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HAMBLEDON RURAL DISTRICT

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# ANNUAL REPORT

— OF THE —

MEDICAL OFFICER OF HEALTH

For the Year

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Together with the Annual Report  
of the Sanitary Inspector



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HAMBLEDON RURAL DISTRICT

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# Hambledon Rural District Council

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## STAFF OF THE PUBLIC HEALTH DEPARTMENT

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### Medical Officer of Health :

\*J. E. HAINE, M.B., Ch.B., D.P.H.

### Assistant Medical Officer of Health for Diphtheria Immunisation (part-time) :

\*NORA JOHNS, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.

### Chief Sanitary Inspector

AND

### Inspector under the Petroleum Acts :

E. B. HEAD, M.R.San.I.

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### *District Sanitary Inspectors :*

J. FORREST, A.R.San.I. (Military Service).

J. E. HAY, A.R.San.I. (Military Service).

V. CALLEN, Cert. S.I.B., R.S.I. Cert. for Meat Inspection.

### *Assistant for Civil Defence Casualty Services :*

\*R. D. HEATH.

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### *Clerical Staff :*

#### *Health Department :*

Chief Clerk \*C. B. STUART (On Military Service).

Acting Chief Clerk \*Miss M. E. NUNN.

\*Miss D. STUART.                      \*Miss S. A. SINCLAIR.

\*Miss L. M. JAGGARD.

Voluntary Workers    { \*Mrs. B. GUINNESS.  
(part-time)            { \*Mrs. SLOANE-STANLEY.

### *Sanitary Inspector's Department :*

G. MINETT (Military Service).      Mrs. E. D. ASTON.

Miss K. M. PRIME.

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\* Also acts in similar capacity for the Guildford Rural District and Haslemere Urban District.

# Hambledon Rural District Council

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PUBLIC HEALTH DEPARTMENT,  
MILLMEAD HOUSE,  
GUILDFORD.

June, 1945.

*To the Chairman and Members of the Hambledon Rural  
District Council.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report on the health of the District for the year 1944.

It is noteworthy that despite five years of war the general health has remained extremely good. The birth-rate has continued to increase and is higher than at any time since 1925. The infant mortality and maternal mortality have declined, and over the whole country the births have been within 1 per cent. of full replacement. Infectious disease has been much less than expected, and no serious epidemics have occurred.

Housing and main drainage schemes are the most serious and most urgent problems to be faced as soon as conditions permit. During the war years housing has steadily deteriorated, whilst the population has continued to increase.

The work and scope of the department has increased very much during the war years, and there is no sign that it is likely to diminish during the post-war period.

I desire to express my thanks to all members of the Council for their sympathy and assistance during a particularly difficult year, and to record my gratitude to all members of the staff for their ungrudging assistance.

Yours faithfully,

J. E. HAINE,  
*Medical Officer of Health.*

## STATISTICS & SOCIAL CONDITIONS OF THE AREA

### SUMMARY.

	1944	1943
Area in Acres ... ..	67,801	67,801
Estimated resident population in July (estimate supplied by Registrar-General) ...	30,410	30,270
Number of Inhabited Houses (May) according to Rate Books ... ..	7,921	7,937
Rateable Value ... ..	£256,801	£251,217
A sum represented by a Penny Rate (estimated) ... ..	£1,113	£1,034
Number of Births (legitimate and illegitimate)	508	471
Birth-Rate per 1,000 of the population ... ..	16.7	15.56
Number of Still Births ... ..	9	13
Number of Deaths ... ..	369	335
Death-Rate (actual) per 1,000 of the population	12.13	11.06
Natural increase of population during year by excess of births over deaths ... ..	139	136
Number of Deaths of Infants (under the age of one year) ... ..	36	12
Infant Mortality per 1,000 live births ... ..	70.8	25.48
Number of women dying in, or in consequence of, child-birth ... ..	—	1
Death-Rate from Influenza per 1,000 of the population ... ..	0.13	0.29
Death-Rate from Pneumonia (all forms) per 1,000 of the population ... ..	0.89	1.02
Death-Rate from Bronchitis per 1,000 of the population ... ..	0.43	0.56
Death-Rate from Measles per 1,000 of the population ... ..	0.00	0.33
Death-Rate from the seven principal zymotic diseases: Smallpox, Whooping-cough, Measles, Diarrhoea, Diphtheria, Scarlet Fever and "Fever" (Typhoid, Enteric and Typhus), per 1,000 of the population	0.07	0.10
Death-Rate from Diarrhoea and Enteritis of children under two years of age per 1,000 births ... ..	7.87	4.25
Death-Rate from all forms of Tuberculosis per 1,000 of the population ... ..	0.33	0.26
Death-Rate from Cancer per 1,000 of the population ... ..	2.17	1.55
Death-Rate from Heart Disease per 1,000 of the population ... ..	3.03	2.97
Death-Rate from Acute and Chronic Nephritis per 1,000 of the population ... ..	0.30	0.26

## SOCIAL CONDITIONS.

The District is essentially rural in character, the occupations of the inhabitants being mainly agricultural, although some parts are purely residential. During the war years there has been a tendency for some localities to become industrialised. Housing conditions generally have deteriorated owing to the increase of the population and the lack of new building and of building repairs.

## VITAL STATISTICS

### BIRTHS.

508 live births were registered during the year, an increase of 37 on the figure for 1943.

Live Births :	Male.	Female.	Total.
Legitimate ... ..	230	217	447
Illegitimate ... ..	30	31	61
	260	248	508

BIRTH-RATE per 1,000 of the estimated resident population,  
16.7.

The birth-rate for 1943 was 15.56.

The graph on page 11 shows the birth-rate for the District for the last 14 years, together with the birth-rates for England and Wales.

There were 9 still-births during the year, as against 13 in 1943.

Still Births :	Male.	Female.	Total.
Legitimate ... ..	4	4	8
Illegitimate... ..	1	—	1
	5	4	9

STILL-BIRTH RATE per 1,000 total (live and still) births,  
17.41.

## DEATHS.

There were 369 deaths registered during 1944 (188 male and 181 female), as against 335 for the previous year. Table II on page 10 shows the principal causes of death.

DEATH-RATE per 1,000 of the estimated resident population, 12.13.

The preparation and issue of the Registrar-General's comparability factor has been suspended under war conditions.

The death-rate for 1943 was 11.06.

The death-rates per 1,000 of the population for the last 14 years, together with the death-rates for England and Wales, are shown in the graph on page 11.

The 1944 death-rates of certain specified diseases are set out in the Summary on page 6, together with the rates for 1943.

## INFANT MORTALITY.

During 1944 there were 36 deaths of infants under one year of age, as compared with 12 in 1943.

	Male.	Female.	Total.
Legitimate ... ..	12	15	27
Illegitimate ... ..	6	3	9
	—	—	—
	18	18	36
	—	—	—

## INFANT MORTALITY RATES.

	1944	1943
All infants per 1,000 live births ... ..	70.8	25.5
Legitimate infants per 1,000 legitimate live births ... ..	60.4	26.2
Illegitimate infants per 1,000 illegitimate live births ... ..	147.6	20.0
Deaths from measles (all ages) ... ..	0	1
„ whooping-cough (all ages)...	2	0
„ diarrhoea under 2 years of age) ... ..	4	2

**MATERNAL MORTALITY.**

Rate per 1,000  
total (live and  
still) Births.

Deaths from puerperal and post-abortion sepsis ... ..	0	0.0
Deaths from other maternal causes...	0	0.0
	0	0.0

Table I shows the birth and death-rates per 1,000 of the population for the District, and for England and Wales, for 1944 and 1943.

**TABLE I. COMPARATIVE BIRTH- AND DEATH-RATES.**

	Annual Rates per 1,000 of the Population.				Infantile Mortality per 1,000 total births		Maternal Mortality per 1,000 total births	
	Birth-Rate		Death-Rate		1944	1943	1944	1943
	1944	1943	1944	1943				
Hambledon R.D.	16.7	15.56	12.13 crude	11.06 crude	70.8	25.5	0.0	2.1
England and Wales	17.6	16.5	11.6	12.1	46*	49	1.93	2.29

\* Per 1,000 related births.

Table III on page 12 shows the birth-rates, death-rates, and analysis of mortality for certain diseases during 1944 in respect of England and Wales, London, and the Hambledon Rural District.

TABLE II.—CAUSES OF DEATH (ALL AGES).  
(Figures supplied by Registrar-General.)

Cause of Death	Male	Female	Total
1. Typhoid and paratyphoid fevers ...	—	—	—
2. Cerebro-spinal fever ... ..	—	—	—
3. Scarlet Fever ... ..	—	—	—
4. Whooping-cough ... ..	—	2	2
5. Diphtheria ... ..	—	—	—
6. Tuberculosis of the respiratory system ... ..	4	4	8
7. Other forms of tuberculosis ... ..	1	1	2
8. Syphilitic diseases ... ..	—	1	1
9. Influenza ... ..	2	2	4
10. Measles ... ..	—	—	—
11. Acute polio-myelitis and polio-encephalitis ... ..	—	1	1
12. Acute infective encephalitis ...	—	—	—
13. Cancer of B. cav. and œsoph. (m), uterus (f) ... ..	7	4	11
14. Cancer of stomach and duodenum	3	4	7
15. Cancer of breast ... ..	—	5	5
16. Cancer of all other sites ... ..	25	18	43
17. Diabetes ... ..	1	2	3
18. Intra-cran : vasc : lesions ... ..	7	25	32
19. Heart disease ... ..	52	40	92
20. Other diseases of circulatory system	13	8	21
21. Bronchitis ... ..	5	8	13
22. Pneumonia ... ..	14	13	27
23. Other respiratory diseases ... ..	1	1	2
24. Ulcer of stomach or duodenum ...	4	1	5
25. Diarrhoea under 2 years ... ..	1	3	4
26. Appendicitis ... ..	—	—	—
27. Other digestive diseases ... ..	4	6	10
28. Nephritis ... ..	3	6	9
29. Puerperal and post-abort. sepsis ...	—	—	—
30. Other maternal causes ... ..	—	—	—
31. Premature birth ... ..	4	6	10
32. Congenital malformations, birth injury, infant disease ... ..	5	5	10
33. Suicide ... ..	—	—	—
34. Road traffic accidents ... ..	6	1	7
35. Other violent causes ... ..	5	2	7
36. All other causes ... ..	21	12	33
All Causes ... ..	188	181	369

## GRAPH SHOWING BIRTH AND DEATH RATES PER 1,000 OF THE POPULATION

	Hambleton R.D.	England and Wales
Births ...	- - - - -	= = = = =
Deaths ...	—————	═══════

\* = Hambleton R.D. Death Rate after correction  
by the Registrar-General's Comparability  
Factor.

Extension of  
District, 1/4/33.

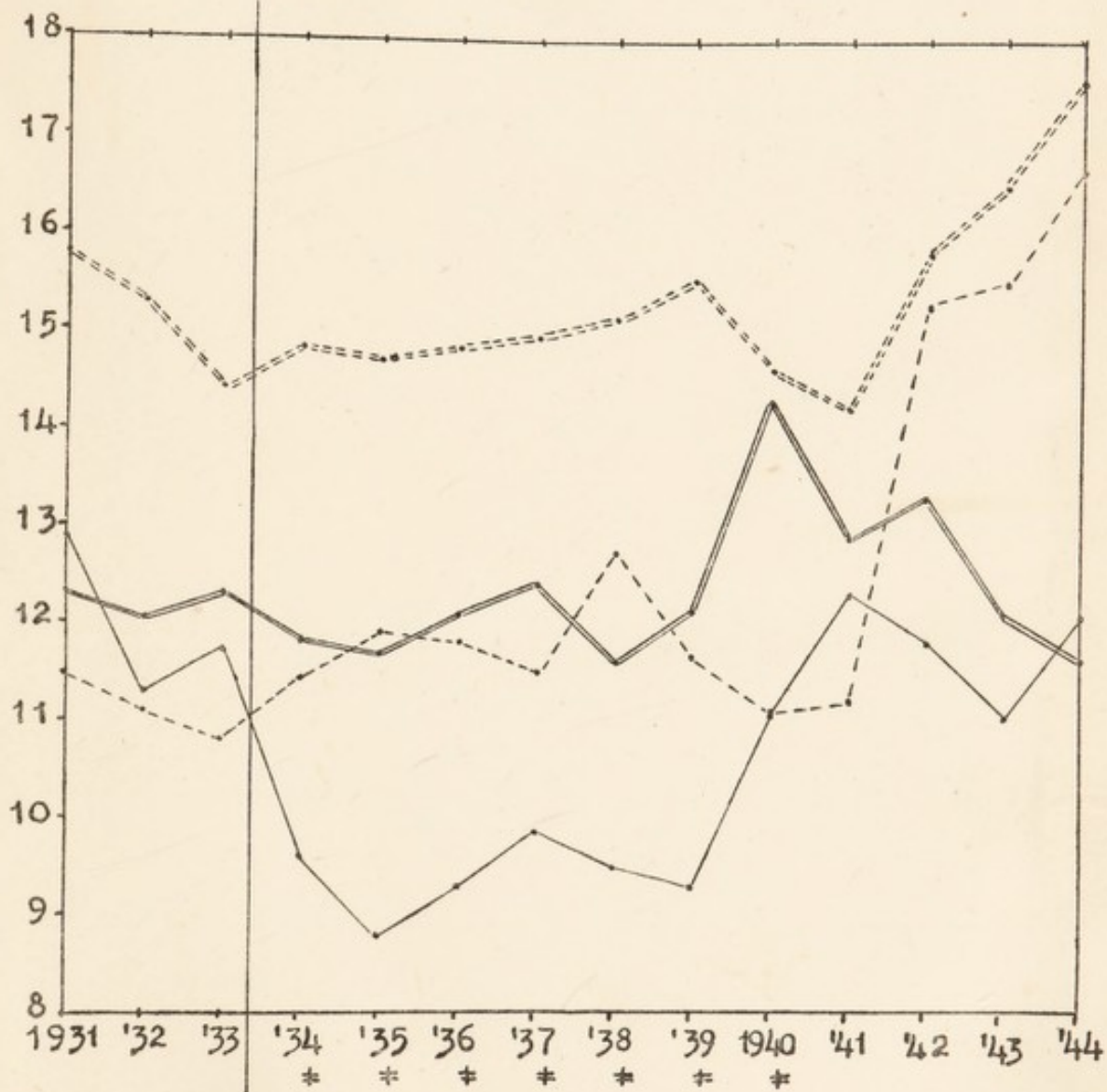


TABLE III.

BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY DURING THE YEAR 1944.

	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 LIVE BIRTHS	
	Live Births	Still Births	All Causes	Typhoid and Paratyphoid Fevers	Smallpox	Measles	Scarlet Fever	Whooping-cough	Diphtheria	Influenza	Deaths from Diarrhoea & Enteritis (under 2 years)	Total Deaths under One year
England and Wales ...	17.6	0.50	11.6	0.00	0.00	0.01	0.00	0.03	0.02	0.12	4.8	46*
126 County Boroughs and Great Towns, including London ...	20.3	0.64	13.7	0.00	—	0.01	0.00	0.03	0.03	0.10	7.3	52
148 Smaller Towns (Estimated Resident populations 25,000 to 50,000 at Census 1931) ...	20.9	0.61	12.4	0.00	—	0.01	0.00	0.02	0.03	0.11	4.4	44
London ...	15.0	0.42	15.7	0.00	—	0.00	0.00	0.04	0.01	0.08	10.1	61
<b>Hambledon R.D.</b> ...	16.7	0.29	12.13 actual	0.00	—	0.00	0.00	0.06	0.00	0.13	7.87	70

\*Per 1,000 related Births.

## GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

### LABORATORY FACILITIES.

**Pathological Examinations.**—Most of the routine examinations are still conducted by the Royal Surrey County Hospital, and the arrangement works very satisfactorily.

The following are details of examinations carried out during the year :

	1944	1943
Diphtheria     ...   ...   ...   ...   ...   ...	36	386
Scarlet Fever   ...   ...   ...   ...   ...   ...	13	27
Tuberculosis   ...   ...   ...   ...   ...   ...	11	10
Fæces ...   ...   ...   ...   ...   ...   ...	3	3
Miscellaneous   ...   ...   ...   ...   ...   ...	12	5
	75	431

The Emergency Public Health Laboratory at Christ's Hospital, Horsham, has undertaken a number of special investigations, particularly with regard to outbreaks of infectious disease in institutions. The help given by this service has been invaluable.

**Milk Analysis.**—During the year 176 samples were examined. This work is carried out by the Pathological Department of the Royal Surrey County Hospital, Guildford.

**Water Analysis.**—The Counties Public Health Laboratories, 1 Broadway, Gidea Park, Essex, continue to undertake the examination (both chemical and bacteriological), by contract, of samples of water. The number of samples examined during the year was 57.

## AMBULANCE FACILITIES.

Particulars are given below of the ambulance services operating in the District :

(i) Ambulances available for the conveyance of cases of Infectious Disease :

Name of Authority	No. of Ambulances	Address of Ambulance Station	Telephone Number
Farnham Joint Isolation Hospital Committee.	2	1 at Farnham Isolation Hospital. 1 at Heath & Wiltshire's Garage, Farnham.	Farnham 6015

(ii) Ambulances available for cases of Non-Infectious character:

Name of Association	No. of Ambulances	Address of Ambulance Station	Telephone Number
St. John Ambulance Brigade : Cranleigh	2	High Street, Cranleigh	Cranleigh 9
Guildford	4	Woodbridge Road, Guildford.	Guildford 633
British Red Cross Society : Godalming.	2	Church Street, Godalming.	Godalming 609

Although the District, except for the area around Cranleigh, is completely dependent upon the ambulance service of the Guildford St. John Ambulance Brigade and of the Godalming British Red Cross Society, it has been found reasonably sufficient for all requirements.

The voluntary ambulance service at Holbrook House Civil Defence Depot, Shalford, in the Guildford Rural District, for conveying patients to and from Sick Bays has continued to give excellent service. 285 patients were conveyed during the year, and 6,857 miles covered.

**Volunteer Car Pool.**—This scheme has been used very considerably during the year. It has undoubtedly eased the burden on the ambulance services generally, and has been of enormous benefit to patients who otherwise might have been debarred from receiving essential treatment or been obliged to

travel under conditions injurious to their state of health. It has also been used very extensively for the conveyance of volunteer blood donors to Farnham County Hospital, some 50 persons a week being transported. The blood donor service could not have been carried on without the assistance of the Volunteer Car Pool, and, as is well known, the service has been of the most vital importance.

During the year I have authorised 96 journeys, which, of course, cover medical purposes only.

The service has been greatly appreciated, not only by the patients who benefited directly, but also by the hospitals and by doctors in charge of the patients. With the return to normal conditions this service will inevitably be withdrawn. It is hoped that some similar form of voluntary service may be found in substitution, as it is work that the British Red Cross Society or the St. John Ambulance Brigade might well consider undertaking in a District such as this, where patients frequently live in isolated rural localities.

The service provides a very real need and has proved of very great value. There will inevitably be difficulties and hardship when it ceases to function.

#### NURSING IN THE HOME.

**Midwives.**—There are 13 Midwives practising in the Rural District supervised by the County Medical Officer of Health. They are distributed in the following parishes :

Alfold ... .. -	Frensham ... .. 1
Bramley ... .. 1	Hambledon ... .. -
Busbridge ... .. -	Hascombe ... .. -
Chiddingfold... .. 1	Peperharow ... .. -
Cranleigh ... .. 3	Thursley ... .. 1
Dunsfold ... .. -	Tilford... .. -
Dockenfield ... .. -	Witley ... .. 2
Elstead ... .. 1	Wonersh ... .. 1
Ewhurst ... .. -	

and 2 of them are resident outside the District.

**District Nurses.**—District Nurses are available in every parish. This service is administered by the County Nursing Association.

**Health Visitors.**—There are <sup>6</sup>13 County Health Visitors in the District who visit homes under the School Medical and Maternity and Child Welfare Services. ~~Twelve of them in the parishes of : Bramley, Chiddingfold, Cranleigh, Elstead, Frensham, Thursley, Witley, Wonersh, and one is resident outside the district.~~

**Home Nursing for Public Assistance Cases.**—This scheme is operated by the Surrey County Council.

## CLINICS AND TREATMENT CENTRES.

**Maternity and Child Welfare Centres.**—Centres within the District are as set out in the table below :

Centre	Address	Days of Centre
Bramley ... ..	The Corners ... ..	2nd and 4th Fridays
Chiddingfold ...	Village Institute ... ..	1st and 3rd Wednesdays
Cranleigh ... ..	Tring, High Street ... ..	Every Monday
Dunsfold ... ..	Winn Hall ... ..	2nd and 4th Mondays
Elstead ... ..	Congregational School Room...	2nd and 3rd Tuesdays
Ewhurst ... ..	Village Hall ... ..	1st and 3rd Fridays
Witley ... ..	British Legion Club ... ..	2nd and 4th Thursdays

In July the County Council were asked to establish a Maternity and Child Welfare Centre at Milford on account of the number of children in the vicinity and the distance from the nearest clinic at Godalming or Witley. The County Council acceded to the request, and it is hoped that the Centre will be commenced in Milford early in 1945.

**Ante-Natal Clinics.**—Clinics serving the District are held as follows :

Farnham ("Brightwells") ...	Wednesdays at 2 p.m.
Godalming ... ..	1st and 3rd Tuesdays, 9.30 a.m.
Warren Road Hospital, Guildford.	Fridays 9.30 a.m., Monday morning and Thursday after- noon.

**Orthopædic Clinic.**—The Orthopædic Clinic is held at the Royal Surrey County Hospital, Farnham Road, Guildford, on Tuesday afternoons at 1.30 p.m. In-patient treatment is provided at the St. Nicholas and St. Martin's Homes at Pyrford, and Out-patient treatment on Thursday mornings at 11 a.m.

### T.B. Dispensaries.

Dispensary	Address	Day and Time for Attendance
Farnham	"Brightwells," East Street, Farnham	Tuesdays (1st, 2nd, 4th and 5th in the month), 9.30-1 p.m.
Guildford	49 Farnham Road, Guild- ford, until 2.10.44, when transferred to	Mondays, 2 p.m. Fridays, 2 p.m. Alternate Wednesdays, 10 a.m. Wednesdays (2nd and 4th in month), 5.30 p.m.
	Tower House, Epsom Road, Guildford.	Mondays, 2-4 p.m. Wednesdays, 2-4 p.m. Fridays, 10-12 noon.
Milford ...	Milford Sanatorium ... ..	Fridays (2nd and 4th), 2-4 p.m.

**Venereal Diseases Clinic.**—A Clinic is held at the Royal Surrey County Hospital, Guildford, four days weekly, as follows :

Mondays (Females) ... ..	2 p.m.
Thursdays (Females) ... ..	9.30 a.m.
Thursdays (Males) ... ..	5 p.m.
Fridays (Males) ... ..	5 p.m.

**Birth Control.**—The Birth Control Clinic at the Warren Road Hospital, Guildford, is held every 1st and 2nd Wednesday in the month at 10 a.m., and is administered by a Voluntary Committee.

The Clinics mentioned above are all administered by and under the control of the Surrey County Council, except where it is otherwise stated.

## HOSPITALS.

\*The hospitals serving the District are as follows :

**County** Warren Road Hospital, Guildford, 627 beds.

**Council :** Farnham County Hospital, Hale Road, Farnham, 210 beds.

**Voluntary :** Royal Surrey County Hospital, Guildford (including Merrow Grange Auxiliary Hospital), 400-450 beds.

Cranleigh Village Hospital, Cranleigh, 12 beds and 2 cots.

Haslemere and District Hospital, Haslemere, 129 beds.

**Infectious** Clandon Smallpox Isolation Hospital, 37 beds.

**Disease :** Farnham Isolation Hospital, 48 beds.

The Guildford and Godalming Joint Isolation Hospital was closed in 1940 on account of war-time conditions.

This reduced the number of beds available in the south-western part of Surrey by 81. The Hambledon Rural District has since then been completely dependent upon the Farnham Isolation Hospital, and though at times the accommodation has not been entirely adequate, the reciprocal arrangements with the Ottershaw Isolation Hospital have worked satisfactorily, and there has been no serious difficulty in securing the admission of any patient.

The presence of St. Thomas's Hospital Hydestile has increased the requirements for isolation beds, since they are unable to retain any cases of infectious disease, and even such mild infections as mumps, chicken-pox, and measles have, of necessity, been removed to the Farnham Isolation Hospital.

Fortunately there has been no serious epidemic of infectious disease requiring extensive hospitalisation. Under such circumstances there might well have been serious difficulties, particularly

as it has been almost impossible to secure adequate isolation at home under wartime conditions.

**Evacuation Sick Bays.**—There are two Sick Bays set up under the Government Evacuation Scheme in the Hambledon Rural District—one at Kilmory, Cranleigh, for minor infectious diseases (21 beds), and one at Long Acre, Shamley Green, for cases of a non-infectious nature (27 beds).

The number of cases admitted during the year were :

**Kilmory Sick Bay :**

Impetigo ... ..	1	Jaundice/Congenital Heart	1
Sonné Dysentery ... ..	12	Septic Finger/contact	
Whooping-cough ... ..	13	Chicken-pox ... ..	1
Whooping-cough/German		Sonné Dysentery and	
Measles ... ..	1	Impetigo ... ..	1
German Measles ... ..	35	Measles and Bronchitis ...	1
Measles ... ..	17	Chicken-pox and Bronchitis	2
Mumps ... ..	2		
Chicken-pox ... ..	23	Total ... ..	115
Gastro-enteritis ... ..	5		

**Long Acre Sick Bay :**

Impetigo ... ..	19	Tonsilitis ... ..	1
Bronchitis and Convulsions	1	Threadworms ... ..	1
Impetigo and Ringworm	1	Enuresis ... ..	1
Stomatitis and Bronchitis	1	Ringworm of Scalp ...	16
Scabies ... ..	14	Diseases of Ear ... ..	2
Convalescence ... ..	9	Eczema ... ..	1
Fungus of Feet ... ..	3	Heavy Cold ... ..	2
Observation ... ..	9	Nits ... ..	1
Skin Infections ... ..	1	Athlete's Foot ... ..	1
Throat complaints ... ..	1		
Other complaints ... ..	2		88
Conjunctivitis ... ..	1		

The average stay in the two Sick Bays is 22 days in Kilmory, and 19 days in Long Acre.

In the three Districts for which I am Medical Officer of Health there are four Sick Bays, and since all are operated in close collaboration they must be considered as branches of one single service. A brief account of their work since the commencement of the Sick Bays is appended, being in the main excerpts from a report submitted in November and forwarded to the Ministry of Health with a plea that Sick Bays should be retained, at any rate in part, during the post-war period. They will assist materially in the prevention of spread of minor epidemic disease during the period when all housing accommodation is occupied to the full. They

will relieve the pressure on Isolation Hospital accommodation, which is at present considered only just sufficient to meet ordinary requirements, and if the residential nurseries and similar establishments are to continue the retention of Sick Bays is essential.

The number of patients admitted over the whole period is 2,719, practically all of them evacuees. The demand for admission of resident children has been insistent and very difficult to refuse. Conditions under which the resident children are living as regards overcrowding and difficulties of isolation or adequate treatment are exactly the same as those of the evacuees.

All the Sick Bays have admitted children from our own area and also from adjoining Districts. With the assistance of the British Red Cross Society members, who are also members of the Civil Defence Casualty Service stationed at Shalford, a voluntary transport service was developed for the conveyance of children to Sick Bays. This has worked admirably, and the amount of travelling involved has been very considerable, reaching a peak figure of 2,026 miles during the month of June in 1941.

Practically all houses in the three Districts are now so overcrowded as to prevent any attempt at isolation of infectious or contagious diseases. It is probable that a similar state of affairs will continue for some years after the war. The housing position here is really serious, and the demand for large numbers of new houses urgent and insistent.

It appears, therefore, certain that the same difficulties of isolation and medical treatment will persist until the housing shortage is relieved. Unless it is made possible to remove children from their homes for isolation on account of these minor conditions the risk of spread will be very much increased and extremely difficult to deal with. It is not possible to admit such diseases as chicken-pox, mumps, and whooping-cough to the Isolation Hospital, the accommodation being totally inadequate.

I have shown in the attached table the increasing use of the Sick Bays by residential nurseries. This has increased and continues to increase to such an extent that it seems the Sick Bay accommodation must become an essential part of any scheme for the provision of residential nurseries. It seems probable that at any rate some of the residential nurseries will be continued after the war, and it follows that Sick Bay accommodation must also be provided.

I am very definitely of the opinion that provision should be made for the continuation of some Sick Bay accommodation after the war. This need not be probably on the same scale as at present, but I suggest that two Sick Bays, each of about 20 beds—which is the economic minimum for the successful running of a Sick Bay—would probably meet urgent requirements, one of them being reserved for minor infectious diseases, the other for minor ailments, including contagious skin infections.

Years		Boughton Hall and Millwater House	Kilmory	Long Acre	Quedley	Total
1939	Residential	—	16	1	4	21
	Nursery Children	—	57	24	46	127
	Others ... ..	—	73	25	50	148
1940	Residential	14	7	4	30	55
	Nursery Children	81	127	138	119	465
	Others ... ..	95	134	142	149	520
1941	Residential	37	45	39	68	189
	Nursery Children	113	98	107	118	436
	Others ... ..	150	143	146	186	625
1942	Residential	53	91	41	55	240
	Nursery Children	78	54	42	111	285
	Others ... ..	131	145	83	166	525
1943	Residential	49	60	60	56	225
	Nursery Children	48	35	56	87	226
	Others ... ..	97	95	116	143	451
1944	Residential	85	67	29	14	195
	Nursery Children	38	48	59	110	255
	Others ... ..	123	115	88	124	450

Grand Totals during the war years :

Residential Nurseries	925
Others	1,794
	<u>2,719</u>

**Psychiatric Social Worker.**—The work of the Psychiatric Social Worker appointed in 1940 under the Government Evacuation Scheme continued to be of the very greatest value and of assistance, particularly with billeting problems. She has worked in close co-operation with the Evacuation Hostels and has visited all evacuees where billeting was difficult or where there were psychological problems.

The Child Guidance Clinic held in Guildford was obliged to increase the number of sessions to three times weekly, and even this has proved scarcely adequate to give sufficient time for treatment in all cases.

Miss Perrott, the Psychiatric Social Worker, resigned in October and her place was taken by Mrs. Hicklin on a temporary basis in the expectation that the County Council, as the Education Authority, would assume responsibility for this service, and that it would become a permanent organisation instead of a temporary Evacuation Scheme.

### **MORTUARIES.**

The following mortuaries serve the District :

Farnham ... (serving the parishes of Docketfield, Elstead, Frensham and Tilford) to which 4 bodies were removed during the year.

Cranleigh ... (serving the parishes of Ewhurst, Alfold and Cranleigh and other nearby parishes) to which 11 bodies were removed during the year.

### **INSULIN.**

In accordance with Ministry of Health Circular 2734, a regular supply of insulin is made to one patient who would be otherwise unable to afford it.

INFECTIOUS DISEASES.  
TABLE SHOWING NUMBER OF CASES AND WHERE TREATED.

Where Treated	Encephalitis	Measles	Scarlet Fever	Puerperal Pyrexia	Diphtheria	Whooping-cough	C.S. Meningitis	Some Dysentery	Guardia Lambia	Flexner Dysentery	Influenzal Pneumonia	Erysipelas	Meningococcal Meningitis	TOTAL
Farnham Isolation Hospital ...	—	4	35	—	1	2	1	2	—	1	—	—	—	46
Boughton Hall Sick Bay ...	—	1	—	—	—	—	—	2	—	—	—	—	—	3
Ottershaw Isolation Hospital ...	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Kilmory Sick Bay ...	—	3	—	—	—	—	—	5	—	—	—	—	—	8
Warren Road Hospital ...	—	—	1	1	—	—	—	—	—	—	—	—	—	2
St. Thomas's Hospital, Godalming	—	—	—	—	—	—	1	—	—	—	1	—	—	2
Military Isolation Hospital ...	—	—	1	—	—	—	—	—	—	—	—	—	—	1
Millwater House Sick Bay ...	—	—	—	—	—	6	—	—	—	—	—	—	—	6
St. Helier Hospital, Carshalton ...	—	—	—	1	—	—	—	—	—	—	—	—	—	1
At Home ...	1	12	8	—	—	58	—	29	3	—	5	3	—	119
Total ...	1	20	45	2	1	66	2	39	3	1	6	3	—	189

## SANITARY CIRCUMSTANCES OF THE AREA

### WATER.

Analyses of the public water supplies have been satisfactory and there has been no serious shortage. In isolated cases wells have become unsatisfactory, and there appears to be a tendency for wells that have been serviceable for many years to dry up. There are a few localities in which the extension of the main might be considered under the terms of the White Paper issued by the Government entitled "A National Water Policy." It is also worth considering whether the numerous public and private water undertakings could not be in some way amalgamated. The greater resources and facilities provided by such a course would be an advantage, and a special report on this subject was prepared in August, 1944.

### DRAINAGE AND SEWERAGE.

There have been no extensions of main drainage schemes during the war, whilst difficulties associated with cesspools have continued to increase, partly by reason of the increased population and partly by the difficulties in securing adequate labour for the cesspool emptying service. This applies particularly where the sub-soil is impervious, and in those villages where main drainage was under consideration immediately before the war.

Extensions and improvements at the Bramley Sewage Disposal Works were carried out as the existing works have become unable to deal with the increased flow. The other sewage disposal works have functioned satisfactorily despite the added load.

The need for the main drainage schemes proposed immediately prior to the war is greater than ever' and it is hoped that they will be given urgent priority as soon as conditions permit. At the same time it may be that the plans will require revision in accord with the latest proposals for Town and Country Planning.

### RIVERS AND STREAMS.

A few instances of pollution were brought to our notice during the year, no great difficulty being experienced in effecting the necessary remedial measures. The most serious was in connection with the Bramley Sewerage Works, the effluent of which was unsatisfactory and failed to meet with the approval of the Inspectors of the Thames Conservancy Board. The improvements to the Works were completely satisfactory and should prevent any recurrence so long as the population of Bramley is not seriously increased.

## **PUBLIC CLEANSING.**

Very great difficulty has been experienced in maintaining these services owing to shortage of labour and to the difficulties in obtaining repairs to vehicles. One cesspool emptier was out of service for a very long time, and it has been impossible to cope adequately with the demands.

## **SHOPS.**

The number of inspections made by the Sanitary Inspector during the year was 13.

## **MOVABLE DWELLINGS AND CAMPING GROUNDS.**

There is a tendency, no doubt owing to the acute shortage of houses, for an increase in the number of movable dwellings. The Council gave consideration to the establishment of a permanent camping ground providing all requisite facilities, but owing to the difficulties involved, and to lack of power in compelling the use of such a site for that class for whom it would be primarily intended, it was not proceeded with. It seems probable that difficulties of this nature will increase during the next few years and will require careful watching.

## **SCHOOLS.**

Sanitary conditions at the schools have remained, in general, satisfactory. No schools were closed on account of infectious disease.

Table V on page 33 shows the number of children notified as being absent from school on account of infectious or contagious disease, including contacts with cases of infectious disease.

# **HOUSING**

The population of the District is substantially higher than in pre-war years. There is an acute shortage of housing accommodation over the whole of the District by reason of this increased population and the cessation of building operations throughout the war years.

As was recommended by the report on "Rural Housing" prepared by a sub-committee of the Central Housing Advisory Committee, it was decided to proceed with a Housing Survey at the earliest possible moment and arrangements were made to commence this at the beginning of 1945. The additional staff necessary was secured by an application for the release of one Assistant Sanitary Inspector from the Forces and the employment of a Housing Inspector who, though not a qualified Sanitary Inspector, did have considerable experience of the nature required. The inspection will be carried out under the direction of the Chief

Sanitary Inspector, who will be responsible for the grading of all houses.

Standards throughout the rural parts of the County will be uniform, thanks to the appointment of a Surrey Joint Advisory Housing Committee. This Committee, consisting of representatives from all the Rural District Councils and the County Council, has recommended standards of fitness of houses examined under the Survey, and these standards have been agreed to by all parties.

The Council is well aware of the acute housing shortage, and is active in taking steps to meet the situation as soon as possible.

The post-war programme allows for the building of 300 houses in the first two years.

Eight agricultural cottages were completed during the year—2 at Dunsfold, 2 at Chiddingtold, and 4 at Cranleigh. These cottages were of a very high standard and probably the best houses that have been built so far by the Council. It is intended that all future houses built by the Council shall at least attain the same standard.

Application was made for one hundred prefabricated bungalows as it was felt that the needs of the District were so great these would go some way towards meeting the difficulties and much more speedily than by waiting for the erection of permanent houses. Unfortunately only 70 were allocated by the Ministry of Health. There is no doubt that several hundreds of these bungalows could be occupied, and, although it is disappointing to have so few, they will probably not be so popular when there is an alternative of permanent houses. It is unlikely, however, that there will be sufficient of these for many years to come, and the Council would have been justified in accepting very many more than have been allotted.

Council Houses generally throughout the Hambledon Rural District are well maintained and cared for, and have not deteriorated to any great extent during the war years.

The substantial increase in the number of houses and the erection of temporary bungalows will increase drainage difficulties, and it must be expected that the demand for further main drainage schemes and the extension of existing ones will become a very urgent and serious matter as the number of Council Houses is increased.

In the allocation of new houses special consideration must be given to the requirements of returning service personnel. At the same time the special needs of those families whose health is endangered by present housing conditions should receive high priority. There are a great many cases of overcrowding, not always according to the legal standards but certainly according to the commonsense standards of health. In some cases tubercular patients are living under conditions which are most unsuitable and are inimicable to their health.

## HOUSING STATISTICS.

Number of new houses erected during the year :

- (a) Total including number given separately under (b)... —
- (b) With State Assistance under the Housing Acts :
  - (1) By the Local Authority ... .. —
  - (2) By other bodies or persons ... .. —

### 1. Inspection of Dwelling Houses during the Year.

- (1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)... 208
- (b) Number of inspections made for the purpose... .. 485
- (2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925 and 1932 ... .. —
- (b) Number of inspections made for the purpose ... .. —
- (3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... .. —
- (4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... 208

### 2. Remedy of Defects during the Year without service of Formal Notice.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers ... .. 207

### 3. Action under Statutory Powers during the Year.

A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :

- (1) Number of dwelling houses in respect of which notices were served requiring repairs ... .. 1
- (2) Number of dwelling houses which were rendered fit after service of formal Notices :
  - (a) By owners ... .. —
  - (b) By Local Authority in default of owners ... .. 1

B.—Proceedings under Public Health Acts :

- (1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ... .. —

- (2) Number of dwelling houses in which defects were remedied after service of Formal Notices :
- (a) By owners ... .. —
- (b) By Local Authority in default of owners ... .. —

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :

- (1) Number of dwelling houses in respect of which Demolition Orders were made ... .. —
- (2) Numbers of dwelling houses demolished in pursuance of Demolition Orders ... .. —
- (3) Notices served under Section 11 (1), Housing Act, 1936, dwelling-house closed on undertaking of owner ... .. —

D.—Proceedings under Section 12 of the Housing Act, 1936 :

- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... .. —
- (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... .. —

## INSPECTION AND SUPERVISION OF FOOD

### MILK SUPPLY.

176 samples of milk were examined during the year.

There are 155 cowkeepers and purveyors of milk in the District—56 producers of Accredited milk, 28 of Tuberculin Tested milk, 63 Ordinary milk and 8 dairies selling milk in the District—one pasteurising licence.

The standard of milk has been maintained satisfactorily despite the conditions of the war. The number of cattle found to be tubercular has increased somewhat, as shown by the table on page 28, which gives the figures for the last 4 years :

### MEAT AND OTHER FOODS.

**Meat.**—Under war-time regulations the central abattoir in the Guildford Borough is used for all slaughtering.

### ANTHRAX.

Three cases of suspected anthrax were reported, but were all withdrawn later.

SHORT PARTICULARS OF MILK SAMPLING FOR THE YEARS 1941, 1942, 1943, 1944.  
ANALYSES RESULTS.

Year	Number Samples Taken	Bacterial count				Coliform Bacillus				T.B.	
		Under 10,000 per ml.	10,000 to 50,000	50,000 to 200,000	200,000 and over	Absent on all counts	Present in 1/10	Present in 1/100	Present in 1/1,000	Positive	Negative
1941	Designated 26 } Undesignated 40 }	24	31	9	2	45	11	7	3	—	62
1942	Designated 47 } Undesignated 78 }	32	78	13	2	96	23	6	—	2*	121
1943	Designated 57 } Undesignated 106 }	32	68	41	22	152	9	2	—	4†	162
1944	Designated 53 } Undesignated 123 }	54	65	54	3	166	10	—	—	2	—

\* Both animals (from undesignated supplies) removed and slaughtered. Subsequent samples taken proved negative.

† Two from accredited herds and two from undesignated supplies. All affected animals removed and slaughtered. Subsequent samples taken proved negative.

## FOOD UNFIT FOR HUMAN CONSUMPTION.

Two cwts. of canned meat and 12½ tons tinned milk as consignments of food unfit for human consumption were sent in to the District for the use of poultry and animal foodstuffs. Inspections are made by the Sanitary Inspector to ensure that it is used for the purpose indicated.

## FOOD AND DRUGS (ADULTERATION) ACT.

This Act is administered by the County Council, and I append the Table as supplied by the County Medical Officer showing the number of samples examined during the year.

TABLE IV.  
RETURN OF SAMPLES ANALYSED DURING THE YEAR  
ENDED 31st DECEMBER, 1944.

Articles	Analysed			Adulterated or Deteriorated			Prosecutions	Convictions
	Formal	In-formal	Total	Formal	In-formal	Total		
Milk ... ..	53	17	70	3	6	9	—	—
Butter ... ..	—	—	—	—	—	—	—	—
Cream ... ..	—	—	—	—	—	—	—	—
Lard ... ..	—	—	—	—	—	—	—	—
Gelatine ... ..	2	—	2	—	—	—	—	—
Cake Mixture	—	1	1	—	—	—	—	—
Totals ... ..	55	18	73	3	6	9	—	—

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

### GENERAL.

The total number of cases of notifiable infectious disease (excluding tuberculosis) brought to the notice of the Health Department during 1944 was 189, as compared with 438 in the previous year.

The following table shows the numbers in each of the notifiable diseases :

Disease	1944	1943
Smallpox ... ..	—	—
Scarlet Fever ... ..	45	59
Diphtheria ... ..	1	8
Enteric Fever (including Paratyphoid) ...	—	—
Typhoid ... ..	—	1
Puerperal Pyrexia ... ..	2	—
Pneumonia ... ..	6	4
Acute Anterior Poliomyelitis ... ..	—	—
Erysipelas ... ..	3	6
Undulant Fever ... ..	—	—
Cerebro-Spinal Fever ... ..	2	—
Malaria ... ..	—	—
Dysentery ... ..	43*	18
Ophthalmia Neonatorum ... ..	—	2
Encephalitis Lethargica ... ..	1	—
Whooping-cough ... ..	66	51
Measles ... ..	20	289
Totals ... ..	189	438

\* Thirty-nine of these were Sonné.

### SMALLPOX.

No case of smallpox occurred in the District, although a number of contacts of cases came into the Districts. These were followed up, and the usual precautions taken.

## SCARLET FEVER.

Scarlet fever continues to be a source of difficulty. Forty-five cases were notified, a number of them being in institutions. There was no large outbreak. Practically all of the cases were of a very mild type. The number of notifications does not give a true picture of the position, since only typical scarlet fever cases were notified as a general rule. There were a number of outbreaks of infectious sore throat due to hæmolytic streptococci and such cases are probably as infectious as typical scarlet fever and of the same nature. Many of them have no rash, and others a very mild or atypical rash. Notification depends entirely upon the opinion of the doctor in attendance, and, as a general rule, there is reluctance to notify unless the rash is typical or special conditions exist, such as risk to milk supplies.

The name "scarlet fever" is really becoming obsolete, and it would be better if the term "hæmolytic streptococcal infection" was substituted. The disease being very mild, and the infection, as a rule, widespread, there is very little justification in removal to Isolation Hospital unless exceptional circumstances are found. Efforts are made to treat most cases at home, and, although medical practitioners are willing to co-operate in this, the general public are apt to regard scarlet fever as seriously as in bygone years and to expect hospital treatment. Difficulties of home isolation and home nursing are often insurmountable under present conditions.

## WHOOPING-COUGH.

Sixty-six cases were notified during the year. A considerable number occurred in residential nurseries. Whooping-cough occurs as a minor epidemic each winter—fortunately it is not of a severe type.

No deaths occurred.

Inoculation against whooping-cough is not yet generally acceptable. At the same time there is an increasing demand from parents in view of the dangerous nature of the disease and its long duration. It is difficult to refuse the many requests made.

## DIPHTHERIA.

Only one case of diphtheria was notified during the year, and the child had not been immunised.

**Diphtheria Immunisation.**—The results of the immunisation were as shown in the accompanying table. The figures for children of school age are very satisfactory, but there is some concern that the percentage of children under 5 years of age who have been treated is so low. These figures are based on the actual numbers

of children in the District. No doubt a substantial number have been immunised privately, and therefore the real figure should be considerably higher than our records show.

Making every allowance, however, the number of young children immunised is still very much too low. There is need for more direct personal contact with the parents. Experience has shown that when such contact is established the results are satisfactory. At present the only direct approach is through the Infant Welfare Centres. It seems that home visiting is the only satisfactory solution and the one most likely to be effective.

### DIPHTHERIA IMMUNISATION, 1944.

**100% Schools.** Rudolph Memorial Home and School, Tilford.  
St. Dominic's Open-Air School, Hambledon.  
Lord Wandsworth's School, Bramley.  
Melbreck School, Tilford.

1st Injection	2nd Injection	Re-immunised	Schick Test	Schick Read	Positive Result
61	95	5	21	21	1
Visits made to Schools	Total School population over 5 years	Total Immunised	Percentage in district		
34	3,570	3,287	92.07%		

Percentage of children under 5 years of age—27.42 per cent.

TABLE V.—SCHOOL ABSENTEES, 1944.

School	Conjunctivitis	Scarlet Fever	Diphtheria	Chickenpox	Measles	German Measles	Pneumonia and Toxic Nephritis	Ringworm	Mumps	Dysentery (Sonne)	Whooping-cough	Tonsillitis	Coughs & Colds	Totals
Alfold Council ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Alfold Evacuees ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bramley, Grafham C. of E.	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Bramley C. of E. ... ..	—	5	—	7	—	—	—	—	—	—	6	—	—	18
Chiddingfold C. of E. ... ..	—	—	—	—	—	—	—	12	—	19	—	—	—	31
Churt C. of E. ... ..	4	—	—	39	—	—	—	—	4	—	—	—	1	48
Cranleigh Council (Infants) ... and Evacuees ... ..	—	1	—	7	1	—	—	—	—	—	15	1	—	25
Cranleigh C. of E. ... .. and Evacuees ... ..	—	1	—	—	—	—	—	—	1	—	1	—	—	3
Dunsfold C. of E. ... .. and Evacuees ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ellen's Green C. of E. ... ..	—	—	—	5	—	—	—	—	—	—	—	—	—	5
Elstead C. of E. ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ewhurst C. of E. ... .. and Evacuees ... ..	—	1	—	—	—	4	—	—	1	—	6	—	—	12
Frensham C. of E. ... ..	—	1	—	1	1	—	—	—	—	—	8	—	—	11
Hambleton C. of E. ... ..	—	6	—	4	1	—	—	—	1	—	—	—	—	12
Hascombe C. of E. ... ..	—	—	—	—	1	1	—	—	—	—	—	—	—	2
Milford C. of E. ... ..	—	11	—	—	3	—	1	—	—	—	1	—	—	16
Thursley C. of E. ... ..	—	2	—	1	—	8	—	—	—	—	5	—	—	16
Tilford C. of E. ... ..	—	—	—	39	—	—	—	—	—	—	1	—	—	40
Witley C. of E. ... ..	—	2	2	—	—	2	—	—	—	—	1	—	—	7
Wonersh and Shamley Green C. of E. ... .. and Evacuees ... ..	—	—	—	—	2	2	—	—	—	—	5	—	—	9
Totals ... ..	4	30	2	103	9	18	1	12	7	19	49	1	1	256

TABLE VI.  
 INFECTIOUS DISEASE, 1944. AGE INCIDENCE.  
 (Other than Tuberculosis)

NOTIFIABLE DISEASE	At all Ages	At Ages—Years.											Cases Admitted to Hospital		
		under 1	1-5	5-10	10-15	15-20	20-30	30-40	40-50	50-60	60-70	70-80		80 and Over	
		Measles ... ..	1	2	8	3	1	3	2	-	-	-		-	-
Scarlet Fever ... ..	-	8	15	12	3	1	4	2	-	-	-	-	-	-	37
Puerperal Pyrexia ... ..	-	-	-	-	-	1	1	1	-	-	-	-	-	-	2
Diphtheria ... ..	2	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Whooping-cough ... ..	66	36	23	1	2	2	-	-	-	-	-	-	-	8	
C.S. Meningitis ... ..	2	1	1	1	1	2	-	-	-	-	-	-	-	1	
Sonné Dysentery ... ..	39	1	30	-	1	2	-	-	-	-	-	-	-	9	
Guardia Lambia ... ..	3	-	3	-	-	-	-	-	-	-	-	-	-	-	
Flexner Dysentery ... ..	1	-	-	-	1	-	-	-	-	-	-	-	-	1	
Influenzal Pneumonia ... ..	6	-	1	1	-	-	-	-	-	1	-	-	1	1	
Erysipelas ... ..	3	-	-	-	-	-	-	-	2	1	-	-	1	-	
Encephalitis ... ..	1	-	-	-	1	-	-	-	-	-	-	-	-	-	
Totals ... ..	189	5	79	52	19	9	7	4	1	1	2	1	1	68	

TABLE VII.  
INCIDENCE OF NOTIFIED INFECTIOUS DISEASE (other than Tuberculosis)  
PARISH BY PARISH

NOTIFIABLE DISEASE	Parish														Total		
	Ahld	Bramley	Busbridge	Cranleigh	Chiddingfold	Dunsfold	Dockenfield	Peperharow	Ewhurst	Elstead	Frensham	Hambleton	Tilford	Wonsesh & Shamley Green		Witley	Thursley
Measles ... ..	-	1	2	-	-	1	1	1	2	5	4	2	-	1	1	-	20
Scarlet Fever ... ..	-	7	1	2	1	1	1	-	3	2	3	9	3	2	8	1	45
Puerperal Pyrexia ... ..	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	2
Diphtheria ... ..	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	1
Whooping-cough ... ..	-	-	5	20	-	4	-	-	11	-	14	-	-	3	7	2	66
C.S. Meningitis ... ..	-	-	-	1	-	-	-	-	22	1	-	3	1	-	-	-	2
Sonné Dysentery ... ..	-	6	-	6	-	-	-	3	-	-	-	-	-	-	1	-	39
Guardia Lambia Dysentery ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3
Influenzal Pneumonia ... ..	-	-	-	1	-	-	-	1	2	2	-	-	-	-	1	1	6
Erysipelas ... ..	-	-	-	1	-	-	-	-	-	-	1	-	-	-	1	-	3
Encephalitis ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Flexner Dysentery ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Totals ... ..	-	14	8	32	1	6	2	1	42	10	22	16	4	6	21	4	189

## CANCER.

There were 66 deaths from cancer during the year. The age incidence is shown in the accompanying table. The maximum incidence appears to be in the 60 to 80 age group.

### TOTAL DEATHS FROM CANCER.

Site	20-30		30-40		40-50		50-60		60-70		70-80		Over 80		Totals		Grand Totals
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Alimentary ...	-	-	-	-	2	-	2	1	5	5	5	5	4	2	18	13	31
Breast ...	-	-	-	-	-	-	-	2	-	-	-	1	-	-	-	3	3
Lung ...	-	-	-	-	1	-	1	1	-	1	1	-	-	-	3	2	5
Liver ...	-	-	-	-	-	-	-	-	2	-	-	-	1	-	3	-	3
Tongue ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
Other ...	1	-	-	-	1	1	2	3	3	2	3	4	3	-	13	10	23
Totals ...	1	-	-	-	4	1	5	7	10	8	9	10	8	3	37	29	66

The following table shows the deaths from cancer during the last fourteen years :

### DEATHS FROM CANCER DURING THE LAST FOURTEEN YEARS.

Year	Male	Female	Total	Death-Rate
1931 ...	23	29	52	2.10
1932 ...	19	23	42	1.69
*1933 ...	28	17	45	1.79
1934 ...	19	27	46	1.83
1935 ...	20	25	45	1.77
1936 ...	22	16	38	1.49
1937 ...	17	26	43	1.64
1938 ...	22	29	51	1.90
1939 ...	28	34	62	2.21
1940 ...	14	29	43	1.35
1941 ...	26	26	52	1.62
1942 ...	23	37	60	1.93
1943 ...	23	24	47	1.55
1944 ...	37	29	66	2.17

\* Extension of boundary, 1st April, 1933.

## TUBERCULOSIS.

There were 213 cases on the Register at the end of 1944, namely 87 males and 126 females.

The following table shows the numbers and types of cases on the Register at 31st December, for the last 12 years.

Year	Pulmonary		Non-Pulmonary		Total No. on Register at 31st December
	Male	Female	Male	Female	
1933	36	44	20	20	120
1934	33	49	19	25	126
1935	26	48	15	25	114
1936	26	51	15	23	115
1937	27	49	19	25	120
1938	27	51	21	29	128
1939	36	57	22	26	141
1940	36	67	20	34	157
1941	46	68	21	36	171
1942	47	73	23	36	179
1943	51	78	26	40	195
1944	57	84	30	42	213

During 1944 there were 47 new cases (primary and others) as against 37 in 1943. These 47 cases were distributed over the following parishes:—

Alfold ... ..	2	Frensham ... ..	3
Bramley ... ..	4	Hambledon ... ..	2
Busbridge ... ..	—	Hascombe ... ..	—
Chiddingfold... ..	3	Peperharow ... ..	—
Cranleigh ... ..	7	Thursley ... ..	1
Dunsfold ... ..	—	Tilford ... ..	3
Dockenfield ... ..	1	Witley ... ..	15
Elstead ... ..	1	Wonersh ... ..	4
Ewhurst ... ..	1		

The following table shows the notification and deaths in the District, with the corresponding rates per 1,000 of the population during the past 11 years.

Year	Cases Notified	Notification Rate	Deaths	Death Rate per 1,000 of the Population
1934	35	1.39	15	0.59
1935	27	1.06	15	0.59
1936	35	1.37	11	0.43
1937	38	1.45	14	0.50
1938	36	1.36	7	0.26
1939	37	1.21	13	0.46
1940	53	1.38	18	0.57
1941	63	1.96	14	0.46
1942	40	1.27	13	0.42
1943	37	1.22	8	0.26
1944	47	1.55	10	0.33

TABLE IX. NEW CASES AND MORTALITY OF TUBERCULOSIS.

Age Periods	New Cases*						Deaths†			
	Respiratory		Non-Respiratory		Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female		
0-1	-	-	-	-	-	-	-	-	-	-
1-5	1	-	3	1	-	-	-	-	-	-
5-15	3	-	-	1	-	-	-	-	-	-
15-25	4	7	1	3	1	1	1	-	-	-
25-35	6	5	1	1	2†	1	1	-	-	-
35-45	2	3	-	-	1	-	-	-	-	-
45-55	2	-	-	-	-	1	1	-	-	-
55-65	-	3	-	-	-	-	2	-	-	1
65 and over	-	-	-	-	1	-	-	-	-	-
Unknown	-	-	-	-	-	-	-	-	-	-
Totals ...	18	18	5	6	5	5	5	5	1	1

\* 27 of these were primary notifications, 19 were persons from other areas who had come to reside in the Hambledon Rural District during the year, and 1 was a case notified after death.

† One of these deaths occurred in a notified case of T.B., although T.B. was not mentioned in the cause of death.

## TUBERCULOSIS CARE COMMITTEE.

The work of this Committee has continued. During the year 13 cases were considered by the Committee, 10 of which were given assistance. In four cases this took the form of the supply of free milk, in two the payment of fares to hospital, in one the provision of blankets, sheets and shoes, in another the supply of milk and removal expenses, in another pocket money in hospital, and in another the replacement of lenses. The expenditure involved during the year by these grants was £42 11s.3d. In addition, donations were made to the Samaritan Fund of the Standing Conference of the Surrey Tuberculosis Care Committee.

The total amount raised by the sale of Christmas Seals for Christmas, 1944, was £14 7s.4d.

The Care Committee had a balance of £19 7s.

# ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR

Total number of visits and inspections made during the year 1944.

Details of which are set out in the following table :

## SANITARY INSPECTION OF THE AREA.

### Visits and Inspections.

Water Supplies	81
Drainage	110
Stables and Piggeries	11
Tents, Vans and Sheds	7
Factories	16
Bakehouses	81
Public Conveniences	3
Theatres and Places of Entertainment	—
Refuse Collection	30
Refuse Disposal	28
Rats and Mice	8
Smoke Observations	2
Schools	5
Shops	13
Miscellaneous Sanitary Visits	190
Petroleum Acts	75
Dwelling-houses inspected under Public Health and Housing Acts	208
Dwelling-houses reinspected	277
Overcrowding...	30
Verminous Premises	25
Miscellaneous Housing Visits	131
Infectious Diseases	116
Tuberculosis (Regulations), 1930	54
Slaughter-houses	3
Shops and Stalls	50
Other Premises	25
Butchers	6
Fishmongers and Poulterers	4
Greengrocers and Fruiterers	2
Cowsheds	656

Dairies and Milkshops	61
Ice Cream Premises	—
Street Vendors' and Hawkers' Carts	—
Milk Samples	176
Miscellaneous Food Visits	7
<b>Total</b>	<b>2,491</b>

## NOTICES SERVED.

### Statutory Notices :

(a) Public Health Act, 1936, Section 93, to abate nuisances	—
(b) Public Health Act, 1936, Section 39, to provide drain and cesspool	—
(c) Public Health Act, 1936, Section 75, to provide ash-bin	—
(d) Housing Act, 1936, Section 11, notice of the time and place at which question of making a Demolition Order in respect of a dwelling-house will be considered	—
(e) Housing Act, 1936, Section 9	1
<b>Total</b>	<b>1</b>

**Informal Notices** ... 207

### Results of Notices Served.

#### Statutory Notices complied with :

(a) By Owners	—
(b) By Local Authority in default of owners	—
Demolition Orders Made	—
Houses closed on Undertaking of Owners	—
Informal Notices complied with	180
Statutory Notices in hand	1
Informal Notices in hand...	26

### Water Analyses :

Public Water Supplies	28
Private Water Supplies	9
Well Water	18
Emergency Supplies (Civil Defence) :	
Wells, Ponds, Streams, etc.	2
	<b>57</b>

Milk and Dairies Order, 1926.

<b>Register of Cowkeepers and Retailers of Milk</b>		<b>1944</b>
Cowkeepers and Purveyors of Milk	... ..	147
Retail Dairies	... ..	8
		155

**Milk Analyses.**

		<b>1944</b>
Bacteriological Examination	... ..	176

**Milk (Special Designations) Order, 1936.**

<b>Licences.</b>		<b>1944</b>
Bottling Licence (Dealer)	... ..	2
Tuberculin Tested	... ..	—
Dealers' Licences (Retail) :		
Tuberculin Tested	... ..	3
Pasteurised	... ..	3
Supplementary Licences :		
Tuberculin Tested	... ..	4
Pasteurised	... ..	7
Accredited	... ..	2

**(a) Meat and Other Foods condemned as Unfit for Human Consumption.**

	Meat			Tinned Goods									
	Imported			Home Killed			Meat	Fish	Fruit	Milk	Soup	Veg.	Beans
	<i>Cwts. Qrs. Lbs</i>			<i>Cwts. Qrs. Lbs</i>			No. of Tins						
Pork ...				5	1	0	40	71	62	20	43	2	11
Beef ...				11	1	14	Wt. 42 lbs.						
Bacon and Ham ...				1	—	16							
Sausages ...				—	—	12							
Frozen Livers ...	—	—	20										
Frozen Tripe ...	—	2	19										

Other Foods	Tons	Cwts.	Qrs.	Lbs.
Butter and Margarine ...	—	—	2	5
Potatoes ... ..	8	3	—	—
Cheese ... ..	—	—	—	3
Sugar ... ..	—	—	1	4
Jam ... ..	—	—	—	7
Flour ... ..	—	5	2	—
Oatmeal ... ..	—	—	2	—
Rolled Oats ... ..	—	—	2	6
Rice ... ..	—	—	—	12
Dried Beans ... ..	—	—	—	6
Yeast ... ..	—	—	—	8
Peanut Butter ... ..	—	1	3	14
Mixed Pickles ... ..	...	...	...	14 gallons
Eggs ... ..	...	...	...	198

(b) The following foods were released for animal feeding to premises in the district :

2 cwts. Canned Meat.  
12½ tons Tinned Milk.

**Petroleum (Consolidation) Act, 1928.**

**Licenses.**

**1944**

Petroleum Spirit. (Garages for resale) ... ..	17	}	52
Commercial and Agricultural Cos. (not for resale)	28		
Local Authorities ... ..	7		
Carbide of Calcium ... ..	...	...	5
Cellulose Solution ... ..	...	...	3

**REPORT ON THE ADMINISTRATION OF THE  
FACTORIES ACT, 1937, IN CONNECTION WITH  
FACTORIES.**

**1. Inspection of Factories.**

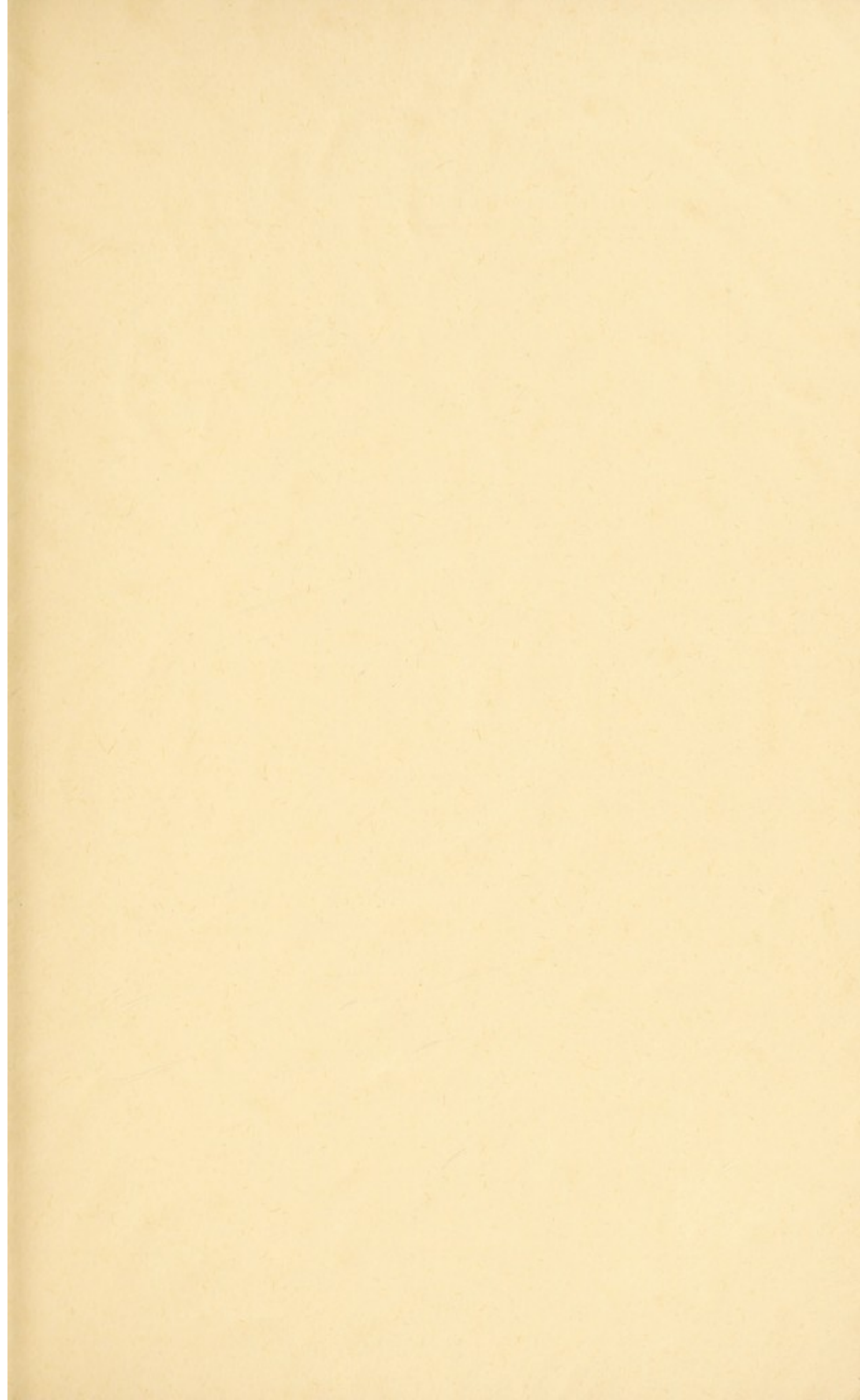
**1944.**

Premises	Inspections	Written Notices
FACTORIES (with mechanical power) ...	96	49
FACTORIES (without mechanical power)	1	—
OTHER PREMISES ... ..	—	—
Total ... ..	97	49

2. Defects Found in Factories.

1944.

Particulars	Number of Defects	
	Found	Remedied
WANT OF CLEANLINESS (Section 1) ... ..	41	40
OVERCROWDING (Section 2) ... ..	—	—
UNREASONABLE TEMPERATURE (Section 3)	—	—
INADEQUATE VENTILATION (Section 4) ...	—	—
INEFFECTIVE DRAINAGE OF FLOORS (Section 6) ... ..	—	—
SANITARY CONVENIENCES (Section 7) :		
Insufficient ... ..	2	2
Unsuitable or Defective ... ..	—	—
Not separate for Sexes ... ..	—	—
OTHER OFFENCES ... ..	6	6
	49	48



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