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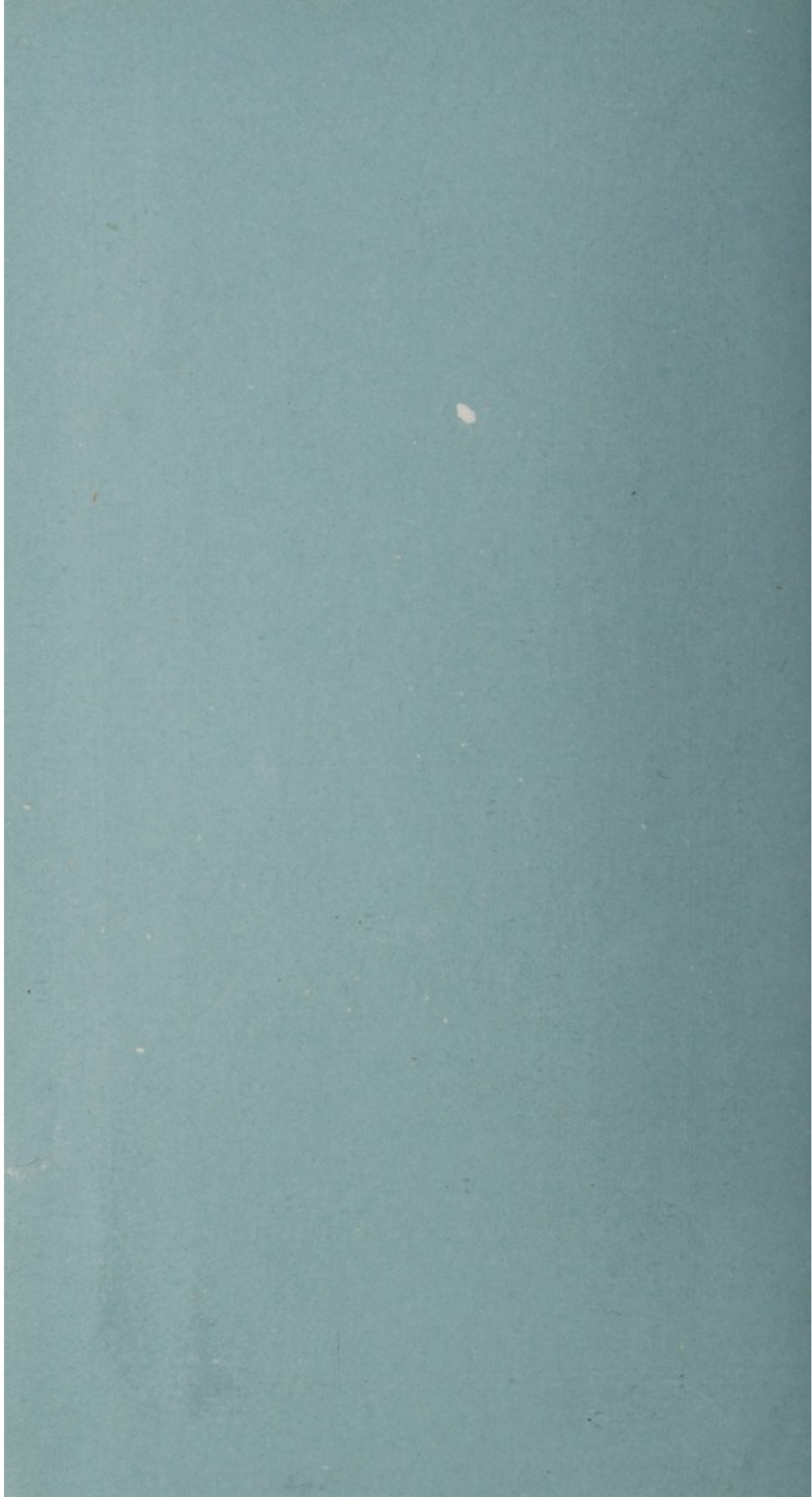
LEICESTERSHIRE COUNTY COUNCIL

**ANNUAL
REPORT**

of the

**COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1950**

G. H. GIBSON, M.B., Ch.B., D.P.H.,
COUNTY MEDICAL OFFICER OF HEALTH





LEICESTERSHIRE COUNTY COUNCIL

**ANNUAL
REPORT**

of the

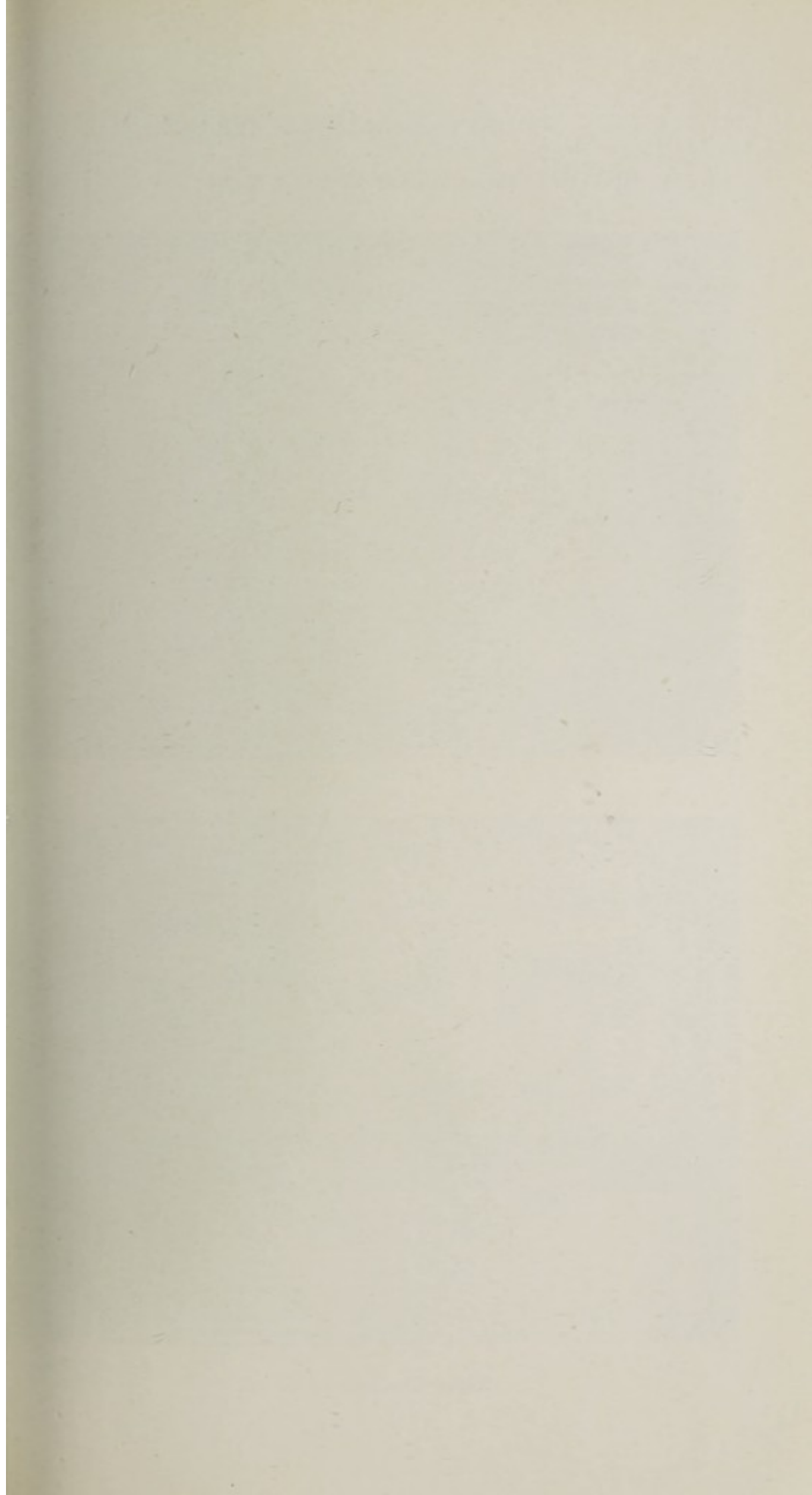
**COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1950**

G. H. GIBSON, M.B., Ch.B., D.P.H.,
COUNTY MEDICAL OFFICER OF HEALTH

THE NATIONAL BUREAU OF STANDARDS

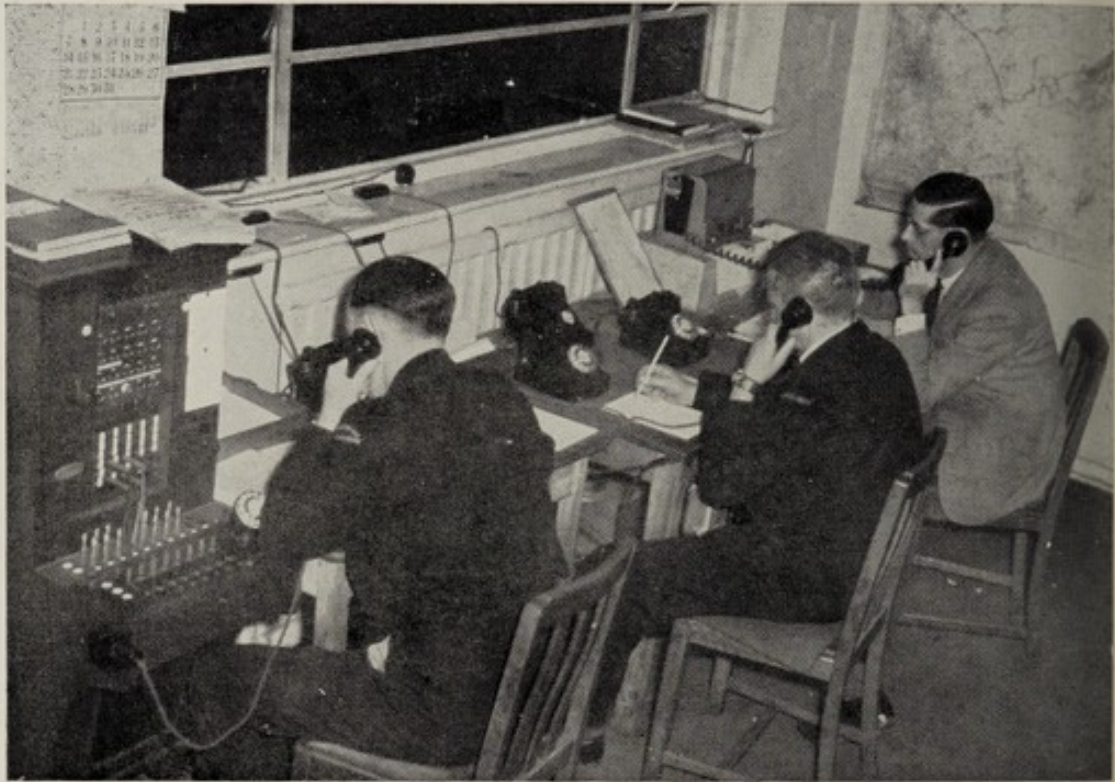
ANNUAL
REPORT

FOR THE YEAR
1930



COUNTY AMBULANCE SERVICE

HEADQUARTERS CONTROL ROOM



RADIO EQUIPMENT IN USE

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COUNTY HEALTH DEPARTMENT,

17 FRIAR LANE,

LEICESTER,

August, 1951

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the work of the County Health Department for the year 1950.

The report for the previous year, which was the first full year during which the National Health Service Act was operative, gave full details of the County Council's services, especially those set up under the Act. All the relevant statistics are given this year, but comment has been reduced to a minimum except where there has been some change or development. It will be realised that as a consequence the particulars of some services, such as Home Nursing and Midwifery, seem to occupy a small space, but that the figures briefly set out represent when translated into terms of human endeavour a tremendous amount of hard and successful work.

There have been certain changes in classification of disease which render comparison of some figures difficult, but the vital statistics for the year, on the whole, bear a close resemblance to last year. One striking feature is the reduction in the Tuberculosis rate, which can be noted with gratification although not with complacency. There have been no deaths from Diphtheria and only two confirmed cases, a tribute to the success of the immunisation scheme. The figures for Poliomyelitis, although lower than last year, are still high by comparison with most previous years.

Perhaps the most notable feature of the year's work has been the complete reorganisation of the ambulance service, including the equipment of all ambulances with radio communication. This reorganisation took place very smoothly as a result of much administrative effort, and a special tribute is due to the work of the County Ambulance Officer. The ambulance service has also been concerned with Civil Defence, although not much progress could be made until the reorganisation was complete.

The Home Help Service continued its steady expansion during the year and is now well established as one of the essential social services in the County. The scope of the Health Visitor's work is still becoming wider and this year we have appointed a special Health Visitor for Diabetic Care, who works in close co-operation with the hospital and the general practitioners. In the report will be found details of the closing of the County Laboratory and some comments on its work during the thirty years of its existence.

Under the conditions brought about by the National Health Service Act, there is very great need for co-ordination between the various branches of the Health Service, and much of the time of the Medical Officer of Health is taken up in discussions with hospital authorities, executive councils, local medical committees, etc. I feel that this time is well spent, and that the Medical Officer of Health has a special opportunity in acting as a liaison officer, while I am pleased to state that the Department has received much help from the various organisations concerned.

The year 1950 was the last complete year of office of Dr. N. A. Coward, the Consultant Chest Physician, who had been on the staff since 1914 and who retired in March, 1951. His retirement was much regretted by his colleagues, who regarded him with great respect and affection; by the medical practitioners in the county, who valued his clinical skill and his unfailing readiness to help, but perhaps most of all by his patients, who looked on him as their friend as well as their doctor. It is pleasing to record that at the time of writing this report he is helping the service by acting as part-time "locum tenens".

In conclusion, I should like to express my appreciation of the support of the members of the committee and their interest in the work carried out under their control. I am glad to have the opportunity of placing on record my gratitude to all members of the staff of the department, especially to Dr. J. R. Byars, my deputy; Mr. H. Burditt, Chief Administrative Assistant; and to Mr. E. R. Turner for his help in the preparation of this report, and of thanking heads of other County Council departments and their staffs for their ready co-operation.

I have the honour to remain,

Your obedient servant,

G. H. GIBSON,

County Medical Officer

HEALTH COMMITTEE

FORSELL, J. T. (*Chairman*)

BLACK, J. W. (died 18th June, 1951)	MILLER, W. M.
FREEMAN, M.	NOEL, Mrs. I. B. B., M.B.E.
HARVEY, L. W.	NORMAN, Dr. J. D. F.
HOLMES, J. H.	PICKERING, L. G. W.
HUGHES, J. (died 26th December, 1950)	POCHIN, V. R. (<i>ex-officio</i>)
KEAY, Mrs. M. E., B.E.M.	PRATT, J.
KING, M.	PRESTON, P. L.
LUTHER, R. M.	SARGANT, Mrs. D. E.
MARSH, Mrs. A. G.	SYMINGTON, S. P.
MARTIN, Lt.-Col. SIR ROBERT, C.M.G.	WORTLEY, W. O.
(<i>ex-officio</i>)	YATES, F.
MAWBY, G. H.	

Members co-opted by the County Council (from outside its membership) :

DALLEY, Mrs. C. E. BOOTH, C. Z. M.

Members co-opted by the County Council on the nomination of various bodies :

NAME	REPRESENTATION :
EVERARD, Mrs. F. J. F. ..	Leicestershire County Nursing Association
MARTIN, Hon. Lady ..	Leicestershire County Nursing Association
JENKS, Mrs. S. E. ..	Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind
O'DONOVAN, Dr. C. ..	National Health Service (Leicestershire and Rutland) Executive Council
LORRIMER, Mrs. J. H. ..	Voluntary Association for Cripples' Welfare
COOPER, C. R. (resigned) ..	Leicestershire and Rutland Association of Urban Authorities
ROBERTS, E. V. ..	Leicestershire and Rutland Association of Rural District Councils
DAY, H. A. ..	

Sub-Committees of the Health Committee

General Purposes Sub-Committee :

MILLER, W. M. (*Chairman*) HARVEY, L. W. (*Vice-Chairman*)

Domiciliary Services Sub-Committee :

WORTLEY, W. O. (*Chairman*) NOEL, Mrs. I. B. B. (*Vice-Chairman*)

Mental Health Sub-Committee :

BOOTH, C. Z. M. (*Chairman*) DALLEY, Mrs. C. E. (*Vice-Chairman*)

Representation on other Governing Bodies and Associations

Leicestershire County Nursing Association :

FORSELL, J. T. HARVEY, L. W. HOLMES, J. H. WORTLEY, W. O.

National Health Service Act, 1946 ; Executive Council for Leicestershire and Rutland :

FORSELL, J. T. HOLMES, J. H. KEAY, Mrs. M. E.
MARTIN, Hon. Lady MAWBY, G. H. PRATT, J.

Leicestershire Voluntary Association for Cripples' Welfare :

KEAY, Mrs. M. E. MARSH, Mrs. A. G.

Leicester and County Mission to the Deaf and Dumb :

KEAY, Mrs. M. E.

Royal Leicester, Leicestershire and Rutland Institution for the Blind :

FORSELL, J. T. KEAY, Mrs. M. E. MAWBY, G. H. PRATT, J.

Wycliffe Society for Helping the Blind :

KEAY, Mrs. M. E. PRATT, J.

Southern Regional Association for the Blind :

YATES, F.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

County Medical Officer ; School Medical Officer :

GIBSON, G. H., M.B., CH.B., D.P.H.

Deputy County Medical Officer ; Deputy School Medical Officer :

BYARS, J. R., M.B., CH.B., D.P.H.

Senior Assistant County Medical Officer :

CAMPBELL, MARJORIE L., M.B., CH.B., B.A.O., D.P.H.

Assistant County Medical Officers :

MURRAY, S. E., M.B., B.S. (retired 18th August, 1950)

PARADISE, DIANA G., M.D., B.S., D.C.H.

CRUICKSHANK, MARGARET O., M.A., M.R.C.S., L.R.C.P.

WALTERS, CONSTANCE, B.SC., M.B., CH.B.

Assistant County Medical Officer ;

School Medical Officer, North Divisional Executive ;

Medical Officer of Health, Loughborough M.B. :

HOLDERNESS, R. C., M.B., B.S., D.P.H.

Assistant County Medical Officer ;

Assistant School Medical Officer, North Divisional Executive :

PHILLIPS, H. T., M.B., B.S., D.P.H.

Assistant County Medical Officer ;

Medical Officer of Health, Barrow-upon-Soar Rural District :

HALL, J. W., M.D., B.Hy., D.P.H.

Assistant County Medical Officer ;

Medical Officer of Health, Oadby and Wigston Urban Districts, and Market Harborough Rural District :

KIND, R. W., M.R.C.S., L.R.C.P., D.P.H.

Chest Physician and Chief Tuberculosis Officer :

COWARD, N. A., O.B.E., M.D., D.P.H.

(Joint duties with Sheffield Regional Hospital Board and County Council)

Chief Dental Surgeon :

ASHTON, P., L.D.S.

Assistant Dental Surgeons :

WARD, A. E., L.D.S.

McLELLAN, C. L. R., L.D.S.

WILCOX, D. R. A., L.D.S.

CAMPBELL, W. G., L.D.S.

SMITH, M., L.D.S. (resigned 31st May, 1950)

KERVE, Mrs. MILDA, D.D.D. (Latvia), (resigned 30th April, 1950)

LATIMER, R., L.D.S. (part-time)

STAFF OF THE PUBLIC HEALTH DEPARTMENT

—continued

County Sanitary Officer :

GREGORY, S. A., CERT. S.I.B., M.S.I.A. (appointed 1st April, 1950)

Superintendent Health Visitor and School Nurse (combined duties) :

CARRYER, Miss G. I., S.R.N., S.C.M., H.V.CERT.

Deputy Superintendent Health Visitor and School Nurse (combined duties) :

HORNSBY, Miss A., R.G.N., S.C.M., H.V.CERT.

Non-Medical Supervisor of Midwives :

BLACKWELL, Miss I. W., S.R.N., S.C.M.
(on the Staff of the Leicestershire County Nursing Association)

Domestic Help Organiser :

HAMER, Mrs. A. L. E.

Ambulance Officer :

CAVE, F. J.

Authorised Officers and Mental Health Officers :

FORDHAM, W. J.

GAUNT, Miss M., D.P.A.

MAGEE, L. M.

CAMP, Mrs. M. (resigned 30th June, 1950)

CHARLES, Mrs. R. (appointed 1st July, 1950)

Chief Administrative Assistant :

BURDITT, H.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS

The County of Leicester lies in the centre of England and has an area of 832 square miles. Its extreme length, north to south, is 44 miles, and east to west 39 miles. It has an undulating surface varying from 100 to 912 feet above sea level.

The principal industries are agriculture, mining and quarrying, engineering, hosiery, and boots and shoes.

GENERAL STATISTICAL SUMMARY OF THE COUNTY

				Whole County	
Area in Acres	..	..	Urban	56,850	
			Rural	458,548	515,398
Population (Census 1931, adjusted for subsequent changes in boundary) :					
			Urban	133,227	
			Rural	150,690	283,917
Population (Registrar-General's estimates, mid-year 1950) :					
			Urban	163,780	
			Rural	183,900	347,680
Rateable value as at 1st April, 1950	..	..	..	..	£1,685,393
Estimated product of penny rate, 1950-51	..	..	..	..	£6,575
Live births	..	..	Urban	2,675	
			Rural	2,949	5,624
Live birth-rate	..	..	Urban	16.33	
			Rural	16.04	16.17
Stillbirths	..	..	Urban	66	
			Rural	94	160
Stillbirth rate	..	..	Urban	0.40	
			Rural	0.51	0.46
Deaths	..	..	Urban	1,739	
			Rural	1,836	3,575
Death rate	..	..	Urban	10.62	
			Rural	9.98	10.28
Infant mortality (deaths under one year of age)	..	..	Urban	80	
			Rural	72	152
Infant mortality rate (per thousand live births)	..	..	Urban	29.9	
			Rural	24.4	27.0
Maternal mortality	..	..	Urban	6	
			Rural	1	7
Maternal mortality rate (per thousand live and still births)	..	..	Urban	2.19	
			Rural	0.33	1.21

POPULATION OF THE COUNTY

The following gives the estimated population in the County Districts as at 30th June, 1950, and also shows a comparison with the previous year's figures.

	Year 1949		Year 1950
	Civilian	Total	Home Population
Urban Districts :			
Ashby-de-la-Zouch	6,382	6,382	6,552
Ashby Wolds	3,288	3,288	3,358
Coalville	25,570	25,570	25,720
Hinckley	38,750	38,750	39,050
Loughborough M.B.	35,570	35,820	37,160
Market Harborough	10,500	10,500	10,420
Melton Mowbray	13,350	13,610	13,470
Oadby	6,070	6,070	6,273
Shepshed	6,130	6,130	6,147
Wigston	14,880	14,980	15,630
Rural Districts :			
Ashby-de-la-Zouch	13,660	13,660	13,730
Barrow-upon-Soar	46,520	46,970	47,090
Billesdon	7,798	8,538	8,020
Blaby	38,360	38,360	39,130
Castle Donington	9,422	9,422	9,350
Lutterworth	11,640	11,640	11,730
Market Bosworth	25,760	25,760	26,080
Market Harborough	9,900	9,920	9,660
Melton and Belvoir	18,650	19,430	19,110
Totals :			
Urban Districts	160,490	161,100	163,780
Rural Districts	181,710	183,700	183,900
Whole County	342,200	344,800	347,680

LIVE BIRTHS

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1941 ..	2,349	15.1	2,453	14.2	4,802	14.6	14.2
1942 ..	2,718	18.1	2,790	16.6	5,508	17.3	15.8
1943 ..	2,930	19.9	3,172	19.2	6,102	19.6	16.5
1944 ..	3,120	21.3	3,416	20.8	6,536	21.1	17.6
1945 ..	2,859	19.7	2,924	18.0	5,783	18.8	16.1
1946 ..	3,222	21.4	3,341	19.9	6,563	20.6	19.1
1947 ..	3,366	21.8	3,582	20.7	6,948	21.2	20.5
1948 ..	3,050	19.2	3,313	18.5	6,363	18.8	17.9
1949 ..	2,867	17.9	3,069	16.9	5,936	17.4	16.7
1950 ..	2,675	16.3	2,949	16.0	5,624	16.2	15.8

The following table shows an analysis of the total County births according to legitimacy and sex.

Year	Legitimate		Illegitimate		Total male births	Total female births	Ratio of male to 100 female births
	No.	Rate	No.	Rate			
1941 ..	4,604	14.01	198	0.60	2,456	2,346	104.7
1942 ..	5,268	16.56	240	0.75	2,829	2,679	105.6
1943 ..	5,782	18.53	320	1.03	3,121	2,981	104.7
1944 ..	6,151	19.82	385	1.24	3,368	3,168	106.3
1945 ..	5,251	17.06	532	1.73	3,041	2,742	110.9
1946 ..	6,180	19.37	383	1.20	3,405	3,158	107.8
1947 ..	6,624	20.23	324	0.98	3,610	3,338	108.1
1948 ..	6,066	17.96	297	0.89	3,283	3,080	106.6
1949 ..	5,710	16.68	226	0.66	2,997	2,939	102.0
1950 ..	5,415	15.57	209	0.60	2,902	2,722	106.6

INFANT MORTALITY

The number of deaths of children under 12 months of age shows a new low record, but as the number of live births has fallen, the rate is very nearly the same as last year's, as is shown in the following table.

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1941 ..	159	59.0	106	40.7	265	50.0	59
1942 ..	146	53.7	111	39.8	257	46.7	49
1943 ..	134	45.7	123	38.8	257	42.1	49
1944 ..	123	39.4	122	35.7	245	37.5	46
1945 ..	97	33.9	110	37.6	207	35.8	46
1946 ..	134	41.6	101	30.2	235	35.8	43
1947 ..	161	47.8	137	38.2	298	42.9	41
1948 ..	102	33.4	103	31.1	205	32.2	34
1949 ..	81	28.3	80	26.1	161	27.1	32
1950 ..	80	29.9	72	24.4	152	27.0	29.8

The following table analyses the 152 infant deaths into the individual causes of death.

Cause of death	Males	Females	Total
Tuberculosis, other	1	—	1
Whooping cough	1	—	1
Meningococcal infections	1	—	1
Acute poliomyelitis	1	—	1
Measles	—	1	1
Pneumonia	9	7	16
Bronchitis	2	—	2
Gastritis, enteritis, and diarrhoea	6	3	9
Congenital malformations	14	7	21
Other defined and ill-defined diseases	48	45	93
All other accidents	3	3	6
Totals	86	66	152

The Registrar-General, for the first time, has included figures relating to deaths of infants under four weeks of age. The totals of these figures are as follows :

	Male	Female	Total
Legitimate	48	46	94
Illegitimate	4	4	8
Totals	52	50	102

STILLBIRTHS

(rates calculated per thousand population)

Year	Legitimate		Illegitimate		Total	
	No.	Rate	No.	Rate	No.	Rate
1941	141	0.43	7	0.02	148	0.45
1942	176	0.55	6	0.02	182	0.57
1943	169	0.54	15	0.05	184	0.59
1944	155	0.50	22	0.07	177	0.57
1945	153	0.50	17	0.06	170	0.55
1946	151	0.47	7	0.02	158	0.50
1947	172	0.53	10	0.03	182	0.55
1948	150	0.44	7	0.02	157	0.46
1949	127	0.37	12	0.04	139	0.41
1950	155	0.45	5	0.01	160	0.46

MATERNAL MORTALITY

Year	Number of maternal deaths	Rate per thousand live and still births	
		Leicestershire	England and Wales
1941	14	2.83	2.23
1942	13	2.28	2.01
1943	19	3.03	2.29
1944	14	2.07	1.93
1945	16	2.69	1.79
1946	6	0.89	1.43
1947	9	1.26	1.17
1948	10	1.53	0.86
1949	5	0.82	0.82
1950	7	1.21	0.86

DEATHS (all causes and all ages)

On 1st January, 1950, new classifications of diseases, injuries and causes of death were brought into use in accordance with the World Health Organisation Nomenclature Regulations, 1948. In addition, there has been a revision of the age grouping of deaths. This change represents for the first time international agreement on a method of classification to secure uniformity in morbidity and mortality statistics. The following list shows the deaths in this County for the year 1950 grouped and classified in accordance with these new Regulations.

I. INFECTIVE AND PARASITIC DISEASES

1. Tuberculosis, respiratory	87
2. Tuberculosis, other	11
3. Syphilitic disease	7
4. Diphtheria	—
5. Whooping cough	1
6. Meningococcal infections	4
7. Acute poliomyelitis	8
8. Measles	3
9. Other infective and parasitic diseases	14

II. NEOPLASMS

10. Malignant neoplasm, stomach	90
11. Malignant neoplasm, lung, bronchus	74
12. Malignant neoplasm, breast	60
13. Malignant neoplasm, uterus	28
14. Other malignant and lymphatic neoplasms	307
15. Leukæmia, aleukæmia	11

III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC, AND NUTRITIONAL DISEASES

16. Diabetes	22
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VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS

17. Vascular lesions of the nervous system	473
--	-----

VII. DISEASES OF THE CIRCULATORY SYSTEM

18. Coronary disease, angina	382
19. Hypertension with heart disease	100
20. Other heart disease	755
21. Other circulatory disease	140

VIII. DISEASES OF THE RESPIRATORY SYSTEM

22. Influenza	12
23. Pneumonia	90
24. Bronchitis	147
25. Other diseases of the respiratory system	34

IX. DISEASES OF THE DIGESTIVE SYSTEM

26. Ulcer of stomach and duodenum	39
27. Gastritis, enteritis and diarrhoea	19

X. DISEASES OF THE GENITO-URINARY SYSTEM

28. Nephritis and nephrosis	43
29. Hyperplasia of prostate	27

XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM

30. Pregnancy, childbirth, abortion	7
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XIV. CONGENITAL MALFORMATIONS

31. Congenital malformations	32
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XVI. SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS

32. Other defined and ill-defined diseases	416
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XVII. ACCIDENTS, POISONINGS AND VIOLENCE

33. Motor vehicle accidents	34
34. All other accidents	61
35. Suicide	33
36. Homicide and operations of war	4

DEATHS (all causes and all ages)

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1941 ..	1,795	11.54	1,847	10.68	3,642	10.99	12.9
1942 ..	1,569	10.45	1,730	10.30	3,299	10.37	11.6
1943 ..	1,657	11.28	1,868	11.31	3,525	11.29	12.1
1944 ..	1,608	11.00	1,862	11.35	3,470	11.18	11.6
1945 ..	1,582	10.90	1,831	11.26	3,413	11.09	11.4
1946 ..	1,641	10.87	1,761	10.47	3,402	10.66	11.5
1947 ..	1,798	11.64	1,894	10.96	3,692	11.28	12.0
1948 ..	1,569	9.87	1,732	9.69	3,301	9.77	10.8
1949 ..	1,731	10.79	1,923	10.58	3,654	10.68	11.7
1950 ..	1,739	10.62	1,836	9.98	3,575	10.28	11.6

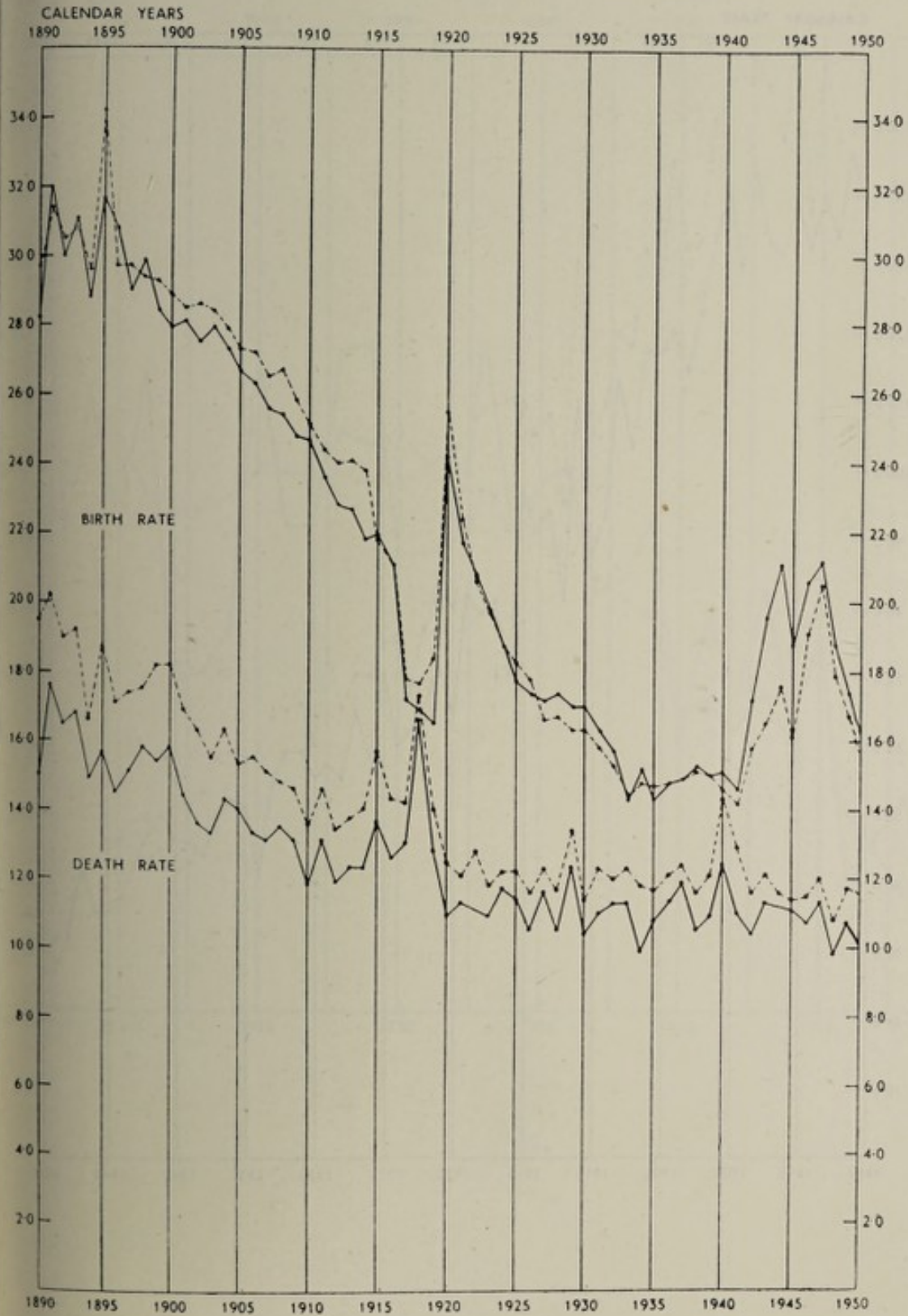
The following table gives the age groups in which the deaths occurred.

Age group (years)	Number of deaths	Percentage
0—	152	4.3
1—	28	0.8
5—	23	0.6
15—	40	1.1
25—	202	5.6
45—	742	20.8
65—	947	26.5
75—	1,441	40.3

BIRTHS AND DEATHS

Annual Birth and Death Rates per Thousand Population

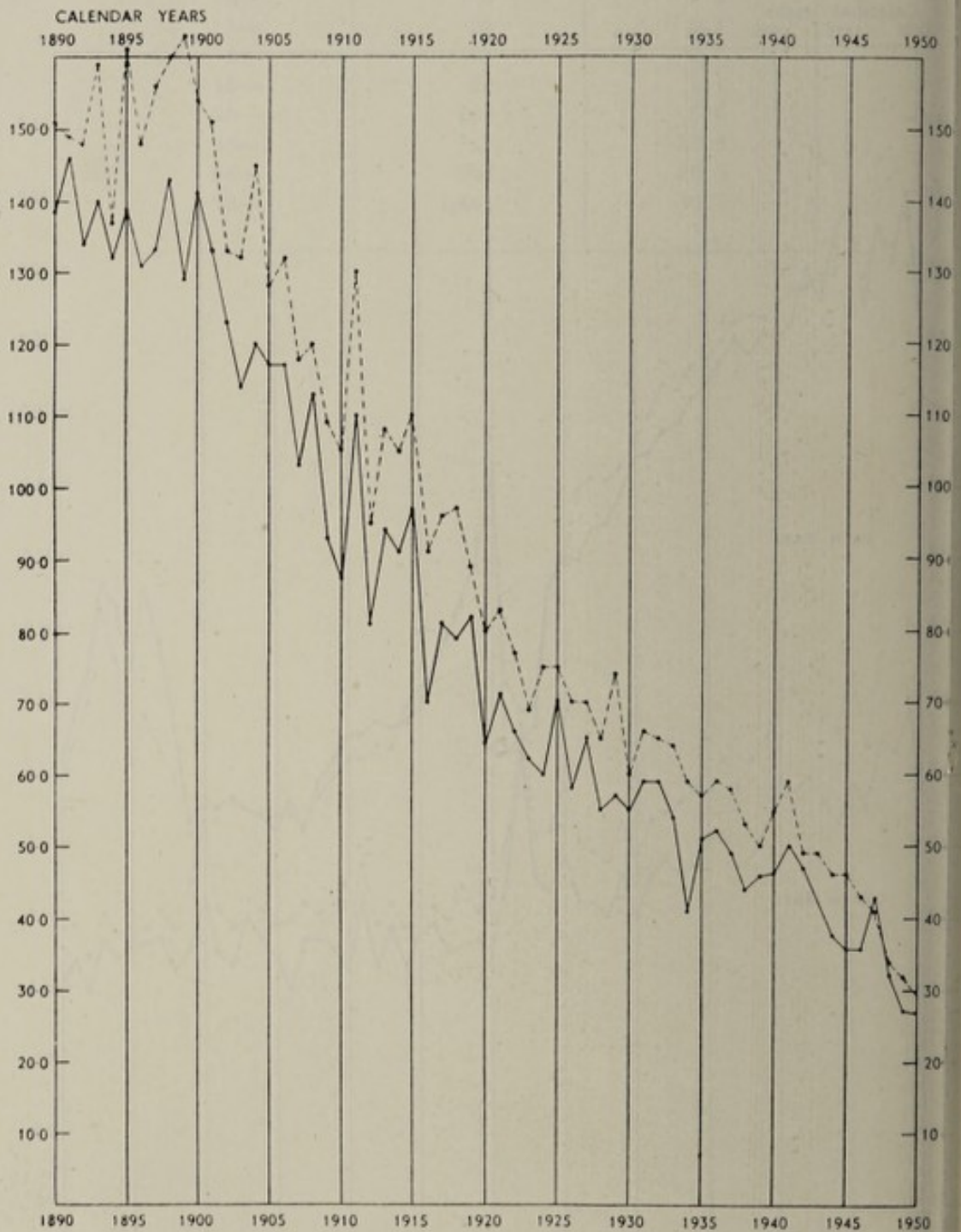
LEICESTERSHIRE ——— ENGLAND AND WALES - - - - -



INFANT MORTALITY

Annual Death Rate per Thousand Live Births

LEICESTERSHIRE — ENGLAND AND WALES - - - -



MATERNAL MORTALITY

Annual Death Rate per Thousand Live and Still Births

LEICESTERSHIRE — ENGLAND AND WALES - - - -

CALENDAR YEARS

1915

1920

1925

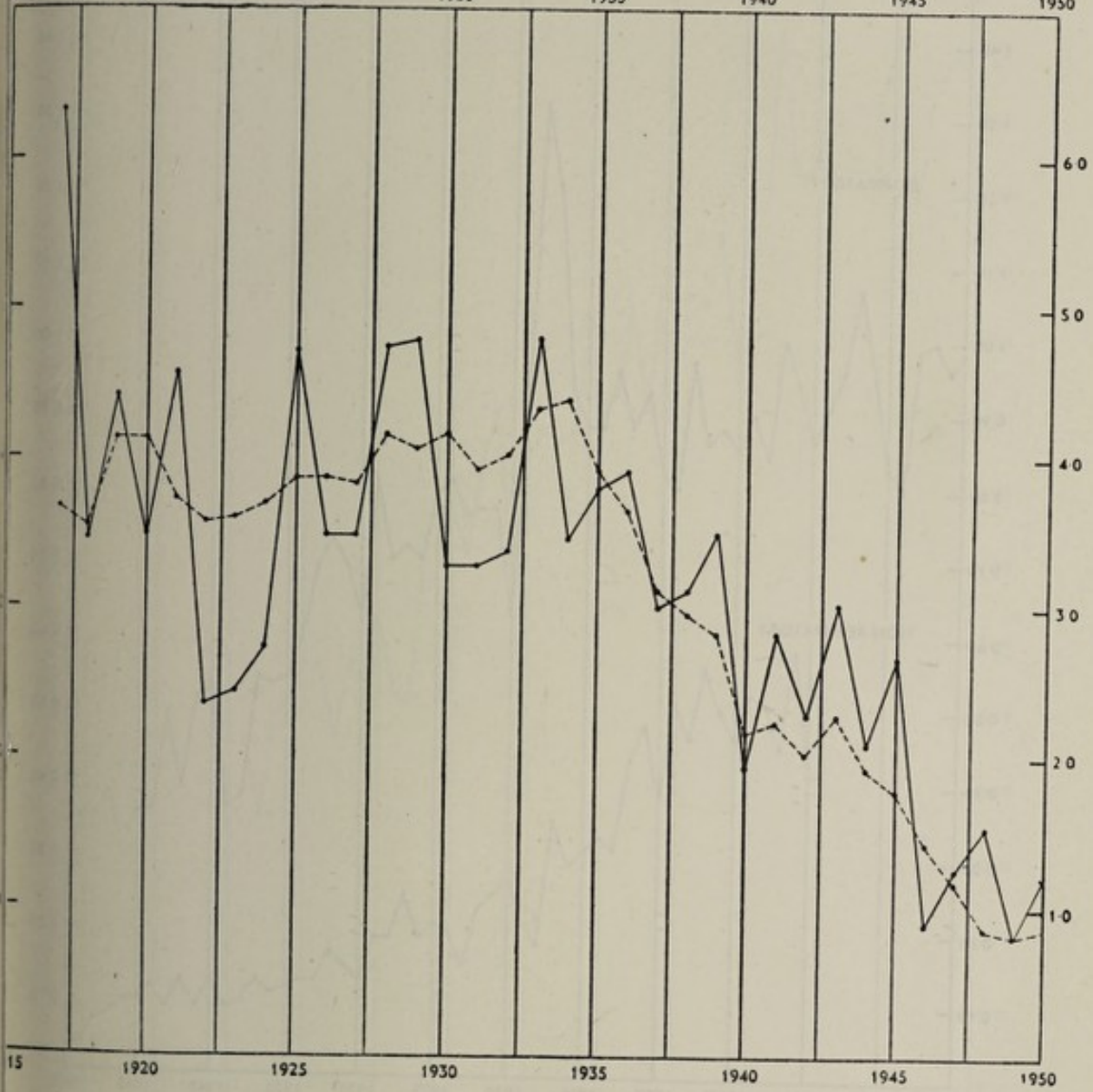
1930

1935

1940

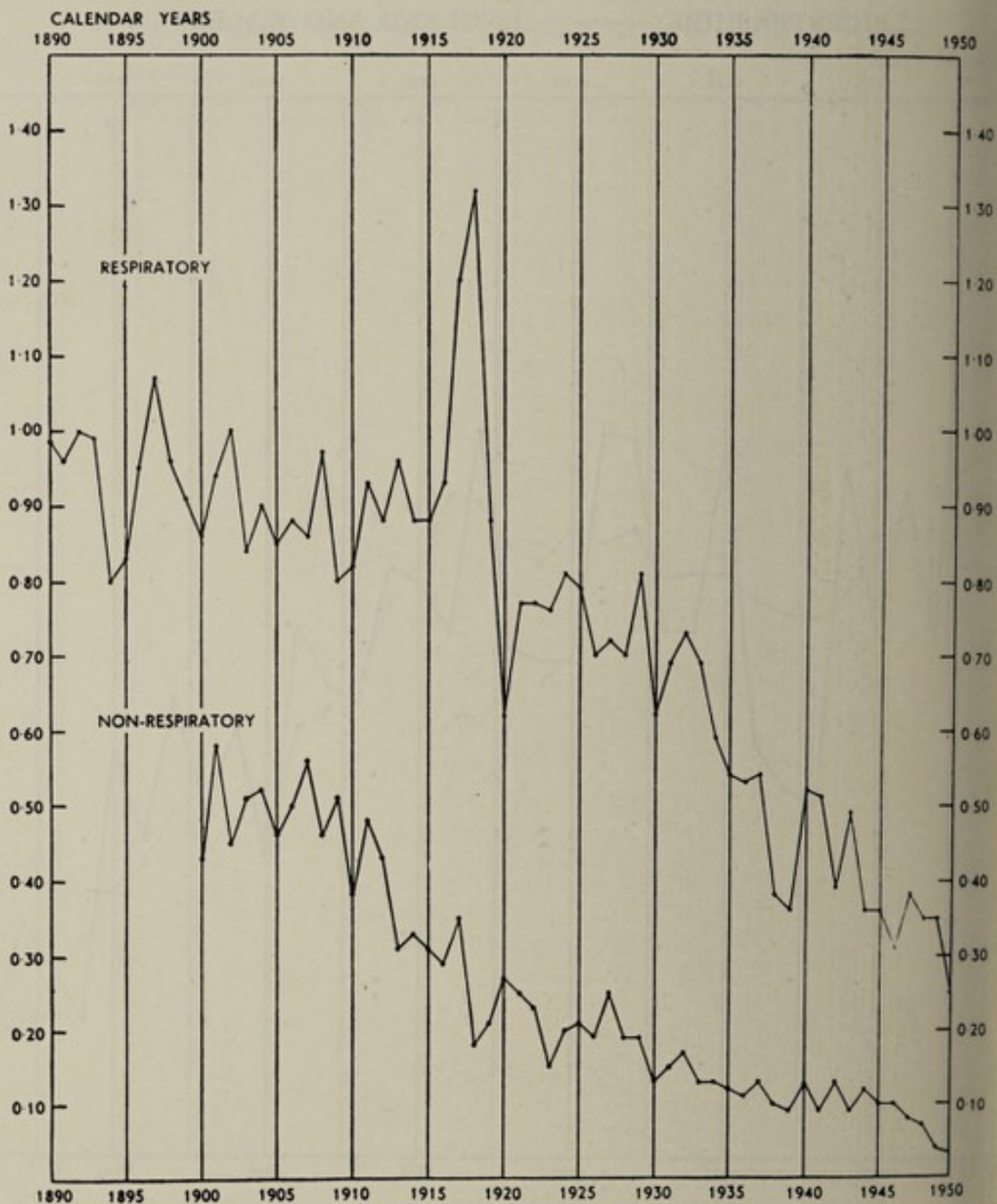
1945

1950



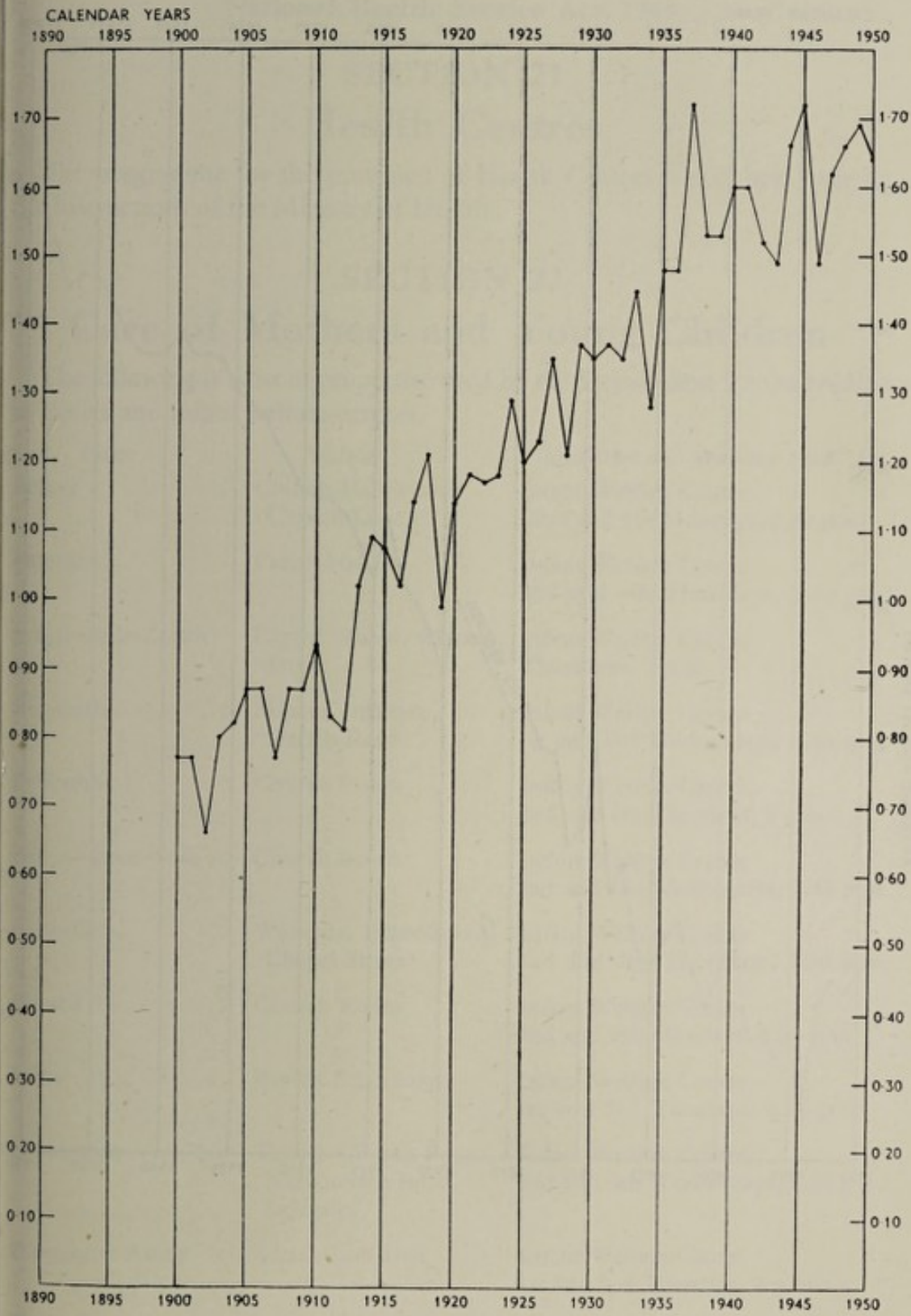
TUBERCULOSIS

Annual Death Rates per Thousand Population



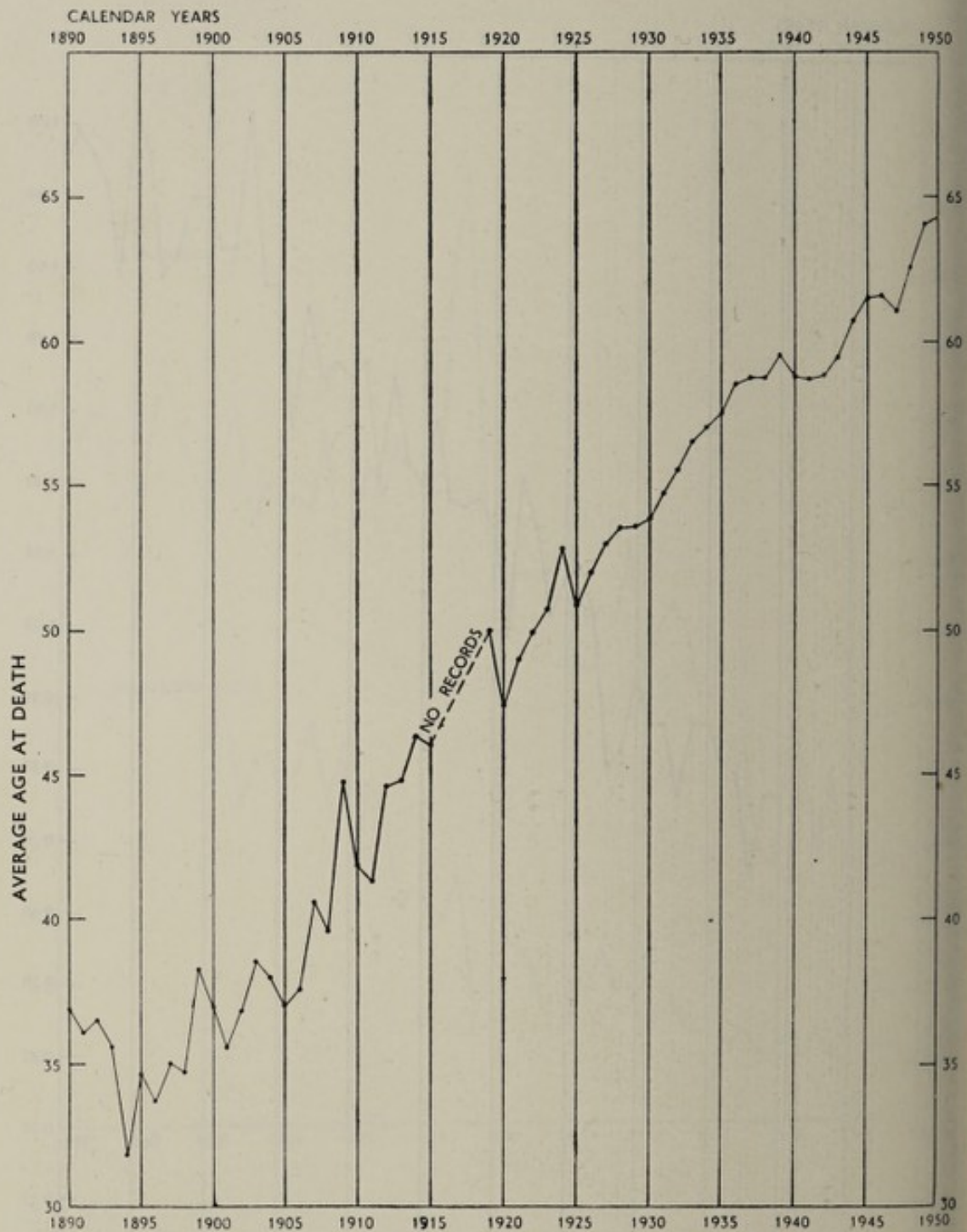
CANCER

Annual Death Rate per Thousand Population



AVERAGE AGE AT DEATH

Calculated on Deaths in Age Groups



GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

National Health Service Act, 1946

SECTION 21 Health Centres

The programme for the provision of Health Centres is still held over on the instructions of the Ministry of Health.

SECTION 22 Care of Mothers and Young Children

The following is a list of properties used by the Department for the holding of clinics and infant welfare centres.

Place	Address	Activities and Sessions held
Anstey	Church Hall, Church Lane	Infant Welfare Centre 2nd and 4th Mondays, 2.30 p.m.
Asfordby	Parish Hall	Infant Welfare Centre 2nd and 4th Thursdays, 2.30 p.m.
Ashby-de-la-Zouch	Baptist Room, Market Street	Infant Welfare Centre Thursdays, 2 p.m.
Bagworth	Miners' Institute, Station Road	Infant Welfare Centre 1st and 3rd Wednesdays, 2.30 p.m.
Barlestone	Church Room	Infant Welfare Centre 2nd and 4th Tuesdays, 2 p.m.
Barrow-upon-Soar ..	Church Room	Infant Welfare Centre 2nd and 4th Wednesdays, 2.45 p.m.
Barwell	Wesleyan Schoolroom, Chapel Street	Infant Welfare Centre 2nd and 4th Thursdays, 2.30 p.m.
Birstall	Church Room	Infant Welfare Centre 2nd and 4th Mondays, 2.30 p.m.
Blaby	Baptist Schoolroom ..	Infant Welfare Centre 1st and 3rd Tuesdays, 2.15 p.m.
Braunstone	Trinity Church Room, Narborough Road, Leicester	Infant Welfare Centre 2nd and 4th Wednesdays, 2.30 p.m.
Broughton Astley ..	Social Club Hall	Infant Welfare Centre 1st and 3rd Tuesdays, 2 p.m.
Burbage	Methodist Church Schoolroom, Windsor Street	Infant Welfare Centre 2nd and 4th Thursdays, 2 p.m.

Place	Address	Activities and Sessions held
Castle Donington ..	Methodist Church Room	Infant Welfare Centre 1st and 3rd Mondays, 2 p.m.
Coalville ..	*Health Clinic, Bridge Road	School Clinic Mondays, 9.30 a.m. to 12 noon Thursdays, 1.30 p.m. to 4 p.m. Dental Clinic Saturday mornings by appointment Ante-natal Clinic Tuesdays, 9.30 a.m. Orthopædic Clinic Mondays and Wednesdays, 2 p.m. Chest Clinic Fridays, 9.30 a.m. to 1.30 p.m. Infant Welfare Centre Tuesdays, 2.30 p.m.
Cosby ..	Methodist Schoolroom	Infant Welfare Centre 1st and 3rd Wednesdays, 2.30 p.m.
Desford ..	Village Institute ..	Infant Welfare Centre 1st and 3rd Tuesdays, 2 p.m.
Donisthorpe and Moira ..	Centenary Methodist Church, Donisthorpe Road, Moira	Infant Welfare Centre 2nd and 4th Thursdays, 2 p.m.
Earl Shilton ..	Adult Schoolroom ..	Infant Welfare Centre 1st and 3rd Thursdays, 2.30 p.m.
Enderby ..	Mission Room ..	Infant Welfare Centre 1st and 3rd Wednesdays, 2 p.m.
Glenfield ..	Wesleyan Rooms ..	Infant Welfare Centre 2nd and 4th Tuesdays, 2.30 p.m.
Hathern ..	Village Hall ..	Infant Welfare Centre Alternate Wednesdays, 2 p.m.
Hinckley ..	*Health Clinic, The Lawns	School Clinic Saturdays, 9.30 a.m. to 12 noon Ante-natal Clinic Mondays, 2 p.m. ; 1st, 3rd and 5th Thursdays, 2 p.m. Orthopædic Clinic Wednesdays and Fridays, 10 a.m. Chest Clinic Mondays and Thursdays, 9.30 a.m. to 1.30 p.m. Infant Welfare Centre Tuesdays and Wednesdays, 2.30 p.m.
Houghton-on-the-Hill	Village Hall ..	Infant Welfare Centre 1st and 3rd Mondays, 2 p.m.

Place	Address	Activities and Sessions held
Hugglescote	Baptist Room	Infant Welfare Centre 2nd and 4th Mondays, 2.30 p.m.
Ibstock	Baptist Chapel Schoolroom	Infant Welfare Centre 2nd and 4th Thursdays, 2.30 p.m.
Kegworth	Wesleyan Schoolroom, High Street	Infant Welfare Centre 2nd and 4th Wednesdays, 2.30 p.m.
Kibworth	Village Hall	Infant Welfare Centre 2nd and 4th Wednesdays, 2.30 p.m.
Leicester	*8 St. Martins	Dental Clinic Saturday mornings by appointment Chest Clinic Mondays, 9 a.m. to 1.30 p.m. Wednesdays, 1.30 p.m. to 5 p.m. Thursdays, 9 a.m. to 1.30 p.m. General Clinic as necessary by appointment
Leicester Forest East	St. Mary's Hall, St. Mary's Avenue, Braunstone Lane	Infant Welfare Centre 1st and 3rd Mondays, 2 p.m.
Long Clawson	Methodist Church Schoolroom	Infant Welfare Centre 1st and 3rd Thursdays, 2 p.m.
Loughborough	*Lemyngton Street	Dental Clinic Frequent sessions by appointment Ante-natal Clinic Wednesdays, 2 p.m. Infant Welfare Centre Tuesdays, Thursdays and Fridays, 2 p.m.
	*"Ashmount", Bridge Street	Chest Clinic Tuesdays, 1.30 p.m. to 4 p.m. Alternate Tuesdays, 10 a.m. to 12 noon Thursdays, 9.30 a.m. to 1.30 p.m.
	*Bridge Street	School Clinic. Daily, 9.30 a.m. Dental Clinic Frequent sessions by appointment
Lutterworth	Church Hall, Coventry Road	Infant Welfare Centre 1st and 3rd Thursdays, 2.30 p.m.
Market Bosworth	St. Peter's Hall	Infant Welfare Centre 1st and 3rd Tuesdays, 2 p.m.
Market Harborough	Welland House, The Square	Ante-natal Clinic 1st and 3rd Mondays, 2.30 p.m. Infant Welfare Centre Wednesdays, 2.30 p.m.

Place	Address	Activities and Sessions held
Market Harborough —continued	*Welland Park Modern School	School Clinic Fridays, 9.30 a.m. to 12 noon
Markfield	Miners' Institute ..	Infant Welfare Centre 1st and 3rd Thursdays, 2 p.m.
Melton Mowbray ..	*Health Clinic, Asfordby Road	School Clinic Wednesdays, 9.30 a.m. to 12 noon Dental Clinic Saturday mornings by appointment Chest Clinic Tuesdays, 10 a.m. to 1.30 p.m. Infant Welfare Centre Wednesdays, 2 p.m.
Mountsorrel ..	Reading Room ..	Infant Welfare Centre 1st and 3rd Tuesdays, 2.30 p.m.
Narborough ..	Robjohn Hall ..	Infant Welfare Centre 2nd and 4th Wednesdays, 2 p.m.
Oadby	Baptist Schoolroom ..	Infant Welfare Centre 1st and 3rd Wednesdays, 2.45 p.m.
Quorn	Church Rooms ..	Infant Welfare Centre 1st and 3rd Wednesdays, 2.30 p.m.
Rearsby	Village Hall ..	Infant Welfare Centre 1st and 3rd Tuesdays, 2.30 p.m.
Rothley	Village Hall ..	Infant Welfare Centre 1st and 3rd Mondays, 2.30 p.m.
Scraptoft	Village Institute ..	Infant Welfare Centre 2nd and 4th Wednesdays, 2.30 p.m.
Shelthorpe ..	Old Isolation Hospital	Infant Welfare Centre Mondays and Wednesdays, 2 p.m.
Shepshed	Adult School, 50 Forest Road	Infant Welfare Centre 2nd and 4th Wednesdays, 2.30 p.m.
Sileby	The Institute, Cossington Road	Infant Welfare Centre 1st and 3rd Tuesdays, 2.15 p.m.
South Wigston ..	*Health Clinic, Countesthorpe Road	School Clinic Mondays and Thursdays, 9.30 a.m. to 12 noon Ante-natal Clinic Fridays 2 p.m. Infant Welfare Centre 2nd and 4th Tuesdays, 2 p.m. Wigston (Central) Infant Welfare Centre 2nd and 4th Wednesdays, 2 p.m.
Stoney Stanton ..	Working Men's Club and Institute	Infant Welfare Centre 2nd and 4th Tuesdays, 2 p.m.

Place	Address	Activities and Sessions held
System ..	Red Cross Hall ..	Infant Welfare Centre Mondays, 2.30 p.m.
Thurcaston ..	Village Memorial Hall	Infant Welfare Centre 1st and 3rd Wednesdays, 2 p.m.
Thurmaston ..	Bethel Methodist .. Church Room ..	Infant Welfare Centre 2nd and 4th Tuesdays, 2.30 p.m.
Whetstone ..	Congregational School- room	Infant Welfare Centre 2nd and 4th Tuesdays, 2.30 p.m.
Whitwick ..	Primitive Methodist Schoolroom	Infant Welfare Centre Mondays, 2.30 p.m.
Wigston Magna ..	Methodist Church Rooms, Moat Street	Infant Welfare Centre 2nd and 4th Thursdays, 2.30 p.m.

*Denotes premises owned by County Council

Ante-Natal Services

The work of the local authority ante-natal clinics has continued during the year as shown in the following table :

	Coalville	Hinckley	Lough- borough	Market Harborough	Melton Mowbray	Totals
(1) Number of sessions per month (approx.)	4½	6½	4½	2	4½	22
(2) No. of women attended :						
(a) ante-natal	79	301	96	48	112	636
(b) post-natal	9	60	7	—	20	96
(3) No. of women included in above who had not previously attended an ante-natal clinic during current pregnancy, or a post- natal clinic after last confine- ment :						
(a) ante-natal	67	235	77	1	83	463
(b) post-natal	9	60	7	—	20	96
(4) Total number of attendances made by women in (2) above :						
(a) ante-natal	298	1,091	335	350	470	2,544
(b) post-natal	11	66	10	—	20	107

Dental Treatment of Expectant and Nursing Mothers, and Pre-School Children

The Chief Dental Surgeon in his report states :

As foreshadowed in my report last year, the work for expectant and nursing mothers has of necessity been to all intents and purposes eliminated, although treatment was given to three patients during the year (16 extractions). No definite scheme for the treatment of pre-school children is in operation, but 47 children in this category, whose parents sought advice, were treated. There were 28 extractions and 32 fillings.

In the Loughborough area it was however possible to maintain a more satisfactory service, and the figures given below refer only to that area.

(a) Numbers provided with dental care :

	Examined	Needing Treatment	Treated	Made Dentally fit
Expectant and Nursing Mothers	1	1	1	1
Children under five . .	161	87	87	87

(b) Forms of dental treatment provided :

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	8	1	—	—	—	—	—	—	—	1
Children under five . .	118	—	68	49	—	66	63	—	—	—

Infant Welfare Centres

Two new centres were established at Barlestone and Thurcaston, making a total of 54 centres at the end of the year. In comparing the figures for 1950 and 1949 given below, allowance must be made for the lower birth-rate in 1950 as compared with the previous year.

Summary of Statistics

	Year 1949	Year 1950
Number of meetings	1,523	1,646
Mothers :		
Number on register	8,140	7,612
Number of attendances	70,126	67,043
Number attended for the first time	3,817	3,339
Babies under one year :		
Number on register	5,339	5,035
Number of attendances	43,653	40,947
Number attended for the first time	3,507	3,133
Number under one year at end of year	2,838	2,586
Toddlers :		
Number on register	5,242	5,209
Number of attendances	33,544	34,010
Number attended for the first time	816	625
Number under five years at end of year	4,950	4,985
Number of examinations by Medical Officers	8,779	7,822
Number of weighings by Health Visitors	75,265	72,217

Individual Infant Welfare Centres. Average Attendances per Meeting

Centre	Year 1949		Year 1950	
	Mothers	Children	Mothers	Children
Anstey	47.4	48.2	40.4	43.6
Asfordby	41.6	46.0	44.4	54.2
Ashby-de-la-Zouch	50.3	53.8	44.3	46.7
Bāgworth	28.3	29.2	23.4	24.2
Barlestone (opened 13.6.50)	—	—	33.2	36.1
Barrow-upon-Soar	26.1	29.9	21.5	24.6
Barwell	53.2	53.5	37.1	41.5
Birstall	52.6	56.6	57.9	61.9
Blaby	75.0	88.2	65.6	80.6
Braunstone	58.3	58.7	41.3	41.7
Broughton Astley	29.3	34.3	33.1	38.4
Burbage	52.9	57.7	36.6	37.7
Castle Donington	30.4	36.7	28.9	31.6
Coalville	33.1	33.6	35.8	36.5
Cosby	38.0	39.1	28.6	33.9
Desford	61.4	68.1	57.1	67.9
Donisthorpe and Moira	38.8	40.3	24.1	25.1
Earl Shilton	59.4	65.9	54.2	59.4
Enderby	23.8	25.6	24.2	27.1
Glenfield	58.7	61.7	56.8	61.6

(Table continued overleaf)

continued

Centre	Year 1949		Year 1950	
	Mothers	Children	Mothers	Children
Hathern	22.9	26.0	25.0	34.1
Hinckley	66.7	67.8	53.5	55.3
Houghton-on-the-Hill ..	17.0	18.2	11.0	11.9
Hugglescote	17.8	20.6	16.9	19.9
Ibstock	36.4	37.0	35.9	37.1
Kegworth	26.7	31.1	23.3	27.4
Kibworth	23.1	27.9	21.4	23.9
Leicester Forest East ..	44.3	47.6	48.5	50.2
Long Clawson	14.0	18.5	19.6	27.9
Loughborough	62.2	74.0	53.6	66.5
Lutterworth	44.7	53.2	40.2	47.4
Market Bosworth	9.4	9.6	14.1	16.5
Market Harborough	35.7	38.0	44.5	45.6
Markfield	23.6	24.4	29.0	30.7
Melton Mowbray	61.9	67.3	48.2	50.8
Mountsorrel	41.8	44.3	29.7	32.1
Narborough	65.4	69.8	62.7	66.6
Oadby	41.8	44.0	32.3	34.8
Quorn	38.9	42.5	36.1	42.1
Rearsby	26.1	29.8	22.7	23.2
Rothley	35.3	39.4	39.7	43.7
Scraptoft	18.3	20.2	21.0	22.2
Shelthorpe	39.3	51.3	40.4	50.0
Shepshed	54.5	57.8	56.3	61.9
Sileby	76.6	88.9	84.2	98.2
South Wigston	53.3	54.1	51.3	58.0
Stoney Stanton	53.1	61.2	51.9	57.9
Syston	33.7	35.8	41.9	44.2
Thurcaston (opened 6.9.50) ..	—	—	19.3	20.7
Thurmaston	32.8	35.8	25.2	26.6
Whetstone	37.5	40.3	32.0	32.6
Whitwick	42.0	44.8	35.0	37.9
Wigston Magna	67.5	70.8	53.8	57.8
Wigston (Central)	62.1	63.8	57.2	62.2

The Domiciliary Care of Premature Infants

A separate record is kept of all children weighing $5\frac{1}{2}$ lb. or less notified under the notification of births to this Office. All such children born at home or in a maternity home are referred immediately to the health visitors so that, if necessary, advice can be given, or special treatment arranged.

The following is a record of cases during the year :

Number of premature infants notified during the year (including transferred notifications) whose mothers normally reside in the Authority's area :

(i) Born at home	147
(ii) Born in hospital or nursing home	220

Premature babies born in the area (whether their mothers normally reside in the area or not), but excluding babies born in maternity homes and hospitals in the National Health Service :

(i) Born at home	.. .. .	149
(ii) Born in private nursing homes	.. .. .	34

These latter cases are summarised as follows :

TABLE I. Babies born at home

	Transferred to hospital	Nursed entirely at home					Grand Total
		Died in first 24 hrs.	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	Total	
Under 3 lb.	4	4	-	-	-	4	8
3-4 lb. ..	8	1	-	-	3	4	12
4-5½ lb. ...	13	4	-	2	110	116	129
Totals ..	25	9	-	2	113	124	149

TABLE II. Babies born in private Nursing Homes

	Transferred to hospital	Nursed entirely at home					Grand Total
		Died in first 24 hrs.	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	Total	
Under 3 lb.	-	2	-	-	1	3	3
3-4 lb. ...	-	2	-	-	3	5	5
4-5½ lb. ...	1	1	2	-	22	25	26
Totals ..	1	5	2	-	26	33	34

The following table gives the results of the total of 26 cases in the previous tables recorded as transferred to hospital.

	Died in first 24 hours	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	Total
Under 3 lb. ..	2	-	-	2	4
3-4 lb. ..	-	-	1	7	8
4-5½ lb. ...	-	2	-	12	14
Totals ..	2	2	1	21	26

During the year it was decided to implement more fully the scheme for the domiciliary care of premature infants, but it was not possible to commence the fuller service immediately because of the delay in the delivery of the necessary equipment.

In preparing the scheme, much valuable advice and assistance was received from the Matron of the Sorrento Nursing Home at Birmingham, the Medical Officer and Staff of the Newcastle-upon-Tyne Public Health Department, and the Newcastle General Hospital.

Provision is made for the free loan of a "Sorrento" pattern cot with two sets of linen, hot water bottles, children's vests and nightdresses, and sundry items of nursing equipment. This equipment is stored at a central ambulance depot, for despatch where necessary by ambulance.

The co-operation of the paediatricians in the County was readily forthcoming, and arrangements were made for a lecture to be given to all midwives on the care of premature infants.

Specially selected midwives were invited to apply for special training in the care of premature infants and, subsequently, two received training at the Newcastle-upon-Tyne General Hospital and the Newcastle Health Department.

Where the condition of a child needs more specialised care and attention than the district midwife can possibly give, arrangements exist whereby the specially trained midwife can be taken off her district to devote all her time to the particular case until the need no longer arises.

The Care of Illegitimate Children

The following table shows the illegitimacy rates for the last ten years.

Year	Total live births	Illegitimate live births	Illegitimate live birth rate
1941 ..	4,802	198	41.2
1942 ..	5,508	240	43.6
1943 ..	6,102	320	52.4
1944 ..	6,536	385	58.9
1945 ..	5,783	532	92.0
1946 ..	6,563	383	58.4
1947 ..	6,948	324	46.6
1948 ..	6,363	297	46.6
1949 ..	5,936	226	38.1
1950 ..	5,624	209	35.7

Particular attention is paid by the Department to the care of illegitimate children of whom special records are kept, built up from the notifications of

births. Cases found to be in need of care and attention are referred to the Children's Officer or to the Leicester Diocesan Moral Welfare Association. An annual grant is made to this Association for such services, and last year 113 new cases were dealt with consisting of 84 expectant mothers and 29 mothers with children.

Unmarried Mothers and their Children

An agreement exists with the St. Saviour's Diocesan Maternity Home, Kingsthorpe, Northampton, for the reception of unmarried mothers from this County. In some cases, for various reasons, it is found necessary to send cases to other Homes.

During the year cases were admitted as follows :

St. Saviour's Home, Northampton	22
Glentworth Hostel, Stafford	1
Mother and Baby Home, Derby	1
Mother and Baby Home, Barnet	1

Orthopaedic Treatment

Cases requiring orthopaedic treatment or investigation are referred to four main clinics where specialist staff is provided by the Regional Hospital Board ; other staff being provided by the County Council. The following is a record of the work during the year, but it should be remembered that many cases are dealt with at the Leicester Royal Infirmary or other hospitals, and do not come to the notice of the Health Department.

Clinic attended	No. of children	Total No. of attendances	No. of appliances supplied
Coalville ..	131	810	20
Hinckley ..	151	715	22
Leicester ..	140	460	43
Loughborough ..	379	561	30

Eye Treatment

Children are referred to the School Oculist, and prescriptions are dealt with by the Ophthalmic Service of the Local Executive Council.

Convalescent Home Treatment

During the year one child aged three years was admitted to the Roecliffe Manor Convalescent Home, Woodhouse Eaves.

Day Nurseries

Details of attendances at the County Day Nurseries are as follows :

	Hinckley	Lough- borough	Market H'boro'	South Wigston	Syston	Totals
No. of approved places:						
0—2 years ..	15	15	15	15	15	75
2—5 years ..	25	35	25	25	25	135
No. of children on register, 31st Dec., 1950 :						
0—2 years ..	14	9	14	13	13	63
2—5 years ..	29	43	31	29	31	163
Average daily attendances :						
0—2 years ..	5.5	11.0	8.8	11.5	12.7	49.5
2—5 years ..	34.8	24.8	27.5	24.0	27.3	138.4

Maternity Outfits

Maternity outfits can be collected from a number of depots in the County, or from this Department. During the year 2,587 were issued.

Birth Control

The arrangement continued for the reference of county patients to the Leicester City Birth Control Clinic. The number of cases referred during the year was 112.

General Child Neglect

A joint circular (78/50 of the Ministry of Health) issued in July, 1950, by the Home Office, Ministry of Health, and Ministry of Education, pointed out that there were a large number of agencies, statutory and voluntary, connected with neglect and ill-treatment of children in their own home, and made certain suggestions as to the method of securing co-operation and avoiding overlapping. It was, however, considered that the only possible way of dealing with this admittedly difficult problem is close personal contact in each locality between the various people actually working in the field.

There is, of course, a great amount of educative and preventive work regularly being undertaken by many agencies, and in this work health visitors have a prominent part to play. An annual grant is made to the National Society for the Prevention of Cruelty to Children, to whom some cases are referred, and it is perhaps worth while emphasising that this organisation regards the educative and preventive side of its work as most important.

SECTION 23

Midwifery

The midwifery service in the County is provided by whole-time midwives employed by the County Council, and also by nurse-midwives who are employed by the Leicestershire County Nursing Association under agency arrangements.

Number of Midwives Practising

175 midwives notified their intention to practise in the county, as compared with 178 in the year 1949.

Particulars of the midwives who were practising at 31st December, 1950, are given in the following table :

	Domiciliary Midwives	Midwives in Institutions	Total
(a) Midwives employed by the authority	14	—	14
(b) Midwives employed by Voluntary Organisations :			
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act	86	—	86
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	2	—	2
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	27	27
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	19	13	32
Totals	121	40	161

Number of cases attended

The following table gives details of cases attended by midwives during the year :

	Domiciliary Cases		Cases in Institutions		Total	
	As Mid-wives	As Mater-nity Nurses	As Mid-wives	As Mater-nity Nurses	As Mid-wives	As Mater-nity Nurses
(1) Midwives employed by the Authority	476	217	—	—	476	217
(2) Midwives employed by Voluntary Organisations :						
(a) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act)	1,261	441	—	—	1,261	441
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ..	18	5	—	75	18	80
(3) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	1,105	510	1,105	510
(4) Midwives in Private Practice (including Midwives employed in Nursing Homes)	60	57	139	326	199	383
Totals	1,815	720	1,244	911	3,059	1,631

Administration of Analgesics

Midwives, by taking a training course, may qualify to administer analgesics during labour, and at the end of the year 87 out of the 100 midwives employed either by the County Council or the County Nursing Association, were so qualified. During the year, 1,737 domiciliary cases were attended by these midwives (acting as midwives, not as maternity nurses), and of these, 851 cases received analgesia. The following table gives particulars of this branch of the service for the year 1950 :

Mother :

Miscarriage, or danger of	12
Abortion, or danger of	10
Albuminuria	7
Difficult labour	55
Malpresentation	18
Ante-partum hæmorrhage	21
Ruptured perineum	164
Post-partum hæmorrhage	28
Adherent placenta	14
Raised temperature	23

Child :

Discharge from eyes	18
Prematurity	9
Abnormalities	12
Feebleness	11

Infectious Diseases (Midwifery)

Cases of ophthalmia neonatorum, pemphigus neonatorum, and puerperal pyrexia are required to be notified by both medical practitioners and midwives and a close check is kept in the Department between the weekly records of the Notifications of Infectious Diseases from the District Medical Officers of Health and the notifications from the midwives under the Rules of the Central Midwives Board, so that no case shall fail to receive proper attention.

Particulars of cases notified during the year are set out in the following table :

	Ophthalmia Neonatorum		Pemphigus Neonatorum		Puerperal Pyrexia	
	Domi-ciliary confinements	Institu-tional confinements	Domi-ciliary confinements	Institu-tional confinements	Domi-ciliary confinements	Institu-tional confinements
No. of cases notified during the year ..	2	1	-	-	10	6
Number of cases removed to hospitals	1	-				

Number of cases of Ophthalmia Neonatorum notified during the year, in which :

(a) Vision was unimpaired	3
(b) Vision was impaired	-
(c) Vision was lost	-
(d) The patient died	-
(e) The patient was still under treatment at the end of the year	-
(f) The patient removed from the district	-
Total cases	<u>3</u>

The following is a year-by-year record of Ophthalmia Neonatorum notifications in this County since the year 1917, and it is obvious from even a brief glance that a considerable advance has been achieved in the reduction of this very dangerous threat to infant health. This improvement is mainly due to the availability of new drugs and consequent progress in methods of treatment.

Year	No.	Year	No.	Year	No.	Year	No.
1917	.. 14	1926	.. 21	1935	.. 11	1944	.. 10
1918	.. 6	1927	.. 21	1936	.. 12	1945	.. 4
1919	.. 27	1928	.. 18	1937	.. 20	1946	.. 7
1920	.. 30	1929	.. 16	1938	.. 15	1947	.. 7
1921	.. 16	1930	.. 17	1939	.. 4	1948	.. 2
1922	.. 26	1931	.. 24	1940	.. 11	1949	.. 3
1923	.. 22	1932	.. 15	1941	.. 18	1950	.. 3
1924	.. 25	1933	.. 15	1942	.. 7		
1925	.. 22	1934	.. 15	1943	.. 9		

Inspection of Midwives

Officers employed by the Leicestershire County Nursing Association, who act under the administrative control of the County Medical Officer, carry out the inspection of midwives and the following is a record of such inspections made during the year under review.

	Nurse Midwives	County Council Midwives	Independent Midwives
Number of routine inspections . .	296	53	67
Number of special inspections . .	33	6	1

Transport for Midwives

The Council has continued to provide motor cars both for whole-time midwives employed directly by the County Council and for nurse-midwives employed by the Leicestershire County Nursing Association, but only in cases where transport has been considered essential to enable midwives to discharge their duties in an efficient manner. The Ministry of Health, under Circular 21/49, has afforded the necessary priority of delivery of these motor cars.

The following shows the disposition, at the end of the year, of cars and autocycles used in the nursing and midwifery services :

Motor Cars :			
Owned by the County Council	..	..	30
Owned by the Leicestershire County Nursing Association			7
Owned by the District Nursing Associations	..	..	5
Owned by the District Nurse-Midwives	..	..	9
Owned by the County Council Midwives	..	..	3
			<u>54</u>
Auto-cycles :			
Owned by the County Council	..	..	4
Owned by the District Nursing Associations	..	..	6
Owned by the County Council Midwives	..	..	1
			<u>11</u>

SECTION 24

Health Visiting

The following is a record of the work during the year, but it is impossible to detail every aspect of the work :

Notification of Births :					
First visits	..	..	..	..	6,322
Subsequent visits	..	..	..	..	30,683
Special visits	..	..	..	..	1,319
Children 1—5 years	..	..	..	..	62,529
Illegitimate children	..	..	..	..	1,171
Premature children	..	..	..	..	526
Stillbirths	..	..	..	..	146
Pre-natal visits :					
First visits	..	..	..	..	1,348
Subsequent visits	..	..	..	..	1,129
Post-natal visits	..	..	..	..	91
Unmarried mothers	..	..	..	..	228
Immunisation (diphtheria)	..	..	..	..	2,800
Vaccination (smallpox)	..	..	..	..	853
Prevention of illness :					
Tuberculosis—					
First visits	..	..	..	..	353
Subsequent visits	..	..	..	..	3,143
Other diseases—					
Total visits	..	..	..	..	186
Special visits	..	..	..	..	184
Attendances at :					
Infant Welfare Centres	..	..	..	..	1,926
Ante-natal clinics	..	..	..	..	280
Chest clinics	..	..	..	..	411
Orthopædic clinics	..	..	..	..	156

At the end of the year the Health Visiting Staff consisted of the Superintendent and her Deputy and 32 Health Visitors. I am glad to be able to record that recruiting prospects show a considerable improvement.

The work of the Health Visitor is extremely important and its scope has been much increased by the National Health Service Act, 1946, which states their function as being : “for the purpose of giving advice as to the care of young persons, persons suffering from illness, and expectant and nursing mothers, and as to the measures necessary to prevent the spread of infection.” It will be realised from that definition that the duties are manifold, but it will also be realised that they are essentially directed to advising and teaching the essentials of child care and other health subjects. Health Visitors, in fact, undertake many miscellaneous duties, and it is right that their unique knowledge of their area and their personal and professional qualities should be utilised to the full : it is, however, important to bear in mind that their prime duty is “health education” and not to allow their other most useful medico-

social activities to push their preventive and educational work into the background.

There are definite regulations which lay down the qualifications and training of Health Visitors. All our Health Visitors are fully-trained nurses who, in addition to their general training, hold either the whole or Part I of the Central Midwives' Board Certificate, and also have taken the special Health Visitors' training course, and hold the Health Visitors' Certificate. It will be seen that to secure those qualifications, a Health Visitor must have spent something like five to six years in training alone. In addition, of course, it is normal for some time to be spent as a trained nurse in practice in hospital or district. Not only does this add to the value of the training received but it ensures that she is a mature and experienced person, who has seen something of the world and human nature in times of stress.

Like so much work now undertaken by trained staff working under a statutory authority, this work was started by voluntary effort. For example, the Ladies' Manchester and Salford Sanitary Association, which employed Health Visitors as early as 1862, was recognised by the Corporation in 1890; while there were a number of similar organisations with the same purpose started at a later date, such as the Hastings and St. Leonards Sanitary Aid Association. As time went on, a number of local authorities appointed health visitors, and began to lay down conditions of qualifications and training—the first visitors had varied greatly in their experience and training—and those conditions became standardised by various ministerial regulations, the Royal Sanitary Institute being a pioneer in instituting examinations. It is interesting to note that in 1892, through the influence of that remarkable person, Florence Nightingale, the North Bucks Committee for Technical Education (a committee of the Buckinghamshire County Council) set up a course of training for women who were afterwards employed in the area in this type of work. The appalling figures for infant mortality in those early days formed the chief reason for the start of this work, and although many factors have helped to bring the Infant Mortality Rate from over 150 deaths in the first year of life per 1,000 live births to under 30, Health Visitors can justifiably regard with pride their own part in this reduction. It may be noted that this County Council first appointed four Health Visitors in 1910.

One of the problems in this field is whether to appoint specialist workers for such subjects as school health service duties, tuberculosis, etc., or whether to adhere to the principle of "all purpose" Health Visitors, where each undertakes all the work in her own area. There are undoubted advantages in specialisation in such fields as tuberculosis, but there are also disadvantages. The all-purpose Health Visitor, working in a reasonably small district, can acquire an intimate knowledge of her "parishioners", is welcomed readily into the homes and can take an all-round view of the family problems as a whole. Also, one of the difficulties in these times is the number of people who may visit any one home for social work, and anything which has the result of

increasing the possible number should be viewed with caution. In rural areas, practical considerations alone make it essential to reduce the number of specialist visitors to a minimum, but quite apart from that I feel that there is a good case to be made out for the "all-purpose" type of appointment, although there can be exceptions.

We have departed from this principle in one instance, and have appointed a special Health Visitor for diabetic "care and after-care", on the lines of the scheme first started in Cardiff. This Health Visitor attends the special diabetic out-patient clinic at the Leicester Royal Infirmary in addition to her work in the patients' homes ; she thus acts as a valuable link between hospital and home. She is able to give information regarding the household to the doctor at the hospital, this information being very helpful when the question of treatment is considered. During her visit to the home, she is able to help the patient with problems of diet, etc., and deal with the practical difficulties of the home. She works in close co-operation with the family doctor, who receives copies of her reports to the hospital and who can utilise her services whether or not the patient is attending hospital. The scheme had only just started at the end of 1950, but the doctor in charge of the clinic is satisfied that the appointment is a very valuable one, enabling the patient to be brought under control more quickly and saving hospital beds.

Investigation of applications for admission to maternity hospitals

During the year 262 applications were investigated by the Health Visitors on behalf of Hospital Management Committees and were classified as follows :

Recommended for admission	..	..	..	214
Home conditions suitable for confinement	..	..	..	31
Advised to consult own doctor	..	..	..	9
Applications withdrawn	..	..	..	3
Left County	..	..	..	5

It will be realised that only cases for which admission on "Social" grounds is requested are dealt with—all cases where medical considerations are involved are in the province of the family doctor.

Domiciliary visits to hospital cases for "after-care" purposes

A few cases were referred from hospitals for special visits but work of this nature did not develop as might have been expected.

Investigation of application for "Chronic Sick" accommodation

The arrangements for the investigation of applications for admission to chronic sick accommodation were implemented during the year, and a total of 103 cases was dealt with.

Refresher Courses

Two Health Visitors attended a refresher course organised by the Royal College of Nursing.

SECTION 25

Home Nursing

This work is carried out by the Leicestershire County Nursing Association on behalf of the County Council. The greater part of the nursing staff also act as midwives under the District Nursing Associations.

The figures given below represent a vast amount of hard, unspectacular, but absolutely essential work by the nurses, and also a great deal of efficient and unobtrusive administrative activity by the Leicestershire County Nursing Association.

(1)	Number of Home Nurses employed at 31st December, 1950		Equivalent whole-time nursing service provided in Col. 3 (4)	Number of cases attended by Home Nurses during the year (5)	Number of visits paid by Home Nurses during the year (6)
	Whole-time on home nursing (2)	Part-time on home nursing (3)			
Voluntary Organisations by agreement with the Authority	15	87	54.4	8,623	204,379

SECTION 26

Vaccination against Smallpox and Immunisation against Diphtheria

The Council's Scheme continued to work very satisfactorily during the year. The Clinic held at the Health Department was also continued for the purpose of immunising patients where treatment was not available from their own doctor.

Vaccination against Smallpox

The overall figures for the year show an increase of 60 per cent over the previous year and an increase of 40 per cent in children under one year, but the proportion of parents who seek protection against smallpox for their children still remains under 10 per cent. It is very evident that interest in vaccination is only aroused in the general public when a report appears in the press of the occurrence of a serious epidemic. For instance, it is known that some 100 football enthusiasts were vaccinated after visiting Glasgow to see an international match, and, in addition, many of their families were dealt with. A further feature is the increasing number of vaccinations of people travelling to foreign countries.

Number of children at 31st December, 1950, who had completed a course of immunisation since 1st January, 1936

Age at 31st December, 1950 i.e., born in the year ..	Under 1 1950	1949	1948	1947	1946	5—9 1941—1945	10—14 1936—1940	Total Under 15	
Number immunised ..	256	3,222	4,439	4,460	4,555	21,446	20,895	59,273	
Estimated mid-year child population 1950 ..	CHILDREN UNDER FIVE 30,860				CHILDREN 5—14 48,380				TOTAL 79,240

Number of children who were immunised during the period 1st January to 31st December, 1950

Age at 31st Dec- ember, 1950, i.e., born in year	Under 1 1950	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Totals
Primary Im- munisation	256	2,895	638	157	68	80	59	14	10	5	8	18	21	22	5	4,256
Booster Dose ..	—	—	—	2	170	917	684	90	58	42	23	14	11	9	12	2,032

The following table shows the number of vaccinations carried out during the year.

Age at 31st December, 1950 i.e., born in years—	Under 1	1 to 4	5 to 14	15 or over	Total
	1949	1945-48	1935-44	Before 1935	
Number vaccinated . .	602	291	107	263	1,263
Number re-vaccinated	1	12	24	358	395

Immunisation against Diphtheria

The figures for the year show a slight reduction, most probably due to caution during the summer period when cases of poliomyelitis were occurring, and there was an unmistakable falling off when a neighbouring Authority temporarily suspended immunisation for this reason.

There were no deaths during the year. Only two cases were notified, both unimmunised, aged 45 and nine years.

SECTION 27

Ambulance Service

1950 was an important year for the ambulance service. In April, the service previously provided by the Leicester and County Convalescent Homes Society was taken over and in July, the St. John Ambulance Brigade, which had acted as agents for the County Council for a large part of the authority's area, ceased to do so. July also saw the beginning of the installation of the radio system for the control of ambulance movements.

It will be realised that the events mentioned above involved a considerable amount of work and planning in order to organise what was, in fact, an almost completely new service. The garage and vehicles belonging to the Convalescent Homes Society were bought at valuation and all their staff employed on ambulance duties were offered employment with the county ambulance service. This offer was accepted and, in a very short time, all had become members of the county ambulance team.

The change in the areas operated by St. John Ambulance Brigade was more difficult but eventually took place quite smoothly. A house with out-buildings was purchased at Loughborough for conversion to a station with two flats as living quarters. At Coalville, the garages previously used in connection with a civil defence depot were rented from the Urban Council; the St. John's garage was rented at Lutterworth, and part of the County Homes building at Market Harborough was taken over for adaptation. Greatest difficulty was experienced at Hinckley and eventually premises had

to be found at Earl Shilton, provision being made in the estimates for the building of a station at Hinckley if land could be found. Up to the end of the year a suitable site had not been found, but one has since been found and work is now in progress for a new station in Hinckley.

Mention must be made here of the great assistance received from the County Architect and from the Telephone Department of the G.P.O. in the task of adapting and equipping the new stations.

From July 5th, the ambulance service for the whole administrative county was provided directly by the County Council with two stations in Leicester and one in each of the following places : Coalville, Hinckley, Loughborough, Lutterworth, Market Harborough and Melton Mowbray. In addition, a sub-station was arranged at Ashby-de-la-Zouch.

After over 12 months of preparation, the radio system was completed by the end of August. Each ambulance has equipment which enables the driver to carry on a two-way conversation with the controller at the ambulance headquarters in Leicester. Messages are picked up and transmitted by an automatic station at Copt Oak and carried by telephone line to Leicester. Except for one or two small isolated places good reception is obtained over a radius of more than 25 miles. The radio system is now an indispensable part of the ambulance service, and a much more efficient service, especially for emergency cases, is obtained. In fact, on occasions, an ambulance has arrived for a patient before the person making the telephone call had returned home. Greater control can be exercised over the movement of vehicles and the ambulance crew is not isolated when on the road with a difficult patient such as a maternity case. At the end of six months, new uses and advantages were still being found. One which might be quoted is that of an urgent call to a maternity case. On arriving the driver was informed by the doctor that the patient could not be moved until she had a blood transfusion. There being no telephone available, the driver radioed a request for the Emergency Transfusion team and they were immediately sent out by the hospital who were informed by the ambulance control. Apart from efficiency, the radio system results in a considerable financial saving. It has been estimated that, basing the cost of equipment on a five year's life, an annual saving of approximately £3,000 is effected after the cost of the equipment has been met.

With a unified service it was possible during the year to arrange a planned system of annual vehicle replacements. The Health Committee decided to use only Morris Ambulances with Bedford Transit Ambulances and Utilecon Ambulances for sitting cases. It was also possible for the first time to obtain delivery of all vehicles in the chosen County colours so that the fleet is beginning to look like a unit at last.

During the year a useful servicing and repair section has been developed. This was made possible by the acquisition of the garage and equipment owned by the Leicester and County Convalescent Homes Society. This garage is used

for servicing while repairs are done at the headquarters at Ireton Road, Leicester. A regular system of servicing is undertaken for cars used by district nurses and for certain vehicles owned by other departments. Altogether, between 90 and 100 vehicles are dealt with at the two garages. By the end of the year all types of repairs were being done with the exception of reboring cylinder blocks, major body repairs and painting.

The demand on the service has still increased over previous years. In fact, nearly as many patients were carried in 1950 as during the first eighteen months of the service. The augmented ambulance service introduced by the National Health Service Act, 1946, was undoubtedly necessary, but such an increase in patients carried as this can hardly be entirely in cases of genuine need. The service insists on recommendations from authorised persons for all patients (except emergencies), including Hospital Car Service patients, and must look to the doctors, nurses, and hospital officers issuing such recommendations to reserve them for genuine cases. Active conversations have been carried on with the hospitals chiefly concerned but, from perusal of records of cases carried, it would seem that much could still be done in the way of co-ordinating out-patient appointments, etc. It is to be hoped that measures will not have to be introduced which will be so strict that the deserving case will also suffer. The radio system, combined with a more complete central control, did, however, reduce the number of miles per patient in the second half of the year.

Details of the actual work done are given below, but a more realistic appreciation of the figures can perhaps be given by the following comparisons. The total mileage for the year is equivalent to over 33 journeys round the earth at the equator. If each of the patients was a different individual, one person in every six in the County would have made an ambulance journey during the year, while the number of patients carried during the year would have nearly filled the Leicester City football ground twice. Since the service started in July, 1948, over one and three-quarter million miles have been travelled. In addition, patients were transported by train during the year.

			Patients carried	Miles travelled
Central Depot, Leicester	..	..	15,058	247,502
Avenue Road, Leicester	..	..	7,499	75,599
Market Bosworth	..	..	564	11,242
Melton Mowbray	..	..	4,067	62,046
Coalville	..	..	8,804	117,677
Hinckley	..	..	6,799	86,836
Leicester S.J.A.B.	..	..	200	3,398
Loughborough	..	..	5,531	74,624
Lutterworth	..	..	2,579	41,073
Market Harborough	..	..	3,895	65,615
Leicester and County Convalescent Homes Society (County cases)	..	..	1,891	17,233½

Leicester and County Convalescent Homes Society (joint journeys with Leicester City cases)	71	864½
Hospital Car Service	2,100	38,848
	<hr/>	<hr/>
Totals	59,058	842,558
	<hr/>	<hr/>

The figures for Coalville, Hinckley, Loughborough, Lutterworth and Market Harborough include the work done by the St. John Ambulance Brigade before the transfer as well as that done by the County Council Depots subsequently established. The figures for the Leicester and County Convalescent Homes Society refer to work done before the transfer, and those for the Avenue Road Depot to that done after the Depot had been taken over by the County Council.

Number of Vehicles at 31st December, 1950			
Ambulances	30	Sitting case cars ..	3
Utilecons	7	Stores van	1

Personnel at 31st December, 1950 (excluding administrative and clerical staff)			
Drivers	66	Attendant (male) ..	1
Attendant/Telephonists ..	5	Part-time Attendants ..	3
Female Attendants	3	Mechanics	4

SECTION 28

Prevention of Illness, Care and After-Care

It would probably be correct to claim that all the work dealt with in this report could reasonably be classed as falling into the category of "prevention of illness, care and after-care"—the health visiting and home nursing services, the home-help service, diphtheria immunisation, etc. Certain parts of the service, however, are described under this heading, but it should be remembered that the preventive outlook on medical matters should be the guiding principle throughout all our work.

Medical Loan Depots

The arrangements made for the supply of nursing equipment, etc., on loan, made with the Medical Loan Committee of the British Red Cross Society and the St. John Ambulance Brigade, are working satisfactorily. Depots are established at Leicester, Syston, Kegworth, Rothley, Hinckley, Kirby Muxloe, Coalville, Lutterworth, Melton Mowbray, Loughborough, and Waltham-on-the-Wolds. A small charge is made to users.

After-Care of Patients Discharged from Hospital

This work is gradually extending although no formal scheme has been put into operation. The work of the special health visitor for diabetic patients,

described elsewhere in this report, is an example of the possibilities in this direction, while there is a fairly complete system for notifying infants discharged from maternity hospitals to the department so that health visitors can call at the homes as soon as possible. There is undoubtedly much to be done, and the gradual extension of such a service is probable in the future. It is, of course, absolutely essential that there should be a proper understanding between the department's officers and the general practitioners, under whose care those patients must come.

Convalescent Home Provision

Under this section the County Council has power to provide accommodation for patients who are not in need of regular medical supervision and nursing care—if patients do require such supervision and care they are the responsibility of the hospital authorities. The Council agreed to a scheme for the arrangement of facilities of this type, but the necessary consent of the Ministry of Health had not been received by the end of the year, so that no such facilities were in fact provided during 1950. It is worth remembering that although hospital provision is free to the patient, a local health authority can recover from the patient the costs of "holiday home" provision or a portion of them: the usual arrangements for assessment of ability to pay on production of a statement of income are made.

Tuberculosis

The report of the County Chest Physician given below gives the relevant figures for the year, and makes some comment on their significance and on the year's work. It cannot be too often emphasised that although the clinical treatment of those suffering from tuberculosis is not any longer the responsibility of the County Council, there remain highly important duties in connection with after-care and with prevention. The Health Committee considered the whole question of after-care facilities in some detail during the year, but a description of the scheme ultimately agreed falls more properly into the scope of the report for 1951. The ready co-operation of the hospital authorities in this area, and the existence of that active body the "Friends of Markfield" should make it possible to provide an adequate service.

REPORT OF THE CHEST PHYSICIAN

Prevalence of Tuberculosis

	Year 1950	Year 1949	Average for preceding ten years
Respiratory tuberculosis :			
Notifications	216	239	207
Deaths	87	119	130
Death-Rate	0.25	0.35	0.40
Non-respiratory tuberculosis :			
Notifications	47	55	87
Deaths	11	15	30
Death-rate	0.03	0.04	0.10

Total for both respiratory and non-respiratory tuberculosis :	Year 1950	Year 1949	Average for preceding ten years
Notifications	263	294	294
Deaths	98	134	160

The number of notifications of respiratory tuberculosis has decreased by 23 in comparison with last year's figure. The deaths have decreased by 32.

The number of notifications of non-respiratory tuberculosis shows a decrease of eight, and the deaths a decrease of four on last year's figures.

If we analyse the figures for 1950 we find that 52 per cent of the deaths occurred under the age of 45, whereas the same age group accounts for 79 per cent of the notifications. In males, 42 per cent of the deaths and 69 per cent of the notifications were before the age of 45, while for females the percentages are 68 and 91 respectively. Males contributed 61 per cent of the deaths and 56 per cent of the notifications.

Chest Clinic Work (for details see Table T.B.1)

The number of attendances at the Chest Clinics has been 10,485, as against 9,233 in 1949. X-ray photographs of respiratory cases have been taken at Markfield Sanatorium and the City Chest Clinic, and a certain number of surgical cases have also been X-rayed during the year. The total number taken was 7,493 as against 3,473 last year.

The number of specimens of sputum examined was 1,361, of which the chest physicians submitted 1,077.

Domiciliary Work

- (1) **Open air shelters.** The number of shelters on loan during the year was 24.
- (2) **Nursing of advanced cases.** The number of visits made by district nurses under the direction of the County Nursing Association was 2,539.
- (3) **Domiciliary Aids.** Help continues to be given to suitable cases in the shape of beds, bedding, sponge rubber mattresses, air-rings, bed-rests, etc., which are issued on loan.
- (4) **Domiciliary Visits.** The chest physicians have paid 1,208 visits to patients' homes. The health visitors paid 3,496 visits and the district nurses 2,539.

Surgical Tuberculosis

The number of patients admitted to orthopædic hospitals, and those remaining under treatment, and other information, will be found in Table T.B.2.

Out-patient treatment is available at the Leicester City Clinic, Richmond House, The Newarke, Leicester ; the Cripples' Guild, Packe Street, Loughborough, and at the Coalville and Hinckley Orthopædic Clinics.

Lupus

Cases of lupus are treated at the Skin Department, Leicester Royal Infirmary under the care of the skin specialist. They also attend the out-patient dispensaries for general supervision.

General Comments

During the past year the scheme for B.C.G. vaccination of contacts has come into operation and is in the process of expansion.

The acceptance of the idea of domiciliary treatment as a preliminary to sanatorium treatment is now universal throughout the country and has begun to operate in Leicestershire. This will have advantages in that it will reduce the ultimate period of time required to be spent by a patient in a sanatorium and it enables the disease to be attacked from the moment of diagnosis.

More and more demands are being made on the Home-Help Service as a result of this domiciliary treatment and great assistance has been given by them to the maximum amount of their personnel. Domiciliary treatment falls, in the main, generally on the County Nurses who, without hesitancy, have shouldered the burden of giving patients courses of streptomycin injections while at home.

The Mass Radiography Unit completed their survey of Loughborough in 1950 and, as a result of this survey, 34 cases were diagnosed as suffering from active tuberculosis. This represents three cases per thousand of the 11,506 examined.

The figures for the deaths in 1950 show a marked decrease as compared with those for 1949. This is attributed in the main to the introduction of the first two drugs which have proved effective in use against tuberculosis, namely, P.A.S. and streptomycin. This fall is universal throughout the country and brings hope to everyone working in the Tuberculosis Service that the mortality rate will decline each year, so that we may look forward to the elimination of tuberculosis as a national problem in a generation.

SECTION 29

Domestic Help Service

This service was described fully in last year's report, and all that needs to be recorded is the steady expansion of the service. Area offices were opened at Market Harborough and Melton Mowbray; it was originally proposed to do the same at Lutterworth, but this district can be served from the Leicester, Hinckley and Market Harborough offices, so that the service covers the whole County.

The figures show a considerable increase, the number of home-helps at the end of the year being more than double the corresponding figure for 1949. There has been a similar increase in the number of cases dealt with, while it

will be noted that we have begun to provide a service for patients suffering from tuberculosis, although there is still much more to be done in this field.

The scheme has in a very short time taken an important place among the services available to the community in times of illness. It is admittedly expensive, but much of the money spent is saved elsewhere—for example, in the saving of places in old peoples' homes or hospitals. When the scheme was originally started there were many quite justifiable doubts about the practical possibility of serving a County area, and its success is all the more gratifying to the committee whose constant support and encouragement has been a great source of strength to those responsible for the administration of the service.

Statistics for the year :

Number of permanent Home-Helps at end of year :

(a) Full-time workers	46
(b) Part-time workers	53
(c) Occasional workers	13
	—
	112

Number of temporary Home-Helps at end of year :

(a) Full-time workers	7
(b) Part-time workers	20
(c) Occasional workers	19
	—
	46

Total number of hours completed by Home-Helps :

(a) On duty	152,903
(b) Travelling time	10,214
	—
	163,117

Number of cases attended :

(a) Maternity	444
(b) Ordinary illness	263
(c) Chronics	38
(d) Tubercular	23
(e) Old age, illness, and infirmity	202
(f) Other (emergencies)	3
	—
	973

Value of assistance given to above cases £17,838

Accounts rendered :

(a) Number	5,732
(b) Amount involved	£4,614

Assessments :

(a) Full charge	129
(b) Part charge	685
(c) No charge	151
(d) Awaiting assessment at end of year	8

Number of preparation courses held during the year 7

Number of Home-Helps reaching satisfactory standard 102

Area particulars

Area Office	Date Office opened	Number of Home-Helps at 31st December, 1950		Cases attended 1950
		Permanent	Temporary	
Leicester	6.2.49	35	5	383
Coalville	15.11.48	27	9	139
Hinckley	7.11.49	15	10	174
Loughborough ..	22.8.49	13	5	144
Market Harborough ..	21.8.50	4	11	34
Melton Mowbray ..	27.1.50	18	5	90
*Lutterworth ..	—	—	1	9
Totals ..	—	112	46	973

*As from 1st October, 1950, Lutterworth Area was included in the work of the other Area Offices.

SECTION 51 Mental Health Service

The year has been one of progress for the Mental Health Service, especially in the provision of occupation centres. After-care of patients from mental hospitals has not increased to any great extent but much appreciated help was given by the officers in many cases in which hospital treatment was unnecessary. A close liaison has been maintained with the mental deficiency hospitals as a result of the Deputy County Medical Officer being co-opted to the Hospital Management Committee. The problems of both sides are more clearly understood to the advantage of the patients concerned.

Mental Diseases

During the year 183 cases were removed to hospital by authorised officers under the provisions of the Lunacy Act, 1890, as follows :

Section	Male	Female	Total
11	0	1	1
16	63	118	181
20	1	0	1

Other admissions to mental hospitals notified to the department totalled 204 (84 males and 120 females).

Mental Deficiency

A full-time occupation centre was opened at Wigston in January. This centre, which became well established during the year, caters for defectives from the area south of the City of Leicester. They are collected in vehicles provided by the ambulance service in the morning and returned in the afternoon. When it is realised that 17 children are on the register it will be appreciated that a real need is being met.

The Hinckley centre was changed to full-time in January also and the Coalville centre became full-time in April. It is intended to make the Melton Mowbray and Loughborough centres full-time as soon as suitable premises can be found.

Occupation centres are expensive for the numbers attending, especially where transport is required, but they give a very useful training and, in many cases, obviate the necessity of admission to hospital at a much greater cost to the community. As in the case of the Domestic Help Service, the local health authority provides a social service which relieves the hospitals of a responsibility and has the great additional advantage that the patient can stay at home.

Statistics relating to Mental Deficiency, as at 31st December, 1950, are given below :

Centre	Register	Staff
Coalville	12	2
Hinckley	16	2
Loughborough	16	2 part-time
Wigston	17	2
Melton Mowbray	11	2 part-time
Home Teaching	10	
	—	—
	82	10
	—	—

In addition, for transport reasons, one case attends Leicester Centre and one Leicester case attends Wigston Centre, and two cases attend Nuneaton Centre.

	Male	Female	Total
In institutions or on leave of absence	173	214	387
Under guardianship or on leave of absence	10	11	21
In "place of safety"	—	—	—
Under statutory supervision	154	138	292
Under voluntary supervision	22	35	57
	—	—	—
Totals	359	398	757
	—	—	—
Occupation Centres and Home Teaching	44	45	89
Cases awaiting institutional accommodation	12	18	30

NOTIFICATION OF BIRTHS

(Public Health Act, 1936—Section 203)

The following gives particulars of the births recorded in the department for the year. Of the births recorded, 25 were discovered through the Registrars of Births.

	Live Births		Still Births		Total
	Dom.	Inst.	Dom.	Inst.	
Total which occurred in Leicestershire	2,532	2,138	53	47	4,770
Births occurring in Leicestershire "Transferred Out"	26	221	1	3	251
	2,506	1,917	52	44	4,519
Births occurring outside Leicestershire "Transferred In"	10	1,234	—	54	1,298
Net Leicestershire births	2,516	3,151	52	98	5,817

REGISTRATION OF NURSING HOMES

(Public Health Act, 1936—Sections 187-194)

Homes closed

No nursing homes were closed during the year.

Homes newly registered

There were no new registrations during the year.

Existing Homes

The following is a complete list of Registered Nursing Homes in the County.

Address	Number of beds		
	Maternity	General	Total
"Innisfree", Melton Road, Barrow-upon-Soar	1	—	1
"Glencoe", 25 London Road, Coalville	8	—	8
"Braemar", Newton Burgoland	1	—	1
Somerville Nursing Home, 77 Park Road, Loughborough	9	2	11
The Loughborough Nursing Home Ltd., Radmoor Road, Loughborough	5	5	10
"Fairhaven", Shellbrook, Ashby-de-la-Zouch	—	9	9
"Roundhill", Syston Road, Thurmaston	12	—	12
Walberton Rest and Convalescent Home, Stamford Road, Kirby Muxloe	—	33	33
	36	49	85
Totals	36	49	85

Registered Nursing Homes are inspected by Medical Officers of the Department, and by Officers of the Leicestershire County Nursing Association.

NATIONAL ASSISTANCE ACT, 1948

Sections 29 and 30. Welfare Services for Handicapped Persons

Responsibility for the administration of these Sections of the Act has been delegated by the County Council to the Health Committee.

BLIND PERSONS

The agency arrangements with the Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind continued throughout the year and I am indebted to Mr. T. W. Myers, Secretary of the Institution, for the following report on work carried out during the year ended 31st March, 1951. Mr. Myers succeeded Mr. C. R. Holt, whose death was much regretted by all concerned with the welfare of the blind.

“As the authorised agents of the County Council of Leicestershire, the Royal Leicester, Leicestershire and Rutland Institution for the Blind continues to administer the Welfare Services for the Blind, in accordance with the National Assistance Act, 1948.

Registration

“At 31st March, 1951, there were 539 registered Blind Persons resident in the area of Leicestershire, the analysis being as follows :

Male :	0— 4	..	..	..	1
	5—10	..	..	..	1
	11—15	..	..	..	8
	16—20	..	..	..	2
	21—30	..	..	..	15
	31—39	..	..	..	11
	40—49	..	..	..	19
	50—59	..	..	..	28
	60—64	..	..	..	23
	65—69	..	..	..	20
	70 and over	..	..	..	98
					—
					226
					—
Female :	0— 4	..	..	..	3
	5—10	..	..	..	2
	11—15	..	..	..	3
	16—20	..	..	..	1
	21—30	..	..	..	12
	31—39	..	..	..	11
	40—49	..	..	..	15
	50—59	..	..	..	34
	60—64	..	..	..	22
	65—69	..	..	..	35
	70 and over	..	..	..	175
					—
					313
					—

Open Industry

“Thirty-five Blind Persons are engaged in Open Industry in various trades :

Labourers	1
Agricultural Workers	2
Basket Workers	1
Dealers, Tea Agents, etc.	3
Factory Operatives	8
Gardeners	1
Home Teachers	1
Physiotherapists	1
Piano Tuner	1
Porters	2
Poultry Keepers	1
Telephone Operators	6
Farmer	1
Miscellaneous	6
	—
	35
	—

“In conjunction with the Disabled Persons’ Department of the Ministry of Labour, and the Placement Department of the National Institute for the Blind, every effort is made to explore all the possible sources of employment for Blind Persons, and, in this direction a varied, and yet successful programme has been accomplished.

Summer Outing

“The summer outing for Blind Persons resident in the county, and their guides, took place in June. The party was conveyed in 14 buses, and a most enjoyable day, with perfect weather, was spent at Trentham Gardens in Staffordshire. The kind and helpful assistance of T. L. Evans, Esq., Chairman of the Community Service of the Stoke-on-Trent Rotary Club, who made all arrangements for an entertainment, was greatly appreciated, and this was held after tea in the Ballroom.

Rutland Home, Bournemouth

“An increased number of Leicestershire Blind Persons have, during the year, visited the Institution’s Holiday Home at Bournemouth, where the facilities and services for the Blind have gradually been developed and increased.

Social Parties

“Social and Handicraft Centres continue to be organised at regular intervals at Hinckley, Coalville, Wigston, Melton Mowbray and Loughborough. The blind people are taking an increased interest in these centres, and the attendance numbers are very encouraging. Once again the Institution is grateful for the valuable assistance of voluntary workers who assist in a variety of ways in helping to make these socials a success.

Workshops

“Industrial activities of the Institution for the Blind include up-to-date workshops in which 18 blind persons are engaged in the following trades :

Basket Workers	..	..	..	5
Boot Repairers	..	..	..	2
Brush Makers	..	..	..	1
Chair Seaters	..	..	..	1
Coal Bag Makers	..	..	..	1
Firewood Workers	..	..	..	1
Knitters (Machine)	..	..	..	2
Mat Makers	..	..	..	2
Porters, Packers, and Cleaners	..	..	..	3
				—
				18
				—

Home Workers

“For those blind persons who, either by the nature of their employment, or by the fact that they reside too far distant from the workshops, a service known as the Home Worker’s Scheme is conducted for their benefit. Assistance is given in order to provide them with an assured income. It is hoped that in the near future these services will be extended.

Gifts

“As in the past, a sum of £1,907 10s. od.—derived from accrued interest from legacies—was distributed throughout the County to the blind persons at Midsummer and Christmas.

Wireless

“The British Wireless for the Blind Fund allocate a certain number of wireless sets each year for distribution. Once again the number of sets available has increased, which of course increased the demand for the services of a qualified radio engineer, whose charges are borne by the Institution without cost to the blind person.

Home Teachers

“Five Home Teachers make regular visits to each blind person in their own homes. The duties of the Home Teachers are numerous and very varied, in so much that assistance is given in practically every possible manner. Every endeavour is made to act as liaison officer between the blind person and the several government departments dealing with legislation regarding the blind. As time goes on the need for the Home Teaching Service is becoming increasingly essential, and every possible effort is being made in order to increase the number of visits.

Voluntary Help

“During the period under review, the Institution has once again been

assisted in many ways by the help of voluntary workers. It is the spirit of this voluntary work which means so much towards the success of any welfare service which we endeavour to extend towards the blind, and the work of these kind friends is appreciated, not only by the blind people, but also by the Institution staff, to whom it is always a source of encouragement."

T. W. MYERS, *Secretary*

Southern Regional Association for the Blind

An annual grant is made to the above association according to the officially recorded numbers of blind persons in the County.

DEAF AND DUMB

An annual grant is made to the Leicester and County Mission to the Deaf and Dumb, and also to the "daughter mission", the Loughborough and District Mission to the Deaf and Dumb. The grant to the Loughborough Mission was made for the first time this year to give assistance in the provision of new accommodation.

CRIPPLES WELFARE

An annual grant is made to the Leicestershire Voluntary Association for Cripples Welfare.

FREE TRANSPORT PASSES FOR BLIND AND HANDICAPPED PERSONS

Under Section 30 (ii) of the National Assistance Act, 1948, the County Council makes a grant to cover the cost of transport passes recommended by the following voluntary organisations: The Royal Leicester, Leicestershire and Rutland Institution for the Blind, The Leicester Guild of the Crippled, The British Legion, and the British Limbless Ex-Servicemen's Association.

CHILDREN ACT, 1948

Close liaison is maintained between this Department and the Children's Department and there is considerable interchange of information. In addition, one of the Medical Officers attends the meetings of the Children's Committee.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

The following gives particulars of registrations at the end of the year.

	Number registered	Number of children provided for
Premises	1	16
Daily Minders . .	5	14

NOTIFICATIONS OF INFECTIOUS DISEASES

A statistical record of infectious diseases notified during the year is to be found in Tables 3 and 4 at the end of the report.

A brief comment on the individual infectious diseases notified during the year follows herewith.

Scarlet Fever

There were 44 notifications as against 529 last year.

Whooping Cough

The following shows a record of notifications and deaths during the last ten years.

Year	Notifications	Deaths	Death-rate per thousand notifications
1941	2,032	16	7.87
1942	167	2	11.97
1943	1,292	11	8.51
1944	844	10	11.84
1945	640	5	7.81
1946	1,027	8	7.78
1947	718	9	12.53
1948	1,701	6	3.52
1949	1,158	7	6.05
1950	1,232	1	0.81

Measles

Year	Notifications	Deaths	Death-rate per thousand notifications
1941	3,896	5	1.28
1942	2,687	—	—
1943	4,005	8	1.99
1944	618	—	—
1945	4,731	3	0.63
1946	632	—	—
1947	4,818	9	1.86
1948	4,013	1	0.24
1949	3,096	3	0.97
1950	4,056	3	0.74

Diphtheria

Year	Total notifications	Corrected notifications	Deaths
1901	247	—	53
1911	306	—	28
1921	404	—	28
1931	166	—	12
1941	605	—	3
1942	459	—	27
1943	144	—	7
1944	89	61	3
1945	84	63	7
1946	59	34	—
1947	32	13	1
1948	20	7	1
1949	15	3	1
1950	15	2	—

Acute Poliomyelitis

Year	Total notifications	Corrected notifications	Deaths (poliomyelitis and polioencephalitis)
1941	6	—	2
1942	15	—	1
1943	1	—	—
1944	2	2	—
1945	4	4	1
1946	1	1	—
1947	31	23	2
1948	15	9	1
1949	66	62	10
1950	70	51	8

The notifications for 1950 were divided into : Paralytic 41, Non-paralytic 10

LABORATORY FACILITIES

The laboratory was started in 1920, and some particulars of the work done since that date were given in the Annual Report for 1948. In July, 1948, much of the bacteriological work hitherto carried out in the County Laboratory was transferred to the Leicester branch of the Public Health Laboratory Service set up as a permanent organisation by Section 17 of the National Health Service Act. In October, 1949, the County Council's duties in regard to Designated Milks were transferred to the Ministry of Agriculture and Fisheries, thus further relieving the County Laboratory of a large amount

of work. In view of the situation thus brought about, it was decided to close the laboratory on 31st March, 1950.

The following is a summary of examinations carried out during the period January 1st to March 31st, 1950 :

Bacteriological milk examinations	204
Milk for phosphatase test (74 tests included in above total)	
Milk for fat content	1
Swabs for diphtheria	100
Sewage and water analyses	91
Urine (general and bacteriological)	73
Urine for tubercle bacilli	23
Ice cream for coliform organisms	20
Miscellaneous	2
	<hr/>
Total	514
	<hr/>

Alternative arrangements have had to be made for the examination of samples of school milk, ice cream, water and sewage, and miscellaneous work, such as the testing of urine and taking of blood counts. In addition, it has been necessary to terminate the arrangement with the Leicester and County Convalescent Homes Society for the examination of diphtheria swabs of children for admission to the Society's Homes.

The closing of the County Laboratory marks the passing of yet another link with the "old order" of health administration changed by the new enactments. Its founding in the year 1920 was at that time considered by many to be quite a venture in the field of public health and some doubt existed as to its probable usefulness. Only a short time was needed to justify its existence, and during the thirty years of its life it has without doubt played an important part in the growth of the public health services. It helped to forge a strong link with the medical practitioners, principally in the diagnosis of tuberculosis and infectious disease ; and with the Urban and Rural District Councils, through their Medical Officers of Health and Sanitary Officers in the duties of the District Councils relating to the improvement of production and sale of milk, water supplies, disposal of sewage, and sale of ice cream. It also served as a quick and convenient instrument in the carrying out of County duties under the Milk and Dairies Orders, the control of rivers and streams, and many other important matters.

From this brief description it will be seen that perhaps the most useful function of the County Laboratory was its appointed place in the co-ordination of the County Health Department with all those concerned with field work in the County. The friendly relations built up over the years enabled the system of centralised co-operation to maintain a high level of efficiency.

Although the decision to close the laboratory was taken with great regret, there can be little doubt that the decision was wise. Not only had much of the work been transferred elsewhere but the greatly increased complexity of

modern bacteriological technique had made it difficult for a small laboratory to provide the specialised services now required. The staff of the County Laboratory can, however, look back with every satisfaction on a valuable job of work most successfully carried out, and can claim an active part in the improvement in the methods of production and distribution of milk, in the improvement of water supplies, and in the more efficient disposal of sewage, as well as in the provision of essential bacteriological help to the medical practitioners in the County in the diagnosis and treatment of infectious diseases, especially tuberculosis and diphtheria.

In closing this short review, I feel that appreciation must be recorded of the work of Mr. J. N. Graham, who was the Chief Technician during the whole of the Laboratory's existence, while it will be remembered that the Laboratory was always a particular interest of Dr. J. A. Fairer, who played a major part in its inception and administration.

SANITARY CIRCUMSTANCES OF THE AREA

For the full particulars given in this section of the report I am grateful to Mr. S. A. Gregory, the County Sanitary Officer.

WATER SUPPLY

The following table gives details of rainfall during 1950 recorded at the Sewage Farm, Wigston, and I am indebted to Mr. G. F. Stacey, Surveyor to the Wigston U.D.C., who kindly supplied these figures :

Month	Total depth	Greatest fall in 24 hours		No. of days with 0.01 in. or more	No. of days with 0.04 in. or more
	Inches	Inches	Date		
January ..	.63	.20	2	11	5
February ..	4.13	.78	2	17	15
March ..	1.12	.35	17	12	9
April ..	2.11	.48	17	18	14
May ..	2.25	.59	21	12	11
June ..	1.87	.55	13	8	7
July ..	2.53	.67	15	14	10
August ..	1.98	.27	15	18	11
September ..	2.77	.65	23	24	15
October ..	.60	.14	30	12	5
November ..	3.61	.72	20	26	17
December ..	1.55	.31	18	18	11
Total ..	25.15	—	—	190	130

The following are the rainfall figures for the last ten years :

Year	Rainfall in inches
1941	26.96
1942	20.79
1943	20.68
1944	24.64
1945	21.92
1946	30.69
1947	20.44
1948	29.34
1949	26.22
1950	25.15

Continued investigations have been carried out with regard to the purity of water supplies in the County. 495 samples were submitted for analysis, compared with 518 in 1949. The results are summarised in the following table :

District	Satisfactory		Unsatisfactory	
	Chemical	Bacterio-logical	Chemical	Bacterio-logical
Urban Districts				
Ashby-de-la-Zouch	—	—	—	—
Ashby Woulds ..	—	—	—	—
Coalville ..	1	55	2	14
Hinckley ..	3	5	3	9
Loughborough M.B.	8	28	—	2
Market Harborough	18	6	—	—
Melton Mowbray ..	3	3	—	—
Oadby	—	—	—	—
Shepshed ..	—	1	—	4
Wigston ..	—	—	—	—
Rural Districts				
Ashby-de-la-Zouch	—	2	—	6
Barrow-upon-Soar	—	14	—	16
Billesdon ..	—	2	—	16
Blaby	18	28	1	60
Castle Donington ..	—	5	—	18
Lutterworth ..	—	6	1	29
Market Bosworth ..	—	—	9	—
Market Harborough	5	6	2	44
Melton and Belvoir	9	12	9	12
Totals ..	65	173	27	230

The above figures show the number and type of water examinations carried out by the district councils. As, in the majority of cases, the samples of water were taken from shallow wells, which are almost invariably contaminated, the figures do not present a true picture relating to the general water supplies of the various districts.

The greater part of the urban districts are provided with piped water supplies. There are complaints, however, that there is insufficient quantity in seven districts, particularly in Ashby Woulds and Ashby-de-la-Zouch Urban Districts where the water supply is regularly cut off for many hours each day.

In the rural areas, 148 parishes have piped supplies, but 69 have to rely on private wells. In some areas where there are public mains, difficulty has been experienced in maintaining a satisfactory supply to several villages. This is

notably true with regard to parishes in Melton Mowbray and Market Harborough Rural Districts, where water had to be carted.

Piped water supplies were provided to the parishes of Wigston Parva in Blaby Rural District, Broughton Astley in Lutterworth Rural District, Shangton and Church Langton in Market Harborough Rural District, and the villages of Garthorpe, Grimston, Saxelby, Shoby, Bottesford and Muston in Melton and Belvoir Rural District.

In many areas the existing water mains have been extended during the year to meet the requirements of new housing estates.

The following work was carried out in connection with the supply of domestic water to dwelling houses.

	Urban districts	Rural districts
Piped supplies substituted for well supplies ..	44	940
Wells closed	19	92
Wells cleansed, repaired, etc.	6	28

SEWERAGE AND SEWERAGE DISPOSAL

New sewers have been constructed during the year to serve new housing estates, and in the rural districts where no sewage disposal plant was in existence, small treatment plants to deal with the new houses have been provided in lieu of cesspools.

The sewerage and sewage disposal scheme for Great Glen and Burton Overy, in the Billesdon Rural District, was almost completed with good progress in connecting properties to the sewers. New sewage disposal works were completed for Narborough and Cosby in Blaby Rural District. The sewerage and sewage disposal scheme for Higham-on-the-Hill in Market Bosworth Rural District was completed with many connections to the sewers.

In addition, 16 further schemes for sewerage and sewage disposal in the rural districts have been submitted for the County Council's observations. Unfortunately, due to the cut in capital expenditure, at the present rate of progress, it will be some time before the work is commenced.

Further improvement has been noticed in the maintenance standard at many sewage treatment plants and it is hoped that they will continue to receive the attention necessary to achieve satisfactory effluents.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944

The following schemes have been submitted, with application for grant aid under this Act, during the year :

Water Supply

Local Authority	Parishes and Areas affected	Estimated Cost
Ashby-de-la-Zouch R.D.C.	Water supply to Gracedieu	£1,030
	Borehole and softening plant—water supply at Heather	£10,600
Billesdon R.D.C. ..	Water supply to Cold Newton and Lowesby	£5,230
Market Bosworth R.D.C.	Water supply to Norton-juxta-Twycross	£3,200

Sewerage and Sewage Disposal

Local Authority	Parishes and Areas affected	Estimated Cost
Ashby-de-la-Zouch R.D.C.	Appleby Magna and Snarestone sewerage and sewage disposal—joint scheme	£41,850
	Part Measham sewerage	£4,850
Barrow-upon-Soar R.D.	Hoton sewerage and sewage disposal ..	£3,500
	Wymeswold sewerage	£5,000
Billesdon R.D.C. ..	Billesdon sewerage and sewage disposal	£11,500
	Houghton-on-the-Hill sewerage and sewage disposal	£13,500
	Keyham sewerage and sewage disposal	£4,400
	Stoughton sewerage and sewage disposal	£7,500
	Tilton-on-the-Hill sewerage and sewage disposal	£12,100
Blaby R.D.C.	Wigston Parva sewerage and sewage disposal	£1,950
Lutterworth R.D.C. ..	Ullesthorpe and Claybrookes sewerage and sewage disposal—joint scheme ..	£31,750
Market Bosworth R.D.C.	Newbold Verdon sewage disposal (extension of previous scheme) ..	£4,500
Market Harborough R.D.C.	Drayton sewerage and sewage disposal	£5,750
	East and West Langton sewerage and sewage disposal	£14,400
	Theddingworth sewerage and sewage disposal	£5,900
	Thorpe Langton sewerage and sewage disposal	£4,575

The total number of schemes considered since the passing of the Act now totals 112, 50 of which are in respect of water supplies and 62 of sewerage and sewage disposal.

Provisional Ministry grants, in respect of two schemes of water supply and three schemes of sewerage and sewage disposal, totalling £17,600, have been notified to the district councils concerned.

Ministry Inquiries were held in respect of three schemes of sewerage and sewage disposal.

East Leicestershire Water Supply Scheme

It is regrettable to report that no real progress has been made during the year with this large scheme which is still, in effect, merely a proposal. Prolonged discussions and negotiations have taken place with disappointing results as far as the provision of water to the eastern parts of the County is concerned.

It was agreed at a conference of County district representatives held in September, that if the Leicester Corporation could guarantee adequate supplies of water for the scheme in the form of an increase in supply from the Derwent Valley Water Board, subject to the amendment of certain clauses in the draft Agreement, they would proceed with the implementation of the scheme. If, however, it became apparent that the Corporation would not get a substantial increase from a re-allocation of Derwent water, then the participating authorities would seek other sources of supply. By the end of the year it was increasingly apparent that Leicester Corporation would not get the re-allocation desired and that the East Leicestershire water supply scheme, as originally designed, was unlikely to materialize.

POLLUTION OF RIVERS AND STREAMS

Routine inspections of the watercourses in the County, particularly where pollution had occurred in the past, have been carried out.

An old-standing problem of pollution in the River Wreake, from trade processes of an industrial concern manufacturing fibre boards, was satisfactorily cleared up. A "save-all" plant for extracting fibre in suspension from the washing water was installed and resulted in a good effluent being discharged to the river. In addition to preventing pollution of the river, valuable raw material is also salvaged for re-use by the firm.

Another case of the difficulty of disposal of trade waste in rural areas where no sewers are available was encountered during the year. Complaints of pollution of a stream disclosed that a large concern was using a disused sandpit for the disposal of spent acid from a steel tube pickling process. After use the acid was neutralised at the works and then conveyed by tanker to the disused sandpit for disposal. Following heavy rains, the pit had filled and overflowed on to the surrounding ground, causing damage to growing crops. To relieve this, land drainage was carried out and a nearby stream was affected. An orange-coloured deposit on the stream bed and banks resulted and although there was no evidence that the effect was harmful, it was most unsightly. The firm concerned, on being notified, immediately ceased to use the pit, but complaints were received whenever the stream bed was disturbed for months after the pollution had been stopped.

SANITARY INSPECTION

Sanitary Inspection by District Councils

District	Number of Complaints received	Number of Defects or nuisances discovered	Number of Premises Visited		Number of Notices served				Summary action	
			Inspections	Re-visits	Preliminary		Statutory		Summons issued	Convictions obtained
					Housing	Other	Housing	Other		
Urban Districts										
Ashby-de-la-Zouch ..	219	308	662	295	13	22	—	5	2	2
Ashby Wolds ..	44	53	2,685	284	—	2	4	—	—	—
Coalville ..	229	219	4,207	1,433	74	182	13	30	—	—
Hinckley ..	372	1,544	4,368	4,907	110	293	3	6	2	2
Loughborough M.B. ..	692	865	7,865	9,841	9	504	3	18	1	1
Market Harborough ..	391	609	4,293	3,101	49	238	—	—	—	—
Melton Mowbray ..	134	326	1,060	1,369	38	66	—	—	—	—
Oadby ..	14	93	1,004	—	29	69	—	—	—	—
Shepshed ..	91	80	1,254	125	30	25	8	—	—	—
Wigston ..	235	432	985	1,853	20	412	—	1	—	—
Rural Districts										
Ashby-de-la-Zouch ..	142	122	1,859	1,426	40	166	—	13	3	3
Barrow-on-Soar ..	701	941	3,652	5,222	371	141	68	1	—	—
Billesdon ..	242	238	872	705	87	228	1	—	—	—
Blaby ..	294	828	3,253	3,283	93	419	4	2	—	—
Castle Donington ..	751	466	982	311	36	144	—	7	—	—
Lutterworth ..	179	82	863	323	—	45	—	—	—	—
Market Bosworth ..	149	107	2,666	1,558	—	238	—	7	—	—
Market Harborough ..	110	87	3,724	—	34	80	—	—	—	—
Melton and Belvoir ..	703	192	4,078	1,549	18	9	2	—	—	—
Totals ..	5,692	7,592	50,432	37,585	1,951	3,283	106	90	8	8

CLOSET ACCOMMODATION

The following table shows the position as regards closet accommodation in the County at 31st December, 1950 :

District	Privies	Pail closets	Water closets	Total	Converted to Water closets		Privies converted to Pail closets
					Privies	Pail closets	
Urban Districts							
Ashby-de-la-Zouch ..	41	35	1,360	1,436	—	4	—
Ashby Woulds ..	8	24	711	743	—	7	2
Coalville ..	158	199	7,690	8,047	21	28	2
Hinckley ..	—	205	10,707	10,912	—	20	4
Loughborough M.B. ..	21	119	13,490	13,630	—	25	—
Market Harborough ..	2	19	4,497	4,518	—	5	—
Melton Mowbray ..	—	9	3,860	3,869	—	—	—
Oadby ..	—	15	2,017	2,032	—	1	—
Shepshed ..	50	341	1,677	2,068	—	26	—
Wigston ..	—	23	5,643	5,666	—	—	—
Rural Districts							
Ashby-de-la-Zouch ..	345	1,535	2,112	3,992	—	20	9
Barrow-upon-Soar ..	34	1,690	13,294	15,018	2	125	—
Billesdon ..	5	1,107	1,344	2,456	—	82	—
Blaby ..	—	1,759	10,033	11,792	—	177	—
Castle Donington ..	44	334	2,499	2,877	2	6	4
Lutterworth ..	40	1,719	1,635	3,394	3	6	1
Market Bosworth ..	1	1,889	5,377	7,267	—	334	—
Market Harborough ..	165	84	2,228	2,477	—	6	—
Melton and Belvoir ..	397	3,044	1,709	5,150	—	44	3
Totals ..	1,311	14,150	91,883	107,344	28	916	25

COMPLAINTS

The following complaints were received during the year and were referred to district officers :

General sanitary matters	..	..	46
Housing	..	..	96
Water supplies	..	..	8
			—
			150
			—

PUBLIC CLEANSING

This service is now carried out entirely by "Direct Labour", using altogether 74 vehicles of various types and makes.

The whole of the County has now a refuse collection service, though not all of it on a weekly basis. Of the urban areas, seven districts have a weekly collection, another has a weekly collection in summer but reverts to every 10 days in winter. The remaining two urban areas have a collection once every nine days and once every eight to 14 days respectively.

Of the rural districts, six maintain a weekly collection, one every 12 to 14 days, one every fortnight and one every 10 days, except in a remote area where the collection can only be done twice a month.

With regard to the disposal of refuse, it is noted with regret that crude tipping is still widely practised in some districts, in fact there has been a further two such tips brought into use in the urban areas. This is probably due to the difficulty of obtaining men who are willing to undertake this type of work. The problem is not peculiar to Leicestershire as it appears from reports that a shortage of labour for public cleansing duties is being experienced throughout the country. Of the 10 urban districts, five districts rely on controlled tipping ; one district uses a controlled tip, a crude tip and incineration ; one district a controlled tip and incineration ; one district complete incineration, and the remaining two districts use crude tips.

Fourteen controlled tips and 19 crude tips are in use in the rural areas. In these areas, five districts favour the controlled tips, having 12 between them, and another has two such tips with five crude ones. The majority of the 14 crude tips are in the remaining three districts.

SHOPS ACTS, 1912 TO 1934

The following is a summary of the work carried out during the year by the districts, in connection with the provisions of the Shops Acts for which they are responsible :

Defects	Outstanding from previous year	Defects found	Defects remedied	Outstanding 31st December, 1950
Sanitary conveniences ..	12	25	33	3
Heating	—	4	4	—
Ventilation	1	5	6	—
Washing facilities ..	2	27	19	11
Exhibition of Notices ..	—	1	—	1

SWIMMING BATHS AND POOLS

The position with regard to swimming baths and pools would appear to be satisfactory in that most centres of population are provided with one public swimming bath. The 10 urban districts have eight public and four private baths. These were inspected on 120 occasions during the year and improvements were required to be carried out in one case.

The rural areas are without any public baths but have six private pools, where nine inspections were made.

CAMPING SITES

It appears that there was an increase in the number of people camping during the year. There were 30 camping sites used either on a semi-permanent or a temporary basis, some of these being occupied by youth organisations. Twenty of these sites were licensed.

There were, in addition to the above, 90 licences granted for the stationing of a movable dwelling for varying periods.

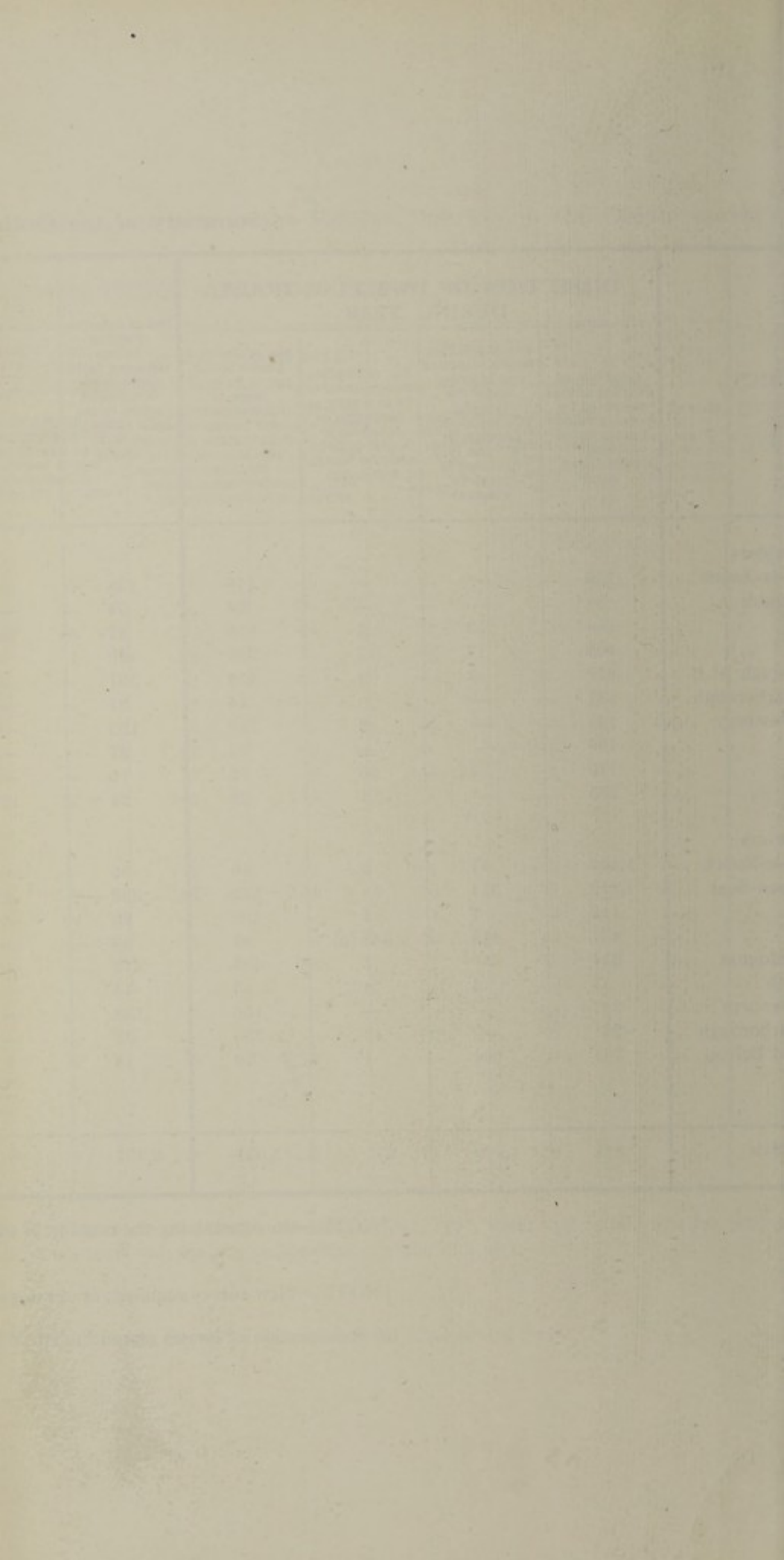
Summary of the Ordinary Housing Activities in the Various Districts in the County during 1950

DISTRICT	INSPECTION OF DWELLING HOUSES DURING YEAR				No. of defective dwelling houses rendered fit in consequence of informal action by the local authority or their officers	ACTION UNDER STATUTORY POWERS DURING YEAR							HOUSING ACT, 1936, PART IV.—OVERCROWDING					
	Total No. of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	No. of dwelling houses inspected and recorded under the Housing (Consolidated) Regulations, 1925 and 1932 (included in previous column)	No. of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	No. of dwelling houses found not to be in all respects reasonably fit for human habitation (exclusive of those in previous column)		HOUSING ACT, 1936, SECTIONS 9, 10 and 16		PUBLIC HEALTH ACTS		HOUSING ACT, 1936, SECTIONS 11 and 13		HOUSING ACT, 1936, SEC. 12	No. of dwelling houses overcrowded at end of year	No. of families dwelling therein	No. of persons dwelling therein	No. of new cases of overcrowding reported during year	No. of cases of overcrowding relieved during year	No. of persons concerned in such cases
						No. of dwelling houses in respect of which notices were served requiring repairs	No. of dwelling houses rendered fit after service of formal notices (By owners)	No. of dwelling houses in respect of which notices were served requiring defects to be remedied	No. of dwelling houses in which defects were remedied after service of formal notices (By owners)	No. of dwelling houses in respect of which demolition orders were made	No. of dwelling houses demolished in pursuance of demolition orders	No. of separate tenements or underground rooms in respect of which closing orders were made						
Urban Districts																		
Abby-de-la-Zouch	156	—	—	146	128	—	7	5	3	—	—	15	21	75	5	9	45	
Abby Woulds	38	—	—	24	24	—	—	—	—	—	—	†	†	†	†	†	†	
Cowville	180	53	2	158	97	19	28	40	29	4	5	29	45	261	2	2	13	
Hindley	405	17	17	388	420	1	1	6	—	1	1	8	14	69	2	14	113	
Loughborough M.B.	812	3	3	479	391	3	—	18	23	—	—	†	†	†	†	†	†	
Market Harborough	137	—	—	48	37	—	—	—	—	—	—	30	45	227	12	10	88	
Melton Mowbray	121	—	2	119	102	—	—	—	—	—	—	†	†	†	†	57	231	
Oadby	196	—	—	29	27	—	—	69	69	—	—	5	9	38	†	3	13	
Shepshed	110	4	20	12	16	—	—	27	8	—	1	†	†	†	†	†	†	
Wigston	255	—	1	28	28	12	12	188	188	—	—	†	†	†	†	†	†	
Rural Districts																		
Abby-de-la-Zouch	1,407	41	2	40	56	—	—	166	27	2	3	†	†	†	†	39	137	
Barnes-upon-Soar	1,212	314	58	342	263	4	1	64	48	10	3	32	36	190	†	4	20	
Bilston	142	1	1	109	83	—	—	—	—	1	—	†	†	†	†	†	†	
Blaby	437	448	448 (a)	93	23	—	—	4	6	—	—	14	17	95	3	11	78	
Castle Donington	274	—	1	465	413	—	—	7	18	1	1	†	†	†	23	23	69	
Lutterworth	57	5	4	53	43	—	—	—	—	—	—	†	†	†	†	†	†	
Market Bosworth	237	—	—	156	133	—	—	7	6	—	—	†	†	†	†	32	181	
Market Harborough	281	—	15	266	35	—	—	—	—	2	2	†	†	†	†	†	†	
Melton and Belvoir	784	694	1	76	18	1	1	18	18	—	—	160	192	673	36	27	131	
Totals	7,241	1,580	575	3,031	2,337	40	50	619	443	21	16	293	379	1,628	84	231	1,119	

*NOTE.—In determining the number of persons sleeping in a house, Section 58 Housing Act, 1936, states that a child who has attained one year and is under ten years old, shall be reckoned as one-half of a unit.

†NOTE.—New survey required, as existing records are out of date.

(a) Reinspection of houses placed in Cat. V under Rural Housing Survey in connection with development maps.



HOUSING

The number of applicants on the housing authority lists number 12,894, as compared with 11,755 last year. There has been little change in the number of houses erected and in course of erection, and the following table shows the progress made.

District	Total number of applicants for council houses at end of year	Houses completed during year 1950		Houses in course of erection at end of year			
		Local authority	Private enterprise	Local authority	Private enterprise		
Urban Districts		*P/P.	Perm.		*P/P.	Perm.	
Ashby-de-la-Zouch	341	—	34	5	—	38	2
Ashby Woulds ..	230	72	—	—	34	—	—
Coalville	829	42	31	21	8	68	18
Hinckley	919	—	158	23	—	156	11
Loughborough M.B.	1,382	—	119	49	—	180	16
Market Harborough	402	—	22	9	—	65	4
Melton Mowbray ..	603	—	49	14	—	41	6
Oadby	104	—	22	10	—	—	4
Shepshed	275	30	12	5	28	26	—
Wigston	972	—	95	19	—	77	—
Rural Districts							
Ashby-de-la-Zouch	814	—	74	13	—	54	5
Barrow-upon-Soar	1,469	14	84	31	2	184	12
Billesdon	256	—	20	12	—	38	4
Blaby	782	—	102	25	—	107	13
Castle Donington ..	458	—	63	7	—	31	5
Lutterworth	484	—	52	12	—	58	3
Market Bosworth ..	1,651	18	54	42	10	128	17
Market Harborough	416	—	22	7	—	27	3
Melton and Belvoir	507	16	17	12	—	50	8
Totals ..	12,894	192	1,030	316	82	1,328	131

*Prefabricated Permanent

INSPECTION AND SUPERVISION OF FOOD

BIOLOGICAL MILK SAMPLING

Biological milk sampling involves the taking of samples of milk under proper conditions for the inoculation of guinea pigs at the Laboratory, to detect the presence of *Mycobacterium tuberculosis*. Any milk supply reported to reveal evidence of infection with *Mycobacterium tuberculosis* is regarded as capable of causing human infection with tuberculosis.

In order that the closest liaison between all concerned should be established and to attain the maximum effect with the limited number of guinea pigs available for the work, it was decided to evolve a scheme covering the County for biological milk sampling. Meetings attended by the Medical Officers and Sanitary Inspectors of the County districts, the Director of the Public Health Laboratory, the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries and the County staff, were held to discuss the subject.

It was apparent that there was no lack of enthusiasm for the work, to the contrary, "rationing" in the form of a programme of sampling would be necessary. In order to avoid overlapping and duplication of sampling, it was decided that sampling should be carried out by the County districts where they were already doing the work, by the districts who wished to commence sampling, and in all other cases by the County Sanitary Officer's Department. It was considered that the most satisfactory means of obtaining a representative sample would be at the place of production and at milking time, noting any cows not in milk or whose milk was excluded for any reason. In the case of large herds, several samples would be required from groups of churns, but they would be treated as one sample at the laboratory to economise with guinea pigs.

Although it was agreed that quarterly sampling would be the ideal basis for sampling, this was not possible with the guinea pigs available. Accordingly, in most cases, half-yearly sampling was to be the aim and the following classes of milk were to receive priority in sampling :

- (1) Raw milk supplies to schools, institutions, etc.
- (2) Producer/retailer raw milk supplies, preferably involving single herds.
- (3) Pasteurised milk (not more than 5 per cent of the samples).

In connection with (3) above, sampling for biological examination could be omitted from district authority programmes as the samples could be chosen from routine plant samples.

The aim of biological milk sampling, at this stage, was felt to be to protect the consumers of raw milk, with the eradication of tuberculosis in milch herds as a secondary consideration. Milk going for pasteurisation could not be covered until an unlimited supply of guinea pigs was available.

From past experience at the laboratory, it had been found that the number of guinea pigs available was least in the winter months and also deaths occurred in the stock during these months. For that reason it was decided that the programme of sampling should reduce the number of samples to be taken in the winter months to avoid undue dislocation in the sampling routine.

Questionnaires were circulated to all County districts with regard to the number of producer/retailers, the number of retailers of raw milk produced within and outside the district concerned, the grades of milk sold and other factors involved in sampling. The information obtained was collated and a meeting of representatives decided on a fair sampling allocation for each district. A sampling programme was drawn up by the Public Health Laboratory.

At the end of the first stage of sampling on a County basis it can safely be said that the scheme worked smoothly and well. Close co-operation was maintained between all concerned and thanks are due to the Director of the Public Health Laboratory and the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries for their active interest and support.

869 samples were taken during the year, 19 of which showed evidence of living tubercle bacillus. These cases and eight others reported by outside authorities were referred to the Divisional Veterinary Officer for follow-up action at the farms. 7 raw milk supplies were diverted for pasteurisation pending inquiries, further investigation and repeat samples. In all other cases cows were slaughtered under the Tuberculosis Order, 1938, and repeat samples proved the herds to be free from infection.

CLINICAL EXAMINATIONS AND TUBERCULIN TESTING OF CATTLE

The following is a summary of reports made by the Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries :

	No. of herd inspections	No. of cattle examined
(a) Clinical examination of dairy cattle :		
" Tuberculin Tested " herds	543	24,654
" Accredited " herds	1,173	44,083
Non-designated herds	814	12,982
(b) Tuberculin testing of " Tuberculin Tested " herds :		
Number of cattle tested .. ..	..	33,961
Number of reactors found .. ..	..	305 (0.89%)

At the end of the year there were 305 Attested and 152 Supervised Herds in the County.

MILK AND DAIRIES REGULATIONS, 1949

Section 8 of these regulations requires every local authority to keep a register of all persons carrying on the trade of distributor, and of all premises used as dairies, not being dairy farms. The following table summarises the position in the County.

District	No. on Register		Inspections		Contraventions							
	Dairies	Distributors	Dairies	Distributors	Dairies		Distributors		Out-standing, 31.12.50	Out-standing, 31.12.50		
					Found	Remedied	Found	Remedied				
Urban Districts												
Ashby-de-la-Zouch ..	2	12	6	4	—	—	—	—	—	—	—	—
Ashby Woulds ..	—	—	—	—	—	—	—	—	—	—	—	—
Coalville ..	14	30	84	96	—	—	—	—	—	—	—	—
Hinckley ..	11	23	78	14	44	49*	7	3	1	6*	4	—
Loughborough M.B. ..	17	5	102	5	3	3	—	—	—	—	—	—
Market Harborough ..	3	3	70	—	2	1	1	—	—	—	—	—
Melton Mowbray ..	7	2	14	3	3	3	—	1	—	—	—	—
Oadby ..	3	5	15	15	—	—	—	—	—	—	—	—
Shepshed ..	4	1	34	10	—	—	—	—	—	—	—	—
Wigston ..	2	30	12	74	2	2	—	11	—	—	—	—
Rural Districts												
Ashby-de-la-Zouch ..	2	8	3	—	—	—	—	—	—	—	—	—
Barrow-upon-Soar ..	16	17	40	3	4	4	—	1	—	—	—	—
Billesdon ..	—	—	—	—	—	—	—	—	—	—	—	—
Blaby ..	10	29	29	82	—	7	—	—	—	—	—	—
Castle Donington ..	4	35	23	11	—	—	—	—	—	—	—	—
Lutterworth ..	8	8	18	—	2	2	—	—	—	—	—	—
Market Bosworth ..	19	116	27	39	5	5	—	15	—	—	—	—
Market Harborough ..	2	4	64	14	—	—	—	—	—	—	—	—
Melton and Belvoir ..	6	137	23	130	—	—	—	6	—	—	—	—
Totals ..	130	465	642	500	65	77	8	38	41	—	4	—

Milk Sampling by District Councils

The following is a summary of the milk samples taken during the year :

Class	Number of Samples	Satisfactory	Unsatisfactory
"Tuberculin Tested"	108	96	12
"Accredited" ..	43	36	7
Designated "Pasteurised" ..	219	216	3
"Sterilized" ..	22	21	1
Undesignated	386	325	61

PASTEURISED AND STERILIZED MILK PLANTS

The following is a summary regarding the plants existing in the County. Several new plants have been added during the year, and in addition the output at the existing plants has been rising. There is a keen interest in the subject of pasteurisation amongst the dairymen in the County, whilst those who operate such plants have a feeling of pride in their technical ability. There is, however, a continual effort on their part to pasteurise at as low a temperature as possible, within the requirements of the Regulations, in order to preserve the "cream line".

If the general public would realise that the whole of the cream is still in the milk after treatment the dairyman would not feel that he had to operate within such fine temperature limits, and in fact the sale of this safe milk would increase even more than it is doing at present.

The "cream line" problem is especially noticeable in the rural areas where the customers have been used to drinking milk straight from the cow and the competition between raw and pasteurised milk suppliers is keenest. In the urban areas the small raw milk retailers are gradually giving up.

Type of Plant	Capacity in gallons per hour	Approximate daily output in gallons	Efficiency
H.T.S.T. ..	500—1,000	2,000	Excellent
H.T.S.T. ..	350	1,500	Excellent
H.T.S.T. ..	400	400	Good
H.T.S.T. ..	300	300	Excellent
H.T.S.T. ..	150	300	Excellent
Holder ..	400	1,800	Excellent
Holder ..	200	850	Fair
			(Extension being built and H.T.S.T. plant to be installed)
Holder ..	200	600	Good
Holder ..	100	400	Fair
			(New dairy built 1951)
Holder ..	50	250	Good
Holder ..	100	200	Good
Holder ..	100	200	Excellent
Holder ..	50	150	Good
Holder ..	50	120	Good
Sterilized ..	150	600	Good

(in bottles)

MILK SUPPLIES TO SCHOOLS, ETC.

There are 310 establishments in the County where the milk supply was under the supervision of the County Sanitary Department. These consist of 299 schools and 11 County homes and children's homes. It has been possible during the year to arrange for more schools to be supplied with Tuberculin Tested or Pasteurised milks, thus reducing the number of un-designated milk supplies.

Difficulty has been experienced in some isolated rural areas in arranging a supply of Tuberculin Tested or Pasteurised milk to the small schools. The quantity of milk required daily is so small that transport and handling costs are not covered by the fixed price allowed for the milk. The same price is paid by the Ministry of Food for all grades of milk, and this policy would not appear to encourage the supply of graded milk.

To ensure that the milk supplied to schools, etc., was free from harmful organisms and of good keeping quality, 1,029 samples were taken during the year and submitted to the Public Health Laboratory for examination.

The following table shows the various types of milk which were supplied to the schools on the 31st December, 1950 :

Schools Supplies at 31st December, 1950

Schools	"Tuberculin Tested"	"Pasteurised"	"Accred-ited"	Undesignated	Dried Milk	Totals
Secondary Grammar . .	1	11	—	—	—	12
Secondary Technical . .	—	3	—	—	—	3
Secondary Modern . .	—	22	—	—	—	22
Primary	28	206	7	16	1	258
Nursery	—	4	—	—	—	4
Totals	29	246	7	16	1	299
Comparable figures at 31st December, 1949	23	217	28	30	1	299

ICE CREAM

The following table gives details of the premises registered under the Food and Drugs Act, 1938, for the manufacture, etc., of ice cream, together with details of the samples collected during the year by the district sanitary inspectors.

District	Number of premises registered			Number of samples collected				
	Manufacture and Retail	Manufacture only	Retail only	Grade 1	Grade 2	Grade 3	Grade 4	Total
Urban Districts								
Ashby-de-la-Zouch ..	—	—	5	—	—	—	—	—
Ashby Woulds ..	—	—	2	—	—	—	—	—
Coalville ..	1	—	56	27	4	1	2	34
Hinckley ..	8	—	71	13	2	3	1	19
Loughborough M.B. ...	3	—	100	23	11	6	3	43
Market Harborough ..	2	1	16	9	2	—	1	12
Melton Mowbray ..	1	1	41	7	4	—	1	12
Oadby ..	2	—	7	—	—	—	—	—
Shepshed ..	—	—	8	4	—	1	—	5
Wigston ..	4	4	32	24	7	3	—	34
Rural Districts								
Ashby-de-la-Zouch ..	2	—	23	5	2	—	1	8
Barrow-upon-Soar ..	7	—	53	59	18	13	3	93
Billesdon ..	—	—	8	—	—	—	—	—
Blaby ..	9	—	41	71	37	8	—	116
Castle Donington ..	1	—	10	—	—	—	—	—
Lutterworth ..	2	—	17	3	2	2	—	7
Market Bosworth ..	2	—	27	—	—	—	—	—
Market Harborough ..	3	—	9	—	—	—	—	—
Melton and Belvoir ..	—	—	36	7	2	—	—	9
Totals ..	47	6	562	252	91	37	12	392

This is the third complete year since the Ice Cream (Heat-Treatment) Regulations, 1947, came into force, and for the third year in succession the purity of the ice cream sold to the public has been improved. The local authorities, manufacturers and retailers should be congratulated.

The following will show this improvement :

	Year ended 31.12.48	Year ended 31.12.49	Year ended 31.12.50
% of samples within Grade I ..	33%	58%	65%
% of samples within Grades I and II	60%	79%	87%

MEAT INSPECTION

Slaughter Houses

The following table shows the situation of the slaughter houses, inspections made, etc., together with details of slaughtering in other districts of the County.

District	No. of regional slaughter houses	No. of inspections at time of slaughter	Total No. of animals slaughtered	Total No. of animals examined	No. of knackers' yards	No. of inspections
Urban Districts						
Ashby-de-la-Zouch	—	—	—	—	1	—
Ashby Woulds ..	—	—	—	—	—	—
Coalville	1	798	17,006	17,006	—	—
Hinckley	1	570	9,217	9,159	1	11
Loughborough M.B.	—	250	—	250	1	22
Market Harborough	1	348	8,173	8,173	—	—
Melton Mowbray ..	1	541	8,900	8,900	1	7
Oadby	—	132	132	132	—	—
Shepshed	—	102	149	132	—	—
Wigston	—	—	125	125	1	9
Rural Districts						
Ashby-de-la-Zouch	—	—	—	—	2	16
Barrow-upon-Soar	—	102	1,173	146	2	48
Billesdon	—	—	—	—	—	—
Blaby	—	174	660	340	—	—
Castle Donington	—	—	—	—	1	4
Lutterworth ..	—	155	155	—	1	7
Market Bosworth ..	—	85	1,637	117	—	—
Market Harborough	—	—	—	—	—	—
Melton and Belvoir	—	—	—	—	1	3
Totals ..	4	3,257	47,327	44,480	12	127

FOOD AND DRUGS

Food Premises

Continued progress has been made during the year by the districts in improving food preparing premises. Fifteen of the County districts adopted the Ministry of Food Model Byelaws and it is hoped that the remaining four will do so during 1951.

Food and Drugs Act, 1938

The provisions of the Food and Drugs Act, 1938, dealing with the composition and adulteration of food and drugs, were administered by the County Police up to the 31st March, and from the 1st April by the County Weights and Measures Inspectors. The following is a summary of the samples taken in the County during 1950 and the County Analyst's reports :

	Number Analysed	Number Unsatisfactory	Remarks
Milk	199	31	Added water—13 Deficient in milk fat—18
“Appeal to cow” milk samples	27	—	
Almonds, ground	2	—	
Aspic Jelly	1	—	
Bacon	4	—	
Blancmange Powder	1	—	
Butter	1	—	
Cake Mixture	1	—	
Celery Salt	1	—	
Cheese Spread	2	—	
Christmas Pudding	1	—	
Cinnamon	1	—	
Cocoa	1	—	
Coconut, desiccated	2	—	
Coffee and Chicory Essence ..	3	—	
Coffee, dehydrated	1	—	
Coffee, liquid	2	—	
Cream of Tartar	1	—	
Custard Powder	4	—	
Dough Nuts	1	—	
Soft Drink Powder	1	—	
Fish Cakes	1	—	
Flavouring Essence	1	—	
Fritter Mixture	1	—	
Horseradish Cream Relish ..	2	—	
Jam	2	—	
Jam Tarts	3	—	
Lemon and Barley Water ..	1	—	
Lemon Cheese	1	—	
Lemon Curd	2	—	
Lemon Curd Tarts	1	—	
Lemonade Crystals	1	—	
Luncheon Meat Pie	1	—	
Mango Chutney	1	—	

	Number Analysed	Number Unsatisfactory	Remarks
Margarine	1	—	
Meat and Vegetable Pie ..	1	—	
Milk Whipping Compound ..	1	—	
Mustard	4	—	
Orange Squash	1	—	
Pepper	7	—	
Pork Pie	3	—	
Quince Conserve	1	—	
Saccharin Tablets	1	—	
Sage and Onion Stuffing ..	1	—	
Salad Cream	2	—	
Sausages, Beef	17	—	
Sausages, Pork	9	1	Incorrectly labelled
Sausage Roll	1	—	
Sausages, unclassified	1	—	
Soup, Cream of Celery	1	—	
Sponge Mixture	2	—	
Suet, shredded	1	—	
Sugar	1	—	
Sweet Pickle	1	—	
Sweets	3	—	
Tea	2	—	
Vinegar	6	1	Referred to the Public Health Department of the District Council
Total	343	33	

Wines, Spirits, etc.

Advocaat	1	—	
Beer	5	—	
Brandy	3	—	
Cocktail	2	—	
Gin	13	1	Below strength proof spirit. Case taken
Rum	12	—	
Whisky	18	—	
Total	54	1	

Medicines, Tonics, etc.

Black Currant and Aniseed Cough Balsam	1	—	
Blood Purifier	1	—	
Bisma-Rex (Stomach Powder) ..	1	—	
Bismuth, Soda and Pepsin Mixture	1	—	
Blood Mixture	1	—	
Bronchial Balsam	1	—	
Cough Elixir	1	—	

	Number Analysed	Number Unsatisfactory	Remarks
Cough Linctus	1	—	
Cough Mixture	1	—	
Cough Syrup	2	—	
Diarrhoea Mixture	1	—	
Liquifruite Cough Mixture	1	—	
Indian Brandee (cough mixture)	1	1	Liabile to evaporation No action taken
Influenza Mixture	1	—	
Meditus Syrup (cough mixture)	1	—	
Nerve Tonic Syrup	1	—	
Rose Hip Syrup	1	—	
Syrup of Figs	2	—	
Total	20	1	
Grand Totals	417	35	
1949	518	38	
1948	470	44	
1947	489	34	

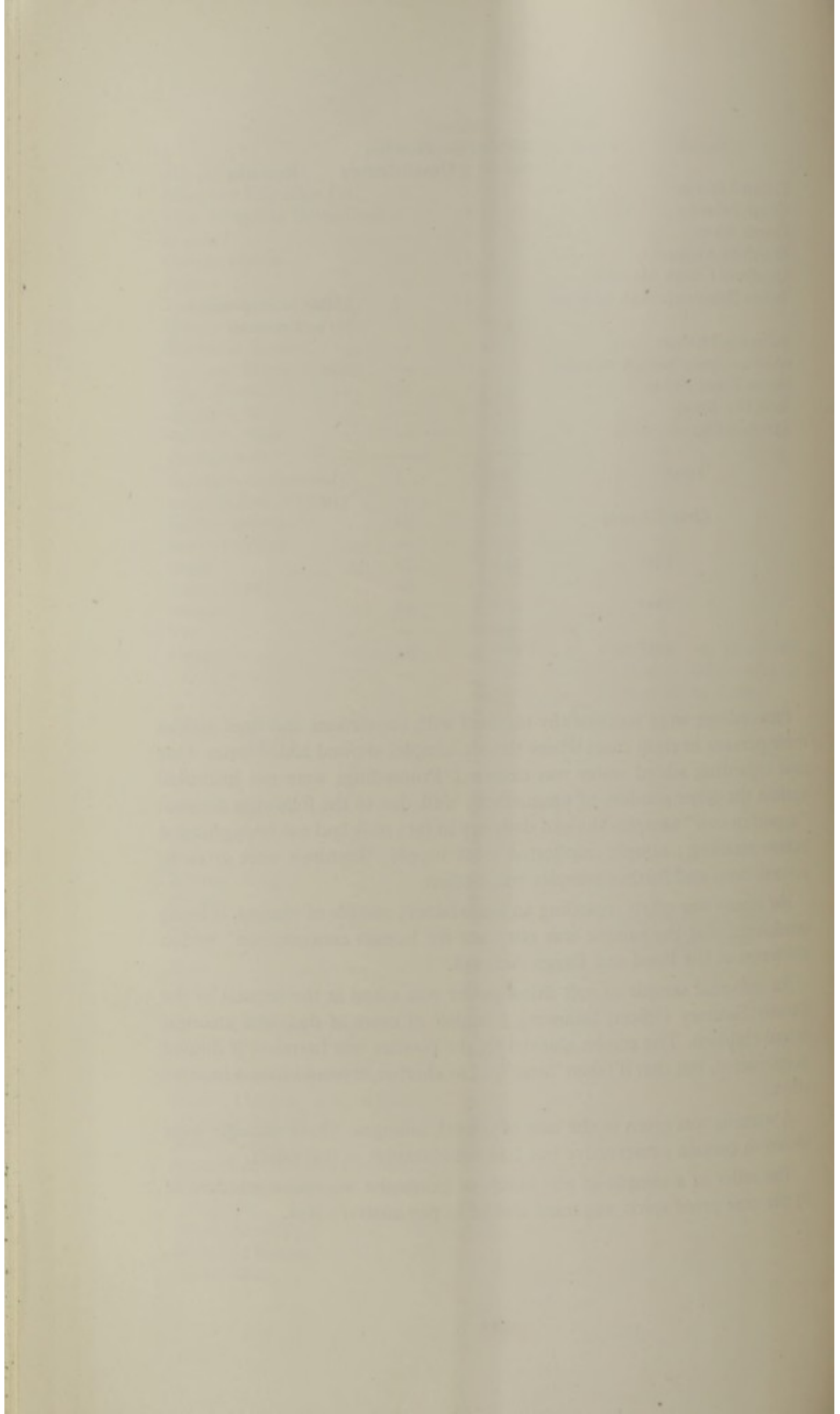
Proceedings were successfully instituted with convictions and fines against three persons in eight cases where the milk samples showed added water. One case regarding added water was dismissed. Proceedings were not instituted against the other vendors of unsatisfactory milk due to the following reasons: "appeal to cow" samples showed deficiency in fat ; milk had not been plunged before retailing ; sample implicated a bulk supply. Warnings were given in several cases and further samples will be taken.

No action was taken regarding an unsatisfactory sample of vinegar, it being considered that the sample was not "unfit for human consumption" within the terms of the Food and Drugs Act, 1938.

An informal sample of soft drink powder was taken at the request of the County Sanitary Officer, following a number of cases of diarrhoea amongst school children. The results showed that the powder was harmless if diluted as instructed, but that if taken "neat", i.e., as sherbet, it would have a laxative effect.

A warning was given in the case of the pork sausages. These sausages were shown to contain preservative but had no declaration to that effect.

The seller of a sample of gin which was below the minimum standard of 65 per cent proof spirit was fined and had to pay analyst's fees.



STATISTICAL TABLES

STATISTICAL TABLES

T.B.1.—Return showing the work of the Chest Clinics during the year 1950

	Respiratory			Non-Respiratory			Total			Grand Totals
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
A. (1) Number of notified cases of T.B. on clinic registers on 1st JANUARY, 1950	671	521	46	117	135	118	788	656	164	1,608
(2) Transfers from clinics under other H.M.C.'s or B.G.'s during the year	41	37	2	2	8	1	43	45	3	91
(3) Cases lost sight of which returned to clinic during the year	—	1	—	—	—	—	—	1	—	1
B. Number of NEW CASES diagnosed as tuberculous during the year :										
T.B. MINUS	51	40	24	10	7	23	61	47	47	155
T.B. PLUS	55	32	1	1	1	1	56	33	2	91
C. Number of cases in										
A and B written off	46	52	1	15	19	11	61	71	12	144
(2) Died (all causes)	48	33	2	3	1	—	51	34	2	87
(3) Removed to other H.M.C. or B.G. Clinics	46	29	5	4	5	1	50	34	6	90
(4) Other reasons	13	8	—	2	4	3	15	12	3	30
D. (1) Number of notified cases of T.B. on clinic registers on 31st DECEMBER, 1950	669	510	60	117	124	115	786	634	175	1,595
(2) Number of above known to have had positive sputum within preceding six months	123	87	2	—	—	—	123	87	2	212
E. Number of Contacts										
(1) Diagnosed as Tuberculous	5	6	3	—	—	1	5	6	4	15
(2) Not Tuberculous	172	254	368	—	—	—	172	254	368	794
during the year :										
(3) Not determined (as at 31st December, 1950)	4	2	2	—	—	—	4	2	2	8
F. Number of patients on clinic registers awaiting admission to T.B. Institution	6	13	2	—	1	—	6	14	2	22

NOTES.—(1) "Children" means persons under the age of 15. When a case, first diagnosed and placed on the register as a child, reaches 15 it is transferred to the adult register, but is *not* counted as a new case.

(2) As a few cases attend from the County of Rutland, the table does not show the exact position relating to Leicestershire.

T.B.4—Tuberculosis (Respiratory and Other). Notifications, Deaths and Death Rates

Year	Localisation	Number of Notifications			Number of Deaths			Death Rates		
		Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County
1940	Respiratory .. Other ..	113 51	91 48	204 99	88 25	74 14	162 39	0.59 0.17	0.45 0.09	0.52 0.13
1941	Respiratory .. Other ..	102 59	114 31	216 90	79 19	90 11	169 30	0.51 0.13	0.52 0.06	0.51 0.09
1942	Respiratory .. Other ..	100 69	133 53	233 122	61 23	64 17	125 40	0.41 0.15	0.38 0.10	0.39 0.13
1943	Respiratory .. Other ..	91 59	91 59	182 118	75 11	79 18	154 29	0.51 0.07	0.48 0.11	0.49 0.09
1944	Respiratory .. Other ..	99 42	74 33	173 75	52 24	61 13	113 37	0.36 0.16	0.37 0.08	0.36 0.12
1945	Respiratory .. Other ..	109 28	108 39	217 67	59 16	52 16	111 32	0.41 0.11	0.32 0.10	0.36 0.10
1946	Respiratory .. Other ..	94 35	91 51	185 86	48 19	52 12	100 31	0.32 0.13	0.31 0.07	0.31 0.10
1947	Respiratory .. Other ..	130 40	100 35	230 75	72 16	52 10	124 26	0.47 0.10	0.30 0.06	0.38 0.08
1948	Respiratory .. Other ..	87 34	99 44	186 78	69 9	50 14	119 23	0.43 0.06	0.28 0.08	0.35 0.07
1949	Respiratory .. Other ..	131 21	108 34	239 55	58 9	61 6	119 15	0.36 0.06	0.34 0.03	0.35 0.04
Average for above ten years ..	Respiratory .. Other ..	106 44	101 43	207 87	66 17	64 13	130 30	0.44 0.11	0.38 0.08	0.40 0.10
1950	Respiratory .. Other ..	113 26	103 21	216 47	41 5	46 6	87 11	0.25 0.03	0.25 0.03	0.25 0.03

T.B.2—Sanatoria, Hospitals, and other Residential Institutions for the Treatment of Tuberculosis for the year 1950

Name and situation of Institution (1)	Class of Case (2)	Number of Leicestershire patients who were under treatment on 31st December, 1949 (3)	Number of Leicestershire patients admitted during the year ended 31st December, 1950 (4)	Number of Leicestershire patients who were discharged or died in the Institution during the year ended 31st December, 1950 (5)	Total number of days during which patients referred to in Col. 5 were resident in the Institution (6)	Average number of days which patients referred to in Col. 5 were resident in the Institution (7)	Number of Leicestershire patients who were under treatment on 31st December, 1950 (8)
The Sanatorium, Markfield	Male adults R	68	108	106	27,409	259	70
	Female adults R	55	86	88	21,621	246	53
	Children R	4	4	5	2,081	416	3
	Male adults NR	1	1	2	109	54	—
	Female adults NR	2	—	2	318	159	—
General Hospital, Leicester	Female adults R	1	—	1	24	24	—
	Male adults NR	4	2	5	919	184	1
	Female adults NR	1	3	3	887	296	1
	Children NR	2	2	2	1,013	506	2
Isolation Hospital and Chest Unit, Leicester	Male adults R	3	15	13	1,126	87	5
	Female adults R	2	10	9	433	48	3
	Children R	—	2	1	121	121	1
Harlow Wood Orthopaedic Hospital, Mansfield	Male adults NR	1	2	2	640	320	1
	Children NR	1	3	3	117	39	1
Warwickshire Orthopaedic Hospital, Coleshill	Female adults NR	1	—	1	526	526	—
	Children NR	6	1	2	1,097	548	5
Children's Hospital, Gringley-on-the-Hill	Children NR	2	—	1	870	870	1
Royal National Sanatorium, Bournemouth	Female adults R	1	—	1	577	577	—
Mundesley Sanatorium, Norfolk	Male adults R	1	—	1	325	325	—
Moseley Hall Hospital for Children, Birmingham	Children NR	1	—	1	230	230	—
Osgodby Hospital, near Market Rasen	Male adults R	—	3	1	150	150	2
City Hospital, Nottingham	Female adults R	—	1	—	—	—	1
Pendyffryn Hall Sanatorium, Penmaenmawr	Male adults R	—	1	—	—	—	1
TOTALS		157	244	250	60,593	242	151

R—Respiratory Tuberculosis. NR—Non-respiratory Tuberculosis

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TB 3—Return showing the immediate results of treatment of patients discharged from Residential Institutions during the year 1950

a) Respiratory Tuberculosis

Classification on admission to Institution	Condition at time of discharge	Duration of Residential Treatment in the Institution											Total	
		Under 3 months but exceeding 28 days			3—6 months			6—12 months			More than 12 months			
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.		Ch.
R.A.1 ..	Quiescent	1	1	—	2	2	1	—	1	1	—	—	—	9
	Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—
	Died in Institution ..	—	—	—	—	—	—	—	—	—	—	—	—	—
R.A.2 ..	Quiescent	—	1	—	4	3	—	4	2	1	2	—	—	17
	Not quiescent ..	—	1	—	—	1	—	—	1	—	—	—	—	3
	Died in Institution ..	—	—	—	—	—	—	—	—	—	—	—	—	—
R.A.3 ..	Quiescent	—	—	—	—	—	—	—	—	—	1	—	1	2
	Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—
	Died in Institution ..	—	—	—	—	—	—	—	—	—	—	—	—	—
R.B.1 ..	Quiescent	—	—	—	—	—	—	1	—	—	—	—	1	2
	Not quiescent ..	—	1	—	—	1	—	—	1	—	1	—	—	4
	Died in Institution ..	—	—	—	—	—	—	—	—	—	—	—	—	—
R.B.2 ..	Quiescent	2	1	—	9	5	—	13	10	—	2	3	—	45
	Not quiescent ..	7	4	—	11	4	—	16	14	—	8	9	—	73
	Died in Institution ..	—	—	—	—	—	—	—	—	—	—	—	—	—
R.B.3 ..	Quiescent	—	—	—	—	—	—	2	—	—	—	—	—	2
	Not quiescent ..	1	2	—	1	2	—	7	3	—	8	5	—	29
	Died in Institution ..	2	2	—	1	1	—	3	—	—	2	2	1	14

Cases discharged under 28 days 10
 Cases died under 28 days 7
 Observation cases discharged non-tuberculous 9
 Total 226

b) Non-respiratory Tuberculosis

Bones and joints :—	Quiescent	14
	Not quiescent	4
	Died	—
Abdominal :—	Quiescent	3
	Not quiescent	—
	Died	1
Other organs :—	Quiescent	—
	Not quiescent	—
	Died	—
Peripheral Glands:—	Quiescent	1
	Not quiescent	—
	Died	—
Observation cases discharged non-tuberculous		1
	Total	24

Annual Report of the United States Geological Survey
for the year 1900

Changes in Mountain Levels

Station	Year	Height	Change
1	1880	1000	
1	1890	1000	
1	1900	1000	
2	1880	1000	
2	1890	1000	
2	1900	1000	
3	1880	1000	
3	1890	1000	
3	1900	1000	
4	1880	1000	
4	1890	1000	
4	1900	1000	
5	1880	1000	
5	1890	1000	
5	1900	1000	
6	1880	1000	
6	1890	1000	
6	1900	1000	
7	1880	1000	
7	1890	1000	
7	1900	1000	
8	1880	1000	
8	1890	1000	
8	1900	1000	
9	1880	1000	
9	1890	1000	
9	1900	1000	
10	1880	1000	
10	1890	1000	
10	1900	1000	

Notes: The above table shows the results of the leveling work done during the year 1900. The stations are numbered 1 to 10. The heights are given in feet. The changes are given in feet and inches.

Summary of the work done during the year 1900. The following table shows the amount of work done at each station. The work is given in feet and inches.

Station	Work done
1	1000
2	1000
3	1000
4	1000
5	1000
6	1000
7	1000
8	1000
9	1000
10	1000

T.B.5—Tuberculosis, Notifications and Deaths. Showing Age Periods, year 1950

AGE PERIODS	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
0—	—	1	— ¹	—	—	—	1	—
1—	6 ¹	1	7 ¹	4 ¹	—	—	2	—
5—	11 ¹	8 ¹	7 ²	10	—	2	3	—
15—	68 ²⁴	74 ²⁷	3	8 ⁴	18	24	1	—
45—	32 ¹⁴	7 ⁵	4	3 ¹	27	9	1	1
65—	8 ³	— ¹	1	—	5	2	2	—
Total	125 ⁴³	91 ³⁴	22 ⁴	25 ⁶	50	37	10	1

NOTE.—The figures in small type show additional cases which came to the notice of the County M.O.H. other than by formal notification

T.B.6—Tuberculosis Notifications and Deaths. Urban and Rural Districts, year 1950

District	Estimated population mid-year	NOTIFICATIONS OF TUBERCULOSIS				DEATHS FROM TUBERCULOSIS			
		Respiratory	Attack Rate	Non-Respiratory	Attack Rate	Respiratory	Death Rate	Non-Respiratory	Death Rate
Urban									
Ashby-de-la-Zouch	6,552	5	0.76	—	—	2	0.31	—	—
Ashby Woulds	3,358	—	—	1	0.30	—	—	—	—
Coalville	25,720	14	0.54	2	0.08	8	0.31	—	—
Hinckley	39,050	27	0.69	9	0.23	8	0.20	2	0.05
Loughborough	37,160	24	0.65	4	0.11	7	0.19	1	0.03
Market Harborough	10,420	4	0.38	—	—	3	0.29	1	0.10
Melton Mowbray	13,470	18	1.34	8	0.59	5	0.37	1	0.07
Oadby	6,273	2	0.32	2	0.32	6	0.96	—	—
Shepshed	6,147	1	0.16	—	—	1	0.16	—	—
Wigston	15,630	18	1.15	—	—	1	0.06	—	—
Totals	163,780	113	0.69	26	0.16	41	0.25	5	0.03
Rural									
Ashby-de-la-Zouch	13,730	6	0.44	2	0.15	2	0.15	1	0.07
Barrow-upon-Soar	47,090	27	0.57	3	0.06	13	0.28	—	—
Billesdon	8,020	4	0.50	—	—	—	—	—	—
Blaby	39,130	24	0.61	1	0.03	10	0.26	—	—
Castle Donington	9,350	5	0.53	2	0.21	3	0.32	—	—
Lutterworth	11,730	6	0.51	1	0.09	5	0.43	—	—
Market Bosworth	26,080	18	0.69	5	0.19	7	0.27	2	0.08
Market Harborough	9,660	6	0.62	1	0.10	3	0.31	2	0.21
Melton and Belvoir	19,110	7	0.37	6	0.31	3	0.16	1	0.05
Totals	183,900	103	0.56	21	0.11	46	0.25	6	0.03

TABLE 1.—Vital Statistics

	LEICESTERSHIRE COUNTY, 1950					
	Urban		Rural		Whole County	
Area, in acres	56,860		458,548		515,408	
Population (Census 1931, adjusted to changes in boundaries)	133,227		150,690		283,917	
Population (Estimated mid-year 1950)	163,780		183,900		347,680	
	No.	Rates	No.	Rates	No.	Rates
Live births	2,675	16.33	2,949	16.04	5,624	16.17
Stillbirths	66	0.40	94	0.51	160	0.46
Deaths (all causes and all ages) ..	1,739	10.62	1,836	9.98	3,575	10.28
Deaths (under one year)	80	29.9*	72	24.4*	152	27.0*
Causes of death grouped by international classifications :						
Infective and parasitic diseases ..	65	0.40	70	0.38	135	0.39
Neoplasms	283	1.73	287	1.56	570	1.64
Allergic, endocrine system, metabolic, and nutritional diseases	6	0.04	16	0.09	22	0.06
Diseases of the nervous system and sense organs	230	1.40	243	1.32	473	1.36
Diseases of the circulatory system ..	671	4.10	706	3.84	1,377	3.96
Diseases of the respiratory system ..	128	0.78	155	0.84	283	0.81
Diseases of the digestive system ..	29	0.18	29	0.16	58	0.17
Diseases of the genito-urinary system	31	0.19	39	0.21	70	0.20
Deliveries and complication of pregnancy, childbirth, and puerperium ..	6	0.04	1	0.01	7	0.02
Congenital malformations	20	0.12	12	0.07	32	0.09
Symptoms, senility, and ill-defined diseases	220	1.34	196	1.07	416	1.20
Accidents, poisonings and violence ..	50	0.31	82	0.46	132	0.38

ote.—The rates are calculated per thousand of the population except where marked (*), which are per thousand registered births.

Table 2.—Birth Rates, Death-Rates, Analysis of Mortality, Maternal Mortality and Case-Rates for certain Infectious Diseases in the year 195

Provisional figures based on Quarterly Returns

	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (resident population 25,000-50,000 at 1931 Census)	London Administrative County
	Rates per thousand		Home Population	
Births :				
Live births	15.8	17.6	16.7	17.8
Still births	0.37	0.45	0.38	0.36
Deaths :				
All causes	11.6	12.3	11.6	11.8
Typhoid and paratyphoid fevers	0.00	0.00	0.00	0.00
Whooping cough	0.01	0.01	0.01	0.01
Diphtheria	0.00	0.00	0.00	0.00
Tuberculosis	0.36	0.42	0.33	0.39
Influenza	0.10	0.09	0.10	0.07
Smallpox	—	—	—	—
Acute poliomyelitis (including polioencephalitis)	0.02	0.02	0.02	0.01
Pneumonia	0.46	0.49	0.45	0.48
Notifications (corrected) :				
Typhoid fever	0.00	0.00	0.00	0.01
Paratyphoid fever	0.01	0.01	0.01	0.01
Meningococcal infection	0.03	0.03	0.02	0.03
Scarlet fever	1.50	1.56	1.61	1.23
Whooping cough	3.60	3.97	3.15	3.21
Diphtheria	0.02	0.03	0.02	0.03
Erysipelas	0.17	0.19	0.16	0.17
Smallpox	0.00	0.00	—	—
Measles	8.39	8.76	8.36	6.57
Pneumonia	0.70	0.77	0.61	0.50
Acute poliomyelitis (including polioencephalitis)				
Paralytic	0.13	0.12	0.11	0.08
Non-paralytic	0.05	0.05	0.06	0.05
Food poisoning	0.17	0.16	0.14	0.25
	Rates per 1,000 Live Births			
Deaths :				
All causes under 1 year of age	29.8 (a)	33.8	29.4	26.3
Enteritis and diarrhoea under 2 years of age	1.9	2.2	1.6	1.0
	Rates per 1,000 Total (Live and Still) Births			
Notifications (corrected) :				
Puerperal fever and pyrexia ..	5.81	7.43	4.33	6.03

(a) Rates per 1,000 related live births

MATERNAL MORTALITY

International List No. and Cause	England & Wales	England & Wales	Leicestershire
	Rates per thousand Total (Live and Still) births	Rates per million women aged 15-44	Rates per thousand (Live and Still) births
651 Abortion with sepsis	0.09	7	—
650, 652 Other abortion	0.05	4	—
640-649, 670-678. Complication of pregnancy and delivery	0.54	—	—
681 Sepsis of childbirth and the puerperium	0.03	—	—
680, 682-689. Other complications of the puerperium	0.15	—	—

TABLE 3.—Notifiable Diseases

Disease	Total cases (original notifications)		Total cases (corrected notifications)	
	Civilians	Non-civilians	Civilians	Non-civilians
Scarlet fever	448	—	444	—
Whooping cough	1,233	—	1,232	—
Acute poliomyelitis : paralytic	46	—	41	—
non-paralytic	14	—	10	—
Measles	4,055	—	4,056	—
Diphtheria	15	—	2	—
Acute pneumonia	378	—	376	—
Dysentery	256	—	252	—
Smallpox	—	—	—	—
Acute encephalitis : infective ..	—	—	—	—
post-infectious	1	—	1	—
Enteric or typhoid fever	1	—	—	—
Paratyphoid fevers	3	—	3	—
Erysipelas	62	—	61	—
Meningococcal infection	8	—	7	—
Food poisoning	57	—	56	—
Puerperal pyrexia	16	—	16	—
Ophthalmia neonatorum	3	—	3	—

Table 4.—Corrected Notifications of Infectious Diseases in Age Groups (Civilians only)

Disease	Age groups (years)									Totals
	0—	1—	3—	5—	10—	15—	25 and over	Age unknown		
Scarlet fever ..	1	25	116	214	39	19	12	18	444	
Whooping cough ..	101	292	390	416	12	7	14	—	1,232	
Acute poliomyelitis: paralytic ..	2	4	4	7	8	5	11	—	41	
non-paralytic ..	—	—	1	3	2	1	2	1	10	
Measles ..	144	905	1,140	1,748	62	15	18	24	4,056	
Diphtheria ..	—	—	—	1	—	—	1	—	2	

Disease	Age groups (years)							Totals
	0—	5—	15—	45—	65 and over	Age unknown		
Acute pneumonia ..	105	55	76	79	58	3	376	
Dysentery ..	71	84	72	16	6	3	252	
Smallpox ..	—	—	—	—	—	—	—	
Acute encephalitis: infective ..	—	—	—	—	—	—	—	
post-infectious ..	1	—	—	—	—	—	1	
Enteric or typhoid fever ..	—	—	—	—	—	—	—	
Paratyphoid fevers ..	1	—	—	2	—	—	3	
Erysipelas ..	1	—	—	22	14	1	61	
Meningococcal infection ..	3	2	2	—	—	—	7	
Food poisoning ..	16	11	17	9	1	2	56	

Disease	Age group not stated
Puerperal pyrexia ..	16
Ophthalmia neonatorum ..	3

Date	Patient	Diagnosis
1917	John Doe	Typhoid fever
1918	Jane Smith	Scarlet fever
1919	Robert Brown	Diphtheria
1920	Mary White	Epidemic typhus
1921	James Black	Typhoid fever
1922	Elizabeth Green	Scarlet fever
1923	William Gray	Diphtheria
1924	Margaret Hall	Epidemic typhus
1925	Charles King	Typhoid fever
1926	Anna Lee	Scarlet fever
1927	Frank Miller	Diphtheria
1928	Grace Wilson	Epidemic typhus
1929	Henry Taylor	Typhoid fever
1930	Lillian Adams	Scarlet fever
1931	George Baker	Diphtheria
1932	Helen Clark	Epidemic typhus
1933	Richard Evans	Typhoid fever
1934	Sophia Foster	Scarlet fever
1935	Thomas Gibson	Diphtheria
1936	Virginia Hill	Epidemic typhus

Table 6.

Causes of Death in Administrative Areas, 1950

CAUSES OF DEATH	Abby-de-la-Zouch U.D.		Abby Wolds U.D.		Coalville U.D.		Hinckley U.D.		Loughborough M.B.		Market Harborough U.D.		Melton Mowbray U.D.		Oadby U.D.		Shepshed U.D.		Wigston U.D.		Abby-de-la-Zouch R.D.		Barrow-on-Soar R.D.		Billesdon R.D.		Blyby R.D.		Castle Donington R.D.		Lutterworth R.D.		Market Bosworth R.D.		Market Harborough R.D.		Melton & Belvoir R.D.		Totals U.D.'s		Totals R.D.'s		Totals Whole County				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
All cases	32	44	21	14	164	122	180	187	205	202	58	51	94	76	40	38	33	33	74	71	61	75	259	235	37	36	188	170	52	36	62	68	122	119	61	62	105	88	901	838	947	889	3,275				
Tuberculosis, respiratory	1	1	-	-	4	4	2	2	5	2	3	-	4	1	3	3	-	1	1	-	1	-	3	10	-	-	6	4	3	-	2	3	3	4	3	-	3	-	27	14	23	23	87				
Tuberculosis, other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	5	1	11				
Septic disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	3	2	7	7				
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1		
Whooping cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	4		
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1		
Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2
Other infective and parasitic diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	4
Malignant neoplasm, stomach	1	2	1	-	8	-	4	11	5	3	2	1	2	2	1	2	1	1	1	4	1	1	6	1	1	1	8	1	1	2	2	1	2	1	4	1	4	1	35	9	35	5	74				
Malignant neoplasm, lung, bronchus	-	-	-	-	6	-	4	10	-	4	-	-	4	-	1	1	2	-	-	-	-	-	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	34	35						
Malignant neoplasm, breast	2	-	1	-	-	-	6	-	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	15	-	15						
Malignant neoplasm, uterus	2	3	5	2	17	4	10	13	19	12	5	5	9	4	5	3	3	1	6	9	6	4	19	15	5	2	28	23	7	3	3	3	8	9	8	2	12	4	90	36	96	65	307				
Other malignant and lymphatic neoplasms	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	1	3		
Leukaemia, aleukemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	11	13		
Diabetes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	22	24		
Vascular lesions of nervous system	8	11	2	2	16	18	20	26	25	39	6	9	8	8	6	5	1	13	4	7	9	12	24	43	4	3	23	30	4	7	2	7	20	23	3	10	10	9	161	129	399	444	473				
Coronary disease, angina	4	1	3	1	16	7	31	12	31	21	10	-	16	10	10	6	1	1	5	7	11	8	32	12	6	6	19	9	5	3	5	5	14	11	8	9	135	63	113	71	382						
Hypertension with heart disease	2	1	1	2	7	5	12	12	5	1	2	2	3	4	1	2	1	1	2	2	1	1	6	10	2	2	2	3	2	2	2	1	1	3	1	2	2	2	26	34	17	23	100				
Other heart disease	7	11	3	-	27	24	19	43	33	53	9	17	15	14	4	10	5	4	18	30	12	10	15	22	5	3	2	2	1	2	3	3	2	6	10	3	36	31	41	32	140						
Other circulatory disease	1	3	2	1	6	3	6	6	9	8	3	2	3	1	-	1	2	4	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	3	2	3	4	12						
Influenza	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18	18	25
Pneumonia	1	1	-	-	4	5	6	4	5	5	7	1	4	1	2	3	1	3	4	3	1	3	4	14	4	11	3	5	1	6	2	8	6	6	1	1	1	3	2	5	15	7	34				
Bronchitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	17	3	11		
Other diseases of respiratory system	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8	12	14		
Ulcer of stomach and duodenum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	4	7		
Gastroenteritis and diarrhoea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	8		
Nephritis and nephrosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11	-	16		
Hypertrophy of prostate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	-	6		
Prostatitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	15	5	2		
Other diseases of genitourinary system	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	10	32		
Fracture, childbirth, abortion	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	2	19		
Caesarean section	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8	12	14		
Other defined and ill-defined diseases	2	4	1	3	26	29	25	28	15	16	2	8	16	4	5	4	5	7	5	5	5	13	27	23	4	13	25	4	1	10	6	18	13	4	7	7	12	102	118	92	104						
Motor vehicle accidents	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	2	19		
All other accidents	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	15	24		
Infanticide	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	14	2	11		
Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	3	-	4
Totals of infants under 1 year:	1	2	-	1	12	13	12	5	8	6	1	1	6	2	2	1	-	-	6	1	3	7	8	5	3	3	3	9	1	1	7	2	7	3	2	2	4	2	48	32	28	34	152				
Total	1	2	-	1	12	13	12	5	8	6	1	1	6	2	2	1	-	-	6	1	3	7	8	5	3	3	3	9	1	1	7	2	7	3	2	2	4	2	48	32	28	34					
Legitimate	1	1	-	1	12	13	12	5	8	6	1	1	6	2	2	1	-	-	6	1	3	7</																									

Date	Description	Debit	Credit	Balance	Remarks
1880	Jan 1				Balance forward
	Jan 15	100		100	Payment
	Jan 30		50	50	Receipt
	Feb 15	200		250	Payment
	Feb 28		100	150	Receipt
	Mar 15	150		300	Payment
	Mar 31		200	100	Receipt
	Apr 15	300		400	Payment
	Apr 30		150	250	Receipt
	May 15	250		500	Payment
	May 31		300	200	Receipt
	Jun 15	400		600	Payment
	Jun 30		250	350	Receipt
	Jul 15	350		700	Payment
	Jul 31		400	300	Receipt
	Aug 15	500		800	Payment
	Aug 31		350	450	Receipt
	Sep 15	450		900	Payment
	Sep 30		400	500	Receipt
	Oct 15	600		1100	Payment
	Oct 31		500	600	Receipt
	Nov 15	550		1150	Payment
	Nov 30		450	700	Receipt
	Dec 15	700		1400	Payment
	Dec 31		600	800	Receipt
	Total	5000	4000	1000	

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