Library

BOROUGH OF HYTHE, KENT

ANNUAL REPORTS OF MEDICAL OFFICER OF HEALTH

AND CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1958

BOROUGH OF HYTHE

Annual Reports of the Medical Officer of Health and Chief Public Health Inspector for the Year 1958

Mr. Mayor, Aldermen and Councillors,

I have the honour to present to you my Annual Report for the year 1958.

Population

The Registrar-General's estimate of the mid-year Home Population of the Borough was 9,820 - an increase of 90 over that of the previous year.

Birth Rate

The number of live-births was 120 (56 male, 64 female), an increase of 17 over the previous year, and the crude birth-rate was accordingly 12.20; when the Registrar-General's comparability factor is applied, which is computed from a population standardised for age and sex distribution the adjusted rate becomes 14.76 and is an index of the preponderance of elderly residents in the Borough; that for England and Wales was 16.4.

Stillbirth Rate

This rate was nil, as there were no still-births in the Borough throughout the year. The rate for England and Wales was 21.6.

Infant Mortality Rate

Two infant deaths were registered, both from unavoidable causes, viz;

(1) Prematurity and Atelectasis (failure of lung to expand at birth)
(2) Prematurity and Mongolism

The infant mortality rate was accordingly 16.67, in comparison with that of 21.6 for England and Wales. In 1901 the rate was 138 per 1,000 live-births in England and Wales and the comparatively low rate of today, although not yet ideal, reflects the great progress that has been achieved.

Maternal Mortality Rate

It is noteworthy to record that this rate was again nil, as there were no deaths from Pregnancy, Childbirth and Abortion. In general terms, this nil rate, as with the nil stillbirth rate, is a measure of the careful ante-natal supervision and of the obstetric skill exercised by Practitioners, Midwives and Consultants.

Death Rate

The total number of deaths from all causes was 137 (70 male, 67 female) and the crude death rate was 13.95, which when adjusted by the Registrar General's Comparability Factor, as for births, becomes 9.90 in comparison with that of 11.7 for England and Wales.

As would be anticipated, the chief cause of deaths was amongst the aged from Heart and Vascular lesions, which are usually the penultimate causes of death. The total number was 85 from these causes.

Of this total, Coronary Thrombosis caused 23 deaths or 27%, the ages at death ranging from 55 to 88 years. It has been postulated that prolonged emotional stress and excessive smoking are precipitating factors, but the real cause or combination of causes, is still obscure.

Predominating as the second cause of deaths, as also anticipated, was Cancer, the total number having been 23. The majority of these were amongst the aged.

Cancer of the Lung caused five of those deaths, all rather significantly in males whose ages at death ranged from 59 to 76 years. The hypothesis that excessive smoking is a primary or contributory cause has many eminent advocates.

There was no unusual incidence amongst the remainder of the deaths, and there was no death from Infectious Disease, which would have been regarded as recently as fifty years ago as being in the nature of a miracle.

Infectious Diseases

Modern methods of prevention, control and treatment have reached an advanced stage, particularly and fortunately against the most serious of these diseases, with the exception of winter epidemic Influenza, for which however a protective vaccine may in the near future be prepared.

Acute Poliomyelitis

It is noteworthy that no case of this dreaded disease occurred within the Borough during the year.

During the year 1,299 children and others were inoculated against the disease.

There is firm ground for optimism that vaccination will create an effective barrier against its prevalence and that it may eventually be eliminated as effectively as immunisation has eradicated Diphtheria.

Scarlet Fever

Five sporadic cases of this disease occurred. All were mild but two were admitted to Hospital for social reasons. Today, this is not the dreaded disease that it was in the last Century and methods of prevention, control and treatment are highly successful.

Whooping Cough

A small outbreak of this rather distressing illness occurred thirty-one cases having been notified. It is hoped that the new vaccines being used to protect children will prove to be effective. Its chief complication, Bronch-pneumonia, occurs infrequently. Every precaution should be taken to shield infants from infection as they are very vulnerable to Broncho-pneumonia and collapse of the lung.

Measles

There was also a small outbreak of this disease, 38 cases having been notified. Broncho-pneumonia, which is also the chief complication, occurs infrequently, and Otitis Media still less infrequently.

Erysipelas

One case of this disease was notified, but modern treatment is highly successful and mortality from it, which was frequent before the introduction of the Sulphonamides and Antibiotics is now rare.

Acute Encephalitis (Infective)

One case of this illness was notified, but no causal micro-organism was identified. The child made a complete recovery. The number of viruses capable of causing signd and symptoms of Encephalitis and of Meningitis, with a variable cerebro-spinal fluid picture appears to be increasing, but death is rare, and recovery complete.

Acute Primary or Influenzal Pneumonia

Only four cases of these illnesses were notified.

There were only two deaths from Primary or Secondary Pneumonias, which reflects the success of modern treatment. Before the introduction of the

Sulphonamides and Antibiotics the mortality rate, especially amongst the elderly, was comparatively high.

Malaria

One case of this illness was notified, but the patient was a soldier who had contracted the infection abroad.

None of the other serious infectious diseases occurred in the Borough throughout the year.

Tuberculosis

Two new cases of Respiratory Tuberculosis were notified, but there was no case of non-respiratory Tuberculosis. No death from all types was registered, which is a positive reflection of the success of modern treatment.

Methods of prevention, control and treatment have all reached an advanced stage.

The Borough is within a specified area in which all herds of cattle must be tuberculin-tested, and only Tuberculin-tested or Pasteurised milk can be sold within the Borough. The fact that there were no bovine cases of Tuberculosis may be attributed to this and to the 100% meat inspection so ably done by the Public Health Inspectors.

B.C.G. vaccination is offered to school-children before leaving school and is to be extended to other older age-groups.

The Mass Radiography Service is of great value in detecting latent or unsuspected cases of lung infection, who would sooner of later become open sources of infection to others. It is hoped that all open sources of infection with positive sputa will be found and successfully treated and that the disease will be eliminated entirely from the Country within the foreseeable future.

In conclusion, I would take this opportunity of thanking you for your interest and assistance of the work of the Department and also to express my appreciation to the staff for their efficiency and co-operation.

I am,

Your obedient Servant,

J. MARSHALL M.B., Ch.B., D.P.H.

Central Public Health Office,
1, Elwick Road,
Ashford, Kent.

Tel: No: Ashford 1485

SECTION A.

STATISTICAL AND SOCIAL CONDITIONS OF THE DISTRICT FOR

1958

Area:- 3,013 acres

Registrar-General's Estimate of:-

The Resident Population	9,820
Number of Inhabited Houses According to the Rate Books	3,297
Rateable Value at 1-4-58	£166,827
Sum Represented by a Penny Rate (Estimate 1958/59)	£655

SOCIAL CONDITIONS

The Borough of Hythe is largely a residential District, by the sea, and during the holiday months, attracts a large number of visitors. There are a few light industries, including a Brewery, a Laundry, a School of Infantry, and domestic trades. The standard of housing in the Borough has been maintained by the Council at a very high level due to long-term pre-war planning and as a consequence there are no slum clearance areas. There is little unemployment in the District and social conditions are generally very satisfactory.

EXTRACTS FROM VITAL STATISTICS

		Total	M.	F.		Hythe Borough	England and Wales
1.	Live Births	120	56	64	Birth Rate per 1,000 estimated resident population	12.20 (Adjusted rate 14.76)	16.4
	(a) Legitimate	116	53	63			
	(b) Illegitimate	4	3	1			
2.	Stillbirths	-	-	-	Rate per 1,000 total (live and still) births	Nil	21.6
	(a) Legitimate	-	-	-			
	(b) Illegitimate	-	-	-			
3.	Total live and still-births	120	56	64			
4.	Deaths	137	70	67	Death rate per 1,000 resident population	13.95 (Adjusted rate 9.90)	11.7
5.	Deaths from Pregnancy, Childbirth, Abortion	-	-	-	Rate per 1,000 (live and still) births	-	Not available
6.	Deaths of Infants Under One Year of Age	2	2	-	Rate per 1,000 live births	16.67	22.5
	(a) Legitimate	1	1	-	Rate per 1,000 legitimate live births	8.62	
	(b) Illegitimate	1	1	-	Rate per 1,000 illegitimate live births	250.0	
7.	Deaths of Infants Under Four Weeks of Age	2	-	-	Rate per 1,000 live births	16.67	16.6
	(a) Legitimate	1	-	-			
	(b) Illegitimate	1	-	-			

8. Illegitimate births per cent of total live births 3.33%

9. Deaths from Cancer (all ages) 23
Deaths from Whooping Cough (all ages) -
Deaths from Gastritis, Enteritis and Diarrhoea -
Deaths from Measles -

The following cases of Infectious Diseases were notified during the year.

Scarlet Fever	5
Whooping Cough	31
Acute Primary or Influenzal Pneumonia	4
Measles	38
Acute Encephalitis (Infective)	1
Malaria	1
Erysipelas	1

CAUSES OF DEATH IN HYTHE BOROUGH

DURING 1958

		Males	Females
	ALL CAUSES	70	67
1.	Tuberculosis, respiratory	-	-
2.	Tuberculosis, other	-	-
3.	Syphilitic disease	-	-
4.	Diphtheria	-	-
5.	Whooping Cough	-	-
6.	Meningococcal infections	-	-
7.	Acute Poliomyelitis	-	-
8.	Measles	-	-
9.	Other infective and parasitic diseases	-	-
10.	Malignant neoplasm, stomach	1	2
11.	Malignant neoplasm, lung, bronchus	5	-
12.	Malignant neoplasm, breast	-	1
13.	Malignant neoplasm, uterus	-	1
14.	Other malignant and lymphatic neoplasms	8	5
15.	Leukaemia, aleukaemia	-	-
16.	Diabetes	1	1
17.	Vascular lesions of nervous system	7	12
18.	Coronary disease, angina	12	11
19.	Hypertension with heart disease	-	1
20.	Other heart disease	15	17
21.	Other circulatory disease	6	4
22.	Influenza	-	1
23.	Pneumonia	2	-
24.	Bronchitis	2	1
25.	Other diseases of respiratory system	-	-
26.	Ulcer of stomach and duodenum	1	1
27.	Gastritis, enteritis and diarrhoea	-	-
28.	Nephritis and nephrosis	1	1
29.	Hyperplasia of prostate	1	-
30.	Pregnancy, childbirth, abortion	-	-
31.	Congenital malformations	1	-
32.	Other defined and ill-defined diseases	5	5
33.	Motor vehicle accidents	-	-
34.	All other accidents	1	2
35.	Suicide	1	1
36.	Homicide and operations of war	-	-

TUBERCULOSIS

New Cases and Mortality, 1958

Age Periods	New Cases				Deaths				Total Cases on Register			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0 ...	-	-	-	-	-	-	-	-	25	26	0	1
1 ...	-	-	-	-	-	-	-	-				
5 ...	-	-	-	-	-	-	-	-				
15 ...	1	-	-	-	-	-	-	-				
25 ...	-	-	-	-	-	-	-	-				
35 ...	-	1	-	-	-	-	-	-				
45 ...	-	-	-	-	-	-	-	-				
55 ...	-	-	-	-	-	-	-	-				
Total	1	1	-	-	-	-	-	-				

There were no deaths from Tuberculosis of patients who had not been notified as suffering from that disease.

IMMUNISATION AGAINST DIPHTHERIA, 1958

The following is a return of the number of children under the age of 15 years on 31st December, 1958, who had completed a course of immunisation at any time before that date (i.e., at any time since 1st January, 1944).

Year of Birth	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	Total
Last complete course of injections (whether primary or booster) 1954 - 1958	7	3	97	96	78	71	74	76	53	130	110	73	103	77	19	1,067
1953 or earlier	82	68	70	62	45	49	47	55	54	4	-	-	-	-	-	536

POLIOMYELITIS VACCINATION, 1958

The following table gives the numbers of persons resident in the district who received injections against poliomyelitis during the year ended 31st December, 1958.

Year of Birth	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	Others	Total
Given two injections	3	75	97	74	84	93	69	74	54	42	44	65	128	89	79	162	1,232
Given third injection.	-	-	9	5	6	5	4	7	4	6	5	12	-	-	-	4	67

IMMUNISATION AND VACCINATION

Diphtheria Immunisation, Whooping Cough Immunisation and Smallpox Vaccination figures for 1958.

Year of Birth	Diphtheria Immunisation		Smallpox Vaccination		Whooping-cough Immunisation
	Primary	Reinforcing	Primary	Revaccination	Primary
1958	19	-	37	-	39
1957	65	1	30	-	77
1956	14	-	1	-	14
1955	1	1	-	1	2
1954	2	7	-	-	-
1953	2	46	2	-	-
1952	-	5	-	1	-
1951	-	-	1	1	-
1950	-	-	1	-	-
1949	-	-	-	-	-
1948	-	1	-	1	-
1947	-	-	-	-	-
1946	-	1	-	-	-
1945	-	-	-	-	-
1944	-	1	-	-	-
Before 1944	-	-	4	3	-
Total	103	63	76	7	132

SECTION B.

GENERAL PROVISION OF THE HEALTH SERVICES IN THE DISTRICT

1. Public Health Laboratory Service, Preston Hall, British Legion Village, Maidstone.

This service is directed by the Medical Research Council for the Ministry of Health. Samples of water, milk, ice-cream and other foods are examined bacteriologically on behalf of District Public Health Departments.

A virological service for the study of viruses has also been established in this Laboratory.

2. Kent County Council, Laboratory Service, County Hall, Maidstone.

This laboratory provides a service for the chemical analyses of Food and Drugs.

3. Hospital Laboratory Service, The Royal Victoria Hospital, Folkestone.

This laboratory serves the Consultants in Hospital and the General Practitioners in relation to the examination of their patients.

4. Ambulance Service Station, Bouverie Road West, Folkestone.

This service is administered by the County Council and the above-named Station adequately provides for the requirements of the Borough. The establishment comprises 6 Ambulances, 5 Sitting-case Cars, with a staff complement of Station Officer and 17 men, all of whom are on a full-time basis. The Station and Ambulances are equipped with radio-telephony, which provides a means of instant inter-communication, particularly valuable in emergency.

5. The Child Welfare Centre, Prospect Road.

Sessions are held weekly on Tuesdays and Fridays from 2 to 4 p.m. A Medical Officer is in attendance on Tuesday afternoons. The services provided in these Clinics are complementary to those provided by the family Doctor who is concerned mostly with children who are suffering from illness. The Health Visitor provides the link between the Clinic and the homes of the children. Each child is examined at his/her first attendance and thereafter at regular intervals to ensure that there are no defects, of which the parents may not be aware, and that nutrition and growth are normal.

Immunisation against Diphtheria, and Vaccination against Poliomyelitis, Smallpox and Whooping Cough are all available in the Child Welfare Centre.

Various baby foods such as the Dried Milks and Vitamin products are sold at cost price to the mothers, which is of financial advantage to them.

It is unequivocal that the Child Welfare Service has been and is an invaluable agency in the prevention of infant deaths and in the promotion of positive health.

6. The Ante-natal Clinic, Prospect Road.

Sessions are held on the 1st and 3rd Tuesdays of each month and are supplementary to the ante-natal examinations done by the family Doctor and Midwife. These services have been invaluable to expectant mothers in the prevention of the dangerous complications that may beset pregnancy, and maternal deaths are now relatively rare.

7. The Home Midwifery Service

There is one Home Midwife on duty in the Borough, who works in close liaison with the Practitioners and with the Ante-natal Clinic

8. Home Nursing Services

Two Home Nurses are on duty. The majority of their cases are those in the chronic sick or aged and infirm group, who do not require Hospital in-patient treatment.

9. (a) The Dometic Help Service

The address of the office of the local Domestic Help Organiser is 26, Cheriton Place, Folkestone. This service has expanded rapidly since the inception of the National Health Service in 1948, and has become established as an essential health service on behalf of mothers who become ill and have no relations or neighbours able to do the work of the household and care for the children; by the relief of this anxiety the mother is more quickly restored to health and to her family. The service is also of great assistance to old and infirm or chronic sick persons, who would otherwise be obliged to break up their homes and be admitted to a Chronic Sick Hospital, in which there are insufficient beds to cope with the long waiting lists.

(b) The Family Help Service

Prior to the introduction of this service, it was necessary to remove children, particularly those under five years of age, to costly Children's Institutions from families in which the mother was absent due to severe illness, death, estrangement or desertion or other cause. The service is designed to provide help and care for the children whilst the father is at work, and the Domestic Help may be required to reside in the home, if the father is on night-work. The maximum period of help is for three months during which period the father is expected to make permanent arrangements for the care of his children.

The demand on this service is not considerable but when it is necessary it is of value in keeping the children at home, and also obviates expensive Institutional maintenance.

(c) The Evening Attendance Service

This service is occasionally required on behalf of old people for half to one hour each evening to assist them to retire for the night.

(d) The Night Attendant Service

This service is provided on behalf of persons of any age who are ill and who usually live alone. The helpers usually go at 10 p.m. and stay until 6 a.m. the following morning and attend each night until the patient recovers or dies or is admitted to Hospital. Assistance may also be given for several nights to relatives who are unable to be in attendance every night.

(e) Child Help Service

This domestic help service was introduced in 1957, and was designed to help the so-called Problem Families, the objectives being threefold; to raise the standard of living of these families, to improve the standard of Child Care and to prevent the break-up of the family.

10. Nursing Homes

1. The Hythe Nursing Home, 23, North Road, Hythe

This is a private Nursing Home in which there are twelve beds for maternity, surgical or medical patients and a modern fully equipped theatre, labour ward and nursery.

The fees are from 13 guineas per week.

2. Northendene Nursing Home, 91, Seabrook Road, Hythe

This Home provides accommodation for nine medical or chronic sick patients. The fees are from 6½ guineas per week.