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City and County of the City of Exeter.



INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

ANNUAL REPORT


(abridged interim report)

OF THE MEDICAL OFFICER
OF HEALTH
FOR 1945

EXETER :

BESLEY & COPP, LTD., COOMBE STREET,

1946



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I have the honour to present to the Right Worshipful the Mayor, Aldermen and Councillors of the City of Exeter, my Annual Report for the year 1945.

The Report has been prepared in accordance with instructions contained in Ministry of Health Circular 28/46, dated 11th February, 1946, and in accordance with the Sanitary Officers (Outside London) Regulations, 1935, and the Sanitary Officers Order, 1936. The essential statistical figures furnished by the Registrar-General were not available until July. In normal times, this information arrives usually in April or May, thereby facilitating the publication of the Report earlier in the year.

Once again the City has experienced a healthy year. The only infectious disease to become epidemic was *measles*, with one death. The total number of deaths attributable to notified cases of infectious disease was 6 only. There was one case of *typhus fever* (European louse-borne typhus) in a repatriated prisoner-of-war. This was discovered on Whit-Monday in a voluntary hospital while tracing contacts of a small outbreak which had occurred among ex-prisoners of war in the Midlands. The attack was a mild one and the patient made a good recovery. It says much for the precautions taken by the Army authorities that so few cases found their way to this country when the war in Europe ended. There was a slight rise in *dysentery notifications*, but only one notification in the *enteric fever group*, compared with six in 1944.

Every effort has been made to popularise the *prevention of diphtheria* by immunisation. It is significant that the only two fatalities recorded occurred in unimmunised persons.

Of the *general statistics*, the death rate is almost the same as that of the previous year. The sharp rise in the birth rate which occurred in 1944 has not been maintained, but the rate is still above the average of the past few years. The maternal mortality rate at 3.1 is satisfactory, especially as no death was due to sepsis. Unfortunately, infantile mortality has shown a rise from 44.2 in 1944 to 56.2. This was about the rate experienced in Exeter in the years just before the war. In two years, namely, 1935 and 1940, we enjoyed exceptionally low rates of 33.6 and 38.7 respectively. We should like to see a rate considerably below 40, but this does not seem likely in present circumstances. There are three main groups of causes of death in infants during their first year of life. These are (a) prematurity and congenital defects, (b) diseases of the respiratory system, and (c) enteritis. Of the 70 infant deaths occurring in Exeter in 1945, no less than 30 were in the first group, 17 in the second and 14 in the third. We have very little knowledge and, consequently, very little control of the first group. The second and third groups are preventable theoretically, although in actual practice the prevention and treatment of these conditions is beset by many difficulties. Very broadly speaking, efficient

ante-natal services should go some way, but by no means all the way, to reduce mortality in the first group. There is no doubt that the Council does provide efficient ante-natal services both directly and through the Exeter Maternity and District-Nursing Association. It is reasonable to suppose that patients who book with private medical practitioners receive ante-natal examination and treatment, although the scope of this may vary with circumstances. It is by no means so certain that patients who book with private midwives receive adequate supervision. In fact, it is difficult to see how a midwife acting by herself could perceive or even suspect some deviations from health in her patient. For this reason, it has been suggested in many quarters that the private midwife should arrange for her patient to have at least one examination by a competent medical practitioner during pregnancy. The objection usually made to this suggestion by private midwives is that they may lose their patient and fees. Various schemes have been advocated from time to time to safeguard the midwife's position. If, however, midwives made use of the public clinics, as they have a right to do, and attended with their patients, it seems very unlikely that they would lose their patients unless some condition was discovered which made admission to an institution essential. In that case, a scheme of compensation might be practicable. There is still a small number of women, including some married women, who do not arrange for ante-natal care at all. This is due to a mixture of carelessness and ignorance which may well lead to disaster for both mother and child. Finally, it is to be noted that expectant mothers do not make sufficient use of the protective foods and priorities granted by the Ministry of Food. So long as we remain a rationed country, it is essential that the expectant mother should safeguard her health and that of her child in this way. The Ministry has expressed its concern on more than one occasion at the way in which these benefits are ignored, and it has carried out careful enquiries from time to time to ascertain what can be done to effect improvement. I suspect that the only remedy is constant and varying advertisement, together with steady and persistent education by welfare medical officers, health visitors and other social workers. It is, I believe, a commonplace experience in trade that sales fall off if advertisement is curtailed. Doubtless, the same applies to this problem.

Regarding *nutrition* in general, we all had enough to eat in 1945. To achieve variety and make the best of what there is requires some ingenuity. So far as our examinations go, there does not seem to have been any falling off in the health and physique of school children, pre-school children and adolescents. We have no reliable figures for adults, but it is generally felt that the old and feeble may not fare very well. For many of these, being alone or in couples, the situation must be difficult even if their actual needs are quite modest. So much for the physical state of the community. It is difficult for a contemporary observer to assess fairly the mental attitude of people

to the post-war world. The rather abrupt change from a state of war to one of comparative quiet and tolerable security must have its effect. There is, for example, a pretty general sense of frustration that we cannot do and have all the things we would like to do and have as quickly as we could wish. As times improve, this feeling will pass. There is, perhaps, too, a tendency to attempt too many things at once and this can only lead to disappointment in the long run. In the early days of the war we were warned against wishful thinking. A warning against wishful planning might be timely. Castles in the air are a seductive form of fantasy.

The shortage of State registered and enrolled assistant nurses, and especially of midwives and health visitors, continues to be embarrassing. This is not due to any falling off in recruitment, but to increased demands for nurses of every kind; also to some extent to shorter hours worked and increased holidays granted. The rates of pay set out in the Rushcliffe code are attractive, if rather complicated. It is, perhaps, not generally known that the code has reached nearly 400 pages of closely printed regulations. Moreover, every new award is ante-dated, thus giving maximum trouble to the staffs of local authorities and voluntary bodies, besides making annual estimates worthless. It is, in fact, high time that some degree of stability was introduced in the matter of nurses' salaries. The nurses themselves would be the first to welcome it.

I desire to take this opportunity of thanking the Committees associated with the work of the Health Department for their ready help and sympathy, and to record my appreciation of the work of the staff during the year.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

G. F. B. PAGE.

22nd July, 1946.

CITY AND COUNTY OF THE CITY OF EXETER.

Public Health Committee.

MAYOR—

ALDERMAN V. THOMPSON.

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, J.P.

Councillor Mrs. E. E. POLLARD.

Councillor Lady Reed.

Councillor C. REW.

Councillor J. D. SEWARD.

Councillor R. G. SAUNDERS.
C.B.E.

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 Mrs. L. GARDNER.

Councillor C. S. MOORES.

Councillor W. W. BEER.

Councillor Mrs. E. E. POLLARD.

*Non-Members of the
Council :*

Mrs. A. EAGGER.

Mrs. M. COLLINGS.

Mrs. M. MILLER.

Mrs. M. PICKARD.

Mrs. S. 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.

Dental Surgeons.

*G. V. SMALLWOOD, L.D.S. (Eng.) (retired 30/6/45).

*J. F. A. SMYTH, L.D.S. (Eng.) (Temporary) from 1/7/45.

Assistant Dental Surgeon.

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

*Duties mainly in connection with the Education Committee.

District Medical Officers under the Social Welfare Committee.
(part-time).

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

No. 3 District. J. B. TRACEY, M.B. B.Chir., (Camb.). to 15th Aug.

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.

A. C. LEWIS.

E. E. POTTER (left 7/10/45).

G. C. HOPKINS (from 1/12/45).

Public Analyst.

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

Vaccination Officer.

E. S. HOWELLS.

Senior Health Visitor and Non-Medical Supervisor of Midwives.

MISS C. A. KNUCKEY (retired 10/10/45).

Senior Health Visitor.

MISS M. M. FOY (from 10/10/45).

Non-Medical Supervisor of Midwives (part-time).

MISS L. A. CULVERHOUSE (Devonshire Nursing
Association).

Health Visitors.

MISS B. M. KNUCKEY (retired 10/10/45).

MISS D. HICKSON.

MISS A. H. EDDS.

MISS F. L. GIBBONS.

MISS E. PHILLIPS (from 1/1/45).

MISS M. P. BLUEMEL (from 9/10/45).

MISS N. E. SMITH (from 15/10/45).

MRS. F. M. HOCKING (left 9/8/45)

MISS M. E. BLACK.

} Temporary.

Clinic Nurse.

MRS. T. S. TILLER (part-time) (from 12/11/45).

Tuberculosis Dispensary Nurse.

MISS E. K. SHEPPARD.

Matron of Isolation Hospital.

MISS G. HENSON.

Matron of Honeylands Tuberculosis Children's Sanatorium.

MISS F. JONES.

Matron of Mowbray House Municipal Maternity Home.

MISS O. STRINGER.

Clerks.

E. S. HOWELLS (Chief Clerk).

C. A. MERRICK (Senior Assistant Clerk) (left 28/11/45).

H. TUCKER.

J. BUSSELL (left 29/10/45).

E. H. J. WILSON.

W. J. LAVIS (appointed 10/9/45).

H. J. SYDENHAM.

W. H. STAMP.

A. H. WEST

MISS M. M. MILTON.

MISS G. KEATING.

MISS J. BENNION (left 31/8/45).

MISS B. YELLAND (left 30/6/45).

MISS C. HILDICK (appointed 10/9/45)

MISS L. CHANNING

MISS J. CHAPPLE.

MRS. D. MARSDEN (Temporary)

} Temporary.

} Maternity and
Child Welfare
Department.

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 Social Welfare Committee (part-time) :—

No. 1 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.). (*Resumed duties 15th August*).

Assistant Sanitary Inspector.—H. R. AMBROSE.

Clerks.

E. W. H. ELLCOME.

R. W. STILES.

R. J. BARKER.

S. SNELL.

C. G. SEAMARK.

I. ALFORD.

Vital Statistics.

| | |
|--|-----------|
| Area (acres) | 9,127.025 |
| Population (civilian) | 69,070 |
| Birth Rate | 18.04 |
| Death Rate | 13.8 |
| Maternal Mortality Rate (sepsis Nil, other 3.1) | 3.1 |
| Tuberculosis Mortality Rate | 0.76 |
| (pulmonary 0.62, non-pulmonary 0.14) | |

Death-rate of Infants under one year of age :—

| | |
|---|------|
| All infants per 1,000 live births | 56.2 |
| Legitimate infants per 1,000 legitimate live births | 53.3 |
| Illegitimate infants per 1,000 illegitimate live births | 71.8 |
| Deaths from Measles (all ages) | 1 |
| „ „ Whooping Cough (all ages) | nil. |
| „ „ Diarrhoea (under 2 years of age) | 14 |

INFANTILE MORTALITY.

The Infantile Mortality Rates for the year ended 1945 were as follows:

| | |
|--|------|
| England and Wales | 46 |
| 126 Great Towns, including London (census populations exceeding 50,000) | 54 |
| 148 Smaller Towns (census populations 25,000— 50,000) | 43 |
| London | 53 |
| Exeter | 56.2 |

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

| Year. | 1936 | 1937 | 1938 | 1939 | 1940 | 1941 | 1942 | 1943 | 1944 | 1945 |
|----------------------------|------|------|------|------|------|-------|------|------|------|------|
| England and Wales | 59 | 58 | 53 | 50 | 55 | 59 | 49 | 49 | 46 | 46 |
| Exeter | 62.3 | 56.1 | 56.4 | 42.1 | 38.7 | 68.04 | 49.8 | 48.5 | 44.2 | 56.2 |

There were 70 infant deaths, 33 of which occurred during the first twenty-eight days following birth.

RESIDENTIAL MEDICAL INSTITUTIONS.

| <i>Local Authority Hospitals.</i> | <i>Beds.</i> |
|---|--------------|
| Isolation Hospital, Whipton (Fever) | 98 |
| do. do. (Tuberculosis) | 36 |
| Honeylands, Children's Sanatorium, Whipton | 20 |
| Mowbray House Maternity Home | 18 |
| do. do. do. (Isolation) | 2 |
| City Hospital, 77 Heavitree Road (Public Assistance) | 295 |
| Mental Hospital (requisitioned by R.A.M.C.) | 384 |
| Redhill House (Devon County Council, Public Assistance) | 265 |

Voluntary Hospitals.

| | |
|--|-----|
| Royal Devon and Exeter Hospital | 349 |
| West of England Eye Infirmary | 50 |
| Princess Elizabeth Devonian Orthopaedic Hospital | 133 |
| Wonford House Mental Hospital | 130 |

Private Nursing Homes.

| | |
|--|----|
| Argyll Road, Duryard (medical) | 6 |
| Belmont, 1 Baring Crescent (surgical) | 9 |
| 18 Blackall Road (medical) | 6 |
| Ernsborough House, Colleton Crescent (chronic) | 24 |
| Woodhayes, 36 St. Leonard's Road (maternity) | 11 |
| Stork's Nest, 98 Topsham Road (maternity) | 4 |
| Southcroft, 87 Heavitree Road (medical) | 4 |
| St. David's, 31 St. David's Hill (medical and surgical) | 11 |
| St. Mary's, 25 Mary Arches Street (Diocesan Society for Girls) | 6 |
| St. Olave's, 32 Bartholomew Street East (Diocesan Society for Girls) | 17 |

AMBULANCE FACILITIES.

(a) For infectious diseases :—

| | |
|--|----------------------------|
| Two motor ambulances. | } Provided by the Council. |
| One utility motor van for discharging cases. | |

(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, 1945 | ..... | 190 |
| Since added | ..... | 29 |
| Died, transferred, removed, etc. | ..... | 20 |
| Number on Register, 31st December, 1945 | ..... | 201 |
| Three of those certified were under 50 years of age. | | |

Evacuation. At the end of the year there were 8 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 | ..... | 838 |
| (b) Others | ..... | 668 |

For streptococci

| | | |
|----------------|-------|-----|
| Widal | ..... | 5 |
| Blood Culture | ..... | 3 |
| Faeces culture | ..... | 281 |
| Urine culture | ..... | 13 |

FOR V.D. DEPARTMENT :—

| | | |
|------------------------------|-------|-----|
| For detection of spirochetes | ..... | 14 |
| For detection of gonococci | ..... | 616 |
| For detection of H. Ducreyi | ..... | 1 |
| For Wasserman reaction | ..... | 903 |
| Others | ..... | 80 |

For T.B., excluding examinations at Tuberculosis Dispensary,

q.v. :—

| | | |
|--------|-------|----|
| Sputum | ..... | 15 |
| Others | ..... | 4 |

Miscellaneous Examinations :—

| | | |
|----------------------|-------|----|
| Cerebro-spinal fluid | ..... | 19 |
| Others | ..... | 34 |

WATER SUPPLY.

The following information is given in accordance with instructions contained in Ministry of Health Circular 28/46, dated 11th February, 1946.

The City water supply is derived from the river Exe. The Waterworks, which are under the direction of the City Engineer and Surveyor, were described in detail in the Annual Report for 1938. There has been no substantial change in the arrangements, which may be represented briefly thus:—River Exe→intake near Stoke Canon→pipe line to works→alumina treatment→sedimentation→further alumina treatment→pressure filters, consisting of 32 Bell mechanical filters in eight batteries of four→sterilisation by chloramine treatment→adjustment of alkalinity by added lime water→filtered water reservoir→service reservoir→mains and branch mains→consumer. The supply has been satisfactory in quality and quantity.

Some 31 bacteriological tests were made by a qualified member of the Surveyor's staff, and 4 additional tests by the Public Analyst. All these were satisfactory. In addition, the Public Analyst carries out chemical and bacteriological analyses of the raw water at approximately quarterly intervals, together with such supplementary examinations as occasion may demand. The exact composition of the raw river water naturally varies somewhat according to the rainfall and the part of the catchment area affected. No plumbo-solvent action has been reported.

Report on Examination of raw water from Pre-Treatment House. Sample taken at 12.15 p.m. 10th October, 1945.

Characters.

| | | |
|-------------------|-------|--|
| Colour | ..... | yellow green tint. |
| Turbidity | ..... | clear. |
| Taste | ..... | natural. |
| Odour | ..... | none. |
| Suspended matters | ..... | traces of organic matter, diatoms and infusorians. |

Bacteria.

| | | |
|--|-------|--|
| Bacillus coli | ..... | absent from 0.1 cms.; present in 0.25 cms. |
| Streptococcus | ..... | absent from 20 cms.; present in 40 cms. |
| Colonies visible at the end of 72 hours on beef-peptone-agar at 22 deg. C. | ..... | 1,100 per cm. |
| Colonies visible at the end of 48 hours on beef-peptone-agar at 37 deg. C. | ..... |  |
| | | 120. |

Chemical Analysis—parts per hundred thousand.

| | |
|--|--------|
| Chlorine present as chlorides | 1.4 |
| Nitrogen present as nitrites | 0 |
| Nitrogen present as nitrates | 0.1 |
| Phosphates | 0 |
| Total hardness equivalent to calcium carbonate | 6.2 |
| Temporary hardness (annulled by boiling) | 3.8 |
| Permanent hardness (not altered by boiling) | 2.4 |
| Saline ammonia | 0.0026 |
| Albuminoid ammonia | 0.0050 |
| Oxygen absorbed in 4 hours at 27 deg. C. | 0.07 |
| Lead | 0 |
| Copper | 0 |
| Zinc | 0 |
| Iron | 0 |
| Total solid constituents | 11.5 |
| Organic matter observed on igniting solids | trace |
| Hydrogen ion concentration equivalent to pH | 7.4 |

Standpipes. The number of houses in the City which receive a common supply of water for domestic purposes from standpipes is 122, the supply being provided by 46 standpipes. The number of persons concerned is 323.

Wells. The number of houses with domestic water supply from wells only is 76, the number of wells being 45. In addition, 25 houses are supplied by the City mains and wells, and there are 17 wells used for trade purposes. (See also Report for 1943, page 12.)

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 Acts) | 121 |
| (b) Number of inspections made for the purpose | 126 |
| (2) (a) Number of dwelling-houses (included under sub-head (1) of above) which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1932 | — |
| (b) Number of inspections made for the purpose | — |
| (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | — |

| | |
|---|-----|
| (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 | 111 |
| 2. <i>Remedy of defects during the year without Service of Formal Notices :—</i> | |
| Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers | 95 |
| 3. <i>Action under Statutory Powers during the year :—</i> | |
| (a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :— | |
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs..... | 8 |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices :— | |
| (a) By owners | 7 |
| (b) By local authority in default of owners | 1 |
| (b) Proceedings under Public Health Acts :— | |
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 35 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices :— | |
| (a) By owners | 25 |
| (b) By local authority in default of owners | — |
| (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. <i>Housing Act, 1936. Part IV. Overcrowding :—</i> | | |
| (a) | (1) No. of dwellings overcrowded at end of year | 31 |
| | (2) No. of families dwelling therein | 55 |
| | (3) No. of persons dwelling therein | 214 |
| (b) | No. of new cases of overcrowding reported during the year | 23 |
| (c) | (1) No. of cases of overcrowding relieved during the year | 15 |
| | (2) No. of persons concerned in such cases | 70 |
| (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 | 17 |
| | No. of Council Houses dis-infested | 17 |
| | (b) No. of other houses found to be infested | 55 |
| | No. of other houses dis-infested | 55 |

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 treatment is spraying with Solution "D," obtained from Messrs. R. Sumner & Co., Liverpool.

DAIRIES, COWSHEDS AND MILKSHOPS.

There are on the register 72 Dairies, Milkshops and Milk-stores (where cattle are not kept) for the sale of milk by retail. This is one less than last year.

For the production of milk for wholesale and/or retail there are 41 Dairies where cattle are kept.

There are 2 collecting stations and 37 retail producers functioning in the City, and of the latter 17 occupy farms situated in the County. The 2 collecting stations receive milk from approximately 238 dairy farms, and in addition one of them receives a considerable quantity from another station situated in the County.

THE MILK (SPECIAL DESIGNATIONS) ORDER, 1936.

Licences for graded milks were issued as follows :—

Tuberculin Tested :

| | | |
|----------------------------------|-------|----|
| Production only | ..... | 1 |
| Combined Production and Bottling | ..... | 2 |
| Dealers and Supplementary | ..... | 67 |
| Bottling only | ..... | 1 |

Accredited :

| | | |
|----------------------------------|-------|---|
| Production only | ..... | 6 |
| Combined Production and Bottling | ..... | 1 |
| Dealers | ..... | 2 |
| Bottling only | ..... | 1 |

Pasteurising Establishments :

| | | |
|-----------------------------------|-------|---|
| 1 H.T.S.T. type and 1 Holder type | | 2 |
|-----------------------------------|-------|---|

BACTERIOLOGICAL EXAMINATION OF MILK.

SAMPLES EXAMINED

| <i>Designation.</i> | <i>No. not Satisfactory.</i> | <i>No. within the Standard of Cleanliness.</i> | <i>Total</i> |
|--|------------------------------|--|--------------|
| Tuberculin Tested, bottled on the Farm | 19 | 53 | 72 |
| Tuberculin Tested, bottled at Collecting Depot | 4 | 3 | 7 |
| Accredited | 15 | 21 | 36 |
| Pasteurised :— | | | |
| Holder Type | 4 | 23 | 27 |
| H.T.S.T. Process | 5 | 22 | 27 |

Of the Tuberculin Tested samples from producers in the City, 12 passed and 4 failed. Those from producers outside the City resulted in 41 passes and 15 failures. Tuberculin Tested "bulk" milk from various farms, *mixed* and bottled at a collecting depot, and sampled after being bottled, gave 57% failures in respect of cleanliness.

Of the samples of Accredited Milk, the failures of samples produced within the City was 45% and was largely due to the failure of the water supply at one farm for about three months. Of the County samples, 36% failed.

The samples of Pasteurised milk again present an improvement over those tested in previous years, the failures showing in the case of the "Holder" type 14.74% and of the H.T.S.T. Process 18.5%. *All* samples were within the limits of the Phosphatase Test.

TUBERCULOSIS AND CLEANLINESS.

The number of samples examined for tubercle bacilli—animal experiment—was 36, being 15 of Tuberculin Tested Milk, 6 Accredited, and 15 of Ungraded Milk. All were free from this disease.

These samples were also submitted to the usual cleanliness tests for graded milks, with results as follows :—

| | | |
|-------------------|-------|---------------------|
| Tuberculin Tested | ..... | 8 passed, 7 failed. |
| Accredited | ..... | 4 passed, 2 failed. |
| Ungraded | ..... | 6 passed, 9 failed. |

NATIONAL MILK TESTING AND ADVISORY SCHEME.

The activities of the Milk Improvement Committee of the Devon County Council were continued, and assistance in the matter of sampling at the Depot in Exeter—where platform tests are not done—was again given.

The number of samples taken and sent to Seale-Hayne College was 639, being 617 from producers in the County and 22 from producers within the City. Results of the resazurin test upon these samples are supplied to my Department, but follow-up investigations in respect of those in Category C—failures—are undertaken by officers of the County Council.

The Milk Testing Scheme now covers over 95% of the wholesale producers and over 90% of all the producers in the County after eliminating from the total those producers who only sell milk occasionally and for whom regular testing would not be possible.

PUBLIC ABATTOIR AND MEAT INSPECTION.

The number of animals dealt with at the Abattoir was 50,725, being 5,190 fewer than in 1944. All were systematically inspected and complete examinations were made of all casualties, and of normally slaughtered animals if unsound conditions in any degree were revealed by the regular preliminary procedure.

The percentage of cattle found *post mortem* to be affected with tuberculosis to a greater or lesser degree was 13.19, against 14.1 in 1944. These figures, and the fact that of 7,359 cattle slaughtered, 971 were tuberculous—160 of these being generalised—stress the need for a still more vigorous veterinary campaign amongst the dairy herds, including bulls, and for the branding or the immediate slaughter of all food animals that react to the Tuberculin Test.

Tuberculosis was also discovered in 14 young calves, being 0.18% of the number killed. Full particulars of these cases were supplied to the Animal Health Department of the Ministry of

Agriculture and Fisheries, whose Veterinary Officer very promptly carried out investigations which led in most instances to the discovery of tuberculous parents.

Since control started, meat produced at the Abattoir has supplied Exeter and eight other districts whose Local Authorities thus have the distinct advantage of our Inspection services without contributing to the cost of this work, which is considerable and has involved Sunday duty throughout the whole period of control.

Following the skilled work of inspection, precise records of condemnations are made and supplied daily to the appropriate Officers of the Ministry of Food.

These records give the following particulars :—

Code Number ;

Article condemned ;

Reason for condemnation ;

Weight.

OTHER FOODS.

Just over 19 tons of food other than carcase meat was condemned. This included canned foods, damaged cereals, fish, etc.

The canned foods were mainly cullings from stocks that had been held in reserve since the beginning of the War and although in some instances a percentage of these stocks were examined by Officers of the Ministry of Food, the final responsibility of passing or condemning rested upon our inspectors.

Referring generally to the important work of Meat and Food Inspection which for the whole war period has been exceptionally heavy in this large centre of Allied military activities, it may be stated that there has generally been cordial co-operation between the Officers of the Ministry, H.M. Forces, including the N.A.A.F.I., the wholesale and retail traders, and our inspectors. All Regulations of the Ministry as to the salvage of damaged foodstuffs for re-conditioning, or of unwholesome food for conversion to animal feeding stuffs or other purposes, have been strictly observed.

For security reasons, the publication during the War of items of exceptional interest was prohibited, but reference can now be made to an unprecedented episode in the activities of the Department, which is recorded in a report by the Chief Sanitary Inspector, dated August 18th, 1942.

The subject is " Food Inspection in the City following the recent Air Raids."

Space will not permit its publication in full, but the following extracts give an idea of the immense amount of foodstuffs involved.

During the raids of April 24th to 26th there was much contamination of foodstuffs—meat, vegetables, etc.—by glass splinter, flying debris and water.

At the Abattoirs nine calves were fatally injured by falling debris and much carcass meat was spoiled by damage, dust and grit. Whole carcasses destroyed were: of veal 57, mutton 7 and beef 1, while at damaged food shops in the City much carcass meat and other edible foods were spoiled.

It was, however, during the heavy air raid of May 4th that food damage and destruction was caused on a big scale and I doubt if it will ever be possible to assess this within a reasonable degree of accuracy. In many shops, both large and small, there was total destruction by fire, while in others destruction was not complete.

Three depots were set up for the reception of food as it was retrieved from the many damaged premises. Here it was examined, classified and marked for disposal according to the requirements of the Ministry of Food.

There was a very heavy store of canned meat, etc., and grain at the Palladium, Paris Street. Fortunately, the cans of meat, although somewhat damaged and badly soiled, were, in the main, salvable. In the basement, grain released from the floor above had filled the interstices between the stocks of canned goods and had, to a remarkable degree, insulated the canned food and protected it from the great heat generated in the burning building.

Another heavy consignment, comprising many thousands of cans of jam, peach pulp and slices, tomatoes, prunes, pork and beans and of vegetables, were removed by lorry from the devastated store in the goods yard at Central Station. Such tins as were so damaged as to be unsalvable were carted away and dumped, and the rest were taken to Pyne's Barn at the rear of the Lord Nelson Inn, Topsham. Damage to these tins was mainly external. The sound cans were removed and sent for re-treatment or processing to canning factories under the control of the Ministry of Food.

Other depots to which salvaged food was taken were a large Nissen hut in Haven Road, a portion of the Cattle Market and a lock-up shed in Sluggett's Field, Alphington Road. At the two former premises the salvaged food was kept in groups in order that original ownerships could be established.

The statistics show that 178,733 cans and packets or parcels of food were examined and classified. The total weight of food dealt with cannot be given—it must have been some hundreds of tons—but excluding the many lorry loads of completely spoiled goods and the carcass meat, the weight of food condemned was approximately 7 tons, which under all the circumstances was surprisingly low, and shews that no effort was spared to save every possible pound of food material for subsequent use either as reconditioned food, or for other purposes.

TABLE SHOWING CARCASSES INSPECTED AND THOSE CONDEMNED BY THE

| | Beasts | Calves. | Sheep and Lambs. | Pigs. |
|---|--------|---------|---------------------|-------|
| Number killed (including animals (emer- gencies) slaughtered before admission) | 7359 | 7872 | 34247 | 1247 |
| Number inspected | 7359 | 7872 | 34247 | 1247 |
| All Diseases except Tuberculosis :— | | | | |
| Whole carcasses condemned | 45 | 17 | 223 | 12 |
| Carcasses of which some part or organ was condemned | 1855 | 79 | 1795 | 174 |
| Percentage of number inspected affected with disease other than Tuberculosis | 25.83 | 1.22 | 5.86 | 14.91 |
| Tuberculosis only :— | | | | |
| Whole carcasses condemned | 160 | 11 | — | 6 |
| Carcasses of which some part or organ was condemned | 811 | 3 | — | 54 |
| Percentage of the number inspected affected with Tuberculosis | 13.19 | 0.18 | — | 4.81 |

WEIGHT OF MEAT AND OTHER FOODS SEIZED OR SURRENDERED DURING 1945.

| Description. | Tons. | Cwts. | Qrs. | Lbs. |
|---|-------|-------|------|------|
| Whole carcasses including offals on account of Generalised Tuberculosis | 45 | 11 | 2 | 10 |
| Parts of carcasses and offals, on account of Localised Tuberculosis | 21 | 13 | 0 | 26 |
| Whole carcasses including offals on account of diseases or conditions other than Tuberculosis | 17 | 6 | 3 | 15 |
| Parts of carcasses and offals, etc., on account of Local affections other than Tuberculosis | 18 | 1 | 1 | 14 |
| Imported Meat and offals | 0 | 18 | 0 | 11 |
| Other Foods, including fish | 19 | 0 | 3 | 10 |
| Total weight of Meat and other Foods seized or surrendered during 1945 | 122 | 12 | 0 | 2 |

FOOD AND DRUGS ACT, 1938.

There were 10 formal and 210 informal samples submitted to the Public Analyst.

Included in these figures were 9 formal and 157 informal samples of milk, and of the latter 4 were "appeal to cow" samples. Amongst the miscellaneous articles were samples of whisky and gin, fish paste, dried eggs, confectionery, cake flour and pudding mixtures, and a variety of drugs including 8 proprietary medicines, aspirin, and insulin.

The average percentages of milk fat and non-fatty solids in the milk samples (including those which were deficient or adulterated, but excluding the "appeal to cow" samples) were 3.57% milk fat and 8.8% non-fatty solids, which is very similar to the results obtained in 1944, and again well above the minimum standards of 3% fat and 8.5% non-fatty solids.

The major part of the milk samples were taken upon arrival of the milk at the two collecting stations, the place of production and delivery being at farms situated in the area of the Devon County Authority, and were mostly the morning's milk.

Informal samples from eleven such farms were certified to be deficient or adulterated as follows :—

- (1) Contained 4% added water.
- (2) Was 37% deficient in fat.
- (3) Contained 15% added water.
- (4) Contained 2% added water.
- (5) Contained 4% added water.
- (6) Contained 2% added water.
- (7) Was 6% deficient in fat.
- (8) 3 samples—
 - (a) Contained 6% added water and was 4% deficient in fat.
 - (b) Contained 2% added water and was 9% deficient in fat.
 - (c) Contained 6% added water.
- (9) Contained 5% added water.
- (10) Was 15% deficient in fat.
- (11) 2 samples—
 - (a) Contained 7% added water.
 - (b) Contained 4% added water.

Follow-up samples were taken by the Devon County Officers and in 6 cases, viz., Nos. (2), (5), (6), (7), (9) and (10) were certified to be genuine.

As regards the remainder, viz., Nos. (1), (3), (4), (8) and (11), all samples taken in course of delivery were certified, in the case of No. (3) to be deficient in fat, and No. (8) in both fat and non-fatty solids. Nos. (1), (4) and (11) were found to be deficient in non-fatty solids.

In all cases "appeal to cow" samples taken by the Devon County Officers indicated that the milk was sold in the state that it came from the cows, and deficiencies were small.

Two informal samples of a consignment of milk supplied from a local farm to a Collecting Station were certified (a) to contain 4% added water and to be 26% deficient in fat, and (b) to contain 4% added water, respectively.

Formal samples taken in course of delivery to the Milk Marketing Board showed (a) 5% added water and 15% deficiency of fat, and (b) 4% added water respectively. Informal "appeal to cow" samples were taken at the farm from four cows comprising the herd, and three of the cows gave percentages of fat and non-fatty solids well above the minimum standard. The fourth cow, however, gave the startlingly low results of 6.12% non-fatty solids and 1.24% fatty solids, and this cow's milk was excluded from the consignment.

An informal sample of milk purchased from a local retailer was certified to be adulterated with 6% added water, but a follow-up formal sample was genuine.

Samples of milk taken from the occupiers of the Collecting Stations before retail delivery were genuine, as were also a number of samples purchased from producer-retailers.

Except in the case of 6 samples all the miscellaneous articles were genuine. An informal sample of gin (which was, however, not purchased direct by a sampling officer) was certified to be adulterated with 26% added water. It was not found possible to obtain a formal follow-up sample of gin, but a sample of whisky purchased at the same inn was certified to be genuine. Two samples of cake flour, two of pudding and one of scone mixture, purchased from the same shop, had undergone spoilage through age, being infested with meal mites. These samples were informal, and all remaining stocks—24 packets—were surrendered and destroyed.

LEGAL PROCEEDINGS.

For having sold "brawn" when unfit for human food and for being in possession of brawn for sale in a similar condition, a Provision Company was fined £2 10s. 0d. and their Manager £1 0s. 0d. on each count, a total of £7.

DESTRUCTION OF RATS.

Infestation Order, 1943.

Rodent Officer's return of work for the year 1945 is as follows :—

| | |
|---|-------|
| No. of complaints received and investigated | 278 |
| No. of rats known to have been destroyed | 3,532 |
| No. of mice known to have been destroyed | 610 |
| No. of Contracts made (12 months) | 3 |
| No. of premises gassed | 73* |
| No. of premises baited | 257 |

* Includes 13 attacks over long stretches of river and canal banks.

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASE.

Experience of infectious disease in 1945 was once again favourable. The notifications received are set out in the accompanying table, and it will be observed that only three deaths of *notified* cases of infectious disease are recorded. Two of these were due to diphtheria and were in non-immunised persons; the other was ascribed to Paratyphoid B. in a patient aged 80. This organism was recovered from the stools, but the actual course and cause of the fatal illness were rather obscure. There was a history of "typhoid fever" in the past, which may well have been paratyphoid in days when exact bacteriological diagnosis was not available, and the patient may have remained an intermittent carrier of bacillus Paratyphoid B.

The total number of cases notified as diphtheria was 62, but in 9 cases the diagnosis was not confirmed, so that the net or corrected number is 53. Of these, 24 were immunised, or stated to have been immunised, and in this group all were under the age of sixteen except 5. In the non-immunised group of 29, there were 19 under the age of sixteen, and 10 over that age.

Dr. I. V. Ward has carried out a successful year's work at the immunisation centres, otherwise it is possible that the number of notifications and fatalities might have been larger. It is as well to note that the prevailing type of diphtheria organism in Exeter is the *gravis* type, and that the clinical features in unimmunised patients are usually fairly severe.

At mid-year it was estimated that 51.4% of the under-fives were immunised and 86.0% of the group 5 to 15, making no allowance for those immunised privately. The question of attempting to ascertain the number of children immunised privately has been carefully considered more than once; but the possibility of getting really accurate figures is small, whereas the figures given for those immunised by the public service are reliable. During the year a total of 1,101 children were immunised, and 833 of these were in the important 1 to 5 age group. In addition, 557 reinforcement doses were given to those immunised in early childhood who had reached school age. We attach considerable importance to these reinforcing doses.

The following memorandum was issued on 3rd December, 1945 :—

PUBLIC HEALTH OFFICE,

5, SOUTHERNHAY WEST,

EXETER,

3rd December, 1945.

MEMORANDUM ON DIPHTHERIA IMMUNISATION.

In two circulars, Nos. 193/45 and 194/45, the Minister of Health has emphasised the importance of doing everything possible to get the under-five population immunised. It would appear that in Local Authority areas up and down the Country, particularly County Authorities, a great variety of organisation exists. These circulars place the future responsibility for immunisation work on what is known as the Welfare Authority in terms of the Public Health Act, 1936. This, in effect, means County Councils and County Borough Councils, as opposed to District Councils, Non-County Borough Councils and similar smaller Local Authority bodies.

So far as Exeter is concerned, no drastic revision in the organisation is required. It is the intention of the Public Health Committee, as the Committee of the City Council dealing with infectious disease, to continue to supervise the whole of the immunisation work in the City for persons of all ages.

Medical Officers and Health Visitors will recollect Circular 2713 of 30th October, 1942, urging a systematic campaign by Health Visitors among

the parents of all unprotected children under five. Appropriate action was taken under this circular at the time and has been continued in every possible way.

Paragraph 7 of Circular 194/45 is important and is quoted in full :—

“ 7. The following are the methods which the Minister desires each Welfare Authority to adopt :—

“(1) Each Health Visitor should be made responsible for securing the immunisation of children under school age in her district. Her first aim should be to see that every infant whose parent consents is immunised at or about the age of one year. It is already her duty to visit in all cases of notified births and to follow up the first visit at appropriate intervals, and these visits should be used to explain the advantages of immunisation and seek parental consent to it. At the end of each quarter the Authority's Superintendent Health Visitor or Medical Officer should examine the Health Visitor's lists of notified births and check the position as regards all children who attained the age of one year during the quarter. There will remain (a) possibly some children visited during the first year of life whose parents have not refused immunisation, but have preferred to defer it ; (b) some unimmunised children who have passed their first birthday but not yet reached school age. The Health Visitor should continue to follow up cases of the first kind, and should also use all practicable means to ascertain what children there are in her district falling under (b) and to obtain the parent's consent to immunisation.”

The Assistant Medical Officer in charge of immunisation should confer with the Senior Health Visitor to make sure that the above suggestions of the Minister are being carried out.

Any suggestions from Health Visitors or other members of the staff for improving the immunisation arrangements for the under-fives will be welcomed.

The old pamphlets have been withdrawn as they are not altogether satisfactory and it is hoped that the Central Council for Health Education will shortly produce a more up-to-date pamphlet for distribution. At the same time, pamphlets are not considered the best method of propaganda. Of much more value is the word of the Health Visitor and the recommendation of one parent to another.

G. B. PAGE,

Medical Officer of Health.

The 61 dysentery notifications may be classified as 39 Sonne, 17 Flexner and 5 unspecified. The increase of dysentery in England during the war was commented upon in the last report.

The single case of Typhus (European louse-borne typhus) occurred in an ex-prisoner of war from Germany. The attack was mild, but the diagnosis was fully confirmed by the appropriate tests. The Exeter City Isolation Hospital is one of the centres in the country which maintains a specially protected and equipped team for dealing with cases of this disease.

NOTIFIABLE DISEASES DURING THE YEAR.

| DISEASE. | Cases Notified. | | | | | | | | | | | | | Cases admitted to I. Hospital | Deaths. | | | | | | | | | | | | | Total |
|--|-----------------|----|----|----|----|-----|----|----|----|----|----|-----------|-------|-------------------------------|---------|---|---|---|---|---|----|----|----|----|----|-----------|--|-------|
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Under 1 | 1 | 2 | 3 | 4 | 5 | 10 | 15 | 20 | 35 | 45 | 65 & over | Total | | Under 1 | 1 | 2 | 3 | 4 | 5 | 10 | 15 | 20 | 35 | 45 | 65 & over | | |
| Diphtheria, including Membranous Croup | 7 | 4 | 1 | 2 | 1 | 13 | 10 | 4 | 10 | 1 | | | 53 | 53 | 1 | | | | | | | | | | | 2 | | |
| Scarlet fever | | 1 | 4 | 5 | 8 | 40 | 12 | 2 | 10 | 2 | | | 84 | 70 | | | | | | | | | | | | | | |
| Enteric Fever | | | | | | | | | | | | 1 | 1 | | | | | | | | | | | | 1 | 1 | | |
| Dysentery | 1 | 3 | 1 | 1 | 2 | 7 | 6 | 8 | 10 | 4 | 7 | 11 | 61 | 20 | | | | | | | | | | | | | | |
| †Puerperal Pyrexia | | | | | | | | | | | 2 | 19 | 3 | 24 | | | | | | | | | | | | | | |
| Pneumonia | | | | | | 2 | 1 | 2 | 3 | 8 | 10 | 9 | 35 | 1 | | | | | | | | | | | | | | |
| Cerebro-Spinal Fever | 1 | | | | | | | 1 | | | | | 2 | 2 | | | | | | | | | | | | | | |
| Erysipelas | | | | | | | | | | 3 | 2 | 8 | 14 | 3 | | | | | | | | | | | | | | |
| Poliomyelitis | | | | | | | | | 1 | | | | 1 | 1 | | | | | | | | | | | | | | |
| Whooping Cough | 16 | 9 | 12 | 18 | 12 | 36 | 2 | 1 | | | | | 106 | | | | | | | | | | | | | | | |
| Measles | 13 | 40 | 49 | 47 | 57 | 230 | 40 | 9 | 12 | 3 | 2 | | 502 | 22 | | | | | | | | | | | | | | |
| Ophthalmia Neonatorum | 2 | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |
| Malaria | | | | | | | | | | 1 | | | 1 | | | | | | | | | | | | | | | |
| Typhus | | | | | | | | | | | | | 1 | 1 | | | | | | | | | | | | | | |

† 3 of these cases were admitted to the Local General Hospital from the County Area for diagnosis and notified by the Hospital authorities.

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 1944 and are as follows :—

| | | | | |
|--------------------------------|-------|-------|-------|------|
| Births registered | ..... | ..... | ..... | 1699 |
| Vaccinated | ..... | ..... | ..... | 1018 |
| Insusceptible | ..... | ..... | ..... | 1 |
| Statutory Declaration received | | | | 471 |
| Died unvaccinated | ..... | ..... | ..... | 56 |
| Postponed | ..... | ..... | ..... | 9 |
| Removed to other districts | ..... | ..... | ..... | 124 |
| Removed to places unknown | ..... | ..... | ..... | 12 |
| Unaccounted for | ..... | ..... | ..... | 8 |

It will be noted that 59.9 per cent. of the infants were vaccinated, which is 1.3 per cent. below 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..... | 1936 | 1937 | 1938 | 1939 | 1940 | 1941 | 1942 | 1943 | 1944 | 1945 |
|-----------|------|------|------|------|------|------|------|------|------|------|
| Deaths | 124 | 117 | 121 | 127 | 144 | 151 | 142 | 116 | 143 | 114 |

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 & over | | Total | |
|-----|---|-----|---|-----|---|------|---|-------|---|-------|----|-----------|----|-------|----|
| M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| — | — | — | — | — | — | — | — | 5 | 3 | 14 | 23 | 26 | 43 | 45 | 69 |

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.

The hope expressed in last year's Report that the additional beds at Hawkmoor would be ready by the end of the year has not been fulfilled. Devon County Council has met difficulties in the matter of equipment and staffing, but it is possible that a few beds in the extension scheme will be available soon. Staffing, domestic and nursing, has become a very serious problem throughout the United Kingdom. Every report tells the same story.

There has again been a fall in the number of notifications received as well as in the number of inward transfers. The following figures show at a glance the main facts of the tuberculosis statistics for the City during 1945 :—

| | |
|---|-----|
| Total cases on Register, 1st January | 469 |
| Pulmonary | 315 |
| Non-Pulmonary | 154 |
| Total notifications received after deduction of 4 duplicates, but including 46 received otherwise than by formal notification | 144 |
| Pulmonary | 113 |
| Non-Pulmonary | 31 |
| Deaths during the year | 52 |
| Pulmonary | 42 |
| Non-Pulmonary | 10 |
| Outward transfers | 37 |
| Pulmonary | 29 |
| Non-Pulmonary | 8 |
| No. of cases removed from Register as “ Recovered ” or “ Mistaken Diagnosis ” | 45 |
| Pulmonary | 28 |
| Non-Pulmonary | 17 |
| Taken off Register under “ The Public Health (Tuberculosis) Regulations, 1930 ” | 7 |
| Pulmonary | 4 |
| Non-Pulmonary | 3 |
| Total cases on Register, 31st December | 472 |
| Pulmonary | 325 |
| Non-Pulmonary | 147 |

It is now possible to examine the course of events during the War. The figures do not reveal any startling changes. Both notifications and inward transfers have varied from year to year, but the expected increase in tuberculosis did not materialise although the pre-war downward trend of incidence and mortality was not maintained. In a word, the health of the City has not been adversely affected to any great extent by tuberculosis, in spite of overcrowding, rationing, excessive hours of work, anxiety and other factors. Of far more importance at the moment is the country-wide difficulty of maintaining effective hospital and nursing services, the latter including domiciliary nursing and visiting.

The population increased steadily up to May, 1942, when the City ceased to be a reception area.

| Year | DEATHS. | | | DEATH RATES. | | | DEATHS OF CHILDREN UNDER 5. |
|------|-----------|---------------|-------|--------------|---------------|-------|-----------------------------|
| | Pulmonary | Non-Pulmonary | Total | Pulmonary | Non-Pulmonary | Total | |
| 1939 | 42 | 10 | 52 | 0.59 | 0.14 | 0.73 | 2 |
| 1940 | 46 | 3 | 49 | 0.62 | 0.04 | 0.66 | 1 |
| 1941 | 47 | 13 | 60 | 0.57 | 0.16 | 0.73 | 3 |
| 1942 | 41 | 8 | 49 | 0.55 | 0.108 | 0.658 | 1 |
| 1943 | 44 | 11 | 55 | 0.64 | 0.16 | 0.80 | 2 |
| 1944 | 47 | 7 | 54 | 0.68 | 0.1 | 0.78 | 1 |
| 1945 | 42 | 10 | 52 | 0.62 | 0.14 | 0.76 | 0 |

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

| AGE PERIODS. | NEW CASES. | | | | DEATHS. | | | |
|----------------|------------|----|---------------|----|-----------|----|---------------|----|
| | Pulmonary | | Non-Pulmonary | | Pulmonary | | Non-Pulmonary | |
| | M. | F. | M. | F. | M. | F. | M. | F. |
| 0 | — | — | 1 | — | — | — | — | — |
| 1 | 1 | — | 1 | — | — | — | — | — |
| 5 | 2 | — | 3 | 3 | — | — | 3 | — |
| 10 | 4 | — | — | 1 | — | — | — | — |
| 15 | 4 | 7 | — | 2 | — | 4 | — | — |
| 20 | 2 | 10 | 1 | 2 | 2 | 4 | — | 3 |
| 25 | 6 | 7 | 1 | 1 | 8 | 4 | — | — |
| 35 | 8 | 3 | 3 | 2 | 3 | 6 | — | 1 |
| 45 | 8 | 3 | 1 | 1 | 3 | 4 | 1 | 2 |
| 55 | 7 | — | — | — | 2 | — | — | — |
| 65 and upwards | 1 | 1 | — | 1 | 1 | 1 | — | — |
| Totals | 43 | 31 | 11 | 13 | 19 | 23 | 4 | 6 |
| | 98 | | | | 52 | | | |

Ten cases were notified after death. These were 7 pulmonary and 3 non-pulmonary.

Maintenance Allowances—Memorandum 266T. This scheme came into operation in Exeter on 1st October, 1943. The scheme is welcome as a practical and reasonable contribution to the social problems connected with the treatment of pulmonary tuberculosis. The scheme provides for maintenance allowances for the families of patients suffering from pulmonary tuberculosis who undergo approved treatment; also, in certain circumstances, for financial help called "discretionary allowances" and "special payments." The scheme is intended to ensure that financial considerations do not stand in the way of curable cases of pulmonary tuberculosis getting the treatment they need. The scheme does not pretend to be one for the general assistance of all varieties and stages of the disease. No doubt, further developments will follow this experiment in due course. Hitherto, the arrangements have worked smoothly and have been of real benefit to those for whom they were intended.

During the year, 17 maintenance allowances were granted under the above Memorandum, the average grant made at the time of application being 35s. 8d. per week for applicants with dependants, and 13s. per week for those without dependants. These grants are, of course, subject to alteration from time to time, to allow for any reduction in National Health Insurance benefits, admission to sanatoria, etc., etc. One special payment of 3s. per week and one discretionary allowance of 5s. 7d. per week were also granted. The decrease in the number of maintenance allowances granted may be attributed to the smaller number of new male patients notified during the year, and to the increased number of these cases who were notified whilst serving in H.M. Forces, and who were consequently still in receipt of Service pay, or had been granted pensions by the Ministry of Pensions.

The total expenditure for the year was £1,459 11s. 8d., all of which will be reimbursed by the Ministry.

INSTITUTIONAL TREATMENT.

Tuberculosis Unit, Exeter Isolation Hospital.

| Remaining under treatment on 1st January 1945 | | | Admitted during the year | | | Discharged during the year | | | Deaths during the year. | | | Remaining under treatment 31st Dec., 1945. | | |
|---|----|-------|--------------------------|----|-------|----------------------------|----|-------|-------------------------|---|-------|--|----|-------|
| M | F | TOTAL | M | F | TOTAL | M | F | TOTAL | M | F | TOTAL | M | F | TOTAL |
| 17 | 15 | 32 | 37 | 31 | 68 | 31 | 24 | 55 | 5 | 6 | 11 | 18 | 16 | 34 |

Honeylands Children's Sanatorium, Whipton.

| Remaining under treatment 1/1/45. | | | Admitted during the Year. | | | Discharged during the Year. | | | Remaining under treatment 31/12/45. | | |
|-----------------------------------|---|-------|---------------------------|---|-------|-----------------------------|---|-------|-------------------------------------|---|-------|
| M | F | TOTAL | M | F | TOTAL | M | F | TOTAL | M | F | TOTAL |
| 9 | 9 | 18 | 12 | 9 | 21 | 12 | 9 | 21 | 9 | 9 | 18 |

Other Institutions.

| Institution. | Condition for which treated. | Remaining under treatment on 1-1-45. | | | Admitted during Year. | | | Discharged during Year. | | | Deaths during the year. | | | Re-Admission |
|---|------------------------------|--------------------------------------|---|-------|-----------------------|----|-------|-------------------------|----|-------|-------------------------|---|-------|--------------|
| | | M | F | Total | M | F | Total | M | F | Total | M | F | Total | |
| Princess Elizabeth Orthopaedic Hospital, Exeter | Spine | | 1 | 1 | 4 | 4 | 8 | 2 | 4 | 6 | | | | 2 |
| | Hip | 2 | | 2 | 9 | 1 | 10 | 10 | 1 | 11 | | | | 1 |
| | Knee | | | | 4 | | 4 | 4 | | 4 | | | | 1 |
| | Ankle | | | | 1 | | 1 | | | | | | | |
| Royal Devon and Exeter Hospital Exeter | Spine | 1 | | 1 | | | | 1 | | 1 | | | | |
| | Genito-urinary | | | | 2 | 1 | 3 | 2 | 1 | 3 | | | | |
| | Neck Glands | | | | 7 | 8 | 15 | 6 | 7 | 13 | | | | 1 |
| | Abdomen | | | | | 1 | 1 | | | | 1 | 1 | | |
| | Ischio-rectal | | | | 1 | | 1 | 1 | | 1 | | | | |
| | Lungs | | | | 1 | | 1 | | | | | | | 1 |
| | | | | | | | | | | | | | | |
| City Hospital Exeter | Hip | | | | | 1 | 1 | | | | | | | |
| | Lungs | | | | 1 | 1 | 2 | 1 | | 1 | | | | |
| | Genito-urinary | | | | 2 | 2 | 4 | | 2 | 2 | 1 | 1 | | 1 |
| Hawkmoor Sanatorium, Bovey Tracey | Lungs | | 1 | 1 | | 1 | 1 | | 2 | 2 | | | | |
| Nayland Sanatorium, Essex | " | | 1 | 1 | | | | | 1 | 1 | | | | |
| Preston Hall, Kent | " | | | | | 3 | 3 | | | | | | | 3 |
| Kewstoke Emergency Hospital Weston-S.-Mare | " | | | | | 2 | 2 | | 1 | 1 | | | | 1 |
| Total | | 3 | 3 | 6 | 37 | 20 | 57 | 28 | 18 | 46 | 1 | 1 | 2 | 11 |

The 48 admissions of non-pulmonary cases in this table refer to 36 patients, some of whom were admitted more than once.

TUBERCULOSIS DISPENSARY.

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

| | PULMONARY. | | | | NON-PULMONARY | | | | TOTAL | | | | GRAND TOTAL |
|--|------------|-----|----------|----|---------------|----|----------|----|--------|-----|----------|----|----------------|
| | Adults | | Children | | Adults | | Children | | Adults | | Children | | |
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | |
| Number of definite cases of tuberculosis on Dispensary Register at the beginning of the Year | 149 | 104 | 17 | 17 | 32 | 37 | 28 | 24 | 181 | 141 | 45 | 41 | 408 |
| Number of new cases diagnosed as Tuberculous during the Year | 35 | 30 | 8 | — | 6 | 8 | 3 | 5 | 41 | 38 | 11 | 5 | 95 |
| and Transfers | 14 | 10 | 1 | 4 | 3 | 1 | — | — | 17 | 11 | 1 | 4 | 33 |
| returned | 2 | — | 1 | — | 2 | 1 | — | — | 4 | 1 | 1 | — | 6 |
| Number of cases written off Dispensary Register | | | | | | | | | | | | | |
| Recovered | 11 | 7 | 6 | 1 | 6 | 5 | 2 | 3 | 17 | 12 | 8 | 4 | 41 |
| Dead (all causes) | 13 | 20 | 2 | 1 | 1 | 3 | — | — | 14 | 23 | 2 | 1 | 40 |
| Removed to other areas | 16 | 13 | 3 | 1 | 7 | 2 | 1 | 1 | 23 | 15 | 4 | 2 | 44 |
| For other reasons | 9 | 3 | 1 | — | 2 | — | 2 | — | 11 | 3 | 3 | — | 17 |
| Number of Persons on Dispensary Register on December 31st :— | | | | | | | | | | | | | |
| Entirely Tuberculous | 151 | 101 | 15 | 18 | 27 | 37 | 26 | 25 | 178 | 138 | 41 | 43 | 400 |

In addition to the notified cases shewn above, a further 222 new cases (175 adults and 47 children) were referred to the Tuberculosis Officer for examination during the year. Of these 194 (158 adults and 36 children) were diagnosed as not suffering from tuberculosis and removed from the Dispensary List, the remaining 28 being kept under observation at the Dispensary pending definite diagnosis. 65 new contacts were examined and 369 attendances were made by other contacts already known to the Department.

In all, 2,082 attendances were made by patients and contacts at the Dispensary during 1945, 155 home visits were made by the Tuberculosis Officer, and 745 by the Tuberculosis Dispensary Nurse.

BACTERIOLOGICAL EXAMINATIONS.

During the year 430 specimens of sputa 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 1,225 X-ray examinations were made (614 for screen only). Of this total, 32 examinations were made on behalf of the Ministry of Labour and National Service, and 33 examinations were made in accordance with the instructions contained in Ministry of Health's Circular 33/44, dated 21st March, 1944, referring to the medical examination of hospital staffs.

The greatly increased use of radiology in the diagnosis of tuberculosis and in the control of treatment is shown by the fact that ten years ago the number of X-ray examinations made was 218.

Dr. B. T. Jones continued to act as Temporary Clinical Tuberculosis Officer and Medical Officer in charge of the Dispensary. This opportunity is taken of expressing my thanks to Dr. Jones for his keen interest in the work and his untiring efforts to maintain the efficiency of the Department.

VENEREAL DISEASE.

With the approval of the Ministry of Health, the special clinic for these diseases is held at the Royal Devon and Exeter Hospital. The clinic deals with patients from the City and the County.

The hours of attendance are :—

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

| | | | |
|-------|-------|-------|---|
| Women | | | Fridays, 3—5 p.m., and Mondays, 6—7 p.m. |
|-------|-------|-------|---|

Attendances are not limited to clinic hours, but patients attend at other times for interim treatment. These arrangements are made known to all medical practitioners in the City.

There is also an arrangement with the authorities of St. Mary's Home (voluntary) for the treatment of unmarried mothers.

The incidence of venereal disease in Exeter is not high. The following table gives the figures for the past eight years of those attending for treatment for the diseases named for the first time. The figures for syphilis may be taken as representing fairly accurately the incidence of that disease locally, and tends to show some increase during the War. As a good many cases of gonorrhoea are treated privately, the figures are less reliable. Chancroid is unimportant in this country. The increasing number of persons seeking advice, presumably after exposure to the risk of infection, and found not to be suffering from venereal disease, may be regarded as an awakening of public opinion to the dangers involved. Equally satisfactory is the small number of patients who default before completing treatment and tests of cure.

Venereal Disease. Exeter.

| Year | New cases of Syphilis. | New cases of Gonorrhoea. | New cases of Chancroid. | Examined and found not to be suffering from V.D. |
|------|------------------------|--------------------------|-------------------------|--|
| 1938 | 17 | 44 | — | 24 |
| 1939 | 13 | 52 | — | 58 |
| 1940 | 9 | 36 | — | 66 |
| 1941 | 16 | 31 | — | 78 |
| 1942 | 23 | 42 | — | 65 |
| 1943 | 11 | 23 | 1 | 99 |
| 1944 | 34 | 19 | — | 134 |
| 1945 | 30 | 25 | — | 116 |

The total attendances of out-patients during the year amounted to 1,273, against 1,422 the previous year.

Examination of pathological material (1944 figures in brackets) :—

| | | | | |
|-----------------------------|-------|-------|-----|-------|
| For spirochetes | ..... | ..... | 14 | (8) |
| For gonococci | ..... | ..... | 616 | (688) |
| Wasserman and Kahn reaction | ..... | ..... | 903 | (817) |
| Other tests | ..... | ..... | 81 | (66) |

The following figures apply to the entire department and are not given separately for the City and County (1944 figures in brackets) :—

Number of cases who ceased to attend out-patient clinic :—

Before completing a course of treatment 29 (24)

Number of cases transferred to other treatment centres or to care of private practitioners 68 (96)

Number of patients discharged from out-patient clinic after completion of treatment and observation 298 (305)

Number of cases which ceased to attend after completion of treatment, but before final tests of cure — (—)

Number of cases who, on 31.12.45 were under treatment or observation 115 (128)

— (553)

The total number of cases under treatment at the end of the year showed a decrease of 13. The Clinic Medical Officer has the services of an almoner to assist in the following up of defaulters. He reports that the arrangement is satisfactory.

Mention should be made of the admirable national propaganda in newspapers, films and broadcasts of the Ministry of Health and Ministry of Information. There is no doubt that the public has been well informed about venereal disease in a straightforward and authoritative manner.

Defence Regulation 33B.

In 1 case two Forms I were received in respect of a contact and the necessary action was taken. Altogether 19 single Forms I were received in respect of alleged contacts. It was possible to take informal action in 7. The particulars in the remaining forms were too vague to permit of enquiries being made.

Informal action outside the scope of the regulations resulted in 7 contacts being traced, 5 of which submitted to examination or were already under treatment.

INFANT LIFE PROTECTION.

On the 31st December, 1945, there were 57 foster children in the City, and the number of registered foster mothers was 49.

The Health Visitors paid 303 visits to foster mothers during the year. The figures for the previous year were 60, 50 and 275 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- and Post-Natal Clinics and associated activities—have remained the same as in 1944 and have proved adequate.

There is a small increase in the number of children on the books of each Welfare Centre except Northern. This increase is most marked in the Central District and is due in part to attendances from other districts permitted as a matter of convenience to parents. There is a small decrease in the total number of attendances. A site has been agreed upon for the new Northern Centre in a corner of the extensive grounds attached to Honeylands Children's Sanatorium. It is impossible to say when building will begin, but it is reasonable to ask that the erection of the centre shall be included among the more urgent items of construction in the City. It will be necessary to re-draw the boundaries of the Health Districts when this Centre comes into use. A plan of these modified districts has been considered by the Maternity and Child Welfare Committee.

Experience shows quite clearly that the minimum staff of Health Visitors, who also act as School Nurses under the Local Education Authority, should be nine; that is, a senior health visitor in charge and eight others. This allows two health visitors and school nurses for each health district. From 9th August onward we have been one short, by reason of Mrs. F. M. Hocking, temporary health visitor, finding it necessary to resign for domestic reasons. It has been necessary to fill the gap by part-time assistance, owing to the acute shortage of qualified health visitors available for whole-time posts. It may be that some of the clinic activities will have to be staffed by married nurses, with or without a health visitor's certificate, working in a part-time capacity, thus freeing the whole-time health visitors for their essential duties in the homes and schools. In accordance with regulations made by the Ministry of Education under the Education Act, 1944, all school nurses appointed after 1st April, 1946, must be qualified also as health visitors.

Miss C. A. Knuckey and her sister, Miss B. M. Knuckey, retired on 10th October, 1945, after a very long association with the Health Department. Miss C. A. Knuckey, who combined the duties of Senior Health Visitor and Non-medical Supervisor of Midwives, joined the permanent staff in 1916. Previous to that she worked at the City Isolation Hospital before qualifying in London. Both the Miss Knuckeys will be long and honourably remembered for the valuable work carried out in the Department, particularly in connection with Child Welfare and among the poor of the old West Quarter. Miss M. M. Foy has been promoted to the post of Senior Health Visitor. The duties of Non-medical Supervisor of Midwives are carried out by Miss L. A. Culverhouse, Superintendent of the Devonshire Nursing Association. She also acts as Inspector of Nursing Co-operations under the Nurses Agencies Regulations, 1945.

Health visitors give approximately one-third of their time to the work of the Public Health Department, including the investigation of cases of infectious disease, one-third to Maternity and Child Welfare duties, and one-third to the work of the School Health Department.

I.—CHILD WELFARE CENTRES.

| Centre. | Average No. of Infants on Books. | Average No. of Attendances of Children. |
|-------------------------|--|---|
| Central District | 209 | 59.2 |
| Western District | 328 | 72.8 |
| Northern District | 330 | 71.4 |
| Eastern District | 331 | 63.6 |

Altogether 1,472 children under school age attended the Centres, making 13,138 attendances. The attendances of the various age groups were as follows :—

| | Under 1 | 1 to 2 | 2 to 3 | 3 to 4 | 4 to 5 | Total. |
|----------------|------------|--------|--------|--------|--------|--------|
| Central | 1881 | 505 | 314 | 127 | 43 | 2870 |
| Western | 2531 | 503 | 283 | 178 | 90 | 3585 |
| Northern | 2472 | 604 | 220 | 209 | 123 | 3628 |
| Eastern | 2165 | 415 | 234 | 144 | 97 | 3055 |
| Total | 9049 | 2027 | 1051 | 658 | 353 | 13138 |

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

| | |
|--------------------------------|------|
| No. of sessions held | 103 |
| No. of mothers attending | 371 |
| Total attendances | 1970 |

Of new cases :—

| | |
|---------------------|-----|
| Ante-Natal | 285 |
| For diagnosis | 4 |
| Post-Natal | 4 |

Referred by :—

| | |
|----------------------------------|---|
| Doctors at Welfare Centres | 3 |
| Health Visitors | 2 |
| Midwives | 4 |
| Private practitioners | 6 |

Miscellaneous (e.g., by office staff in cases already sanctioned by the Committee for the Maternity Home, by other mothers attending the Clinic)

278

Referred for treatment :—

| | |
|---------------------------------------|----|
| Dental treatment | 61 |
| Royal Devon and Exeter Hospital | 25 |
| Birth Control Clinic | — |
| Eye Infirmary | — |
| Dispensary | — |
| V.D. Clinic | 15 |

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 | 210 |
| No. of visits as midwives | 4027 |
| No. of cases attended as Maternity Nurses | 105 |
| No. of visits to cases as Maternity Nurses | 2210 |
| Total number of cases seen at the Clinics | 371 |
| Attendances at the Clinics | 1860 |
| Examined by Doctor | 363 |
| Visits to patients' homes | 1161 |
| Total number of cases seen at the Post-Natal Clinics | 56 |
| Total number of attendances | 346 |
| Examined by Doctor | 56 |
| Total number of Medical Aid Forms, for Mother or Baby | 70 |
| Total number of Medical Aid Forms, for Mother, ante-natal | 21 |
| Total number of cases referred to Hospital | 19 |
| No. of cases dealt with under lying-in-charity | 6 |

During the year 427 mothers attended the Associations' Ante-Natal and Post-Natal Clinics, making 2,206 attendances. Of this total, 419 attendances were to see the Association's medical officers, and 1,787 to see nurse-midwives.

The Association also undertakes nursing of the sick poor on behalf of the Public Health Committee. During the year, 1,335 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.

1,215 notifications of live births were received during the year ; 99.1 per cent. of the notifications were made by midwives, and 0.9 per cent. by medical practitioners or relatives.

In 318 instances the midwives summoned medical help, in accordance with the rules of the Central Midwives Board, while 58 other notifications in connection with still births, artificial feeding, etc., were received.

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

| | |
|------------------------------------|-----------------|
| Premature labour | 7 |
| Ruptured perineum | 119 |
| Prolonged labour | 31 |
| Abnormal presentation | 10 |
| Ante-partum haemorrhage | 8 |
| Post-partum haemorrhage | 10 |
| Adherent placenta | 5 |
| Stillbirth | 6 |
| Albuminuria | 3 |
| Miscarriage | 13 |
| Rise of temperature | 17 |
| Unsatisfactory condition of mother | 36 |
| Unsatisfactory condition of baby | 53 |
| Patient's wish | — |
| | <hr/> 318 <hr/> |

VI.—STILLBIRTHS.

The number of stillbirths during the year was 29. Of the 29 stillbirths, 20 were attended by doctors and 9 by midwives.

These may be classified as follows :—

| | Macerated, <i>i.e.</i> , died at some time prior to birth. | Non- Macerated. |
|---|---|--------------------|
| Difficult labour and abnormal presentations | — | 7 |
| Malformation of Infant | 2 | 2 |
| Toxaemia of pregnancy and albuminuria | — | 2 |
| Ante-Partum Haemorrhage | 2 | 1 |
| Ill-health of, or accident to mother | 4 | 1 |
| No cause assigned | 5 | 3 |
| Totals | 13 | 16 |

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

During the year, the health visitors paid 992 first visits and 5,063 subsequent visits to children under the age of 12 months and 6,492 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 House | ..... | 359 |
| Patients admitted to Royal Devon and Exeter Hospital | ..... | 185 |
| Other Institutions | ..... | Nil. |
| | | — |
| Total | ..... | 544 |
| | | — |

Two cases of pemphigus neonatorum occurred in the Home during the year. Both were removed to the Isolation Hospital for treatment.

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 193 cases have been referred. Of these, 12 failed to attend, 9 have left the City, 7 have died, 36 are known to have become pregnant, and 36 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.

Expectant and nursing mothers are referred for dental treatment by the Medical Officers of the Ante-natal Clinics, the Welfare Centres and the associated clinics of the Exeter Maternity and District Nursing Association. 72 mothers were treated during the year, and in most cases extractions and dentures

were found to be necessary. On the whole, oral conditions were bad, and there was evidence of long-standing neglect. Caries seemed more prevalent than pyorrhoea, and probably was responsible for the larger number of teeth lost. Extractions outnumbered fillings by more than ten to one.

Extractions were chiefly done under Nitrous Oxide gas during a part-session on Saturday mornings, the anaesthetic being administered by Dr. Ward, whom I should like to thank for the excellent results obtained, especially with continuous nasal administration. Particulars of work done are as follows :—

| | | |
|---------------------------|-------|-----|
| Fillings | ..... | 32 |
| Scalings | ..... | 17 |
| Extractions | ..... | 337 |
| General anaesthetics | ..... | 84 |
| Dentures | ..... | 40 |
| Attendances for treatment | ..... | 244 |

Treatment was carried out for 56 pre-school children from Welfare Centres and War-time Nurseries. 74 attendances were recorded, 122 teeth extracted and 68 filled ; 31 dressings of silver nitrate were applied.

An inspection of the Wartime Nurseries during August showed that of the 79 children examined, 15 (or 19%) needed treatment, and all but two of these accepted. The condition of the teeth was good, and the treatment mostly consisted of small fillings, showing the value to the teeth of the regular diet at these Nurseries. If a sound conservative policy for the temporary teeth is to be initiated, inspection should be carried out at not more than four-monthly intervals, since these teeth can only be filled satisfactorily when caries is just beginning. Failures almost always arise from trying to save teeth with large cavities, and are often used by parents as an argument against fillings. There is no question of the great importance of preserving the temporary dentition, both to maintain the size and growth of the jaws and give masticatory efficiency. But a satisfactory system requires thorough organisation, co-operation of parents and staff and a great deal of time, work and patience.

J. F. A. SMYTH,

Temporary Senior Dental Officer.

XI.—ORTHOPAEDIC TREATMENT.

During the year 63 children from the Infant Welfare Centres received treatment for the following conditions :—

| | | |
|------------------------|-------|----|
| Congenital deformities | ..... | 4 |
| Injuries at birth | ..... | 6 |
| Rickets and sequelae | ..... | 40 |
| Polio-myelitis | ..... | 2 |
| Miscellaneous | ..... | 11 |

XII.—OPHTHALMIA NEONATORUM.

| Year. | Cases. | | | Vision unimpaired | Vision im- paired | Total Blind- ness | Re- moved from dis- trict | Deaths | Total |
|-------|---------------|------------|---------------|-------------------|----------------------|----------------------|---------------------------------------|--------|-------|
| | Noti- fied | Treated. | | | | | | | |
| | | At Home | Hos- pital | | | | | | |
| 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 |
| 1944 | 3 | 1 | 2 | 2 | — | — | 1 | — | 3 |
| 1945 | 2 | 1 | 1 | 1 | — | — | 1 | — | 2 |

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. The other is a part-time nursery, admitting children from two to five years old. During the year it has been practicable to reduce the opening hours of the two whole-time nurseries slightly. They are now open from 7.15 a.m. to 6 p.m., instead of from 7 a.m. to 7 p.m. The part-time nursery is open from 8.45 a.m. to 5.15 p.m.

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 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.

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

After 1st April, 1946, the Ministry of Health will no longer control these nurseries directly nor defray the whole cost. They will be carried on temporarily by the Maternity and Child Welfare Committee on a grant-aided basis, at any rate, until the Local Education Authority's nurseries begin to operate.

In a joint circular, dated 14th December, 1945, the Minister of Health and the Minister of Education express the view that ideally the proper place for children under two years of age is at home, but it is frankly admitted that local circumstances and social conditions may make it desirable to provide some nursery accommodation for younger children. Moreover, the nursery schools to be provided by Local Education Authorities will be open only during times approximating to ordinary school hours and school terms, whereas nurseries provided by a Local Welfare Authority suffer no such limitations.

It will have to be decided in the light of experience whether there is a need or not in Exeter for nurseries of the two types which these Committees are able to provide.

XIV.—CARE OF PREMATURE INFANTS.

Under Circular 20/44, dated 22nd March, 1944 steps have been taken to obtain the birth weight of infants on the notification of birth forms, thus enabling Health Visitors to pay special attention to underweight babies.

Additional cots and other apparatus have been provided to the Exeter Maternity and District Nursing Association (responsible for the domiciliary midwifery service under the Midwives Act, 1936) for loan in suitable cases. The police ambulance is equipped with an electrically heated blanket.

It has not been possible to arrange any special hospital accommodation other than that provided by the Maternity Unit of the Royal Devon and Exeter Hospital; and there is no consulting paediatrician available within a reasonable distance.

At a joint meeting of local authorities and voluntary hospitals with representatives of the British Paediatric Association in August, steps for filling this gap in our consultant services were discussed.

XV.—CARE OF ILLEGITIMATE CHILDREN.

The Maternity and Child Welfare Committee has continued to give attention to the recommendations in Circular 2866, dated 1st October, 1943. The majority of illegitimate children are cared for by their relatives and come within the ordinary machinery of the Department. There are a few, however, where various social problems arise which can best be met by the existing voluntary and Service associations dealing with these matters. The real need, as the circular suggests, is for some one officer to co-ordinate existing services and to be in close touch with the Health Visitors and the Maternity Department.

Every effort is made to persuade mothers to bring their children regularly to the Child Welfare Centres, and attendance at the Centres is a condition of registration of foster-mothers.

During the year it was found necessary to replace the services of the whole-time Welfare Officer by a part-time Welfare Officer. The duties of this officer are important, though possibly not widely understood or appreciated. She has to work in close touch with the Senior Health Visitor, the Matron of the Municipal Maternity Home, the clerk in charge of the department, officers of the Social Welfare Committee and various voluntary bodies.

On the recommendation of the Maternity and Child Welfare Committee, the City Council has agreed to make a grant of £1,000 towards the cost of extensions at Dunraven Babies' Home (voluntary) in order to bring the Home up to the standard required as part of the local training scheme for the National Nursery Certificate (Circular 221/45, dated 14th December, 1945), and to further implement arrangements under Circular 2866 concerning provision for illegitimate infants.

XVI.—SUPPLY OF SHEETS FOR EXPECTANT MOTHERS.

Circular 154/44, dated 3rd November, 1944. This scheme, whereby expectant mothers can obtain priority dockets up to a maximum of three sheets in certain circumstances, is in operation.

XVII.—SHORTAGE OF RUBBER TEATS FOR FEEDING BOTTLES.

Under the instructions of the Ministry, the remaining available stocks from Civil Defence Rest Centre Stores were released free of charge. The supply position appears to be somewhat easier now.

EXETER ISOLATION HOSPITAL.

Accommodation and ambulance arrangements 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 37 fever patients remained under treatment, 9 of these being from the County. During the year 354 patients were admitted, 122 from the County and 232 from the City. At the end of the year 16 patients remained under treatment—4 from the County and 12 from the City.

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

1945.

| Disease. | Remain- ing. | Ad- mitted. | Discharged. | | Deaths. | Remain- ing at end of year. |
|---------------------------------|-----------------|----------------|-----------------------------------|---------------------------------------|---------|--------------------------------------|
| | | | Diag- nosis con- firmed. | Diag- nosis not con- firmed. | | |
| Scarlet Fever | 13 | 119 | 118 | 8 | — | 6 |
| Diphtheria | 16 | 98 | 74 | 31 | 4 | 5 |
| Vincent's Angina | — | 3 | 1 | 2 | — | — |
| Tonsilitis | — | 1 | 1 | — | — | — |
| Enteric Fever | — | 3 | 1 | 2 | — | — |
| Dysentery | 3 | 27 | 28 | 1 | 1 | — |
| Mumps | — | 13 | 12 | — | — | 1 |
| Erysipelas | — | 8 | 7 | — | 1 | — |
| Measles | 2 | 33 | 26 | 9 | — | — |
| Pemphigus Neona- torum | — | 3 | 3 | — | — | — |
| C'bro-sp'l Meningitis | — | 16 | 4 | 5 | 3 | 4 |
| Whooping Cough | — | 2 | 2 | — | — | — |
| Chicken Pox | 3 | 13 | 15 | 1 | — | — |
| Rubella | — | 5 | 5 | — | — | — |
| Poliomyelitis | — | 3 | 2 | 1 | — | — |
| Typhus | — | 1 | 1 | — | — | — |
| Miscellaneous | — | 6 | 5 | — | 1 | — |
| Totals | 37 | 354 | 305 | 60 | 10 | 16 |

NOTES.

Scarlet Fever. 2 cases were complicated by chicken-pox. There were two examples of "surgical scarlet fever." In 8 cases the diagnosis was not confirmed. The correct diagnoses were as follows :—3 rubella, 2 tonsillitis, 1 measles, 1 common cold and 1 cerebro-spinal meningitis.

Diphtheria. 4 were temporary throat carriers and 6 nasal carriers. Of the 4 deaths, 3 were due to faucial diphtheria and had not been immunised, and the remaining death was due to septicemia. In 31 other cases the diagnosis was not confirmed. These were diagnosed as 16 tonsillitis, 10 Vincent's angina, 2 scarlet fever, 2 rhinitis, 1 catarrhal laryngitis. Two cases were nasal diphtheria and 1 case was complicated by chicken-pox.

Vincent's Angina. In 2 cases the diagnosis was not confirmed, these being cases of tonsillitis.

Enteric Fever. 1 case was paratyphoid B. The remaining 2 cases were not confirmed, 1 being broncho-pneumonia and 1 appendicitis.

Dysentery. 19 were examples of Sonne dysentery and 9 were examples of Flexner dysentery ; 1 case was not confirmed, being gastro-enteritis. The fatal case was due to food poisoning caused by B.Aertrycke (an elderly man in poor health).

Mumps. 1 case was complicated by orchitis.

Erysipelas. The fatal case was due to septicaemia with abscess of scalp.

Measles. In 9 cases the diagnosis was not confirmed. The correct diagnoses were as follows :—rubella 6, urticaria 1, effects of pheno-barbitone 1, tonsillitis with erythema not considered to be scarlet fever 1.

Pemphigus Neonatorum. 2 cases came from the Municipal Maternity Home and one case came from a County district.

Cerebro-spinal Meningitis. The 3 fatal cases were due to tuberculous meningitis, staphylococcal meningitis and post-measles meningoencephalitis. In 5 cases the diagnosis was not confirmed. The correct diagnoses were as follows :—pneumonia 2, otitis media 1, influenza 1, influenza and meningismus 1.

Whooping Cough. 1 case was complicated by chicken-pox and 1 by severe bronchitis.

Chicken-pox. 1 case was complicated by abscess of left groin (child of five). In 1 case the diagnosis was not confirmed, being purpura.

Poliomyelitis. 1 case was not confirmed, being gonococcal arthritis.

Typhus. This case was a returned prisoner of war.

Miscellaneous. Included in this group: 1 case of staphylococcal septicaemia (fatal), 1 sore throat, 1 rhinitis and nasal sinusitis, 1 miliary tuberculosis, 1 pleurisy with effusion, and 1 bronchitis.

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.

MEDICAL EXAMINATIONS MADE ON BEHALF OF THE COUNCIL.

| | |
|---|----|
| For admission to the Superannuation Scheme, sickness, or on return to employment after sickness or injury in the Services | 75 |
| For employment in War-time Nurseries | 13 |

In addition, all nurses employed in the nursing of pulmonary tuberculosis are medically examined, including X-ray examination, twice a year, and monthly weight records are kept.