#### [Report 1945] / Medical Officer of Health, Halesowen Borough.

#### **Contributors**

Halesowen (England). Borough Council.

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1945

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# BOROUGH OF HALESOWEN

# ANNUAL REPORTS

OF THE

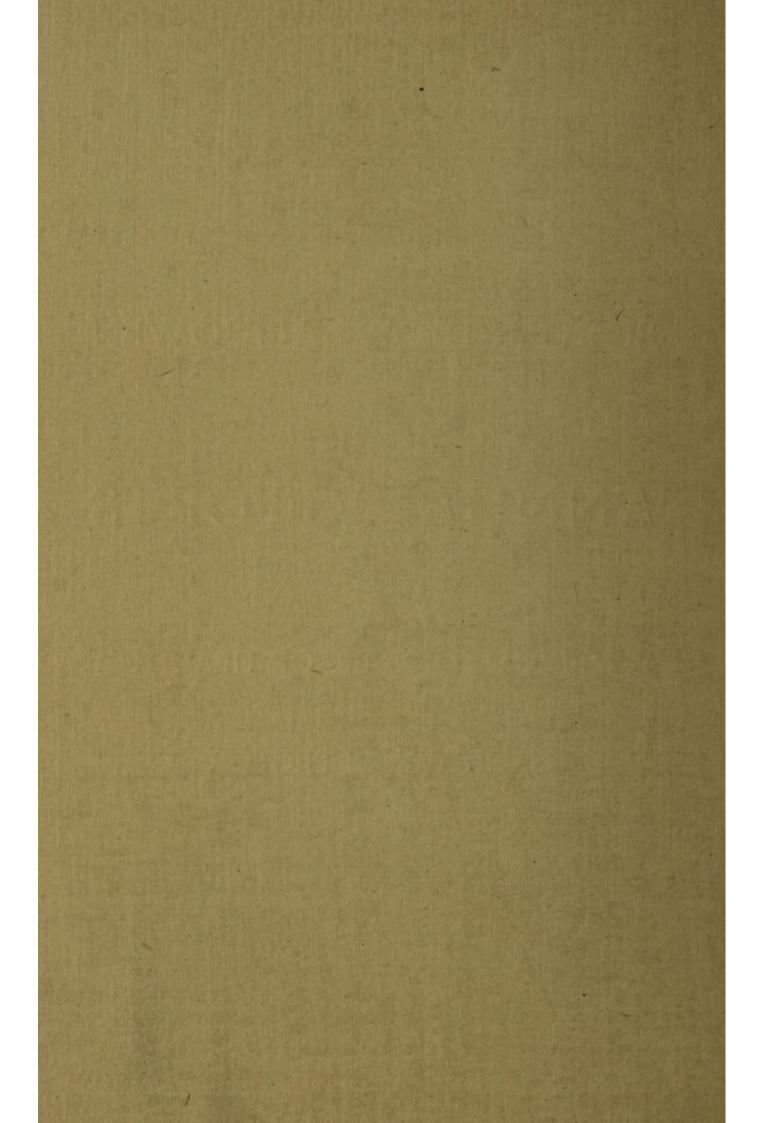
MEDICAL OFFICER OF HEALTH

AND

SANITARY INSPECTOR

FOR

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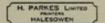
MEDICAL OFFICER OF HEALTH

AND

SANITARY INSPECTOR

FOR

1945



# MEMBERS OF THE COUNCIL OF THE BOROUGH OF HALESOWEN.

#### MAYOR:

ALDERMAN HERBERT PARKES, J.P., C.C.

# DEPUTY MAYOR: ALDERMAN THOMAS SMITH.

#### ALDERMEN:

HERBERT JOHN COX, J.P. WALTER HODGETTS.

HERBERT PARKES, J.P., C.C. FRANCIS LIONEL ROSE, C.C.

THOMAS SMITH.

#### COUNCILLORS:

#### CENTRAL WARD-

Councillors Alfred George Rudge and Daniel Wellings.

#### NORTH WARD-

Councillors William Parkes, Alfred Cole, Edward B. Tromans.

#### SOUTH WARD-

Councillors John Henry Green, Leonard Harper, Fred Smart.

#### EAST WARD-

Councillors William Edward Vernon Hewin Guest,
Arthur Marshall Harris and William Payne.

#### WEST WARD-

Councillors James Oakley, C.C., Clifford Willetts, Herbert Wilfred Southall.

#### STAFF.

#### MEDICAL OFFICER OF HEALTH:

R. L. CORLETT, M.D., Ch.B., D.P.H.

# SENIOR SANITARY INSPECTOR AND CLEANSING SUPERINTENDENT:

E. LEA, M.S.I.A. (until 3.10.1945).

#### ADDITIONAL SANITARY INSPECTORS:

A. ARCHER, M.S.I.A. (Acting Senior Sanitary Inspector from 4.10.1945).

MISS M. I. DUGGAN, M.S.I.A. (from 2.11.1945).

#### CLERKS:

MISS M. I. DUGGAN (until 2.11.1945).

MRS. H. DEELEY.

MRS. V. WALFORD (until 3.11.1945).

MISS J. PRICE (from 7.11.1945).

MISS M. PERKS (from 10.12.1945).

#### ON MILITARY SERVICE:

L. J. HILL, M.R.S.I. Senior Additional Sanitary Inspector.

E. W. BURROWS, Additional Sanitary Inspector.

F. D. HIPKISS - Chief Clerk.

A. R. HUMPHRIES Clerk.

To the Mayor, Aldermen and Councillors of the Borough of Halesowen.

Mr. Mayor, Mrs. Harrison and Gentlemen,

I beg to submit my report on the health of the Borough of Halesowen for the year 1945.

On the whole, the health of the district continues to be satisfactory. There were 386 deaths, an increase of 37 on the previous year, but the death rate of 10.42 per thousand is below the average of 11.4 for England and Wales. The birth rate for 1945 shows a decline from 20.9 to 18.44, but the live births exceed the deaths by 297.

There were 30 cases of diphtheria compared with 40 for the previous year, with one death. Scarlet fever cases also showed a welcome decline, 32 cases as against 70 in 1944. Measles showed a marked increase, general throughout the country, there were 565 cases notified in the Borough with two deaths.

There were several changes in staff in the Public Health Department. Mr. E. Lea, who had been the Chief Sanitary Inspector for 15 years, resigned to take up a business career. Mr. A. Archer was appointed Acting Chief Sanitary Inspector in October and his appointment as Chief Sanitary Inspector was confirmed in January, 1946. Miss M. I. Duggan passed the examination of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board and was appointed an Additional Sanitary Inspector in November. Miss J. Price was appointed my clerk in succession to Miss Duggan.

I would like to thank the Chairman and Members of the Public Health Committee for their support and help. I wish also to convey my grateful appreciation to the Members of the Public Health Department, especially to the Chief Sanitary Inspector, Miss Duggan and Miss Price for willing help. Mr. Archer and I would also like to thank Mr. Monk, the County Analyst and his staff for help in matters concerning sampling and for bacteriological reports.

I am,

Your obedient servant,

R. L. CORLETT,

Medical Officer of Health.

#### SECTION A.

#### STATISTICS AND SOCIAL CONDITIONS.

The area of the district is	5,247 acres
Population, Census 1931	31,058
Population, mid-1945	37,030
Rateable value, November, 1945	
The sum represented by a penny rate	

The District is bounded on the north by the Borough of Rowley Regis, on the east partly by the Borough of Oldbury and partly by the City and County Borough of Birmingham, on the south by the Rural District of Bromsgrove, and on the west partly by the Borough of Stourbridge and partly by the Urban District of Brierley Hill.

It is approximately 7 miles from the Birmingham City Centre, borders and is easily accessible for industrial purposes to the Black Country, but fortunately, however, forms part of the northern area of the beautiful County of Worcester. It is, therefore, partly industrial, partly residential, and partly agricultural. We are very favourably situated from the point of view of further industrial and housing development, and the town is capable of being made into a beautiful one. The prevailing wind comes from the rural belt surrounding the Borough.

Prior to the War, the growth of the district was very rapid. The number of houses in 1921 was 5,843; in 1931 was 7,324; in 1935 was 9,324; in 1936 was 9,700; in 1937 was 10,201; in 1938 was 10,586 and in 1939 was 10,909. The Council have erected 1,844 houses.

The principal industries are brickmaking, button manufacture, fireclay and terracotta; chain and spike making; tube and tube fittings; steel making; gun barrel making; bicycles; perambulators; iron casting, shoe, heel and tip making; wall tie making; spelter refining; coal mining, and electrical work.

VITAL STATISTICS.	BIRTHS.				
(a) Live Births. Legitimate			F. 313 12		Total 659 24
	358		325		683
(b) Still Births. Legitimate	<u>М</u> . . 11		F. 8	ipo m	Total 19
Illegitimate	-				
	11		8		19
Birth Rate per 1,000 estimate Birth Rate for England and	d resident p	opulati	on		18.44 16.1

# DEATHS.

	<i>F.</i> 188	Total	
Crude Death Rate per 1,000 estin	nated resident	population .	
Death Rate for England and Wa			
Death Rate for 148 towns es			
25,000 to 50,000 at 1931 C	ensus		12.3
DEATHS FROM PUERPERAL	CAUSES.		
No deaths were recorded du	ring the year	from puerpo	eral causes.
DEATHS OF INFANTS UNDER	ONE YEAR	OF AGE.	
	M.	F.	Total
Legitimate	18	8	26
Illegitimate		_	
	18	8	26
			1937-1-100
Death Rate of Infants under 1 ye			
All Infants per 1,000 Live I	Births		38.06
The Infant mortality rate for	- England on	d Wales was	ner
1,000 Live Births			
			46.00
1,000 Live Births	NTS UNDER		46.00  AR.  Under 1
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH	NTS UNDER	R ONE YEA	46.00  AR.  Under 1  Month
1,000 Live Births	NTS UNDER	R ONE YEA	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity  Congenital abnormalities  Intracranial hæmorrhage	NTS UNDER	a ONE YEA	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity	NTS UNDER	3 8 ONE YEA 1 1	Under 1 Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity	NTS UNDEF	3 8 1 5	Under 1 Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity	NTS UNDER	3 8 ONE YEA 1 1 5 2	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity	NTS UNDER	3 8 1 5	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity Congenital abnormalities Intracranial hæmorrhage Bronchitis Pneumonia Convulsions Atelectasis Mastoid Asthenia	NTS UNDER	3 8 ONE YEA 1 1 5 2	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity  Congenital abnormalities  Intracranial hæmorrhage  Bronchitis  Pneumonia  Convulsions  Atelectasis  Mastoid  Asthenia  Measles and Pneumonia	NTS UNDER	3 8 ONE YEA  tal Deaths 1 1 5 2 1	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity Congenital abnormalities Intracranial hæmorrhage Bronchitis Pneumonia Convulsions Atelectasis Mastoid Asthenia	NTS UNDER	3 8 ONE YEA  tal Deaths 1 1 5 2 1	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity  Congenital abnormalities  Intracranial hæmorrhage  Bronchitis  Pneumonia  Convulsions  Atelectasis  Mastoid  Asthenia  Measles and Pneumonia	NTS UNDER	3 8 ONE YEA  tal Deaths 1 1 5 2 1	46.00  AR.  Under 1  Month
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity Congenital abnormalities Intracranial hæmorrhage Bronchitis Pneumonia Convulsions Atelectasis Mastoid Asthenia Measles and Pneumonia Gastro-enteritis	NTS UNDER	3 8 1 1 5 2 1 1 1 2 1 1 1 1	Under 1 Month 3 5 1 2 2 14 - 14
1,000 Live Births  CAUSES OF DEATH OF INFA  CAUSES OF DEATH  Prematurity  Congenital abnormalities  Intracranial hæmorrhage  Bronchitis  Pneumonia  Convulsions  Atelectasis  Mastoid  Asthenia  Measles and Pneumonia	NTS UNDER	3 8 ONE YEA  tal Deaths  1 1 2 1 1 1 1 1 1 1	Under 1 Month 3 5 1 2 2 - 14 - 14 - 2

# CAUSES OF DEATH.

		Male	Female
1.	Typhoid and Paratyphoid fevers	WOLTE B	36/1
2.	Cerebro-spinal fever	-	_
3.	Scarlet Fever	-	_
4.	Whooping Cough	_	_
5.	Diphtheria	MANA C	1
6.	Tuberculosis of Respiratory System	7	6
7.	Other forms of Tuberculosis	_	1
8.	Syphilitic diseases	-	1
9.	Influenza	2	
10.	Measles	2	_
11.	Acute poliomyelitis and polioencephalitis	_	_
12.	Acute infectious encephalitis	-	
13.	Cancer of buccal cavity and oesophagus (M)	4	
1).	Cancer of uterus (F)	_	2
14.	Cancer of stomach and duodenum	9	5
15.	Cancer of breast	_	3
16.	Cancer of all other sites	23	10
17.	Diabetes	1	3
18.	Intracranial vascular lesions	25	18
19.	Heart disease	46	64
20.	Other diseases of the circulatory system	5	3
21.	Bronchitis	14	11
22.	Pneumonia	11	7
23.	Other respiratory diseases	2	2
24.	Ulcer of stomach or duodenum	2	-
25.		2	
26.	Diarrhœa (under 2 years)	4	1
	Appendicitis	1	1
27.	Other digestive diseases		5
28.	Nephritis	5	• 10
29.	Puerperal and post abortive sepsis		-
30.	Other maternal causes	_	-
31.	Premature birth	2	1
32.	Congenital malformations, birth injuries, and		,
	infantile diseases	7	4
33.	Suicide	2	1
34.	Road Traffic accidents	3	1
35.	Other violent causes	7	3
36.	All other causes	16	25
		198	188

# TABLE SHOWING DEATHS FROM CANCER DURING 1945.

	Male	Female
0— 5 years	0_0	
5—10 ,	-	-
10—15 "	-	1000
15—20 "	24 - 24	110216
20—25 "	-	-
25—30 "	THE PARTY	1124
30—35 "	United States	-
35—40 "	1	1
40—45 "	1	2
45—50 "	4	1
50—55 "	1	1
55—60 "	5	2
60—65 "	10	1
65 years and over	14	12
	-	-
	36	20

# DEATHS FROM CANCER FOR THE PAST SIX YEARS.

	Male	Female
1939	20	15
1940	29	27
1941	37	36
1942	42	28
1943	25	27
1944	22	31

#### SECTION B.

#### General Provision of Health Services in the Area.

#### (i) PUBLIC HEALTH OFFICERS.

The Staff of the Public Health Department is given on page 3.

#### (ii) (a) LABORATORY FACILITIES.

The work is carried out at the Worcester County Laboratory by the County Analyst.

## (ii) (b) AMBULANCE FACILITIES.

The Council provide two ambulances for conveying non-infectious patients to and from hospital. During the year, 2,551 cases were transported to and from hospital, the total distances travelled being 30,016 miles.

The General Hospitals used by the inhabitants of the Borough being the Birmingham Hospitals, the Corbett Hospital, Amblecote, Nr. Stourbridge, and the Guest Hospital, Dudley.

Infectious diseases cases are conveyed by one of the two ambulances belonging to the North Worcestershire Joint Isolation Hospital Board.

#### (ii) (c) NURSING IN THE HOME.

Three Nursing Associations at present operate in the district.

The County Council are the Maternity and Child Welfare Authority for the district.

# (ii) (d) TUBERCULOSIS.

The work is carried out by the County Council.

The Tuberculosis Dispensary is held every Friday at No. 14, Laurel Lane, Halesowen at 3 p.m. to 5 p.m.

The Tuberculosis Pavilion at the North Worcestershire Joint Isolation Hospital at Hayley Green, consists of a block containing 19 beds for males.

# (ii) (e) INFECTIOUS DISEASE.

The cases of infectious disease are admitted to the North Worcestershire Joint Isolation Hospital, situated at Hayley Green, Halesowen.

# (ii) (f) CLINICS AND TREATMENT CENTRES.

School Clinics, Infant Welfare Centres, and Ante-Natal sessions are provided by the County Council. There are three centres, namely: Cradley, Halesowen and Hill and Cakemore. The district is well catered for.

#### SECTION C.

## Sanitary Circumstances of the Area.

#### WATER.

The water supplied to the Borough by the South Staffordshire Water Works Company is a constant supply and satisfactory in quality.

I am indebted to R. A. Robertson, Esq., B.Sc., M.Inst., C.E., Engineer in Chief to the South Staffordshire Waterworks Company for the following information.

"The water supplied to the Borough is derived from the South Staffordshire Water Company's Shavers End reservoir system which is supplied from pumping stations at Ashwood, Hinksford, Prestwood and Kinver, all treated in the Smestow Valley where underground water is pumped from the new red sandstone formation. A further supply of water to this system is obtained from surface water impounded in storage reservoirs near Lichfield.

The water from the Ashwood and Hinksford pumping stations is chlorinated before being pumped into supply and the Lichfield water is treated by passing through sedimentation tanks and a rapid gravity filtration plant, in addition to chlorination. Routine chemical and bacteriological analyses of water at all sources of supply are taken monthly, and samples of water in the area of supply are also taken at similar intervals.

Sterilisation is carried out by portable chlorination apparatus before putting new mains into use or following repair work on old mains."

During the year we had three samples taken for chemical and bacteriological examination, they were satisfactory. Below is a copy of the report by the Worcester County Analyst of the sample taken on the 3rd April, 1945.

PHYSICAL CHARACTERS. Odour Deposit	.None
CHEMICAL EXAMINATION. (Results expressed in	
100,000).	
Solids in suspension (Dried at 100° C)	None
Solids in Solution (Dried at 100° C)	
Solids in Solution—After Ignition	
Chlorides calculated as common salt	
Hardness-Permanent	9
Hardness Temporary	5
Hardness Total	
Free and Saline Ammonia	0.0008
Albuminoid Ammonia	0.002
Nitric Nitrogen (Nitrates)	

Nitrous Nitrogen (Nitrates)None Oxygen absorbed in 4 hours at 27° C0.013 Toxic Metals
BACTERIOLOGICAL EXAMINATION.
Number of Colonies developing upon Agar  (a) in two days at 37° C
B. Typhosus and B. DysenteryNil per 500 m.l.
Opinion: — The sample is fit for drinking.

The question of plumbo-solvency has not arisen and in view of the quality of the supply it is not likely to occur. The Waterworks Engineer has periodic samples taken to exclude the possibility of plumbo-solvency.

The total number of houses in the Borough is 10,909. The Waterworks Company supply 10,893 houses of which 769 have taps either outside or in out-houses. These 769 houses are supplied by 570 taps.

A total length of approximately 1,400 lineal yards of mains were laid in the Borough during 1945 in sizes ranging from 3in. to 6in. in diameter, the locations being Dog Kennel Lane, Blackberry Lane, Vicarage Road, Lapal Lane and at Beecher Road housing site.

We know of 16 houses supplied other than from the public mains, supplying approximately 60 people.

During the course of the year, 9 samples of water were taken from wells and springs, and as result of this the water supply to 6 houses was found to be unfit. Action to couple these houses with the main supply is being taken and will be dealt with in next year's report.

# DRAINAGE AND SEWERAGE.

Sewage is dealt with by the Upper Stour Valley Main Drainage Board.

#### PUBLIC CLEANSING.

This branch of the work is under the supervision of the Senior Sanitary Inspector and will be dealt with in his report.

#### SECTION D.

#### HOUSING.

Housing work is referred to in the report of the Chief Sanitary Inspector.

#### SECTION E.

# INSPECTION AND SUPERVISION OF FOOD.

Details of this work will be found in the Chief Sanitary Inspector's Report.

# NOTIFIABLE DISEASES FOR THE YEAR 1945

Discase.	Under 1		1-2	2-3	3-4 .	4.5	5-10	10-15	15-20	20-35	35-45	45-65	+59	Total	Deaths
Sonne	0				-	-	11	,	,	i	-	1	1	17	1
Scarlet Fever	1 1	11	2	1	3	1 -	15	1 00	1	2	1	1	1	32	1
Paratyphoid		1	-	1	1	1	1	1	1	1	1	1	1	1	
Erysipelas		1	1	1	1	1	1	1	1	1	· ·	^	- (	10	1
Pneumonia	-	1	0	1	1	1	00	1:	1	7	00	6	2	15	1
Measles		24	19	72	72	74	235	10	6	9	7	1	1	200	1
Whooping		v	, ,	1	7	V	10				-			48	
Couga		1	0	1	0	1	22	1 4	1-	10	1	1	1	30	-
Dipineria		1	1.	1	1	1	77	-	1	7				2	
Meningitis		1	1	1	1	1	1	1	1	1	1	1	1	1	1
Anterior															
Poliomyelitis		1	1	1	1	1	1	1	1	1	1	1	1	2	1
Ophthalmia														,	
Neonatorum		2	1	1	1	1	1	-	1	1	1	1	1	7	1
Puerperal														,	
Pyrexia		-	1	-	1	1	1	-		ages	not	known		4	1
		1	1	-	1	-	1	1	1	1	1	1	1	1	1
Totals		31	75	82	82	83	309	24	12	13	11	14	4		
		1	1	1	-	1		-	1.	1	1	-	1	1	1
TUBERCULOSIS.	18.						1	710			4	7	-	7.0	
Pulmonary		1	1	1	1	1	1.	. 1	7	CI		4	1	17	
Non-Pulmonary	ury .	-	1	1	1	1	1	1	1	1	1	-	1	7	
The same of the last of the la	-	-		-						THE PERSON NAMED IN		-	-	-	-

#### SECTION F.

Prevalence of, and Control over, Infectious and other Diseases.

# NOTIFICATIONS OF INFECTIOUS DISEASES. RATES PER 1,000 CIVILIAN POPULATION.

	England and Wa	ales	Halesowen
Typhoid	0.01		0.00
Paratyphoid			0.02
Scarlet Fever	1.89		0.87
Whooping Cough	1.64		1.29
Diphtheria	0.46		0.81
Measles	11.67		15.26
Smallpox	0.00		0.00
Erysipelas	0.25		0.27

#### SMALLPOX.

No case was reported during the year.

#### SCARLET FEVER.

Thirty-two cases of scarlet fever were reported during the year, 15 of them in the age group 5—10 years were isolated in hospital. The type of disease was mild.

	Cases		Deaths
1943	84		1
1944	70	1	وعوام
1945	32		_

# DIPHTHERIA.

Twenty-nine of the thirty notified patients were treated at the North Worcestershire Joint Isolation Hospital, as the home nursing of diphtheria patients is not a feasible proposition, not only because of the risk of infection but because skilled nursing is required by night as well as by day.

The only case nursed at home was extremely mild, diagnosed on bacteriological grounds. There were a number of suspicious cases treated in hospital because it is much safer to regard a doubtful case as being diphtheria until it can be proved otherwise on clinical and repeated bacteriological tests.

Of the thirty cases, they were distributed as follows: -

North	3	 	7	West	-	10
South		 	8	Central	bin and	3
East		 	2	Marie Land		

#### INCIDENCE AND SEVERITY OF DIPHTHERIA.

Year	Total	Deaths	Mortality	Immunised	Children	Percentage of
	Cases		Rate	Cases	Deaths	children under 15 years immunised
1936	 30	3	10.0		_	A PARTON
1937	 15	3	20.0	101 - LI	- n	-
1938	 12	. 1	8.33	_	_	
1939	 11	-	-		_	-
1940	 10	1	10.0	- 7	-	21.49
1941	 37	1	2.7	1	_	57.
1942	 30	1	3.33	5		65.9
1943	 45	2	4.44	8	_	76.17
1944	 40	3	7.5	17	_	76.31
1945	 30	1	3.33	18	-	76.25

#### DIPHTHERIA IMMUNISATION.

Free diphtheria immunisation was provided here first in 1935, and by 1939 approximately 25 per cent of the children had been treated, now over 75 per cent of the children under the age of 15 have been immunised in the Borough. We hope to raise this figure. During the year advertisements were inserted in the local paper giving the time and place of the Immunisation Clinics. They are held each month at Cradley, Halesowen, and Hill and Cakemore as follows:—

Tenter Street Clinic, Halesowenlst	Wednesday each month
	2.15 p.m.—3.30 p.m.
Cradley Infant Welfare Clinic	2nd Friday each month 2.15 p.m.—4.0 p.m.

Hill Top School Clinic, Long Lane, ......3rd Tuesday each month Hill and Cakemore 2.15 p.m.—4.0 p.m.

On the first birthday of each baby, if the baby has not already been immunised, the parent is sent a birthday card issued by the Central Council for Health Education pointing out the advantages of immunisation...

The Schools are circularised each year, and where necessary special immunisation sessions are held at a School, where there are only a few requiring treatment they attend one of the clinics held for the Infant Welfare children.

I tender my grateful thanks to Dr. Eileen Bulmer and the County Nurses for their efficient propaganda work at the Welfare Centres and during their home visits. We have worked in close co-operation ever since the scheme commenced. The Nurses also assist at the Immunisation Sessions and follow up the defaulters. I also wish to express my appreciation to the Head Teachers and their staffs for their help and co-operation at all times.

The percentages of the child population immunised	at 31/12/45
were: —	
Under 5 years	57.09%
5—15 years	
Estimated mid year population 1945 being: —	
Under 5 years	3,270
5—15 years	

The numbers of children who were treated in 1945 were as follows:—

101101131	Primary 7	Treatment	Supplementa	ry Treatment
Under 5 years 5—15 years	 Completed 651 204	Injected 1292 274	Completed 3 348	Injected 4 431
Maria de Sano	855	1566	351	435

#### ERYSIPELAS.

Ten cases were notified during the year with no deaths.

#### PNEUMONIA.

Thirty-one cases were notified. There were eighteen deaths.

#### PUERPERAL PYREXIA.

Four cases were reported to the County Medical Officer. There were no deaths.

#### MENINGITIS.

One case was notified.

# WHOOPING COUGH.

There were forty-eight cases notified, but no deaths.

# MEASLES.

There were five hundred and sixty-five cases notified with two deaths.

In the previous year there were 119 cases and no fewer than 102 of these occurred in December and of these 86 were resident in the North Ward. Measles gradually spread throughout the Borough.

The outbreak can be said to have run true to form, it lasted approximately 6 months as the following figures show:—

1944.	November	 	4
	December	 	102
1945.	January	 	141
	February	 	146
	March	 	185
	April	 	58
	May	 	28
	June	 	4

Of the notified cases 303 were under the age of 5 years, and 235 in the age group 5—10 years. In the age group 10—15 years, the figure dropped to 10 cases. These figures are not really surprising as probably over 85 per cent of children have had measles by the time the age of 10 years is reached. It is quite likely that all cases were not notified, as probably some patients did not call in a medical practitioner, and failed to notify me themselves. As there are 3,270 children under the age of 5 years, it is quite likely that the figure 303 is too small in the under 5 age group.

#### SONNE DYSENTERY.

One unsatisfactory feature during the year was the occurrence of seventeen cases of Sonne Dysentery affecting eleven families. Fortunately they were of a mild character. No cause was traced.

It is a difficult disease in which to track down the source of origin, and it is essential if these gastro-intestinal infections are to be avoided that everyone who handles food and drink for public consumption should exercise the greatest care in hygiene and pay particular attention to the washing of their hands.

Twelve of the cases were notified in April, and nine of these commenced with symptoms on the following dates:—

19/3/45 ... one. 22/3/45 ... one. 23/3/45 ... three. 24/3/45 ... one 25/3/45 ... one. 26/3/45 ... two.

The remaining three were secondary cases, one commencing on the 30th March, and two more on the 1st April.

# PARATYPHOID B.

One isolated case treated at the Isolation Hospital made satisfactory recovery.

# ANTERIOR POLIOMYELITIS.

There were three cases during the year. The first patient had been unwell since the 2nd July. On the 14th he commenced with pains in the legs, on the 16th, following fibrillary twitchings in the right leg, paralysis of the legs set in. The second case occurred on the 19th July. The last case, the date of onset was the 27th August,

There was no illness at the time amongst any of the home contacts of these patients. The patients were unknown to each other and they lived some considerable distance apart.

There were no deaths.

# CPHTHALMIA NEONATORUM.

Two cases were notified during the year. No impairment of vision resulted.

#### TUBERCULOSIS.

Twenty-nine cases were notified during the year, 27 being cases of pulmonary tuberculosis and 2 being non-pulmonary tuberculosis.

## CASES OF TUBERCULOSIS ON REGISTER AT END OF 1945.

Pulm	onary	Non-Pulmonary			
Males	Females	Males	Females		
79	69	9	21		

#### NEW CASES NOTIFIED DURING 1945.

		THE SENTENCE OF STREET		lmonary Females		ulmonary Females
0-5	years		-	-	_	_
5-10	,,		1	*	_	1
10-15	"		-	1	_	-
15-20	**		*1	1	-	1
20-25	,,		2	3	_	-
25-30	,,		2	The same of the sa	-	0 - 100
30-35	,,		3	3	-	
35-40	"		1	2	-	700
40-45	,,		. 2	_	-	-
45-50	,,		1	_	-	-
50-55	,,		_		_	De Tours
55-60	"		1	1 -	_	-
60-65	,,	,	1	- Carrier	-	IO TITLE OF
65 years	and	over	1	-	-	-
	1100		-	-	-	N-11
		Totals	16	11	-	2
			-	-	-	-

The home conditions of the tuberculosis patients are inspected by the Sanitary Inspectors and advice is given. Where the housing conditions are unsatisfactory either from the point of view of bedroom accommodation or where the house, owing to its age, situation and general structure, is unlikely to be repairable, then we bring this to the notice of our T.B. After Care Committee, or communicate directly with the Housing Manager who refers it to the Housing Committee.

#### SCABIES.

#### CASES TREATED IN 1945.

	Cases	Families	Treatments	Cured	Continuing treatment 31/12/45
1st Jan. to 31st March	 37	19	74	37	
1st April to 30th June	 16	15	36	24	_
1st July to 30th Sept.	 27	14	46	27	_
1st Oct. to 31st Dec.	 21	13	43	18	3
	-		_	_	_
	101	61	199	106	3
	-			_	_

The cases were distributed as follows Cradley	
Halesowen Hill and Cakemore	. 58
	101

Five of the 106 patients cured were already undergoing treatment in 1944.

The	number	treated	in	1942	was	187.
"	,,	"	"	1943	was	270.
.,	.,,	,,	,,	1944	was	197.

Prior to the end of 1941 scabies was rare in the Borough. The first Scabies Clinic was started in March, 1942. Two months later in order to cover the district, two more were commenced. The larger number of patients treated in 1943, did not indicate, in my opinion an increased incidence, but was due to the fact that the facilities for treatment had become better known. I believe that the figures for 1945 can be regarded as showing a genuine decrease in the incidence of scabies in the district. It has not been necessary to make use of the power given us under the Scabies Order, 1941. This is greatly to the credit of the inhabitants of the Borough.

I would like to thank Miss Robson, S.R.N., Miss Knowles and Mrs. Whitehurst for their work at these Scabies Clinics, and also Miss O'Grady, S.R.N. for her interest in following up contacts.

Mr. Mayor, Mrs. Harrison and Gentlemen,

The year 1945 was marked by the staff changes which took place and as a result of which the whole of the department's activities were affected. Mr. Ernest Lea who had been Chief Sanitary Inspector and Cleansing Superintendent since 16th March, 1931, in which year he came from Crewe, resigned to pursue a business career.

It is appropriate and fitting to point out that during his career in Halesowen, considerable changes took place which materially improved and elevated the standard of public health. He was largely responsible for the abolition of conservancy methods of sewage disposal, for the connection of many properties to water mains, and for the inspection, and repair or demolition, of considerable numbers of unfit houses. He re-organised the system of refuse collection, initiated controlled tipping in the Borough, and latterly promoted the development of the salvage section of the cleansing department.

During the early part of the war he was one of the pioneers of civil defence work and did a great deal of lecturing and organizing, particularly in relation to the decontamination services. He was in addition, Chief Billeting Officer, and responsible for the reception, billeting and welfare of many evacuees.

The department was considerably indebted throughout the year to Mrs. H. Deeley, and to Miss M. I. Duggan from October when she was appointed additional Sanitary Inspector.

I wish to express my appreciation of the help and support I received from the Chairman and Members of the Public Health Committee, and for the advice and assistance afforded by Dr. Corlett, Medical Officer of Health, and other officers of the Council.

A. ARCHER,

Acting Chief Sanitary Inspector.

# SECTION D. HOUSING.

1.	Inspection of Dwelling Houses during the year: —	
	<ul> <li>(1) (a) Total number of dwelling-houses inspected for defects (under Public Health or Housing Acts)</li> <li>(b) Number of inspections made for the purpose</li> </ul>	housing 154 201
	(2) a) Number of dwelling-houses (included under subhead (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	Nil
	(b) Number of inspections made for the purpose	Nil
	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
	(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	Nil
2.	Remedy of Defects during the year without Service of Notices.	formal
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	127
3.	Action under Statutory Powers during the year:—  (A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
	<ol> <li>Number of dwelling-houses in respect of which notices were served requiring repairs</li> <li>Number of dwelling-houses which were rendered fit after service of formal notices: —</li> </ol>	Nil
	(a) By Owners	Nil
	(b) By Local Authority in default of owners	Nil
	<ul> <li>(B) Proceedings under Public Health Acts:—</li> <li>(1) Number of dwelling-houses in respect of which Notices were served requiring defects to be</li> </ul>	
	(2) Number of dwelling-houses in which defects were remedied after service of formal Notices:—	36
	(a) By Owners	21
	(b) By Local Authority in default of owners	Nil
	(Outstanding notices will be dealt with during 1946)	
	(C) and (D) No action was taken during the year in respect of Sections 11, 12 and 13 of the Housing Act, 1936.	
	-/	

As in many areas throughout the country, the condition of large numbers of houses is unsatisfactory. The main reasons are well known and to some extent unavoidable. Nevertheless the time has arrived to take stock of the position and it is proposed during next year, to undertake a new survey with the object of securing up-to-date information. This will assist, not only the Health Department, but also other departments concerned with future planning. An attempt will be made to show where the houses are which can be reconditioned or repaired, and where the solution will be demolition. It is hoped to avoid piecemeal and haphazard treatment and to dovetail the department's proposals with the general planning arrangement for the Borough.

## SECTION F.

#### INSPECTION AND SUPERVISION OF FOOD.

#### MILK SUPPLY.

Number of producers with premises in the Borough	10
Number of producers retailing in the Borough	24
Number of retail dairymen with premises in the Borough	12
Total number of dairymen (including producers) supplying milk in the Borough	55
Number of licences for production of pasteurised milk	1

The table below indicates approximately the type of milk sold in the Borough.

(a) Heat treated	 	 80%
(b) Raw ungraded	 ·	 12%
(c) Tuberculin tested	 	 5%
(d) Accredited		3%

During the year a total of 48 samples of milk were submitted to the County Analyst and Bacteriologist for examination.

The milks were grouped as follows:—

Pasteurised			 	 26
Sterilized			 	 3
Ungraded,	raw		 	 15
Ungraded,	heat	treated	 	 4.

All the pasteurised and sterilized samples showed satisfactory results, but four of the raw samples were considered unsatisfactory.

Seven samples of milk were specially examined for the tubercle bacillus and one gave a positive result. The source of production was

outside the Borough but with the co-operation of an adjoining authority the matter was under investigation at the end of the year.

Two samples of milk were examined for the dysentery group of bacilli and gave negative results.

A bottle of milk about which a complaint had been received was examined for the presence of dirt. The amount it contained, 0.9 parts per 100,000 was regarded by the Analyst as satisfactory.

Sixty clean pint milk bottles were sent for bacteriological examination and all were regarded as satisfactory.

There is one pasteurising plant in the Borough and during the early part of the year the firm operating this plant notified their intention of dismantling it and replacing it by a high temperature short time plant.

By arrangement with the owners of the dairy and the manufacturers of the plant, tests were carried out to ascertain

- (a) whether the plant would heat milk to a temperature of not less than 162°F.
- (b) whether the plant would hold all the milk at that temperature for at least 15 seconds.
- (c) whether the plant would automatically divert the flow of milk which was not retained at a temperature of not less than 162°F. for 15 seconds.
- (d) whether the treated milk would satisfy the prescribed tests.

The average holding time was shown to be 16 seconds, and as the other conditions relating to the granting of a licence were all satisfied, the Council agreed to the issue of a licence to pasteurise milk by the high temperature short time process.

The general conditions at this dairy and the methods adopted are all of a high standard.

The sampling programme was curtailed by lack of staff and by the changes which occurred in the department. It is hoped to augment the sampling of milk and utensils during next year.

#### ICE CREAM.

Only small quantities of ice-cream were made in the Borough during the year. Three samples were taken, one of which was unsatisfactory. Two samples of ice-cream powder gave satisfactory bacteriological results. It is appreciated that there are objections to bacteriological sampling of ice-cream and that there may be difficulty in interpreting results, but it is felt, even in the absence of a legal standard, that sampling is useful as an index to possible faulty methods.

In addition, the knowledge that samples may be asked for has a psychological effect on the maker, which, coupled with regular supervision, will help in reducing the possibility of contamination in this product.

#### INSPECTION OF MEAT AND OTHER FOODS.

None of the slaughter-houses in the Borough were in use during the year except to deal with occasional pigs. Many householders keep one or more pigs and the bulk of these are slaughtered during November and December. In general it is unusual to find any disease although one batch of seven were found to be affected with swine fever. The Ministry of Agriculture and Fisheries confirmed the diagnosis.

## MEAT CONDEMNED.

Seven whole carcases and all offal (fevered).

Two pig's heads (tuberculosis).

Three pigs mesenteries (tuberculosis).

One beast's head and tongue (tuberculosis).

#### OTHER FOODS.

Various tinned goo	ds	 989	tins.		
Bacon		 28	lbs.	2	ozs.
Ham		 4	lbs.	8	ozs.
Pork		 156	lbs.		
Butter		 35	lbs.	2	ozs.
Cheese		 57	lbs.	9	ozs.
Fish		 270	lbs.		
Semolina		 120	lbs.		
Prunes		 25	lbs.		
Oranges		 1,200	lbs.		
Dates		 103	lbs.		
Haricot Beans		 168	lbs.		
Marmalade		 . 8	lbs.		
Wheat Flakes		 80	lbs.		
Lentils		 7	lbs.	8	ozs.
Eggs		 53	doze	en.	
Skim Milk Powder		 1	barr	el.	
Packeted Foods		 987	pack	cet	s.
Cockles		 1	jar.		

#### FOOD AND DRUGS ACT, 1938.

Nine samples of milk and thirty-seven samples of various kinds of food were submitted to the County Analyst for examination. Most of the samples were genuine but amongst those found unsatisfactory was a sample of gelatine which contained 800 parts per million of zinc, a liquid alleged to be a substitute for lemons and which contained no vitamin C, and jelly squares which were covered with mould. In addition, a barrel of skim milk powder in use at a canteen was sampled and found to be unfit for human consumption.

#### ATMOSPHERIC POLLUTION.

The type of pollution which existed in the district was due to excessive smoke emission from factories, smoke from the chimneys of domestic houses, and dust from pulverised fuel plants and blast furnaces.

Industrialists often used the excuse of unsuitable fuel as a reason for the production of excessive smoke, and whilst there was some substance in this contention, in many cases the department was able to demonstrate that satisfactory stoking, coupled with increased plant efficiency, not only reduced pollution but resulted in a saving of fuel. The fact that the two latter items are so often complementary proved of valuable assistance in efforts to provide a cleaner atmosphere.

The emission of grit and dust is often a difficult problem, but but one to which the department gave as much attention as was possible with depleted staff.

Pollution from domestic chimneys is a matter to which local authorities are giving, and will need to give, increasing attention. With the continued development of housing estates of which they are the owners, they have an opportunity of setting a standard in relation to the provision of the best type of heating and cooking appliances.

#### RODENT CONTROL.

The sewers which were treated for the eradication of rats during the previous year were examined from time to time and in no instance was a reinfestation reported. This is hardly surprising when it is realised that most of the sewers do not exceed 9 inches diameter, and owing to the character of the district, the flow in many cases takes up a considerable proportion of the bore. It is, however, intended to re-treat sewers at convenient intervals.

Occasional complaints of infestation at industrial premises were received and dealt with. At only one premises was there a serious infestation, and this was treated systematically and thoroughly throughout the year. The type of premises, the methods used for storing the raw materials, the nature of the materials themselves render the particular problem formidable. Nevertheless high kills were obtained and the work will be continued.

#### VERMIN.

Only isolated instances were reported of houses infested with bugs and these were treated by spraying with a proprietary insecticide. Complaints of cockroach infestation were received, particularly from certain housing estates and although everything was done to alleviate the trouble with the insecticides available, the results achieved were not considered satisfactory.

The development of newer insecticides raises the hope that better results will be accomplished in the near future.

The eradication of cockroaches is considered to be as important as the destruction of other types of vermin, and it is proposed to pursue this question energetically in the coming year.

#### INSPECTIONS.

The following table indicates the number of visits made during the year.

Bakehouses						13
Billeting						126
Civil Defence						48
Complaints (unclass	ified)					15
Dairies						77
Drains	Dr. 17					128
Dustbins						158
Factories Act						12
Farms						9
Food Inspection						63
Food Sampling						80
House Inspections (	Housin	g Act)				13
Infectious Diseases						44
Markets and Fairs						2
Meat Inspection	V					76
Miscellaneous						172
Offensive Trade						7
Refuse Collection as				53		
Rent Acts						1
Rodent Control						189
Salvage						52
Shop Acts						28
Smoke observations						60
Tents, Vans and She	eds					4
Timber permits						58
Unsuccessful visits						41
Vermin						72
Water Supply			4	1		9
					molfi-	-

1,534

#### PUBLIC CLEANSING.

During the year two of the tips were completely filled but another area of land was purchased and there are still two areas on which tipping is carried out, one being in the town and the other in Cradley.

Refuse is dealt with wholly by controlled tipping, but the scarcity of labour and the difficulty of maintaining vehicles, prevented the tips being dealt with as efficiently as the department would have liked.

The collection of refuse and salvage was on the whole well maintained, when all the difficulties were taken into account.

The table below sets out the amounts of material which were salvaged, together with the income received by the Council.

			T.	C.	Qrs.		£	S.	d.
Kitchen wa	aste	 	168	0	0		547	18	6
Paper		 	160	6	2		1,027	13	4
Metals		 	147	1	2		377	3	3
Bones		 	1	19	0		9	16	9
Glass		 	2	3	2		3	5	3
Rags		 	11	19	1		110	18	6
Sacking		 		18	0		1	16	0
Scrap tyres		 					1	8	0
						Total	2,079	19	7
									-

# GENERAL COMMENT.

It is not anticipated that the staff of the department will be adequate for the tasks involved until well into 1946.

Much work remains to be done and many standards re-examined. An entirely new factory survey is proposed, one which will provide complete information on such matters as the number and type of fuel burning appliances in use, means of escape in case of fire, the conditions under which food is prepared in factory canteens etc.

Increased attention will be paid to premises in which food is handled. It is held that such premises must be at all times scrupulously clean, and that the methods shall be absolutely satisfactory. No reduction from these standards can be tolerated.

Atmospheric pollution, by smoke, grit and dust is another important problem which must be tackled energetically, particularly by education of plant owners and plant users.

There is much leeway to be made up, and we are entering upon a period when the technical resources of the Health Department will be fully taxed for some years to come. Standards are everywhere receiving critical review, there is a healthy informed interest in what constitutes sound environmental hygiene and people are impatient to see that really satisfactory houses are built, and that their general living conditions are not only health promoting but also aesthetically pleasing.

There is growing recognition that many houses, particularly those without bathrooms, without indoor sanitary conveniences, or water supply, and houses in which the living room is entered direct from the street, are below the standards a civilised community is entitled to regard as its due.

Similarly the public is demanding assurance that its various foods are sound and wholesome and that they are produced and distributed under conditions which render the transmission of disease impossible.

It is the duty of the Health Department to anticipate these demands and so control its work that the public can feel that its welfare is safeguarded.

Many difficulties are met with in practice, not least being the unsatisfactory nature of legislation in connection with particular problems. It is suggested however, that public health officers have unique opportunities of focussing attention on these defects and of pressing for the appropriate remedies.

