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BOROUGH of GOSPORT

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ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

P. V. PRITCHARD
M.D., F.R.C.P.(Edin.), F.R.F.P.S.(Glas.), D.P.H.

For the Year

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HEALTH COMMITTEE

1958-59

His Worship The Mayor
Alderman P.D.BLANCH

Chairman: Alderman J.A.WHEELER, J.P.

Vice-Chairman: Councillor C.W.L.GILES

Aldermen: I.C.T.MORGAN
L.C.OLD

Councillors: R.K.BROWNING (from Sept.1958)
Mrs B.CARTER (to Nov.1958)
W.A.CHIDLOW
H.W.COOLEY
A.K.DIBLEY (deceased July 1958)
E.T.W.LANDER
V.E.J.NEAL
H.R.PINK
A.POLLARD
F.R.TOVEY
J.A.WAKEFIELD

Alterations for 1959-60:-

His Worship The Mayor
Councillor C.W.L.GILES in place of Alderman P.D.BLANCH

Vice-Chairman
Councillor E.T.W.LANDER in place of Councillor C.W.L.GILES

HOUSING COMMITTEE

1958-59

His Worship The Mayor
Alderman P.D.BLANCH

Chairman: Alderman A.R.NOBES, O.B.E., J.P.

Vice-Chairman: Alderman L.C.OLD

Aldermen: E.W.J.PAYNE
J.A.WHEELER, J.P.

Councillors: Sir W.AGNEW
R.K.BROWNING (from Sept.1958)
Mrs B.CARTER
A.K.DIBLEY (deceased July 1958)
C.W.L.GILES
H.G.C.M.JARRETT
J.KEAST
S.W.MABEY
A.J.OVENS, J.P.
A.POLLARD
H.WELCH, O.B.E.

Alterations for 1959-60:-

His Worship The Mayor
Councillor C.W.L.GILES in place of Alderman P.D.BLANCH

Councillor G.C.MAYNARD in place of Councillor H.WELCH, O.B.E.

STAFF

Medical Officer of Health

P.V.PRITCHARD, M.D., F.R.C.P.(Edin), F.R.F.P.S.(Glas), D.P.H.

Assistant Medical Officer of Health

S.G.GORDON, M.B., B.S., D.T.M & H., D.P.H., D.C.H., (Appointed 14.1.58)

Chief Public Health Inspector

H.G.COPE, M.R.S.H., Meat & Food Insp Cert

Senior Assistant Public Health Inspector

J.G.POGSON, Cert R San I, Meat & Food Insp Cert, Smoke Insp Cert (Appointed 1.3.59)

Public Health Inspectors

A.W.P.ROBINSON, Cert R San I, Meat & Food Insp Cert (Resigned 31.8.58)

F.O.ELLIOTT, Cert R San I, Meat & Food Insp Cert

G.BROWNSWORD, Cert R San I, Meat & Food Insp Cert (Appointed 1.4.58)

Pupil Public Health Inspector

P.HERBERT (Resigned 6.12.58)

Shops Acts Inspector

A.E.GORMAN

Senior Clerk

H.J.MOORE

Senior Shorthand Typist

Miss J.G.FISHER

Assistant Clerks

A.BELL

Miss D.A.SWEETLAND

Mrs D.JOHNSON (from 31.3.59)

Rodent Control Operator/Mortuary Attendant and Disinfector/Mosquito Sprayer

S.C.BENNER (Resigned May 1959)

J.OSGOOD (from May 1959)

G.SPENCE

General Assistant

J.OSGOOD (to May 1959)

H.PALMER (from May 1959)

Divisional School Health Department Clerks (County Council)

Miss M.THOMPSON

Mrs J.M.ELLIOTT

Mrs J.BUCKLER (Appointed 28.4.58)

Town Clerk

E.G.J.ADDENBROOKE, O.B.E., B.A.(Oxon), F.R.G.S.

INTRODUCTION and GENERAL COMMENTS

To The Mayor, Aldermen and Councillors of the Borough of Gosport.

Mr. Mayor, Ladies and Gentlemen,

1. I have the honour to present this, my fifth, Annual Report on Gosport's health and relevant services for 1958.

2. AGE and SEX DISTRIBUTION of POPULATION (Table 3)

(a) The RAPID GROWTH of GOSPORT in recent years is evident from noting that in 1921 the population was 35,000. Ten years later it had risen by only 3,000 to 38,000. In the next 20 years however it increased by 20,000 to 58,000. Since the 1951 Census it has gone up to the Estimated Mid-Year figure of over 65,000 for 1958.

(b) This Table also records that about 3,000 of the inhabitants are over 70 years of age. This problem of OLD AGE and the CARE of these OLD PEOPLE is increasing year by year as the proportion to the total population increases. There are about 20,000 young persons under 20 years of age so that some 23,000 inhabitants are mainly dependent on the efforts of the remaining 40,000. A large proportion of these are women who are not out at work. The situation is that more elderly people are in need of assistance in some form or other than before, and in proportion there are fewer potential sources of contribution to the public purse to provide the necessary financial help.

3. LIVE BIRTHS and BIRTH RATES (Table 4)

(a) There were 1,262 Live Births registered for Gosport, about 200 more than in 1957. Our Birth Rate of 19.3 is much higher than the rate for the country as a whole at 16.4. For many years we have recorded this higher comparison. It is of interest, however, to note the fall from the high average as shown in Table 12 for the period 1914-1918.

(b) There were 57 Illegitimate Live Births as against 37 for last year.

4. DEATHS in AGE GROUPS (Table 6)

(a) This new Table deserves a close study. For each of the four years the actual number of deaths have been recorded, firstly for under 1 year of age and then in 5-year periods. Each of these returns have been expressed as a percentage of the total deaths. In the "Accumulative" columns the returns are made for all deaths up to and including the period under review. These totals have been expressed as percentages.

(b) In all four years the age group 75-80 shows the highest number of deaths. More than half of all deaths occurred after the age of 70. Less than 10% of deaths occur before the age of 40. Only about a quarter of all our deaths were for people under age 60.

5. DEATHS by AGE PERIODS and SEX (Table 7)

(a) This Table is set out in the form of Isotype information. It clearly shows the age periods of greatest death risk. There were 618 deaths in 1958 against 494 in the previous year.

(b) A study of the last two columns shows that the increase in the total deaths was in persons under 1 year and over 60 years of age.

6. CAUSES of DEATHS (Table 8)

(a) Many accepted authorities on CANCER are of the opinion that much can be done to reduce the incidence of advanced disease and death by suitable Health Education.

(b) Deaths from HOME ACCIDENTS and those not associated with Motor Vehicles numbered 15. On looking down the Table to find other groups for comparisons, the importance of this cause of death is obvious. It is nearly four times greater than Respiratory Tuberculosis; it is more than Cancer of the Breast. Much is written and said about Cancer and Tuberculosis. Too little attention is paid to Home Accidents which cause, not only this large number of deaths but many permanent

disabilities and disfigurements. In last year's Annual Report I reminded you of the facts that most of these accidents were preventable, that the Ministry accepted Prevention of Home Accidents as part of the duties of a Public Health Department. Much more public interest is needed and here is another theme for Health Education.

7. DEATHS and DEATH RATE (Table 9)

(a) With 618 deaths against 494 for last year our Death Rate rose from 10.1 to 12.5. This is no longer better than the rate for England and Wales.

(b) Our increases are noted in the Cancer group, Vascular Lesions of the Nervous System, Coronary Disease, Heart and Circulatory Diseases and Pneumonia as is noted in Table 8.

8. INFANT MORTALITY and RATE (Table 11)

(a) Gosport's increase of Infant Deaths from 19 last year to 38 this year raises the Mortality Rate from 17.4 to 30.1, a bad record especially when compared to the fall for the Country as a whole, from a rate of 23.0 to 22.6, an all time lowest.

(b) This increase in deaths called for a special investigation. Eight of these were in babies who lived for less than a day, eighteen lived for less than a week and twenty-five lived for less than a month. Of the thirteen who lived for more than 4 weeks, eight survived half the year and five died between their 6th and 12th month. Premature birth was the commonest "cause" of death. The fall from 28 Still Births last year to 21 for 1958 (see Table 5) must be taken into consideration. Some babies who might have been born dead and recorded in that category were born alive and failed to survive. Prematurity and Still Births are Ante-Natal problems.

9. HEALTH PICTURE COMPARISON (Table 12)

(a) In this Table an old five year period, 1914-1918, is compared with the last five year period 1954-1958.

(b) As is expected there has been an all round improvement, in some cases to a remarkable degree. The most outstanding differences are found in statistics dealing with children. The deaths of children then averaged 93 a year in Gosport in a much smaller population. Now we average 31 deaths a year for more than double the population. The change for infants is from a Mortality Rate average of 69.5 to our present average of 22.7.

10. INFECTIOUS DISEASES INCIDENCE (Tables 13 - 14)

(a) POLIOMYELITIS was almost absent during the year. Only two cases, both paralytic, were notified. Both were in boys. One was mild with an early recovery the other very severe and, for a time, he seemed in danger of permanent handicap. He was an excellent patient and his complete recovery is largely due to his own determination to become normal. Co-operation came from all sources. As soon as it was possible, his education was continued by a home tutor. Then special transport arrangements were made for part time schooling while he still attended Physio Therapy clinics.

(b) DYSENTERY, an intestinal infection, was prevalent. There were 20 notified cases. It was evident from general information that there were probably many more sufferers who were not notified. A sufferer is a potential danger to the people he is associated with, not only by direct contact, but by indirect channels through articles and foods he has possibly contaminated. It is clearly necessary that all measures of control should be applied to prevent the spread. These measures can be best applied by the Health Department. We can only take action if we are informed, as we should be, by the Medical Attendant "notifying" the case. He can only do his investigation and notification if his assistance is sought by the patient or patient's parents. For everybody's sake there should be no break in any of the links. Delay in taking action multiplies the risks.

11. IMMUNISATION against DIPHTHERIA, WHOOPING COUGH and TETANUS (Tables 15-19)

(a) Table 15 shows that whereas Gosport has a better record for DIPHTHERIA IMMUNISATION IN INFANCY, with 49% of the potential infants being protected, than the County as a whole or the average for Hampshire Urban Districts, it is not as good as some of our neighbours, such as Fareham or Winchester.

(b) A similar state exists in respect of WHOOPING COUGH IMMUNISATION.

(c) Table 17 breaks down the RETURNS for DIPHTHERIA, WHOOPING COUGH and TETANUS IMMUNISATION for the year. The potential uptake for the under-one-year group is the natural increase figure in the year, about 1,000. The protection of 620 infants against Diphtheria and 634 against Whooping Cough is still too low but an improvement on last year's returns of 583 and 577 respectively. Boosters for both Diphtheria at 279 total and Whooping Cough at 279 total are very low. There is obviously need for more Health Education on the subject of Immunisation. The Booster returns for 1957 were 310 and 241 and for 1956 519 and 365 respectively.

(d) Table 18 is a COMPREHENSIVE "LADDER" SURVEY year by year up to school leaving age. This Table should be studied together with Table 17. We have a natural increase of births over infant deaths of about 1,000 a year. Thereafter this 1,000 unit is taken as the rough measure of the potential number of children to be protected. To interpret the Table read down any column to note how many children born in a particular year are protected by a Primary Course or Booster Dose. Take the first column for children born in 1944, for example. By 1958 in this birth group about 600 had received a Primary Course and about 300 of these had received a subsequent Booster Dose for DIPHTHERIA. Study the column on the right for the totals. Take the DIPHTHERIA IMMUNISATIONS carried out in 1957. At all ages there were 923 Primary Courses and 305 Booster Doses. The 923 would, for our approximate 1,000 potential in any year, have been excellent if the number referred to protection in the first, or by the latest, the second year. The fact is that it included 238 children immunised at a later age. These children had been neglected, they had been allowed to remain in an unprotected state too long. This and our problem of the comparatively poor response to the offer of the Booster Dose protection is something which should be remedied.

12. VACCINATION against SMALLPOX (Tables 20 - 22)

Gosport, for the past few years, has had a better record for Vaccination than the County as a whole and most of the other areas. This lead is no longer so clear in parts, and, in fact, our 68.0% for Infant Vaccinations is beaten by the average of 69.8% for Hampshire Urban Areas. Last year my report contained this remark - "There is need for more persuasion and Health Education relevant to the need for a greater degree in protection against this disease."

13. VACCINATION against POLIOMYELITIS (Table 23)

This Table sets out the change in administration and the excellent beginning of our POLIOMYELITIS IMMUNISATION SCHEME. By the end of the year nearly 8,000 young persons had been protected.

14. TUBERCULOSIS (Tables 24 - 27)

(a) THE REGISTER (Table 24)

As each new case is notified the name gets added to THE REGISTER. This leads to an increase in numbers on that record as the removals from it do not keep pace with the additions. The Register changes cannot therefore be used to analyse the prevalence or otherwise of the disease in an area. As expected the Register figures show an increase each year in the Table. The number of patients sent in to Sanatorium however show a steady decline as more treatment with our ever increasingly effective drugs is given at the Clinic and at home.

(b) AGE and SEX DISTRIBUTION (Table 25)

(i) A study of this Table helps to answer the question of PREVALANCE and MORTALITY.

(ii) During the last four years the NEW CASES added to the Register have been 76, 49, 37 and 59.

(iii) The DEATHS have been, for those years 2, 4, 6 and 4.

(c) DEATH RATE (Table 26)

Gosport at 0.06 has a better rate than England & Wales at 0.09.

(d) RATE of INCIDENCE - COMPARISON with OTHER AREAS (Table 27)

Gosport's RATE of INCIDENCE of RESPIRATORY TUBERCULOSIS has fluctuated from 1.58 in 1951, through 1.21, 1.36, 0.77, 1.11, 0.06, 0.49 to 0.81 in 1958. The Rates for the County have generally been lower.

15. WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITARY DUTIES (Table 43)

I cannot commend the policy of judging the work of a Department solely by the number of visits made. Quality is as important, if not more so than Quantity.

The latter however gives a guide to those supervising the services as to the general occupation of the Staff. Taken in conjunction with Tables 47 and 63 and the other parts of this Report it is clear that the Public Health Inspectors are over-worked in the calls made upon them for attention and that the Department is grossly understaffed for the proper care and safety of a town of this size. In Gosport we have 4 inspectors. Our proportion is about 1 to 16,000 persons, the average throughout England is 1 to 9,300 and it is generally accepted that the proportion should be 1 to between 8,000 and 10,000 population. Gosport should have at least 6 inspectors and that would be the absolute minimum. The urgent need for additional staff is reported yearly. The problem is even more urgent now with such recent legislation as Food Hygiene, Clean Air and Rent Act.

16. GENERAL PROVISION of HEALTH SERVICES (Section G)

This section is set out mainly for reference. The majority of the services referred to here are provided through the County Health or Education Authority. Gosport has a problem in this division of Health Services administration by THE BOROUGH for the mainly environmental side and THE COUNTY for the mainly personal side. The need for local co-ordination under one Officer is necessary to ensure that the available staff and services are used to the best and most economical advantage for the people served. It is possible that in 1960 the Borough will have control of many of these County Services under the Delegation Scheme as set out in the Local Government Act, 1958.

17. THE HOME HELP SERVICE (Table 67)

This Service deserves special mention. It is an excellent example of how a sound Public Health Scheme can result in a saving of public expenditure. It provides at a comparatively reasonable cost a service at home and thus avoids the much more costly institutional care which would, in many cases, be the alternative.

18. THE SCHOOL CLINIC (Table 70)

The "School Clinic" is becoming slowly but surely the focus of all the School Health activities very much on the lines as advised by the Ministry. It is used for detailed examinations and supervision which can be better carried out there than in Schools. It is being used more and more as a place where parents, teachers and even General Practitioners can join in dealing with our common problems.

19. THE MINOR ORTHOPAEDIC CLINIC (Table 69)

This Clinic serves a most useful demand. It is not sufficiently appreciated that minor orthopaedic defects can and often do develop into major conditions. It is a fallacy to say that minor conditions generally rectify themselves. They may remain stationary. However slight the defect is, it puts an unnecessary strain on the body, wasting much energy. Early treatment is essential. One Clinic a month is insufficient. Many cases are now seen at the School Clinic to ease the situation. This has not solved the problem of the long waiting list.

20. DUTIES of a PUBLIC HEALTH DEPARTMENT

(a) This title is not accepted everywhere or by everybody. Our outlook and sphere of activity has changed. We are becoming more interested in the strains we meet than the drains we use. Two titles which are favoured as covering our interests more clearly are "Social Medicine" and "Preventive Medicine". The World Health Organisation has defined "Health" as a combination of Physical, Mental and Social Well-being. It is the department's duty to promote health - as defined here - and prevent illness, where possible. Illness is any departure from the healthy state.

(b) Preventive Medicine is not a new science or cult. Records show that it was established in many ancient civilizations. It was highly developed in India as long ago as 5,000 B.C. In early Greece it was practiced skillfully. As long ago "Before Christ" as we are now "After Christ", the Egyptians carried out wise sanitation measures to prevent diseases. For instance, they imported storks on to the banks of their rivers and canals. These birds thrived on the Bilharzia carrying snails. That tropical disease was controlled in those far off days!! The Babylonians boiled their drinking water. They preached the truth that insects spread diseases and practiced appropriate preventive measures. The Jews in their earliest days, the days of the Old Testament, knew that plague was carried by rats. Their hygiene laws, old as they are, are still standards worthy of imitation. The Romans appreciated the value of a pure water supply to a community. They built aqueducts

which are still in existence. In 500 B.C. they instituted the Aediles - Public Health Inspectors.

(c) The story of why Preventive Medicine was forgotten and neglected, and how it was revived in this country about 100 years ago, is full of interest but too long for this Report. This brief reference, however, is not out of place. Much benefit to many nations has been gained through practicing it in the past. There is a much wider field in which it can be used now to give health in its full definition to the people. Prevention is Cheaper than Cure. A well supported and encouraged Public Health Department can be of immeasurable value to every member of the community it serves.

21. HEALTH EDUCATION

A priority duty of a good Health Department is to provide suitable Health Education to the numerous groups of persons who collectively constitute the community. Each group - school children, young married women, parents, elderly people, for example - needs a different approach. Health Education is not just a poster, or a leaflet, or one talk or demonstration. It is a planned approach to the particular group. It must hand out information as well as stimulate an interest in the "Health" problems of the group. A successful scheme produces good healthy citizens. There is very little Health Education undertaken by the Department in Gosport. We have insufficient staff for this work which the Ministry says should be "regarded as a primary activity of local authorities."

22. PRESENT STAFF - URGENT PROBLEM

I cannot do better than repeat the paragraph which appeared in my last Report.

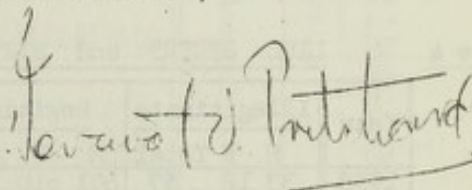
"Gosport is growing rapidly. Public Health interests are spreading to a wider field and more legislation relevant to our duties is being passed. These are facts. The demands created cannot be satisfactorily or safely met by the PRESENT STAFF - Medical, Clerical or Inspectors. Staff should grow in some recognisable proportion to the growth of the work. This is an URGENT PROBLEM calling for early consideration."

23. CONCLUSION

It is a pleasure to express my deep appreciation to the Staff, and in particular to Mr. Cope and Mr. Moore, for their loyal and ever willing assistance in keeping this machine running.

I have the honour to be Sir, Ladies and Gentlemen,

Your obedient Servant,



November, 1959.

Medical Officer of Health

GENERAL STATISTICS

Table 1 GEOGRAPHICAL INFORMATION

The Borough of Gosport covers an area of 6,185 acres.

It is peninsular; bounded on the land side by Fareham U.D.C. (to the north-west) and by the sea - the Solent (on the south-west and the south-east) and Portsmouth Harbour (on the north-east).

Its greatest length, east to west or south-east to north-west is about $4\frac{1}{2}$ miles.

Its greatest breadth, north-east to south-west, is about $3\frac{1}{4}$ miles.

Table 2 GENERAL INFORMATION

Estimated Mid-Year Population.....	65,220
Number of Inhabited Houses (end of 1958 according to Rate Books).....	18,667
Rateable Value.....	£798,236
Estimated Product of Penny Rate (Financial Year 1957-58)	3,229

Table 3 AGE and SEX DISTRIBUTION of POPULATION at Census 1951

S = Single M = Married W = Widowed D = Divorced

Age	Males					Females					Total in Population
	S	M	W	D	Total	S	M	W	D	Total	
Under 1	506	-	-	-	506	526	-	-	-	526	1,032
1 - 4	2,460	-	-	-	2,460	2,414	-	-	-	2,414	4,874
5 - 9	2,598	-	-	-	2,598	2,345	-	-	-	2,345	4,943
10 - 14	2,034	-	-	-	2,034	1,835	-	-	-	1,835	3,869
15 - 19	3,230	26	-	-	3,256	1,682	117	-	1	1,800	5,056
20 - 29	3,185	2,483	5	6	5,689	1,163	3,066	14	9	4,252	9,941
30 - 39	494	3,505	19	36	4,054	388	3,696	108	63	4,255	8,309
40 - 49	275	3,395	51	40	3,761	296	3,215	235	48	3,794	7,555
50 - 59	192	2,352	87	20	2,651	255	2,132	409	34	2,830	5,481
60 - 69	112	1,509	187	6	1,814	239	1,376	811	6	2,432	4,246
70 - 74	34	462	111	-	607	88	337	413	2	840	1,447
75 - 79	15	259	122	-	396	58	148	304	1	511	907
80 - 84	3	77	66	1	147	25	42	184	-	251	398
85 - 89	5	23	36	-	64	16	12	92	-	120	184
90 - 94	-	2	10	-	12	1	2	19	-	22	34
95 & over	-	-	-	-	-	-	-	3	-	3	3
Totals	15,143	14,093	694	119	30,049	11,331	14,143	2,592	164	28,230	58,279

Previous Census Population Figures:- 1931....38,443
1921....35,607

Table 4 LIVE BIRTHS and BIRTH RATE

Year	Illegitimate			Legitimate			Total Live Births	Birth Rate per 1,000 Home Population	
	M	F	Total	M	F	Total		GOSPORT	End & Wales
1958	33	18	57	601	610	1,211	1,262	19.3	16.4
1957	27	10	37	550	504	1,054	1,091	16.9	16.1
1956	23	21	44	545	496	1,041	1,085	17.0	15.6
1955	22	24	46	559	445	1,004	1,050	16.8	15.0
1954	33	20	53	503	454	957	1,010	16.0	15.2
1953	23	23	46	524	485	1,009	1,055	17.6	15.5
1952	26	33	59	531	513	1,044	1,103	18.5	15.3
1951	19	22	41	527	480	1,007	1,048	17.8	15.5

The Gosport Birth Rate Correction Factor (1.00 for 1958) has been applied above to make the comparison on a comparable population distribution as for the whole country.

Table 5 STILL BIRTHS

	1958	1957	1956	1955	1954	1953	1952	1951
Illegitimate	-	1	-	1	1	2	-	1
Legitimate	21	27	14	21	25	15	30	28
Total:	21	28	14	22	26	17	30	29

A child which has issued forth from its mother after the twenty-eighth week of pregnancy and which did not at any time after being completely expelled from its mother breathe or show any other signs of life is said to be still-born.

Table 6

DEATHS in AGE GROUPS expressed as PERCENTAGE of TOTAL DEATHS

Age at Death			1955		1956		1957		1958			
No.	% of Total Deaths	Accumulative Totals	No.	% of Total Deaths	Accumulative Totals	No.	% of Total Deaths	Accumulative Totals	No.	% of Total Deaths	Accumulative Totals	
Under 1 yr	24	4.59%	18	3.36%	18	3.36%	19	3.84%	38	6.15%	38	6.15%
1 & " 5 yrs	2	.39%	2	.37%	20	3.73%	2	.41%	4	.65%	42	6.80%
" " 10 "	2	.36%	3	.56%	23	4.29%	3	.61%	1	.16%	43	6.96%
" " 15 "	4	.77%	1	.19%	24	4.48%	1	.20%	2	.32%	43	6.96%
" " 20 "	4	.76%	5	.94%	29	5.42%	8	1.62%	2	.32%	45	7.28%
" " 25 "	2	.39%	5	.93%	34	6.35%	3	.60%	2	.32%	47	7.60%
" " 30 "	7	1.34%	5	.94%	39	7.29%	9	1.83%	3	.49%	50	8.09%
" " 35 "	7	1.34%	2	.37%	41	7.66%	5	1.01%	2	.32%	52	8.41%
" " 40 "	6	1.15%	4	.75%	45	8.41%	4	.81%	9	1.46%	61	9.87%
" " 45 "	7	1.34%	8	1.50%	53	9.91%	10	2.02%	9	1.45%	70	11.32%
" " 50 "	22	4.21%	18	3.36%	71	13.27%	16	3.24%	19	3.08%	89	14.40%
" " 55 "	27	5.18%	20	3.74%	91	17.01%	27	5.47%	28	4.53%	117	18.93%
" " 60 "	28	5.36%	45	8.41%	136	25.42%	35	7.08%	38	6.15%	155	25.08%
" " 65 "	51	9.77%	41	7.67%	177	33.09%	38	7.69%	73	11.81%	228	36.89%
" " 70 "	55	10.52%	69	12.89%	246	45.98%	65	13.16%	60	9.71%	288	46.60%
70 " 75 "	77	14.77%	87	16.26%	333	62.24%	66	13.36%	83	13.43%	371	60.03%
75 " 80 "	85	16.28%	91	17.01%	424	79.25%	77	15.59%	100	16.18%	471	76.21%
80 " 85 "	57	10.92%	67	12.52%	491	91.77%	51	10.34%	83	13.45%	554	89.66%
85 " 90 "	40	7.66%	32	5.96%	523	97.75%	43	8.69%	47	7.59%	601	97.25%
90 " 95 "	22	4.22%	10	1.87%	533	99.62%	12	2.43%	15	2.43%	616	99.68%
95 and over	522	100.00%	2	.38%	535	100.00%	494	100.00%	618	100.00%	618	100.00%

Table 7

DEATHS by AGE PERIODS and SEX

Age at Death	Number of Deaths	1958			1957		
		M	F	Accumulative Total	M	F	Accumulative Total
0 - 4 Weeks	ffffffff	16	9	25	11	4	15
1-11 Mths	fff	10	3	38	2	2	19
1	m	1		39			19
2	f		1	40	1	1	21
3	mm	2		42			21
4				42			21
5-9	m	1		43		3	24
10-14				43		1	25
15-19	m f	1	1	45	7	1	33
20-24	m f	1	1	47	3		36
25-29	mm f	2	1	50	5	4	45
30-34	m f	1	1	52	2	3	50
35-39	mmmm ffffff	4	5	61	1	3	54
40-44	mmmm ffffff	4	5	70	6	4	64
45-49	mmmmmmmm fffffff	12	7	89	8	8	80
50-54	mmmmmmmmmm fffffff	18	10	117	14	13	107
55-59	mmmmmmmmmmmm fffffff	27	11	155	26	9	142
60-64	mmmmmmmmmmmmmm fffffff	50	23	228	27	11	180
65-69	mmmmmmmmmmmmmmmm fffffff	32	28	288	48	17	245
70-74	mmmmmmmmmmmmmmmmmm fffffff	38	45	371	33	33	311
75-79	mmmmmmmmmmmmmmmmmmmm fffffff	45	55	471	38	39	388
80-84	mmmmmmmmmmmmmmmmmmmmmm fffffff	45	38	554	19	32	439
85-89	mmmmmmmmmmmmmmmmmmmmmmmm fffffff	16	31	601	16	27	482
90-94	mmmmmmmm fffffff	6	9	616	5	7	494
95 & over	m f	1	1	618			494
m = One Male Death f = One Female Death Totals:-		333	285	618	272	222	494

Table 8

CAUSES of DEATH

Cause of Death	1958			1957
	Males	Females	Total	Total
Tuberculosis : Respiratory	4	-	4	4
Other Forms	-	-	-	2
Syphilitic Disease	-	-	-	1
Diphtheria	-	-	-	-
Whooping Cough	-	-	-	-
Meningococcal Infections	-	-	-	-
Acute Poliomyelitis	-	-	-	1
Measles	-	-	-	-
Other Infective and Parasitic Diseases	-	-	-	3
Malignant Neoplasm : Stomach	12	8	20	12
Lung, Bronchus	24	2	26	20
Breast	-	9	9	8
Uterus	-	4	4	5
Other Malignant and Lymphatic Neoplasms	24	31	55	52
Leukaemia, Aleukaemia	4	2	6	3
Diabetes	1	2	3	8
Vascular Lesions of Nervous System	43	50	93	76
Coronary Disease, Angina	56	44	100	72
Hypertension with Heart Disease	9	7	16	15
Other Heart Disease	36	42	78	58
Other Circulatory Disease	13	13	26	17
Influenza	3	2	5	5
Pneumonia	18	11	29	17
Bronchitis	16	7	23	20
Other Diseases of Respiratory System	3	2	5	5
Ulcer of Stomach and Duodenum	4	2	6	1
Gastritis, Enteritis and Diarrhoea	2	2	4	1
Nephritis and Nephrosis	1	-	1	5
Hyperplasia of Prostate	6	-	6	2
Pregnancy, Childbirth, Abortion	-	1	1	1
Congenital Malformations	7	2	9	9
Other Defined and Ill-defined Diseases	27	32	59	42
Motor Vehicle Accidents	5	2	7	9
All Other Accidents	10	5	15	13
Suicide	5	3	8	6
Homicide and Operations of War	-	-	-	1
Totals All Causes	333	285	618	494

Table 9

DEATHS and DEATH RATE

YEAR	DEATHS			DEATH RATE	
	M	F	Total	Per 1,000 Home Population GOSPORT	Eng & Wales
1958	333	285	618	12.5	11.7
1957	272	222	494	10.1	11.5
1956	286	249	535	11.1	11.7
1955	292	230	522	10.3	11.7
1954	268	198	466	9.1	11.3
1953	279	245	524	10.3	11.4
1952	276	237	513	10.2	11.3
1951	286	287	573	11.5	12.5

The Gosport Death Rate Correction Factor (1.32 for 1958) has been applied above to make the comparison on a comparable population distribution as for the whole country.

Table 10

MATERNAL MORTALITY and RATE

	GOSPORT		Eng & Wales
	Number	Rate	Rate
1958	1	0.78	0.43
1957	1	0.89	0.47
1956	Nil	Nil	0.56
1955	Nil	Nil	0.64
1954	2	1.93	0.69
1953	Nil	Nil	0.76
1952	1	0.88	0.72
1951	1	0.93	0.80

Table 11 INFANT MORTALITY and RATE

	No. of Deaths under 1 Year			Infant Mortality Rate		
	All			All		
	Legitimate	Illegitimate	Infants	Legitimate	Illegitimate	Infants
England) & Wales)1958	-	-	16,684	-	--	22.6
Gosport 1958	35	3	38	28.9	58.8	30.1
" 1957	18	1	19	17.0	27.0	17.4
" 1956	18	-	18	17.3	-	16.6
" 1955	24	-	24	23.9	-	22.9
" 1954	25	2	27	26.1	37.7	26.7
" 1953	32	1	33	31.7	21.8	31.2
" 1952	20	2	22	19.1	33.9	19.9
" 1951	22	-	22	21.8	-	20.9

Notes (a) Infant Mortality Rate is the number of Deaths of Infants Under One Year of Age per 1,000 Live Births in the same category, i.e. Legitimate, Illegitimate or "All Live Births".

(b) The Rate of 22.6 for England and Wales is the lowest on record.

Table 12 HEALTH PICTURE COMPARISON 1914 - 1918 and 1954 - 1958

	Yearly Average For 5 Years 1914-1918	Yearly Average For 5 Years 1954-1958	Increase	Decrease
Population	30,590	63,450	107.42%	
Birth Rate	23.5	17.2		26.81%
Total Live Births	721	1,099	52.42%	
Infant Mortality Rate	69.5	22.7		67.34%
Death Rate	14.1	10.4		26.24%
Total Deaths	405	527	30.12%	
Deaths Under 1 Year	50	25.2		49.60%
" 1 - 4 Years	32	2.4		92.50%
" 5 - 14 "	11	3.4		69.09%
Total Deaths of Children	93	31.0		66.66%

SECTION C

CONTROL over INFECTIOUS and OTHER DISEASESTable 13 INCIDENCE and DEATHS - Infectious Diseases

	1958		1957	
	Cases	Deaths	Cases	Deaths
Acute Poliomyelitis (paralytic)	2	-	10	1
" " (non-paralytic)	-	-	14	-
Dysentery	20	-	5	-
Erysipelas	9	-	14	-
Food Poisoning	8	-	30	-
Measles	73	-	1,143	-
Paratyphoid Fever	-	-	1	-
Pneumonia	15	29	40	17
Puerperal Pyrexia	5	-	5	-
Scarlet Fever	28	-	7	-
Whooping Cough	21	-	177	-
Enteritis & Diarrhoea under 2 years (not notifiable)	-	-	-	1

Table 14 ADMISSIONS TO INFECTIOUS DISEASES HOSPITAL

1958	
Cerebral Haemorrhage.....	1
Chickenpox.....	4
Convulsions & Br.Pneumonia....	1
D & V.....	10
Erythema Nodosum.....	1
Gastro Enteritis.....	14
Hysteria.....	1
Infective Hepatitis.....	3
Influenza.....	3
Measles.....	2
Mumps & Osteomyelitis.....	1
Observation.....	11
Poliomyelitis (Paralytic).....	2
Puerperal Pyrexia.....	5
P.U.O.....	2
Resp Inf & Par-Enteral Diarr....	1
Scarlet Fever.....	2
Skin Infections.....	3
TB Meningitis.....	2
Whooping Cough.....	2

Table 15 IMMUNISATION AGAINST DIPHTHERIA

COMPARISON WITH OTHER AREAS

Area	Population	Births	Primary Course			Total	Booster Dose All Ages
			Under 1 Year %	1 - 14 No.	1 - 14 Years		
GOSPORT MB	65,220	1,262	49%	620	264	884	279
Aldershot MB	40,220	612	47%	285	253	538	308
Fareham U.D.	54,140	969	61%	595	210	805	773
Winchester M.B.	27,070	411	74%	303	86	389	154
Urban Areas) in County)	435,570	7,788	42%	3,258	2,963	6,221	4,837
ADMIN. COUNTY) HAMPSHIRE)	732,200	12,814	43%	5,507	4,806	10,313	8,240

Table 16 IMMUNISATION AGAINST WHOOPING COUGH

COMPARISON WITH OTHER AREAS

Area	Population	Births	Primary Course			Total	Booster Dose All Ages
			Under 1 Year %	1 - 14 No.	1 - 14 Years		
GOSPORT MB	65,220	1,262	50%	634	256	890	279
Alders' ot MB	40,220	612	44%	272	168	440	114
Fareham UD	54,140	969	60%	577	175	752	415
Winchester MB	27,070	411	73%	302	53	355	45
Urban Areas) in County)	435,570	7,788	43%	3,323	2,590	5,913	2,082
ADMIN. COUNTY) HAMPSHIRE)	732,200	12,814	44%	5,582	4,199	9,781	3,304

Table 17

IMMUNISATIONS (Diphtheria, Whooping Cough, Tetanus)

By OPERATOR and AGE at DATE of PRIMARY COURSE or BOOSTER DOSE

			OPERATOR						
			PRIMARY			BOOSTER			
			AGE	Family Doctor	Asst C.M.Os	TOTAL	Family Doctor	Asst C.M.Os	TOTAL
A. DIPHTHERIA only			Under 1	13	28	41	-	-	-
			1 to 4	8	13	21	3	2	5
			5 to 14	3	-	3	11	5	16
			Total	24	41	65	14	7	21
B. DIPH/WHOOPING COUGH			Under 1	69	-	69	-	-	-
			1 to 4	48	2	50	36	17	53
			5 to 14	10	-	10	111	-	111
			Total	127	2	129	147	17	164
C. DIPH/WH.C/TETANUS			Under 1	341	169	510	-	-	-
			1 to 4	125	36	161	18	2	20
			5 to 14	19	-	19	72	2	74
			Total	485	205	690	90	4	94
D. WHOOPING COUGH only			Under 1	7	48	55	-	-	-
			1 to 4	6	5	11	16	2	18
			5 to 14	1	4	5	2	1	3
			Total	14	57	71	18	3	21
TOTAL				650	305	955	269	31	300
TOTALS	DIPHTHERIA (ie. A + B + C)	Under 1	423	197	620	-	-	-	
		1 to 4	181	51	232	57	21	78	
		5 to 14	32	-	32	194	7	201	
		Total	636	248	884	251	28	279	
	WHOOPING COUGH (ie. B + C + D)	Under 1	417	217	634	-	-	-	
		1 to 4	179	43	222	70	21	91	
		5 to 14	30	4	34	185	3	188	
		Total	626	264	890	255	24	279	
	TETANUS (ie. C only)	Under 1	341	169	510	-	-	-	
		1 to 4	125	36	161	18	2	20	
		5 to 14	19	-	19	72	2	74	
		Total	485	205	690	90	4	94	

Table 20

VACCINATION against SMALLPOX

Year	Primary Vaccinations						Re-Vaccinations				TOTAL
	Under 1	1 yr	2-4yrs	5-14yrs	15+	Total	2-4yrs	5-14yrs	15+	Total	
1958	(a) 880	33	42	29	34	1,018	15	60	152	227	1,245
1957	(b) 827	42	54	68	57	1,048	13	80	173	266	1,314
1956	(c) 758	29	48	32	28	895	16	54	112	182	1,077
1955	(d) 663	38	40	27	49	817	13	41	127	181	998
1954	(e) 623	43	40	28	36	770	6	53	139	198	968

(a) = 69.7% of Potential (1,262 births) (d) = 63.1% of Potential (1,050 births)
 (b) = 75.8% " " (1,091 ") (e) = 61.7% " " (1,010 ")
 (c) = 69.9% " " (1,085 ")

Total Vaccinations & Re-Vaccinations	Year			
	1955	1956	1957	1958
By General Practitioners	936	846	988	960
At Child Welfare Centres	62	231	326	285
Totals	998	1,077	1,314	1,245

NOTE: Vaccination at C.W.Cs commenced in September 1955

Table 21

VACCINATION against SMALLPOX - COMPARISON with OTHER AREAS

	Primary Vaccinations					Re-Vaccinations			TOTAL
	Under 1 Year		1-2 After		Total	Under	After	Total	
	%	No.	yrs	2 yrs		15 yrs	15 yrs		
GOSPORT	69.7	880	33	105	1018	75	152	227	1245
Aldershot	68.0	416	27	100	543	121	185	306	849
Fareham	72.2	700	23	80	803	78	161	239	1042
Winchester	64.7	266	11	40	317	46	110	156	473
County)									
Urban Areas)	69.8	5440	202	802	6444	732	1396	2128	8572
Admin. County)									
Hampshire)	67.8	8687	320	1233	10240	980	2179	3159	13399

Note: The No. of babies vaccinated before their first birthday is shown in the first column as a percentage of the potential, that is of the No. of babies born in the period.

Table 22

VACCINATION against SMALLPOX - COMPARISON with OTHER AREAS

Babies (under 12 months) Vaccinated in Hampshire
Expressed as a Percentage of Live Births

Area	1956 %	1957 %	1958 %
Urban Areas: Aldershot M.B.	68.8	61.3	68.0
Alton U.D.	48.6	45.4	53.9
Andover M.B.	52.8	63.3	55.3
Basingstoke M.B.	60.4	69.5	78.7
Christchurch M.B.	63.2	62.7	61.6
Eastleigh M.B.	57.2	62.2	64.7
Fareham U.D.	59.3	70.4	72.2
Farnborough U.D.	58.8	83.4	73.3
Fleet U.D.	54.6	67.5	66.0
GOSPORT	69.9	75.8	69.7
Havant & Waterloo U.D.	62.6	74.3	74.7
Lymington M.B.	74.5	73.5	79.1
Petersfield U.D.	58.2	80.2	63.4
Romsey M.B.	42.7	77.5	63.8
Winchester City	59.7	69.1	64.7
AVERAGE for URBAN AREAS in HAMPSHIRE	61.6	70.3	69.8
AVERAGE for RURAL AREAS in HAMPSHIRE	58.2	65.8	64.6
AVERAGE for COUNTY of HAMPSHIRE	60.2	68.5	67.8

Table 23

VACCINATION against POLIOMYELITIS

Until September 1958 the Scheme continued to operate as at the end of 1957, viz. by Registration through the County Medical Officer for Children born on or after 1st January 1943, for Expectant Mothers and for Special Classes (doctors, hospital staff, etc). Vaccinations continued to be carried out by family doctors and at the Gosport Health Clinic.

In October 1958 the Scheme was re-organised and extended as follows:-

- (i) Registration through the C.M.O. was discontinued and registrations accepted at the Health Department, at Child Welfare Centres and by Family Doctors.
- (ii) The Age Group was extended to all persons born on or after 1st January 1933.
- (iii) Where applicable, vaccination was offered at Child Welfare Centres.
- (iv) A third injection (at least seven months after the second) was introduced.

Supplies of Vaccine (except British vaccine) became more plentiful and, by the end of 1958, the following persons in the Borough had been vaccinated:-

	Completed SECOND Injection	Completed THIRD Injection
Children born in the years 1943-1958	7,331	168
Adults " " " " 1933-1942	63	-
Expectant Mothers	235	-
General Practitioners and their families	36	3
Ambulance Staff and their families	13	-
TOTALS:-	7,678	171

Table 24

TUBERCULOSIS - THE REGISTER

	On Register 1953 1957 1956			Attending Chest Clinic 1953 1957 1956			Admitted To Sanatoria 1953 1957 1956		
<u>Pulmonary</u>									
Adult Males	371	352	348	312	299	283	18	21	31
" Females	280	280	266	217	223	206	12	6	14
Children	36	34	37	22	25	34	3	-	1
Total	687	666	651	551	547	523	33	27	46
<u>Non-Pulmonary</u>									
Adult Males	38	34	29	17	23	18	1	3	-
" Females	48	49	46	27	28	26	-	1	1
Children	15	18	21	4	5	9	-	-	5
Total	101	101	96	48	56	53	1	4	6
TOTAL (All Cases)	788	767	747	599	603	576	34	31	52

Table 25

TUBERCULOSIS - AGE & SEX DISTRIBUTION (New Cases/Deaths/Register)

	New Cases				Deaths				Cases on Register at end of year			
	Pulm		Non-Pulm		Pulm		Non-Pulm		Pulm		Non-Pulm	
	M	F	M	F	M	F	M	F	M	F	M	F
Under 5 Years									2			
5 - 14 "	1								12	8	4	4
15 - 24 "	4	5	2						41	46	17	12
25 - 44 "	13	4		3					157	170	14	25
45 - 64 "	13	5	1		4				152	53	10	12
65 yrs & over	2	1							32	9	2	1
Totals	33	15	3	3	4	-	-	-	396	291	47	54
Totals for 1958	53		6		4		-		687		101	
		59				4				783		
Totals for 1957	32		5		4		2		666		101	
		37				6				767		
Totals for 1956	42		7		4		-		651		96	
		49				4				747		
Totals for 1955	69		7		2		-		646		91	
		76				2				737		
Totals for 1954	48		8		7		3		613		86	
		56				10				699		
Totals for 1953	86		12		7		2		578		83	
		98				9				661		

Table 26

TUBERCULOSIS - DEATH RATE

Year	GOSPORT	Eng & Wales
1958	0.06	0.09
1957	0.12	0.11
1956	0.08	0.12
1955	0.04	0.15
1954	0.16	0.18
1953	0.18	0.20
1952	0.18	0.24
1951	0.22	0.31
1950	0.32	0.36
1949	0.54	0.45

Note - Death rates are Deaths from all forms of Tuberculosis per 1,000 population, corrected - for Gosport - by our population factor

Table 27

TUBERCULOSIS - NOTIFICATIONS of RESPIRATORY TUBERCULOSIS (All Ages)

COMPARISON with OTHER AREAS

	1958		1957		1956		1955		1954		1953	
	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.
GOSPORT	* 53	0.81	32	0.49	* 42	0.66	69	1.11	48	0.77	* 86	1.36
Hants County (incl. Gosport but excluding Portsmouth, Southampton & Bournemouth)	324	0.44	336	0.47	415	0.64	399	0.58	426	0.64	535	0.79
Portsmouth	107	0.48	125	0.55	143	0.80	160	0.67	194	0.80	252	1.02
Southampton	133	0.67	171	0.87	210	1.29	292	1.49	250	1.28	262	1.48
Bournemouth	110	0.76	114	0.79	107	0.96	117	0.82	136	0.96	98	0.70
Western Area of S.W.M.R. Hosp. Board (i.e. Hants, Dorset, Wilts and I.O.W.)	888	0.42	1007	0.57	1137	0.73	1202	0.69	1268	0.73	1418	0.82

* = Mass Radiography Unit visited Gosport in these years.

Table 28

BACTERIOLOGICAL EXAMINATIONS for CONTROL of INFECTIOUS DISEASES

Specimens Submitted to P.H.Laboratory, Portsmouth				Reported Positive		Reported Negative	
Total				Total		Total	
<u>D & V (School)</u>							
Faeces (Cases)	10			-		10	
" (Contacts)	2			-		2	
School Meals	2	14		-	-	2	14
<u>DYSENTERY</u>							
Faeces (Cases)	45			Sh.Sonnei 19		26	
" (Suspected Cases)	3			-		3	
" (Contacts)	40	88		Sh.Sonnei 6	25	34	63
<u>FOOD POISONING</u>							
Faeces (Suspected Cases)	4			-		4	
" (Contacts)	21			-		21	
Meat Pie	1			-		1	
Rissole	1			Cl.Welchi 1		-	
Tinned Crab	2			-		2	
" Peas	2	31		-	1	2	30
<u>PARA-TYPHOID B</u>							
Faeces (Carriers) following							
Sewer Swabs	6	6		Type 1	2 2	4	4
<u>POLIOMYELITIS</u>							
Faeces (Suspected Case)	3			-		3	
" (Contacts)	3	6		-	-	3	6
TOTALS				145		28 117	

SANITATION and GENERAL SERVICESTable 29 WATER - Public Supply

The main supply is a typical chalk water remaining practically constant in quality, neutral in reaction and free from deposit on standing. It has no plumbo-solvent action. It is hard in character but is much softened on boiling. The water is chlorinated before it reaches the mains.

The supply has been satisfactory in quality and quantity.

The following table shows the number of samples taken during the year. The results of analysis were all satisfactory:-

	<u>Chem.Exam</u>	<u>Bact.Exam</u>	<u>Total</u>
Water from Public Supply Mains	4	46	50
Water before chlorination	3	17	20

No action in respect of any form of contamination was required during the year. So far as it is known all except one of the dwelling houses in the borough have direct main supplies.

Table 30 DRAINAGE and SEWERAGE

The following additional lengths of sewers were laid in the borough during the year:-

		<u>Council & Admiralty</u> <u>Estates</u> yards	<u>Private</u> <u>Estates</u> yards
<u>Foul Sewers</u>	4"	208	1380
	6"	860	1800
	9"	294	280
<u>Surface Water Sewers</u>	6"	104	370
	9"	97	600
	12"		220

Table 31 SHORE POLLUTION INVESTIGATIONForeshore

3 samples of seawater were taken. All showed high coliform and faecal coli counts.

6 samples of sand were taken from that part of the beach uncovered at low tide. No pathogenic organisms were found.

samples of mussels were taken from an area uncovered only at very low tide. Both samples showed heavy contamination by faecal coli and Para. B. was isolated in one sample.

Moat at Stokes Bay

4 samples of water were taken and none of these showed heavy bacteriological contamination.

1 sample was submitted for chemical analysis. This showed organic pollution which could have arisen from seepage from the refuse with which part of the moat had already been filled.

All the samples were taken following complaints of obnoxious smells from the moat.

River Alver

A complaint was received of the presence in the river at its seaward end of large numbers of dead fish. Investigations were made immediately and I formed the opinion that the fish had died from lack of oxygen in the water. A sample of water was submitted for chemical analysis and the report on this confirmed that it was very deficient in oxygen. A meeting was arranged with a representative of the Hampshire Rivers Board and the problem discussed. It was thought likely that the oxygen in the water had been absorbed by some material which had entered the water either as a result of unauthorised dumping or had been washed in by rain from the adjacent refuse tip.

River Alver (continued)

2 samples of water submitted for bacteriological examination showed heavy contamination.

3 further samples were taken for chemical analysis at various points on the river and these showed that the source of the trouble was well above the tip.

Further investigations were made but it was not possible to find the origin of the trouble which by then had disappeared. No more complaints were received.

Storm/Surface Water Outfall, Stokes Bay

1 sample of water was taken and this showed an improvement on previous samples. Questionable water had been cut off since those were taken.

Table 32 SWIMMING BATHS and POOLS

103 visits were made in this section of the work.

The Gosport bath is equipped with a filtration and chlorination plant. Regular checks were made on the chlorine content. 4 samples were taken and all were satisfactory.

The Swimming and Paddling Pools at Lee on the Solent are not equipped with a filtration or chlorination plant. There is no continuous flow. Mains water was used throughout the season and additional chlorine was provided by adding manually to the water a proprietary liquid prepared for this purpose.

20 samples were taken, of which 14 were reported as satisfactory by the Public Health Laboratory, 4 suspicious and 2 unsatisfactory.

Table 33 CLOSET ACCOMMODATION

There were no conversions of pail closets to water closets during the year.

Number of water closets.....20,900 Number of pail closets.....11

Table 34 PUBLIC CLEANSING

Household refuse is collected once weekly by the Corporation.

Emptying of cesspools is carried out by Hants Cleansing Service under contract.

Table 35 CAMPING SITES

The only camping site in the Borough is that at Stokes Bay owned and administered by the Council. Inspections were made from time to time. Conditions were found to be satisfactory.

Table 36 SMOKE ABATEMENT

The provisions of the Clean Air Act 1956 relating to the emission of dark smoke, grit and dust from railways, vessels and industrial installations came into force in June, 1958. Contact was made with those factories in the Borough which came within the scope of those provisions. All boiler installations are capable of complying with the requirements of the Act if used properly.

In addition, visits were paid to all the Admiralty Establishments at the request of the officers in charge and advice given where necessary.

Complaints were received from time to time of excessive smoke from factory chimneys but on no occasions were emissions seen that contravened the standards laid down in the Act. It did show however that the public was alive to the problem.

The emission of foul, black exhaust gases by heavy road vehicles was also the subject of complaint and the attention of those responsible was drawn to the matter.

Table 37 DISINFECTION and DISINFESTATION

39 premises were disinfested for Bugs and/or Fleas during the year.

The arrangements made in 1956 whereby Haslar Hospital kindly undertook the disinfection by steam of infected bedding and clothes still holds good and has proved of great value to the work of the department.

Table 38

RODENT CONTROL - GENERAL

Except when carrying out duties as Mortuary Attendant or Disinfecter, two men are employed on Rodent Control. The following work was done during the year:-

	<u>1958 (1957)</u>	<u>1958 (1957)</u>
Inspections	Private Dwellings Treated.....	403 (483)
and Revisits 2843 (2267)	Business Premises Treated(Costs Recoverable)	41 (49)
	(Nos. treated include re-treatments where found necessary)	

The increased number of inspections and revisits resulted from "block control" whereby premises in the immediate vicinity of a reported infestation are checked so that the limits of the infestation may be found and effective treatment of the area carried out.

Table 39

RODENT CONTROL - SEWERS

Casual labour was employed when required for lifting of manhole covers etc.

Sewers in the borough are divided into sections and maintenance treatments were carried out during the year with very satisfactory results.

Table 40

MOSQUITO CONTROL

The very wet summer of 1958 resulted in a great increase in the number of mosquitoes. While every effort was made to deal with the problem, this was aggravated by the mass breeding taking place in areas not under the control of the Local Authority and also in private gardens.

Discussions took place during the year and further progress made in the filling-in of low-lying areas both by Service Departments and by the Borough Engineer's Department. A lot of work remains to be done but the situation should improve progressively.

The use of a dispersible powder mixed with water for spraying was continued and gave good results when weather conditions were favourable. The mosquito control operator carried out extensive investigations to find the sources and gave advice to many householders.

Table 41

PUBLIC CONVENIENCES

There are now 19 Public Conveniences in the Borough. They are administered by the Public Health Department through a special Sub-Committee.

The Conveniences have again suffered much wanton damage. The cost of replacements and repair was considerable.

Part-time cleaners are employed for all Conveniences except the Ferry Gardens (Ladies) where there is a full-time attendant.

Further discussions took place during the year on the siting of proposed new Conveniences. Work was started on the new Convenience at Marine Parade West, Lee-on-the-Solent.

Table 42

FACTORIES ACTS 1937 and 1948A. INSPECTIONS for purposes of PROVISIONS as to HEALTH

Premises	No. on Register	Inspections	Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities	17	32	1	-
2. Factories not included in (1) in which Sect.7 is enforced by the Local Authority	100	143	2	-
3. Other Premises in which Section 7 is enforced by L.A. (excluding Outworkers)	4	3	-	-
TOTAL	121	178	3	Nil

B. CASES in which DEFECTS were FOUND

Particulars	Defects Found Remedied		Referred to by H.M.I. H.M.I.		Prosecutions Instituted
Want of Cleanliness (Sect. 1)	3	4	-	-	-
Overcrowding (Sect. 2)	-	-	-	-	-
Unreasonable Temperature (Sect. 3)	-	-	-	-	-
Inadequate Ventilation (Sect. 4)	-	-	-	-	-
Ineffective Drainage of Floors (Sect. 6)	-	-	-	-	-
Sanitary Conveniences (Sect. 7):-					
(a) Insufficient	1	1	-	-	-
(b) Unsuitable or Defective	14	13	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other Offences against the Act (excluding offences relating to outwork)	1	1	-	-	-
TOTAL	19	19	-	-	Nil

Table 42 FACTORIES ACTS 1937 and 1948 (continued)

C. OUTWORK (Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	Out-workers in August List	Cases of default in sending Lists to the Council	Prosecutions for failure to supply Lists	Work in unwholesome Premises	Notices Served	Prosecutions
Wearing Apparel - Making etc	24	-	-	-	-	-

Table 43 WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITATION DUTIES

VISITS and INSPECTIONSA. Under the Public Health Acts

Dwelling Houses	811	
Complaints	425	
Drainage	285	
Offensive Trades	2	
Tents, Vans and Sheds	24	
Stables and Piggeries	182	
Offensive Accumulations and Refuse Disposal	98	
Mosquito Control	49	
Verminous Premises	47	
Re-Visits to Premises under Notice	823	
Atmospheric Pollution	33	
Cesspools and Ditches	21	
Houseboats	22	
Cinemas	6	2,828

B. Under Infectious Diseases Legislation

Visits and Re-Visits to Cases of Infectious Disease	640	640
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C. Under the Factories Acts

Visits to Factories (Power)	148	
" " " (Non-power)	30	178

D. Under Public Conveniences Control Duties

Maintenance Supervision visits	1,470	1,470
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E. Under Rodent Control Duties

Visits - exclusive of those made by Rodent Operator and reported elsewhere	270	270
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F. Under the Pet Animals Act 1951

Inspections and Re-Inspections of Premises	17	17
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G. Gosport Swimming Baths & Lee Swimming Bath & Paddling Pool

Visits re Water Supplies	103	103
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H. Shore Pollution

	25	25
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I. Interviews with Owners, Agents, Builders etc.

	637	637
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J. Other Visits not detailed above

Public Health Laboratory and Public Analyst	40	
Westfield Road Depot re choked sewers etc.	39	
St. Matthew's Yard	7	
Delivering Statutory Notices or to Post Office for despatch by registered post	3	
Complaints which, upon visit, did not come within scope of department	61	
Requests to Call - found to be made to wrong department	12	
Various departments at Town Hall and Portland Place	36	198

K. Miscellaneous Visits - not included above	23	23
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6,389

Table 44

SUMMARY OF SANITARY WORK CARRIED OUT (After Representation
by this Department)

<u>Houses</u>	Roofs	106	Windows	85
	Walls (external)	32	Sashcords	39
	Chimneys and Stacks	7	Floors	25
	Rainwater Pipes	11	Doors	46
	Eaves Guttering	25	Vermin & Cleansed	19
	Yards and Passages	6	Fireplaces	16
	Dampness Abated	101	Sinks (Repair or Renewal)	7
	Wallplaster	42	Sink Waste Pipes	10
	Ceilings	29	Miscellaneous	15
<u>Drainage</u>	Drains Cleared	135	Other Defects	6
	" Repaired	36		
<u>Water Closets</u>	New Pans Provided	17	New Cisterns Provided	8
	" Seats "	21	Repaired	14
<u>Contraventions</u>	Food Premises	83	Factories	9
	Stables and Piggeries	37	Other Premises	2
<u>Total Defects Remedied:</u>				989

Table 45

NOTICES

<u>Informal Notices Served</u>	Under Public Health Acts	281
	" Food and Drugs Act	63
	" Factories Acts	9
<u>Total:</u>		353
<u>Statutory Notices Served</u>		32
<u>Notices Complied With</u>		384

Table 46

SHOPS ACT and YOUNG PERSONS (Employment) ACT

Visits Made	2,367
Informal Notices Served	4
" " Complied with	4
Statutory Notices Served	Nil

SECTION E

HOUSING

Table 47

INSPECTION of DWELLING HOUSES during the YEAR

1(a) Total Number of Dwelling Houses Inspected for Housing Defects (under the Public Health or Housing Acts)	750
(b) Number of Inspections made for the purpose	1,286
2(a) Number of Dwelling Houses (included under Sub-head 1 above) which were Inspected and Recorded under Housing Consolidation Regulations 1925 & 1932	192
(b) Number of Inspections made for the purpose	311
3. Number of Dwelling Houses found to be in a state so Dangerous or Injurious to Health as to be Unfit for Human Habitation	80
4. Number of Dwelling Houses (exclusive of those referred to under the pre- ceeding Sub-head) Not Reasonably Fit for Human Habitation in all respects	187

Table 48

REMEDY of DEFECTS during the YEAR - WITHOUT SERVICE OF FORMAL NOTICES

Number of Defective Dwelling Houses rendered Fit in consequence of Informal Action by the Local Authority or their officers	203
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Table 49 ACTION under STATUTORY POWERS during the YEAR

A. Proceedings under Sections 9, 10 and 16 of the Housing Act 1936 and/or " 9, 10 and 12 " " " " 1957	Nil
B. Proceedings under Public Health Acts:-	
1. Number of Dwelling Houses in respect of which Notices were Served requiring Defects to be Remedied	32
2. Number of Dwelling Houses in which Defects were remedied after Service of Formal Notices:- (a) By Owners	40
(b) By Local Authority in default of Owners	Nil
C. Proceedings under Sections 11 and 13 of the Housing Act 1936 and/or " 16 and 17 " " " " 1957 and/or " 10 and 11 " " Local Government (Miscellaneous Provisions) Act 1953:-	
1. Number of Dwelling Houses in respect of which Demolition Orders were made	13
2. " " " " " " " " Closing Orders " "	24
3. " " " " " " " " Undertakings were Accepted	3
D. Proceedings under Sections 25-29 of the Housing Act 1936 and/or " 42-46 " " " " 1957:-	
1. Number of Clearance Orders made	4
2. " " Areas contained in above Orders	7
3. " " Dwelling Houses Confirmed as Unfit in above Orders	21

Table 50 HOUSING ACTS 1936 & 1957 - PART IV - OVERCROWDING

A. 1. Number of Overcrowded Dwellings on our Register at the end of the year	3
2. " " Families dwelling therein	5
3. " " Persons dwelling therein	21
B. Number of New Cases of Overcrowding reported during the year	1
C. 1. Number of Cases of Overcrowding relieved during the year	1
2. " " Persons concerned in such cases	6
D. Particulars of any cases in which dwellings have again become Overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil

Table 51 SLUM CLEARANCE - POSITION at 31st DECEMBER 1958

Total Number of Houses Demolished	449
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Table 52 HOUSING PROGRESS

	<u>During</u> <u>1958</u>	<u>Total</u> <u>Post-War</u>
<u>New Houses Built</u> Permanent (By Local Authority)	175)	
(By Private Enterprise)	104)	
(By Admiralty)	201)	4,940
Temporary (Prefab. by Local Authority)	-	600
<u>War Destroyed Houses Re-Built</u>	-	170

Table 53 ESTIMATED CONDITION of HOUSING (As at 31st December 1958)

Group A. Sound Houses - Suitable as modern homes	13,112
Group B. Unfit Houses - for Closure or Demolition (cannot be made fit for human habitation at a reasonable expense)	79
Group C. Good Houses (unsuitable as modern homes; require improvement or conversion)	2,043
Group D. Unfit Houses (can be made fit for human habitation at a reasonable cost)	1,248

Table 54 WORK of PUBLIC HEALTH INSPECTORS - HOUSING DUTIES
(Not Recorded Elsewhere)

Inspections:-	
Overcrowding	14
Houses-let-in-Lodgings	2
Applications for Council Houses	25
Improvement Grant Investigations	21
- 25 -	<u>62</u>

Many houses, particularly the smaller controlled ones, received attention by owners during the year. This was reflected by a corresponding decrease in the number of housing complaints. Only a very small proportion of those tenants affected by the Rent Act made applications for Certificates under it but many more tenants and owners made enquiries as to the implication of the Act.

The following table shows the action taken under the Act during 1958:-

APPLICATIONS for CERTIFICATES of DISREPAIR

1. Number of Applications for Certificates	80
2. " " Decisions Not to Issue Certificates	-
3. " " Decisions to Issue Certificates	
(a) in respect of some but not all defects	32
(b) " " " all defects	48
4. " " Undertakings given by Landlords	
under para.5 of the First Schedule	34
5. " " Undertakings refused by Local Authority	
under proviso to para.5 of the First Schedule	Nil
6. " " Certificates Issued	52

APPLICATIONS for CANCELLATION of CERTIFICATES

7. Applications by Landlords to Local Authority	
for Cancellation of Certificates	9
8. Objections by Tenants to Cancellation of Certificates	-
9. Decisions by Local Authority	
to Cancel in Spite of Tenants' Objection	-
10. Certificates Cancelled by Local Authority	9

284 Visits were Paid in Connection with this Work.

SECTION F

INSPECTION and SUPERVISION of FOOD

Table 56

MILK SAMPLING

Testing to note compliance with
Milk (Special Designations) (Raw Milk) Regulations 1949
and
Milk (Special Designations)(Pasteurised and Sterilised Milk) Regulations 1949

Class of Milk	Number of Samples Examined	Tests	Number of Samples	
			Passed	Failed
Pasteurised	82	Phosphatase	81	1
		Methylene Blue	82	-
T.T. Pasteurised	1	Phosphatase	1	-
		Methylene Blue	1	-

Phosphatase Test is for Adequacy of Heat Treatment
Methylene Blue Test is for Keeping Quality and Bacterial Count

Table 57

REGISTRATIONS (MILK CONTROL)

Under Milk and Dairies Regulations 1949:-

Dairies (other than dairy farms)	6
Distributors	4

Table 58

LICENCES (MILK CONTROL)

(a) Under Milk (S.D.)(P & S.M) Regulations 1949:-

Pasteurisers	2
Dealers (Pasteurised)	5
" " Supplementary	1
" (Sterilised)	5
" " Supplementary	1

(b) Under Milk (S.D.) (R.M) Regulations 1949:-

Dealers (Tuberculin Tested)	6
" " " Supplementary	1

Table 59

MEAT and OTHER FOODS - CONDEMNATIONS

136 lbs. Beef, 407 lbs. Bacon, 25 lbs. Lamb, 63 lbs. Pigs Liver (Imported)
and 79 lbs. Pigs Plucks (Imported) were condemned.

Other foodstuffs condemned as unfit for human consumption were as follows:-

Government Victualling Establishment

Beef Extract	57 jars	Tinned Apple Puddings	60 tins
Biscuits	170 lbs.	" Bacon	559 "
Chocolate	431 "	" Beans	881 "
Dried Beans	104 "	" Butter	97 "
" Fruit	1,056 "	" Cheese	272 "
" Peas	344 "	" Fish	508 "
" Vegetables	930 "	" Fruit	1,656 "
Flour	54 "	" Ham and Eggs	22 "
Hamburgers	47 "	" Margarine	68 "
Jam & Marmalade	18 "	" Meat	2,947 "
Lard	5 "	" Meat & Vegetables	6,368 "
Oatmeal	57 "	" Milk	1,799 "
Rice	1,025 "	" Rice Puddings	97 "
Split Peas	3,420 "	" Sausages	1,376 "
Steak and Kidney Pudding	12 "	" Soup	1,503 "
Sweets	269 pkts	" Tomatoes	615 "
Tea	4 lbs.	" Vegetables	2,041 "

Others

Biscuits	6 lbs.	Turkey	25 lbs
Cake	32 "	Tinned Chicken	5 tins
Cabbage	1,372 "	" Coffee and Chicory	5 "
Cheese	61 "	" Cream	1 tin
Chicken	50 "	" Fish	33 tins
Fish	92 "	" Fruit	492 "
Fruit Pulp	70 "	" Meat	349 "
Grapes	10 "	" Milk	58 "
Ham	114 "	" Preserves	3 "
Pickled Cabbage	34 jars	" Rice Puddings	3 "
Pork (Roast)	25 lbs.	" Sausages	2 "
Prawns	8 "	" Soup	61 "
Relish	2 bots	" Tomatoes	225 "
Sauce	4 "	" Vegetables	9 "
Sausages	5 lbs	" Baked Beans	27 "

Table 60

FOOD & DRUG SAMPLES

Taken under Sale of Food & Drugs Act 1955

	Genuine			Unsatisfactory			Total		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Milk	16	68	84	-	3(a)	3	16	71	87
Other Foods	5	90	95	-	10(b)	10	5	100	105
Drugs	-	11	11	-	4(c)	4	-	15	15
TOTAL	21	169	190	-	17	17	21	186	207

ACTION TAKEN re UNSATISFACTORY SAMPLES:-

(a)(i)	Milk	Deficient of 3.3% of minimum limit of milk fat.	Follow-up samples satisfactory.
(ii)	Channel Island Milk	Deficient of 2.5% of minimum standard of milk fat for Channel Island Milk.	Follow-up samples satisfactory.
(iii)	Milk	Deficient of 13% of minimum limit of milk fat.	Follow-up samples satisfactory.
(b)(i)	Non-Alcoholic Tomato Juice Cocktail	Label Offence. Vitamin B content declared as International Units instead of milligrams.	Very old stock. Labels of new stock satisfactorily amended.
(ii)	Jellied Pork (Canned)	Label Offence. Ingredients not given in the order of proportion by weight.	Manufacturer written.
(iii)	Apples	Arsenic 1.1, 1.5, 1.6 p.p.m Lead 5, 5, 6 p.p.m Arsenic and Lead present in excess of the F.S.C. recommended limits.	Samples taken after report received from port of landing of Lebanese Apples. Retailers and general public advised.
(iv)	Lemon Juice	Label Offence. The words "Lemon Juice" only appear embossed in small type.	Manufacturer advised.
(v)	Cream	Label Offence. The list of ingredients included the generic description "Vegetable Stabiliser". A specific description should be used for this ingredient.	Manufacturer agreed to amend Label.
(vi)	Fresh Grated Cheese	Misleading description.	Vendor warned.
(vii)	Vienna Sausage (Canned)	Misleading description. "Vienna Sausages" implies a Continental sausage containing 80% pork.	Manufacturer agreed to amend Label.
(viii)	Foam Crystals	Label Offence. The ingredient "edible gum" should be given the specific description which identifies the gum used.	Manufacturer agreed to amend Label.
(ix)	Plain Flour	Deficient of 32% of the minimum amount of calcium carbonate	Follow-up sample satisfactory.
(x)	Non-Alcoholic Orange Flavour Wine	Label Offence. Appropriate description is "Orange Flavour Cordial (Ready to Drink)"	Manufacturer agreed to amend Label as recommended
(c)(i)	Vita Glucose Tablets	Label Offence. Description "Vita Glucose" implies that one or more Vitamins are present.	Manufacturer agreed to amend label.
(ii)	Ammoniated Tincture of Quinine	Deficient of 41% of the minimum amount of ammonia prescribed by the B.P.C.	Old stock. Remainder destroyed.
(iii)	Codeine Tablets	Label Offence. "Compound Tablets of Codeine B.P.C." The preparation should be labelled B.P.	Label correctly amended.
(iv)	Ammoniated Tincture of Quinine	Deficient of 8% of the minimum amount of Ammonia prescribed by the B.P.C.	Retailer warned.

Table 61 ICE CREAM - REGISTRATION of PREMISES

For Manufacture and Sale 1
For Sale only 198

Table 62 ICE CREAM - SAMPLING

	No. of Samples Taken	Samples Reported				% in Grade 1	% in Grades 1 or 2	% in Grade 3	% in Grade 4
		Grade 1	Grade 2	Grade 3	Grade 4				
1958	55	53	Nil	1	1	96%	96%	2%	2%
1957	47	42	4	1	Nil	89%	98%	2%	Nil

The Public Health Laboratory Service advises that samples should be judged on results of a series and suggests that over a six-monthly period

50% of Samples should fall into Grade 1
80% " " " " " Grades 1 or 2
Not more than 20% " " " " " Grade 3
and no " " " " " Grade 4

The two samples reported as Grade 3 and Grade 4 were taken from the same premises.

In addition 47 Iced Lolly Samples were examined; all except 3 were satisfactory.

In all cases of unsatisfactory reports the manufacturer and the retailer were advised re precautions to be taken to prevent contamination. In one case the retailer was summoned for failing to take all reasonable precautions against contamination.

Table 63 WORK of PUBLIC HEALTH INSPECTORS - FOOD CONTROL DUTIES

VISITS and INSPECTIONS

<u>A. Inspections of Premises</u>		Bakehouses	52
		Butchers Shops	133
		Fishmongers and Poulterers	106
		Greengrocers and Fruiterers	99
		Grocers and Other Food Shops	415
		Food Preparing Premises	29
		Dairies and Milkshops	56
		Ice Cream Premises	132
		Preserved Food Premises	29
		Cafes	126
		Hawkers	12 1,169
<u>B. Visits in Connection with Sampling</u>		Food and Drugs Sampling	192
		Ice Cream Sampling	84
		Milk Sampling	96
		Water Sampling	32 399
<u>C. Inspection of Food</u>		Number of Visits to All Types of Premises in Connection with Inspection of Food	189
<u>D. Miscellaneous Visits</u>			19
			<u>1,776</u>

GENERAL PROVISIONofHEALTH SERVICES for the AREATable 64 LABORATORY FACILITIES

Public Health Laboratory Service,
Central Laboratory, Milton Road, Portsmouth (Port.22331)

Public Analyst's Laboratory,
Trafalgar Place, Clive Road, Portsmouth (Port.23641)

Table 65 AMBULANCE FACILITIES

The Ambulance Station in the Borough is situated in Privett Road and is one of the five stations (Fareham, Gosport, Havant, Hedge End, Petersfield) in the South-Eastern Division of the County Ambulance Service. The work of these Stations is co-ordinated at the Main Station at Fareham and it is there that all calls for ambulances are received. Written requests for transport should be sent to the County Ambulance Station, The Tannery, North Wallington, Fareham, and verbal requests telephoned to Fareham 2170.

The Local Health Authority is not under obligation to make arrangements for the conveyance of all persons suffering from illness but only of those for whom special transport, such as the Ambulance Service provides, is necessary. Under normal circumstances, therefore, transport can be provided only on the authority of a doctor but in an emergency an ambulance can be obtained by anyone using the "999" system provided by the Post Office telephone service.

Table 66 HOME NURSING and MIDWIFERY

Nurses and Midwives, unless out on urgent cases, can normally be reached at their own homes before 9 a.m., between 1-30 and 2-30 p.m., and in the evening.

DISTRICT NURSES

Miss D. Bransbury	39 The Croft, Stubbington	(Stubb. 295)
Miss R. F. Gattrell	74 Grove Road, Gosport	(Gosp. 82133)
Mrs E. Green	33 Bentham Road, Alverstoke	(Gosp. 80361)
Mrs M. F. Hughes	4 Goodwood Road, Gosport	(Gosp. 80861)
Miss V. M. Morgan	96 Sydney Road, Gosport	(Gosp. 82594)
Miss S. M. Pearce	116 Braemar Road, Bridgemary	(Fareham 3325)

MIDWIVES

Miss M. E. Fisher	89 Anns Hill Road, Gosport	(Gosp. 82922)
Mrs P. Fisher	36 Cuckoo Lane, Stubbington	(Stubb. 301)
Mrs C. Gow	146 Beauchamp Ave., Bridgemary	(Fareham 3809)
Miss G. Larcombe	3 Cottis Waye, Hill Head	(Stubb. 284)
Mrs P. Lihou	112 Chantry Road, Gosport	(Gosp. 83915)
Miss N. I. Milne	14 Withies Road, Rowmer	(Gosp. 81592)
Miss A. Rush	89 Anns Hill Road, Gosport	(Gosp. 82922)
Mrs R. Shaw	34 Windsor Road, Gosport	(Gosp. 82500)
Miss R. Topley	1 James Close, Bridgemary	(Fareham 3237)

Table 67 HOME HELP SERVICE

The County Council has established a Home Help Service to give help on medical recommendation to households where, owing to sickness, pregnancy, lying-in, old age or other reason, such help is necessary and cannot be obtained otherwise. Charges are made in accordance with the domestic circumstances. A leaflet on the Service giving full particulars is obtainable from:- The Divisional Home Help Organiser,
Mrs D. Moore, 22 Bury Road, Gosport (Gosp. 84242)

(a) HEALTH VISITORS

Mrs F. E. Beadsworth	89 Anns Hill Road, Gosport	(Gosp. 82922)
Mrs E. M. Edwards	32 Findon Road, Gosport	(Gosp. 81197)
Mrs M. E. Lutman	4 Prideaux Brune Ave., Bridgemary	(Fareham 3432)
Miss M. Osgood	79 Southampton Road, Fareham	(Fareham 3591)
Miss M. F. Payne	53A Cambridge Road, Gosport	(Gosp. 81615)
Mrs G. F. Rich	22 Oakdown Road, Stubbington (Appointed Oct. 1959)	
Miss N. M. Tratsart	(Left July 1959)	
Mrs M. Shea	23 Heaton Road, Gosport	(Gosp. 80165)
(Mrs Shea is also Chest Clinic Health Visitor for Gosport		
"The Gables", Spring Garden Lane, Gosport (Gosp. 82496)		
Miss J. Evans (School Nurse)	49 Bury Crescent, Alverstoke.	

Health Visitors can normally be reached at their own homes before 9 am and after 5 pm.

(b) ANTE-NATAL RELAXATION CLASSES are held at the Blake Maternity Home on Friday afternoons. The instruction is given by the County Midwives.

(c) ANTE-NATAL CLINICS Blake Maternity Home: Doctors' Clinic - Thursday at 2 pm.
Midwives' " - Monday " 2 pm.

(d) CHILD WELFARE CENTRES

Blake Maternity Home, Ham Lane, Elson	Every Tuesday at 2 pm.
Crossways Social Hall, Forton	Every Monday 9-30am - noon & 2-4pm.
Methodist Sunday School, Stoke Road	Every Wednesday 9-30am - noon & 2-4pm.
Hall of Christ The King, Wych Lane, Bridgemary	Every Thursday 2-4pm. (and 9-30 - noon as from 13.8.59)
Brodrick Hall, Clayhall Road, Alverstoke	Every Friday at 2 pm.
British Legion Hall, High Street, Lee-on-Solent	1st and 3rd Tuesdays each month from 2 pm.
Rowner Church Hut:-	from 8.1.53 Wednesdays at 2 pm
"	19.2.58 additional session Wednesdays at 10 am
"	16.10.58 additional session (Health Visitor only) Thursdays at 10 am (discontinued after 15.1.59)

Table 69

COUNTY COUNCIL SPECIAL CLINICS

The following Clinics are held at "The Gables" Spring Garden Lane (Tel Gosp. 80298):-

- (a) CHILD GUIDANCE CLINIC Psychiatrist holds a Clinic every Wednesday, all day, and every Tuesday afternoon.
Psychiatric Social Worker attends every Tuesday afternoon and Wednesday all day.
Psychologist attends every Wednesday afternoon.
Children are seen by appointment only.
- (b) MINOR ORTHOPAEDIC CLINIC Attended by Dr. P.V. Pritchard every second Tuesday in the month in the mornings.
Cases are seen by appointment only.
- (c) SPEECH CLINIC Attended by Mrs J.B. Davis, L.C.S.T.
For treatment of speech disorders in children under school age and children attending maintained schools.
Patients are seen, by appointment only, Tuesdays pm, Wednesdays and Fridays all day.

Table 70

SCHOOL & MINOR AILMENTS CLINIC

Health Office, 2 Stoke Road (Tel Gosp. 34242)
Attended by Dr. P.V. Pritchard, The Divisional School Medical Officer.
Open daily, except Saturdays, at 9-30 am.
Children are referred to the Clinic for treatment of minor ailments and injuries, for special medical examinations and supervision, and for immunisation.
Also used by parents, teachers and doctors for consultation with Medical Officer.
Adults are also examined for superannuation and such-like purposes.
The County Audiometrician attends every first Tuesday morning in the month to test children, by appointment only, with the audiometer. These are cases referred to this Clinic because they have, or are suspected of having, defective hearing.

Table 71

DENTAL TREATMENT

Owing to the shortage of Dental Officers, the Dental Clinics at 2 Stoke Road (Tel: Gosport 84086) and Holbrook Health Clinic (Tel: Gosport 82650) have only been attended by part-time Dental Officers, and the amounts of sessions which they have worked have varied from month to month. (The position on the 1st October 1959 was that Mr.B.R.Swinn was attending at the Stoke Road Clinic on Tuesdays and Thursdays and Mr.G.Bland at the Holbrook Clinic on Tuesday afternoons and Thursday mornings).

Consequently only a small proportion of the school children throughout Gosport are covered for routine dental inspection and treatment, but emergency treatment for the relief of pain is available for all children at the Stoke Road Clinic on Tuesday mornings; children unable to wait for this weekly clinic may be seen at either of the other clinics on the days when the Dental Officers are in attendance.

On reference to the County Medical Officer by the Doctor booked, or by a Doctor in charge of an Ante-Natal Clinic, or by the Health Visitor or Midwife, any Expectant or Nursing Mother can obtain dental treatment, including dentures if necessary, free of charge through the County Dental Service.

Treatment can also be obtained for any pre-school child in Gosport on application to the Dental Officer at the Clinic or to the County Medical Officer. Six-monthly visits by the Dental Officer to the larger Child Welfare Centres continue as in previous years.

Table 72

HOSPITAL BOARD SPECIAL CLINICS

The following Clinics for our children are held at "The Gables", Spring Garden Lane, by arrangement with the Regional Hospital Board:-

- (a) MAJOR ORTHOPAEDIC CLINIC (at Gosport War Memorial Hospital from May 1959)
 Surgeon's Clinic: Every Thursday afternoon.
 Remedial " : Every Friday, all day.
- (b) OPHTHALMIC CLINIC Every Wednesday afternoon.
- (c) TUBERCULOSIS or CHEST CLINIC (Tel: Gosport 82496)

For Patients of All Ages:- Mondays: 9-30am - noon Old Patients
 2 pm New Patients
 5-30pm Evening Clinic, 3rd Monday in month.

Tuesdays: 9-30am By Appointment Only.
 1-30pm Re-fill Session.

Table 73

EAR, NOSE & THROAT CLINIC

Cases for examination by an Ear, Nose and Throat Specialist are referred to the Special Department at the Gosport War Memorial Hospital.

Table 74

VENEREAL DISEASES CLINIC

St. Mary's Hospital, Portsmouth (Tel: Portsmouth 22331)

Males: Tuesdays 10am - noon	Females: Mondays 5pm - 7pm
Thursdays 5pm - 7pm	Wednesdays 2pm - 4pm
	Fridays 10am - noon

Table 75

HOSPITAL & NURSING HOME Service for the Area is:-

War Memorial Hospital (General).....	Tel: Gosport 81225
Infectious Diseases Hospital.....	" Portsmouth 22331
Blake Maternity Home.....	" Gosport 81662
Haslar Hospital (Naval).....	" Portsmouth 22351
Langdale Nursing Home, The Avenue (Private).....	" Gosport 84161
Penrhyn Nursing Home, Bury Road (Private).....	" Gosport 82651
Thalassa Nursing Home, Western Way (Private)....	" Gosport 82382

<u>Table 76</u>	<u>DAY NURSERY</u>	Podds House, 185 Brockhurst Road.....Tel: Gosport 83967 Accommodates 70 Children (aged under 5 years)
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A Priority System is in operation in regard to admission to County Council Day Nurseries and Priority Cases are as follows:-

- (a) Children whose mothers are obliged to work as sole or main supporter of the family i.e. unmarried mothers and widows, or cases where the husband is unable to follow full-time employment on account of ill-health.
- (b) Children whose mothers are ill or are unable, for some reason, to care for the children themselves.
- (c) Cases of overcrowded or unsuitable home conditions, where it is necessary in the interests of the child on health grounds.

Children not coming within the above categories are admitted on the understanding that if the vacancy should be required for a priority case the child will be withdrawn.

<u>Table 77</u>	<u>OCCUPATION CENTRE FACILITIES</u>
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The Occupation Centre is at St. Faith's Institute, Gordon Road, Gosport.

Training is provided for mentally handicapped children and adults. The Centre is open for five days weekly from 9-30am to 3-30pm during normal school terms. There are now 50 on the Roll. The pupils are brought to the Centre either by the special school 'bus or by the Hospital Car Service or by local 'buses. The training is graded to suit the development of each individual and all who attend benefit by the regular routine which they receive.

<u>Table 78</u>	<u>VACCINATION against SMALLPOX</u>
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This is normally carried out by the Family Doctor, but Medical Officers attached to Child Welfare Centres will also carry out this service on request.

<u>Table 79</u>	<u>IMMUNISATION</u>
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Immunisations against Diphtheria and/or Whooping Cough and/or Tetanus are carried out by the Family Doctor or by Assistant County Medical Officers at School Clinic, Child Welfare Centres and Day Nursery. Parents are given choice of operator.

<u>Table 80</u>	<u>VACCINATION against POLIOMYELITIS</u>
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Introduced in 1956 under the National Scheme. Initially, owing to the limited supply of vaccine, vaccination was confined to a course of two injections to Selected Groups of Children born 1947-54 inclusive and registered (January to March 1956) with the C.M.O. for vaccination, and vaccinations then were only carried out by Assistant County Medical Officers at the Health Department Clinic.

Since then, with the increasing supplies of vaccine, the Scheme has been extended until, at the end of 1958, it was as follows:-

- (a) Vaccination (a full course of three injections) available to:-
All persons born on or after the 1st January 1933
All Expectant Mothers
General Practitioners, Ambulance and Hospital Staffs, and their families.
- (b) Registration accepted at Health Department, by Family Doctors and at Child Welfare Centres and Day Nursery.
- (c) Choice of Operator - by Family Doctor or
at Health Department Clinic or, where applicable,
at Child Welfare Centre or Day Nursery.

<u>Table 81</u>	<u>REMOVAL of PERSONS in NEED of CARE and ATTENTION</u>
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This is Borough responsibility under Section 47 of the National Assistance Act 1948 and the National Assistance (Amendment) Act 1951.

During the year, continuing Renewals of a Court Order were granted for the detention and maintenance of an aged and infirm female and the old lady was detained in an institution which specifically cares for such cases.

At the end of the year, action under this Section 47 was no longer applicable in the case of this old lady as she had become a hospital patient in need of continued medical and nursing care which could only be provided in hospital. Therefore, no further Renewal applications were made after October 1958.

1		Health Committee
		Housing Committee
2		Staff

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