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GLOSSOP Urban Sanitary Authority.



ANNUAL REPORT

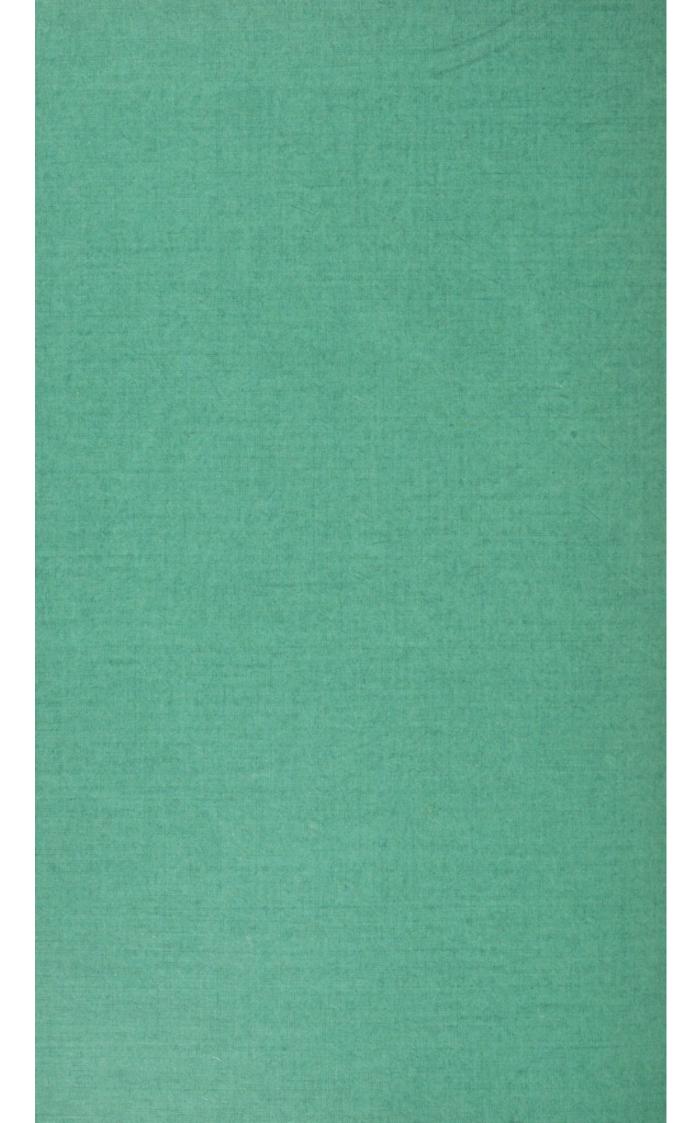
OF THE

Medical Officer of Health (E. H. Marcus Milligan, M.D., D.P.H.)

WITH THAT OF

The Sanitary Inspector (H. Dane, Cert. R.S.I., M.S.I.A.)

FOR THE YEAR 1936.





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ANNUAL REPORT

OF THE

Medical Officer of Health of Glossop, For the Year 1936.

HEALTH DEPARTMENT,

MUNICIPAL BUILDINGS,

GLOSSOP,

MAY, 1937.

To the Minister of Health and the Mayor, Aldermen and Burgesses of the Borough of Glossop.

GENTLEMEN,

I hereby submit to you my SEVENTEENTH ANNUAL REPORT on the health of the Borough of Glossop, that for the year 1936.

The Report contains a mass of statistics, and as the import of these may not be quite apparent to the general public, I preface it with a few explanatory remarks.

The Death Rate of the Borough for the ten years ending 1935 was 13.8, last year it was 14.67. The Death Rate of England and Wales for 1936 was 12.1. It must be remembered, however, that Glossop, with its low birth rate (which has been a feature of our statistics for a long time) has an abnormally large number of old persons for its size, and as these are more liable to die than younger people, a higher Death Rate is to be expected.

Actually, out of 277 deaths in 1936, 195, or over two-thirds of all deaths was of persons over 60 years of age, and 117 died at over 70 years, that is 42 per cent of the total. Glossop people it would seem, then, have a reasonable prospect of reaching the three-score years and ten spoken of by the Psalmist. Thirty-six of these were from 75 to 80 years and 25 over 80 years, whose "pride is reckoned but labour and sorrow."

At the other extreme, infancy, Glossop's Death Rate was very low, the infantile mortality rate being 33.4, a record for the Borough, and a rate much lower than that for the country as a whole, which was 59. Glossop is, however, a small place and an average for more than one year would be better; for the past 6 years (1931 to 1936) the Infant Mortality Rate average was 50.8.

This is extraordinary low, and more, rather the rate of a health resort than an industrial area.

The Death Rate from Pulmonary Tuberculosis is also low, though there is a slight increase this year (0.58); the average for the past six years was .42, compared with an average for the whole country of approximately .67 for the same period.

Again the Death Rate from Zymotic (infectious) Diseases is low, being .26 last year and .17 for the last six years.

Glossop, then, with its low Infantile Mortality Rate, its low Death Rate from preventible diseases, and the longevity of its inhabitants, shows a state of healthfulness which many a health resort might envy. But it has other things: The beauty of its natural surroundings, its nearness to a large city (Manchester) with all the cultural amenities appertaining thereto, and its own amenities, public parks with tennis courts and bowling greens, a golf course, swimming bath, cricket and football clubs, an up-to-date library with branches, excellent schools (including a secondary and a public school), two small modernised hospitals and an infirmary, a health department with a full range of ancillary clinics, reasonably good transport facilities by bus and rail, with the prospect in the near future of the latter being electrified, and gas and electric supply companies. rightly and justly entitle Glossop to be considered a first-class residential town; and note this, too, though near big and populous centres, Glossop is in the Peak of Derbyshire, one of the most beautiful parts of England, and one has hardly to walk beyond our boundaries to be in the real wilderness and the wild.

I must now return to my main theme, Health and Disease. We have seen that Glossop's "Preventible" Death Rate is low. There are, however, certain other classes of deaths that are too commonly overlooked in dealing with death rates. I refer to those which cause the largest number of deaths in most communities—Diseases of the Heart and Blood Vessels, Respiratory Diseases, Cancer and Nephritis; they are not in the classified death rate schedule given to Medical Officers of Health by the Registrar General. I must submit, I trust courteously, that I think they should be, with the rates for England and Wales attached.

I have said they are the largest killers—the very Atillas of the Men of Death they are.

In Glossop, for instance, while all Zymotic (Infectious) Diseases (Smallpox, the Typhoid group, Diarhoea and Enteritis, Scarlet Fever, Measles, Whooping Cough and Diphtheria) caused only 5 deaths, giving a death rate of .26, these wholesale devastators caused 192 deaths with a death rate (per thousand) of 10.11—that is almost forty times as many deaths as in the Zymotic group!

In the country, as a whole, there are somewhat similar large death rates from the groups of diseases I have mentioned, yet where, except for Cancer, is their general prevention stressed? and where does any Health Authority take concerted steps to combat them? Surely we need a new orientation in our public health policy?

The Public Health Acts even, in their latest form the Public Health Act of 1936, are largely behind the times. They deal with the conceptions we had of disease fifty or sixty years ago; but this year is 1937, not 1875, and time and the hour have changed the problem; the old sanitary abuses have been largely abolished, we have now clean water supplies, the water carriage system of sewage disposal, and prompt and reasonably satisfactory methods for disposal of refuse; housing is being improved, the milk supply is being carefully watched, and infectious cases are adequately isolated; vast numbers of our population are not now dying of "the plague," Smallpox or infections as hitherto, so while we must not relax the measures taken to produce these results, it is as clear as day that we must now deal with the new problems of death and disease that have arisen, and a concerted attack must be made on the diseases I have indicated.

It would take more space than many such reports as this to touch the fringe of the questions raised, but there are certain things I may mention: More education of the public in the causes and prevention of these deaths is needed, more hospital accommodation is needed for diagnosing and treating them, more co-ordinated action and co-operation is required between the State, Local Authorities and the Medical profession. For instance, Medical Officers of Health should be furnished with returns of disability under the National Health Insurance Act; more practical application of the principles of industrial medicine to industry is needed and a greater linking up of all the State medical services with the M.O.H. and the Health Department.

With the above general observation I will now return to consider our own town in particular.

We need in Glossop, and the need is urgent, far greater facilities and accommodation for the treatment of medical diseases, for others as well as those mentioned above; for instance, Pneumonia, Diabetes, Severe Anaemias, Rheumatism and Arthritis, to mention a few.

I know I am treading on delicate ground, and I apologise if I trespass too far. I think the time has come when the amount allowed to be levied by a health authority for hospitals should be increased, and that the State should survey and insist that there should be adequate hospital facilities in every area where the facilities are not adequate.

The 1929 Act made suggestions for the transfer of Poor Law hospitals to Health Committees, nothing should stand in the way of this being done. Public Assistance Committees must provide for the destitute infirm and diseased; the Public Health Committees should provide for all classes.

Some way or other in Glossop we want local hospital accommodation with all the latest medical equipment for diagnosis and treatment either on the spot or conveniently arranged for, with doctors of consultant standing on the hospital staff.

Wood's Hospital and the Manchester and Ashton Hospitals are doing splendid service and saving the lives of our surgical sick, our medical sick are no less worthy; the time has come to render to them service no less adequate.

Before concluding my preface there are some further points I must deal with, and I will try to be brief.

Our Water Supply is now, so far as we can reasonably see, pure and wholesome; our Food Supplies as regards those affected by the Food and Drugs Act, are efficiently looked after by our Sanitary Inspector; our Milk Supply, while equal to that in most areas as regards quality and cleanliness, etc., still needs careful supervision, 7 per cent of samples last year contained tubercle bacilli, and another 18 per cent were not up to the standard of less than 100,000 bacteria per 1 c.c. and freedom from Bac. Coli in $\frac{1}{100}$ c.c.

Our Housing conditions are gradually being improved, but old houses can't be easily made modern; approximately 4,800 out of 5,922 houses have no baths; the bulk of the houses of our working people share their W.C. with another family, and in most instances the back yards of their houses are common back yards.

These are matters that require improvement.

I would like to see every common back yard either divided up so as to make a small garden for each occupier or else converted into a playground for children; this is a reform that would not be costly, yet one which would make working people's dwellings much more liveable in.

Coming to our Clinics and Hospital: At Wood's Hospital last year 367 in-patients were treated: 359 operations were performed, namely: 233 General Surgical, 37 Gynaecological, 26 Orthopaedic, and 63 Tonsil and Adenoid cases. At the Partington Maternity Hospital, 116 cases were dealt with; at the Maternity Clinics (at the Maternity Hospital and Municipal Buildings) 194 women were seen antenatally and made 848 attendances. Twenty-six mothers attended after birth, the percentage of expectant mothers attended after birth, the percentage of expectant mothers attending being 87.7. This is exceedingly good, for not only is the treatment and advice helpful to the mother, but to the child to be. This point, perhaps, accounts for the smaller neo-natal mortality among infants last year.

At these Clinics and the Child Welfare Clinics, milk was supplied to necessitous, expectant and nursing mothers and children under school age, and in all, during 1936, 2,848 gallons of liquid milk and 2,325 lbs. dried milk were supplied to them.

We are NOT, however, DEALING ADEQUATELY in this respect with mothers, and children from 1½ years to 5 years. Expectant and nursing mothers need 1½ pints of milk daily (League of Nations Committee) to keep in proper health instead of one pint given, while children over 1½ years need at least a pint from 1½ years to school age, whereas we give under our scheme very few children of that age milk.

On the one hand, we have the need for more milk to preserve the health of women and children; on the other, large quantities of milk are available.

It is estimated that almost 40 per cent of the total milk produced in this country is, as surplus milk, sold to manufacturers at a low price. in some cases as low as 5d. per gallon. It should at least be possible, then, to obtain milk for children under five years and for expectant and nursing mothers at the same cost as for school children, i.e., ½d. per one-third of a pint. Why delay the giving then till school age, allowing defects to develop before entry to schools? Why jeopardise the health of the expectant mother and the child to be by witholding it?

In 1936 there were 2,252 attendances of children under 1 year and 1,592 of children over 1 year at our Clinics, which means that practically 80 per cent of all children under one year attend.

As well as these Child Welfare Clinics for examination and advice there are other Clinics available for the treatment of infant children. All the School Clinics are available to them—Dental, Minor Ailments, Tonsil and Adenoid and Eye Clinics—while under the Maternity and Child Welfare Committee we have well attended Orthopaedic and Ultra Violet Ray Clinics.

The Dental, Ultra Violet Ray and Orthopaedic Clinics are also available for expectant and nursing mothers, and at Wood's Hospital there is a Gynaecological out-patients' department available; the arrangements, therefore, for mothers and children are fairly complete.

I now turn to an aspect of affairs which is not so satisfactory, indeed, rather saddening.

Our Birth Rate since 1931 appears to be stabilising itself at about 11 per 1,000. This figure shows that there are not enough children being born each year to replace our population; in other words, Glossop, unless the people who die are replaced by outsiders, is a dying town, whose population are committing race suicide.

Glossop is not alone a culprit in this respect, the birth rate for England and Wales last year was only 14.8, with a death rate of 12.1, so the country, as a whole, is getting near the danger point of insufficient replacement of population.

This problem is a national one, and as I write I see it is announced that a Government Commission will most likely inquire into this question.

Probably one of the causes is a false or "over-civilised" conception of life, which aims more at transient pleasure than permanent happiness.

Can a childless family, or a family with one or two children only, be really happy?

I doubt it; for the over-concentration by the parents on one or the few children of a small family does it or them harm, and the worry and ever-present anxiety of being left childless by bereavement are decidedly detrimental to the health and happiness of the parents, and to the children as well through reaction from them.

The only reasonable excuse I can think of for this unsocial parental attitude is the shadow of impending war, with the menace of air raids and their accompanying slaughter of innocent persons and children of tender age by explosive shells, incendiary bombs, bullets, poison gases or other such fiendishness.

Considerations of this kind are, however, outside a Medical Officer of Health's critical and official survey, though now it is part of his duties as an Air Raid officer to prepare to meet ills the prevention of which are not his but of the moral and political "sanitarians" of the State.

It is only left to him to think of a world gone mad and of Man not as Homo Sapiens, devilishly efficient though he be, but as some Frankensteinian monster bent on destroying the civilisation which has created him, and putting in its place:—

"A universe of death—
Where all life dies, death lives and nature breeds
Perverse, all monstrous, all prodigious things
Abominable, unutterable and worse
Than fables yet have feigned or fear conceived."

In conclusion, I cannot close my preface without thanking the Chairman and Members of the various Committees for which I work, for support given me during the year, my brother Officials for co-operation and advice, and my Staff for much work carried out efficiently under conditions that were not too easy owing to illness and other upsets.

I am,

Your obedient Servant,

E. H. M. Milligan, M.D., D.P.H.,

(Fellow Society of M.O.H. and the Royal Institute of Public Health), MEDICAL OFFICER OF HEALTH.

Section A.—General Details.

PUBLIC HEALTH OFFICERS.

- Medical Officer of Health, School Medical Officer, Medical Superintendent Fever Hospital, Medical Superintendent of Maternity and Child Welfare Services and Police Surgeon: E. H. M. MILLIGAN, M.D., D.P.H.
- Orthopaedic Surgeon to Maternity and Child Welfare Committee and Education Committee: Mr. H. POSTON (resigned 1936) ROLAND BARNES, M.B., B.Ch., F.R C.S. (as from Sept., 1936).
- Oculist to the School Medical and Maternity and Child Welfare Eye Clinic: PETER MALLOCH, L.R.C.P. and S.
- Surgeon to Tonsil and Adenoid Clinic of Education and Maternity and Child Welfare Committee: MARCUS MAMOURIAN, F.R.C.S.
- Obstetric Surgeon to Maternity and Child Welfare Committee, for Maternity Clinic, etc.: J. W. A. HUNTER, F.R.C.S. (resigned March, 1937); ROBERT NEWTON, M.D.
- Dentist for the Education and Maternity and Child Welfare Dental Clinic: Miss M. ROBERTSON, L.D.S.
- Sanitary Inspector, Food and Drugs Inspector and Housing Mr. H. DANE, Cert. R. San. Inst.
- Health Visitors and School Nurses:

Miss Roscoe, S.R.N. & C.M.B. & Cert. R. San. Inst Miss Bennett, ,, ,, ,,

Clerks: Miss E. H. Moore and Miss N. Anderton.

STATISTICS.

Area Land, 3,324 acres; Water, 17 acres.

Population (Gamesley included): 18,870.

Number of Inhabited Houses (Census 1931), 5,454; in 1936, 5,922.

Number of families or separate occupiers (Census 1931), 5,466. Rateable Value, £90,823, 1st April, 1937.

Sum represented by a penny rate £337, 1st April, 1937.

		M.	F.	Total.
Live Births: Legitimate	 	86	 119	 205
Illegitimate	 	2	 2	 4
Total Live Births	 	88	 121	 209
Deaths	 	120	 157	 277

Death 1	Rate (R.G.) 14.67.	Compar	ability	Factor	.98.	
Infa	ntile Mortality Rate			33.	4	
Birt	h Rate			11.	07	
Still	births			13		
	III to National					
	Vomen dying in, or i	in conseq	quence	of chil	dbirth	:
From	n Sepsis				0	
From	n other causes				1	
Dooths of In	fants under one year	of ago:				
		or age.			_	
	timate		•••		1	
Illeg	ritimate				0	
				_	-	
	Total				7	
Deaths from	Measles (all ages)					2
,,	Whooping Cough (a					1
,,	Diarrhoea (under 2	-				1
,,	Diphtheria					1
,,	Scarlet Fever					0
,,	Smallpox					0
	Influenza					2
,,	Encephalitis Lethan					0
,,			***			
,,	Typhoid and Parat	yphoid		***	***	0

S.D. 55. Birth-rates, Death-rates, Analysis of Mortality, Maternal Death-rates, and Case-rates for certain Infectious Diseases in the year 1936.

England & Wales, London, 122 Great Towns, and 143 Smaller Towns.

(Provisional Figures, based on Weekly and Quarterly Returns).

(1 TOVISIO	mai	rigui	co,	Dasett On	weekiy an	u Quarteri	y Recuins)	
				England and Wales.	122 County Boro's and Great Towns including London.	143 Smaller Towns (resident pop'lations 25,000 to 50,000 at 1931 Census).	London Administrative County.	GLOSSOP.
					Rates per	1,000 Po	pulation.	
Births :-								
Live Still				14.8 0.61	14'9 0'67	15°0 0°64	13.6 0.23	11.07 0.68
Deaths:-						2000		
All Causes		 yphoi	d	12.1	12.3	11.2	12.5	14.67
Typhoid and P Fevers		урпот	u	0.01	0.01	0.00	0.01	0.00
Smallpox				_	_	_	_	_
Measles				0.02	0.09	0.04	0.14	0.10
Scarlet Fever				0.01	0.01	0.01	0.01	0.00
Whooping Cour	gh			0.02	0.06	0.04	0.06	0.02
Diphtheria				0.02	0.08	0.02	0.02	0.02
Influenza			***	0.14	0.14	0.12	0.14	0.10
Violence				0.52	0.45	0.39	0.25	0.28
Notifications :-								
Smallpox				0.00	0.00	_	_	0.00
Scarlet Fever				2.23	2.18	2.48	2.57	2.01
Diphtheria		1.00		1.39	1.31	1.26	1.69	1.00
Enteric Fever				0.06	0.02	0.06	0.06	0.02
				0.40	0.38	0.32	0.44	0.00
Pneumonia		***	***	1.11	1.10	0.96	0.99	0.84
					Rates pe	r 1,000 Li	ve Births.	
Deaths under 1 ye	ear c	fage		59	63	55	66	33
Deaths from Dia				00	00	00		00
Enteritis u							7	
of age .				5.9	8.2	3.4	14.4	4.7
Maternal Mortalit				1000		1		
Puerperal Seps				1.40)				0.00
0.1				2.41	Not	Not	Not	4.77
715 - 4 - 1				3.81	available	available	available	4.77
				Rates p	er 1.000 T	otal Births	(i.e. Live ar	d Still)
				- Tarto p			, Dire wi	
Maternal Martalit				1.01		1 7 9 9 9		0.00
Maternal Mortalit				344 1				11.1111
Puerperal Seps				2:31	Not	Not	Not	0.00
Puerperal Seps Others	is		*.1	2.31	Not available	Not available	Not available	4.20
Puerperal Seps Others Total								
Puerperal Seps Others	is		*.1	2.31				4.20

Statistics for I935 and Previous Years. Statistics for I935 and Previous Nature Previous Previous Presidents Publisis Urban Districts of Derbyshire. 13 02 16 69 0 70 0 27 178 Urban Districts of Derbyshire. 20 03 12 66 0 70 0 27 178 Urban Districts of Derbyshire. 26 60 11 96 0 72 0 65 Urban Districts of Derbyshire. 26 60 11 92 0 73 0 14 Urban Districts of Derbyshire. 27 8 12 96 0 74 0 75 Urban Districts of Derbyshire. 27 8 11 95 0 75 0 74 Urban Districts of Derbyshire. 18 9 11 95 0 75 0 74 0 74 Urban Districts of Derbyshire. 18 9 11 25 0 58 0 74 0 75 Urban Districts of Derbyshire. 18 9 11 25 0 53 0 74 0 75 Urban Districts of Derbyshire. 18 9 11 42 0 36 0 70 0 70 Urban Districts of Derbyshire. 16 5 11 42 0 36 0 70		Respiratory Infantile Death Rate Death excluding Rate. Phthisis.	9.80 68	000000000000000000000000000000000000000	94	244 93.4	7 97	5 64	7 84	D HO	3.1 77.7	2.11 77.53	2.4 58	1.77 76-2	213 75	1.67 76.4	3.3 81.9	20 74.2	2.28 45.7	2.02 75.9	2.51 69.2	154 72.6	61.	1.82 69.8		124 64-2	2.9 20.1	1.82 67.0	117 865.3	0.89 47.3	1.43 67.8			:	:	1.04 52.1	108 54.96	1.90 41.8	
Birth Death Death Death Bate.				:	:	0.10 0.78	.15 0 68	14 081	69-0	000	0.14 0.76	1.32 0.66	1.14 0.47	113 0 64			0.19 0.48	0 62	0		:	:	:	:	:	:	:	:	:	:	:			:	:	::	:		
hire. 20.13 16.69 15.37 hire. 20.38 16.94 15.37 13.92 16.94 15.37 13.92 15.66 17.8 hire. 20.38 12.66 17.8 hire. 20.8 12.9 hire. 20.8 12.9 hire. 20.8 12.9 hire. 14.9 13.3 hire. 20.8 10.6 14.9 hire. 13.3 hire. 20.0 14.9 hire. 13.3 hire. 13.3 hire. 13.3 hire. 13.3 hire. 13.3 hire. 16.5 hire. 16.9 hir	00			:	::	0.14 0	0.42 0	0.58 0	0.70	0.19	0.33 0	0.22	0.38	0.40			0.58	0.34 0	: :		:		:	::	***	:	:	:	:		:	:	: :		:		:		
hire. 20.38 hire. 20.13 hire. 20.13 hire. 20.38 hire. 20.01 hire. 20.8 hire. 13.3 hire. 13.3 hire. 13.13 hire. 15.5 hire. 15.5 hire. 15.5 hire. 15.5 hire. 16.5 hire. 16.9 hire. 16.9 hire. 16.9 hire. 16.9 hire. 16.9	and		18.80	07.	.91	. 13	12	13	11	11	13			11.05	13.99		15	11.	133	11.6	14.2	106	13 07	11.36	13.	10.58	14.6	11.5	12.4		11.46	13.5	11.26	14.4	11.32	14 4	10 58	12.4	TOT
	istics	Birth Rate.	19.00	20 01	hire. 20.13	15 37	hire. 20.38	20.01	Line 96 60	nire. 20 00 .	17.8	hire. 24.41	15.6	hire 91.78	16.09	shire 20.8	149	hire 19-9	14.13	hire.	13	hire. 18	13.3	hire, 17.47	13·13	hire 17.14 .	11.6	hire. 1		nire. 10 05 .	hire		hire.		hire.		hire.	11.9	

DEATHS OF PERSONS OVER 65 YEARS IN 1936.

During the year 1936 the following numbers of deaths of persons over 65 years occurred: 60 to 65, males 20, females 12; 65—70, males 27, females 23; 70 to 75, males 14, females 38; 75 to 80, males 14, females 26; over 80, males 11, females 14.

Out of 277 deaths in the Borough 195 were of persons over 60 years of age.

CAUSES OF DEATH IN GLOSSOP M.B., 1936.

(CIVILIANS ONLY). F. M. All Causes 120 157 Typhoid Fever, etc. ... 0 0 Measles 1 1 Scarlet Fever ... 0 0 1 0 Whooping Cough Diphtheria ... 0 1 Influenza 1 1 Encephalitis Lethargica 0 0 Cerebro-Spinal Fever ... 0 0 6 Respiratory Tuberculosis Other Tuberculosis 1 2 0 1 Syphilis General Paralysis of Insane, etc. 0 0 12 20 Cancer Diabetes 3 Cerebro Haemorrhage ... 6 11 Heart Disease 25 37 0 0 Aneurysm ... Other Circulatory Diseases 18 ... Bronchitis ... 3 9 9 6 Pneumonia Other Respiratory Diseases 0 1 0 Peptic Ulcer 0 Diarrhoea, etc. (under 2 years) 0 1 0 1 Appendicitis 0 1 Cirrhosis of Liver 1 Other Liver Diseases ... 0 2 3 Other Digestive Diseases 10 Nephritis 0 0 Puerperal Sepsis Other Puerperal Causes 0 1 ... 2 Congenital Causes, etc. 0 9 10 Senility 3 2 Suicide ... 2 4 Other Violence Other Defined Causes 12 16 Ill-defined Causes ... 0

Special Causes (include	ded a	bove):			
•			M.		F.
Smallpox			 0		0
Poliomyletis			 0		0
Polioencephalitis			 0		0
Deaths of Infants und	ler 1	year:			
Total			 2		5
Legitimate			 2		5
Illegitimate			 0		0
Live Births:					
Total			 88		121
Legitimate			 86		119
Illegitimate			 2		2
Stillbirths:					
Total			 6		7
Legitimate			 6		7
Illegitimate			 0		0
Population, 18,870	. (ompara	Factor	, .98	

CAUSES OF DEATH.

The total number of deaths in 1936 was 277, and the death rate per thousand 14.67; the chief causes of death are those tabled below:—

Diseases of heart and Blood Vessels		
(including Cerebral Haemorrhage)	104	 5.51
Respiratory Diseases (including Phthisis)	39	 2.06
Cancer	32	 1.64
Acute and Chronic Nephritis	17	 0.90
Zymotic Diseases	5	 0.26

The chief causes of death are still Diseases of the Heart and Blood Vessels, Cancer and Respiratory Diseases.

RESPIRATORY DISEASES.

The Table below gives the number of deaths (including Phthisis) from Respiratory Diseases since 1912:—

1912	 	 77
1913	 	 87
1914	 	 63
1915	 	 76
1916	 	 68
1917	 	 77
1918	 	 84
1919	 	 65
1920	 	 64
1921	 	 65
1922	 	 52

1923	 	 57
1924	 	 68
1925	 	 63
1926	 	 63
1927	 	 37
1928	 	 28
1929	 	 71
1930	 	 39
1931	 	 27
1932	 	 22
1933	 	 36
1934	 	 29
1935	 	 23
1936	 	 39

The death rate from Respiratory Diseases in Glossop, as compared with the rate in England and Wales will be seen by the following comparison:—

All Respiratory Diseases, Death Rates (Bronchitis and Pneumonia, etc., Phthisis):

			Glossop. per thousand.]	England & Wales. per thousand.
Ten years en	ding 1	921	 3.59		2.50
Year ending			 2.40		3.03
,,	1000		 2.75		2.55
,,	1924		 3.3		2.9
,,	1925		 3.17		2.8
"	1926		 3.2		2.5
,,	1927		 1.90		2.7
,,	1928		 1.42		2.25
,,	1929		 3.6		2.89
,,	1930		 1.9		2.04
,,	1931		 1.37		2.34
,,	1932		 1.11		2.04
,,	1933		 1.89		2.08
,,	1934		 1.51		1.86
"	1935		 1.46		1.76
,,	1936		 2.06		

The death rate from Pulmonary Tuberculosis itself in Glossop, as compared with England, will be seen by the following figures:—

Death Rates, Pulmonary Tuberculosis, per thousand.

			England and Wales.	Derbyshire	Glossop.
1891-1900	 	 	1.37	 1.07	 2.01
1901-1910				 .79	 1.29
1911-1920				 .69	 .95
1921-1925				 .58	 .65
1926-1931	 	 		 	 .48
1931-1935	 	 	.67	 .45	 .41

	England and Wales.	Urban Districts	3.	Glossop.
1922	88	64		.45
1923	83	58		.62
1924	84	62		.48
1925	83	68		.89
1926	77	58		.71
1927	79	54		.25
1928	75	55		.2
1929	0.50	0.55		.70
1930	0.73	0.5		0.5
1931	0.74	0.48		0.55
1932	0.68	0.44		0.35
1933	0.69	0.47		0.42
1934	0.63	0.43		0.47
1935	0.60	0.45		0.26
1936				0.58

DISEASES OF THE HEART AND BLOOD VESSELS.

(Including Cerebral Hæmorrhage).
The death rate in Glossop from the above diseases, as compared with that in England and Wales, is given below:-

				Gl	ossop.	Eng	land & Wales.
	1920	 			-		1.9
	1921	 			2.4		2.4
	1922	 			3.7		2.6
	1923	 			3.4		2.6
	1924	 			4.25		2.7
	1925	 			4.3		2.8
	1926	 			2.8		2.8
	1927	 			3.7		3.13
	1928	 			4.2		3.2
	1929	 			3.8		3.6
	1930	 			3.2		3.4
	1931	 			5.9		3.7
	1932	 			4.3		4.2
	1933	 			5.3		3.9
	1934	 			5.7		3.9
	1935	 			5.46		4.14
	1936	 			5.51		
			CAN	CER			
				Gl	ossop.	Engl	land & Wales.
	1933	 			1.78		1.59
	1934	 			2.52		1.63
	1935	 			2.20		1.65
	1936	 			1.64		
-	1001	 					

In 1931 the Death Rate was 2.02, in 1932 2.2, 1.78 in 1933, 2.52 in 1934, in 1935 2.20, and for 1936 1.64.

Regarding Death Rates, the Infantile Mortality Rate of 1935 was 33.4—the lowest ever recorded in the Borough.

Causes of Death of Children under 1 year.

Cause of Death	Under 1 week.	1—2 weeks.	2—3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths under 1 year.
				• • • •						•••
	• • •	•••				• • • •	• • • •			• • • •
				• • • •						
1 0 0						1				1
Diphtheria & Croup		• • • •	• • • •							
		• • • •								• • • •
Tuberculous Meningi		• • • •		•••				• • • •		
Abdominal Tuberculo	osis			•••				• • • •	• • • •	•••
Other Tuberculous										
										• • • •
Meningitis (not Tube	r-									
culous)		•••								1
					• • • •			• • • •	1	1
3 0				1	1				•••	1
				1						
Pneumonia(allforms)										
T									1	1
0 1 .1.				***					1	1
				***		***				
Syphilis Rickets		***			***	***		***		
Suffocation, overlying	···				***					
	6					***		***		
Injury at Birth Atelectasis										
Congenital Mal-							***			
formations	1				1					1
Premature Birth	1				1					î
Atrophy, Debility,	-									
3 3 5		12.00								
Icterus Neonatorum					2					
T 0										
Hæmorrhagic	107.5	0.000	2000							
Disease										
Pyloric	300						000			
Stenosis										
4 1 ' T' 'I				,						
T 6 (1) T2							1			1
Totals	2	0	0	1	3	1	1	0	2	7
Totals	-		0	-	0	-		0		

I give table shewing neo natal deaths since 1929:-

NEO NATAL DEATHS, 1929-1934.

	and the second s	
1929.	9. Live Births 228 Infant Deaths 17 (of which 8 under	er 4 weeks).
1930.	O. Live Births 245 Infant Deaths 19 (of which 9 under	er 4 weeks).
1931.	1. Live Births 230 Infant Deaths 10 (of which 4 unde	r 4 weeks).
1932.	2. Live Births 211 Infant Deaths 15 (of which 13 unde	er 4 weeks).
1933.	3. Live Births 203 Infant Deaths 14 (of which 7 under	er 4 weeks).
1934.	4. Live Births 211 Infant Deaths 11 (of which 5 unde	r 4 weeks).
1935.	5. Live Births 215 Infant Deaths 9 (of which 4 under	er 4 weeks).
1936.	6. Live Births 209 Infant Deaths 7 (of which 3 under	er 4 weeks).
Total	al Infant Deaths in the 8 years: 102 (of wh under 4 weeks).	ich 53 were

The Infant Mortality rate for 1936 at 33.4 is lower than that for the whole country, which is 59.

Section B.—General Provision of Health Services in the Area.

(1)	Public Health Officers.
	See front of Report.

(2) (a) Laboratory Facilities.

No change since 1934.

Bacteriological Specimens, 1936.

The following are particulars of specimens examined in the County Laboratory and Manchester University:

Glossop Borough.

Enterica:— Positive. Negative.

Typhoid, Paratyphoid A & B. 1 ... 7
Gaertner, Dysentery, etc. ... 0 ... 6

Diphtheria ... 7 ... 148

Phthisis ... 9 ... 39

Milk for T.B. Inoculation Test:-

	Po	sitive.	N	legative.
Milk and Dairies Act Routine		3		
Milk for T.B. (Micro.):—				
Milk and Dairies Act		_		
T.B. Order		1		-
Milk for Bacterial Count:-				
Routine Milk for Bacillus Coli:—		36		-
Routine		3		33
Miscellaneous:—				
Milk and Dairies Act		0		3
Other		2		5
		65		293

(b) Ambulance Facilities.

There are two Ambulances (motor) under the control of the Chief Constable, for general service and one (horse drawn) for Fever cases under control of the Health Committee.

(c) NURSING IN THE HOME.

There are two Queen's Nurses, both live out in their own District.

(d) CLINICS AND TREATMENT CENTRES.

Under the Education and Maternity and Child Welfare Committees; Maternity Clinic, Minor Ailment Clinic, Dental Clinic, Orthopaedic Clinic, Ultra Violet Ray Clinic, Eye Clinic, Tonsil and Adenoid Clinic, all at the Municipal Buildings, except the latter which is at Wood's Hospital.

Ultra Violet Ray Clinic: Children attended last year (under school age), 59.

(e) Hospitals Available

No change since 1931.

Work in Wood's Hospital during 1936:-

There are 24 beds in the Hospital and in these, in 1936, 367 persons were treated, the average number occupied being 20. Of the cases admitted, 27 were accident cases. These were: 233 General operations—37 Gynaecological operations, 26 Orthopaedic; and 63 Tonsil and Adenoid operations. At the Out-patients' Department 255 persons were examined.

HOSPITAL EXTENSION.

Early in 1937 a new Out-patients' Department was completed, consisting of waiting room, 2 cubicles, X-ray room, consultation room and doctor's room.

This extension was provided by money raised by the Ladies' Advisory Committee and their friends. It will be a very great boon to the patients to have the new facilities thus provided, and it is hoped much more work will now be carried out.

SPECIAL FACILITIES.

For Operative Surgery:—Wood's Hospital has an Operating Theatre fully equipped with Steam Steriliser, Operating Table and Instruments. The Matron and Nursing Staff have had special training in Theatre Work and there is a Consulting Surgical Staff. The Manchester Hospitals are also available.

X Ray:—A portable X Ray Apparatus has been installed by voluntary subscription in the Hospital.

Pathological Work:—Pathological Work is carried out by arrangement at the Ashton Infirmary in respect to cases at Wood's Hospital. The Manchester Hospitals are well equipped for Pathological Work and are also available.

Massage:—There is an Orthopædic Clinic at the Municipal Buildings and a fully trained Orthopædic Nurse attends; the District Queen's Nurses also carry out massage where required.

Dental and Orthopædic Work:—The Manchester Hospitals are available; they are supported by voluntary contributions. There are School Medical Clinics for Dental and Orthopædic work at the Municipal Buildings. Co-operation with the Local Authority:—The Glossop Corperation controls the Wood's Hospital, Partington Maternity Home and Gamesley Isolation Hospital, while the Gounty Infirmary is under the control of the County Council.

3) MATERNITY AND CHILD WELFARE.

(i) MIDWIFERY AND MATERNITY SERVICES.

The Partington Maternity Home has 11 beds for Mothers and several cots for Infants. This hospital (which is a voluntary one) is under the control of the Corporation (who are the Trustees) and the Corporation Medical Officer of Health acts as Medical Superintendent. The County Infirmary also takes in Maternity cases.

Midwives are engaged by the Maternity and Child Welfare Committee for necessitous expectant mothers, application has to be made to the M.O.H. and the mothers attend the Maternity Clinic (Ante and Post Natal).

There is a Dental Clinic available for expectant mothers.

In cases in which the Obstetric Surgeon of the Maternity Clinic considers it advisable for a Midwife's case to be nursed in the Maternity Hospital, the Midwife is eligible for compensation by the Maternity and Child Welfare Committee (10/6 is allowed).

- (ii) Institutional Provisions for Mothers and Children.
 Partington Maternity Hospital and County Infirmary.
- (iii) Health Visitors.

There are two.

(iv) Infant Life Protection.

The work is carried out by the Health Visitors under the supervision of the M.O.H.

(v) ORTHOPAEDIC TREATMENT.

There is a Clinic at the Municipal Buildings; cases requiring operation can be admitted to Wood's Hospital, Glossop, the Ancoats Hospital or the Manchester Royal or Salford Royal Infirmaries. Children under school age who attended during 1936 numbered 28.

MATERNITY HOSPITALS AND HOMES MAINTAINED OR SUBSIDISED BY THE COUNCIL DURING THE YEAR 1936.

Name and Address of Institution: 1. Partington Maternity Home, Glossop. Number of maternity beds in the Institution (exclusive 2. of isolation and labour beds) 11 Number of maternity cases admitted during the year...116 3. Average duration of stay (days) ... 4. Number of cases delivered by:-5. (a) Midwives (b) Doctors Miscarriages Transferred to St. Mary's, Manchester ... Cæsarian sections at Wood's Hospital ... Versions Number of cases in which medical assistance was sought 6.

by a midwife in emergency 11

7. Number of cas	es notified as:					
	peral Fever peral Pyrexia					0
8. Number of cas	ses of Pemphigu	s Neonat	orum			0
	fants not entire					
	ion					20
10. (a) Number of	cases notified as	Ophthali	mia Ne	onator	um	:
	Eyes					
(b) Result of	treatment in eac	h case:	Cured.			
	f Maternal Dea erred to Wood's					1
(b) Cause of	death in each o	ase: H		hage	and	
12. (a) Number of	of infant deaths					
	born (1 Ancer		2 in	Place	enta	
	eviac cases)					3
	nin 10 days of b					1
(b) Cause of	death in each o	ase, and	result	s of p	ost-	
	examination (i		able):-	_		
Co.	ngenital Heart I	Disease.				
MATERN	TY AND CH	ILD W	ELFA	RE		
D	ENTAL REPO	RT, 1936	3.			
Attendances made by	y Children for tre	eatment				26
Attendances made b	y Nursing Moth	ners				407
No. of Individual M	lothers treated					62
No. of Individual Ch						17
Permanent Extracti						418
Temporary Extracti	ons					18
Permanent Fillings						1
Temporary Fillings		•••		• • •		5
Permanent Dressing		•••			•••	151
Temporary Dressing					•••	9
Scalings Local Anæsthetics					•••	107
General Anæsthetics						167 4
Full Upper and Low		d			•••	11
Lower Dentures fitt		u				0
Partial Upper and I						2
Full Upper Denture						1
Repairs						0
			155		100	-

NOTIFICATION OF BIRTHS ACT, AND THE WORK OF THE MATERNITY AND CHILD WELFARE CENTRES.

THE MATERNITY	AND	Снич) WE	LFAR.	E CEN	TRES.	
The following are t	he de	tails of	the w	ork du	uring th	e year	:
Live Births							210
Stillborn							11
Opthalmia Neonatorum							1
Total Deaths under 1							7
First visits paid to noti						5	
Mothers died of Childh				-	and the same of		1
Revisits			***			64	
Visits under one year						O.	
Visits over one year			1000			39	
visits over one year		***				0.	,1,
Total Visi	ts					66	680
Visits to Expectant Mo	thers						
First Visits							88
Total Visits							88
10001 115105							00
CHILL	WEI	LFARE	CEN	TRES	.		
			Glos	ssop C	entre.	Hadfie	eld.
New Members				125		53	
Total Attendance of In	nfants			2731		1113	
Average Attendance				54		42	
New Babies seen by I				121		53	
Total Examinations by				847		355	
Number of Attendances						673	
Number of Attendances						435	
Specimens of Grand Total A							
Table Showing Car	ise of	Death	of Inf	fants 1	inder 1	Year	
		lears E					
Influenza			7			4	
Whooping Cou							
3.5						2	
Convulsions					2		
T) 1'''					1		
77.					4		
7.1 1						3	
T1 1 111					1		
0 1 111						5	
Congenital M					2		
Premature Bi					4		
Atrophy, Deb					4		
	-					7	
Syphilis . Atelectasis .						4	
						1	
- 1						4	
		thon				5	
Tuberculosis						8	
Injury at Bir	UII		***	***		0	

Overlaying	10					1
Epilepsy						1
Umbilical I						2
Other Dis						20
Total numb	ner of	Death	2			287
Number of						
Infantile M	ortalit	y Rate	for t	he 17	years	
ending	1936					62

MATERNAL MORTALITY.

All maternal deaths are investigated by the M.O.H. There was 1 last year, due to Shock and Hæmorrhage (following Cæsarian section).

A maternity hospital is available for all expectant mothers, and an obstetric consultant is also available for giving assistance where such is required.

MATERNITY CLINIC.

Total Number of Attendances by Expectant Mothers at the Clinic at the Municipal Buildings Total Number of Expectant Mothers who attended Clinic	448
above	112
Total Number of Expectant Mothers who attended at	The same
Maternity Hospital	
Total Attendances at the Maternity Hospital	400
Mothers can also obtain Post Natal Treatment as well Ante Natal, and 26 obtained such.	as

An investigation is being carried out regarding the Vitamin B 1 content in the blood, as insufficiency of this vitamin is likely to be injurious to health.

Section C.- Sanitary Circumstances of Glossop.

- (1) WATER AND DRAINAGE AND SEWERAGE.
 - (a) Water.

Analysis of Water Samples:-

- 24 Samples taken for full Chemical Analysis.
- 61 Samples of Water taken for Action on Lead.
 - 0 Samples of Water taken for Bacteriological Examination.
- (b) Drainage and Sewerage.

 No important change.
- (2) RIVERS AND STREAMS.

No important change.
Glossop Brook should occasionally be cleaned out and more steps taken to prevent rubbish and litter being tipped into it.

Nuisances,	ACTION TAKEN,	AND	RESULTS,	including
	Nuisances	re	Houses.	

Sanitary Inspections	 	13,097
Statutory Notices Served	 	52
Informal Notices Served	 	1,399

Informal Notices Served			1,39	9	
Not	of Informa ices Served by	i Se		No Aba	nisances ted, with
	Sanitary nspector.		Local thority.		
the state of the s	nspector.	At	ithority.	1	votice.
Drainage—					
No disconnection of Waste Pipe Defective Waste Pipe, Traps,	4		_		Man N
Defective Waste Pipe, Traps,					-
Inlets, and Drains	250		-		250
Drains Obstructed					
Closets and Ashpits					
Defective Privies, Pail Closets					
Ash Bins and Ashpits	450		-		450
Conversion of Privies into					
W.C.'s	12		-		12
Conversion of Pail Closet					
into W.C.'s or W.W.C.'s			-		_
Conversion of Privies inte	0				
Pail Closets			_		
Defective Water Closets					100
Provision of Additional Wate	r				
Closets	. 2		_		2
Provision of Portable Ash-					
bins	. 360		-		360
Dirty Closets	. 10		-		10
Other Defects-			1		
Paving of Courts and Yards		mostly issued and T. P. Acts			1
Roofs, Eaves Spouts, and		nss			
Down Spouts		W 18			
Sinks	100	d T	50)	380
Insufficient Ventilation	.}	an		1	
Windows		90 H	194		
Dampness		otic			
Water in Cellars	/ 4	Notice under I	11		8
Water Supply					10
Overcrowding	_		-		27
Foul Condition of Houses	. 30		-		30
Offensive Accumulations	. 31		_		31
Animals Improperly Kept	. —				-
Pigsties	. 2		_		2
Smoke Nuisances	. —		-		_
Urinals	. —		_		3
Nuisances not specified above	28		2		28
ridiatinees not openinea too is		-	40		-
	1399		52		1703

		nber on gister.	Inspectio Made.	ns	Notices Served.	A w w	isance bated ith or ithout otice.
Dairies (48), Cowsheds sellers (115) & Milksho			476		25		25
Bakehouses		70	 109		10		10
Slaughterhouses		19	 572		15		15
Offensive Trades .		5	 117		1		1
Common Lodging-house		2	 2		Chief (
		311	1276		51		51

Infected Rooms Disinfected.

Number (approx.), 600. Method: S.O², Formaldehyde Spray and Formaldehyde Gas, Bombay Liquid, etc.

SAMPLES SUBMITTED FOR EXAMINATION.

Water, Chemically, 61. Milk tested on Gerber Tester by the Sanitary Inspector, 67.

MANURE HEAPS-METHOD OF DEALING WITH.

Every Spring, notices regarding prevention of the breeding of flies are sent to all owners of manure pits and midden steads. Action is taken to see that ashpits are emptied regularly.

CHILDREN'S PLAYGROUNDS.

There are five playgrounds in the Borough; it would be a good plan to offer prizes for the best kept backyards, and so provide additional playing space near houses.

OPEN SPACES.

There are, in addition to the playing fields, 3 Public Parks and 2 Open Spaces belonging to the Council.

CLOSET ACCOMMODATION.

The number of Pails in the Borough is, approximately, 57; W.C's, 3,805; W.W.C's, 477; and Privies, 6, including factories and workshops. Ash Bins, 3,893; Ashpits, 58 (most covered).

Public Cleansing.

Refuse is removed by the Corporation and is paid for at present through the rates; there is no destructor and the refuse is tipped.

The instructions and precautions issued by the Ministry of Health in respect to Refuse Tips are adhered to. BURNING OF REFUSE.

There is no Destructor in the Borough.

SCHOOLS.

Action taken to prevent the spread of Infectious Disease in the Schools. See page 28 Report for 1933. The Education Authority are resurfacing school playgrounds in conjunction with the Managers of the Non Provided Schools.

GLOSSOP CORPORATION.

RAINFALL, 1936.

				Inches]	Inches
Janua	ry			3.48	July			5.28
Februa	ary			3.05				2.68
March				3.18	September			6.43
April				1.64				4.79
May				0.90	November	***		5.24
June				3.09	December			4.00
		Year's	Tot	al	44.06	inches.		
	Total	days w	ith (0.01 in	ches or mor	re	203	3
					iches or moi		169)

HEAVIEST RAINFALL IN 24 HOURS.

Inches						Inches		
January 24th			0.87	July 11th			1.02	
February 17th			0.71	August 19th			0.60	
March 2nd			0.53	September 7th			1.32	
April 12th			0.33	October 18th			0.78	
May 30th			0.29	November 9th			0.85	
June 12th			0.53	December 14th			0.66	

I am indebted to Mr. George Faulds, the Borough Surveyor, for these details.

September, November and July were the three wettest months; May, as for the previous year, the finest.

WATER SUPPLY.

EXTENSIONS OF MAINS.

No extensions during 1936.

CONTAMINATION OF THE SUPPLY.

There has been no serious contamination of the supply during 1936.

QUALITY OF THE SUPPLY.

The Swineshaw supply which supplies All Saints' and St. James' Wards (over 2/3rds of the Borough) is a very pure supply.

QUALITY OF SUPPLY.

During the year numerous tests as regards the quality of the Hadfield Water Supply were carried out regarding its lead solubility, and I am pleased to be able to report that there is no solubility now to an extent injurious to health.

I append the latest report on this question.

RESULTS OF ANALYSIS FROM THE CHEMICAL RESEARCH LABORATORY, TEDDINGTON.

The results of the last tests, 13/4/1937, were as follows:--

At 12, Beech Avenue, in 61 days used 100 gallons: Lead Sulphate found 2.7 mg. or 0.004 p.p.m. of lead.

At 102, Woolley Bridge, in 61 days used 245 gallons: Lead Sulphate found 15 mg. or 0.009 p.p.m. of lead.

The results of the last tests, 5/6/1937, at Glossop were as follows:—

					Gallons		Lead		Lead	
			in use	3.	passed		Sul	phate.		p.p.m.
12,	Beech	Avenue	. 71		182		15	mg.		0.012
102,	Woolle	ey Bridge	71		278		9.4	l mg.	*	0.005

Examinations at Manchester Public Health Laboratories.

The three samples of water received on 25th May, 1937, have been examined with results as follows:—

- 1. First draw from tap, Wilson's Houses, 162, New Shaw Lane.
- 2. Unfiltered water, Padfield Filter House.

First draw from tap, 85, Woolley Bridge Road.

1.	2.	3.
Colour	Yellow	Yellowish Green
Turbidity	Marked	None
Phenolophthalein	Acid	Acid
рН	4.0	8.0
Lead Content None	e 0.02	None
Action on Lead, 24 hours	0.60	0.17
Hardness—Temporary	1.0	2.0
Permanent	2.0	2.4
Total	3.0	4.4
Alkalinity in normal terms	10.	20.
Free and saline ammonia	0.0006	None
Albuminoid ammonia	0.0050	0.0022
Nitrites	None	None
Nitrates	0.045	0.039
Chlorides	1.3	1.3
Oxygen absorbed, 4 hours	0.12	0.057
Chalk in grains per gallon	0.7	1.4
(D) 1/2	00 000	

(Results expressed in parts per 100,000 parts-chalk excepted)

Yours truly,

HARRI HEAP.

The water is filtered by air scoured pressure filters and treated with alumino ferric lime and chalk.

The improvement in the quality is largely due to care in dosing exercised by the Engineer, Mr. G. Faulds, and the discovery by him of an improved way of adding the chalk.

Section D.-Housing Accommodation.

	HOUSING PROGRESS, 1936.	
$\frac{40}{5}$	New Temporary Buildings Other Buildings and additions to existing buildings The total number of inhabited houses is now	
	Number of new houses erected during the year:	
33	(a) Total	
0	(b) Included in (a) Total above, as part of a Municipal Housing Scheme	
	Inspection of Dwelling-houses during the year:	1.—Ins
4334	(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	(1)
4334	(b) Number of Inspections made for the purpose	
93	(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	(2)
370	(b) Number of inspections made for the purpose	
0	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (requiring closing order)	(3)
250	(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	(4)
	Remedy of Defects during the year without Service of formal Notices:	2.—Ren
	Defective waste pipes, leaky roofs, defective windows, accumulations, defective ash-bins, obstructed W.C.'s, traps, drains, sewers, etc., leaky or defective troughs, gutters and down	

spouts.

	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers for above
	3.—Action under Statutory Powers during the year:
	A.—Proceeding under sections 17, 18, and 23 of the Housing Act, 1930:
50	(1) Number of dwelling-houses in respect of which notices were served requiring repairs
	(2) Number of dwelling-houses which were ren- dered fit after service of formal notices:—
38	(a) by owners
0	(b) by local authority in default of owners.
	B.—Proceedings under Public Health Acts:—
2	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices:
2 0	(a) by owners (b) by local authority in default of owners
	C.—Proceedings under sections 19 and 21 of the Housing Act, 1930, and Slum Clearance Orders:—
102	(1) Number of dwelling-houses in respect of which Demolition Orders were made
93	(2) Number of dwelling-houses demolished or in process of demolition in pursuance of Demolition Orders
	D.— Proceedings under section 20 of the Housing Act,
0	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit
	E.—Proceedings under section 3 of the Housing Act.
0	(1) Number of dwelling-houses in respect of which notices were served requiring repairs

(2)	Number of dwelling-houses which were ren- dered fit after service of formal notices:—	
	(a) by owners	0
	(b) by local authority in default of owners	0
(3)	Closing Orders became operative in pursuance	U
F.—Pro	occeedings under Sections 11, 14 and 15 of the	
	Housing Act, 1925:—	
(1)		0
(2)	Closing Orders were determined, the dwelling-	0
(3)	Number of dwelling-houses in respect of which Demolition Orders were made	0
(4)	Number of dwelling-houses demolished in pursuance of Demolition Orders	0
HOUSING	ACT, 1930.	
The der	nolition of Clearance Areas is almost completed and	d
	at present is:—	
Watersi	de Area: 75 houses demolished; area completed.	
Woolley	Bridge Area: 12 houses demolished; area completed	
Jackson	's Court Area: 0.	

HOUSING ACT, 1936.

Gladstone Street Area: 5.

The Council, as a preliminary measure, have decided to build 20 houses to abate overcrowding found, contracts, as I write, are being asked for. The houses will be built on the Simmondley Lane site, adjacent to the other Corporation houses there.

Bowden's Yard Area: 2 partially demolished.

Linney's Court Area: 3 houses demolished; area completed.

Section E.-Food.

MILK.

I give herewith details of the bacteriological examinations of milk samples in 1936:—

Table Showing Result of Bacteriological Examination of Milk Samples, 1936.

No. of Animal Tested								
			Bacteria	В. (Coli prese	nt in	for Tubercle	
No.	Dat	e.	per c.c.	$\frac{1}{10}$	100	$\frac{1}{1000}$	Bacilli.	
1.	Mar.	4.	5,000	10	Nil	1000	Nil	
2.	Mar.	4.	13,000		Nil		Nil	
3.	Mar.	4.	5,000		Nil		Nil	
4.	Mar.	4.	5,000		Nil		Nil	
5.	April		15,000		Nil		Nil	
6.	April		13,000		Nil		Nil	
7.	April	7.	296,000		Nil		Nil	
8.	April		133,000		Nil		Nil	
9.	May	7.	4,000		Nil		Nil	
10.	May	7.	9,000		Nil		Nil	
11.	May	7.	32,000		Nil		Nil	
12.	May	7.	58,000		Nil	P	ositive, Animal	
	,						Destroyed.	
13.	July	9.	1,000		Nil		Nil	
14.	July	9.	5,000		Nil	P	ositive, Animal	
							Destroyed.	
15.	July	9.	1,000		Nil		Nil	
16.	July	9.	3,000		Nil		Nil	
17.	July	23.	3,000		Nil		Nil	
18.	July	23.	Nil		Nil		Nil	
19.	July	23.	6,000		Nil		Nil	
20.	July	23.	7,000		Nil		Nil	
21.	Sep.	17.	54,000		Positive		Nil	
22.	Sep.	17.	36,000		Positive		Nil	
23.	Sep.	17.	42,000		Positive		Nil	
24.	Sep.	17.	5,000		Nil		Nil	
25.	Oct.	7.	22,000		Nil		Nil	
26.	Oct.	7.	8,000		Nil		Nil	
27.	Oct.	7.	7,000		Nil		Nil	
28.	Oct.	7.	7,000		Nil		Nil	

Table Showing Result of Bacteriological Examination of Ice-Cream Samples, 1936.

		No. of Bacteria	B. Coli present in	
No.	Date	per c.c.	$\frac{1}{10}$ $\frac{1}{100}$ $\frac{1}{100}$	00
1.	August 13.	61,000	Nil N	
2.	August 13.	Nil	Nil N	il
3.	August 13.	3,000	Nil N	il
4.	August 13.	6,000	Nil N	il

TESTING FOR MILK FAT.

67 Samples were tested by the Sanitary Inspector on the Gerber Tester apparatus for the percentage of Milk Fat; the average for all samples was 3.66 per cent—a good average.

I give below table showing percentage of fat obtained in all samples tested from 1923 inclusive:—

Milk	Samples	Fat	Per	centag	e, 192	3 - 193	6:
	1936						3.66
	1935						3.77
	1934						3.6
	1933						3.58
	1932						3.81
	1931						3.78
	1930						3.58
	1929						3.6
	1928						3.76
	1927						3.62
	1926						3.47
	1925						3.73
	1924						3.7
	1923						3.6

From these data we can have a good idea of the cleanliness, presence of tubercle bacilli and fat percentage of our milk supply.

Two cases of tubercle bacilli were found in 28 samples in 1936.

Our percentage of milk fat works out at 3.65 per cent for the 14 years ending 1936.

WORK DONE DURING 1936.

Cowsheds:				
Total number of Cowsheds in Di	strict			88
Total number of Farms in Distric				48
New Cowsheds built				0
Sheds not now used for milk bea	sts			2
New shed floors laid				4
Shed floors repaired				3
Feeding troughs repaired or prov	vided	7		1
Lighting and ventilation improved	l			4
Lofts Removed				0
Loft floors improved				0
Drain inlets removed to outside				0
Drainage provided				1
Walls rendered in cement				1
Standing paved				3
Sheds remodelled internally				2
Approach paving repaired				0
Sheds cleaned up				12
Manure dumps moved				2
Manure dumps improved				1
Number of sheds at which work i	s com	pleted		2
Number of sheds at which work	is in	progres	S	0
Farms:				
New Dairies built				0
Dairies improved				2
Farms since given up				1

MEAT AND OTHER FOODS:-

I hereby give details of analysis and examinations carried out in 1936:—

OFFICIAL SAMPLES:				
Milk	 	 		17
INFORMAL SAMPLES:				
Butter	 	 		10
Sweets	 	 		7
Meat Sandwich	 	 	•••	1
Cheshire Cheese	 	 		14
Dried Milk	 	 		7
Pasteurised Milk	 	 		1
Lard	 	 •••		2
Totals	 	 		59

No prosecutions during 1936 but in one instance the vendor was warned regarding fat deficiency in milk.

MEAT AND FOOD INSPECTION.

(All voluntarily surrendered).

For Tuberculosis:	5	Bovine	Carcases	å	Organs.
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2 Pigs.

4 Bovine Forequarters.

14 Bovine Lungs. 3 Swine Heads.

For Hydated & Parasitic Cysts: 16 Bovine Livers.

18 Sheep Livers.8 Bovine Lungs.2 Pig Lungs.

For Inflammation: 2 Swine Lungs.

OTHER FOODS:-

Decomposition: 60 lbs. Bacon.

6 lbs. Jellied Veal.

NUTRITION.

A dietary survey is proceeding as I write, and an investigator, Miss Jackson, M.Sc., nominated by the Ministry of Health, is inquiring minutely into the diets, etc., of about 35 families, nearly all of whom have allotments, gardens, or poultry runs.

The Medical Officer of Health is examining the children in the respective homes and supplying details re health and nutrition.

An investigation regarding the Vitamin B 1 blood content of expectant mothers is also proceeding.

An investigation of total lengths, stem lengths and weights of children of pre school age is being carried out, figures being supplied to the Ministry of Health for this purpose.

Factories, Workshops and Workplaces, 1936.

1.—INSPECTION.

	Number of				
Premises. (1).	Inspections. (2)	Written Notices. (3)	Prosecutions (4)		
Factories 63 (Including Factory Laundries)	310	0	Nil.		
Workshops 68 (Including Workshop Laundries) Bakeries 70	500	0	Nil.		
Workplaces (Other than Outworkers' premises)	34	0	Nil.		
Total 201	844	0	Nil.		

2.—DEFECTS FOUND.

OF STORY OF SECTION	Number of Defects.							
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	Number of Prosecutions.				
(1)	(2)	(3)	(4)	(5)				
Nuisances under the Public Health Acts:—*				Control of the second				
Want of Cleanliness	12	12		Nil.				
Total	12	12	-	Nil.				

Oncluded in those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

OPHTHALMIA NEONATORUM.

There was 1 case during the year which was treated at home by a private doctor, no impairment of vision was caused.

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

GENERAL.

No change in procedure since 1931.

Antitoxin is given on application to private doctors free of charge for treating Diphtheria and in cases of Pneumonia Immunogen is supplied; Scarlet Fever Antitoxin is also used for severe cases of Scarlet Fever.

Toxoid Antitoxin is given to immunise children against Diphtheria and is also used for the Infectious Hospital staff. Schick Testing is carried out where indicated.

So far, immunising against Scarlet Fever has not been adopted.

INFECTIOUS DISEASES NOTIFIABLE IN GLOSSOP.

No change since 1931.

TUBERCULOSIS.

No action was necessary in 1936 under the Prevention of Tuberculosis Regulations, 1925, or Section 62 of the Public Health Act, 1925.

There is a Tuberculosis Care Committee in Glossop; this Committee, of which the M.O.H. is Secretary and the Tuberculosis Officer and Tuberculosis Nurse are members, supplies milk to tubercular persons and assists in other ways, such as provision of shelters, additional clothes, where this is necessary, for going to the Sanatorium. It may be said that any person in the Borough who is suffering from Tuberculosis and who requires additional nourishment, can obtain such through this Committee. The Committee works in close association with the Tuberculosis Dispensary, and cases are recommended by them for assistance.

TUBERCULOSIS.

New Cases and Mortality during 1936.

	New Cases.				Deaths.				
Age Periods.	Respiratory.		Non- Respiratory.		Respiratory.		Non- Respiratory		
	М.	F.	М.	F.	М.	F.	М.	F.	
0	_	_	_	_	_	_	_	-	
1 5	-	-		1	-		-	-	
		-	1	2 2	_			_	
15	3	3	0	2	2	3	0		
25	0	1	2	_	0	1		1	
35	3	0	-	-	2	1	1	-	
45	4	1	-	-	_	1	-	_	
55 65 and	1	-	-	0	1	-		1	
upwards	0	_	_	_	_	0		_	
Totals	11	5	3	5	5	6	1	2	

^{*} Specify the ratio of non-notified tuberculosis deaths to total tuberculosis deaths, and a note as to the efficiency of notification of tuberculosis in the area: No deaths were unnotified.

Is there evidence of excessive incidence of, or mortality from tuberculosis in a particular occupation in the area? No

Sent to Notified. Hospital 44000000000 800000 100000 Total 77 11 0 0 1 1 1 X Years 0000 0000000000000000 0000 691'70 years 99 - 97 0000 years HODDE 35 - 45 1021 years 0040100100000000 36 - 95 MILLO years 0 10 10 00 14 DISEASES, 1936. OO HOM 15 - 20 0 1 0 0 E years 00000000000000 AGE. GI - 01 years 01 of 6 years 0000 O K G of A 0 0 0 0 W years 000000000000000 INFECTIOUS 3 to 4 M F 0 0 0 0 0 1 0 0 15 Vears 000000000000000 S of 2 0000 K years 000000000000000 I to 2 0000 W 1 year Under Zymotic Diarrhœa (under 2 years)... Pulmonary Tuberculosis-Notified Died ... Other Tuberculosis-Notified Pneumonia with Meningitis Pneumonia (not specified) Acute Polio-Encephalitis Ophthalmia Neonatorum Encephalitis Lethargica Measles (under 5 years) Cerebro Spinal Fever Acute Polio-myelitis... Influenzal Pneumonia Puerperal Pyrexia Whooping Cough Puerperal Fever Scarlet Fever ... Enteric Fever Diphtheria Erysipelas Chickenpox

Health Propaganda.

The Journal "Better Health" is issued monthly and distributed to Mothers, Teachers and members of the Public generally. Precautions relating to Diphtheria and Influenza are also circulated through the local press.

Health Films were shown to all children between 11 and 14 years during Health Week at the two picture houses.

A Dental Exhibition, under the auspices of the Dental Board, was held in January and February, and talks were given to all school children on the care of their teeth.

The Fourteenth

Annual Report of the Sanitary Inspector,

FOR THE

Year Ending 31st December, 1936.

To the Mayor, Aldermen, Councillors and Burgesses of the Borough of Glossop.

Your Worship, Ladies and Gentlemen,-

It gives me great pleasure to submit to you the Fourteenth Annual Report as your Sanitary Inspector.

The year 1936 marked the completion of the Housing Overcrowding Survey so far as recording actual overcrowding. The survey as to "Permitted Numbers" is now well in hand, and I hope to have it completed and tabulated within the next few weeks. The number of overcrowded houses in the Borough, having regard to number of persons and non-separation of sexes, etc., is now probably about one hundred. After the appointed day (July 1st, 1937) all the known cases of overcrowding will be dealt with. Twenty houses are to be built in Simmondley Lane. These are to be used for overcrowded families, and will probably be followed by building more in some other part of the Borough.

The work of conversion of privies to the Fresh Water Carriage System in the Gamesley area of the Borough is completed. There are now only two privy middens in this area, and these will be dealt with at an early date. In many cases Ash Bins have been substituted for Ashpits, so naturally the sanitary conditions are greatly improved.

Now that I have a junior assistant I hope to deal with some of the old property and have it reconditioned and repaired.

SCAVENGING (HOUSE AND TRADE REFUSE).

The supervision of this work is under the control of the Borough Surveyor. The figures regarding Bins, Conveniences, etc., are approximately: 6 Privy Middens, 57, Pail Closets, 40 Ashpits, 3,905 Ash Bins, 477 Waste Water Closets, 3,805 Fresh Water Closets.

Ashbins are emptied weekly; Ashpits are cleared when found necessary. Offal Bins are cleared twice weekly, and the contents of the Pails and Privy Middens are cleared by various Carting Contractors.

We are still without Refuse Destructor or Steam Disinfector.

SANITARY INSPECTIONS OF THE DISTRICT.

Number of Inspections made		 13097
Statutory Notices served		 52
Informal Notices (written or verbal)		 1399
(See Report of M.O.H.)).	

DAIRIES, COWSHEDS AND MILKSHOPS.

The number of Retail Purveyors of Milk residing in the Borough is now 115. Of this number 67 are Milk Shops and 48 are Farmer-producers. All the children attending the Schools in the Borough are now supplied with Pasteurised Milk. The Milk Shops retail Raw or Sterilized Milk in Bottles or Cartons.

The figures given last year regarding Farms, Dairies, etc., are now a little different. They are: 48 Farms, 88 Cowsheds, 48 Dairies.

The retailers bringing milk into the Borough from farms outside our area number 43. These are all Farmer-producers.

MILK SUPPLY.

During the year under review the number of Milk Samples analysed by Mr. H. Heap, of Manchester, totalled 18; of these one was below the so-called standard. Appeal to cow samples were obtained and these also proved to be deficient in milk fats, so, therefore, no proceedings were taken against the vendor.

The farmer is now milking the herd at more regular intervals between morning and evening milking, so that the milk fats on each milking should now be more equal.

The average milk fats on the 18 samples was 3.64 per cent.

Sixty-seven samples of Raw, Sterilised or Pasteurised Milk have been tested on the Gerber Tester. The average milk fats in these was 3.66 per cent—a good average.

CLEANLINESS OF MILK.

The cleanliness of our Milk Supply is as a rule of a good quality. There are, of course, one or two exceptions. The number of milk samples forwarded to Derby for Bacteriological Examinations was 28. Two were found to contain Tubercle Bacilli. Further samples were taken from individual cows, with the result that the animals giving Tubercle infected milk were found and destroyed.

Sample numbered 18, a Pasteurised Milk, was negative for Count, B. Coli, and Tubercle Bacilli. The highest count was a Raw Milk (296.000). Three samples contained B. Coli in \(\frac{1}{100}\) c.c.

I am still of the opinion that a different method of retailing milk other than the Churn Can-Measure system should be enforced. Cleanliness and care are essential for a clean milk supply.

TUBERCLE BACILLI.

During 1936 two samples of milk were found to be affected with Tubercle Bacilli. This gives a percentage of 7.1 per cent on the samples examined.

In the year 1934-1935 we had no cases.

The Veterinary Inspectors of the Derbyshire County Council are now engaged in trying to eradicate all Tubercular animals from the Dairy herds in this County—a very necessary work and long overdue.

BACTERIOLOGICAL EXAMINATIONS OF MILK. CREAM, ICE CREAM, Etc.

Twenty-eight samples of various milks—Raw, Sterilised and Pasteurised—have been obtained from various vendors and forwarded to the Bacteriologist at Derby. Four samples of ice cream have also been obtained for bacteriological examination.

Two samples of milk were found to contain Tubercle Bacilli. Three samples contained B. Coli. The four ice creams were of satisfactory cleanliness.

For figures and further information I must refer the reader to the Report of the Medical Officer of Health.

FOOD AND DRUGS (ADULTERATION ACT) 1928

During the year the number of samples obtained for the purpose of analysis was 59. These consisted of: Milk, 18; Dried Milk, 7; Cheshire Cheese, 14; Meat and Cress, 1; Butter, 10; Sweets, 7; Lard, 2.

All the samples were reported to be genuine, with the exception of one Milk. This was found to be deficient in Milk Fat to the extent of 15 per cent. Appeal to the cow samples were taken and as these also were deficient in Milk Fats, no proceedings were instituted. The farmer was warned and suggestions as to more equal periods between the milking times were given. Further samples will be taken at some future time.

The average fats on all the 18 samples was 3.64 per cent. A good average, but not quite up to last year's (1935) figures.

RATS AND MICE (DESTRUCTION) ACT.

In this Borough all known cases of infestation by rats or mice are promptly dealt with. Proprietary poisons, Gassing Machine and Traps are used to keep the pests in check. The general public are supplied with certain Rat Poisons free.

The damage caused by infestations is very costly and if control over the pests is to be maintained the public should notify to the Health Department all cases of infestation by either Rats or Mice.

MEAT AND FOOD INSPECTION.

During the year under review the following Carcases, Meat, Organs and various Foodstuffs have been condemned as being diseased, unsound, or unfit for human food.

All were surrendered voluntarily to the Meat Inspector. Prosecutions: Nil.

For Tuberculosis: 5 Bovine Carcases & Organs.

2 Pigs.

4 Bovine Forequarters.

14 Bovine Lungs.

3 Swine Heads.

For Hydatid & Parasitic Cysts: 16 Bovine Livers.

18 Sheep Livers.

8 Bovine Lungs.

2 Pig Lungs.

For Inflammation: 2 Pig Lungs.

Other Foods—Decomposition: 60 lbs. Bacon.

6 lbs. Jellied Veal.

As previously pointed out in other Reports, the quality of Meat sold in the Borough is very good. The number of diseased carcases found in Slaughter-houses is very small.

SLAUGHTER-HOUSES.

We have now 16 Slaughter-houses in this Borough which are in regular use. A few of our butchers buy dead meat from Ashton and Manchester. I must compliment our butchers for their promptness in notifying to me any cases of disease or anything which is abnormal in the animals they are slaughtering or dressing.

Of course, it is a physical impossibility to supervise all the slaughtering which takes place, as the Slaughter-houses are in various parts of the Borough. The only solution would be to reduce the number of Slaughter-houses.

The number of inspections made was 572, and the defects found were 15. These were regarding neglect to renew the limewashing.

BAKERIES AND BAKEHOUSES.

The number of Bakehouses and Bakeries in the Borough is 70. Inspections are made to see if there are any insanitary conditions present. In a few cases I have had to draw the occupiers' attention to the fact that the limewashing required renewing. This was always promptly attended to when notified.

OFFENSIVE TRADES.

The number of Offensive Trades, i.e., Tripe Dressers, is 5. During the year under review I have made 117 inspections. As a rule these places are kept as sweet and clean as possible, especially when the class of work is taken into account.

FACTORIES AND WORKSHOPS.

The number of Factories, Workshops and Bakeries in the Borough total 201. This number consists of: 63 Factories, 68 Workshops and 70 Bakeries. During the twelve months ending December 31st, 1936, there have been 844 inspections made. In several cases neglect to renew the limewashing was noticed. Upon notifying the occupier this contravention was remedied.

SMOKE ABATEMENT ACT, 1926.

I am glad to find that a method of "washing" the smoke and fumes at a certain works' chimney in the St. James's Ward has met with success. The complaints regarding nuisances from these works are now very few.

NEW BUILDINGS, ALTERATIONS AND EXTENSIONS.

Through the kindness of the Borough Surveyor, I am able to give details of works carried out or supervised by his Department.

Dwelling-houses erected	(new)	 	33
Other New Buildings		 	5
Alterations and Extension	ns	 	23
Temporary Buildings		 	40

DISINFECTION AND DEFESTATION.

Approximately 600 rooms were dealt with during the year 1936. These included rooms in houses where there had been cases of infectious diseases, such as Diphtheria, Scarlet Fever, Tuberculosis, etc., and a large number of houses which were insect infested, i.e., bugs or cockroaches. I should think that at least fifty houses have been sprayed, gassed or treated with beetle powder during the last twelve months. This was very essential but, naturally, the work takes up a considerable amount of time.

We are using for disinfecting or defestation cases the methods adopted previously, i.e., Formic Acid Gas, S.O²., Liquid Spray and Insect Powder. In several cases of malignant disease the beds, mattresses, etc., have been destroyed by burning.

I must again tender my thanks to the Chairman and Members of the Health Committee, my fellow Officials, the Staff of the Health Department and many other persons for their help and assistance during a very busy year.

I am,

Your obedient Servant,

HARRY DANE, CERT. R.S.I., M.S.I.A.,

Sanitary and Housing Inspector.

Meat and Food and Drugs Inspector.

Dairies, Cowsheds and Milk Shops Inspector.

MAY, 1937.





