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GLOUCESTER  
RURAL DISTRICT COUNCIL

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ANNUAL REPORT

OF THE  
Public Health Department

For the Year

1956

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M. L. SUTCLIFFE

T.D., D.P.H.

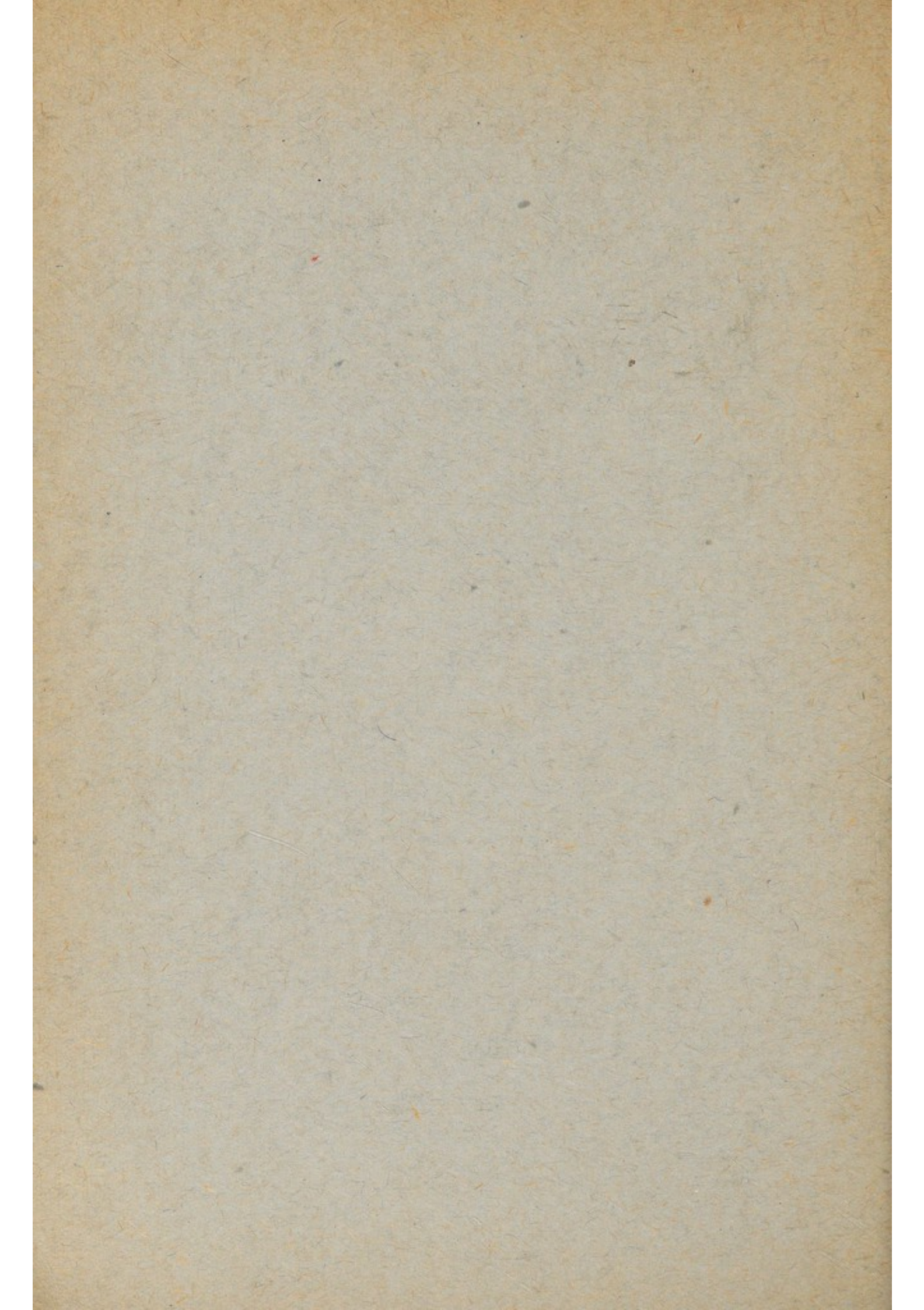
Medical Officer of Health

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# Rural District Council of Gloucester

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## ANNUAL REPORT

of the

## Medical Officer of Health

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Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report on the Hygiene Conditions and Vital Statistics of the District for the year 1956.

It includes the report of the Public Health Inspectors and is compiled to conform with Article 6 (3) and 17 (5) of the Sanitary Officers (Outside London) Regulations, 1935, and incorporates the requirements of the Ministry of Health Circular, 19/56 dated 11th December, 1956.

In accordance with the above circular the distribution is a wide one and includes :

The Ministry of Health.

The County Medical Officer of Health.

The Ministry of Agriculture, Fisheries and Food.

The Ministry of Housing and Local Government.

The Ministry of Labour and National Service.

There is continued improvement in the general environmental health conditions in the District which is most marked in the provision of housing and main water supplies. I am grateful to the Surveyor for his report on sewage disposal which shows that the Council is doing all it is permitted to do to improve the sewage works at Longford.

With regard to housing and water supplies it is fortunate that so much has been done in the last few years as the Government's "credit squeeze" is resulting in less financial assistance in the way of subsidies and grants; and consent for future schemes will not be so easy to obtain from the Ministry.



Great attention is paid to meat and food inspections, and food hygiene generally, and the fact that only three cases of food poisoning were reported during the year suggests that this work is of great value.

With regard to the more medical aspects of the Report it is very satisfactory to note that in all the vital statistics given in Table 3 the District compares favourably with the Country as a whole.

The infantile death rate is often said to be an indication of the social development in an area or country. This District's low figure of about 20 compares with over 100 for example in Calcutta but it is not as good as Christchurch, New Zealand, where the most recent figure is 13.

There was nothing exceptional in the amount of infectious disease which consisted mainly of the commoner diseases, and tuberculosis shows a slight but definite improvement.

The small cancer death-rate compared with England and Wales is of interest, and even deaths from cancer of the lung are under half, although I do not think there is much less smoking in the District than in the country as a whole.

It will be seen that most of the report deals with the very considerable and excellent work of the Public Health Inspectors and it is a great encouragement to the Department to feel that its recommendations are practically invariably supported by the Public Health Committee and Council.

Finally I should like to thank the Chairman and members of the Public Health Committee for their help and co-operation and also the staff of the Council's other Departments.

I have the honour to be

Your obedient servant

MAURICE L. SUTCLIFFE,

*Medical Officer of Health.*

May, 1957.

## **Public Health Committee (31.12.56).**

Chairman: T. J. WHITFIELD, C.C.

Vice-Chairman: C. J. STEELE.

LT.-COL. E. R. P. BERRYMAN, D.S.O., T.D.	E. J. BOULTER.
MRS. M. BROOKSBANK, J.P.	MRS. B. M. CASTLE.
F. A. CHAMBERLAYNE.	J. M. DANIELS.
C. J. DE LISLE WELLS.	W. J. DAVIS.
L. E. W. O. FULLBROOK-LEGGATT.	R. L. EVANS.
W. H. T. HEARLE.	P. L. P. JONES.
MISS O. LLOYD BAKER, J.P.	A. E. KEYS, J.P.
R. T. MERRETT.	E. J. PENNELS.
W. T. NICHOLLS, M.B.E., C.C.	D. WATHAN.
E. C. WHEELER.	P. H. WOODMAN.

## **Public Health Department Staff.**

M. L. SUTCLIFFE, T.D., M.R.C.S., L.R.C.P., D.P.H., D.P.M., Medical Officer of Health. Medical Officer of Health to the Tewkesbury Borough, Gloucester Rural and Newent Rural Joint M.O.H. Committee, and County Divisional Medical Officer of Health for No. 5 Division (Gloucester Area Health Sub-Committee.)

S. W. D. HARRIS, C.S.I.B., M.R.S.H., Chief Public Health Inspector and Petroleum Officer.

G. G. VIGGERS, C.S.I.B., District Public Health Inspector and Rodent Control Officer.

P. M. JONES, C.S.I.B., M.S.I.A., District Public Health Inspector.

L. S. SCOURFIELD, M.R.S.H., M.S.I.A., District Public Health Inspector (Appointed 1st February, 1956).

F. GREENWOOD, Rodent Operator.

F. E. WEBB, Clerk.



## **Statistics and Social Conditions of the District.**

Area (in acres) : 70,852.

Population (Registrar General's estimated Home Population mid 1956) : 41,770. (This figure includes members of the Armed Forces stationed in the District).

Number of Inhabited Houses (December 31st, 1956), according to rate books : 11,305.

Rateable Value (December 31st, 1956) : £480,873.

Sum represented by a penny rate (March, 1956) : £987 16s. 1d.

General Rate 1956-7 : 14/1. (County Precept 12/2).

Under the Local Government Act, 1948, duties in connection with valuations were taken out of the hands of the rating authority and transferred to the Board of Inland Revenue, whose first valuation came into force on 1st April, 1956.

It will be noted that there has been a considerable increase on the rateable value of the District compared with 1955 when it was £245,751.

## **Transfer of part of the District to the City of Gloucester.**

A Ministry Inquiry was held in December, 1956, in connection with the request by the City Corporation to extend their boundary at Matson, to include 269 Corporation dwellings and 2 private dwellings. No objections were raised by the County Council or this Council.

## **Industry in the District.**

The main employers of labour in the District are the aircraft, agriculture, and building industries. Fears have been expressed about reduced labour needs in the aircraft industry, and towards the end of 1956, a deputation of interested parties, including the Council Chairman, discussed the matter with the Minister of Supply.

## **Adoptive Public Health Legislation in force in the District.**

1. Building byelaws (Public Health Act, 1936, adopted 31st July, 1953).

2. New Streets (adopted 1st April, 1937).
3. Tents, Vans, Sheds and similar structures (adopted 1st September, 1938).
4. Handling, Wrapping and Delivery of Food and Sale of Food in Open Air (adopted 28th August, 1950).
5. Gloucestershire County Council Act, 1956, Section 141, Water supplies to occupied houses (adopted 1st January, 1957).

### Vital Statistics.

These statistics give particulars as to the births and deaths in the District, together with certain rates which are compared, where possible, with those for England and Wales

A detailed list of the causes of death will be found in Table 25.

**Table 1. Infantile Births and Deaths.**

	Legitimate			Illegitimate			Combined Total
	Male	Female	Total	Male	Female	Total	
Live Births	349	297	646	14	23	37	683
Still Births	9	5	14	—	1	1	15
INFANT Deaths							
(a) 0-4 weeks	4	5	9	—	—	—	9
(b) 4 wks.-1 yr.	3	2	5	—	—	—	5

**Table 2. Deaths.**

	Male	Female	Total
Total Deaths	287	281	568



Table 3.

## Birth and Death Rates.

	Gloucester Rural District	England and Wales
Crude live birth rate per 1,000 population ..	18.28	} 15.7
*Corrected live birth rate per 1,000 population	18.64	
Still birth rate per 1,000 total births ..	21.5	23.0
Crude death rate per 1,000 population ..	13.6	} 11.7
*Corrected death rate per 1,000 population ..	10.06	
Death rate of infants under 1 year per 1,000 live births .. .. .	20.5	23.8
Death rate of legitimate infants per 1,000 legitimate live births .. .. .	21.6	} Not available
Death rate of illegitimate infants per 1,000 illegitimate live births .. .. .	—	
Death rate from Puerperal Causes per 1,000 total births .. .. .	—	
		0.56

\*NOTE.—The Corrected Birth and Death Rates are obtained by multiplying the Crude Rates by the factors 1.02 and 0.74 respectively. These factors are supplied by the Registrar-General and serve to make the Crude Rates for the District comparable with the Rates for the country as a whole.

## GENERAL PROVISION OF HEALTH SERVICES IN THE DISTRICT.

### Laboratory Facilities.

The examination of pathological specimens, and the analyses of milk and ice cream samples, etc., are carried out at the laboratory of the Gloucester Royal Hospital, under the Medical Research Council scheme. (There is no charge for this work).

Water and sewage analyses, taken by this Department, are carried out by the Council's Analysts, Messrs. Ellis & Turner, Public Analysts, Gloucester.

### Hospitals.

The Council have no responsibility for arranging hospital treatment, except with regard to old people in need of care and attention and dealt with under the National Assistance Acts.

Infectious disease cases are admitted to the Isolation Hospital at Over, which is administered by the Gloucester, Stroud and Forest Management Committee.

## Child Welfare Centres.

These Centres are under the general administration of the Area Health Sub-Committee which consists of members of this Council together with members from Tewkesbury and Newent.

Table 4 shows the attendances, and the total number of attendances in the year shows a satisfactory increase of nearly 700 on 1955.

Very great thanks are due to the voluntary committees and helpers who run these Centres.

**Table 4.**

Centre	No. of sessions in 1956	No. of first attendances		Total No. of attendances		
		Under 1	Over 1	Under 1	Over 1	Total
Ashleworth ...	21	32	15	151	248	443
Brockworth ...	48	111	43	1086	1292	2532
Churchdown ...	50	92	21	711	636	1460
Eastington ...	21	8	17	93	232	350
Frampton ...	12	9	11	122	107	249
Hucclecote ...	23	54	28	409	495	986
Longlevens ...	27	83	11	657	305	1056
Minsterworth ...	12	28	4	137	198	367
Norton ...	24	47	8	326	408	789
Quedgeley ...	24	54	14	315	369	752
Upton St. Leonards	12	9	4	66	107	186
Total ...	274	527	176	4073	4397	9173

## Home Help Service.

This service is administered by the Area Health Sub-Committee of the County Council.

The following types of cases are assisted and the figures on 31st December, 1956, were :—

Maternity cases	..	..	..	5
General sickness	..	..	..	7
Tuberculosis	..	..	..	6
Chronic sick or old age	..	..	..	52
				—
Total	..	..	..	70
				—

This total of 70 compares with a total of 87 in December, 1955. The scheme is very popular and it undoubtedly means that many



of the cases cared for are able to remain in their own homes instead of having to be sent to hospitals or institutions. This applies specially to cases of chronic sickness and old age.

There were, on 31st December 1956, 53 home helps in the District of which 49 were part-time and 4 on a regular wage.

### **National Assistance Act, 1948**

### **National Assistance (Amendment) Act, 1951.**

These Acts authorise the Council and their Medical Officer of Health to arrange for the compulsory removal of aged and sick persons living in insanitary conditions to a hospital or residential institution.

Several cases of this type occurred but fortunately they all finally agreed to voluntary removal as a result of persuasion by this Department and the County Welfare Officer. No statutory action was therefore necessary.

## **SANITARY CIRCUMSTANCES IN THE DISTRICT.**

### **Water Supplies.**

Main supplies in the District are provided by three statutory water undertakings, e.g., Gloucester Corporation, Cheltenham Corporation and Stroud District Water Board, and they supervise the purity and adequacy of their supplies.

In addition there are three smaller undertakings, Gloucestershire County Council, Frocester estate and Haresfield estate, which provide certain of their own properties with piped water from storage reservoirs served by hillside springs.

The number of houses supplied by these undertakings is shown in Table 5.

There has been steady progress in the provision of main water supplies in the District; and since the war, about 100 miles of new mains have been laid.

About 90% of houses now have main water supplies, compared with only 55% in 1946, while the number of farms likewise shows a steady increase.

In addition to domestic dwellings, main supplies are also available for the hospitals, Royal Air Force Stations, hostels and residential schools in the District.

## EXTENSIONS OF MAINS DURING 1956.

### Gloucester Corporation—

#### *New mains laid:*

Barnwood	..	..	..	..	142 yards
Brockworth	..	..	..	..	1,493 „
Churchdown	..	..	..	..	1,008 „
Hasfield..	..	..	..	..	1,484 „
Hucclecote	..	..	..	..	172 „
Longlevens	..	..	..	..	2,232 „
Upton St. Leonards	..	..	..	..	1,022 „
Westbury-on-Severn	..	..	..	..	4,595 „

Total miles:  $6\frac{3}{4}$

#### *New mains authorised but not yet laid:*

Frampton-on-Severn	..	..	..	..	246 yards
Hasfield..	..	..	..	..	1,240 „
Longney	..	..	..	..	154 „
Minsterworth	..	..	..	..	510 „
Newnham-on-Severn	..	..	..	..	950 „

Total miles:  $1\frac{3}{4}$

### Cheltenham Corporation—

#### *New mains laid:*

Tirley	..	..	..	..	770 yards
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#### *New mains authorised but not yet laid:*

Nil.

### Stroud Water Board—

No new mains were laid during the year, but the provision of main water supplies to Stockend, Harescombe is under consideration.

### Well Supplies.

In this District, wells are almost invariably of the shallow type and very liable to surface pollution. Of 34 well-water analyses not one was considered fit for human consumption and boiling before use is strongly recommended. Owing to the increase in the provision



of main water supplies, the population depending on well supplies is steadily declining.

### Water Shortage.

A number of complaints were received during the year, mainly in the parishes of Harescombe, Newnham and Westbury, and the Council's water tank trailer was in regular use for about nine months.

**Main Water Supplies in the District showing the Number of Houses and Population served.**  
**Table 5.**

Parish	Main Water Supply	Main Supply in House	Pop.	Stand Pipes Main	No. of Houses	Pop.
Arlingham	Glos. Corporation	71	263	1	6	23
Ashleworth	"	59	218	—	—	—
Barnwood	"	304	1125	—	—	—
Brockworth	"	1432	5298	2	11	42
Brookthorpe	"	81	300	1	7	17
Chaceley	Chelt. Corporation	11	40	—	—	—
Churchdown	Glos. Corporation	1560	5872	—	—	—
Down Hatherley	"	6	22	—	—	—
	Chelt. Corporation	86	318	—	—	—
Eastington	Stroud Dist. W.B.	384	1420	—	—	—
Elmore	Glos. Corporation	58	215	—	—	—
Forthampton	Chelt. Corporation	47	174	—	—	—
Frampton	Glos. Corporation	177	655	3	21	81
Fretherne-with-Saul	"	159	588	—	—	—
Frocester	Stroud Dist. W.B.	8	32	—	—	—
	Private Estate	46	170	—	—	—
Hardwicke	Glos. Corporation	197	729	1	13	51
Harescombe	"	19	70	—	—	—
	Stroud Dist. W.B.	—	—	—	—	—
Haresfield	Glos. Corporation	29	107	—	—	—
Hasfield	Chelt. Corporation	20	74	—	—	—
	Glos. Corporation	4	15	—	—	—
Hempsted	"	147	544	—	—	—
Highnam	"	129	477	—	—	—
Hucclecote	"	1164	4307	—	—	—
Longford	"	259	958	—	—	—
Longlevens	"	1643	6079	—	—	—
Longney	"	70	259	1	5	19
Maisemore	"	113	418	—	—	—
Minsterworth	"	112	414	—	—	—
Moreton Valence	"	67	248	1	3	12
	Glos. County Council	1	4	—	—	—
Newnham	Glos. Corporation	280	1036	1	8	31
Norton	Chelt. Corporation	64	237	—	—	—
Quedgeley	Glos. Corporation	260	962	2	25	96
Sandhurst	"	91	337	—	—	—
Standish	"	3	11	—	—	—
	Stroud Dist. W.B.	5	18	—	—	—
	Glos. County Council	70	259	1	—	—
Tirley	Chelt. Corporation	57	211	—	—	—
	Glos. Corporation	1	4	—	—	—
Twigworth	"	48	178	—	—	—
Upton St. Leonards	"	191	707	2	16	62
	Stroud Dist. W.B.	8	32	—	—	—
Westbury-on-Severn	Glos. Corporation	175	647	—	—	—
Whitminster	"	96	344	2	9	32
	Glos. County Council	9	33	—	—	—
Totals		9821	36429	18	124	466



## SEWAGE DISPOSAL AND REFUSE COLLECTION.

REPORT BY THE SURVEYOR:—

### (1) Sewerage

The population of the area draining to the Longford Purification Works continues to increase steadily but the actual flow to the works has been slightly less this year than in 1955. This is unquestionably due to the more even distribution of the annual rainfall. The dilution percentage reduction has resulted in the character of the sewage become stronger, placing an additional burden on the capacity of the plant—already seriously overloaded. Fortunately the Ministry has approved, in principle, the scheme for extending the Longford Works and has authorised the execution of the work in stages. Permission has been received to proceed with Stage 1 (i.e., the improvement of the aeration system and the provision of additional sludge drying beds). It is anticipated that the work will commence early in 1957 and the completion of this stage should result in an appreciable improvement in the effluent.

During 1956 the Eastington sewerage scheme has been completed and is now in operation.

The Ministry has approved, in principle, the Frampton-on-Severn/Fretherne-with-Saul scheme and authorised the carrying out of the work in stages. It is anticipated that Stage 1 (serving the northern end of the parish of Frampton-on-Severn) will be under way in the early part of 1957. It is hoped that the Ministry can be persuaded that Stage 2 (covering the remainder of Frampton and the parish of Saul), will follow on without unnecessary delay.

The Maidenhall Estate at Highnam is rapidly becoming built up and the consequent increase in flow to the sewage treatment plant is beginning to have an adverse effect on the effluent which is now of "border line" quality. It seems clear that before long some thought must be given to preparing a scheme of extension in this case.

The new pumping station to deal with the sewage from the Gloucester Garden Village Estate, Longlevens, mentioned in my last report, is now in operation and, as anticipated, the flooding of low-lying land by sewage has ceased and conditions are entirely satisfactory.

The small treatment works in various parishes continue to operate satisfactorily in the majority of cases and the servicing organisation recently inaugurated is proving extremely satisfactory.

During the year repair and improvement work has been carried



**Table 18. Outwork (Sections 110 and 111).**

Nature of work	Section 110			Section 111		
	No. out-workers in Aug. list as req'd.	No. of cases of default in sending lists	No. prosecutions for failure to supply lists	Cases of work in Unwholesome premises	Notices Served	Prosecutions
Wearing Apparel (making)	1	—	—	—	—	—
Total	1	—	—	—	—	—

## INFECTIOUS DISEASE.

Tables 22—24 shew the incidence of notifiable infectious disease by Parishes and age groups.

### Diphtheria.

This Council started a diphtheria immunisation scheme for the District in 1937, and in 1940 responsibility for the scheme was taken over by the County, when it was officially recommended by the Ministry of Health.

The effect of immunisation in almost eradicating this dangerous disease is little less than miraculous, but continued immunisation is still necessary. There have been no cases of diphtheria in the District since 1951.

### Whooping Cough.

Immunisation is carried out by a County scheme started in 1955.

### Polio (acute Poliomyelitis).

Early in 1956 the Ministry of Health said vaccine would shortly be available, and a scheme was immediately formulated by the County. Owing to shortage of vaccine in the Country, immunisation was only offered to children born in the years 1947-54 and of these only a small percentage could be done, as the months July-October were considered a "close season" owing to the usual prevalence of polio during them.

The vaccine is produced by utilising the kidneys of healthy monkeys which come mostly from India, and one monkey produces



sufficient vaccine to immunise about 300 children. A drawback at present to the vaccine, is that it has to be kept at only just above freezing point until within a few hours of use, and this causes practical difficulties with regard to storage and distribution.

There were only two cases of polio notified during the year.

### **Small Pox and Typhoid.**

There were no small pox or typhoid contacts notified during the year.

### **Food Poisoning.**

There were only three scattered cases notified during the year. This is very satisfactory.

## **INFECTIOUS DISEASE IN SCHOOLS.**

Table 19 shows the incidence of infectious disease according to weekly returns submitted during term time by Head-teachers.

The figures cannot be considered absolutely accurate as many cases are reported on hearsay. The table is of interest as it shows the incidence of chicken pox and mumps which are not notified by General Practitioners.

Table 19.

School	Average No. on Register	Scarlet Fever	Measles	Whooping Cough	Chicken Pox	Mumps	'Flu
Arlingham .. ..	30	—	—	—	13	—	—
Ashleworth .. ..	20	—	—	2	—	—	—
Barnwood .. ..	196	—	1	1	77	—	—
Brockworth C.E. ..	18	—	—	—	—	2	—
Brockworth County (Inf.)	297	1	1	—	80	4	2
Brockworth County (Jnr.)	416	—	—	—	44	2	—
Churchdown Parton Rd.	291	6	14	11	15	1	—
Churchdown Village	445	7	3	2	—	—	—
Churchdown Sec. Mod.	455	—	—	—	1	1	—
Down Hatherley ..	35	—	5	—	—	—	—
Eastington .. ..	133	1	—	—	35	—	—
Elmore .. ..	31	—	3	—	—	16	—
Frampton-on-Severn	84	—	—	—	—	—	—
Hardwicke .. ..	73	—	—	—	—	—	—
Haresfield .. ..	64	—	—	2	12	17	—
Hempsted .. ..	45	—	—	6	6	—	—
Highnam .. ..	54	—	—	—	—	—	—
Hucclecote .. ..	299	—	1	—	1	—	—
Longlevens Junior	588	5	61	4	25	1	—
Longlevens Sec. Mod.	558	—	—	—	—	—	—
Longney .. ..	41	—	—	—	1	1	2
Maisemore .. ..	37	—	16	—	—	—	19
Minsterworth ..	45	—	—	—	—	—	2
Newnham .. ..	147	5	2	5	—	—	—
Norton .. ..	16	—	—	—	—	—	—
Quedgeley .. ..	400	—	29	10	39	3	—
Sandhurst .. ..	49	—	—	—	2	—	14
Saul .. ..	80	—	1	—	1	—	—
Standish .. ..	10	—	—	—	—	—	4
Tirley .. ..	40	—	—	—	—	—	—
Twigworth .. ..	61	—	5	—	1	1	2
Upton St. Leonards	67	—	19	—	2	—	—
Walmore Hill ..	69	—	2	—	—	—	1
Westbury-on-Severn	58	—	—	—	—	—	—
Whitminster ..	50	—	9	—	1	—	—
Total ..	5302	25	172	43	356	49	46

In accordance with the recommendation of the Joint Memorandum issued by the Ministries of Health and Education, it was not considered necessary to close any schools because of Infectious Disease.



## Tuberculosis.

Tuberculosis has become a much less serious and fatal disease in the last few years. The improvement in the position is due to a number of factors ; for instance :—earlier diagnosis (mass radiography), new drugs and improved surgical treatment, and last but certainly not least, better living conditions of the population, in which better housing and less poverty play a large part. However, tuberculosis is still a very serious disease because of the invalidity it causes, with sufferers being unable to lead a normal life for perhaps years.

**Table 20. This Table shews the new cases, in-transfers and deaths for Tuberculosis, for the past 20 years.**

Year	Pop. of District	New & I.T. Cases	Per 1000 Pop.	Deaths	Per 1000 Pop.	Number on Register	Per 1000 Pop.
1937	22,840	24	1.0	10	0.43	129	5.7
1938	23,130	31	1.3	19	0.82	130	5.6
1939							
1940		No Annual Report figures available					
1941							
1942	32,100	98	3.0	25	0.79	224	6.9
1943	32,130	58	1.8	22	0.69	276	8.5
1944	32,210	74	2.3	25	0.78	313	9.7
1945	31,480	53	1.7	11	0.35	203	6.5
1946	31,550	53	1.7	17	0.54	176	5.6
1947	31,960	63	1.9	15	0.45	205	6.4
1948	33,540	54	1.6	21	0.62	201	6.0
1949	36,350	65	1.8	16	0.48	205	5.6
1950	35,640	52	1.5	11	0.39	207	5.7
1951	37,360	64	1.7	17	0.45	212	5.7
1952	38,370	70	1.8	6	0.15	243	6.3
1953	37,430	51	1.3	8	0.21	220	5.8
1954	39,140	65	1.6	8	0.20	235	6.0
1955	40,490	75	1.8	3	0.07	274	6.8
1956	41,770	70	1.7	3	0.07	281	6.7

The death rate in England and Wales in 1956 from tuberculosis was 0.121 per 1,000 population, which is nearly double that of this District.

It will be seen from Table 20, that the rates for new and in-transfer cases, and numbers on the Register show very little change in the last 11 years but that the number of deaths shows a very spectacular decrease in the last few years. This Table also shows the great increase in population since 1937.



**Table 21. New, In Transfer cases, Deaths and Number remaining on the Register on 31st December, 1955.**

	Respiratory		Meninges & C.N.S.		Other forms		Total
	M.	F.	M.	F.	M.	F.	
New Cases ...	17	10	—	—	5	5	37
In-Transfer Cases ...	8	24	—	—	1	—	33
Deaths ... ..	2	1	—	—	—	—	3
On Register 31.12.56	125	127	—	—	15	14	281

## **PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.**

### **PUBLIC HEALTH ACT, 1936 (SECTION 172)**

No action was necessary under the above Regulations and Act.

### **Re-housing of Tuberculosis cases.**

As good housing is one of the essentials in the care and prevention of tuberculosis, cases where this is unsatisfactory are reported to the Tenants Selection Sub-Committee.

This Committee does its best to re-house cases recommended by this Department, and out of 281 cases on the Tuberculosis Register, 86 are living in Council houses, which is an increase of 4 on last year.

### **Tuberculosis After-Care.**

A Joint Committee serves this District, the Borough of Tewkesbury and the Rural District of Newent. Except for a grant from the County Council for stationery, postage, etc., it is entirely dependent on voluntary contributions, and every penny goes to assist tuberculosis cases. It serves a very useful purpose and so far, no deserving case has been refused help.

The Council has recommended to the County Council that financial assistance is given to the Committee from the proceeds received for charity from the Sunday opening of cinemas.



## Cancer.

The following mortality figures are of interest and shew that the death rate in the District is well below that for England and Wales.

Death rates from Cancer per 1,000 Population :

	England and Wales		Glos. R.D.	
	M	F	M	F
Cancer of Lung etc.	0.726	0.11	0.287	0.047
Other Cancer	1.55	1.78	0.98	0.83

Table 22.

## Notification of Infectious Diseases by Parishes

(SOUTHERN AREA)

Infectious Disease	Arlingham	Brookthorpe	Eastington	Elmore	Frampton-on-Severn	Fretherne-with-Saul	Procester	Hardwicke	Harescombe	Haresfield	Longney	Minsterworth	Moreton Valence	Newnham-on-Severn	Quedgeley	Standish	Upton St. Leonards	Westbury-on-Severn	Whitminster	Total
Scarlet Fever	...	...	1	...	...	...	...	...	...	...	...	...	...	3	...	...	1	...	...	5
Whooping Cough	...	...	...	...	...	...	...	12	...	...	...	...	...	...	3	...	2	...	...	17
Measles (excl. G.M.)	...	1	3	3	2	2	2	15	...	1	...	1	3	...	32	...	33	...	8	106
Ac. Poliomyelitis (paralytic)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Ac. Poliomyelitis (non-paralytic)	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...
Tuberculosis	...	...	1	...	...	1	...	...	...	...	...	...	3	1	...	...	...	...	1	9
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningococcal infection	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (infective)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (post-inf.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmic neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal pyrexia	...	...	...	...	...	1	1	...	...	...	...	...	...	1	...	...	...	...	...	2
Ac. Pneumonia (prim. or 'flu.)	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	3
Para-typhoid fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Food poisoning	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	...	1	5	3	2	4	3	27	...	2	...	1	4	7	37	1	39	1	9	146



Table 23.

## Notification of Infectious Diseases by Parishes.

NORTHERN AREA)

Infectious Disease														
	Ashleworth	Barnwood	Brockworth	Chaceley	Churchdown	Down Hatherley	Forthampton	Hasfield	Hempstead	Highnam	Hucclecote	Longford	Longlevens	Total
Scarlet Fever	...	...	...	...	17	...	...	...	...	...	1	1	1	26
Whooping Cough	...	...	...	...	45	1	...	...	...	...	1	2	16	74
Measles (excl. G.M.)	...	...	...	...	34	3	...	...	...	...	5	15	14	212
Ac. Poliomyelitis (paralytic)	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Ac. Poliomyelitis (non-paralytic)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis	...	...	...	...	7	...	...	...	...	...	4	3	2	28
Diphtheria	...	...	...	...	...	1	...	1	...	...	...	...	...	...
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningococcal infection	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (infective)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (post-inf.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmic neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal pyrexia	...	...	...	...	1	...	...	...	...	...	...	1	3	5
Ac. Pneumonia (prim or 'flu)	...	...	...	...	4	...	...	...	1	...	2	1	...	8
Para-typhoid fever	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Enteric fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Food Poisoning	...	...	...	...	...	...	...	...	...	...	1	...	...	2
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	...	...	...	...	108	6	...	1	1	...	14	23	164	357

**Table 24. Notification of Infectious Diseases in 1956 by Age Groups.**

Disease	0+	1+	3+	5+	10+	15+	25+	45+	65+	Age N.K.	Total
Scarlet fever	...	1	6	18	3	3	...	...	...	...	31
Whooping cough	...	16	25	35	7	...	1	...	...	...	91
Measles (excl. G.M.)	...	60	75	165	12	...	...	...	...	3	318
Ac. Poliomyelitis (paralytic)	...	...	1	1	...	...	...	...	...	...	2
Ac. Poliomyelitis (non-para.)	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (respiratory)	...	1	...	1	...	5	8	8	4	...	27
Tuberculosis (meninges, etc.)	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (other)	...	...	...	1	...	2	6	1	...	...	10
Diphtheria	...	...	...	...	...	...	...	...	...	...	...
Smallpox	...	...	...	...	...	...	...	...	...	...	...
Meningococcal infection	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (infective)	...	...	...	...	...	...	...	...	...	...	...
Ac. Encephalitis (post-inf.)	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	1	...	...	...	...	1
Ophthalmia neonatorum	...	...	...	...	...	...	...	...	...	...	...
Puerperal pyrexia	...	...	...	...	...	3	4	...	...	...	7
Ac. Pneumonia (prim. or flu')	1	1	1	1	...	1	1	2	3	...	11
Para-typhoid fever	...	...	...	...	...	...	...	1	...	...	1
Enteric fever	...	...	...	...	...	...	...	...	...	...	...
Food poisoning	...	...	...	...	...	...	3	...	...	...	3
Erysipelas	...	...	...	...	...	...	...	1	...	...	1
Malaria (Contr. E. & W.)	...	...	...	...	...	...	...	...	...	...	...
Totals	11	79	108	222	22	15	23	13	7	3	503



## CAUSES OF DEATH IN THE DISTRICT IN 1956.

Table 25 gives the causes of death in the District in accordance with the abbreviated list of 36 groups of the World Health Organisation Nomenclature Regulations, 1948.

**Table 25.**

CAUSES OF DEATH					Male	Female
1.	Tuberculosis, respiratory	...	...	...	2	1
2.	Tuberculosis, other	...	...	...	—	—
3.	Syphilitic disease	...	...	...	2	—
4.	Diphtheria	...	...	...	—	—
5.	Whooping cough	...	...	...	—	—
6.	Meningococcal infections	...	...	...	—	—
7.	Acute poliomyelitis	...	...	...	—	—
8.	Measles	...	...	...	—	—
9.	Other infective and parasitic diseases	...	...	...	1	—
10.*	(Malignant neoplasm, stomach	...	...	...	2	4
11.	( " " lung, bronchus	...	...	...	12	2
12.	( " " breast	...	...	...	—	4
13.	( " " uterus	...	...	...	—	3
14.	(Other malignant and lymphatic neoplasms	...	...	...	36	25
15.	(Leukaemia, aleukaemia	...	...	...	3	—
16.	Diabetes	...	...	...	2	5
17.	Vascular lesions of nervous system	...	...	...	45	41
18.	Coronary disease, angina	...	...	...	36	20
19.	Hypertension with heart disease	...	...	...	7	5
20.	Other heart disease	...	...	...	65	94
21.	Other circulatory disease	...	...	...	9	9
22.	Influenza	...	...	...	1	1
23.	Pneumonia	...	...	...	14	17
24.	Bronchitis	...	...	...	5	7
25.	Other diseases of respiratory system	...	...	...	6	1
26.	Ulcer of stomach and duodenum	...	...	...	1	2
27.	Gastritis, enteritis and diarrhoea	...	...	...	1	1
28.	Nephritis and nephrosis	...	...	...	5	2
29.	Hyperplasia of prostate	...	...	...	3	—
30.	Pregnancy, childbirth, abortion	...	...	...	—	—
31.	Congenital malformations	...	...	...	—	2
32.	Other defined and ill-defined diseases	...	...	...	17	27
33.	Motor vehicle accidents	...	...	...	8	—
34.	All other accidents	...	...	...	3	4
35.	Suicide	...	...	...	1	4
36.	Homicide and operations of war	...	...	...	—	—
TOTAL					287	281

### Explanatory Note.

\* Neoplasm = Cancer.







