hon. Secretary, (Mrs. Hawley, Tel. Epsom 2769) of the local branch of the Association that 2,103 visits were made to the clinic in the past year, including 522 first visits, and that postal enquiries showed a slight increase on last year's figure of 1,074.

Applications for appointments should be made to Mrs. Poulton, Telephone No. Ewell 2156.

TREATMENT OF SCABIES, DELOUSING - The clinic for the treatment of people suffering from scabies has continued its work in the premises at the rear of "The Cedars", Church Street, Epsom. The work is carried out by a general-trained State Registered Nurse, and has undoubtedly been effective in its results. The function of the clinic is essentially treatment, and patients are not accepted unless referred by a medical practitioner. Emphasis is laid on the importance of prophylactic treatment for close contacts.

Facilities of the clinic are open to the residents of Leatherhead Urban District, whose Council undertakes a proportionate share in the cost of the establishment. During the year 37 persons were treated, 23 resident in the Borough, 10 from the Leatherhead Urban District and 4 from the Dorking Urban District.

REPORT ON THE PROGRESS OF THE WORK

The first part of the report deals with the general situation of the country and the progress of the work during the year. It is followed by a detailed account of the work done in each of the various departments.

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The clinic has also been used in assisting persons to rid themselves of infestation by head and body lice. Two patients were treated for head lice during the year, one of this number being resident in the Leatherhead Urban District.

VENEREAL DISEASE - The Regional Hospital Board is the authority responsible for the administration of matters dealing with the diagnosis and treatment of Venereal Diseases. Details of local clinics are set out below.

BLOOD TRANSFUSION SERVICE - The South London Blood Supply Depot, housed at Stanley Road, Sutton, Surrey, (Tel. No. Vigilant 8221) has a day and night service for the issuing of blood for transfusion purposes. This can be obtained by medical practitioners on application direct to them.

A time-table of clinics available is set out below:-

Ante-natal Clinics	Epsom District Hospital	Mons. & Thurs. 2 p.m.
	Ewell Court House	Friday 1.30 - 4 p.m.
	Priory Crescent, North Cheam	Mon. & Fri. 9.30 - 12 noon
Child Welfare Clinics	44 Waterloo Road, Epsom	Mon. & Wed. 2 - 4 p.m.
	Ewell Court House	Mon. Wed. & Thurs. 1.30 - 4 p.m.
	Jubilee Inst. Maldon Rd. Worcester Park	Mon. & Thurs. 1.30 - 4 p.m.
	Priory Crescent, North Cheam	Mon. & Thurs. 1.30 - 4 p.m.
	Parochial Rooms, Malden Rd. Cheam	Weds. 2 - 4 p.m.
	"Tanhurst" Rosebery Rd. Epsom Downs	1st & 3rd Weds. in month at 2 p.m.
	Wells Estate	Tuesdays 2 p.m.
General School Medical Minor Ailments Clinic	44 Waterloo Rd. Epsom	Weds. 9.30 - 12 noon
	Ewell Court House	Tues. 9.30 - 12 noon
Family Planning Association Clinic	Epsom District Hospital	Fridays 7 p.m.
Scabies Treatment Clinic	"The Cedars" Church St. Epsom.	By appointment

The office has also been kept in excellent repair for the convenience of interviewees by both day and night. The general work is done by the day, but at night the work is done by the night watchmen.

GENERAL OFFICE - The General Office is the central authority for the administration of the office. It is the office of the Director and the Secretary. It is the office of the Director and the Secretary. It is the office of the Director and the Secretary.

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A list of the various offices and their functions is given below.

Office	Function
General Office	Administration of the office
Director's Office	Supervision of the office
Secretary's Office	Recording and correspondence
Legal Office	Legal advice and litigation
Finance Office	Financial management
Personnel Office	Staff management
Public Relations Office	Public information and relations
Research Office	Research and statistics
Library Office	Library and information services
Printing Office	Printing and reproduction
Post Office	Postal services
Telephone Office	Telephone services
General Office	Administration of the office
Director's Office	Supervision of the office
Secretary's Office	Recording and correspondence
Legal Office	Legal advice and litigation
Finance Office	Financial management
Personnel Office	Staff management
Public Relations Office	Public information and relations
Research Office	Research and statistics
Library Office	Library and information services
Printing Office	Printing and reproduction
Post Office	Postal services
Telephone Office	Telephone services

Chest Clinic	44 Waterloo Road, Epsom	Tues. & Thurs. 2 p.m. Every 3rd Thurs. in month at 5.30 p.m.
Venereal Disease	St. Helier Hospital, Wrythe Lane, Carshalton	Males: Mons. 5 - 7 p.m. Females: Weds. 5 - 7 p.m. & Fri. 1.30 - 3.30 p.m.
	Kingston Hospital, Wolverton Avenue, Kingston-upon-Thames	Females Thurs. 5 - 7 p.m.

(And at the Out-patient Departments of many London Hospitals)

Diphtheria Immunisation Clinics	44 Waterloo Road, Epsom	Every Friday 10 a.m.
	Ewell Court House	Every Tuesday 2 p.m.

Case 1010
The patient was seen on 1/15/50
at 10:30 a.m.

History: Patient has had
intermittent pain in the
lower back since 1/10/50.

Physical Exam: No
tenderness or swelling
in the lower back.

X-rays of the lumbar spine
show no significant
abnormalities.

WATER

That part of the district constituting the parish of Epsom is supplied by water from the Council's undertaking. The water is obtained from deep wells, boring and adits in the chalk situated in East Street, and yields a quantity sufficient for all the needs of the community. It is chlorinated before distribution. No softening process is carried out though it is the Council's intention to install a softening process when it is able to obtain the sanction of the Ministry of Health to the financial expenditure and to the use of labour and materials. Frequent bacteriological samples and chemical samples of raw and treated water have been taken under the direction of the Borough Water Engineer. The results show that the raw water and the water pumped to supply have been of excellent quality.

Ewell and the greater part of Cuddington are supplied by the Sutton District Water Company with a softened water derived from wells in the chalk situated at Cheam, Sutton and Woodmansterne. Frequent samples have been taken at domestic premises in this area and results found to be satisfactory. Copies of analytical results have also been received at regular intervals of samples taken by the Company's Officials.

The West Park and Manor Hospitals maintain deep wells from which considerable volumes of water are pumped, chlorinated and distributed within the institutions. The bulk of the water used in both hospitals is, however, taken from the Corporation's mains. By arrangement with the Hospital Management Committees the bacteriological quality of the water taken from the wells is under the observation of the Public Health Department.

For reference, details are set out of typical results of chemical analyses taken in the areas of supply of the Borough Water Undertaking and of the Sutton District Water Company:-

Chemical Results in parts per 100,000
Borough of Epsom and Ewell Water Undertaking

Appearance	...	Clear and bright	Odour	...	...	Nil
Colour (Hazen)	...	Nil	Free Carbon Dioxide	...	...	16
Reaction pH	...	7.3	Totals Solids dried at 180° C	...	...	320
Electric Conductivity at 20° C	...	480	Alkalinity as Calcium Carbonate	...	...	220
Chlorine in Chlorides	...	14	Nitrogen in Nitrites	...	...	less than 0.01
Hardness:	...	Total 280	Oxygen absorbed in 4 hrs at 27° C	...	...	0.00
Carbonate	(Temporary)	220	Residual Chloride	...	...	-
Non-Carbonate	(Permanent)	60	Turbidity (Silica Scale)	...	...	Nil
Nitrogen in Nitrates	...	5.2	Metals	...	...	Absent
Free Ammonia	...	0.000				
Albuminoid Ammonia	...	0.000				

Chemical Results in parts per 1,000,000
Sutton District Water Company

Appearance	...	Clear and bright	Ammoniacal Nitrogen	...	...	0.091
Colour (Hazen)	...	Nil	Albuminoid Nitrogen	...	...	0.000
Reaction pH	...	7.9	Metals	...	...	Absent
Electric Conductivity	...	250	Turbidity	...	...	Less than 3
Chlorine present as Chloride	...	13	Odour	...	...	Nil
Hardness	...	Total 115	Free Carbon Dioxide	...	...	Trace
Carbonate	85		Total Solids	...	...	170
Non-Carbonate	30		Alkalinity as Calcium Carbonate	...	...	85
Grains per Gall:	...	Total 8.1	Oxygen Absorbed	...	...	0.00
Carbonate	6.0		Residual Chlorine	...	...	0.20
Non-Carbonate	2.1		Nitrite Nitrogen	Less than 0.01
Nitrate Nitrogen	...	4.0				

TABLE

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TABLE I

Table with multiple columns and rows of data, including numerical values and descriptive text.

TABLE II

Table with multiple columns and rows of data, including numerical values and descriptive text.

A number of houses in the northern part of the area are supplied by the Metropolitan Water Board, and two cottages on the south-west outskirts of Epsom by the East Surrey Water Company.

One house in the district is reported to be dependent on a standpipe for its supply.

DRAINAGE AND SEWERAGE

There are two Sewage Works in the Borough, one situated at Hook Road, Epsom and the other near Ruxley Lane, West Ewell.

Sewage from the Epsom area is delivered to the Hook Road Works, where a considerable part is treated by the Simplex Aeration Plant. The remainder gravitates to or is pumped and distributed over the land, passing finally through contact beds, storm water tanks being brought into operation during periods of heavy rainfall and consequent increased flows. The whole of the effluent drains to a tributary of the River Hogsmill and amounts to about 1,600,000 gallons per day dry weather flow.

Sewage from Ewell and Cuddington (other than from a small area which discharges to the Sutton and Cheam Works) gravitates to the Ruxley Works. From the West Ewell district sewage is pumped to a balancing tank where it combines with sewage from Chessington within the Borough of Surbiton. Treatment is by settling tanks and percolating filters, and finally through humus tanks. Sludge is dealt with on sludge drying beds and storm water passes through a storm water tank. The whole of the effluent flows to the River Hogsmill, the dry weather flow being approximately 1,300,000 gallons per day. Further extensions to the Plant generally have recently been completed at a cost of approximately £30,000.

There are 116 cesspools in the Borough and at 15 premises pail closets or chemical closets are in use.

SANITARY CONVENIENCES ON EPSOM DOWNS

Progress has been made in the Council's Scheme for the provision of mobile sanitary conveniences for use during Race Meetings, also the extension of sewers and main water service on Epsom Downs.

The work of extending the sewer and water main on the North side of the Race Course has been carried out and the extension to be laid on the South side is to be proceeded with later in the current year in accordance with the terms of the contract.

Five disused trolley buses have been purchased by the Corporation for conversion into mobile conveniences and the Borough Engineer has made arrangements for the necessary work to be carried out by a Specialist firm.

There is still an urgent need for permanent sanitary conveniences for use of the public who visit the Downs at all times of the year, particularly at weekends.

PUBLIC CLEANSING

(a) COLLECTION OF REFUSE - The arrangements for public cleansing are carried out under the supervision of the Borough Engineer and Surveyor.

Trade refuse is removed by the Council under an arrangement whereby one bin of trade refuse is removed for every £40 of the rateable value of the premises, a standard charge being made for any additional quantity removed.

(b) DISPOSAL OF REFUSE - Disposal of household and trade refuse continues to be partly by incineration at the Epsom Sewage Works, and partly by controlled tipping at the disused brick works in East Street. An important advantage of the latter system is the reclamation of useless land, which if left would tend to become a permanent eyesore and nuisance. If care is taken in the choice of the site for tipping no nuisance need be caused to residents in the neighbourhood. It was necessary for a time to tip into water and conditions were created which resulted in the production of sulphuretted hydrogen by bacterial action. Residents had good cause for complaint of the obnoxious smell. However, as tipping proceeded, it was possible to drain off the residual water, and the filling-in was completed without creating further nuisances.

RIVERS AND STREAMS

The work carried out by the Surrey County Council in straightening banks of the Hogsmill, in grading the fall of the river bed and filling in the derelict mill stream off Worcester Park Road, has greatly reduced the number of complaints of flooding, smells from stagnant water and insect breeding previously received from this area.

The general state of the stream itself, remains extremely unsatisfactory, but the remedy for this is dependent on progress made with the Hogsmill Valley Joint Drainage Scheme, which is now in hand.

SWIMMING BATHS AND POOLS

The Municipal Baths are situated in East Street, Epsom, and comprise a covered swimming bath (convertible into a hall), turkish, foam and slipper baths and cafe. Swimming bath water is subjected to continuous filtration and chlorination. Frequent bacteriological examinations are made to test the efficiency of the purification process.

There is one privately owned swimming pool in the Borough open to the general public. The pool is equipped with plant for continuous filtration and chlorination, and the water is subjected to periodical bacteriological examination.

The other bathing pools in the Borough are provided in connection with schools and clubs and are not open to the general public.

SANITARY INSPECTION OF THE AREA

A classified statement of the number of premises visited, the defects or nuisances discovered, the action and the result of action taken in regard to these, will be found in the report of the Chief Sanitary Inspector.

WATER TREATMENT

(a) TREATMENT OF WATER - The arrangement for the treatment of water is shown in the accompanying diagram and consists of the following:

The water is first treated by the Gannett water treatment works which are situated at the head of the river. The water is then pumped to the reservoir at the head of the river and from there to the distribution system.

(b) TREATMENT OF WATER - The water is first treated by the Gannett water treatment works which are situated at the head of the river. The water is then pumped to the reservoir at the head of the river and from there to the distribution system.

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4.

HOUSING

INSPECTION OF HOUSES - The following figures are given in a form requested by the Ministry.

1.	Inspection of dwelling-houses during the year:-	
1.	(a) Total number inspected	251
	(b) Number of inspections made	964
2.	(a) Inspected under Housing Acts	2
	(b) Number of inspections made	50
3.	Number found unfit	2
4.	Number found not to be in all respects fit	84
11.	Remedy of defects:	
	Number of houses rendered fit	72
111.	Action under Statutory Powers:	
A.	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936	-
B.	Proceedings under Public Health Acts:	
	(1) Number of dwelling-houses	4
	(2) Number of dwelling-houses in which defects were remedied	
	(a) by owners	4
	(b) by Local Authority	-
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936	1
D.	Proceedings under Section 12 of the Housing Act, 1936	1

The results of housing inspections are discussed in detail in the Chief Sanitary Inspector's report. In the coming year legislation is likely to place new emphasis on the inspection, repair and, if necessary, demolition of houses which have suffered from prolonged neglect, or which have reached the end of their useful life.

ERECTION OF NEW HOUSES

I am indebted to the Borough Engineer for the following information regarding the number of new houses erected during the year:

Erected by local authority	137
Erected by private enterprise	108
Converted properties:-	
(a) by local authority	-
(b) by private enterprise	5

REHOUSING OF TUBERCULOUS PERSONS

Eight houses were allocated to housing applicants in whose families there were tuberculous members. Since the war priority has been given to 77 cases under this heading.

CENSUS 1951

Particulars of several aspects of housing obtained at the Census taken in 1951 are to be found in the report on the County of Surrey issued by the Registrar General's office. The table below gives figures relating to the number of private households, the increase which has taken place in the intercensal period and to changes which have taken place in density of occupation.

PRIVATE HOUSEHOLDS AND DWELLINGS

<u>Year</u>	<u>Private Households</u>	<u>Population in Private Households</u>	<u>Structural separate dwellings occupied.</u>
1931	6,661	24,685	6,176
1951	18,480	58,667	17,729
	<u>Rooms Occupied</u>	<u>Persons per Room</u>	<u>Percentage of persons at more than 2 per room</u>
1931	33,218	0.74	3.4 (approx.)
1951	87,558	0.67	0.8

Comparative figures for 1951 for the County of Surrey are 0.69 persons per room and 1.3% of persons at more than 2 per room.

REPORT 1971

Particulars of several aspects of business conducted at the
Company since 1961 are to be found in the report on the 1961-62
financial year by the Director General of the Public Health Service
relating to the number of private hospitals, the number
which are taken place in the Government period and the number which
have taken place in the period of operation.

PRIVATE HOSPITALS AND INPATIENTS

Year	Private Hospitals	Inpatient Services	Percentage of total
1961	1,000	1,000	100%
1962	1,000	1,000	100%
1963	1,000	1,000	100%
1964	1,000	1,000	100%
1965	1,000	1,000	100%
1966	1,000	1,000	100%
1967	1,000	1,000	100%
1968	1,000	1,000	100%
1969	1,000	1,000	100%
1970	1,000	1,000	100%
1971	1,000	1,000	100%

Comments on figures for 1971 for the Company
of 1971, are 0.00 percent per year and 1.00 of
percentage of total for 1971.

INSPECTION AND SUPERVISION OF FOOD

The report of the Chief Sanitary Inspector indicates the effort which he and his assistants have made in the inspection and supervision of food, and in encouraging its careful and clean handling by all concerned.

ADULTERATION OF FOOD

The Surrey County Council continued to administer the sections of the Food and Drugs Act, 1938, dealing with the adulteration of food. I am indebted to the County Medical Officer of Health for the information that a total of 88 samples for analyses were taken in this district by his staff. These included 21 samples of milk, 9 of confectionary, 7 of ice-cream, 6 of whisky, 4 each of grain and chemical food and 17 of miscellaneous articles. A prosecution was undertaken and a conviction obtained against a seller of chocolate roll deficient in dry fat free cocoa matter.

The information was also given that within that part of the County in which the County Council acts as Food and Drugs authority a total of 1,672 samples were taken for analysis, including 1,294 of milk. Eighty-six samples were found to be adulterated or irregular, 59 of these being of milk. Legal proceedings as described above were taken in one case.

FOOD AND DRUGS ACT, 1938

When the final Census figures showed that the population of the Borough was in excess of 40,000, arrangements were made with the Surrey County Council for the transfer of powers under the Food and Drugs Act, 1938, from the County Council to the Borough Council. The transfer will come into effect on the 1st April, 1954.

REVISIONS TO THE CHARTER

The report of the Joint Committee on the Charter of the City of New York, dated June 1, 1915, and its recommendations, are hereby approved and the same are hereby adopted as amendments to the Charter of the City of New York.

ARTICLE XXV

The Charter of the City of New York is amended to read as follows: Section 1. The City of New York is hereby organized into five boroughs, to-wit: the Borough of Manhattan, the Borough of Richmond, the Borough of Queens, the Borough of Kings, and the Borough of New York.

The Board of Estimate and Apportionment is hereby authorized to make such changes in the boundaries of the several boroughs as it may deem proper, and to report the same to the Board of Aldermen and the Board of Common Council.

ARTICLE XXVI

Section 1. The Board of Estimate and Apportionment is hereby authorized to make such changes in the boundaries of the several boroughs as it may deem proper, and to report the same to the Board of Aldermen and the Board of Common Council.

6. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE
NOTIFIABLE INFECTIOUS DISEASE

Table IV shows the number of cases of infectious disease notified during 1953, classified according to age and sex.

SMALLPOX

No case of smallpox was notified during the year.

VACCINATION AGAINST SMALLPOX - During the year notifications were received from medical practitioners of 446 primary vaccinations, and 208 re-vaccinations which had been performed by them. Of the primary vaccinations 382 related to children under the age of one year, equivalent to 56.3 of the number of births registered in the Borough during the year. The comparative figure for 1952 was 62%.

SCARLET FEVER

Ninety-nine cases of scarlet fever were notified during the year, compared with 58 for the previous year. The case rate per 1,000 population was 1.46 as against 1.39 for England and Wales. Twenty-nine of the cases were admitted to hospital. There was no mortality from the disease, which continued to be of a mild type.

DIPHTHERIA

For the third year in succession no case of diphtheria was notified in the Borough. The case rate for England and Wales was 0.01 per 1,000 population.

Reference to Table V indicates the decline which has taken place in the incidence of this disease.

DIPHTHERIA IMMUNISATION - The aim is for every child to receive a primary treatment of two injections at about the age of nine months, with secondary treatment consisting of single injections at every 3 to 4 years up to the end of school life to reinforce the original treatment. It is not claimed even with such treatment that absolute immunisation will be attained by every child, but there is clear evidence that the risk of an untreated child contracting diphtheria is four times as great as that of an immunised child, and that the risk of death is nearly thirty times as great.

Treatment can be obtained from general practitioners under the terms of the National Health Service Act, or from clinics arranged by the local health authority, these being held at regular intervals at all Infant Welfare Centres serving the district, of which details are set out on page 12. These arrangements are intended primarily for infants and others under school age. Clinics in schools are arranged as required by the Divisional School Medical Officer for pupils requiring treatment.

Notifications were received that 551 children received primary treatment and that 2,103 received reinforcing doses. Possibly some children may have been treated privately or in other districts, about whom information has not been received. The following figures show how the facilities for treatment have been used.

	<u>Primary Treatment</u>	<u>Reinforcing Treatment</u>
Treated at Clinics and Schools	317	1,983
Treated by General Practitioners	<u>234</u>	<u>120</u>
	551	2,103

REPORT ON THE RESULTS OF THE INVESTIGATION OF THE EPIDEMIOLOGY OF THE DISEASE

Table IV shows the number of cases of infectious disease notified during 1955, classified according to age and sex.

DISCUSSION

No case of scarlet fever was notified during the year.

Scarlet fever is a disease caused by the bacterium Streptococcus pyogenes. It is characterized by a sore throat, a skin rash, and a fever. The disease is usually self-limiting and resolves within a few weeks. However, complications can occur, particularly in children, such as rheumatic fever and glomerulonephritis. The incidence of scarlet fever has been declining in many countries over the past few decades, which may be due to the widespread use of antibiotics.

CONCLUSIONS

The results of the investigation show that there was no case of scarlet fever notified during the year. This is in contrast to the previous year when 12 cases were notified. The reasons for this decrease are not clear, but may be due to the use of antibiotics or to a change in the population structure.

REFERENCES

For the year 1955 the notification of cases of infectious disease is shown in Table I. The total number of cases notified was 1,000.

Reference to Table I indicates the number of cases notified in the various districts of the country.

It is noted that the number of cases of infectious disease notified during the year was 1,000, which is a decrease of 10% on the number notified during the previous year. This decrease may be due to the use of antibiotics or to a change in the population structure. The number of cases of scarlet fever notified during the year was zero, which is a decrease of 100% on the number notified during the previous year.

The results of the investigation show that there was no case of scarlet fever notified during the year. This is in contrast to the previous year when 12 cases were notified. The reasons for this decrease are not clear, but may be due to the use of antibiotics or to a change in the population structure.

Scarlet fever is a disease caused by the bacterium Streptococcus pyogenes. It is characterized by a sore throat, a skin rash, and a fever. The disease is usually self-limiting and resolves within a few weeks. However, complications can occur, particularly in children, such as rheumatic fever and glomerulonephritis. The incidence of scarlet fever has been declining in many countries over the past few decades, which may be due to the widespread use of antibiotics.

Age Group	Sex	Number of Cases
0-4	Male	1
0-4	Female	1
5-9	Male	1
5-9	Female	1
10-14	Male	1
10-14	Female	1
15-19	Male	1
15-19	Female	1
20-24	Male	1
20-24	Female	1
25-29	Male	1
25-29	Female	1
30-34	Male	1
30-34	Female	1
35-39	Male	1
35-39	Female	1
40-44	Male	1
40-44	Female	1
45-49	Male	1
45-49	Female	1
50-54	Male	1
50-54	Female	1
55-59	Male	1
55-59	Female	1
60-64	Male	1
60-64	Female	1
65-69	Male	1
65-69	Female	1
70-74	Male	1
70-74	Female	1
75-79	Male	1
75-79	Female	1
80-84	Male	1
80-84	Female	1
85-89	Male	1
85-89	Female	1
90-94	Male	1
90-94	Female	1
95-99	Male	1
95-99	Female	1

In the case of 222 infants the treatment was completed before reaching the age of one year.

At the end of the year it was estimated that 68% of children under the age of 15 years had been treated and were still in an effective state of immunity.

With materials now available it is possible to combine diphtheria and whooping cough immunisation in one series of injections.

ACUTE POLIOMYELITIS

Eleven cases were notified during the year, 7 of which were of the paralytic type and 4 of the non-paralytic type.

The incidence rate for the paralytic type was 0.10 and for the non-paralytic type 0.06, these figures comparing with the rate of 0.07 and 0.04 for England and Wales.

There were no deaths from the disease. In all the non-paralytic type of case and in two of the paralytic type the illness was mild in character and had no permanent after-effects. In five cases of paralytic type the illness and after-effects were severe.

The period of occurrence of cases extended over eight months, the first illness occurring in March and the last in October. In one patient it is probable that the infection was contracted before the patient arrived in the district on holiday.

In seven cases it was impossible to trace any connection with any other known case of the disease, but four cases of severe paralytic type were in a closely associated group. All attended the same school and the onset of their illness was within a week of each other. On the first information being received of the occurrence of a case, the school closed, and no further illness developed.

In a review of the after effects of the 16 cases of paralytic poliomyelitis which were notified in the period 1947 - 1952, it was found that 3 patients were left with no disability, 7 had slight disability, 3 had a moderate amount of disability and 1 was severely crippled and receiving treatment in a residential home four years after the onset of the illness. In two cases no enquiries were possible owing to the removal of the patients to an unknown address. In the same period three deaths have been recorded as caused by poliomyelitis.

MEASLES

Eight hundred and thirty-two cases of measles were notified during the year compared with 432 for 1952. The biggest incidence occurred in the first quarter of the year. The case rate per 1,000 population was 12.31 compared with 12.36 for England and Wales. Eight of the patients were admitted to hospital for treatment. No deaths were recorded from this disease during the year.

In the case of 222 patients the treatment was completed before reaching the age of one year.

At the end of the year it was estimated that 655 of children under the age of 15 years had been treated and were still in an effective state of health.

With statistics now available it is possible to compare diagnosis and treatment with information in our series of patients.

RESULTS

Diagnosis was made by clinical history, physical examination, and of the parents' type and a of the serological type.

The treatment was for 12 months for the first year and for the second year 12 to 18 months. The patients were treated with the use of 2,000 mg. of penicillin and 100 mg. of streptomycin.

There were no deaths from the disease. In all the patients the type of case and in one of the patients the type of case was this in character but had no permanent after-effects. In the case of patients the illness and after-effects were severe.

The period of convalescence of most patients was 12 months. The first illness was in the first year and the last in the second year. It is probable that the infection was contracted before the patient entered the hospital or shortly after.

In some cases it was impossible to trace any connection with any other known case of the disease. In four cases of severe illness the case was in a chronic recurrent group. All patients in this group had the same type of illness as with a week or more delay. In the first instance the illness was of the character of a case, the second attack, and the third illness developed.

In a review of the other illness of the 12 cases of patients hospitalized with their families in the winter 1951-1952, it was found that 3 patients were left with no disability, 7 had slight disability, and a moderate amount of disability, and 2 were severely disabled and requiring treatment in a residential hospital for some time after the end of the illness. In two cases an epidemic was possible since the removal of the patients to an epidemic chamber. In the winter 1951-1952 there has been no further case of patients.

DISCUSSION

Highly infective and highly contagious cases of measles were reported during the year 1951-1952. The illness was of the type which occurred in the first quarter of the year. The case was of the type which was reported with 12 to 18 months for the second year. The patients were admitted to hospital for treatment. In the winter 1951-1952 there has been no further case of patients.

DYSENTERY

Thirty-three cases of dysentery were notified during the year, 31 of the Sonne type and 2 of the Flexner type.

An outbreak of the Sonne type occurred in a Surrey County Council residential nursery in the Epsom area during June and July in which 20 children were affected, 17 of whom were sent to hospital to prevent further spread.

Careful investigations as to the source of the infection were carried out in the 11 cases which occurred in private households. It was found that 2 patients had contracted their infections in France. In another case it was found that the patient was infected in an outbreak affecting a school in another area. In 8 cases no source of infection could be traced, and this is not an unexpected result when investigating the Sonne type of dysentery. This disease is widespread, it is very infectious through the medium of food, drink and other articles liable to contamination by faecal organisms. The resultant illness is frequently so slight that advice as to treatment may not be sought and the importance of taking precautions against spreading the disease may not be realised or may be ignored. The illness is frequently followed by a period of some weeks in which the patient excretes the organisms though apparently in good health.

Two notifications reporting the occurrence of the Flexner type of infection were received from a mental hospital.

PUERPERAL PYREXIA

Thirty cases were notified giving a case rate of 43.3 per 1,000 live and still births compared with a rate of 18.23 for England and Wales. Twenty-six of the notifications were received from the maternity unit of the Epsom District Hospital, 16 of them relating to patients who were admitted for their confinements from addresses outside the Borough. Four notifications related to confinements in private houses.

WHOOPING COUGH

Two hundred and thirty-six cases of whooping cough were notified during the year, the case rate for Epsom and Ewell being 3.49 per 1,000 population against a rate of 3.58 for England and Wales. No deaths were registered from the disease, but this is an illness which may have serious results on the respiratory system which may not show their full effects until later life.

WHOOPING COUGH IMMUNISATION - Notifications were received from various sources that 398 children had received a primary course and 63 children had received reinforcing doses. The majority received the treatment in combination with immunisation against diphtheria.

FOOD POISONING

Forty-two cases of food poisoning were notified during the year giving a case rate of 0.62 per 1,000 population compared with 0.24 for England and Wales. In 36 cases the causative organism was the staphylococcus aureus, in 5 the salmonella typhi murium and in 1 case the organism was not isolated.

GENERAL

Things have been of general type during the year. It is the same type as in the previous year.

An outbreak of influenza occurred in a large family. Several members of the family were during the year. It is the same type as in the previous year.

Several investigations in the course of the year were carried out in this area which resulted in a number of cases. The results of these investigations are as follows: In the first case, a patient was admitted to the hospital in the month of January. The patient was a young man who had been suffering from a fever and headache for several days. The patient was found to have a high fever and a severe headache. The patient was treated with aspirin and rest. The patient recovered in the month of February. In the second case, a patient was admitted to the hospital in the month of March. The patient was a young woman who had been suffering from a fever and headache for several days. The patient was found to have a high fever and a severe headache. The patient was treated with aspirin and rest. The patient recovered in the month of April. In the third case, a patient was admitted to the hospital in the month of May. The patient was a young man who had been suffering from a fever and headache for several days. The patient was found to have a high fever and a severe headache. The patient was treated with aspirin and rest. The patient recovered in the month of June.

GENERAL

Things have been of general type during the year. It is the same type as in the previous year.

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Food Poisoning (cont)

Thirty-four cases occurred in two outbreaks caused by the use of tins of contaminated dried milk in school canteens in which a total of over 300 people were subsequently found to have been affected. The organism responsible for the cases was the staphylococcus aureas. The first outbreak occurred at the end of June in a school in the Stoneleigh area in which 107 children were affected to some degree though only 5 were sufficiently ill to be notified by medical practitioners. Investigations of this outbreak did not result in a definite conclusion as to the cause, though information was obtained which enabled quick decisions to be made when dealing with the second outbreak which occurred ten days later in the Epsom area. On this occasion staff and pupils of the Rosebery County Grammar School, to the number of 207, were affected, of whom 29 were sufficiently ill to be seen and notified by medical practitioners. Early information of the outbreak was received, and specimens of suspected food were rapidly investigated in the Public Health Laboratory. Preliminary bacteriological reports on samples of dried milk showed the presence of an organism possibly capable of producing food poisoning, this organism being similar to one which had been found in scanty numbers in a specimen of dried milk obtained in the first outbreak.

The similarity of these outbreaks and the finding of identical organisms in dried milk supplied to the schools from a common source raised a strong suspicion that the milk was at fault. This opinion was passed on to the County Medical Officer of Health and within 48 hours of the outbreak at Epsom a warning had been circulated to all schools in Surrey against the use of the batch of dried milk involved in these outbreaks. No further outbreaks occurred in Surrey Schools. Information was given to the Ministries of Health and Food for action to be taken elsewhere.

The milk mentioned in this report was dried skimmed milk, produced under the auspices of the Ministry of Food, and used in manufacturing purposes and in canteens for cooking purposes. In these outbreaks it was used as an ingredient of artificial cream. It was not a type suitable for infant feeding.

The fact that the food poisoning organisms or their toxins were present in unopened tins of milk prevents any blame being laid on local conditions for these unfortunate incidents.

Of the remaining notifications one concerned a woman aged about 50 years, whose illness was of such severity that it necessitated her admission to hospital. Investigations suggested that the source of the infection was imported cheese, and bacteriological examinations of samples showed the presence of staphylococcus aureus belonging to a food poisoning type. Although only 1 case was notified it was ascertained that 5 other people were affected in this outbreak.

TUBERCULOSIS

The names of 107 persons were added to the register, 96 suffering from disease of the lungs and 11 of other parts. During the same period 80 names were removed. Details of these figures are set out in such a way that those relating to residents in private households can be distinguished from those in institutions.

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Tuberculosis (cont.)

ADDITIONS TO REGISTER

Primary notifications relating to private residents already residing in the district) 46
Transfers of private residents notified in other areas, now residing in this district	) 28
Notifications of persons residing in institutions	) 30
Posthumous notifications	
In institutions	1
In private households	2

107

REMOVALS FROM REGISTER

By removals to other districts	
(a) Private residents	31
(b) Patients in institutions	5
By recovery	
(a) Private residents	22
(b) Patients in institutions	1
By death	
(a) Private residents	12 x
(b) Patients in institutions	9

80

x Two of these deaths occurred in 1952.

Twenty-three deaths from tuberculosis were assigned to the Borough during the year giving a death rate of 0.31, twenty-one were of the respiratory type and two were of the non-respiratory type, giving a death rate of 0.03. The total death rate of 0.34 compared with 0.20 for England and Wales. The marked rise in the local tuberculosis death rate is due to the new administrative arrangements in the Registrar General's office regarding the assignment of deaths, the effects of which have been discussed in Section 1 of this report.

During the year a review was made of the number of patients in mental hospitals who were known to be suffering from tuberculosis, and their position with regard to notification. At the end of the year a total of 195 cases were known to be in these hospitals, the names of 55 being on the Surrey register, and 90 on registers in the London County Council area. In 50 cases previous notifications could not be traced, and re-notification has been asked for in those patients who have not recovered from the disease.

The number of cases remaining on the Surrey tuberculosis register at the end of the year was as follows:

	<u>Respiratory</u>		<u>Non-Respiratory</u>	
	<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
In private residence	227	188	30	19
In non-private residence	<u>40</u>	<u>6</u>	<u>7</u>	<u>2</u>
TOTAL	267	194	37	21

An analysis into the types of disease, sex and age groups of the new additions to the register and of those removed by reason of death is to be found in Table VI.

TABLE I

TABLE II

Year	...	...	...
1950	...	...	...
1951	...	...	...
1952	...	...	...
1953	...	...	...
1954	...	...	...
1955	...	...	...
1956	...	...	...
1957	...	...	...
1958	...	...	...
1959	...	...	...
1960	...	...	...

The following table shows the results of the survey...

The survey was conducted in 1960 and the results are shown in Table I. The data shows a steady increase in the number of respondents over the period covered. The highest number of respondents was recorded in 1958, with a total of 1200. The lowest number was recorded in 1950, with a total of 800. The average number of respondents per year was 950.

The following table shows the results of the survey in 1960. The data shows a steady increase in the number of respondents over the period covered. The highest number of respondents was recorded in 1958, with a total of 1200. The lowest number was recorded in 1950, with a total of 800. The average number of respondents per year was 950.

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B.C.G. VACCINATION

It is obvious from the figures quoted that a large number of persons in the community are known to be liable to transmit the infection. With the increased expectation of life of the tuberculous person resulting from improved methods of treatment, this proportion is likely to grow. It is also certain that there are a number of unrecognised cases particularly liable to spread infection from ignorance of the need to take precautions. For these reasons it was suggested in the report for 1952 that a considerable decline in the incidence of pulmonary tuberculosis was not to be expected until B.C.G. vaccination was brought into more general use.

Hitherto B.C.G. vaccination has been reserved for family contacts of known cases and for certain classes of the community thought to be at special risk of infection. The Ministry of Health has now signified that it will approve schemes of vaccination for school children between their thirteenth and fourteenth years, the authorities responsible for formulating schemes being local health authorities which in this district is the Surrey County Council. Children in this age group have been chosen because they are entering a period in which they are particularly susceptible to infection, and in which they are likely to have increased risks of coming in contact with infectious persons. A previous test would indicate which of the children would benefit by B.C.G. vaccination, as only those who have no evidence of earlier infection need be treated. Those treated would require a subsequent test to ensure that the necessary reaction has taken place. The tests and vaccination are painless and harmless, and parents need have no anxiety in this respect, and when the treatment becomes available in their district they should have no hesitation in obtaining its benefits for their children.

EPSOM, LEATHERHEAD AND DISTRICT CARE COMMITTEE

The Epsom, Leatherhead and District Tuberculosis Care Committee has continued its work with energy during the year under the Chairmanship of Alderman Mrs. A. Winter. The Secretary of the Committee is Miss M. Wright, who is also the Surrey County Council's Care Almoner in the area, and the Treasurer is Mr. T. L. Flanagan, of the Epsom Branch of the Westminster Bank. Members of the Committee include representatives of the Borough Council, the Leatherhead Urban District Council, Associations and Societies interested in social welfare, and officers engaged in work connected with health, welfare and relief. Thus the Committee is in a good position to help solve the special problems of the tuberculous person and the household to which he belongs, and much valuable work has been done.

TETANUS

Information was received of the occurrence of a case of tetanus in a child aged 3 years. The illness followed the entry of a wooden splinter from a fence into the child's leg. No medical attention was obtained at the time of the injury which was considered to be too slight to need special treatment. Two or three weeks later symptoms of tetanus (lockjaw) appeared for which the child was admitted to hospital. Fortunately it responded well to treatment and was ultimately discharged completely cured.

ARTICLE 1

It is hereby declared that a free market of goods in the country shall be established and maintained in accordance with the provisions of this Act. The Government shall have the right to regulate the production and distribution of goods in the country in order to ensure the stability of the market and the welfare of the people. The Government shall also have the right to regulate the prices of goods in the country in order to ensure the stability of the market and the welfare of the people.

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ARTICLE 2

The Government shall have the right to regulate the production and distribution of goods in the country in order to ensure the stability of the market and the welfare of the people. The Government shall also have the right to regulate the prices of goods in the country in order to ensure the stability of the market and the welfare of the people. The Government shall also have the right to regulate the quality of goods in the country in order to ensure the stability of the market and the welfare of the people. The Government shall also have the right to regulate the quantity of goods in the country in order to ensure the stability of the market and the welfare of the people.

ARTICLE 3

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Tetanus (cont.)

Tetanus is not a common disease and has gradually declined as a result of the decrease in the number of horses, which act as carriers of the organisms. The bacilli are excreted in horse dung, and then assume a spore formation which enables them to remain viable in the soil for a long period. When introduced into a wound offering suitable conditions they become active, multiply and produce a toxin which circulates through the body and produces its characteristic effects on the nervous system. In the period 1935 - 1940 an average of 101 deaths a year was registered in England and Wales as being caused by tetanus; in the period 1941 - 1945 the average fell to 89 and in 1946 - 1950 to 88. For every fatal case there are several which recover, the recovery rate improving with the lengthening of the period between infection and appearance of the symptoms. If the latter appear within a week of the injury the chances of survival are small, and treatment has little effect on such cases.

Prevention is therefore of great importance in dealing with this disease. One method of achieving this is by the injection of tetanus antitoxin as soon as possible after the injury. In practice, cases of serious injury are effectively dealt with as soon as they come under medical supervision; but tetanus may follow a trivial wound, and because the risk of contracting the infection is so slight no medical advice is sought and no prophylactic treatment is given in a considerable proportion of such cases.

Another method of prevention is by antitetanic inoculation similar in principle to immunisation against diphtheria. A material has now been produced in which it has been possible to combine tetanus prevention with that of diphtheria and whooping cough, so that the need for a multiplicity of courses of treatment can be avoided. Immunity against tetanus produced in this way would dispense with the need for tetanus antitoxin injections after injury. The first treatment with this new product with its triple immunisation properties should be given at 4 - 6 months of age, so that immunity to whooping cough can be established early, this being now the most dangerous infectious disease of early childhood. Booster doses are recommended at 2 and 5 years.

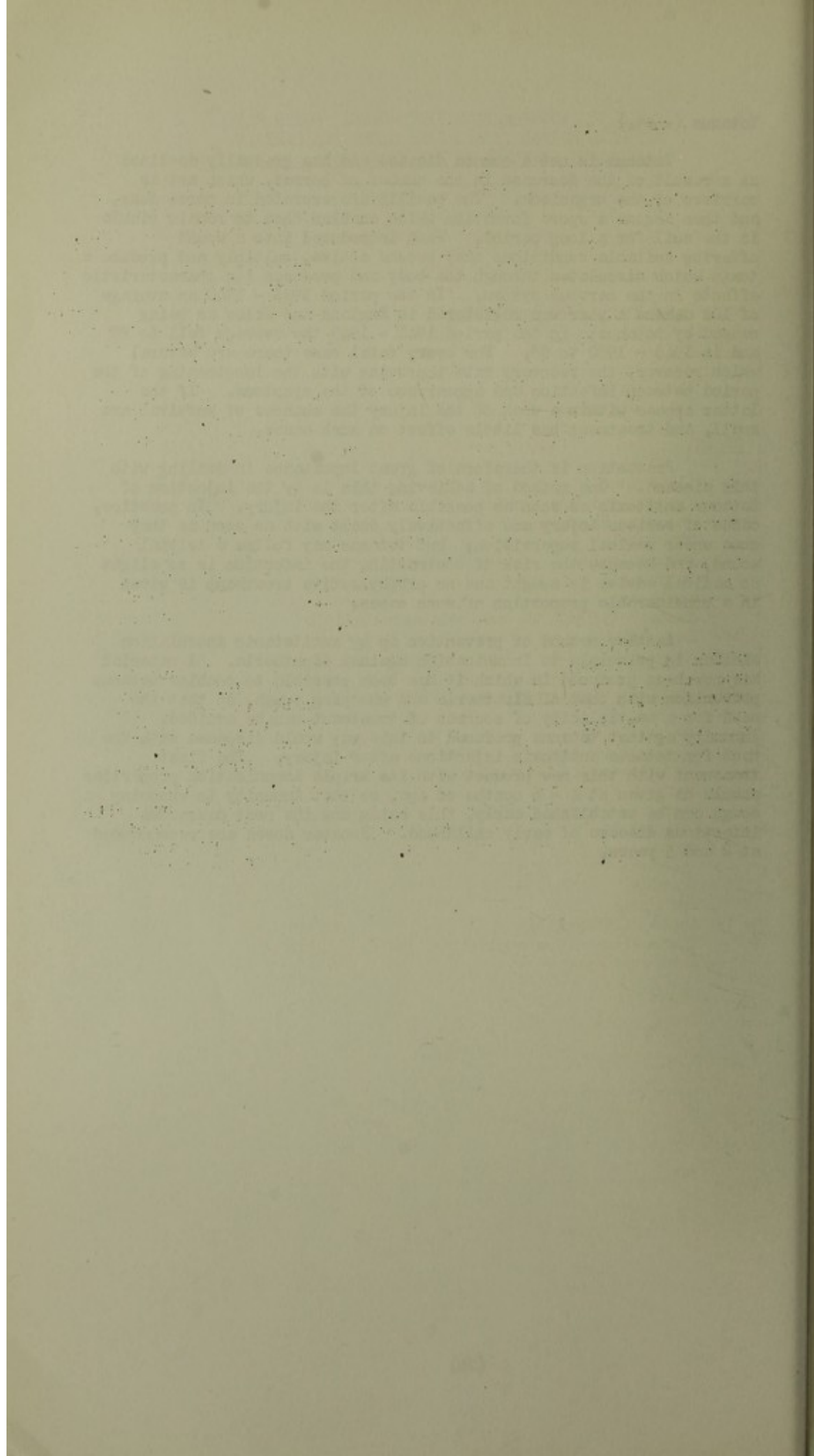


TABLE I. COMPARATIVE BIRTH-RATES, DEATH RATES
MATERNAL MORTALITY AND CASE RATES FOR CERTAIN
INFECTIOUS DISEASES IN THE YEAR 1953

	England and Wales	Borough of Epsom & Ewell
<u>Rates per 1,000 Population</u>		
<u>BIRTHS</u>		
Live Births	15.5	10.0
Still Births	0.35	0.19
<u>DEATHS</u>		
All Causes	11.4	17.0
Typhoid and Paratyphoid	0.00	-
Whooping Cough	0.01	-
Diphtheria	0.00	-
Tuberculosis	0.20	0.34
Influenza	0.16	0.25
Smallpox	0.00	-
Acute Poliomyelitis and polioencephalitis	0.01	-
Pneumonia	0.55	1.09
<u>NOTIFICATIONS (Corrected)</u>		
Typhoid Fever	0.00	0.01
Paratyphoid Fever	0.01	-
Meningococcal Infection	0.03	-
Scarlet Fever	1.39	1.46
Whooping Cough	3.58	3.49
Diphtheria	0.01	-
Erysipelas	0.14	0.18
Smallpox	0.00	-
Measles	12.36	12.31
Pneumonia	0.84	1.51
Acute Poliomyelitis Paralytic	0.07	0.10
(including polioencephalitis) Non-paralytic	0.04	0.06
Food Poisoning	0.24	0.62
<u>Rates per 1,000 Live Births</u>		
<u>DEATHS - ALL CAUSES</u>		
Under 1 year of age	26.8	20.6
Enteritis and Diarrhoea under 2 years of age	1.1	1.5
<u>Rates per 1,000 Total (Live & Still) Births</u>		
Still Births	22.4	18.8
Puerperal Pyrexia (Notification of)	18.23	43.35
Maternal Mortality	0.76	2.89

STATE OF CALIFORNIA
 DEPARTMENT OF AGRICULTURE
 DIVISION OF ENTOMOLOGY

Number of Insects	Species	Location
100
200
300
400
500
600
700
800
900
1000

J. W. ...

TABLE II
COMPARATIVE BIRTH, DEATH AND INFANT MORTALITY RATES

Period	Average Annual Birth Rate per 1,000 Population (Annual Rates 1951 - 1953)		Average Annual Crude Death Rate per 1,000 Population (Annual Rates 1951 - 1953)		Average Annual Rate of children under 1 year of age, per 1,000 Live Births (Annual Rates 1951 - 1953)	
	England and Wales	Epsom and Ewell	England and Wales	Epsom and Ewell	England and Wales	Epsom and Ewell
1931 - 1940	14.9	12.6	12.3	7.3	58	41
1941 - 1950	16.9	14.2	12.3	9.4	43	28.4 (26)+
1951	15.5	10.6 (11.2) x	12.5	10.6 (10.2)x	29.6	27.6 (20)
1952	15.3	9.9 (10.4)	11.3	9.0 (8.7)	27.6	20.9 (14)
1953	15.5	10.0 (11.2)	11.4	17.0 (14.9)	26.8	20.6 (14)

x Bracketed figures represent standardised rates

+ Bracketed figures represent number of deaths

1. *Journal of the American Medical Association*
 2. *Journal of the American Dental Association*

Year	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
1910	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1911	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1912	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1913	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1914	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1915	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1916	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1917	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1918	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1919	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
1920	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000

1910-1920
 1910-1920
 1910-1920

TABLE III

CAUSES OF DEATH IN THE BOROUGH OF EPSOM AND EWELL

	M	F	TOTAL
1. Tuberculosis of the Respiratory System	20	1	21
2. Other forms of Tuberculosis	2	-	2
3. Syphilitic Disease	3	-	3
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal Infections	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	2	-	2
10. Malignant neoplasm, stomach	13	8	21
11. Malignant neoplasm, lung, bronchus	21	6	27
12. Malignant neoplasm, breast	-	22	22
13. Malignant neoplasm, uterus	-	7	7
14. Other malignant and lymphatic neoplasms	37	38	75
15. Leukemia, aleukemia	1	3	4
16. Diabetes	5	2	7
17. Vascular lesions of nervous system	66	81	147
18. Coronary disease, angina	59	42	101
19. Hypertension with heart disease	8	10	18
20. Other heart disease	107	211	318
21. Other circulatory disease	28	30	58
22. Influenza	3	14	17
23. Pneumonia	39	35	74
24. Bronchitis	41	14	55
25. Other diseases of the respiratory system	9	1	10
26. Ulcer of the stomach and duodenum	6	3	9
27. Gastritis, enteritis and diarrhoea	2	4	6
28. Nephritis and nephrosis	1	2	3
29. Hyperplasia of prostate	6	-	6
30. Pregnancy, childbirth, abortion	-	2	2
31. Congenital malformations	4	4	8
32. Other defined and ill-defined diseases	47	44	91
33. Motor vehicle accidents	1	3	4
34. All other accidents	7	13	20
35. Suicide	5	3	8
36. Homicide and operations of war	-	-	-
	543	603	1,146

TABLE II

TABLE OF CONTENTS IN THE REPORT OF THE BOARD

Page	Chapter	Section
1	I	Introduction
2	II	General Principles
3	III	Administrative Organization
4	IV	Financial Administration
5	V	Personnel Administration
6	VI	Technical Administration
7	VII	Public Administration
8	VIII	International Administration
9	IX	Concluding Remarks
10	X	Appendix
11	XI	Bibliography
12	XII	Index

TABLE IV

NOTIFICATIONS OF INFECTIOUS DISEASE

	Under 1 year		1-2		3-4		5-9		10-14		15-24		25-44		45-64		65 years & over		All ages		Total all ages both sexes	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Typhoid Fever																						1
Paratyphoid Fever																						1
Meningococcal Infections																						1
Scarlet Fever			6	8			37	34	5	1	1	2	1	2					55	44		99
Whooping Cough			17	27			62	75	2	1	1	1	1	1				104	132		236	
Diphtheria																						1
Erysipelas																						1
Smallpox																						1
Measles																						1
Pneumonia	7	6	75	99	100	99	235	199	17	10	7	7	5	4					451	381	832	
Acute Poliomyelitis	1	3	2	3	3	3	7	9	1	3	2	8	7	6	16			10	41	61	102	
(inclg. Poliomyelitis paralytic)																				4	3	7
(inclg. Poliomyelitis non-paralytic)																				3	1	4
Food Poisoning																						1
Puerperal Pyrexia										14	7			8	2			2	10	32	42	42
Dysentery																						30
Malaria	3	1	3	1	3	1	2	1	1		2	1	1	3	1	2	1		17	16	33	33

TABLE V

INCIDENCE OF DIPHTHERIA IN THE BOROUGH OF EPSOM AND EWELL

Year	Average Annual Number of cases notified (Annual No. 1949-1953)	Average Annual Incidence Rate 1,000 Population (Annual Rates 1949-1953)	Average Annual Number of Deaths (Annual No. 1949-1953)	Average Annual Mortality Rate per 1,000 Population (Annual Rates 1949-1953)	Average Annual Number of Primary Immunisation Treatments (Annual No. 1949-1953)
1934-1938	19.8 (1.8) +	0.40	0.8	0.016	357
1939-1943	9.8 (3)	0.16	0.2	0.004	1,266
1944-1948	6 (3.8)	0.09	0.2	0.004	881
1949	-	-	-	-	947
1950	1 (1)	0.01	-	-	760
1951	-	-	-	-	696
1952	-	-	-	-	567
1953	-	-	-	-	551

+ Figures in brackets indicate number of cases among staff and patients of the Hospitals for Mental Diseases.

TABLE VI

Under 1 year	Primary notifications relating to persons resident in the Borough of Epsom and Ewell				Secondary notifications of persons already notified in other districts now resident in the Borough of Epsom and Ewell				Deaths				
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		
	M	F	M	F	M	F	M	F	M	F	M	F	
1	-	1	-	-	-	-	-	-	-	-	-	-	-
4	-	1	-	-	-	-	-	-	-	-	-	-	-
9	-	1	-	-	-	-	-	-	-	-	-	-	-
14	-	1	-	-	-	-	-	-	-	-	-	-	-
19	-	3	-	-	-	1	-	-	-	-	-	-	-
24	4	2	-	-	1	1	-	-	-	-	-	-	-
34	4	2	-	-	2	4	-	-	-	1	-	-	-
44	9	5	-	1	6	2	-	-	1	1	-	-	-
54	6	2	-	1	7	4	-	-	5	4	-	-	-
64	13	1	-	3	2	2	-	-	3	3	-	-	-
65 yrs. & over	8	1	-	1	2	2	-	-	4	1	-	-	-
	5	1	-	1	-	-	-	1	6	1	-	-	-
	49	19	5	4	19	9	1	1	20	1	2	-	-

TABLE VII
TUBERCULOSIS INCIDENCE AND MORTALITY

<u>Year</u>	<u>Primary Notifications</u> Average Annual No. (Annual No. 1949-1953)	Annual Average Rate per 1000 Population (Annual Rate 1949-1953)	Average Annual No. of Inward Transfers (Annual No. 1949-1953)	Average Annual No. Posthumous Notifications (Annual No. 1949-1953)	Average Annual No. of Deaths (Annual No. 1949-1953)	Average Annual Death Rate per 1000 Population (Annual Rates 1949-1953)
1934-1938	40.8	0.78	20.8	3	18	0.35
1939-1943	68.6	1.11	20.6	5	32.8	0.52
1944-1948	74.6	1.15	24.8	6.2	25.4	0.36
1949	75	1.10	20	5	27	0.40
1950	52	0.76	26	1	20	0.29
1951	54	0.79	24	2	15	0.22
1952	74	1.09	18	3	11	0.16
1953	74	1.09	30	3	23	0.34

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Public Health Department,
West Hill House,
West Hill,
Epsom,
Surrey.

July, 1954.

To the Mayor, Aldermen and Councillors of the

BOROUGH OF EPSOM AND EWELL

Mr. Mayor, Ladies and Gentlemen,

I beg to submit my seventeenth Annual Report on the work of the Sanitary Inspectors, which is compiled in accordance with the requirements of Article 27 of the Sanitary Officers' (Outside London) Regulations, 1935.

Each year the duties of the Sanitary Inspector become more extensive and varied, legislation relating to public health increases and while the objects of sanitary inspection remain substantially the same, the method of approach to many problems has changed. To-day the needs of hygiene are generally recognised and the public is, on the whole, anxious to co-operate, thus the Sanitary Inspector is able to work much more by way of explanation and persuasion rather than by threats and legal action. Traders and property owners do not always find it easy to ascertain and comply with the law, but there is a greater tendency to come to the Sanitary Inspector for advice and help in solving their problems.

During the year 1953, a total of 6,645 inspections and visits were made by the Sanitary Inspectors and over 800 complaints investigated. The results achieved cannot always be recorded by statistics and it is not possible to prepare a balance sheet at the end of the year to indicate success or failure in the work of the Department. Inspections relating to food hygiene may be quoted as an example. The number of food premises visited or the quantity of foodstuffs condemned can only give an indication of the duties performed by the Sanitary Inspector, whereas discussions with traders, suggestions for improvements, and the giving of practical advice with regard to cleanliness, which cannot be recorded by figures, may in many cases have been the means of preventing an outbreak of food poisoning or other illness.

A similar view can be taken with regard to housing inspections. Here again, the number of roofs repaired or walls and ceilings decorated does not take into account the improvement in the standard and comfort and happiness in the home, or the encouragement to the housewife, which often results from attention being given to housing defects.

The gradual speeding up of house building is most heartening, but if the shortage of housing accommodation is to be overcome, the preservation of old houses which can provide good homes for many years ahead, should not be overlooked. The repair and maintenance of existing houses must always remain of fundamental importance, for neglect of this aspect of the housing problem will prevent full advantage being taken of supply of new houses.

It is difficult to summarise the wide variety of work undertaken during the year, but the details in the report give some indication of duties performed.

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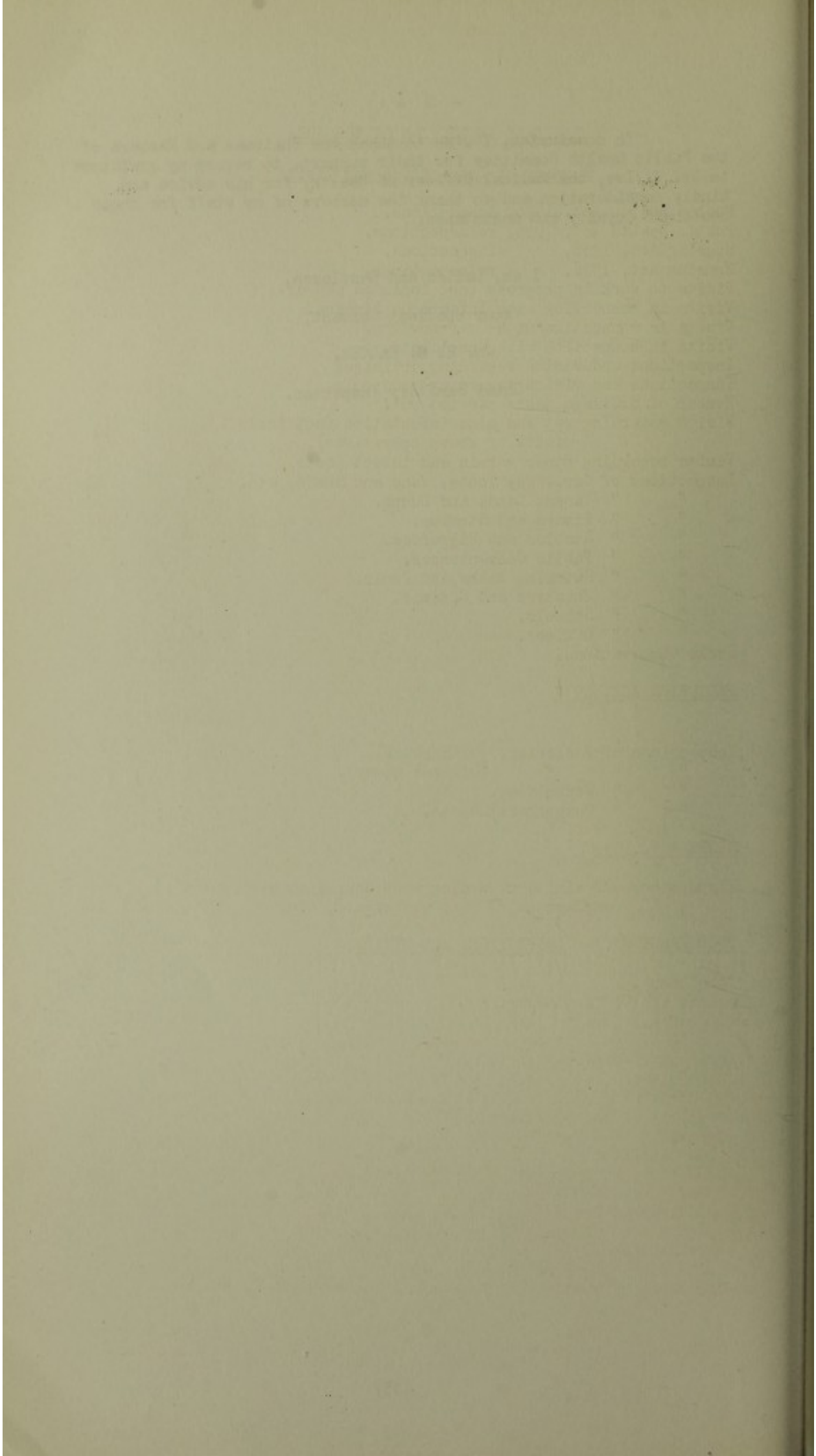
In conclusion, I wish to thank the Chairman and Members of the Public Health Committee for their support, to record my gratitude to Dr. C. Ive, the Medical Officer of Health, for his advice and kindly consideration and to thank the members of my staff for their continued loyalty and assistance.

I am, Ladies and Gentlemen,

Your obedient Servant,

WM. H. C. HAGGER.

Chief Sanitary Inspector.



SANITARY INSPECTION OF THE AREA

Summary of Inspections and Visits

Public Health Act, 1936, inspections.		541
Public Health Act, 1936, reinspections.		1,069
Housing Act, 1936, inspections.		2
Housing Act, 1936, reinspections.		50
Visits to work in progress (not included above).		433
Visits in connection with Infectious Disease.		528
Visits in connection with Overcrowding.		14
Visits in connection with Complaints.		364
Inspections and visits regarding drainage.		879
Inspections and visits regarding cesspools.		103
Number of drainage tests carried out.	200	-
Visits regarding rat and mice infestation (not including visits of rodent operatives).		230
Visits regarding other vermin and insect pests.		161
Inspections of Caravans, Tents, Vans and Sheds, etc.		63
" " Vacant Lands and Dumps.		73
" " Rivers and Streams.		12
" " Stables and Piggeries.		79
" " Public Conveniences.		24
" " Swimming Baths and Pools.		21
" " Theatres and Cinemas.		3
" " Schools.		35
" " Offices.		2
Smoke Observations.		8

FACTORIES ACT, 1937

No. on
Register.

Inspections of Factories, (with power).	131	164
" " " (without power).	26	20
" " Workplaces.	8	5
" " Outworkers' Rooms.	-	39

SHOPS ACT, 1950

Inspections and visits regarding shop hours, conditions of employment of shop assistants, etc.		46
--	--	----

FOOD PREMISES - INSPECTIONS AND VISITS:-

Bakehouses.	11	55
Bakers and Confectioners.		15
Butchers	37	96
Dairies and Milkshops.		12
Fishmongers and Poulterers.		57
Food Vans and Vehicles.		14
Fried Fish Shops.		11
Greengrocers and Fruiterers.		79
Grocers and Provision Shops.		117
Ice-cream Premises	108	155
Manufacture or preparation of Preserved Food.	27	13
Miscellaneous Food Premises.		29
Public Market and Food Stalls.		10
Restaurants, Cafes and Dining Rooms.		89
Slaughterhouses.	4	120
Visits regarding Unsound Food.		263
Miscellaneous visits and inspections not included above.		<u>542</u>
Total		<u>6,645</u>

GENERAL INFORMATION

Summary of Information

1. Name of the project: [Faint text]

2. Location: [Faint text]

3. Date of completion: [Faint text]

4. Objectives: [Faint text]

5. Methodology: [Faint text]

6. Results: [Faint text]

7. Conclusions: [Faint text]

8. Recommendations: [Faint text]

9. Acknowledgments: [Faint text]

10. References: [Faint text]

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SAMPLING

Ice-cream samples	47
Milk samples (bacteriological)	183
Water samples from:-	
Main supplies (domestic)	12
Mental Hospitals - private wells (untreated)	103
" " - main supply and treated	23
Swimming Baths and Pools	17

COMPLAINTS

The following is a summary of the complaints received during the year:-

Insanitary condition of premises	85
Flooding	6
Choked or defective drains	120
Defective dustbins	5
Offensive accumulations	8
Pig food storage bins	3
Keeping of animals or poultry	7
Rat or mice infestation	458
Nuisance from flies or other insect pests	25
Vermin	6
Offensive smells	43
Unsound food	13
Milk supply, milk bottles, etc	8
Factory and Shops Acts	5
Overcrowding	4
Smoke	4
Miscellaneous	46
	<hr/>
	846
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NUISANCES AND DEFECTS

Number of premises where nuisances or defects found	112
Number of nuisances or defects found	564

NOTICES

Number of Notices served under the following Acts:-

Public Health Act, 1936	(Statutory)	4
" " " "	(Informal)	91
Housing Act, 1936	(Statutory)	2
" " " "	(Informal)	-
Factories Act, 1937	"	13
Shops Act, 1950	"	4
Food and Drugs Act, 1938	"	16
		<hr/>
		130
		<hr/>
Number of Notices outstanding at end of year		12

SUMMARY OF NUISANCES ABATED, DEFECTS REMEDIED AND OTHER SANITARY MATTERS ATTENDED TO

Choked drains cleared	119
Drains repaired or relaid	70
Inspection chambers built or repaired	65

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W.C.'s repaired or renewed	15
W.C.'s cleaned	6
W.C.'s flushing cisterns repaired or renewed	6
W.C.'s new or additional	56
Soil vent pipes or F.A.I.'s repaired or renewed	23
Waste pipes repaired or renewed	9
New gullies provided	51
New sinks or wash basins provided or renewed	92
Water service pipes repaired or renewed	8
Cesspools repaired or emptied	15
Cesspools abolished	4
Cesspools new	1
New dustbins provided	12
Yard paving provided or repaired	7
Chimney stacks repaired or rebuilt	8
Roofs repaired	41
Eaves guttering or rainwater pipes repaired or renewed	38
Walls (external) rendered, re-pointed or repaired	9
Walls replastered or repaired	22
Ceilings replastered or repaired	31
Walls and ceilings cleansed and redecorated	63
Floors repaired or renewed	16
Fireplaces or ranges repaired or renewed	12
Stairs repaired or renewed	1
Doors repaired or renewed	6
Windows repaired or renewed	12
Sashcords provided or renewed	8
Additional lighting and ventilation provided	2
Dampness remedied	31
Coppers provided or repaired	2
Food stores ventilated, repaired or cleansed	2
Rooms disinfected after Tuberculosis	14
Disinfection on request (cost defrayed)	10
Rooms, etc., sprayed for flies or other insect pests	27
Dairies cleansed and repaired	2
Bakohouses cleansed	6
Slaughterhouses, stables or pigsties cleansed	6
Keeping of animals - nuisances abated	3
Offensive accumulations removed	6
Miscellaneous defects remedied	95

Unfit Houses

The following dwelling-houses found unfit for human habitation were dealt with during the year in consequence of official representations:-

"Rose Cottage", Woodcote Side, Epsom

Promises vacated on the 30th November, 1953. Demolition nearing completion. Occupants re-housed in Council house on new estate.

1 & 2 Bonesgate Cottages, Chessington Road, West Ewell

Family who occupied the two cottages re-housed by the Council. Delay in complying with Demolition Order but work finally completed on the 13th May, 1953.

47, The Avenue, Worcester Park

Action under Section 11 of the Housing Act, 1936, was deferred for six months at the request of Solicitors for the owner/occupier on the grounds of hardship. The premises were vacated before the end of this period and the dwelling-house subsequently demolished.

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Overcrowding

In the course of investigating complaints and applications for housing accommodation, eight families have been found to be living under overcrowded conditions, but only in three cases was it possible for the Council to offer alternative accommodation.

Eradication of Bed Bugs

Five houses were dealt with for bug infestation. In each case the rooms affected were thoroughly sprayed with insecticide and where necessary, bedding, etc., was removed for steam disinfection.

Subsequent inspections were made and in no case was any reinfestation reported.

Schools

Thirty-five inspections and visits by the Sanitary Inspectors were made during the year to Schools in the Borough, including private schools. Minor repairs to drainage and sanitary fittings were found necessary.

There are twenty-five private schools in the Borough.

FACTORIES ACT, 1937

Prescribed particulars on the administration of the Factories Act, 1937

- (1) Inspections for Purposes of Provisions as to health, including inspections made by Sanitary Inspectors.

Premises (1)	Number on Register (3)	Number of		
		Inspections (4)	Written Notices (5)	Occupiers Prosecuted (6)
(i) Factories in which Sections 1,2,3,4, and 6 are to be enforced by local Authorities	26	20	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	131	164	13	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	8	5	-	-
TOTAL	165	189	13	-

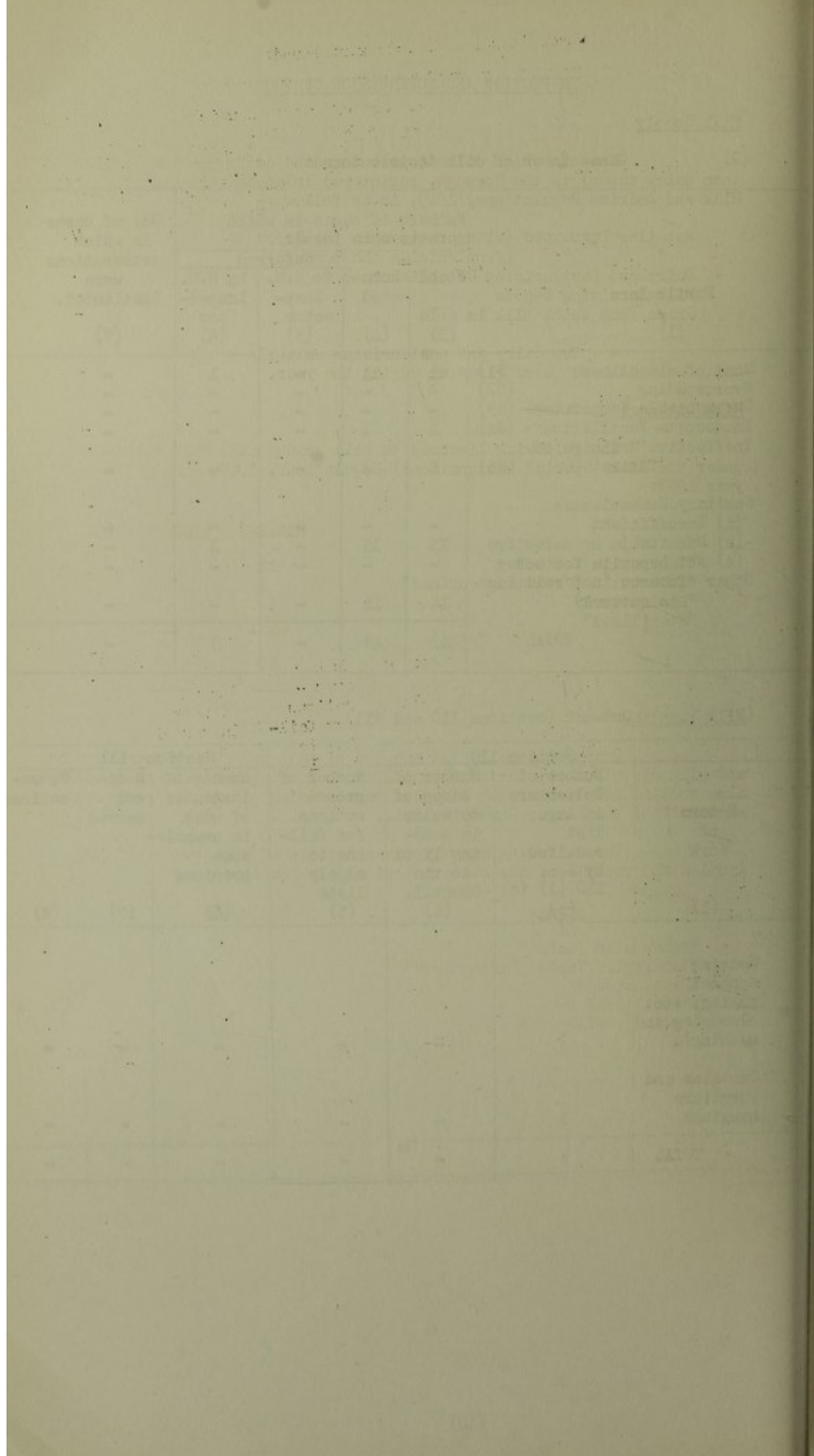
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(2) Cases in which defects were found:

Particulars (1)	Numbers of cases in which defects were found:				No. of cases in which prosecutions were instituted. (7)
	Found (3)	Remedied (4)	Referred		
			to H.M. Inspector (5)	by H.M. Inspector (6)	
Want of cleanliness (S1)	11	11	-	1	-
Overcrowding (S2)	-	-	-	-	-
Unreasonable Temperature (S3)	-	-	-	-	-
Inadequate Ventilation (S4)	1	1	-	-	-
Ineffective drainage of floors (S6)	2	2	-	-	-
Sanitary Conveniences					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	15	15	-	2	-
(c) Not separate for sexes	-	-	-	-	-
Other offences (not relating to outwork)	14	14	-	-	-
TOTAL	43	43	-	3	-

(3) Outwork (sections 110 and 111)

Nature of Work (1)	Section 110			Section 111		
	Number of Outworkers in Aug. list required by Sec. 110 (1) (c) (3)	Number of cases of defaults in sending lists to the Council. (4)	Number of prosecutions for failing to supply lists (5)	Number of instances of work in unwholesome premises (6)	Notices served (7)	Prosecutions (8)
Wearing apparel (rinking, etc. cleansing and washing).	2	-	-	-	-	-
Curtains and furniture hangings	1	-	-	-	-	-
TOTAL	3	-	-	-	-	-



INSPECTION AND SUPERVISION OF FOOD

Milk Supply

The number of milk distributors and dairy premises (other than dairy farms) in the Borough, registered in accordance with the Milk and Dairies Regulations, 1949, is as follows:-

Retailer Purveyors (with premises in the Borough)	4
" " (from outside the Borough)	8
+ Dairy and Pasteurising Establishments	-
Milk Receiving Depots	4
Shops from which milk is sold	16

+ Two dairy and pasteurising establishments were given up during the year.

Milk Licences

The following licences to sell graded milk were granted under the Milk (Special Designations) Regulations, 1949, during the year 1953:-

	<u>Dealers</u>	<u>Supplementary</u>
"Tuberculin Tested"	12	6
"Tuberculin Tested Pasteurised"	1	2
"Pasteurised"	12	7
"Sterilised"	<u>20</u>	<u>7</u>
	45	22
	<u> </u>	<u> </u>

Milk Sampling

During the year, 183 samples of milk were taken from dairies and milk distributors, including supplies to local hospitals and schools, also routine sampling of two licensed pasteurising plants in the Borough on behalf of the Surrey County Council.

The following summary gives details of the grades of milk sampled and results of the bacteriological examination:-

<u>Grade</u>	<u>No. of Samples</u>
"Tuberculin Tested"	2
"Tuberculin Tested Pasteurised"	53
"Pasteurised"	117
"Sterilised"	9
Ordinary Milk (untreated)	<u>2</u>
TOTAL	183
	<u> </u>

The University of Chicago is pleased to announce that the following students have been elected to membership in the Phi Kappa Phi Honor Society for the year 1911.

ALBERT B. BROWN, JR., School of Divinity
ALFRED C. BROWN, School of Divinity
ARTHUR H. BROWN, School of Divinity
CHARLES E. BROWN, School of Divinity
EDWARD G. BROWN, School of Divinity
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Result of Tests:-

	Methylene Blue Test ϕ		Phosphatase Test $\%$		Turbidity Test	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
"Tuberculin Tested"	2	-	-	-	-	-
"T.T..Pasteurised"	53	-	53	-	-	-
"Pasteurised"	115	2	114	3	-	-
"Sterilised"	-	-	-	-	9	-
Ordinary Milk (untreated)	2	-	-	-	-	-
	172	2	167	3	9	-

ϕ Methylene Blue Test not applied to 9 samples
 $\%$ Phosphatase " " " " 13 "

MEAT AND OTHER FOODS

Slaughterhouses

There is one private slaughterhouse in the Borough and arrangements are made for local pigkeepers to use this slaughterhouse for the occasional slaughter of pigs under licence. It serves a useful purpose in preventing, as far as possible, pigkeepers slaughtering on their own premises, where conditions are not always suitable, and provides better facilities for inspection of the carcasses.

At the request of the South West Metropolitan Regional Hospital Board, arrangements are made for the inspection of all animals after slaughter at the three slaughterhouses in use at Mental Hospitals in the Borough.

The following summary relates to the inspection of animals after slaughter at the private and hospital slaughterhouses during the year:-

Carcases inspected and condemned:-

	Cattle excluding cows	Cows	Calves	Sheep and lambs	Pigs
Number killed (if known)	5	52	156	10	89
Number inspected	5	52	156	10	89
All diseases except Tuberculosis: Whole carcasses condemned	-	1	1	-	3
Carcasses of which some part or organ was condemned	2	9	2	-	-
Percentage of the number inspected affected with disease other than tuberculosis	40%	19.23%	1.92%	-	3.37%
Tuberculosis only: Whole carcasses condemned	-	-	1	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	1
Percentage of the number inspected affected with Tuberculosis	-	-	.64%	-	1.12%

Slaughter of Animals Act, 1933

Nine applications for the renewal of licences to slaughter animals under the above Act were received and considered by the Council. In each case the licence was granted, and the fees, amounting to 9/- (nine shillings) were forwarded to the Borough Treasurer.

Butchers' Shops

There are thirty-seven butchers' shops in the Borough all of which have been periodically inspected during the year, ninety-six visits and inspections being made.

A refrigerator or other means of cold storage is provided at each shop and all have permanent glass windows as shop fronts.

The standard of cleanliness in butchers' shops has, on the whole been satisfactory, and only in a few cases was it necessary to serve Notices.

Condemned Meat and Other Foods

The following meat and other foods were inspected at shops and food stores within the Borough and found to be unfit for human consumption:-

Meat and Offal	1793 lbs.	Dried Fruit	267½ lbs.
Sausages	71¾ lbs.	Sugar	28 lbs.
Cooked Meat	45½ lbs.	Tinned Fruit	830 tins.
Tinned Meat	333 tins.	Tinned Vegetables	232 tins.
Meat Paste	52 jars.	Jam & Marmalade	44 jars.
Beef Suet	20 pkts.	Milk	148 tins.
Fish	137½ stone.	Dried Peas	92 lbs.
Tinned Fish	109 tins.	Semolina	108 lbs.
Butter	30 lbs.	Macaroni	28 lbs.
Bacon	64½ lbs.	Biscuits	20 pkts.
Cheese	(96¼ lbs.	Creanola	78 pkts.
	(52 boxes	Soup	28 tins.
Cheese Spread	388 pkts.	Other Foodstuffs	94 tins, jars or packets.

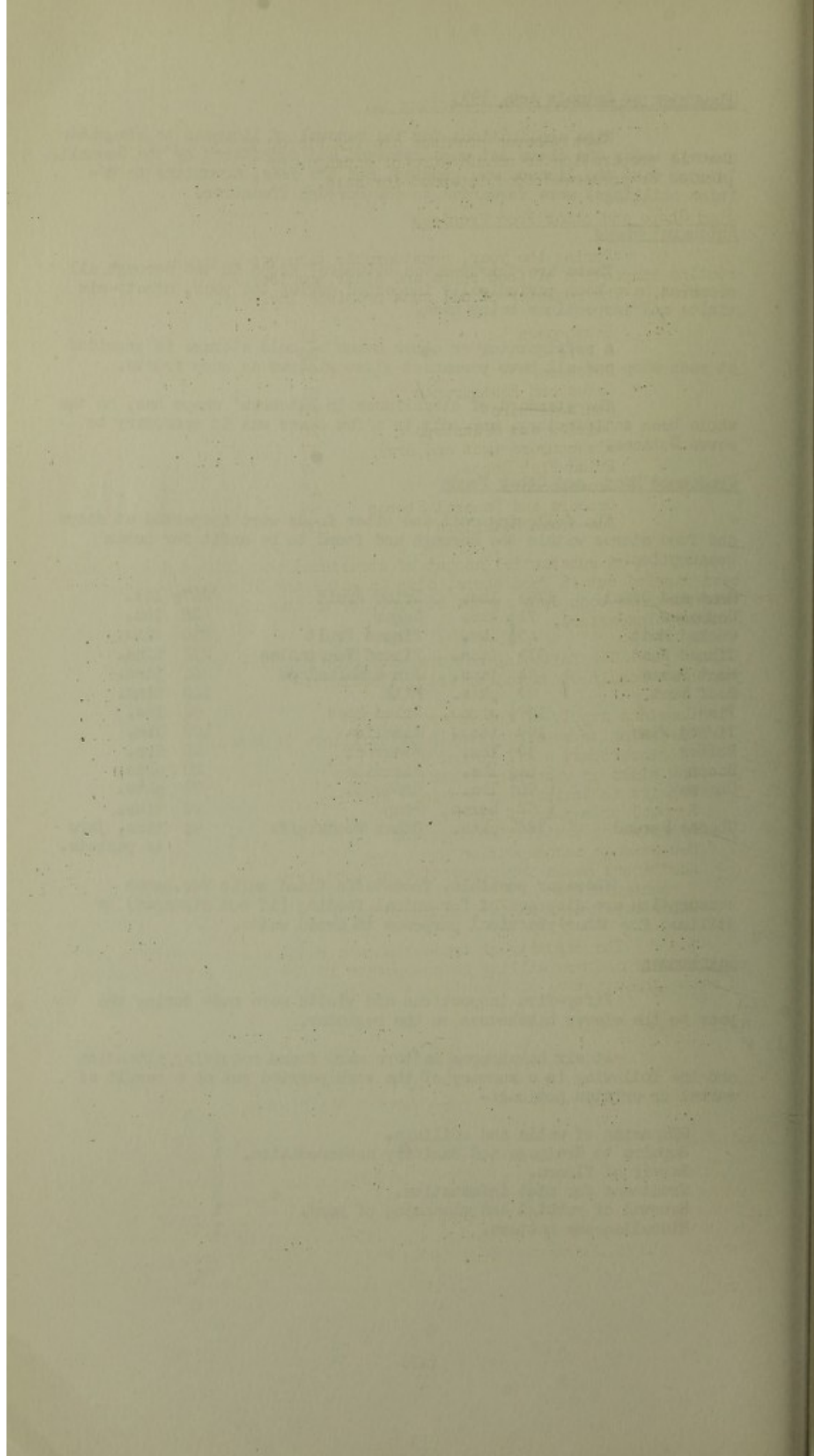
Wherever possible, foodstuffs found unfit for human consumption are disposed of for animal feeding (if not diseased) or utilised for other practical purposes to avoid waste.

Bakehouses

Fifty-five inspections and visits were made during the year to the eleven bakehouses on the register.

At six bakehouses matters were found requiring attention and the following is a summary of the work carried out as a result of verbal or written notices:-

Cleansing of walls and ceilings.	6
Repairs to drainage and sanitary accommodation.	1
Repair of floors.	2
Treatment for mice infestation.	3
Removal of rubbish and cleansing of yard.	1
Miscellaneous matters.	1



Food and Drugs Act, 1938. Section 14.

Twenty-seven premises are registered under this Section for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale.

Food Shops and other Food Premises

During the year, considerable time was devoted to the routine inspection of food shops and other premises where food is prepared. The register of all such premises includes the following:-

Bakehouses	11
Bakers	20
Butchers	37
Cafes and Restaurants	51
Confectioners	60
Dairies and Milkshops	20
Fishmongers (wet and dry)	17
Fried Fish Shops	7
Greengrocers	45
Grocers and General Stores	89
Ice-cream Retailers	108

A substantial amount of structural and cleansing work has been carried out in food shops, also in cafes and kitchens. Much of this work has been done at the request, or on the advice of the Sanitary Inspectors.

The following matters have been attended to during the year as a result of verbal or written notices:-

Constant supply of hot water provided	6
Cleansing or repair of walls and ceilings of shops, storerooms, staff rooms, W.C's, etc.	19
New sinks or wash-hand basins provided	3
Repairs to drainage or sanitary fittings	4
Renewal or repair of floors	1
Lighting or ventilation improved	2
New storage accommodation	1
Additional means for protection of food from contamination	3
Other repairs or matters attended to	5

The majority of traders show a readiness to comply with requirements and are willing to co-operate in the efforts being made to raise the standard of cleanliness in the handling of food.

Clean Food Byelaws

The Byelaws with respect to the handling, wrapping and delivery of food and sale of food in the open air, have been adopted by the Council and came into operation on the 17th July, 1950.

Shops Act, 1950

The inspection of food shops in connection with food hygiene has resulted in the carrying out of repairs and improvements to shop premises, affecting sanitary accommodation, washing facilities, lighting and ventilation, etc., which also has the effect of improving conditions for the employees and meeting requirements of the Shops Act.

Ice-cream

The number of premises used in connection with the manufacture or storage and sale of ice-cream registered under Section 14 of the Food and Drugs Act, 1938, at the end of the year was as follows:-

For manufacture and sale of ice-cream	2
For storage and sale of ice-cream	<u>106</u>
TOTAL	<u>108</u>

The majority of retailers obtain their supplies of ice-cream from large manufacturers outside the Borough and in most cases pre-packed.

Of the two traders manufacturing locally, one is a heat-treatment manufacturer, and the other uses the cold mix method.

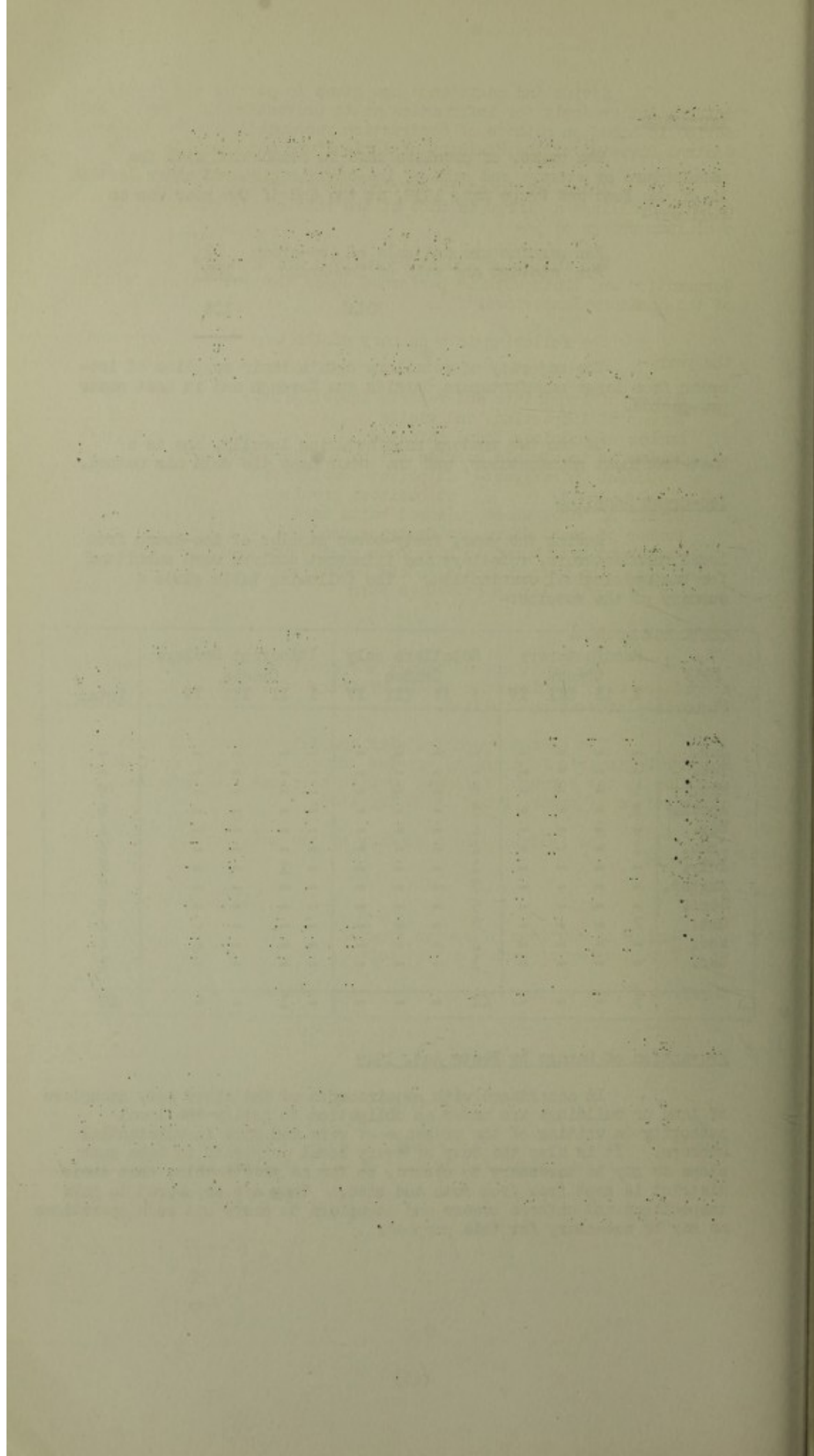
Ice-cream Sampling

During the year, forty-seven samples of ice-cream from local manufacturers, retailers and itinerant dealers were submitted for bacteriological examination. The following table gives a summary of the results:-

1953	Manufacturers Grades				Retailers only Grades				Itinerant Dealers Grades				Total	
	I	II	III	IV	I	II	III	IV	I	II	III	IV		
Jan.	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Feb.	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mar.	1	-	-	-	8	-	-	-	-	-	-	-	-	9
April.	1	-	-	-	5	-	-	-	-	-	-	-	-	6
May.	-	-	-	-	4	-	-	-	-	-	-	-	-	4
June.	1	-	-	-	4	-	-	-	-	-	-	-	-	5
July.	-	-	-	-	1	-	-	-	-	1	-	-	-	2
August.	-	-	-	-	7	-	-	-	-	-	-	-	-	7
Sept.	-	-	-	-	5	-	-	-	-	-	-	-	-	5
Oct.	2	-	-	-	2	-	-	-	-	-	-	-	-	4
Nov.	-	-	-	-	4	-	-	-	-	-	-	-	-	4
Dec.	-	-	-	-	1	-	-	-	-	-	-	-	-	1
	5	-	-	-	41	-	-	-	-	1	-	-	-	47

Prevention of Damage by Pests Act, 1949

In accordance with requirements of the above Act, occupiers of land or buildings are under an obligation to notify the local authority in writing of the presence of rats and mice in substantial numbers. It is also the duty of every local authority to take such steps as may be necessary to secure, so far as practicable, that their district is kept free from rats and mice. They are empowered to make inspections and enforce owners and occupiers to carry out such operations as may be necessary for this purpose.



Advice and assistance are given to persons who report any infestation or apply for information as to preventive measures. Such advice is based on methods of destruction recommended by the Infestation Control Division of the Ministry of Agriculture and Fisheries.

Where treatment is carried out at premises other than private dwellings a charge is made at the rate of 5/- per hour, with a minimum charge of 5/-

Two full-time Rodent Operatives are employed by the Corporation and their work is performed under the general supervision of the Sanitary Inspectors.

The following is a summary of the work carried out during the year:-

Number of complaints and reports investigated	470
Number of inspections and visits	4664
Number of premises found infested	698
Number of treatments carried out by the Corporation's Rodent Operatives:-	
at private dwellings	665
at business premises	69
Number of cases where poisoned baits used	786
Number of cases where gas or traps used	26
Number of rats known to have been caught and destroyed by:	
(a) the Corporation's Rodent Operatives	1423
(b) by employees at Sewage Farm	241

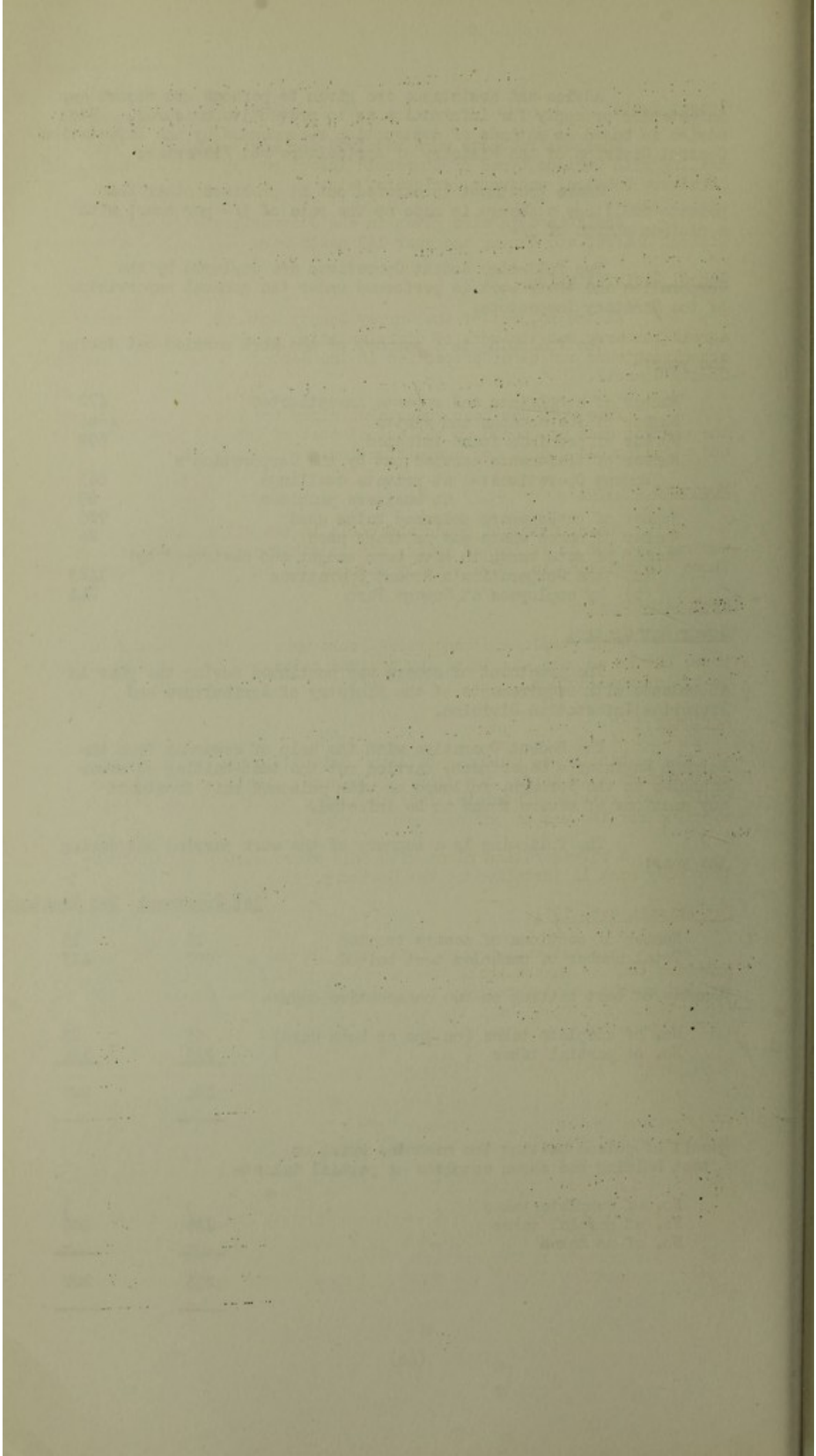
Sewer Rat Control

The treatment of sewers was continued during the year in accordance with requirements of the Ministry of Agriculture and Fisheries Infestation Division.

The Rodent Operative with the help of sewermen from the Borough Engineer's Department, carried out the test-baiting of sewer manholes in the Borough, followed up with poisoned bait treatment any sections of sewers found to be infested.

The following is a summary of the work carried out during the year:

	<u>1st Treatment</u>	<u>2nd Treatment</u>
Number of sections of sewers treated	15	15
Total number of manholes test baited	507	415
Results of test baiting on two consecutive days:-		
No. of complete takes (on one or both days)	55	23
No. of partial takes (" ")	<u>239</u>	<u>184</u>
	294	207
Result of poison baiting the manholes which on test baiting had shown complete or partial takes:-		
No. of complete takes	5	1
No. of partial takes	289	206
No. of no takes	<u>-</u>	<u>-</u>
	294	207



Insect Pests

Numerous requests were received for advice and assistance in dealing with various types of household insect pests; flies, moths, furniture beetles, woodworm, crickets, etc.

Assistance is also given in the destruction of wasps' nests, without charge, and during the year 163 nests were dealt with on request.

School Disinfestation

At the request of the Surrey County Council, the Corporation agreed to carry out the work of disinfestation at school buildings, school canteens and other properties in the Borough owned by the Surrey County Council.

This work has been undertaken since the 1st April, 1950, and the charges made are based on the actual cost of labour, plus materials and a reasonable charge for administration.

Mosquito Control

The spraying of ponds and pools in the Wilmerhatch Lane area was carried out as in former years, and in other parts of the Borough. These control measures have largely reduced the nuisance from mosquitoes.

Smoke Abatement

Four complaints concerning smoke were received during the year, but in no case was there any serious nuisance, and all were attended to by informal action.

Mortuary

Ninety-one bodies have been admitted to the mortuary and post-mortems held during the year. The number includes twenty-one bodies from outside districts, fees amounting to £15. 15. 0. being received for the use of the post-mortem room.

A refrigeration plant with cold store containing a three-tier body rack is installed at the Mortuary.

Pet Animals Act, 1951

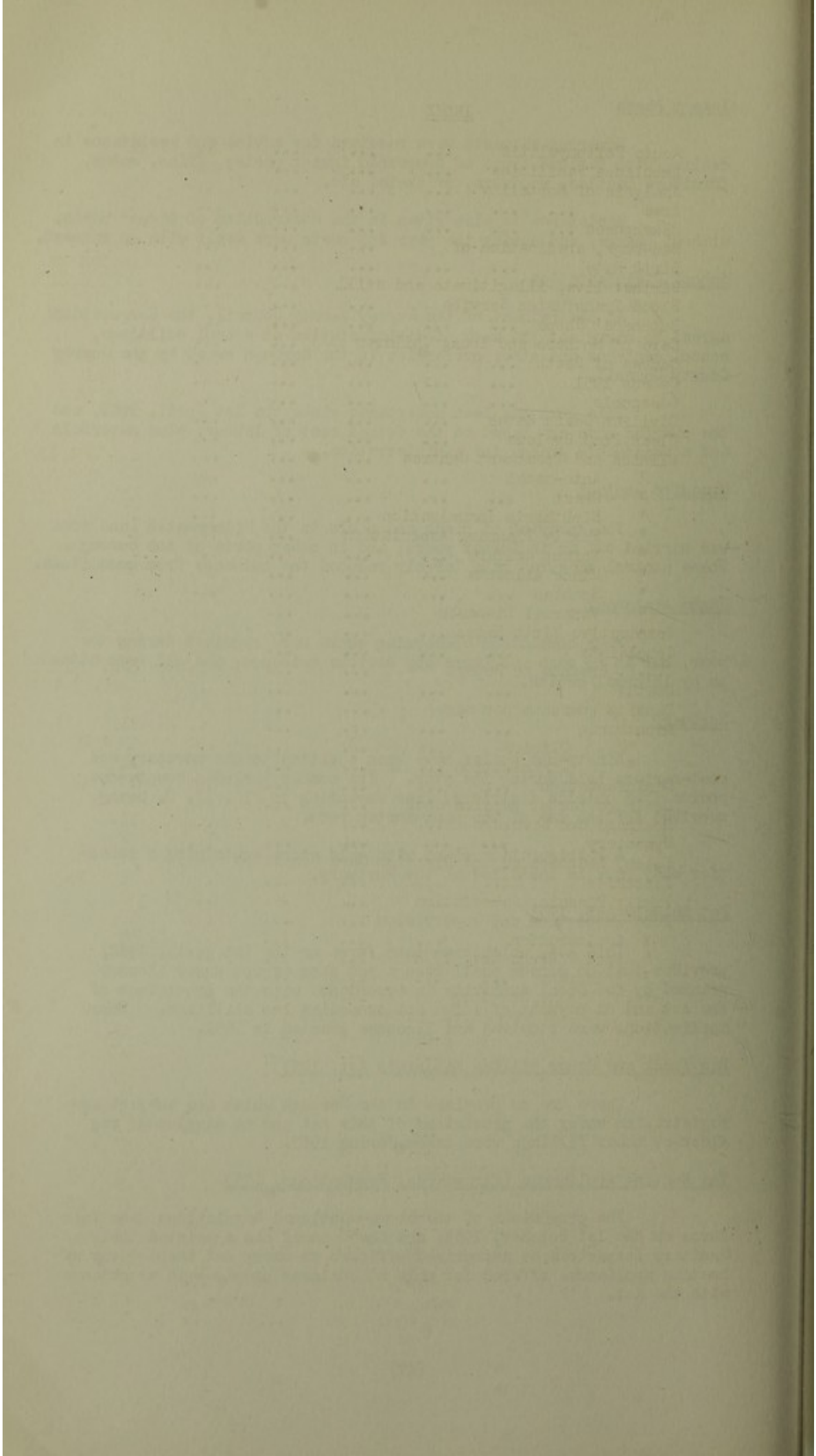
This Act, which came into force on the 1st April, 1952, provides that no person shall keep a pet shop except under licence granted by the Local Authority in accordance with the provisions of the Act and on payment of a fee not exceeding ten shillings. Three applications were received and licences granted in 1953.

Rag Flock and Other Filling Materials Act, 1951

There are no premises in the Borough which are subject to registration under the provisions of this Act and no samples of rag flock or other fillings were taken during 1953.

The Heating Appliances (Fireguards) Regulations, 1953

The provisions of the above-mentioned Regulations came into force on the 1st October, 1953, and the Council has appointed their Sanitary Inspectors as authorised officers to carry out inspections of heating appliances offered for sale at business premises in accordance with the Act.



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