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ADMINISTRATIVE COUNTY OF ESSEX.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1942.

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

COUNTY MEDICAL OFFICER OF HEALTH.

CHELMSFORD :

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PREFACE.

To the Chairman and Members of the Essex County Council.

I have the honour to submit my Twenty-fourth Annual Report (the fifty-third to be issued) for the Administrative County of Essex for the year 1942. Detailed tables showing populations and rates for each Sanitary District have again been omitted at the request of the Ministry of Health.

Main points from the statistics for the Administrative County are :—

(*a*) Birth-rate increased from 14.6 to 17.1, the highest figure recorded since 1925.

(*b*) Death rate decreased from 11.9 to 10.9.

(i) Cancer death-rate increased from 1.82 to 1.87.

(ii) Tuberculosis death-rate decreased from 0.61 to 0.59.

(*c*) Infant mortality decreased from 41 to 37. In 1939 the figure was 36 the lowest ever recorded.

(*d*) Maternal mortality remained at 1.9.

(*e*) Small-pox was again absent, the last notification being in 1934.

(*f*) Notifications of Infectious Disease decreased from 35,169 to 18,585. Diphtheria notifications were the lowest ever recorded. Tuberculosis (all forms) notification rate increased from 1.32 to 1.43.

The one outstanding feature of the year, despite continued war conditions, was the greatly reduced incidence of infectious disease. Propaganda under the diphtheria immunisation campaign was greatly intensified and secured an increase in the number of children immunised, the results of which are reflected in the lowest attack rate ever recorded. It is suggested also that this propaganda as well as the outbreak of small-pox at Glasgow, are the main reasons for the remarkable increase in the number of primary vaccinations against small-pox from 4,120 to 6,691, successful re-vaccinations also showing a record increase from 73 to 674.

Table I on page 8 records the number of patients dealt with under the Treatment of Venereal Diseases Scheme. It will be seen that the number of Essex patients treated for the first time increased from 1,342 to 1,550, the number of attendances of Essex patients increasing from 24,062 to 28,117. Civil Defence Regulation 33B came into operation during the year, giving for the first time compulsory powers in certain directions for combating this disease.

A condensed summary appears in this report of the great amount of work carried out by the Milk Special Sub-Committee which includes four members from the Public Health and Housing Committee and three members from the Diseases of Animals Sub-Committee. This Special Sub-Committee has continued to meet monthly to deal with the many matters arising from the granting of 951 licences to produce designated milk. Licensed farmers are working under increasing difficulties, including shortage

and indifferent labour, lack of fuel for sterilizing purposes, long delays in obtaining essential equipment and irregular and uncertain transport facilities. These factors have necessitated more sympathetic consideration of unsatisfactory cases and on the other hand they reflect great credit on those farmers (the majority) who have produced relatively good results throughout the year.

Until this year, the bulk of the Council's Laboratory Service was concentrated upon one private Laboratory, originally established by my predecessor, the late Dr. John C. Thresh. He was succeeded by Dr. John F. Beale, who was the first Bacteriologist for Essex (part-time), and who retired on 31st March, 1938. His successor was Dr. E. V. Suckling who at his own request relinquished the post on 31st March, 1942, but who continues to undertake the examination of samples of food, water and sewage. I take this opportunity to record my grateful thanks to Dr. Suckling for his ungrudging assistance and for all that he did to maintain and raise the standard of this Laboratory Service for this County.

The County is now served by a decentralised Laboratory Service at six centres by arrangement with the Ministry of Health, resulting as was anticipated in a marked increase in the number of specimens submitted.

A detailed account of the many phases of the Maternity and Child Welfare Service in operation in the Council's Child Welfare area is again recorded in this report. The number of births notified by midwives, doctors and parents increased from 6,811 to 7,781 ; the number of births unnotified decreased from 141 to 128 and the number of notifications of maternal deaths increased from 10 to 18. Increasing demands on the accommodation at the Maternity Homes again suggest the need for still more provision in this respect. It is to be expected that the demand for this accommodation will be much greater during the next few years until there is some solution of the acute shortage of dwellinghouses. Special mention must be made of the opening on 15th May, 1943, of " Ardmore," the Hostel for Mothers and Babies at Buckhurst Hill with accommodation for 16 mothers and babies. It has been provided largely on humanitarian grounds for the young mothers, married or unmarried, who may need practical and sympathetic help in what often is a difficult time.

Yeoman service has again been rendered by the District Nurse Midwives and my best thanks are due to the Essex County Nursing Association for the splendid way in which they have maintained their nursing arrangements particularly in the rural parts of the County.

The Maternity and Child Welfare Service suffered a great loss in June, 1943, when the Chief Health Nurse (Miss D. M. Landon) retired. She came into the County Service in 1920 and with her unswerving zeal, energy, and extensive hospital experience, helped the Committee to establish and expand this Service to its present day dimensions. This opportunity is taken to record my warmest appreciation of an officer who has served her native County so well.

Attention is directed to the special contributions provided by the Medical Superintendents of the County Council's Sanatoria and certain district Tuberculosis Officers, a perusal of which gives a picture of the active work carried on under the Treatment of Tuberculosis Scheme. As already stated there is an increase (1.32 to 1.43) in the attack

rate but the death rate shows a slight decrease from 0.61 to 0.59. Despite the high average of number of beds occupied (982), the average number on the waiting list was 110. If more adequate and suitable nursing and domestic staffs could have been obtained more beds could have been provided and a reduced waiting list would have been secured. A special word of praise is due to the Voluntary Care Assocations whose practical assistance to patients has been invaluable in these difficult days.

This year has seen the commencement of a new era for the nursing profession. The Nurses Salaries Committee set up by the Ministry of Health under the Chairmanship of Lord Rushcliffe issued its First Report in March, 1943, and this will be dealt with in my next Annual Report. Intensive propaganda work has been carried out, particularly the Pageant of Nursing at Brentwood on 26th March, 1943, the object being to demonstrate how the nursing service came into being and how it forms an essential part in the country's preventive and curative service. It is hoped that by these and other means more and more suitable applicants will be attracted to this vital, noble profession.

Civil Defence Casualty Services have been maintained as well as could be expected under the re-arrangements which have had to be made. Fortunately the intensive raiding of previous war years was not experienced. The staff are to be congratulated on the splendid way in which they kept pace with the training of the part-time personnel who have been drafted into the service.

Essex County Council Hospitals now provide accommodation for 7,382 beds. The demand on beds for civilian sick again increased, partly as a result of still further calling up of women and possibly also due to an increase in hospital-mindedness on the part of the patients. It would have been impossible to maintain this extensive service without the ready support and co-operation which has always been given by all concerned. Its success again proves how much the general public appreciate a good service which is provided for their benefit.

Throughout the year, the confidence and support of the Chairmen and members of the Public Health and Public Assistance Committees have been a source of strength to the staff in dealing with the many and difficult problems which have arisen. I am especially indebted to the Medical Officers of Health and other Officers of the Local Sanitary Authorities, and to all the members of the staff of the County Public Health Department for their co-operation.

W. A. BULLOUGH,
County Medical Officer.

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL, CHELMSFORD.
13th October, 1943.

PART I.

ACREAGE AND POPULATION.

The following table sets out particulars of the Registrar-General's estimated population for the year 1942, compared with the census figures of 1931. The table gives as in previous years, the rateable value and the product of a 1d. rate.

	Revised Areas.		Registrar-General's Estimated Population, 1942.	Rateable Value, 1st April, 1942.
	Acres. Census, 1931.	Population Census, 1931.		
Administrative County of Essex	959,464	1,189,004	1,274,100	£10,485,254

The product of a 1d. rate is estimated at £38,706.

SOCIAL CONDITIONS.

The social conditions were given in the report for the year 1937.

VITAL STATISTICS.

The chief vital statistics of the Administrative County compared with those for England and Wales during 1942 are set out below :—

	Essex.		England and Wales.	
	1938-1942.	1942.	1938-1942.	1942.
Birth-Rate per 1,000 population	15.2	17.1	14.9	15.8
Death-Rate per 1,000 population	10.9	10.9	12.5	11.6
Infant Mortality Rate per 1,000 Births ..	40	37	53	49
Still-Births Rate per 1,000 total live and still-births	31	28	Not available.	Not available.

NOTIFICATION OF INFECTIOUS DISEASES.

A summary of the notification of infectious diseases in the various Sanitary Districts during 1942 is set out in Table VIII on page 45. The table shows that 18,581 persons were notified to be suffering from infectious diseases as compared with 35,169 in the year 1941.

Smallpox.

There were again no cases of Smallpox notified during the year 1942.

Scarlet Fever.

The number of cases notified was 3,594 in 1942, as against 1,814 in 1941, the number of deaths being 3 and 5 respectively.

Measles.

The year 1942 showed a marked reduction in the number of cases notified the figures for 1942 and 1941 being : —9,439 in the year 1942 as compared with 22,224 in 1941,

Whooping Cough.

The notifications of whooping cough were also considerably reduced, the numbers being 2,563 in 1942, and 7,589 in 1941.

Diphtheria Immunisation.

All possible assistance has been given to local Sanitary Authorities in connection with Diphtheria Immunisation—County Council premises and medical and nursing staff being loaned in any area where the Medical Officer of Health has desired assistance.

The propaganda campaign has been greatly intensified in the past year by newspaper publicity, film shows, distribution of Ministry of Health leaflets and posters in schools and treatment centres, etc., in addition small posters were exhibited in a number of public service vehicles in central Essex.

The number of children being immunised continues to increase and it is gratifying to note that there was a further decrease in the number of cases of diphtheria this year—the total being 459 as compared with 662 in 1941.

SCABIES.

Under the Scabies Order 1941 County Councils and District Councils are given concurrent powers, and it was suggested that County Councils and local Authorities should therefore decide in collaboration on the most appropriate arrangements in the various areas.

Out-Patient Treatment.

The County Council gives every assistance to Local Authorities in the way of loaning premises and medical and nursing staff and, of course, carries out the treatment of school children and infants under five at the Council's Clinics. The use of First Aid Posts to supplement the Treatment Centres available, together with the personnel, has been approved for this work and this Scheme is in operation in many parts of the county.

In-Patient Treatment.

It has been arranged for scabies patients requiring in-patient treatment at hospital to receive this at County Council Hospitals and Institutions.

ESSEX EPIDEMIOLOGICAL COMMITTEE.

This Committee continued its activities throughout the year, eleven meetings being held. Its Terms of Reference are " to survey periodically the infectious diseases occurring in the Administrative County of Essex and to consider what steps (if any) should be taken to combat those diseases."

Consideration was given to a large variety of subjects, including prophylaxis of whooping cough, barrier nursing, diphtheria immunisation, sanitary arrangements at civil defence wardens' posts, typhus fever, emergency water supplies, sanitary services, etc., infective hepatitis, immunisation against enteric fever, outbreak of facial erysipelas, treatment of head lice, diets in British Restaurants, incidence of tuberculosis, scarlet fever, laboratory service in Essex, and day nurseries.

Circulars were issued to local Medical Officers of Health in regard to barrier nursing, domestic treatment of water, public health in times of emergency, and diets in British Restaurants.

CANCER.

The number of deaths occurring in the County from Cancer during the year 1942 is shown in the table below. The death rate per 1,000 of the population increased from 1.82 in 1941 to 1.87 in the year under review :—

	Age Period.						
	0—	1—	5—	15—	45—	65—	Total.
Borough and Urban Districts	1	5	4	165	812	970	1957
Rural Districts	—	—	—	30	129	276	435
Total for Administrative County	1	5	4	195	941	1246	2392

By Circular 2707 dated 31st October, 1942, the Minister of Health further extended by one year the period during which the arrangements to be made by the County Council under the Cancer Act, 1939, should be submitted. In granting this further extension, however, the Minister drew attention to the desirability of all practicable measures in present circumstances being taken to provide additional facilities for all who are suffering, or suspected to be suffering, from cancer.

Proposals for the provision of suitable accommodation at the Oldchurch County Hospital, Romford, for the deep X-ray therapy apparatus purchased early in the year under review, were submitted to the Ministry of Health for approval under the terms of the above circular. Considerable modification of the proposals was called for before approval was given, but at the time of writing a tender has been accepted for the construction of a new Deep X-ray Therapy Department at the hospital.

TREATMENT OF VENEREAL DISEASE.

The services of Mr. R. H. Boyd, F.R.C.S., as part-time V.D. Medical Officer were continued throughout the year. The negotiations with the Authorities of the

TABLE I.

TREATMENT OF VENEREAL DISEASE, YEAR 1942.

Treatment Centre.	Patients from all Areas. Total No. treated for first time.	ESSEX PATIENTS					
		Total Number treated for first time suffering from					Total No. of Attendances of Essex Patients.
		Syphilis.	Soft Chancre.	Gonorrhœa.	Not V.D.	Total.	
London Hospitals	17,106	81	4	176	507	768	12,473
St. Bartholomew's, London... ...	458	2	—	2	3	7	15
Romford	361	65	—	114	180	359	8,248
Chelmsford	82	8	—	21	53	82	1,004
Colchester	194	29	—	66	92	187	3,329
Harwich	10	2	—	5	1	8	141
Ipswich	297	3	—	3	2	8	193
Southend	244	3	—	13	19	35	916
Gravesend	184	13	—	17	20	50	1,012
Tottenham	494	5	—	5	36	46	786
Total for 1942...	19,430	211	4	422	913	1,550	28,117
Total for 1941...	18,254	207	3	429	703	1,342	24,062
,, 1940...	18,840	136	1	292	619	1,048	22,932
,, 1939...	24,618	180	5	557	1,068	1,810	44,814
,, 1938...	28,688	184	8	705	988	1,885	60,345

Chelmsford and Essex Voluntary Hospital were completed during the year and premises belonging to the Hospital were adapted as a new Clinic for V.D., which opened on 31st December, 1942. The new arrangement is a great improvement.

The General Practitioner V.D. Service established in 1941 continued and at the end of the year 1942, 15 practitioners were participating in the Scheme. During the year, they attended 15 patients.

In November, 1942, Civil Defence Regulation 33B came into operation imposing duties upon Medical Officers of Health and also "special practitioners" qualified to treat V.D. These duties relate to notification of contacts of persons suffering from the disease and where two or more patients have been infected by the same contact, the Medical Officer of Health can now require that person to submit to medical examination by a special practitioner within a specified period. Details of the working of the Regulation will be given on experience gained during the year 1943.

The County Council continues to participate in the London and Home Counties Scheme, whereby Essex patients attend for advice and treatment at many of the London Hospitals. Clinics are also available as follows :—

Oldchurch County Hospital, Romford ; Essex County Hospital, Colchester ; Chelmsford and Essex Hospital, Chelmsford ; Ad hoc Clinic, Harwich ; East Suffolk and Ipswich Hospital, Ipswich ; Southend Borough Sanatorium, Westcliff-on-Sea ; Ad hoc Clinic, Gravesend ; Prince of Wales Hospital, Tottenham.

Attendances at Clinics.

On page 8 is set out the usual table giving the number of new patients and attendances at clinics.

Travelling Facilities.

During the financial year ended 31st March, 1943, fares of necessitous patients to and from the nearest Clinic were paid by the Council at a cost of £146 14s. 11d.

VACCINATION.

During the year ended 31st December, 1941 (the latest period for which complete information is available) the Vaccination Officers' returns summarised in Table II show that 16,061 births were registered. Of these, 5,166 were successfully vaccinated and in 7,249 instances a statutory declaration of conscientious objection was made. Of the remaining 3,646 births, 921 removed to places unknown, 1,115 removed to districts of other Vaccination Officers who were duly notified. In 139 cases vaccination was postponed by medical certificate, 80 proved insusceptible to vaccination and 532 died unvaccinated. At the end of the year, 859 births remained which had not been entered in the vaccination register or temporarily accounted for in the report book.

With regard to the number of persons successfully vaccinated and re-vaccinated by Public Vaccinators and Medical Officers of Poor Law Institutions, the Clerk of the County Council has kindly supplied the following information for the year ended 30th September, 1942.

TABLE II.

VACCINATION.

Guardians Committee Areas.	No. of Births in "Birth List Sheets" registered 1st Jan. to 31st Dec., 1941.	No. of these Births entered by 31.1.43 in Cols. I, II, IV and V of the "Vaccination Register" (Birth List Sheets), viz. :—					No. of Births which on 31.1.43 remained unentered in the "Vaccination Register" on account of :—			No. of these Births remaining 31.1.43 neither entered in the "Vaccination Register" nor temporarily accounted for in "Report Book."	No. of Certificates of successful Primary Vaccination of Children under 14 received during 1942.	No. of Statutory Declarations of Conscientious objection received by V. O. during 1942.
		Col. I. Successfully vaccinated.	Col. II.		Col. IV. No. of Statutory Declarations.	Col. V. Died unvaccinated.	Postponement by medical certificate.	Removal to Districts the Vaccination Officer of which have been apprised.	Removal to places unknown and cases not found.			
			Insusceptible of vaccination.	Had Smallpox.								
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Braintree ..	807	303	2	—	427	27	2	10	26	10	244	350
Chelmsford ..	2,832	898	20	—	1,039	96	35	437	222	85	1,160	993
Colchester ..	1,769	757	7	—	823	61	—	39	65	17	1,921	813
Epping ..	1,109	324	11	—	689	18	6	43	10	8	472	725
Saffron Walden	445	236	6	—	157	23	1	10	10	2	432	124
Southern ..	5,435	1,661	25	—	2,402	185	37	319	311	495	3,529	2,795
South Eastern ..	1,338	222	2	—	653	30	27	114	116	174	380	725
South Western ..	2,326	765	7	—	1,059	92	31	143	161	68	1,870	1,334
	16,061	5,166	80	—	7,249	532	139	1,115	921	859	10,008	7,859

The Totals of the figures in columns 3 to 11 agree with the figure in Column 2.

Number of successful Primary Vaccinations of persons :—

(*a*) Under 1 year of age	5,570
(*b*) 1 year and upward	1,121
(*c*) Total	6,691

Number of successful re-vaccinations, *i.e.*, successful vaccinations of persons who have been successfully vaccinated at some previous time—674

LABORATORY SERVICE.

(*a*) Dr. E. V. Suckling. At his own request, Dr. Suckling retired from the position of Bacteriologist for Essex (part-time) on 31st March, 1942. His services have, however, been retained in connection with the examination of samples of water, sewage effluents, milk and other foods.

The following is a summary of the work carried out by Dr. Suckling during the year :—

Samples of Water	405
Samples of Sewage and Effluents ..	328
Samples of Milk and other Foods ..	505
Pathological Specimens (3 months only) ..	4,754

(*b*) New Laboratory Service. Since 1st April, 1942, the Pathological Laboratory Service has been continued at laboratories established either by the Ministry of Health or the Essex County Council at hospitals in the Administrative County of Essex.

The Laboratories used and the Sanitary Districts which they generally serve are as follows :—

Laboratory.	Sanitary Districts to be served. Boroughs.	Urban Districts.	Rural Districts.
Colchester, Essex County Hospital. Tel. No. : Colchester 3156	Colchester Harwich	Brightlingsea Clacton-on-Sea Frinton & Walton West Mersea Wivenhoe	Lexden & Winstree Tendring
Black Notley, Essex County Council Hospital. .. .. Tel. No. : Braintree 69		Braintree & Bocking Halstead Witham	Braintree Halstead
Billericay, St. Andrew's Hospital .. Tel. No. : Billericay 2		Benfleet Billericay Brentwood Burnham-on-Crouch Canvey Island Rayleigh Thurrock	Rochford

Laboratory.	Sanitary Districts to be served. Boroughs.	Urban Districts.	Rural Districts.
Romford, Oldchurch County Hospital Tel. No. : Romford 3666	Barking Dagenham Ilford Romford	Hornchurch	
Epping, St. Margaret's Hospital .. Tel. No. : Epping 2251.	Chingford Leyton Saffron Walden Walthamstow Wanstead & Woodford	Chigwell Epping Waltham Holy Cross	Epping Ongar Saffron Walden
Broomfield, Essex County Council Hospital .. .. Tel. No. : Broomfield 323	Chelmsford Maldon		Chelmsford Dunmow Maldon

The number of specimens examined during the nine months ended 31st December, 1942, was 44,680.

(*c*) Controller of Laboratories. By agreement with the Ministry of Health, the laboratories established at County Council Hospitals in the Administrative County of Essex are administratively controlled by :—

(*a*) Controller .. Dr. W. A. Bullough, County Medical Officer of Health, County Hall, Chelmsford. (Tel. No. : Chelmsford 3231).

(*b*) Deputy Controller Professor S. P. Bedson, Sector Pathologist, St. Margaret's Hospital, Epping. (Tel. No. : Epping 2251).

(*d*) Other Laboratory Services. Samples of milk taken from County Council Hospitals, Institutions, Children's Homes and Schools, farms licensed to produce designated milk, farms producing ordinary milk, central depots and in course of delivery to the consumer are examined by :—

Laboratory.	Examinations undertaken.
Essex Institute of Agriculture, Writtle ..	.. Bacteriological. Phosphatase.
Dr. A. L. Sheather, Chorley Wood ..	.. Biological.

SEWAGE WORKS AND RIVERS POLLUTION.

The usual Table giving details of visits to, and numbers of samples taken from Sewage Works is omitted. Grand Totals are as follows :—No. of Visits, 326 ; No. of Samples taken, 281, of which 123 or 43.8 per cent. were unsatisfactory.

Several Sewage Works are incapable of producing satisfactory effluents. The Local Sanitary Authorities concerned have prepared and submitted to the Ministry of Health the necessary improvement schemes, but owing to the national emergency the Ministry is unable to sanction the loans required.

MILK SUPPLY.

Milk (Special Designations) Regulations, 1936 to 1942.

(*a*) LICENCES. There was a slight decrease in the number of licences granted during the year, comparative figures being as follows :—

	1941.	1942.
Tuberculin Tested milk	94	106
Accredited milk	865	845
Totals	959	951

Three applications for licences were refused.

Infringements of the Order by licensees were considered by the Milk Special Sub-Committee, summarised results being :—

No. of licensees cautioned by Committee ..	15
No. of notices of intention to revoke	39
No. of licences revoked	24
No. of notices of intention to suspend	14
No. of licences suspended	15
No. of suspended licences re-instated	5

(*b*) SAMPLES OF DESIGNATED MILK. The number of samples obtained was increased from 4,834 to 5,794, and these were submitted to the Methylene Blue Reduction Test (in some cases the samples were also submitted to the Coliform Bacteria Test), with the following results :—

Quarter ended.	Total.	Satisfactory.	Unsatisfactory. No.	Unsatisfactory. per cent.	per cent.
31st March ..	1,216 ..	1,143 ..	73	6.0	(9.9)
30th June ..	1,511 ..	1,172 ..	339	22.4	(24.5)
30th September ..	1,684 ..	936 ..	748	44.4	(47.9)
31st December ..	1,383 ..	1,228 ..	155	11.2	(13.9)
Totals ..	5,794 ..	4,479 ..	1,315	22.7	(25.1)

For comparative purposes, the percentage of unsatisfactory samples for 1941 is given in brackets in the above Table. There is a further improvement, although the figures still compare unfavourably with pre-war years. Farmers needing assistance in tracing the cause of unsatisfactory samples made increasing use of the excellent advisory service provided by the Essex Agricultural Education Sub-Committee.

Biological Examinations.

During the year, reports were received upon the biological examination of 1,209 samples. 64 gave inconclusive results, 1,103 were free from tubercle bacilli, and 42 (3.7%) contained tubercle bacilli. The improvement in the percentage of positive samples obtained during 1941 (3.7%), which was the lowest ever recorded, has therefore been maintained.

Every positive result was notified to the Divisional Inspector of the Ministry of Agriculture and Fisheries, who took all necessary action thereon.

Milk-in-Schools Scheme.

Samples of milk were obtained and examined, as follows :—

Biological	230 (6 or 2.7% contained tubercle bacilli).
Bacteriological	353 (88 or 24.9% were unsatisfactory).

FOOD AND DRUGS ACT, 1938.

I am indebted to the County Analyst for the following information in regard to the work undertaken by him during the year 1942 :—

	Samples analysed.	Samples unsatisfactory.
Samples taken from Vendors or in course of distribution	380	93
Samples taken from Schools or Institutions	59	23
Samples taken on " Appeal to Cow " ..	68	—
	507	116

The usual details regarding kinds of samples examined have been omitted owing to the need for curtailing this Annual Report.

MENTAL DEFICIENCY ACTS, 1913-1927.

Dr. T. P. Puddicombe, Deputy County Medical Officer, who since his appointment in 1920, had rendered valuable service to the Statutory Committee for the Care of the Mentally Defective and, on application, to the Courts of Justice, in examining and reporting on cases suspected of Mental Defect, retired in March, 1942.

Arrangements were made under which most of this work has since been undertaken by Dr. A. R. Forbes, Assistant County Medical Officer. Drs. Marion L. Bainbridge, W. H. Alderton, and W. A. Milne, of the County Medical Staff, have also assisted.

A total of 252 cases were examined, individual reports being submitted in each case. The following table shows their classification :—

Diagnosis.	Number examined.		
	Male.	Female.	Total.
Feeble-minded	79	84	163
Imbecile	30	37	67
Idiot	6	7	13
Not certifiable under the Acts ..	6	3	9
Total	121	131	252

At the end of 1942, the Statutory Committee were responsible for the care and control or supervision of 2,442 persons, classified under the following headings :—

	Male.	Female.	Total.
In Institutions ..	479	357	836
Under Statutory Supervision	766	633	1,399
Under Guardianship ..	11	28	39
Under Licence from Institution	79	89	168
Totals ..	1,335	1,107	2,442

MENTAL TREATMENT ACT, 1930.

The Consultant Psychiatric Clinics held by Dr. A. G. Duncan, Medical Superintendent, Severalls Mental Hospital, Colchester, and Dr. W. G. Masefield, Medical Superintendent of Brentwood Mental Hospital, have continued.

Dr. A. G. Duncan reports that at the Clinic at the Colchester Hospital the total number of attendances was 269, the number of new patients being 133. At the Clinic at the Chelmsford Hospital the total number of attendances was 112 and the number of new patients 72.

Dr. W. G. Masefield reports that the attendances at the weekly Clinic at Oldchurch County Hospital, Romford, has continued to increase steadily, the number of attendances being 881, of whom 381 were new patients. In order to cope with this increase, Dr. Masefield has had the assistance of Dr. A. R. Forbes, Assistant County Medical Officer, and remarks that this co-operation between the Public Health and Mental Health Departments augurs well for the future and is very much appreciated.

BLIND PERSONS ACTS, 1920-38.

The facilities provided for the certification, medical supervision and general care of the blind have continued under the supervision of the Ophthalmic Specialists. Miss Laura H. Macfarlane, M.D., D.P.H., D.O.M.S., was appointed as temporary whole-time Ophthalmic Specialist and commenced duty on the 9th March, 1942, in place of Mr. J. F. Darbyshire, who resigned in January, 1942, and the part-time services of Messrs. T. Collyer Summers, F.R.C.S., E. J. Baldwin, M.B., B.Ch., D.O.M.S., T. D. Smart, M.D., B.S., and S. G. Corner, M.D., D.O.M.S., continued to be available, together with the additional part-time services of Mr. C. L. Gimblett, M.D., F.R.C.S.

During the year 496 persons were examined by the Specialists and occupational training given to 33 persons.

On 31st March, 1943, a total of 2,170 (males 1,011, females 1,159) were on the Blind Persons Register. Of these 2,117 (males 981, females 1,136) are over sixteen years of age. 1,799 are classified as unemployable, viz., males 750, females 1,049 and of these 48 are in homes for the blind, 40 in mental hospitals and 110 in Public Assistance institutions.

Of the trades, etc., followed by the blind workers the main occupations show the following numbers: mat makers 25, machine knitters 23, piano tuners 17, basket workers 17, poultry keepers 14, dealers 14, music teachers 7, telephone operators 7, boot repairers 6, hawkers 3, clerks 6, labourers 5.

PROVISION OF HOSPITAL SERVICE.

Hospitals.

During 1942 the Emergency Hospital Organisation continued to function smoothly and no undue demands were made on beds by air raid casualties, which continued for the most part to be small in number. Increases were however noted in the numbers of E.M.S. cases, due largely to the fact that the Ministry of Health enlarged the categories of patients for whom they accepted responsibility. The diversion of still greater numbers of civilians into National Service was also not without its repercussions on the numbers of patients requiring hospitalisation.

Many advances were made in the hospital arrangements, and the scheme generally in relation to an acute emergency was considerably amplified.

The demand on beds for civilian sick showed a steady upward tendency, partly as a result of still further calling up of women, and possibly also due to an increase in hospital-mindedness on the part of patients. The requirements for civilian patients increased to such an extent, especially during the winter period, that it was found necessary to utilise beds normally earmarked for E.M.S. cases, and this to some extent relieved the situation. The hutted annexes continued to prove very satisfactory as hospital units.

Considerable numbers of medical officers were called to the services from the hospitals during the year and it has been found impossible to replace many of these, but the remaining staff have accepted the additional burden placed on them and the work has not suffered. Many nurses also joined the forces and the shortage is very marked; here again, the remaining nursing staff have willingly undertaken to carry out additional duties. Domestic labour has been increasingly difficult to obtain and this has not minimised staffing problems.

The arrangement whereby the administration of most of the hospitals in Essex devolved on the Hospital Officer in Cambridge continued to work in a satisfactory manner, and the Hospital Officer and his deputies have maintained close liaison with the municipal hospitals. Concurrently with this, the voluntary and municipal hospitals have continued to work in close harmony. Frequent conferences have taken place on matters particularly in relation to the E.M.S. Meetings were convened by the Hospital Officer at which both voluntary hospital and municipal hospital representatives attended, and as a result frank discussions took place and matters of interest were discussed from the viewpoint of improvements to the services.

The year under review saw the commencement of a new outlook in the rehabilitation of the injured person, and this is likely to have far reaching consequences, since it is visualised that in the near future facilities will be available whereby all patients will receive special consideration from this angle in order that they may resume work with

the least possible delay, and if unfit to return to their normal occupation they will be given training which will enable them to undertake duties consistent with their physical condition.

Much experience has been gained as a result of war conditions in treatment, and noteworthy advances were made, for example, in chemotherapy and the treatment of burns; as a result a considerable decrease in certain cases in the amount of time spent in hospital was possible.

During 1942 the Ministry of Health commenced a survey of the available hospital accommodation in the County, in order that the post-war requirements might be carefully assessed and plans made for co-ordinating the needs of the various areas. No findings in this connection were published during the year.

The strides made in relation to the Hospital Blood Transfusion Services should be mentioned, by which supplies of blood necessary were made available in the different forms which experience had indicated were best suited for individual cases. In this connection much valuable assistance and guidance was obtained from Dr. John Shone, Sector Transfusion Officer. Demonstrations of the advances in technique of blood transfusion were arranged at various hospitals and these were well attended, not only by hospital staffs, but also by general practitioners.

The Joint Sub-Committee of the Public Health and Public Assistance Committees appointed to act as Co-ordinating Committee continued to function during 1942, thus ensuring continuity of policy in respect to the County Council's hospitals and institutions.

The position in respect to bed accommodation in County Council Hospitals was as shown in the following table :—

Normal bed capacity	2,737	
Additional beds by crowding	826	
Additional beds in hutments	1,986	
	——	5,549
Beds specifically reserved for special types of patients (*e.g.* Tuberculosis, Chronics, etc.) not included in above		1,833
		——
		7,382
		——

Ambulance Facilities.

The normal ambulance arrangements in the County have continued fairly satisfactorily and the close liaison with the Civil Defence Emergency Ambulance Organisation has been maintained.

NURSING SERVICES.

(a) Civil Nursing Reserve.

Statistics submitted to the Ministry of Health on 31st December, 1942, indicated that there were 1,302 members on the Essex Register of the Civil Nursing Reserve (213 trained nurses; 122 assistant nurses; 967 nursing auxiliaries). At that date members

of the Civil Nursing Reserve, including those on loan from other areas, were employed as follows in Essex :—

Category.	Employed at Emergency Hospitals.	Employed at First Aid Posts.	Employed in Reception Areas.	Total.
Trained Nurses ..	145	63	1	209
Assistant Nurses	118	4	1	123
Nursing Auxiliaries ..	579	300	38	917

In addition, a small number is standing by or serving in casualty evacuation trains, day nurseries, with district nurses, etc.

The statistics given above in regard to the state of the register show a decrease of 659 when compared with the figures given in the report for the year 1941. This decrease is due almost entirely to resignations, although it is a fact that fewer recruits have been coming forward for instruction, but it is hoped that when the new organisation set up by the Ministry of Labour and National Service for dealing with the shortage of nurses becomes really effective there will be an increase in the numbers of recruits.

During the year 1942, sixteen intensive courses of instruction, on the lines laid down by the Ministry of Health were held at various hospitals in the County. Two hundred and fifty-eight candidates attended these courses of instruction and as a result 238 nursing auxiliaries were enrolled. The matrons of hospitals have readily co-operated in the arrangements for holding these intensive courses, and the good result obtained is in no small measure due to their readiness to help. A member of the reserve on the Essex Register was appointed as Regional Sister Tutor in February, 1942, and assisted considerably in regard to these intensive courses of instruction.

The Committee of the Local Emergency Organisation for the Nursing Profession met on four occasions during the year. Amongst other matters considered by the Committee was the problem of the future employment of nursing auxiliaries.

Another subject which was considered by the Local Emergency Committee was the matter of remuneration of women able to give part-time service in the Civil Nursing Reserve. Undoubtedly many good nurses who have other commitments would be prepared to undertake part-time service if it were paid for, but in the absence of any such payment they drift into other forms of war service. The Civil Nursing Reserve Advisory Council were, however, unable to see their way to implement a scheme for the payment of part-time service. It is hoped that the new arrangements for recruiting nurses and midwives set up by the Ministry of Labour and National Service will overcome the difficulties envisaged by the Local Emergency Organisation, but in the meantime, the Ministry of Health have suggested to hospital authorities that there is no reason why they should not employ nurses on a part-time basis, and pay them, if they wish to do so outside the scope of the Civil Nursing Reserve.

The Standing Conference of Matrons of Essex Hospitals, agreed during the year to form a panel of lecturers who could visit hospitals in the County to lecture to members of the Nursing Staff, including members of the Civil Nursing Reserve, on nursing matters and hospital organisation generally.

During the year the Medical Superintendents of one or two emergency hospitals expressed a desire to make arrangements for lectures to be given by the medical staff to nursing auxiliaries working at the hospital. This suggestion was made with a view to putting nursing auxiliaries in a position to meet all emergencies, bearing in mind the fact that, in present circumstances, owing to shortage of trained nurses, they have in many cases to perform duties which they would not otherwise be asked to perform. It was agreed that such courses of lectures might be given, provided they were only elementary in character, and dealt with the general principles of nursing, and elementary surgery and medicine, with a view to increasing the efficiency of nursing auxiliaries. It was however, felt that the provision made by the Ministry of Health in regard to refresher courses met the needs of the Civil Nursing Reserve, and the giving of lectures otherwise than by way of revision of the intensive course of instruction was generally felt to be undesirable in view of the difficulties which might be created thereby at a later date. Refresher courses were in fact held during the year, and many nursing auxiliaries attended these courses, but unfortunately quite a number did not complete them.

At the end of the year, arrangements were well in hand for a Pageant of Nursing, which was opened at Brentwood on 26th March, 1943, by the Regional Commissioner, and was held again on the 27th. This consisted of a play entitled "Wards and Rewards" by Mr. Howard Hayden, of Brentwood, (which presents a panorama of nursing during the last 100 years) and demonstrations in nursing technique. The play was very ably acted by pupils from the secondary schools in Brentwood under the guidance of the author and Mrs. Copeman. The demonstrations were provided by the staffs of the London Hospital Annexe at Brentwood; Essex County Council Hospital, Black Notley; Brentwood and District Hospital; Highwood Hospital, Brentwood; and by the local branch of the British Red Cross Society. These and the play were very highly appreciated by the large audiences which attended on both days. The pageant undoubtedly did much to increase interest in nursing matters generally, and thanks are due to all who worked hard to make it the outstanding success that it was.

The Organiser and Secretary continued to maintain her liaison with local officers of the Ministry of Labour and National Service, constantly visiting all hospitals in the county where members of the Reserve are employed, interviewing individual members, and generally by propaganda activities and in many other ways helping forward the work of reducing the shortage of nurses which exists throughout the county. There is no doubt that the work that she undertakes is of a much wider nature than that usually performed by a Civil Nursing Reserve Organiser. She has shown herself to be capable of maintaining a high standard of administrative efficiency which is reflected in all the arrangements in connection with the Reserve in the County.

(c) General.

The year 1942 may be considered as a period of rising expectation in the nursing world. The result of the deliberations of the Nurses Salaries Committee set up by the Ministry of Health under the chairmanship of Lord Rushcliffe, was awaited. The first Report appeared in March, 1943, and the steps then taken to give effect to the recommendations made therein will be dealt with in the Report for the year 1943.

Towards the end of the year under review active steps were taken by both the Ministry of Health and the Ministry of Labour and National Service to solve the problems associated with the shortage of nurses in hospitals. As a result the National Advisory Council for the Recruitment and distribution of Nurses and Midwives set up by the latter Ministry met for the first time early in 1943.

As indicated above, a shortage of nurses exists at all hospitals and institutions in the County, although as in previous years it was possible to maintain a fairly adequate number of nurses to care for the patients actually under treatment in the Council's Hospitals and Institutions. The return periodically submitted to the Ministry of Health indicated that on 31st December, 1942, the following nurses would have been employed in hospitals in the county if they had been available. (The figures in brackets indicate the position as on 31st December, 1941).

	Local Authority Hospitals of all types.	Voluntary Hospitals.
Trained Nurses ..	110 (103)	7 (11)
Assistant Nurses ..	158 (154)	2 (4)
Nursing Auxiliaries ..	18 (59)	— (2)
Student Nurses ..	58 (81)	7 (12)
Other Trainees ..	19 (15)	5 (8)

The training school at the Essex County Council Hospital Wanstead, was opened early in 1943. The pre-entry course of instruction for girls entering the nursing profession at the South West Essex Technical College started in September, 1942. Early in 1943 the General Nursing Council approved of a scheme for the affiliation of the Essex County Council Hospital, Broomfield, with the Oldchurch County Hospital, Romford, and a four years' course of instruction, including training for the certificate of the Tuberculosis Association and training in general nursing, is now provided at these two hospitals.

So far as the Council's Sanatoria are concerned the shortage of nurses has been extremely serious during the year. In order to overcome the shortage as far as possible the salaries of nurses employed in Sanatoria were reviewed and as a result with effect from 1st July, 1942, all nurses in the Council's service employed at Sanatoria received a payment of £12 per annum additional to the scales previously approved. The shortage of staff in Sanatoria was under constant consideration by the Ministry of Health. Towards the end of the year, arrangements were made between the War Office and the Ministry of Health whereby members of the Queen Alexandra's Imperial Military Nursing Service were loaned for service in hospitals under the control of the County Council. A number of these nurses were posted to the Essex County Council Hospital, Black Notley.

Following discussions which took place early in the year between the Principal of the South West Essex Technical College and nursing officers of the County Council, a part-time course of instruction for Sister Tutors commenced at the College on 15th September, 1942, for trained nurses who wished to become teachers of nursing and

relative subjects. The course extends for two years. Those who complete it satisfactorily and pass the examination connected wherewith, will be awarded the College Sister Tutor's Diploma. Facilities were provided to enable nurses on the County Council's staff to attend the course in their off duty time by transferring them to duty at hospitals in the vicinity of the College. It is gratifying to report that the course opened with 36 nurses in attendance. The Principal of the South West Essex Technical College indicated on 12th September, 1942, that a number of nurses had approached the College as to the possibility of starting a part-time course in Institutional Management for fully trained nurses. As a consequence a conference consisting of the staff of the college and nursing officers of the County Council was called to discuss and advise the Education Authority regarding such a course. The course commenced at the College on 17th February, 1943.

The policy adopted by nursing co-operations of increasing their fees for supplying nurses to hospitals and institutions under the control of local authorities caused much concern during the year. A conference of representatives of the County and County Borough Councils in the Home Counties was held in July, 1942, when maximum fees to be paid for nurses engaged from nursing co-operations were laid down, and certain other recommendations in regard to the matter were made.

In this connection it may not be out of place to make reference to the Nurses Act, 1943, which received the Royal Assent on 22nd April, 1943. Part I establishes the necessary machinery for compiling a roll of Assistant Nurses under the aegis of the General Nursing Council. It also restricts the use of the titles of Nurse and Assistant Nurse and imposes penalties for their misuse. The provisions of Part II when brought into effect will make it obligatory for every person proposing to carry on an agency for the supply of nurses (*e.g.* a nurses co-operation) to hold a licence, the County Council being the licensing authority subject to certain provisions as to delegation. The Minister of Health has intimated that he does not consider it practicable to bring Part II of the Act into operation until the roll provided for in Part I is in being. Miss L. Snowden, the Council's Lady Supervisor of Public Assistance Institutions, has been appointed to the Assistant Nurses Committee of the General Nursing Council set up by the Act.

The scheme for training assistant nurses instituted in 1935 continued to work satisfactorily, and recent events have brought appreciably nearer the day when the scheme will be officially recognised by the General Nursing Council. During the year, the Hertfordshire County Council and the London County Council who have initiated similar schemes, expressed their willingness to enter into a reciprocal arrangement whereby certificates of training should be mutually recognised so that on completion of their training, candidates would have recognised qualifications to seek appointments in any one of the three counties. The recommendations contained in the First Report of the Nurses Salaries Committee, (which is available at the time of writing), on the subject of assistant nurses of course extends these reciprocal arrangements on to a national basis.

CIVIL DEFENCE CASUALTY SERVICES.

During the year 1942, the intensive raiding of previous war years was not experienced. The incidents which have occurred in all parts of the county have been dealt with by all services in a satisfactory and efficient manner.

The main problem of this year has been the drastic reduction of whole-time personnel and their replacement by part-time volunteers. The reduction has been considerable, though in certain vulnerable areas a slightly higher proportion of whole-time members has been approved. The replacement of this personnel by part-time volunteers has not been easy owing to the decreasing number of persons available for such work. Late in 1942, the numbers were increased under the powers of direction, whereby individuals are directed by the Ministry of Labour and National Service to part-time work of national importance.

It will be appreciated that the direct result of these instructions was that large numbers of untrained part-time persons were received in all areas. This put a considerable strain on the training facilities, especially as in many areas the number of instructors available has decreased owing to call up for military and other duties. The training programme however, goes forward as a routine and a considerable proportion of the " directed " persons are making good with increased training and practical experience.

In connection with the reduction of personnel a review of all First Aid Posts was carried out. Those posts at or near E.M.S. Hospitals were subject to special consideration and in certain cases arrangements were made with the Hospital Authorities that they should take over the administration of the adjacent Post and its personnel. Certain First Aid Post buildings were closed, the work being transferred to the Casualty Department or Casualty Reception Ward of the Hospital. Under these arrangements the personnel work primarily in the Casualty Department but are also available for duties in the Hospital Wards, being under the jurisdiction of the Matron for these duties.

A small number of First Aid Posts have been placed on a care and maintenance basis with an immediate total reduction of personnel. These Posts remain equipped and are ready to function if required.

Throughout the year, the responsibility of the Civil Defence Casualty Services for Home Guard Casualties has been clarified and in a number of areas exercises with the Home Guard have brought out valuable points and have been a means of improving the co-operation between the Civil Defence Services and the Home Guard. The setting up of W.V.S. Aid Houses is a further link in the Casualty Service and though mainly intended to function in the event of invasion, these Aid Houses have proved their worth under air raid conditions.

The increased work in the training of the many new part-time personnel has been mentioned. In addition, refresher courses for those members of longer standing have kept up the standard of efficiency; also competitions for both First Aid Posts and First Aid Points have proved extremely useful as a part of the general training programme.

During the year, both First Aid Posts and their personnel have been used increasingly for additional duties. In many First Aid Posts, Welfare and Ante-natal Clinics are held and the Cleansing Units are used for the treatment of scabies. The personnel assist at these clinics and in addition are assisting at Dental Clinics, Immunisation Clinics, Welfare and Ante-natal Clinics, Day Nurseries and Hospitals in the vicinity. Arrangements have also been made with the Essex County Nursing Association whereby First Aid Post personnel give assistance to local District Nurses.

The Civil Defence Ambulance Service directed by the County Ambulance Officer, was included in the severe cuts of whole-time personnel, and here again the number of new individuals coming to the service has meant a great increase in training. In addition to the normal and operational duties this Service continues to assist with the transfer of both Civilian and Military cases under the Emergency Hospital Scheme.

The work of the County Equipment Officer with regard to medical stores as mentioned in last year's report has increased due to the receipt of extra reserve equipment and also to the re-organisation of certain of the First Aid Posts. In view of the large numbers of personnel now needing intensive training, special arrangements have been made for each Civil Defence area to hold certain items of medical equipment for the basic training in First Aid, Anti-gas and Home Nursing.

Lastly on the administrative side the work has in no way decreased. From every aspect the work in the Central Office has increased in volume and has necessitated much personal contact with the Local Authorities, Hospital Committees, representatives of the Services and Home Guard and with the Ministry of Health.

The following figures are of interest in giving the extent of the Services and if compared with last year's report will show the differences in whole-time and part-time personnel.

	Number.	Personnel. Whole-time.	Part-time.	Total.
FIXED FIRST AID POSTS—				
(*a*) Attached to Hospitals ..	4			
(*b*) Others ..	89			
(*c*) Closed on a care and maintenance basis	4	938 ..	2,453 ..	3,391
MOBILE FIRST AID POSTS— ..				
(*a*) Heavy Units ..	24			
(*b*) Light Units ..	14			
FIRST AID POINTS—				
(*a*) Official ..	215 ..	— ..	2,493 ..	2,493
(*b*) Unofficial ..	147 ..	— ..	900 approx. ..	900 approx.
FIRST AID PARTIES—				
(*a*) Depots ..	56			
(*b*) Cars :				
Whole-time ..	130	370 ..	1,418 ..	1,788
Part-time ..	14			
AMBULANCE SERVICE—				
(*a*) Depots ..	95			
(*b*) Ambulances :				
Whole-time ..	316			
Part-time ..	109	1,030 ..	976 ..	2,006
(*c*) Cars for Sitting Cases :				
Whole-time ..	92			
Part-time ..	78			

Medical Rest Centres and Rest Homes for Homeless Persons.

(*a*) London Civil Defence Region. The following remain available for homeless persons who are unfit to return to their own homes or a billet, *e.g.*, those who are aged and infirm, severely shocked, delicate, etc. :—

Beechlands Medical Rest Centre, 42, Alderton Hill, Loughton.
Brookfield Medical Rest Home, Oak Hill, Woodford Green.
Holmhurst Medical Rest Home, Manor Road, Loughton.
5. Forest Drive West, Leyton. Medical Rest Centre.

(*b*) Eastern Civil Defence Region. The arrangement to accommodate up to 6 homeless persons from the Borough of Harwich at Michaelstow Hall, Ramsey, continues.

During the year a Medical Rest Home to accommodate 23 aged and infirm homeless persons has been opened at Church Hall, Broxted. A State Registered Nurse is in charge.

PART II.

TUBERCULOSIS.

The close of 1942 produced Governmental intimations of their intention to increase the Country's effort not only to stem the threatened increase in the disease presumably due to stress and strain of war-time conditions, but also to endeavour by means of mass radiography to discover cases of tuberculosis not yet made evident by the appearance of symptoms or which for one reason or another have not been brought to the notice of the Tuberculosis Authority. At the time of writing this report schemes for implementing the Government's suggestions in respect to allowances and grants for tuberculosis patients and their dependants, and mass radiography are being prepared. Any effort made to prevent the spread of infectious disease must be regarded as a vital part in the war effort.

The Government's instructions followed the publishing in 1942 of the very interesting Report on " Tuberculosis in War-time " by a Committee appointed by the Medical Research Council. A significant comment in the Report was that the comparative statistics for the Country for the periods 1914 to 1916 and 1939 to 1941 indicated that the retrogression in the mortality rates has in this war been twice as severe. There may be many causes for the greater mortality rate during this period but there would seem little doubt that the subjection of the home-life of the civilian population to " enemy action " must be one of the largest contributory causes. Fortunately, the increased death rate does not appear to have further deteriorated during 1942.

The following is a brief summary of the work done under the Essex Tuberculosis Scheme during 1942 :—

TABLE III.

(*a*) Summary of notifications during the period from the 1st January, 1942, to the 31st December, 1942, in the Administrative County of Essex.

	Formal Notifications.												
	Primary Notifications of New Cases of Tuberculosis.												Total Notifications.
	Age Periods.												
	0—	1—	5—	10—	15—	20—	25—	35—	45—	55—	65—	Total (all ages)	
Pulmonary, Males ..	1	6	15	20	104	85	187	169	116	72	25	800	818
„ Females ..	1	8	7	19	95	132	157	84	52	16	16	587	600
Non-Pulmonary, Males..	2	29	42	35	36	17	23	10	7	9	1	211	212
„ „ Females	—	27	42	44	27	28	22	15	8	5	2	220	222

(*b*) **New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.**

	Age periods.											Total.
	0—	1—	5—	10—	15—	20—	25—	35—	45—	55—	65—	
Pulmonary, Males	2	—	3	2	—	6	32	17	3	7	1	73
,, Females	1	—	2	1	3	18	27	5	2	4	1	64
Non-Pulmonary, Males	—	2	6	3	4	—	3	3	—	—	—	21
,, Females	—	2	3	1	1	3	2	3	—	—	—	15

The source or sources from which information as to the above-mentioned cases was obtained are shown below :—

Source of Information.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns { from local Registrars	4	—
Death Returns { transferable deaths from Registrar-General	5	1
Posthumous Notifications	19	2
"Transfers" from other areas (other than transferable deaths)	103	24
Other Sources. (Form I—14) (Form II—1)	6	9
Total	137	36

TABLE IV.

Showing Attack and Death-rates from Tuberculosis in the Administrative County of Essex.

Year.	Pulmonary Tuberculosis.				Non-Pulmonary Tuberculosis.				Tuberculosis (All Forms).			
	Notifications.	Rate per 1,000 Pop.	Deaths.	Rate per 1,000 Pop.	Notifications.	Rate per 1,000 Pop.	Deaths.	Rate per 1,000 Pop.	Notifications.	Rate per 1,000 Pop.	Deaths.	Rate per 1,000 Pop.
1912-16	Not		851	0.86	Not		269	0.27	Not		1120	1.13
1917-21	available.		752	0.89	available.		199	0.24	available.		951	1.13
1922-26	1110	1.16	656	0.69	320	0.34	148	0.15	1430	1.50	804	0.84
1927-31	1110	1.00	710	0.64	382	0.34	141	0.13	1492	1.34	851	0.77
1932-36	1145	0.89	644	0.50	391	0.30	131	0.10	1536	1.19	775	0.60
1937	1157	0.84	603	0.44	369	0.27	123	0.09	1526	1.11	726	0.53
1938	1207	0.87	581	0.42	449	0.32	116	0.08	1656	1.19	697	0.50
1939	1072	0.77	627	0.45	295	0.21	99	0.07	1367	0.98	726	0.52
1940	1087	0.83	632	0.48	256	0.19	98	0.07	1343	1.02	730	0.56
1941	1281	1.02	619	0.49	372	0.30	146	0.12	1653	1.32	765	0.61
1942	1387	1.09	622	0.49	431	0.34	126	0.10	1818	1.43	748	0.59

It will be seen that the above figures show a slight increase in the attack rates for both pulmonary and non-pulmonary tuberculosis over the figures for 1941. The death rate for pulmonary tuberculosis remains the same and the death rate for non-pulmonary tuberculosis shows a decrease. Whilst these figures are still higher than the pre-war figures it is to be hoped that the special efforts now being made will hold attack and death rates in check and enable a rapid reduction in the rates as soon as greater opportunities, which should be available on the cessation of hostilities, are utilised in the campaign.

TABLE V.

NOTIFICATION REGISTER.

	Pulmonary.			Non-Pulmonary.			Total Cases
Number of cases of Tuberculosis remaining at the 31st December, 1942, on the Registers of Notifications kept by District Medical Officers of Health in the County.	Males	Females	Total	Males	Females	Total	
	4443	3699	8142	1826	1711	3537	11679

Compatible with the figures showing a slight increase in the incidence of the disease during 1942 the total number of cases on the Notification Registers kept by District Medical Officers of Health also shows a slight increase, namely 11,023 for 1941 as compared with 11,679 for 1942.

Dispensaries.

The table on page 28 gives the more interesting figures relating to work done during 1942 at the various dispensaries throughout the County :—

DISPENSARY ATTENDANCES. During the year 1942 there were 23,708 attendances by patients at the dispensaries as compared with 22,035 during 1941.

HOME VISITS BY HEALTH VISITORS. The various Health Visitors throughout the County paid 20,583 visits to patients in their own homes during 1942 as compared with 21,399 during 1941.

In addition to the work indicated in the table, however, it is important to realise that as the dispensaries become more and more recognised as diagnostic centres the number of doubtful cases referred to the dispensary increases. For example during 1942 there were 6,568 new cases examined, of which 4,989 were found to be non-tuberculous. This aspect of the Dispensary functions is, of course, welcomed as there is more likelihood of thereby finding the cases in which the disease is in the early stage and response to treatment more probable.

The following are interesting extracts from reports received for the year 1942 from Tuberculosis Officers in the more thickly populated portions of the County :—

> *Walthamstow Area.* The total number of attendances gives some idea of the amount of work done only if it is understood that a varying degree of effort is required in dealing with the various groups. Thus, a routine examination of a case may be quite a simple matter if all is going well. If not, the time and effort necessary to deal with the situation may be very considerable. New cases of course, require much more thorough examination, and this

TABLE VI.

Relating to the Work of the Dispensaries during the Year ended 31st December, 1942.

	Pulmonary.				Non-Pulmonary.				Total.				Grand Total
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M	F	M	F	M	F	M	F	M	F	M	F	
A. (1) Number of definite cases of Tuberculosis on the Dispensary Register at the beginning of the year	2391	1852	110	90	321	395	385	322	2712	2247	495	412	5866
(2) Transfers from other Authorities during the year	126	152	9	12	19	13	14	11	145	165	23	23	356
(3) Lost sight of cases returned during the year ..	54	39	—	—	8	4	6	2	62	43	6	2	113
B. Number of New Cases diagnosed as Tuberculous during the year—													
(1) Class T.B. minus	358	253	34	28	—	—	—	—	358	253	34	28	673
(2) Class T.B. plus	318	197	2	3	—	—	—	—	318	197	2	3	520
(3) Non-pulmonary	—	—	—	—	110	94	86	96	110	94	86	96	386
C. Number of cases included in A. and B. written off the Dispensary Register during the year as :—													
(1) Recovered	34	32	9	4	13	19	31	22	47	51	40	26	164
(2) Dead (all causes)	309	217	3	5	11	10	4	3	320	227	7	8	562
(3) Removed to other areas	132	129	4	8	2	14	15	10	134	143	19	18	314
(4) For other reasons	158	105	25	20	40	37	75	71	198	142	100	91	531
D. Number of definite cases of Tuberculosis on the Dispensary Register at the end of the year ..	2614	2010	114	96	392	426	366	325	3006	2436	480	421	6343

group actually presents a cross-section of disease of the chest in general, not merely Tuberculosis. Non-pulmonary cases are comparatively few, and many of them are seen in the first instance elsewhere, a fact which does not apply to pulmonary cases.

There was a steady and quite marked increase in the work up to 1938. During 1939 and 1940 there was a slight decrease compared with 1938; the population had fallen by 5% and 14% respectively. 1941 showed a quite definite increase again, in spite of a further considerable fall in the population, 22% below 1938. The year 1941 may be taken as corresponding with 1938 as regards the amount of work. The position in 1942 may best be appreciated by assessing the increase over 1941 as 25 per cent.

The general practitioner is having the chest X-rayed more and more frequently, a tendency which, fortunately, was noticeable before the war, and has merely developed normally. All these factors taken together, have resulted in a great increase in new case attendances, even greater than it appears when the fall in population is taken into account. This increases the number of " observation " cases, requiring a second or sometimes a third examination. Medical Boards examining for military and other forms of National Service have, of course, been sending a considerable number of cases.

Dagenham Area. There appears a tendency of doctors on appearance of any symptoms suggesting Tuberculosis, to refer cases to the Dispensary, thus showing an increase in awareness on their part, and increased confidence in the Dispensary Service; and, therefore, cases are more usually diagnosed in an early stage of the disease. Thus also the Dispensaries are becoming more used by local doctors as consultative clinics as well as being supervisory centres.

The numbers attending for diagnosis are increasing markedly, particularly in extra-metropolitan clinics, and they are nearly all diagnosed after a single visit thus saving time away from work.

Many children are referred to the Dispensary for diagnosis and advice.

Leyton Area. (1) Owing to the fact that suspicious cases from Medical Boards are automatically sent to the Dispensary for an opinion the public idea of Dispensaries has undergone a change. Instead of the old idea that a tuberculosis dispensary was a place that catered purely for people who were " consumptive " the public are beginning to realise that dispensaries exist as a diagnostic centre with facilities for diagnosis that cannot as a rule be obtained from their own medical attendants. For this reason patients are far more willing to come to the dispensary.

(2) More middle aged and elderly people are now attending this Dispensary. Presumably this is due to the inevitable difficulties imposed by war time conditions.

Ilford and Barking Areas. There has been, in the past few years, an increase in attendances at the Dispensaries particularly at Ilford Dispensary.

Not only have many more new patients attended for examination, but old patients appear to be attending more regularly. Some of the increase in new attendances can be accounted for by cases referred by the National Service Medical Boards, but the greater part of the increase is due to the publicity which tuberculosis has had during the past year or two. It seems that many more people than formerly have requested an examination because they thought they might possibly be suffering from pulmonary tuberculosis, or were, at any rate, anxious to be re-assured on the matter; most of these have gone to their own doctors in the first place, but many have come direct. There is a small increase in the number of new cases of tuberculosis actually diagnosed at the Dispensaries, but the increase in the number of new cases examined is out of proportion to the increase in the number of new cases in which tuberculosis was actually found.

Romford area. The attendances at the dispensary are steadily increasing year by year, and also the number of cases on the register.

Propaganda, both national and local, has played a part in causing people to seek advice and a specialist's examination for chest symptoms which might otherwise have passed unnoticed. Many of the local doctors, having heard of the increased incidence of tubercle, particularly in the 18 to 25 age group, are referring an increased number of factory workers who exhibit any suspicious symptoms.

Grays area. (1) The number of attendances at the Dispensary has materially increased, being approximately 50% above pre-war level. This can be attributed to a number of factors :—

(*a*) The necessity for keeping closer supervision on persons already suffering from tuberculosis of all forms.

(*b*) The increased number of persons who are being referred to the Dispensary by Medical Practitioners.

(*c*) The increased desire on the part of the patients to present themselves after consultation with their own practitioner, for examination. This is particularly true of persons who have been suffering from some symptoms referable to the lungs.

(*d*) While child contacts are eagerly presented for examination the record with adult contacts is not so favourable.

(2) It is noteworthy that medical practitioners are referring cases rather for diagnosis than because Tuberculosis is suspected. In this area such a practice has been encouraged, because, within the diagnostic limits of dispensary routine, valuable assistance can be rendered to the practitioner and the patient in respect of non-tuberculous conditions while, in some cases, tuberculous lesions have been discovered earlier than they otherwise would be.

(3) From the clinical aspect there has been some increase in patients who are at or beyond middle age and who from their clinical features have probably suffered from chronic pulmonary tuberculosis for some years, in whom there has been a sudden extension of the disease. Such patients would probably have remained in a state of chronic ill-health for years, without the exact nature of their disability being investigated, and it appears probable that the extension of the disease can be directly attributable to war conditions.

Artificial Pneumothorax Clinics.

In addition to the two artificial pneumothorax refill clinics established at the Walthamstow and Ilford Dispensaries, clinics for this purpose to serve the Thurrock area and the Epping area were commenced at the Orsett Lodge Hospital and the St. Margaret's Hospital, Epping, respectively, during the year.

Artificial Pneumothorax clinics for out-patients are also held at the Essex County Council Hospitals at Black Notley and Broomfield and at the London Chest Hospital, and Southend Municipal Hospital, Rochford. The clinics at the two latter Hospitals are not, however, confined entirely to Essex cases but pending the establishment of more A.P. Clinics at County Council premises they are extremely valuable. It is to be hoped that as and when circumstances permit an improvement in the type of premises now used as tuberculosis dispensaries in various parts of the County and in particular in the extra-metropolitan area, with a consequent improvement in the facilities available at such dispensaries, *e.g.*, provision of X-rays, more A.P. Refill Clinics will be commenced, and thus enable patients needing refills to receive them with the minimum amount of travelling. Furthermore, the work of the dispensaries is made more interesting and the Tuberculosis Officer concerned is looked upon as being intimately connected with the patient's *treatment* and not merely with *diagnosis*.

The number of cases receiving this form of treatment continues to increase and owing to the need for using every available institutional bed to the best advantage, patients needing artificial pneumothorax refills have frequently been discharged home sooner than would be the case if there were no artificial pneumothorax refill clinics readily available.

The importance of an artificial pneumothorax clinic being properly conducted cannot be over-emphasised and the control of these cases needs much time and thought.

Institutional Treatment.

With the increasing facilities becoming available for early diagnosis, provision for prompt treatment should correspondingly be arranged. It is to be regretted, however, that the needs of the County either in this respect or in regard to satisfactory and sufficient accommodation for those patients in the more advanced stages of the disease have not yet been met. To combat tuberculosis effectively, the guiding principle should be the prevention of factors favourable to the development of the disease, the early diagnosis of all individuals suffering from it, the provision of immediate treatment for those likely to respond thereto, and the adequate and continued segregation of those sufferers from the disease in the later stages whilst they are in an infectious condition.

During 1942 there was an average number of 982 beds occupied by patients suffering from all types of the disease. The average number on the waiting list was 110.

Towards the end of the year there was a worsening of the position in respect to obtaining adequate and suitable nursing and domestic staffs for institutions dealing with tuberculous patients. This was most noticeable in those institutions in which mostly patients in the advanced stages of the disease were admitted. It is becoming a matter for serious consideration as to whether any one institution should be set aside for dealing entirely with advanced and/or chronic cases. Both patients and staff soon become conscious of the almost forlorn outlook and conditions generally become depressing. It is not to be wondered at, therefore, that there is a great difficulty in getting staff for such institutions. It is also difficult to get patients to agree to admission to such institutions which soon come to be regarded as "Homes for the dying." The solution would seem to be found in every institution taking a reasonable share in catering for this most difficult type of case.

County Council Sanatoria.

Harold Court. Whilst it was possible during 1942 to keep occupied all the available beds for tuberculosis patients, at the time of writing this report it has been found necessary to reduce the number of beds at the Harold Court Sanatorium from 74 to 27 on account of staffing difficulties. This is one of those institutions which had been mainly used for the reception of patients suffering from pulmonary tuberculosis in the advanced stages. Towards the end of the year, however, an effort was made to admit a percentage of patients in the earlier stages of the disease. An X-Ray screening set was provided to enable the control of patients receiving artificial pneumothorax treatment. The following figures show the high proportion of deaths during the year at this Sanatorium :—

No. of patients admitted during the year ..	149
No. of patients discharged during the year ..	88
Transferred to other Institutions ..	6
Died	71

The two main County Sanatoria at Broomfield and Black Notley were used to their fullest capacity during the whole year despite many staffing problems. Reports from the Medical Superintendents are given below :—

Essex County Council Hospital, Broomfield.

Medical Superintendent—Dr. W. L. Yell.

During 1942 the 300 beds have been kept continuously occupied by pulmonary and surgical cases with a lengthy waiting list. On the whole the proportion of patients with advanced disease to be found on the wards has decreased, patients likely to respond to treatment being selected in preference to those requiring only symptomatic treatment, segregation and nursing ; and although mass miniature radiography has not yet been instituted in Essex, its effect in detecting early cases in the Services is reflected in the kind of ex-service patient admitted. Women patients requiring major thoracic surgery have been admitted from Black Notley Hospital as formerly.

Work during the year may be briefly summarised as follows :—

Admissions	319	Out-patient refills, including aspirations, washouts etc.	730
Discharges	242		
Transfers to other sanatoria, etc.	33	In-patient refills, including aspirations, washouts, etc.	3,226
Deaths	36	Total X-ray photographs	2,877

Operations—(*a*) *Thoracic.*		(*b*) *General.*			
Thoracoplasty (stages)	45	Laparotomy	3	Nephrectomy	1
Monaldi drainage	6	Appedicectomy	1	Colostomy	5
Adhesion Section	43	Cystoscopy	10	Tonsillectomy	1
Phrenic crush	12	Orchidectomy	5	Sequestectomy	1
Bronchoscopy	13	Ischio rectal	4	Amputation of leg	1
Rib resection	4	Glands of neck	6	Lithotrity	1
		Sigmoidoscopy	1	Arthrodesis of hip	1

There has been a slight increase in the amount of major thoracic surgery carried out (with no deaths), but this has been insufficient to cope with demands, and some patients have been kept waiting for operation unduly long owing to shortage of the trained nursing staff required to attend to them in the immediate post-operative stage. Lack of trained staff rather than lack of nurses is the greatest shortcoming experienced, but the wartime shortages have been evident also amongst the medical, the domestic and the subordinate male staff.

There has been a steady increase in the number of out-patients and the Hospital has continued to function as the centre for consultation for tuberculosis occurring in the surrounding boroughs and rural districts of Chelmsford and Maldon.

The laboratory has carried out the public health bacteriology for the district as well as examining specimens from the hospital and acting as a reference laboratory for special purposes.

Bedside industries have continued under the visiting instructress, and the hospital magazine has appeared regularly in spite of war conditions.

Further developments in the direction of occupational therapy must await the advent of peace.

The 34 acres of land attached to the hospital have been cultivated again this year.

Essex County Council Hospital, Black Notley.

Medical Superintendent—Dr. M. C. Wilkinson.

Treatment of Patients suffering from Pulmonary Tuberculosis.

One hundred and sixty-eight beds have been available for the treatment of female patients suffering from Pulmonary Tuberculosis. Full facilities for treatment have been maintained. The most important factor in treatment is

bed rest under sanatorium conditions continued for a sufficient length of time No curtailment, therefore, of the length of stay in Sanatorium is possible even under war-time conditions. Accessory methods of treatment have been used as before, namely, artificial pneumothorax, the endoscopic division of adhesions within the chest, and phrenic avulsion. During 1942, 209 in-patients were treated by artificial pneumothorax, 2,754 refills were given, 58 operations for division of adhesions were carried out and 19 operations for phrenic avulsion

During the year facilities for out-patients were maintained. At the clinic for consultation for Pulmonary patients, the number of patients seen was 292 The number of out-patient refills was 1,030.

The work of the Maternity Unit continued satisfactorily. Twenty-seven mothers were confined during 1942. At the time of writing this report, more than 100 confinements have been successfully carried out in tuberculous women and the work is being reported in the Medical and Nursing Press in the hope that it will be taken up in other parts of the country also.

Dr. R. C. Cohen who has been in charge of the treatment of patients suffering from Pulmonary tuberculosis and of the work in the Maternity Unit also carried out the Dispensary work for the Braintree, Witham and Dunmow districts.

Non-Pulmonary Tuberculosis.

One hundred and forty-two beds have been available for the treatment of women and children suffering from Non-Pulmonary tuberculosis. The services of Mr. S. L. Higgs, F.R.C.S. have been available as Orthopaedic Consultant, Mr. Reid, F.R.C.S. M.S., for general and genito-urinary surgery, and Mr. Alan Brews, F.R.C.S., for gynecology conditions. The ward in the E.M.I. Hospital loaned for the purpose of treating tuberculous cases has been used for the treatment of children with tuberculous glands, and by this means it has been possible to increase the turn-over so that the waiting list for children has been kept reasonably small. The methods of treatment are based as previously, on prolonged sanatorium bed rest with suitable splintage. Surgical operations however, have been more frequently employed as accessories to treatment and by means of operations on diseased joints, it is hoped it will be possible to curtail the length of treatment and to send the patient home with a stronger joint and a less tendency to relapse. A follow up of cases treated at this hospital with particulars of treatment, was published in book form during 1942 under the title of " Non-Pulmonary Tuberculosis," and these results have been generally acknowledged to be very satisfactory. A total of 3 operations have been performed during the year.

At the out-patient clinics for non-pulmonary cases, the number of patients seen was 126.

The Splint Department has been working well and is now capable of turning out any kind of surgical appliance.

X-ray Department.

A considerable turn-over has been achieved in this department. Much of the work for the E.M.S. patients is concerned with medical boards and the standard of radiography required for this purpose has necessarily to be high. Much of this work has been done on the sanatorium side of the hospital where the apparatus supplied is appropriate. The E.M.S. Department where there is a portable apparatus has been particularly useful for the fracture work. The work has been carried out by Miss Slater under the direction of Dr. Franklin Wood and in spite of many extra demands, a very efficient service has been maintained in both sides of the hospital.

General.

Full services have been maintained in spite of shortage of staff. I am indebted to medical and nursing, administrative and outdoor staff for their efforts during this time when they are called upon for so many additional duties. The visits of Dr. W. Burton Wood F.R.C.P., Consulting Physican for Chest Diseases to the Essex County Council, who has been absent through illness, have been greatly missed.

olation Hospitals.

Accommodation for tuberculous patients continued to be available at the Isolation ospitals at Chingford (12 beds), Colchester (14 beds) and at Ilford (72 beds).

fter-Care.

The nine Voluntary Care Associations in the County have continued their valuable ork, and the " Care Fund " which is operated from the Central Office, and which is ailable for those parts of the County not covered by a local Care Association, has also en found extremely useful.

With the financial and other assistance given by the County Council, the majority these Associations do not appear to have had any difficulty in maintaining sufficient nds to meet the demands made for assistance. In fact, the greater number of these oluntary Associations show a reasonable bank balance. This would appear to be due to e present earning capacity of the population and the comparative lack of unemploy-ent.

Extra nourishment still constitutes the main item of expenditure, but help in rious other forms has been given.

There is no doubt that the cumulative effect of the work of the various Care Associa-ons must have enhanced to a considerable extent the more prominent aspects of the unty Tuberculosis Scheme, and thanks are due to the large number of voluntary orkers who continue to find time to devote to such work.

PART III.

MATERNITY AND CHILD WELFARE.

The County Council's Maternity and Child Welfare Schemes, full details of which have been given in previous reports, were continued during the year and in spite of the war can be said to have been fully maintained. The area for which the County Council is the Welfare Authority remains the same as in the previous year. The maternal mortality rate in that area for the year 1942 according to figures supplied by the Registrar-General is 2.3 as compared with the rate of 1.9 for the whole of the Administrative County and 2.01 for England and Wales.

The number of births, notified and unnotified, in the County Council's Child Welfare area are given below, together with notifications of Maternal Deaths.

No. of Births notified by—		No. of Births Unnotified.	No. of Notifications of Maternal Deaths.
Midwives.	Drs. and Parents.		
5522	2259	128	18

Maternity and Child Welfare Centres, Ante-Natal Clinics, Etc.

During the year the following new Clinics were established :— Child Welfare Centres at Bradwell, Debden and Gestingthorpe : Ante-Natal Clinic at Kelvedon and a Women's Welfare Clinic at Loughton.

At the end of the year 1942 there were 33 Ante-Natal Clinics, 115 Child Welfare Centres, 5 Toddlers Clinics, 12 Weighing Centres and 11 Women's Welfare Clinics in the County Welfare area.

Provision of Milk and Medicaments.

The Ministry of Food National Milk Scheme continued to operate during the year for expectant and nursing mothers and children under five years of age. The Ministry's Scheme for the provision of National Dried Milk for infants under the age of one year was continued. During the year the Scheme was extended so as to include the provision of cod liver oil to children over two years of age and expectant mothers. In addition, concentrated orange juice was made available for expectant mothers during the last six months of pregnancy.

Home Helps.

Under war-time conditions it has been impossible to maintain an adequate Home Helps Service under the Council's Scheme for undertaking the household duties for mothers at the time of confinement and during the lying-in period.

At the beginning of the war the County Council employed twelve Home Helps on the permanent staff and others were also utilised temporarily. During 1942 there were only two on the permanent staff, together with a number of temporary Home Helps

In November 1942 the Ministry of Health issued a circular drawing the attention of Authorities to the necessity of making every effort to develop this service.

In February 1943 the County Council agreed to an increase in the remuneration from 4s. 3d. per day to 5s. 0d. per day and at the time of writing there are six Home Helps on the permanent staff. The recruitment of woman power more and more into munitions and so forth has greatly reduced the numbers of suitable women available.

Puerperal Pyrexia Regulations, 1939.

Copies of notifications made by medical practitioners were received from Medical Officers as indicated below :—

	Administrative County.		Council Child Welfare Area.	
	1941.	1942.	1941.	1942.
Puerperal Pyrexia ..	192 ..	230 ..	37 ..	53

The County Council has an arrangement with the following hospitals for the reception of patients suffering from Puerperal Pyrexia :—

Colchester Isolation Hospital.
Rush Green Isolation Hospital, Romford
Waltham Abbey Isolation Hospital.
Billericay Isolation Hospital.
Queen Charlotte's Maternity Hospital.

Public Health (Ophthalmia Neonatorum) Regulations, 1926-1937.

During the year 48 cases of Ophthalmia Neonatorum were notified in the Administrative County. Eleven of the notifications referred to patients living in the County Child Welfare area, and the following particulars relating to these patients have been obtained.

Treated.		Vision Unimpaired.		Vision Impaired.		Total Blindness.		
At Home.	In Hospital.	R.	L.	R.	L.	R.	L.	Deaths.
6 ..	5	10 ..	10	— ..	—	— ..	—	1*

*Cause of death—spina bifida.

Hospital Treatment for Maternity Patients.

During the year 1,571 patients were admitted to hospitals and maternity homes under the Council's arrangements. This does not include evacuated maternity patients admitted to the Emergency Maternity Home at Writtle Park which numbered 244.

Owing to increased demands on maternity beds, largely as a result of war conditions, the existing accommodation has been found to be insufficient. This position is particularly marked in the South Eastern area and the Saffron Walden area. It is also causing considerable concern to Autonomous Welfare Authorities in other parts of the County. The difficulties have been accentuated by lack of midwifery staff. It is hoped to meet the problem by providing additional accommodation wherever possible.

Treatment of Orthopaedic Patients.

As far as children of school age are concerned, these are dealt with in the Annual Report of the School Medical Officer.

In connection with children under the age of five years, the Orthopædic Scheme has continued to work satisfactorily. 62 patients received hospital in-patient treatment. 4,376 attendances were made at After-Treatment Centres and 1,362 examinations were carried out by the Orthopædic Surgeons.

Obstetric Specialist.

Mr. Alan Brews, the part-time Obstetric Specialist, has been of great assistance to the Assistant County Medical Officers and medical practitioners in the areas for which the County Council is the Local Supervisiong Authority and Welfare Authority. During the year 1942, the total number of patients examined was as follows :—

Clinic.	No. of Patients examined.
Danbury Park Maternity Home	119
St. John's Hospital, Chelmsford	103
Chingford Combined Treatment Centre	68
Total	290

Mr. Brews also examined 170 other patients, making a total of 460 patients examined.

In addition he carried out the following 75 operations.

Type of Operation.	No.
Major operations, (including 12 Hysterectomies 9 Cæsarean Sections)	37
Minor operations, (including 15 External Versions)	38
Total	75

Nursing Homes.

The number of Registered Homes at the end of the year was as follows :—

(*a*) Maternity Homes only	13
(*b*) Maternity and Nursing Homes	19
(*c*) Nursing Homes (including Convalescent Homes)	18

Routine inspections have been carried out at regular intervals during the year and all Homes were found to be satisfactory.

Child Life Protection.

At the end of the year there were 486 registered foster children in the care of 272 foster mothers.

During the year proceedings were instituted against a foster mother under Sections 206, 208 and 209 of Part VII of the Public Health Act, 1936, and the foster mother was convicted and fined on each summons.

Adoption of Children (Regulation) Act, 1939.

The Adoption of Children (Regulation) Act, 1939, was brought into operation on 1st June, 1943. The object of the Act is to regulate the making of arrangements by Adoption Societies and other persons in connection with the adoption of children, to provide for the supervision of adopted children by Welfare Authorities in certain cases and to restrict the making and receipt of payments in connection with adoption of children and for other purposes in connection with the above matters. The County Council's Child Protection Visitors will carry out similar duties under the Adoption of Children (Regulation) Act, 1939, to those they now perform under Part VII of the Public Health Act, 1936, and the necessary arrangements have been made accordingly.

Midwifery Service.

(*a*) GENERAL. Particulars are given below of the number of midwives employed under the County Scheme at the end of the year 1942 together with the number of cases attended during the year.

	Midwifery.	Maternity.
17 County Council Midwives	.. 848	.. 182
23 Welfare Council Midwives	.. 1,052	.. 364

(*b*) PRACTISING MIDWIVES. At the end of the year there was a total of 314 practising midwives in the area for which the County Council is the Local Supervising Authority. The total number of live births and still births which occurred in 1942 in the Administrative County, excluding Barking, Colchester, Dagenham, Ilford, Leyton and Walthamstow Boroughs, was 12,585 and of those 7,714 (61.3 per cent) were attended by midwives in the capacity of Midwife and 2,777 (22.07 per cent) as Maternity Nurse.

2,156 records of Medical Aid having been called in by State Certified Midwives were received during the year.

Essex County Nursing Association.

The arrangements referred to in last year's report whereby the County Council pay the deficit on the Association's accounts at the end of each year were continued.

The Association continues to render invaluable assistance in maintaining an adequate Midwifery and District Nursing Service, particularly in the rural parts of the County.

Essex is justly proud of its County Nursing Association and there is no doubt that without the provision of District Nurse-Midwives employed by the Affiliated Associations the County Council would be faced with the difficult task of providing whole-time midwives to replace them at much greater cost.

Hostel for Mothers and Babies.

On 15th May, 1943, this Hostel, which is situated at Buckhurst Hill, was opened for the reception of Mothers and Babies after confinement.

The object of the hostel is to provide necessary accommodation for the young mother, married or unmarried, who after confinement has difficulty in coping with

her immediate future. In many cases the mother has to separate herself from her baby whereas the hostel enables her to look after the baby for as long as possible.

The Council undertakes to keep the mother for at least three months after the birth of her child and in that period the mother would carry out certain duties within the limits of her strength to help with the running of the hostel. If there is suitable work in the vicinity of the hostel the mother can go out to work and return at suitable intervals to feed her baby. The longer the mother can be kept with her baby and the longer she can feed it naturally, the better for both. Incidentally, in the case of the single woman, rehabilitation will be promoted by these means.

The house accommodates sixteen mothers and their babies in a township accessible to factory and other types of work. It stands in its own grounds comprising approximately 1¼ acres and affords provision for a nursery for infants, isolation rooms, sitting room for mothers, office sitting room, adequate kitchen and bathroom accommodation and seven bedrooms. It is staffed by a Superintendent who is a State Certified Midwife, assisted by a cook/housekeeper.

Campions Sick Bay, Harlow.

In view of the small number of children admitted to this Sick Bay, with the approval of the Ministry of Health, arrangements were made for this to be closed on 31st March, 1943, and the few children in the Sick Bay were transferred to the Public Assistance Institution at Epping, and to the Westfield Sick Bay at Bishop's Stortford.

Improvised Maternity Homes and Residential Nurseries, etc.

(*a*) Improvised Maternity Homes.

(i) *Writtle Park* (30 beds).

The continuation of this Home has been fully justified as during the year 398 patients (244 evacuee patients, 154 County patients) were admitted as compared with 325 patients during the year 1941. The arrangements have been continued whereby County Council patients, in addition to evacuated expectant mothers, are admitted to this Home.

(ii) *Danbury Park* (20 beds).

The arrangements made between the County Council and Mrs. Wigan were continued, 284 patients being admitted from the County Council Welfare Area, and 118 from Autonomous Welfare Areas.

One cannot speak too highly of the services rendered by this Maternity Home in meeting a very real need for the normal type of maternity patient who, for one reason or another, cannot be confined in her own home. On the 25th January, 1943, the 1,000th birth occurred and a very pleasant celebration took place at Danbury Park during which the Right Rev. The Lord Bishop of Chelmsford christened the baby and speeches were made by the High Sheriff, the Bishop and The Lady Rayleigh, among others.

(*b*) Residential Nurseries.

(i) *St. Paul's, Walden Place, Saffron Walden.* (12 children).

St. Luke's, Newton Hall, Dunmow (45 children).

Farmadine, Saffron Walden (12 children).

Carina, Walden Grove, Saffron Walden. (12 children).

The Residential Nursery at 5a High Street, Saffron Walden, referred to in the report for the year 1941, was closed on the 12th October, 1942 at the request of the owner of the premises, and arrangments were made for the children to be transferred elsewhere.

(*c*) Nursery Units.

The undermentioned small Nursery Units for unaccompanied evacuated children in private dwelling houses were satisfactorily continued during the year :—

	No. of children accommodated.
Miss A. Goodwille, 1, Oakroyd Avenue, Dunmow	4
Mrs. Capper, Cottesmore, Roydon	4

In June, 1943, however, the Nursery established at 1, Oakroyd Avenue, Dunmow, s taken over by the London County Council and the responsibility of the Essex nty Council accordingly ceased.

(*d*) Woodhall, Arkesden.

At the request of the London County Council arrangements have been made for general medical supervision of this Nursery Party.

(*e*) Wartime Day Nurseries.

Up to the present the following Wartime Day Nurseries have been established operate satisfactorily although in one or two instances the attendances have been ner low in comparison with the accommodation provided.

	Accommodation.	Opened.
Loughton, 35, Algers Road .. (Part-time) (This Nursery was closed on 1st August, 1943)	10 children between 3 and 5 years of age	March, 1942.
Langdon Hills, Women's Institute Hut, High Road (Part-time)	25 children aged 2 to 5 years	17th June, 1942.
Hornchurch, 75, North Street (Whole-time)	30 children (10 under 2 years of age—20 between 2 and 5 years of age)	1st July, 1942.
Witham, " Brookcote," Chipping Hill (Whole-time)	40 children (8 under 2 years of age. 32 between 2 and 5 years of age)	14th September, 1942
Rainham, Rainham Hall (Whole-time)	45 children (12 under 2 years of age, 33 between 2 and 5 years of age)	6th January, 1943

	Accommodation.	Opened.
Waltham Abbey, The Cedars, Sewardstone Road (Whole-time)	40 children (10 under 2 years of age, 30 between 2 and 5 years of age)	16th March, 1943
Maldon, 44, Mill Road (Whole-time)	30 children (6 under 2 years of age, 24 between 2 and 5 years of age)	10th May, 1943
Harlow, The Chantry (Part-time)	12 children up to 5 years of age	16th March, 1943.
Friends' Meeting House, Saffron Walden (Part-time)	40 children between 2 and 5 years of age	1st December, 1941.

In addition to the above, it is anticipated that further whole-time War-Time Day Nurseries, as follows, will be established during the year 1943—

Chingford—
136/138, Chingford Mount Road

Chingford—
Erection of pre-fabricated hut in Hatch Lane

Upminster—
23, Hall Lane

Elm Park—
8 & 9, Elm Park Parade

Braintree—
Erection of pre-fabricated hut on site at East Street

COMBINED MEDICAL SERVICE.

(*a*) Harwich Borough.

Dr. J. Battersby, Medical Officer of Health for the Borough of Harwich, Air Raid Precautions Medical Officer and V.D. Medical Officer, resigned his appointment and terminated duty on 27th November, 1942, and on 1st April, 1943, Dr. J. Hetherington took up duty in his place.

(*b*) Thurrock Urban District.

Early in 1943 Dr. F. G. Richards and Dr. C. J. Clohessy resigned their appointments as Assistant County Medical Officers and Assistant Medical Officers of Health for the Urban District of Thurrock and were replaced by Dr. Marjorie Swain and Dr. A. D. Heller respectively.

(*c*) Braintree, Dunmow and Witham Areas.

In December, 1942, Dr. W. J. Moffat was called up for service with His Majesty's Forces and arrangements made with the local medical practitioners for the carrying on of his duties as Medical Officer of Health for the Braintree Urban and Rural, Witham Urban and Dunmow Rural Districts. Arrangements for his Assistant County Medical Officer's duties were made with existing Assistant County Medical Officers.

PART IV.

PUBLIC ASSISTANCE.

Hospital Services.

The part played by the Public Assistance Committee's Institutions in the Emergency Hospital Scheme is dealt with in the remarks under the heading of " Provision of Hospital Services " (page 16). There are no particular matters of importance in connection with these Institutions which require specific mention.

Domiciliary Medical Services.

The general shortage of practitioners caused by the growing demands of the services continued to create minor difficulties in connection with the domiciliary medical services of the Committee, but on the whole the arrangements worked very smoothly.

To ease the difficulties thus created, to some extent, the quarterly returns of work done submitted by District Medical Officers and Approved Medical Practitioners have been dispensed with during the present emergency.

Preliminary enquiries were made with a view to the introduction of the Free Choice of Doctor Scheme in the Blackmore Medical Relief District.

TABLE VII.

CAUSES OF DEATH—YEAR 1942.

(Figures supplied by the Registrar-General).

SANITARY DISTRICT.	Typhoid & Paratyphoid Fevers.	Cerebro-Spinal Fever.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Tuberculosis of Respiratory System.	Other forms of Tuberculosis	Syphilitic Diseases.	Influenza.	Measles.	Acute Polio-myelitis. Polio-encephalitis.	Acute Infectious Encephalitis.	Cancer of Buccal Cavity and Oesophagus (M). Uterus (F).	Cancer of Stomach and Duodenum.	Cancer of Breast.	Cancer of all other sites.	Diabetes.	Intra-Cranial Vascular Lesions.	Heart Disease.	Other Diseases of Circulatory System.	Bronchitis.	Pneumonia.	Other Respiratory Diseases.	Ulcer of Stomach or Duodenum.	Diarrhœa (under 2 years).	Appendicitis.	Other Digestive Diseases.	Nephritis.	Puerperal and Post-Abortive Sepsis.	Other Maternal Causes.	Premature Birth.	Congenital Malformations Birth Injury. Infantile Disease.	Suicide.	Road Traffic Accidents.	Other Violent Causes.	All Other Causes.	TOTAL.
URBAN	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)	(34)	(35)	(36)	
BARKING B.	...	3	1	1	...	37	7	9	3	...	...	2	10	22	10	62	3	37	115	28	25	35	4	9	1	4	15	14	...	2	12	20	3	8	17	47	366
BENFLEET ...	...	1	...	...	1	8	3	3	2	...	...	...	2	7	3	18	2	19	78	5	6	10	6	5	...	3	8	10	...	...	2	4	3	1	5	19	231
BRAINTREE & BOCKING	...	...	...	1	1	16	3	4	5	...	...	...	7	9	9	59	3	39	105	24	35	25	9	3	1	...	13	7	...	4	5	10	3	5	15	51	462
BRENTWOOD ...	...	2	...	1	1	9	3	2	5	...	...	...	6	4	3	14	1	42	41	2	9	16	7	6	1	...	13	7	...	...	5	10	3	5	18	21	291
BRIGHTLINGSEA ...	...	...	...	...	...	3	2	1	1	...	...	...	5	6	5	35	1	21	45	19	19	16	7	3	1	2	8	8	...	1	1	6	1	2	2	21	279
BURNHAM-ON-CROUCH	...	...	...	...	...	4	1	1	1	...	...	...	3	2	2	19	...	7	25	...	1	1	...	...	...	2	5	5	...	1	2	10	2	4	8	34	279
CANVEY ISLAND	...	2	...	...	...	17	1	2	1	...	...	...	4	3	...	11	2	6	21	5	3	2	1	1	...	...	1	1	...	1	...	...	...	...	...	3	68
CHELMSFORD B.	...	1	...	...	...	9	2	1	2	...	...	1	4	6	8	35	1	34	73	6	13	18	10	4	1	1	1	1	...	1	1	3	...	1	...	11	62
CHIGWELL ...	...	...	...	...	...	15	3	...	2	1	...	1	3	10	9	31	3	25	68	14	6	16	4	4	1	1	5	9	...	2	3	6	6	5	24	56	357
CHINGFORD B.	...	1	...	...	...	4	1	...	4	...	...	...	7	1	5	25	...	21	52	7	2	6	3	1	1	...	1	1	...	2	5	7	3	3	4	26	240
CLACTON-ON-SEA ...	...	...	...	...	...	17	4	2	13	1	...	...	8	8	7	59	3	50	168	11	29	29	2	3	1	1	6	11	...	...	4	10	...	1	3	26	282
COLCHESTER B.	1	1	...	1	1	66	9	11	1	1	1	1	10	19	6	71	2	31	114	23	40	41	5	7	3	3	6	11	...	2	9	7	1	3	7	24	183
DAGENHAM B.	...	4	...	7	1	2	1	...	...	...	...	...	1	1	2	6	...	11	18	2	2	1	...	...	...	4	11	23	...	2	7	3	5	24	82	567
EPPING ...	...	...	...	...	...	4	...	...	2	...	...	...	3	1	2	4	1	6	19	2	2	6	1	2	...	...	3	2	...	1	2	19	7	9	10	58	638
FRINTON & WALTON ...	...	1	...	...	...	...	...	...	...	...	...	1	...	1	1	3	...	2	12	1	2	7	1	2	...	...	1	3	...	1	2	29	2	1	2	10	71
HALSTEAD ...	...	1	1	1	1	4	...	1	...	...	...	...	1	2	1	11	...	9	12	1	2	2	1	2	...	...	1	2	...	...	1	...	...	...	3	10	69
HARWICH B.	...	3	...	2	...	46	10	4	3	1	...	2	11	22	2	22	2	18	20	1	2	7	2	...	...	...	2	1	...	...	...	...	...	...	1	22	172
HORNCHURCH ...	...	...	...	1	...	76	17	14	12	1	...	1	31	21	14	71	11	54	143	27	36	31	14	7	3	...	3	3	...	1	3	1	...	...	4	16	111
ILFORD B. ...	...	...	...	...	...	67	8	11	5	1	...	...	19	42	14	121	10	112	294	41	81	58	16	16	7	5	23	9	1	2	19	19	9	7	24	121	1,123
LEYTON B. ...	...	3	...	2	1	1	2	...	...	...	...	...	2	3	3	15	1	10	45	2	3	4	1	...	...	1	2	2	...	...	1	...	...	...	1	14	123
RAYLEIGH ...	...	1	...	...	...	3	1	...	...	...	...	...	1	17	21	10	2	16	37	6	4	3	...	1	...	...	2	4	...	...	2	3	...	...	11	6	120
ROMFORD B. ...	...	4	...	1	1	28	6	8	5	2	...	...	1	5	1	11	1	10	29	2	9	4	1	7	2	1	14	17	...	2	7	9	3	7	7	14	123
SAFFRON WALDEN B. ...	...	...	...	...	...	4	...	...	...	...	...	...	16	15	9	29	9	54	114	57	24	47	15	10	1	3	15	15	...	...	5	...	...	...	7	48	563
THURROCK ...	1	2	...	4	1	43	10	14	5	...	...	...	...	3	1	10	...	5	29	8	6	9	4	1	...	...	3	2	...	...	3	2	1	3	21	115
WALTHAM HOLY CROSS ...	...	...	...	...	...	...	...	...	...	...	...	...	8	21	18	80	6	59	136	23	29	23	7	4	3	1	15	14	...	1	3	8	5	4	15	48	572
WALTHAMSTOW B. ...	...	1	...	1	...	29	5	2	3	...	...	...	1	1	...	2	1	5	10	...	2	...	...	...	...	1	1	1	...	...	1	...	...	...	2	33
WANSTEAD & WOODFORD B.	...	1	...	...	...	2	...	...	...	...	...	...	1	1	...	2	...	2	10	...	4	2	...	...	...	1	3	...	...	...	1	1	1	1	4	8	67
WEST MERSEA ...	...	...	...	...	...	3	...	...	...	...	...	...	1	1	...	3	2	1	4	1	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	28
WITHAM ...	...	1	...	...	...	29	5	2	3	...	...	...	8	21	18	80	6	59	136	23	29	23	7	4	3	1	15	14	...	1	24	18	8	6	16	123	1,140
WIVENHOE ...	...	...	...	...	...	2	...	...	...	...	...	...	1	1	...	2	...	8	10	...	2	...	...	...	...	...	1	2	...	...	2	16	2	2	1	21	46	660
	...	...	...	...	...	3	...	...	...	...	...	...	1	1	...	2	1	13	18	1	4	2	...	...	...	...	1	1	...	...	1	4	2	1	1	7	94
													...	...	2	2	...	4	2	...	2	...	1	...	...	...	1	1	...	...	...	1	1	...	...	...	2	33
													...	1	1	3	2	4	10	...	1	1	...	...	...	1	3	...	...	...	...	1	1	1	4	8	67
																																			1	28
	2	31	2	23	12	558	104	98	77	8	1	12	202	328	204	1,223	94	1,039	2,583	443	605	595	158	146	38	62	272	238	6	29	178	248	97	109	278	1,176	11,279
RURAL.																																					
BRAINTREE ...	1	1	...	...	...	4	1	...	1	...	...	1	3	8	6	21	3	34	59	2	17	6	...	2	1	1	6	4	...	...	3	2	1	2	3	24	217
CHELMSFORD ...	...	1	...	1	...	8	2	2	5	...	...	2	6	14	13	51	3	34	72	17	10	18	5	6	...	2	12	6	...	...	8	7	1	12	5	48	372
DUNMOW ...	...	1	...	...	...	3	2	...	...	...	...	...	5	4	3	23	3	21	53	10	14	10	1	1	...	1	6	8	...	...	5	4	1	4	3	43	231
EPPING ...	...	...	1	...	1	5	5	1	...	...	...	...	3	7	3	30	4	19	56	5	4	10	1	1	...	...	7	7	...	...	1	1	4	5	27	215
HALSTEAD ...	...	...	...	...	...	5	1	1	...	1	...	...	8	8	3	21	1	42	44	5	15	7	1	3	...	...	4	9	1	2	2	...	4	5	17	49	253
LEXDEN & WINSTREE ...	...	...	...	...	...	15	3	3	6	...	1	...	7	8	3	14	1	42	44	5	15	7	1	3	...	...	4	9	1	2	2	...	1	4	5	27	215
MALDON ...	...	...	...	...	...	5	...	...	...	...	...	...	3	3	3	21	2	26	103	5	12	19	2	1	...	1	10	10	1	2	2	3	5	7	19	253
ONGAR ...	...	...	...	1	...	1	2	...	...	...	1	1	3	4	2	21	...	19	77	5	5	3	2	...	...	1	3	5	...	...	2	...	1	4	9	30	299
ROCHFORD ...	1	2	...	1	1	2	...	2	1	...	...	1	1	2	4	23	1	13	42	8	7	9	2	...	...	2	5	2	...	...	...	2	1	4	27	196
SAFFRON WALDEN ...	...	...	...	...	...	7	5	1	2	...	...	...	5	4	1	24	1	23	68	3	7	11	3	3	...	1	3	2	1	...	4	6	1	3	2	18	161
TENDRING ...	...	3	...	2	...	12	1	...	2	...	...	1	5	16	9	18	1	20	47	7	9	13	2	1	...	1	5	4	1	...	4	7	1	4	8	22	220
													2	9	5	16	3	22	71	4	12	10	...	...	...	1	7	13	1	...	3	11	...	4	4	6	44	239
																															6	6	3	5	9	39	261
RURAL ...	2	8	1	5	2	66	22	10	23	..	1	6	43	78	52	262	22	273	692	66	115	116	25	21	3	10	61	76	5	4	38	53	13	48	61	381	2,664
BORO' & URBAN ...	2	31	2	23	12	558	104	98	77	8	1	12	202	328	204	1,223	94	1,039	2,583	443	605	595	158	146	38	62	272	238	6	29	178	248	97	109	278	1,176	11,279
TOTAL FOR ADMINISTRATIVE COUNTY ...	4	39	3	28	14	624	126	108	100	8	2	18	245	406	256	1,485	116	1,312	3,275	509	720	711	183	167	41	72	333	314	11	33	216	301	110	157	339	1,357	13,943

TABLE VIII.

NOTIFICATIONS OF INFECTIOUS DISEASE

53 Weeks ended 3rd January, 1943.

(Figures obtained from the Weekly Notification Returns).

	Scarlet Fever.	Diphtheria.	Measles.	Whooping Cough.	Para-typhoid Fever.	Enteric Fever.	Puerperal Pyrexia.	Erysipelas.	Ophthalmia Neonatorum.	Pneumonia.	Encephalitis Lethargica.	Acute Poliomyelitis.	Various.	Cerebro-Spinal Fever.	Dysentery.	Total.
	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	
URBAN.																
Barking B.	337	57	1260	290	—	—	22	23	6	67	1	—	5	18	—	2081
Benfleet	82	5	12	46	—	—	2	7	—	14	—	—	7	1	—	176
Billericay	116	46	161	93	—	—	3	8	—	47	—	—	45	5	1	525
Braintree and Bocking	10	24	5	23	—	—	1	—	1	4	—	—	—	—	—	68
Brentwood	65	20	154	161	—	—	3	6	—	16	—	—	1	7	40	473
Brightlingsea	2	1	30	2	—	—	—	—	—	2	—	—	—	—	1	38
Burnham-on-Crouch	1	—	—	1	—	—	—	—	—	16	—	—	—	1	—	22
Canvey Island	10	—	177	—	—	—	—	3	—	1	—	—	—	—	—	188
Chelmsford B.	70	—	151	40	—	—	4	11	—	14	—	—	5	4	—	299
Chigwell	46	2	141	56	—	—	1	3	—	6	—	—	—	2	—	257
Chingford B.	177	4	506	71	—	—	3	7	—	64	1	—	—	3	1	837
Clacton	—	—	40	2	—	—	1	—	—	2	—	—	—	—	—	45
Colchester B.	68	25	25	63	—	—	12	8	5	118	—	1	2	6	77	410
Dagenham B.	379	30	672	177	—	—	23	29	7	84	—	1	18	10	—	1430
Epping	4	5	8	15	1	—	4	—	—	7	—	1	41	2	4	92
Frinton and Walton	—	—	—	—	—	—	—	—	—	7	—	—	—	—	—	7
Halstead	1	—	—	—	—	—	—	—	1	—	—	—	1	1	1	5
Harwich B.	5	1	156	50	—	—	1	2	—	7	—	—	—	—	—	222
Hornchurch	256	26	935	153	1	1	11	26	3	98	1	—	—	11	18	1540
Ilford B.	423	40	1613	410	—	3	35	61	6	195	—	—	19	18	2	2825
Leyton B.	317	36	1111	120	—	—	25	38	6	83	—	5	38	4	4	1787
Maldon B.	15	—	2	1	—	—	—	10	—	8	—	—	53	2	—	91
Rayleigh	18	—	4	12	—	—	—	7	—	10	—	—	1	1	—	53
Romford B.	207	20	258	125	—	—	11	13	2	24	—	1	10	15	6	692
Saffron Walden B.	5	1	—	—	—	1	1	—	—	—	—	—	—	—	—	8
Thurrock	193	38	362	45	—	1	2	12	2	54	—	1	6	4	—	720
Waltham Holy Cross	57	10	9	16	—	1	1	2	—	1	—	—	1	2	2	102
Walthamstow B.	419	6	769	48	3	1	28	35	1	90	—	2	—	15	2	1419
Wanstead and Woodford B.	77	4	523	178	1	—	13	11	2	31	1	1	—	7	8	857
West Mersea	2	—	—	1	—	—	1	1	—	3	—	—	—	1	—	9
Witham	7	—	4	6	—	—	2	—	1	—	—	—	—	—	11	31
Wivenhoe	1	2	3	15	—	—	—	1	—	1	—	—	—	—	—	23
Total	3370	403	9091	2220	6	8	210	324	43	1074	4	13	253	140	178	17337
RURAL.																
Braintree	26	5	4	9	—	—	2	1	1	8	—	—	—	5	32	93
Chelmsford	24	3	132	21	—	—	2	7	—	9	—	—	—	4	23	225
Dunmow	13	2	18	59	—	—	4	—	—	4	—	1	—	—	—	101
Epping	33	3	9	45	—	1	1	1	—	24	—	—	1	3	—	121
Halstead	10	1	30	31	—	—	2	1	—	8	—	—	1	—	—	84
Lexden and Winstree	21	26	57	30	1	—	1	5	—	12	—	—	1	1	—	155
Maldon	5	3	3	19	—	—	—	4	—	18	—	—	—	—	—	52
Ongar	39	4	11	29	—	—	1	5	—	12	—	—	—	2	—	103
Rochford	20	4	35	35	—	—	4	14	2	18	—	1	—	2	—	135
Saffron Walden	18	1	4	46	—	—	3	3	—	3	—	—	—	3	—	81
Tendring	15	4	45	19	—	—	—	3	2	3	—	—	—	3	—	94
Total	224	56	348	343	1	1	20	44	5	119	—	2	3	23	55	1244
Total—Boroughs and Urban Districts	3370	403	9091	2220	6	8	210	324	43	1074	4	13	253	140	178	17337
Total—Rural Districts	224	56	348	343	1	1	20	44	5	119	—	2	3	23	55	1244
Total for Administrative County	3594	459	9439	2563	7	9	230	368	48	1193	4	15	256	163	233	18581

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