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# THE HEALTH OF LEICESTER DURING 1944

E. K. MACDONALD O.B.E., M.D., D.P.H. Digitized by the Internet Archive in 2017 with funding from Wellcome Library

# THE NINETY-SIXTH ANNUAL REPORT UPON



# THE HEALTH OF LEICESTER DURING 1944

E. K. MACDONALD O.B.E., M.D., D.P.H.

# CITY OF LEICESTER

# HEALTH COMMITTEE

### Chairman.

ALD. G. PARBURY.

### Vice-Chairman.

DR. ASTLEY CLARKE, D.L., J.P.

MR. BOWDEN. " FRISBY, J.P.

" JACKSON.

MISS M. GOODWIN,
MR. ROUND. J.P.
MR. SIMPSON, J.P.
MR. F. S. SMITH.
MR. F. S. SMITH. M.B.E., J.P. " WILFORD, J.P.

The Committee meet on the 4th Friday in each month in the Committee Room, Town Hall, at 3.30 p.m.

The Health Committee, together with the following co-opted members, not being members of the City Council, constitute the Statutory Maternity and Child Welfare Committee :- Mrs. Banton, Mrs. Taylor, Miss E. J. Windley, B.A.

# Accounts Sub-Committee.

Mr. ROUND. ,, HOLYOAK.

MRS. SWAINSTON.

### Health Inspection Sub-Committee.

MR. CORT (Chairman). DR. ASTLEY CLARKE, MR. COOPER. MISS FORTEY.

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MR. COOPER.
CORT. MISS FORTEY.

MR. HARRIS JACKSON. ALD. PARBURY. MR. ROUND. MRS. SWAINSTON. ALD. WILFORD.

### ISOLATION HOSPITAL SUB-COMMITTEES. Grounds.

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MR. HARRISON. ALD, PARBURY. MR. ROUND,

### Dietary.

MR. ROUND (Chairman). DR. ASTLEY CLARKE. MR. CORT.

MR. HARRIS. HARRISON. ALD. PARBURY.

# "Home Place" Management Sub-Committee.

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# Maternity and Child Welfare Sub-Committee.

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MISS CHAMBERLAIN.
DR. ASTLEY CLARKE.
MR. COOPER.
MISS FRISBY.
,, GOODWIN.

MR. PARAGREEN.
ALD. PARBURY.
MR. F. S. SMITH.
MRS. SIMPSON.
, BANTON.
, TAYLOR
MISS WINDLEY.

# Necessitous Maternity Cases.

MRS. SIMPSON.

MISS WINDLEY.

# Maternity Home and Day Nursery Management Sub-Committee.

ALD. HAND (Chairman).
MISS CHAMBERLAIN
DR. ASTLEY CLARKE.
MISS FORTEY.
, FRISBY.
, GOODWIN

MR. PARAGREEN.
ALD. PARBURY.
MRS. SIMPSON.
"BANTON.
TAYLOR.
MISS WINDLEY.

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DR. ASTLEY CLARKE.
MR. CORT.
,, COOPER.
MISS FORTEY,

MR. HARRIS.
" HARRISON.
" JACKSON.
" ROUND.
ALD. WILFORD.

# City General Hospital Sub-Committee.

DR. ASTLEY CLARKE (Chairman).
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CORT.
MISS FORTEY.
FRISBY.
MR. HARRIS.

MR. HARRISON.
ALD. PARBURY.
MR. ROUND.
MRS. SIMPSON.
"SWAINSTON.
ALD. IDA WARNER.
"WILFORD.

# CITY GENERAL HOSPITAL SUB-COMMITTEES.

# Assessments.

DR. ASTLEY CLARKE. MR. COOPER.

MR. CORT. ALD. PARBURY.

# Farms, Grounds and Buildings.

Mr. CORT (Chairman). Dr. ASTLEY CLARKE, Mr. COOPER.

Mr. HARRISON, ALD, PARBURY, Mr. ROUND,

### Dietary.

Mr. HARRIS (Chairman). Dr. ASTLEY CLARKE. Miss FORTEY.

ALD, PARBURY. Mr. ROUND. Mrs. SWAINSTON.

# Slum Clearance and Property Inspection Sub-Committee.

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DR. ASTLEY CLARKE.
MR. COOPER.
CORT.
MISS FORTEY.

MR. HARRIS.
" HARRISON.
" JACKSON.
" ROUND.
ALD. IDA WARNER.

# Office Accommodation Sub-Committee.

ALD, PARBURY (Chairman)
MR. CAVE,
DR. ASTLEY CLARKE,
MR. COOPER,
, CORT,
Miss FORTEY.

MISS FRISBY. ALD. HAND. MR. HARRIS. ", HARRISON. ALD. WILFORD.

# City Ambulance Service Sub-Committee.

DR. ASTLEY CLARKE. MR. COOPER. MISS FORTEY. ,, GOODWIN.

Mr. HARRISON. , JACKSON. ALD. PARBURY.

# Staff of the Health Department

(As constituted January, 1945.)

### Medical Officer of Health.

E. K. MACDONALD, M.D., M.R.C.S., L.R.C.P., D.P.H.

# Deputy Medical Officer of Health and Tuberculosis Officer.

WYVILLE S. THOMSON, M.D., D.P.H.

### Secretary.

WILFRID CARR, F.C.C.S.

# Medical Officers in Charge of Departments.

Medical Superintendent, City General Hospital . A. P. M. PAGE, M.D., M.R.C.P.

Medical Superintendent, City Isolation Hospital . J. C. H. MACKENZIE, M.D., D.P.H.

Medical Officer for Maternity and Child Welfare . E. B. B. HUMPHREYS, M.B., Ch.B.

Pathologist . . . . . . . . . R. S. WALE, M.D.

### Assistant Medical Officer.

Assistant Tuberculosis Officer .. .. E. G. LAWRIE, M.B., Ch.B.

# Assistant Medical Officers (and Assistant School Medical Officers.)

K McALPINE, M.B., Ch.B.
GLADYS RANDALL, M.B., B.S., D.P.H.
\*MARGARET D. HIRD, M.B., Ch.B., D.P.H.
JANET M. DONE, M.D., D.P.H.

\*MOLLY B. WILSON, M.B., Ch.B., D.P.H.

\*ANNYS M. CUSACK, M.B., B.S., D.P.H.

I. DUB, M.D.

PAULINE K. HEARTH, M.B., B.Ch.,

B.A.O., D.P.H.

### City General Hospital.

Deputy Medical Superini	tendent o	and Surgeon	T. M. J. d'OFFAY, M.B., Ch.B., F.R.C.S.
Obstetrician and Gynaece	ologist		D. R. CAIRNS, M.B., M.R.C.O.G.
Assistant Pathologist			(Miss) GERTRUDE M. DOBRASHIAN, M.B., B.S.
Orthopaedic Registrar			M. McLEARIE, M.B., F.R.F.P.S.
	and	Four Reside	ent Medical Officers
Radiographers			(Miss) A. McLOUGHLIN, M.S.R. (Miss) H. BRIGHT, M.S.R.
Laboratory Technicians			F. H. G. HAYES (Miss) L. BARNES
Physiotherapists			(Mrs.) D. KELLOCK, c.s.p. (Mrs.) B. BIKKER, c.s.p. (Mrs.) J. DRURY, c.s.p.

### City Isolation Hospital and Sanatorium.

Deputy Medical Superintendent .. C. W. C. KARRAN, M.D., D.R.C.O.G., D.P.H.

and Two Resident Medical Officers

Radiographer .. .. (Mrs.) M. J. STEPHENS, M.S.R.

Laboratory Technician .. .. Mr. J. LAUDER

\* On Active Service.

Consul	ltant M	[edical	Off	icers (all Departments).
22	24.	Juzeur	O.I.	J. V. C. BRAITHWAITE, M.D., F.R.C.P.
Physicians	**	**	**	R. M. CAIRNS, M.D., Ch.B.
Cardiologist	**			I. P. W. JAMIE, M.A., M.D., B.Ch.
Gynaecologist	**		**	T. C. CLARE, M.D., F.R.C.S., F.R.C.O.G. (E. R. FRIZELLE, M.Ch., F.R.C.S.E.
Surgeons	**			D. B. MCGAVIN, M.Ch., F.R.C.S.
Gynaecological Surgeon	100			(J. C. BARRATT, v.c., m.b., b.s., f.r.c.s. R. LODGE, m.b., f.r.c.s., m.r.c.o.g.
Orthopaedic Surgeon				L. MORRIS, M.D., F.R.C.S.
Ear, Nose and Throat St Ophthalmic Surgeon				N. E. KENDALL, F.R.C.S.
Acting Ophthalmic Surge	eon		- 11	*A. L. McCURRY, M.D., D.O.M.S. (Mrs.) D. K. SOUPER, M.B., D.O.M.S.
Obstetric Surgeon (to We	stcotes)			(Mrs.) D. K. SOUPER, M.B., D.O.M.S. T. W. ALLEN, B.A., M.B., D.R.C.O.G.
Radiodiagnostician Dermatologist	**		**	D. F. LAWSON, M.A., M.B., B.Ch., D.M.R.E. F. A. E. SILCOCK, M.D., D.P.H.
Thoracic Surgeon				T. HOLMES SELLORS, D.M., M.Ch.,
				(D. JUSTIN DAVIES, M.B., D.A. F.R.C.S.
				*(Mrs.) BERYL MASON, M.R.C.S., L.R.C.P.,
Anaesthetists	**			D.A.
				(Miss) J. S. B. McNEIL, M.B., Ch.B., D.A. S. RODKER, M.R.C.S., L.R.C.P.
				C. H. WILKIE, M.D., Ch.B., B.Sc.,
Venereologists				H. N. C. ATKINSON, M.R C.S., L.R.C.P.
	**			(Mrs.) K. M. LODGE, M.B., B.S., M.R.C.S.,
				L.R.C.P.
Public Vaccinators				(Mrs.) U. E. LACEY, M.R.C.S., L.R.C.P. (A. J. L. SPEECHLEY, M.R.C.S., L.R.C.P.
2 morre y decembrors	**		**	(C. H. PARKER, M.R.C.S., L.R.C.P.
				No. 1. A. MORRICK, M.B., Ch B. 2. A. J. L. SPEECHLEY, M.R.C.S.,
				L.R.C.P.
District Medical Officers				2a. W. WHITELAW, M.B., Ch.B.
District Medical Officers		**		3. J. H. NOBLE, M.D., M.R.C.P. 4. F. T. DOLEMAN, M.R.C.S., L.R.C.P.
				5. P. J. J. HUGHES, M.B., B.Ch.
				6. I. PLATT, M.B., ch.B. 7. G. SMITH, M.D., ch.B.
Dental Surgeon				J. ROWLETT, L.D.S.
				· · · · · · · · · · · · · · · · · · ·
		N	Mati	rons.
City General Hosp City Isolation Ho.	-ais-I	: ::	1	MISS E. L. LIVERMORE (Acting) S.R.N., S.C.M. " B. NESBITT, S.R.N.
Westcotes Materni				" E. BRADSHAW, S.R.N., S.C.M.
Day Nursery "Home Place," Ho	di :	: ::		, I. R. CUTLER, s.R.N., s.C.M. , R. E. FRY.
	Partle.			
	and the second second			lth Department.
	R. H.	LETCHI	FORI	D, A.I.E.E., A.M.I.H.V.E.
	Publ	lic Ana	alys	t's Laboratory.
Public Analyst				F. C. BULLOCK, B.Sc.,
				P.A.Inst.W.E., F.R.I.C.
Assistants				J. SMART.
Assistants				·· ·· ) •P. G. WRIGHT.
				H. M. BEE.
		Sanitar	гу І	nspectors.
Chief Inspector				F. G. McHUGH, 1 3 4 5
Deputy Chief Insp		:		A. T. PRICE, 13
Inspectors-				
R. T. BLA	YLOCK.	1347		F. W. MURRAY, 78
T. W. BER	ESFORI	0, 23		W. MUSTON, 1 3
H. BURLE H. CLOUC	H. 12			J. W. NORTH, 1 3
M. C. CRI	PPS. I 3			*E. OWEN, 2 3 14 W. J. PARKINSON, 1 3 6
H. ELKIN R. V. FIDI	GTON.	3 5		W. J. PARKINSON, 1 3 6  G. V. PENN, 2 3
G. H. FYF	E, 23			*A. SMITH, 2 3 4 14 E. THOMPSON, 1 3
W. I GET	COOD	1 3 4		*A. G. WATKIN, 2 3 16
T. HINES, W. C. LON	G. 1 3			A. WELTON, 1 3
G. H. MAV				J. WRIGHT, 2 3
41 11 (11)	VHINNE	SY, 234	15	J. YATES, 1 3
*A. McCAR	WHINNE TNEY, 2	14		
*A. McCAR	TNEY, 2	14		J. YATES, 13 ve Service.

Health Visite	rs.					
Superintendent	::	MRS. MISS E	REED, E. M. C	RAG	G, 9 10 1	13
District Health Visitors—						
MISS D. M. ABBOT, 9 12 13  " M. ASH, 9 12 13  " C. M. CASSON, 9 10 13  " L. CHAMBERS, 9 13  " M. CONLON, 9 12 13  " H. M. DENSHAM, 9 12 13  " K. L. HOULTON, 9 12 13  " A. KAVANAGH, 9 12 13  " E. LEWIS, 9 12 13  " M. D. LLOYD, 9, 10, 13	, EEH F M EAE	G. M. MYC. J. OV J. E. R E. T. WA' WIL. E. W	ASTER COCK, 6 WEN, 9 ICH, 9 OON, 9 ICHOI FORD, ILLIA OLLA	S, 9 9 10 1 12 13 12 13 12 13 N, 9 9 13 MS, 6 STON	3 3 12 13 0 12 13 N, 9, 13	
Tuberculosis Nurses	{ M	" E.	MOUN NEILI	VD, 9		
Diphtheria Immunisation	. M	RS. E.	A. GR	AIN	GER, 9	13
<ol> <li>Holds Royal Sanitary Institute and Sanitary Inspets.</li> <li>Holds Meat and Food Inspector's Certif. Roy. Sar.</li> <li>Holds Certif. of Roy. San. Inst. for San. Science a Holds Sanitary Inspector's Certif. under Public Holds Sanitary Inspector's Certif. San. Inspectors.</li> <li>Holds Certif. of Royal San. Assocn. of Scotland for Holds Certif. of Royal San. Assocn. of Scotland for Holds Certif. of the Central Midwives' Board.</li> <li>Holds Certif. of the Central Midwives' Board.</li> <li>Holds Health Visitor's Certif. of the Roy. San. Inst. Holds Certif. as fully Trained Nurse.</li> <li>Holds Health Visitor's Certificate.</li> <li>Holds State Registered Nursing Certificate.</li> <li>Holds Liverpool University Certificate of Competents. Holds Diploma of Royal Institute of Public Health Holds Smoke Inspector's Certificate, R.S.I.</li> </ol>	n. Inst s appl ealth ( ' Asso or Mea r Sani st.	ied to Londo Con. It Inspitary S	Building n) Act, ection. cience.	gs and 1891	l Public V	
Area No 1. Saffron Lane.	vives	S.				
MISS BIGGIN, s.R.N., s.C.M., 30, Dartford Road MRS. DODSON, s.C.M., 2, Burnaston Road MISS GREEN, s.C.M., 2, Burnaston Road MISS JEFFS, s.R.N., s.C.M., 10, Sheridan Street	::	::	::	::	Tel No.	32649 32172 32172 32182
Area No. 2. Braunstone.					,,	
Miss HOPKINS, s.c.m., 17, Imperial Avenue Miss McCAULL, s.c.m., 13, Braunstone Avenue Miss PRINCE, s.r.n., s.c.m., 124, Ainsdale Road Mrs. RITCHIE, s.c.m., 29, Camville Road	::	::	::	::	"	34398 22323 88865 83598
Area No. 3. Western. Miss CONWAY, S.R.N., S.C.M., 145, Glenfield Road Miss P. SPINK, S.R.N., S.C.M., 205, Fosse Road North	:;	::	::	::	"	88350
Area No. 4. Central.						

Chest	Radio	dran	hv I	mit
CHICSE	Rauto	FCT (1 17)	LLY L	ARRE .

Senior Radiographer Junior Radiographer Dark Room Technician Liaison Officer .. Miss M. V. RAY
.. Miss P. MULHOLLAND
.. Miss A. BRYAN
.. Miss D. HAMPSON Three Clerks

# City Ambulance Service.

.. A. E. PIGGOTT H. GOODRIDGE L. J. MILLARD Ambulance Officers

# Clerical Staff.

Chief Clerk							F. F	KELLETT.
General Clerks-								
*G. H. S *R. FIE *D. BOU	OYNOR. NGSBY. SEAL. LDMAN. IGHTON ICKSON.		MRS.	D. R. V. DA V. NE E. Mc M. WA	WN THER CARTI	сот.	100	MISS L. HOLMES. ,, J. BROOKS ,, K. M. TUSTAIN. ,, E. E. BATTLE. MRS. G. UTTING. MISS N. J. DUNN.
Tuberculo	sis Dispens	ary				{	Mis	S J. HEATON. B. M. BOND.
Isolation He	spital and	Sanat	orium					
Steward			••					REES.*
Clerks							L. H Miss	V. HYDE. REES. V. ALLSOP.

" E. J. DODSON. " A. M. NORTHCOTE.\* " E. J. Y. SPIBY. City General Hospital— Steward ... E. H. BALL, S. WHATSIZE. Asst. Steward

L. HEATHERLEY.\*
MISS M. MILLIS.
" C. STONE.
" J. GUILLAIN.
" D. E. WORTHINGTON.
" K. WRIGHT.
" M. A. RAWSON.
" S. WRIGHT.
" P. CUMBERLAND

Clerks

··{ Mrs. BREWIN. Miss L. HARDING Milk Depot .. Vaccination Officer .. J. H. LOCKWOOD ..

<sup>\*</sup> On Active Service.

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# SUMMARY OF STATISTICS

FOR THE YEAR 1944.

# CITY OF LEICESTER.

Population at Census, 1931 .					239,169
" (estimated) 1944 .					257,450
Marriages					2,311
Births (corrected)					5,232
Birth-rate					20,3
Deaths (corrected for transfera	able de	eaths)			3,074
Death-rate					11.9
Deaths under One Year .					204
Infant Mortality (per 1,000 Bi	rths)				39.0
Maternal Mortality (per 1,000	) total	births)			0.93
Zymotic-rate (per 1,000 popul	ation)				0.28
Respiratory Disease death-rate	e				1.20
Cancer death-rate " "					2.02
Tuberculosis death-rate ,.					0.76
Phthisis-death-rate ,,					0.67
MITTER STATE OF THE STATE OF TH					
Area of City (in acres) .					16,979
Number of persons per acre a	t Cens	us, 1931			27.9
Number of persons per "str	uctural	lly separ	ate dwel	ling"	
at Census, 1931 .					3.80
Number of Inhabited Teneme	ents, Ja	anuary, 1	945		79,168
Number of Empty Houses, Ja	nuary	, 1945			100
Number of Empty Cottages, J	anuary	, 1945			15
Rateable value (1944-1945) .				1	2,103,575
General Rate for the year, 194		5			15/2 in £.
					, ~

			England and Wales	County Boroughs	London Adminis - trative County
Birth-rate			17.6	20.3	15.0
Death-rate			11.6	13.7	15.7
Infant Mortal	ity (per	1,000			
Births)			46	52	61

(Registrar General's Figures.)

# To the Chairman, Lord Mayor and Members of the Health Committee.

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

I have the honour to submit herewith the Annual Report on the Health of Leicester for the year 1944.

ALDERMAN ASTLEY CLARKE, M.A., M.D., D.L., J.P. The death of Dr. Astley Clarke, in February, 1945, ended a notable period of service on the City Council and particularly as Vice-Chairman of the City Health Committee, which office he had held since 1937.

Dr. Clarke's special medical knowledge, together with his broad experience of matters of administration, made him of the greatest value to the Committee and Staff of the Department alike.

His kindly personality will be much missed.

STATISTICS. It is now permissible to record full details of population figures, etc., which, for security reasons, had to be omitted from the Annual Reports during the war.

POPULATION. The Registrar-General estimates the mid-1944 population as 257,450. This compares with 262,900 in 1939.

Most Leicester people would have said that the 1944 population was much in excess of the 1939 figure, if difficulty in obtaining housing accommodation, food queues, etc., were any criteria.

BIRTHS. The number of births during the year, 5,232, was the highest for many years. The birth rate was 20.3

INFANTILE MORTALITY. This rate, at 39.0, was the lowest the City has ever recorded. It is an extraordinary testimonial to the stamina and fecundity of the population that, after five years of war with all the attendant worries, difficulties and privations, there should be this high birth rate and, more extraordinary still, this very low infant death rate. The high birth rate is understandable, but the low infant death rate is eloquent testimony to the health of the people, to the efficiency of the Ministry of Food, and to that of the Nation's Health Services.

DEATHS. The total number of deaths was 3,074, giving a rate of 11.9. There is nothing particularly of significance to report, except the increased incidence of cancer.

CITY AMBULANCE SERVICE. This Service was taken over by the Health Committee on the 15th November, 1944. The change of administration was practically only a change of name and the Service continued to operate substantially as formerly.

Tuberculosis. I have commented on the retirement of Dr. W. S. Thomson, after over 32 years' service, in the Foreword to Appendix I. It is sufficient here to record that his period of service has seen an immense improvement in the incidence of and fatality from tuberculosis. He has played no small part in bringing this about.

GENERAL. With the cessation of hostilities in Europe such a recent event, it is difficult to realise that "the war is over" (with, of course, the exception of that against Japan) or to gain a proper perspective of the experiences we have all gone through.

As far as Leicester is concerned, the city has been most fortunate; bombing was comparatively light and fatalities few. Difficulties and discomfort there have been in plenty, but we can be very thankful that we have been spared the terrible ordeals that so many of our less fortunate cities have suffered.

In next year's Report I hope to give a more detailed survey of the working of the City Civil Defence Casualty Services, but in this present Report I may perhaps be allowed to refer to two outstanding matters which have been prominent in my mind, as Medical Officer of Health, during the war.

The first is the truly amazing spirit of service that has been shown by the citizens on all sides and on every occasion. War is evil, but out of evil good can come, and I place high on the positive side of the balance, the self-sacrifice, good neighbourliness and devotion to duty shown unstintedly by one and all.

The second is not such a happy memory. The enforced tragedy of bad housing, brought about by a multitude of causes and directly inherent from the war, has produced a situation in Leicester as in all other towns that will require the utmost effort to correct. The cessation of slum clearance, the tempo of which was satisfactorily increasing in 1939, was a severe blow to health progress. How can an overcrowded family retain its self-respect? Houses long overdue for demolition are

still in use—how can the people who live in them remain healthy? "One family, one house" is the only goal a progressive community must have as its aim and it is a *sine qua non* that the house must be adequate for the size and income of the family, and entirely fit to live in. Now that the "war is over," there is no more important matter, apart from the successful prosecution of the war against Japan, than the provision of houses and still more houses until the clamant need is met.

Mr. Chairman, in presenting this Report to you and to your Committee, I wish to thank you and them for your continued interest in our work and for the inspiring guidance you have given.

Co-operation between the representatives of the public and the paid officers of the Department is one of the choicest fruits of democracy and, in my opinion, of the highest value.

To the staff of the Department I wish to record my very grateful thanks for another year's service given wholeheartedly to the community.

I am,

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen, Your obedient Servant,

> E. K. Macdonald, M.D., B.S., D.P.H., Medical Officer of Health.

Health Department, Grey Friars, Leicester, 31st December, 1944.

Telephone No. 5118.

# ANNUAL REPORT, 1944

# SECTION A.

# Statistics and Social Conditions of the Area

# Statistics

The needs of security having now terminated, full statistics are given in this Report.

# Population

The Registrar-General estimates the population at mid-1944 as 257,450. (See Table I.)

### Birth Rate

The number of births for 1944 is the highest for many years.

There were 2,696 male births, 2,536 female births, a total of 5,232, giving a birth rate of 20.3 per 1,000 population.

The last time this birth rate was exceeded was in 1921.

The figures for the years 1938 to 1944 are shown in Table I.

Of the total live births (5,232), 474 were illegitimate (242 males and 232 females), giving an illegitimate birth rate of 1.8.

The illegitimate live births comprised 9.1% of the total live births.

# Stillbirths

There was a total of 129 stillbirths, 64 being males and 65 females. Six of each sex were illegitimate, being 9.3% of the total stillbirths.

# Infantile Mortality Rate

The total deaths of infants under one year of age were 204, giving an infantile mortality rate of 39.0 per 1,000 live births.

Table 1.

LE	Rate	45.95	49.1	51.2	55.0	9.09	48.5	39.0
INFANTILE	Deaths under 1 year	178	180	187	207	219	230 14	204
	Rate	11.2	11.5	14.5	12.2	11.2	12.8	11.9
DEATHS	Total	2,951	3,028	3,754	3,246	2,916	3,252	3,074
DEA	Female	1,425	1,497	1,813	1,570	1,401	1,610	1,459
	Male	1,526	1,531	1,941	1,676	1,515	1,642	1,615
	Rate	14.7	13.9	13.9	13.9	16.7	18.6	20.3
BIRTHS	Total	3,873	3,667	3,604	3,682	4,324	4,747	5,232
BIR'	Female	1,931	1,819	1,703	1,765	2,119	2,280	2,536
	Male	1,942	1,848	1,901	1,917	2,205	2,467	2,696
Estimated	Population	263,300	262,900	259,400	265,310	259,400	254,800	257,450
Vear		1938	1939	1940	1941	1942	1943	1944

This rate is easily the lowest the City has ever had, the rate for 1938 at 46.0 (45.95) being the next lowest.

Of the 204 total deaths, 126 were among males and 78 among females.

The main causes of death were:

Males :		Females :					
Pneumonia	 15	Pneumonia	15				
Diarrhoea	 16	Diarrhoea	7				
Prematurity	 38	Prematurity	19				
Congenital causes	 37	Congenital causes	21				
	_						
	106		62				
			_				

A further discussion on this matter will be found in the Report of the Maternity and Child Welfare Medical Officer on page 46.

# Marriages

The number of marriages solemnised in Leicester was:

				1944
Church of Eng	gland	 		1,288
Elsewhere		 	"	1,023
To	otal	 		2,311

# Death Rate

The total number (corrected) of deaths was 3,074, namely 1,615 males and 1,459 females.

The death rate was 11.9. For comparison with the other war years, see Table I.

# Comments on Causes of Death

Table 3 shows the deaths classified according to certain specified causes and to age and sex. Graph I shows certain of the more important causes of death arranged as proportionate parts of a disc.

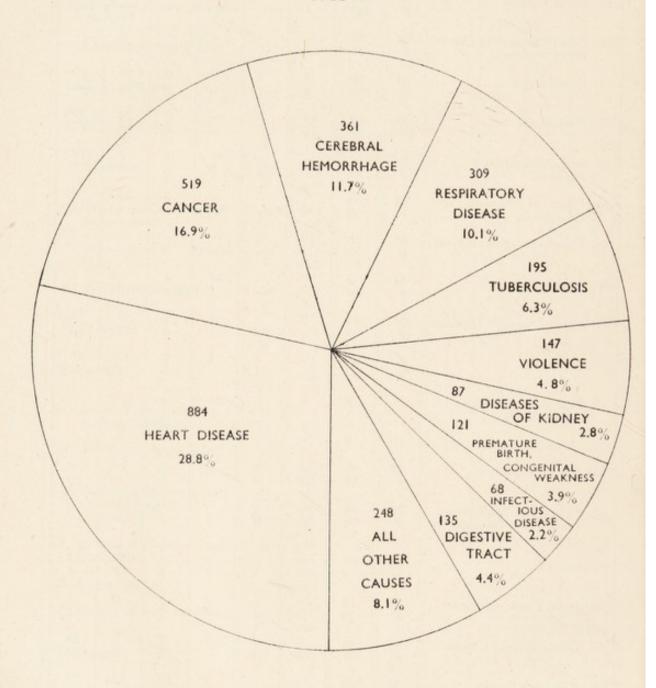
A comparison with the disc published in the 1938 Report (page 9) shows various interesting facts.

TABLE 2										
Causes of Death	Sex	All Ages	0—	1—	5—	15—	45—	65-	-	
ALL CAUSES	M F	1615 1459	126 78	25 18	31 12	138 157	453 361	842 833		
Typhoid and Paratyphoid Fevers	M F	-	-	-	=	=	-	-		
2. Cerebro-Spinal Fever	M F	1	- 1	-	-	-	-	-		
3. Scarlet Fever	M F	_	-	=			=	-		
4. Whooping Cough	M F	3	-1	3 -	_	-	-	-		
5. Diphtheria	M F	6 -	=	1 _	5	-	-	-		
6. Tuberculosis of Respiratory System	M F	109 64	_	- 2	1 1	45 39	53 18	10 4		
7. Other forms of Tubercu- losis	M F	11 11	-	2 4	3	3 5	2	1 -		
8. Syphilitic Disease	M F	12 3	-	=	-	1 _	6 3	5		
9. Influenza	M F	11 5	1 -	1 _	-	1	3	5 3		
10. Measles	M F	-	-	-	-	-	-	=		
11. Acute Poliomyelitis and Polioencephalitis	M F	-	_	-	=	=	=	=		
12. Acute Inf. Encephalitis	M F	- 1	_	-	-	-	- 1	-		
13. Cancer of Buccal Cavity and Oesphagus (M)	M	29	-	-	-	1	8	20		
Uterus (F)	F	26	-	-	-	2	13	11		
14. Cancer of Stomach and Duodenum	M F	55 45	-	-	-	7	24 16	24 28		
15. Cancer of Breast	F	50	-	-	-	6	23	21		
16. Cancer of all other Sites	M F	171 143	-	- 1	1 -	9 12	67 63	94 67		
17. Diabetes	M F	6 9	-	-	-	1 _	1 4	4 5		
18. Intra Cranial Vascular Lesions	M F	121 240	1	-	=	4 5	29 56	88 178		

	TAB	LE 2-	-contin	ued.				
Causes of Death	Sex	All Ages	0—	1—	5—	15	45—	65—
19. Heart Disease	M F	390 365	=	1 -	- 1	9 18	85 60	295 286
20. Other Diseases of Circulatory System	M F	57 72	-	-	_	1 3	5 12	51 57
21. Bronchitis	M F	98 64	1 4	2	2 -	7	29 12	57 46
22. Pneumonia	M F	65 47	15 15	3 -	=/	3 7	24 13	20 12
23. Other Respiratory Diseases	M F	18 17	_	= "	1	1 6	7 3	10 7
24. Ulcer of Stomach and Duodenum	M F	36 9	-	=/	-	3 -	25 5	8 4
25. Diarrhoea, under 2 years	M F	18	16 7	2 -	_	-	-	=
26. Appendicitis	M F	9 10	-	=	4	1 3	- 5	4
27. Other Digestive Diseases	M F	42 29	2	1 2	1	7 4	15 11	17 11
28. Nephritis	M F	50 37	-	- 1	1 -	9 5	12 9	28 22
29. Puerperal and Post- Abortive Sepis	F	3	-	-	-	3	-	-
30. Other Maternal Causes	F	2	-	-	-	2	-	-
31. Premature Births	M F	38 19	38 19	_		_	-	=
32. Congenital Malforma- tions, Birth Injuries, In- fant Disorders	M F	38 26	37 21	1	1	3	-	_
33. Suicide	M F	27 9	=	-	-	4 3	12 5	11 1
34. Road Traffic Accidents	M F	19 9	=	- 1	3 3	4 2	6	6 2
35, Other Violent Causes	M F	46 37	6 3	5 1	7	7 5	5 5	16 23
26. All Other Causes	M F	130 98	10 6	3 4	4 2	10 21	35 21	68 44

GRAPH 1.

Showing proportion of Deaths from Principal Causes, 1944



		1944	1938		
Disease	No. of Deaths	Per- centage of Total	No. of Deaths	Per- centage of Total	
Heart and Circulatory System	884	28.8	722	24.1	
Cancer	519	16.9	432	14.6	
Cerebral Haemorrhage	361	11.7	233	7.9	
Respiratory Disease	309	10,1	247	8.3	
Tuberculosis	195	6.3	198	6.7	
Violence	147	4.8	157	5.9	
Digestive Tract	135	4.4	113	3.7	
Defects	121	3.9	126	4.2	
Kidney	87	2.8	84	2,8	
Infectious Disease (other than				2,0	
Tuberculosis)	68	2.2	96	3.3	
All other causes	248	8.1	543	18.5	

Various points emerge from a study of the above comparative figures.

All other causes. In 1938, 93 deaths from senility were included in the total. They are more correctly assigned to the cause of death in 1944, which also accounts for much of the remaining discrepancy under this heading, i.e., more correct assignment.

Cancer. There has been a marked increase. This is no doubt due partly to the ageing of the population as a whole, which is, therefore, becoming more "at risk."

Heart Disease and Cerebral Haemorrhage. These two causes between them account for over one-third of the total deaths. The phrase "Heart Disease" includes disease of the Circulatory System and is an indefinite term. No doubt the strain of the war years is specifically indicated by the increase.

Digestive Tract. There is undoubtedly an increased incidence in disease of the digestive tract, especially in gastric and duodenal ulcer. These conditions, too, are often associated with nervous strain. It is worth while noting, therefore, that there has been an absolute increase in the number of deaths from these causes. In 1938, 14 male deaths were ascribed to "peptic" ulcer and four female deaths. In 1944, there were 36 male deaths and nine female deaths from this cause. In both sexes, the fatal incidence of the condition has increased by more than 100 per cent.

Infectious Disease (excluding Tuberculosis). The improvement in the 1944 figures is largely due to the marked diminution in the fatal cases of diphtheria. In 1938,33 deaths occurred from this cause, whereas in 1944, only six were registered.

# INCIDENCE OF INFECTIOUS DISEASE

# Typhoid and Paratyphoid Fevers

Only one case of paratyphoid fever was reported during the year. There were no deaths. The infection was probably contracted while on holiday in Lancashire.

# Cerebro-Spinal Fever

20 notifications and one death.

# Scarlet Fever

514 notifications and no death. (1943, 430 and 0 respectively.)

# Whooping Cough

350 notifications and 4 deaths. (1943, 891 and 7 respectively.)

# Diphtheria

133 notifications and 6 deaths. For further comments, see Appendix II.

# Diphtheria Immunisation

Number of children immunised	1944 Under 5 Over 5 3,398 1,052	Since start of Scheme 39,968
Percentage of children immunised	Under 5 52%	5—15 80%
Number of cases of genuine Diph- theria during 1944 in "immunised" children	. 27	
Number of deaths from genuine Diphtheria during 1944 in "immu- nised" children	1	

Note.—The child who died from Diphtheria had not been immunised in Leicester but under another Local Authority. He had not had the efficiency of his immunisation confirmed by a Post Schick test. This is unfortunate as it leads to a false idea of security. In theory, all children who have received immunisation procedure should be "Post Schicked." This is very difficult in practice and during the war years owing to shortage of staff has been omitted.

The incidence of Diphtheria remains low.

### Influenza

This disease is not notified, but no major epidemic occurred. 16 deaths were registered.

### Measles

257 notifications and no deaths.

It is very interesting to note the present low incidence in fatality of this disease. Whereas Measles used to be one of the more important diseases of young childhood, today that is not the case.

# Pneumonia

328 notifications, 112 deaths. These figures are about the average.

# Smallpox

No case occurred during the year, but contacts of imported cases have been kept under surveillance on several occasions. In one instance, all the members of an ambulance train convoy had to keep partial quarantine because they had been in contact with cases on shipboard.

TABLE 3

Population, Birth-rates, Death-rates, Zymotic Death-rates, Maternal Mortality, etc., in 16 Large Towns

	- i			1	-	-	_	_		_												
		ortality	births	lati	L		1.34	2.50	1.25	2.39	2.74	1 95	1.37	0.93	1.95	1.83	3.36	0.85	1.32	0.87	2.14	1.60
Su		rnal M.	per 1,000 total birth	om Other essu	E	1							1.37								1.07	
Tow	-	Mare	per I,	sisd tuo.	E E	000	0.00	0.83	0.38	1.52	0.55	1.37	1	0.56	0.82	0.64	0.19	0.34	0.52	0.19	1.07	0.27
racellial Mortality, etc., in 16 Large Towns				Infantile Mortality Rate		40	7 0	93	35	46	48	58	50	39	57	54	50	99	45	41	51	72
: III			Tuberculosis	ther	e e	000	00.0	0.10	80.0	0.12	80.0	0.16	60.0	60.0	0.12	0.11	0.25	0,13	0.13	0.11	0.12	0.15
y, erc			Tuber	призонату	d						-		0.61									0.63
or cann	0000	- III		ancer	0	VCIN'T	3000	_	_		-		2.03						2.22		200	1.62
Idi Ivi	Der 1 000 nonulation from	II HOUSE		ezuənyu	I	0.11	0.11	0.04	0.07	0.10	0.05	0.10	60.0	90.0	60.0	80.0	0.03	60.0	60.0	0.11	06.0	90.0
Tare	00 000	ndad as	SJU	esodrthoea, sey 2 rebn	n I	0.14	0.07	000	00.00	4.04*	0.14	0.23	*6.8	0.10	80.0	0.12	0.12	0.31	0.12	80.0	7.1*	0.33
1944			pu	yphoid ar aratyphoi	1	1			100				_	1			0.00		0.00	1	183	0.01
for the year 1944	Death Rates			Siphtheria	I	0.05	90.0	0.01	10.0	0.03	0.05	0.05	0.02	0.05	0.02	0.01	0.04	0.01	0.00	0.03	0.03	0.04
or the	Dea	-		SniqoodV AguoS		0.03	0.03	0.03	0000	0.02	0.01	0.05	0.01	0.05	0.02	0.04	0.03	0.04	0.01	20.0	10.0	0.04
fe			TOV	Scarlet Fe		0.00	0.00	000	000	0.00	100	0.00	0.01	100	0.00	100	00.00	10.0	1 00	00.00	00.00	00.0
				Measles		0.00	0.01	0.01	000	0.00	0.03	1	1	100	20.0	0.00	0.00	0.00	20.0	00.00	20.0	0.01
	000,	atton	-	Death Rate		11.3	15.0	10.99	19 54	15.04	0.0	14.0	13.6	11.9	14.0	12.1	13.3	15.02	10.45	11.0	12.0	10.0
	Per 1,000	Popul		Birth		22.7	17.7	19.15	90 79	0000	0.22	0.12	18.9	50.0	100	90.4	91 73	92 53	01.04	01.4	5 66	0.4
		Population	as esti- mated by	Registrar- General, Mid-1944		990,000	261,890	405,530	215 130	240,000	999 640	451 100	-	666 990	614 780			-		-		
			NAME OF PORTS	NAME OF LOWN	Dinamount	BIRMINGHAM	BKADFORD	BRISTOL	CARDIFF	COVENTRY		:	TER	:	FR		M			-TRENT		

\*Rate per 1,000 births

# SECTION B.

# General Provision of Health Services for the Area

# City Ambulance Service

This Service was described in detail in my Annual Report for 1943.

The only difference in administration to report is that the service which had previously been under the control of the Civil Defence Committee was taken over by the City Health Committee on the 15th November, 1944. As the Service had been previously administered by the Medical Officer of Health, this meant that in fact there was no change of substance.

The analysis of calls dealt with during 1944 is as follows:

Total nur	nbero	f calls dealt	with		ar ending 3 06.00—18.00 hours	0 18.0	ember, 1944 00—06.00 hours
City					8,968		2,694
Cour	nty				454		355
		Totals			9,422		3,049
Jour	neys to	accidents	in facto	ries			338
Jour	neys to	accidents	in stree	ts			694
Jour	neys to	sudden ill	lnesses i	n street	s .'.		172
Jour	neys to	D.O.A's a	and suic	ides, et	c		147
Jour	neys to	cases when	re servic	es were	NOT requ	uired	86
Jour	neys to	maternity	cases;	to hosp	itals, etc.		2,110
Jour	neys to	remove p	atients	to and	from hosp	itals,	
ete	c.						8,924
			Т	otal			12,471

# Scabies Clinic, Granby Halls

There was no change in administration.

The year's statistics are as follows:

# Scabies figures for the year 1944

Class of Patient	New Cases definite cases	Contacts examined and found not to be suffering	of patients	dances for examin- edical Officer reatment	Patients Dis- charge
	of Scabies	from Scabies	Medical Officer	Treatment	as cured
Health Committee Patients :					
Adult Males	358	197	1170	1315	395
Adult Females	938	414	2471	2331	748
Children under 5 years	10000		22.1	2551	748
of age	312	206	1149	865	245
Education Committee Patients :					
Males	554	190	1798	1955	444
Females	531	211	1535	1568	444
GRAND TOTAL	2693	1218	8123	8034	2276

# SECTION C.

# Sanitary Circumstances of the Area

# Water Supplies

I am indebted to the courtesy of the Water Engineer and Manager (Mr. T. S. Griffin, M.Inst.C.E.) for the following information relative to the water supplies:

- (i) The supply of water in the statutory water area of the Leicester City Corporation has been satisfactory during the year 1944, both as regards (a) quality and (b) quantity.
- (ii) The following are the number of samples submitted for bacteriological examination to the City Analyst during 1944 from the local reservoirs and the Derwent Valley:

Cropston Reservoir 9 samples of filtered only.

9 samples of chloraminated water.

Swithland Reservoir 15 samples of filtered only.

12 samples of chloraminated water.

Thornton Reservoir 13 samples of filtered only.

13 samples of chloraminated water.

Derwent Valley .. \*1 sample of water as received.

\*1 sample of water as delivered.

All the chloraminated samples were passed as satisfactory and the filtered samples as satisfactory subject to adequate chloramination. Both samples of Derwent water were passed as satisfactory.

Apart from the above, samples of water for both chemical examination and bacteriological examination have been taken at random from various points within the area regularly during

<sup>\*</sup> Treated prior to receipt.

the year, both by Officers of the Health Department and the Water Engineer. All samples have been passed as satisfactory for drinking purposes.

- (iii) The raw water from the Derwent Valley, being a soft moorland water, is liable to cause plumbo-solvency, but a continuous treatment by the addition of lime has been carried out by the Derwent Valley Water Board under Section 58 of the Derwent Valley Water Board Act, 1899, as an obligation, and similar treatment has also been carried out by the Leicester Corporation. The City Analyst has not reported that lead has been found in any sample submitted to him and no report has been received of any contamination due to this cause.
- (iv) Any suspected form of contamination has been investigated by the City Analyst and the necessary action taken by the Water Engineer.
- (v) The number of houses in the authorised area of the Leicester Corporation with a piped water supply is 110,000 approximately. Of this number, approximately (a) 108,000 are supplied direct to the house and (b) approximately 2,000 are supplied by taps in yards, etc.

No public standpipes are allowed by the Water Committee of the Leicester Corporation.

# SECTION D.

# HOUSING

A further 22 houses were demolished. No new houses were provided by the Corporation but eight new houses by private enterprise.

# TABLE 4.

# HOUSING STATISTICS

For year ended 31st December, 1944.

1.—Unfit Dwelling Houses—Inspection.	
(1) (a) Total number of dwelling houses inspected for housing	
defects (under Public Health or Housing Acts)	6070
(b) Number of inspections made for the purpose	10252
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the	
Housing Consolidated Regulations, 1925	144
(b) Number of inspections made for the purpose	2030
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	153
(4) Number of dwelling houses (exclusive of those referred to	
under the preceding sub-heading) found to be not in all respects reasonably fit for human habitation	634
	004
2.—Remedy of Defects without Service of Formal Notices.	
Number of defective dwelling houses rendered fit in conse-	
quence of informal action by Local Authority or their officers	1124
3.—Action under Statutory Powers.	
A-Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
(1) Number of dwelling houses in respect of which notices	
were served requiring repairs	12
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners	7
(b) By Local Authority in default of owners	Nil.
B—Proceedings under Public Health Acts:	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	1673
(2) Number of dwelling houses in which defects were remedied after service of formal notices:	
(a) By owners	36
(b) By Local Authority in default of owners	Nil.
C-Proceedings under Sections 11 and 13 of the Housing Act, 1936:	
(1) Number of dwelling houses in respect of which Demoli-	
tion Orders were made	Nil.
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	5
D—Proceedings under Section 12 of the Housing Act, 1936:	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil.
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the	
tenement or room having been rendered fit	Nil.

# Report on the Tuberculosis Dispensary for 1944

By

WYVILLE S. THOMSON, M.D., D.P.H.(Edin.)

# FOREWORD BY THE MEDICAL OFFICER OF HEALTH

In Dr. Thomson's report which is submitted herewith, will be found many interesting facts and figures.

Certain matters in particular seem to me to merit special note.

- (a) There was, in 1944, a marked drop in the number of notifications of new cases of non-pulmonary disease.
- (b) But, on the other hand, there was an increase in the number of young adults notified as suffering from pulmonary disease.
- (c) The number of deaths in 1944 was the lowest recorded for the City.
- (d) There was a marked increase in the number of persons examined at the Dispensary and found not to be suffering from any form of Tuberculosis.
  - This is very satisfactory and indicates an awareness among medical practitioners and the public alike of the importance of "preventive" examination.
- (e) A corollary to the last statement is the increase in the number of X-rays.
- (f) The decision of the Committee to centralise the hospital treatment of Tuberculosis at Groby Road is shown by the decreased number of patients admitted to the City General Hospital and to the co-incident increase in the admissions to the Sanatorium.
- (g) Dr. Thomson's comments on the maintenance allowances of the Ministry of Health and of the local Council emphasise the value of this provision.
- (h) As the Mass X-ray Unit did not come into operation till the 12th February, 1945, I do not propose to comment on it in this year's report.

# Dr. W. S. Thomson

Dr. Thomson was first appointed to the Leicester Health Service in 1912 and now, on the 28th July, 1945, retires (on superannuation) after nearly 33 years' service.

As this is the last Report he will submit, he has included a comparative statement showing the incidence of and mortality from Tuberculosis during the two war periods which have coincided, more or less accurately, with the beginning and end of his Leicester service.

The statistics are well worth study. Whereas in the first world war the notifications fluctuated between the figures of 1,060 in 1915 and 753 in 1917, with an average for the war period of 874, during the second world war the greatest number notified in one year was 465 (in 1941) and the least, 444 (in 1940 and 1944), with an average of 451, or 52% of the number notified during the earlier period.

The total deaths showed much the same improvement.

The first period had 421 deaths in 1917, with an average of 391, whereas the worst year in the second period was 1941 with 236, with an average of 214 for the five years. The deaths in the second world war, therefore, only amounted to 55% of those in the first.

To what is this improvement due? Improvements in housing, in sanitation, in knowledge of health matters, and in the general standard of health of the community have undoubtedly played a major part, but the devoted service of officers like Dr. Thomson have, over the years, had a considerable effect. Dr. Thomson's life work has been given to the service of the Leicester sufferer from Tuberculosis. In spite of great personal difficulties, particularly of late years, Dr. Thomson has carried on his work efficiently, quietly and wholeheartedly in the interests of the Service.

If it were possible, in a sentence, to summarise his work, the words loyal, painstaking, self-denying devotion to duty, would perhaps be something near the truth.

He will take with him into his retirement the best wishes of his colleagues for improved health and many happy years with the knowledge of work well done in the service of Leicester.

# Report on the Tuberculosis Dispensary for 1944

by

WYVILLE S. THOMSON, M.D., D.P.H.(Edin.)

Premises; Staff: No Change.

Number of Cases of Tuberculosis in the City (31st Dec., 1944).

PULM	ONARY.	NON-PUL	MONARY.	TOTAL	
Males	Females 787	les Females Males Females			CASES
855	787	227	234	2,103	

# New Cases Notified during 1944

Four hundred and forty-four new cases of Tuberculosis were notified in 1944, as compared with 452 in 1943—a total decrease of eight. The pulmonary cases increased by 33 (392, as compared with 359), but the non-pulmonary decreased by 41 (52, as compared with 93). Included in the 444 cases are 53 (47 men and six women) who have been discharged from the services on account of Tuberculosis (49 pulmonary and four non-pulmonary.)

The following table gives the number of new cases since 1918:

1918		Pulmonary,	746;	Non-pulmonary,	82	Total,	828
1919		"	658;	,,	47		705
1920	****	,,	572;	,,	59		631
1921	****	**	497;	,,	105	,,,	602
1922		,,	566;	,,	43	,,	609
1923		,,	692;	**	71	,,	763
1924		,,	725;	10	65	,,	790
1925		,,	606;	12	77 3	,,	683
1926	***	,,	650;	11	77 :	,,,	727
1927		"	700;	1.4	80;	,,,	780
1928		"	668;	.,	117;	,,,	785

# NEW CASES SINCE 1918-continued

1929	****	Pulmonary,	657;	Non-Pulmonary	77;	Total	734
1930		*/	582;		66;	**	648
1931		**	511;	,,	61;	**	572
1932		**	442;	,,	69;	,,	511
1933			438;	11	74;	,,	512
1934		"	331;	,,	72;	,,	403
*1935		,,	460;	,,	100;	,,	560
1936		**	355;	"	79;	,,	434
1937		,,	345;	,,	88;	,,	433
1938		,,	310;	,,	84;	,,	394
1939		,,	299;	,,	84;	,,	383
1940		,,	343;	,,	IOI;	,,	444
1941		,,	390;	. "	75;	,,	465
1942		,,	365;	,,	85;	,,	450
1943		,,	359;	,,	93;	,,	452
1944		"	392;	,,	52;	"	444

<sup>\*</sup>City Boundary extended and population increased by 20,000. The figure given for 1935 included 139 pulmonary and 23 non-pulmonary taken over from the County.

The following table gives the sex and age periods of those notified during 1944:

Age Periods	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 & up.	Total
Pulmonary Males Females	=	1 1	5	9	12 32	35 36	40 33	48 31	35 17	22	9	216 176
Non-pulmonary Males Females		3 3	4 5	3 3	3 3	5 4	4	2	2 1		1 2	27 25

The following table gives the number of young adults notified in the age periods 15-19 and 20-24 during the past six years:

	1	Pulmo	onary				Youn the pa			Notifica	ations)	
	193	1939		1940		1941		1942		43	1944	
Ages.	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males	32	19	17	20	27	24	31	24	15	23	12	35
Females	16	30	28	25	33	32	29	37	28	32	32	36
Total Total	48	49	45	45	60	56	60	61	43	55	44	71
bothsexes	9	7	9	0	11	16	1	121	9	8	11	5

This table shows that for the year 1944 there has been an increase of 17 young adults notified, as compared with 1943, but is six less than in 1942. The increase is almost entirely in the 20-24 age period and is much more marked in the case of males than of females. 25 of these young adults were cases discharged from the services for Tuberculosis. Five of them (four males and one female) were in the 15-19 age period and 20 of them (17 males and three females) were in the 20-24 age period.

# DEATHS

(Note.—The following figures for 1944 for deaths are those allocated locally.)

Deaths due to Pulmonary Tuberculosis	 174
Deaths due to Non-pulmonary Tuberculosis	 20

The figure of 194 for the total deaths for 1944 is the lowest ever recorded and is a reduction of 12 on the preceding year. The figure is one less than in 1938—the last pre-war year. The pulmonary deaths (174) are five less than in 1943—the number being exactly the same as in 1938. The non-pulmonary deaths (20) are seven less than in 1943, this figure being the third lowest ever recorded. In 1935 there were 18 non-pulmonary deaths and in 1934 there were 19.

Death-rate per 100,000 :		1943	1944
Pulmonary	 		
Non-pulmonary	 		
Total death-rate	 		
Place of death:			
City General Hospital	 		11
Groby Road Sanatorium	 		65
Other institutions	 		16
In patients' own homes	 		102
			194

	Pht	thisis.		Other ous Diseases.	Total Tuberculous Deaths.		
Year-	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	
1931	262	108	49	20	311	129	
1932	240	100	33	14	273	113	
1933	269	111	32	14	301	125	
1934	223	92	19	8	242	100	
1935	234	91	18	7	252	98	
1936	202	77	28	11	230	88	
1937	216	82	35	13	251	95	
1938	174	66	21	8	195	74	
1939	183	-70	25	9	208	79	
1940	200	77	34	13	234	90	
1941	197	74	39	15	236	89	
1942	166	64	37	14	203	78	
1943	179	70	27	11	206	81	
1944	175	68	20	8	195	76	

The following Tables give the Age, Sex Distribution and Occupations of those dying from Pulmonary Tuberculosis during 1944:—

Age Period.		Males.	Females.	Total.
0—1		_	1	1
2-4		-	1	1
5—9		_	_	_
0—14		1	1	2 7
5—19		2 7	5	7
0—24			11	18
5—34		15	12	27
5—44		21	12	33
5—54		28	13	41
5—64		25	6	31
5 and upwards		11	3	14

#### Occupations of Persons Dying from Phthisis in 1944. M. F. $M \cdot$ F. SHOE TRADE: Army Pensioners Finishers 4 1 Clickers 5 Boxmakers Porters Rivetters 2 Licensed Victuallers Pressmen 1 1 Machinists Shop Assistants 1 4 1 3 Warehousemen Various 14 Various 2 32 Occupations not stated Total in Shoes 28 1 (includes Married Women. Widows, \*Hosiery Trades.. 5 5 Children and Per-Labourers 15 2 sons of no occupa-Clerks 3 tion) .. 2 Tailoring Trade 50 Vanmen 2 Grand Total ... 110 Soldiers 65 Engineers 15 2 Painters 2 Dressmakers

### ANALYSIS OF DEATHS.

Stage when first examined	Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years	Lived three
T.B ve cases 8	-	-	1	-	-	-	1	1	5
T.B. + ve Stage I. 41	-	_	_	-	-	3	3	8	27
T.B. + ve Stage II. 63	2	5	1	2	6	10	7	10	20
T.B. + ve Stage III. 21	5	_	1	3	1	4	1	4	3
Total 134	7	5	3	5	7	17	12	23	55

Of the total 134 recorded in this table, 17 were treated at both Groby Road Sanatorium and the City General Hospital, 105 were treated at Groby Road Sanatorium only, and 12 at the City General Hospital only.

<sup>\*</sup> A large number of married women are engaged in the Hosiery Trade, but these are not included, for in the case of deaths of married women and widows, only the husband's occupation is registered.

PULMONARY CASES NOT	HAVI	NG I	HAD .	Insti	TUTI	ONAL	TRE	ATM	ENT.
Stage when first examined	Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years	Lived three
T.B ve cases. 6	-	1	-	-	1	-	1	1	2
T.B. + ve Stage I. 0	-	-	-	-	-	-	-	_	-
T.B. + ve Stage II. 10	1	3	1	3	1	_	-	-	1
T.B. + ve Stage III. 5	3	_	1	_	1	-	_	_	-
Total 21	4	4	2	3	3	_	1	1	3

PULMONARY CASES NOT EXAMINED AT OR IN CONNECTION WITH THE DISPENSARY.

TOTAL	Died within one month of notifica- tion		three	six	twelve	Within 18 months	two	Within three years	Lived three years or over
13	8	1	1	_	1	_	_	1	1

These tables account for 168 deaths. In addition, there were six deaths of patients who had never been notified as suffering from Tuberculosis. This gives a total of 174 pulmonary deaths.

Deaths from Pulmonary Tuberculosis in Children (0-14)

During the past six years.

		193	39	1	194	0		194	1		194	2		194	3		194	4
Ages.	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-1
Males	 -	-	-	1	-	-	3	-	1	1	_	1	1	-	-	-	-	1
Females		-	1	-	-	-	-	1	-	-	-	1	3	-	-	2	-	1
Total	 -	-	1	1	-	-	3	1	1	1	-	2	4	-	-	2	-	2
Total each year		]			1			5			3			-	4			4

Four deaths of children, 14 years of age or under, from Pulmonary Tuberculosis have occurred during 1944, exactly the same as for 1943.

Deaths from Pulmonary Tuberculosis in Young Adults (15-24) during the past six years.

	19	939	19	40	1941		1942		1943		1944	
Ages.	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males	 7	5	2	7	7	7	6	5	4	6	2	7
Females	 7	7	9	11	10	12	11	15	3	11	5	11
Total	 14	12	11	18	17	19	17	20	7	17	7	18
Total	 2	26	2	9	3	6	3	37	2	4	2	5

There has been one more death from Pulmonary Tuberculosis in young adults in 1944, as compared with 1943, but with the exception of 1943, this is a low record. Two of the young adult deaths were of ex-servicemen in the age period 20-24.

Non-Pulmonary Tuberculosis Deaths.

Bones & Joints	Glands	Renal	Abdominal	Meninges	Miliary	Total
4		2	1	11	2	20

Of the 20 non-pulmonary deaths, nine are known to have been in contact with one or more persons suffering from Pulmonary Tuberculosis. Meningitis is again responsible for the greater proportion of these deaths.

Dea		Tuberculo 4) during t			Children	
	1939	1940	1941	1942	1943	1944
Males	4	5,	10	6	2	4
Females	3	3	11	5	3	4
Total	7	8	21	11	5	8

Eight deaths of children occurred from Meningitis, which is three more than in 1943, but three less than in 1942 and 13 less than in 1941.

## Recovered Cases

During the past year the names of 84 patients were removed from the register as having "recovered." Of these, 55 were pulmonary and 31 non-pulmonary.

# Analysis of Cases on Dispensary Register.

		Pulm	onary	,	No	n-Pu	lmon	ary		Т	otal		
DIAGNOSIS	Ad	ults	Chil	dren	Ad	ults	Chil	dren	Ad	ults	Chil	dren	Gr'd T'ls
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A. New Cases examined during the year excluding contacts:—  (a) Definitely Tuberculous  (b) Diagnosis not completed  (c) Non - Tuberculous	163	129	10	12	16	7 -	4	4 -	179 42 411	200	18	20	
B. Contacts examined during the year:—  (a) D e finitely Tuberculous  (b) Diagnosis not completed  (c) Non - Tuberculous		6	7 -				1 1 1		1 -	6 1 172	7 8	_	14 16 455
C. Cases written off Dispensary Register:— (a) Recovered (b) Non - Tuber- culous	24	20	6	3	6	16	4	5	30 511		10		84
D. Number of Cases on Dispensary Register on December 31st:  (a) Definitely Tuberculous  (b) Diagnosis not completed	769 —	621	60	49	152	155	79	76	921	776 62	139	125	1961
Number of cases pensary Register ary 1st	on Jan	nu-	2,	. 17	2	fer	red	r of from ses re	other	r are d aft	as	,-	23
<ol> <li>Number of case ferred to other are not desiring furth ance under the sch cases "lost sight of</li> </ol>	er ass eme,	ist-		42	4.	the	ses v e ye. uses)	vritter ar as	dea	id (a	ıll	1	72
5. Number of attend the Dispensary	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10,	.243	6.	Tr 31	ns un reatm st	r of l nder ent o	Dom n De	icilia cemb	ry er		60
7. Number of cons withmedical pract (a) Personal (b) Other	ition	ons ers.	1,	25 ,100	8.	ho	mes o	r of ulosis of pat of	Offic	for the	to he	2	68
9. Number of vi Nurses to homes pensary purposes	sits for D	by Dis-	6,	877	10.	-	b) X	r of : pecim n -ray e de in h Disp	coni	nation	ns on	1,7	
11. Number of "rec cases restored to t pensary Register	overe the D	d" is-		3	12.	cas	mber es on	of 'Disp	T.B.	plus y Res	g-	3,5	45

## Tuberculosis Dispensary as the "Centre for Diagnosis"

Notes from 108 doctors requesting an opinion on 1,125 patients were received and dealt with during the past twelve months. In addition, many patients, not under medical attention, called on their own initiative desiring to know whether they had consumption.

Clinical Examinations	Men	Women	Children	Total
First examinations	692	940	410	2,042
Re-examinations	1,268	1,247	458	2,973
"Contact" Examinations	s		1943	1944
Number of "contacts" e	examined		465	485
Number found to be de	finitely tu	berculous	22	14

## **Bacteriological Examinations**

Nature of Specimen	Positive	Negative	Total
Specimens of Sputum:— From Practitioners From Patients examined at the	38	371	409
Dispensary Specimens other than sputum	324 —	1,104 12	1,428 12
Total	362	1,487	1,849

Radiological Examinations				1943	1944
Radiological examinations	carried	out	at		
Groby Road Sanatorium			• •	2,573	3,513

## Treatment

At Groby Road San	atorium	:	Adults	Children
Pulmonary			 426	78
Non-pulmonary			 8	9
At City General Ho	spital		 24	13

## Attendances

Total number	of attendances	 	 10,243

### Visits

Visits I	paid by Tuberculosis	Officers	for purpo	se of	
exan	nination				268
Ditto.	Dispensary Nurses				6,977
Ditto.	District Nurses				2 962

### Additional Nourishment

Free milk—generally one pint daily—has been granted to necessitous patients whose income falls below a certain scale. During the year, 11 patients were assisted in this way, at a total cost of £42 4s. 4d.

Certificates were granted to many cases with active Tuberculosis in order to enable them to obtain an additional allowance of milk for which they were able to pay.

## Financial Assistance to Patients

The Ministry scheme for granting allowances to patients suffering from Pulmonary Tuberculosis was commenced in August, 1943, and has proved of very great value to many of our patients. During the five months of 1943, 95 patients were assisted with these allowances at a total cost of £1,600 18s. 8d. During the full year of 1944, 286 patients received allowances under the scheme, at a total cost of £9,470 1s. 4d.

The Ministry scheme did not provide for those chronic patients in whom there was little or no prospect of recovery or sufficient improvement to allow them to return to work, many of whom were in receipt of relief through the Public Assistance Committee.

In May, 1944, the City Council decided to grant allowances to those patients who were ineligible for grants under the Ministry scheme and who were in need of financial assistance. Under this scheme 50 patients have been assisted at a total cost of £933 2s. 6d. This does not include all those who were being relieved by the Public Assistance Committee as it was found that, in certain cases (e.g., single persons with no dependents), the grant made by the Public Assistance Committee was greater than the scale fixed by the Ministry or City Scheme—these two being the same.

## Mass Radiography

Another very important measure introduced in 1944 was Mass Radiography. An X-ray set, capable of taking miniature, as well as full-size films, was obtained and temporarily installed at St. Margaret's Works. A team consisting of Radiographer, Marshaller and Clerks, but without a Medical Director, was appointed and given a course of training. Not until early in 1945, however, was the team ready to commence operations in the City. By means of Mass Radiography many totally unsuspected cases of Tuberculosis in persons quite free from symptoms, generally in an early and therefore a curable stage are revealed, besides other non-tuberculous lesions of the lungs.

#### After-Care

After-Care work has been carried on as previously, and a close contact is maintained with every patient as long as his name remains on the Dispensary Register. £20 6s. 0d. has been spent in clothing, dentures, etc., for necessitous patients undergoing institutional treatment. Gifts of clothing, etc., though not nearly so numerous as in pre-coupon days, have also been received and distributed to the poorer patients.

## Comparison of Notifications and Deaths during the War Years, 1914-1918 and 1940-1944

As I am due to retire in July, 1945, and this is the last Report I shall have the privilege of making, I should like to record the following figures of notifications and deaths during my early and later years of service with the Corporation. These figures (since corrected by transferred deaths in 1944) I put before the Isolation Hospital Committee in January, 1945.

Two great wars have to no inconsiderable degree impeded the progress we had hoped to make in our fight against Tuberculosis. The first world war commenced within two years of my appointment here and the European part of the second great war was, at the end of 1944, nearing its termination. It is, therefore, not inappropriate to give a comparison of the notifications and deaths from Tuberculosis during these two wars.

# Comparison of Notifications and Deaths during the 1914-1918 and present Great Wars

### NOTIFICATIONS DURING THE FIRST GREAT WAR

	1914	1915	1916	1917	1918	
Pulmonary	730	901	730	655	746	Average number
Non-pulmonary	138	159	134	98	82	of notifications
				/	_	each year=874
Total	868	1060	864	753	828	

## AND DURING THE PRESENT WAR

Pulmonary Non-pulmonary	1940 343 101	1941 390 75	1942 365 85	1943 359 93	1944 392 52	Average number of notifications
Total	444	465	450	452	444	each year=451

## DEATHS DURING FIRST GREAT WAR

Pulmonary Non-pulmonary	1914 273 88	1915 325 76	1916 306 67	1917 343 78	1918 316 82	Average number of deaths
Total	361	401	373	421	398	each year=391

## AND DURING THE PRESENT WAR

Pulmonary Non-pulmonary	1940 200 34	1941 197 39	1942 166 37	1943 179 27	1944 174 20	Average number of deaths
Total	201			-		each year=214
Total	234	236	203	206	194	

In considering these figures, it is necessary to remember that the population of the City has increased considerably since 1914. It was then estimated at 232,644. In addition to the natural increase, the extension of the City boundary in 1935 added 20,000 to the population. With these, we took over from the County 139 pulmonary and 23 non-pulmonary cases of Tuberculosis.

During the present war the population has been increased by large numbers of evacuees and there has been much overcrowding. In spite of this and all the difficulties of the black-out, shelter life, queueing for food, etc., etc., no great increase has occurred in either notifications or deaths—in fact, the total deaths from Tuberculosis for the year 1944 constitute a new low record.

WYVILLE S. THOMSON.

# Report on the Isolation Hospital and Sanatorium for the year 1944

By

## J. C. HAMILTON MACKENZIE, M.D.(Glas.), D.P.H.(Lond.), Medical Superintendent

The following is an abridged report on the work of the Hospital for the year 1944.

The general statistics are based on verified diagnosis on patients discharged.

### SCARLET FEVER

Verified cases discharged			 	199
Deaths			 	Nil
Concurrent double infecti	ons:			
Sonne Dysentery			 	1
Abscess of Eye			 	1
Cross Infections			 	Nil
Complications:				
Otorrhoea			 	8
Zygomatic Mastoid			 	1
Pan-Sinusitis		4.4	 	1
Serum Rashes			 1.	8
Serum Reactions			 	9

#### Comments

Throughout the year 1944, Scarlet Fever remained a mild disease, only selected cases being admitted, complications and suitability of home conditions for nursing being the factors in selection. There were no deaths.

The complications were mild, otorrhoea being the principal compli-

cation, two occurring prior to admission to hospital. There was one case of mastoiditis which cleared up without operation.

There was a slight increase in serum rashes, a condition which may vary with the different batches of antitoxin.

## DIPHTHERIA

Verified cases	discharged					105
Deaths						135
Mortality rate		••			• •	6
						4.4%
Number of ca	ses in which	diagno	sis was	altered		90
Contacts						3
Concurrent Di	seases :	1			-	
Chickenpox						2
Scabies						1
Tuberculou	s Adenitis					1
Cross infection	ıs	**			.,	Nil
Complications	:					
Paralysis of	heart (severe)					6
,,	,, (slight)					16
,,	palate					10
,,	ciliary muscles					6
,,	external ocular	muscles				2
** 1	pharynx					2

## Grouping of cases according to severity

A = Severe.	B = Moderately severe.	C = Mild.
-------------	------------------------	-----------

Group of	Dise	ase	Number of Cases	Deaths	Mortality Rate
A			12	6	50%
В	٠.		21	Nil	
С			66	Nil	_
Larynge	al		Nil 9	Nil	
Nasal			14		_
Bacterio	ogica	1	22	_	

## Classification of types of infecting organism:

			1942	1943	1944
Gravis	 		338	82	59
Intermedius	 		78	59	23
Mitis	 		55	62	53
Atypical	 	*,*	15	2	

### Types of infecting organism in fatal cases:

Gravis	 	 	* *	 3
Intermedius	 	 	/	 3

#### Analysis of fatal cases:

- Child, aged 4, "gravis" infection, non-immunised, late case on admission—seventh day. Death from early cardiac failure, 10 days in hospital.
- (2) Child, aged 7, "gravis" infection, non-immunised, late case—fifth day of disease. Death from early cardiac paresis, two days in hospital.
- (3) Child, aged 11, "gravis" infection, non-immunised. Sixth day of disease on admission. Death from early cardiac failure, 12 days in hospital.
- (4) Child, aged 13, "intermedius" infection, non-immunised, third day of disease. Death from early cardiac failure, seven days in hospital.
- (5) Child, aged 9, "intermedius" infection, non-immunised, fourth day of disease. Death from early cardiac failure, 18 days in hospital.
- (6) Child, aged 11, "intermedius" infection, immunised, chronic nephritis. Seventh day of disease on admission. Death from early cardiac failure, 10 days in hospital.

#### Operations:

Tonsillectomy	(for carriers)	 	17
Antrum Wash	out (for persistent carriers)	 	1

#### Comments

The decline in the epidemic of Diphtheria which commenced in the city in 1937 is again evidenced by the number of cases discharged in the current year, i.e., 135.

The change in type of the infecting organism is noted for this year as it was in the year 1943, namely, a reduction in the incidence of "gravis" and "intermedius" infections and a relative increase in "mitis" type.

A feature of diphtheria in the year was the relatively high proportion of late cases, which is responsible for the increased mortality rate, although the latter figure is based on a small number of cases.

The lesson is again brought home that the only safe procedure in the treatment of Diphtheria is effective active immunisation in childhood.

## PUERPERAL PYREXIA

Total discharges		 			85
Admitted as Puerper	ral Pyrexia	 			35
Admitted as Septic	Abortion	 			50
Deaths		 			2
PUERPERAL CASES	:				
Uterine sepsis		 	26 (strep	tococcal	11)
Puerperal mastitis		 	4	rococcar	/
Urinary infection		 	2		
Pyrexia ? cause		 	2		
R.P.C.		 	1		

There were no fatal cases. Nine of the 11 streptococcal cases responded to sulphonamides. One did not, but recovered. One case of pelvic cellulitis failed to respond to sulphonamide therapy, but was successfully cleared up with penicillin.

All cases were sporadic.

### ABORTAL CASES:

Verified septic abortion	 	 	28
Verified not septic	 		22

## There were two fatal cases:

- Case 1. Streptococcal thrombophlebitis and endocarditis. Did not respond to sulphonamides.
- Case 2. General peritonitis due to streptococcus viridans. No response to sulphonamides, and a transient improvement only with penicillin.

One case of streptococcal pelvic cellulitis was successfully cleared up with penicillin.

Supplies of penicillin became available for civilian use in September of this year.

Although first reports from other centres are somewhat gloomy, experience here with the small number of cases so far treated suggests that penicillin will prove of the greatest value for the small group of puerperal infections which, for one reason or another, do not respond to treatment with the sulphonamides.

The Puerperal Unit is the responsibility of Dr. C. W. C. Karran, Deputy Medical Superintendent.

## MEASLES

Verified c	ases discha	arged	 	 	9
Deaths			 	 	Nil
Complica	ations :				
Brone	chopneum	onia	 -0	 	1

Only a small number of cases of Measles was admitted, partly due to staffing difficulties, and partly due to the fact that 1944 was not a "measles" year.

## WHOOPING COUGH

Verified cases dis	charged	 	 	38
Deaths		 	 	5
Complications	:			
Bronchopneu	umonia	 	 	17
Convulsions		 	 	2

All deaths were due to Bronchopneumonia complicating Whooping Cough; the majority of cases had Bronchopneumonia on admission.

#### MENINGITIS

* *				40
				40
		Disc	harged	Died
			25	Nil
			8	8
			1	1
			1	1
			5	Nil
			Disc	Discharged

# OTHER DISEASES ADMITTED AS INFECTIOUS DISEASES

Disease :			Verified Cases discharged	Deaths
Abscess, Lung			2	1
,, Peritonsillar			14	
,, Cervical			2	
Bronchitis			13	
Chickenpox			43	
Cavernous Sinus Thromb	osis	222	1	1
Colitis, Ulcerative			3	1
Coryza, Acute			4	
Dysentery, Sonne			42	
Enteritis			17	2
Erysipelas			14	4
Furunculosis			3	
Haemorrhage, Subarachno			4	1
Impetigo			4	1
Influenza			13	
Jaundice			4	
Ophthalmia Neonatorum			7	
Otitis Media			3	
Parotitis			27	
Pemphigus Neonatorum			2	
Pleural Effusion			6	
Pleurisy			3	
Pleurodynia			1	
Pneumonitis			2	
Pneumonia—Broncho			28	5
" Lobar			14	1
Poliomyelitis, Acute			2	
P.U.O			16	
Pyelitis			3	
Paratyphoid B			2	1
Rubella			24	_
Salmonella Infection			2	- Marie
Scabies			15	
Sciatica			2	
Tonsillitis			105	
Toxic Rash			8	1
Typhoid Fever			1	_
Vaccination Reaction			8	
Vincents Angina			17	
Other Diseases			63	12
Staff Illnesses			46	_
Mother admitted with Bab			8	
Baby admitted with Mothe			35	-
			0.700	

## TUBERCULOSIS

	-	-		-		
Classified cases a	dmitte	d				453
Classified cases d	ischar	ged				399
Deaths						59
Observation cases						47
Observation cases						43
Observation cases	disch	argeu				40
Surgical Treatm	ent ca	arried	out in	the Ch	est Ho	spital
	for	r year	1944			
Operations carried ou	it by T	Choraci	c Surge	on:		
			City	E.M.S.	County	
			Cases	Cases		Total
1st Stage Thoracopla	asty		20		1	21
2nd Stage Thoracop	lasty		12		- 1	13
Anterior Ribs (1st	Stage 7	Thora-				
coplasty)			6	_	1	7
Lobectomy			_	1	_	1
Removal of foreign b	ody in	lung	_	43	_	43
Thoracotomy			1	12	_	13
Rib Resection			1	12	_	13
Drainage of Lung A	bscess		1	5	-	6
Decortication			-	7	-	7
Removal of Lung To	ımor		1	5	-	6
Pack removal			_	1	1	2
Phrenic Operations			26	-	2	28
Adhesion Sections			40	2	5	47
Monaldi Operations			5	_		5
Bronchoscopy			14	11	5	30
Other work carried o	ut in T	Theatre	:			
Tonsillectomy						30
Mastoidectomy						1
Antrum Washouts		4.4				1
Monaldi Operation						5

## Collapse Therapy:

Bronchoscopy ... Cauterisation of Larynx

Curettage of Glands ..

Bronchograms under G.A.

Artificial Pneumothorax, n	ew cases	induced		 118
Artificial Pneumoperitoneu	ım, new o	cases indu	ced	 12
Refills (In-patients)				 3267
Refills (Out-patients)				 3292
Aspirations and Pleural La	avage (In-	patients)		 119
Aspirations and Pleural La	avage (Ou	t-patients)		 162
Gold Injections				 842
Blood Examinations				 1948

16

1

1

10

#### Comments

The chest side of the Hospital had to work under difficulties of large waiting lists and staff shortage.

Schemes for additional accommodation were instituted during the year, an additional block of 82 beds was commenced in 1945. Shortage of staff is probably the most potent difficulty we have encountered; unfortunately, there is no apparent prospect of resolution of this difficulty in the near future.

We had the honour of contributing to the national cause by furnishing 40 beds as the Regional E.M.S. Chest Unit, commencing from "D" Day. The figures shown in the table above is an index of the valuable work which was accomplished by this Unit.

Mr. T. Holmes Sellors was the Thoracic Surgeon to the Unit and Dr. A. I. Parry Browne the Chest Anaesthetist.

### X-RAY DEPARTMENT

		In-patients	Out-patients	Total
Chest Films		2,252	4,418	6,670
Bronchograms		70		70
Films of Bones and Joi	nts	89	182	271
Screen Examinations		2,754	2,411	5,165
Dental Films		9	_	9
Staff		403	72	475
Sinuses		17		17
Medical Practitioners		_	192	192
E.M.S. Unit		585	_	585
E.M.S. Frith		_	6	6
M.O.H.A.		_	17	17
N.S.M.B		_	121	121
City Mental Hospital		_	192	192
City General Hospital			5	5
Adcock & Shipley, An	nerican			
Red Cross (Mass	Radio-			
graphy)		_	217	217
Day Nursery		_	111	111
M.S. Clinic		_	286	286
Totals		6,179	8,230	14,409
		-		-

## DENTAL CLINIC

Extraction Cases		 	 	94
Filling Cases		 	 	3
Examinations		 	 	65
Impression for Den	tures	 		10

## LABORATORY

All the bacteriological investigations for the Hospital are now carried out by the Emergency Public Health Laboratory under the direction of Dr. R. Knox, which is situated in the Hospital.

The clinical pathology of the Hospital is performed under the direction of the Pathologist of the Area Laboratory, which is situated at the City General Hospital.

J. C. H. MACKENZIE.

# Report on the City General Hospital, Leicester, for the year 1944

By

A. P. M. PAGE, M.D., B.S.(Lond.), M.R.C.P.(Lond.), D.C.H. (R.C.P. & S.)

Medical Superintendent and Physician

## FOREWORD BY THE MEDICAL OFFICER OF HEALTH

Once again, Dr. Page, in submitting his report on the work of the Hospital for 1944, can point to a year of outstanding progress.

A glance at the statistical table on page 42 which shows the work of the last nine years, is clear evidence of this state of affairs.

I only wish to comment on one or two points.

The record number of patients admitted in any one year, viz., 7,850, is not quite so significant as it might appear, due to the fact that many of the admissions were short stay cases from convoys. Nevertheless, the increase in the average number of beds filled shows clearly that there is a real increase in the work of the Hospital.

The number of deaths, at 371, is 149 less than in 1943.

Penicillin came into use during the year, though at first only for Service patients. The huge total of a hundred million units is equivalent approximately to the treatment for one day of a thousand patients. As each patient usually requires several days' treatment, it will be seen that penicillin could only be used for a fraction of the patients admitted. In addition, of course, it is only suitable for certain types of diseases. Nevertheless, its less restricted use for civilian cases will prove of the greatest benefit.

# Report on the City General Hospital, Leicester, for the year 1944

By

A. P. M. PAGE, M.D., B.S.(Lond.), M.R.C.P.(Lond.), D.C.H. (R.C.P. & S.)

Medical Superintendent and Physician

I herewith submit an abridged report covering the activities of the various Departments of the Hospital.

A record number of patients was admitted—7,850, as compared with the previous highest figure of 6,540 in 1943.

The war situation caused a great increase in the operations performed and in Service patients admitted generally. The detailed analysis of cases refers, in the main, to civilian patients only, as it has not been found possible to analyse the disorders of Service patients. Service admissions for the year were 2,797.

I should like to take this opportunity of expressing my thanks to all the members of the various Departments of the Staff for their valuable services and especially to name the following voluntary workers for their continued assistance: Miss M. Elkins, Ph.D., Biochemist (left March, 1944), Mrs. York and Miss Goddard, Librarians, Mrs. Timson, Occupational Therapist. I should also like to express my thanks for the invaluable work carried out by the Joint War Organisation of the British Red Cross Society and Order of St. John for the many Service patients in this Hospital.

1943	1944
700 Beds.	
6,540	7,850
6,024	7,413
520	371
235	155
176,524	181,808
26.99	23.16
483.637	496.74
570	_
_	597
413	
_	384
	700 Beds. 6,540 6,024 520 235 176,524 26.99 483.637 570

STATISTICAL TABLE.
Showing progress in Special Departments in the past 9 years.

	1936	1937	1938	1939	1940	1941	1942	1943	1944
Admissions	3,357	4,065	4,182	4,581	6,142	6,497	6,130	6,540	7,850
Average stay in	47	46.7	36.98	30,86	26,99	26.83	28.59		
Hospital	days	days	days	days	days	days	days		days
Confinements	222	339	552	728	895	1,091	906		
Operations				100000		,	-	010	1,001
Performed	587	621	852	1,001	1,082	1,158	1,244	1,532	1,929
X-Ray Cases		1		1	, , , , ,	,,,,,,,	-,	2,002	1,020
Filmed	2,096	2,744	2,139	1,999	2,802	3,198	3,788	3,996	4,167
Pathology	7,247	6,486	8,521	8,794	12,750			24,430	A CONTRACTOR OF THE PARTY OF TH
Physiotherapy					,	,	22,120	24,100	20,011
(cases)	_	-	160	240	300	380	448	485	600
Average No. of					000	000	110	400	000
beds filled	427	433	423	386	453	478	480	484	497

## SUMMARY OF YEARLY RETURN OF CASES.

	Remaining on 31/12/43	Admitted	Discharged	Died	Remaining on 31/12/44
Men	173	3505	3251	157	270
Women .		2538	2424	129	90
Children (unde 16 years) .	0.00	1807	1738	85	149
Totals	443	7850	7413	371	509

## DEPARTMENT OF MEDICINE

#### MEDICAL CASES Disorders of Alimentary System .. .. .. 150 " Bones, Joints, Fibrous Tissues and Glands ... 82 ", Genito-Urinary System .. .. .. 69 203 47 " ,, Metabolic and Endocrinal System .. .. 34 " " Nervous System .. .. 106 " Respiratory System " Skin .. .. 423 .. .. .. 209 General Infections .. 144 6 21 Nutritional and Congenital Defects .. .. 46 Venereal Diseases .. .. .. 8 1548 Electrocardiographic Examinations .. .. 60 Physiotherapy (Massage) Department—cases treated 600

## DEPARTMENT OF SURGERY

DELAKTMEN	I OI	SUNG	LILL		
SURGICAL CASES					
Alimentary System					441
Bones, Joints and Fibrous Tissu					41
Eye					5
Genito-Urinary System .					99
Malignant Growths					119
Miscellaneous					175
Mouth, Ear, Nose and Throat					109
Orthopaedic					113
Respiratory System					21
				1	123
TABLE OF	OPE	RATIO	NS.	-	1
1. General			/		987
Abdominal .				401	
G : W:				92	
D				22	
				16	
Ear, Nose and Throat				127	
77 1				3	
Miscellaneous .				326	
2. Gynaecological Operations					376
3. Orthopaedic Operations .					566
					1929
Anaesthetics Administered .					1909
Dental Extractions, etc				1.	107
DEPARTMENT OF OBST	TETRI	CS AN	D GY	NAEC	DLOGY
Ante-Natal Clinic:				1943	1944
Total number of first examin	nations			1324	1065
Total number of attendances	3			8898	8424
Number of Maternity Beds	provided			45	45
Number of Cases delivered .				946	1034
Number of cases notified as	Puerpera	al Pyrexia	1	23	13
Number of cases notified as	Ophthal	lmia Neo	na-		
torum				Nil	Nil
Maternal deaths				2	2

## Causes of Maternal Deaths:

- Acute Heart Failure; Essential Hypertension; 2nd day Puerperium.
- Circulatory Collapse; Secondary Anaemia; Chronic Nephritis; Puerperium.

## Abnormal Deliveries:

D1 D				
Breech Presentation			 	28
Forceps Deliveries			 	57
Caesarean Sections			 	25
Retained Placenta			 	9
Ante-natal cases admitted for	or treatme	nt	 	133
Gynaecology :				
Total number of patients	admitted		 	389
Abortions			 153	
Miscellaneous			 236	
Gynaecological Operation	s		 	376

# DEPARTMENT OF PATHOLOGY (LABORATORY REPORT)

By Dr. R. S. WALE

Twenty-three thousand and seventy-seven investigations were carried out during the year, a slight decrease on last year's record figures.

During the course of the year resignations and illness so depleted the staff that it was impossible fully to carry out the commitments of the Laboratory. Dr. Elkins, Biochemist, and R. Ayres, Junior Laboratory Technician, left in May, and Dr. Dobrashian, Assistant Pathologist, in November. In September, G. Green was appointed to fill the vacancy of Junior Technician, the other two posts remaining unfilled at the end of the year.

The Department accepted full responsibility for the Penicillin used in the Hospital, including ordering, dispensing and making the necessarily complex returns and acted in an advisory capacity in all matters connected with it. As over 100,000,000 units were handled, this represented a very large amount of work which does not figure in the numerical returns.

The Department continued to bleed donors for the use of the Hospital and for the plasma processing depot at Nottingham. There was a

considerable increase in this work coincident with the invasion of the Continent.

General Examinations				:	23,077
Blood Donors used					1,264
Blood Transfusions given					244
Histological Examinations					427
Post Mortems performed					166
Wassermann Reactions					1,814
Specimens examined at ou	itside Labo	oratories	for the	Area	
Laboratory			/		441
DEPARTM	IENT O	F RAI	DIOLO	GY	
				1943	1944
Number of Cases radiolog	cically diag	nosed	3	,996	4,167
Number of Cases treated				112	75
(Superficial X-ray thera	ру)				
ANALYSIS	OF CAU	SES C	OF DEA	TH	
Disorders of Alimentary S	System				64
" " Bones and Jo					5
,, ,, Circulatory S					79
" " Ear, Nose an					2
" " Genito-Urin					28
,, ,, Haemopoieti					4
,, ,, Metabolic an		e Syste	m		3
" " Nervous Sys	tem				38
" " Respiratory	System				74
" " Skin					1
General Infections					19
Maternity and Gynaecolog	gical				5
Mental Disorders					-
Nutritional and Congenita	al Defects				39
Orthopaedic					2
Poisonings, intoxications,	etc.				- 1
Miscellaneous	.:				7
					371

# Report on Maternity and Child Welfare

for the year 1944.

By

E. B. BERENICE HUMPHREYS, M.B., Ch.B.(Edin.)
Maternity and Child Welfare Medical Officer.

### STAFF

## Medical Staff

Dr. L. Lichtenstein, who joined the Department in March, 1942, left in April, 1944, to take up a post near London.

## Health Visitors

During 1944, the following persons left the Department:

Miss Doris Atkins left in May, 1944, to take up a post in Lincolnshire, near her home.

Mrs. Audrey Mathis was attached to the Department temporarily from the 8th May to the 16th September, when she travelled to America to join her husband.

Miss Ruby I. Walker left the Department on the 6th May, 1944, on the occasion of her marriage.

During the year the following Health Visitors were appointed to the Department: Miss D. L. Mallison (who had previously been on the staff) and Miss W. M. Watchorn.

#### Midwives

Mrs. Oldham did duty from the 12th June to the 30th September, when she resigned for personal reasons.

Mrs. Margaret Howard resigned on the 31st October, upon the occasion of her marriage.

Mrs. Oldham was replaced by Miss Jeffs on the 8th December and Mrs. Howard by Miss Watt on the 20th December.

## Health Visiting

(Corresponding figures for the previous year are shown in brackets)

Number	of	first visits to children under one	year	old	5,049	(4,721)
,,	,,	revisits to children under one year	rold		17,920	(18,953)
,,	,,	visits to children one to five years	old		22,827	(24,525)
,,	,,	visits to cases of Ophthalmia Neo	onato	rum	32	(26)
,,	,,	first visits to ante-natal cases			1,145	(1,087)
"	,,	other visits to ante-natal cases			122	(140)
,,	,,	visits to children under Infa	ant	Life		
		Protection Act			854	(851)
,,	,,	other visits (no access)			7,875	(9,026)
,,	,,	" " (not classified)			1,947	(1,794)
		Totals			57,771	(61,123)

The total figures show a decrease in the amount of district work, which was anticipated in view of loss of staff without replacement and prolonged sick leave amongst the staff. In addition, various extra duties due to wartime conditions have been undertaken by Health Visitors and it is the district work which inevitably has to suffer.

An analysis of the current figures indicates that the policy has been to maintain, as far as possible, visits to children under one year of age; the decrease has been chiefly in the revisits to children after their first birthday.

In addition to their ordinary work, Health Visitors have continued to staff the 11 Vitamin Distributing Centres each week. It is not intended to continue this work in subsequent years.

## Attendance of Health Visitors at Clinic sessions :-

Infant Welfare Centres	 	 	2,299	(2,299)
Ante-Natal Clinics	 	 	1,078	(1,004)
Post-Natal Clinics	 	 	70	(81)
Birth Control Clinic	 	 	103	(102)

It will be seen that the attendances of Health Visitors at Clinics has been maintained as it is essential that clinics should be staffed, though it is regrettable that this has to be done at the expense of the vital work of district visiting.

## ANTE-NATAL CLINICS

The number of ante-natal sessions held and the attendances during 1944 was as follows:

(Corresponding figures, where available, for the previous year are in brackets)

			ATTENDANCES						
Clinic	No. of Sessions		First Visits		Re-Visits	Total	Avg. per Session		
Cort Crescent	51	(52)	202	(147)	923 (825)	1125 (972)	22		
13 Crescent Street	49	(50)	365	(293)	1210 (1113)	1575 (1406)	32		
119 Highcross St.—Wed.	51		407		1640	2047	40		
—Friday	44	(52)	133	(394)	592 (1539)	725 (1933)	16		
Belgrave Hall-Monday	48	(48)	271	(176)	997 (858)	1268 (1034)	26		
Wednesday	51	(52)	197	(254)	879 (997)	1076 (1251)	21		
Newby Street—a.m	51		358		1529	1887	37		
p.m	18	(51)	42	(337)	253 (1269)	295 (1606)	16		
St. Christopher's—a.m.	51	(45)	125	(105)	811 (629)	936 (734)	18		
p.m.	51	(50)	193	(189)	828 (846)	1021 (1035)	20		
Braunstone	48	(48)	221	(177)	1010 (751)	1231 (928)	26		
Totals	513	(448)	2514	(2072)	10672 (8827)	13186 (10899)	26		
Municipal Maternity			-						
Home	101	(102)	377	(402)	1880 (1881)	2027 (2000)	00		
City General Hospital		(204)		(1324)	7359 (7574)	2257 (2283) 8424 (8898)	22		
Leicester and Leicester-				(1)	7000 (7074)	0424 (0090)	54		
shire Maternity Hosp.	153	(150)	925	(963)	6834 (7084)	7759 (8047)	51		
Royal Infirmary		(105)	350	(324)	160 (217)	510 (541)	5		
Totals	1027 (	1009)	5231 (	(5085)	26905 (25583)	32136 (30668)	30		

The following are particulars concerning the source of the new patients who attended the *district* clinics:

(The corresponding figures for the previous year are in brackets)

CLINIC	Referred by								
	Health Visitors	Mid- wives	Doctors	Ex- patients or friends	City General Hosp.	Other Sources	Other Clinics	Came of own accord	Totals
Cort Crescent  13 Crescent Street  119 Highcross St.— Wed. Friday  Belgrave Hall  Newby Street  St. Christopher's  Braunstone		38 (38) 165 (150) 152 (185) 65 (185) 206 (203) 167 (160) 224 (241) 143 (120)	2 (3) 24(15) 15(14) 4 20(12) 23(28) 4 (2) 9 (1)	10 (20) 15 (18) 31 (10) 2 44 (39) 34 (33) 3 (-) 3 (7)	2 (1) 9 (5) 20 (7) 8 (7) 22(13) 20 (5) 15 (1) 3 (1)	11 (-) 43(21) 49(20) 20 28(10) 53(12) 3 (1) 20 (8)	2 (6) 4 (4) 1 (9) 2 9 (7) 12(12) 5 (5) 10 (3)	110 (48) 84 (61) 125(112) 24 103(112) 59 (56) 17 (10) 13 (23)	202 (147 365 (293 407 (394 133 468 (430 400 (337 318 (294 221 (177
Totals	196(200)	1160(1097)	101(75)	142(127)	99(33)	236(72)	45(46)	535(422)	2514(2072

The attendance at the district clinics shows a further increase during the year of 442 new patients in a total of 2,514 such patients and an increase of 1,845 revisits in a total attendance of 13,186. This is a very marked increase as compared with the previous year, which itself had showed a definite increase in the volume of work.

The clinic work at some sessions has been extremely heavy and in spite of the difficulties of staffing it has been necessary to establish additional sessions during the year under review. Highcross Street Clinic was divided into two weekly sessions from the 9th March and Newby Street Clinic similarly from the 31st August.

### MIDWIVES

During the year 1944, 93 midwives notified their intention to practise. Of these, 21 were Municipal Midwives, one relief Municipal Midwife, 18 were midwives in independent practice, and the remaining 53 were practising in maternity hospitals or maternity homes.

## THE MUNICIPAL MIDWIFERY SCHEME

The organisation of this service, which was summarised in the Annual Report for 1938, remains essentially the same. Twenty-one midwives serve the city, which is divided into eight areas, each served by a team of one to four midwives.

SUMMARY OF WORK DONE BY MUNICIPAL MIDWIVES IN 1944

		0	Gas and		VISITS	
Area	No. of Midwives	Cases Attended	Air Ad- ministered	Post-Natal	Ante-Natal	Total
1	4	264	35	6,694	1,144	7,838
2	4	328	129	8,474	2,142	10,616
3	2	198	9	4,677	1,138	5,815
4	2	212	6	5,134	708	5,842
5	4	351	37	8,433	1,080	9,513
6	2	148	_	3,430	402	3,832
7	2	221	2	4,312	423	4,735
8	1	66	1	1,725	362	2,087
Relief	1	31		2,038	17	2,055
Grand	Total	1,819	219	44,917	7,416	52,333

The figures show a further increase in the number of cases attended and visits paid over the number for 1943 when it was noted that midwives were then working beyond the optimum number and patients would thus not be able to have all the attention desirable for domiciliary cases. The number attended was 284 in excess of that of 1943, and 422 in excess of 1942.

There has been no increase in staff, though a relief midwife has worked throughout the year, mainly in Area No. 7 and partly in Areas Nos. 6 and 4, but as there have been several changes of staff, with the inevitable deficiency at the exchange period, the Service has not had the services of an additional midwife for many weeks during the year. At present the staff is complete, but the services of a relief midwife can be fully used.

In order to equalise the amount of work and the number of patients for each midwife, adjustments of certain boundaries are under consideration.

## Analgesia

During the year, the use of gas and air analgesia in domiciliary midwifery was inaugurated. The original scheme whereby the apparatus was obtained from local First Aid Posts had to be abandoned when these closed, but the new arrangement of obtaining it from the Central Ambulance Depot is working well and is simpler in organisation.

All the midwives had not obtained their certificates at the beginning of 1944, so the figures showing the use of analgesia are not truly representative this year.

The fact also that midwives are attending large numbers of cases is against the use of analgesia and often the midwives are not able to spend sufficient time with the patient to warrant sending for the apparatus. Owing to pressure of work, midwives frequently have to leave a patient in labour to make other visits, where ideally they should stay and administer analgesia.

It is to be noted in Area No. 2, where most use was made of analgesia, each midwife has a student midwife and she is, therefore, not under such pressure of work as is another midwife attending the same number of cases singly.

# Circular 20/44 of the Ministry of Health, dated 22nd March, 1944.

The above Circular deals extensively with the provisions which are desirable concerning the care of the premature infants and its relation to the problem of neo-natal mortality. It is recognised that at the present time the recommendations in general cannot be put into operation.

The contents of the Circular have been made widely known to midwives and to all maternity units, including private Maternity Homes.

The only recommendation which could be adopted upon receipt of the Circular was provision 1, which concerns more accurate information. Steps were at once taken to obtain information as to the weight at birth when this was  $5\frac{1}{2}$  lbs, or less. Later, this was modified and the weight at birth in all instances is now asked for by the Local Authority.

The recommendations of the Circular are being kept in mind so that they may be incorporated in future plans as and when circumstances permit.

#### OBSTETRIC CONSULTANTS

During 1944, a consultant was called in to five emergencies, namely, a case of prolonged labour; a case of severe hyperemesis, complicated by a contracted pelvis; a case of serious delay in the first stage of labour; a case of retained placenta with severe shock after delivery of twins, and a case of surgical emphysema following labour.

## PUERPERAL PYREXIA

During the year there were 135 notifications of Puerperal Pyrexia, and the following table shows the place of confinement and of treatment, with the results of treatment. The figures include 50 cases of abortion. The policy of removal of all cases of potential sepsis to the puerperal fever unit of the City Isolation Hospital has been maintained and the results obtained fully justified the procedure.

#### OPHTHALMIA NEONATORUM

The following details show the incidence and results of treatment of this disease of the new-born during 1944:

#### **OPHTHALMIA NEONATORUM 1944**

Cases notified during year				23
Visited by Health Visitors				23
Removed to hospitals				9
Treated in hospital				9
Result of Treatment:				
Vision unimpaired			19	
,, impaired			-	
,, lost			_	
Still under treatment a	t end	of year	1	
Patients died			2	
Removed from district			1	
Total			23	
Removed from district			_1	

PUERPERAL PYREXIA

Notifications and Result of Treatment. 1944.

_			
		Royal Infirmary.	1
	at	City General Hospital.	1
LN	Died at	City Isolation Hospital.	24
TME		Maternity Home or Hospital.	
FREA		Home.	E
OF 7		Royal Infirmary.	. 2
RESULT OF TREATMENT	l at	City General Hospital.	81
RES	Recovered at	City Isolation Hospital.	06
	Rec	Maternity Home or Hospital.	50
		Home.	m
	1	Royal Infirmary.	
1	) AT	City General Hospital.	19
	IREATED AT	City Isolation Hospital.	91
1	TRE	Maternity Home or Hospital.	50
		Home.	
	A.I.	Royal Infirmary.	2
4	CONFINED AT	City General Hospital.	21
	NFI	Maternity Home or Hospital.	39
	3	Home.	73

## TABLE 5

## LIST OF REGISTERED NURSING HOMES

(INCLUDING MATERNITY HOMES.)

Address.	No. of Beds.
9 Mere Road	1
66 Uppingham Road	4
56 Clarendon Park Road	17
348 Aylestone Road	15
306 Aylestone Road	2
Stoneygate Nursing Home, Stoneygate Road	10
39 Scraptoft Lane	4
"Broadview," Goodwood Road	5
337 Fosse Road North	14
"Clifton Nursing Home," 58 Fosse Road Central	7
Central Nursing Home, 6 University Road	15
350 Aylestone Road	8
The Laurels, 185 Uppingham Road	8
Sundial Nursing Home, Aylestone Road	17
85 Narborough Road	10
St. Francis Private Hospital, 362 London Road	26
St. Mary's Nursing Home, 71 Abbot's Road	4
New Registrations:	
Springfield Nursing Home, 271 London Road	8
The Woodlands Nursing Home, Uplands Road, Grob	у
Road	3
Springfield Road Rest Home, 35 Springfield Road	4

### REGISTERED NURSING HOMES

Concerning the ascertainment of Homes which may not be registered, this matter is kept constantly in mind and all domiciliary births which take place at addresses other than home addresses are carefully scrutinised and then followed up by the Health Visitor.

During the year, many births took place at the homes of friends and neighbours owing to lack of domestic help in the homes and the absence of husbands on active service.

One unregistered Home, which was receiving chronic medical patients came to the notice of the Department during the year under review and steps were taken for no further patients to be admitted to this Home.

### MUNICIPAL MATERNITY HOME

The number of confinements at the Home during 1944 was 428, as compared with 420 during the previous year. The corresponding figures for the previous five years were:

1939	1939	1940	1941	1942	1943	
391	358	353	416	420		

The ante-natal clinic is held twice weekly in premises in the locality, as facilities at the Home proved inadequate.

#### Staff

Dr. T. W. Allen continues as Medical Officer on call for the Home on a part-time salaried basis.

#### TRAINING OF PUPIL MIDWIVES

The scheme for the training of pupil midwives remains the same as that described for the year 1938, and the number of pupils accepted for training during the year under review was:

					Part I.	Part II.
Number	of	Pupils	in training at beginning of 1944		32	11
,,	,,	,,	accepted for training during 1944		78	34
,,	,,	,,	who commenced training		69	28
,,	,,	,,	who completed training and succ	ess-		
			fully passed examination at first atte	empt	36	21
,,,	,,	,,	who failed to pass examination,	but		
			re-sat and passed		11	4
**	,,	,,	who completely failed		1	1
,,	,,	,,	in training at end of 1944		50	13
,,,	,,	,,,	who did not complete training		3	-

## TABLE 6. MUNICIPAL MATERNITY HOME

Return relating to Maternity Homes maintained or subsidised by the Council, as required by the Ministry of Health, for year 1944.

## FORM M.C.W. 96a.

1.	Name and address of Institution:	
	Municipal Maternity Home, Westcotes Drive, Leicester.	
2.	Number of beds in the Institution (exclusive of isolation	
	and labour beds) at 31st December, 1944	25
2a.	Number of beds, if any, included under item 2 which have	
	been allocated to, and reserved for, expectant mothers in	
	need of Hospital treatment	3
3.	need of Hospital treatment Number of maternity cases admitted during the year :	U
	Adminorana	445
	Patients	428
30	Number of women treated during the year in the beds	420
va.	shown against item 20 (These was a should be in the beds	
	shown against item 2a. (These women should be included	3.77
91.	also against item 3)	17
ob.	Average duration of treatment of Expectant Mothers in	
	beds shown against item 2a	4.47 days
4.	Average duration of stay of cases included against item 3	14.43 days
0.	Number of cases delivered by :	
	(a) Midwives 374	ADD As
	(b) Doctors 50 f	T D.D.As.
6.	(a) Midwives	
	by a midwife in emergency	171
7.	Number of cases admitted after delivery	4
8.	Number of cases notified as:	
	(a) Puerperal Fever	
	(b) Puerperal Pyrexia	10
9.	(b) Puerperal Pyrexia Number of cases of pemphigus neonatorum	
10.	(a) Number of infants who have at any time received a	
	supplementary or complementary feed while in the	
	Institution	36
	(b) Number of infants wholly breast-fed on leaving	30
	Institution	396
11.	Institution (a) Number of cases notified as ophthalmia neonatorum	
	(b) Describe of treatment in soll and	-
12.	(a) Number of metamal death	
14.		Nil
19	(b) Cause of death in each case	-
13.	(a) Number of stillbirths	11
	(b) Cause of death in each case and results of post-mortem	
	examination (if obtainable):	
	Toxaemia	1
	Ante-Partum Haemorrhage	1
	Prolapse Cord	1
	Foetal Ascites	1
	Anencephalic	2
	Malpresentation (Twins)	4
	Extended Breech	1
	Cause unknown	3
14.	(a) Number of infant deaths within 10 days of birth	3
	(b) Cause of death in each case and results of post-mortem	
	(if obtainable):	
	Intra Cranial Haemorrhage	1
		1
	Supra Renal Haemorrage Developmental Deformities (Asphyxia Neonatorum)	1
	Developmental Deformities (Aspnyxia Neonatorum)	1

## POST-NATAL CLINIC

The only Post-Natal Clinic, opened in 1938, is limited to women confined in the Municipal Maternity Home.

The following figures give details of attendances during 1944 and of treatment carried out when found necessary:

Number of new pat	ients invited				379
Number of new pat	ients attendi	ng (i.e.,	first visits)		259
Number of patients	who paid se	cond vis	it		40
Number of patients	who paid th	ird visit			46
Total attendances (f	irst and sub	sequent v	visits)		457
				-	
Of the new patients exar	nined at firs	t visit :			
Found to be norma	1				142
Found to be abnorm	nal				116
Not examined (nerv	ousness)				1
Treated and advised at C	Clinic :				
Cauterised					80
Advised at Clinic re	future treat	ment			1
Referred to own do	ctor re treati	ment			18
Failed to return					17
Of patients referred to o	wn doctor :				
Referred back for su	argical treatr	ment in h	nospital		4
Referred back for tr	eatment at (	Clinic an	d pessary fi	tted	
at own doctor's re	equest				12
No report available					2
					-
	Total	**			18
					_

A written report and request for treatment at the clinic is sent to the patient's own doctor before this is undertaken. The figures show that this method is acceptable to the private doctor.

## BIRTH CONTROL CLINIC

The following figures refer to the year 1944:

				City	County	Total
Number of	patients v	vho sought advice		112	46	158
,,	,,	were accepted	for			
		advice		99	43	142
.,,	.,	were refused adv	rice	13	3	16

Concerning the 142 women accepted for advice, the following are the medical reasons for which the advice was given:

Husband :		City	County	Total
Active Tuberculosis	 	4	-	4
Other diseases	 	4	_	4
Children:				
Hereditary disease	 	2	-	2
Patient:				
Nervous debility	 	3	_	3
General debility	 	36	15	51
Anaemia	 	2	3	5
Pulmonary Tuberculosis	 	7	. 1	8
Heart disease	 	3	1	. 4
Kidney Trouble	 	2	3	5
Albuminuria of pregnancy	 	2	2	4
Toxaemia of pregnancy	 	4	6	10
Obstetric complications	 	14	3	17
Gynaecological conditions	 	8	3	11
Various other conditions	 	8	6	14

## Cases in which advice was refused

Advice was refused to 16 women (13 City and three County). In nine of the women there were no medical grounds for contraception, four women were advised re sterility and three were advised concerning a gynaecological condition associated with sterility.

# SCHOOLS FOR MOTHERS AND INFANT WELFARE CENTRES

The appointment basis, instituted at the outbreak of war, has continued and, in general, has worked well. The medical staffing has been undertaken partially by part-time Medical Practitioners to replace whole-time staff called up for military service.

The following statistical details for the year 1944 are some indication of the work which is undertaken at the Centres:

### 'Corresponding figures for the previous year in brackets)

Number of Infant Welfare	e Cent	res	22	(22)	
" " Medical Week	dy Ses	sions	24	(24)	
Number of Sessions held			1,199	(1,205)	
Total attendances of Mot	hers		60,647	(53,554)	
Total attendances of Child	dren:				
Under one year old		47,298)	64 067	(42,794))	(50 (10)
Under one year old Over one year old		16,769	04,007	(13,625)	(56,419)
First visits of Children:		,		, , ,	
Under one year old		4,460 }	5 207	(3,645))	(4 101)
		747	5,207	(3,645) (456)	(4,101)
Number of Children atter	nding :				
Under one year old		3,999)	0.450	(3,233))	(2 220)
Over one year old		5,453	9,452	(3,233) (4,546)	(7,779)
Number of Sessions at w	hich				
a doctor was present		1,173			(1,173)
Number of children seen	by a				(-,)
doctor		25,475			(23,517)
					, , ,

### The figures show:

- That the number of sessions and the medical staffing have been maintained.
- (2) The total attendance of mothers increased by 7,093, as compared with the figures for the previous year, which was itself a record.
- (3) The total first visits and re-visits show an increase in all age groups.
- (4) The absence of a doctor from only 26 out of the 1,199 sessions held is satisfactory for present-day conditions.
- (5) The average number of children seen by a doctor at each session was 22, as compared with 20 during the previous year.

## Diphtheria Immunisation

Facilities were made available during the year for children attending Infant Welfare Centres to be immunised at the ordinary weekly session. This has proved to be a very great convenience to the mothers and has made a substantial contribution to the success of the immunisation campaign.

#### INFANTS' MILK DEPOT

The work of this Depot at 13 Crescent Street continues unchanged. The depot is also a distributing centre in connection with Vitamin products.

Mrs. Holland, the Assistant, resigned in July and was replaced by Miss Harding.

# PROMOTION OF CLEANLINESS AND GOOD HABITS AND THE ELIMINATION OF VERMINOUS CHILDREN

(Circular 2,831 of Ministry of Health, dated July, 1943)

#### Ascertainment

Since the receipt of this Circular, Health Visitors now include the examination of children's heads as part of their routine work, both in the homes and at clinics.

The Health Visitor's approach is on individual and family lines rather than by the method of collective teaching.

The classification used is that any child who on three or more occasions is found to have vermin or many nits in the hair is considered to be verminous.

It was not anticipated that the number of such children, under 5 years of age, would be large, but to ensure the inclusion of all such children, collaboration is maintained with the School Medical Service Department, who supply particulars of persistently verminous school children so that special attention is paid to any children under 5 years in such families.

The number of children under five years of age known to the Department to be persistently verminous during the year under review was 14 and, in general, they belonged to families where the mother was not unduly concerned about the presence of head lice.

#### The Method of Cleansing

Comparative methods were undertaken by the School Medical Service Department where the problem was of greater magnitude and the recommendation of the School Medical Officer as to the most satisfactory method was adopted for the children under five years of age, viz., mechanical removal of lice and nits by a steel comb.

A stock of steel combs is therefore kept in the Department and combs are available on demand.

No Cleansing Station, as such, has been provided in the area as it has been considered that the onus of cleansing the child should be placed on the parents, but in selected cases where domestic difficulties have been present, the Cleansing Centre established under the Scabies Order has been used for certain verminous children.

#### TREATMENT AT SCHOOL CLINICS

No change except as shown hereunder.

#### Dental Clinic

Details of the work done during the previous year are set out below:

(The corresponding totals for the previous year are shown in brackets)

	Children under 5 year	Adults	Te	otal
Number of cases treated	54	276	330	(338)
Number of attendances	59	1,208	1,267	(1,340)
Extractions—Permanent teeth	_	1,753	1,753	(1,980)
Temporary teeth	77	-	77	(107)
Anaesthetics—Local	41	343	384	(334)
Gas	_	32	32	(29)
Fillings—Permanent teeth	_	111	111	(49)
Temporary teeth	3	_	3	(8)
Scalings	ming-	30	30	(44)
Dentures	-	205	205	(233)
Prosthetic dressings, etc	6	492	498	(542)
Repairs, etc	_	7	7	(8)
Consultations	9	77	86	(117)
Number of sessions held	_	_	145	(141)

## Artificial Sunlight

There were 215 children treated, 117 completed treatment, and 50 children were still under treatment.

#### Results of treatment:

		Good Boys	Results		Inchange	
		Doys	Girls	Boys	Girls	Total
Rickets	**	 23	18	3	-	44
Debility	100	 21	19	2	3	45
Anaemia		 7	5	1	_	13
Various		 4	9	-	2	15
		_	_	_	-	
	Totals	 55	51	6	5	117
		_	_	_	_	

Orthopaedic Clinic. No change.

#### Other School Clinics

There were 170 children under five years of age admitted to the Ear, Nose and Throat Clinic, 184 to the Eyes Clinic, and 219 to the Skins and Minor Ailments Clinic.

#### ASSISTANCE IN NECESSITOUS CASES

A special sub-committee, of which Mrs. Councillor Simpson is Chairman, meets as required to consider applications for help in necessitous cases of mothers or children under five years of age.

The amount and variety of assistance granted may be seen from the following figures:

(The corresponding figures for the previous year	are show	n in bra	ickets)
Number of cases granted dried milk free		1	(28)
Number of cases admitted to the Day Nursery fr or at reduced rates	ree 	2	(2)
Number of cases admitted to the Maternity Hor at reduced rate	me 	_	(—)
Number of cases in which doctors' fees were who or partly remitted	lly	8	(1)
Number of cases in which part or total fees in midwives were allowed	for 	3	(2)
Number of cases in which dental fees were fully partly remitted	or	3	(8)
Number of cases in which Home Help fee we wholly or partly remitted		2	(1)
Number of cases in which no action was taken		4	(3)

Liquid milk is no longer granted by this Sub-Committee since the introduction of the National Milk Scheme during 1940.

#### DAY NURSERIES

The War-Time Day Nursery Scheme was outlined in my report for 1941. H.M. Inspector of Schools recommended the appointment of a college-trained nursery teacher as an Educational Supervisor for the War-Time Day Nurseries, and Miss A. R. Doig was appointed and commenced duties in this capacity on 22nd November, 1943. She resigned in October, 1944, and took up a similar post in Derby on the 1st November.

The Ministry of Health's recommendation concerning the establishment of three additional hutted Nurseries was proceeded with during the year under review, though the Nurseries are not yet completed.

A Nurses' Home, particularly to accommodate staff at these additional hutted Nurseries, was opened during the year at 100 Welford Road, and has proved a great asset to the whole training scheme.

The attendances at each Nursery are detailed below:

Attendances :		Whole	Half	Daily
		Day	Day	Average
St. Martin's		 13,522	1,850	50.7
Glen Street		 12,451	1,643	46,5
Humberstone I	Road	 8,580	1,002	31.6
Fosse Road		 7,749	1,066	29.1
Narborough Ro	oad	 8,014	789	29.0
Fairway		 8,344	1,093	31.2
New Walk		 7,737	850	28.3
Bradgate Street		 8,497	831	30.8
College Street		 8,324	1,014	30.8
Belgrave House		 10,195	1,093	37.2

All existing Nurseries are working to capacity and many have waiting lists which there is no hope of reducing.

The figures fluctuate from time to time owing to temporary absence of the children, particularly when their fathers come home on leave.

In spite of the changes of staff, it has been possible, in general, to maintain a State Registered Nurse and Nursery Trained Nurses and Student Nurses at all the Day Nurseries.

There is a shortage of Nursery Assistants on the educational side and some Nurseries have been without an educational worker for many months. The Educational Supervisor has not been replaced.

#### PRE-NURSING SCHEME

A revised scheme has been arranged through the Health and Education Committees to provide a pre-nursing training for girls, which will usually last two years, in the period between school-leaving age and the age at which they are accepted for general training.

The Course of Training is recognised by the General Nursing Council and enables candidates to take Part I of the Preliminary State Examination before entering Hospital.

The practical work will be undertaken at Day Nurseries during the first year and at Nursery Classes or Schools during the second year. The lectures—comprising courses of special instructions as well as a continuation of general education—will be given at the College of Technology and Commerce.

#### Residential Nursery

It is a matter of great regret and concern to various sections of the Department that, in spite of continued efforts, suitable premises have not yet been secured for the establishment of a Residential Nursery.

#### CHILD LIFE PROTECTION

#### Staff

The work is carried on by one Health Visitor only and it occupied most of her time.

#### Statistical Table

Visits				854	
Applications fo	r registrat	ion		53	
Applications re	fused			3	
Legal proceeding	ngs			-	
Number on reg	gister at 3	1st Dece	mber,		
1944				77 pers	ons (82 children)

The cases in which registration is refused are followed up and alternative provision found for the child without legal proceedings being necessary, though it sometimes means that the child remains for an unduly long time with the foster parent who has been refused registration. Under no circumstances is this permitted if the child is in any immediate danger.



## CIRCULAR 2866 of the MINISTRY OF HEALTH, dated October, 1943.

### The Care of Illegitimate Children

In accordance with the provision of the above Circular, a scheme was prepared in collaboration with the Diocesan Moral Welfare Association and came into operation on 1st April, 1944.

The scheme provides for the services of an existing Moral Welfare Worker to undertake the appropriate duties detailed in the Circular, the Local Authority subsidising the salary of this worker.

Particulars of all illegitimate children known to the Department are supplied to the Social Service Workers with an indication of the type of help, if any, known to be required. Interchange of all relevant information continues as the necessity arises and the closest collaboration exists between the health visitors and the social service worker.

The following are numerical details of the amount of work and the type of assistance given:

Total number of cases referred during 1944 ... 463

Many of these did not require immediate help. The nature of the assistance given in the remaining cases was as follows:

Adoption					- 87.
Affiliation					21
Confinement					58
Legal Aid					8
Lodgings for-	-Exp	ectant mothe	rs		5
	Nur	sing mothers			3
Work for exp	ectant	mothers			4
Foster Homes	3				7
Various					32

It is noteworthy that the amount of material help given—in the matter of approved lodgings and payments to approved foster parents—falls very short of the estimated amount and is in itself a very small part of the work undertaken.

The absence of a Residential Nursery in the area is of great detriment to the work of providing for illegitimate children. The need for finding suitable residential accommodation for such children immediately after the fourteenth day following confinement forces a decision re adoption which might otherwise not be taken if the unmarried mother has opportunity and time to re-establish herself and to resume work without the handicap of the infant for whom she is unable to provide in this interim period.

## Adoption of Children (Regulation) Act, 1939

The Leicester Diocesan Moral Welfare Association continues its work as the only local organisation registered as an Adoption Society under the Act. It ensures continuity of work under Circular 2866 of the Ministry of Health and the closest collaboration exists between the Society and the Maternity and Child Welfare Department. Details of the work of the Society during 1944 are as follows:

Applications from persons wishing to adopt a child	114
Number of children offered to the Society with a view to adoption	81
Number of children taken into hostels under the direct control of the Society	None
Number of children placed by the Society pending adoption in foster homes or hostels not under the direct control of	
the Society	None
Number of children placed with a view to adoption	52
Number of adoption orders made in respect of children placed by the Society	28
Number of children placed for adoption by the Society and awaiting adoption orders at the end of the year	24
Number of children in hostels under the direct control of the Society at the end of the year	None
Number of children at the end of the year in foster homes or hostels in which they had been placed by the Society but	
which are not under the Society's direct control	None

#### Private Adoptions

The Act permits of adoptions being undertaken privately, information to be supplied to the Department seven days prior to reception. In practice, such notifications are rare, there being only three such during 1944. But with wider publicity it is expected that "private" adoptions will become more widely known to the Department so that the services of the Health Visitor will not be lost to these children.

#### STATISTICS

#### Birth Rate

The number of births for 1944 is the highest for many years.

There were 2,696 male births, 2,536 female births, a total of 5,232, giving a birth rate of 20.3 per 1,000 population.

Of the total births, 5,232, 474 were illegitimate (242 males and 232 females), giving an *illegitimate birth rate* of 1.8.

#### Stillbirths

There were 129 stillbirths, 64 males and 65 females.

## Infant Mortality Rate

Number of deaths	in infants	under	1 year	 	204
Corrected number	of births			 	5232
Infant death rate				 * **	39.0

The rates for England and Wales and the Great Towns were 46 and 52 respectively.

The total deaths of infants under one year were 204, 126 males and 78 females.

This gives an infant death rate of 39.0 per 1,000 live births. It is the lowest figure ever recorded for the city, the next lowest being in 1938 when the rate was 46.0.

The main causes of deaths in infants were:

		Males	Females
Pneumonia	 	15	- 15
Diarrhoea	 	16	- 7
Prematurity	 	38	19
Congenital causes	 	37	21
		-	_
		106	62
			_

A special record card for all stillbirths and infant deaths has been in use in the department for several years, though during the war years it has not been possible to make any analysis of the information thus collected.

But, from a survey of these records, it is apparent that there are many factors which have contributed to this record low infant death rate.

The provision made for the supply to expectant mothers of food of the right kind during pregnancy, the priority milk scheme and supplying of vitamins for expectant mothers and young children, should have the effect of reducing the incidence of toxaemias of pregnancies and of maintaining the resistance of infants to certain diseases. Further, economic conditions prevailing in war-time have tended to increase the family income amongst those persons who were often necessitous in pre-war years.

Reference to the figures on page 48 will show that there was a record attendance of expectant mothers at the various ante-natal clinics in the city during the year and it is reasonable to suppose that this vigilant ante-natal supervision, made much more general since the establishment of a municipal midwifery scheme, is reflected in the low infant mortality rate. Further, the continuous care of mother and child by the midwife throughout the 14 days puerperium is a valuable contribution to the preservation of child life. Whenever a mother and child return home from a maternity unit before the fourteenth day, supervision by

the domiciliary midwife is ensured to the end of the puerperium. There is also the closest collaboration in the department concerning any abnormal, weakly, or premature infant. Information is available to the Health Visitor before or at the fourteenth day so that her primary visit is paid promptly and with full knowledge of the facts of the case.

Special attention is given to premature infants in accordance with Circular 20/44 of the Ministry of Health.

Owing to increase of work (e.g., the higher birth rate), and to additional duties, with depleted staff, some reorganisation of the work of health visitors was necessary and it was decided that visits to infants in their first year of life should have priority over visits at a later age. This decision seems to have been justified by the record low infant death rate, the achievement of which is a tribute to all members of the department for their work during the pre-natal, natal and post-natal periods throughout which there has been a general policy of watchful care.

But a perusal of the Infant Mortality Table will show, amongst other things, that more than half the infant deaths, viz., 119 in a total of 204, occurred during the first month of life and that 56 of the 119 neo-natal deaths were due to prematurity so that the need for continued care and extension of facilities during this period of infant life and the pre-natal period are necessary if the satisfactory rate for the year under review is to be maintained.

#### MATERNAL MORTALITY

Number of deaths du	ring the year				5
From puerperal sepsi	is .			3	
From other accidents	s and disease	s of pregn	ancy and		
parturition				2	
				_	
	Total .			5	
				_	
				1944	1943
Rate per 1,000 live a	nd stillbirths			0.93	1.43
Puerperal Sepsis rate				0,56	0,82
Figures for England	and Wales:				
Maternal mortality	rate				1.93
Puerperal sepsis ra	te				0.59

The above figures agree with the Registrar-General and indicate a satisfactory Maternity Mortality Rate.

E. B. BERENICE HUMPHREYS

TABLE 7. City of Leicester.

## INFANT MORTALITY DURING THE YEAR 1944.

Net Deaths from stated Causes at various Ages under 1 year of Age.

Cause of Death.	Under 1 Week	l to 2 Weeks	2 to 3 Weeks	3 to 4 Weeks	Total under 1 Month	1 to 3 Months	3 to 6 Months	6 to 9 Months	9 to 12 Months	Total Deaths under 1 Year
All Causes Certified.	86	14	9	10	119	29	27	20	9	204
Congenital Malformations Birth Injuries Atelectasis Atrophy, Debility and Marasmus Premature Births Diarrhoea, etc Convulsions Icterus Neonatorum Pemphigus Rickets Pink Disease Tuberculous Meningitis Abdominal Tuberculosis Other Tuberculous Diseases	19 8 4 2 48 - 2 1 - - -	4 - - 5 - 1 1 - - -	4	2 - 1 - 3 2 - - 1 - -	29 8 5 5 2 56 2 3 2 1 —	4 — — — — — — — — — — — — — — — — — — —	1 - 9 1 - - - -	- - - 6 - - - 2 - -		34 8 6 3 59 23 5 2 1 2 —
Meningitis. (Not Tuberculous)			1 3 - 1 - -		- 1 4 1 - 1 - - - 4	1 7 1 — — — 3 3	- 1 8 - - - - - 3 3	2  6     4	1 1 5 - - - - - 1	3 4 30 -2 - 1 - 6 15

Net Births in the Year (legitimate, 4,758. illegitimate, 474.

Net Deaths in the Year of | legitimate infants, 170, illegitimate infants, 34.

## Report of the City Analyst

For the Year 1944.

By F. C. BULLOCK, B.Sc., F.R.I.C., P.A.Inst.W.E., Public Analyst and Official Agricultural Analyst

#### FOREWORD BY THE MEDICAL OFFICER OF HEALTH

In his opening remarks, Mr. Bullock refers to the physical difficulties under which his department is labouring and states that his laboratory is an important link in the chain of public health measures.

Both these statements are true. With the coming of peace, the question of a new Health Department must again be considered, and considered as a matter of urgency. Practically every member of the staff is working under conditions that are inimical to health and to good work. The laboratory is no exception to this generalisation.

That the second statement is also true will be obvious to anyone reading through the Analyst's report with an imaginative eye.

The analytical control of the quality of our milk supply, of innumerable articles of food and drink, and even of "the bottle of medicine," plays no small part in promoting the health of the citizens.

## Report of the City Analyst

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#### Staff

There were no staff changes during the year to be recorded. Mr. J. V. Smart passed the examination for the Associateship of the Royal Institute of Chemistry, and towards the end of the year gave notice to leave, having obtained a more remunerative post in industry. The Committee approved the principle of a whole-time clerk being included on the staff of the Department, but no appointment was made during the year.

#### Accommodation

The present premises now functioning as the City Laboratory have been in use nearly twenty years. During that period, Analytical Chemistry has progressed considerably and many processes which are now a daily routine were quite unheard of much less than twenty years ago. Food legislation has advanced much during the war years, and it is unlikely that the scope for further improvement and development which remains will be neglected in the post-war years. The few retrograde steps which have been unavoidable under war conditions, e.g., relaxation of Preservative Regulations and provision of maximum standards for valuable ingredients in foodstuffs will, we hope, be speedily rescinded. With the schemes for social improvement pending, it is evident that an all-round higher standard of life is contemplated, in which, from every angle, emphasis will be placed on prevention rather than cure in dealing with matters of Public Health.

In playing some part in ensuring to the local community, pure, wholesome food, safe water to drink, safe swimming bath water and a clean atmosphere, thereby preventing a good deal of ill-health, the Public Analyst's laboratory is an important link in the chain of public health measures.

The Committee have appreciated for some time that we are working in obsolete premises, and having to do the best possible under difficult circumstances; but I feel it my duty to report now that the need for improvement is becoming urgent.

Current Food Legislation is increasing the volume and intricacy of the work to be carried out by Public Analysts, and it will shortly be necessary for us to do work which requires conditions unachievable in our present accommodation. I hope, when the change is made, no half-measures will be contemplated, but a laboratory worthy of the City will be established.

#### Legal

The year 1944 produced more war-time S. R. & O.'s controlling the composition of foodstuffs than any previous year.

As from January 1st, 1944, Section 6 of the Foods and Drugs Act, so far as it relates to food, was replaced by the Defence (Sale of Food) Regulations, 1943. Also by these Regulations the Minister of Food was given power to prescribe standards controlling the composition of any description of food. The object of these standards is to ensure that the purchaser is obtaining a product of the standard he expects to receive. Accordingly, the following S. R. & O.'s have been issued:

- No. 44. Self-raising flour to contain not less than 0.45% available carbon dioxide and not more than 0.65% total carbon dioxide.
  - No. 45. Shredded suet to consist of not less than 83% of fat.
- No. 46. Baking powder to contain not less than 8% available carbon dioxide and not more than 1.5% residual carbon dioxide.
- No. 275. Mustard is to contain not less than 0.35% of mustard oil and not more than 20% amylaceous flours and spices.

Other Orders controlling the composition and sale of foods are as follow:

- No. 1. National Flour to be flour of 85% extraction. This figure was later amended by No. 1088 to  $82\frac{1}{2}\%$  and then by No. 1436 to 80%. (Before the war the extraction was 70% to 72%.)
- No. 69. Saccharin tablets are to contain 0.18 to 0.22 grain of saccharin and sweetening tablets must contain 0.081 to 0.099 grain of saccharin and 0.054 to 0.066 grain of dulcin.
- No. 136. Flour confectionery which is retailed at more than 8d. per lb. must contain not less than 14% of fat. For uncooked pastry the minimum fat content is fixed at 25%.

No. 763. The meat content of pork sausage and pork sausage meat is increased from  $37\frac{1}{2}\%$  to 50%, beef sausage still containing  $37\frac{1}{2}\%$  of meat. The soya content of beef and pork sausages and pork sausage meat was fixed at  $7\frac{1}{2}\%$  but was later reduced, in the case of pork sausage and pork sausage meat, to 5% by No. 888. The meat content of meat pastes is standardised at 55% and the fish content of fish pastes is increased to 70%. Meat roll or galantine is to contain 30% to 45% of meat.

No. 842. Mincemeat and fruit curds have been brought within the scope of the Preserves Order, the percentage of soluble solids not to be less than 65%.

No. 1280. The 1942 Order, prohibiting the manufacture and sale of ice cream, has been revoked, allowing this product again to appear on the market.

No. 1778. The minimum fish content of fish cakes has been increased from 25% to 35% and the minimum weight of the cakes has also been increased from  $2\frac{1}{2}$  ozs. to  $2\frac{3}{4}$  ozs.

At the time of writing (April, 1945) a number of amendments of some of the above and other Orders are already in force modifying the composition of various foods, including pork sausage, mustard and coffee mixtures.

#### Milk

Milk has always been regarded as the most important single article of food by doctors and intelligent mothers; and their empirical conclusions have been amply confirmed by the work of nutritionists over the last thirty years. The chemical, physical and biological properties of milk combine to make it unique as a food, a proud position which is unlikely to be challenged ever, even by the versatile soya bean. Tacit recognition of this fact was made by the Ministry of Food in 1941 when, in giving its blessing to a number of substitutes for certain foods (as we hope a purely stop-gap measure during the war), it refused to consider any possible combination of the usual stock-in-trade of food substitute manufacturers—starch, gum, salt, bicarbonate of soda and, of course, water and colouring matter, as suitable for sale to the general public as a milk substitute.

In parenthesis, it will be disconcerting to many people to read to-day (12th April, 1945) of the "lamentable admission" made in a debate on milk in the House of Lords of the unsatisfactory state of the British Milk Industry, and the low average consumption—stale news, of course, to those in touch with the subject.

Milk has always, likewise, been regarded as the most important single article of food by those administering the Food and Drugs Act, but from a different angle, namely, the almost unbelievable variety of accidental circumstances by which extraneous water can gain access to milk.

Table C, in which are set out the milk samples reported against in 1944, confirms a trend which has been observed for some years now and referred to in previous reports, namely, that instances of gross watering detected by analysts become fewer. This may or may not represent the actual state of affairs; but what certainly is true is that a detectable amount of added water in a small individual supply becomes obscured if it is bulked with other supplies of genuine milk; and as the majority of milk sold to-day is bulked, it is possible that a considerable amount of water becomes so spread out that it goes unreported. Public analysts have practically no option but to give the benefit of the doubt to certain samples of milk over which they are not perfectly happy.

Valuable as the Hortvet freezing point test is in confirming indisputably the presence of water in many samples and, on the other hand, in exonerating many genuine samples of milk of abnormally low composition, there unfortunately remains one type of sample where the test remains inconclusive. This is the case of the genuine milk, whatever its S.n.F. content, which originally had a freezing point depression of 0.540° C. or more, and to which a small amount of water has been added, say, not more than 2% so that the freezing point depression of the final sample is not appreciably less than 0.530° C.

As this latter figure is possible though unusual for genuine milk, the Public Analyst would have to certify such a watered sample as genuine, unless he had confirmatory evidence, for example, reaction for nitrates, of the presence of added water.

Towards the end of the year a good many milk samples of "border line" composition were found with freezing points in this vague region, round about —0.530° C.

Whether, contrary to classical theory, several years of war-time feeding are beginning to have an effect on the composition of the milk rather than on the yield, or whether scientific watering, using the freezing point test as a control measure is being practised, it is impossible to say. It is conceivable that if the cumulative effect of several years of makeshift feeding is now influencing the composition of milk, it may also slightly affect the average freezing point.

It is, moreover, somewhat startling to realise that of the 2,000,000,000 gallons of milk which ought to be sold in this country annually, a good

1%, or 20,000,000 gallons, could be added water without anyone running much danger of being brought to book.

From the point of view of the consumer, rich milk, slightly watered, can very well be a better article than undiluted milk of poor quality. There is a considerable body of opinion which recognises this and considers that the time is ripe for fixing an absolute standard of chemical composition for milk. At present any liquid resembling milk, whatever its composition, if it can be proved in court to be "the actual product of the cow" must be passed as genuine (Hunt v. Richardson 1916.)

Probably our most useful work in connection with milk at the present time is the application of the Phosphatase Test to daily samples of milk from all treatment plants in the City.

Whatever one thinks about the merits or demerits of pasteurised milk as against raw milk; there is little doubt that inefficiently pasteurised milk is a more dangerous article than the original milk before treatment, if the latter carried any danger; and such a milk would be treacherous to anyone consuming it believing it to be in fact pasteurised milk.

Table L needs little comment. It shows that of 1,655 samples tested, all but 20, or 98.6% were satisfactorily pasteurised.

Table E sets out the results of the bacteriological examination of milk samples. While the general quality, compared with previous years, was fairly well maintained, the failure of about 25% of the samples of T.T. milk and Accredited Milk to satisfy the legal standards as regards the absence of coliform organisms indicates the difficulty of producing raw milk free from that form of contamination.

The problem of the dirty milk bottle has been referred to in previous reports. A glaring instance of the misuse of milk bottles occurred during 1944 and the defendant was convicted and fined £10.

#### FOODS

#### Sausage

Several cases of meat deficiency occurred during the year. These were dealt with by giving a warning to the maker at a personal interview. The explanation usually boiled down to the facts of unskilled labour and faulty arithmetic in working out the proportions of the various ingredients.

Some manufacturers showed an inclination to omit the low fat soya grit from their recipes because their customers could not acquire a liking for the flavour of the soya meal. These manufacturers, however, were advised to adhere to the regulations in force at any time. In one instance, 0.04% boric acid was found present in a sample of beef sausage (No. 1554). An investigation of the ingredients showed that the boric acid was introduced by bacon, added as part of the meat content. As borax is permissible in bacon, and as a certain proportion of pork may rank as beef in sausage manufacture, no action was taken.

A sample of meat paste, No. 1099, also gave reaction for boric acid and the amount found present was 0.012%. In correspondence, the manufacturer gave a complete list of the various meats and offals that were supplied to him for incorporating into his meat paste, and there seemed sufficient grounds for a trace of boric acid to be present through one or another of these ingredients.

#### Gelatine

Some comments were made on this commodity in the 1943 Report. What we consider a bad instance of industrial glue flavoured and sold as edible gelatine was made the subject of prosecution, but no conviction was obtained (Nos. 2390 and 2391). The low setting power of much gelatine now on the market seems to be covered by the vendors giving instructions that 1 oz. should be used to make 1 pint of jelly. This amounts to a 5% solution, which makes the B.P. specification of 2% look stringent. There are, however, samples of gelatine on the market which give quite a good jelly of 2% strength. It would be unreasonable to enforce the standards of the B.P. for gelatine used in drug manufacture to apply to ordinary gelatine for general edible purposes.

#### Jam

A number of samples of jam (Blackcurrant Jam No. 1059, Raspberry Jam No. 1560, Raspberry Jam No. 1591) were reported low in fruit content. Some brands bear a label stating that the fruit content of the jam is limited in accordance with official recommendations. We can find no legal basis for this practice. There are difficulties in enforcing proceedings over jams low in fruit content, as the maker is inclined to blame the quality of the pulp, and this is all supplied by the Ministry of Food, who is the appropriate authority to enforce the regulations governing the quality of jam. At the present time, therefore, it does not seem easy to give the public full protection in the matter of low quality jam as the above state of affairs is conducive to the development of almost impenetrable "pockets of resistance."

#### DRUGS

A sample of Phenacetin and Caffeine Tablets, No. 846, was deficient of 18% of phenacetin. Follow-up samples were satisfactory.

A sample of Tincture of Iodine, No. 850, was deficient of 9.2% of iodine, but contained 25% excess potassium iodide. There seems a tendency with tincture of iodine, when stored for a period in rubber-stoppered bottles, for the iodine to change from the free to the combined form. In such samples there is no question of fraud and it is doubtful if the purchaser is very much prejudiced.

Two samples of Cod Liver Oil and Malt, Nos. 1604 and 1538, both contained about 50% excess of cod liver oil. Similar instances have occurred in the past and seem to arise from the mistake on the part of the manufacturer in calculating the cod liver oil as 15% by weight instead of 15% by volume. The very different densities of the oil and the malt extract account for the big difference in final composition, according to which method of calculation is adopted. As the oil is more expensive than the extract, it is to the makers' pecuniary advantage to use the right method of calculation.

A sample of prescribed medicine, No. 1162, was deficient of 79% of the required amount of alcohol. The sample was prescribed to contain 30 minims of Spiritus Aetheris per dose. The dispenser had noted in the Shortage of Drugs Order (S. R. & O., 1942, No. 709) that it was permissible to use certain concentrated preparations in place of certain official spirits or tinctures used in prescriptions, with the object of saving alcohol. He had noted in particular that the above Order included permission to replace Spiritus Aetheris Nitrosi by a similar product consisting of a concentrated solution in alcohol, diluted with seven volumes of water and had erroneously thought that this permission also included for the replacement of Spiritus Aetheris. This, however, was not provided for by the above Order, and the pharmacist was cautioned.

#### Sweet Spirit of Nitre

This drug has always given difficulty in the past owing to its comparative instability, but war-time modifications have proved rather worse in this respect. Where a sample has been labelled "War-time Formula," a broad-minded view has been taken of slight deficiencies of ethyl nitrite. The unsatisfactory nature of the war-time substitute caused definite worry to conscientious pharmacists, and a note was sent to the Health Committee, of which the following is an extract:

"Under the Shortage of Drugs Order (S. R. & O., 1942, No. 709) it is permitted to use alternatives to certain B.P. preparations when the

latter are asked for. In particular, when Spiritus Aetheris Nitrosi (sweet spirit of nitre) is asked for, a preparation can be supplied consisting of Liquor Aethylis Nitritis Concentratus (B.P. 5th supplement), one part diluted with seven parts of water. This article has a much lower alcohol content than sweet spirit of nitre B.P. and is correspondingly less stable.

"It is well recognised (Q.J.P., Vol. XVII, No. B.P. 177) that a loss of ethyl nitrite amounting to about 50% of the total occurs actually at the time of dilution. We have confirmed this by our own experiments. It is, therefore, impossible for the present war-time substitute for sweet spirit of nitre to comply with the principal requirements of the B.P. specification.

"It would be well to refrain from taking official samples of this commodity for the time being."

Special mention, however, must be made of Sample No. 1570 where a pharmacist considered he was fortunate in having in stock a little of the pre-war official article. This he was keeping for special customers, but owing to the age of the material these favoured clients were coming off rather worse, if possible, than those getting the war-time modification. The sample we got of this particular specimen was deficient of 71% of the required amount of ethyl nitrite.

## Samples Submitted by the Public

A total of 23 samples were submitted privately by members of the public. Three of them were poor quality wines for which too high a price had been paid. There is no price control of these luxuries when the wording on the label is sufficiently guarded.

A local club submitted a sample of spirits with regard to which they had had complaints from members. The sample contained 30% added water, and the slightly turbid appearance which gave the original clue for the complaint was the usual appearance which arises when spirits are diluted with average tap water.

(Scientific watering of spirits should always be carried out with distilled water!)

Following up this one sample, the total stock from the club was examined, amounting to 14 bottles of spirits. In every case, there were signs that the seals of the bottles had been tampered with and every bottle had, in fact, had about one-third of the spirits withdrawn from it, which had been replaced by water. In some bottles, the water and spirit still formed two layers in the bottle when the sample was received; furnishing very good evidence that the adulteration had been carried out in the bottle.

## Fertilisers and Feeding Stuffs Act

The samples examined under this Act are set out in Table G. Vendors encountered the usual pitfalls over making the required statutory statements, but only one sample was reported defective in composition.

This was a sample of sulphate of ammonia, which was sold as neutral, but actually contained 0.28% sulphuric acid.

### Swimming Bath Waters

Table F summarises the results of swimming bath waters examined during the year. The difficulties of swimming bath engineers in accommodating the chlorine dose to the bathing load are appreciated, and it is a matter of luck when the sample is taken whether the attendant has just admitted a big class of schoolchildren or whether he has built up a good residual of chlorine in anticipation of a party of R.A.F. personnel coming in for dinghy practice.

I think the main point to make now is that those responsible at the various local swimming establishments, both privately-owned and those belonging to the Corporation, are alive to the need for keeping the water in a safe condition, and for co-operating with us to the best of their ability.

## Drinking Water

All samples of drinking water representing that in actual supply to the public were passed as satisfactory and safe for drinking purposes.

I have much pleasure, once again, in referring to the loyal co-operation and support received from my staff throughout the year.

F. C. BULLOCK,
B.Sc., F.R.I.C., P.A.Inst.W.E.,
Public Analyst and Official Agricultural Analyst

## TABLE A.

Summary of Samples Analysed during	1944.	
Food and Drugs Act, 1938 :		
Samples submitted by Sanitary Inspectors	592	
,, ,, The Public	23	
Shellfish (Bacteriological Samples)	27	
Artificial Cream (Bacteriological Samples)	3	
	-	CIF
Total		645
Bacteriological Milk samples examined for		
chemical composition		430
Chemical composition		
Eastilland and Easting Stuffe Act 1926 :		
Fertilisers and Feeding Stuffs Act, 1926:		14
Samples submitted by Sanitary Inspectors		14
Rag Flock Act, 1911		6
Milk (Special Designations) Order, 1936		753
Milk (Phosphatase Test)		1,372
Reference Samples		18
Atmospheric Pollution Samples		44
Civil Defence Samples		7
Miscellaneous Samples from other sources	:	
Health Department	157	
Water Department	465	
Miscellaneous	115	
T - 1		737
Total		131
Grand Total		4,026

## TABLE B

## FOODS AND DRUGS ANALYSED DURING 1944

(Sampled by Sanitary Inspectors under the Food and Drugs Act)

## Foods Analysed.

Sample		No.	Sample		No
Milk		 219	Honey Grains		
Arrowroot		 1	Honey		
Baking Powder		 6	Junket Powder		
Beer		 3	Lard		
Bread		 3	Lemon Substitute		
Bread Crumbs		 1	Lemons		
Butter		 10	Malt Vinegar		
Cakes		 1	Margarine	<	
Cake Flour		 5	Meat Paste		
Celery Salt		 1	Mincemeat		
Cheese		 5	Mixed Spice		
Christmas Pudding	S	 4	Mustard		
Cocoa		 4	Mustard (Prepared)		
Coffee		 4	Oranges		
Coffee and Chicory		 6	Pepper		 1
Coffee and Chicory	Essence	 2	Pimento		
Cooking Fat		 1	Preserves		 3
Cordials		 4	Pudding Mixture		 - 9
Currie Powder		 4	Rice		
Custard Powder		 2	Salad Spread		
Dessert Powder		 1	Sausage		2
gg Substitute Pow	der	 1	Self-Raising Flour		
lour		 5	Semolina		
Gelatine		 11	Sova Flour		
Ginger		 4	Spirits		
Ground Almonds		 1	Sugar		
Ground Almond St	ibstitute	 1	Sugar and Honey		
Ground Aniseed		 1	Tea		
Ground Cinnamon		 2	270		
Ground Nutmeg		 2			-
Gravy Powder		 2	Total		46

## Drugs Analysed.

Ammoniated Tinctu	re of			Liquorice Powder	3
Quinine			1	Malt and Cod Liver Oil	4
Aspirin Tablets			8	Milk of Magnesia	1
Aspirin, Phenacetin	and Ca	affeine		Paregoric	3
Tablets			2	Phenacetin and Caffeine Tablets	
Basilicon Ointment			3	Prescriptions	7
Bicarbonate of Soda			8	Seidlitz Powders	3
Bismuth Tablets			3	Sweet Spirit of Nitre	2
n . o.			6	Sweet Spirit of Nitre Substitute	1
Borax .:			3	Tincture of Iodine	13
Cascara Sagrada			3	White Precipitate Ointment	3
Castor Oil			6	Yeast Tablets	1
Camphorated Oil			8	Zinc and Castor Oil Cream	2
Cod Liver Oil			4	Zinc Ointment	2 3
D 0.1			8	Zine Ommene	
D 1			2	Total Drugs	129
Glauber's Salts			8	Total Foods	463
Glycerin			3	Total Loods	100
Glycerin Substitute		- ::	5	Total Foods and Drugs	592

TABLE C. Milk Samples reported "Not Genuine"

Action taken	Cautioned by M.O.H.  """"  """"  Formal sample taken  Caution	Repeat sample taken Cautioned by M.O.H.
Nature of Offence	2.3% deficient in solids-not-fat 6% " fat 3% " " 3% " " 10% " " 6% " " " 30.6% added water Incorrectly pasteurised or contained raw milk	2.8% added water 2.6% deficient in solids-not-fat
Formal or Informal	Formal Informal "" "" Formal	2 2
Article	Pasteurised Milk T.T. (Certified) Milk Accredited Milk Pasteurised Milk Tuberculin Tested Milk T.T. (Certified) Milk Accredited Milk Accredited Milk Pasteurised Milk	Milk
Sample No.	2322 644 674 153 171 190 501 564 570 P.1026 1138	1544

TABLE D. Samples other than Milk reported "Not Genuine"

Action taken		Formal sample taken "," Informed wholesaler	Formal samples taken. See Nos. 2390 and 2391 Prosecution	Formal sample "Genuine"
Nature of Offence	Contained 164 p.p.m. sulphur dioxide—undeclared Contained 95 p.p.m. sulphur dioxide—undeclared Contained 61 p.p.m. sulphur dioxide—undeclared	27% deficient in meat  No preservative  Contained 100 p.p.m. lead  70 " 17% deficient in coffee	Offensive smell Offensive smell Offensive smell Offensive smell Offensive smell Infested with mites	Poor setting power 54% deficient in citric acid Mouldy
Formal, Informal or Private	Informal ",	", " Formal Informal	Formal " Informal	". Private
Article	Pork Sausage	Preserved Pork Sausage Pepper Coffee with Chicory Gelatine (Lemon flavour)	", (Orange flavour) ", (Lemon flavour) Dessert Powder Gelatine	Lemon Barley Coffee and Chicory Essence
Sample No.	2392	2396 2308 2326 2338 2331	2372 2390 2391 2369 2397	2399 809 H458

TABLE D-continued

Action taken	Prosecution, £10 fine  Wrote to vendor  Wrote to vendor  Formal sample taken  Wrote to manufacturer  Repeat sample taken, No. 1538  Wrote to vendor  """"  """"  """"  """"  """  """  "	
Nature of Offence	Used for improper purpose Excess preservative 23% deficient in fruit Infested with vinegar eels 18% deficient in phenacetin 20% deficient in caffeine 9.2% deficient in iodine 25% excess potassium iodide Gum substitute 68% deficient in available carbon dioxide Contained 45 p.p.m. copper Contained 41 p.p.m. copper Contained 41 p.p.m. copper 46% excess cod liver oil 52.7% Labelling offence Contaminated by dirt	
Formal, Informal or Private	Private Informal "" "" Formal Informal Informal Private "	
Article	Milk Bottle Blackberry Jam Blackcurrant Jam Malt Vinegar Phenacetin and Caffeine Tablets Tincture of Iodine Glycerine Substitute Baking Powder Cocoa Camphorated Oil Camphorated Oil Milk Bottle (T.T. Pasteurised Milk Bottle (T.T. Pasteurised Milk)	ISCU JATHE)
Sample No.	H447 1034 1059 1076 846 850 850 1128 1128 1128 1604 1538 1613 S17 S18	

TABLE D.—continued.

Action taken	Wrote to vender	Formal sample taken Wrote to vendor Cautioned by M.O.H	Stock destroyed Wrote to vendor	Stock confiscated	Formal sample taken, No. 1591 Investigated ingredients	Formal sample taken, No. 891 Cautioned by M.O.H.	Formal sample taken, No. 1599	Wrote to vendor
Nature of Offence	Labelling offence Infringed Pharmacy and Medicines Act, 1941	Consisted of flour and soya flour " " " 31% deficient in meat	Contaminated by creosote 9% deficient in iodine 22% excess potassium iodide	Failed to reach standard of clean- liness	21% deficient in fruit 36% " Contained 0.04% boric acid	79% deficient in alcohol	Mislabelled Misleading label and deficient in ingredients	71% deficient in ethyl nitrite Fermented by yeast
Formal, Informal or Private	Informal "	Formal ",	Private Informal	£	Formal	Informal Formal	Informal Formal	Informal Private
Article	Basilicon Ointment Bismuth Tablets	Pork Sausage	Coffee Berries Tincture of Iodine	Mussels	Beef Sausage	Prescribed Medicine Pork Sausage	Glycerine Syrup Substitute Artificial Glycerine	Sweet Spirit of Nitre
Sample No.	1638	1683	H149 1153	942	1591	1162 891 1558	1599	1570 S23

TABLE E.

Results of Bacteriological Examinations of Milk, 1944

									 _	
ory	1944	93.6	64.9	9.76	63.1	95.4	89.1	50.0		83.8
% satisfactory	1943	93.3	1	88.8	8.77	6.68	94.2	1		87.8
%	1942	0.16	1	0.001	65.4	83.9	83.9	1		81.0
D Coli to	numerous	4	35	1	32		1	1		17
Total	too high	1	1	-	-	14	8	-		24
No. which	Blue Test	1	26	1	31	-	-	1		57
Passed as		59	. 87	40	77	289	65	-		. 819
Total No	examined	63	134	41	122	303	73	2		738
Grade		Tuberculin Tested (Certified)	Tuberculin Tested	Tuberculin Tested (Pasteurised)	Accredited	Pasteurised	School Milk (Pasteurised)	Sterilised		Total

TABLE F. Swimming Bath Waters Examined during 1944.

			No.	Unsatis	sfactory	% passed
Bath		No. exam- ined	having satis- factory bacteri- ological quality	Total organ- isms too numer- ous	B. Coli too num- erous	as bac- teriolo-
Vestry Street	 	23	19	4	_	82,6
Aylestone	 	7	7	-	-	100.0
Total (Corporation Baths)	 	30	26	4	_	86.7
Kenwood Pool	 	6	5		1	83.4
Humberstone Lido	 	6	5	1		83.4
Wyggeston School	 	1	1	_	+	100.0
Total (all Baths)	 	43	37	5	1	86.1

TABLE G. Fertilisers and Feeding Stuffs Analysed under the Fertilisers and Feeding Stuffs Act during 1944

			Num	ber Unsatisf	factory
Sample	Number Examined	Number Satisfactory	Compo- sition Incorrect	Statutory Declara- tion Defective	Total Un- satisfactory
Sulphate of Ammonia	2	- 1	1		1
Superphosphate of					1
Lime	1	1	_	_	
Bone Meal	1	1	_	_	
General Fertiliser	1	1	_	_	_
Nitro-Chalk	1	1	_	_	_
Unrationed Poultry					4.1
Meal	1	_		1	1
Poultry Balancer Meal	3		_	3	3
Rabbit Food	2	2		_	_
Bran	1		_	1	1
Pig Meal	1	1	_	-	-
Total	14	8	1	5	6

TABLE J. Samples submitted by Members of the Public

Article		No.		Article		No.
British Sherry	 	1	Pickles		 	1
Gin	 	1	Spirits		 	14
Ground Almonds	 	1	Wines		 	2
Milk	 	1			***	_
Milk Bottles	 	2		Total		- 23

TABLE H. Miscellaneous Sample	es examined for various Committees					
Health Department	City Farms					
Sulphur Cylinders 33	Milk (Chemical) 2					
Rain Waters 11	2					
44	City Mental Hospital					
Waters—Chemical:	Flour 2					
Brook Waters 48	2					
City Supply 5	City Surveyor					
Well Water 2	Flue Dust 1					
55	1					
Waters—Bacteriological:	Education Department					
Brook Waters 14	Potatoes 1					
City Supply 7	1					
—— 21	H.M. Prison					
Bath Waters 43	Oatmeal 1					
Milks (Human) 14	1					
" (Phosphatase) 1372	Civil Defence Authorities					
" (Dried) 9	Glass Capsule 1					
" (Bacteriological) 9	"Neonite" 1					
" (Chemical) 1	Nitro Wood Pulp 1					
Milk Bottle 1	Anti-gas Ointment 2					
Air 3	Dead Mouse 1					
Acetic Acid 1	Decontaminating Fluid 1					
Coffee Berries 1	7					
Coffee and Chicory Extract 1	Water Department					
Derris Dust 1	Water (Chemical) 266					
Dried Peas 1	" (Bacteriological) 125					
Tinned Meat 1	,, (Biological) 53					
Orange Juice—Concentrate 1	Indicator Fluid 2					
Sweets 2	Tap Washers 2					
Tonic Tablets 1	Deposit 1					
	Solder 1					
1582	Metal from Water Main 1					
Cleansing Department	Sand 14					
Feeding Stuff 1	465					
Kitchen Waste 3						
4	Total 2065					

TABLE I. Miscellaneous Samples examined from other sources

Article	No.	Article		No.
Milk (Pasteurised)	 4	Malt and Cod Liver	Oil	1
Milk (Bacteriological)	 3	Mari Isama		4
Milk (Chemical)	 2	Paint		1
Water (Bacteriological)	 18	Pork		1
Water (Chemical)	 29	Preservative .		2
Bacon Fat	 1	. Rag Flock		1
Cod Liver Oil	 1	District Dis		1
Concentrated Fruit Juice	 7	C		2
Cordials	 12	Calf Daising Plans		5
Derris Dust	 2	0 0 1 3		1
Flux	 1	Caralita - Caralita		5
Fruit Concentrate	 1	C.		1
Gelatine	 2			
Halibut Liver Oil	 1	Total .		104

TABLE L.

Samples of Milk examined by the Phosphatase Test, 1944.

	1		_						1
1941	94.0	94.3	94.6	97.5	98.4	1		6.96	94.7
1942	98.4	100.0	98.3	6.86	92.2	100.0		0.001	8.96
1943	95.6	100.0	9.66	99.5	97.5	9.66		97.2	98.3
Satisfactory 1944	96.0	0.001	100.0	100.0	99.5	97.6		0.66	98.6
Units, Efficiently Pasteurised	240	231	246	207	190	241		280	1635
Examined	250	231	246	207	191	247		283	1655
Dairy .	:	: : .	:				fiscellaneous (mainly	Bacteriological)	lotal
	Examined Units, Efficiently Satisfactory 1944 1942	Examined Units, Efficiently Satisfactory 1944 1943 1942  250 240 96.0 95.6 98.4	Examined Units, Efficiently Satisfactory 1943 1942  Pasteurised 1944 1943 1942  250 240 96.0 96.6 98.4  231 231 100.0 100.0 100.0	Examined Units, Efficiently Satisfactory 1943 1942  250 240 96.0 95.6 98.4  231 231 100.0 100.0 99.6 98.3  246 100.0 99.6 98.3	Examined Units, Efficiently Satisfactory 1943 1942  250 240 96.0 95.6 98.4  231 231 100.0 100.0 100.0  246 246 100.0 99.6 98.3  207 207 100.0 99.5 98.9	Examined Units, Efficiently Satisfactory Pasteurised 1944 1943 1942  250 240 96.0 95.6 98.4  231 231 100.0 100.0 100.0  246 246 100.0 99.6 98.3  207 207 100.0 99.5 98.9  99.5 97.5 92.2	Examined Units, Efficiently Satisfactory Pasteurised 1944 1943 1942  250 240 96.0 95.6 98.4  246 246 100.0 99.6 98.3  207 207 100.0 99.5 98.9  191 190 99.5 97.5 92.2  247 241 97.6 99.6 100.0	Examined Units, Efficiently Satisfactory 1944 1943 1942  Pasteurised 1944 1943 1942  1944 1943 1942  1944 1943 1942  1944 1943 1942  1945 96.0 96.0 98.4 100.0 100	Examined Units, Efficiently Satisfactory Pasteurised 1944 1943 1942  1. 250 240 96.0 95.6 98.4  231 231 100.0 99.6 98.3  240 240 96.0 99.6 98.3  240 99.5 99.5 92.2  241 99.5 99.6 100.0  39.6 100.0  39.7 99.6 100.0

## TABLE K

Summary of Samples exam	nined by	Bacterio	ological	Methods	in	1944
Milk						680
Pasteurised Milk supplied to Sc	hools					73
Artificial Cream						3
Reservoir and other Waters (for	Water C	ommittee)	)			125
Waters (for Health Committee)						21
Miscellaneous Waters						18
Swimming Bath Waters						43
Shellfish (for Health Committee	e)					27
Tot	al					990

TABLE M.

B. Coli Content of Reservoir Water, 1944

3 9 - 2 2 4	0 11—25 th	ore an 5
2 4	2	
2 4	2	
2 4	2	-
2 4	2	-
2 4	2	-
		-
3 Jane		
2 9	2 -	-
		-
-		

## Report on the Sanitary Inspection Department

for the year 1944.

By

F. G. McHUGH, F.R.San.I., F.S.I.A., Chief Sanitary Inspector.

#### Staff

Mr. T. W. Beresford, Sanitary Inspector, returned to duty 1-3-44, after discharge from the Royal Air Force on grounds of ill-health.

#### SYNOPSIS OF SANITARY INSPECTION WORK.

An "inspection" is the first visit paid to premises.

A "re-inspection" is a visit made after notice has been given for the remedying of a defect.

, 0				m .
	in		Re-inspection	s Total
Re Accumulat ons		131	_	131
Air Raid Shelters		301	_	301
Agricultural Produce (Grading	and			
Marking) Act		42	_	42
Re Animals, Poultry, Swine, etc.		133	_	133
Ashpits and Ashbins		430	_	430
Bakehouses—Factory		63	_	63
Non-Factory		60		60
Canal Boats		_	_	
Cesspools		12	_	12
Closets-Water		872	202	1074
Privies		18		
Pails		30	_	30
Cold Stores		23	_	23
Common Lodging Houses—Day		65	_	65
Night		3	_	3
Complaints Received		2771	2179	4950
Complaints Confirmed		2281		12204
Cowsheds		154	3020	154
Dairies and Milkshops		306		306
	**	31		31
Dangerous Structures		659		659
Drains Inspected—Smoke Tests		26		26
Chemical Tests				100
Colour Tests		128	0151	128
Drains Inspected		1639	2171	3810
Ditches and Watercourses		156	-	156
Entertainment Houses		38	-	38
Factories		201	-	201
Fish Frying Premises		87	_	87
Food Manufacturing Premises		384		384
Carried forward	1	11026	14475 2	5501

	Las		Do to cont	
Brought forward	Ins	11026	Re-inspection 14475	ons. I otal. 25501
Food Warehouses		867	_	867
Houses re Contagious Disease		2590	_	2590
Contagious Disease Cont		380	_	380
Disinfection		188		188
Overcrowding		44	_	44
Vermin		526	_	526
Housing Acts—Houses		104	1906	2010
Other Buildings		11		11
Housing Acts (Slum Clearance):				- 255
Section 25—Houses		29	102	131
Other Buildings				
Section 11—Houses			_	22
Special Visits			_	55
Houses Let in Lodgings—Day		40	100	40
Hotel and Restaurant Kitchens		142		142
Ice Cream Premises		10		
Location of Retail Businesses Or		10		10
	100	040		0.10
		249	-	249
Markets—Retail Meat		366	_	366
Fish and Fruit		510	-	510
Wholesale Fish and Fruit		552		552
Wholesale Meat		-	-	
Wholesale Tripe		-		-
Meeting with Owner or Tradesman		3703		3703
Merchandise Marks Act		228		228
Offensive Trade Premises		43	_	43
Piggeries		26		26
Shops—Meat		612	-	612
Fish		81		81
Fruit		32		32
Other Food Shops		784	-	
Shops Acts		731		784
Slaughterhouses—Corporation			100	831
Private		907	_	
0-11-		207		207
Construction Observation	**	16	_	16
Smoke Observations		11	_	11
Special Visits re Smoke		48		48
Special Visits Sewers, etc		3026	_	3026
Dewels, etc.		36	_	36
Street Gullies		12	_	12
Streets or Back Roads		32	-	32
Stables		30	_	30
Tips		18	_	18
Urinal—Public		37		37
		38	_	38
Van Dwellings		38		38
Workshops and Workplaces (excludi	ng			
Bakehouses)		57	_	57
Yards and Courts		272	_	272
Grand Totals		27829	16583	44412
			-	
Notices-Served-Informal				1000
Formal				1280
				73
Complied with—Informal				694
Formal Formal				38
Samples—Food and Drugs Acts				645
Bacteriological				753
Shell Fish				27
Milk for T.B				52
Rag Flock Act		1		6
Fertiliser and Feeding Stuffs Act				14

#### CANAL BOATS

Although visits have been made as usual to the wharves, no canal boats have been found there. It appears that no boats have docked at the wharves during the year, and that is partly due to the insufficiency of water for the satisfactory working of the boats through the locks and partly to the transference of boats to other areas by the Ministry of Transport.

TABLE OF CESSPOOLS, PRIVIES AND PAIL CLOSETS IN CITY.

2	Cesspools.	Privies.	Pail Closets.	Chemical Closets.
No. remaining December, 1943	97		119	3
No. abolished during year 1944	4	_	11	2
No. remaining December,	93		108	1

#### COWSHEDS.

Number of Dairy Farms in city at end of 1944	 20
Number of Cows in city at end of 1944	 470

#### DISINFECTION.

No. of articles disinfected		 2111
Houses or parts of houses	disinfected	 1251

		DIS	SINF	ESTAT	TION.	Council.	Other.
Houses.	1.	Infested				171	221
		Disinfested				171	221
	2.	No change.					
	3.	No change.					
	4.	No change.					

Personnel. 2 cases.

Clothing and Bedding. From 12 houses.

#### DRAINS.

## Voluntary Cleansing of Stopped Drains by Health Department.

Sixty-five drains were attended to and of these 45 were unstopped immediately. In the remaining 20 cases the owners' attention had to be called to them.

IMPROVEM	ENT	s To	ноц	ISES.		No. of Houses.
Separate internal water	supp	ly in	place	of tap	s in	
common yards						4
Additional water closets						51

# SUMMARY OF FOODSTUFFS CONDEMNED. Table A.

Tons C	wts. Qrs. Lbs.	Sugar,	341 lbs.
Meat 245	19 3 21	Pudding Mixture	6,347 packets
Fish 14	11 1 13	Oatmeal	56 lbs.
Fruit 3	11 3 9	Chocolate	48 ,,
Vegetables 37	16 3 17	Biscuits	334 ,,
Rabbits	461	Macaroni	646 ,,
Preserved Foods		Sultanas	**
(Tinned Goods)	19,587	Semolina	1,536 ,,
Poultry	3 head	Puddings	1,224
Eggs	856	Bread	1,080
Lobsters	4	Tea	79 ,,
Mussels	15,008 lbs.	Brawn	270 ,,
Cheese	135 ,,	Sweets	60 ,,
Sausage	1333 ,,	Coffee Beans	114 ,,
Butter	220 ,,	Dessert Powders	144
Ground Rice	40 ,,	Dried Fruit	25 ,,
Jam	174 ,,	Flour	528 ,,
Bacon	5,015 ,,	Pork Pies	108
Syrup	560 ,,	Fish Cakes	1,261
Lard	56 ,,	Oysters	1,000
Rolled Oats	711 ,,	0,0000 11 11	-1000

TABLE A. Totals of Meat Condemned

	B	British	Meat		Imp	Imported Meat	1 Me	at	B	British Offal	Offal		Im	porte	Imported Offal	fal		Totals	als	
	T.	0	Qrs. Lbs.	Lbs.	T.	Ö	Qrs.	Lbs.	C. Qrs. Lbs. T.	C. Qrs. Lbs.	Ors.	_	T. C. Qrs. Lbs.	Ö	Qrs.	Lbs.	F.	0.	Sr.	Lbs
Cold Stores, Retail	1	12	2	6.	1	1	1	1	ı	2	0		1	1	10	1	1 0 3 21	0	m	21
Markets, etc 1	151 14		-	9	1	1	1	1	88	9	1 4	4	1	1	1	1	241 0 2 10	0	0	10
Central Slaughterhouse	1	1	1	1	2 5		2	7	1	1	1	1	-	12	3	=	1 12 3 11 3 18		1 18	8
Totals	152 10	1	0	0 25	2 5	5	2	7	2 7 89 11 1 6 1 12 3 11 245 19 3 21	=	-	9	-	12	3	=	245	10	3	2

TABLE B. Meat condemned at Ministry of Food's Slaughterhouse. Total number of Animals slaughtered 90,595, comprising:

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs	Totals
Casualties	247	9327 124	2366	4171 506	12656 198	44687	14964	88418
Totals	292	9451	2500	4677	12854	45145	15676	90595

TABLE C. Number of Animals, Parts and Offals affected with Tuberculosis and other Diseases.

	Calves	Sheep	and Lambs		Pigs	Totals
Carcase Part Offal	Carcase Part Offal	Carcase I	Part   Offal	Carcase	Part (	Offal
373 1586 1573	10 0 1	1	1	41	789	197 4570
144	.288 3 21	131	29 1879	70	125	
466 1730 2999	298 3 22	131	29 1879	111	914	535 9117

TABLE D.

Percentage of all Animals affected with Disease 10.06 per cent. Percentage of Animals affected with Tuberculosis and other Diseases.

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
B. Order uberculosis ther Discases	19.86	13.96	8.64 2.96	100.0 41.37 17.27	0.085	- 15.4	6.55

TABLE E.

Percentage of Whole Carcases rejected.

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
T.B. Order Tuberculosis Other Diseases	2.4	0.19	1.08	6.86	.077	0.29	0.26

TABLE F

Tabulated List of other defined Diseases and their incidence in Carcases rejected

#### Inspection of Dairy Cows

Summary of reports received from local office of Ministry of Agriculture and Fisheries:

"One report was received notifying the presence of tubercle bacilli in samples of milk supplied to the various dairies in the city. On investigation no animals were found to be affected and control samples were negative. It was found that two cows had been sold prior to the visit of the Veterinary Inspector of the Ministry.

One hundred and seventy animals in non-designated herds were examined under the Milk and Dairies Order, 1926; seven were found affected with mastitis. No animals were slaughtered under the Tuberculosis Order of 1938.

#### Tuberculin Tested Herds

There is one producer in the city holding a tuberculin tested licence.

Two producers holding attested licences are on the register of the Ministry of Agriculture and Fisheries, namely, the Leicester Frith Institution Farm and the Leicester Mental Hospital.

#### Accredited Herds

There are six producers holding accredited licences. Three hundred and eleven animals were examined; seven were found to be affected with mastitis. No animals were slaughtered under the Tuberculosis Order of 1938."

#### Milk Traders-Licensing and Registration.

		Number
Milk and Dairies Order 1926	Application for registration of persons as "dairymen"	30
Milk (Special) Designations)	Application from cowkeeper to use designation "Tuber- culin Tested"	1
Order 1936	Application from cowkeepers to use designation "Accredited"	6

Foods and Drugs (Adulteration) Act.
NUMBER OF SAMPLES TAKEN FOR CHEMICAL ANALYSIS.

1940	1941	1942	1943	1944
1600	1093	783	737	622

Milk (Special Designations) Order, 1936.

Number of Samples taken for Bacteriological Examination.

1940	1941	1942	1943	1944
686	574	621	719	753

# ADMINISTRATIVE ACTION REGARDING SAMPLES NOT REPORTED TO BE 'GENUINE.'

(For details of analysis, see Report of the Public Analyst, page 81.)

# MILK SAMPLES REPORTED 'NOT GENUINE.'

Milk		Formal	Informal
Pasteurised Milk	 	 2	-
Accredited Milk	 	 2	2
T.T. Milk	 	 -	2
T.T. Certified Milk	 	 -	1
1.1. Certined Milk	 	 -	3

# SAMPLES OTHER THAN MILK REPORTED 'NOT GENUINE.'

		- OLI	VOIN	E.	
Baking Powder				Formal	Informal
Cocoa				-	1
Coffee and Chicory	**			1	1
Dessert Powder				-	1
Gelatine				-	1
Ground Almonds				2	4
Jam				1	1 (private)
Lemon Barley Cord	ial			1	3
Malt Vinegar				-	1
Meat Paste				-	1
Museels				1	-
				-	1
Pepper				1	1

## Samples other than Milk reported 'Not Genuine'—continued Formal Informal

			r ormar	Imormai
Pickles			 -	1 (private)
Sausage			 3	5
Basilicon Ointment			 -	1
Bismuth Tablets			 -	1
Camphorated Oil			 -	1
Cod Liver Oil and M	Aalt		 -	2
Glycerin Artificial			 1	2
Phenacetin and Caffe	ine Tabl	ets	 _	1
Prescription			 1	1
Sweet Spirit of Nitro	e		 -	1
Tincture of Iodine			 _	2
Bran			 -	1
Poultry Balancer Me	eal		 -	3
Unrationed Poultry			 _	1
Cilitationed Louisi,				

In all cases where proceedings were not taken, written cautions were sent or "follow-up" samples were immediately obtained.

# EXAMINATION OF MILK FOR PRESENCE OF TUBERCLE BACILLI.

## Milk and Dairies (Consolidation) Act, 1915.

Number of Samples of Milk taken for microscopical and biological examination for Tubercle Bacilli—

Year.	1940	1941	1942	1943	1944
Number taken	44	54	87	54	52
Percentage containing Tubercle Bacilli		5.55	5.75	_	3.84

## Details respecting samples taken, 1944.

	Number of Samples taken.	Number reported containing Tubercle Bacilli.	Number reported negative.	Number unsatis- factory although negative as regards Tubercle Bacilli.
Cowkeepers with registered prem- ises within City				
boundaries	15	-1	14	_
Cowkeepers with premises outside City				
boundaries	37	1	36	
Totals	52	2	50	_

## OFFENSIVE TRADES.

Particulars of	of all offensive Trade	s in the Cit	ty.		
	ripe Dressers			10	
Marine Store Deslaw				12	
"	orono Estancia			14	
	SLAUGHTER	HOUSES.			
Particulars of a	ll Slaughterhouses in	the City.			
Private Slaug	hterhouses			34*	
Licensed Priv	vate Slaughterhouses (in	cludes two Is	Cnackers'	0.	
Yards)				3	
Corporation S	Slaughterhouses situated	at Cattle Ma	rket and		
let off as	Private Slaughterhouses			19	
Corporation S	Slaughterhouses situated	at City Hosp	pitals:		
	ntal Hospital			1	
City Gen	eral Hospital			1	
	Total Slaughterhous	ses		58	
				_	
* No slaughte	FCAL PROCE		ouses at pr	esent.	
100	LEGAL PROCE	EDINGS.			
	Milk and Dairies Order, 1926 1				
Food and Drugs Act 1				1	
	LEGAL PROCE	EDINGS			
Acts, Bye-laws or					
Regulations under which proceedings	Defects com				
were instituted	Default or Offence	Result	Fines	Costs	
			£, s. d.	£, s. d.	
Milk and Dairies Order, 1926	Improper use of milk bottles	Conviction	10 0 0	1 1 0	
Food and Drugs Act	Selling gelatine con- taining excess of arsenic	Ditto	5 0 0	-	

F. G. McHUGH, F.R.San.I., M.S.I.A., Chief Sanitary Inspector

# Report on the Venereal Diseases Scheme

For the Year 1944

By

C. HAMILTON WILKIE, M.D., Ch.B., B.Sc.(Glas.),
Director of Venereal Diseases Services

#### FOREWORD BY THE MEDICAL OFFICER OF HEALTH

In my Report for 1943, on page 86, I outlined the procedure for following up contacts under Regulation 33B. The following Table shows the results of the working of the Regulation in Leicester during the year now under review:

now under review.	M.	F.	Total
1. Total number of individuals in respect of whom Form 1 was received	3	105	108
2. Number of cases in 1 in which attempts were made outside the scope of the Regulation to persuade the contact to be examined before the latter had been named in a second Form 1:			
Contacts found	0	39	39
Contacts examined	0	31	31
3. Number of those in 1 in respect of whom two or			
more Forms 1 were received	0	5	5
4. Number of those in 3 who were:			
(a) Found	0	2	2
(b) Examined after persuasion	-	1	1
(c) Served with Form 2	0	1	1
(d) Examined after service of Form 2	0	0	0
(e) Prosecuted for failure to submit to and			
continue treatment	0	1	1

Perusal of the above Table indicates that in a large number of cases no action was or could be taken. The following Table analyses these cases:

5. Number of those in 1 in respect of whom the address was insufficient		F. 29	Total 32
	9	29	32
6. Number of those in 1 who lived in other localities	0	5	5
7. Number of those in 1 who were not followed up			
though living in Leicester	0	30	30

It is very regrettable that, owing to shortage of staff, it was impossible to follow up the 30 contacts referred to in Item 7. During the earlier part of the year, for a few months, there was a social worker attached to the Royal Infirmary, but following her resignation no one could be found to carry out the work, with the result that the follow-up of contacts was seriously deficient. The position has been somewhat eased in 1945 by the appointment of a health visitor who will devote approximately half her time to this work.

# Report on the Venereal Diseases Scheme

for the Year 1944

By

C. HAMILTON WILKIE, M.D., Ch.B., B.Sc.(Glas.), Director of V.D. Services

The following is a Report on the Venereal Diseases Scheme for Leicester and Leicestershire.

The main centre is at Leicester Royal Infirmary and consists of inpatient and out-patient departments. A subsidiary centre is held at Loughborough General Hospital for out-patients only. Both centres are for venereal disease cases or for those patients who may suspect that they have contracted venereal disease. Patients who have other acute infections of the sex parts or who only desire tests (e.g., prior to marriage) are also dealt with.

Venereal disease specialists are in attendance at the Leicester centre on each of the first five week-days, and at the Loughborough centre each Monday evening. The special times at which the clinics are open are as follow:

#### Leicester Royal Infirmary

Males:		Females:	
Monday	 2-30 to 4 p.m.	Monday	5-30 to 7 p.m.
Tuesday	 10 to 11 a.m.	Tuesday	2-30 to 4 p.m.
Wednesday	 6 to 7-30 p.m.	Wednesday	10 to 11 a.m.
Thursday	 4-30 to 6 p.m.	and	2-30 to 4 p.m.
Friday	 5-30 to 7 p.m.	Friday	2-30 to 4 p.m.

Intermediate treatment by nursing staff, under the supervision of the venereal disease specialists, is given every week-day at special times arranged to suit the individual case.

#### Loughborough General Hospital

Females: Males:

Monday . . 5 to 6 p.m. Monday . . 6 to 7 p.m.

Patients requiring in-patient treatment or special intermediate treatment are transferred to the Leicester centre.

No special letter, "recommendation," or pre-arranged appointment is necessary in order that a patient may be seen by a specialist at these clinics. I wish to emphasise this fact as patients sometimes think that an appointment is necessary as for some other departments. Patients may come direct on their own initiative or direct from a doctor. When a patient is referred to the clinic by a doctor and the doctor has sent a letter with the patient, it is understood that the doctor will have a confidential report on the case from the venereologist.

The success of a venereal disease scheme at the present day depends to a large extent on the fact being known that all cases who attend a venereal disease department have not necessarily V.D. Over 50% are found either to have a non-venereal infection or to be free from any infection. I believe that public education is certainly doing something to remove the stigma which has in the past been attached to the term "Venereal Disease Clinic." I appeal to all to help in broadening our outlook towards this particular branch of medicine.

#### The Leicester Centre

The total number of cases under treatment or observation on the 1st of January, 1944, at this centre was 576. Eight cases who had been removed from the register during some previous year returned during 1944 for further treatment or observation of the same previous infection. The number of cases dealt with for the first time during the year (excluding cases transferred from other centres or from service units) totalled 1,682. The number of cases from other centres or from service hospitals was 143. The "grand total" of all the above cases came to 2,409 (1943=2,355). A detailed analysis of the above can be obtained from the official Ministry of Health Report (Form V.D. (R) (revised—1944)). I give, however, some interesting data, and make some comparisons with the previous year.

- Of the new cases, 60% were non-venereal, the remainder were cases of V.D.
- Of the new V.D. cases, approximately 65% were acute gonorrheal cases, 34% were syphilitic, and 1% were soft sore.

- Of the new syphilitic cases, 54% were early syphilitic cases, 40% were late syphilitic cases, and 6% were cases of congenital syphilis.
- The new cases of gonorrhœa numbered 438, 54 less than in the previous year.
- The new early syphilitic cases numbered 123, 34 more than in the previous year.
- 6. The non-venereal cases numbered 992, six more than in 1943.
- 7. The ratio of acute syphilis: acute gonorrh $\alpha$ a was roughly 1: 4.

The total number of attendances for 1944 was 22,389 (1943=20,521).

In-patients totalled 170 (males 44 and females 126).

The aggregate number of "in-patient days" was 4,937.

#### The Loughborough Centre

The total number of cases under treatment or observation on the 1st of January, 1944, at this centre was 41. The number of cases dealt with for the first time during the year (including cases transferred from other centres or from service units) was 148 (1943=144). The attendance totalled 1,158 (1943=882). Microscopic tests totalled four for syphilis and 344 for gonorrhæa. Serum tests numbered 173.

#### The City General Hospital

The usual consultative visits to this hospital were made during the year. All cases in this hospital that are suspected of having V.D. are seen by the Director of V.D. Services.

#### Education

During the year I had the honour of taking part in the production of the latest Ministry of Information sound film on Venereal Diseases. The title of this new film is "Subject Discussed." The three chief characters in the film are Commander Campbell, of the Brains Trust, Dr. Joan McMichael, and myself. The V.D. Department shown in the film is that of Leicester Royal Infirmary. It is hoped that this film will have a wide distribution throughout the country and that it will play a big part in the education of the public on the dangers of venereal diseases.

During the year I personally gave the following lectures, accompanied by lantern demonstrations:

- 16/2/44 To British Red Cross Society (St. Stephen's Lecture Hall) (female audience only).
- 1/3/44 To First Aid Post (St. Margaret's) (males).
- 8/3/44 To First Aid Post (St. Margaret's) (females).
- 13/3/44 To members of the Leicester and District Branch of the Incorporated Dental Society. (This was entitled "Venereal Diseases in Relation to Dentistry.")
- 28/3/44 To representatives of the firm of Boots Pure Drug Co. Ltd., Nottingham.
- 30/3/44 To nurses of the Leicester District Nursing Association.
- 16/4/44 To members of the South Leicester Working Men's Club.
- 4/5/44 To workpeople of the Power Jets Ltd. (males).
- 4/5/44 To workpeople of the Power Jets Ltd. (females only).

In addition, the usual teaching lectures to the Nurses of the Leicester Royal Infirmary were given.

#### Treatment

The sulphonamides and penicillin now play a large part in the modern treatment of gonorrhæa and early syphilis. At the same time, the somewhat sensational results recorded in the press are not always met with in reality. Years are necessary to assess their real value and relapses are met with. Evidence shows that few general practitioners in the area treat venereal disease cases. Most send their cases to the clinic. I should like to make an appeal to the few who do treat venereal disease not to commence any method of treatment until a definite microscopic or serum confirmation of the diagnosis has been obtained. Treatment prior to tests, or without even proof of infection, may mask or delay the important problem of diagnosis. A diagnosis of venereal disease is a serious thing and may lead to domestic tragedy. Legal proof of V.D. may be required at some later date and demands very thorough tests by the expert. The non-venereal infection is common, and is sometimes difficult to clear up and it may closely simulate venereal disease. Equally important is a thorough series of tests to make certain that the patient is definitely cured.

C. HAMILTON WILKIE.

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