[Report 1920] / Medical Officer of Health, Hucknall U.D.C.

Contributors

Hucknall (England). Urban District Council.

Publication/Creation

1920

Persistent URL

https://wellcomecollection.org/works/c2bpcb8m

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



1920.

ANNUAL REPORT

AND

VITAL STATISTICS.

. . The . .

Urban District of Bucknall.

PREPARED BY

Walter Garstang,

M.B., Ch.B. (Vict.), L.S.A.

Fellow of Society of Medical Officers of Health.

Member of Royal Sanitary Institute.

Member of British Medical Association.

Certifying Factory Surgeon.

Late Lieutenant R.A.M.C., Salonika Army.

The Medical Officer of Health of the District.

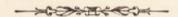
In accordance with instructions from the Local Government Board.

HUCKNALL:

W. MELLORS, PRINTER & STATIONER, ANNESLEY ROAD.

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

To the Chairman and Members of the Hucknall Arban District Council.



GENTLEMEN,

I have the honour to present my seventh Annual Report on the Health and Sanitary condition of the Urban District of Hucknall.

The Memorandum on Annual Reports has been followed more closely than last year, but it is a considerable drawback that this memorandum is only received in February, as it retards the completion of the Report. Now that I have to wait for various important tables and statistics from the Registrar General, publication of this Report cannot be expected before April, but this is a matter over which I have no control.

I have to thank the various Officials concerned for their hearty co-operation during the year.

And I again take the opportunity of placing on record my appreciation of the cordial support always afforded me by the members of the Health Committee, and the Council.

I have the honour to be,

Gentlemen,

Your obedient servant,

WALTER GARSTANG.

March 16th, 1921.

Population at Census 1901, 15,250.

,, ,, ,, 1911, 15,870.

Estimated Population to June 1920

For Birth Rate and 17,025.

Area of District in Acres, inclusive of Area covered by water, 3,270.

No. of Inhabited Houses, 1911, 3,485.

,, ,, ,, ,, 1919, 3,791.

,, ,, ,, 1920, 3,800.

Average Number of Persons per House 4'55.

Institutions within the District receiving persons from outside: Rushcliffe Small Pox Hospital.

Institutions outside the District receiving persons from the District, include Basford Union Infirmary, Basford Sanatorium, Ransom Sanatorium, County Asylum, Nottingham General Hospital, and other Hospitals in the City.

Birth Rate per 1000 living - 28.9.

Death Rate per 1000 living - 12'2.

Deaths under 1 year to 1000 Births - 117.

Factor for correcting General Death Rate - 1.0163.

Zymotic Death Rate - 1'1.

A .- Natural and Social Conditions of the District.

Full details were given in my Report for 1919, and it is unnecessary to describe the same unchanging features year by year. During October the Collieries were at a standstill owing to the "Strike", but fortunately this did not last long enough to do any serious harm as regards the health of the inhabitants of this district.

Two Factories, one in Hazel Grove, and one in Wigwam Lane commenced to turn out manufactured goods. The Cooperative Wholesale Society erected a large Bakery in West Street, which was completed at the end of the year and a large Factory for Hosiery was also completed, and is now open.

The Aerodrome which is situated off Watnall Road has been bought by a Mansfield Firm of Wagon builders, and work should be commenced there before long.

During the latter part of the year there was a certain amount of unemployment among the female operatives; this being general throughout the country.

The Motor Ambulance was of very little service, both because of its unreliability, and the heavy running costs. It has now been replaced by a lighter and more efficient one, which it is hoped will be of more service.

Mr. Dennis, the Relieving Officer, states that the amount of Poor Law Relief distributed in 1920 was £1,620,

The result of the City of Nottingham scheme to extend its boundaries so as to include many districts outside, of which Hucknall was one, may be mentioned here. After a protracted enquiry held in Nottingham at the beginning of the year, Nottingham's application was refused in its entirety. In our own case, in every particular, especially as regards Water Supply, Sewage Disposal Works, Sanitation, Housing conditions and Slum areas, it was conclusively proved that Hucknall was in an immeasurably superior position to Nottingham. It was not surprising therefore that Nottingham failed to produce evidence that any advantage would accrue to Hucknall through incorporation. I have no hesitation in saying that incorporation would have meant stagnation of all local enterprise and spirit, and consequently stoppage of the progress and growth of the district.

Vital Statistics.

The Various Tables compiled afford useful information and should be carefully read in connection with the following paragraphs.

I must point out that Tables 2 & 3 supplied by the Registrar General differ in some small details from those compiled by myself from the returns submitted to me by the local Registrar. You will notice that the total deaths in Table 2 are 208, while my number was 207. I can account for this by the fact that one Transferable death was given twice, in two different quarters, and I naturally took it out of my returns.

The Registrar General also allows two more Births making 493. The estimated population given in Table 2 is 17025. I think there is a big discrepancy here.

For 1919 the estimated population was given to me as 17053, so that according to the Registrar General the population has shrunk by 28. When I point out that there are more houses inhabited in 1920 than in 1919; that we have an excess of Births over Deaths of 285, and that there has not been any emigration, it is obvious that there is a fallacy, either in this year's estimate or that for 1919. It is of course very difficult to make any accurate estimation of population when so long a period elapses between each Census, and it will certainly be of great advantage to have the Census taken every five years instead of ten, as I believe is proposed.

The general Death Rate = 12.2. From Table 3, this figure compares very well with the Rate for the country as a whole. In fact but for the heavy infant mortality and the regrettable measles mortality, the year has been most favourable.

The deaths from Tuberculosis and Cancer are 15 and 13 as against 20 and 15 for 1919. Only 20 deaths are ascribed to Bronchitis this year.

The mortality from Measles is very high, 14 deaths giving a Rate of .82; I have made full comment on this under the appropriate heading.

Reference to Table 3 shows that as regards other diseases specially scheduled, our rates are all favourable.

You will notice that I death is ascribed to Enteric Fever. I suppose the Registrar General had no option but to take this as the probable cause of death, but there was in my opinion a considerable element of doubt, as the case was not notified in any way as suffering from this disease.

Transferable Deaths.

There are 21 deaths of Inhabitants which took place outside the district (one of which as already stated was notified twice); these mostly occurred in institutions, chiefly the Basford Union Infirmary, Nottingham Hospitals and various Asylums. There are two deaths registered in the district which have to be transferred to other districts.

In two cases the cause of death was uncertified, and inquests were held in seven cases.

Deaths of Inhabitants over 65 years were 54.

Infant Mortality.

The rate = 117 per 1000 Births. This is most unsatisfactory, even allowing for the fact that Colliery Districts have always a high Infant Mortality Rate. In a year that has been most favourable as regards Infant Mortality, in fact I believe the figure for the whole country, 80, is the lowest on record, our figures are 117, and our total deaths under 1 year reach 58, and I can confidently state that but for the good work done by the Infant Welfare Centres in the district, these figures would have been considerably higher. There were only 4 deaths of illegitimate children, so that is not the cause of the high figures.

Table 2 gives 25 deaths as due to Congenital Debility. In Table 4 I have divided these into Premature Births 19, Atrophy and Marasmus 6, so that nearly half our Infant Mortality is due to these causes alone. Of the 19 deaths due to Premature Birth, 15 died under 1 week, and 12 of these only lived a few hours. It comes to this, therefore, that the reason for our heavy Infant Mortality lies in the fact that there are so many Premature Births, in which the child has not the slightest chance of survival.

There must be some reason for the continued rise in the number of Premature Births during the last two years. It can't be altogether due to early marriage, or to prospective mothers going out to work, for these reasons operated informer years; neither is it due to deficient feeding or unem ployment; and housing conditions and sanitation are very much superior to what they used to be. Now, it is a well established fact that Venereal Disease is the most potent factor in producing Still Births, Premature Births, and weak and illnourished infants that have really no chance of survival, and one is reluctantly driven to the conclusion that our very high Infant Mortality is in part due to this cause. It must not be assumed from this statement that the district of Hucknall is in a worse condition than other similar districts as regards Venereal Disease for in 1919, some of the adjacent districts had a higher Infant Mortality than ours. The fact remains that Venereal Disease is very prevalent throughout the whole country at the present time, and Hucknall must bear its due proportion of the whole.

The Births registered were 493 (giving a Rate per 1000 of 28:9), which is the largest number registered since 1910. The proportion of males to females was 263 to 230. There were 27 illegitimate Births, 16 males and 11 females.

B .- Sanitary Circumstances of the District.

Water Supply.

We have no lack of excellent water and the supply is constant. There is no contamination of any sort.

New engines are to be installed at the Pumping Station, and a new Reservoir, capable of holding one million gallons is contemplated.

There are a few small streams running through the district; these are free from pollution-

The Drainage and Sewerage system is efficient.

The Sewage Disposal Works continue to be satisfactory, and the effluent is excellent, a great deal purer than the stream which it enters.

Closet Accommodation.

As a result of a house to house visitation in December 1920 it was found that there were 1393 Water Closets

2285 Pail ,, 45 Privy Middins. During the year 33 Pail Closets were replaced by 37 Water Closets, and 6 Privy Middins were replaced by 7 Water Closets. 47 Water Closets were placed in new buildings. 2 Wet Ashpits were replaced by 3 Sanitary Bins, and 2 others were converted to Dry Ashpits.

It will thus he seen that the work of providing sufficient and Sanitary conveniences has steadily progressed during the year. Especially has this been the case in those blocks of property where one pail closet was not supplied to each house. There are very few of these cases remaining, and the owners of the properties are under notice to provide sufficient accommodation. In certain instances one W.C. is allowed to serve two houses; this is so as not to saddle the owners with too great expense, during the present high cost of materials. In some cases a great deal of difficulty has been experienced before the owners consented to make the necessary alterations, but, finally we have always carried our point.

Scavenging.

The arrangements made for the removal and disposal of house refuse and cleansing of closets, cesspools etc. are adequate (see Report for 1919) but the efficient carrying out of such arrangements has left much to be desired. The whole service is now in process of reorganisation and I therefore refrain from futher comment at this stage. The total number of Sanitary Bins is 2232 and Dry Ashpits 456. None of these latter have been dispensed with during the year.

Sanitary Inspection of District.

I have made 188 visits of Insection during the year. These include 48 visits under the Housing Acts, 30 visits to various Slaughter Houses, 40 visits in cases of Insanitary, or Insufficient Closet Accommodation, 27 visits in cases of Infectious Disease, 20 visits to houses where there were cases of Tuberculosis; the remainder consisting of visits to see food, alleged to be unsound, bad yards, defective drainage, and alleged nuisances due to keeping animals.

In the majority of cases defects have been remedied without trouble; some matters have been referred to the Council for further action with a favourable result.

The Report of the Sanitary Inspector follows.

Sanitary Inspector's Report, 1920.

			Notices	served		pa	lied
	Description of Inspections.	No. of Visits.	Informal	Statutory	Section.	Complie with	Not Complied with
I.	Closets, Pails, and Ashbins	1098	230	136	P.H.S. 91 & 36	353	13
	Insufficient Closets & Ashpits	387		129	,, 36	101	28
3.	Drainage	184	23	25	,, 91	48	
4.	Paving Yards	30		5	Bye-Laws	5	
5.	Slaughterhouses	50	3		F. & W. Act	5 3 20	
6.	Factory & Workshops Act	299	20	19	P.H. A.A.S. 26		8
7.	Faulty Spouting Rooms disinfected	140 30		19	F.H. A.A.S. 20	11	0
9.	TT' ' T C . C	268					
-	Dairies & Cowsheds	57	42		Regulations	42	
	Housing Act Inspection	273					
12.	Do. with M. O. H	48					
13.							
	(including Food Inspections).	40					
	Lodging Houses	14	2			2	
	Urinals	20					
16.	Keeping of Animals,	- 20				10	
	Manure, etc	30	12		17/2-11/1	12	
	Others not classified	5000	20		MAN MARKET	20	
10.	Ordinary Inspections	3000				-	
-				-			-
		7988	352	314		617	49

Inspections not classified consist of dangerous cellar heads and grates, throwing slops, refuse, &c. on highways.

Dairies and Cowsheds.

*One Cowkeeper and one Purveyor have ceased business during the year, whilst two Cowkeepers and three Purveyors have been registered. No complaints have been received from consumers concerning the milk.

The number on Register are :-

Cowkeepers	 14
Cowkeepers and Purveyors	 12
Purveyors only	 18

CHARLES SEVERN.

Premises and Occupations which can be controlled by Bye-Laws and Regulations.

Besides the large Factories etc. (for which see portion of Report on Factory and Workshop Act), there are the folowing.

Slaughter Houses	 18
Bakehouses	 9
Cowsheds	 24
Lodging Houses	 I
Soap Works	 I
Knacker's Yard	 1

No action has been necessary in respect of any of the above, with the exception of the Slaughter Houses, a report of which appears later:

Schools.

The Sanitary condition and water supply of the Schools is satisfactory, and needs no further comment. Owing to the severe Measles epidemic, the Infant departments of the Schools were closed from February 13th to March 29th.

C .- Food.

The milk supply is good, and no complaints have been received during the year. There has not been any great shortage, but the high price has no doubt reduced the consumption in many cases. There are no dairies in the district, and this, no doubt, is the reason why complaints are so rarely received.

Milk (Mothers' & Children) Order, 1919.

This Order was generally known throughout the district, but only 5 applications were received. Very careful investigation was made in each case, and the results were communicated to the Council.

My recommendations were that in 3 cases the application be granted, in the other 2, refused. The Council endorsed my action.

Meat.

Since decontrol the quality has been good, and there has

been no disease in the home fed beasts. Inspection is carried out thoroughly and efficiently.

A certain amount of meat, bacon etc. was condemned.

There is no public abattoir in the district at present, and though the matter has been under consideration by the Council the present vital need for economy will preclude any action being taken in the immediate future.

No carcases have been condemned for Tuberculosis.

I propose to deal with the Slaughter houses separately.

Other Foods.

All places where food is exposed for sale are adequately supervised. The vendors are always ready to assist the Health Authority in this respect, and no trouble is experienced.

Food condemned and destroyed this year is as follows:

Meat 227lbs., Butter 180lbs., Bacon and Ham 145lbs., Fruit 40lbs., Tinned goods (Fruit, Fish, Milk) 839lbs.

Slaughter Houses.

		January	December
	1914	1920	1920
Registered	13	1	3
Licensed	5		4

Two of those registered were not in use in 1914.

Shortly before meat was decontrolled application was made to the Council by the Butchers' Association, for the renewal of their licenses, which had been suspended during the period of control. In view of the fact that some of the slaughter houses were known to be unsatisfactory, it was considered advisable that a detailed report on all the Slaughter houses should be submitted to the Council.

In company with the Surveyor and Sanitary Inspector I inspected all these places and made a complete Report. An extraordinary state of affairs was revealed for in only two instances did the premises in question conform to the Bye laws requirements.

In 5 cases I recommended that licenses be granted subject to certain defects being remedied, but as regards the

others, not only were there bad stuctural defects in most, but their position was totally unsuitable. My recommendation to the Council was not to reissue licenses for these premises.

I think that the Bye laws with regard to Slaughter houses require revision, and bringing up to date.

D.—Prevalence of and Control over Acute Infectious Diseases.

General.

Tables III., X., XI., should be referred to.

Total number of cases of Infectious Disease notified was 141. For the last 9 years the district has been entirely free from Enteric Fever.

Diphtheria Antitoxin is supplied free by the Council, and is freely used.

Encephalitis Lethargica was absent, and there were no "return" cases of Scarlet Fever.

No case of Dysentery or Trench Fever has been notified since the Regulations came into force. The few cases of Malaria are nearly all notified from the Ministry of Pensions, and are all of course demobilised soldiers.

As regards Pneumonia, I do not think Notification is carried out at all satisfactorily, and I am sure that statistics relating to this disease are worthless. The Medical men practising in the district have been informed by me on several occasions as to notification of this disease with no results. I do not see what further action I can take.

Bacteriological aids to diagnosis are freely used in cases of Diphtheria and Tuberculosis. By arrangement with the County Council specimens are examined free of charge, when sent by Medical men practising in the County.

The requirements as to Notification of Tuberculosis are adequately observed.

Scarlet Fever.

As last year cases of this disease occurred every month, the majority during the last six months.

This is in accordance with statistics relative to the coun-

try as a whole. It will be noticed that there are only 3 cases in the North Ward. Of the 44 cases 40 were between the ages of 1 and 15. The proportion of Males to Females was 17 to 27 and there were only 6 cases under school age.

In a large majority of the cases, the disease was of a very mild type, and it is well understood now that it has lost a good deal of its former virulent character. Nephritis as a complication was found in 3 cases. One case proved fatal, and the Death Rate per 1000=05. One case was transferred to the Infectious Fever Hospital at Bagthorpe, but the very heavy maintenance fees preclude us from sending cases there, except where it is absolutely necessary. Isolation of the patient has, this year been carried out more intelligently.

All cases are visited, records taken, and disinfectants supplied, and on completion of the illness, rooms, bedding, and clothes are thoroughly cleansed and disinfected.

Diphtheria.

18 cases were notified during the year, and as in 1919 the East Ward has the majority. Bacteriological Examination was resorted to in all cases and a positive result obtained. Antitoxin, provided by the Council was used in the greater number of cases.

One case was removed to the City Isolation Hospital; all other cases were treated at home.

One case proved fatal and Death Rate = 05. A fair proportion of the cases notified were of a very slight nature, and but for the Bacteriological evidence would probably have escaped Notification.

For some time now I have been trying to account for the preponderence of cases in the East Ward. These cases occurred at various periods, in widely separated areas, and no reason could be assigned. Drainage, Milk and Food supply, and contact yielded negative results. Just before the end of the year, however, it was discovered that a school boy living in the East Ward was a "carrier," and there is no doubt that he is responsible for the occurrence of a number of cases in his neighbourhood.

Erysipelas. Five.

Ophthalmia Neonatorum. Two.

Malaria. Nine.

Little comment needed.

The cases of Ophthalmia were not severe and received adequate Hospital treatment.

Five of the cases of Malaria were notified by the Ministry of Pensions, and all cases occurred in demobilised soldiers.

No case of Trench Fever or Dysentery was notified.

Pneumonia.

39 cases notified, the greater number during the first 3 months. There were only 8 cases of Influenzal Pneumonia notified, these occurring in February and March. Number of deaths from Pneumonia was 17 and the Rate = 1.05.

Pneumonia was also a contributory cause of death in 17 other cases, the primary cause being Measles, Influenza, and Whooping Cough.

Non-Notifiable Diseases.

Whooping Cough.

This disease was Epidemic during January and February continuing from the latter end of 1919. A large number of children were affected, but I have no reliable data to make any estimate.

2 Deaths were registered and the Rate per 1000=1.

Epidemic Diarrhæa.

Was again conspicuous by its absence, the same causes operating as in previous years. Also, there is no doubt that the systematic visiting of young children by the Health Visitor is of great service in this respect. Five deaths are ascribed to Diarrhœa and Enteritis, but I doubt whether any one was a case of genuine Epidemic Diarrhœa.

Influenza.

There was no real Epidemic this year. The disease was present during the first quarter and during December, but on the whole was a mild character, and conformed more to the type of disease prior to 1918.

6 Deaths resulted from the disease giving a Rate of '35.

Measles and German Measles.

Measles was present in Epidemic Form in February and March.

As Compulsory Notification of these diseases was discontinued as from January 1st, no accurate estimate of the number of cases can be given; but from information obtained, I consider that there would be 500 cases. All parts of the district were attacked equally. The disease was of the usual type, and presented no special features of interest.

The mertality was high, 14 deaths taking place, the majority of which were due to Pulmonary Complications. Death Rate = 82.

The Elementary Schools were closed from 13th February to 29th March. Severe though the Epidemic was, I think that school closure this time, did prevent a still more serious out break. All cases that were brought to my notice, or otherwise discovered, were visited by the Health Visitor as often as was necessary, and directions given as to Isolation, Treatment, etc. especially the prevention of Pulmonary Complications, but, naturally there was not the same control this year, as in the four preceding years, when Compulsory Notification was in force.

I should like to draw your attention to the following statistics of Measles from 1914 to 1920 inclusive.

1914	No Epidemic	ı death.
1915	Severe Epidemic probably 500 cases 1	5 deaths.
1916	155 cases	r death.
1917	309 cases	3 deaths.
1918	268 cases	ı death.
1919	67 cases	r death.
1020	Severe Epidemic probably 50c-600 cases	14 deaths.

This striking fact is brought out that in 1915 and 1920, the year before Compulsory Notification and the year after such Notification was rescinded we had somewhere about 1000 cases with 29 deaths.

During the year 1916-1919 inclusive we had 799 cases, with only 6 deaths. If I have over estimated the number of cases in 1915 and 1920, these figures would be still more

striking. The fact remains that during the years Notification was in force, Measles became a neglible factor as a cause of death, and as soon as Notification was rescinded, a very large increase in the number of deaths from this disease was observed.

I pointed out these facts to an Inspector of the Ministry of Health, and acting on advice I recommended the Council to apply for Notification to be reimposed. After a long delay an answer was received to the effect that as no arrangements are made for the home visiting of patients, an Order for the Compulsory Notification of Measles could not be justified.

I think you will agree that whether we undertake home Nursing or not, a good case has been made out for Notification as regards Hucknall, and with the facts as stated one cannot congratulate the Ministry of Health on the attitude adopted.

As regards Home Nursing, application was made to the District Nursing Association for the services of a Nurse, during epidemics, but owing to the great scarcity of Nurses, our application was not entertained. At the same time your Health Visitor has, during epidemics, carried out Home Nursing to a great extent, even at the expense of her other duties, and as the records show, her work has been of great benefit.

In conclusion I have to say that I consider the action of the Ministry of Health in rescinding the Compulsory Notification of Measles Act, a most retrograde one, and one that in Hucknall has acted most adversely on the Public Health.

Tuberculosis.

25 cases notified during the year of which 20—10 M. and 10 F.— were cases of Pulmonary Tuberculosis; 2 Males were suffering from Tubercular Peritonitis and 1 Female from Tubercular Hip Disease. The total number of Deaths registered was 15 giving a Death Rate per 1000=08. 11 deaths were due to Pulmonary Tuberculosis giving a Rate=64 and 4 to other forms, giving a Rate=24.

Out of the cases notified this year there were 7 deaths.

2 Deaths were registered in cases of whom no previous notification had been received, one of which should be transferred to another District, and 5 deaths occurred in cases that had

been notified in previous years. In three cases Sanatorium treatment had been resorted to, and marked improvement noticed, but this was only temporary, and relapse took place after the patients had returned home.

12 Cases have been admitted to Sanatoria during the year 11 of which have been to the Ransom Sanatorium; other cases are attending the Tuberculosis Dispensaries in Nottingham. This year there has been considerably less waiting for admission to Sanatorium than in previous years.

Of cases notified in 1914—6 are alive, and working regularly.

Of cases notified in 1915—5 are living and in regular work.

Of cases notified in 1916—2 children are alive and well.

Of cases notified in 1917—5 are well and at work, 2 have left the district, and 1 is still under observation.

Of cases notified in 1918—9 are living and working regularly.

Of cases notified in 1919—5 are better and at work and 2 are under observation still.

Of cases notified in 1920—18 are still living, and all under observation, but it is too early to say what the ultimate result will be.

Cases at home are regularly visited, their state of health noted, and instructions given as to carrying out the treatment prescribed. Patients who have received Sanatorium Treatment always try and carry out the instructions given, with benefit to themselves.

Sanitary Administration.

This may conveniently be taken here, as I have nothing to add to last year's Report.

The staff is unchanged, and I consider that Officials concerned carry out their duties efficiently and conscientiously.

Hospital Accommodation.

This remains as before.

The Rushcliffe Small Pox Hospital has not been in use

during the year. It seems to me a very great pity that this Hospital could not, in part, be opened to receive cases of other Infectious Diseases.

Since 1905 this Hospital has only been opened on two occasions, for two cases which proved not to be Smallpox. During the year also we were asked to join four other Districts to maintain an Infectious Fever Hospital. After long discussion, it was decided that it was inopportune at the present time to shoulder any further financial burden, and we therefore declined the offer.

As already stated the Basford Sanatorium is available for cases of infectious disease, if necessary, and providing there is room.

Local Acts. See Report for 1919. There is no change.

E.—Means for Preventing Mortality in Childbirth and in Infancy.

There are two Infant Welfare Centres serving this district.

One under the control of the Urban District Council, and one worked by the District Nursing Association.

Both these Centres are becoming increasingly important, and doing a most excellent and necessary work.

The Report which follows concerns the Welfare Centre controlled by the Council.

Owing to the increase in numbers this year it was found impossible to deal with all the cases in the one afternoon. It was therefore decided to open both Monday and Tuesday afternoons. All new cases, and those which are not in good health are asked to come on Tuesdays, on which afternoon I am present to see them. In the majority of cases this is merely a routine procedure, the infants being healthy and normal. In all cases where any condition is found that involves medical treatment, they are referred to their own Medical attendant.

As usual, I have been chiefly consulted for loss of weight, Marasmus, suitable methods of feeding where there is failure of breast milk, necessity for Circumcision, Nævi, and Constipation. Other mothers have wished for advice re Herniæ, Talipes, Rickets, and Prematurity. Great interest is taken

in the weight records, and those mothers whose infants require extra care are only too anxious to follow out the directions given.

Tea is provided on Welfare afternoons; this part of the work is undertaken by members of the Ladies' Committee, which is a large and enthusiastic body. These teas are entirely financed by voluntary contributions from the mothers attending the Centre, and it will be seen from Nurse Woodcock's Report that these contributions were large enough this year to provide a Christmas gift in the shape of a Teething Ring or a Tooth brush.

In August another step was taken to increase the value of the Records, this was undressing the infants before weighing; on the whole we have not met with much opposition. Short lectures are also given on various topics of interest when time permits. We do not find it necessary to stock any kind of dried milk, Virol, etc., and I am sure this is quite as well.

Dr. Barrie Lambert, from the Ministry of Health, visited the Centre last June. Her report was the subject of a letter from the Ministry of Health, received on August 6th, 1920. Our Welfare Centre and its work is very favourably commented on. We were recommended, however, to make provision for the home nursing of cases of measles; to have the babies undressed before weighing, and to consider whether provision for attending to the health of expectant and nursing mothers, and children under 5, would not be best met by merging our work in the County Scheme.

With regard to the first of these recommendations: Application was made to the District Nursing Association for the services of a nurse when required. Owing to the shortage of nurses our application could not be entertained. I propose to make further application at a more convenient time.

The second recommendation has been carried out, and the third is at present being considered.

I must say as regards this third recommendation, that it bristles with difficulties. I do not see how you can compel expectant mothers to submit themselves to all kinds of questions and routine examinations. It must be remembered that the great proportion of labours terminate naturally; where medical help is needed, the conditions are such that no

amount of examinations previously would enable one to fore see what actually will occur, and where hospital treatment isnecessary there are several hospitals available and of easy access. The Health Visitor has seen an increasing number of expectant mothers during the year at their own homes, and I am sure will be able to advise them as to their necessities or tell them to consult a doctor. Similarly, from her report you will see that children under 5 are visited regularly and their health adequately supervised. To sum up, I consider that our present scheme is quite sufficient for the needs of this district, and to embark on any further schemes would be a costly procedure, probably productive of very little result, and at the present time, very unjustifiable.

Under the Notification of Births Act 526 Post Cards were received, an increase over 1919 of 139. Two births were not notified, but sufficient explanation was given for the omission. There were ten cases of twin birth. Still births amounted to 20, and premature births to 59. I have tried to get some information regarding the still births an 1 premature births, but, except that venereal disease plays a big part in producing these conditions, no reliable information has been obtained.

In only 70 cases were the services of a doctor required. In some of these cases no midwife was present, and in others the reason for calling in a doctor was not that there was any abnormality, but simply that the mother wished the labour to be brought to a speedy termination; serious complications during and after the confinement were few and far between. This is a strong argument in favour of leaving our Maternity and Child Welfare scheme as it is, as evidently a larger and more comprehensive scheme is unnecessary.

Nurse Woodcock, the Lady Health Visitor, reports as follows:—

Total No. of births notified		526
" " not notified		2
Babies under 1 year from other	districts	11

No. of twin births-10.

Of these, two pairs born at term are living, while one pair is dead. Four pairs born prematurely died under one month. Of two pairs born at term, one survives in each case, and in one pair born prematurely there is one survivor.

No. of premature births-59.

Of these 36 are still alive, 20 died under 4 weeks, and three under 1 year.

Systematic Visiting.

1st visits		 530
Re-visits		 2027
Children under 5		 2072
Expectant Mothers		 153
Bases of Measles		 283
		5065

Most of the Infants are breast fed in this district, the Mothers being eager to do so, and my chief difficulty is to have the babies weaned at the proper time. It is quite common for children to be breast fed till twelve months, and in many cases even longer.

I have visited 153 Expectant Mothers in their own homes, and given such advice as was necessary both as regards themselves and their surroundings. It is impossible however to get them to call on me at my office, though an hour has been put apart for this purpose.

I also paid visits to 283 cases of Measles but owing to the rescinding of Notification, numerous cases escaped supervision.

The Infant Welfare Centre.

No. of Children on register under 1 year	294
,, ,, ,, over i year	124
Average attendance (Mondays)	13
" (Tuesdays)	36
No. of Children weighed	
under 1 year 1709	
over 1 year 441	
over 5 years 16	

Office Hours, but not on Monday or Tuesday afternoons. Delicate babies and those not thriving are asked to attend on Tuesday afternoons to see the Medical Officer.

In August we started to undress the babies before weigh-

ing. Some of the Mothers do not like it, but it has made little difference in the attendances.

The Voluntary Collection boxes for the afternoon teas did very well during the year so each child had as a Christmas Gift a teething ring, or a tooth brush.

This pleased the mothers, and was at the same time an object lesson.

N. WOODCOCK.

By the courtesy of the Superintendent of the Hucknall and District Nursing Association I am able to give a few details of the work by the Voluntary Infant Welfare Centre. This Centre was open on 32 occations, and 62 children under 1 year were weighed. Average number of children at each session was 17. Lectures were given at each session. No Medical Consultations were held during the year, but arrangements are being held to hold them in the future. The work generally is more in the nature of a School for Mothers. An Army hut has recently been erected to provide better accommodation for the Welfare work.

F. Housing.

(I.) General Housing Conditions.

- of 25 which are so badly dilapidated that they cannot be made fit for habitation.
- 2. There is at present a shortage of houses due to cessation of building during the war, natural increase in population, and a certain overflow from surrounding districts.

To meet this shortage, the Council are engaged on a Housing and Town Planning Scheme. The first 12 houses built under this scheme are already occupied, and 6 more will be so in the near future. Also, acting under the Housing Act 1919, the Council put into a state of repair 5 houses which had been standing empty for some years, and in which the owner refused to take action.

At one time similar action was contemplated in regard to 8 other houses the property of the Great Northern Railway Company, but these were so badly dilapidated that to have repaired them would have been very costly, and it was thought inexpedient to proceed with the scheme.

Some few houses have been built by private enterprise.

3. No changes in population during the year, and none anticipated.

(II). Overcrowding.

A certain amount owing to shortage of houses. It is difficult to say how many houses contain two families, but probably 150 at least; of course one cannot say that all these are cases of overcrowding. There are also some cases where the house is not big enough for the family living in it. All this will be obviated as more houses become available.

No really bad case of overcrowding was brought to my notice during the year.

(III) Fitness of Houses.

- (a) General standard good, and improving year by year.
- (b) General character of detects found; Dampness, insufficient cubic capacity, defective walls and roofs, insufficient ventilation, defective spouting, insufficient closet accommodation, defective sinks.
- (c) A good number of the defects found are no doubt due to lack of proper management and supervision by owners and their agents. I am forced to this conclusion from the number of complaints received from tenants who have already brought the matter to the notice of the agent with no result.
- 2. All defects are noted; and full investigation made into every case. The owner is communicated with, and suggestions made as to making good the defect.

If no result is obtained, the matter is laid before the Health Committee for further action. The Appendices gives the detailed statistics as the action taken under either Public Health Acts or Housing Acts.

3. Difficulties in remedying unfitness are due to a great extent to owners being unwilling to lay out money on repairs owing to the present high cost of materials.

	A	certai	n	amou	nt	of	spee	din	ng	up,	in	this	direc	ction
will	pro	bably	be	seen	as	a i	result	of	the	Ren	t R	estric	ctions	Act
now	in	force.												

- 4. For conditions regarding water supply, closet accommodation, etc. see an earlier section of this Report.
- (IV). Unhealthy Areas.

None really so called.

- (V.) Bye-Laws relating to Houses, etc.
- r. Existing Bye-Laws are carried out strictly, and as far as I can judge, there is no need for new Bye-Laws.

(VI.) Appendices.

1.-General.

Infantile mortality				117
Number of dwelling-h	ouses of all	classes		3829
Number of working cl	lass dwellin	g houses	(approx)	3400
Number of new worki	ng-class ho	uses erec	eted	26

2.--Unfit Dwelling-Houses.

I .- Inspection.

Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)... 126

Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 37

II .- Remedy of Defects without Service of formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 114

III .- Action under Statutory Powers.

A. Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919.

Number of dwelling houses in respect of which notices were served requiring repairs ... 13

5	Number of dwelling- houses which were rendered fit by Local Authority in default of owners
8	Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close
	B. Proceedings under Public Health Acts.
275	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
232	Number of dwelling-houses in which defects were remedied by owners
using,	C. Proceedings under sections 17 and 18 of the Hor Town Planning, &c., Act, 1909.
I	Number of representations made with a view to making of Closing Orders
1	Number of dwelling-houses in respect of which Closing Orders were made
8	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit
9	Number of dwelling-houses in respect of which Demolition Orders were made
4	Number of dwelling-houses demolished in pursuance of Demolition Orders

Factory and Workshop Act.

There are 89 Factories and Workshops on the Register for 1920, an increase of 8 over 1919. In addition to these there are a number of small workplaces employing in the aggregate about 40 people, chiefly women. The year's work has been chiefly of a routine nature, and little comment is necessary. In fact, if it had not been for various notices sent by the Chief Lady Inspector of Factories concerning the closet accommodation for women at some of the factories, there would have been nothing to report. In all cases the Owners carried out the recommendations suggested.

Table 1.—Vital Statistics of Whole District during 1920 and previous Years.

Name of District: Hucknall Urban.

STATEMENT OF THE PARTY OF THE P		-	NAME OF TAXABLE	atema in a service	-	-	-	Marine Color Anna America
ging to the	Rate.		14	14.6	11.2	21.3	13.9	12.2
hs belonging District.	Number		218	223	176	331	227	208
Y Y	Rate per 1000	Births	114	130	88	86	114	1117
Nett. De Under 1	Number		48	57	35	38	44	58
Oeaths t regis- istrict.	21	59	27	39	22	21		
ts regis-	Transferable Deaths of Non-Residents regis- ered in the District.					7	67	63
eaths	red in strict.	Rate.	19.3	12.9	9.5	19.5	12.6	11:1
Total Deaths	Registered in the District.	Number	198	197	150	299	207	189
	;	Rate.	27.7	26.0	22.5	22.3	22.5	28.9
Births.	Nett.	Number						
	Uncor- rected	Number	420	435	395	387	384	493
Population estimated to Middle of each Year.			15477	15207	15691	15496	16373	17025
	*1915	*1916	*1917	*1918	*1919	1920		

* Civilian Population.

Table II.—Causes of Death in Hucknall. Urban District, 1920. Civilians only

	Causes of Death.	Males.	Females
	All Causes	114	94
I			I
2			
3	Measles	. 6	8
4	Scarlet Fever	I	
3 4 5 6	Whooping Cough	I	I
6	Diphtheria and Croup		I
7 8	Influenza	. 5	I
	Erysipelas		
9	Pulmonary Tuberculosis	. 7	4
IO		. 2	I
ΙI			
12			8
13			
14		I	0
15	Organic Heart Disease		8
16			8
17			5
18		I	I
19			2
20		I	
21			I
21			
22		e I	I
23	Puerperal Fever		
24	Parturition, apart from		
	puerperal fever		2
25	Congenital Debility &c		9
26			
27		· I	
28			32
29			
	known	. 2	0
	Special Causes (included		
	above)		
	Cerebro-spinal fever		
	Poliomyelitis		
	D 0 6 16 1 1		-
	Deaths of infants under		-6
	I year of age TOTAL	. 32	26
	Illegitimate	. 3	I
	TOTAL BIRTHS	. 263	230
	Legitimate	247	219
	Illegitimate	. 16	II
	8		
	POPULATION for Birth and	1	
	and Deaths -	17025	
		-	
	General Register Office.	1	

(Provisional figures. Populations estimated to the middle of 1920 have been used for the purposes of this Table). TABLE III.—Birth-rate, Death-rate, and Analysis of Mortality during the Year 1929.

1.	of Death.	1.5	2.0	0.0
1S.*	Uncertified Causes	-		100
PERCENTAGE OF TOTAL DEATHS.*	Inquest Cases.	9.9	1.1	3.50
PERCE	Certified Causes.	92.2	92.2	93.2
OF,	Deaths in Public Publicani	24.3	31.3	16.5 46.8 10.1
PER RTHS.	Total Deaths under One Vear.	80	85	80 75 117
RATE PER 1,000 BIRTHS.	Diarrhœa and Enteritis (under 2 Years).	8.3	10.4	
	Violence	0.48	0.43	0.03 0.10 0.14 0.27 0.38 0.05 0.17 0.22 0.30 0.47 0.05 0.10 0.05 0.35 0.17
0000	Influenza	0.28	0.31	0.30
ER I	Diphtheria	0.15	0 04 0 14 0 16 0 31 0 43	0.03 0.10 0.14 0.27 0.38 0.05 0.17 0.22 0.30 0.47 0.05 0.10 0.05 0.35 0.17
TE P	Whooping	0.11	0.14	0.10
H-RA	Scarlet	20.0	0.04	0.03
Annual Death-rate fer 1,000 Population.	Measles	61.0	0.55	0.19 0.03 0.10 0.14 0.27 0.22 0.05 0.17 0.22 0.30 0.8 0.05 0.10 0.05 0.35
UAL	Small-pox	00.0	12.5 0.01 0.00 0.22	11.3 0.02 — 0.19 12.4 0.01 — 0.22 12.2 0.05 0.00 0.8
ANN	Enteric Fever.	10.0	10.0	0.03
	All Causes	12.4	12.5	11.3 0.02 12.4 0.01 12.2 0.05
Birth- rate per	Total Popu- lation.	25.4 12.4 0.01 0.00 0.19 0.04 0.11 0.15 0.28 0.48	26.2	24.9 26.5 28.9
		England and Wales	96 Great Towns, including London (Census Popula- tions exceeding 50,000)	Populations 20,000-50,000) London HUCKNALL

*Non-civilians are included in these figures for England and Wales but not for other areas.

Table IV. Infant Mortality. 1920.

Nett Deaths from stated causes at various Ages under 1 Year of Age.

 Causes of Death.	Under I Week.	I-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under I year.	Totals
Small Pox Chicken Pox Measles Scarlet Fever Whooping Cough Diphtheria Erysipelas Tuberculous Meningitis Abdominal Tuberculosis OtherTuberculousDisease Meningitis Convulsions Laryngitis Bronchitis Pneumonia Diarrhœa Enteritis Gastritis Syphilis Rickets Suffocation Injury at Birth Atelectasis Congenital Malformation Premature Birth Atrophy, Marasmus					 19 1	2 3 3 3 3	2	I	I	I I
Other Causes Totals	18			<u>I</u>	2 22	17	12	2	5	58

Table V.—Showing Number of Births registered in the District each Month.

	MAL	Es.	FEMA	LES.	
1920.			Legitim-		Total.
	ate.	imate.	ate.	imate.	
January	21		28		49
February	26	2	21	1	50
March	25	3	24		. 52
April	14	1	24	2	41
May	19	3	16	1	39
June	22	1	19	1	43
July	24		9	2	35
August	25	2	22	2	51
September	16		19		35
October	18	2	15	1	36
November	21	1	9	*	31
December	16	1	12		29
Total	247	16	218	10	491
10001	26	3	22	8	131

Table VI.—Showing Total Notifications of Birth for each Ward.

1920.	East Ward.	WEST WARD.	NORTH WARD.	Total.
January	16	33	12	61
February	14	14	14	42
March	9	20	24	53
April	3	29	7	39
May	16	19	14	49
June	7	21	15	43
July	9	16	13	38
August	10	29	15	54
September	10	22	7	39
October	10	21	6	37
November	12	9	13	34
December	10	16	11	37
Total	126	249	151	526

Table VII.—Showing Number of Deaths in the three Wards respectively.

1920.	EAST WARD.	WEST WARD.	North Ward.	Total.
January	4	11	8	23
February	4	6	9	19
March	13	15	15	43
April	5	9	1	15
May	4	7	2	13
June	4	8	2	14
July	1	1	1	3
August	5	3	6	14
September	1	3	3 ·	7
October	1	7	1	9
November	2	9	7	18
December	5	1	3	9
		170		
Total	49	80	58	187

TABLE VIII.—Showing No. of Deaths registered in the District each month.

1920.	Male.	Female.	Total.
January	15	8	23
February	9	10	19
March	18	25	43
April	7	8	15
May	9	4	13
June	8	6	14
July	2	1	3
August	5	9	14
September	3	4	7
October	6	3	9
November	11	7	18
December	6	3	9
Total	. 99	88	187

Table IX.—Showing Ages at which Death occurred.

1921. Age.	January	March	April	May	June	din's	August	October	November	December	Totals
Under 1 year	4	7 13	6	7	4	2	3	1 2	8	1	58
1 and under 2	2	1 2			1				1		7
2 ,, 5	2	1 10	1.		1.		1				16
5 ,, 15	3	2 2			1	1	1.			1	11
15 ,, 25		1 2		1	2						6
25 ,, 45	3	5 3	3 .		2	1	4	2	2	1	26
45 ,, 65	3	2 4	2	2	3	ì	2.	3	2	5	29
65 upwards	8	3 9	5	5	2	1	3	5 4	6	3	54
Totals	25 2	22 45	17	15	16	6	14	8 9	19	11	207

TABLE X.—Showing the Monthly Notifications of Infectious Diseases.

	_	-		-	-			-	-			-	
Disease.	January	February	March	April	May	June	July	August	September	October	November	December	Totals
Scarlet Fever	5	4	1	2	2	2	6	6	5	3	4	4	44
Diphtheria	3		4		1	1	1		1	1	3	3	18
Erysipelas	1		1	1						1			4
Pneumonia	6	5	11	4	3	1		2	1	1	1	4	39
Pulmonary Tuberculosis	2		5	3	1	1	5			1	2		20
Malaria			3		1	1	1		1		1	1	9
Ophthalmia Neonatorum			1								1		2
Other forms of Tuberculosis						1		1	1	1		1	5
Measles													
German Measles													
Encephalitis Lethargica													
Puerperal Fever													
Totals	17	9	26	10	8	7	13	9	9	8	12	13	141

Table XI.—Cases of Infectious Disease notified during the year 1920. Hucknall Urban District.

	Total cases	removed to Hospital	1 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13
otified	Locality.	North	v 4 v 0 1 v 2 : : : : :	32
Total cases notified	each Loc	West Ward	0 2 8 440 : : : :	58
Total	in ea	East Ward	1 619 888 ::::	51
133		65 and upwards.	1 111 11011111	3
		45 to 65.	: : 7 : : : 9 : : : : : :	∞
CASES NOTIFIED	ars.	z2 to 45.	1 417 127 :::::	24
SES NO	At Ages—Years.	12 10 25.	2 2 10 2 4 2 1 1 1 1	25
OF		.SI 01 S	34 7 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	54
NUMBER		·\$ 01 I	9 9 : : : : : : : : : : : : : : : : : :	21
Z		Under 1.	1 : 1 : - 1 : 0 0 : : : :	9
	·sə	P& Ils 1A	44 44 20 20 30 30 30 30 30 30 30 30 30 30 30 30 30	141
		Notifiable Disease.	Scarlet Fever Diphtheria (including Membranous Croup) Erysipelas Pulmonary Tuberculosis Other forms of Tuberculosis Pneumonia Ophthalmia Neonatorum Puerperal Fever German Measles German Measles Encephalitis Lethargica	Totals

Isolation Hospital or Ransom Sanatorium, Mansfield. Hospitals, Sanatoria, etc. | Rushcliffe Small Pox Hospital, Hucknall.

Annual Report of the Medical Officer of Health for the Urban District of Hucknall on the administration of the Factory and Workshop Act, 1901.

I.-INSPECTIONS.

Premise	s.	I	aspections.	Notices.
Factories and I	Laundries		63	I
Workshops			182	19
Workplaces	• •••		54	0
			299	20

2.-DEFECTS FOUND.

	Found	Remedied.
Want of Cleanliness	 16	16
Sanitary Defects	 4	4
	20	20

3.--HOME WORK.

Nature of Work—Wearing Appa Lists received from Employers t		-	
moto received from Emprojeto			
Lists		***	18
Outworkers			115
Notices served on Occupiers as to	o keeping	or sending lists	36

4.-REGISTERED WORKSHOPS.

Hosiers	 	16
Millinery	 	14
Tailors	 7	10
Boot Repairers	 	13
Shetland Trade	 	12
Laundries	 	I
Bakers	 	9
Others (various)	 	14
		89

5.-OTHER MATTERS.

Notified by H.M. Inspector		 15
Reports sent to H.M. In	spector	 3
Other matters		 36

WALTER GARSTANG,

Medical Officer of Health.

Feb. 21st, 1921.