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MU4362

City and County of the City of Exeter.



ANNUAL REPORT

(abridged interim report)

OF THE MEDICAL OFFICER
OF HEALTH
FOR 1943

EXETER:

BESLEY & COPP, LTD., COOMBE STREET,



I have the honour to present to the Right Worshipful the Mayor, Aldermen and Councillors of the City of Exeter, an abridged Annual Report for the year 1943. This report has been prepared in accordance with instructions contained in Ministry of Health circular 10/44 of 15th February, 1944. The circular imposes restrictions similar to those affecting previous reports during the war years.

The City has again experienced a healthy year in spite of war conditions. With the exception of the moderate outbreak of influenza in November and December, the incidence of infectious disease has been even lower than in 1942. The birth rate is up, being 15.3, compared with 14.4 for the previous year, and the death rate is down, being 13.4, against 15.8 for the previous year.

The maternal mortality rate remains practically unchanged. None of the maternal deaths were attributed to sepsis.

The infantile mortality rate is a little lower, at 48.5, and is below that of the 126 great towns, which include Exeter.

The illegitimate infantile mortality rate practically always exceeds the legitimate, but on this occasion it happens not to do so by operation of the well-known fallacy related to small numbers.

The most disquieting feature is a rather sharp rise in the tuberculosis mortality rate, which reached 80 per 100,000, against 66 per 100,000 the previous year, there being an increase both in the pulmonary and non-pulmonary rates. Ten years ago the rate was 81, and in 1939, the last year of peace it was 73. Undoubtedly, the decline in mortality from this disease has ceased to operate and, judging by the experience of the last war, a further rise may be expected. The problem is a very complex one. The mere figures of a waiting list do not give an accurate picture of the institutional position, nor is it easy to assess the effect of the numerous lung cares which for one reason or another are not under institutional care. While infected milk plays a part in the production of non-pulmonary tuberculosis, the infectious adult lung case is the main factor in the production of disease. The consumptive can be taught to be careful and safe, but there are undoubtedly many who do not pay attention to advice and there are some who are infectious without knowing they are sufferers from tuberculosis.

I desire to record my appreciation of the work of the staff during another difficult and busy year.

I have the honour to be, Ladies and Gentlemen,
Your obedient Servant,
G. F. B. PAGE.

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CITY AND COUNTY OF THE CITY OF EXETER.

Public Health Committee.

MAYOR-

R. GLAVE SAUNDERS, ESQUIRE.

CHAIRMAN-

COUNCILLOR W. W. BEER.

DEPUTY CHAIRMAN-

ALDERMAN W. HEALE.

Alderman J. S. S. STEELE-PERKINS, J.P.

Alderman G. G. DAW.

Councillor W. T. BAKER.

Councillor W. H. C. BISHOP.

Councillor G. C. HEYWOOD.

Councillor B. S. MILLER. CouncillorMrs.E.E.POLLARD

Councillor Mrs. E. W. REED.

Councillor C. REW.

Councillor J. D. SEWARD.

Councillor R. G. SAUNDERS. Councillor Mrs. E. E. TINKHAM

Town Clerk-C. J. NEWMAN, Esq., O.B.E.

Maternity and Child Welfare Committee.

CHAIRMAN-

Councillor Mrs. E. E. TINKHAM.

DEPUTY CHAIRMAN-

COUNCILLOR B. L. THOMAS.

Alderman J. S. S. STEELE-PERKINS, J.P.

Alderman F. H. TARR, J.P.

Councillor G. G. DAW.

Councillor J. W. ACKROYD.

Councillor L. A. GROSE.

Councillor W. W. BEER.

Councillor Mrs. E. E. POLLARD.

Non-Members of the Council:

Mrs. EAGGER.

Mrs. DEPREE.

Mrs. MILLER.

Mrs. PICKARD.

Mrs. SMITH, J.P.

STAFF.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

(a) Medical.

Medical Officer of Health, School Medical Officer, Chief Tuberculosis Officer, Medical Officer to the Mental Deficiency Committee, and Medical Superintendent of the Isolation Hospital and Honeylands Children's Sanatorium.

GEORGE F. B. PAGE, M.D., D.P.H. (Edin.).

Temporary Deputy Medical Officer of Health and Clinical Tuberculosis Officer.

BENJAMIN T. JONES, L.M.S.S.A., D.P.H. (Edin.) (from 12/8/43).

Senior Assistant Medical Officer of Health and Assistant School Medical Officer.

JESSIE SMITH, M.B., Ch.B., D.P.H. (Leeds).

Assistant Medical Officer of Health and Assistant School Medical Officer.

IRIS V. T. WARD, M.D. (Lond.), M.R.C.S., L.R.C.P.

Venereal Disease Medical Officer (part-time).

T. M. PREECE, M.A., M.B., B.Chir. (Camb.), M.R.C.S., L.R.C.P.

Medical Officer Ante-Natal Clinic (part-time).

BERTHA HINDE, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.

*G. V. SMALLWOOD, L.D.S. (Eng.).

*H. V. Webster, L.D.S. (Eng.) Temporary.

*Duties mainly in connection with the Education Committee.

District Medical Officers under the Public Assistance Committee. (part-time).

No. 1 District. J. N. Watson, M.B., Ch.B. (Glas.).

No. 3 District. J. B. Tracey, M.B. (Camb.), B.Chir.

Nos. 2 and 4 Districts. J. C. HEAL, M.B., Ch.B. (Liverp.), M.R.C.S., L.R.C.P.

Public Vaccinator (part-time).

S. J. P. GRAY, M.A., M.B., B.Chir. (Camb.), F.R.C.S. (Ed.).

(b) Others.

Chief Sanitary Inspector and Officer under the Food and Drugs Adulteration Act, etc.

ARTHUR E. BONHAM, M.B.E.

Deputy Sanitary Inspector.

A. E. TROUNSON.

Assistant Sanitary Inspectors.

T. COATES.

G. E. BORLACE (left 14/8/43).

A. C. LEWIS.

J. H. RICHARDS (appointed 16/8/43).

Public Analyst.

T. TICKLE, B.Sc., F.I.C.

Vaccination Officer.

E. S. Howells.

Superintendent Health Visitor

MISS C. A. KNUCKEY.

Health Visitors.

MISS B. M. KNUCKEY.

Miss M. M. Foy.

MISS D. HICKSON.

MISS A. H. EDDS.

MISS M. E HARRIS (left 30/9/43).

MISS T. L. GRAY.

MRS. F. M. HOCKING. Temporary.

Tuberculosis Dispensary Nurse.

MISS E. K. SHEPPARD,

Matron of Isolation Hospital.

MISS G. HENSON (appointed 1/4/43).

MISS R. E. A. HUTTY, A.R.R.C. (left 31/3/43).

Matron of Honeylands Tuberculosis Children's Sanatorium.

MISS F. JONES.

Clerks.

E. S. Howells (Chief Clerk).

C. A. MERRICK (Senior Assistant Clerk).

H. TUCKER.

B. Pester (left 7/12/43).

J. Bussell (appointed 1/1/43).

H. J. SYDENHAM.

A. H. WEST.

W. J. STAMP.

MISS M. M. MILTON.

MISS B. J. HANKS (left 20/4/43 to join W.R.N.S.).

MISS D. M. MORGAN (left 28/9/43)

MRS. D. WILSON (Civil Defence).

MISS G. KEATING.

Miss M. Buck (appointed 20/9/43).

MISS L. CHANNING

MISS J. CHAPPLE.

Mrs. D. Marsden (Temporary)

Maternity and Child Welfare Department.

Temporary.

The following Officers are on Active Service :-

Deputy Medical Officer of Health and Clinical Tuberculosis Officer.—Robert P. Boyd, M.B., Ch.B., D.P.H. (Glas.), F.R.F.P.S.G.

Assistant Dental Surgeon.—C. A. REYNOLDS, L.D.S. (Eng.). District Medical Officers under the Public Assistance Committee (part-time):—

No. I District. C. W. MARSHALL, M.D. (Lond.), M.R.C.S., L.R.C.P.

No. 2 District. G. S. STEELE-PERKINS, B.A., M.B., B.Chir. (Camb.).

No. 3 District. J. R. Bradshaw, M.A., M.B., B.Ch., B.A.O. (Dub.).

Assistant Sanitary Inspector.—H. R. Ambrose. Clerks.

E. W. H. ELLCOMBE.

R. W. STILES.

R. J. Barker (Tuberculosis Clerk).

S. SNELL.

C. G. SEAMARK.

I. ALFORD.

Vital Statistics.

В	irth Rate		4	*****			15.3
D	eath Rate						13.4
M	aternal Morta (sepsis Nil,						2.8
T	uberculosis Mo (pulmonary			onary 0.1	16)		0.802
D	eath-rate of I	nfants u	nder one	year of a	age :—		
	All infants	per 1,0	00 live b	oirths			48.5
	Legitimate	infants j	per 1,000	legitimat	e live bir	ths	53.1
	Illegitimate	infants	per 1,000	0 illegitin	nate live	births	9.1
D	eaths from Me	easles (a	ll ages)	6			nil.
	,, ,, W	hooping	Cough (a	all ages)			1
	,, ,, Dia	arrhoea	(under 2	years o	f age)		3

INFANTILE MORTALITY.

The Infantile Mortality Rates for the year ended 1943 were as follows:

England and Wales					49
126 Great Towns populations exc				nsus	58
148 Smaller Towns 50,000)	(census	populati 	ons 25,00		46
London					58
Exeter					48.5

The following table shows the Infantile Mortality Rate in Exeter for the past ten years.

Year.	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
England and Wales	59	57	59	58	53	50	55	59	49	49
Exeter	55.8	33.6	62.3	56.1	56.4	42.1	38.7	68.04	49.8	48.5

35 of the 51 deaths were due to congenital causes and prematurity, 31 being deaths under one month.

HOSPITALS, CLINICS AND TREATMENT CENTRES.

Up to the out-break of War there was no change. Thereafter the principal hospitals became part of the Emergency Medical Scheme of the Ministry. See also M. & C. W. Section.

AMBULANCE FACILITIES.

(a) For infectious diseases :-

Two motor ambulances.
One utility motor van for discharging cases.

Provided by the Council.

(b) For non-infectious cases and accidents:-

One motor ambulance provided by the Police and four motor ambulances provided by St. John Ambulance Association. The Council contributes £100 per annum towards the latter. The provision is adequate for the ordinary needs of the City and surrounding district.

Civil Defence ambulance provision is not included.

BLIND PERSONS ACT, 1920.

Number on Register 1st January, 19	43		200
Since added			14
Died, transferred, removed, etc.			22
Number on Register, 31st December	, 1943		192
All of those certified were over 50 ye	ears of a	ge.	

Evacuation. At the end of the year there were 33 evacuated blind persons residing in the City. This figure relates to registered blind and does not include unregistered persons or dependents.

LABORATORY WORK.

All pathological and bacteriological work is carried out at the Laboratory of the Royal Devon and Exeter Hospital, under the direction of Dr. W. A. Robb, with the exception of those examinations which are made at the Tuberculosis Dispensary. The usual routine examinations are carried out free, but swabs from diphtheria contacts are only undertaken without charge if the Medical Officer of Health has been first consulted.

Examinations made :-For diphtheria:— (a) Primary investigations, including contacts 846 597 (b) Others For streptococci 131 . . . For Enteric Fever :-18 Widal Blood Culture 11 173 Faeces culture 54 Urine culture FOR V.D. DEPARTMENT :-For detection of spirochetes 15 For detection of gonococci 508 For Wasserman reaction 472 Others 57 For T.B., excluding examinations at Tuberculosis Dispensary, q.v. :--Sputum Nil. Others Miscellaneous Examinations :-Cerebro-spinal fluid 12 14 Others ****

WATER SUPPLY.

Ministry of Health Circular 10/44, dated 15th February, 1944, requires the Medical Officer of Health to give certain information regarding this matter.

The City water supply is derived from the river Exe. After purification and chlorination it is distributed to the whole of the City, with the exception of certain houses mentioned in the paragraph (wells) below, from service reservoirs. The supply is constant, the quantity adequate and the standard of purity satisfactory. The Waterworks, which are under the direction of the City Engineer and Surveyor, were described in detail in the Annual Report for 1938. Frequent bacteriological tests are made by a qualified member of the Surveyor's staff, and

periodical chemical and bacteriological analyses are made by the Public Analyst, both of the filtered and of the raw water. No plumbo-solvent action has been reported.

Standpipes. The number of houses in the City which receive a common supply of water for domestic purposes from standpipes is 108, the supply being provided by 37 standpipes.

Wells. All ancient cities contain wells, for the most part disused, used only for garden purposes or the like, or filled in. Now and again alterations to premises bring to light these old wells.

The boundary extension of 1942 brought within the City a number of houses having wells as their only source of domestic water supply. Practically all these wells are of the type technically known as "shallow," which means that the water therein is surface drainage and subsoil water. They are, therefore, liable to pollution, and some are known to be polluted. It is not always understood that people may drink polluted water for years with apparent impunity until one day a specific contagium such as the typhoid bacillus gains access. It is then that trouble occurs. There are many classical examples of this, one of the most striking being the Broadstreet Pump, Westminster, London, which enjoyed considerable reputation as a domestic water supply until it gave rise to a serious outbreak of cholera in the early 1830's. It is worth recalling that the cholera epidemics in the early years of last century were responsible for stimulating public opinion and so laying the foundations of some of our present-day health administration.

A survey of houses supplied by wells only has been undertaken with the intention of introducing the public supply whenever opportunity offers.

Wells used for trade purposes are usually of the kind known technically as "deep," which means that they derive their water from beneath one or more impervious geological strata. The water from such wells has undergone considerable natural purification and is usually satisfactory in that respect, although often unduly hard. The present position is as follows:—

Number of houses with domestic supply	
from wells only	76
	45
Number of houses supplied by both City	
mains and wells	25
Number of wells used for trade purposes	17
Number of wells known to be disused, filled	
in or used for garden purposes only	92
Total number of wells listed 18	54

HOUSING.

(a) Statistics.

1.	Inspection of Dwelling-houses during the year :-	
(1)	(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing	132
	Acts)	142
(2)	(a) Number of inspections made for the purpose (a) Number of dwelling-houses (included under subhead (1) of above) which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1932	3
	(b) Number of inspections made for the purpose	4
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	*3
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	122
2.	Remedy of defects during the year without Service of Formal Notices:—	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	96
3.	Action under Statutory Powers during the year :-	
(a)		
	(1) Number of dwelling-houses in respect of which notices were served requiring repairs	2
	(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
	(a) By owners	3
(b)	(b) By local authority in default of owners Proceedings under Public Health Acts:—	-
	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	_
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
	(a) By owners	2
	(b) By local authority in default of owners	-
*T	hese houses having been "represented," were demolished voluntar	ily.

(c)	Proceedings under sections 11 and 13 of the Housing Act, 1936:—
	(1) Number of dwelling-houses in respect of which Demolition Orders were made
	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders
(d)	Proceedings under Section 12 of the Housing Act, 1936:—
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
	(2) Number of separate tenements or underground rooms of which Closing Orders were determined the tenement or room having been rendered fit
4.	Housing Act, 1936. Part IV. Overcrowding:
(a)	(1) No. of dwellings overcrowded at end of year
	(2) No. of families dwelling therein 1
	(3) No. of persons dwelling therein 64
(b)	No. of new cases of overcrowding reported during the year
(c)	(1) No. of cases of overcrowding relieved during the year
	(2) No. of persons concerned in such cases 99
(d)	Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding
	ERADICATION OF BED BUGS.
1.	(a) No. of Council Houses found to be infested 24 No. of Council Houses dis-infested 24
	(b) No. of other houses found to be infested 68 No. of other houses dis-infested 68
2.	Methods Employed.
	Where possession can be obtained, the whole of the interior is fumigated (after easing skirting boards, picture rails, and in some instances floor boards) with flowers of sulphur, to which cayenne pepper is added in the proportion of 1 oz. of cayenne pepper to 10 lbs. of flowers of sulphur—the same being evenly mixed before ignition. The dose is repeated after the expiration of seven days.
	Where fumigation cannot be carried out, the treatmen

Where fumigation cannot be carried out, the treatment is spraying with Solution "D," obtained from Messrs. R. Sumner & Co., Liverpool.

3. The methods employed for ensuring that the belongings of tenants are free from vermin before removal to Council Houses.

In all cases where vermin is proved to exist, articles that cannot be treated with steam are carefully sprayed with solution as described under (2) above and are removed from the premises; while bedding, clothing, etc., is removed to the steam disinfector and afterwards returned to the new premises.

4. The work of disinfestation is carried out by the Local

Authority free of cost.

5. In cases where it is found necessary to disinfest furniture, etc., before the removal of families from unfit houses to Council houses, the latter are visited by a Sanitary Inspector who makes tactful enquiries to ascertain if the measures taken were successful. Up to the present, their visits have been appreciated by the tenants.

DAIRIES, COWSHEDS, AND MILKSHOPS.

There are now on the register 73 Dairies, Milkshops and Milkstores (where cattle are not kept) for the sale of milk by retail.

This is a reduction of 5 from 78 in business last year.

For the production of milk for sale wholesale and/or retail there are 40 Dairies where cattle are kept.

The Rationalisation of Milk Delivery Scheme came into

operation on the 28th March, 1943.

There are 2 collecting stations and 41 retail producers functioning in the City, and of the latter 20 occupy farms situated in the County. The 2 collecting stations receive milk from approximately 217 dairy farms, and in addition one of them received a considerable quantity from another station situated in the County.

THE MILK (SPECIAL DESIGNATIONS) ORDER, 1936.

Licences for graded milks were issued as follows:—

1 woodcatte 1 cotta .		
Production only	 	-
Combined Production and Bottling	 	1
Dealers and Supplementary	 	43
Bottling only	 	1
Accredited:		
Production only	 	6
Combined Production and Bottling	 ****	1
Dealers	 	1
Pasteurising Establishments	 	*4

* Of these, 2 became redundant and ceased to function upon the commencement of the Delivery Rationalisation Scheme, there being at the end of the year 1 H.T.S.T. type and 1 Holder type plant in operation.

SAMPLES EXAMINED.

Designation.	Sa	No. not	No. within the Standard of Cleanliness.	Total.
Tuberculin Tested		10	22	32
T.T. Pasteurised Accredited		10	12	$\frac{1}{22}$
Pasteurised :-				
Holder Type		25	17	42
Holder Type H.T.S.T. Process		11	27	38

Of the Tuberculin Tested samples from producers in the City, 8 passed the bacteriological test and 2 failed. Those from producers outside the City gave a less favourable result, being passes 14 and failures 8.

The samples of Accredited were from producers within the City. The 10 that failed were followed up in an endeavour to ascertain the cause and effect a remedy.

With regard to Pasteurised milk a special effort was made by all concerned to bring about an improvement upon the previous year. Inspections and sampling were more frequent, with the result that by August a satisfactory standard had been reached, and this was maintained month by month up to the end of the year. The failures shown in the table occurred mainly in the early part of the year.

All of these samples were also subjected to the Phosphatase Test, which is an important check upon satisfactory pasteurisation.

Wartime conditions, by the restriction of lighting and shortage of the right kind of labour, are against the production of clean milk, but there are indications of an all-round improvement. Mention should be made of the very unsatisfactory condition in which bottles are returned by many consumers. All Bottles should be rinsed with Cold Water as soon as they are emptied. This action should become a habit, when it will be a definite contribution to the clean milk campaign. Moreover, care should be taken of bottles, which are scarce.

The number of samples of ordinary ungraded milk examined for Tuberculosis and Cleanliness was 37, 29 being of milk produced in the County area. Of these, 3 only reached the standard required for graded milk. The results of these samples were communicated to the Local Authority in whose area the milk was produced.

Two of the samples were, by animal experiment, proved to contain tubercle bacilli, and full particulars were reported to the Animal Health Division of the Ministry of Agriculture. The Veterinary Officers, however, failed to discover any diseased animal in the herds.

NATIONAL MILK TESTING AND ADVISORY SCHEME.

This scheme is operated by County Councils, and in Devon the work is delegated to the Devon Milk Improvement Committee, whose meetings are attended by the Chief Sanitary Inspector.

The aim of this Committee is to bring milk up to a reasonable standard of purity and cleanliness on those farms where souring is common. For this purpose, continuous testing of milk takes place at certain of the large collecting depots in the County; while from others, samples are regularly sent to Seale-Hayne College for routine testing in accordance with the Milk Advisory Scheme.

At each meeting the Committee has before it statistical figures of the sampling and testing done the previous month. The names of unsatisfactory producers are forwarded to the County War Agricultural Committee, which undertakes the giving of necessary advice. It should be remembered that testing in itself can do nothing to reduce souring; the desired result can only be obtained by a visit to the farm in order to locate the fault and apply the remedy.

Under this scheme the number of samples of ordinary milk taken in Exeter and sent to Seale-Hayne College was 361, being 349 from producers in the County and 12 from producers in the City.

At the commencement of this routine sampling the number of unsatisfactory results was very high; but as the work progressed, each month brought an improvement. If this can be maintained, future reports should show a better state of affairs in this vital branch of our food supply.

PUBLIC ABBATOIR AND MEAT INSPECTION.

Conditions at the Abattoir remain as reported in 1942, save that additional temporary hanging accommodation for sheep carcasses has been provided by the Ministry of Food.

As compared with 1942, the number of animals dealt with was much higher, beasts being up by 300%, calves 100%, sheep 10% and pigs 50%. Systematic inspection of all carcasses was carried out in accordance with the Law and Regulations.

From a study of the accompanying tables it will be noted that the percentage of beasts affected with tuberculosis was 8.91. This is lower than in 1942, when it was 13.81. For other animals the percentage is about the same.

The following districts are supplied from the abattoir under the zoning arrangements of the Ministry of Food:—

City of Exeter.

Ottery St. Mary.

Exmouth.

Chagford.

Sidmouth.

Dawlish.

Crediton.

Budleigh Salterton.

St. Thomas R.D.C.

OTHER FOOD.

Since food control started, the Ministry of Food has required all persons in possession of food suspected of being unsound, damaged or depreciated, to obtain a Certificate from the Sanitary Inspector as to its condition and classification for disposal.

While this arrangement has been most satisfactory to all concerned, it does entail a vast amount of work. It may include large consignments of food damaged or delayed in transit such as truck-loads of flour, cereals, sugar, fruit and fish, food rejected by military units, canteens, etc., or which, having been held in stock in case of emergency has depreciated, or which is damaged and unmarketable unless sold off the ration. All is promptly dealt with and certified for disposal under one of the following headings:—

- 1. Fit for human food.
- 2. Damaged, but fit for human food (a) after treatment, or (b) subject to other conditions being complied with.
- 3. Damaged, but suitable for human food after being re-boiled or re-refined.
 - 4. Fit for animal food.
- 5. Condemned (a) for destruction, or (b) salvable for fat extraction, or (c) salvable for agricultural purposes.

The number of certificates issued were :-

То	Ministry of Food, Public Abattoir	2,181
,,	S.W. Meat Supply Association	222
,,	Shopkeepers, Stores, etc	1,241
,,	Food Salvage Officer	121

3.56 35 88 1094 17 9.59 1094 Pigs. Table showing carcases mspected and mose condemned as an account, and Lambs. Sheep .002 22 1509 36191 36191 4.81 0.14 Calves. 94 1.08 8354 14 П 8354 Beasts 8.91 9675 9675 35 12.00 108 754 1126 with disease other than Tuberculosis : Percentage of number inspected affected : Carcases of which some part or organ Percentage of the number inspected Carcases of which some part or organ Number killed (including animals (emergencies) slaughtered before admission) All Diseases except Tuberculosis :-: Whole carcases condemned Whole carcases condemned affected with Tuberculosis : was condemned was condemned Tuberculosis only :-Number inspected

In addition to the above the shot carcasses of 3 stags were condemned as they had lain too long before exenteration.

WEIGHT OF MEAT AND OTHER FOODS SEIZED OR SURRENDERED DURING 1943.

Description.	Tons.	Cwts.	Qrs.	Lbs.
Whole carcases including offals on account of Generalised Tuberculosis	0.5	15	_	22
Parts of carcases and offals, on account of Localised Tuberculosis	0.1	17	2	3
Whole carcases including offals on account of diseases or conditions other than Tuber-culosis	15	6	-	3
Parts of carcases and offals, etc., on account of Local affections other than Tuberculosis		13	2	21
Imported Meat and offals	-	1	1	21
Other Foods, including fish	41	16	1	9
Total weight of Meat and other Foods seized or surrendered during 1943		10	-	23

FOOD AND DRUGS ACT, 1938.

There were 3 formal and 215 informal samples submitted to the Public Analyst.

Included in these figures were 90 samples of milk, and amongst the remaining miscellaneous articles were a number of samples of jam, bread and confectionery, sausages, beer and stout, patent foods, flavouring essences, food substitutes and vitamin tablets.

Of the 90 samples of milk, 87 were informal and 3 formal. The informal samples were taken at collecting stations and 3 were certified deficient or adulterated to the extent of :—

- (1) 35% deficient in fat.
- (2) 11% deficient in fat.
- (3) 5% deficient in fat and 5% added water.

Control samples were taken in respect of the first two cases by the Devon County Authority and deficiencies found. In the case of the third, formal samples were taken from three churns by the Devon County Authority after Notice as mentioned in Section 68 (5) from the farmer at the place of delivery (i.e., in the County). Two of these samples were certified deficient in fat to the extent of 12% and 5% respectively, and the third was genuine; but the arithmetical average of the bulk was 3.28% fat.

One sample of egg substitute was certified to be deficient by reason of being infested with mites.

As the number of deficient milk samples may therefore be regarded as 3 only, the percentage was 3.45, as against 6.06 in 1942.

All samples which were examined for the presence of preservatives gave negative results.

DESTRUCTION OF RATS.

Infestation Order, 1943.

Rodent Officer's return of work done in ten months of 1943:-

No. of complaints received and inves	tigated	231
No. of rats known to be destroyed		7118
No. of mice known to be destroyed		654
No. of premises rat-proofed		27
No. of contracts made—12 months		Nil
No. of premises gassed	-	24*
do. baited		182

* Includes 6 attacks over long stretches of river and canal banks.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

Experience of infectious disease in 1943 was favourable. Notifications of diphtheria, scarlet fever and enteric fever were fewer than in 1942, which was itself a year of low incidence. None of the fatal cases of diphtheria had been immunised.

In December there was a small outbreak of the severe or "gravis" type of diphtheria in the northern part of the City. This was soon brought under control; the same kind of diphtheria then appeared in an eastern district, the channel of communication being, probably, certain schools. By means of close investigation and the supervision of the infected households, this outbreak, too, was stamped out. The outbreak comprised 33 cases, and it is interesting to note that exactly one-third of these were adults.

The high proportion of adult cases is thought to be an indirect result of the degree of immunisation against diphtheria prevailing among school children. Under the energetic leadership of Dr. I. Ward, the immunisation campaign continues to make good progress.

.At the end of the year the number of children immunised was :—

Aged under 5 4806=52.1% Aged 5—15 9415=84.0%

As immunisation is not performed in the case of infants under twelve months old, the percentage of 1-to-5-year-olds immunised is, actually, 70.0%. These figures take no credit for children immunised privately, as the number of these cannot be ascertained with reasonable accuracy.

There were no fatal cases of scarlet fever. All the notifications of enteric fever proved to be typhoid. There were no cases of paratyphoid fever notified. Three of the typhoid cases were type "91." Two of these were infected by a carrier, the third may have been infected by bathing in sewage-polluted water. A fourth case was notified by the Royal Devon and Exeter Hospital, having contracted the disease outside the City. This infection was type "E1." Another case was admitted from the West of England Eye Infirmary, having contracted the disease in the country. In this case the infecting organism was not recovered, so the type remains unknown. The sixth was a local case, the origin of which could not be traced. The infecting organism was cultured, but proved untypeable.*

There was a sharp increase in notifications of dysentery, all said to be of the Sonne variety, and mainly associated with two institutions. In at least a dozen of these cases there was no clinical or bacteriological proof that the mild symptoms from which certain children suffered were, in fact, due to Sonne infection. On the other hand, it is probable that many cases of Sonne dysentery escape recognition.

Outbreaks of measles and whooping cough of sufficient size to be called epidemics occur about every two years. There was a considerable epidemic of measles in 1941 and a moderate outbreak of whooping cough. Epidemics of these diseases were, therefore, to be expected in 1943, especially as incidence was very low in 1942. As will be seen from the table of notifications, there were moderate epidemics of these diseases. The measles outbreak was late, reaching its peak in June. Whooping cough was most prevalent in October.

Actually, only 4 cases of *cerebro-spinal fever* arose in the City; the other three cases were notified by the Royal Devon and Exeter Hospital, having been admitted from the County.

During November and December, Exeter experienced the influenza epidemic, which seems to have been pretty general throughout Great Britain. Influenza is not a notifiable disease, although influenzal pneumonia is. The disease was typical, being characterised by sudden onset, fever, headache, pains in the limbs and prostration. There was moderate catarrh of the upper respiratory system in most cases, sometimes sore throat. Some degree of bronchitis or bronchiolitis was fairly common. Convalescence was rather slow, with the usual feeling of weakness and depression.

So far as it is possible to judge, both the incidence and severity of this epidemic was less than the epidemic of 1937. The number of death certificates in which the word "influenza" appeared as a cause of death, or one of the causes of death, was 2 in November, 19 in December, and 2 in January, 1944, when the epidemic was subsiding. Only four of these deaths were below the age of fifty.

Certain steps recommended by the Ministry of Health for the provision of additional medical and nursing assistance were put into operation, but as matters turned out there was practically no call for such extra services.

The outbreak of epidemic catarrh which occurred in the first winter of the war is generally regarded as not having been true influenza. Reference was made to this in the Annual Report for 1940.

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Cases Notified	5	10	19	29		4		9			-	62	197		
	4	5	3	7	-	6.1		1	1			41	60 197		
	3	4	60	61		50		00	-			26	52		
	61	3	63	7		ಬ		.01		-		53	47	10000	
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			Diphtheria (including Membraneous Croup		62	- 13		-					d	-	
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			ip	Scarlet fever	Enteric Fever	Dysentery	neī	ner	Erysipelas	Cerebro-Spinal Fever	Poliomyelitis	ho	eas	Ophthalmia Neonatorum	
			D	Š	H	D	†Puerperal Pyrexia	*Pneumonia	H	3	P	*Whooping Cough	*Measles	O	
						1						**	W		

† 14 of these cases were admitted to the Local General Hospital from the County Area for diagnosis * Deaths from cases notified and not total number of deaths.

VACCINATION.

No primary vaccinations were carried out by the Medical Officer of Health or his staff under the Smallpox Regulations, 1917.

The latest statistics available are for the year 1942 and are as follows:—

Births registered		,	1212
Vaccinated			701
Insusceptible			5
Statutory Declaration receive	ved		311
Died unvaccinated		£	49
Postponed			5
Removed to other districts			99
Removed to places unknow	'n		34
Unaccounted for	****		- 8

It will be noted that 57.8 per cent. of the infants were vaccinated, which is 6.61 per cent. above that of the previous year.

The partially protected condition of the population may seem unsatisfactory, but experience shows that in the presence of an outbreak of smallpox the public readily accepts vaccination.

Cases of post-vaccinal encephalitis-Nil.

CANCER.

The following table shows deaths from cancer during the past ten years:—

Year	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Deaths	121	127	124	117	121	127	144	151	142	116

The next table shews deaths from cancer during the past year according to age periods and sex.

0-1	1-	2	2-	5	5-	15	15-	45	45-	65	65 ove		Tot	al
м 1	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1	-	-	_	_	_		5	5	21	28	28	29	54	62

The facilities for diagnosis and treatment were fully described in the Report for 1936. There has been no change. A comprehensive scheme for the diagnosis and treatment of cancer for Devon, Cornwall, Plymouth and Exeter is under consideration.

TUBERCULOSIS.

Reference was made in the Report for 1942 to the shortage of beds for cases of pulmonary tuberculosis. At long last the Ministry of Health has approved additional building at the Devon County Sanatorium at Hawkmoor. The City is to have the use of twelve of the extra beds so provided. These, together with the beds in the Tuberculosis Unit at the Isolation Hospital, should meet our needs, and enable some classification of cases to be made. During the year a larger number of non-pulmonary cases than usual have been under treatment, as will be seen from the table headed "Other Institutions." The bone and joint cases are treated at the Princess Elizabeth Orthopaedic Hospital and at the Orthopaedic Unit of Exminster E.M.S. Hospital. There were 31 of these, only 5 of which were children. There is no satisfactory explanation as to why the number of orthopaedic cases requiring hospital treatment should be about double the average of recent years.

The number of persons on the Tuberculosis Register at the end of the year is substantially decreased. This is entirely due to a thorough revision of the Register during 1943 by the Clinical Tuberculosis Officer, such revision not being practicable during 1942.

Attention is called to the work of the Tuberculosis Dispensary and to the large number of persons referred there for opinion, as well as to the increase of X-ray examinations. This work is to the good, in so far as it tends to discover patients suffering from tuberculosis in an early and more easily curable stage.

Maintenance Allowances-Memorandum 266T. Workers in the field of Tuberculosis have realised for many years past the social and financial difficulties in which many patients are placed. It was known that these difficulties prevented many persons accepting treatment or accepting it at the earliest possible moment. The same difficulties were apt to lead patients to curtail treatment and force them to seek employment before convalescence is fully established. All sorts of suggestions to remedy this state of affairs have been made during the past quarter of a century. Most of these centred around variation of national health insurance. They would have been difficult to work and inapplicable to some cases. The Ministry of Health may be sure that the machinery of Memo. 266/T has received a general and sincere welcome, as being a practical and reasonable contribution to the solution of the problems mentioned. The scheme provides for maintenance allowances for the families of patients suffering from pulmonary tuberculosis who undergo approved treatment; also, in certain circumstances, for additional financial help called "discretionary allowances" and "special payments."

Details of the scheme are clearly set out in the Memorandum, and it is operated jointly by the Finance Department of the Council and the Tuberculosis Dispensary staff.

In Exeter, the scheme came into operation on 1st October, 1943. Up to the end of the year, 40 maintenance allowances had been granted, the average grant being 25/2 per week. One discretionary allowance and three special payments have also been granted averaging $4/7\frac{1}{2}$ per week. The total cash for the period 1st October, 1943, to 31st December, 1943, was £442 12s. 5d., all of which will be reimbursed by the Ministry. It is not quite clear why the scheme does not apply in cases of non-pulmonary tuberculosis.

The following figures show at a glance the main facts of the Tuberculosis statistics for the City during 1943:—

Total cases on Register, 1st J Pulmonary Non-Pulmonary			337 202	539
Total notifications received after of 13 duplicates, but including transfers Pulmonary Non-Pulmonary			147 56	203
Deaths during the year Pulmonary Non-Pulmonary			44 11	55
Outward transfers (including transferable deaths) Pulmonary Non-Pulmonary	4 outwa	ard	73 36	109
No. of cases removed from "Recovered" or "Mistaker Pulmonary Non-Pulmonary			45 32	77
Taken off Register under "Health (Tuberculosis) Regula Pulmonary Non-Pulmonary	tions, 193	olic 80 ''	56 31	87
Total cases on Register, 31st Pulmonary Non-Pulmonary	Decembe	er	262 152	414

The following table shows notifications and deaths during the year arranged according to ages.

	1	NEW	Cases		DEATHS.								
AGE PERIODS.	Pulm	onary		on- onary	Pulm	onary	Non- Pulmonary						
	M.	F.	M.	F.	M.	F.	M.	F.					
0 1 5 10 15 20 25 35 45 55 65 and upwards	- 2 2 2 10 18 5 5 2 3	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	-4 9 3 2 2 - 3 2 2 -	1 3 3 1 3 4 3 1 1	- - 3 6 - 2 3 3	- 1 3 4 8 2 2 4 2	1 - - - - 1 - 1	- 2 2 2 2 - - 1					
Totals	49	45	27	21	17	27	4	7					
		14	2			5	5						

Seven cases were notified after death. These were 6 pulmonary and 1 non-pulmonary. In addition, there were 2 pulmonary cases in which the diagnosis was made shortly before death.

INSTITUTIONAL TREATMENT.

Tuberculosis Wards, Whipton Hospital.

ur m	Remaining under treatment on 1st January 1943					arged he year		ths he y	during ear.	Remaining under treat- ment 31st Dec., 1943.				
м	F	TOTAL	М	F	TOTAL	М	F	TOTAL	М	F	TOTAL	М	F	TOTAL
12	15	27	36	27	63	21	16	37	7	11	18	20	15	35

Honeylands Children's Sanatorium, Whipton.

Remaining under treatment 1/1/43.				dur	itted ing Year.		dui	arged ring Year.	Remaining under treat- ment 31/12/43.				
м	F	TOTAL	М	F	TOTAL	М	F	TOTAL	М	F	TOTAL		
									-				
								1					
9	10	19	6	7	13	7	7	14	8	10	18		

Other Institutions.

titution.	Condition for which treated.	Remaining under treatmen on 1-1-43.			Admitted during Year.			Disch arged during Y ear.			Deaths during the year.			Remaining under treatment on 31-12-43.			
7		M	F	Total	M	F	Total	M	F	Total	M	F	T')	M	F	Total	
ss Elizabeth	Spine	2	3	5		6	6	1	8	9				1	1	2	
opaedic pital,	Hip	3	2	- 5 -	7	4	11	8	6	14			-6	2		2	
ter	Leg	1		1	1	1	2	1		1				1	1	2	
	Arm and Leg		1	1											1	1	
Devon and Hospital	Neck Glands		1	1	4	5	9	4	6	10							
	Abdomen		1	1	2		2	2		2		1	1				
	Hip				1		1	1		1					Ė		
	Genito- urinary				2		2	2		2		-					
Total		6	8	14	17	16	33	19	20	39		1]	4	3	7	

TUBERCULOSIS DISPENSARY.

The following particulars are given of cases under supervision at the Dispensary by the Clinical Tuberculosis Officer.

	P	ULMO	ONAR	Y.	No	n-Pu	LMON	VARY	TOTAL.				
Diagnosis.	Adı	Adults.		ldren	Adults.		Children		Ad	ults.	Child		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.		
Number of New Cases diagnosed as Tuber- culous during the year		40	4	4	11	11	16	7	56	51	20		
Inward Transfers Cases Returned	32 5	19	1	1	2 2	1	2 3	3 2	34	20	3 3		
Number of cases writ- ten off the Dispen- sary Register as:—													
(1) Recovered (2) Dead (all causes) (3) Removed to other	6 21	$\frac{1}{20}$	1	2	1	1	1 2	3	6 22	2 21	2 2		
(4) For other reasons	12	11 2	1	_	2	1	1 2	1 3	14 4	11 3	2 2		
Number of Persons on Dispensary Register on December 31st:—													
Definitely Tuberculous	112	79	18	18	37	42	35	24	149	121	53		

In addition to the notified cases shewn above, a further 267 new cases (226 adults and 41 children) were referred to the Tuberculosis Officer for examination during the year. Of these 249 (212 adults and 37 children) were diagnosed as not suffering from tuberculosis and removed from the Dispensary List, the remaining 18 being kept under observation at the Dispensary pending definite diagnosis. This statement does not include the routine examination of contacts.

In all, 1,564 attendances were made by patients at the Dispensary during 1943, 209 home visits were made by the Tuberculosis Officer, and 784 by the Tuberculosis Dispensary Nurse.

BACTERIOLOGICAL EXAMINATIONS.

During the year 466 specimens of sputum and 1 specimen of urine were examined at the Dispensary. Other examinations are carried out in the Pathological Department of the Royal Devon and Exeter Hospital.

X-RAY EXAMINATIONS.

During the year 562 X-ray examinations were made (111 for screen only). Of this total, 105 examinations were made on behalf of the Ministry of Labour and National Service.

VENEREAL DISEASE.

With the approval of the Ministry of Health, arrangements have been made between the Royal Devon and Exeter Hospital, the Devon County Council and the City Council of Exeter, for the treatment of these diseases at a special department of the Hospital.

The hours of attendance are as follows :-

Men Mondays, 3—5 p.m., and Fridays, 6—8 p.m.

Women Fridays, 3-5 p.m.

If in-patient treatment is necessary, special beds are available in the Hospital.

In spite of all sorts of stories about the amount of venereal disease locally, it is satisfactory to be able to record that there has been a sharp fall in the number of new cases of both syphilis and gonorrhoea during 1943. That this is not due to failure to attend the Clinic is shewn by the number of persons who, presumably having been exposed to risk, attended for examination and were found to be suffering from non-venereal conditions. Probably a good many cases of gonorrhoea are treated privately with the effective drugs now available. This makes it difficult to form an accurate estimate of the prevalence of this disease. Most cases of syphilis find their way to the Clinic, so that the decrease in new cases of this disease is unquestionable.

Another satisfactory feature is the number of patients who completed treatment, and the reduced number who defaulted.

A medical officer in charge of an Allied unit was asked recently if he considered Exeter a bad place for V.D. infection. His reply was a definite "No," and he added that most of the men reporting sick with V.D. and coming under his charge, had contracted the disease while on leave in London. The problem of V.D. is always serious, but it is certain that it is not an especially serious problem in this City.

Defence Regulation 33 B. Experience of this rather cumbersome regulation locally has been too small to justify the expression of a definite opinion. During the year statutory forms were received in respect of 5 persons only, 1 man and 4 women. To make the regulation operative two complaints must be received about an alleged source of infection. This occurred in only two instances, both women. Historically, attempts to deal with V.D. by legal means have never met with very encouraging results. Education and the kind of propaganda which the Government is using in the press are far more likely to be effective.

During the war the incidence of syphilis has about doubled. The incidence of gonorrhoea fluctuates from year to year, but has not increased. This applies to the Clinic. Probably a good many cases of gonorrhoea are treated privately, so that an accurate estimate of its incidence is impossible.

Attendances are not limited to clinic hours, but patients attend on other days and hours for interim treatment.

These arrangements are intimated to all doctors commencing practice in Exeter.

Unmarried female patients are admitted to St. Mary's Home, by arrangement with the authorities of the Home, for in-patient treatment by the surgeon in charge of the clinic.

The following figures relate to the City only.

Number of cases dealt with during the year at, or in connection with, the out-patient clinic for the first time and found to be suffering from: (figures for 1942 are printed in brackets)—

(a)	Syphilis				11	(23)
(b)	Chancroid				1	()
(c)	Gonorrhoea				23	(42)
(d)	Conditions of	ther th	an venerea	1	99	(65)

Total attendance of cases during the year at out-patient clinic, 1,230 (1,230).

Examination of pathological material:—

For detection of spirochetes	15	(10)
For detection of gonococci	508	(601)
For Wassermann and Kahn reaction	472	(443)
Other reactions	57	(8)

The following figures apply to the entire department and are not given separately for the City and County:—

Number of cases who ceased to attend out-patient clinic: Before completing a course of treatment 23 (47)Number of cases transferred to other treatment centres or to care of private practitioners 186 (190)Number of patients discharged from out-patient clinic after completion of treatment and observation 219 (124)Number of cases which ceased to attend after completion of treatment, but before final tests of cure 14 (6) Number of cases who, on 31st December, 1943, were under treatment or observation 126 (129)568 (496)

The total number of cases under treatment at the end of the year showed an increase of 3.

INFANT LIFE PROTECTION.

On the 31st December, 1943, there were 53 foster children in the City, and the number of registered foster mothers was 45.

The Health Visitors paid 289 visits to foster mothers during the year. The figures for the previous year were 60, 50 and 354 respectively. Necessary action was taken whenever conditions were found to be unsatisfactory, and everything possible was done to encourage foster mothers to attend the child welfare centres regularly with their children when these were of appropriate age.

MATERNITY AND CHILD WELFARE.

The arrangements for Child Welfare Centres, Ante-Natal and Post-Natal Clinics and associated activities have remained the same as in 1942 and have proved adequate.

The staff of Health Visitors, who also act as School Nurses, remains the same as last year, viz., a superintendent, six permanent officers and two temporary ones. There is a small all-round increase in numbers and attendances.

I.—CHILD WELFARE CENT	TRES.	5.
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Centre.		Average No. of Infants on Books.	Average No. of Attendances of Children.	Average No. of Attendances of expectant Mothers
Central District		124	48.3	0.5
Western District	****	300	64.9	1.1
Northern District		263	67.5	0.2
Eastern District		311	57.1	0.6

Altogether 1,372 children under school age attended the centres making 12,419 attendances. The attendances of the various age groups were as follows:—

Centre.	Under 1.	1 to 2	2 to 3	3 to 4	4 to 5	Total.
Central	 1126	455	396	285	126	2388
Western	 2382	587	244	243	153	3609
Northern	 2333	532	219	275	152	3511
Eastern	 1819	470	281	228	113	2911
Total	 7660	2044	1140	1031	544	12419

III.—MUNICIPAL ANTE-NATAL AND POST-NATAL CENTRE

No. of sessions held					20000	103
No. of mothers attend	ding					363
Total attendances						1054
Of new cases :						
Ante-Natal		*				279 3
For diagnosis Post-Natal				2	*****	5
Referred by :-						
Doctors at Welfare	Centres				*****	6
AROUNTE . IDITOIL						1
Midwives			****	****		3
Private practitioners	3		20010			12
Miscellaneously (e.g. tioned by the C other mothers a	ommitte	ee for	the Mate			265
Referred for treatment :-	_					
Dental treatment						67
Royal Devon and E:	xeter Ho	spital				15
Birth Control Clinic						-
Eye Infirmary			*****		****	_
Dispensary						-
V.D. Clinic					*	20

III.—MIDWIVES ACT, 1936.

Summary of work carried out by the Exeter Maternity and District Nursing Association on behalf of the City Council during the year.

				Total.
No. of cases attended as midwives				231
No. of visits as midwives				4050
No. of cases attended as Maternity Nurses				82
No. of visits to cases as Maternity Nurses				1578
Total number of cases seen at the Clinics				353
Attendances at the Clinics		,		1482
Examined by Doctor				390
Visits to patients' homes				1260
Total number of cases seen at the Post-Nata	Clinics			30
Total number of attendances	*****			30
Examined by Doctor	*****			5
Total number of Medical Aid Forms, for Mot	her or B	aby		61
Total number of Medical Aid Forms, for Motl	her or Ba	by, ante	-natal	27
Total number of cases referred to Hospital				22
Total number of cases referred to Hospital, a	nte-nata	.1		Nil.
No. of cases dealt with under lying-in-charity				18

During the year 383 mothers attended the Association's Ante-Natal and Post-Natal Clinics, making 1,512 attendances. Of this total, 395 attendances were to see the Association's medical officers, and 1,117 to see nurse-midwives.

The Association also undertakes nursing of the sick poor on behalf of the Public Health Committee. During the year, 1,584 nursing visits were made at the instance of various medical officers employed by the Council.

IV. PROVISION OF MILK AND FOODSTUFFS.

The Government National Milk Scheme came into being on 1st August, 1940, and thereafter the Council ceased to distribute liquid milk. The Council has continued to supply dried milks modified for infant feeding under its previous arrangements and on medical certificate up to 26th February, 1943.

The Ministry's scheme for the distribution of fruit juices and vitamin-containing preparations came into being on 8th December, 1941.

The Council has continued to supply certain medicinal foods and special preparations. These are available at cost price, or free on the basis of the National Milk Scheme scale.

V.—BIRTHS.

1,026 notifications of live births were received during the year; 97.7 per cent. of the notifications were made by midwives, and 2.3 per cent. by medical practitioners or relatives.

In 265 instances the midwives summoned medical help, in accordance with the rules of the Central Midwives Board, while 30 other notifications in connection with still births, artificial feeding, etc., were received.

The conditions for which the midwives summoned medical baid were as follows:—

Premature labour		 	3
Ruptured perineum	****	 	97
Prolonged labour		 	16
Abnormal presentation		 	10
Ante-partum haemorrha	ge	 	8
Post-partum haemorrha	ge	 	6
Adherent placenta		 	3
Stillbirth		 	2
Albuminuria		 	8
Miscarriage		 	12
Rise of temperature		 	17
Unsatisfactory condition			44
Unsatisfactory condition			39
Patient's wish		9	
			265

VI.—STILLBIRTHS.

The number of stillbirths during the year was 35, including 7 inward transfers. Of the 28 stillbirths 17 were attended by doctors and 11 by midwives.

These may be classified as follows :-

	Macerated, i.e., died at some time prior to birth.	Non- Macerated.
Difficult labour and abnormal presentations	5	4
Malformation of Infant		2
Toxaemia of pregnancy and albuminuria	3	1
Ante-Partum Haemorrhage	1	4
Ill-health of, or accident to mother	3	3
No cause assigned	1	1
Totals	13	15

VII.—HOME VISITS UNDER THE NOTIFICATION OF BIRTHS ACTS.

During the year, the health visitors paid 914 first visits and 5,202 subsequent visits to children under the age of 12 months and 7,054 visits to children between the ages of 12 months and 5 years.

VIII.-MATERNITY HOME AND SERVICES.

At Mowbray House, Heavitree, 18 beds, together with 2 observation beds are provided. The part-time medical officer, in charge of the clinical work is Dr. Bertha Hinde. Doctors' cases are, of course, attended by their own medical practitioner. The Home is primarily intended for those mothers who cannot conveniently remain at home during childbirth or afford to go to a private maternity home. Complicated and difficult cases are admitted by arrangement to the maternity unit of the Royal Devon and Exeter Hospital.

Admissions were as follows:-

Patients admitted	to Mowbray	y House	 283
Patients admitted Exeter Hospital		Devon	139
Other Institutions			 2
	Total	****	 424

No cases of pemphigus neonatorum or of serious ophthalmia occurred in the Home during the year.

IX.—BIRTH CONTROL.

A Birth Control Clinic is carried on by the Exeter and District Women's Welfare Association. Cases suitable in the sense of the Ministry of Health's Memorandum 153/MCW are referred by the Local Authority and granted financial assistance.

Since 1930 a total of 169 cases have been referred. Of these, 9 failed to attend, 9 have left the City, 6 have died, 31 are known to have become pregnant, and 33 have been taken off the books for non-attendance. This statement does not include others who decline to make use of the Clinic's Services.

X.—DENTAL TREATMENT.

Arrangements have been made, with the approval of the Ministry and with the consent of the Education Committee, for the dental treatment of expectant and nursing mothers by the School Dental Surgeons.

Summary of the work done du	iring the year	1943	:
No. of patients seen			125
No. of visits paid by patients	****		454
No. of administrations of gas			73
No. of teeth extracted under ga	ıs		413
No. of teeth extracted otherwis	se		13
No. of dentures fitted			105
No. of teeth replaced			803
Other operations			40

Necessary dental work on the recommendation of the Welfare Medical Officers is also undertaken for the "under fives."

Summary of the w	ork done	e during	the year	1943	:
No. of visits			mi.		114
No. of fillings					28
No. of general anae	esthetics			*****	37.
No. of extractions					78
Other operations					13

XI.—ORTHOPAEDIC TREATMENT.

During the year 30 children from the Infant Welfare Centres received treatment for the following conditions:—

Congenital deformities				8
Injuries at birth	/	*****		2
Rickets and sequelae				14
Polio-myelitis				1
Miscellaneous			1 1	5

Year.	Cases.			Vision	Vision	Total	Re-		
	Noti- fied	Treated.		unim- paired	Vision im-	Blind- ness	moved from dis-	Deaths	Total
		At Home	Hos- pital	paired	paired	ness	trict		
1934	6	2	4	5	_		_	1	6
1935	7	4	3	6	1	-	1	-	7
1936	7	6	1	7	_	_	_	_	7
1937	1	1	-	1	_	-	-	-	1
1938	3	_	3	3	_	_		_	3
1939	1	1	_	1	_	_	_	_	1
1940	4	2	2	4	_	_	_	_	4
1941	4	1	3	4	_	_	_	_	4
1942	7	3	4	7	_	-	_		7
1943	3	2	1	3	_	_	_		3

XII.—OPHTHALMIA NEONATORUM.

It is many years since a case of this disease resulted in injury to vision. There are special facilities for treatment at the West of England Eye Infirmary and there is good co-ordination between this Institution and the V.D. Clinic at the Royal Devon and Exeter Hospital.

Most of the cases reported by midwives under the Board's rules are examples of conjunctivitis due to other causes.

XIII.—WAR-TIME NURSERIES.

The Maternity and Child Welfare Committee is responsible for three war-time nurseries. Two of these are whole-time nurseries, that is to say, they take children from twelve months old until five, and are open on six days a week from 7 a.m. to 7 p.m. The other is a part-time nursery, admitting children from two to five years old. It is open on five days a week from 9 a.m. to 5 p.m. Saturday opening was tried experimentally, but met with no response on the part of the parents.

The two whole-time nurseries are at Burnt House Lane (opened 28th September 1942) and Buddle Lane (opened 26th October 1942). Both are housed in specially constructed buildings. The part-time nursery is the "Dorothy Nursery" housed in Paul Street School. It had its origin in a nursery for evacuee children in connection with the Centre for Mothers which was then at the Civic Hall. When this arrangement was no longer required it became a part-time war-time nursery. The Committee has been responsible for it from 23rd June, 1941. Each nursery provides 40 places.

These nurseries are intended for the care of children whose mothers are working. The approved cost is defrayed by the Ministry of Health, the Local Authority acting as agent. The whole-time nurseries provide care, education, and all meals and milk for 1/- a day. Part-time nurseries provide care, education, dinner, with morning and afternoon milk for 6d. a day. The catering is carried out by arrangement with the Education Committee. It has also been agreed that the children may make use of the Education Committee's dental and minor ailment clinics.

A Matron, who is a State registered nurse, is in charge of each whole-time nursery, and there is a qualified teacher for the older children. A certificated nursery nurse is in charge of the part-time nursery.

These nurseries have continued to give valuable help to working mothers. They are also affording experience upon which future planning may be built.

MINISTRY OF HEALTH CIRCULAR 10/44, PARAGRAPH 3.

As the Health Visitors are also School Nurses, the control of dirty heads is simplified. As a general rule, parents carry out necessary cleansing themselves with such advice as the nurse thinks necessary, but in recalcitrant and difficult cases cleansing is carried out at the Public Health Committee's cleansing station.

Before the war, the number of school children found to have dirty heads averaged about 10 per cent. and the number of pre-school children found to be unsatisfactory was very much less. The figure for elementary school children for 1943 was 16.6 per cent., being an improvement on the previous two years. An accurate figure for pre-school children cannot be given, but there is no doubt that they do receive more attention from parents than their older brothers and sisters. Dirty heads at the nurseries are not very common, and in any case the cleanliness of entrants is open to control. Health visitors and hospital nurses both report that lethane oil frequently fails to accomplish all that has been claimed for it. One wonders if there are not variations between different samples of lethane as found commercially. Most nurses prefer the old-fashioned methods of cleansing heads, and rely very largely on the mechanical removal of nits or vermin by special fine steel combs. These combs can be obtained from the Department by parents on sale or loan.

In the matter of scabies, 259 families, comprising 823 cases, were dealt with. Nine adult males made use of the Cleansing Station.

It is observed that the Scabies Order, 1941, applies to other verminous conditions. Although it has not been necessary to resort to legal action, the power has proved a useful one, particularly in securing examination of adult members of families.

EXETER ISOLATION HOSPITAL.

Accommodation and ambulance arrangments remain the same.

In addition to the City, the hospital serves the following local authorities by contracts with the City Council:—

St. Thomas Rural District Council.

Dawlish U.D.C.

Exmouth U.D.C.

Budleigh Salterton U.D.C.

Ottery St. Mary U.D.C.

Sidmouth U.D.C.

Seaton U.D.C.

Axminster U.D.C. and R.D.C.

Honiton T.C. and R.D.C.

Crediton U.D.C. and R.D.C.

Okehampton T.C. and R.D.C.

and for the purpose of Circular 2153 (Typhus Fever), Tiverton U.D.C. and Tiverton R.D.C.

At the beginning of the year 29 fever patients remained under treatment, 17 of these being from the County. During the year 404 patients were admitted, 176 from the County and 228 from the City. At the end of the year 42 patients remained under treatment—9 from the County and 33 from the City.

The number of admissions was 49 less than in 1942 and 308 less than in 1941, mainly due to a decrease in the incidence of scarlet fever and diphtheria in the area.

The work of the Tuberculosis Unit at the Hospital is recorded in a separate section of this Report.

		Ad- mitted.	Disch	arged.		Remaining at end of year.	
Disease.	Remain- ing.		Diag- nosis con- firmed.	Diag- nosis not con- firmed.	Deaths.		
Scarlet Fever	7	124	117	6	_	8	
Diphtheria	12	94	70	8	9	19	
Vincent's Angina	_	4	3	1	-	-	
Tonsilitis	-	5	3	2	-	-	
Enteric Fever	7	11	12	3	3	-	
Dysentery	-	19	13	1	-	5	
Mumps	-	29	25	4	-	-	
Erysipelas	_	8	5	2	-	1	
Measles	-	27	22	5	-	-	
Pemphigus Neona- torum	_	6	4	1	_	1	
Cerebro-spinal Fever	3	23	10	13	2	1	
Whooping Cough	-	3	3	-	-	-	
Chicken Pox	-	7	3	-	_	4	
Rubella	-	36	35	1	-	-	
Miscellaneous	-	8	3	2	-	3	
Totals	29	404	328	49	14	42	

NOTES.

Scarlet Fever. 4 cases were complicated by another disease, namely, 1 chronic endocarditis, 1 chronic otitis media, 1 chicken pox and 1 scabies. There was 1 example of "surgical scarlet fever." In 6 cases the diagnosis was not confirmed. The correct diagnoses were as follows:—1 streptococcal tonsilitis, 1 measles, 1 food rash, 1 rubella with chicken pox, 1 sore throat and 1 diphtheria.

Diphtheria. One admission was an example of laryngeal diphtheria, and 4 were cases of nasal diphtheria. 3 were temporary throat carriers.

Of the 9 deaths, 8 were due to diphtheria and 1 to oedema glottidis complicated by streptococcal septicaemia. None of the 8 deaths were laryngeal, all were faucial and none were immunised.

In 8 cases the diagnosis was not confirmed. These were diagnosed as tonsilitis 5, laryngismus stridulus 1, Vincent's angina 1, and asthma and bronchitis 1.

Vincent's Angina. 1 case was diagnosed as streptococcal

tonsilitis.

Tonsilitis. In 2 cases the diagnosis was not confirmed. These were diagnosed as Vincent's angina 1, and food poisoning 1.

Enteric Fever. 15 were typhoid fever and of these 3 died. Of these 15, 2 were type "A," 3 type "91," 7 type "E1," 1 not typed but associated with "91" outbreak, 1 not typed and 1 not typeable.* In 3 cases the diagnosis was not confirmed. These were diagnosed as abortus fever 1, non-specific enteritis 1, and Weil's disease 1.

Dysentery. 13 were examples of Sonne dysentery. There

was I case of food poisoning (B. enteritidis).

Mumps. In 4 cases the diagnosis was not confirmed. These were diagnosed as tonsilitis and laryngitis 1, tonsilitis 1, fibrositis of neck 1, and acute iritis 1.

Erysipelas. 1 case was diagnosed as abscess of nasal septum

and I as cellulitis of right leg.

Measles. 3 cases were complicated by broncho-pneumonia. In 5 cases the diagnosis was not confirmed. These were diagnosed as pityriasis rosea 1, rubella 2, carbuncle complicated by erythema 1, and gastritis 1.

Pemphigus Neonatorum. 1 case diagnosed as dermatitis of neck.

Cerebro-spinal Fever. In 13 cases the diagnosis was not confirmed. These were diagnosed as pneumococcal meningitis (ending fatally) 1, sciatica 1, bronchitis 2, pneumonia 2, sunstroke 1, neurosis 1, severe chill 1, meningismus 1, cerebral haemorrhage 1, Sonne dysentery 1, and "no appreciable disease" 1.

Whooping Cough. 1 case complicated by broncho-pneumonia. Chicken Pox. 1 case complicated by chronic otitis media.

Rubella. 1 case diagnosed as dermatitis.

Miscellaneous. Included in this group is 1 case sent in for observation and found to be urticaria papulosa, 2 cases of enteritis, 4 cases of scabies, and 1 case sent in as food poisoning and found to be gastric ulcer.

SMALLPOX HOSPITAL.

By agreement with the County Council, it has been arranged that any smallpox cases arising shall be treated at the County Council's Smallpox Hospital at Upton Pyne.

*Since proved to be type "91"