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URBAN DISTRICT OF ILMINSTER.

To the Chairman and Councillors of the Ilminster  
Urban District.

Mr. Chairman and Gentlemen,

I beg to submit my Report for the year 1951.

Since it concerns a Festival Year I have thought it opportune to make reference to some of the progress made during the last twenty-five years, a period almost wholly covered by my able predecessor, the late Dr. C.C. Court, and a great deal of credit is due to him for the work referred to in the text.

The health of the people during the year has been good and the number of notifiable diseases seems to decrease annually. There is now no diphtheria and very few streptococcal diseases which were constantly occurring in the early '30s. The children are now bigger and stronger and compare favourably with those in any other area.

The National Health Act which came into effect in July 1948 was a social revolution in itself. It is still too early to say what effect it has had on the health of the nation as a whole but the enormous expense in which it has involved the country must surely emphasise the need for intensified preventative medicine. The old saying "prevention is better than cure" is still true.

The form of the Report is unchanged from last year.

I am,

Your obedient Servant,

A.M. McCALL

Medical Officer of Health.



URBAN DISTRICT OF ILMINSTER.

ANNUAL REPORT 1951.

SECTION A.

Statistics and Social Conditions of the Area.

Population.

The Registrar General gives the estimated population of Ilminster for the mid-year 1951 as 2,633. This is a slight decrease on last year. Appendix A, Table 1 shows the main statistics for the town.

Birth Rate.

The Birth Rate for the year was 15.9 per thousand, a slight increase on the previous year and compares favourably with the figure of 15.5 for England and Wales as a whole. Full details are shown in Appendix A, Table 2.

Death Rate.

The Death Rate was 10.6 per thousand, slightly less than last year and compares favourably with the figure of 12.5 for England and Wales as a whole. Appendix A, Table 3 shows full details of the causes of death. It will be seen that heart disease is again the greater killer but is closely followed by cancer.

Infant Mortality.

One infant died under the age of a year in 1951 but there were no still births.

Maternal Mortality.

I am pleased to say that there were no cases of maternal death in Ilminster during the year.

Social Conditions.

Your Social Services remained unchanged during the year and unemployment remained at a low level. 1930 was the last time when there was unemployment of any serious nature. By 1935 it had improved and since that time there have been very few persons not working regularly.

SECTION B.

The General Provision of Health Services in the Area.

Since 1948 when the National Health Service Act came into force, the majority of the Health Services in the area became the responsibility of the Somerset County Council. There has been no change in administration since. Last year the services were satisfactory.

### Maternity Services.

This work is largely carried out by the District Nurse. She carries out ante natal examinations and attends during the mothers confinement. When in need she consults the patient's private practitioner. Six weeks after the delivery of the baby the Nurse gives a post natal examination. She also attends the private practitioner's surgery when he so wishes. Any mothers requiring hospitalisation due to a previous obstetric history, complications arising during confinement or unsatisfactory housing, are sent to Yeovil or Taunton where maternity beds are available.

### Infant Welfare.

A Child Welfare Clinic is held weekly. Every fortnight Dr. Eames is in attendance and on that day transport is provided for 20 or 30 mothers who are brought in from the surrounding villages. 1,388 attended during the year, there were 178 medical consultations. No diphtheria immunisations or vaccinations are done at this clinic. The Ministry of Information showed films of special interest to the mothers at three of the sessions. The year was one of steady progress. Full details will be seen in Appendix B, Table 1.

### Immunisation.

This is carried out largely by private practitioners for the children under five years and by myself in the schools. It is interesting to note that in 1935 and 1936 the Ilminster Girls' Grammar School had to be closed owing to outbreaks of Diphtheria. In 1939 the immunisation campaign commenced and progressed steadily. Apart from 1943 and 1944 when some un-immunised adults were notified, there have been no further cases of Diphtheria in the Urban District of Ilminster. This is ample proof of the efficacy of the campaign here.

### Vaccination.

Vaccination is carried out by the private practitioners. This is only done on request and each year there is an increasing number of un-vaccinated people in the town. As this proportion increases so the danger of an outbreak similarly rises. Details are shown in Appendix B Table 2.

### Domiciliary Nursing.

This is yet another one of the District Nurses duties. I do not think it is generally known how much good work the District Nurse does in a year. During 1951 the District Nurse made approximately 3,724 visits to homes for various reasons. There were twenty-five home confinements and a further sixteen hospital cases whom she nursed following their return home. It will be quickly realised how invaluable her work is and often how little appreciated.

### Health Visits.

The health visiting for the town is done by Mrs. Pitt and the District Nurse. They attend all school medical inspections, follow up all cases with defects, visiting the home and advising parents on necessary treatment. Mrs. Pitt also attend Out Patients at the Tuberculosis Clinic in Chard and visits patients in their own homes.

### Home Help.

This service is organised by the County Council and the Area Organiser for Ilminster resides in Taunton. She visits each house in response to each request for help, assesses the need and then arranges for the Home Help to attend as necessary.

### Ambulance Service.

During the year the ambulance dealt with 199 calls, involving a distance of 4890 miles. The middle of 1939 was the first time in which Ilminster had an ambulance of its own. Previously they had depended on the Ambulance of the British Red Cross Society in Taunton. The Ilminster Ambulance is under Superintendent Seward and he is most anxious that men interested in first aid and ambulance work should volunteer to join his branch as he is finding great difficulty in satisfying the call for the ambulance during the day-time. With only a limited number of men at his disposal it means that they are away from work three or four times a week and this often involves protests from their employers.

### National Assistance.

It was not found necessary to use the Act at any time during the year.

### School Medical Service.

This is the responsibility of the Somerset County Council Education Committee and I as their representative have visited all the schools in the area during the year. Details of my inspections are shown in Appendix B, Table 3. The health of the children has been good, there having been no case in which it was necessary to close a school. The standard of the milk provided for the children has improved and the school meal service has been satisfactory.

### School Dental Service.

Unfortunately there has been no change for the better during the year and no inspections have been carried out. Dates on which the last routine dental inspections were done are shown in Appendix B, Table 3.

### Ophthalmic Services.

Children have been referred to the County Oculist and he has dealt with all cases of defective vision at local centres. The supply of glasses has now become satisfactory and there have been no periods of abnormal waiting.

### Orthopaedic Services.

Clinics are held in Taunton and where necessary transport has been provided for children attending County Orthopaedic Clinics.

## SECTION C.

### Prevalence of and Control over Infectious Diseases.

A summary of the diseases notified during the year will be found in Appendix C Table 1.

There were mild outbreaks of measles and whooping cough, otherwise there was very little infection in the town. There was one mild case of Anterior Poliomyelitis in an adult, there was no paralysis and the patient made a satisfactory recovery.

It is interesting to note that the Medical Officer of Health in his Report for 1930 feared that the increased use of motor transport would increase the risk of spreading infectious diseases. In actual fact, though children are now brought into the Secondary Modern School from outlying districts and the population has increased, these fears have not been realised.

There were no cases of influenza, in fact the last serious attack the town suffered was in 1937.

There was one case of particular interest occurring in the town about the middle of the year. A diagnosis of lymphocytic choriomeningitis was made.

There is strong evidence that this infection derives from domestic mice. An immediate effort was made to collect as many mice as possible from the patient's home. A block control was carried out in the immediate vicinity of the house and several mice sent to the laboratory for further investigation. In this particular case the mice caught were not found to be infected. However, the effort was not wasted as the efficient way in which the Rodent Operator went about his work and the speed with which it was carried out showed that the preventative health services were functioning in an efficient manner.

1951 marked the first visit of the Mass Radiography Unit to Ilminster. Full details can be seen in Appendix C Table 2. It will be seen that a total of 728 people attended for X-Ray and of that number only 17 were recalled for further investigation. There were no active cases of Tuberculosis but five were found to have inactive lesions. Five other cases were found to have non-tubercular conditions and were referred to their doctors for treatment. It is hoped that the Unit will visit the district annually in future and in this way people will be enabled to have regular chest X-Rays and early detection of diseases is of course one of the most important factors in dealing with conditions such as Tuberculosis.

## SECTION D.

### A. Sanitary Circumstances.

#### Climate.

In my report for 1950 I stated that the weather had been bad but 1951 was considerably worse, extremely wet most of the year. Lack of sunshine no doubt accounted for the spate of coughs and colds in the later months of the year.

#### Water Supply.

The supply was satisfactory in quality throughout the year. At times the quantity was not sufficient owing to the fact that we are committed to supply Chard Rural District Council with water. Regular sampling was carried out details of which will be found in Appendix D Table 1. This Table also gives details of the supply. There was only one small extension to a housing estate.

### Drainage and Sewerage.

The method of sewage disposal is unchanged and is not satisfactory. A scheme for the proper disposal of the town's sewage is absolutely necessary and plans for such a work should be put in hand without delay.

In the future soil and surface water sewers in High Street and Brewery Lane, also extensions for the housing estates will be necessary.

### Public Cleansing.

This is done by Direct labour and refuse is collected once a week. During the year there was some trouble with flies at the tip and it was discovered that some unauthorised tipping had taken place. The Surveyor completely reorganised the system and sealed off a considerable portion of the tip face. Then by exercising stringent control and regular sealing, the trouble was overcome.

### Rodent Control.

Routine inspections were carried out during the year test baiting of the sewers was done regularly. The survey of the whole town progressed.

### B. Factories and Workshops.

These were inspected during the year, details will be found in Appendix D Table II. Four cases of dermatitis occurred, due to the handling of a particular kind of fuel in a local coal yard. I took up the case with the National Coal Board and discovered that the cause was due to pitch used as a binding agent in the making of this particular fuel. It was obvious that the suppliers had not informed the retailers of the possible danger and following my complaint full instructions were forwarded and no further cases occurred.

### Housing.

Appendix D Table III shows the progress made during the year and total number of houses erected since the war. It also shows that despite the programme for 1952 there are still a large number of applicants for council houses, many of them living in dwellings which are unfit but owing to the present difficulties no formal action has been taken. Of the 850 houses in the district, 125 are owned by the Local Authority. This is not an excessive number, but if the present tendency continues it will not be long before the proportion owned by the Council will approximate with the number privately owned, that is an economically unsound position. It is hoped that more private enterprise licences will be available in the next year or so.

### C. Inspection and Supervision of Food.

Milk. There are four registered distributors and three registered dairy premises in the area, one supplementary licence for a distributor whose dairy is outside the area was issued during the year. No sampling was carried out by the Sanitary Inspector, this being undertaken by the County Council.

Ice Cream. There are no manufacturers and retailers or manufacturers in the area. Five registered premises sell pre-packed products. No sampling was done.

Meat. There are no slaughter houses in the area. The method by which meat is transported into Ilminster was investigated and the vehicles found to be clean and all freshly killed meat satisfactorily hung. Only frozen meat which is jacketed was laid on the deck of the lorry. Offal was carried in suitable special containers.

Bye-Laws under Section 15 Food and Drugs Act, 1938 came into operation on 14th August, 1950 and inspections and informal suggestions have been carried out under these bye-laws.

APPENDIX A TABLE 1.

Registrar General's estimate of population mid 1951	.....	.....	.....	2,633.
Area	.....	.....	.....	531 acres.
Number of inhabited houses at the end of 1951 according to the Rate Book	.....			850.
Rateable Value	.....	.....	.....	£14,400.
Sum represented by a penny rate	.....			£56.

APPENDIX A TABLE 2.

ILMINSTER 1951.

BIRTH RATE.		M	F
Live Births.	Total	22	20
	Legitimate	21	20
	Illegitimate	1	-
Still Births.	Total	-	-
Deaths of infants under 1 year	Total	1	-
	Legitimate	1	-
	Illegitimate	-	-

APPENDIX A TABLE 3.

TABLE OF DEATHS.		M	F
	Total		
	28	12	16
Death Rate	10.6 per thousand.		
<u>Causes of Death.</u>		M	F
Heart Disease.	10	5	5
Diseases of the Circulation.	4	2	2
Cancer (all forms)	9	3	6
Pneumonia.	1	1	-
Parasitic Disease.	1	1	-
Nephritis.	1	-	1
Accidents.	1	-	1
Ill defined.	1	-	1



APPENDIX B TABLE 1.

Ilminster Infant Welfare Centre

Statistics for the twelve months ended 31st December 1951.

1. Number of children who first attended during the year and who on the attendance were:-
  - (a) Under 1 year of age ... 59
  - (b) Over 1 year of age ... 3
2. Number of children in attendance at end of the year who were then:-
  - (a) Under 1 year of age ... 41
  - (b) Over 1 year of age ... 107
3. Number of children who attended the Centre during the year ... 1382.
4. Total attendances during the year made by:-
  - (a) Children under 1 year ... 646
  - (b) Children over 1 year ... 736
5. Average attendances per session of:-
  - (a) Children under 1 year ... 13
  - (b) Children over 1 year ... 14.5
6. Number of individual mothers who attended during the year ... 131.
7. Total number of sessions held:-
  - (a) With Medical Officer ... 26
  - (b) Other sessions ... 25
  - (c) Number of children examined by Doctor ... 98
  - (d) Total number of medical consultations... 178

APPENDIX B TABLE 2.

VACCINATIONS.

Age Groups	Under 1		1 to 4		5 to 14		15 or over		Totals	
	P	R	P	R	P	R	P	R	P	R
	29	0	4	0	1	2	1	13	35	15

P = Primary Vaccination.  
R = Re-Vaccination.

APPENDIX B TABLE 3.

Ilminster Schools.

Name of School.	No. In- spected	No. Im- munised	Date of Inspection	Date of last Dental Insp- ection.	Child- ren having milk	Child- ren having dinners.
Ilminster Boys'.	26	-	9.3.51.	Sept: '48.	97.82%	66.66%
Ilminster Boys' Grammar.	41 32	- -	8.6.51. 30.11.51.	Not done.	58.82% 100%	58.82% 67.55%
Ilminster Girls'	21 31	- -	14. 3.51. 14.12.51.	June 1948.	100% 100%	63.27% 70.37%
Ilminster Infants.	50	-	20. 4.51.	June 1948.	94.34%	47.17%
Ilminster Secondary Modern.	69 61	-	13. 6.51. 5.12.51.	July 1948.	28.08% 47.95%	39.15% 53.9%
Total	- <u>331</u>					

APPENDIX C TABLE 1.

Infectious Diseases.

Acute Poliomyelitis.	1
Acute Primary Pneumonia	1
Measles.	35
Whooping Cough.	11

ANALYSIS OF CASES NOTIFIED.

	Under									
	1 yr.	1 - 2	2 - 3	3 - 4	4 - 5	5 - 10	10-15	15-20	20-35	35-45
Pneumonia										
Measles.	2.	1.	2.	2.	25.	1.				1.
Whooping Cough	1.	3.	1.	1.	4.	1.				
Poliomyelitis								1.		
	45-65	65 +	Age Unknown.							
Pneumonia.	1.									
Measles.				1.						

Tuberculosis.

New Cases.

Deaths.

Age Group.	Respiratory.		Non-Respiratory.		Respiratory.		Non-Res.	
	M.	F.	M.	F.	M.	F.	M.	F.
-1.								
1 -5.								
5 -15.			1.					
15 -25.								
25 -35.								
35 -45.					1.			
45 -55.						1.		
55 -65.								
65 +								
Total.	1	-	1	1	1	-	-	-

APPENDIX C TABLE 2.

MASS RADIOGRAPHY.

Report of survey at Ilminster, October, 1951.

		Male	Female	Total
<u>Miniature Films.</u>	Total.	391	337	728
<u>Large Films.</u>	Total recalled	13	4	17
	Did not attend.	2		2
	Normal.	3		3
	Significant.	7	3	10
	Under observation.	1	1	2

Tuberculosis Conditions.

		Active		Nil.	Disposal.			
		M	F	Total	N.A.	Dr.	Disp.	San.
<u>Inactive</u>	<u>Primary</u>							
	Lesion.	1		1		1		
	<u>Post Primary</u>							
	Lesion.	1	3	4	2	2		
	Total	2	3	5	2	3		

N.A. = No action  
 Dr. = Patient's own doctor.  
 Disp. = Under observation at Dispensary.  
 San. = Sanatorium treatment required.

Analysis of Tuberculous Cases.

<u>Inactive Tuberculosis</u>	Under 15	15-24	25-34	35-44	45-59	60+	Total
Male.			1		1		2
Female.					3		3
Total			1		4		5

Non-Tuberculous Conditions.

	Male	Female	Total
Bronchitis and Emphysema.	1		1
Emphysema.	1		1
Bronchiectasis.	2		2
Foreign Body.	1		1
Total	5		5

APPENDIX D TABLE 1.

WATER SUPPLY.

RAW WATER.

TREATED AFTER GOING INTO SUPPLY.

<u>Bacteriological</u>		<u>Chemical</u>		<u>Bacteriological</u>		<u>Chemical.</u>	
Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory.	Satis- factory	Unsatis- factory.
-	3	-	-	6	-	1	-

Water Supplies from Public Mains:-

DIRECT TO THE HOUSES

BY MEANS OF STANDPIPES.

<u>No. of Dwelling Houses</u>	<u>Population.</u>	<u>No. of Dwelling Houses.</u>	<u>Population.</u>
600	1,850	250	750

No. of wells closed:- Nil.

No. of houses relying on well supplies:- Nil.

APPENDIX D TABLE 2.

Factories Act 1937.

Inspections for the purpose of provisions as to Health (including Inspections made by the Sanitary Inspector)

Premises	Number on Register	Inspections	Written Notices	Occupiers Prosecuted
(1) Factories in which Sections 1,2,3,4 and 6, are to be enforced by Local Authorities.	17.	38.		
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority.	13.	20.		
Total	<u>30</u>	<u>58</u>	-	-

No. of cases in which defects were found. 3.  
 No. of cases in which defects found were remedied. 3.

APPENDIX D TABLE 3.

Housing.

	Houses erected during the year		Houses in course of erection.		Conversion to Flats or Dwellings.		Temporary such as Army Huts. etc.
	Perm.	Temp.	Perm.	Temp.	Perm.	Temp.	
Local Authority.	10	-	10	-	-	-	-
Private Enterprise.	2	-	2	-	-	-	-
Total	<u>12</u>	-	<u>12</u>	-	-	-	-

Inclusive of those above built during the year:-

Total number of houses in District ..... 950  
 " " " " owned by Local Authority ... 125

No. of post war houses erected to 31st December, 1951.

	By Local Authority.	By Private Enterprise
Programme for 1952.	60 50	15 16
(a) No. of unfit houses in the District but on which no formal action has been taken.		150.
(b) No. of houses that have been condemned under the Housing Acts as totally unfit.		4.
(c) No. of houses occupied under (a)...150 Under (b)... 4		15.
(d) No. of houses found overcrowded.		

Houses required.

(i) To replace those unfit under (a) ... 165 under (b) ... 4  
 (ii) To overcome unsatisfactory conditions e.g. two families living in same house but not included in (i) or (ii) 20.

Total number of applicants for Council Houses at the end of the year. 188.

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