[Report 1925] / Medical Officer of Health, Hucknall U.D.C.

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ANNUAL REPORT
AND
VITAL STATISTICS

The
Urban District of Hucknall.

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.

The Medical Officer of Health of the District.

In accordance with instructions from the Ministry of Health.

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

GENTLEMEN,

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

In the Circular received from the Ministry of Health regarding Annual Reports, it is intimated that the Report for this year is to be a Survey Report. By this is meant that the Medical Officer of Health must be prepared to deal with:—

1. Measure of progress made in the Area during the preceding five years in the improvement of the Public Health.

2. The extent and character of the changes made during that period in the Public Health Services.

3. Any further action of importance in the organisation and development of Public Health Services contemplated by the Local Authority or considered desirable by the Medical Officer of Health.

In addition to this, Public Health matters for 1925, have to be specifically reported on.

The instructions as to the arrangement of this Report, as set out in the Ministry of Health's Circular, have been followed as accurately as possible.

Several New Tables have been added which have become necessary when a survey is being taken over a period of years.

I have to thank the Officials concerned for their co-operation during the Year.

And I desire to record my appreciation of the cordial support given me by the Members of the Health Committee and the Council.

I have the honour to be,
Gentlemen,
Your obedient servant,
WALTER GARSTANG.

March 15th, 1926.

Natural and Social Conditions of the Area.

Area (in acres)	3270
Population (Census in 1921)	17180
„ estimated 1925	17600
Number of Inhabited Houses (1921) ...	3873
„ „ Families or seperate Occupiers (1921)	4008
Rateable Value	£56,861
Sum represented by a penny Rate ...	£197-1s-5d.

The town of Hucknall is situated in the Leen Valley, 7 miles North of Nottingham. Wighay Nook is over 300 feet and St. John's Church 200 feet above sea level. The District is essentially industrial in character, and the population mainly working class. I estimate that ⅔ of the adult male population are engaged in Coal Mining at the Collieries in or surrounding the District. Though this is the chief industry, there are various others. There are several large Factories making Underwear, Hosiery, and Shetland goods, a Cigar Factory and a Soap works These employ Female labour chiefly.

One striking feature during the last 5 years has been the erection of a large number of houses along Watnall Rd. beyond the Central Station. A few years ago, with the exception of a few farmhouses, there was not one single house in this part of the district. Now, there are numerous houses up to and beyond the Aerodrome, and this area is now known as Westville, and may properly be called a suburb of Hucknall. Also during this period, the Urban District Council has completed some very important undertakings. Among these may be mentioned the New Reservoir, the New Main from the Pumping Station at Salterford to the Reservoir, Titchfield Park, and development of the Housing Estate. A Housing and Town Planning Scheme has been initiated, which, when developed will have far reaching effects on the prosperity of the Town. All these undertakings, with the expense involved, bear rather hardly on the present Ratepayers, but future generations will have cause to be grateful to the members of this and the preceding Councils, who estimated for the needs of the future as well as the present. Mention may also be made of the eight "Homes of Rest" which have

been completed during 1925, and are now occupied. Situated opposite the entrance to Titchfield Park, and having a most pleasing appearance, they are a notable feature of the neighbourhood. It appears therefore that during the period under review, steady progress has been made in all directions with one exception to be mentioned now, and that is the failure to proceed with the Closet Conversion Scheme. With regard to this, it is questionable whether an adequate supply of water can be assured, and until this matter can be satisfactorily settled, the Scheme must be held in abeyance.

Electric current is now available for a considerable portion of the district and is certainly proving a great boon to those inhabitants who are able to avail themselves of the supply.

With Electric power, excellent railway facilities, and a plentiful supply of good coal, Hucknall is in a most favourable position to provide for further industries.

TABLE 1.—Vital Statistics of Whole District during 1925 and previous Years.

Name of District: Hucknall Urban.

Year.	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths of Non-Residents registered in the District.	Transferable Deaths of Residents not registered in the District.	Nett. Deaths belonging to the District.			
		Uncorrected Number	Nett.						Under 1 Year of age.		At all Ages.	
			Number	Rate.	Number	Rate.			Number	Rate per 1000 Nett Births	Number	Rate.
1920	17025	493	493	28·9	189	11·1	2	21	58	117	208	12·2
1921	17180	485	485	28·2	177	10·3	—	23	53	109	200	11·6
1922	17430	369	369	21·1	142	8·1	3	37	24	65	176	10·0
1923	17510	401	401	22·3	163	9·3	1	40	37	92	202	11·4
1924	17660	384	384	21.2	172	9·1	2	31	38	98	201	11·3
1925	17600	384	384	21·8	175	9·9	—	38	35	91	213	11·9

TABLE II.—Causes of Death in Hucknall. Urban District, 1925. Civilians only

	CAUSES OF DEATH.	Males.	Females
	All Causes	122	91
1	Enteric Fever		
2	Small-pox		
3	Measles	1	2
4	Scarlet Fever		
5	Whooping Cough		
6	Diphtheria		
7	Influenza	1	4
8	Encephalitis lethargica ...		
9	Meningococcal meningitis ...		
10	Tuberculosis of respiratory system	5	6
11	Other Tuberculous Diseases	1	
12	Cancer, malignant disease ...	14	6
13	Rheumatic Fever	1	
14	Diabetes	1	
15	Cerebral hæmorrhage, &c. ...	3	3
16	Heart Disease	17	12
17	Arterio-sclerosis	3	3
18	Bronchitis	12	2
19	Pneumonia (all forms) ...	10	9
20	Other respiratory diseases ...	2	
21	Ulcer of stomach or duodenum	1	
22	Diarrhœa &c. (under 2 years)	5	1
23	Appendicitis and Typhlitis...		1
24	Cirrhosis of Liver		
25	Acute and chronic nephritis	2	2
26	Puerperal sepsis		
27	Other accidents and diseases of pregnancy and parturition		3
28	Congenital debility and malformation, premature birth	11	6
29	Suicide	3	
30	Other deaths from violence	5	1
31	Other defined diseases ...	24	30
32	Causes ill-defined or unknown		
	Special Causes (included above) Poliomyelitis		
	Polioencephalitis		
	Deaths of infants under 1 year { Total... ...	20	15
	{ Illegitimate ...	1	1
	TOTAL BIRTHS	192	192
	Legitimate	185	189
	Illegitimate	7	3
	POPULATION	17600	
	General Register Office, March, 1926.		

TABLE III.—Birth-rate, Death-rate, and Analysis of Mortality during the Year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales but only to civilians as regards London and the groups of towns)

	Birth-rate per 1,000 Total Population.	Annual Death-rate per 1,000 Population.									Rate per 1,000 Births.		Percentage of Total Deaths.		
		All Causes	Enteric Fever.	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhœa and Enteritis (under 2 Years).	Total Deaths under One Year.	Causes of Death certified by Registered Medical Practit'ners	Inquest Cases.	Uncertified Causes of Death.
England and Wales ...	18·3	12·2	0·01	0·00	0·13	0·03	0·15	0·07	0·32	0·47	8·4	75	92·1	6·9	1·0
105 County Boroughs & Great Towns, including London	18·8	12·2	0·01	0·00	0·17	0 03	0·18	0·09	0·30	0·43	10 8	79	92·1	7·3	0·6
157 Smaller Towns (1921 Adjusted Populations 20,000-50,000) ..	18·3	11·2	0·01	0·00	0·15	0·02	0·14	0·06	0·31	0·38	7·6	74	93·0	5·9	1·1
London	18·0	11·7	0·01	0·00	0·08	0·02	0·19	0 11	0·23	0·40	10 6	67	91·1	8·9	0·0
HUCKNALL	**21·8**	**11·9**	**0·00**	**0·00**	**0·17**	**0·00**	**0·00**	**0·00**	**0·28**	**0·51**	**15·6**	**91**	**90·7**	**5·1**	**4·2**

Table IV. Infant Mortality. 1925.

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

Causes of Death.	Under 1 Week.	1-2 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 1 year.	Totals
Convulsions	1	...	...	...	1	2	...	...	...	3
Bronchitis	...	...	...	...	0	1	...	...	...	1
Pneumonia	...	...	...	1	1	..	...	1	2	4
Enteritis	...	...	...	...	0	1	1	2	..	4
Meningitis	..	...	...	..	0	1	...	...	..	1
Injury at Birth	3	...	...	...	3	...	..	..	..	3
Congenital Malformation	3	2	...	...	5	...	...	...	..	5
Atelectasis	2	..	...	...	2	...	...	...	...	2
Premature Birth	4	1	...	1	6	...	...	...	...	6
Marasmus	...	1	1	..	2	1	...	..	...	3
Other Diseases	1	1	...	...	2	...	...	...	1	3
Totals ...	14	5	1	2	22	6	1	3	3	35

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

1925.	MALES. Legitimate.	MALES. Illegitimate.	FEMALES Legitimate.	FEMALES Illegitimate.	Total.
January ...	11	...	13	...	24
February ...	16	1	11	...	28
March ...	15	1	21	...	37
April ...	18	...	14	...	32
May ...	11	3	14	1	29
June ...	13	...	18	...	31
July ...	19	...	15	1	35
August ...	14	...	26	...	40
September ..	15	...	19	...	34
October ..	15	1	11	1	28
November ...	20	...	16	...	36
December ...	19	...	15	...	34
Total ..	186	6	193	3	388
	192		196		

TABLE VI.—Total Notifications of Births for each Ward.

1925.	EAST WARD.	WEST WARD	NORTH WARD	Total.
January ...	7	21	11	39
February ...	10	16	8	34
March ...	7	11	13	31
April ..	6	14	9	29
May ...	9	13	10	32
June ...	11	18	8	37
July ...	6	21	11	38
August ..	8	17	8	33
September..	5	19	7	31
October ..	16	11	14	41
November...	8	14	9	31
December ...	7	20	19	46
Total ..	100	195	127	422

TABLE VII.—Showing Number of Deaths registered in District each Month.

1925.	MALES.	FEMALES.	Total.
January	12	6	18
February	11	4	15
March	10	17	27
April	6	2	8
May	7	8	15
June	3	9	12
July	6	5	11
August	3	5	8
September	13	3	16
October	7	1	8
November... ...	9	6	15
December	13	9	22
Total	100	75	175

TABLE VIII.—Showing Number of Deaths in each Ward.

1925.	EAST WARD.	WEST WARD	NORTH WARD	Total.
January ...	5	7	6	18
February ...	3	7	5	15
March ...	6	14	7	27
April ...	2	3	3	8
May ...	5	7	3	15
June ...	3	4	5	12
July ...	3	4	4	11
August ...	3	1	4	8
September ..	2	8	6	16
October ...	4	1	3	8
November...	4	6	5	15
December ...	5	12	5	22
Total ...	45	74	56	175

TABLE IX.—Showing Ages at which Death occurred.

1925. Age.	January	February	March	April	May	June	July	August	September	October	November	December	Totals
Under 1 year	2	5	1	1	1	...	2	4	8	4	3	4	35
1 and under 2	2		2	...		...	..	..	..		1	..	5
2 „ 5	1	...	1	1	..	1	..	...	1		..	1	6
5 „ 15	2	1	...	...	2	1			...	..	1	..	7
15 „ 25	2	..	1	1		...	...	1	2	...	2	2	11
25 „ 45	1	..	4	2	2	3	3	1	1	5	2	2	26
45 „ 65	2	3	6	2	2	3	2	2	2	4	2	9	39
65 upwards	7	9	13	5	9	8	7	3	7	1	6	9	84
Totals ...	19	18	28	12	16	16	14	11	21	14	17	27	213

This Table gives all deaths of Inhabitants including those who died in places or Institutions outside the District.

TABLE X.—Birth Rate, Death Rate and Analysis of Mortality during Years 1921—1925.

England & Wales.

Year.	Birth-rate per 1,000 Total Population.	Annual Death-rate per 1,000 Population.									Rate per 1,000 Births.		Percentage of Total Deaths.		
		All Causes	Enteric Fever.	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhœa and Enteritis (under 2 Years).	Total Deaths under One Year.	Causes of Death certified by Registered Medical Practit'ners	Inquest Cases.	Uncertified Causes of Death.
1921	22·4	12·1	0·02	0·00	0·06	0·03	0·12	0·12	0·23	0·44	15·5	83	92·5	6·4	1·1
1922	20·6	12·9	0·01	0·00	0·15	0·04	0·16	0·11	0·54	0·44	6·2	77	92·7	6·2	1·1
1923	19·7	11·6	0·01	0·00	0·14	0·03	0·10	0·07	0·22	0·44	7·7	69	92·0	6·9	1·1
1924	18·8	12·2	0·01	0·00	0·12	0·02	0·10	0·06	0·49	0·44	7·3	75	92·3	6·6	1·1
1925	18·3	12·2	0·01	0·00	0·13	0·03	0·15	0·07	0·32	0·47	8 4	75	92·1	6·9	1·0

TABLE XI.—Birth Rate, Death Rate and Analysis of Mortality during Years 1921—1925.

Hucknall Urban District.

Year.	Birth-rate per 1,000 Total Population.	Annual Death-rate per 1,000 Population.									Rate per 1,000 Births.		Percentage of Total Deaths.		
		All Causes	Enteric Fever.	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhœa and Enteritis (under 2 Years).	Total Deaths under One Year.	Causes of Death certified by Registered Medical Practit'ners	Inquest Cases.	Uncertified Causes of Death.
1921	28·2	11·6	0·00	0·00	0·00	0·00	0·11	0·00	0·33	0·11	14·4	109	94	3·5	2·5
1922	21·1	10·0	0·00	0·00	0·00	0·00	0·05	0·00	0·28	0·51	8·1	65	92·2	5·6	2·2
1923	22·3	11·4	0·00	0·00	0·22	0·00	0·22	0·05	0·05	0·74	9·9	92	90	6·9	3·1
1924	21·2	11·3	0·05	0·05	0·05	0·00	0·00	0·11	0·33	0·28	2·6	98	92·5	3·5	4·0
1925	21·8	11·9	0·00	0·00	0·17	0·00	0·00	0·00	0·28	0·51	15·6	91	90·7	5·1	4·2

Table XII.—Showing the Number of Deaths from certain Diseases during the 5 years ending 1925.

Year.	Small Pox	Scarlet Fever	Diphtheria	Enteric Fever	Measles	Whooping Cough	Diarrhœa (under 2 years)	Puerperal Fever	Cancer Malignant Disease	Respiratory Tuberculosis	Other Forms of Tuberculosis	Certain Rare Diseases
1921	...	...	...	...	...	2	7	...	20	10	2	2 (a)
1922	...	...	...	...	...	1	3	...	13	9	4	...
1923	...	...	1	...	4	4	4	1	18	11	7	...
1924	1	...	2	1	1	...	1	...	22	7	2	1 (b)
1925	0	...	...	...	3	...	6	...	20	11	1	...
Total	1	0	3	1	8	7	21	1	93	48	16	3

(a) Encephalitis Lethargica.

(b) Poliomyelitis.

Table XIII.—Showing Total Number of Births, Deaths, and Deaths under 1 year, with their respective Rates since 1901.

	Births	Rate	All Deaths	Ages Rate	Under 1 Year Deaths	per 1000 Nett. Births Rate
1901	522	33·6	228	14·7	88	168
1902	581	36·3	205	12·8	86	148
1903	546	34·1	211	13·1	63	115
1904	576	34·9	267	16·2	108	197
1905	500	30·6	229	13·8	66	130
1906	482	29·2	228	13·8	79	163
1907	470	27·6	227	13·3	68	144
1908	569	33·4	201	11·8	78	137
1909	540	31·7	208	12·2	69	127
1910	495	29·1	214	12·5	64	129
1911	465	29·3	214	13·3	60	129
1912	424	26·5	194	12·1	41	96
1913	453	28·3	229	14·3	55	121
1914	432	27·0	212	13·4	58	134
1915	420	27·7	218	14·0	48	114
1916	435	26·0	223	14·6	57	130
1917	395	22·5	176	11·2	35	88
1918	387	22·3	331	21·3	38	98
1919	384	22·5	227	13·9	44	114
1920	493	28·9	208	12·2	58	117
1921	485	28·2	200	11·6	53	109
1922	369	21·1	176	10·0	24	65
1923	401	22·3	202	11·4	37	92
1924	384	21·2	201	11·3	38	98
1925	384	21·8	213	11·9	35	91

Total Population Census 1901 = 15,250.
" " " 1911 = 15,870.
" " " 1921 = 17,180.

Vital Statistics.

Before dealing with these, I wish to refer to the greatly augmented number of Tables which I have compiled this year. The Tables dealing with the Yearly Statistics are as usual, the others for the 5 years under review. Table XIII. is I think specially interesting as showing the figures relating to Birth Rate, Death Rate, etc. since 1901.

Population.

It is most suprising to find that the figure supplied by the Registrar General—17,600—shows a decrease of 60 compared with last year.

The Memorandum received from the General Register Office contains the following paragraph.

"The estimates of population as at 30th June, 1925, which are now provided, have been based on the adjusted 1921 figures after allowance for the varying rates of natural increase as evidenced by the births and deaths in each area, and of migration as indicated from other sources of information such as the changes in the numbers on the Electoral Register, and the migration returns obtained by the Board of Trade.

Another paragragh states that "If it is desired to criticize the figures supplied, this should be done at an early date. After the lapse of a fortnight from the date of this memo. it will be impossible, save in the most exceptionable circumstances, to give effect to any suggested modifications." I quote this paragraph to draw attention to the fact that the Memorandum is dated March 1st, and was only received by me, from the County M.O.H. on Saturday, March 13th, thus preventing me from making any statement to the Registrar General.

I see no conceivable reason for this decrease in population. We always have a natural increase of Births over Deaths; every habitable house is occupied, in many cases by more than one family, and though certainly there has been some emigration, I think this has been balanced by immigration. My own estimate of population on June 30th, 1925, is 17769. This figure is found from the estimation of population by the method of Logarithms, which method was formerly employed by the Registrar General. The only fallacy with this method was that it would not take into account pronounced emigration or immigration. In the case of Hucknall, however, I main-

tain that these two factors are evenly balanced, and I submit, therefore, that my figure is more accurate than that supplied by the Registrar General.

The General Death Rate 11·9 is less than that for the Country 12·2, and is therefore satisfactory.

The Birth Rate 21·8 also compares favourably with that for England and Wales 18·3.

The Infant Mortality Rate 91 per 1,000 Births is less than last year, but does not approach that for England and Wales 75, the same as last year. Table XIII. which is self explanatory may well be looked at with reference to these figures.

Table IV. shows that out of the 35 Infant Deaths, 22 occurred under 1 month, and 19 of these in the 1st and 2nd weeks. This bears out what has been stated before that the reduction in Infant Mortality is confined to the period 1 month to 1 year. This is where the work carried on by Health Visitors and Infant Welfare Centres has achieved good results. To reduce the number of deaths under one month, it is necessary to provide more Ante Natal care and supervision. When these facilities are provided, it is not always easy to persuade Expectant Mothers to take advantage of them.

With regard to Table IX. it is interesting to note the number of deaths over 65 years.

For the last 5 years the figures are.

1921	total	deaths	200	over	65	58
1922	,,	,,	176	,,	,,	59
1923	,,	,,	202	,,	,,	68
1924	,,	,,	201	,,	,,	83
1925	,,	,,	213	,,	,,	84

These figures prove, I think, that the expectation of life is steadily increasing.

Table XI. giving certain figures for Hucknall compares most favourably with Table X giving the same information for England and Wales.

The Zymotic Death Rate = ·5

This is the Death Rate per 1,000 from the following diseases. Small Pox, Diphtheria, Scarlet Fever, Typhus, Enteric Fever, Measles, Whooping Cough and Diarrhœa. It is assumed that so long as this Rate is under 1·0 per 1,000, the Sanitary condition of the District is good.

Inquests were held in 11 cases, and in 9 cases the cause of death was uncertified.

The Amount of Poor Law relief for 1925 was £3730-0-0.

The various Hospitals in the City of Nottingham are used very largely by the inhabitants of this district. A large number of colliery accidents have to be treated in Hospital, and a considerable number of cases are sent either for X Ray examination, or for treatment that cannot be carried out at the patient's house.

General Provision of Health Services in the Area.

Hospitals provided or subsidised by the Local Authority or the County Council.

1. Tuberculosis. Ransom Sanatorium near Mansfield provided by the County Council.

2. Maternity and Children's Hospitals. None specially provided, but the easy access to Nottingham allows full use to be made of the various Hospitals in that City.

3. Fever Hospitals. No special provision, but the Local Authority has an arrangement with the Basford Rural District Council, whereby cases of Infectious Diseases may be admitted to the Basford Sanatorium if there is available accommodation.

4. Small Pox. The Rushcliffe Hospital. This Hospital is maintained by the following five Authorities. The Urban Districts of Arnold, Beeston, Carlton, Hucknall, the Rural District of Stapleford. The Hospital is situated off Watnall Rd., the approach being by a private road, between ¼ and ½ mile in length. Accomodation can be found for about 35 patients needing confinement to bed, or 50 patients, if the disease is of the present mild type.

This Hospital has been greatly improved during the past three years by the installation of Central Heating throughout, which has minimised the risk of fire ontbreaks. At the present time a sewer is being laid from the Hospital to connect with the sewer in Watnall Road. This is a great improvement on the old system of drainage which led to a Cesspool. The buildings are in a sound state of repair and have been thoroughly repainted and decorated during the year.

There is no Institutional Provision for unmarried mothers, illegitimate infants and homeless children in the Area.

Ambulance Facilities.

For Infectious cases—
Provided by the Hospital concerned.

For Non-Infectious and Accident cases—

1. An Ambulance provided by the Local Authority.
2. Ambulances provided by the various Colliery Companies in the neighbourhood.

Clinic and Treatment Centres.

Maternity and Child Welfare Centres.

1. Hucknall Town Centre, under the control of the Urban District Council. Rooms at the Public Hall, Watnall Rd.
2. Hucknall and District Nursing Association Centre, under the control of the Nursing Association. Premises in Beardall St.

Tuberculosis Dispensaries, under the control of the County Council, situated in Nottingham.

Treatment Centres for Venereal Diseases, under the control of County Council. One Centre at Nottingham and one at Mansfield.

During the latter part of the Year a Treatment Centre was opened at Hucknall in connection with the Cripples'Guild. The Centre is open every Thursday afternoon and is proving of great value, numerous children attending. The services of an Orthopædic Surgeon are available. At present temporary accommodation is found at the Public Hall, but as the work of the Clinic grows, larger premises will be required.

Public Health Officers of the Local Authority.

The Medical Officer of Health (Part Time) who is also in charge of the Maternity and Child Welfare Centre, Medical Superintendent of the Rushcliffe Small Pox Hospital and Certifying Factory Surgeon for the District.

Sanitary Inspector, Mr. W. R. Beardall, who is also the Meat Inspector, and holds the Royal Sanitary Institute Certificate.

Health Visitor, Miss A. Harwood, who holds the Certificate of the Central Midwives' Board, and a Certificate for General Nursing. Contribution to the salaries of these Officials is made under the Public Health Acts.

The Local Authority does not provide any clerical assistance for the Health Officials. I just point out that the number of Registers, etc. to be kept in order, the amount of writing involved in so doing, and general correspondence greatly curtails the time which would more profitably be given to the practical part of the work of the Department.

Professional Nursing in the Home.

(*a*) General. This is provided mainly by the District Nursing Association, who employ two trained Nurses.

(*b*) For Infectious Diseases. No provision is made. The Local Authority cannot employ a whole time Nurse for this purpose, as there is not sufficient work I have on several occasions tried to get the co operation of the District Nursing Association with regard to this matter, but it seems impossible to arrive at any agreement, so that the matter has to remain in *statu quo.*

I would like to point out however, that within a reasonable time, the services of a second Health Visitor may be required, if there is a steady increase in the growth of the District, and in population. The question of Nursing Infectious Cases would then be satisfactorily settled.

The Local Authority neither employs nor subsidises any Midwives.

Number of Midwives practising in the Area is 6.

The County Council is the Authority administering the Sale of Food and Drugs Act, the Milk and Cream Regulations and the Dried Milk Regulations.

Through the Courtesy of Mr. E. Templeman Chief Inspector I am able to give an Extract from the Report of the Public Analyst for the County of Nottingham upon articles analysed by him under the above Acts, and of those examined by the Inspectors taken in this District for the year 1925.

From this Table it is evident that the quality of food stuffs, etc. sold in this District is uniformly good. I cannot make any comparison with previous years, as this is the first occasion on which I have asked for, and received a Report from the County Analyst.

Articles purchased for Examination.		Result of Analysis.	Observations of Public Analyst.	Result of Proceedings, if any, taken in respect of Adulterated Samples.
Baking Powder	1	Genuine		
Butter	1	do.		
Coffee	2	do.		
Epsom Salts	1	do.		
Ground Ginger	4	do.		
Lard	1	do.		
Margarine	2	do.		
Milk	25	22 Genuine 3 Adulterated	9·53% Excess Water 10% Deficient in Fats Slightly deficient in solids not fats	Vendor cautioned ,, ordered to pay costs ,, cautioned
Potted Meat	2	Genuine		
Pepper	2	do.		
Pork Sausages	3	do.		
Rice	1	do.		
Ground Rice	1	do.		
Sponge Cake	1	do.		
Vinegar	1	do.		
Totals	48			

Number of Informal Samples of Milk tested by the Inspectors by "Gerber" Tester.

Number of Samples taken by Inspectors	62.	Result—Correct	58.	Incorrect 4.
,, submitted by Milk Retailers to Inspectors ...	29.	,, ,,	28.	,, 1.
,, ,, ,, Milk Producers ,, (taken at Farms) ...	12.	,, ,,	0.	,, 12.
Totals	103.		86.	17.

Legislation in Force in the District.

Public Health Act, Amendment Act, 1890, parts 3 and 4.

Notification of Diseases Act, 1889, with regard to Chicken Pox being compulsorily Notifiable as from September, 1921.

Infectious Diseases (Prevention) Act, 1890.

Public Health Act, Amendment Act, 1907. Part A, excepting Section 5, as from October, 1923.

Byelaws or Regulations in respect to—
New streets and buildings (Revised), adopted Aug. 1925.

Market and Tolls, adopted Aug. 1888.

Dairies, Cowsheds and Milkshops, Nov. 1906.

Slaughter houses, June, 1900.

Offensive Trades, „ „

Nuisances, „ „

Parks and open spaces, Dec. 1922.

Sanitary Circumstances of the Area.

Water. The supply is derived from deep wells sunk into the Bunter Pebble beds at Salterford about five miles from the town, and is taken by two sets of Mains to the two Reservoirs in Wood Lane.

The storage capacity of these Reservoirs is 800,000 gallons and 350,000 gallons. The supply is constant, and practically the whole area is served. In the great majority of cases water is supplied directly to the houses.

The Water is of excellent quality and exceptional purity, and there is no source of contamination.

We have always looked upon our supply as being adequate for our needs. But owing to the Colliery developments in this part of the County, and the number of Authorities taking water in increasing amounts from the same source, it is evident that we may be called upon in the near future to take steps to increase our supply. As already stated the Closet Conversion Scheme has had to be postponed for this reason.

The question of the water supply of this part of the County is engaging the attention of the Ministry of Health, and I understand that, at a meeting of all Authorities concerned held in January 1926, it was decided to form a Regional Advisory Co. to go fully into the matter.

The few streams running through the district are small and unimportant, and are free from pollution.

Drainage and Sewerage.

This continues adequate for the needs of the District. There are three main sewers, one for each Ward, which convey Sewerage to the Disposal Works. Owing to subsidence at the Works, due to Colliery workings, the Sewer from the North Ward requires relaying in one part of its length. This is being attended to.

During the past five years extensions of existing sewers have been made as follows :—

Sandy Lane	190 yards.
Farley „	90 „
Watnall Rd.	50 „
Broomhill	295 „
Mosley St.	70 „

At the present time a new length of Sewer has just been completed from Farley Lane along Watnall Rd. into which the Sewer from the Small Pox Hospital will empty.

The Sewage Disposal Works continues to give satisfaction. The Effluent, of which a sample is sent for examination monthly, is always of good quality. A certain amount of reconstruction work has been done with regard to the Filter beds which, owing to length of service were not acting as they should, and owing to the same cause, it has become necessary to replace some of the working parts which are quite worn out.

Closet Accommodation.

On January 1st, 1921, there were as follows:—

Pail Closets	...	2631
Water „	..	1393
Privy Middens	...	45
Dry Ashpits	...	456
Sanitary Bins	...	2232

On December 31st, 1925, the accomodation was as follows :—

Pail Closets	...	2487
Water „	...	1724
Privy Middens	...	22
Dry Ashpits	...	417
Sanitary Bins	...	2707

The increased number of Water Closets, 331, is due to the following reasons :—

1. New property for which Water Closets are insisted on.
2. Conversion from other types owing to insufficient accomodation, or insanitary conditions.
3. A certain number of Property Owners have installed Water Closets instead of existing Pail Closets on the understanding that some of the expense incurred will be refunded when the Local Authority is able to proceed with the Closet Conversion Scheme for the whole district. This, as I have already mentioned has had to be deferred pending a satisfactory solution as to the adequacy of the Water Supply.

Scavenging.

This is carried out by the workmen of the District Council. Two Ford Lorries are used for the collection and transport of Dry Ashes. Sanitary Bins are emptied weekly, certain districts being taken on certain days so that householders know when to expect removal. Dry Ashpits are emptied as required, and tenants are asked to leave a message at the Office when they wish this done. There are two depots for day refuse. one off Annesley Rd. and one off Watnall Road. They should prove adequate for a considerable time.

Pail Closets are emptied weekly as a rule, but in exceptional cases twice weekly. The material is taken to a depot situated off Cemetary Rd. A large amount of this material is taken by the farmers in the district for manure. Wet Ashpits and Cesspools are emptied when required.

Since the re-organisation of the department by the late Surveyor, Mr. H. Raven, in 1921, and the efficient methods installed by the present Surveyor, coupled with a satisfied body of workmen a vast improvement has taken place in the service,

and I feel sure that few districts can equal Hucknall in this respect. It is very seldom that complaints are received now, and the cost, compared with other similar districts, is astonishingly low.

The following figures are worthy of record.—

1920. (before re-organisation). Total loads removed (Night and day work) were 12078, and the cost was £3449-12-1.

1925. Total loads removed 15932, at a cost of £2669-7-3. That is.—Number of loads increased by 3854, and cost decreased by £780-4-10.

The number of Sanitary Bins has increased by 475 during the period under review. Some of these belong to new property, whilst others have replaced dilapidated Ashpits, or Ashpits with insufficient accommodation for the property concerned.

Sanitary Inspection of the Area.

Before presenting Mr. W. R. Beardall's report, I wish to state that owing to the Small Pox Epidemic of the last 2½ years, I have not had much time availabe to deal with other matters. The Sanitary Inspector also, has had to spend an appreciable portion of his time in dealing with the same outbreak. No one knows, and I am afraid no one realises, the the immense amount of work entailed in dealng with an Epidemic of Small Pox, especially of the present mild type. The quantity of correspondence in each particular case, the tracing and supervision of contacts, the disinfection of houses, schools, clothing, etc., involves an amount of work which has to be seen to be believed. The new Meat Regulations have also increased considerably the work of the Sanitary Inspector. Therefore I claim your indulgence both for myself and Mr. Beardall, if routine Inspections, e.g. Housing, have had to be somewhat neglected.

As you know there was a change of Sanitary Inspectors last year and I was then able for the first time since my appointment as M.O.H. to effect some re-organisation in this department, so as to bring it more in line with present day requirements. I wish to place on record my great appreciation of the manner in which Mr. Beardall has carried out my wishes in every particular. I feel that in my efforts to get

Departmental efficiency, I have increased his already heavy load of work, and I thank him most sincerely for the help he has given me.

Mr. Beardall's report follows :—

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

Gentlemen,—

I have the honour of submitting my 1st complete Annual Report.

Notwithstanding the increased work caused by the Small Pox Epidemic, and the new Meat Regulations the work of this department has been kept up to date.

Sanitary Inspections of the District—

Appointments kept	73
Informal, Verbal Notices served, and letters sent	732
Statutary Notices served	6

Total number of Pemises visited 2011

Number of Visits classified—

Infectious Diseases and Contacts ...	1506
Dairies and Cowsheds	47
Slaughter Houses	227
Milk Purveyors	27
Shops retailing Milk	25
Offensive Trades	11
Caravans	4
Disinfection of Houses	187
Rats and Mice Destruction Act ...	23
Food Stores	47
Common Lodging Houses	2
Factories and Workshops	62
Disinfection of Schools (Rooms) ...	59
Bakehouses	22
Other Inspections (unclassified) ...	127

House Drainage—

Length of Drains re-laid	244 yards.
Inspection Chambers built	9
Ventilating Shafts	5
Drainage Defects remedied	77

Particulars of Nuisances remedied under the Public Health Acts.

Closet Pails renewed	208
Sanitary Bins	137
Privy Midden converted to W.C. ...	1
Pail Closets „ „ „ ...	15
W.C's. cleansed and repaired	17
W.C's. want of cleanliness	5
W.C's. „ „ Ventilation	8
Animals, Manure, etc. removed from close proximity to houses	14
Insufficient Closet Accommodation ...	9
Urinals removed	3
Insanitary Ashpits demolished	12
Broken Inspection Chambers renewed ...	5
Yard Paving relaid	211 sq. yds.
Drains cleansed	47
Spouting cleansed and repaired... ...	58
Water and Sinks provided inside houses ...	2
Miscellaneous	32

Other Defects Remedied—

Cowsheds Limewashed	13
Slaughter Houses „	10
Factories and Workshops Limewashed ...	13
Bakehouses Limewashed	4

Dairies, Cowsheds, and Milkshops.

Cowsheds on Register	30
No. of Inspections	47
Notices served—for Limewashing ..	3
„ „ „ other defects ...	1

Cowsheds have been visited as regularly as possible, and any defects found have been remedied at once by the Owners.

Number of Milk Purveyors on Register ...	44
„ „ Shops selling Sterilised Bottled Milk	43
„ „ Purveyors supplied from outside the district	17
„ „ Inspections...	32

There is a steady increase in the amount of Bottled Milk sold throughout the District.

No complaints have been received by the Local Authority.

Bakehouses.

Number on Register	11
Domestic	1
Inspections	23

Slaughter Houses.

Number in use		12
Number of Inspections, including Meat ...		227
Defects found and remedied as under ...		12
Limewashing ...	10	
Garbage accumulation	1	
Want of cleanliness	1	

Offensive Trades.

Knacker's Yard	1
Tripe Boiler	1

No Notices have been necessary in either case, both trades being conducted satisfactorily.

Meat Inspection.

Notices of intention to slaughter are issued periodically to all Butchers using slaughter houses in the district, and a list of their regular hours is kept in my office.

Any deviation from these hours is notified as prescribed in the 1924 Meat Regulations, Part II, sec. 8. One notice has been served under this section.

The Regulations as regards Stalls, and Transport, Handling, etc. have been strictly enforced.

Unsound Food.

I received 27 requests to inspect doubtful and unsound food.

The following amounts were voluntarily surrendered as unfit for human consumption.

Beef.		
English	...	896 lbs. owing to Tuberculosis
Imported	...	211 lbs.
Fish	...	18 lbs.
Corned Beef	...	34 lbs.
Livers	...	22 lbs.
Various tinned goods		132 tins.

Rats & Mice Destruction Act, 1919.

As done in previous years a copy of the circular issued by the Ministry of Agriculture & Fisheries was sent to all Farmers, Tradesmen, etc.

Number of Rats destroyed	...	...	578
„ „ baits taken	...	...	213
Mice destroyed ...	...	...	128

I am, Gentlemen,
Your obedient Servant,
W. R. BEARDALL.

Smoke Abatement.

No action needed. No case of Smoke Nuisance from Factory Chimneys has occurred.

Premises aud occupations which can be controlled by Byelaws or Regulations.

Hosiers	...	...	15
Milliners	...	...	13
Tailors	...	...	10
Boot Repairers	...	...	18
Shetland Goods	...	...	12
Bakers	...	...	11
Cigar Makers	...	...	1
Slaughter Houses	...	...	12
Common Lodging House		...	1
Knacker's Yd.	...	..	1
Tripe Boiler	...	...	1
Soap Works	...	...	1
Cowsheds	...	...	30

Milk Purveyors	...	...	87
Others	...	...	18
			231

As a whole Regulations and Byelaws are adequate. With regard to Bakehouses, however, I think it is desirable that some Regulation or Byelaw should be instituted providing means whereby employees can thoroughly wash their hands and arms before leaving the Bakehouse. It is possible that some cases of Baker's Dematitis might be avoided, if such facilities were provided.

It is also quite time that Byelaws relating to Nuisances were amended and brought up to date. At the present time there are several Caravans which appear to be here as a permanency. The occupiers are, as a rule, short of closet accommodation and water, and so far as I know there is no Byelaw governing these Vehicles.

Schools.

The Sanitary condition and water supply of the Public Elementary schools are adequate for all needs.

It has not been found necessary to close any school during 1925, to prevent the spread of Infectious Disease. In 1920, all the Elementary schools were closed from February 13th, to March 29th, on account of Measles. In November, 1923, Butler's Hill School was closed owing to the Small Pox outbreak, and later, Spring St. School was closed for the same reason.

The closure of the school at Butler's Hill proved most effective in the checking the spread of Small Pox in that district. I think the closure of the Spring St. School would have proved equally valuable, but, owing to the facts that the Education Authority and the Chief School Medical Officer did not agree with my action, and also that School closure was not being resorted to in other districts in the County in which Small Pox was prevalent, I allowed this School to be re-opened much sooner than it would have been.

I still think that the Medical Officer of Health is the best judge of the procedure to be adopted to safeguard the health of the inhabitants of his district in the case of outbreaks of Infectious disease. It does not follow that because certain steps are considered unnecessary in other districts, they may not be very necessary in his own district.

Housing.

I. *General housing conditions in the Area.*

Every house that can be occupied, is occupied. This statement includes 3 houses that have been condemed as unfit for human habitation, but as no other accommodation has been found for the existing tenants, these have been allowed to remain. There is a shortage of of houses, in spite of the building that has taken place during the past 5 years

At Census, 1921, the number of Inhabited houses was 3873. At the end of 1925, the total was 4,062, an increase of 189. At the present time, there are over 100 houses occupied by more than one family.

During the five years under review the Local Authority has built 40 houses, and private builders have erected 149, 94 with State assistance, 55 without.

The Local Authority is at present having built a further 20 houses which should be ready for occupation this year. The development of a Housing Scheme at Newstead Colliery, has provided much better housing accommodation for miners working at this Colliery, and a good many families have left Hucknall to reside there, thereby easing the situation here. At the same time many more houses are needed before we can say our population is adequately provided for.

There has not been any important change in the population during this period, nor do I anticipate any in the near future.

II. *Overcrowding.*

Where there is a shortage of houses there must be a certain amount of overcrowding. All things considered, the district is in a better condition than many other districts of a similar character. The obvious remedy is to build more houses.

During 1925, 18 cases of overcrowding were brought to the notice of the Health Officials. In 13 of these cases, by communicating with landlords or Agents, we were able to achieve a satisfactory result, the nuisance being abated. The other 5 cases remain, as no solution has been arrived at.

III. *Fitness of Houses.*

(1). (a). General Standard is good, and is obviously improving year by year.

(b) General character of defects found.

Defective Walls and Roofs causing dampness, also defective spouting. Insufficient Ventilation, through windows not being made to open. Defective windows and doors, (wood shrinkage) allowing rain to enter. Bad floors. Defective sinks and gullies, and insufficient closet Accommodation.

(c) Some defects are no doubt due to lack of supervision by Owners and their Agents, but these cases are decreasing. On the other hand there are a large number of careless tenants who take advantage of the fact that there is a shortage of houses which makes it difficult for landlords to eject them.

(2) All defects are noted, and investigated. The Owner is communicated with, and suggestions made as to remedying the various defects under the Public Health Acts, or Housing Acts. I am pleased to state that the Officials are getting a much greater proportion of work done by Informal Action now, than in previous years.

(3) Difficulties in remedying unfitness are nearly always due to the cost involved. Generally speaking, we find that Owners are willing to carry out our requirements, if allowed to do the necessary work gradually and by a stated time.

4. Conditions as regard Water Supply, Closet Accommodation and Refuse disposal have been dealt with under "Sanitary Circumstances of the Areas."

IV. Unhealthy Areas.
There are none.

V. Byelaws relating to Houses, etc.
The existing Byelaws are carried out strictly. New Byelaws as regards Building have recently been adopted.

The Byelaws (Nuisances) require revising and bringing up to date, and Byelaws are required in connection with Vans, sheds, etc.

Housing Statistics for the Year, 1925.

Number of new houses erected during the year—

(a) Total (including numbers given under (b) ... 78

(b) With state assistance under the Housing Acts.

i By the Local Authority 0
ii By other bodies or persons ... 65

I. *Unfit Dwelling Houses..*
Inspection.

(1). Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts.) 293

(2). Number of houses inspected and recorded under Housing Regulations, 1910 ... 0

(3). Number found to be in a state so dangerous or injurious to health, as to be unfit for human habitation 0

(4). Number of dwelling houses (exclusive of those referred to under sub-sec. 3) found not to be in all respects reasonably fit for human habitation 267

II. *Remedy of defects without Serviee of formal Notices.*
Number of defective houses rendered fit in consequence of informal action by the Local Authority and their Officers. 262

III.—*Action under Statutory Powers.*

A—Proceeding under sec. 3 of the Housing Act, 1925.

(1). Number of houses in respect of which notices were served requiring repairs. ... 1

(2). Number of houses which were rendered fit after service of formal notices :—

(a) by owners 1
(b) by Local Authority in default of owners 0

(3). Number of houses in respect of which Closing Orders became operative, in pursuance of declarations by owners of intention to close 0

B.—Proceedings under Public Health Acts.

(1). Number of houses in respect of which notices were served requiring defects to be remedied 4

(2). Number of houses in which defects were remedied after service of formal Notices :—
(a) by owners 3
(b) by Local Authority in default of owners 0

C.—Proceedings under sections 11, 14 and 15 of Housing Act, 1925.

No action has been taken under these sections during the year.

Inspection and Supervision of Food.

The Milk supply is very good, and there is no shortage. The supply comes partly from within the District and partly from without. There are no Dairies, the milk being taken by the Purveyors from the farms to the customers. No complaints have been received by the Health Officials, the milk supplied being pure and wholesome.

It is becoming increasingly common for milk to be supplied in sterilised sealed bottles.

(1). Action taken as to Tuberculous milk and Tuberculous cattle. None necessary.

The question was raised at one of the Health Committee meetings as to which Authority was responsible for the routine inspection of cattle for Tuberculosis. Opinion was given that the County Council was the Authority empowered to deal with this matter, and that the Local Authority had no jurisdiction at all.

No licences have been granted for the sale of milk under special designations as in the Fourth Schedule to Milk Order, 1923, as no milk under those designations is purveyed in the district.

Meat Inspection.

This has been carried out as thoroughly as possible. Arrangements are made whereby the Sanitary Inspector may be present at the time of the slaughter, but under present circumstances, slaughtering being done in the various private slaughterhouses, it is impossible for the Inspector to be present on every occasion.

Meat Marking. As all animals slaughtered here are disposed of in this district, it has not been necessary to make any arrangements under this heading.

Two carcases were found to be Tuberculous after slaughtering. I inspected these two as soon as notice was received. In one case I condemmed the whole carcase, in the other certain parts No other case of disease in fresh meat came to my notice.

A certain amount of imported meat was condemned as unfit for human consumption, due to putrefactive changes.

Administration of the Public Health (Meat) Regulations, 1924.

Stalls and Vehicles. The provisions of the Regulations in these instances have been strictly enforced, and properly carried out.

Shops and Stores.

Section 20, sub-sections 1, 2, 3, 4, and parts *(b)*, *(c)*, *(d)* of sub-section 5 have been carried out.

With regard to sub-section 5 part *(a)* there is a great diversity of opinion, in fact no two people take the same view.

It is impossible to work to a Regulation that admits of such diverse interpretations, otherwise than by informal action. It is to be hoped that the Ministry of Health will re-draft this sub-section and give a clear definition of what is meant by steps "reasonably necessary."

Disposal of condemned meat. As there is a Knacker's Yard in the district, facilities are ample. The meat is taken there and destroyed by burning in the presence of the Sanitary Inspector. If, for any reason, he is not able to be present, the meat is treated with disinfectant, before being taken to the Yard.

There are no Public slaughter houses in the district.

If the Meat Regulations are to be carried out in their entirety a Public Abattoir becomes an absolute necessity, and I strongly urge the Local Authority to give this question their earnest consideration especially in view of the fact that certain of the private slaughter houses in use do not fulfil present day requirements, and cannot be altered to do so.

Private Slaughter Houses in use.

	1920.	Jany. 1925.	Dec. 1925.
Registered	5	5	5
Licensed	10	10	10

In 1920 only 7 were in use.
„ 1925 there are 12 „ „

Other Foods.

Inspection is carried out regularly; the report of the Sanitary Inspector gives results obtained. Sanitary condition of Bakehouses and other premises where foods are manufactured, prepared, stored, or exposed for sale, have been found satisfactory, any trivial defects found being at once remedied by the Owners.

Prevalence of and Control over Infectious Diseases.

The Epidemic of Small Pox during 1923-1925 has been the outstanding feature with regard to Infectious Diseases. The fact that it has been impossible to stamp it out has caused grave concern to Public Health Authorities. The reason for this is the occurrence of "missed" and unrecognised cases, the mildness of the Epidemic allowing people suffering from the disease, to move about freely in public in an Infectious condition, quite unaware that they have Small Pox.

The regulations laid down by the Ministry of Health for the control of a Small Pox outbreak, are to a great extent ineffective as regards the present outbreak, and this leads me to the conclusion, as a result of over two years experience, that there is only one sure and certain means of stamping out Small Pox. That is by efficient *Vaccination and Re Vaccination.*

It is well known now that the present Epidemic in the Country is exclusively confined to Districts in which the staple industry is Mining, Coal or otherwise. Most significant also is the fact that in these Districts, the Epidemic is nearly entirely confined to the Mining Class, and one knows that the Miner as a rule, is notoriously ill protected by, and is very averse to, Vaccination.

The whole position may be put as follows.

The inhabitants of any District in which Small Pox is prevalent, can with certainty stamp it out by Vaccination. If they prefer to keep Small Pox, they must put up with the expense, loss of work, and loss of Trade. The Ratepayers in Hucknall should note that the Epidemic has already cost them £1276-6-2d.

Finally it has been stated by a very small minority of Medical Officers that this present Disease is not Small Pox at all. My experience proves that we are dealing with true Small Pox in a mild form, and it is deplorable that the Public should be left with the idea that there is such a divergence of opinion between trained observers, for this will naturally lead to a more careless and indifferent attitude to the Epidemic than is evinced even at the present time.

I give here the Vaccination Statistics for Hucknall as regards Primary Infant Vaccination for the last three years.

1923	Vaccinated ...	72
	Certificates of Exemption	316
		or 82%
1924	Vaccinated ...	107
	Certificates of Exemption	238
		or 69%
1925	Vaccinated ...	72
	Certificates of Exemption	288
		or 80%

Scarlet Fever.

This disease reqnires little comment In 1920 the type was rather more severe than in the following years. One death took place as a result of Nephritis. As a rule, all cases are treated at home, and I find that Isolation is carried out more intelligently each year. It is possible to send patients

to the Basford Sanatorium, but, owing to the cost, this step is only taken in very exceptional circumstances. In the 5 years only two cases have been so removed.

In this District I do not think that any use has yet been made of the Dick test or of the artificial methods of immunisation for this disease.

Diphtheria.

The position as regards this disease has been very favourable, with the exception of 1920. In this year there were a number of cases in the East Ward, and it was ultimately found that a boy living in that locality was a 'carrier' and no doubt responsible for the outbreak. The disease is of a milder type than formerly though one death occurred in 1920 and one in 1923. In nearly all cases Bacteriological Examination is resorted to and Antitoxin, supplied free by the Local Authority is used. As regards Hospital treatment, the same remarks apply as to Scarlet Fever.

I have no information as regards the Schick Test

Encephalitis Lethargica.

Only 3 cases have been notified since 1920. There were 2 deaths, one being an unnotified case. The other two cases were extremely mild, and it is very doubtful whether they were really cases of this disease.

Pneumonia, Malaria, Dysentery, Trench Fever.

I have had no notifications of Dysentery or Trench Fever since the Regulations came into force in 1919.

Fourteen cases of Malaria were notified between 1920 and 1923, none since. All these cases were contracted by men on Active Service and most of them still have recurring attacks.

The notification of Pneumonia is not satisfactory. A good many deaths occur every year in unnotified cases. This is especially the case in young children suffering from Broncho-Pneumonia. I do not see that notification serves any useful purpose. It does not limit the number of cases, nor does it decrease the Death Rate. I do not consider that ordinary cases of Pneumonia are so infectious or contagious as to be a menace to those in contact with them. In my opinion these Regulations have served their purpose and might well be rescinded.

Laboratory Work.

The arrangement made by the County Council enables any Doctor in the County to send Bacteriological specimens to the City Laboratory free of charge, for examination and Reports.

The following figures have been supplied by the Director of the Laboratory, to whom my thanks are due.

Sputum specimens for Tubecle Bacilli			45
Swab	„	„ Diphtheria	29

Thse figures relate to year 1925.

I have only done 5 Primary and 4 Re Vaccinations under the Public Health (Small Pox Prevention) Regulations 1917. The smallness of this number is due to the fact that the services of the Public Vaccinator have always been available.

There is an excellent Steam Disinfector which is always used for disinfection of clothes, bedding, etc. after exposure to infection. Infected premises are visited by the Sanitary Inspector who disinfects with either Formalin or Sulphur.

Non Notifiable Infectious Diseases.

Measles.

There was a severe Epidemic in 1920, during February and March, and I found it necessary to close the Public Elementary Schools from Feby. 13th to March 19th. The Mortality was high—14 deaths—giving a Death Rate of ·82 per 1,000. In 1921 the District was free from Measles, but the Disease was prevalent at the end of 1922.

In 1923 and 1924, there were a good number of cases but nothing in the nature of an Epidemic and there were only 5 deaths during this period.

The compulsory notification of Measles was discontinued as from the 1st January, 1920. I think this was a mistake as the Public had just become aware that the Disease was a serious one, and rescinding notification has again given them the impression that great care is not necessary. It must always be remembered that Measles and Whooping Cough account for more deaths in children than any other diseases.

Whooping Cough.

This disease was mildly Epidemic in 1920, 1922 and 1923. Eight deaths took place during this period. As to the number of cases, no Statistics are available.

Influenza.

This Disease is, of course, in our midst every year, but happily since 1919, it has been comparatively mild. There were Epidemics at the end of 1921, and similarly in 1924. The attack Rates were high at all ages, but fatal cases were few.

The following figures are interesting and shew that Hucknall was very favourably placed with reference to the whole Country.

Mortality Rate per 1,000

	Hucknall	England & Wales.
1921	0·33	0·23
1922	0·28	0·54
1923	0·05	0·22
1924	0·33	0·49
1925	0·28	0·32

Notifiable Diseases during the year 1925.

Reference should be made to the Tables concerned.

It will be seen that Small Pox and Chicken Pox have again been prevalent, but whereas the former disease was chiefly confined to the Winter months, the latter was spread uniformly throughout the year.

Scarlet Fever has been of a very mild type, so much so, that many cases were not recognised until the occurrence of Desquamation.

With regard to other Notifiable Diseases, the position is favourable and excluding Pneumonia and Tuberculosis only one fatal case (Puerperal Fever) has been recorded.

The two cases of Ophthalmia Neonatorum were not severe, received Hospital Treatment, and recovered without impairment of Vision.

Tuberculosis is dealt with later.

Two cases of Chickenpox in children under 10 were erroneously diagnosed as Small Pox and admitted to the Isolation Hospital. One, having been vaccinated in Infancy took no harm, and was discharged at the end of a fortnight, the other, unvaccinated, developed typical Small Pox at the end of 17 days.

SMALL POX.

The continuance of cases of this disease throughout the year, makes a further Report desirable.

Statistics.—

Total cases notified ... 120
Males 61 Females 59

All cases removed to the Rushcliffe Isolation Hospital.

Distribution of cases.—
East Ward 53
West Ward 26
North Ward 41

Number of Houses from which cases were removed 74
47 cases removed from 47 houses.
73 „ „ „ 27 „
ranging from 6 to 2 cases per house.

Ages and Sex of Cases notified:—

	Total	Male	Females
Under 1 Year ...	1	—	1
1— 5 Years ...	15	10	5
5—10 „ ...	19	11	8
10—15 „ ...	30	10	20
15—20 „ ...	24	13	11
20—25 „ ...	8	5	3
25—30 „ ...	9	4	5
30—40 „ ...	2	1	1
40—50 „ ...	7	5	2
50—60 „ ...	4	2	2
60 upwards ...	1		1
	120	61	59

Vaccination figures :—

Unvaccinated	102
Vaccinated	18

Of the latter, 11 whose ages ranged from 35 years to 68 years had been vaccinated in Infancy, the remaining 7 being vaccinated after exposure to Infection but not soon enough to ward off the disease, though in all these cases it was very mild in character and of a modified type.

Since the commencement of the Epidemic in 1923.

Total number of cases notified ...	445
Wholly unvaccinated cases	365
Cases vaccinated in Infancy only ...	52
„ „ after exposure to Infection	28
No. of houses invaded	280
1 case per house	192
More than 1 case per house	89

The disease this year had two distinct outbreaks, one in January lasting until April, and one in October until the end of the year. The intervening five months only produced 16 cases in all.

The January outbreak occurred in the East Ward among children (girls) attending the Butler's Hill Schools. I am convinced that it was due to an unrecognised or missed case attending that school prior to the Christmas Vacation.

Very few cases occurred in the other Wards during this time, and they were all 'Contacts' Again, on September 15th,—the last previously notified case being on August 11th, an employee at a Factory in the East Ward was found to have developed Small Pox, and a series of cases followed in all three Wards.

The disease presented the same peculiarities and divergences from type as in the two previous years. Most of the cases were of a mild type, though some severe confluent cases did occur. All cases made satisfactory recoveries.

As regards Non-Notifiable Infectious Diseases. I just observe that Measles, Whooping Cough, and Influenza were all very prevalent during the closing months of the Year.

CASE RATES OF CERTAIN INFECTIOUS DISEASES PER 1,000 LIVING:—

	England & Wales.	Hucknall.
Small Pox	0·14	6 81
Scarlet Fever	2·36	1·02
Diphtheria	1·23	0·17
Enteric Fever	0·07	0·00
Puerperal Fever	0.06	0·11
Erysipelas	0·39	0 34

TUBERCULOSIS.

Age Periods.	New Cases*				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary.		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 ...	...	...	...	...	...	...	...	...
1— 5 ...	...	...	1	...	...	...	1	...
5—10 ...	1	3	...	2	...	...	...	...
10—15 ...	...	3	...	1	...	1	...	...
15—20 ...	3	...	1	1	1	1	...	...
20—25 ...	1	2	...	...	1	...	...	...
25—35 ...	2	5	...	...	1	3	...	...
35—45 ...	1	1	...	...	2	1	...	...
45—55 ...	2	...	...	...	...	...	...	...
55—65 ...	...	...	...	...	...	...	...	...
65 upwards ...	...	...	...	...	...	...	...	...
Totals ...	10	14	2	4	5	6	1	—

*New cases are to include all Primary Notifications and any other NEW cases of Tuberculosis coming to the knowledge of the M.O.H. during the Year.

5 cases notified this year have died.
5 „ „ 1924 „ „
1 case „ 1922 has „
1 „ „ 1914 „ „

Ratio of Non-Notified Tuberculosis Deaths, to total Tuberculosis Deaths is as 0 is to 12.

Notification is efficient.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

One Notice has been served under article 5. No other action has been necessary.

TABLE XV.—Showing Monthly Notifications of Infectious Diseases.

Disease.	January	February	March	April	May	June	July	August	September	October	November	December	Totals
Small Pox ...	31	12	4	13	5	5	2	3	1	20	13	11	120
Scarlet Fever ...	4	4	...	2	...	1	2	2	2	..	1	...	18
Diphtheria ...	...	1	..	...	1	..	...	1	...	..	..	...	3
Pneumonia ...	4	4	7	2	1	2	3	1	3	4	1	6	38
Puerperal Fever	...	...	...	...	...	...	1	...	1	...	...	...	2
Erysipelas ...	1	...	...	..	...	...	1	...	1	3	...	..	6
Respiratory Tuberculosis	5	2	1	3	3	1	...	...	3	3	2	1	24
Other forms of Tuberculosis	1	...	...	1	3	...	...	1	..	...	...	...	6
Chickenpox ...	3	..	12	6	5	8	16	11	4	14	17	11	107
Ophthalmia Neonatorum	...	...	..	...	1	...	1	...	...	...	..	...	2
Totals ...	49	23	24	27	19	17	26	19	15	44	34	29	326

TABLE XVI.—Cases of Infectious Disease notified during the year 1925.
Hucknall Urban District.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.													Total cases notified in each Locality.			Total cases removed to Hospital	Total Deaths.
	At all Ages.	At Ages—Years.																
		Under 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 35.	35 to 45.	45 to 65.	65 and upwards.	East Ward	West Ward	North Ward		
Smallpox	120	1	1	3	6	5	19	32	22	18	4	8	1	53	26	41	120	...
Scarlet Fever	18	1	...	...	1		8	6	2	...	...	...	...	6	10	2	...	...
Diphtheria	3	...	...	...	1	...	2	...			...	...	...	1	1	1	...	...
Pneumonia	38	1	2	...	...	4	6	2	5	8	1	5	4	14	17	7	...	...
Puerperal Fever	2	...	...		...	...	...	...	...	2	...	...	...	...	2	...	1	1
Erysipelas...	6	...	...	...	...	...	...	..	..	...	2	4	...	2	3	1	...	...
Respiratory Tuberculosis	24	..	...	..	...	...	4	3	3	10	2	2	...	9	8	7	15	11*
Other forms of Tuberculosis...	6	...	...	...	...	1	2	1	2	...			...	4	1	1	...	1
Chickenpox	107	10	4	10	9	7	58	8	.	1	..	...	...	39	43	25	...	...
Ophthalmia Neonatorum	2	2		...	...	...	...	...	...		...	...	...	2	...	...	...	...
Totals	326	15	7	13	17	17	99	52	34	39	9	19	5	130	111	85	136	13

* { 4 deaths in cases notified this year.
{ 7 " " " " previous years.

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

TABLE XVII.—Showing Notifications of Infectious Diseases during the Years 1920-1925 inclusive.

Disease.	1920	1921	1922	1923	1924	1925	Totals
Small Pox ...	...	...	1	132	193	120	446
Scarlet Fever...	44	16	15	31	14	18	138
Diphtheria ...	18	4	4	3	4	3	36
Pneumonia ...	39	29	45	38	36	38	225
Puerperal Fever	...	...	1	3	3	2	9
Respiratory Tuberculosis	20	15	22	22	26	24	129
Other forms of Tuberculosis	5	7	1	5	4	6	28
*Chicken Pox ...	...	50	62	60	111	107	390
Ophthalmia Neonatorum...	2	...	...	1	2	2	7
Enteric Fever...	...	...	...	...	1	...	1
Encephalitis Lethargica	...	1	...	...	2	...	3
Malaria ...	9	1	3	1	...	...	14
Acute Poliomyelitis...	...	...	...	...	1	...	1
Erysipelas ...	4	...	9	8	7	6	34
Totals ...	141	123	163	304	404	326	1461

*Made compulsorily notifiable September, 1921.

Maternity and Child Welfare.

The Lady Health Visitor, Miss Harwood submits the following report :—

Number of Births notified	419
„ „ „ unnotified	3
Notifications from Midwives	412
„ „ Doctors	7
Number of cases attended by Doctors alone ...	14
„ „ „ „ „ Midwives alone	330
„ „ „ „ „ Doctors and Midwives	45
„ „ „ in which Midwives sent for Medical help	30
Number of Still Births	13
„ „ Premature Births	7
„ „ Twin Births	3
„ „ Infants removed to other districts	17
„ „ Infants transfered to Hucknall ...	11
„ „ 1st Visits	422
„ „ re visits	1128
„ „ Visits to Children between 1-5 years	1307
„ „ Visits to Expectant Mothers ...	183
„ „ „ in cases of Measles ...	121
Total Visits	3161

At the Infant Welfare Centre.

Number of Children attending		350
under 1 year ...	239	
over 1 „ ...	111	
Total number of weights recorded :—		
under 1 year ...	1360	
over 1 „ ...	496	
Number of Expectant Mothers attended ...		10
and subsequent visits to these		30

Among Infants attending the Centre, only 1 death occurred.

Average attendance, Mondays ...	21
Tuesdays ...	21

The Centre has been well attended during the year. During the National Baby Week, a Fete was held in Titchfield Park, which proved most successful. Prizes were given for regular attendance at the Centre. Several members of the

Local Authority were present, and the Medical Officer of Health gave a short address on Welfare Work generally, laying special stress on the need for Ante Natal supervision.

The work has been carried out in the usual manner during the year. Measles, Chicken Pox, and Whooping Cough have been prevalent, the latter especially so during December.

On the other hand there was very little Summer Diarrhœa, which I attribute largely to the fact that Breast feeding is the rule here. A very small proportion of infants are artificially fed from Birth, and in these cases Cow's Milk is the food generally used.

Yours faithfully,
MISS A. HARWOOD.

A perusal of the foregoing report shows clearly that the Centre is becoming increasingly popular. The attendance is on the up grade; of infants under one year, over 62% attend. Amongst these infants there has only been one death during the year, and this was due to Pneumonia. During the five years 1921-1925, the number of deaths among infants attending the Centre has been 1, 1, 2, 2, 1. During the same period, Infant deaths—excluding those under 1 month—have totalled 31, 14, 15, 22, 13, These figures are remarkable and afford striking testimony to the valuable work carried on at this Centre. I also draw your attention to the large increase in the number of visits to Expectant Mothers.

This imporant part of the work is capable of considerable increase, and I think for a district of this size, the best means of increasing Ante Natal Supervision is to ask the co-operation of Doctors and Midwives practising in the district.

My own work, at the Centre is purely consultative; any case requiring treatment is referred to the parents' Medical attendant. In addition to the routine examination of all infants brought to the Centre advice has been given for the following conditions. Irregularities of diet, Marasmus, Constipation, Skin rashes, Otitis, Adenitis, Herniæ, Dentition, Deformities, Muscular Wasting, and Phimosis. This part of the work has shown a decided increase during the year.

The Maternity and Child Welfare Report shows the arrangements for attending to the health of Expectant and Nursing Mothers and children under 5. Reference has already been made (see under General provision of Health Services for the area) to Maternity Homes, Hospitals, etc.

Maternal Mortality. Two deaths reported during the Year. One due to Obstructed Labour, and one to Pneumonia following Puerperal Sepsis. Both deaths took place in the Nottingham General Hospital.

Investigations re Still Births show that the majority are due to Prematurity, but the reasons for this are not easy to find out. Regarding Infant Deaths, the only comment I have to make is that "Injury at Birth" is being more frequently recorded as a cause of Death. I am inclined to think that the present day Mothers are partly responsible for this. Instrumental delivery is too often resorted to at their request, not because it is necessary, but because it affords a ready means of terminating labour. The possible injury to the child by the premature use of Forceps is not sufficiently insisted on.

As regards the Voluntary Centre in connection with the District Nurses Association, I can only remark that it has no place in the Local Authority's scheme, as their Committee refuse to co-operate in any way with the Local Authority.

With regard to various Infectious Diseases of Parturient Women, infants and young children, reference can be made to the section of this Report dealing with Infectious Diseases generally.

OPHTHALMIA NEONATORUM.

Cases.			Vision un-impaired	Vision impaired	Total Blind-ness	Deaths
Notified.	Treated.					
2	At Home	Hospital O.P. 2	2	0	0	0

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

1.—INSPECTIONS.

Premises.	Inspections.	Notices.
Factories	62	0
Workshops	14	25
Workplaces	11	0
	87	25

2.—DEFECTS.

	Found.	Remedied.
Want of Cleanliness	0	0
„ „ Ventilation	5	5
Other Nuisances	9	9
Sanitary accommodation—		
Insufficient	6	6
Unsuitable and defective ...	3	3
Not separate for sexes ...	2	2
	25	25

3.—HOMEWORK.

Nature of work, Wearing Apparel, etc.
Lists from Employers twice a year.

Lists ...	7
Outworkers ...	32
Notices ...	0

4.—REGISTERED WORKSHOPS.

Hosiers	...	...	15
Milliners	...	...	13
Tailors	...	...	10
Boot Repairers	...	...	15
Shetland Goods	...	...	12
Bakers	...	...	11
Cigar Makers	...	...	1
Others (various)	...	...	21
			98

5.—OTHER MATTERS.

Notified by H. M. Inspector 9
" to " " 2

Of Notices received from H. M. Inspectors
2 were notices of Occupation of Workplaces.
7 were notices re defects remediable under Public Health Acts.

5 relating to Closet Ventilation.
2 " " " Accommodation.

All have been remedied.

I have no special comment to make as regards the administration of the Act. Matters have gone smoothly, all defects have been remedied, and no prosecutions have been necessary. In fact the relationship between Factory Owners and the Health Officials has become more cordial with beneficial results. I just draw attention to the diminishing number of Outworkers, who numbering 115 in 1920, have dropped to 32 this year.

WALTER GARSTANG,
Medical Officer of Health.