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ADMINISTRATIVE COUNTY OF ESSEX.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR, 1920.

WILLIAM A. BULLOUGH, M.B., M.Sc., D.P.H.,

County Medical Officer of Health.

Cheimsford:

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PREFACE.

To the Chairman and Members of the Public Health and Housing Committee of the Essex County Council.

I have the honour to submit to you my second Annual Report on the sanitary conditions and administration of the various districts in the Administrative County for the year 1920. This is the thirty-first Report which has been issued.

At your special request, the present Report is brief, and, with the exception of the detailed report on small-pox, is sufficient only to maintain continuity of records. No comment upon, or extractions from, the reports of the local Medical Officers of Health, are included.

The outstanding features of the vital statistics for the year were the high birthrate and low death-rate.

A most important step during the year was the introduction of the principle of Combined Medical Services in the Urban District of Clacton, and the Rural Districts of Tendring and Lexden & Winstree, whereby one medical man in each of these areas acts as local Medical Officer of Health, and also as Assistant County Medical Officer; in the latter capacity acting as Tuberculosis Officer, School Medical Inspector, Inspector of Midwives, etc. The experience gained has more than justified all expectations, and it is hoped to apply the same scheme as soon as possible in other parts of the County.

Steps have been taken to further develop the scheme for the prevention and treatment of Tuberculosis, and the reduction in mortality and incidence is more than ever encouraging. Nevertheless, the present economic outlook of the Country, will in all probability, have an adverse influence on the Tuberculosis attack-rate and death-rate in the near future.

As regards Maternity and Child Welfare, the Ministry of Health have, from the 1st April, 1921, transferred the powers from 25 local Sanitary Authorities to the County Council. It is hoped shortly, to put into operation, a scheme linking up the Child Welfare work with the Tuberculosis and School Medical Services.

I desire again to record my high appreciation of the co-operation and counsel of yourself and the members of the Committee, during my second year of office particularly those who have taken the trouble to personally acquaint themselves with the health conditions in various parts of the County. My predecessor, Dr. Thresh has continued to help me in every possible way, and I wish to record my hearty thanks to him, also to the Medical Officers of Health and other officials of loca Authorities for their co-operation. My thanks are also due to the Medical, Dental Nursing, and Clerical Staffs, for their industry during the year.

Finally, I must mention my Chief Clerk and County Sanitary Inspector, Mr. A. Marsh, who has rendered most able assistance.

W. A. BULLOUGH, County Medical Officer

Public Health Department, 26, High Street, Chelmsford.

31st May, 1921.

PART I.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

Population.

The population of the Administrative County at the Census in 1911 was 1,061,815, and the changes between 1911 and 1919 which occurred in the boundaries of Sanitary Districts have been enumerated in previous reports. No such alterations took place during 1920. The Registrar-General has again furnished separate figures in connection with the estimated populations for the year ended 31st December, 1920, namely:—

- (1) For calculating birth-rates, the figure, which includes civilian and military population, is ... \$92,995
- (2) For calculating death-rates, the figure, which includes only civilian population, is 885,205

In most areas, a common population figure has been furnished, but for a few areas which contain an appreciable non-civilian population two figures were again submitted – hence the continuance of the above system.

A summary of the population figures is presented in the following table, but comment is not necessary in view of the proximity of the Census for 1921:

TABLE I.

			Population			
	Area in	Census	Estimate tion,	of popula- 1920.	Persons per acre.	Acres per person.
•	Acres,	1911.	For Birth- rate.	For Death-rate,	(Calculated on Census figures).	
Municipal Boroughs (5)	 †26,516	†87,646	85,790	82,076	3.3	0.3
Urban Districts (25)	 75,566	511,337	552,603	549,552	6.8	0.14
Rural ,, (17)	 862,744	258,955	254,602	253,577	0.3	3.3
	964,826	857,938	892,995	885,205	0.88	1.1

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

Essex is one of the Metropolitan Shires; fifth of all the Administrative Counties in respect of the number of inhabitants in 1911. About one-half of the whole population of the County is centred in the south-western corner lying immediately adjacent to the Metropolis. The County in form is roughly a parallelogram measuring 48 miles from north to south and 63 from north-east to south-west.

In the County there are to be found populous urban areas, residential suburbs, wide agricultural districts, small manufacturing centres, residential seaside resorts, and a seafaring, fishing and dockside population.

Birth-rate.

A large increase in the birth-rate for the Administrative County is recorded, namely, 23.6 (or 7.0 above the figure for 1919), the areas contributing mostly to this increase being Urban Districts of Tilbury (37.9), Harwich (31.1), Barking (30.8), Shoeburyness (30.6), Grays (25.1), and the Rural Districts of Tendring (27.4), Bumpstead (26.6), Chelmsford (26.2), Orsett (26.2), Ongar (25.3).

The lowest rates are recorded in the Urban Districts of Frinton (11.4), Brightlingsea (18.3), Saffron Walden Borough (18.6), Wanstead (19.0), and the Rural Districts of Halstead (17.7), Saffron Walden (19.4).

For particulars regarding each Sanitary District, see Table 2 of the Appendix.

Death-rate.

The death-rate for the Administrative County has fallen to 10.6, which is the lowest figure recorded since the year 1912. A perusal of the Table below will reveal those areas showing the lowest and highest rates:—

Lowest Rate		Highest Ra	Highest Rate.					
Urban-Frinton	 3.9	Urban—Tilbury		16.4				
Loughton	 6.6	Wivenhoe		13.5				
Chingford	 7.7	Brentwood	***	13.0				
Buckhurst Hill	 8.7	Rural —Ongar		15.5				
Chelmsford B.	 8.9	Belchamp	***	15:2				
Rural -Romford	 8.5	Tendring	***	13-7				
		Dunmow		13.5				

Infant Mortality.

In the following table are set out the figures regarding the infantile mortality in each Sanitary District, and the general death-rate is also shown. Essex is to be congratulated on such a remarkably low infant mortality (58.9), the figure being over 50 per cent. less than it was in the year 1911.

The rate of infant mortality amongst illegitimates was 151.

TABLE II.

DEATH-RATE PER 1,000 POPULATION. DEATHS OF INFANTS PER 1,000 BORN.

	70'.11	Deatl	ı-rate.		Infantile		
SANITARY DISTRICTS.	Birtherate, 1920.	1920.	1910-19 (Average).	1920.	Legiti- mate.	Illegiti- mate.	1910-19 (Average).
URBAN-							
Clacton-on-Sea Colchester B Epping Frinton-on-Sea Grays Halstead Harwich B. Ilford Leyton Loughton Maldon B. Romford Saffron Walden B. Shoeburyness Tilbury Waltham Holy Cross Walthamstow Walton-on-the-Naze Wanstead Witham Wivendford	30·8 21·4 23·9 18·3 22·1 22·2 20·8 23·6 20·5 22·1 20·8 11·4 25·1 20·7 31·1 20·1 24·5 20·1 24·2 22·8 18·6 30·6 37·9 21·7 24·7 21·2 19·0 23·6 20·8 22·9	12.7 12:2 13:0 11:8 8:7 12:7 9:0 7:8 10:8 10:3 11:3 4:0 12:8 11:6 11:6 9:1 10:3 6:6 10:4 9:4 11:8 9:4 16:4 10:2 9:8 10:4 10:5 9:1 13:5 10:4	13:3 13:5 11:1 13:3 11:4 12:9 11:4 10:0 12:7 12:8 12:4 8:1 11:5 14:9 12:1 9:6 11:6 10:3 14:0 12:0 14:0 10:8 11:1 11:0 8:9 14:7 13:6 10:0	84·7 33·5 60·0 77·8 25·6 100·0 55·4 48·8 37·7 44·1 66·6 — 104·3 39·3 75·7 54·0 65·3 17·4 40·8 45·8 84·9 50·5 80·6 20·2 81·9 58·0 40·5	79 21 48 70 27 88 55 50 30 43 47 — 100 40 72 48 63 18 42 40 88 45 73 14 54 89 52 50 98 23	320 200 285 200 500 52 — 117 81 400 — 174 — 181 230 112 — 230 214 166 262 — 666 — 166	102 65 62 63 77 54 76 78 80 79 60 55 82 60 86 68 82 75 75 81 81 81 81 81 81 81 84 63
RUBAL-							1
Billericay Braintree Bumpstead Chelmsford Dunmow Epping Halstead Lexden and Winstree Malcon Ongar Orsett Rochford Romford Saffron Walden Stansted Tendring	24·6 21·2 21·4 26·6 26·2 23·6 20·9 17·7 22·6 22·2 25·3 26·2 23·5 19·4 22·6 27·4	15·2 11·3 12·0 12·4 12·4 13·5 9·3 11·1 10·6 12·0 15·5 11·9 11·8 8.5 11·6 9·4 13·7	15·7 12·1 14·3 15·0 13·0 14·2 12·1 13·5 13·4 13·3 11·5 12·6 10·7 13·8 13·7 13·2	20·6 43·9 64·7 51·7 67·5 57·1 18·3 34·5 35·5 52·0 105·6 61·9 60·8 64·4 61·8 40·5 47·8	21 39 56 57 65 59 18 34 37 42 107 58 54 62 63 42 50	150 235 — 115 76 83 — 200 77 136 181 142 — 41	67 59 77 78 67 62 63 64 67 58 69 76 66 69 67 74 80
Totals—. Rural Urban Administrative County	23·3 23·7 23·6	11.6 10.3 10.6	13·2 11·8 12·3	55.0 60.4 58.9	52 56 55	108 172 151	63 72 70

SWALL-POX.

During the first six months of 1920 a mild outbreak of small-pox (31 cases 6 proving fatal) occurred in the South-western portion of the County, commencing in January with 3 cases. This is the largest outbreak recorded since the severe epidemic in 1902. The cases occurred in the following Sanitary Districts during the months shown:—

Sanitary District Grays Urban	 Jan.	Feb.	Mar.	Apl. 5	May.	June.	Total.
Ilford Urban	 	1	-	-	-		1
Leyton Urban	_		1	_	_		1
Tilbury Urban	 -	1	1	-	-	-	2
Orsett Rural	 2		2	4			8
Romford Rural	 _	-	-	4	-	3	7
Totals	 3	2	10	13		3	31

Sixteen of the cases were treated at the Orsett Small-pox Hospital, and one at the Orsett Union (see Case No. 9); the remaining 14 were admitted to the Metropolitan Asylum Board's Hospitals at the special request of the Ministry of Health.

During the same period, according to information received, cases occurred in adjoining areas as follows:—London County 28, London Port 6, Middlesex 1, West Ham Borough 25, East Ham Borough 11, total 71, some of which were undoubtedly traceable to the sources at Grays and Tilbury. There were many other cases in different parts of the United Kingdom.

A summary of the cases which occurred in the Administrative County, with a brief description of each, is given below:—

Case Date No. notified.

1. 15-1-20. The first case notified was a Grays resident (female aged 20) employed at Purfleet, who of the 27th December, 1919, visited the s.s. Devanha which arrived off Gravesend on the 24th December from Bombay. This vessel had called at the Ports of Aden, Suez, Port Said, Marseilles and Gibraltar on the voyage, and on the 12th December a steward developed the rash of small-pox: he was removed to the Denton hospital on the arrival of the ship on 24th December, 1919. Bombay was considered to be the place of infection.

Patient No. 1 had been vaccinated in infancy and the attack proved to be a mild one; she entered the Orsett Small-pox Hospital on 19th January and was discharged on 12th February.

This patient thus created two foci of infection at Grays and Purfleet, as well as coming into contact with persons whilst travelling to and from those centres. Fourteen contacts were traced, all of whom had been vaccinated or re-vaccinated, and these were kept under close observation for eighteen days.

Case Date No. notified.

26-1-20. The second case was notified from the Orsett Rural District, being a stewardess, aged 41, from the s.s. Melita in Tilbury Dock, who was first admitted to the Orsett Union Infirmary on the evening of the 24th January as suffering from influenza. The Medical Officer diagnosed small-pox on the 26th and removed the patient on the same day to the Orsett Small-pox Hospital. The patient had been vaccinated in infancy.

It transpired that the s.s. Melita, which arrived at Tilbury from the East on the 24th January, had had 9 deaths on board during the voyage which were diagnosed as "Influenza," and military ratings suffering from presumed Influenza had been landed at Port Said, Gibraltar and Plymouth. The ship was therefore regarded as Influenza-infected only in respect to the precautions taken.

Two other male patients from the ship admitted to the Orsett Union Infirmary as suffering from influenza, together with the inmates of the same ward and the whole of the Union Staff, were treated as "contacts" and kept under observation accordingly. None of these contacts developed small-pox but curiously enough Case No. 9, who was said not to be a contact, but who refused re-vaccination, developed the disease on the 12th March, 1920, and became a direct source of infection for Case No. 13,

The Port of London Sanitary Authority were notified of the s.s. Melita being a source of infection.

- 3. 29-1-20. Further case of illness from s.s. Melita, being a linen-keeper (male), aged 45, sought admission at the Orsett Union Infirmary on this date; was examined in the ambulance and found to have well developed small-pox, whereupon he was promptly removed to the Orsett Small-pox Hospital.
- 4. 9-2-20. Case notified from the Tilbury Urban District, being an East Ham child (male), aged 6, unvaccinated, who came on 30th January to stay with relatives in Tilbury, and whose father worked on the s.s. Devanha. The father died on 29th January from "influenza" and a sister of the child died at Joyce Green Hospital, Kent, on 1st February.

The Medical Officer of Health first saw the child on the evening of the 7th February and found he had been ill for two or three days, and observed a faint morbiliform rash. He was removed to Orsett Hospital on the afternoon of the 10th February, as a severe case, and died on the 21st February.

Eight contacts, with one exception, a female, aged 86, were revaccinated and kept under observation. Case Date No. notified.

Information was subsequently obtained regarding cases outside the Administrative County, the infection of which was traceable to the s.s. Devanha.

5. 20-2-20. The next case, also unvaccinated, in the Administrative County was notified from the Ilford Urban District, being an Army Officer, aged 22, employed at Netley Hospital, who went home to Ilford on 14th February on 48 hours leave, became ill on 15th February, rash appeared on 18th February, and small-pox diagnosed on 20th February, when patient was removed to the Orsett Hospital as a moderately severe case.

The source of infection remained unknown, and it seemed quite unlikely that there was any connection between this case and the already established point of infection in the Grays and Tilbury area. Centacts were kept under close observation and no further cases occurred in Ilford.

6. 3-3-20. A further apparently extraneous case was notified on this date from the Leyton Urban District, being a school girl, aged 5 (unvaccinated). She travelled by train and tram to and from Woolwich on Sunday, 15th February, crossed the ferry and walked through the sub-way, but did not stay anywhere. She attended school in Leytonstone on Monday, the 16th February, was admitted to the West Ham Infirmary on 17th February, rash appeared on 1st March, was removed to Orsett Hospital on 3rd March, and died on 7th March.

Source of infection remained unknown. Contacts were kept under close observation and no further cases occurred in the Leyton Urban District.

7. 10-3-20. The next case occurred on this date at Grays, where the first case of this outbreak was notified, being the wife (aged 46) of a man "employed on board ship at Tilbury Docks." She had been vaccinated in infancy; became ill about 2nd March, rash appeared 9th March, admitted to Orsett Hospital 11th March as a severe case, where she died on 14th March. Prior to illness patient had not been from home for several months, except to do shopping in Grays.

Relatives and other known contacts were kept under close observation.

8. 11-3-20. The eighth case was also found at Grays on this date, being a married woman, aged 36, who was vaccinated in infancy. She is known to have visited Tilbury on 22nd February, but "did not enter any house," otherwise she had not been away from home for four weeks prior to illness. Kash appeared 9th March and patient was admitted to Orsett Hospital on 11th March as a mild case.

Case Date No. notified.

Apart from the above-mentioned visit to Tilbury, no source of infection could be fixed upon.

- 16-3-20. The ninth case was that of a female, aged 18, vaccinated in infancy only, employed at the Orsett Union where Case No. 2 was first admitted. She had not been in contact with Case No. 2, but, nevertheless, was offered re-vaccination which she refused. She died on third day of disease before rash became vesicular, death having been certified as from measles complicating child-birth (premature). The confinement took place on the 12th March, the morbiliform rash similating measles appeared on 13th March, and death took place on the 16th March. A recent case of measles in the Institution confused diagnosis, but when Case No. 13 developed small-pox the local Medical Officer of Health became convinced that Case No. 9 had died during the prodromal rash of small-pox. On the 27th April, 1921, the Registrar-General intimated that "as a result of correspondence with the Ministry of Health and the certifying practitioner, it had been decided to class this case as small-pox."
- 10. 23-3-20. Tilbury Urban District contributed the tenth case, being an Engineer's apprentice, aged 17, who was vaccinated in infancy and who resided at an hotel. He became ill about the 18th March, rash appeared 22nd March, and was admitted to the Orsett Hospital on 23rd March as a mild case.

Patient had, prior to his illness, attended a dance at Grays, and the local Medical Officer of Health considered this to be the suspected source of infection.

- 11. 23-3-20. On this date, also, two more cases were notified from Grays, namely:-
 - (a) Husband of Case No. 7, aged 47, vaccinated in infancy, re-vaccinated 11th March, 1920, and employed at Tilbury Docks. Became ill on 20th March, rash appeared 23rd March, and admitted to Hospital same day as a mild case.
- 12. 23-3-20. (b) Schoolboy, aged 9, unvaccinated, residing four doors away from Case No. 11. Became ill about 17th March, rash appeared 19th March, and admitted to Orsett Hospital 23rd March, as a mild case. This case was found in school by the School Medical Inspector, who promptly consulted the local Medical Officer of Health and closed the school. The local Medical Officer of Health stated that this case had been mistaken for chicken-pox.

Case Date. No. notified

- 13. 28-3-20. On this date occurred a case at Orsett, mother of Case, No. 9, aged 56, vaccinated in infancy. Rash appeared 27th March, and admitted to Orsett Hospital on 28th March as a severe case and there died. Case No. 9 was the source of infection in this case.
- 14. 29-3-20. Husband of Case No. 8, aged 37, unvaccinated, was the next case at Grays. He was employed as carter to a coal merchant up to 11th March and then in a coalyard. Became ill about 26th March, rash appeared 28th March and admitted to Orsett Hospital on 29th March as a severe case. This man belonged to the sect known as "Peculiar People," and the Medical Officer of Health says that "he disregarded all instructions and was careless and obstinate, making it very difficult for anyone to control his movements."
- 15. 29-3-20. The son of Case No. 14, schoolboy, aged 13, unvaccinated, also became ill about the same time, rash appeared 27th or 28th March, and was admitted to Orsett Hospital as a mild case. This boy attended the same school as Case No. 12.
- 16. 1-4-20. On this date commenced a purely localised outbreak of the disease in the parish of Corbets Tye in the Romford Rural District, as follows:—
 - (a) Schoolgirl, aged 4 years, unvaccinated, had not attended school for three weeks owing to closure for measles. Rash appeared 3rd April and admitted to Metropolitan Asylums Board Hospital, 4th April, as probably a mild case.
- 17. 1-4-20. '(i) Mother of Case No. 16, aged 37, vaccinated in infancy. Rash appeared 3rd April, and admitted to Metropolitan Asylums Board Hospital 4th April as a severe case.

It appears that on 24th March the local Medical Officer of Health was summoned to a suspected case of chicken-pox in the home of Cases Nos. 16 and 17. He found that the patient had not been out of the village, had four good primary vaccination scars, vesicles were not numerous, nor severe, nor umbilicated, and the medical practitioner and himself felt justified in diagnosing chicken-pox. Later, an Inspector from the Ministry of Health advised that this case should be re-vaccinated. Eleven days later the Cases Nos. 16 and 17 occurred, and on 7th April (being 14 days after the occurrence of the above-mentioned case of chicken-pox) two more cases occurred, viz.:—

18. 7-4-20. (c) Father of Case No. 16, aged 41, had no signs of vaccination marks, although said to have been vaccinated in infancy.

Rash appeared 5th April and admitted to Metropolitan Asylums Board Hospital on 7th April as a severe case.

Case Date No. notified.

20. 21. 22. 23. 24. It was ascertained that this patient had been in Grays, Tilbury and Orsett a good deal in connection with his business as a dealer.

- 19. 7-4-20. (d) A youth, aged 17, employed as a labourer, who visited the house of Case No. 18, on or about 1st April, vaccinated in infancy. Rash appeared 7th April and admitted to Metropolitan Asylums Board Hospital 7th April as a very mild case.
 - 3-4-20. On this date 5 cases of small-pox occurred at Grays in one family, as follows:—

Member of family.	Age.	v	When accinated.	rasl	When appeared	d.	Attack.	to	When admitted Hospital. M.A.B.
Mother	35		Infancy		3-4-20		Mild		3-4-20
Father	37		"		"		, ,,		,,
Daughter	11		23-3-20		22		,,		21
, ,,	7		,,		"		33		"
11	5		"		,,		11		11

A son of this family (Case No. 10), was admitted to Orsett Hospital on 23rd March.

- 25. 11-4-20. Three cases occurred in the Parish of Horndon-on-the-Hill in the Orsett Rural District, as follows:—
 - (a) Roadworker for Orsett Rural District Council, aged 69, vaccinated in infancy. Rash appeared 2nd April and admitted to Metropolitan Asylums Board Hospital, 11th April, as a mild case which had every appearance of chicken-pox. Inspector from Ministry of Health ordered removal to Small-pox Hospital. The source of infection remained unknown
- 26. 16-4-20. (b) Brother of Case No. 25, aged 60, also a roadman, vaccinated in infancy, and also on 10th April. Rash appeared 16th April and admitted to Orsett Hospital 17th April as a probably mild case, possessing a typical chicken-pox rash for first seven days, and small-pox rash appeared after vaccination. No rise of temperature on second rash.
- 27. 19-4-20. (c) Wife of Case No. 25, aged 61, vaccinated in infancy and on 10th April, 1920. Rash appeared 19th April and admitted Orsett Hospital 21st April as a mild case, possessing a typical chicken-pox rash. Second rash developed about seven days after very few true small-pox spots. No temperature.

Case Date, notified.
28, 18-4-20.

A case was notified on this date in Little Thurrock (Orsett Rural District) of a girl, aged 19, engaged in housekeeping, unvaccinated. Rash appeared 18th April and admitted to Orsett Hospital on 19th April as a severe case, where she died on 27th April.

This patient had attended two dances in Grays the was previous and it was suspected that this was the source of infection.

The last three cases, which occurred in Dagenham in the Romford Rural District, were as follows:—

- 29. 7-6-20. (a) Married woman, aged 27, vaccinated in infancy, rash appeared 31st May and admitted to Metropolitan Asylums Board Hospital on 7th June. Source of Infection unknown. Had been diagnosed as chicken-pox and was not seen by local Medical Officer of Health until six days after rash appeared.
- 30. 13-6-20. (b) Daughter of Case No. 29, aged 9 months, vaccinated 7th June, 1920, rash appeared 13th June and admitted to Metropolitan Asylums Board Hospital on 8th June as a severe case.
- 31. 18-6-20. (c) Female child, aged 2 years, living in same bouse as Case
 No. 29, vaccinated 7th June, rash appeared 18th June and
 admitted to Metropolitan Asylums Board Hospital on 18th
 June as a mild case.

A contact of these cases, namely, a visitor from the Borough of East Ham, was missed, and subsequently developed small-pox.

Evidence is contained in the above descriptions of the cases to show that, with the exception of Cases Nos. 5 and 6 which occurred at Ilford and Leyton, the sources of infection were common and centred around the Port of Tilbury, viz., from the s.s. Devanha and s.s. Melita, and cases directly infected from such steamships in turn became either direct or indirect sources of infection for the remaining cases.

The local Medical Officers of Health most directly concerned in this outbreak viewed with alarm the large number of unvaccinated persons in their districts, and in this connection the following summary relating to those infected in this outbreak is of interest:—

(1)	Vaccinated:	No. of Cases.	1	No. of Deaths.
	(a) In infancy only	 16		3
	(b) Doubtful	 1		
	(c) Recent vaccination	 _	***	-
(2)	Unvaccinated	 13		3
(3)	No information	 1		-
		31		6
		-		

The eagerness with which large numbers voluntarily sought re-vaccination during this outbreak shows that large sections of the community who under normal circumstances demand exemption from vaccination recognised the value of such a preventive measure when brought face to face with the actual disease.

Prompter diagnosis in one or two instances might have been the means of avoiding further cases. It was with a view to meeting such a difficulty that in May, 1920, the Essex County Council made an arrangement with the London County Council whereby the services of Dr. Wm. McConnell Wanklyn were placed at the disposal of any Medical Officer of Health in the Administrative County upon application to the County Medical Officer. Dr. Wanklyn's services were utilised on numerous occasions with considerable help to all the Medical Officers concerned. It is undoubtedly a source of considerable satisfaction that the London County Council have continued to loan the services of such an experienced man as Dr. Wanklyn for any suspected case of small-pox in the County of Essex.

At one time there seemed every prospect of a very severe epidemic, and that this was averted is very largely due to the alertness and vigilance of the local Medical Officers of Health, Medical Practitioners, and Sanitary Inspectors concerned. The magnitude of their work will be realised when it is remembered that this included the isolation of actual cases, disinfection of infected homes and clothing, tracing and keeping under observation all contacts, vaccination and re-vaccination of a large number of people, and the dissemination of information in regard to the usual precautionary measures.

The manner in which the Medical Officer, Matron and Staff of the Orsett Hospital coped with the work of treating the patients is deserving of all praise.

Experience in this small-pox outbreak brought to light one or two outstanding points which may be summarised as follows:—

- It was imported into this country and was disseminated from severa ports.
- (2) It commenced in a part of the County where (as usual) a great proportion of the community were unprotected by either vaccination or recent re-vaccination.
- (3) It revealed the importance of maintaining the widest possible circulation of particulars of cases and contacts amongst local Medical Officers of Health and Medical Officers of Health of adjacent Counties.
- (4) It was largely responsible, in spite of all the activities of health officials, for the 101 patients who developed the disease in recognisable form in the infected area in and around London.
- (5) It revealed the need for the closest liaison between the Port Sanitary Authority and the local Sanitary Authorities, particularly at Tilbury, which is one of London's most important ports, at which

passengers disembark from the East where cholera, plague, small-pox, and similar diseases are endemic. It has already been recommended that a whole-time Medical Officer of Health should be appointed for the Orsett Union, preferably on the basis of the combined medical service which has been established in North Essex.

- (6) It proved the need for the ready availability of the services of a small-pox specialist, e.g., two local medical men in consultation diagnosed one or two of the cases as chicken-pox, whilst other cases were diagnosed as measles and influenza. The arrangement with the London County Council whereby the services of Dr. McC. Wanklyn are available should obviate this in future.
- (7) It revealed evidence that missed cases of small*pox of a mild nature must have been a factor in passing on the disease from one person to another.
- (8) It again emphasised the need for periodic re-vaccination if immunity is to be established.
- (9) It showed how essential it is that the households attacked should carefully and accurately give particulars of all recent visitors, e.g., one contact was missed entirely in this way and developed the disease in a populous centre in the extra-metropolitan area.
- (10) It showed that by using motor ambulances patients can without harm be conveyed considerable distances to hospital, e.g., patients were conveyed to Orsett from West Ham, a distance of about 18 miles. Consequently, fewer small-pox hospitals would serve the needs of a county like Essex, reduce the number of centres of infection, and be economical without loss of efficiency and sufficiency.

At the close of the year another case occurred in the Administrative County, viz., at Harwich, on 20th December. This patient (a ship's cook) had disembarked from a Union Castle liner at Southampton early in December, and proceeded to Harwich on the 8th December. The source of infection was unknown and no further cases occurred.

On the 28th December information reached the County Medical Officer to the effect that a patient who resided at Southend, and who worked in Chelmsford, had been taken ill at Hampstead and was, on the 28th December, found to be suffering from small-pox. Communications were addressed to the local Medical Officers of Health concerned and the necessary action taken in regard to contacts, etc. The source of infection was unknown and no further cases occurred.

South-West Essex. Protracted negotiations took place between the County Council, Ministry of Health, West Ham Borough and the Orsett Joint Hospital Board in connection with the provision of accommodation necessitated by the County Council's application for an Order under Section 2 of the Public Health (Prevention

and Treatment of Disease) Act, 1913, with a view to obtaining powers to arrange for the treatment of persons affected with small-pox in the South-West Essex district.

Tentative arrangements were made with the Orsett Joint Hospital Board, under which they agreed to receive sporadic cases from South-West Essex area up to a maximum of 20 cases. The Local Authorities affected by the outbreak in the first six months of the year took advantage of this arrangement until the Ministry of Health ruled that the Orsett Hospital in its present condition was capable of accommodating 10 cases only. In consequence, subsequent cases were admitted by the Ministry's special request to the hospitals of the Metropolitan Asylums Board.

On the 17th May, 1921, the County Council decided to withdraw the abovementioned application for an Order, leaving the responsibility for providing Small-pox Hospital accommodation with each Local Sanitary Authority in South-West Essex.

SEWAGE WORKS AND RIVER POLLUTION.

On 1st November, 1920, the County Council renewed the agreement with Drs. Thresh and Beale, of 91, Queen Victoria Street, London, E C. 4, whereby the latter agree to carry out two inspections annually of the river Roding, and to collect, examine and report upon all samples taken; also to examine and report on all samples of river water and effluent collected by or for the County Medical Officer from other sources.

Under this agreement, the sewage works which discharge into the river Roding were inspected on the 13th May and 26th October, 1920, when 29 samples of river water and sewage effluent were collected. The results of the examinations were classed as passable with two exceptions, in which cases suitable communications were addressed to the Local Authorities concerned.

22 inspections were also made of the sewage works in the remaining parts of the County, where 31 samples were taken. Of these, 9 were classed as good or passable, and 22 as bad. In the latter cases, appropriate action was taken.

COUNTY LABORATORY.

The excellent work carried out by this laboratory was continued throughout the whole year and the following table shows the number of specimens submitted for examination from each Sanitary District. It will be seen that 6,295 specimens were dealt with during the year, and it should be recorded that the County Council have renewed the arrangement with Dr. J. F. Beale, Essex County Laboratory, 91, Queen Victoria Street, London, E.C. 4 (telephone number City, 7116) for a further period of 12 months.

All bacteriological specimens from hospitals, dispensaries, general practitioners, etc., with the exception of Asylums, are dealt with at this laboratory, and their number is increasing each quarter.

TABLE III.

Examination of Bacteriological Specimens—Year 1920.

SANITARY DISTRICTS.	Diph- theria.	Sputa.	Typhoid	Ring- worm.	Malaria.	Cerebro- Spinal Fluid.	Miscell- aneous.	TOTAL.
Urban—								
Braintree Brentwood Brightlingsea Buckhurat Hill Burnham-on-Crouch Chelmsford B. Chingford Clacton-on-Sea Colchester B. Epping Frinton-on-Sea Grays Halstead Harwich B Ilford Leyton Loughton Maldon B Romford Saffron Walden B. Shoeburynes Tilbury Waltham Holy Cross Walthamstow Walton-on-the-Naze Wanstead Witham Witham Withaun Withaun Withaun	636 77 135 15 8 2 177 53 82 21 106 179 113 68 53 270 70 176 70 176 8 6 4 18 2 7 9 8 61	176 SS 58 8 1 1 144 24 37 81 31 3 103 45 38 275 631 7 37 67 3 8 6 15 659 — 19 18 4 22	6 2 3 3 - 1 - 4 2 6 - - 4 - 4 - 1 - - - - - - - - - - - - -	-2 		2 1 2 3	2 12 12 1 1 2 3 1 2 5 2 2 5 1 2 3	822 170 208 28 9 5 340 84 122 118 140 3 291 171 113 349 971 9 114 247 5 18 12 19 695 5 27 31 12 87
Billericay Braintree Bumpstead Chelmsford Dunmow Epping Halatead Lexden and Winstree Maldon Ongar Orsett Rochford Rochford	216 12 	2 21 12 5 50 17 19 13 12 23 11 3 39 9 5 2 8	1 -1 -1 2 1 5 3 2 - - - - - - - - - - - - - - - - - -	1 2 1 4 - 2 - - 2 - - 2 - - 3 7 3	1 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 289 28 5 94 45 83 28 55 94 68 136 67 55 10 44 17
Rural	752	251	25	26	3	2	11	1070
Urban	2364	2609	55	100	22	26	49	5225
Total for County	3116	2860	S0 .	126	25	28	60	6295

HOUSING.

Although the provision of houses is very largely in the hands of the local Sanitary Authorities, it is considered advisable to make a brief reference to the subject. At the time of writing only 29 out of 47 reports and returns have been received from Local Medical Officers of Health, so that it is not possible to include in this report what would have been an interesting table showing the position regarding housing in the Administrative County.

It should be recorded, however, that in the 29 districts from which reports and returns have been received 836 houses were erected either by the local Sanitary Authorities or by private persons and about 850 were in course of erection at the end of 1920. These figures prove that there has been considerable activity throughout the County in the endeavour to overtake the ever increasing demand for housing accommodation. In the Rochford Rural District alone 379 houses were erected by private individuals during the year, very largely in the parishes of South Benfleet and Canvey Island.

The greatest housing development in the County took place under the London County Council Housing Scheme at Becontree, where, at the time of writing, no less than 1,441 houses (excluding those mentioned above) are in course of erection, but it is understood that the Ministry of Health have already called the London County Council's attention to the necessity, in the present financial conditions, of reducing the number of houses to be erected under the scheme of Assistance to Local Authorities and Public Utility Societies. The extent to which such reduction should take place is being considered by the Ministry of Health. The pendulum seems now to have swung in the other direction, and the tendency would appear to be for Local Authorities to be discouraged rather than encouraged to proceed with a complete housing scheme. Local Authorities are also faced with the necessity of re-considering the whole of their housing needs. The late war brought about a considerable re-distribution of the population, necessitating the aggregation of large numbers of people at munition centres. Since the signing of the Armistice this re-distribution has operated in the opposite direction, upsetting all the calculations on which housing schemes were based in many districts. Other local Sanitary Authorities have now decided that until the present high cost of building is very much reduced they do not intend to proceed further with their housing schemes.

As was to be expected, the overcrowding problem was by no means got rid of during the year 1920, even with the erection of many new houses and the reconstruction of existing dwellings. In many districts it was necessary to again encourage householders to convert parlours into bedrooms, and this to some extent mitigated the overcrowding of the sleeping apartments.

As regards housing accommodation to be provided by the County Council during the year 1920 for smallholders, police, etc., the County Architect has kindly furnished the following information:—28 houses are already completed, 2 houses are near completion, 46 houses are in course of erection, and 41 houses are yet to be commenced.

SALE OF FOOD AND DRUGS ACTS, 1875-1899.

The supervision of the duties under these Acts performed by the Weights and Measures Inspectors, who also act as Food and Drugs Inspectors, is not undertaken by the County Medical Officer. Dr. Bernard Dyer, the County Analyst, has, therefore, kindly furnished the following particulars of the work done during the period 1st December, 1919, to 30th November, 1920. It will be noted in the following table that the samples have been submitted from three sources, namely, County Inspectors, Local Sanitary Authorities and Private Purchasers:—

		Samples Analysed.	U	Samples neatisfact		Percentage of adulteration.
Northern District of the County		685	***	25	***	3.8
Southern District of the County		929		26	***	2.8
Metropolitan District of the County	***	1219		66		5.4
Chingford Urban District Council	***	13		-	١	
Romford Urban District Council		1		-		
Wanstead Urban District Council		1	***	-		4.3
West Ham Union	***	23	***	-	1	
Woodford Urban District Council		7	***	1		*
Private sample		1		1	1	
		2879		119		4.2

			3				
					Samples analysed.		Samples unsatisfactory.
Baking Powder	***		***	***	52	***	_
Beef Fat			***		1		-
Bread			***		16		1
Blanc Mange	***	'			1	***	-
Bun Flour		***	***	**	7	***	-
Butter	4		***	***	256	***	7
Cake Flour	***	***	***	***	5	***	
Cheese	***		***	***	20	***	-
Cinnamon, Ground			***		4	***	-
Cloves, Ground	***		***	***	3	***	
Cocoa		***	***		20	***	-
,, Milk	***	***		•••	1	***	-
" Mixture			100	***	2	***	-
. Powder	***	***	***			***	-
" Shells	***	***	***	***	1	***	-
Coffee	***	***	***	***	35	***	
" and Chicory		***	***	***		***	-
Corn Flour	***	***	***	***	1	***	-
Cream	100	111	***	***	23	***	17
,, Preserved		***	***	***	4		-
Cream Custard		***	***	***	6	***	
,, Mould	***	***	***	***	1	311	_
" Powder	***	***	***	***	3	***	1
Creamettes	***	444		114	1	***	_
Custard Powder	***		***	***	11	***	
Dripping		411	***	***	17	144	1

					Samples analysed.		Samples unsatisfactory.
Drugs:-							
Boracic Ointment	***				. 4		_
Borax		***	***		35		19
" Commercial					1		1
Camphorated Oil		***		***	13		1
Castor Oil				***	1		_
Chlorodyne Lozen	roa.		***		1	***	-
Citric Acid		***			1		
	of Tiles		* ***	***	1		
Compound Syrup			***				
Cream of Tartar	***	***	***	***	4	***	
Epsom Salts	***	***	***	***	29	***	
Glycerine		***	***	***	3	***	
Liquorice Powder	***	***	***	***	2		-
Paragorie		***		***	6		
Tartaric Acid			***		2		-
Egg, Dried			***		1	***	-
,, Powder			***		17		_
" Substitute					15		
Fish Paste					5		-
Gin					1		-
Golden Syrup					1 .		_
0 0 11					1		
YT	***				1	***	
	***		****	***		***	
Honey Sugar	***		***	***	1	***	
Jam	***	***	***	**	20	***	-
Jelly Powder		***	***		1	***	
Lard	***			•••	260	,	-
" Compound	***	***		***	5		_
,, Substitute	***				6		1
Lemon Cheese					2		-
Lemon Curd Powder					1		
Lemonade Powder		***		- :::	. 2		_
Linseed, Crushed				***	15		-
Margarine		***			474		1
Marmalade	***				1		_
Meat Extract					3	127*	
Detted	***	***		- 525	1		
3.00	***		***	:::	1272		63
0	***	***		****		***	
,, Concentrated	***	***	***	***	2	***	
" Condensed	***	***	***	***	10	***	_
,, Evaporated	***			***	1	***	
", Separated				***	1		
" Skimmed		***	***	***	5		1
Milk Powder	***			***	1		1
Mincement					1		
Mustard	1		*	22.	10		_
,, Compound		·		****	2		_
,, Mixture				***	3	***	-
Nutmeg, Ground	***	***	***		5		7 /
Pea Flour				***	2		1
Pearl Barley					1		
D					30		
Raspberry Cream		***	***	***	1	***	
Rice, Ground		***	****	***	1	***	
Campaga	***		***	***		***	
Sausage	***	***	***.	***	1	***	-

						Samples analysed.		Samples unsatisfactory.
Self-raising	Flour		***	***		21	***	2
Sherbet						1		
Suet					***	1		
" (Beef)	(and Rice	Flour)	***	***	***	1		
Sugar	***	***	***	***	***	3	***	
" Substit	ute	***	***	***	***	4		
Sweetmeats	***	***	***	***	***	. 10		
Syrup		***	***		***	1		_
Tea				***		3		_
Vinegar	***			***		46		2
Wine, Non-	alcoholic	***	***	***		4		
" Tarra	gona	***				1		-
Yeast	***		***			3		-
						2879		119

Particulars relating to samples reported on during the whole year as adulterated or unsatisfactory.

A sample of Bread sent on account of the presence of a foreign substance contained the mashed up fag end of a cigarette so embedded in the bread as to indicate that the cigarette was obviously dropped into the dough.

Seven samples of Butter contained margarine in proportions varying from 25 to 55 per cent.

Seventeen samples sold as Cream consisted of "Preserved Cream" containing; from 0.15 to 0.40 per cent. of boric acid (undeclared).

One sample of "Cream Powder" (i.e., cream of tartar substitute) contained!

47 per cent. of calcium sulphate.

One sample of Dripping contained 7.5 per cent. of water, being 6.5 per cent. in excess of the water in normal dripping, but the excess appeared to be "gravy" from the meat. It was said to be domestically prepared dripping.

Nineteen samples of Borax purchased as drugs contained from 20 to 140 parts of arsenic per million; the British Pharmacopæia limit being 5 parts per million.

One sample of Commercial Borax contained 100 parts of arsenic per million.

One sample of Camphorated Oil contained less than three-fourths of the property proportion of camphor, and was made with paraffin oil instead of vegetable oil.

One sample of Lard Substitute contained 6.5 per cent. of water.

One sample of Margarine contained an excess of boric acid (0.75 per cent.) instead of not over 0.50 per cent.)

Thirty-one samples of Milk contained added water :-

14 samples contained 5 per cent. or less.

8 " 6 to 10 per cent.

1 sample ,, 12 per cent.

4 samples contained 16 to 20 per cent.

3 ,, ,, 21 to 25 ,, 1 sample ,, 48 per cent.

One sample consisted of milk already half skimmed, mixed with an equal bulk of water.

Thirty-one samples of Milk were deficient in fat. The percentage of deficiency compared with the minimum normal quantity in genuine milk being:—

In 5 cases 6 to 10 per cent.

"10 "11 "15 "

"5 "16 "20 "

"2 "21 "25 "

"4 "26 "30 "

"2 "31 "36 "

"1 case 48 per cent.

"1 "55 "

"1 "55 "

One sample sold as skim milk consisted of whole milk mixed with 7 per cent. added water.

One sample of "Milk Powder" consisted of powder made from separated milk deprived of more than 95 per cent. of its fat.

Two samples of Self-raising Flour contained an objectionable quantity, viz., 0.7 per cent. and 0.8 per cent. of calcium sulphate.

Two samples of Vinegar were deficient in strength to the extent of 10 and 22 per cent. of the proper minimum strength.

Out of 256 samples of Butter 188 contained boric acid preservative. In only 11 cases did the quantity reach 0.5 per cent. of boric acid. In 26 cases the quantity was from 0.5 to 0.4 per cent. In the remaining 151 cases the quantity did not exceed 0.25 per cent., and in 82 of these was only 0.15 per cent. or less.

Out of 474 samples of Margarine, 455 contained boracic preservative. In 1 solitary case there was 0.75 per cent. of boric acid. In no other case was 0.5 per cent. exceeded. Only 2 samples gave 0.5 per cent., 83 samples from 0.3 to 0.4; in 369 cases the quantity did not exceed 0.25 per cent., and in 170 of these it did not exceed 0.15 per cent.

ISOLATION HOSPITALS.

In the last Annual Report were set out all the points to which special attention is directed at each annual inspection of the Isolation Hospitals to which grants are given by the County Council.

The usual inspections were again carried out in April, 1921, prior to which the information set out in Table IV. (page 26) was asked for from the Clerks to the Hospital Boards.

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Total

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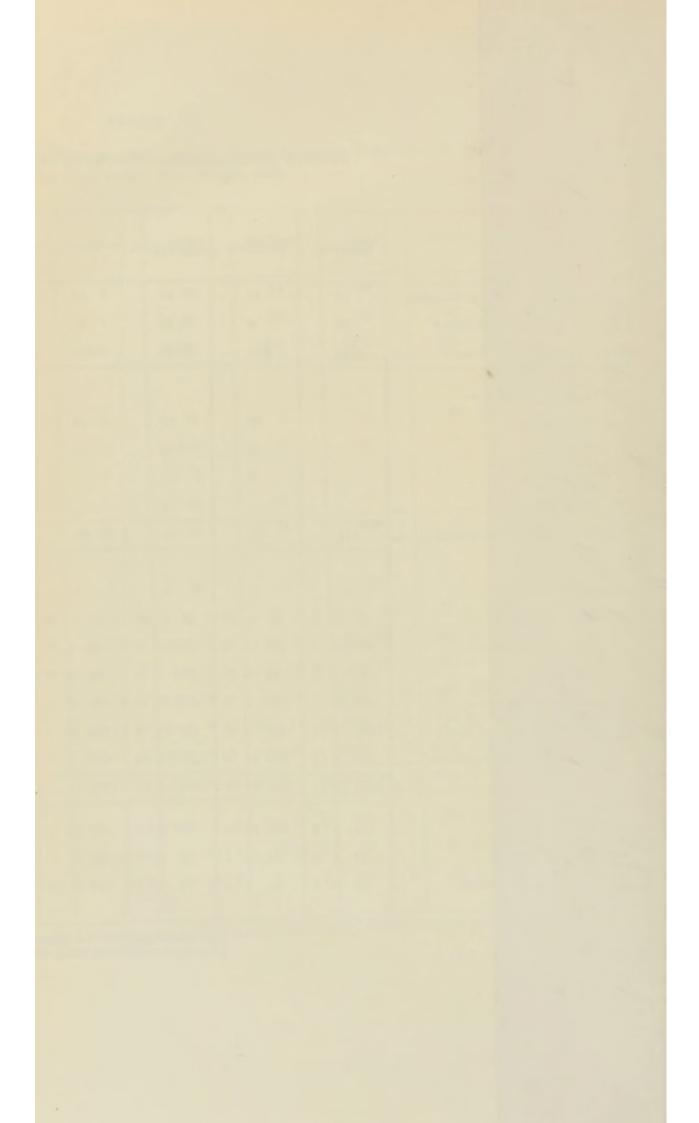
Cost

TABLE IV.

Shewing Accommodation, Number of Cases treated, Cost per Bed, etc., at those Isolation Hospitals, to which Grants were made for the Year ended 31st March, 1931.

		Billericay.	Braintree.	Chelmsford.	Clacton.	Colchester.	Dunmow,	Grays and Orsett.	Halstead.	Ilford.	Maldon.	Rochford,	Romford.	Saffron Walden,	Walthomston	Walthar Joint.
Total number of Beds in Hospital		23	11	21	17 .	200	8	20	16	85	10	24	70	22	93	42
Number for purpose of Grant		22	- 8	21	17	58	8	20	16	72	10	12	42	14	l	42
Grant from County Council		£110	£40	£115	£85	£300	£40	£100	£80	£370	£60	£60	£220	£70	£465	£220
Cases treated during year :-																
Scarlet Fever			38	57	22		23	71	2	248	37	86		14	455	
Diphtheria			12	33	47		5	152	14	202	12	16				
Typhoid			2				1	4				7		3 .	249	**
*Other Diseases				7				69	37	98	2				"	
Total number of cases treated		129	52	97	69	412	29	296	- 53	548	51	109			1	
	T										- 51	105		17	705	248
Nursing Staff			2	8	2	21	2 .	13	3	23	5	2				
Expenditure for the year :-		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.				1	28	6
Repayment of Loans		194 16 2	123 11 2	334 10 5			201 5 9	321 6 7			£ s. d.	£ s. d.	£ s. d.		£ s. d,	£ s. d.
Interest on Loan		172 11 10	16 18 10	129 2 8			48 4 6	186 12 6	73 5 3	424 17 7		134 0 0			1719 17 7	673 6 8
Structural Repairs		849 11 7	122 5 8	411 19 6	25 0 0		18 12 2	403 10 0			100 0 0	46 3 4		117 19 1	524 16 3	
Food (Patients and Staff)		1665 1 11	405 2 10		180 0 0						285 0 0	57 16 4		50 0 6	904 11 5	692 9 8
Estab. and Pats. Expenses		889 12 5	980 14 2		1000				2035 11 41		584 15 2	283 16 2			5862 18 0	543 16 0
	£	3771 13 11	1648 12 8							10264 2 51		770 18 5				2229 5 10
Contract to							1199 9 6	6766 16 0	3020 1 30	17771 18 81	2654 4 0	1292 14 3		982 13 7	20877 9 1	4138 18 2
Cost per bed	**						144 8 2	338 6 9	188 15 1	209 1 7	265 8 5	53 17 3		44 13 4	224 9 9	98 10 10
Cost per case treated					15 14 3		39 16 9	22 17 2	56 19 8	32 8 7	52 0 10	11 17 2		57 16 1	29 12 3	16 13 9
year 1919-20		21 0 8	51 7 6	17 2 1	12 15 2	20 1 0	26 0 6	29 14 2	20 9 2	32 1 2	37 5 0	17 6 7	18 10 4	102 17 5	36 2 10	21 14 5

*In some instances the figures relating to tuborculosis cases treated under the County Council scheme are included the transfer and not been received on going to print.



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VENEREAL DISEASES.

In the following table are given particulars of the work which at the various London and other Hospitals during the year 1920. very little change in the list of Treatment Centres which was publi Annual Report:—

SHOWING TREATMENT CENTRES AND NUMBER OF PATIENTS TREATED DURING 1920 TABLE V.

	Doses of Salvarsan Substitute given. Out-pa- In-pa- tients, tients. Total	2164	06	40	516	92	91		2993	-
	Doses of Salv Substitute g Out-pa- In-pa- tients, tients,	1	1	1	13	5	1			
	Doses Subs Out-pa	1	90	40	503	87	91			
	In- patient, Days.	2924	50	14	478	101	1		3537	-
ENTS.	Total Attendances, No.	12386	100	64	931	500	562		14267	
ESSEX PATIENTS.	time Total.	1601	25	35	123	32	31	1	1337	THE PERSON
ESSE	d for first rom Not V.D.	237	00	2	23	03	10		282	000
	Total Number treated for first time suffering from Soft Gonorr- Not is, Chancre, hoea, V.D. Tot	443	12	12	29	7	7		210	STO I
	tal Number treat suffering Soft Gonori Chancre, hoen.	19	1	63	9	Н	1		28	200
,	To Syphilis.	392	10	16	. 65	15	19		212	2000
Detiants form all 4	ated for	29,991	1,053	355	128	438	252	1		28,888
	Treatment Centre.	London Hospitals	St. Bartholomews Hospital, London	Chelmsford	Colchester	Ipswich 600	Southend		Total for 1920	gray "

MEATAL DEFICIENCY ACT, 1913.

During the year, 93 cases were examined by the County Medical Staff under the Mental Deficiency Act, 1913, at the request of the Local Control Authority, and reports and advice given on each individual case.

Many of these cases entailed two examinations, viz., the first for diagnosis, and the second for the purpose of signing the statutory certificate when a petition is being presented for institutional control; further, a member of the Medical Staff has attended and given evidence when necessary at the hearing of petitions before the magistrates.

The majority of the cases were seen by Dr. T. P. Puddicombe, who was appointed in April, 1920, as Assistant County Medical Officer, and one of whose duties is to deal especially with mentally defective cases both in the child and adult.

By this arrangement medical evidence is available for the County magistrates on the mental condition of doubtful cases charged with criminal offences.

PART II.

TUBERCULOSIS.

TABLE VI.

Showing Number of Deaths from Tuberculosis in England and Wales and Essex during the Years 1911-1920.

	Pul	monary.	Non-P	ulmonary.	Total.			
Year.	Essex.	England and Wales.	Essex.	England and Wales.	Essex.	England and Wales.		
1911	939	39232	332	13888	1271	53120		
1912	922	38083	288	11908	1210	50051		
1913	900	37055	323	12421	1223	49476		
1914	870	38637	233	11661	1103	50298		
1915	802	41050	266	12512	1068	53562		
1916	762	40747	237	12151	999	52898		
1917	888	42152	224	12609	1112	54761		
1918	920	44971	231	11733	1151	56704		
1919	715	36662	205	9650	920	46312		
1920	573	+ 1	174	+	747	+		

The figures for 1915 onwards relate to civillans only. †Not available at time of printing.

peaths.

As was expected, the number of deaths from tuberculosis in the administrative County during the year 1920 is less than for the year 1919, being 747 and 920 respectively. This is, however, still the highest mortality of any of the specific diseases, though there is every indication that, should the present rate of decrease be maintained, the time is not far distant when the mortality from this disease will have been reduced by 50 per cent. since the disease became notifiable in 1911.

Notifications.

The outstanding feature of the following Tables is that the total number of cases of tuberculosis (all forms) notified during the year 1920 was 478 less than the number for the previous year. This decrease is shown in 17 Urban and 10 Rural Districts, whilst in the remaining parts of the County there has either been a slight increase, or the figure is the same as for the year 1919. It would seem therefore that whatever the cause may be it is fairly general throughout the County, and may be indicative of a less incidence of the disease. In favour of this view is the fact that there has also been a marked decrease in the number of deaths from tuberculosis—see previous table.

TABLE VII.

Showing Summary of Notifications of Tuberculosis in Essex during the period from the 4th January, 1920, to the 1st January, 1921.

							1	Notif	icatio	ns or	1 For	m A.		
			Number of Primary Notifications.											Total
Age periods		0 to 1	1 to 5	5 to 10	10 to 13	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total Primary Notifications	Notifica- tions on Form A.
Pulmonary Males		1	3	26	17	54	49	102	69	58	27	10	416	449
,, Females		_	5	17	29	69	66	83	52	35	8	9	373	397
Non-pulmonary Males		5	16	25	18	15	10	9	9	6	1	1	115	118
,, Femal	es	3	17	16	20	25	19	14	10	1	2	3	130	133
1920 Totals		9	41	84	84	163	144	208	140	100	38	23	1034	1097
1919 Totals		12	83	158	119	150	138	295	206	109	61	14	1345	1440

			No	Number of Notifications on Form C.				
		Numb	er of Pri	Poor Law				
Age periods		Under 5	5 to 10		Total Primary Notifications,	Notifica- tions on Form B.	Institutions.	Sanatoria.
Pulmonary Males		-	5	6	11	11	15	125
", Females		-	4	1000	4	4	14	150
Non-pulmonary Males			4	5	9	9	1	21
" Female	08	3	2	2	7	9	-	17
1920 Totals		3	15	13	31	33	30	313
1910 Totals		-	17	10	29	29	72	410

Dispensaries and Visiting Stations.

At the conclusion of 1920, the Dispensaries and Visiting Stations enumerated below were open and under the charge of the Tuberculosis Officers named in column 3:—

(1) BRAINTREE ... Tuberculosis Officer ... H. V. Crossfield, M.B., C.M.

Sanatoria ... Black Notley, Halstead and Sible Hedingham.

Dispensaries ... Braintree, Co-operative Buildings, Wednes-days, 11.30 a.m. to 1 p.m.

Dunmow, 18, Mount Pleasant Terrace, The Causeway, 1st & 3rd Tuesdays each month, 10.30 to 11.30 a.m.

Halstead, 43, North Street, 1st & 3rd Thursdays each month, 12.15 to 1.15 p.m.

Saffron Walden, The Adult Schoo Room, High Street, 1st & 3rd Tuesdays each month, 12.30 to 2.30 p.m.

(2) Colchester ... Tuberculosis Officer ... J. D. Macfie, M.B., Ch.B.

Sanatorium ... Colchester.

Dispensary ... Colchester, St. John's Street, Wednesdays, 10.30 a.m. to 12.30 p.m., Saturdays, 11 a.m. to 1 p.m.

(2a) CLACTON ... Tuberculosis Officer ... *W. A. Milne, M.B., Ch.B., D.P.H.

Dispensary ... Clacton, Skelmersdale Road, Fridays, 11 a.m.
to 12 noon.

(2b) Harwich. ... Tuberculosis Officer ... *J. Ramsbottom, M.B., Ch.B., D.P.H.

Dispensary ... Harwich, c/o. Mr. Woodward, Corner
Chemist, 1, Church Street, Tuesdays,
11 a.m. to 12 noon.

(2c) ... Tuberculosis Officer ... *A. J. Williamson, D.S.O., M.A., M.D., D.P.H.

Dispensary ... Colchester, St. John's Street.

*Part-time Tuberculosis Officers.

(3) CHELMSFORD ... Tuberculosis Officer ... J. D. Macfie, M.B., Ch.B. Dispensaries ... Chelmsford, General Hospital, London Road, Fridays, 2 to 4 p.m. Maldon, 114, High Street, Tuesdays, 10.30 to 11.30 a.m. (4) EPPING Tuberculosis Officer ... *Charlotte Brown, L.R.C.P., L.R.C.S., L.R.F.P.S., M.D. (Brux.) Sanatoria Chingford and High Beech. Epping, Victoria Buildings, 2nd & 4th Dispensavies ... Wednesdays each month, 10.30 to 11.30 Waltham Abbey, 31, Greenyard, Mondays, 11 a.m to 12 noon. Leyton, 180, High Road, Mondays, 2.30 to 5.30 p.m. (Children only). Tubsrculosis Officer ... J. Sorley, M.A., M.D., Ll.B., D.P.H. (5) LEYTON Dispensaries ... Walthamstow, 334, Hoe Street, Tuesdays, 10 a.m. to 12 noon, and 6 to 8 p.m., Wednesdays, 10 to 12 noon (new cases only), Fridays, 10 a.m. to 12 noon (Children only). Leyton, 180, High Road, Thursdays, 10 a.m., to 12 noon (new cases only), and 6 to 8 p.m., Fridays, 2 to 4 p.m. Tuberculosis Officer ... A. H. Jacob, L.R.C.P., L.R.C.S. (6) ILFORD ... Ilford and Harold Court. Sanatoria Ilford, 38, Oakfield Road, Tuesdays, 3 to 5 Disponsaries ... p.m., Fridays, 4 to 6 p.m. Romford, 29, Eastern Road, Tuesdays and Fridays, 9.30 a.m. to 12.30 p.m. ... Tuberculosis Officer ... *R. J. Ewart, D.Sc., M.D., F.R.C.S., (6a) BARKING D.P.H. ... Barking, 37, Linton Road, Mondays, 4 to 6 Dispensary p.m., Thursdays, 10.30 a.m. to 12.30 p.m. Tuberculosis Officer ... *H. E. Jones, M.R.C.S., L.R.C.P. (7) GRAYS ... Orsett. Sanatorium Grays, Hilldrop House, 61, London Road, Dispensary Mondays, 10.30 a.m. to 1.30 p.m., Thursdays, 10.30 a.m. to 1.30 p.m. ... *G. N. Meachen, M.D., M.R.C.S., (8) SOUTHEND ... Tuberculosis Officer L.R.C.P. Distensary ... Southend, 30, Clarence Street, Mondays, Thursdays and Saturdays, 2.30 to 4.30 p.m. (men, 2.30, women, 3.15), Tuesdays, 6.30 to

*Part-time Tuberculosis Officers.

p.m. (women only).

8.30 p.m. (men only), Fridays, 6.30 to 8.30

Tuberculosis Nurses.

During the year the combined nursing service was established wherever practicable, with the result that all the Health Visitors (with five exceptions in the extra-metropolitan area) in the Administrative County undertake the dual work of Tuberculosis and School Nursing, and will shortly act under the child welfare scheme. At the end of 1920, this nursing service was constituted as follows:—

(a) Whole-time Tuberculosis Nursing Service.

Centre.	Name.		Training.	
Ilford	 M. Martin		 General Hospital	
Leyton	 K. Whitton		 do.	
Do	 *T. Harris		 Approved college	course
Walthamstow	 A. E. Brightman		 General Hospital	
Do.	 *J. Harrison		 Approved college	course
	*Appointed di	uring 1920.		

(b) Combined Nursing Service.

Braintree	Vacant			-		-
Brentwood	D. Landon (cn lea	ve of		General Hospital		C.M.B.
	absence)					
Do.	*M. E. Newbegin (t	emporary)		do.		do.
Bishop Stortford	B. A. Burnett (Mrs	5.)		do.		
Clacton	†M. McLean Smith			Queen's Nurse		do.
Colchester	M. Steele			General Hospital		
Do.	*†L. E. Ling			do.		C.M.B.
Do.	*†M. Kerry (Mrs.)			do.	C·M.	B., R.S.I.
Do.	†A. W. Sasse			Health Visitor		
Chelmsford	E. M. Carter			do.		C.M.B.
Do.	*M Heslin			do.		C.M.B.
Epping	*G. M. Cantelin (on absence	leave of		Approved college	cours	е
Grays	A. D. Wall (Mrs.)			General Hospital		
Halstead	*E. Evans (Mrs.)			do.		
Maldon	*A. Philpott (Mrs.)			do.		C.M.B.
Do. (Rural)	*E. M. Bowes			do.		do.
Orsett	*E. H. Moorman			do.		
Rochford	*V. Walker			do.		
Romford	A. E. Newby			do.		
Do	A. Taylor (Mrs.)			do.		
Saffron Walden	*B. Southall (Mrs.)			do.		
Waltham Abbey	*E. C. Ballard			do.		C.M.B.
Wanstead	*J. B. Nicholson			do.		
Woodford	E. F. Carnall			do.		
	*Appointed during 1920.		†Pa	rt-time.		

(c) Complementary Nursing Service.

The County Council has an agreement with the County Nursing Association whereby the services of 100 District Nurse-Midwives employed by affiliated Nursing Associations can be utilised. The Health Visitor exercises general supervision but the District Nurse carries out the necessary remedial measures.

Summary of Work.

Despite the efforts which have been made by the Tuberculosis Officers to re-establish dispensaries chiefly as consultative centres or clearing houses, there was during the year under review a large increase in the number of attendances of patients, viz., 25,774 for the year 1920, as against 22,377 for 1919. As will be seen from the following table, almost every other part of the service has been affected, increases being shown in the number of cases sent by medical men and the Military Authorities, domiciliary visits by Tuberculosis Officers and Nurses, specimens of sputa examined, and number of patients sent to sanatoria.

TABLE VIII.

Summary of Reports of District Tuberculosis Officers for the Year ended 31st December, 1920.

Registered Tuberculosis Cases.

	Register	-		11001	CEAR	UDAD	000	1003.			
		-					AREAS,				
			1.	2.	3.	4.	5.	6.	7.	8.	TOTALS.
1.	No. of Patients on Register, January, 1920:	1st									
	(a) Insured (b) Uninsured—Adults ,, Children		44 26 22	90 30 34	56 17 30	16 14 12	401 129 226	163 92 214	66 48 66	15 4 13	851 860 617
	Totals		92	154	103	42	756	469	180	32	-1828
2.	No. of Patients added to Regis during the Year:-	ter									
	(a) Insured (b) Uninsured—Adults Children		46 13 20	33 9 19	36 11 9	21 3 7	210 66 78	141 42 117	39 10 16	16 2 9	545 156 275
	Totals		79	64	56	31	354	300	65	27	976
3.	No. of Patients removed from Regis during the Year:—	ter									
	(a) Insured (b) Uninsured—Adults Children		42 22 9	69 14 23	44 11 16	19 11 4	268 111 109	132 68 108	32 19 59	13 1 2	619 257 330
	Totals		73	106	71	31	488	308	110	16	1206
4.	No. of Patients on Register, 3 December, 1920:—	lst									
	(a) Insured (b) Uninsured Adults Children		48 17 33	57 25 30	48 17 23	18 6 15	\$43 84 195	172 66 223	73 39 23	18 5 20	77 259 562
	Totals		98	112	88	39	622	461	135	43	1598
5.	No. of Patients on Domicili Treatment:—	ary									
	(a) Insured (b) Uninsured—Adults Children		39 22 5	35 7 3	15 3 1	22 3 3	65 18 6	104 24 11	6 3 2	18 3 3	304 83 34
	Totals	110	66	45	19	28	89	139	11	24	421
6.	No. of Patients under Observat following treatment:	ion									
	(a) Insured (b) Uninsured—Adults Children		57 27 20	61 11 27	63 17 24	25 5 9	265 107 152	141 54 207	43 20 21	9 1 1	664 242 461
	Totals		104	99	104	39	524	402	St	11	1367

REGISTERED TUBERCULOUS CASES-continued.

	•					AREAS	3.			
	*	1.	2.	3.	4.	5.	6.	7.	8.	TOTALS,
7.	Total No. of Registered Cases under Treatment and Observation:—			1						
	(a) Insured (b) Uninsured—Adults Children	144 66 58	153 43 50	126 37 48	65 14 27	673 209 353	417 144 441	122 62 64	45 9 24	1745 584 1057
	Totals	268	256	211	106	1235	1002	248	78	3386
8.	No. of Patients suffering from Tuberculosis of the Lungs	240	229	182	91	1038	808	206	74	2852
9.	No. of Patients suffering from other forms of Tuberculosis	28	27	29	12	197	194	42	4	531

Contacts and Suspected Cases.

_	The second secon									-
10.	No. found suffering from Pulmonary Tuberculosis	25	65	33	35	267	181	42	1	649
11.	No. found suffering from Non- Pulmonary Tuberculosis	4	23	18	5	73	52	6	-	181
12.	No. found not suffering from Tuber- culosis	13	149	126	35	237	130	32	7	729
13.	No. of doubtful cases remaining under observation	1	4	4	22	34	57	12	1	135
14.	Total No. of contacts and suspects examined	78	222	231	53	1000	430	97	21	2132
5.	No. sent by Medical Men and Military	75	322	100	62	885	324	97	9	1874

Dispensary Attendances, Domiciliary Visits, etc.

6.	Total No. of visits to Dispensaries patients during Year	by 		1922	3007	529	11388	5862	1488	445	25774
17.	No. of Domiciliary visits paid Tuperculosis Officer	by	000	487	302	166	139	105	37	119	1753
18.	No. of Domiciliary visits paid Nurse	by	288	1322	884	65	5184	1973	494	22	10232
19.	No. of Shelters in use		35	10	10	7	4	10	11	6	93
20.	Sputa examined—Positive Negative		193 257	58 152	34 179	12 57	247 932	102 421	149 152	5 36	800 2186
	Totals	***	450	210	213	69	1179	523	301	41	2986
21.	No. sent to Hospitals and Sanate for treatment during Year:— (a) County Council's Institutions (b) Other Institutions		46 9	51 14	51 11	22 2	230 58	129 31	56 12	13 3	598 140
	Totals		55	65	62	24	288	160	68	16	738

Summary of Beds provided at Hospitals and Sanatoria.

		Mn	los.		Fen	isles,		Chil	dren.		To	otal.
		(a)	(b)		(a)	(b)		(a)	(b)		(a)	(b)
Harold Court High Beech (non-		34	47		-	-	***	-		***	34	47
Pulmonary)			-			-		31	32		31	32
Chingford		-		***	14	14		-	-		14	14
Orsett		12	12		_	-	***		-		12	12
Ilford		12	19			_	4.680		_		12	19
Colchester		12	12	***	1000	-					12	12
Black Notley		-			34	34			-		34	34
Nayland			3	***		-	***	5	7		5	9
Sible Hedingham	***	-	-					18	23		18	23
Halstead	***	-		1.00	17	12					17	12
Other Institutions	1.8.8	2	4	***	1	2		8	16		11	22
Totals		72	96		66	62		62	78		200	236
These beds are allocated a	s follo	ws:-						-	_		_	
Essex Insurance Com		66	80		46	50		_			112	130
County Council	****	6	16		20	12	***	62	78	***	88	106
County Country	***			***			***	02	10		-00	100
Total		72	96		66	62		62	78		200	236
(a)=No. of Be	ls at 1	egini	ning of	1920		(b)=	No. o	f Bed	sat e	nd of	1920.	

SUMMARY OF TABLES.

		bservation re treatm		Cases und		Domiciliary cases,		Observati ter treatn				ttendance pensarles,
On 31st December, 1919	***	491		1899		354		957	***	3701		22377
On 31st December, 1920		135		1598	***	421	***	1367	****	3521		25774
Increase or Decrease during Year		-356	***	-301		+67		+410	***	+280	***	+3397

DETAILS OF AREAS.

Area No.		Dispensaries,		Visiting Stations.
1.	***	Braintree	***	(Halstead
A	- 3			Saffron Walden
2.		Colchester		Harwich
3		Chelmsford		Clacton Maldon
3. 4.			**	(Epping
				Loughton Waltham Abbey
5.	***	Leyton	***	
6.	***	Walthamstow (Barking	***	
		Romford	***	
7. 8.	***	Grays	***	
8.	**	Southend (For Ro	echford Di	istrict)

County Sanatoria.

Reference to the latter part of the preceding table shows that there has been a further increase in the number of beds provided at Sanatoria and Hospitals, the accommodation being augmented at the various County Sanatoria by the provision of large shelters which were withdrawn from circulation at the patients' homes, smaller ones being provided in lieu thereof. At the end of 1920 there were 236 beds as against 110 at the beginning of 1919 and 200 at the beginning of 1920. Consequently, it was possible to admit to sanatoria and hospitals 738 cases during the year or an increase of 233 above the figure for 1919. The length of stay was longer this year.

The Medical Superintendents, Matrons, Nursing and Administrative Staff, as well as the teachers at the High Beech and Sible Hedingham Sanatoria, have by their zeal and interest maintained throughout the year a comfortable and congenial atmosphere, which is so essential to the successful working of institutions of this character.

Schemes for the further enlargement and improvement of the Harold Court and Black Notley Sanatoria, at an estimated cost of £9,900 and £9,500 respectively, have been approved by the County Council and were submitted to the Ministry of Health prior to 31st October, 1920, in order to qualify for the special Government Grant. Beds at these two Institutions will thus be increased to 64 for male patients and 50 for female patients. Efforts were also made to secure a site for a Children's Sanatoria, but without success.

Administrative Expenses.

The total administrative cost of the four County Sanatoria for the year ended 31st March, 1921, amounted to £13,418 and Table IX. (on page 33) gives details and shows the cost per patient per week for each Institution:

Dental Treatment.

This special treatment has been given to 70 patients (60 insured and 10 uninsured) during the year, most of the work being carried out under the County Council scheme outlined in the last annual report. There were 336 extractions, 54 fillings and 173 scalings. For a short period of the year a whole-time Dentist employed by the County Education Committee undertook some of the work.

Extra Nourishment.

As and from 1st June, 1920, extra nourishment was granted to 23 uninsured patients, the cost being £49 13s. 3d., and the same procedure was adopted in regard thereto as operated in respect of the insured patients. No extra nourishment was given unless the Tuberculosis Officer was satisfied that it was strictly ancillary to treatment, and that the case was a necessitous one.

After .. Care.

Much good work was accomplished during the year by the After are Associations which have been established at Chelmsford, Colchester, Lon, Barking, Ilford and Saffron Walden. The functions which were enumerated in the annual report for 1919 have been strictly adhered to, and although some of the Committees have difficulty in raising funds, they have been able to continue rendering practical help and sympathy in many cases.

TABLE IX.

Showing for each County Sanatorium number of beds, administrative expenses, and cost per week per patient, for the year ended 31st March, 1921.

(Kindly supplied by the County Accountant.)

. F	k.	100	101	-pr	6
pd p	g st g st ree	800	0.8	00	10
Cost 1	person uding per w	CR PH	0.1	-	н
_	a gran				
	t so di	200	=======================================	0	10
1 3	patient per week.	30	15 1	18	10
100	pat ar	Q H	C3	1 1	1
-	ă				
1	Tota	2180	5885	3122	1922
	Paymer	37.	317	304	130
	Тат Рас	GR :	226	315 (a)	166
Sun	Postag Travell Expen	c4 88	69	10	30
sls.	Repairs Renew	300	241	115	114
,ali	Domes Utens Furnitur	48	103	46	11
ries.	Necessa	28	69	48	23
clean-	Heating, ing, lau	150	648	234	158
e, åtes,	Rent, R	43,55	155	891	177
cal nces.	ibeM silqqA	35	118	96	18
*stro	Provisi	1205	2840	1049	717
bna s	Salarle2	544	1109	787	372
No. of	Resident Staff.	8.3	13.0	10.8	7.8
Average No. of	Patients.	32-5	40.5	31.6	20.9
no abs	od to .oM S.E.IS	100	49	37	31
Kind of	cases treated.	Females (adults)	Males (adults)	Children (non-pul-	Children (pulmonary)
	Institution.	Black Notley	Harold Court	High Beech	Sible Heding- ham

(a) Education.

PART III.

MATERNITY AND CHILD WELFARE.

By order, dated 29th March, 1921, the Ministry of Health transferred, as from April, 1921, to the County Council, the powers under the Notification of Births , 1907, which had hitherto been in the hands of the following Local Sanitary horities :-

Municipal B	oroughs.
Maldon	,
Saffron	Walden.

Urban Districts.	Rural Districts.
Braintree,	Belchamp,
Brentwood,	Billericay,
Brightlingsea,	Braintree,
Burnham-on-Crouch,	Bumpstead,
Epping,	Dunmow,
Frinton-on-Sea,	Epping,
Halstead,	Halstead,
Shoeburyness,	Ongar,
Walton-on-the-Naze,	Rochford,
Witham,	Saffron Wa
Wivenhoe,	Stansted,
	Tendring.

Walden,

A Scheme is now before the Ministry of Health for carrying out the duties under Notification of Births Act, whereby the Health Visitors undertake in their pective areas the following duties :-

1) School Nursing. (2) Tuberculosis Nursing. (3) Maternity & Child Welfare.

idwives Acts, 1902 & 1918.

During the year under review 268 midwives notified their intention to practise the Administrative County. Of these 239 were actually in practice at the end of year 1920. These midwives are classified as follows:-

Total No. of lwives in practic	e		Trained	i.	ma-fide, including rained and L.O.S.
end of year.		Dependent.		Independent.	Certificated.
239		97		94	 48

The total number of births which occurred during the year 1920 was 21,082, and these 8,114 (38.4 per cent.) were attended by midwives in the capacity of a dwife, and 2,910 (13.8 per cent.) as maternity nurses under the supervision of dical practitioners.

At the end of the year each midwife was asked to state the number of confinent cases which she attended as a midwife during the year 1920, and it was found it 85 trained and 19 untrained midwives attended 10 or less cases each; 42 trained and 12 untrained attended 11-20 cases each; 24 trained and 4 untrained attended 21-40 cases each; 11 trained and 5 untrained, 41-60 cases each; 12 trained and four untrained, 61-100 cases each; and seven trained and 14 untrained midwives attended over 100 cases each. In addition, the midwives at the Leytonstone and Walthamstow Homes attended 816 cases as midwives.

The following list shows the number of notifications received from certified midwives during the year as compared with the previous year, in accordance with the rules of the Central Midwives Board:—

			1919.		1920.
Records of Medical Aid	***		674	***	1090
Records of Still-birth			83		132
Deaths of Mothers			2		1
Deaths of Infants			15	١	19
Artificial Feeding			41		63
Liability to be a Source of I	nfection		9		31
Laying-out for Burial			86		95
Ophthalmia Neonatorum	or Discha	arging			
Eyes			56		85

The 1,090 cases (14 per cent.) where midwives sought the assistance of doctors were for various reasons, namely:—

Adherent Placenta		69	cases.	Prolonged Labour	 172 0	ases.
Albuminuria		2	**	Presentation (various)	 66	,,
Dangerous Feebleness	of			Pyrexia (High Temp.)	 50	"
Infant		36	,,	Purulent Discharge	 3	33
Haemorrhage:						
Ante-partum		17	23	Malformation of Child	 7	39.
Post-partum		32	,,	Miscarriage, Abortion	 26	17
Eclampsia		5	1)	Ruptured Perineum	 214	23
Instrumental Assistand	e	5	,,	Still-birth	 21	,,
Premature Births		59	,,	Syphilis	 2	"
Phlegmasia Alba Dole	ns			Uterine Inertia	 16	11
(White Leg)		2	**	Miscellaneous Causes	 201	21
Ophthalmia Neonatoru	m					
or Discharging Eyes	. 8	35				

Four hundred and fifty-four routine visits were made to midwives during the year, and with few exceptions, the mode of practice, equipment and records, etc., were found to be quite satisfactory.

Two midwives were reported to the Central Midwives Board for infringements: of rules, and were subsequently kept under strict observation for six months.

dical Practitioners' Fees.

In accordance with the Midwives Act, 1918, the County Council paid the sum 559 10s. as fees to medical practitioners, and recovered from parents during the the sum of £41 1s. 9d.

ctures to Midwives.

An excellent syllabus of lectures was again arranged under the auspices of the ex Midwives Association, the midwives being invited to the following Centres, at of which six lectures were given during the winter months:—Chelmsford, chester, Leytonstone, Saffron Walden, and Southend-on-Sea.

sex County Nursing Association.

The arrangements with the Essex County Nursing Association proceeded on a sfactory and harmonious basis, resulting in an increased number of District Ising Associations and the placing of additional nurse-midwives in the rural parts the County. By their long-sighted policy and tenacity of purpose, the Association to set up a general Nursing Service, which is efficient and tactful and without ch no Public Health service can be said to be complete. There can be no doubt to this general Nursing Service is an important factor in promoting and taining the health of the community in this County.

On 1st September, 1920, a scheme for utilising the District Nurses employed by sociations affiliated to the Essex County Nursing Association was commenced. Ider this scheme over 100 District Nurses are rendering valuable assistance oughout the County to the whole-time Health Visitors.

The following table shows the number of District Nursing Associations which are affiliated to the County Nursing Association at the end of the year, so that, cluding the Metropolitan area, there were only 7 District Nursing Associations not filiated in the County area:—

No	of D.N.	As.		o. undertaking wifery work and	1	No. performing District Nursing
Affiliated.		Unaffiliated.	Di	strict Nursing.		duties only.
107		7		104		10

The following summary gives some idea of the work undertaken by the District lurses belonging to affiliated Associations during a year 1920:—

Midwifery Visits			 19,688
Maternity ,,			 25,896
District General			 101,973
,, Tuberculosi	S		 3,540
Health Visiting			 3,422
Home Visiting			 181
To	tal No.	of Visits	 154,700

During the year 1920, the County Council made grants to the County Nursing Association, amounting to £5,222 5s. 11d., which sum is made up as follows:—

				£	s.	d.
(a)	Establishment of Nurse-M	idwives		940	0	0
(b)	Emergency Nurses			50	0	0
(c)	District Nurse-Midwives			3,439	15	11
(d)	Equipping new Nurses			460	0	0
(e)	Clerical work, stationery,	etc.		262	10	0
(f)	Inspection of Midwives (ce	ased 31st N	Iarch,			
	1920)			70	0	0
				£5,222	5	11

COMBINED MEDICAL SERVICES.

The Scheme for combining the medical services of the County, which was outlined in the Report for 1919, was put into operation in the areas enumerated below, and there is every reason to believe that in each case the Scheme has proved a success from the point of view of all concerned:—

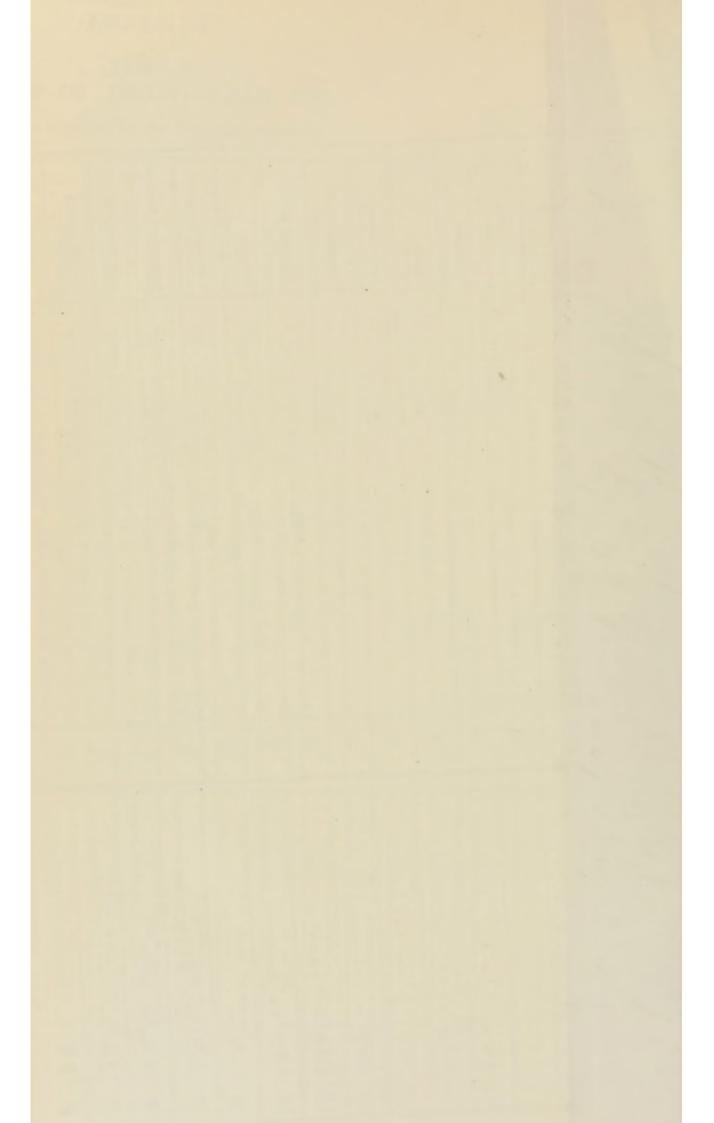
Sanitary District.	Local M.O.H. and Assistant C.M.O.	Date appointed.
Lexden & Winstree	 Dr. A. J. Williamson	 1/4/20
Clacton-on-Sea	 Dr. W. A. Milne	 1/6/20
Tendring	 Dr. J. Ramsbottom	 11/9/20

At the time of writing, negotiations are in progress for the establishment of a similar scheme in the North Essex United Sanitary Districts, owing to the resignation of the local Medical Officer of Health in December, 1920.

TABLE 1, CAUSES OF DEATH-YEAR 1920.

(Figures supplied by the Registrar-General.)

SANITARY DISTRICT.	Forer.	pox.	4	Forer,	ing Congh.	eria and Croup.	II.	dan,	ary Tuberculos	nlous Meningitis.	ver Tuberculous Diseases,	Cancer, nant Disease.	matic Fever.	ith.	Heart Disease.	ite.	nia (all forms).	Respiratory	a, &c.,	itis and	of Liver.	a.	and Bright's	Ferer.	an Fever.	Deblisty, &c.	spart from		M. Diseases	1 1	in.	Iselud aforegoli	ed in the	- I TOTAL
	Enterie	Small-po	Meanles	Searlet F.	Whooping Co	Diphthecia	Indonesa,	Erysépelas	Pulmonary	Tuberculous	Other T Disc	Maligne	Theum	Mening	Organio	Bromehi	Pheumo	Other B.	Diarrhosa, J	Appendicitis, Typhilitis,	Clrrhosts	Alcoholisa	Nephritia	Puerperal	Parturbior	Congenital		Sulaides.	Other Dalle		unknov unknov	Spinal Feren.	dlemyellita Sneephalitia	CAUSE
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### 1. *** *** *** *** *** *** *** *** ***		-	249			17	10	10		-	-					-		0	5 5	2 1	2 707
*** **********************************			1,511			138	58	15		10						-			3.	2 .	20
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NAMES N			3.028	6,058	147	3 6		9 5			24	10					_		0.38	8.0	7.11
NAMERICA B			5.630	19.102	1.57	100	9	0 9	4 1							-	100	5.5	2.0	17.00	8.05
Miller Cookers 1,500 2,511 2,5	DEN B		7,500	20162	200	201	3	8	0		20	-	*	7		-	9.4		7.0	1.1	45.8
Millor Comes 1,100 2,100 1,100	A STATE OF THE PARTY OF THE PAR		1 000	A 217 A 200	217	10	2	0	-			-	-	39		18.6	11.8		0.3	0.7	6.78
The color colors	Helian		1 855	7 100	07:	9 9	3	0	-	24		-	_	2		30.0	7.6		70	1.0	20.02
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*** MATERIAL **** MATERIAL SALES SAL			2,161	20,700	70	3 :	9	10	04			e1	11	10		8.66	13.5		7.0	8.0	98.0
THE THEORY IN THE PARTY OF THE			1016	Ver, ve	604	213	62	10	9	1=	00	26	39	100		9	10.4	8.0	70	121	40.0
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10,000 10			38,084	19,736		155	-	1 18		13	9	0	81	3	140	25.3	10.0	11		-	9.9
100,073 9,072 100 000 000 000 100 000 000 100 000 00			55,385	19,604		22	-	1 12		91 0	22	28	20	88	533	5.93	11.9	0.0	2.0	-	9
1			29,730	28,251		575			2 6	o :	90	8	15	103	83	12.53	11.8	8.0	9.0		9.0
12 12 13 14 15 15 15 15 15 15 15	CDER		225'62	9,972	191	116			,	7	-1	8	8	g	21 22 23	23.5	10.00			-	9.95
17-17-17-17-17-17-17-17-17-17-17-17-17-1			22,954	6,647	148	8						2	8	3	116	107	11.6	0.5	80		92.77
11 12 13 14 15 15 15 15 15 15 15			73,131	18,351	2002	253						0	120	31	3	9.00	7.6	0.3	6.0	-	0.0
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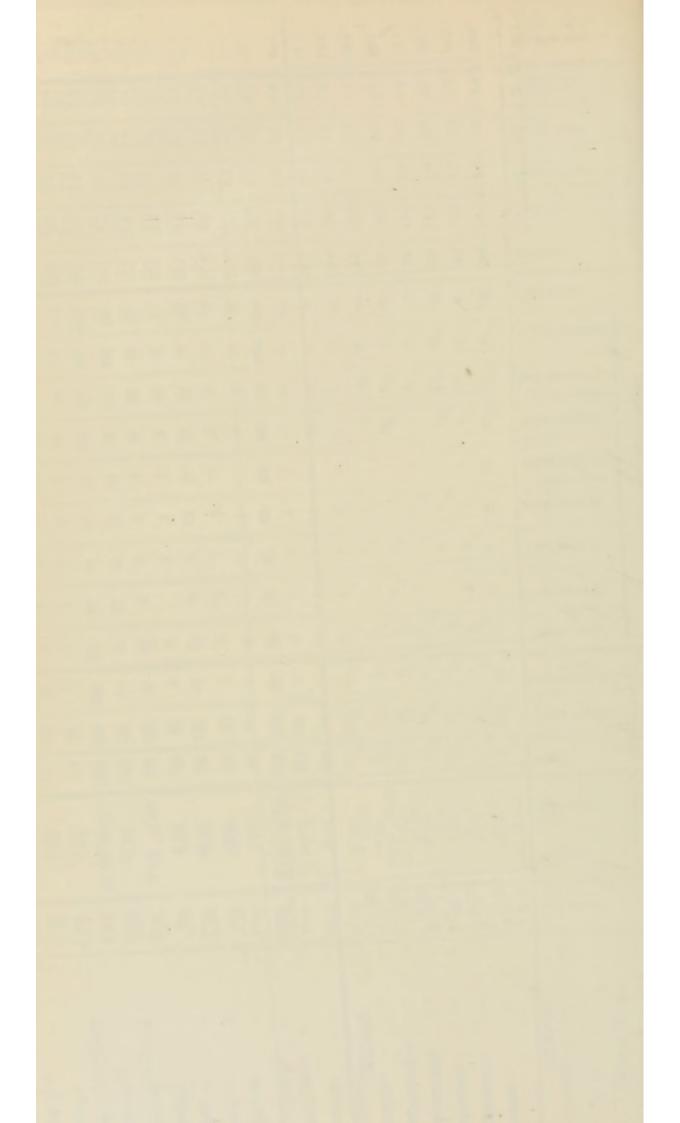


TABLE 3.

Notifications of Infectious Disease and Attace-Rates, 1920. (Figures obtained from the Weekly Notification Returns.)

	tate)	Smal	l-pox.	Sea Fe	rlet ver.	Diphi	theris.	Eo. Fe	terlo ver.	Pue F	rperal ever.	Erys	ipetas.	Pne	monts	Lath	
Sanitary Districts.	Population (Death Rate) 1920,	No.	per 1000	No.	per 1000	No.	per 1000	No.	per 1000	No.	per 1000	No.	per 1000	No	per 1000	No.	pc 100
Daban :— Barking Barintee Breintree Brinton-on-See Glahred Brinten	25,151 6,915 6,917 4,916 6,917 4,917 9,917 4,910 2,917 4,910 2,917 11,708 82,923 121,812 5,917 11,708 82,923 6,038 19,102 5,935 4,917 7,119 6,813 19,102 19,102 19,103 19,	12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	03 007	777 133 185 29 2 2 27 7 16 6 112 29 305 6 461 1 6 6 2 3 2 12 2 2 2 2 2 6 6 6 6	2:1 1:8 2:8 3:6 6:6 1:2 5:1 1:5 2:6 2:6 2:6 1:3 1:4 1:4 1:4 1:4 1:4 1:4 1:4 1:4 1:4 1:4	163 22 22 23 24 28 27 27 27 27 27 27 27 27 27 27 27 27 27	512 36 37 119 119 119 119 119 119 119 119 119 11	111111111111111111111111111111111111111	1 1 2 2 31 31 32 31 31 31 31 31 31 31 31 31 31 31 31 31	3	-03 	46 16 2 2 2 2 11 1 5 5 5 1 1 1 5 5 1 1 1 5 5 1 1 1 7 1 1 5 5 1 1 1 1	The same in the same of the same in	153 1 2 8 7 7 6 4 4 59 3 7 7 100 5 9 7 112 9 3 9 5 9 112 11	971 14 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 12 4 11 11 11 11 11 11 11 11 11 11 11 11 1	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-000 -000 -000 -000 -000 -000 -000 -00
URBAN TOTALS	631,628	17	-02	2,120	3.3	1,711	2.7	53	-05	29	-06	294	4	554	-3	13	-02
Rugat Belebamp Belebamp Bulleriesy Braintree Braintree Commissed Commissed Commissed Commissed Commissed Commissed Commissed Commissed Robelon Constit Robelon Robelon Standod Treadring Rugat Rugat Corate Rugat Ru	2,933 20,199 11,799 21,178 23,144 14,493 15,647 9,503 15,602 13,502 9,368 19,716 19,504 28,251 9,925 15,342 28,251 19,504 115,341	7	-03 -03	2 52 17 4 28 40 30 13 18 18 52 37 37 8 7 19	5 2.5 1.8 1.27 1.9 1.3 3.5 1.8 1.9 1.0	2 48 12 5 4 22 4 34 7 19 87 12 67 3 14	23 23 6 12 12 12 44 44 46 23 24 47	3 2 1 1 1 1 2 1 1 2 3 1 1 1 1 1 1 1 1 1	11 11 104 106 11 101 101 101 103 101 103	2 1 1 2 1 3 2 1	99 93 96 96 11 11 10 10 10 10 10 10 10 10 10 10 10	3 3 4 3 5 4 10 2 1 1 1 51	· 一般ないのであるのであるのである。	1 17 5 1 1 1 6 4 1 1 6 4 2 15 28 28	d 1.41 desired lastacket	1 1	42
URBAN TOTALS	631,628	17	-02	2110	3-3	1,711	2-7	43	-05	29	-05	271	-4	184	9	12	-02
AIMINISTRATIVE COUNTY TOTALS	855,203	31	*63	2,504	2-8	2,031	12	71	-08	51	-05	245	3	619 -	4	16	-01

RUEAL.	Sec 500	3,035	26	00	Oil	61	1		1	01	10	6	8	8	24.6			1.0	0.7	2002
BELGHAMF		01 41	455	231	20	21	*	7	10	20	14.	44 1	111	213 2	21.2	11.3	9.0	0.3	1.2	62.0
BILLEMICAT			2000	017	500	255	01	93	1-	60	252	42	110 2	217	21.4	12.0	0.0	2.0	1.3	235
Bearstree			2 2		00	00	-	1	69		1	9	122	27	9.95	12.4	1-2	9.0	1.3	517
Bearstrad			3	080	17	41	*	-	-	00	25	48	150	289	26-2	12.4	0.1	9.0	1.3	0.19
CHELYSTORD	25,010		343	136	150	- 57	-	9	-	01	17	8	110	196	23.6	13.5	0.5	3.0	1.1	177
			327	146	9	10	01	-	7	9	13	2	100	146	20-3	9.3	1.0	0.0	14	18.3
			17.5	109	. 0	9		64	63	0	00	13	18	100	17.7	11.1	0.7	20	1.2	24.0
		18,002	422	100	15	15	01	61	01	60	21	33	115		5.5.0	10.0	60	0.0	1.0	32.0
Marnow	82,342	15,552	346	187	18	18	-	1	*	01	83	00	108	-	55.55	12.0	0	0.0	1.5	0.50
	47,238	9,358	237	146	52	13	*	00	10	00	6	23	69	140	20.00	15.5	=	0.4	00	105.6
	28,084	19,736	212	233	23	8	*	60	14	15	26	S	98	238	26.2	11-9	0.0	1.0	0.7	619
- 2	55,386	19,604	461	555	25	88	9	00	6	80	8	21	103	2333	23.02	11-8	8.0	9.0	1.3	8.8
	29,720	28,251	23	242	\$	44	60	1-	14,	-1	23	20	92	212	23.0	90 90	0-1	0.3	12	9.30
LDEN	59,975	9,972	194	116	23	52	:		4	60	2	20	3	911	16.4	11.6	60	0.0	0.8	61.9
Stansfill	22,954	6,547	145	62	9	9	-1	:	1	19	10	15	31	23	22.6	5.6	0.3	6.0	0-0	9.00
1	73,131	18,351	203	222	22	12	60	64	1	11	24	47	134	223	27.4	13.7	6.3	6-0	1.6	47.8
Total	862,744	1 254,602 233,577	2910	8562	327	323	37	40	8	33	27.5	574	1489	5656	23.3	9-11	7.0	0.0	1.3	0.99
Torat. Bono' & Unnax Distracts 102,082 638,333 631,628 15142	102,082	9 638,333 631,628	15142	0201	912	32H	107	181	287	300	8200	1503	2283	6474	23.7	10.3	6	9.0	10	
TOTAL RUBAL DISTRICTS	862,74	862,764 254,602 253,577	2940	2048	222	8250	170	92	2	92	01 01	574	1489	2926	53.53	11.6	0.7	0.2	1.3	
TOTAL ADMINISTRATIVE COUNTY 964,820 892,995 885,205 21082 9449	964,820	592,995 885,205	21062	9449	1242	1247	204	227	386	401	1002	2027	3772	0076	23.6	10.6	9.0	9.0	1.0	

