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ISLE OF ELY COUNTY COUNCIL.

Annual Report

on the

PUBLIC HEALTH

of the

Administrative County of the

Isle of Ely,

For the Year 1930,

With Summary of Reports of District
Medical Officers of Health,

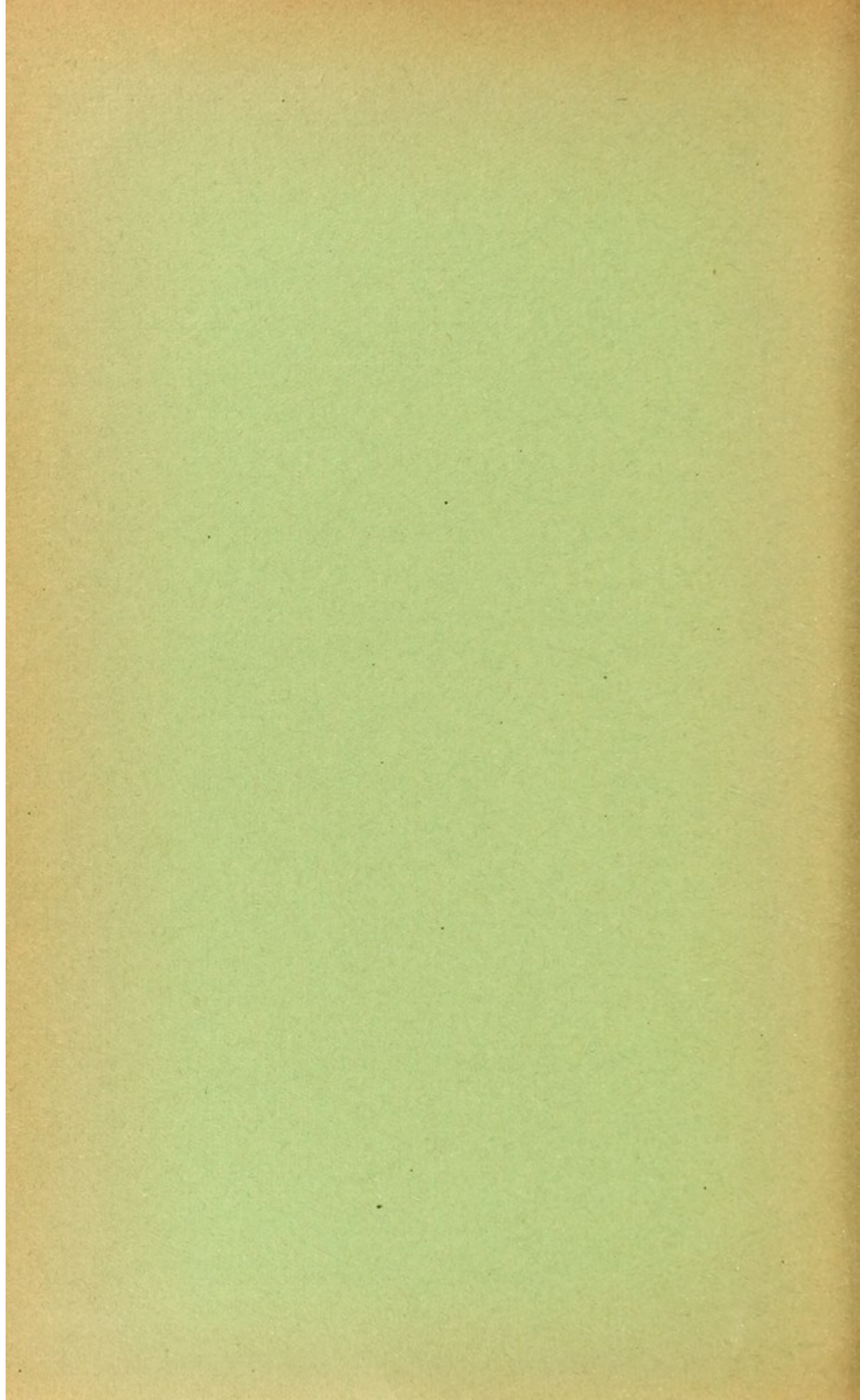
by

R. FRENCH, B.A., M.D., D.P.H.

LITTLEPORT, ISLE OF ELY:

G. T. WATSON (LATE BARBER), PRINTER, VICTORIA STREET.

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ISLE OF ELY COUNTY COUNCIL.

Public Health Committee.

BURMAN, A. S.	MORTON, F. C.
CLARKE, SIR W. H.	NEWMAN, A. E. T. (Rev.)
CLAYTON, C.	PASHLER, W.
CUTLACK, W.	PEAKE, T.
DANIELS, L. V.	PEATLING, H. F. M.
DENNIS, J. H.	RICKWOOD, A. S.
HARVEY, E. S.	ROWE, W. E. H.
LAXON, M.	WALTON, S. S. (Rev.)
LUDDINGTON, L. H.	WEST, SIR W. W.
MARRISON, A. W. (Dr.)	WHITTOME, H. A.
MERRYWEST, J. W.	

Number 22. Quorum 5.

For its Sanatorium Benefit Sub-Committee, Mr. W. V. FUNDREY, of Wisbech, Chairman of the Isle of Ely Insurance Committee, is a Co-opted Member.

Maternity and Child Welfare Committee.

All the Public Health Committee and the following Co-opted Members:—

Mrs. COLLINS CLAYTON, Wisbech.
Mrs. S. S. WALTON, St. John's Rectory, March.

Number 24. Quorum 5.

Mental Deficiency Committee.

All the Public Health Committee and the following Co-opted Members:—

Mrs. COLLINS CLAYTON, Wisbech.
Mrs. S. S. WALTON, March.

Number 24. Quorum 5.

Staff.

County Medical Officer of Health.

ROBERT FRENCH, B.A., M.D., D.P.H.

Assistant County Medical Officer of Health.

R. C. GUBBINS, M.B., CH.B., D.P.H.

Health Visitors and School Nurses.

(a)—*Council Officials (whole-time).*

Miss M. E. CLIFFE, Whittlesey.

Miss H. LAWRENCE, Littleport.

Miss H. L. MORRIS, Ely.

Mrs. M. MEACHAM, March.

Miss A. MORT, Chatteris.

Miss E. T. TAYLOR, Wisbech.

(b)—*Employed by District Nursing Associations (part-time).*

The Nurse or Nurses at:—

Chatteris	March
Doddington	Outwell
Gorefield	Prickwillow
Haddenham	Stretham
Little Downham	Sutton
Manea	

Home-Teacher and Visitor for the Blind

J. H. MACKENZIE, M.A.

Clerical Staff.

H. A. HOUSE (Chief Clerk).

A. ANNESS, F. RITCHIE.

LOCAL SANITARY AUTHORITIES.

Urban Districts and Boroughs.	Clerks.	District Medical Officers of Health.
1. Ely	A. K. Campbell, Esq. ..	F. H. M. A. Beckett, B.A., M.B., B.Ch.
2. Chatteris ..	W. F. Moore, Esq. ..	R. E. Nix, B.A., M.B., B.Ch.
3. March	C. Greenwood, Esq. ..	F. A. Evison, M.R.C.S., L.R.C.P.
4. Whittlesey ..	F. W. English, Esq. ..	R. C. Gubbins, M.B., Ch.B., D.P.H.
5. Wisbech ..	F. W. Coulam, Esq. ..	H. L. Groom, M.R.C.S., L.R.C.P.
Rural Districts.	Clerks.	District Medical Officers of Health.
1. Ely	F. W. Green, Esq. ..	C. W. Howe, M.B., Ch.B., D.T.M., D.P.H.
2. North Witchford	A. F. Sharman, Esq. ..	A. Burford Taylor, M.B., B.S.
3. Thorney	A. F. Whittome, Esq. ..	H. Clapham, M.R.C.S., L.R.C.P.
4. Wisbech ..	R. W. Faircloth, Esq. ..	C. H. Gunson, M.B., Ch.B.
Port.		
Port of Wisbech	F. W. Coulam, Esq. ..	R. E. Crockatt, M.B., Ch.B.

*To the Chairman and Members of the
Isle of Ely County Council.*

GENTLEMEN,—

I have pleasure in presenting to you the County Health Report for the year 1930.

There have been no changes in the staff during the year.

The year 1930 is one of those for which it was suggested that a report of a fuller character than usual should be written. A circular on the subject issued by the Ministry of Health asked that, though the report would be of a more simple character than the full Survey Report of 1925, it should contain detailed information on Hospital and other Medical Services available in the area, and indicated the lines on which this information should be given. The report follows the requirements of the Ministry's circular.

I desire to express my appreciation of the assistance I have received in the compilation of the report from the members of my own staff and also from the rest of the county staff, the district medical officers of health and the general practitioners of the area.

I have the honour to be, Gentlemen,

Your obedient Servant,

R. FRENCH.

Administrative County of the Isle of Ely.

The Annual Reports for the year 1930, from the Medical Officers of Health for the Districts within the Administrative County, as submitted to the Isle of Ely County Council, in pursuance of Section 24, of the Local Government Act, 1888, were received as follows:—

	Area.	Medical Officer.	Date Received.	Style.
Urban Districts	Chatteris	Dr. Nix .. ..	.. ..	.. ..
	Ely	Dr. Beckett	May 21st, 1931	Typewritten
	March	Dr. Evison	July 18th, 1931	Printed
	Whittlesey	Dr. Gubbins	July 16th, 1931	Printed
	Wisbech	Dr. H. L. Groom	May 6th, 1931	Printed
Rural Districts	Ely	Dr. Howe	April 28th, 1931	Typewritten
	North Witchford ..	Dr. Taylor	June 5th, 1931	Printed
	Thorney	Dr. Clapham	June 30th, 1931	Printed
	Wisbech	Dr. Gunson	May 30th, 1931	Printed
	Wisbech Port San. Authority	Dr. Crockatt .. ..	.. ..	Printed

FINANCIAL STATEMENT.

Below is a statement of the cost of the Isle of Ely County Council's Public Health Services for the year 1930—1931, apart from the cost of the School Medical Service.

	£	s.	d.
Salaries and expenses of Medical Officers, Health Visitors and clerical staff ...	4188	7	3
Nursing Associations	1189	12	9
Tuberculosis (Clinics, Sanatoria)	3965	8	0
Maternity and Child Welfare	439	10	9
Venereal Disease	188	16	10
Mental Deficiency	1193	0	4
Welfare of the Blind	296	19	7
Vaccination Acts	174	14	6
Establishment Expenses	70	15	7
	11707	5	7
Less amount received from Education Committee for School Medical Service	1385	13	8
Nett	£10321	11	11

STATISTICS, 1930.

Area of Administrative County (land & water)...acres	238,073																					
Rateable Value	£252,276																					
Produce of Id. rate	£980																					
Population (Census 1921)	73,817																					
Population (estim. to middle of year 1929)	78,180																					
No. of Inhabited Houses (1921)	16,661																					
No. of Inhabited Houses (end of 1930)	20,907																					
No. of Families or Separate Occupiers (census 1921)	17,457																					
No. of live Births in the year	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">males 739</td> <td style="padding: 0 10px;">{</td> <td style="padding: 0 10px;">Legitimate 687</td> <td rowspan="2" style="padding: 0 10px;">}</td> <td rowspan="2" style="vertical-align: middle;">1437</td> </tr> <tr> <td style="padding: 0 10px;">females 698</td> <td style="padding: 0 10px;">{</td> <td style="padding: 0 10px;">Illegitimate 52</td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="padding: 0 10px;">Legitimate 658</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="padding: 0 10px;">Illegitimate 40</td> <td></td> <td></td> </tr> </table>	{	males 739	{	Legitimate 687	}	1437	females 698	{	Illegitimate 52				Legitimate 658						Illegitimate 40		
{	males 739		{	Legitimate 687	}			1437														
	females 698	{	Illegitimate 52																			
			Legitimate 658																			
			Illegitimate 40																			
Birth-rate per 1,000	18.38																					
No. of Still-births in the year	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">males 28</td> <td style="padding: 0 10px;">{</td> <td style="padding: 0 10px;">Legitimate 28</td> <td rowspan="2" style="padding: 0 10px;">}</td> <td rowspan="2" style="vertical-align: middle;">58</td> </tr> <tr> <td style="padding: 0 10px;">females 30</td> <td style="padding: 0 10px;">{</td> <td style="padding: 0 10px;">Illegitimate —</td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="padding: 0 10px;">Legitimate 27</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="padding: 0 10px;">Illegitimate 3</td> <td></td> <td></td> </tr> </table>	{	males 28	{	Legitimate 28	}	58	females 30	{	Illegitimate —				Legitimate 27						Illegitimate 3		
{	males 28		{	Legitimate 28	}			58														
	females 30	{	Illegitimate —																			
			Legitimate 27																			
			Illegitimate 3																			
Still-birth rate per 1,000 total births	38.8																					
Total No. of Deaths in the year ...	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">males 447</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> <td rowspan="2" style="vertical-align: middle;">835</td> </tr> <tr> <td style="padding: 0 10px;">females 388</td> </tr> </table>	{	males 447	}	835	females 388																
{	males 447		}			835																
	females 388																					
Death-rate per 1,000	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">uncorrected 10.68</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> </tr> <tr> <td style="padding: 0 10px;">corrected ... 8.51</td> </tr> </table>	{	uncorrected 10.68	}	corrected ... 8.51																	
{	uncorrected 10.68		}																			
	corrected ... 8.51																					
No. of women dying in, or in consequence of, childbirth	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">from sepsis 1</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> </tr> <tr> <td style="padding: 0 10px;">other causes 5</td> </tr> </table>	{	from sepsis 1	}	other causes 5																	
{	from sepsis 1		}																			
	other causes 5																					
Number dying under 1 year old ...	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">males 45</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> <td rowspan="2" style="vertical-align: middle;">75</td> </tr> <tr> <td style="padding: 0 10px;">females 30</td> </tr> </table>	{	males 45	}	75	females 30																
{	males 45		}			75																
	females 30																					
Infantile Mortality-rate (per 1,000 Births)	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">in legitimates 52.8</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> <td rowspan="2" style="vertical-align: middle;">52.19</td> </tr> <tr> <td style="padding: 0 10px;">in illegitimates 43.5</td> </tr> </table>	{	in legitimates 52.8	}	52.19	in illegitimates 43.5																
{	in legitimates 52.8		}			52.19																
	in illegitimates 43.5																					
In males ... 60.89	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">in legitimate males... 62.59</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> </tr> <tr> <td style="padding: 0 10px;">in illegitimate males 38.46</td> </tr> </table>	{	in legitimate males... 62.59	}	in illegitimate males 38.46																	
{	in legitimate males... 62.59		}																			
	in illegitimate males 38.46																					
In females... 42.97	<table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">{</td> <td style="padding: 0 10px;">in legitimate females 42.5</td> <td rowspan="2" style="font-size: 3em; vertical-align: middle;">}</td> </tr> <tr> <td style="padding: 0 10px;">in illegitimate females 50.0</td> </tr> </table>	{	in legitimate females 42.5	}	in illegitimate females 50.0																	
{	in legitimate females 42.5		}																			
	in illegitimate females 50.0																					
Deaths from Measles (all ages)	4																					
„ „ Whooping Cough (all ages)	1																					
„ „ Diarrhoea (under 2 years of age)	8																					
England and Wales—																						
Birth-rate	16.3																					
Death-rate	11.4																					
Infantile Mortality-rate	60																					

VITAL STATISTICS.

POPULATION.

It has not been possible to make an estimate of the population for the mid-year 1930, owing to the fact that the Registrar-General proposes to use the census figures of 1931 in making his estimate. Although figures concerning the actual population as revealed by the census have now been published, the mid 1930 estimate has not yet been furnished. It has, therefore, been necessary to work out the birth rate and death rate on the mid 1929 estimate, and it is probable that the figures will require slight revision to make them strictly comparable with those of previous years.

The estimated population for the mid-year 1929 was 78,180.

SOCIAL CONDITIONS.

The chief occupation of the inhabitants is agriculture. The census of 1921 showed the Isle of Ely to be the administrative county with the largest percentage of agricultural workers in its population. No special comments are necessary as to the influence of social conditions and occupation on public health.

BIRTHS.

The births in the Urban Districts numbered 829 (443 males and 386 females), this being a birth-rate of 19·03 per thousand of population.

In the Rural Districts the births numbered 608 (296 males and 312 females), the Rural birth-rate being 17·56 per thousand.

The total births for the County numbered 1,437 (739 males and 698 females), a birthrate of 18·38 per thousand. This compares with a birth-rate for England and Wales of 16·3 per thousand.

The illegitimate births in the Urban Districts numbered 50, a rate of 60·31 per 1,000 births. Of this 50, 29 were males and 21 females, giving rates of 65·46 and 54·4 respectively.

For the Rural Districts there were 42 illegitimate births, a rate of 69·07. Of these, 23 were males and 19 females, giving rates of 77·7 and 60·89 respectively.

Taking the County as a whole the illegitimate births numbered 92, or a rate of 64·02. There were 52 male and 40 female illegitimate births and this gives rates of 70·37 and 57·31 respectively.

The birth-rate for the whole county shows a slight rise as compared with that of 1929. This is due to a considerable rise in the Urban Districts, the rate for the Rural Districts having experienced a further fall.

The rate for England and Wales has remained stationary and that for the Isle remains considerably higher than the rate for the whole country.

DEATHS.

The deaths in 1930 numbered 835 compared with 984 in 1929. Of these 835 deaths (447 males and 388 females), 493 occurred in the Urban Areas, and 342 in the Rural, giving an uncorrected death-rate per thousand of 11·32 and 9·88 respectively.

When corrected, however, by the factors for standardisation, the Urban death-rate becomes 8·86 per thousand, and the Rural 8·1, whilst the rate for the whole County is 10·68 uncorrected, or 8·51 per thousand when corrected, these figures comparing with a rate of 11·4 for England and Wales.

In conformity with the death-rate for England and Wales, the rate for the Isle shows a considerable fall in 1930, and is still definitely lower than that for the whole country. The comparatively mild winter months and the absence of an influenza epidemic are probably the two main factors concerned in bringing this about.

The figures for the several areas are shown in the following table:—

Area.	Factor for Correction.	Apparent death-rate.	Corrected death-rate.
Chatteris ...	0·779	9·30	7·25
Ely Urban ...	0·756	10·86	8·21
March... ..	0·819	9·87	9·08
Whittlesey ...	0·786	11·27	8·86
Wisbech Borough ...	0·790	13·81	10·91
Ely Rural ...	0·739	11·39	8·42
North Witchford ...	0·792	9·47	7·52
Thorney ..	0·996	7·03	7·00
Wisbech Rural... ..	0·901	9·04	8·15
Aggregate Isle of Ely			
Urban Districts ...	0·783	11·32	8·86
Do. Rural Districts ...	0·816	9·88	8·1
Whole Isle of Ely ...	0·797	10·68	8·51
England and Wales ...	—	11·4	11·4

INFANTILE MORTALITY.

The death-rate in infants under one year, 52·19 per 1,000 births, shows a marked decline upon that of 1929. This again is in conformity with a fall in the country as a whole and it is pleasing to be able to note that the forecast, in the report upon 1929, that the rather sharp rise noted in that year would be of a temporary nature has been justified.

If the figures are analysed on the same lines as those of last year it may be noted that there were 8 deaths attributed to diarrhoea as against 14 in 1929.

The absence of the hot, dry autumn, which was a feature of 1929, accounts for this, but the figure, nevertheless, represents an increase of 2 over that for 1928. This is a figure which general measures of hygiene should play a large part in controlling, particularly measures directed to the improvement of methods of production, storage and use of milk.

Pneumonia accounted for 11 deaths under 1 year, whereas in 1929 there were 22 deaths from this cause. The absence of an influenza epidemic and the mild winter are factors in the reduction of this figure, and it is of interest that the figure for 1930 is the same as that for 1928.

Congenital debility, malformation or premature birth was the cause of death in 39 cases. This compares with 55 in 1929 and 45 in 1928. It is difficult to assign any particular cause to the fall in this figure, but there can be no doubt that a certain proportion of it could be reduced by improved ante-natal and post-natal care, while there would still be a fraction which cannot be controlled in the light of our present knowledge.

The infantile mortality rate for 1930 is the lowest on record, both in the Isle of Ely and in England and Wales as a whole.

DEATHS FROM ZYMOTIC DISEASES.

The deaths from these diseases in the County in 1930 comprised five from Enteric Fever, four from Measles, two from Scarlet Fever, one from Whooping Cough, nine from Diphtheria, five from Influenza, and three from Meningococcal Meningitis.

Diphtheria has continued to be endemic in Whittlesey and the autumn outbreak of 1929 continued during the early part of 1930. Cases diminished during the summer and there were a few weeks in late summer without any cases. A fresh batch occurred in the autumn, however, the outbreak continuing into 1931.

Wisbech had a large number of cases of Scarlet Fever towards the end of the year, but, apart from these epidemics, there have been no specially noteworthy causes of invalidity during the year.

DEATHS FROM TUBERCULOSIS.

There were 37 deaths from Pulmonary Tuberculosis in 1930 (17 in males and 20 in females) as against 48 in the previous year.

The deaths from other forms of the disease numbered 12, which is the same figure as that for the previous year.

The following are the death-rates from Tuberculosis since 1925:—

		Pulmonary.		Non- Pulmonary.		Total.
1925	...	·588	...	·211	...	·799
1926	...	·506	...	·195	...	·701
1927	...	·568	...	·052	...	·620
1928	...	·810	...	·116	...	·926
1929	...	·614	...	·154	...	·768
1930	...	·473	...	·154	...	·627

It will be noted that the death-rate from Pulmonary Tuberculosis is the lowest recorded and the fall in the mortality from this type of the disease is very gratifying. Unfortunately, the maintenance of the non-pulmonary rate at the same figure as that of 1929 keeps the death-rate for the disease as a whole slightly above the lowest recorded (·620 in 1927).

DEATHS FROM CANCER.

Cancer claimed 139 deaths in the year, this number being four more than the total for the previous year, which was the highest on record.

SUICIDE AND OTHER DEATHS.

Of the total number of deaths, 835, thirty-two per cent. were aged 75 years, or over. Of these 835 deaths, 15 were from suicide, 10 in males and 5 in females.

The number of deaths from other forms of violence was 34, being 8 less than in 1929.

Full details as to the causes of death in the Isle of Ely are to be found in the Tables following:—

County of Isle of Ely. Causes of Death in Administrative Areas, 1930.

CAUSES OF DEATH	URBAN										RURAL						Total for Urban and Rural Districts.		GRAND TOTAL.		
	Chatteris.		Ely		March.		Whittlesey.		Wisbech		Ely.		North.		Thorney.		Wisbech.			M.	F.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
Registrar's number of area.	04		05		06		07		14		08		09		18		28				
ALL CAUSES	26	22	45	40	54	51	55	35	79	86	80	74	25	24	11	7	72	49	447	388	835
1. Enteric Fever .. ..	..	..	..	..	..	..	..	..	4	1	..	..	..	..	..	..	..	..	4	1	5
2. Small Pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Measles .. ..	..	..	..	1	1	1	..	..	1	..	..	..	..	..	..	..	..	..	2	2	4
4. Scarlet Fever .. ..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	1	1	2
5. Whooping Cough .. ..	..	..	..	..	..	1	..	3	..	..	..	..	..	..	..	..	..	..	..	1	1
6. Diphtheria .. ..	..	1	1	..	..	..	..	..	2	..	2	1	..	..	..	..	..	1	3	6	9
7. Influenza .. ..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	1	..	1	1	4	1	5
8. Encephalitis Lethargica .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
9. Meningococcal Meningitis .. ..	..	..	..	..	1	..	..	..	..	2	..	..	..	..	..	..	..	..	1	2	3
10. Tuberculosis of Resp'y System .. ..	..	2	4	2	3	2	..	2	4	5	1	3	1	4	1	..	3	..	17	20	37
11. Other Tuberculous Diseases .. ..	..	..	2	..	..	..	1	2	1	2	..	1	..	..	..	..	3	..	7	5	12
12. Cancer, malignant disease	5	3	8	10	7	9	5	5	13	12	14	16	7	3	1	2	9	10	69	70	139
13. Rheumatic Fever .. ..	..	..	..	..	1	..	..	..	1	..	1	..	1	..	..	..	..	..	4	..	4
14. Diabetes .. ..	..	1	3	..	2	1	2	1	1	1	2	1	1	1	..	..	..	2	11	8	19
15. Cerebral Haemorrhage, &c. .. ..	..	1	1	2	4	..	3	1	3	6	6	4	1	2	..	1	1	2	19	19	38
16. Heart Disease	8	4	7	11	5	14	12	9	9	18	13	11	6	4	2	3	16	10	78	84	162
17. Arterio-sclerosis	2	1	1	..	1	1	2	..	4	7	2	1	..	..	1	..	5	1	18	11	29
18. Bronchitis	1	..	..	2	3	2	2	1	7	4	7	3	1	1	1	..	3	1	25	14	39
19. Pneumonia (all forms) .. ..	..	1	2	1	2	3	9	1	4	4	3	4	..	..	2	..	1	4	23	18	41
20. Other Respiratory Diseases .. ..	..	..	1	..	..	..	..	..	2	..	1	..	..	1	..	..	..	..	4	1	5
21. Ulcer of Stomach or Duodenum .. ..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	3	1	4

Causes of Death at Different Periods of Life in the Administrative County of
Isle of Ely in 1930.

CAUSES OF DEATH.	Sex.	Aggregate of Urban Districts.										Aggregate of Rural Districts.									
		All Ages.										All Ages.									
		0—	1—	2—	5—	15—	25—	45—	65—	75 & upwards	0—	1—	2—	5—	15—	25—	45—	65—	75 & upwards		
ALL CAUSES ..	M.	259	30	2	3	7	9	24	55	51	78	188	15	1	2	4	9	9	37	48	63
	F.	234	16	3	3	15	11	20	38	50	78	154	14	3	3	5	5	11	33	24	56
1. Enteric Fever ..	M.	4	..	..	..	..	1	1	1	1	..	0	..	..	..	..	..	..	..	..	..
	F.	1	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
2. Small Pox ..	M.	0	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
	F.	0	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
3. Measles ..	M.	2	..	..	1	..	..	1	..	..	..	0	..	..	..	..	..	..	..	..	..
	F.	2	1	1	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
4. Scarlet Fever ..	M.	1	..	..	..	..	1	..	..	..	..	0	..	..	..	1	..	..	..	..	..
	F.	0	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
5. Whooping Cough ..	M.	0	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
	F.	1	..	..	..	1	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
6. Diphtheria ..	M.	1	..	..	..	1	..	..	..	..	..	2	1	1	1	1	..	..	..	..	..
	F.	4	..	..	..	4	..	..	..	..	2	2	..	..	..	..	..	2	..	..	..
7. Influenza ..	M.	2	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	1	..	..	..
	F.	0	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
8. Encephalitis Lethargica ..	M.	0	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
	F.	0	..	..	..	..	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
9. Meningococcal Meningitis ..	M.	1	..	..	..	1	..	..	..	..	..	0	..	..	..	..	..	..	..	..	..
	F.	2	..	..	..	1	1	..	..	..	..	0	..	..	..	..	..	..	..	..	..
10. Tuberculosis of Resp'y System	M.	11	..	..	..	2	4	4	4	1	..	6	..	..	..	1	2	3	..	..	..
	F.	13	..	..	..	1	5	6	..	..	1	7	..	..	..	1	3	..	..	..	..
11. Other Tuberculous Diseases ..	M.	4	..	1	..	1	..	..	2	..	..	3	1	..	..	1	1	..	..	..	..
	F.	4	1	1	1	2	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
12. Cancer, malignant disease ..	M.	38	..	..	..	..	..	..	14	11	13	31	..	..	..	..	..	..	10	11	10
	F.	39	..	..	..	..	..	1	12	12	14	31	..	..	..	..	2	15	7	7	7

GENERAL PROVISION OF HEALTH SERVICES
IN THE AREA.

Public Health Officers of the Authority.

(a) Medical :—

County Medical Officer :—

Dr. ROBERT FRENCH, B.A., M.D., D.P.H.

Assistant County Medical Officer :—

Dr. ROBERT C. GUBBINS, M.B., Ch.B., D.P.H.

District Medical Officers under Poor Law Acts :—

Dr. WM. GROOM, B.A., M.D.	..	(also Public Vaccinator).
Dr. J. DWYER, M.B., Ch.B.	..	" " "
Dr. C. H. GUNSON, M.B., Ch.B.	..	" " "
Dr. W. REYNOLDS, M.B., B.S.	..	" " "
Dr. A. PAIN, M.R.C.S., L.R.C.P.	..	" " "
Dr. W. MEIKLE, M.B., Ch.B.	..	" " "
Dr. F. A. EVISON, M.R.C.S., L.R.C.P.	..	" " "
Dr. A. C. S. WATERS, M.R.C.S., L.R.C.P.	..	" " "
Dr. A. B. TAYLOR, M.B., B.S.	..	(also Public Vaccinator).
Dr. R. AINSWORTH, M.R.C.S., L.R.C.P.	..	" " "
Dr. S. J. WATSON, M.B., B.Ch.	..	" " "
Dr. C. W. HOWE, M.B., Ch.B., D.P.H.	..	" " "
Dr. G. B. DAVIS, M.A., M.D.	..	" " "
Dr. J. SLADE, M.A., M.D.	..	" " "
Dr. J. F. M. WHITBY, B.A., L.M.S.S.A.	..	" " "
Dr. D. E. YOUNG, L.R.C.P., L.R.C.S.	..	" " "

Public Vaccinators (other than above) :—

Dr. R. BUTTERWORTH, B.A., M.B., Ch.B.

Dr. F. H. BECKETT, B.A., M.B., B.Ch.

(b) Others :—

Veterinary Surgeons :—

W. RUNCIMAN, M.R.C.V.S.

H. H. TRUMAN, ..

J. H. POLES, ..

J. W. KNOWLES, ..

T. KNOWLES, ..

Public Analyst :—

S. GREENBERG, F.I.C., F.C.S.

Vaccination Officers :—

A. E. ROBINSON,

G. LEFEVRE,

A. E. CROWSON,

G. SHARPE,

F. J. ASPLAND.

Health Visitors :—

H. L. MORRIS, C.M.B., M. & C.W. Cert., R.S.I., H.V. Cert., R.S.I.

A. MORT, C.M.B., H.V. Cert., R.S.I., A.R.S.I.

M. E. CLIFFE, C.M.B., H.V. Cert., Bd. of Ed.

E. T. TAYLOR, C.M.B.

H. LAWRENCE, Cert. Adv. Hygiene, Bd. of Ed.

M. MEACHAM, C.M.B., H.V. Cert., R.S.I., M. & C.W. Cert., R.S.I.

NURSING IN THE HOME.

(a) General.

At the end of 1930 there were 15 District Nursing Associations at work in the Isle of Ely, namely, at Wisbech, March, Ely, Littleport, Whittlesey, Chatteris, Doddington (to include Wimblington and Benwick), Sutton (to include Mepal and Witcham), Haddenham (to include Wilburton and Aldreth), Stretham (to include Little Thetford), Prickwillow, Upwell (to include Outwell), Little Downham, Manea and Leverington (to include Gorefield).

It will thus be seen that the County is fairly adequately covered by a nursing service, the most notable exceptions being the area in the north of the County comprising, roughly, Thorney, Thorney Toll, Parson Drove, Guyhirn and Wisbech St. Mary and an area near Ely comprising the villages of Witchford, Wentworth and Coveney.

The March Association employs four nurses, Wisbech two, Ely two and all the others one each.

In the case of all the Associations, except Wisbech, Ely, Whittlesey and Littleport, the district nurses undertake health visiting duties for the County Council, in return for which the Council pays the Association a quarter of their nurse's salary (in respect of three nurses only in the case of March), so that adequate co-ordination between the nursing service and the health visiting service in the areas concerned is necessarily maintained.

In the four areas where the district nurses do not act as health visitors, they work in close touch with the full time county health visitors of the area and co-ordination is adequate.

(b) Infectious Diseases.

The County Council makes no arrangement with the Nursing Associations for the nursing of infectious diseases, nor do their whole time officers undertake this work.

MIDWIVES.

There were 12 midwives practising in the area during 1930.

Of these all but 3 were employed by the District Nursing Associations.

The County Council does not directly employ or subsidise any midwife, but in addition to the grant of one quarter of the nurse's salary paid to each nursing association undertaking health visiting duties, the County Council pays a grant to each association undertaking midwifery or maternity nursing, at the rate of 6/8 per case attended during the year.

NATIONAL HEALTH INSURANCE.

The County Council elects 4 representatives to the Isle of Ely Insurance Committee, a circumstance which helps to co-ordinate the work of the two bodies.

In the case of tuberculosis, co-ordination is rendered more complete by the fact that the Insurance Committee elects 2 representatives to sit on the Sanatorium Sub-Committee of the Public Health Committee, so that they may watch the interests of insured persons suffering from tuberculosis.

POOR LAW MEDICAL OUT RELIEF.

The following table shows the various districts with their populations:—

Parish	Popln. (1921)	Acreage
Wisbech St. Peter	11321	6009
Wisbech St. Mary (pt.)	952	5093
Leverington	2484	4031
Newton	920	2941
Tydd St. Giles	1213	4617
Parson Drove	959	3853
Wisbech St. Mary (rmdr.)	1657	5094
Elm	2738	11043
Upwell (I)	1583	7390
Outwell (I)	483	556
Thorney	2165	17680
Whittlesey	7623	25715
Stanground N.	43	1321
March	8960	19142
Wimblington.. .. .	1197	7565
Manea	1463	5508
Welches Dam	125	2318
Benwick	808	3103
Doddington	1466	6845
Chatteris	5084	12990
Haddenham	1655	8450
Stretham	897	3810
Wilburton	497	2367
Grunty Fen	97	1716
Ely Trinity	4888	9809
Ely College	101	26
Downham	1991	9792
Witchford	416	2072
Thetford	150	1036
Ely St. Mary	2692	5911
Littleport	4467	16664
Redmere	59	632
Sutton	1476	7090
Mepal	360	1616
Witcham	251	2093
Witcham Gravel	9	381
Coveney	472	3051
Wentworth	95	1331

All the officers served Boards of Guardians prior to the passing of the Local Government Act of 1929 and the service was taken over by the County Council as it stood, with some small adjustments of districts.

The medical officers are now responsible to the Public Assistance Committee and the County Medical Officer is the chief medical adviser to that Committee. In actual practice this has involved very little change, the County Medical Officer at present holding a "watching brief" only and playing a minor part in the administration of the service.

LABORATORY FACILITIES.

Examination of sputum from cases of suspected tuberculosis is carried out for medical practitioners by the Virol Research Pathological Laboratory at the expense of the County Council. Outfits are issued to practitioners on request and they are at liberty to send such specimens of sputum as they think fit for examination. Some of the District Councils provide similar facilities in their own areas.

The Virol Research Laboratory undertake the examination of throat swabs on behalf of the Education Committee in the cases of those school children suspected to be suffering from or carriers of diphtheria, where the investigation is required by the School Medical Officer. The District Councils, however, make their own arrangements for the examination of swabs on behalf of practitioners.

Wasserman reactions and the examination of films for gonococci can be carried out by Dr. Henwood Harvey or Dr. Louis Cobbett, of Cambridge, at the expense of the County Council, but, in actual practice, most of these examinations are done at the Venereal Diseases Clinics.

The cost of these is met by its inclusion in the sum paid by the County Council as its share of the general expenses of the clinic.

Analysis of water, milk and foodstuffs is undertaken by Mr. S. Greenberg, Public Analyst, Cambridge, but the County Council bears the expense only in the case of those samples sent by their own officers.

LEGISLATION IN FORCE.

The following are the Local Acts, special Orders, general adoptive Acts, and byelaws in force in the various districts :—

*Borough of Wisbech.**Local Act.*

	Date adopted.
Wisbech Corporation Act, 1810	June 20th, 1810.

Adoptive Acts.

Public Health Acts Amendment Act, 1890	May 15th, 1915.
“ “ “ “ “ 1907	May 4th, 1925.

Byelaws as to

Dairies, Cowsheds and Milkshops	Aug. 11th, 1899.
Slaughter-houses	Feb. 9th, 1900.
Nuisances	Feb. 9th, 1900.
New Streets and Buildings	July 16th, 1926.
Drainage of Existing Buildings	Sept. 13th, 1929.
Fruitpickers' Bunks... ..	Sept. 13th, 1929.

*Urban District of Ely.**Adoptive Act.*

Infectious Diseases Prevention Act, 1890...	... Unknown.
Public Health Acts Amendment Act, 1907, Sect. 50	Mar. 25th, 1929.

*Urban District of March.**Adoptive Acts.*

Baths and Wash-houses Acts	Sept. 4th, 1905.
Public Health Acts Amendment Act, 1890, Pt. III.	June 5th, 1906.
Private Street Works Act, 1892	June 7th, 1929.
Public Health Acts Amendment Act, 1907, Sect. 50	Jan. 2nd, 1911.
Public Health Acts Amendment Act, 1907, Part III., Sects. 34 to 38 and 43 to 49	Mar. 9th, 1925.
Public Health Act, 1925, except Sects. 21, 22 and 24	Oct. 10th, 1930.

<i>Byelaws as to</i>					
New Streets and Buildings...	...	...	...	...	April 23rd, 1925.
Nuisances	...	...	...	...	Nov. 11th, 1898.
Lodging Houses	...	...	...	...	Nov. 10th, 1898.
Slaughter Houses	...	...	...	...	Nov. 10th, 1898.
Offensive Trades	...	...	...	...	Oct. 27th, 1898.
Burial Grounds	...	...	...	...	Mar. 7th, 1867.
Markets	...	...	...	...	Sept. 26th, 1905.
Pleasure Grounds	...	...	...	...	Nov. 22nd, 1907.
Allotments	...	...	...	...	Sept. 17th, 1888.

Urban District of Chatteris.

Adoptive Acts.

Public Health Acts Amendment Act, 1890, Pt. III.	...	...	...	...	July 15th, 1895.
Public Health Acts Amendment Act, 1890, Pt. IV.	...	...	...	...	Nov. 12th, 1920.
Infectious Disease Prevention Act, 1890	...	...	...	...	Feb. 10th, 1923.
Private Street Works Act, 1892	...	...	...	...	July 1st, 1903.
Public Health Acts Amendment Act, 1907, Sect. 86	...	...	...	...	April 23rd, 1915.

Byelaws as to

Slaughter-houses	...	...	...	...	July 25th, 1904.
Common Lodging Houses	...	...	...	...	July 25th, 1904.
New Streets and Buildings...	...	...	...	...	June 5th, 1914.
Public Pleasure Ground	...	...	...	...	July 3rd, 1923.

Urban District of Whittlesey.

Adoptive Acts.

Public Health Acts Amendment Act, 1907, Pt. IV.	...	...	...	...	Jan. 31st, 1923.
Public Health Acts Amendment Act, 1890	...	...	...	...	Jan. 31st, 1923.
Infectious Diseases Prevention Act, 1890...	...	...	...	...	Jan. 31st, 1923.
Private Street Works Act, 1892	...	...	...	...	Jan. 31st, 1923.

Byelaws as to

New Streets and Buildings	...	...	...	...	Mar. 28th, 1900.
Dairies and Cowsheds	...	...	...	...	Oct. 30th, 1907.
Nuisances	...	...	...	...	Feb. 24th, 1909.
Slaughter-houses	...	...	...	...	Feb. 22nd, 1929.
Markets	...	...	...	...	Nov. 24th, 1929.

*Rural District of Ely.**Adoptive Acts.*

Public Health Act, 1925, Pt. II., except Sects. 17, 18, 19, 21, 22, 24 and 35	Jan. 9th, 1929.
Public Health Act, 1925, Pt. III., except Sects. 39 and 44 ...	Jan. 9th, 1929.
Public Health Act, 1925, Pt. IV. ...	Jan. 9th, 1929.
Public Health Acts Amendment Act, 1907, Sect. 50 ...	Mar. 11th, 1929.
Public Health Acts Amendment Act, 1907, Sects. 39, 40, 41 and 42 ...	Nov. 5th, 1928.
	To apply to Littleport only.

Byelaws as to

Tents, Vans and Sheds ...	May 17th, 1920.
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*Rural District of Wisbech.**Adoptive Act.*

Public Health Acts Amendment Act, 1890, Pt. III.	Unknown.
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Byelaws as to

Fruitpickers ...	Feb. 6th, 1930.
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Rural District of North Witchford. No Adoptive Acts or Byelaws.

Rural District of Thorney ... No information.

The administration of the above acts is in the hands of the Local Authorities concerned.

HOSPITALS.

There is one general voluntary hospital situated within the area, namely the North Cambs. Hospital, Wisbech. There are four infirmaries attached to public assistance institutions, namely at Wisbech, Whittlesey, Doddington and Ely.

Isolation Hospitals exist at Wisbech, Ely, March and Chatteris, but the last two are very small institutions and are only used in very exceptional circumstances.

There is only one small-pox hospital, namely that at Wisbech, though the isolation hospitals at March and Chatteris are presumed to be available for the isolation of cases of small-pox if they are not in use for other diseases.

In addition to the hospitals mentioned above, two hospitals outside the area are largely used by its inhabitants, namely Addenbrooke's Hospital, Cambridge and the Memorial Hospital, Peterborough.

Information with regard to the above hospitals may be tabulated as follows:—

Name	Situation	Purpose	No. of Beds	Management	Medical Officers.	Nursing Staff.
Wisbech Institution	Wisbech	General	93	Public Assistance Committee	1 Part Time	1 Head Nurse 2 Assistant Nurses 4 Junior Assistant Nurses 1 Children's Attendant
Whittlesey Institution	Whittlesey	General	30	do.	1 Part Time	1 Matron 1 Assistant Nurse
Doddington Institution	Doddington	General	49	do.	1 Part Time	1 Charge Nurse 1 Assistant Nurse 1 Children's Attendant
Ely Institution	Ely	General	89	do.	1 Part Time	1 Head Nurse 3 Assistant Nurses 1 Junior Assistant Nurse 1 Male Attendant
Isolation Hospital	Wisbech	Infectious Diseases	60 (stated)	Joint Hospital Board	1 Part Time	1 Matron 1 Charge Nurse 1 Staff Nurse 2 Assistant Nurses
Isolation Hospital	Ely	Infectious Diseases	36 (stated)	Joint Hospital Board	1 Part Time	1 Matron 1 Staff Nurse 1 Probationer
North Cambs Hospital	Wisbech	General	50	Voluntary Body	9	Information not available
Addenbrooke's Hospital	Cambridge	General	200	Voluntary Body	3 Physicians 2 Assistant do. 3 Surgeons 1 Gynaecologist 2 Ophthalmic Surgeons 1 Aural Surgeon 1 Radiologist 1 Psychologist 2 Pathologists 5 Anaesthetists	Information not available
Memorial Hospital	Peterborough	General	154	Voluntary Body	2 Physicians 4 Surgeons 1 Ophthalmic Surgeon 1 Radiologist	Information not available
County Mental Hospital	Fulbourn	Mental	809	Joint Committee of Local Authorities	1 Medical Superintendent 2 Assistant Medical Officers	39 Male 60 Female

No arrangements are made for the employment of consultants at the public assistance institutions, and in the case of the voluntary hospitals, arrangements are in the hands of the committees concerned.

It is difficult to classify the beds available in the public assistance institutions otherwise than by sex, since medical, surgical, chronic sick cases and children are largely grouped together.

A rough classification of available beds may be made as follows:—

General Medical. General Surgical. Chronic Sick.

Wisbech Institution. Men 39, women and children 46.

Whittlesey Institution. Men 10, women and children 10.

Doddington Institution. Men 24, women and children 18.

Ely Institution. Men 46, women and children 38.

Tuberculosis.

Ely Institution. Men 2, women 0.

Wisbech Institution. Men 4, women 0.

Beds are also engaged at outside sanatoria as required.

Maternity.

Wisbech 2. Whittlesey 2. Doddington 3. Ely 3.

Cases of abnormal confinement and allied conditions are also admitted to Addenbrooke's Hospital.

Mental.

809 beds available for both sexes (315 male and 494 female) at County Mental Hospital.

Mental Deficiency.

Six beds are available at Ely Institution for the reception of high grade female defectives over 16, and with the consent of the Board of Control cases over and above this number are placed there. The use of beds at this institution for this purpose is regarded as a temporary expedient, and it is hoped eventually to provide accommodation for a much larger number at Whittlesey Institution. In addition to those cases at present at Ely, defectives are placed in institutions outside the area from time to time when accommodation is available, but it has been becoming increasingly scarce of late years.

Orthopaedic.

There is no accommodation specifically for orthopaedic cases within the area, but cases are treated from time to time at Addenbrooke's Hospital and at the Manfield Orthopaedic Hospital, Northampton.

Ear, Nose and Throat.

Treatment for cases of this type is available at the North Cambs. Hospital, Addenbrooke's Hospital and the Memorial Hospital, Peterborough.

Puerperal Fever and Pyrexia.

Cases can go to Addenbrooke's Hospital as and when necessary. There is no special provision within the area.

Ophthalmia Neonatorum.

There is no special provision for the hospital treatment of this condition within the area.

Facilities for operative surgery are available at the North Cambs. Hospital, Addenbrooke's Hospital and the Memorial Hospital, Peterborough, but not at any of the public assistance institutions. All three hospitals have X ray and dental departments, while ophthalmic and massage departments exist at Addenbrooke's Hospital and the Peterborough Memorial Hospital.

Of late years, there has been an increasing tendency for practitioners to recommend, and for patients to accept, hospital treatment for all conditions. In general, hospital accommodation has been fairly adequate for the needs of the area, but there are certain directions in which it appears to be lacking. In particular, there is little or no accommodation for advanced tuberculosis, and the Mental Deficiency Act is rapidly becoming a dead letter in the County so far as institutional treatment is concerned, owing to the difficulty of securing places in outside institutions and the absence of an institution under the direct control of the County Council. The arrangements for the institutional treatment of puerperal fever are also hardly adequate.

In a report made to the Public Health Committee at the end of 1929, following a survey of the Poor Law Institutions to determine if better use could be made of some of them when the Local Government Act of 1929 came into force, it was indicated that reasonably satisfactory accommodation could be provided for mental defectives at Whittlesey Institution, and that, if the children then in Poor Law Institutions were transferred to one institution, or preferably to a children's home, the present children's home in the grounds of the Ely Institution would serve as the nucleus for a hospital for advanced cases of tuberculosis. It was also felt that provision for puerperal sepsis could probably be made at one of them.

All further proposals have been held up, however, owing to the protracted consideration of the use of Whittlesey Institution for the reception of mental defectives.

MATERNITY AND NURSING HOMES.

There are two Nursing Homes in the area, one at March with 9 beds and one at Wisbech with 8 beds. Both are used as maternity homes. That at Wisbech is also used as a general nursing home, and that at March provides accommodation for accidents.

Both are inspected from time to time and no special action has been needed with regard to either.

During the year there have been no new applications for registration, no orders made cancelling registration and no applications for exemption from registration.

No application for delegation of powers has been made by any District Council.

MATERNAL MORTALITY.

Notification of two deaths connected with childbirth in the area in 1930, was received from the registrars under an arrangement whereby they have agreed to notify all deaths occurring in women of childbearing age (15—45). Steps were taken to get into touch with the families concerned, and with the midwives and practitioners in attendance. The circumstances of the deaths were investigated by the County Medical Officer and reports were sent to the Ministry of Health.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

All the above classes of case are dealt with in the public assistance institutions of the area and, apart from this, there is no provision in the area.

There is, however, at Cambridge, the Ely Diocesan Home for Unmarried Mothers which has 12 beds.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

The County Council has no institution devoted solely to the care of mental defectives. As has been stated, however, there are six beds reserved for high grade female mental defectives over the age of 16 at the Ely Public Assistance Institution as a temporary expedient, and this number is exceeded from time to time with the consent of the Board of Control.

In addition, cases have been sent in the past to the Royal Eastern Counties Institution, Colchester, and to various other institutions. Such outside accommodation is, however, becoming increasingly difficult to obtain.

During the year the work of the ascertainment of cases of Mental Defect has proceeded as formerly, cases being reported by Health Visitors, School Teachers and others.

Miss A. Mort, one of the Council's Health Visitors, continues to undertake the visiting of mental defectives for the purpose of supervision and also assists in the work of ascertainment.

At the moment of writing there are known to be in the care of the Isle of Ely 99 feeble-minded persons (45 males, and 54 females); of these, 8 males and 17 females are in residential institutions.

There are 38 imbeciles (20 males and 18 females); of these, 6 males and 6 females are in residential institutions.

There are two male and one female moral imbeciles, all being in residential institutions.

Of 21 idiots (7 males and 14 females), 5 males and 6 females are in institutions.

AMBULANCE FACILITIES.

(a) For infectious cases.

The isolation hospitals at Wisbech and Ely both provide ambulance facilities for the removal of cases of infectious disease from their homes to the hospitals.

(b) Ambulances are provided for non-infectious cases by the Wisbech, March and Chatteris Urban District Councils and jointly by the Ely Urban and Rural District Councils to serve their respective areas. Appropriate charges are made for the use of these ambulances. It is also possible to hire an ambulance from the British Red Cross Society at Cambridge.

CLINICS AND TREATMENT CENTRES.

There are no general out-patient departments in the area under the control of the local authorities.

The following is a list of the Maternity and Child Welfare Centres in the county. All are managed by voluntary Infant Welfare Committees, but the County Council pays a grant towards the working expenses of each centre:—

Centre at	Secretary	Medical Officer	Time of Session
West End, March ..	Mrs. G. W. Sharman ..	Dr. W. A. Murphy ..	2—4 p.m. every Wednesday
Church House, Walsoken, Wisbech ..	Mrs. R. S. W. Perkins ..	Dr. H. L. Groom ..	2—4 p.m. every Friday
St. Mary's Hall, Ely ..	Mrs. K. M. Thurmott ..	Dr. R. French ..	2—4 p.m. every Wednesday (on Friday in 1st week of month)
Friends Meeting House, Chatteris ..	Miss K. Childs ..	do. ..	2—4 p.m. every Friday
Primitive Methodist Sunday School, Littleport ..	Mrs. H. Richards ..	Dr. R. C. Gubbins ..	2—4 p.m. every Tuesday
Parish Room, Thorney ..	Mrs. A. Pain ..	Dr. A. Pain ..	2—4 p.m. every Thursday
St. Mary's Parish Room, Whittlesey ..	Mrs. C. Cave ..	Dr. W. Meikle ..	2—4 p.m. every Tuesday

There are no ante-natal clinics in the area.

School clinics are in existence at March, Wisbech and Ely. Up to the end of 1930 the school clinic in March was held at the County Hall, but it has now been transferred to the March Nursing Home. A waiting room and consulting room is provided at each clinic and there is an additional room at Wisbech which can be used as a dressing room.

The following is a list of the clinics with situation, time of session, etc.:—

Situation.	Time of Session.	Provided by
Nursing Home, Regent Avenue, March ...	Each morning at 9.30	Isle of Ely Education Committee
County Clinic, Lynn Rd., Wisbech ...	Every Friday at 9.30	do.
County Clinic, Downham Rd., Ely ...	Every Monday, at 9.30	do.

In addition to the times stated above, cases can be seen, if necessary, daily, by arrangement with the school nurse.

Each clinic has a room in which refraction work can be carried out, but in the case of March the refraction work is still done at the County Hall and not at the Nursing Home.

There is an orthopaedic centre at the Women's Conservative Club, Ely, under the management of the Cambridgeshire branch of the British Red Cross Society. An orthopaedic sister attends every fortnight on Thursdays at 12 noon and Dr. H. B. Roderick, of Cambridge, attends monthly at the same time. The County Council and the Education Committee each make a grant of £10 per annum to the centre and also pay a capitation fee of 3/- per attendance in respect of cases approved for attendance by the County Medical Officer.

The County Council provides three Tuberculosis Dispensaries as under:—

Situation.	Time of Session.	Accommodation.
County Hall, March ...	2 p.m.—4 p.m. every Wednesday	... Waiting Room, Consulting Room and Dressing Rooms
County Clinic, Lynn Rd., Wisbech ...	2 p.m.—4 p.m. every Tuesday	... Waiting Room, Consulting Room and Dressing Rooms
County Clinic, Downham Rd., Ely ...	2 p.m.—4 p.m. every Thursday	... Waiting Room and Consulting Room

Treatment Centres for Venereal Disease exist at Addenbrooke's Hospital, Cambridge, and 28, Fitzwilliam St., Peterborough. There are no centres actually within the county. The County Council contributes to each centre an annual sum based on the ratio between the number of Isle of Ely patients and total patients attending each year.

The times of sessions are as follows:—

Addenbrooke's Hospital, Cambridge.

Males—Every Tuesday, 4 p.m.—5 p.m.

Every Thursday, 8 p.m.—9 p.m.

Females—Every Tuesday, 3 p.m.—4 p.m.

Every Thursday, 7 p.m.—8 p.m.

Fitzwilliam St., Peterborough.

Males—Every Tuesday and Friday, 6—7 p.m.

Females—Every Tuesday and Friday, 5—6 p.m.

There are no day nurseries or other clinics in the area.

LOCAL GOVERNMENT ACT, 1929.

Under the above Act, three main medical services were transferred from Boards of Guardians to the County Council, viz.:—

- Treatment of Sick Poor.
- Vaccination Services.
- Infant Life Protection.

As regards the treatment of the sick poor both inside and outside institutions, the existing institutions and medical officers have been transferred *en bloc* from the service of the respective Boards of Guardians to the County Council, and the medical officers have continued to carry out the work on similar lines to those in operation before the commencement of the Act, with certain minor adjustments of districts.

Similar remarks may be made with regard to Vaccination Services, although the general administration of the service has been entrusted to the Public Health Committee and County Medical Officer, and not to the Public Assistance Committee.

The Infant Life Protection clauses of the Children's Act, 1908, are now administered by the Public Health Committee and County Medical Officer. Reception of a child under the age of 7 years for gain must be notified to the County Medical Officer. The visiting of such children and reporting upon the homes is carried out by the six full time health visitors of the area. Reports are furnished by them to the County Medical Officer at three monthly intervals and at such other times as they are deemed necessary. Obviously this is a more satisfactory arrangement than the old one, under which the children might be visited by individuals having no special training either in the visiting of homes or the care of children.

Up to the present it has not been found possible to provide any Poor Law Services under the Special Acts set out in Section 5 (1) of the Local Government Act of 1929.

No immediate developments in this direction are in prospect, but it would seem that in the event of accommodation being provided in the Whittlesey Institution for all classes of female mental defectives, and a reciprocal arrangement being entered into for the reception of male mental defectives by another county, it might be possible for all mental defectives to be dealt with under the Mental Deficiency Act of 1913.

Also it has been suggested that the building at present used as a Children's Home at the Ely Institution would be available for other purposes if and when the children at present in the various institutions are housed in a central home. If so, it would form a useful nucleus for a hospital for advanced tuberculosis and it would then be possible to deal with all cases of tuberculosis under the Public Health (Tuberculosis) Act of 1921.

As no hospital provision (other than isolation hospital provision) is in immediate contemplation, there has so far been no occasion for consultation with representatives of voluntary hospitals.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

In the Ely Urban District an extension of the existing main was made to the village of Chettisham and a new main was laid from the Water Tower along the Witchford road, while in the Ely Rural District mains were extended in Littleport, and in the Little Downham area to include the villages of Pymoor and Oxlode.

Larger extensions in the Ely Rural District were in contemplation during the year, namely to the villages of Haddenham, Wilburton and Stretham, and these have since been put in hand. At the time of writing they are practically complete.

Another important extension in contemplation during 1930 was that of the Peterborough supply to the Urban District of Whittlesey. Work on this has now been commenced and is likely to be completed by the end of 1931.

RIVERS AND STREAMS.

All the rivers of the area are polluted by sewage, particularly the old course of the Nene which is polluted by the effluent from the town of March.

In addition, the River Ouse receives the effluent from the Beet Sugar Factory at Ely. During the beet sugar campaigns, this has proved a serious source of pollution in former years, but an improved purification plant was installed in 1930 and samples taken before and after the commencement of the campaign indicated a considerable decrease in pollution, though it could not be said to have been reduced to vanishing point. The attention of the factory was drawn to the matter and it is hoped that still more improvement may be effected in the future.

DRAINAGE AND SEWERAGE.

There have been no notable extensions or improvements in drainage or sewerage in the county during the year.

Closet accommodation, scavenging, sanitary inspection, smoke abatement, control of premises and occupations by bye-laws or regulations are all matters which are dealt with by the medical officers of health of local sanitary authorities and do not call for special mention in this report.

SCHOOLS.

As is to be expected, the newer schools of the area are satisfactory as regards sanitary condition and water supply, while the older ones tend to be defective in these respects.

The most striking defect is the existence of the "vault" type of closet accommodation. These could, with advantage, in all cases be replaced by pail closets and even in some cases by water closets.

Smoking chimneys and unsatisfactory playgrounds are also in existence at some schools and overcrowding is present in one or two cases.

Remedy of individual defects is apt to be delayed by reason of the fact that reorganisation of the schools of the area is in prospect, and, while the reorganisation will no doubt result in hygienic schools, it is somewhat unfortunate that this necessitates the curtailment of expenditure on existing schools.

The closure of schools for infectious disease has again been reduced to the minimum.

During 1930, certificates under Article 45 (b) of the Code were issued in respect of 12 schools. The diseases concerned were as follows—

Measles	...	...	5
Scarlet fever		...	1
Diphtheria	...	...	3
Mumps	...	...	2
Epidemic cough		...	1

In the case of the one school with scarlet fever the closure was recommended because the case occurred in the family of the headmaster.

Two adjacent schools in Whittlesey were closed for diphtheria for one week at the end of a term. The epidemic had been of long duration and there had been a sudden spread of cases in the schools concerned, so that it was felt that it might be advisable to try the effect of prolonging the school holiday by a week.

All the remaining schools were closed because they served widely scattered areas and it was hoped to limit the spread of the epidemic in consequence.

It may, however, be noted that in no case except the first was any marked effect on the epidemic noted.

The power of excluding scholars under Article 53 (b) of the Code has been widely used. A list of cases of infectious disease is received from the various head teachers at the end of each week, and both from them and other sources at intermediate times. The details are immediately passed on to the appropriate Health Visitor or District Nurse who visits the houses concerned to give instructions regarding

the exclusion of the case and contacts. She also visits the school with the object of excluding suspicious cases and contacts. This is a far more useful procedure than school closure and allows those unaffected to proceed with their education.

The following is a summary of the notifications received from head teachers during the year and the number of schools concerned.

Schools concerned	Scarlet fever	Diphtheria	Whooping cough	Chicken pox	Measles	German measles	Mumps	Ringworm	Impetigo	Sore throat	Other cases	Total
74	148	87	136	167	975	53	326	66	22	1	34	2015

No action was taken by Local Sanitary Authorities with regard to school closure under Article 57 of the Code.

Several visits have been made to the schools at Whittlesey and Prickwillow in connection with diphtheria outbreaks by the medical officers and health visiting staffs. On these visits swabs were taken from all children with unhealthy throats and those showing the presence of diphtheria bacilli were excluded from school. Subsequent visits were made to the houses concerned so that further swabs might be taken before the affected children returned to school, and in the case of the Prickwillow children, through the kind co-operation of Dr. Beckett, the Medical Officer of Health of the Ely Urban District, the children with positive swabs were admitted to the Ely Isolation Hospital. They were not discharged until considered free from infection.

INSPECTION AND SUPERVISION OF FOOD.

(a) *Milk Supply.*

The inspection of farms and dairies is undertaken by the sanitary inspectors of the various district councils in the area.

No bacteriological examination of milk is undertaken by the County Council, nor is there any routine inspection of cattle under the Milk and Dairies Order of 1926.

One milk vendor in the county sells Grade A Tuberculin Tested Milk and receives his licence to do so from the Ministry of Health.

(b) *Meat and other Foods.*

The inspection of meat, slaughter houses, shops, stalls and vehicles and places where food is prepared is undertaken by officials of the local sanitary authorities and not by the County Council.

(c) *Adulteration.*

70 samples of milk were examined for the presence of preservatives. They were found to be absent in all samples.

Of the adulterated samples, two informal samples of milk from Ely and Mepal were found to be 10% and 44.5% deficient in milk fat respectively. In the latter, added water was present to the extent of 2.7%.

A formal sample of milk from Mepal was found to contain added water to the extent of 16.47% and a formal sample from Ely was 15% deficient in milk fat.

Proceedings were taken in both instances but the cases were dismissed.

An informal sample of butter taken at March contained 70% margarine. A formal sample was procured and this showed 71.6% of margarine. Proceedings were instituted and the vendor was fined £5.

An informal sample of milk taken at Whittlesey was 22.66% deficient in milk fat. Upon analysis of a formal sample it was 4.66% deficient, but no proceedings were taken, however.

An informal sample of milk taken at March was found to be 25% deficient in milk fat. A formal sample was procured but this proved to be genuine.

An informal sample of milk taken at Elm proved to be 9.66% deficient in milk fat.

Six informal samples of milk taken in the Wisbech area were found to be deficient in milk fat to the extent of 12%, 7.66%, 7.33%, 12.66%, 9.66% and 9.33% respectively.

Two formal samples taken in Wisbech were found to be 2.66% and 14% deficient in milk fat respectively but no proceedings were taken against the vendors.

Two formal samples of tinned cream taken in Wisbech showed that a considerable proportion of added water was present in each. Correct statements were made on the label in each case as to preservatives present.

Four informal samples of butter taken at Witcham, Adelaide, Oxlode and Coveney respectively, all showed an excess of added water.

A formal sample of milk taken at Wimblington was found to be 11.66% deficient in milk fat. No proceedings were instituted, however.

Samples taken in 1930	Adelaide	Chatteris	Coveney	Elm	Ely	Guyhirn	Haddenham	Leverington	Little Downham	Littleport	March	Mepal	Oxlude	Pymoor	Stretham	Sutton
Aniseed Balsam
Arrowroot
Aspirin Tablets	3	..	..	..	..	..
Bacon	1	..	..	..	..	..
Baking Powder	1	..	..	..	..	..	..	..
Beans (baked)
Beer	1	..	..	..	..	..
Boracic Ointment..	1	..	..	..	..	..
Boracic Powder	1	..	..	..	..	..
Borax	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Butter ..	2	..	17	2	..	..	2	..	..	1	4	..	6	3	2	1
Cakeoma
Camphorated Oil	2	..	..	..	..	..
Castor Oil	1	2	..	..	..	..	..
Castorets	1	..	..	..	..	..
Cheese	1	..	..	..	..	..	..	..
Coffee
Cold Cream	1	..	..	..	..	..
Cream (preserved)..
Cream (tinned)
Cream of Tartar	1	..	..	..	..	..	..
Custard Powder	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Eucalyptus Oil	1	..	..	..	..	..
Fish & Meat Pastes	1	..	..	..	..	1	3	..	..	..	..	..
Flour
Fruit (tinned)
Glycerine	1	..	..	..	..	..
Headache Powder..	1	..	..	..	..	..
Honey
Jam	1	..	..	..	..	..
Lard	1	..	..	..	..	..	..
Lemon Cheese
Lemon Curd
Lemon Flavouring
Essence	1	..	..	..	..	..	..	..	..	..	..	..
Lemon Juice and
Glycerine Cream
Licquorice and
Menthol Pellets	1	..	..	..	..	..
Margarine	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..
Marmalade	1	..	..	..	..	..
Melrose Tablet

Continued on following page.

Samples taken in 1930	Whittlesey	Wimblington	Wisbech	Wisbech St. Mary	Witcham	Witchford									Total
Aniseed Balsam	1	..	..	..	..	..	..	..	..	1
Arrowroot
Aspirin Tablets	3
Bacon	1	..	..	..	..	..	..	..	..	..	..	..	2
Baking Powder	1
Beans (baked)	1	..	..	..	..	..	..	..	..	..	..	..	1
Beer	1
Boracic Ointment	1
Boracic Powder	1
Borax	1
Butter	2	..	4	..	..	..	..	..	..	..	..	..	48
Cakeoma	1	..	..	..	..	..	..	..	..	..	..	..	2
Camphorated Oil	2
Castor Oil	3
Castorets	1
Cheese	1
Coffee	1	..	..	..	..	..	..	..	..	1
Cold Cream	1	..	..	..	..	..	..	..	..	..	..	..	2
Cream (preserved) ..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Cream (tinned)	2	..	..	..	..	..	..	..	..	..	..	..	2
Cream of Tartar	1
Custard Powder	1
Eucalyptus Oil	1
Fish & Meat Pastes	2	..	..	..	..	..	..	..	..	..	..	..	7
Flour	1	..	..	..	..	..	..	..	..	..	..	..	1
Fruit (tinned)	9	..	..	..	..	..	..	..	..	..	..	..	9
Glycerine	1
Headache Powder	1
Honey	1	..	..	..	..	..	..	..	..	..	..	..	1
Jam	3	..	..	..	..	..	..	..	..	..	..	..	4
Lard ..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	3
Lemon Cheese	1	..	..	..	..	..	..	..	..	..	..	..	1
Lemon Curd	1	..	..	..	..	..	..	..	..	..	..	..	1
Lemon Flavouring Essence	1
Lemon Juice and Glycerine Cream	1	..	..	..	..	..	..	..	..	..	..	..	1
Licquorice and Menthol Pellets	1
Margarine	1	..	..	..	..	..	..	..	..	..	..	..	3
Marmalade	9	..	..	..	..	..	..	..	..	..	..	..	10
Melrose Tablet	1	..	..	..	..	..	..	..	..	..	..	..	1

Continued on following page.

Samples taken in 1930	Adelaide	Chatteris	Coveney	Elm	Ely	Guyhirn	Haddenham	Leverington	Little Downham	Littleport	March	Mepal	Oxlude	Pymoor	Stretham	Sutton
Milk	2	..	6	3	1	1	2	1	..	9	2	..	..	..	1
Nitre, Spirit of	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Oatmeal	1	..	..	..	..	..	..	..	..	..
Olive Oil	1	..	..	..	..	..
Patent Cough Med.	1	..	..	..	..	..
Peaflour	1	..	..	..	..	..	..	..	..	..	..	..
Pepper	1	..	..	..	..	..	2	..	..	..	..	..
Pickles
Pills, Head & Stom.	1	..	..	..	..	..
Pills, Liver..	1	..	..	..	..	..
Rice	1	..	..	..	..	..	..	..	..	..
Salmon (tinned)
Sardines (tinned)
Seidlez Powder
Soda Mint Tablets	1	..	..	..	..	..
Sodium Bicarbonate	1	..	..	..	..	..	..	..	..	..
Soup Tablets	1	..	..	..	..	..	..
Sugar	1	..	..	..	..	..	..	..
Sweets	4	..	..	..	..	..	..	..	..	..	22	..	..	..	..	..
Table Jelly
Tartaric Acid	1	..	..	..	..	..	..
Tea	1	..	..	..	..	..	..	..
Tincture of Benzoin	1	..	..	..	..	..	..	..	..	..	..	..
Tincture of Iodine	1	..	..	..	..	..	..	..	..	..	..	..
Tooth Essence	1	..	..	..	..	..	..	..	..	..	..	..
Vaseline	1	..	..	..	..	..
Whiskey	1	..	..	..	..	..
Zinc Ointment	1	..	..	..	..	..
Totals	6	6	17	8	10	1	6	2	5	6	68	2	8	3	3	2

Continued on following page.

(d) *Chemical and Bacteriological Examination of Food.*

Samples of Food taken by the Inspector of Weights and Measures are forwarded for analysis to Mr. S. Greenberg, Public Analyst, at Cambridge.

The examinations include enquiry into the nature of samples with regard to adulteration or deficiency in constitution, and also as to the presence of preservatives.

No bacteriological examination of food is undertaken by the County Council.

(e) *Nutrition—dissemination of knowledge.*

No direct propaganda work with regard to nutrition is undertaken by the County Council, but the visits of Health Visitors to the homes of infants and children of school age, as well as the attendance of infants at Infant Welfare Centres have a definite bearing on this point. One of the main features of the information gained by mothers on these visits is knowledge concerning nutrition.

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

There has been a notable absence of small pox either of the major or minor type throughout the county during the year. Notification was received of the arrival of contacts with London cases to take part in fruit picking operations, but, although observation of the premises concerned was undertaken by the district medical officer of health (Dr. C. H. Gunson) no cases of the disease materialised.

Scarlet fever and diphtheria have been the two prevalent infectious diseases, and, of these, the cases of scarlet fever have arisen almost entirely in the Wisbech area (a total of 265 cases in the Borough and Rural District) and the cases of diphtheria largely in the Whittlesey area (95 cases). Both these epidemics actually commenced in the previous year. There was also a smaller epidemic of diphtheria in the Ely area (39 cases in the Urban and Rural Districts).

The isolation hospital accommodation available in the Wisbech area has been utilised for the control of the scarlet fever epidemic and that in the Ely area for the control of the diphtheria outbreak there. In addition one of the schools in the Ely area which seemed to be the centre of the outbreak was visited by the School Medical Officer. Swabs were taken from all children with unhealthy throats and those found to be carriers of the bacilli were isolated in the Ely Isolation Hospital until free from infection by the co-operation of the district medical officer of health (Dr. F. H. Beckett).

In the case of the Whittlesey outbreak there was no isolation hospital which could be utilised in the control of the epidemic. Cases had to be isolated at home as far as possible, but the district medical officer of health (Dr. R. C. Gubbins) came to an arrangement with the practitioners of the area whereby patients were not released from isolation until three negative throat swabs had been obtained. Such isolation, is, however, necessarily very incomplete and depends largely on the co-operation of the patients concerned. Attention was also focussed on the schools and a number of throat swabs were taken by the School Medical Officers, followed by exclusion of children found to be "carriers."

The absence of isolation facilities in Whittlesey may serve to draw attention to the fact that the facilities in this respect for the centre of the county generally are insufficient. With the exception of two very small hospitals at March and Chatteris respectively which would be quite inadequate to deal with large outbreaks, there are no isolation hospitals in the area at all, and the Urban District of Whittlesey, and Rural Districts of Thorney and North Witchford must be considered as having no isolation facilities at their disposal, although inoperative agreements with the Borough of Peterborough are in existence in the case of the first two.

Three possible methods of dealing with the difficulty have been considered, so that a scheme may be formulated under section 63 of the Local Government Act:—

(1) A central isolation hospital for the whole county has been dismissed as impracticable.

(2) A central isolation hospital to serve the central districts which are at present without adequate accommodation, the existing hospitals at Ely and Wisbech to continue in use,

(3) Extension of the existing hospitals at Ely and Wisbech to provide accommodation for patients from the central districts with the enlargement of the existing Joint Hospital Boards for the management of each by the inclusion of members from the central districts.

Opinion is divided upon the last two suggestions. While there can be no doubt that the building of another hospital would tend the more adequately to cover the area with isolation provision, it seems likely that the third suggestion would be the most economical.

Up to the present, no use has been made in the county of the Schick and Dick tests, nor of artificial immunization against either scarlet fever or diphtheria.

There does not appear to have been any extraordinary prevalence of influenza during 1930.

Some assistance in the control of infectious disease is lent by the arrangements which are in force with regard to infectious diseases in the schools of the area. The details regarding cases received from the head teachers and from other sources are passed on to the appropriate health visitor, who visits both the school and the homes concerned with a view to the exclusion of children from school where necessary, and to the giving of advice with regard to the isolation of the case.

MATERNITY AND CHILD WELFARE.

There are no bona-fide midwives practising in the Isle of Ely. Twelve midwives notified their intention to practice in the County during 1930.

Thirty-five notices were received from midwives under the Regulations of the Central Midwives' Board, as having sent for medical help.

Milk to infants and nursing mothers was provided to the value of £93 13s. 3d.

Health Visitors paid 1,490 first visits, and 15,148 subsequent visits to children at their homes during the year, 7,100 of these latter ones being to children aged from one to five years.

The sum of £26 14s. 0d. was incurred in respect of fees to medical practitioners summoned to the aid of midwives in necessitous cases.

Eleven cases of difficulty in connection with parturition were treated at Addenbrooke's Hospital for a total period of 181 in-patient days at a total cost to the County of £62 2s. 10d.

The County midwives are regularly visited, their books, appliances, and modes of practice being carefully investigated.

There is no County Nursing Association in the Isle of Ely. Nurses belonging to some of the District Nursing Associations, however, receive visits from a Lady Inspector sent by the Queen Victoria Jubilee Institute for Nurses, apart from those paid them by the County Medical Officer of Health.

WELFARE OF THE BLIND.

During the past year the Home Teacher and Visitor for the Blind (J. H. MacKenzie, M.A.) who holds the Home Teacher's Certificate of the College of Teachers for the Blind, continued to visit the blind and partially blind in the area, and gave instruction to suitable cases.

He reports as follows :—

The number of persons on the Register of the Blind in the Isle of Ely during the year 1930 was 73. Of these, 39 were males and 34 females of ages varying as follows :—

MALES.

0-5	5-16	16-21	21-30	30-40	40-50	50-60	60-70	70			Total
..	4	5	4	3	6	2	7	8	..	..	39

FEMALES.

..	5	1	3	4	1	7	4	9	34
----	---	---	---	---	---	---	---	---	----	----	----

There are also 1 male and 4 females who cannot be classed as blind. It is, however, thought desirable to classify them as observation cases. This policy is adopted by many Blind Societies, and is favoured by the Ministry of Health.

The total number of visits paid during the year was 754, and the total number of lessons given was 305, these being, Braille 113, Basket Making 164, Chair Caning 9, Rush Seating 17, Tennis Racket Stringing 2.

There are 3 workers included in the Home Workers' Scheme, producing agricultural and general baskets. Chair caning and rush seating are also undertaken. The Home Teacher has been instructing one of the home workers in the re-stringing of tennis rackets. The pupil has made very good progress, and is executing a number of repairs with success. The other two home workers are engaged in the manufacture of baskets generally. Towards the end of the year, one of the home workers, a man of 60, and in feeble health, died. The Home Teacher is at present instructing a young woman in chair caning and light basketry, and it is hoped very shortly to place her on the Home Workers' Register.

There are two shopkeepers in the district, a Confectioner and Tobacconist, and a Hosier and Knitter; both are doing well.

The Isle of Ely Society for the Blind made grants to the three home workers in augmentation of earnings, in two cases 7/6 weekly, and in the third case 5/-.

The National Library for the Blind is supplying five readers with literature. The Society makes a grant of £1 per reader to the library.

There are 9 Blind and Partially Blind children under the age of 16. Of these, 3 are attending a Special School for the Blind; one is attending a Council School; 3 are Mentally Deficient; one is being instructed by the Home Teacher, and one is of very feeble health.

Towards the close of the year the British Wireless Fund for the Blind forwarded 10 one-valve receiving sets which the Society distributed and had installed for the most urgent cases on the register. The sets are of extremely good design, giving ample power and sensitive tuning, and have been a great boon to Blind Listeners. In the near future the Wireless Fund for the Blind will be in a position to provide an additional number of these sets.

The Home Teacher is very much indebted to local wireless agents who have so willingly given their services in the installation of these sets.

PREVENTION OF BLINDNESS.

No action has been taken under section 66 of the Public Health Amendment Act, 1925, for the prevention of blindness or for the treatment of persons suffering from disease or injury to the eyes.

OPHTHALMIA NEONATORUM.

The following table gives particulars of cases of ophthalmia neonatorum notified during 1930:—

Cases			Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	At home	In hospital				
2	2	—	2	—	—	—

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1930.

The following table shows the new cases of the disease notified during 1930 and the mortality at different age periods:—

Age Periods	New Cases				Deaths			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M	F	M	F	M	F	M	F
0 .. ..	..	..	2	1	..	..	1	1
1	1	1	9	4	..	..	1	1
5	4	4	4	7	..	2	1	3
15	7	13	7	3	3	8	1	..
25	11	8	6	1	6	9	1	..
45	14	3	1	1	7	..	2	..
65 and upwards	4	1	..	..	1	1	..	..
Totals ..	41	30	29	17	17	20	7	5

Only one case of tuberculosis died without previous notification, indicating that the notification of the disease in the area is well carried out. No proceedings for neglect to notify were necessary.

During 1930, a revision of the numbers of patients remaining on the registers was undertaken in conjunction with the District Medical Officers of Health, with the result that large numbers were removed as having died, left the area or been cured, while in some cases the original diagnosis was thought to have been doubtful.

It was found that the names of 498 patients might properly be allowed to remain on the registers as against 774 names at the end of 1929.

As has been stated earlier in the report, there are Tuberculosis Clinics at March, Wisbech and Ely. The times of attendances have already been detailed. New patients are seen only on the request of a private practitioner or the School Medical Officer except in those very rare cases where no practitioner is available to deal with the case. Contacts are also examined in all cases where consent can be obtained, but response in this direction is, unfortunately, difficult to elicit.

It should perhaps be emphasised that it is not necessary that cases coming to the tuberculosis clinics for an opinion as to their condition should first be notified as cases of tuberculosis. The clinics exist for the purpose of the early detection of tuberculosis as well as for the advising of suitable treatment in cases where the diagnosis is established, and it is inevitable that if this object of their use is kept well in view, many cases must be sent up in which the diagnosis of tuberculosis is not ultimately upheld.

An important development of this side of the function of the clinics during 1930 has been the provision of arrangements whereby doubtful cases can be X-rayed. Cases from the north of the county, *i.e.*, in the March and Wisbech areas, are X-rayed by Dr. Leslie Groom, of Wisbech, and cases from the south of the county by Dr. Paton Philip, the Cambridgeshire Tuberculosis Officer. An X-ray photograph and an opinion on each case is furnished to the Tuberculosis Officer, a fee of one guinea being paid by the County Council in respect of each case. This feature of the work is proving of great utility. Twelve cases were dealt with under this arrangement during the portion of 1930 for which it was in force, and it is expected to be of greater utility in future years.

The following attendances were made at the tuberculosis clinics during the year:—

At the Ely Tuberculosis Clinic there were 99 patients, the numbers attending in the respective quarters of the year being 27, 34, 31, and 37, making 53, 51, 42 and 61 attendances, or 207 attendances in all.

At March there were 110 patients, the numbers in each quarter being 39, 39, 35, and 78 respectively, making 62, 54, 51, and 97, or 264 attendances in all.

At Wisbech there were 129 patients, the numbers attending in the respective quarters of the year being 42, 41, 33, and 69, making 67, 70, 53, and 98, or 288 attendances in all.

At your County Clinics, therefore, 338 cases of Consumption, or other forms of Tuberculosis, or suspected Tuberculosis, attended for consultation or treatment, making 759 attendances, an average weekly attendance of 14 patients.

Further details as to the work of the clinics may be gathered from the table furnished at the end of each year to the Ministry of Health, which is incorporated in this report.

Return showing the work of the Dispensaries during the year 1930.

DIAGNOSIS	PULMONARY				NON-PULMONARY				TOTAL				
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts):													
(a) Definitely tuberculous ...	15	18	0	1	6	3	7	3	21	21	7	4	
(b) Doubtfully tuberculous ...	—	—	—	—	—	—	—	—	4	3	10	11	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	13	12	26	33	
B.—Contacts examined during the year:—													
(a) Definitely tuberculous ...	0	1	1	0	0	0	0	0	0	1	1	0	
(b) Doubtfully tuberculous ...	—	—	—	—	—	—	—	—	—	—	2	2	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	—	2	20	18	
C.—Cases written off the Dispensary Register as													
(a) Cured ...	6	4	10	10	3	1	4	4	9	5	14	14	
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	26	24	61	67	
D.—Number of persons on Dispensary Register on December 31st:—													
(a) Diagnosis completed ...	74	48	23	24	17	9	20	9	91	57	43	33	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	0	0	4	2	

1. Number of persons on Dispensary Register on January 1st	297	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary... ..	0
2. Number of patients transferred from other areas and of "lost sight of" cases returned	15	10. Number of consultations with medical practitioners:— (a) At homes of Applicants (b) Otherwise	38 69
3. Number of patients transferred to other areas and cases "lost sight of"	47	11. Number of other visits by Tuberculosis Officers to Homes	58
4. Died during the year	26	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	512
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	8	13. Number of (a) Specimens of sputum, &c., examined (b) X-ray examinations made, in connection with Dispensary work	89 12
6. Number of attendances at the Dispensary (including Contacts)	759	14. Number of Insured Persons on Dispensary Register on the 31st December	91
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision	0	15. Number of Insured Persons under Domiciliary Treatment on the 31st December	41
8. Number of attendances, at General Hospitals, or other Institutions approved for the purpose, of patients for (a) "Light" treatment (b) Other special forms of treatment	0 0	16. Number of reports received during the year in respect of Insured Persons:— (a) Form G.P. 17 (b) Form G.P. 36	0 49

HOME VISITING.

There were 117 consultations with medical men and 96 visits were paid by your County Medical Officer to cases in their own homes.

Health Visitors made 1,518 visits to their homes. All the 34 shelters have been in use; they prove of great value, and every effort is made to keep them in good condition, by repairing them when required.

BEDS AT SANATORIA.

The Council reserves one female and four male beds at the Borough Sanatorium, Ipswich; during the year 75 cases of Tuberculosis were sent to Hospital or to Sanatoria, making with 15 cases already in Institutions on January 1st, 1930, a total of 90 residential cases, of whom 59 were males and 31 females. At the close of the year, 32 cases (20 males and 12 females) still remained in Institutions.

Beds are not reserved elsewhere, but are taken as required in localities appropriate to the patient's needs.

At Ipswich, 21 males and 15 females were treated, totalling 4,045 in-patient days.

To Addenbrooke's Hospital, Cambridge, 8 male and 6 female surgical cases were sent, totalling 454 in-patient days.

To the Papworth Colony, Cambridge, 8 males and 1 female were sent, totalling 1,423 in-patient days.

To Kelling, Holt, 2 males were sent, totalling 446 in-patient days.

To the Royal Sea-Bathing Hospital, Margate, 4 male and 3 female surgical cases were sent, totalling 907 in-patient days.

To the Old Manor House Sanatorium, Broadstairs, one female was sent, totalling 59 in-patient days.

To the Manfield Orthopaedic Hospital, Northampton, 7 male and 1 female surgical cases were sent, totalling 1,005 days.

To the Eversfield Hospital, St. Leonards-on-Sea, 2 males were sent, totalling 92 days.

To Wyton Sanatorium, 7 males and 3 females, all children, were sent, totalling 1,855 in-patient days.

To the Holland Sanatorium, Lincolnshire, 1 female was sent, totalling 68 in-patient days.

The total stay of these 90 patients amounted to 10,354 in-patient days, an average stay of 114 days per case, compared with 46 males and 23 females in 1929, with an average stay of 126 days per in-patient.

Extra nourishment in the form of milk and eggs were provided to Tuberculous persons to the value of £51 11s. 0d., compared with £54 15s. 0d. in the previous year.

BACTERIOLOGICAL WORK.

93 specimens of Sputum were examined, 15 being found positive and 78 negative.

VENEREAL DISEASES.

The following table shows the details of Isle of Ely cases treated for venereal disease from 1919 to 1930 at the clinics at Cambridge and Peterborough:—

Year	Total New Cases attending for Consultation	New cases of				Total Out-Patient Attendance	Total In-Patient Days	Doses of Arseno-Benzol Compounds given to	
		Syphilis	Soft Chancre	Gonorrhoea	Non-venereal Conditions			In-Patients	Out-Patients
1919	35	12	..	16	7	..	104	..	..
1920	48	26	..	16	6	416	197	26	5
1921	41	17	..	23	1	341	155	19	5
1922	26	7	..	10	9	265	145	3	151
1923	29	10	1	16	2	288	386	21	168
1924	19	9	..	7	3	280	260	15	189
1925	40	12	..	21	7	293	270	6	129
1926	12	3	..	8	1	278	2	..	149
1927	21	4	..	14	3	244	89	2	126
1928	47	20	1	21	5	564	168	8	263
1929	56	15	..	32	9	827	68	..	319
1930	53	13	1	31	8	603	58	..	236

It will be seen that the figures for 1930 show a very slight decline on those for 1929. There have been two cases less of syphilis and one less of Gonorrhœa.

Of the total cases attending the clinic at Cambridge (including cases from areas other than the Isle of Ely) 16% ceased treatment before their cure was completed, as against 48% in 1929.

Of those attending at Peterborough (again including cases from areas other than the Isle of Ely), 22% ceased treatment before their cure was completed, as against 21% in 1929.

No figure is available on this point with regard to Isle of Ely patients only and there seems to be no reliable means by which an estimate can be made. It may be noted, however, that in 1929 with 47 patients actually suffering from venereal disease, 827 attendances were made, that is (leaving out of account any attendances made by

patients found not to be suffering from venereal disease) an average number of attendances per patient of 17·5. In 1930, with 45 patients actually suffering from the disease, 603 attendances were made, giving an average attendance of 13·4 per patient. There is thus no reason to think that any improvement has taken place in the constancy of attendance of Isle of Ely patients, the indication being in the other direction. No doubt the fact that there is no centre for the treatment of venereal disease actually within the area, so that a train or bus journey, of considerable length in most cases, is necessary before treatment can be obtained, militates against the completion of treatment by Isle of Ely patients. Consideration has been given by the Public Health Committee to the question of the provision of a centre at March, but up to the present it has seemed impracticable.

Railway fares of patients travelling to Peterborough and Cambridge are paid when necessary.

Laboratory facilities are provided for the use of practitioners where the diagnosis is doubtful, and arseno-benzol compounds can be obtained gratuitously by approved practitioners through the Public Health Department for the private treatment of patients.

Six beds are available at Addenbrooke's Hospital for the in-patient treatment of venereal disease.

HOUSING.

	Urban Districts					Rural Districts			
	Chatteris	Ely	March	Whittlesey	Wisbech	Ely	North Withford	Thorney	Wisbech
Number of new houses erected during the year:—									
(a) Total (including numbers given separately under (b))..	..	64	124	16	14	..	8	1	8
(1) By the Local Authority
(2) By other Local Authorities
(3) By other bodies or persons	14	..	..	14	..	..	1	..
(b) With State assistance under the Housing Acts—									
(1) By the Local Authority —
(a) For the purpose of Part II. of the Act of 1925
(b) For the purpose of Part III. of the Act of 1925	50	..	..	..	..	..	..	..
(c) For other purposes	10	..	..	..	..	..
(2) By other bodies or persons	1
1. Inspection of dwelling-houses during the year—									
(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	72	181	209	492	384	285	65	89
(2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	72	40	209	120	359	30	65	52
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	16	13	..	11	6	3	..	13
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	28	36	11	196	18	25	..	43
2. Remedy of Defects without serving of formal Notices.									
Number of dwelling-Houses rendered fit in consequence of informal action by the Local Authority or their Officers..	..	21	28	7	180	3	3	..	44

3. Action under Statutory Powers.

A. Proceedings under Sec. 3 of the Housing Act, 1925.

- (1) Number of dwelling-houses in respect of which notices were served requiring repairs
- (2) Number of dwelling-houses which were rendered fit—
 (a) by owners
 (b) by Local Authority in default of owners
- (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close

B. Proceedings under Public Health Acts.

- (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
- (2) Number of dwelling-houses in which defects were remedied—
 (a) by owners
 (b) by Local Authority in default of owners

C. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925.

- (1) Number of representations made with a view to the making of Closing Orders
- (2) Number of dwelling-houses in respect of which Closing Orders were made
- (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit
- (4) Number of dwelling-houses in respect of which Demolition Orders were made
- (5) Number of dwelling-houses demolished in pursuance of Demolition Orders

..	..	6	4	..	1	..	..	1
..	..	6	11	..	1	..	..	1
..
..	..	..	..	..	..	..	..	1
..	16	3	4	13	..	..	..	1
..	16	1	4	13	..	..	..	1
..	..	2	..	..	..	..	..	..
..	1	8	..	11	..	..	..	1
..	1	4	..	11	..	..	..	1
..	..	..	..	..	..	..	..	1
..	..	3	..	4	1	..	..	..
..	..	3	..	3	1	..	..	..

EXTRACTS FROM THE DISTRICT REPORTS.

I.—URBAN.

CHATTERIS URBAN DISTRICT.

Area, 13,719 acres.

1930 Statistics:—Birth-rate, 17·44. Death-rate, 9·3 (uncorrected). Death-rate (corrected), 7·24. Infantile Mortality-rate, 66·6 per 1,000 births. Illegitimacy-rate, 100 per 1,000 births.

Estimated mid-year (1929) population 5,160

Report not to hand at time of going to press.

ELY URBAN DISTRICT.

Area, 16,742 acres.

1930 Statistics:—Birth-rate, 17·1. Death-rate, 10·8 (uncorrected). Death-rate (corrected), 8·21. Infantile Mortality-rate, 14·92 per 1,000 births. Illegitimacy-rate, 44·7 per 1,000 births.

Estimated mid-year (1929) population 7,824

During the year under review an extension of the water main was taken to Chettisham and through to Little Downham.

Both the River Lark and River Ouse are polluted with sewage and have also been polluted at times by effluent from the Beet Sugar Factory.

MARCH URBAN DISTRICT.

Area, 19,777 acres.

1930 Statistics:—Birth-rate, 20·3. Death-rate, 9·8 (uncorrected). Death-rate (corrected), 9·08. Infantile Mortality-rate, 41·67 per 1,000 births. Illegitimacy-rate, 55 per 1,000 births.

Estimated mid-year (1929) population 10,640

During the year arrangements were made between the Council and the local Gas Company whereby the latter ceased to discharge their effluent into the river.

Water supply mains and sewer extensions have been carried out to meet the needs in the new housing areas.

WHITTLESEY URBAN DISTRICT.

Area, 25,437 acres.

1930 Statistics:—Birth-rate, 22.16. Death-rate, 11.26 (uncorrected). Death-rate (corrected), 8.85. Infantile Mortality-rate, 84.74 per 1,000 births. Illegitimacy-rate, 62.1 per 1,000 births.

Estimated mid-year (1929) population 7,986

The Council's contract for the supply of water by Peterborough has been approved by the Ministry of Health and tenders for the extension of the main are now in hand.

A weekly collection of house refuse has been established and is working satisfactorily.

WISBECH MUNICIPAL BOROUGH.

Area, 6,475 acres.

1930 Statistics:—Birth-rate, 17.7. Death-rate, 13.8 (uncorrected). Death-rate (corrected), 10.9. Infantile Mortality-rate, 66.03 per 1,000 births. Illegitimacy-rate 56.6 per 1,000 births.

Estimated mid-year (1929) population 11,950

A great improvement has been effected in the sanitary conditions through an order making the provision of proper sanitary dustbins essential.

There were nine cases of Enteric Fever and although extensive enquiries were conducted no conclusive proof of the source was discovered.

 II.—RURAL.

ELY RURAL DISTRICT.

Area, 63,999 acres.

1930 Statistics:—Birth-rate, 18.35. Death-rate, 11.39 (uncorrected). Death-rate (corrected), 8.42. Infantile Mortality-rate, 40.32 per 1,000 births. Illegitimacy-rate, 64.5 per 1,000 births.

Estimated mid-year (1929) population 13,510

During the year extensions of the water mains were carried out in the Littleport and Downham Fen areas. Sanction for extensions to Haddenham, Wilburton, Stretham, Thetford and Grunty Fen was acquired and the work is now proceeding.

NORTH WITCHFORD RURAL DISTRICT.

Area, 26,083 acres.

1930 Statistics:—Birth-rate, 16·6. Death-rate, 9·47 (uncorrected). Death-rate (corrected), 7·52. Infantile Mortality-rate, 34·8 per 1,000 births. Illegitimacy-rate, 46·5 per 1,000 births.

Estimated mid-year (1929) population 5,172

The water supply to Doddington, Manea and Wimblington continues to be satisfactory but the pressure is noticeably low during the summer months.

Benwick and Welches Dam still have to depend on stored rain-water and river water, the latter being usually contaminated by refuse.

THORNEY RURAL DISTRICT.

Area, 18,959 acres.

1930 Statistics:—Birth-rate, 19·5. Death-rate, 7·03 (uncorrected). Death-rate (corrected), 7·007. Infantile Mortality-rate, 60 per 1,000 births. Illegitimacy-rate, 40 per 1,000 births.

Estimated mid-year (1929) population 2,558

There has been no extension of the water supply but the filter-beds have been reconstructed on modern lines.

WISBECH RURAL DISTRICT.

Area, 46,113 acres.

1930 Statistics:—Birth-rate, 16·6. Death-rate, 9·04 (uncorrected). Death-rate (corrected), 8·14. Infantile Mortality-rate, 58·03 per 1,000 births. Illegitimacy-rate 89·28 per 1,000 births

Estimated mid-year (1929) population 13,380

Extensions of the water supply were carried out during the year. For the districts at Newton, Tydd St. Giles and Thurland's Drove, Upwell, it has not been possible to arrange for other than large underground rainwater storage tanks.

III.—PORT.

WISBECH PORT SANITARY AUTHORITY.

Dr. Crockatt reports that the condition of the shipping was very satisfactory.

134 vessels entered the port with a total tonnage of 30,482 tons. No case of infectious disease was found and there were no defects requiring attention.

The Port Hospital at Sutton Bridge has been inspected on several occasions (without previous notice) and on each occasion has been found to be thoroughly clean and well kept.

ADDENDUM.

Since this report went to press the Registrar General's figures for estimated populations for mid-year 1930 have been published and they are appended below.

Administrative County	...	...	77,790
Urban Districts	...	...	44,350
Chatteris	...	5,080	
Ely	...	8,132	
March	...	11,030	
Whittlesey	...	8,198	
Wisbech M.B.	...	11,910	
Rural Districts...	...	...	33,440
Ely	...	13,510	
North Witchford	...	5,141	
Thorney	...	2,319	
Wisbech	...	12,470	

The adjusted Birth-rates and Death-rates for the Isle, Urban and Rural Districts should now read as follows:—

Isle	...	...	Birth-rate, 18·47 per 1,000 population. Death-rate, 10·73 (uncorrected).
Urban Districts	...	...	Birth-rate, 18·69 per 1,000 population. Death-rate, 11·12 (uncorrected).
Rural Districts	Birth-rate, 18·18 per 1,000 population. Death-rate, 10·23 (uncorrected).

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