[Report 1953] / Medical Officer of Health, Leicestershire / County of Leicester County Council.

Contributors

Leicestershire (England). County Council.

Publication/Creation

1953

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LEICESTER COUNTY COUNCIL

ANNUAL REPORT

of the

COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1953

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



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LEICESTER COUNTY COUNCIL

ANNUAL REPORT

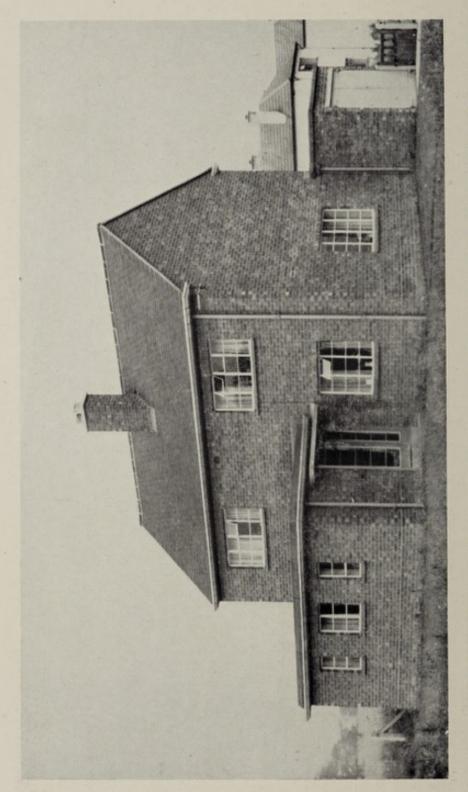
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FOR THE YEAR
1953

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

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House erected by County Council for the District Nurse-Midwife at Kirby Muxloe

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COUNTY HEALTH DEPARTMENT, 17 FRIAR LANE, LEICESTER.

August, 1954

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 1953.

The Report for 1952 included a special survey of the services provided under the National Health Services Act, which described in some detail the administrative arrangements for the various services. This year's report, therefore, does not attempt to cover the same ground once again, but gives the necessary statistics about these services and comments on any changes or fresh developments.

I should like to call attention to the tables of figures and graphs, especially those in the section headed "Statistics and Social Circumstances of the Area". These figures will, I think, repay careful study; taken in comparison with previous years they can give us some indication of our success in dealing with certain problems, and can indicate where action may be required for the future. It is true that care has to be taken in drawing conclusions from statistics: for example, the graph on page 27, which gives the average age of deaths since 1890, might be read as indicating that people are living to a much older age than formerly, whereas the truth is that many more people are now living to an old age, which is not quite the same thing. In other words, it is mainly the great improvement in the rates in the early years of life which produces those results.

The death-rate from tuberculosis continues to drop and there is some comment in the report on the chances of continued success in our attack on this disease. The death-rate from accidents is surely a challenge to us all-considerably more people now die each year from accidents than from tuberculosis, and recent work has shown that especially with young children and old people, a surprisingly large proportion of accidents occur in the home.

In the section headed "Inspection and Supervision of Food" there is a brief description of the methods adopted in this county to deal with infection of milk by Brucella abortus. This is a very difficult problem, and one on which there is much divergence of opinion and practice.

An Annual Report furnishes a record of the year's work and provides information which I hope is of interest to the Committee responsible for the

direction of this work. It also serves the useful purpose of compelling a Medical Officer of Health to look further than the day-to-day administration of his Department, which, if he is not careful, can monopolise his attention to the detriment of the progress and eventual efficiency of the service. It is most important that we should constantly bear in mind that our main interest must remain in preventive and social medicine, and that we should not allow our other duties to prevent our taking advantage of the opportunities afforded by Section 28 of the National Health Service Act ("Prevention of Illness, Care and After-Care") and by the handicapped persons sections of the National Assistance Act.

It is a very real pleasure to record my appreciation of the interest shown by all members of the Committee in the work of the Department, and of the consideration invariably shown to myself and the staff. I am glad to have the opportunity of expressing my gratitude to all those working in the County Health Service, whatever their duties may be, especially to Mr. E. R. Turner in his first year as Chief Administrative Assistant and to Mr. O. Bullock for his work in the preparation of this report, and to the Chief Officers of other departments of the County Council and their staffs.

I have the honour to remain,
Your obedient servant,
G. H. GIBSON,

County Medical Officer

HEALTH COMMITTEE

FORSELL, J. T. (Chairman)

ATKINS, Mrs. D. (resigned March 1954) BOSWORTH, E.

CARSON, S. H. (resigned March 1954) FREEMAN, H.

HARVEY, L. W. HEWITT, N. L. HOLMES, J. H.

KEAY, Mrs. M. E., B.E.M.

KING, M.

MARSH, Mrs. A. G. WORTLEY MARTIN, Lt.-Col. SIR ROBERT, C.M.G. YATES, F.

(ex-officio)

MAWBY, G. H.

MILLER, W. M. (Vice-Chairman) MURPHY, R.

O'NEILL, W.
PICKERING, L. G. W.
POCHIN, V. R. (ex-officio)
SARGANT, Mrs. D. E.
SCHOFIELD, Dr. H.

SHEFFIELD, Mrs. D. M.

WORTLEY, W. O.

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 :

REPRESENTATION:

EVERARD, Mrs. F. J. F. . . Leicestershire County Nursing Association MARTIN, Hon. Lady . . Leicestershire County Nursing Association MILLER, Miss I. H. . . Royal Leicester, Leicestershire and Rutland Incor-

porated Institution for the Blind
.. National Health Service (Leicestershire and Rutland) GIBSON, Dr. T. M.

Executive Council

LORRIMER, Mrs. J. H. .. Voluntary Association for Cripples' Welfare

GARDINER, J. Leicestershire and Rutland Association of Urban

Authorities

SEVILLE, H. A... .. Leicestershire and Rutland Association of Rural

District Councils

Sub-Committees of the Health Committee

(including terms of reference)

General Purposes Sub-Committee:

MILLER, W. M. (Chairman)

Ambulance Service

Health Centres

Health Education

Housing (including housing of rural

workers)

Milk and Dairies

Prevention of pollution of rivers and

watercourses

HARVEY, L. W. (Vice-Chairman)

Sewerage and water

Small dwellings

Welfare of the blind, crippled, deaf, dumb and handicapped persons General matters not specifically re-ferred to any other Sub-Committee

Domiciliary Services Sub-Committee:

WORTLEY, W. O. (Chairman)

Domestic Help Service

Health Visiting Home Nursing

Maternity and Child Welfare

Midwifery

Other types of illness, including venereal disease, care of epileptics and care of patients discharged from hospital

SARGANT, Mrs. D. E. (Vice-Chairman)

Provision of nursing equipment and apparatus

Tuberculosis, including the provision of village settlements, workshops, hostel accommodation, night sanatoria, domiciliary visits to tuberculosis patients, provision of shelters and the setting up of a Care Committee

HEALTH COMMITTEE—continued

Mental Health Sub-Committee:

BOOTH, C. Z. M. (Chairman)

DALLEY, Mrs. C. E. (Vice-Chairman)

Lunacy and Mental Deficiency, including the Council's duties in respect of mental illness or defectiveness under Section 28 of the scheme under the National Health Service Act, 1946.

Representation on other Governing Bodies and Associations

Leicestershire County Nursing Association:

FORSELL, J. T., HARVEY, L. W., HOLMES, J. H., SARGANT, Mrs. D. E.

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

MAWBY, G. H.

HARVEY, L. W. HOLMES, J. H. MILLER, W. M.

KEAY, Mrs. M. E. MARTIN, Hon. Lady

Leicestershire Voluntary Association for Cripples' Welfare:

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

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. YATES, F.

Wycliffe Society for Helping the Blind:

KEAY, Mrs. M. E.

Southern Regional Association for the Blind:

YATES, F.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

County Medical Officer; Principal School Medical Officer: GIBSON, G. H., M.B., CH.B., D.P.H.

Deputy County Medical Officer; Deputy Principal 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:

BENNETT, JOAN G. H., M.B., B.CH., B.A.O.
CRUICKSHANK, MARGARET O., M.A., M.R.C.S., L.R.C.P.

Senior Assistant County Medical Officer; Medical Officer of Health, Loughborough M.B.:

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

Assistant County Medical Officer; Medical Officer of Health, Blaby and Lutterworth Rural Districts:

McFARLAND, W. H. D., M.B., B.CH., B.A.O., D.P.H. (appointed 1st July, 1953)

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, Wigston and Market Harborough 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:

BROUGH, M. C., M.D., B.CH., B.A.O.
(Joint duties with Sheffield Regional Hospital Board and County Council)

Principal School Dental Surgeon:

ASHTON, P., L.D.S.

School Dental Surgeons:

WARD, A. E., L.D.S.
McLELLAN, C. L. R., L.D.S.
CAMPBELL, W. G., L.D.S.
LATIMER, R., L.D.S. (part-time)

County Sanitary Officer:

GREGORY, S. A., M.R.SAN.I., M.S.I.A.

STAFF OF THE PUBLIC HEALTH DEPARTMENT —continued

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.

Almoner :

WHITEHALL, Miss M. I., B.SC.

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:

Ambulance Officer:

CAVE, F. J.

HAMER, Mrs. A. L. E.

Senior Mental Health Officer and Authorised Officer:

FORDHAM, W. J.

Deputy Senior Mental Health Officer and Authorised Officer:
GAUNT, Miss M., D.P.A.

Mental Health Officers and Authorised Officers:

MAGEE, L. M. CHARLES, Mrs. R.

WEST, Miss D. I.

Chief Administrative Assistant:

BURDITT, H. (retired 30th September, 1953) TURNER, E. R. (appointed 1st October, 1953)

DISTRICT MEDICAL OFFICERS OF HEALTH

Area URBAN :	Name	Office Address and Telephone No.
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal	Town Hall, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 50)
Ashby Woulds	Dr. A. M. W. Segerdal	Council Offices, Moira (Tel. Swadlincote 7669)
Coalville	Dr. A. Hamilton	Council Offices, London Road, Coalville (Tel. Coalville 283)
Hinckley	Dr. W. D. Cruickshank	Council Offices, Church Walk, Hinckley (Tel. Hinckley 771)
Loughborough	Dr. R. C. Holderness	Health Department, Town Hall, Loughborough (Tel. Loughborough 2094)
Market Harborough	Dr. R. W. Kind	Council Offices, Northampton Road, Market Harborough (Tel. Market Harborough 2258)
Melton Mowbray	Dr. J. Young	Egerton Lodge, Melton Mowbray (Tel. Melton Mowbray 662)
Oadby	Dr. R. W. Kind	Council Offices, Oadby (Tel. Oadby 585)
Shepshed	Dr. A. M. W. Segerdal	Council Offices, Shepshed (Tel. Shepshed 3212)
Wigston	Dr. R. W. Kind	Council Offices, Wigston (Tel. Wigston 2345)
RURAL:		
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal	South Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 77)
Barrow-upon-Soar	Dr. J. W. Hall	The Grange, Rothley (Tel. Rothley 391)
Billesdon	Dr. J. Young	Council Offices, Thurnby (Tel. Thurnby 356)
Blaby	Dr. W. D. H. McFarland	Council Offices, Narborough (Tel. Narborough 2282, 2204, 2317, 2393)
Castle Donington	Dr. T. M. Montford	4 Clapgun Street, Castle Donington (Tel. Castle Donington 271)
Lutterworth	Dr. W. D. H. McFarland	Council Offices, Lutterworth (Tel. Lutterworth 61/64)
Market Bosworth	Dr. W. D. Cruickshank	Council Offices, Market Bosworth (Tel. Market Bosworth 234, 371)
Market Harborough	Dr. R. W. Kind	42 High Street, Market Har- borough (Tel. Market Harborough 2063)
Melton and Belvoir	Dr. J. Young	10 High Street, Melton Mowbray (Tel. Melton Mowbray 343)

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS

The County of Leicester is situate practically in the Centre of England. On its borders lie the counties of Derby, Nottingham, Lincoln, Rutland, Northampton, Warwick and Stafford. The geographical area of the county is 832 square miles—that of the Administrative County is 806 square miles. Its extreme length north to south is 44 miles, and east to west 39 miles. The surface varies from 100 feet to 912 feet above sea level. Agriculture, mining and quarrying, engineering, hosiery, and boots and shoes are the principal industries.

GENERAL STATISTICAL SUMMARY OF THE COUNTY

A STORY OF THE PROPERTY OF THE PARTY OF THE				Whole County
Area in Acres	Urban Rural	56,850 458,548		515,398
Population, Census 1951 (prelim	ninary report) :	-		
	Urban	161,728		
	Rural	184,104		345,832
Population (Registrar-General's	estimates, mic	d-year 1953)	:	
	Urban	163,500		Was and Ba
and relative to	Rural	188,000	* *	351,500
Rateable value as at 1st April, 1		# 1000 m		£1,785,707
Estimated product of penny rate				£6,963
Live births	Urban Rural	2,602 2,820		5,422
Live birth-rate	** *	15.91		0,422
Live birth-rate	Rural	14.99		15,43
Stillbirths	TT-b	62		T. LEWIS
	Rural	61		123
Stillbirth rate	Urban	0.38		
	Rural	0.32		0.35
Deaths		1,703		
	Rural	1,831		3,534
Death-rate	Urban Rural	10.42 9.74		10.05
Infant mortality (deaths under		9.14		10.05
one year of age)	Urban	77		
	Rural	75		152
Infant mortality rate (per thousand live births)	Urban	29.6		
thousand live offths)	Rural	26.6		28.0
Neo-natal mortality (deaths				
under four weeks of age)	Urban	53		all representation of
Neo-natal mortality rate (per	Rural	48		101
thousand live births)	Urban	20.4		
modelia ire on may	Rural	17.0		18.6
Maternal mortality	Urban	1		
	Rural	3		4
Maternal mortality rate (per thousand live and still				
births)	Urban	0.38		
Cital Melion Morestay Man 12	Rural	1.04		0.72

POPULATION OF THE COUNTY

The following gives the Registrar General's estimated populations as at 30th June, 1953 and 1952 as compared with the provisional populations for the Census taken on 8th April, 1951:

Urban Districts:		Estimated Mid-year 1953	Estimated Mid-year 1952	Preliminary Census 1951
Ashby-de-la-Zouch	 	6,515	6,449	6,406
Ashby Woulds	 	3,368	3,304	3,418
Coalville	 	25,630	25,520	25,739
Hinckley	 	39,310	39,080	39,088
Loughborough M.B.	 	35,740	35,360	34,731
Market Harborough	 	10,340	10,240	10,401
Melton Mowbray	 	14,260	14,150	14,052
Oadby	 	6,253	6,183	6,206
Shepshed	 	6,364	6,344	6,235
Wigston	 	15,720	15,470	15,452
Rural Districts:				
Ashby-de-la-Zouch	 	13,820	13,690	13,782
Barrow-upon-Soar	 	49,160	48,940	47,376
Billesdon	 	7,862	7,842	7,817
Blaby	 	39,810	39,750	39,202
Castle Donington	 	9,958	9,508	9,273
Lutterworth	 	11,940	11,830	11,821
Market Bosworth	 	26,790	26,390	26,359
Market Harborough	 	10,010	9,970	9,840
Melton and Belvoir	 	18,650	18,680	18,634
Totals:				
Urban Districts	 	163,500	162,100	161,728
Rural Districts	 	188,000	186,600	184,104
Whole County	 	351,500	348,700	345,832

LIVE BIRTHS

(rates calculated per thousand population)

The birth-rate continues to show a steady fall and has now reached the pre-war level. The following table gives the number of births and the corresponding rates per thousand population during the past 20 years.

	Urt	oan	Ru	ıral	Whole	Rate for England	
Year	No.	Rate	No.	Rate	No.	Rate	and Wales
1934	1,843	14.9	2,888	15.3	4,731	15.2	14.8
1935	1,706	14.2	2,592	14.4	4,298	14.3	14.7
1936	2,020	15.1	2,399	14.7	4,419	14.8	14.8
1937	2,118	15.0	2,370	14.9	4,488	14.9	14.9
1938	2,242	15.8	2,391	14.9	4,633	15.3	15.1
1939	2,253	15.7	2,348	14.5	4,601	15.0	15.0
1940	2,275	15.4	2,449	14.9	4,724	15.1	14.6
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
1951	2,645	16.3	2,922	15.8	5,567	16.0	15.5
1952	2,607	16.1	2,856	15.3	5,463	15.7	15.3
1953	2,602	15.9	2,820	14.9	5,422	15.4	15.5

LIVE BIRTHS-continued

The next table shows an analysis of the total county births according to legitimacy and sex and covers the past twenty years.

	Legit	imate	Illegit	imate	Total male births	Total female births	Ratio of male to 100 female
Year	No.	Rate	No.	Rate			births
1934	4,587	14.70	144	0.46	2,444	2,287	106.9
1935	4,174	13.82	124	0.41	2,196	2,102	104.5
1936	4,285	14.40	134	0.45	2,287	2,132	107.3
1937	4,338	14.43	150	0.50	2,284	2,204	103.6
1938	4,507	14.89	126	0.42	2,371	2,262	104.8
1939	4,449	14.52	152	0.49	2,374	2,227	107.0
1940	4,566	14.64	158	0.50	2,441	2,283	106.9
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
1951	5,369	15.45	198	0.57	2,876	2,691	106.9
1952	5,250	15.05	213	0.61	2,777	2,686	103.4
1953	5,234	14.89	188	0.53	2,746	2,676	102.6

INFANT MORTALITY

(rates calculated per thousand live births)

The number of infant deaths shows a slight increase on the record low numbers of 1951 and 1952. The following table gives details of infant mortality over the past twenty years.

Ur		ban	Ru	iral	Whole	Rate for England	
Year	No.	Rate	No.	Rate	No.	Rate	Wales
1934	69	37	125	43	194	41	59
1935	90	53	131	50	221	51	57
1936	107	53	124	52	231	52	59
1937	103	49	117	49	220	49	58
1938	109	49	95	40	204	44	53
1939	115	51	97	41	212	46	50
1940	112	42	127	50	239	46	55
1941	159	59	106	41	265	50	59
1942	146	54	111	40 .	257	47	49
1943	134	46	123	39	257	42	49
1944	123	39	122	36	245	37	46
1945	97	34	110	38	207	36	46
1946	134	42	101	30	235	36	43
1947	161	48	137	38	298	43	41
1948	102	33	103	31	205	32	34
1949	81	28	80	26	161	27	32
1950	80	29.9	72	24.4	152	27.0	29.8
1951	72	27.2	71	24.3	143	25.7	29.6
1952	77	29.6	68	23.8	145	26.5	27.6
1953	77	29.6	75	26.6	152	28.0	26.8

INFANT MORTALITY-continued

The following table analyses the infant deaths into the individual causes of death and compares with the previous year's figures.

			Y	ear 1	953	Y	ear 1	952
Cause of death	wite.	M.	F.	Total	M.	F.	Tota	
Tuberculosis, respiratory			-	-	-	_	1	1
Tuberculosis, other			-	-	-	1	-	1
Whooping cough			-			-	1	1
Meningococcal infections			1	-	1	1	-	1
Leukaemia, aleukaemia			1	-	1	-	-	-
Other heart disease			-	-	-	1	-	1
Other circulatory disease			-	-	-	1	-	1
Influenza			1	2	3	-	-	_
Pneumonia	11.		10	- 5	15	10	9	19
Bronchitis			3	-	3	3	-	3
Other diseases of the respirat	ory system		-	-	-	-	1	1
Gastritis, enteritis, and diarrh	ıœa		1	-	1 1	2	1	3
Congenital malformations			14	23	37	12	19	31
Other defined and ill-defined	diseases		53	33	86	47	31	78
All other accidents	1.		3	2	5	1	3	4
The second second	-		2-	101				
Totals	E	18.0	87	65	152	79	66	145

NEO-NATAL DEATHS

(rates calculated per thousand live births)

The following table shows the deaths of infants under four weeks of age since the year 1950—this being the year when the Registrar-General first included them in his statistical returns.

T Youngho			Url	Urban		ral	Whole County	
	Year		No.	Rate	No.	Rate	No.	Rate
1950			51	19.1	51	17.3	102	18.1
1951			41 -	15.5	42	14.4	83	14.9
1952			57	21.9	54	18.9	111	20.3
1953			53	20.4	48	17.0	101	18.6

STILLBIRTHS

(rates calculated per thousand population)

			Legit	imate Illegitin		timate	Total	
	Year		No.	Rate	No.	Rate	No.	Rate
1934			180	0.58	8	0.03	188	0.61
1935			176	0.58	1	0.003	177	0.58
1936			172	0.57	7	0.02	179	0.60
1937			167	0.56	3	0.01	170	0.57
1938			166	0.55	8	0.03	174	0.57
1939			192	0.69	11	0.04	203	0.74
1940			153	0.49	11	0.04	164	0.53
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
1951			121	0.35	7	0.02	128	0.37
1952			113	0.32	5	0.01	118	0.34
1953			120	0.34	3	0.008	123	0.35

MATERNAL MORTALITY

m		Number of maternal	Rate per thousand live and still births			
		deaths	Leicestershire	England and Wale		
1934			17	3.46	4.41	
1935			17	3.80	3.93	
1936			18	3.91	3.65	
1937			14	3.01	3.11	
1938			15	3.12	2.97	
1939			17	3.52	2.82	
1940			10	1.93	2.16	
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	
1951			5	0.88	0.79	
1952			1	0.18	0.72	
1953			4	0.72	0.76	

DEATHS (all causes and all ages)

The following list shows the deaths in the county for the years 1950–1953, grouped and classified in accordance with the World Health Organisation Nomenclature Regulations, 1948.

The Registrar General has pointed out that as from 1951 deaths from Pneumonia under four weeks are included in Heading 23 which is the Heading for all Pneumonia deaths.

I.	INFECTIVE AND PARAS	SITIC	DISEASI	ES	Year	Year	Year	Year
					1950	1951	1952	1953
	1. Tuberculosis, respiratory		Che Vi		87	86	70	55
	2. Tuberculosis, other				11	9	14	8
	3. Syphilitic disease				7	10	9	6
	4. Diphtheria				-	-	1	-
	5. Whooping cough				1	3	3	.112
	6. Meningoccal infections				4	1	2	1
	7. Acute poliomyelitis				8	10-0	HA - C	3
	8. Measles				3		mg _	-
	9. Other infective and parasi	tic dise	ases		14	8	12	4

	THERMALIANORUMIATEV		Year	Year	Year	Year
11.	NEOPLASMS		1950	1951	1952	1953
	10. Malignant neoplasm, stomach		90	96	111	92
	11. Malignant neoplasm, lung, bronchus		74	82	82	99
	12. Malignant neoplasm, breast		60	64	52	62
	13. Malignant neoplasm, uterus		28	24	21	21
	14. Other malignant and lymphatic neoplasms			294	302	319
	15. Leukaemia, aleukaemia		11	10	15	17
III.	ALLERGIC, ENDOCRINE SYSTEM, MET BOLIC, AND NUTRITIONAL DISEAS					
	16. Diabetes		22	28	26	17
VI.	DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS					
	17. Vascular lesions of the nervous system		473	480	537	552
VII.	DISEASES OF THE CIRCULATORY SYSTEM				. 1	
	18. Coronary disease, angina		382	378	376	391
	19. Hypertension with heart disease		100	167	88	116
	20. Other heart disease		755	679	601	616
	21. Other circulatory disease		140	193	199	170
-						
VIII.	DISEASES OF THE RESPIRATORY SYST	EM				
	22. Influenza		12	120	24	39
	23. Pneumonia		90 -		98	108
	24. Bronchitis		147	181	146	155
	25. Other diseases of the respiratory system		34	36	34	26
IX.	DISEASES OF THE DIGESTIVE SYSTE	м				
	26. Ulcer of stomach and duodenum		39	38	29	34
	27. Gastritis, enteritis and diarrhœa		19	18	7	12
		100			14700	
X.	DISEASES OF THE GENITO-URINARY SYSTEM					
	28. Nephritis and nephrosis		43	61	62	42
	29. Hyperplasia of prostate		27	32	28	26
XI	DELIVERIES AND COMPLICATIONS OF	F				
****	PREGNANCY, CHILDBIRTH, AND TH					
	PUERPERIUM	130				
	30. Pregnancy, childbirth, abortion		7	5	1	4
XIV.	CONGENITAL MALFORMATIONS					
	31. Congenital malformations		32	38	45	52
XVI.	SYMPTOMS, SENILITY AND ILL-DEFIN CONDITIONS	ED	re priese			
	32. Other defined and ill-defined diseases		416	365	374	361
XVII.	ACCIDENTS, POISONINGS AND VIOLE	NC	E			
	33. Motor vehicle accidents		34	30	41	37
16	34. All other accidents		61	64	73	71
248	35. Suicide		33	19	24	23
	36. Homicide and operations of war		4	2	1	4

DEATHS (all causes and all ages)

(rates calculated per thousand population)

	Ur	ban	Ru	Rural		Whole County	
Year	No.	Rate	No.	Rate	No.	Rate	England and Wales
1934	1,253	10.13	1,843	9.78	3,096	9.92	11.8
1935	1,265	10.56	1,986	11.01	3,251	10.83	11.7
1936	1,511	11.26	1,847	11.30	3,358	11.28	12.1
1937	1,652	11.69	1,925	12.08	3,577	11.89	12.4
1938	1,507	10.60	1,664	10.37	3,171	10.48	11.6
1939	1,560	10.74	1,788	10.96	3,348	10.85	12.1
1940	1,809	12.21	2,072	12.65	3,881	12.44	14.3
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
1951	1,724	10.60	2,007	10.86	3,731	10.74	12.5
1952	1,675	10.33	1,833	9.82	3,508	10.06	11.3
1953	1,703	10.42	1,831	9.74	3,534	10.05	11.4

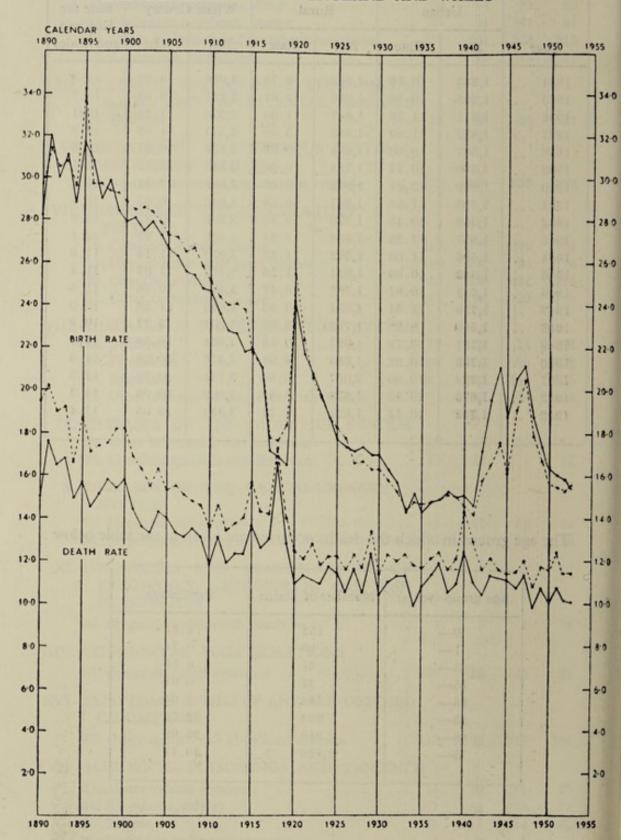
The age groups in which the deaths occurred are given in the table below:

Age group (years)	Number of deaths	Percentage
0—	152	4.31
1—	26	0.74
5—	21	0.59
15	32	0.91
25	164	4.64
45—	803	22.72
65—	916	25.92
75—	1,420	40.17

BIRTHS AND DEATHS

Annual Birth and Death Rates per Thousand Population

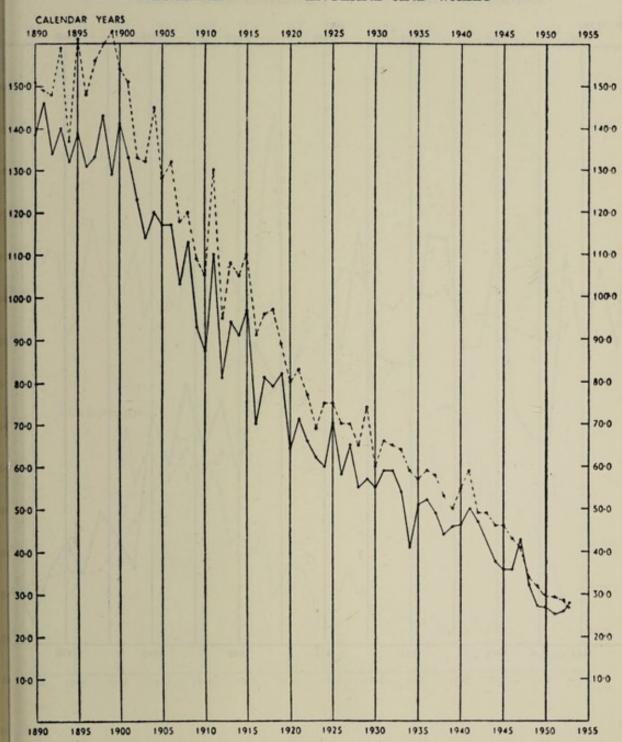
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INFANT MORTALITY

Annual Death Rate per Thousand Live Births

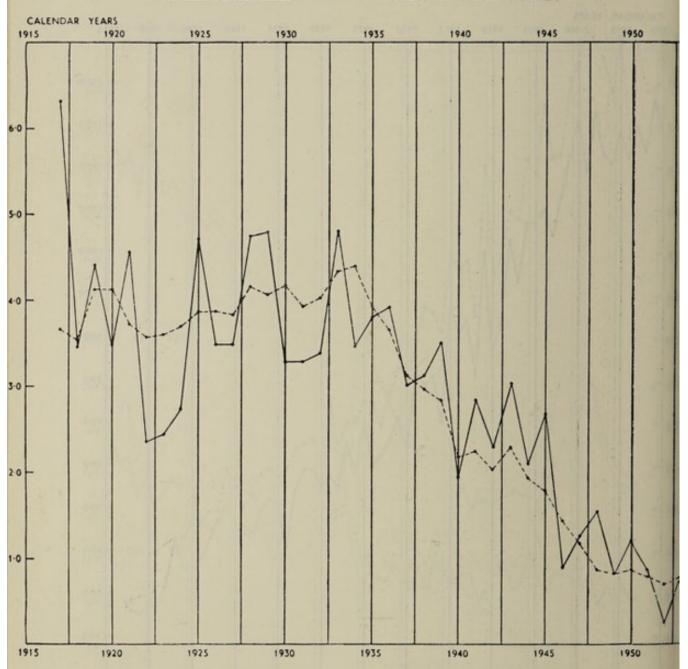
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MATERNAL MORTALITY

Annual Death Rate per Thousand Live and Still Births

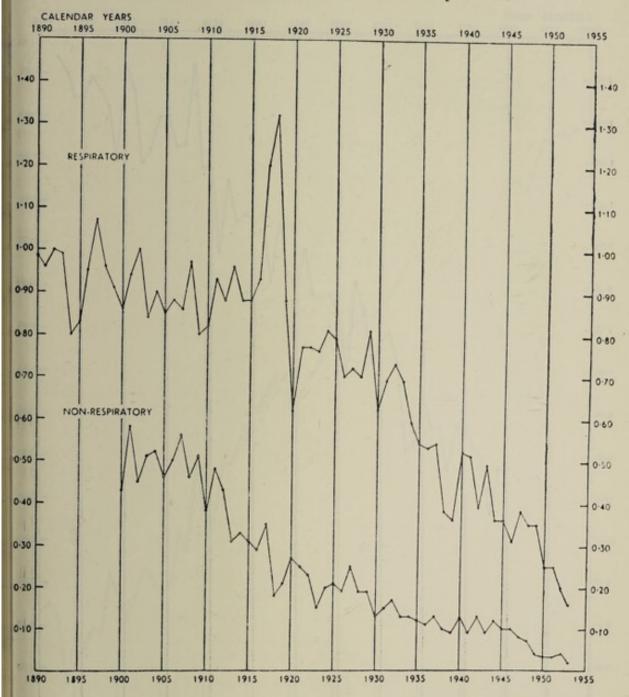
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TUBERCULOSIS

(LEICESTERSHIRE)

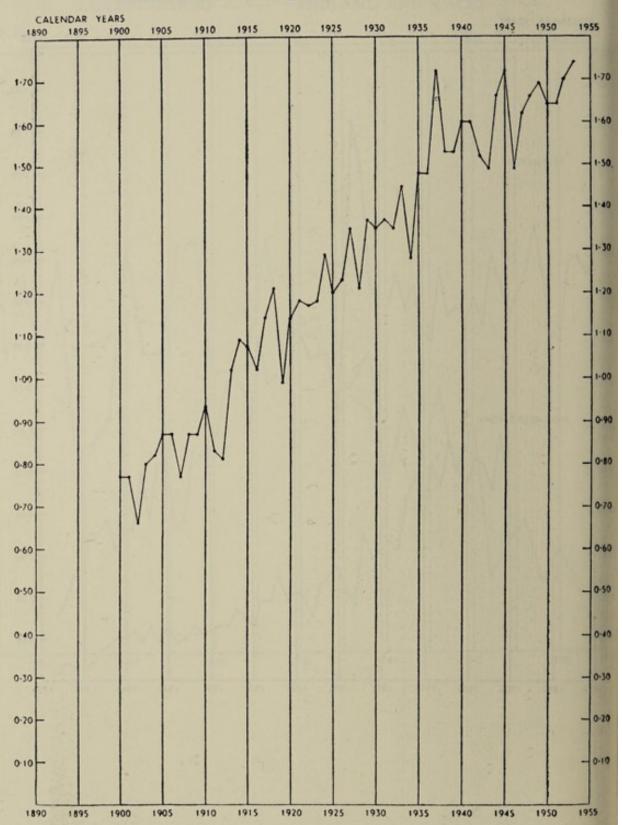
Annual Death Rates per Thousand Population



NEOPLASMS

(LEICESTERSHIRE)

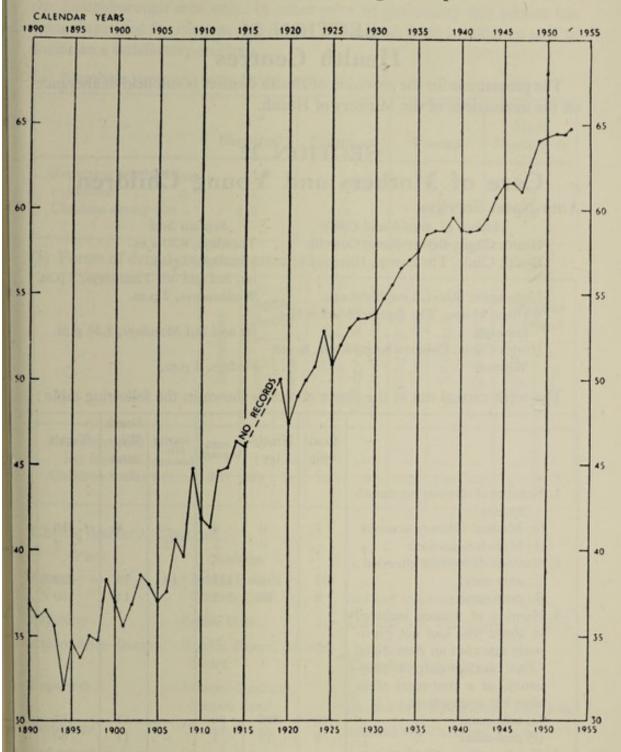
Annual Death Rate per Thousand Population



AVERAGE AGE AT DEATH

(LEICESTERSHIRE)

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 in abeyance on the instructions of the Ministry of Health.

SECTION 22

Care of Mothers and Young Children

Ante-Natal Services

Address of Ante-Natal Clinic

Health Clinic, Bridge Road, Coalville

Health Clinic, The Lawns, Hinckley

Lemyngton Street, Loughborough

Welland House, The Square, Market Harborough

Health Clinic, Countesthorpe Road, South

Wigston

Sessions held

Tuesdays, 9.30 a.m.

Mondays, 2 p.m.

Wednesdays, 2 p.m.

Wednesdays, 2 p.m.

Ist and 3rd Mondays, 2.30 p.m.

The work carried out at the above clinics is shown in the following table:

	Coal- ville	Hinck- ley	Lough- borough	Market Har- borough	South Wig- ston	Totals
Number of sessions per month (approx.):						
(a) Medical Officers sessions	4	6	4	-	4	18
(b) Midwives sessions 2. Number of women attended:	-	-	-	2	-	2
(a) ante-natal	91	298	111	49	73	622
(b) post-natal	9	39	1	27	11/	60
3. Number of women included in above who had not previ- ously attended an Ante-Natal Clinic during current preg- nancy, or a post-natal clinic after last confinement:						
(a) ante-natal	75	226	99	-	57	457
(b) post-natal4. Total number of attendances made by women included in 2 above :	9	39	1	-	11	60
(a) ante-natal	353	1,221	353	392	172	2,491
(b) post-natal	10	41	1	-	11	63

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

It must be pointed out that the figures given in the tables below relate to the Loughborough area only. In other parts of the county this service has been suspended for the past three years as there has been insufficient staff to maintain a satisfactory service.

(a) Numbers provided with dental care:

my had sealed a	Examined	Treatment	Treated	Made Dentally fit
Expectant and Nursing Mothers	1	1	1	1
	312	215	215	215

(b) Forms of dental treatment provided:

ma text appeared a	ions	Ana		gs	or Scaling Treatment	itrate	ngs	aphs		tures
Extractions		Local	General	Fillings	Scalings or Scaling and Gum Treatmen	Silver Nitrate Treatment	Dressings	Radiographs	Complete	Partial
Expectant and Nursing Mothers Children under five	2 267	1 93	_ 16	8 75			106		_	

Child Welfare Centres

Place	Address	Sessions held
Anstey	Church Hall, Church Lane	2nd and 4th Mondays, 2.30 p.m.
Asfordby	Parish Hall	2nd and 4th Thursdays, 2.30 p.m.
Ashby-de-la-Zouch	Baptist Room, Market Street	Thursdays, 2 p.m.
Bagworth	Miners' Institute, Station Road	1st and 3rd Wednesdays, 2.30 p.m.
Barlestone	Church Room	2nd and 4th Tuesdays, 2 p.m.
Barrow-upon-Soar	Church Room	2nd and 4th Wednesdays, 2.45 p.m.
Barwell	Wesleyan Schoolroom Chapel Street	2nd and 4th Thursdays, 2.30 p.m.
Birstall	Church Room	2nd and 4th Mondays, 2.30 p.m.
Blaby	Baptist Schoolroom	1st and 3rd Tuesdays, 2.15 p.m.

Place		Address	Sessions held
Bottesford		"The Elms"	2nd and 4th Thursdays, 2 p.m.
Braunstone		Trinity Church Room, Narborough Road, Leicester	2nd and 4th Wednesdays, 2.30 p.m.
Broughton Astley		Social Club Hall	1st and 3rd Tuesdays, 2 p.m.
Burbage		Methodist Church	
		Schoolroom, Windsor Street	2nd and 4th Thursdays, 2 p.m.
Castle Donington	••	Methodist Church Room	1 1st and 3rd Mondays, 2.30 p.m.
Claybrooke Magn	a	Village Hall	1st and 3rd Thursdays, 2 p.m.
Coalville		Health Clinic, Bridge Road	Tuesdays, 2.30 p.m.
Cosby		Methodist Schoolroom	1st and 3rd Wednesdays, 2.30 p.m.
Desford	••	Village Institute	1st and 3rd Tuesdays, 2 p.m.
Donisthorpe and Moira		Centenary Methodist Church Room, Donis- thorpe Road, Moira	2nd and 4th Thursdays, 2 p.m.
Earl Shilton		Adult Schoolroom	1st and 3rd Thursdays, 2.30 p.m.
Ellistown		Old Church School	1st and 3rd Thursdays, 2 p.m.
Enderby		Mission Room	1st and 3rd Wednesdays, 2 p.m.
Glenfield		Wesleyan Rooms	2nd and 4th Tuesdays, 2.30 p.m.
Groby		Congregational Church	1st and 3rd Fridays 2 p.m.
Hathern		Village Hall	2nd and 4th Wednesdays, 2 p.m.
Hinckley		Health Clinic,	call the lovey it budger medicates
Manakasa as the	LIII	The Lawns	Tuesdays and Wednesdays, 2.30 p.m.
Houghton-on-the-			1st and 3rd Mondays, 2 p.m.
Hugglescote		Baptist Room Baptist Chapel	2nd and 4th Mondays, 2.30 p.m.
Ibstock	••	Schoolroom	2nd and 4th Thursdays, 2.30 p.m.
Kegworth		Wesleyan Schoolroom, High Street	2nd and 4th Wednesdays, 2,30 p.m.
Kibworth		Village Hall	2nd and 4th Wednesdays, 2.30 p.m
Leicester Forest I	last	St. Mary's Hall, St. Mary's Avenue,	1st and 3rd Mondays, 2 p.m.
Long Clawson		Braunstone Lane Methodist Church	
		Schoolroom	1st and 3rd Thursdays, 2 p.m.
Loughborough		Lemyngton Street	Tuesdays, Thursdays and Fridays, 2 p.m.
Lutterworth		Church Hall, Coventry Road	1st and 3rd Thursdays, 2.30 p.m
Market Bosworth		St. Peter's Hall	1st and 3rd Tuesdays, 2 p.m.

Place	Address	Sessions held
Market Harborough	Welland House, The Square	Wednesdays, 2.30 p.m.
Markfield	Miners' Institute	1st and 3rd Thursdays, 2 p.m.
Melton Mowbray	Health Clinic, Asfordby Road	Wednesdays, 2 p.m.
Mountsorrel	Reading Room	1st and 3rd Tuesdays, 2.30 p.m.
Narborough	Robjohn Hall	2nd and 4th Wednesdays, 2 p.m.
Newbold Verdon	Church Hall	2nd and 4th Thursdays, 2 p.m.
Oadby	Baptist Schoolroom	1st and 3rd Wednesdays, 2.45 p.m.
Old Dalby	Ordnance Depot	1st and 3rd Wednesdays, 2 p.m.
Quorn	Church Rooms	1st and 3rd Wednesdays, 2.30 p.m.
Ratby	Church Rooms	1st and 3rd Tuesdays, 2 p.m.
Rearsby	Village Hall	1st and 3rd Tuesdays, 2.30 p.m.
Rothley	Village Hall	1st and 3rd Mondays, 2.30 p.m.
Scraptoft	Village Institute	2nd and 4th Wednesdays, 2 p.m.
Shelthorpe	Old Isolation Hospital	Mondays and Wednesdays, 2 p.m.
Shepshed	Adult School, 50 Forest Road	2nd and 4th Wednesdays, 2.30 p.m.
Sileby	The Institute, Cossington Road	1st and 3rd Tuesdays, 2.15 p.m.
South Wigston	Health Clinic, Countesthorpe Road	Wednesdays, 2 p.m.
Stoney Stanton	Working Men's Club and Institute	2nd and 4th Tuesdays, 2 p.m.
Syston	Red Cross Hall	Mondays, 2.30 p.m.
Thurcaston	Village Memorial Hall	1st and 3rd Wednesdays, 2 p.m.
Thurmaston	Bethel Methodist Church Room	2nd and 4th Tuesdays, 2.30 p.m.
Whetstone	Congregational School- room	2nd and 4th Tuesdays, 2.30 p.m.
Whitwick	Primitive Methodist Schoolroom	Mondays, 2.30 p.m.
Wigston Fields	Methodist Churchrooms Frederick Street Wigston Magna	s 1st and 3rd Thursdays, 2.30 p.m.
Wigston Magna	Methodist Church Rooms, Moat Street	2nd and 4th Thursdays, 2.30 p.m.
Woodhouse Eaves	Village Hall	2nd and 4th Tuesdays, 2 p.m.

During the year new centres were opened at Claybrooke Magna, Groby, Newbold Verdon and Wigston Fields, making a total of 62 child welfare centres.

Summary of Statistics

Number of meetings held during the year		1,817
Mothers:		No.
Number of mothers who attended for the first time		3,202
Number of mothers who attended during the year		7,718
Number of attendances during the year		66,886
Children:		
Number of children who attended for the first time and we	ere	
under one year of age		3,612
Number of children who attended during the year and who we	ere	
born in:		
(a) 1953		2,810
(b) 1952		2,635
(c) 1948–51		3,338
Total number of children who attended during the year		8,783
Number of attendances during the year made by children w	ho	
at the date of attendance were :		No. of the last
(a) Under one year of age		41,804
(b) Over one year but under two years of age		15,934
(c) Over two years but under five years of age		16,515
Total attendances during the year		74,253
Number of examinations by Medical Officers:		2.001
First examinations	**	3,001
Number of suciable as her Harlet Wistons		7,216 74,106
Number of weighings by Health Visitors		14,100

Individual Child Welfare Centres. Average Attendances per Meeting

0			Year	1952	Year	1953
Centre	er dir	Losson	Mothers	Children	Mothers	Children
Anstey			29.7	34.4	31.6	33.0
Asfordby			42.8	48.7	37.7	46.3
Ashby-de-la-Zouch	1		37.8	40.5	34.5	36.2
Bagworth			25.2	28.1	18.2	20.5
Barlestone			35.6	39.8	27.3	33.1
Barrow-upon-Soar			24.0	25.1	21.4	23.9
Barwell			28.1	29.1	34.7	36.4
Birstall			48.8	54.5	52.4	57.1
Blaby			39.1	46.6	28.1	32.5
Bottesford			10.0	14.0	11.0	11.5
Braunstone		100	48.3	49.7	54.0	55.0
Broughton Astley			26.1	29.7	22.5	25.0
Burbage			35.5	37.2	44.3	46.8
Castle Donington			26.7	29.1	24.0	28.9
Claybrook Magna	(opene	d				
17.9.53)				_	16.2	19.0
Coalville			43.4	44.3	39.4	41.4
Cosby		-	22.3	24.7	27.8	28.4
miles blade to h		(Tabl	le continued o	overleaf)	The paper	A LINES OF THE PARTY OF THE PAR

Centre		Year	1952	Year	1953
Centre	deliner gritte	Mothers	Children	Mothers	Children
Desford		51.3	60.8	35.6	40.9
Donisthorpe and Me	oira	33.9	35.5	32.5	33.7
T 1 01 11.		32.4	32-9	30.1	31.4
Ellistown		25.3	26.6	22.7	23.4
Enderby		29.1	33.3	30.3	35.1
		50.6	55.0	42.8	47.9
Groby (opened 5.6.5		_		18.0	19.6
** *		22.0	26.0	18.3	18.7
*** **		50.8	53.7	53.6	55.6
Houghton-on-the-H		21.0	25.8	25.9	31.6
TT		17.3	20.2	17.7	19.6
		34.3	37.8	32.7	35.4
	(alpeir	29.1	34.3	24.1	200000000000000000000000000000000000000
		14.1	14.4	10.2	27.8
Leicester Forest Eas		49.7	52.3	57.8	10.8 39.7
		15.8	18.7	CONTRACTOR OF THE PARTY OF THE	100000000000000000000000000000000000000
T 11 1	of in house	100000000000000000000000000000000000000		13.4	14.0
A STATE OF THE PARTY OF THE PAR	i la soite	58.7	69.1	57.4	67.0
		35.6	44.2	42.8	56.0
	indrana in	19.9	23.9	17.1	20.6
Market Harborough		41.4	43.4	46.7	49.6
	and the late	31.9	36.0	31.2	- 35.5
		69.2	72.2	70.9	76.8
		26.8	31.7	22.4	23.6
		43.6	52.7	34.0	38.8
NewboldVerdon(ope	ened23.7.53)		THE REAL PROPERTY.	27.3	29.3
ACCUSED TO A SECOND SEC		22.9	23.6	26.2	27.4
TO STATE OF THE PARTY OF THE PA		13.8	15.4	7.9	10.8
The state of the s		29.5	36.5	22.4	28.1
		18.6	21.5	23.5	24.6
		12.7	14.0	18.2	20.7
		38.7	43.5	35.9	40.8
		19.8	20.9	17.8	18.6
		34.2	44.4	28.5	36.3
Shepshed		49.9	52.8	51.7	52.6
		67.4	80.1	62.8	79.9
South Wigston .		63.4	73.5	63.9	70.6
Stoney Stanton .		42.9	49.2	39.7	47.8
Syston		44.7	46.7	40.5	42.0
Thurcaston .		18.8	20.7	16.4	18.1
Thurmaston .		36.3	44.1	38.0	43.5
Whetstone		24.1	26.5	17.8	21.0
W		51.7	53.9	53.2	55.3
Wigston Fields (open		_	_	32.3	39.5
		65.9	70.2	66.5	73.7
W7 11 E		31.4	33.6	31.9	33.7

Note: The centre at Old Dalby is purely a "weighing centre" run by the Health Visitor for the district.

Transport arrangements continued for mothers and children attending areas around the Houghton-on-the-Hill and Market Bosworth centres. During the year the scheme was extended by the provision of similar facilities to the centre at Claybrooke Magna from the surrounding parishes of Leire, Frolesworth, Ullesthorpe, Ashby Parva and Sharnford.

Premature Births

The Ministry of Health has hitherto obtained from hospital authorities information regarding premature births in hospitals and the survival of premature infants born in hospitals. It has now been decided that the Local Health Authority—as the authority ultimately responsible for the care of all infants in its area, whether born at home or in hospital-should resume responsibility for the collection of information for all premature infants.

The following is a record in the form required by the Ministry of Health. All figures refer to notified births after correction for transfers.

1. Number of Premature Live births notified:

(a)	In h	ospital				 194
(b)	At h	ome				 100
(c)	In p	rivate n	ursing h	nomes		 27
		Total				 321
						-
		11.00				
mbe	er of	Prematu	re Still	births not	tified:	

(a) In bosnital

(a)	in nospitai			 	40
(b)	At home			 	17
(c)	In private nu	ursing l	nomes		1
	Total			 	61

200				I B	PRI	MAT	PREMATURE	LIVE	2000	BIRTHS			200			PR	PREMATURE STILL-BIRTHS	THS
	子 珥	†Born in Hospital	d-l	Born at and n entirely a	Born at home and nursed entirely at home	home ursed it home	Born and to to hor befor	Born at home and transferred to hospital on or before 28th day	ome rred on or day	Born	Born in nursing home and nursed entirely there	sing ursed ere	Born tran hosp befor	Born in nursing home and transferred to hospital on or before 28th day	rsing day	Born	Ross	Born
Weight at birth (1)	Total (2)	Died within 24 hrs. of birth (3)	Sur- vived 28 days (4)	Total (5)	Died within 24 hrs. of birth (6)	Sur- vived 28 days	Total (8)	Died within 24 hrs. of birth (9)	Sur- vived 28 days (10)	Total (11)	Died within 24 hrs. of birth (12)	Sur- vived 28 days (13)	Total (14)	Died within 24 hrs. of birth (15)	Sur- vived 28 days (16)	in hos- pital (17)	at home (18)	ing home (19)
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	28	11	9	9	4	61	60	1	60	60	1	-	1	1	1	14	20	1
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500–2,000 gms.)	14	6	31	œ	1	9	11	-	10	61	1	-	1	1	1	15	4	-
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000–2,250 gms.)	30	1	30	9	1	10	9	-	55	10	1	6	1	1	1	, 10	es .	1
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250–2,500 gms.)	68	63	84	54	67	51	9	L	4	12	1	=	1	1	1	6	10	1
Totals	194	22	151	74	8	64	26	61	17	27	1	22	1	1	1	43	17	-
															1			

†The group under this heading will include cases which may be born in one hospital and transferred to another

The Domiciliary Care of Premature Infants

To provide for the domiciliary care of premature infants, equipment was loaned by the Council for the nursing of 29 premature infants, of this figure there were again five sets of twins. Included in the total of 29 infants were four who had been discharged from hospital.

Two midwives received training at the Sorrento Nursing Home, Birmingham during the year, making a total of ten midwives available with the special training which is so necessary for the care of premature infants.

The Care of Illegitimate Children

The illegitimacy rates for the past twenty years are shown below in the following tables:

	Yea	ır	Total live births	Illegitimate live births	Illegitimacy percentage of total live births
-	1934		4,731	144	3.04
-	1935		4,298	124	2.88
	1936		4,419	134	3.03
	1937		4,488	150	3.34
	1938		4,633	126	2.72
	1939		4,620	152	3.30
	1940		5,174	158	3.34
	1941		5,299	198	4.12
	1942		5,508	240	4.36
	1943		6,102	320	5.24
	1944		6,536	385	5.89
П	1945		5,783	532	9.20
П	1946		6,563	383	5.84
1	1947		6,948	324	4.66
ı	1948		6,363	297	4.66
П	1949		5,936	226	3.81
L	1950		5,624	209	3.71
	1951		5,567	198	3.56
	1952		5,463	213	3.90
	1953		5,422	188	3.46

Cases requiring care and attention are referred to the Children's Officer or to the Leicester Diocesan Moral Welfare Association. The County Council makes an annual grant to this Association for its services. During the year 1953 the number of new cases dealt with was 86, consisting of 65 expectant mothers and 21 mothers with children.

Unmarried Mothers and their Children

Under the agreement with the St. Saviour's Diocesan Maternity Home, Kingsthorpe, Northampton, 13 unmarried mothers were admitted from this County.

A number of other cases were however sent to the following homes:

Borrowash House, Borrowash,	Derby		 3
"The Quarry", Wragby Road,	Lincoln		 1
St. Bridget's Mother and Baby	Home,	Chester	 2
St. Martin's Home, Hereford			 1
Grosvenor House, Mansfield			 1

The Council has amended its scheme to enable travelling expenses to be paid, in exceptional cases of hardship, to unmarried mothers travelling to and from hostel accommodation provided under arrangements made by the Council. This will come into force early in 1954.

Eye Treatment

Children are referred to the School Medical Department and prescriptions are dealt with by arrangements with the Sheffield Regional Hospital Board.

Day Nurseries

Details of attendances at the Day Nurseries are as follows:

	Hinckley	Lough- borough	Market H'boro'	South Wigston	Syston	Totals
No. of approved places:	No.		AUGUSTI)	O DECEMBER		
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., 1953:			in a	ation of the last	no vi	antal auto
0—2 years	17	19	12	12	8	68
2—5 years	31	39	16	24	22	132
Average daily attendances:					toring	2353
0—2 years	12	14	7	7	6	46
2—5 years	23	23	12	11	15	84

This was a somewhat eventful year for the day nurseries. These nurseries were started during the war as a means of encouraging married women to undertake war work; the County Council subsequently retained nurseries at Hinckley, South Wigston and Syston, while as a result of the National Health Service Act they acquired those at Market Harborough and Loughborough,

previously operated by the local authorities. In 1949 the policy was reviewed, and the decision taken to keep open these five nurseries essentially for "welfare" purposes: priority was given to the children of unmarried mothers or widows or where, for some reason such as unsuitable lodgings or illness of the wage-earner, there were special reasons for consideration. Any places remaining might be filled by the children of women who wished to go to work for other reasons, preference always being given to those in financial difficulties; the nurseries, however, were not provided for the benefit of industry but for the benefit of the "welfare" cases.

The nurseries were admittedly expensive to run and were subjected to some criticism on that account: it was probably not always realised that owing to the long hours during which they operated they inevitably required a large staff. Criticism was accentuated by the fact that under existing legislation it was not possible to charge for more than the cost of food provided, so that it sometimes occurred that parents who were by no means badly off were benefiting from an expensive service and paying a very small proportion of the cost.

The National Health Service Act, 1952, made it possible for full costs to be charged, and as from 1st January, 1953, a scale of charges according to income was operated. This resulted in a considerable fall in the number of parents utilizing the nurseries, which were not completely filled. The Health Committee considered the situation very carefully and finally altered the scale of charges to make them rather more favourable to parents, also reducing the number of places in the nurseries and making certain administrative changes to ensure economy. At the same time they reiterated their policy of preference for "welfare" cases, stating that there were enough of such cases to justify the retention of the nurseries. By the end of the year these arrangements were working satisfactorily.

Maternity Outfits

As a result of consultations with the Leicestershire and Rutland Executive Council, arrangements were made for a suitable antiseptic to be supplied with each maternity outfit. During the year 2,542 maternity outfits were issued.

Birth Control

During the year 144 cases were referred to the Leicester City Birth Control Clinic.

Deafness in Young Children

The arrangements described in last year's report continued to operate satisfactorily. Eight children under five years of age were referred for diagnosis and treatment, and in addition two Health Visitors attended for training. It is hoped to extend the scope of this work considerably in the near future.

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

Particulars of the midwives who were practising at 31st December, 1953, are given in the following table.

	Domiciliary Midwives	Midwives in Institutions	Total
(a) Midwives employed by the authority	13	_	13
(b) Midwives employed by Voluntary Organisations: (i) Under arrangements with the Local Health Authority in pursuance of			Total Service
Section 23 of the National Health Service Act	85	-	85
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	_	34	34
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	12	9	21
Totals	112	43	155

Number of cases attended-

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

THE AREA	Negle .		Cases in Institutions	0	in the second		1	1,517	481	1,998
WIVES IN		100	Totals	(9)	763	1,410	18		37	2,228
ATTENDED BY MID DURING THE YEAR	sa	booked	Doctor not present at time of delivery of child	(9)	284	651	6		18	862
NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR	Domiciliary Cases	Doctor booked	Doctor present at time of delivery of child (either the booked Doctor or	another)	155	338	9	1.	12	511
OF DELIVER	D	t booked	Doctor not present at time of delivery of child	(3)	313	495	8	1	7	818
NUMBER (Doctor not booked	Doctor present at time of delivery of child	(2)	11	26	E de la	at a district	1	37
	E			(1)	(a) Midwives employed by the Authority	(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, 1946	(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	Totals

Administration of Analgesics

Of the 98 midwives employed either by the County Council or the County Nursing Association, 91 were qualified to administer analgesics during labour. During the year, 1,653 domiciliary cases were attended by these midwives (acting as midwives, not as maternity nurses), and of these cases 1,033 received analgesia.

The table below gives full details of this particular branch of the service for the year 1953:

ich	ctor ent of of			WILL TO SERVICE		and the same	
ber of cases in wheeligh perhidine was administered by wives in domiciliative during the year	Whe was at t deli	(E)	53	108	1	9	167
Number of cases in which pethidine was administered by midwives in domiciliary practice during the year:	When doctor was not present at time of delivery of child	(9)	80	234	1	15	329
uses in which air was ered by domiciliary ng the year:	When doctor was present at time of delivery of child	(5)	99	209	1	1	275
Number of cases in which gas and air was administered by midwives in domiciliary practice during the year:	When doctor was not present at time of delivery of child	(+)	368	665	1	4	1,037
Number of sets of apparatus for the administration of gas and air in use at end of	year	(3)	111	£7.	F	1	85
Number of domiciliary midwives practising in the area at end of year who were qualified to	administer gas and air analgesia in accordance with the requirements of the Central Midwives Board	(2)	13	ν 20		67	64
		(1)	(a) Domiciliary Midwives employed directly by Local Health Authority	(b) Domiciliary Midwives employed under Section 23 by voluntary organisations as agents of Local Health Authority	(c) Domiciliary Midwives employed under Section 23 by hospital authorities as agents of Local Health Authority	(d) Domiciliary Midwives in private practice or employed by organisations not acting as agents of Local Authority	Totals

Notifications received from Midwives

The following notifications regarding cases were received from midwives practising in the County during the year:

Requests for medical aid		 330
Liability of a midwife to be a source of in	fection	 46
Midwife having "laid out the dead"		 28
Death of mother or child: mother		 3
child		 22
The occurrence of a stillbirth		 34
The commencement of artificial feeding		 229

The following table gives in full the reasons for which medical aid was requested:

Mother-Pregnanc	y and	Labo	ur:	Mother-Lyi	ng-in l	Period	
Abortion			11	Anæmia			1
Albuminuria			2	Breast condition			5
Ante-Partum Hæmor	rhage		6	Eclampsia			2
Episiotomy			1	General condition			3
Fœtal distress			7	Hæmorrhage			4
General condition			1	Leg pain			2
Hypertension			2	Œdema			1
Malpresentation			16	Pyrexia			18
Maternal distress			1	Skin condition			1
Multiple pregnancy			2	Varicose veins			3
Obstetric shock			1	Vomiting			2
Post-partum hæmorr	hage		19				
Premature labour			6				
Prolonged labour			31				
Retained placenta			24				
Ruptured perineum			119				
Vaginal laceration			2				
			1	Baby			
Asphyxia			5	Jaundice			4
Atelactasis			- 1	Phimosis			1
B.B.A			3	Prematurity			9
Chest condition			1	Shock		77.5	1
Cyanosis			3	Skin condition			4
Deformity			3	Stillbirth			4
Eye condition			11	Tongue tie			1
General condition			10	Vomiting			3

Infectious Diseases (Midwifery)

Notifications received during the year are set out in the following table:

	Ophth Neona		Pemp Neona		1000000	peral exia
	Domi- ciliary confine- ments	Institu- tional confine- ments	Domi- ciliary confine- ments	Institu- tional confine- ments	Domi- ciliary confine- ments	Institu- tional confine- ments
No. of cases notified during the year	-	-	-	-	13	9
Number of cases re- moved to hospitals	72	_	-	-	-	

Inspection of Midwives

The following is a record of inspections carried out during the year by the supervisory staff of the County Nursing Association:

	Nurse Midwives	County Council Midwives	Independent Midwives
Number of routine inspections	314	49	36
Number of special inspections	. 18	4	- 11

Transport for Midwives

The Council has continued to provide motor cars for whole-time midwives employed by the County Council and also for nurse-midwives employed by the Leicestershire County Nursing Association. The supply position has greatly eased and it was not necessary to apply to the Ministry of Health for the priority of delivery which was afforded under Circular 21/49.

The following shows the number of cars and autocycles used in the nursing and midwifery services. The vehicles owned by the County Council and the Nursing Associations are maintained and repaired by the Ambulance Service.

Motor Cars:

Owned by the County Council			55
Owned by the Leicestershire County Nursing	Assoc	ciation	6
Owned by the District Nursing Associations			2
Owned by the District Nurse-Midwives			20
Owned by the County Council Midwives			3
			86

Auto-cycles:

Owned by the County Council	 729.190	2
Owned by the District Nursing Associations	 	2
Owned by the County Council Midwives	 	1
		5

Post-Graduate Courses

Arrangements were made for 12 midwives employed either by the County Council or the County Nursing Association to attend post-graduate courses held in various parts of the country.

Houses for District Nurses and Midwives

It is obviously essential that a midwife or district nurse should live in the area in which she works, and this raises very considerable problems in accommodation as the nature of the nurses' work makes lodgings often unsuitable. As will be seen from the particulars below, this problem has been tackled in various ways.

The housing authorities in the County have been most helpful, but they have, of course, their own very great difficulties to contend with. Recent legislation has made it possible for District Councils to sell to the County Council houses built by them as part of their ordinary housing programme. This should enable houses to be provided more economically than can be done by the County Council building isolated houses, and the Market Harborough Rural District Council has already agreed to make available a house at Kibworth, which will be ready for occupation in 1954. The County Council had agreed to build houses where this seemed absolutely necessary, and the first house of this type was brought into use at Kirby Muxloe in 1953, while another is being built at Woodhouse Eaves. Furniture and equipment for the Kirby Muxloe house were provided by the County Nursing Association and the local District Association: the house has a district room and garage and is an extremely attractive and practical building.

List of accommodation (at end of 1953):

Houses owned by County Council	angijin	1
Houses owned by County Nursing Association		10
Houses owned by District Nursing Associations		7
Council houses rented by Nurses		30
Privately-owned houses rented to Nurses	1 10 00	24
Houses rented by County Nursing Association	to will be	- 11
Houses owned by Nurses	100	6
Furnished rooms, etc		10
		99

SECTION 24

Health Visiting

The statistical record given below covers the main duties of the Health Visiting Staff only:

Children under 1 yea	r of ag	ge:	-		
First visits					5,819
Total visits					43,573
					40,070
Children age 1 and u	nder 2	years:			
Total visits					22,317
Children age 2 but un	nder 5	years:			
Total visits			200		55,399
N 1 0 1111	119				00,000
Number of children	under :	5 years vis	ited duri	ng the	
year	**				30,681
Expectant mothers:					
First visits					1,391
Total visits					2,706
2 0 111 1 101 10					2,700
Tuberculous househo	lds:				
Total visits					1,556
				111111	
Visits re:					
Stillbirths					139
Illegitimate children	n				1,352
Premature infants					1,831
Post-natal cases					585
Maternity cases for	admis	sion to ho	spital		973
Chronic sick cases					546
Immunisation					2,598
Vaccination					397
Tuberculosis					4,672
Diabetic cases					2,388
Miscellaneous					873
Total number of fami	lies mi	itad			04 099
Total number of faint	nes vis	sited	**	**	24,833
Attendances at:					
Infant Welfare Cen	tres				2,052
Ante-natal Clinics					243
Chest Clinics					681
Diabetic Clinics					115

Staff Establishment

There has been no increase in the actual number of health visitors employed and at the end of the year the working staff consisted of the Superintendent, Deputy Superintendent and 37 Health Visitors. The authorised establishment

was increased to 43 by the addition of a post for a Health Visitor for Health Education.

Training of Health Visitors

One student health visitor completed the course held by the City of Leicester Health Department and on passing the final examination was duly appointed to the County Health Visiting staff.

Post-Graduate Courses

The Superintendent Health Visitor attended a course organised by the Women Public Health Officers' Association held in Edinburgh.

A further two health visitors attended a course organised by The Royal College of Nursing and two attended a course on the Domiciliary Treatment of Tuberculosis organised by the Tuberculosis Educational Institute.

Investigation of applications for admission to maternity accommodation

The following table gives details of applications for admission to maternity accommodation which were investigated by the health visiting staff since the coming into force of the National Health Service Act.

Year	Case	s investigated	1	Cases	recommen	ided
1948	 	131			116	
1949	 	338			291	
1950	 	262			214	
1951	 	371			313	
1952	 	669			527	
1953	 	836			708	

Investigation of applications for Chronic Sick accommodation

The number of chronic sick cases investigated was 311 as against 308 in the previous year.

Liaison with General Practitioners

This subject is much discussed at the present time: there is no doubt that improved co-operation between health visitors and general practitioners would result in an improved service to the patient. It is noticeable that where practitioner and health visitor know each other and have some knowledge of each other's responsibilities and duties, improvement in relations follows automatically, and it is hoped that in the future arrangements can be made for this desirable state of affairs to prevail throughout the county.

SECTION 25 Home Nursing

of (12)* (13) Equiv. Wholetime Student Home Nurses The whole of the home nursing staff are employed by the Leicestershire County Nursing Association acting as time* (12) Wholetime* (E) Whole-Equiv. time of (9)* (10) 233 Enrolled Assistant Nurses time* Part-6 38 Wholetime* 8 agents of the County Council, and are shown in the following table: Equiv.
Wholetime
of (6)* 293 State Registered Nurses (S.R.N., R.S.C.N., and R.F.N.) time* Part-9 47 Wholetime* 9 20 Equiv. Whole-Supervisory Nursing Staff of (3) 13 Administrative and Parttime 3 9 Wholetime 8 (b) Vol. Org. (a) L.H.A. Ξ

*Male nurses should be included and also shown separately in the boxes

The unspectacular but extremely hard work carried out by these members of the nursing service is shown in the table below:

Patients included in (2)-(7) who have had more than 24 visits during the year	(11)	stoy b	1,948	1	64,690
Children included in (2)-(7) who were under 5 at the time of the first visit during the year	(01)	- 1	1,013	A Control of the Cont	7,722
Patients included in (2)-(7) who were 65 or over at the time of the first visit during the vear	(6)		2,913	- A	95,540
Totals	(8)	i	8,205	1	154,065
Others	(7)	1	20	1	14,429
Maternal Compli- cations	(9)	- 1	37		524
Tuber- culosis	(5)		160		5,823
Infectious Diseases	(4)	1	14		43
Surgical	(3)	+	2,819	-	36,311
Medical	(2)	1	5,155		96,935
	(1)	Number of cases attended by Home Nurses during the year:	(b) Vol. Org. under arrangements with the Authority	Number of visits paid by Home Nurses during the year:	(d) Vol. Org. under arrangements with the Authority

SECTION 26

Vaccination against Smallpox and Immunisation against Diphtheria

Vaccination against Smallpox

The number of vaccinations carried out during the year makes it very apparent that parents are not sufficiently interested to have their children vaccinated against smallpox in spite of the fact that a personal approach is made to each parent by the health visiting staff.

The following table shows the number of vaccinations carried out, and is based on certificates received from general practitioners during the year.

Age at 31st December, 1953	Under 1	1—	2 to 4	5 to 14	15 or over	
i.e. born in the year	1953	1952	1949-51	1939–48	Before 1949	Total
Number vaccinated	474	330	88	71	251	1,214
Number re-vaccinated	-	1	2	28	320	351

Immunisation against Diphtheria

During the year under review there were 3,500 primary immunisations and 3,306 booster doses as against 4,201 primary immunisations and 2,999 booster doses in 1952.

It will be seen that the number of primary immunisations has fallen, and that approximately 50 per cent only of children under five have been immunised. This cannot be regarded as a satisfactory position, and increased efforts are being made, by personal visits when necessary, to persuade parents to allow their children to be immunised against diphtheria.

None of the six "original" notifications received during the year was confirmed, and there has been no confirmed case for the past three years.

D

Number of children at 318t December, 1953, who had completed a course of immunisation since 1st January, 1939

58,961	21,403	22,886	4,001	3,784	3,724	2,871	292	Number immunised
	1939—1943	1944—1948	1949—48	1950	1961	1952	1953	
Total	10—14	6—9	4	3	2	1	Under 1	Age at 31st December, 1953

Number of children who were immunised during the period 1st January to 31st December, 1953

EB	Totals	3,500	3,306
14	1939	67	6
13	1940	13	7
12	1941	10	16
11	1942	14	17
10	1943	+	37
6	1944	9	35
00	1945	10	99
1	1946	22	122
9	1947	27	554
10	1948	53	2,270
4	1949	19	172
69	1950	104	1
61	1961	347	1
1	1962 1951 1950	292 2,539 347	1
Under 1		292	1
Age at 31st Dec- Under 1	i.e., born in year 1953	Primary Immunisation	Booster Injection

SECTION 27

Ambulance Service

Owing to the change in the method of recording the number of patients carried (made on instructions from the Ministry of Health) in August, 1951, this is the first year in which it has been possible to give statistics which can be compared with the previous year.

outside Regressite Rates No.	Patient	s carried	Miles travelled		
Ambulance Station	Year 1952	Year 1953	Year 1952	Year 1953	
5 Ireton Road, Leicester	21,515	29,039	231,127	260,112	
Avenue Road, Leicester	17,184	16,269	113,549	104,287	
Avenue Road, Coalville	14,863	17,195	122,876	132,746	
Ashby Road, Hinckley	11,390	11,950	92,002	94,868	
44 Forest Road, Loughborough	9,117	10,466	81,331	83,767	
Leicester Road, Lutterworth	4,119	3,798	43,886	38,169	
St. Lukes, Market Harborough War Memorial Hospital, Melton	6,668	8,368	67,314	73,747	
Mowbray	6,417	6,492	71,935	77,469	
Totals	91,273	103,577	824,050	865,165	

This table shows that an average of 8.3 miles were travelled per patient in 1953 as against 9.0 miles in 1952. The number of patients carried in 1953 increased by 13 per cent over 1952, but the number of miles travelled increased by 4.9 per cent only.

During the year, 2,612 patients were carried and 33,559 miles were travelled by the Hospital Car Service, which acts as a very useful adjunct to the Ambulance Service.

The number of vehicles in use at 31st December, 1953, was:

Ambulances		 	27	(including three used for Civil
Transits		 	6	Defence)
Utilecons		 	7	
Sitting Case C	ars	 	3	
Stores Van		 	1	
Mortuary Van		 	1	
			-	
			45	
			_	

Number of personnel at 31st December, 1953:

Driver/Atten	dants			67
(including	Head Dri	vers)		
Attendant/Te	elephonists			3
Female Atten	dants			4
Male Attenda	int			1
Part-time Att	endants (fe	emale)		5
Mechanics		e. un	1000	4
			_	84

It is worth noting that the increased amount of work undertaken this year by the Ambulance Service as compared with the previous year was carried out by a staff which was no larger, being in actual fact 84 as compared with 85 in 1952.

It is no longer necessary to comment on radio-communication, first installed for all vehicles in 1950. This is now an absolutely essential part of the service, of proved value in securing efficiency and economy.

SECTION 28

Prevention of Illness, Care and After-Care

Medical Loan Depots

The Medical Loan Committee of the British Red Cross Society and the St. John Ambulance Brigade issue items of nursing equipment on loan to patients under an arrangement with the County Council. A small charge is made, or the equipment is issued free, according to the circumstances of the users. Depots exist at the following places in the county: Leicester, Syston, Rothley, Kegworth, Kirby Muxloe, Coalville, Hinckley, Lutterworth, Narborough, Waltham-on-the-Wolds, Harby and Eaton.

After-Care of Patients Discharged from Hospital

Very few requests are received in respect of after-care for general cases discharged from hospital. Nursing requests are forwarded direct to the Leicestershire County Nursing Association.

Diabetics

The Special Health Visitor, seconded to the Diabetic Clinic at the Leicester Royal Infirmary, paid a total of 2,388 visits to diabetics in the county.

Convalescent Home Treatment

An amendment to the Council's present scheme has been recommended to enable the payment to be made, in exceptional cases, of travelling expenses for persons travelling to and from convalescent homes. This amendment to the scheme has in the main been necessitated by the fact that the National Assistance Board has ceased to pay expenses as it has been determined that such cases are not their responsibility. It is expected that the amendment will come into force early in 1954.

Patients were sent to the following convalescent homes during the year:

Hunstanton Convalescent Home			 20
Overcliffe House, Southbourne-on-Sea			 11
"Leconfield", Bonchurch, Isle of Wight			 8
Roecliffe Manor, Woodhouse Eaves			 6
Wendover Rest Home			 5
Charnwood Forest Convalescent Home			 3
Gable House, Droitwich		4.000	 2
Buckfastleigh Convalescent Home		**	 2
Maitland House, Frinton-on-Sea	**		 2
St. Josephs Convalescent Home, Bourneme	outh		 1
Chalfont Colony			 1
All Saints Convalescent Home, Eastbourne			 1
Overstrand Convalescent Home			 1
			-
			42.53

Health Education

In 1951 a film strip projector was purchased to be used as a complement to lectures at Infant Welfare Centres and also at Day Nurseries, Ante-natal Clinics, Home Help training courses, lectures to District Nurses and Midwives and to Women's Institutes. This projector has proved so invaluable that it was felt desirable to undertake the more ambitious method of lecturing by the use of a sound film projector.

After advice had been obtained from departments running film projectors it was decided to purchase a Bell and Howell 16 mm. Gaumont Model. This projector has a 750-watt lamp which is essential, particularly since many of the rooms in which the projector will be used have no efficient darkening facilities.

Several films have been purchased entitled "Your Children Walking", "Your Children's Sleep", "Your Children's Play", "Your Children's Meals", "Your Children's Teeth".

The purchase of this sound film projector has proved to be eminently successful and with the appointment of a Health Visitor for Health Education it is hoped to extend its usefulness even further.

It cannot be too often repeated that "Health Education" in its broadest sense is one of the chief functions of a Health Department, and one which is constantly being carried out by Health Visitors, Medical Officers, and indeed by all the staff of the Department whatever their duties. It is hoped that the appointment of the special Health Visitor will help to systematize the work and to co-ordinate the various facilities available.

One specially difficult problem is Health Education directed at the person who may be suffering from cancer. During the year a circular from the Ministry of Health encouraged local Health Authorities to prepare schemes of cancer education, in consultation with hospital authorities and general practitioners. This was discussed at the Leicester Area Medical Co-ordinating Committee, covering the City and County of Leicester, and the County of Rutland, and including in its membership hospital consultants, general practitoners and medical officers of health. After very careful consideration this Committee stated that the potential dangers inherent in such a scheme outweighed the possible advantages, and that for the present it would be unwise to undertake any scheme. With this opinion the Health Committee agreed; the matter will however be kept under review.

Tuberculosis

The following is a list of Chest Clinics held in the County:

Hinckley	Hinckley and District Hospital	 Mondays 10 a.m. Thursdays 10 a.m.
Leicester	194 London Road	 Mondays 9.30 a.m. Tuesdays 9.30 a.m. and 2 p.m.
		Wednesdays 2 p.m. Thursdays 9.30 a.m. and 2 p.m.
Loughborough	"Ashmount", Bridge Street	 Mondays 9.30 a.m. Tuesdays 9.30 a.m. Thursdays 9.30 a.m.
Markfield	The Sanatorium	 Wednesdays 2 p.m. Fridays 9.30 a.m.
Melton Mowbray	War Memorial Hospital	 Tuesdays 10 a.m.

(Joint Report of County Medical Officer and Consultant Chest Physician)

Prevalence of Tuberc	ulosis				Average for pre-
			Year 1953	Year 1952	ceding ten years
Respiratory tubercul	osis:				the same seems
Notifications			201	230	210
Deaths			57	70	108
Death-Rate			0.16	0.20	0.33
Non-respiratory tube	rculosis	:			
Notifications			68	. 64	72
Deaths			8	14	23
Death-Rate			0.02	10.0	0.07
Total for both res non-respiratory tu					
Notifications			269	294	282
Deaths			65	84	131

In reviewing the tuberculosis statistics for the past year, one again notices the further decline in the mortality from respiratory tuberculosis from 20 per 100,000 to 16 per 100,000, and there is also a decrease in the number of notifications. The mortality from non-respiratory tuberculosis shows a decrease from .04 per 100,000 to .02 per 100,000, with little alteration in the number of notifications. An analysis of the deaths from non-respiratory tuberculosis shows that in the past year we have not had a single non-respiratory tuberculosis death in an urban area in the County, and all eight deaths have taken place in the rural areas. Some of these cases were old-standing cases of tuberculosis spine or abdomen, and it would be impossible to prove that these deaths are due to infection from the bovine type of

tuberculosis but it does suggest that bovine tuberculosis in the rural areas is playing far too great a part in the incidence of non-respiratory tuberculosis and its mortality.

Chronic cases of pulmonary tuberculosis still provide a great problem in the county, and it is necessary to point out that sooner or later there may be a slight temporary rise in the mortality from pulmonary tuberculosis, due to a number of deaths in long-standing cases for whom, at present, one can see no hope of complete recovery. With the improved methods of treatment of the acute case now available, the number of cases which progress to that stage is diminishing, and the reduction in the "pool" of chronic infective cases is one of the most hopeful signs for the future.

Even with the present-day methods of treating tuberculosis, we still come across the very advanced case coming for diagnosis, and a total of seven deaths occurred within six months of notification. Furthermore, despite the fact that we feel reasonably satisfied with the notifications in the County as a whole, II patients were not notified prior to death; in several of these, of course, the diagnosis was found on post-mortem. In all cases the appropriate investigations are carried out, including contact examinations. These deaths, in the main, are due to the fact that some people are still prepared to carry on working, or are hiding their illness from their practitioner, and it is to be hoped that with the wider appreciation by the general public of what is now available for them in the treatment of tuberculosis, we should now see very few untreatable cases of respiratory tuberculosis at the time of diagnosis.

Chest Clinic Service

The main item to report in the last year was the opening of the new Chest Clinic in Leicester to serve the adjacent county areas, and to act as a base for the administrative staff for the whole of the Chest Clinic Service in the county. The Clinic is fully equipped with an X-ray, together with all other facilities, and the formal opening took place on 15th January, 1954, by Sir Basil Gibson, Chairman of the Sheffield Regional Hospital Board.

The position as regards the waiting list is again satisfactory, nor has the problem of thoracic surgery greatly worried us. The happy arrangements for the working of the scheme in this respect were fully explained in the last report.

Plans are going forward for the accommodation of the Chest Clinic in Loughborough in the proposed new out-patients of Loughborough General Hospital, and also of adding to the existing out-patient facilities at Markfield to increase the accommodation of the Coalville Chest Clinic.

We have still continued the use of Streptomycin at home as a preliminary form of treatment in suitable cases requiring sanatorium treatment, and also in the case of some of our long-term chronic cases. There has never been any administrative or technical difficulty in giving Streptomycin at home, and, as in previous years, there has been complete co-operation in every way from general practitioners and district nurses. A heavy extra burden of work falls on the district nurses, and we are grateful to them and to the County Nursing Association. The problem of how long to continue Streptomycin in chronic cases, or whether, once stopped, another course of treatment should be given, is a difficult one and we have tried to deal with it to the best of our clinical ability.

Mass Radiography

During the past year the Mass Radiography Unit which normally spends six months in the County of Leicester, visited the Leicestershire Coalfields and the towns of Coalville, Ashby-de-la-Zouch, Barwell, Earl Shilton, and Hinckley. A total of 28,584 were X-rayed, of whom 35 were found to be suffering from active tuberculosis. In addition, 60 cases of bronchiectasis were discovered, 39 cases of pneumoconiosis and six cases of carcinoma of the lung. The Mass Radiography Unit has been used to cover organised industrial groups, open public sessions, school children of 13 years of age and upwards, University students and Local Authority and Government staffs.

Home Help Department

It would have been impossible to have done any home treatment without the use of the Home Help Department, who has supplied us with Home Helps in 72 households altogether during the past year, and they always do their utmost to help us in any difficulty.

Prevention, Care and After-Care

The number of new contacts examined in 1953 was 1,432, of which 30 were found to be suffering from active tuberculosis. Last year nearly five contacts were examined for every newly-diagnosed case; it will be seen that this year seven contacts were examined for every new case. It is also interesting to note that one-seventh of our new cases were brought to light by means of contact examination. It is apparent that contacts are more readily understanding the necessity for attending, and we have no doubt that the fact that B.C.G. can be given to Mantoux negative contacts is a great source of comfort to families: during the year, 365 Mantoux negative contacts were given B.C.G. We continue to send from each Chest Clinic to Health Visitors a brief summary of the clinical state of the patient on diagnosis, and they are also sent a summary of the treatment which a patient has had on discharge from the sanatorium. Quarterly meetings are held with the Health Visitors in the various clinic areas to discuss cases and, quite apart from this, any Health Visitor is, of course, welcome at a clinic on any occasion to discuss an immediate problem. The Health Visitors continue to staff the clinics and, as stated

in a report some years ago, we have adopted a scheme whereby a selected group of Health Visitors give a considerable portion of their time to the Tuberculosis Service by undertaking the clinic work, which appears to be the most satisfactory solution in a county such as this. As far as possible, we have tried to keep the Health Visitors abreast with the broad outlines of modern clinical treatment, so that they have a knowledge of the advances which are taking place. We consider that the part of the Health Visitor in the Tuberculosis Service is of growing importance, because search for the infective source case will have to be intensified as the tuberculosis problem becomes within more manageable proportions. One factor which will undoubtedly awaken the public to the necessity of fully co-operating in every way towards the eradication of tuberculosis will be that in the coming year B.C.G. will be offered to school children at the age of 13 years. This will bring a knowledge and appreciation of tuberculosis into practically every household; formerly it tended only to reach the household which, unfortunately, had either a relative or a close friend ill.

The schemes discussed in last year's report for the supply of garden chalets and the provision of free milk in appropriate cases continue to operate satisfactorily. Arrangements for convalescence for tuberculous patients are most desirable, although they are not easy to make. So far, we have managed to make provision for most cases where a break from home environment is so desirable and may prevent further trouble.

Rehabilitation

All new patients are advised to register under the Disabled Persons (Employment) Act, 1944, and so become entitled to preferential treatment in employment. The conditions under which a patient is working when first diagnosed are considered and any necessary investigations carried out, with his consent, if it is thought that he may have been a source of infection to others. After recovery from illness, a change of occupation may be necessary: in suitable cases full advantage is taken of the excellent facilities provided by the Ministry of Labour Training Centre at Humberstone Lane. When a school child is confined to his house for prolonged periods, it is essential that his education be continued, and the Director of Education has been most helpful in arranging home teaching.

Almoner's Department

The County Almoner continued with her present duties of attending at the Chest Clinics and also seeing patients in the Sanatorium. We are endeavouring to obtain a second Almoner to assist in this work because it is of growing importance and the patients, now that they are used to the services of the Almoner, are bringing forward still more problems which require her skilled attention. We adhere firmly to our belief that the duties of the Health Visitor

and the Almoner are complementary and that there is ample scope, without overlapping, for each in their respective sphere.

After-Care Committee

The newly-constituted After-Care Committee which has now been in existence for two years, is working very smoothly, and once again we would like to pay our tribute to the work done by the various groups of the Friends of Markfield, who have pledged to the Association the responsibility of raising £1,000 a year to the voluntary funds of this Committee.

The existence of this source of income is of great help to the After-Care Committee, and enables prompt action to be taken in cases where the help required cannot be provided by "official" means. It is impossible to mention the Friends of Markfield without reference to the death on 16th of April, 1954, of Captain J. W. Price, to whose initiative and enthusiasm the organisation owes its existence. Capt. Price's interest in tuberculosis was very great, and took a most practical form: the tuberculous patient in this county can indeed be grateful for his work.

Future Development

Although the County Council has lost the purely curative side of the Tuberculosis Service, it does appear that Local Authorities may well play the chief part in the eradication of tuberculosis in the future. The vaccination of school leavers with B.C.G. is properly a County Council responsibility, while the eventual control of the disease may depend on the success of case-finding surveys. The tuberculin testing of school entrants will have to become the responsibility of the School Medical Service, in co-operation with the Chest Clinic which would arrange for the investigation of the families of any Mantoux positive children.

The part played by the Local Authority in propaganda is one which must be carefully considered: we feel that this function is one which the Local Authority should properly undertake, and we believe that in any scheme the spoken word is a great deal better than the mere issue of pamphlets. We have been much impressed by the keen and intelligent interest shown by such groups as Women's Institutes on the subject of tuberculosis, while the inception of B.C.G. Vaccination for school children will, as already mentioned, bring another group of the population into contact with the problem.

No one can determine how long tuberculosis will remain with us, but it is obvious that any attitude of complacency might well result in a reversal of the satisfactory trend so apparent at present. It may well prove more difficult, and seem more tedious and unrewarding, to keep up enthusiasm when the present really dramatic improvement in the figures slows down or ceases, as may well occur. It is essential that we do not relax our efforts just when the problems seem within sight of solution.

SECTION 29

Domestic Help Service

This service still continues to expand although in some areas recruitment of home helps is slow owing to the availability of other forms of employment and in some areas, it has been difficult enough to recruit a sufficient number of suitable home helps to replace those lost to the service from various reasons. It will be realised that the greatest possible care must be given in the selection of home helps, and fewer than one applicant in ten is finally accepted. The number of cases attended rose from 1,603 in 1952 to 1,959 in the year 1953. The number of hours worked also rose from 349,786 in 1952 to 367,127 in 1953. The growth of this service has been one of the features of recent years, and it is indeed difficult to imagine what we should do without it. The assistance it gives, directly or indirectly, to other branches of the health and welfare services is impossible to calculate, but is obviously very great indeed. The service cost in 1953 £68,530, of which £10,000 was recovered from those provided with help.

Number of permanen	t Home-Hel	ps at end	of year:		de Hunodall
(a) Full-time works	ers '	Signal or	P. 10 15	66	a management
(b) Part-time works	ers	00	0 10.000	104	the six rolling to
(c) Occasional world	kers				
	ny ansas				206
Number of temporary	Home-Help				O ONE OF STREET
(a) Full-time works	ers	of the la	1 100	10	CALLY SIN
(b) Part-time works	ers .		1. 1/10	36	bietej store
(c) Occasional work	kers	100		100	146
			set ow :	Sambles	146
Total number of hour	s completed	by Hom	e-Helps:		notice about
(a) On duty	and but		Ted lepts	347,261	
(a) On duty (b) Travelling time	aram ade	Teld To		347,261 19,866	
			e in a second	19,866	367,127
	a spide,	AND THE		19,866	
(b) Travelling time Number of cases atter	nded:	ted to the control of	arizate anizate tootrani regor sub	19,866	367,127
(b) Travelling time	nded:	e de chies e de ceir e en come de se boor lacion un	antata tootani ogog ad	19,866	367,127
(b) Travelling time Number of cases atter (a) Maternity	nded:	A COLOR OF THE COLOR OF T	and and a	602	367,127
(b) Travelling time Number of cases atter (a) Maternity (b) Ordinary illness	nded:	tendo nos estados de estados de estados de estados estad est	and	602 514 117	367,127
(b) Travelling time Number of cases atter (a) Maternity (b) Ordinary illness (c) Chronics (d) Tubercular (e) Old age, illness,	nded:	ty.	and	602 514 117 72 632	367,127
(b) Travelling time Number of cases atter (a) Maternity (b) Ordinary illness (c) Chronics (d) Tubercular	nded:	ty	and	602 514 117 72 632 22	367,127

Area Particulars

dydol is gled appointed the going of Both and not be flew origin result for	Number of l at 31st Dece	Cases		
Area Office	Permanent	Temporary	attended 1953	
Leicester	48	18	573	
Coalville	38	31	259	
Hinckley	24	19	416	
Loughborough	33	33	266	
Market Harborough	.26	18	219	
Melton Mowbray	. 37	27	226	
Totals	206	146	1,959	

SECTION 51 Mental Health Service

Mental Illness

During the year 75 males and 113 females were removed to mental hospitals by the Mental Health Officers under Section 16 of the Lunacy Act, 1890, as against 65 males and 117 females in 1952. Other admissions recorded by the department total 307, comprising 131 males and 176 females.

Mental Deficiency

1100 × 1.09

Statistics relating to Mental Deficiency as at the 31st December, 1953, are given below in comparison with figures for the preceding year:

Admini dan	7,1598	202	31st I	December	, 1953	31st De	cember,	1952
Assil and and				Female	-	Male I	² emale	Total
Under institutional care			194	229	423	185	224	409
Under guardianship	Marie .		9	13	- 22	. 9	13	22
At "place of safety"			-	1	1	- 10	-	111 -
Under statutory supervis	sion		216	198	414	198	180	378
Under voluntary superv	ision		21	17	38	20	23	43
naria da las		3 1	440	458	898	412	440	852
Under training at Centre			65	53	118	60	47	107
Cases awaiting institution modation	onal accor	n-	23	29	52	23	31	54

Occupation Centres

Full-time Centres have been established at Coalville, Hinckley, Wigston and Asfordby and there is a centre open during the afternoons only at Loughborough. It is expected that in 1954 this latter centre will be run on a full-time basis. All centres are housed in rented halls. Defectives of all ages attend each centre and the degree of defect also varies considerably so that training according to needs is difficult to apply.

Special transport is provided at Wigston and Hinckley while public transport is used to a very limited extent at other centres.

In addition to the Occupation Centres, there is a small home training scheme in the Melton Mowbray area for defectives unable to attend a centre, chiefly on grounds of physical disability. A part-time teacher spends five half-days per week visiting 10 defectives scattered throughout the area and who would benefit from home teaching.

NOTIFICATION OF BIRTHS

(Public Health Act, 1936-Section 203)

Notifications of births are received in the department from midwives in attendance at the confinement. Information is also exchanged with the Registrars of Births in order to discover births not notified or not registered within the statutory time limits as laid down by the regulating Acts of Parliament.

All notifications of births are scrutinised for cases of prematurity and illegitimacy, which are referred to the Health Visitors for special report and supervision.

The following table gives details of the births recorded in the department during 1953:

	Live Births		Still B		
	Dom.	Inst.	Dom.	Inst.	Total
Total which occurred in Leicester- shire	2,325	1,962	26	33	4,346
Births occurring in Leicestershire "Transferred Out"	14	211	TO LESS	1	226
	2,311	1,751	26	32	4,120
Births occurring outside Leicester-					
shire "Transferred In"	11	1,411	-	62	1,484
No. V ciantonhim Bisto	0 200	9 100	00	-	E 004
Net Leicestershire Births	2,322	3,162	26	94	5,604

REGISTRATION OF NURSING HOMES

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

Homes closed

The Somerville Nursing Home, 77 Park Road, Loughborough, closed during the year.

Homes newly registered

No nursing homes were newly registered during the year.

Existing Nursing Homes

				Nur	nber of be	eds
Address				Maternity	General	Total
"Glencoe", 25 London Ro	ad, Coalv	ville		8	-	8
"Braemar", Newton Burgo	oland			1	-	1
The Loughborough Nursin	g Home	Ltd., Rad	dmoor			
Road, Loughborough				5	5	10
"Roundhill", Syston Road	, Thurma	aston		12	-	12
Rothley Temple Nursing I				-	20	20
Walberton Rest and Conva	lescent H	ome, Sta	mford			
Road, Kirby Muxloe				-	33	33
A STANDAMENT					_	_
Totals				26	58	84
					_	

These nursing homes are inspected by Medical Officers of the department and by officers of the Leicestershire County Nursing Association.

NATIONAL ASSISTANCE ACT, 1948 BLIND PERSONS

I am indebted to Mr. E. J. Venn, General Secretary of the Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind for the report given below on work carried out during the year, and I would call attention particularly to the section on registration. It is interesting to note that in this year no notifications of ophthalmia neonatorum were received: in the past this condition was one of the most important causes of blindness.

Reference was made last year to the condition known as retrolental fibroplasia, which causes blindness and is found in certain premature infants of low birth weight. Recent research appears to show that the essential cause of this condition lies in the administration of a high concentration of oxygen to those premature infants, and it is hoped that modification of this lifesaving procedure will result in the prevention of the condition.

The Royal Leicester, Leicestershire and Rutland Institution for the Blind, has continued to administer Welfare Services for the Blind under the National Assistance Act, 1948, as the authorised agents of the County Council in

addition to providing from its own voluntary funds many extra services for the blind.

It is particularly gratifying to the Institution that the structure of voluntary service, which has characterised the Institution throughout its history, has, in this 95th year of its existence, shown such strength that the Committee has authorised the provision of two additional services to the blind.

One of the Institution's new services will be the provision of talking books to blind people who, because of advanced age, or because of other infirmities, are unable to read embossed literature, and who sadly miss the reading they were able to do before blindness. To start with, about 40 people, all of whom are either bedridden, crippled, home-bound, or lonely, have been selected to receive books during the coming year. The 'books' are sets of gramophone records played on specially-constructed machines, and the Institution is able to provide these books to the blind in co-operation with the Royal National Institute for the Blind, with whom the Institution maintains the closest possible liaison. This new service will cost at least £700 from the Institution's own funds in the forthcoming year.

The other new service authorised is the provision of a Social Centre and Club, to be opened every weekday, morning and afternoon, with evening activities from time to time. Additional staff, including a full-time handicrafts instructor, is to be engaged to carry out this new service, and, of course, considerable expenditure will be incurred in obtaining suitable premises. Apart from capital expenditure, it is estimated that the additional expenditure to run this new social club during a full year will amount to over £1,500 and this money too, will be provided from the Institution's own voluntary funds.

It is intended to create separate sub-committees of the blind people themselves, to run some of the activities required at the new club. The Institution has very great hopes that in this new venture we will provide both the elderly unemployed blind, and our employed people with opportunities for occupational, social, and recreational activities. It is felt that this new service will indeed soon be a very flourishing example of our blind welfare work. There is no doubt whatever that the Institution's services have steadily progressed throughout its history, and today its influence on the life of nearly 1,450 blind people, is greater than ever.

Voluntary Help

The very existence of the voluntary spirit depends ultimately on voluntary money-raising efforts, and no matter how enthusiastic the Institution's professional money-raisers are, they would be the first to admit that they are useless without the zest and keenness of hundreds and hundreds of 'amateur' money-raisers. So this year, when we compliment ourselves on our

fine efforts to raise money for the blind let us remember with gratitude and pride the organisers of local whist drives, concerts, dances, and other efforts; the collectors in factories, licenced houses, etc., the flag day sellers; the shop-keepers who display our boxes; the Christmas card and calendar sellers; and every other money-raiser for the Institution.

All these well-wishers which the Institution has gathered round itself are in fact the life-blood of any voluntary society. Through their efforts the Institution's services to the blind increase at the pace they set, and the services thus provided call for even more voluntary aid from guides, car drivers, entertainers, social organisers, speakers, helpers for washing-up, etc.

The Institution realises only too well that its direction at the top is only possible, due to the support at the base.

Registration

The number of registered blind persons continues to show an increase, the number on the County register as at 31st December, 1953, being 650, compared with 622 the previous year. Great attention is being given to ensure that any medical, surgical, or optical treatment necessary to reduce the incidence of blindness is taken, but this is primarily a matter for doctors and hospitals before a person becomes blind. The Institution, however, as far as it is able does ensure that every blind person has the opportunity of receiving any treatment recommended and, as a result, a few people fortunately are each year removed from our blind register.

The following table shows the position in respect of treatment for the year ended 31st December, 1953, in so far as county persons are concerned, Form B.D.8 being the Ophthalmia Surgeons' certificate of blindness.

Follow-up of Registered Blind and Partially-Sighted Persons

stranger was much granus a	Cause of Disability				
Service guident redemice courses	Cataract	Glaucoma	Retrolental Fibroplasia	Others	
(i) Number of cases registered during the year, in respect of which para. 7(c) of Form B.D.8 recommends:			- Joseph		
(a) No Treatment	24	13	1	41	
(b) Treatment (Medical, Surgical or Optical)	32	8		13	
(ii) Number of cases at (i) (b) above, which on follow-up action	LOUGH TO T				
have received treatment	18	8	300000	12	

E 65

It is felt, however, that lack of surgical beds in hospitals delays treatment, although some of the elderly blind people refuse to undergo operations because of fear of losing their residual sight; also in some cases, although treatment is recommended on the B.D.8, it subsequently transpires that an operation is not desirable because of poor general health.

Rehabilitation

Five blind people from the County have attended a three months' intensive course for industrial or social rehabilitation during the past year, and a further five persons from Leicestershire are at present either on the course, or waiting for vacancies. The course aims at destroying the self-consciousness of blindness, and at restoring self-confidence to lead a full and self-supporting life. The development of the other senses to such a degree as to compensate to some extent for loss of sight is one of the ways these aims are achieved. The Institution, especially in so far as persons for industrial rehabilitation are concerned, is deeply grateful for the financial assistance afforded by the Ministry of Labour and National Service, and to the co-operation of the Ministry's local officers. The social rehabilitation people are paid for by the Institution entirely out of voluntary funds.

Tribute must also be paid to the fine work of the staff of the Royal National Institute for the Blind, at the Rehabilitation Centre, and it is no exaggeration to say that our blind people without exception have greatly benefited from the course.

Training Facilities

In conjunction with the Ministry of Labour and National Service, who recognise the Institution as an approved training establishment, eight blind people from the County have undertaken training during the year in the Institution's technical training department.

In addition, six County blind persons have undertaken training courses at national level.

Employment

As at 31st December, 1953, the Institution had only one trained blind person actually unemployed, and this person was, in fact, found a suitable job in his trade in January, 1954. This position speaks highly of the successful rehabilitation and training schemes of the Institution. Employment is offered in one of three ways—in either open industry, that is, in ordinary factories or offices, in the Institution's own workshops, or in the Institution's homeworkers' scheme.

Open Industry

At 31st December, 1953, 35 County blind people were engaged in sighted industry as follows:

Agents and Collectors		 	1
Clerks and Typists		 	2
Dealers, Shopkeepers, New	sagents	 	6
Domestic Workers		 	3
Factory Operatives		 	9
Home Teachers		 	1
Labourers		 	1
Massage and Physiotherapy		 	2
Musicians and Music Teac		 	1
Porters, Packers, Cleaners		 	2
Poultry Keepers			3
Telephone Operators		 	4
Milliania South St.			
			35
			_

The great assistance of the Disablement Resettlement Officers of the Ministry of Labour and National Service in this work must again be recorded with sincere appreciation.

Blind welfare work itself, in a large Institution such as ours, offers scope for the employment of blind people within its framework, and it is the Committee's policy to engage blind people on the staff of the Institution wherever possible. Blind people engaged by the Institution carry out duties as shorthand-typists, telephonists, collectors, salesmen, home teachers, librarians and lecturers.

Homeworkers

The Institution's Homeworkers' Scheme is expanding, so that today there are eight County workers in the scheme, in comparison to five last year. This may well be a field of employment which will continue to grow, but, in this connection, much, of course, depends on the location of the blind person concerned, and on the trade or profession he or she wishes to follow.

During the past year, increased assistance has been afforded to the homeworkers by the Institution, with the result that their actual earnings have also increased. It is our policy to afford every aid to economic employment.

Workshops

The workshops, which gave employment to 29 County blind people as compared to 18 last year, have again provided full employment for them. Sales during the year increased to £35,000, as compared to £30,000 last year. This increase, as forecast in last year's report, is due to the continued cooperation of the blind workers, and to the installation of additional machinery

and facilities by the Institution. Every department of the workshop, except the mat-making department, has in some way or another been revised, and it is our policy to ensure that the workshop is run on modern lines, bearing in mind that our object is to employ blind people.

The increased productive earnings of the blind with the consequent increase in sales is most gratifying, and it is anticipated that the forthcoming year will show yet another improvement in this way, so long as the local authorities, the business directors, and the general public, continue to support our workshops.

It would perhaps be as well to say a word about our loss on our Trading Account. There are several contributory factors for this position, but the main factor is that, if productive earnings of blind people are estimated as one-third of that of sighted workers in similar trades, it will be realised that the overhead charges in a blind workshop are three times as much as those of the ordinary commercial factory, with whom we have to compete for sales. In order to provide employment for blind people in workshop trades, however, we sell our products at prices competitive with the prices of the commercial companies; hence our trading loss, but it is worthy of note that it has dropped from £7,346 in 1951-52 to £4,802 this year.

Public Relations

This year's Annual Report would not be complete without reference to the Institution's stands at the Home Life Exhibition in Leicester in September, 1953, which were provided owing to the kindness of Ewart Watson (Exhibitions) Ltd., in giving us space free of charge, and to many other organisations, including the Leicester College of Art and Technology, Wallace Wright & Co. Ltd., and the Midland Dynamo Co. Ltd., who assisted us in the fitting up of the stands.

Very special thanks are also due to the Daisy Day Committee, whose ladies so very kindly carried out the collection, and above all, to the blind workers who so ably demonstrated their skills.

The Exhibition, which was attended by approximately 200,000 members of the public, provided stands showing all aspects of the Institution's comprehensive services to the blind. Continuous demonstrations were provided by blind telephonists, shorthand-typists, home teachers and visitors, chair caneseaters, piano-tuners, musicians, hamper-makers, flat-machine knitters, basket makers, and by operators of a section of the Institution's cardboard box-making department. Visitors were extremely interested to observe the 100 per cent efficiency of the blind workers at their various jobs, and to see the arresting display of apparatus on the Institution's stands.

The Institution also had exhibitions at the Rutland Agricultural Show, the Market Bosworth Show, and the Melton Mowbray Trades Fair during the year, and arrangements have been made for further extensions in this field of public relations work in the forthcoming year.

Shops at Coalville, Uppingham and Loughborough displayed blind-made goods during the year, although the latter one has recently had to close down. Efforts to obtain the co-operation of shop-keepers in other County towns will continue, and assistance to help the blind in this way is solicited.

The General Secretary is also always willing to fix any time to visit organisations, to give a talk on blind welfare work, and, in fact, the demand for this service has been so great during the year, that one of his assistants, Mrs. A. Bowskill (nee Weaver), a totally blind person, has also had to play a prominent part in this field of public relations work during the past year.

Social Centres

Social gatherings have continued on the same basis as last year in the Institution's area. There is never less than one social each weekday of the year, and sometimes, in fact, three or four. It is perhaps in connection with our social gatherings that voluntary workers for the Institution show in the most practical way that 'human touch' to which reference has already been made. To all our good friends who organise, or take part in, the provision of socials, we tender our very sincere thanks and gratitude. The activities at these socials are varied, consisting of talks, spelling bees, quizzes, brains trusts, entertainment, bulb-growing competitions, party games, dominoes, chess, draughts, cards, discussion groups, and gramophone recitals. Handicraft classes are also held separately.

During the year a new club was opened for the blind wishing to take part in evening activities, and the club is, in fact, run by a committee of blind people elected by the members of the club. Owing to the shortage of premises, the club was inaugurated at our workshops at Margaret Road, but we now look forward to its transfer to the new Centre previously mentioned.

Special socials have also been arranged during the year for the first time for our deaf/blind people, in conjunction with the Leicester and County Deaf and Dumb Mission, to whom we are deeply grateful for the liaison in providing for these doubly-handicapped persons.

Outings

Many outings took place during the year, some of the places visited being Newstead Abbey, Skegness, Cleethorpes, Hunstanton, Alton Towers, and Whitwick Monastery.

The blind children, who are usually away from their homes at school, are always visited when at home in our area, and a point is always made of providing them with a trip to the seaside during the summer vacation, and a visit to the pantomine at Christmas.

Gifts

The Institution, it is thought, is the only blind welfare association which today makes regular cash gifts to its unemployed blind population on the scale that we do, namely, £2 at midsummer, and £2 at Christmas.

The many grateful letters we receive show us that these gifts are always welcomed, and indeed needed. They are often used to purchase clothing or bedlinen, or to provide pocket money for a summer holiday, or the extras required at Christmastide.

These gifts are one way by which the Institution can ensure that every blind person benefits from the services of the Institution, and one way in which the blind person can obtain personal requirements.

In addition, many individual people are assisted with cash gifts, or by the provision of articles as, and when, necessary, in accordance with their requirements, in order to avoid actual hardship.

Cash expended in this way during the year under review amounted to over £4,000.

Wireless

The Institution is able to provide a wireless set to every newly-blinded person almost immediately he or she is registered with the Institution, and the maintenance of sets is also undertaken by the Institution. It might well be imagined that wireless sets were invented solely for the pleasure of blind people, as they are such ideal mediums for recreation for the blind. The Institution is delighted to play its part in ensuring that the blind can all enjoy this amenity. Certificates for the blind to obtain free wireless licences are also issued by the Institution.

Summer Holidays

Financial assistance amounting to nearly £2,500 has continued to be provided to the blind, so that they can participate in summer holidays; 554 blind people and their escorts were assisted in this way during the year, a record number; 324 of them visited hotel accommodation arranged for them by the Institution at either Bournemouth or Skegness, as desired; 117 booked their own accommodation at other resorts or with relatives. This total of 441 blind people were substantially assisted with their holiday expenses, the remaining 113, who were in a better financial position themselves, received smaller grants.

The Committee is indeed thankful that the support it receives enables holidays to be arranged on the scale indicated, and it is a service that is deeply appreciated by our blind people.

Residential Home

Our new "Lyndwood" Home, which was officially opened on 18th June, 1953, by our President and Chairman of the Home, the Dowager Duchess of Rutland, with the Lord Mayor (Alderman C. R. Keene, C.B.E., J.P.) kindly presiding on the occasion, has enabled the Institution to provide permanent accommodation for 14 blind ladies from the County, needing care and attention during the year.

During the past year a sun lounge and extra guide rails, and garden seats have been provided at the Home, and it is indeed a real home with a high standard of comfort in every way.

In conclusion, the Institution is most appreciative of the co-operation and assistance it receives from the County Council. The liaison between the Health Committee of the County Council and the Institution promotes a standard of service to the blind of Leicestershire which is undoubtedly amongst the best in the country. The support of the County Council is indeed valued by the Institution, and we are sure that, by our joint efforts, we are benefiting the blind to the greatest possible degree.

Southern Regional Association for the Blind

This Association concerns itself with the promotion of blind welfare, the prevention of blindness, conferences, the maintaining of a central register of blind persons and collation of statistical data, etc. An annual grant is made based on the officially recorded numbers of blind persons in the area.

CRIPPLES WELFARE

An annual grant is made to the Leicestershire Voluntary Association for Cripples Welfare. The County Council is represented on its Executive Committee, whose meetings are attended by the County Medical Officer or his Deputy. Cases are referred from many sources, including hospital almoners and the County Council's officers, while there is constant cooperation with the Ministry of Labour. The organising secretary visits cases personally, and occupational therapy is carried out.

BLIND AND HANDICAPPED PERSONS FREE TRANSPORT PASSES

A grant is made to the Royal Leicester, Leicestershire and Rutland Institution for the Blind, The Leicester Guild of the Cripples, The British Legion and the British Limbless Ex-Servicemen's Association equal to the amount expended by these voluntary associations on the provision of free transport passes.

DEAF AND DUMB

The Council has adopted the model scheme of the Ministry of Health for the provision of welfare services under Sections 29 and 30 of the National Assistance Act, 1948, for persons who are deaf and dumb. The Council already has arrangements with two voluntary organisations—the Leicester and County Mission for the Deaf and Dumb and the Loughborough and District Mission for the Deaf and Dumb—for whose services an annual grant is made, and the scheme permits these arrangements to remain unaltered. An annual grant is also made to the Leicester and District Social Club for the Hard of Hearing. This club arranges social activities such as Whist Drives, Film Shows and combines them with lip-reading classes.

The deaf and dumb person who lives in an isolated rural area presents a special problem, and one which has caused some concern to the Health Committee.

Available figures show 127 deaf and dumb persons in the county.

EPILEPTICS

The person suffering from epilepsy often has a difficult passage through life. Not only may the illness itself, in severe cases, be a grave disability, but even in the mildest case the very fact that a person may once or twice have had an epileptic fit may in itself be a serious handicap. There is sometimes a belief, which is entirely unfounded, that the epileptic is always in some way mentally abnormal, and this, combined with many people's instinctive aversion to such an episode as an epileptic fit, can raise difficulties in employment. There have been great advances in medical treatment in recent years, but there is still much room for medico-social work. This is properly a task for health authorities, and it is hoped that progress may be made in the future.

The number of epileptics in the county is not known with any degree of accuracy, but the following figures are available. The Disabled Persons Register of the Ministry of Labour and National Service contain particulars of 74 cases. In addition, nine epileptics are resident in the County Homes, and 12 more are maintained by the County Homes Committee in various special institutions. The Mental Health Department have 37 cases under supervision. The School Health Department know of 13 school children classified as epileptics, of whom nine are in special schools; while this figure may not be accurate it probably includes the cases who are severely handicapped.

SPASTICS

A more correct term for this condition is "cerebral palsy". There are all degress of severity, which makes any estimate of incidence difficult, but the term is generally applied to cases showing a considerable degree of disability.

Much interest has recently been shown in this condition. A report of a Committee of the Advisory Council on the Welfare of Handicapped Persons,

printed as an appendix to the Ministry of Health's Circular 26/53, of 17th December, 1953, gives a very good picture of the situation, and deserves careful study by anyone interested.

One of the great difficulties in dealing with the treatment and care of those cases is that many people and various authorities are involved. Those most intimately concerned are of course the patient himself, and his parents and relatives; associations of parents and interested people have done much to stimulate interest and provide facilities. General practitioners, hospital and specialist services, voluntary organisations and the Health, Education and Welfare services of local authorities all have a part to play and co-ordination is essential.

An informal conference of doctors interested in this problem was held in November, 1953. The area under consideration was that covered by the geographical county of Leicester, and the conference included medical officers of the City and County Health Departments. It was considered that the first essential was early and accurate diagnosis, and arrangements were made to call the attention of all medical practitioners to the fact that pediatricians were anxious to have any suspected case referred to them as soon as possible. There was also a discussion on the best use of the facilities at Bosworth Park Infirmary available for such cases, which included educational facilities, and arrangements made for the co-operation of all parties concerned.

We must admit that we do not know much of the incidence of this condition in the area. The register of handicapped school children shows that there are eight spastic children considered to fall into this category, of whom four were in special schools.

From information available from other sources, the Leicestershire Voluntary Association for Cripples Welfare, the County Homes Committee and the Mental Health Services, we know of something like 100 other cases; of these, 25 are under the supervision of the Mental Health Department.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

The following table gives particulars of registrations at the 31st December, 1953:

	Number registered	Number of children provided for
Premises	-	_
Daily Minders	5	14

NOTIFICATIONS OF INFECTIOUS DISEASES

Details of infectious diseases which have been notified during the year 1953 are given in Statistical Tables 3 and 4, which are to be found at the end of this report.

The tables below give year-by-year records for the infectious diseases mentioned. It will be noted that there was no death from whooping cough for the first year on record. This is a testimony to improved methods of treatment; this is extremely gratifying, but at the same time it must be realised that the chief danger in this disease lies not so much in the immediate mortality as in the damage which it may leave behind, especially in young infants.

Scarlet Fever

Year	Notifications	Year	Notifications
1944	793	1949	444
1945	658	1950	529
1946	544	1951	305
1947	447	1952	468
1948	585	1953	492

Whooping Cough

Year	Notifications	Deaths	Death-rate per thousand notifications
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
1951	1,732	3	1.73
1952	1,047	3	2.87
1953	1,220	ma - 11 1	1. Ku 32 - 8 13

Measles

Year	Notifications	Deaths	Death-rate per thousand notifications		
1944	618	PAID SIGN	San Wolfer Str.		
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		
1951	-4,632		Car Carley		
1952	1,902		-		
1953	6,165	- 1	TOTAL -		

Diphtheria

Year	Original notifications	Corrected notifications	Deaths
1901	247	_	53
1911	306	- 1	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	_
1951	5	_	_
1952	8	_	1
1953	6		_

Acute Poliomyelitis

	Original notifications		Correcte	Corrected notifications		
Year	Paralytic	Non-paralytic	Paralytic Non-paralytic		and polio- encephalitis)	
1944		2		2	-	
1945		4	4		1	
1946	1		1 3 10	-		
1947	3	1	23		2	
1948	1	5		9	1	
1949	6	6	6	2	10	
1950	46	14	41	10	8	
1951	20	5	17	3	-	
1952	13	3	11	2	-	
1953	28	12	31	. 11	3	

SANITARY CIRCUMSTANCES OF THE AREA

I am grateful to Mr. S. A. Gregory, the County Sanitary Officer, for the particulars given in this section of the report, also those under Housing and the Inspection and Supervision of Food.

WATER SUPPLY

The following table gives details of the rainfall during 1953, recorded at the Wigston Urban District Council's Sewage Farm, Countesthorpe. I am indebted to Mr. Gordon J. Wootton, M.I.Mun.E., M.R.San.I., Engineer and Surveyor to the Wigston Urban District Council, who kindly supplied these figures:

Rainfall in 1953

Rain Gauge	 Diameter of funnel	 8 in.
	Height of top above ground	 9 in.
	Height of ground above sea level	 256.85 ft.

		Total depth	24 hours		No. of days with 0.01 in. or	No. of days with 0.05 in. or	
Month		Inches	Inches	Date	more	more more	
January		1.05	.34	30	13	7	
February		1.28	.39	9	11	7	
March		1.64	1.29	29	8	6	
April		2.18	.63	2	16	12	
May		1.58	.56	18	11	9	
June		2.64	.99	14	5	11	
July		2.11	.43	12	5	16	
August		2.80	.58	23	3	9	
September		1.38	.25	22	3	8	
October		2.50	.97	12	4	8	
November		1.86	.39	1 and 8	7	8	
December		.80	.13	12	8	10	
Total		21.82	-	_	94	111	

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

Year		Rai	infall in inches
1944	 		24.64
1945	 		21.92
1946	 		30.69
1947	 :		20.44
1948	 		29.34
1949	 		26.22
1950	 		25.15
1951	 		30.13
1952	 		25.64
1953	 		21.82

Water supplies are regularly checked by the district councils who experience little difficulty with the purity of main supplies. Many wells are found to be polluted on examination and most of the unsatisfactory samples taken during the year were from suspect wells. The table below summarizes the samples taken:

	Satisfa	ictory	Unsatisfactory		
District	Chemical	Bacterio- logical	Chemical	Bacterio- logical	
Urban Districts	ned as man	rang troop librar	Line common	Laurinages	
Ashby-de-la-Zouch	-	-	_	_	
Ashby Woulds	_	_	_	_	
Coalville	4	30	1	14	
Hinckley	3	31	-	10	
Loughborough M.B.	8	32	TANK TO STATE OF	-	
Market Harborough	14	5	_	-	
Melton Mowbray	4	13	2	2	
Oadby	_	_	_	-	
Shepshed	_	-//-		3	
Wigston	2	2	2	2	
Rural Districts		and the late of th	and the Comment of	CONTRACTOR OF THE PARTY OF THE	
Ashby-de-la-Zouch	_	2	_	12	
Barrow-upon-Soar	-	3	sulf -To st	4	
Billesdon	_		1	1	
Blaby	23	26	_	29	
Castle Donington	14	39	_	1	
Lutterworth	4	28	_	18	
Market Bosworth	1	- W W W W W W W W.	_	11	
Market Harborough	Dil see Sul	30	3	65	
Melton and Belvoir	2	8	20	20	
Totals	79	249	29	192	

Of 107,284 houses in the county, 95,283 have internal mains water supply, 1,976 are supplied by stand-pipes from mains supplies and 10,025 rely on wells.

In the rural areas 176 parishes have piped supplies with 33 relying on private wells.

The picture which emerges on the water supply position is one of steady progress in most areas but with hopeful glances being cast towards the River Dove Scheme by some districts which are still experiencing or anticipating shortages. In particular the Borough of Loughborough, Hinckley Urban District and both Melton Mowbray Urban District and Melton and Belvoir Rural District are looking to this scheme for increased supplies.

Although no actual shortage of water was felt at Hinckley during the year, additional supplies will be urgently required in the near future. Loughborough, on the other hand, was forced to restrict supplies between April and June, as had Melton Mowbray Urban District during the summer months. Melton and Belvoir Rural District was preparing to draw on local supplies, as at Burrough-on-the-Hill, with the idea of integrating small sources of supply into an Area Scheme when practicable.

The position in Ashby-de-la-Zouch Urban District appears to have been satisfactory following the completion of the Derwent Valley Scheme but Ashby Woulds Urban District suffered from restricted supplies during the summer and autumn and from poor pressure in the higher parts of the district.

The Urban District of Coalville completed the Holly Hayes Borehole to increase the area's supply of water. Ashby-de-la-Zouch Rural District provided a mains supply to the village of Appleby Magna during the year but the village of Lount again felt a shortage of water. A new main laid by the Rural District improved the position somewhat in the village of Castle Donington. Market Harborough Rural District was forced to cart water to the village of Great Easton and dealt with a local shortage at Saddington by improving the pumping facilities to that village. Melton and Belvoir Rural District also carted water to the villages of Barkestone, Great Dalby, Waltham and Croxton Kerrial, where shortages were experienced.

Many of the other Rural Districts extended water services to villages not previously served. The Districts which achieved this were Blaby Rural District to the villages of Aston Flamville and Thurlaston; Billesdon Rural District to Marefield and Tugby; Lutterworth Rural District to the villages of Kimcote and Walton, Peatling Magna, Peatling Parva, Bruntingthorpe, Arnesby and Shearsby; and Melton and Belvoir Rural District to the village of Saxby. The mains laid the previous year by Barrow-upon-Soar Rural District in South Croxton came into use during the year.

In addition to the many villages newly supplied with mains water, many thousands of yards of extensions to the existing mains were laid to keep pace with the development of the new housing estates.

The following work was carried out in connection with domestic water supply.

	Urban districts	Rural districts
Piped supplies substituted for well supplies	 25	715
Wells closed	 10	68
Wells cleansed, repaired, etc	 4	24

River Dove Scheme

It was reported during the year that the Draft Agreement prepared by the River Dove Management Committee contained 14 parties; namely, Leicester County Borough, Loughborough Municipal Borough, Coalville, Hinckley, Melton Mowbray Urban Districts, Barrow-upon-Soar, Billesdon, Blaby, Castle Donington, Lutterworth, Market Harborough and Melton and Belvoir Rural Districts, Swadlincote and Ashby Joint Water Board and the County Council. Under the Agreement a Joint Board will be set up composed of 16 members. Of this number, eight are to be appointed by Leicester County Borough, two by Loughborough Municipal Borough, three by the Urban Authorities, two by the Rural Authorities and one by the County Council.

SEWERAGE AND SEWAGE DISPOSAL

As can be seen from the details in the following paragraph, good progress has been made with schemes of sewerage and sewage disposal in most districts of the county. The problem of cesspool emptying, due in the main to the difficulty of keeping labour for this duty, continues to be a source of worry to the Rural District Councils. Pail closets are emptied weekly in most districts, but one authority does not undertake this service at all. The labour problem also applies here and difficulty is experienced, especially at some times of the year, in obtaining sites for disposal.

Ashby-de-la-Zouch Urban District

New Packington Scheme for sewering houses served by cesspools still awaits approval.

Coalville Urban District

At the end of the year a new main drainage scheme was ready for going to tender. It is hoped to make early progress next year for a trunk sewer from Greenhill Road to the Snarrows Sewage Works.

Hinckley Urban District

Good progress made with the extensions at the main Sketchley disposal works. The Stoke Golding Scheme still awaits approval by the Ministry.

Loughborough Municipal Borough

A start was made on the sewage disposal plant reconstruction scheme during December.

Market Harborough Urban District

Preliminary consideration given to proposals for reconstructing the sewage disposal works in conjunction with a scheme for refuse disposal on an adjoining site.

Shepshed Urban District

The extensions and improvements at the sewage disposal works were completed during the year.

Wigston Urban District

The scheme for extensions at the sewage disposal works and improvement to the pumping stations awaits Ministry approval.

Barrow-upon-Soar Rural District

The Birstall scheme to pump the sewage to the Queniborough works was commenced during the year.

Billesdon Rural District

Good progress made with the Houghton-on-the-Hill scheme. The works, though not completed, were capable of receiving sewage.

Blaby Rural District

Aston Flamville—scheme to drain 10 houses on Aston Lane commenced. Countesthorpe—sewer laid in Willoughby Road to relieve nuisance from overflowing cesspools and additional drying beds at disposal works. Sapcote, Sharnford and Stoney Stanton—main drainage scheme completed.

Castle Donington Rural District

Belton scheme completed. Diseworth and Long Whatton scheme completed.

Market Bosworth Rural District

Twycross scheme completed. Sewers laid in Bagworth village and pumping main commenced. New disposal works at Botcheston completed.

Market Harborough Rural District

Disposal works for Kibworth and Smeeton Westerby completed. Saddington scheme completed. East Langton scheme progressing well.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1951

The following schemes have been submitted with application for grant aid under these Acts during the year:

Sewerage and Sewage Disposal

Local Authority	Parishes and Areas affected			Estimated	
Market Bosworth R.D.C.	Stapleton				£18,000
	Bagworth and Battran	(Second	Instalme	nt)	£33,500

Water Supplies

Local Authority	Parishes and Areas affected	Esti	mated Cost
Castle Donington R.D.C.	Hemington main extension	 	£1,250
Blaby R.D.C	Aston Flamville	 	£4,700

The above four schemes brings the total up to 129 which have now been considered. These involve 58 for water supply and 71 for sewerage and sewage disposal.

The following provisional grants under the Acts were indicated during the year.

Sewerage and Sewage Disposal

Local Authority	Sewerage and Sewa	Estimated Cost	County Council grant	Ministry grant
Rural Districts:	Scheme	Cost	grum	gram
Market Bosworth	Bagworth (Thornton Ward)	£36,900 after deduction of N.C.B. contribution	£13,000	£13,000
	Twycross	£14,000	£3,750	£7,000
Castle Donington	Long Whatton and Di	ise-		
	worth	£58,585	£15,700	£27,000
	Belton	£30,356	£10,000	€15,000
Billesdon	Houghton-on-the-Hill	£37,600	£12,000	€18,000
1 2 2	Skeffington	£5,750	£1,425	£2,900
	Water Su	pplies		
1 1 1 1 1 1 1 1			County	10.
		Estimated	Council	Ministry
Local Authority	Scheme	Cost	grant	grant
Rural Districts:				1
Blaby	Kilby	£4,082	£1,000	£1,000
1 2 2 2 2	Wigston Parva	£6,400	£1,000	£1,000
	Aston Flamville	£4,930	£750	£750

SANITARY INSPECTION

Sanitary Inspection by District Councils

Summary action	Convic-	obtained	1	11	1	11	1	11	1		1	11	11	1	1	1	11		1
Summa	Sum-	issued	1	11	1	11	1	11	1	September 1	1	1	11	1	1	1	11		1
ved	itory	Other	1	1 84	5	178	1	1-	1		10	00 0	0 00	2	001	g	11		266
Notices ser	Statutory	Housing	1	20	600	œ 9	1	12	101		1	45	6	1	1	1	"	,	109
Number of Notices served	Preliminary	Other	163	40	160	442	44	107	382		80	74	652	81	53	116	111	The same of the sa	3,050
	Prelir	Housing	39	1 29	130	63 83	27	8	33		29	218	11	12	1	13	96	07	805
No. of	made		1,257	5.195	9,256	16,379	2,754	1,689	2,046		1,972	7,153	5,699	1,128	995	4,740	6,030	0,000	78,839
No. defects or	dealt with	(a) m	586	1 602	1,293	715	364	116	425		202	1,120	1.049	374	229	96	197	121	9,763
No. of premises where	nuisances	(b)	372	1 075	1,066	483	247	116	466		109	905	538	374	229	147	179	121	7,600
y X	complaints	received (a)	498	54	341	536	160	25	180		119	540	401	467	229	178	131	900	5,618
	Maria Maria	District	Urban Districts Ashby-de-la-Zouch	Ashby Woulds	Hinckley	Loughborough M.B.	Melton Mowbray	Oadby	Wigston	Description Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

CLOSET ACCOMMODATION

The following table shows the position as regards closet accommodation in the County at 31st December, 1953, and includes details of conversions.

Urban Districts Privies Pail closets Water closets Total Privies Pail closets Countrained Ashby-dc-la-Zouch 33 27 1,900 1,960 2 2 2 Ashby-dc-la-Zouch 59 147 8,510 8,716 2 2 2 Hindekey 59 147 8,510 8,716 2 2 2 Hindekey 59 147 8,510 8,716 2 2 2 Hindekey 59 147 8,510 8,716 2 2 2 Loughborough 1.6 97 14,835 12,021 2 12 2 Market Harborough 1.6 97 14,333 1,4347 2 12 1 Shepshed 30 1,72 2,227 2,239 6 43 1 Shepshed 30 1,409 2,451 4,367 4 4 1 Shepshed 30		of the	TE STATE OF THE ST			Converted to	Converted to Water closets	Privies
uch 33 27 1,909 1,969 2 2 59 147 8,510 8,716 2 13 — 216 11,805 12,021 — 11 ough — 97 14,735 14,847 2 12 sy — 9 4,877 4,892 — — yy — 9 4,877 4,892 — — yy — 9 4,877 4,892 — — yy — 9 4,344 4,892 — — yy — 9 4,344 4,892 — — yy — 9 4,344 4,892 — — yy — 12 2,227 2,239 — — yy — 23 5,250 5,248 6 43 yy — 2,451 4,190<	District	Privies	Pail closets	Water closets	Total	Privies	Pail closets	to Pail closets
uch 33 27 1,909 1,969 2 2 59 147 8,510 8,716 2 13 20 147 8,510 8,716 2 2 216 11,805 12,021 11 97 14,735 14,847 2 13 ough 15 4,877 4,892 ay 9 4,877 4,892 ay 12 2,227 2,239 ay 1,204 2,244 4,353 oar 20 1,409 2,245 4,355 oar 1,381 14,519 15,365 <t< td=""><td>Urban Districts</td><td></td><td></td><td></td><td></td><td>1881</td><td></td><td></td></t<>	Urban Districts					1881		
5 37 1,038 1,080 2 2 M.B. 59 147 8,510 8,716 2 13 M.B. 216 11,805 12,021 1 ough 9 14,735 14,847 2 12 ay 9 4,344 4,8353 ay 9 4,344 4,853 ay 9 4,344 4,853 ay 9 4,344 4,353 ay 172 2,227 2,239 nuch 30 1,409 2,451 4,190 43 oar 30 1,381 14,519 15,930 4 <td>Ashby-de-la-Zouch</td> <td>33</td> <td>27</td> <td>1,909</td> <td>1,969</td> <td>61</td> <td>23</td> <td>1</td>	Ashby-de-la-Zouch	33	27	1,909	1,969	61	23	1
M.B. 59 147 8,510 8,716 2 13 M.B. - 216 11,805 12,021 - 13 ough 15 97 14,735 14,847 2 12 ay 9 4,344 4,853 - - - ay 9 4,344 4,353 - - - ay 9 4,344 4,353 - - - ay 9 4,344 4,353 - - - ay 2,227 2,227 2,248 6 43 nuch 330 1,449 2,451 4,190 - 43 oar 4 756 1,549 2,457 - 43 on 40 2,366 1,549 6,21 4,100 - 4 </td <td>Ashby Woulds</td> <td>2</td> <td>37</td> <td>1,038</td> <td>1,080</td> <td>61</td> <td>57</td> <td>2</td>	Ashby Woulds	2	37	1,038	1,080	61	57	2
M.B. — 216 11,805 12,021 — 1 ough 15 97 14,735 14,847 2 12 ay — 9 4,344 4,852 — — ay — 9 4,344 4,353 — — ay — 2 2,227 2,239 — — nch — 23 5,250 5,273 — 43 oar 3 1,409 2,457 — 43 oar 4 756 11,717 2,457 — 44 on 40 293 2,857 2,457 — 43 th 5 1,549 6,271 7,825 2 74 cough 163 2,891	Coalville	59	147	8,510	8,716	61	13	1
M.B. 15 97 14,735 14,847 2 12 ough - 15 4,877 4,892 - - - ay - 9 4,344 4,853 - - - ay - 9 4,344 4,353 - - - nuch 330 1,409 2,451 4,190 - 43 coar 3 1,381 14,519 15,930 2 64 . 4 756 1,1717 2,457 - 4 . 4 1,510 1,865 3,609 - 107 . 3 1,549 6,271 2,959	Hinckley	1	216	11,805	12,021	1	17	1
ay — 15 4,877 4,892 — — — — 9 4,344 4,353 — — — — 9 4,344 4,353 — — — — — 9 4,344 4,353 — — — — — — — — — — — — — — — — — —	Loughborough M.B	15	97	14,735	14,847	61	12	1
ay — 9 4,344 4,353 — — — 12 2,227 2,239 — — 30 1,72 2,046 2,248 6 43 23 5,250 5,273 — — 30 1,409 2,451 4,190 — 43 4 756 1,717 2,457 — 43 4 756 11,717 2,457 — 44 4 756 11,519 12,317 — 107 40 293 2,817 3,150 2 40	Market Harborough	1	15	4,877	4,892	1	1	1
<td>Melton Mowbray</td> <td>1</td> <td>6</td> <td>4,344</td> <td>4,353</td> <td>1</td> <td>1</td> <td>1</td>	Melton Mowbray	1	6	4,344	4,353	1	1	1
30 172 2,046 2,248 6 43 nuch - 23 5,250 5,250 5,273 - - oar 33 1,409 2,451 4,190 - 43 oar 4 756 1,717 2,457 - 43 2 1,381 14,519 15,930 2 64 4 756 1,717 2,457 - 4 4 40 293 2,817 3,150 2 40 34 1,710 1,865 3,609 - 14 th 5 1,549 6,271 7,825 2 74 tough 336 2,891 2,345 6,572 10 62 rough 1,086 12,038 102,523 115,647 30 497	Oadby	1	12	2,227	2,239	1	1	1
nuch — 23 5,250 5,273 — 43 oar 30 1,409 2,451 4,190 — 43 oar 4 756 1,717 2,457 — 43 2 1,256 11,059 15,337 — 44 on 40 293 2,817 3,150 2 40 34 1,710 1,865 3,609 — 40 th 34 1,710 1,865 3,609 — 14 cough 36 2,738 2,959 — 14 rough 36 2,345 6,572 10 62 rough 1,086 12,038 102,523 115,647 30 497	Shepshed	30	172	2,046	2,248	9	43	1
nuch 330 1,409 2,451 4,190 — 43 oar 30 1,381 14,519 15,930 2 64 . 4 756 1,717 2,457 — 4 . 2 1,256 11,059 12,317 — 40 on 40 293 2,817 3,150 2 40 . 34 1,710 1,865 3,609 — 14 th 5 1,549 6,271 7,825 2 74 voigh . 163 58 2,738 2,959 — 16 lvoir . 1,086 12,038 102,523 115,647 30 497	Wigston	1	23	5,250	5,273	1	1	1
-de-la-Zouch 330 1,409 2,451 4,190 — 43 v-upon-Soar 30 1,381 14,519 15,930 2 64 lon 2 1,256 11,059 12,317 — 107 Donington 34 1,710 1,865 3,609 — 140 rt Bosworth 34 1,710 1,865 2,959 — 146 rt Bosworth 336 2,891 2,345 6,572 10 62 Totals 1,086 12,038 102,523 115,647 30 497	Rural Districts	2						
v-upon-Soar 30 1,381 14,519 15,930 2 64 lon 4 756 1,717 2,457 — 4 2 1,256 11,059 12,317 — 40 40 293 2,817 3,150 2 40 worth 34 1,710 1,865 3,609 — 40 st Bosworth 5 1,549 6,271 7,825 2 74 tt Harborough 163 2,891 2,345 5,572 10 62 Totals 1,086 12,038 102,523 115,647 30 497	Ashby-de-la-Zouch	330	1,409	2,451	4,190	1	43	12
lon 4 756 1,717 2,457 — 4 2 1,256 11,059 12,317 — 40 Donington 40 293 2,817 3,150 2 40 worth 34 1,710 1,865 3,609 — 14 rt Bosworth 5 1,549 6,271 7,825 2 14 rt Harborough 336 2,891 2,345 5,572 10 62 Totals 1,086 12,038 102,523 115,647 30 497	Barrow-upon-Soar	30	1,381	14,519	15,930	63	64	1.
Donington	Billesdon	4	756	1,717	2,457	1	4	1
40 293 2,817 3,150 2 40 34 1,710 1,865 3,609 — 14 5 1,549 6,271 7,825 2 74 ir 336 2,891 2,345 5,572 10 62 1,086 12,038 102,523 115,647 30 497	Blaby	61	1,256	11,059	12,317	1	107	1
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Castle Donington	40	293	2,817	3,150	57	40	1
163 58 2,738 2,959 — 16 16 12,038 102,523 115,647 30 497	Lutterworth	34	1,710	1,865	3,609	1	14	1
163 58 2,738 2,959 — 16 15,512 10 62 1,086 12,038 102,523 115,647 30 497	Market Bosworth	2	1,549	6,271	7,825	63	7.4	67
336 2,891 2,345 5,572 10 62 1,086 12,038 102,523 115,647 30 497	Market Harborough	163	58	2,738	2,959	1	16	1
1,086 12,038 102,523 115,647 30 497	Melton and Belvoir	336	2,891	2,345	5,572	10	62	1
	Totals	1,086	12,038	102,523	115,647	30	497	18

COMPLAINTS

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

General sanitary	matters			41
Housing				82
Water supplies	4.11	1	1	10
				133

Public Cleansing

In all districts the refuse collection service is carried out by direct labour and the following table shows the frequency of refuse collection, vehicles used and methods of disposal of refuse.

			Met	hod of Disp	posal
District	No. of vehicles used	Frequency of Refuse Collection	No. of Con- trolled Tips	No. of Crude Tips	Incinera-
Urban Districts					
Ashby-de-la-Zouch	2	Weekly	2	- 2	-
Ashby Woulds	1	Weekly	1	1	-
Coalville	6	Weekly	3		-
Hinckley	6	Weekly	1	1+	
Loughborough M.B.	10	8-10 days	1*	-	-
Market Harborough	1	Weekly	-	-1	1
Melton Mowbray	2	Weekly	1	-	1
Oadby	1	Weekly	1	-1 9	-
Shepshed	1	Weekly	-	1	-
Wigston	4	Weekly	1	-1 5	-
Rural Districts			30.50		16211
Ashby-de-la-Zouch	4	12-14 days	1	3	
Barrow-upon-Soar	11	Weekly	2	-1 11	-
Billesdon	. 2	Weekly	1	-1 8	-
Blaby	9	Weekly	1	-1 16	-
Castle Donington	2	10 days	2	-	-
Lutterworth	5	Weekly	-	5	-
Market Bosworth	5	Weekly	-	4	- 1
Market Harborough	3	Fort-	-	4	-
32	3 6 4	nightly		8 400	
Melton and Belvoir	3	Weekly	5		
Totals	78		23	19	2

^{*}Consolidation of refuse by mechanical bulldozer and lifting of soil and resoiling by scraper and bulldozer.

[†]Partially controlled for trade refuse. Most of combustible material burnt.

Shops Act, 1950

The County Council delegated its functions under Section 38 of the above Act as from the 1st January, 1953, to those district councils who were previously only responsible for sanitary conveniences, ventilation and temperature. The new duties undertaken concern washing facilities, lighting and facilities for taking meals. A summary of the work carried out follows:

Defects	Outstanding from previous year	Defects found	Defects remedied	Outstanding 31st Decem- ber, 1953
Sanitary conveniences	6	28	29	5
Temperature	W 14 11 - 120	8	8	-
Ventilation	10 to 1 -7.	14	14	
Washing facilities	4	40	37	7
Lighting	-	7	7	-
Facilities for taking meals	-	1	1	-
Exhibition of Notices	1	6	3	4

Swimming Baths and Pools

In the Urban Districts there are eight public and five private swimming baths and pools, and these were inspected on 104 occasions. Samples are frequently taken and results proved that a good standard is maintained by chlorination of the water. The large baths also have filtration plants.

In the Rural Districts there are six privately-owned pools, some of which are available to the public. Five inspections were made of those used publicly.

Camping Sites

Of the 41 sites licensed in the county, 39 are in the Charnwood Forest area of the Barrow-upon-Soar Rural District.

Two hundred and fifty-eight licences for caravans, mostly used as permanent dwellings, were issued during the year under Section 269 of the Public Health Act, 1936. This figure is almost identical with that of the previous year and it will be interesting to see if the freedom to build a house without licence delays will reduce the number of caravans in use.

The Pet Animals Act, 1951

Twenty-one premises were registered under this Act, and 63 visits paid. Minor contraventions only were found and were remedied by informal action.

Prevention of Damage by Pests Act, 1949

Rodent operators, under the supervision of the sanitary inspectors, continued with the work of controlling rodents. In the large districts full-time operators are employed and in the others part-time labour is used. Two districts co-operate and employ one operator.

The block control system is used in most districts with regular attention to sewers in the built-up areas. Council refuse tips, sewage disposal works and other properties liable to infestations are regularly treated. There were no indications of major infestations in the county.

Rag Flock and Other Filling Materials Order, 1951

This has been the first complete year during which the above Act has been in operation. As was anticipated the Act has proved to have but limited application in this county.

There are now 18 premises registered for upholstery and five for the storage of rag flock. The two samples taken by Loughborough Municipal Borough were proved to be satisfactory.

HOUSING

The number of applicants for Council houses at the end of the year was 10,169, compared with 11,330 at the end of 1952. During the year 1,623 houses were completed by local authorities and 976 by private enterprise, or an increase of 634 over the previous year. There were also 2,351 houses under construction on December 31st, 1953. The total number of post-war houses now completed in the county is 14,345. The table below summarizes the position in the various districts:

Marional Coal Roles	Tot Numb Post- Hou Bui	er of war ses		es comp during rear 195			ses in co ection a of year	t end
District	Local Auth'y.	Private Enter- prise	Local Auth'y.	Local Auth'y.	Private Enter- prise	Local Auth'y.	Local Auth'y.	Private Enter- prise
Urban Districts			*P/P.	Perm.		*P/P.	Perm.	
Ashby-de-la-Zouch	226	43	10	2	13	_	32	12
Ashby Woulds	212	7	31	_	4	_	-	8
Coalville	678	258	_	130	49	_	54	40
Hinckley	1,197	409	_	183	113	_	127	169
Loughborough M.B.	1,214	222	-	150	43	_	128	51
Market Harborough	341	108	_	58	11	_	66	10
Melton Mowbray	455	123		135	28†	-	157	28
Oadby	164	127	_	12	50	_	34	60
Shepshed	290	58	_	30	17	_	8	22
Wigston	526	210	-	88	106	-	122	78
Rural Districts				1000				
Ashby-de-la-Zouch	376	86	72	_	17	-	8	15
Barrow-upon-Soar	1,313	624	-	142	137	78	132	183
Billesdon	212	194		42	68	-	24	67
Blaby	933	689	_	94	168	_	86	201
Castle Donington	336	86		30	10	_	28	9
Lutterworth	350	110	_	64	14	-	36	18
Market Bosworth	970	333	_	270	88	_	52	38
Market Harborough	304	43	-	32	11	46	18	12
Melton and Belvoir	389	129	-	48	29	_	42	22
Totals	10,486	3,859	113	1,510	976	144	1,164	1,043

^{*}Prefabricated Permanent

[†]Plus 2 conversions into 5 flats

The use of converted huts on ex-Service sites is being discontinued as the opportunity occurs and many of the least desirable huts went out of use. It is hoped that the process will be speeded-up by rehousing the occupants in more permanent accommodation.

The work of dealing with slum property is gaining momentum and will engage an increasing amount of the district officer's time. This must surely be regarded as work of the first importance and, together with reconditioning and improvement of sub-standard houses which still have a useful life, must be rewarding to all concerned.

One hundred and thirty-nine applications were received by district councils for improvement grants under the Housing Act, 1949, and of these, 94 were in the Market Bosworth Rural District, where the National Coal Board decided to improve miners' accommodation.

Summary of the Ordinary Housing Activities in the Various Districts in the County during 1953

	INSPEC	TION OF I	OWELLING YEAR	HOUSES	No. of defective		ACTION U	NDER STA	TUTORY P	OWERS DUI	RING YEAR	1	HO	DUSING AC	CT, 1936, PA	RT IV.—OV	ERCROWDI	NG
DISTRICT	Total No. of	No. of dwelling houses inspected and recorded		No. of dwelling houses found not to be in all	dwelling houses rendered fit in consequence	HOUSING SECTIONS	ACT, 1936, 9, 10 and 16	PUBLIC HE	ALTH ACTS	HOUSING SECTIONS	ACT, 1936, 11 and 13	HOUSING ACT, 1936, SEC. 12						
District	dwelling houses inspected for housing defects (under Public Health or Housing Acts)	under the Housing (Consolidated) Regulations, 1925 and 1932 (included in previous column)	bouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	respects reasonably fit for human habitation (exclusive of those in previous column)	of informal action by the local authority or their officers	No. of dwelling houses in respect of which notices were served requiring repairs	No. of dwelling houses rendered fit after service of formal notices	No. of dwelling houses in respect of which notices were served requiring defects to be remedied	remedied after	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	overcrowded	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 perso concerned in such cases
rban Districts																		
Ashby-de-la-Zouch	109	-	-	109	67			-	_	_	_		22			8	6	
Ashby Woulds	19			19	17	1	1	-	_									
Conville	192	49	28	21	64	20	16	34	45	4	8	_	2	2	16		19	173
Hinckley	389	99	99	292	288	3	3	4	5	16	15	-	12	23	116	11	10	90
Loughborough M.B.	658	8	8	650	479	8	8	7	7	1	1	1						
Market Harborough	192	17	17	44	44	-	_		_	6			14	22	99	7	10	78
Melton Mowbray	309	11	7	76	62	-	-	-	-	++	-	1						
Oudby	114	-		8	106		-	-	-	-		-	10	19	53	7	7	36
Shepshed	103	7	12	5	21	-	-	24	10	2	5	- 1						
Wigston	192	-	3	38	36	-	-	2	2	-	-	-						
Ashby-de-la-Zouch	190	29	6	98	118	10000		10	5	6	6						37	202
Barrow-upon-Soar	915	58	62	218	171		5	45	59	7	13	3	20	22	126		13	107 73
Marie 1	33	- 00	2	25	5			40	35		2	3		**	120		13	
Haby	290	54	54	71	43			9	7	7	5	_			27	1		34
Castle Donington	135	-	-	93	93			_	-			1000	12	15	62	4	5	29
Lutterworth	71	_	18	53	48		TEST TO	3	3	16	1	2						
Market Bosworth	178		14	147	109			5	6	15	i						23	106
Market Harborough	260		6	230	14		1150											
Melton and Belvoir	811	418	10	182	38	1	1	-	-	4	1	-	264	286	1,147	168	26	108
Totals	5,160	750	346	2,379	1,823	33	34	146	150	84	58	7	360	394	1,640	206	161	834

†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.

^{*}Existing Overcrowding Records not considered accurate or figures not available.

^{††}Seven undertakings not to relet for human habitation and one dwelling demolished in accordance with an undertaking given by owner.

INSPECTION AND SUPERVISION OF FOOD

BIOLOGICAL MILK SAMPLING

The co-ordinated programme for the regular sampling of milk from all producer/retailers and retailers of raw milk has again worked smoothly. Samples are taken at the point of production in order to obtain a representative sample and to avoid duplication. The number of samples taken was not restricted during the winter months as a constant supply of guinea pigs was available throughout the year. Copies of all biological examination reports are received by the County Medical Officer, and the County Sanitary Department acts as a clearing house to keep the various District Officers informed in cases where milk is retailed in districts in addition to the one where it is produced.

The result of systematic sampling for biological examination is noticeable in the reduction of samples found to show evidence of infection with myco. tuberculosis. Of 757 routine samples taken during the year only nine proved to be positive. These and 12 others reported by outside authorities (usually samples taken at large dairies where the milk is pasteurised) were dealt with by the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries. Twelve cows were slaughtered under the Tuberculosis Order, 1938; all were found to have tuberculosis of the udder on post-mortem examination. Where the infected cows were not discovered at the clinical inspection, notices requiring the milk to be pasteurised were served by the District Medical Officers of Health. This applied in five cases and the Notices were withdrawn when the herds were certified to be free from infection by the Divisional Veterinary Officer.

With the keen co-operation of Dr. N. S. Mair, the Director of the Public Health Laboratory, who willingly accepted the extra work involved, a great deal was done throughout the county in connection with milk showing infection with Brucella abortus. Fifty-seven routine samples were reported as positive and all concerned worked on similar lines to try and deal with the problem in a uniform manner. The difficulty in the first instance lies in the fact that the Public Health Laboratory reports, on routine bulk samples of milk showing evidence of infection with Brucella abortus, refer to samples taken seven weeks prior to the receipt of the report. This time lag is inevitable with the guinea pig method and, as the excretion of brucella in the milk is said to be intermittent, the query arises as to whether the milk supply is still infected at the time when the report is received. To overcome this difficulty a quick test is necessary and the following routine has been followed on receipt of a positive routine bulk sample:

The producer concerned is visited and the position explained. Where the producer is keen to co-operate, individual samples of milk are taken from all cows in milk. (During the year 1,200 individual samples of milk were taken.) A record of all cows is also kept, and a note made of any with a history of abortion or of inoculation with S.19. The Public Health Laboratory then carry out four routine tests, viz: A.B.R. (Ring Test), Slide Whey, Tube Whey Agglutination Tests and, fourthly, one to isolate the organism by direct culture, if possible. The latter test provides positive evidence that the milk from a particular cow is infected. The results of the first three tests are recorded and in the absence of a positive direct culture result, the following code is used as a guide for subsequent action:

A.B.R. (Ring Test)	Slide Whey	Tube Whey	Decision
+	+	+1/25	Suspicious
++	+	+1/50	More suspicious, 50 per cent chance of isolation in guinea pig
+++	+	+1/250	Very likely positive
++++	+	+1/500 and above	Almost certainly positive

The District Medical Officers decide on the results obtained whether to serve a notice under Regulation 20 of the Milk and Dairies Regulations, 1949; and the decision largely depends on the attitude and co-operation of the farmer. If the farmer decides to remove from his herd the cows which have been proved to be positive by direct culture and guinea pig inoculation and to isolate the suspicious ones, pending further investigation, a Notice is not normally served. Alternatively, if only part of the milk is retailed and the remainder is sold wholesale for pasteurisation, an arrangement is often made for the suspect cows to be kept apart from the remainder of the herd; to be milked last and their milk to be sent for pasteurisation. A check is kept on the milk which is retailed by repeat samples.

In most cases farmer producer/retailers are very anxious to co-operate and remove infected cows from their herds to prevent the spread of infection. There is, however, a loophole here, as the infected cows can be sold on the open market without declaration. The cows can thus go to new farms and possibly spread the infection into clean herds. It appears that legislation is desirable so that cows shown to be infected can be slaughtered, as they are under the Tuberculosis Order, 1938. In the case of Brucella melitensis, this is so, and one case was referred to the Divisional Veterinary Officer and the cow slaughtered.

Considering the question of Brucella abortus being an intermittent infection and one which is said to be present in the milk supply for only a limited period after calving, it has been found, from experience in this county, that the infection in the milk supply, in many cases, persists for long periods, even throughout the lactation.

Although the vaccination of cows, as opposed to calves, with Strain 19 vaccine is effective in preventing abortion and loss of the calf, it appears to have limited immediate public health value in that vaccinated cows, with no recent history of abortion, may continue to give milk infected with Brucella abortus. Calf vaccination, together with the elimination of infected animals, however, has been shown abroad to be very effective in reducing the number of cases of brucellosis in both animals and humans.

The real answer to the problem, from the public health viewpoint, is the pasteurisation of all milk, and, with the specification of more areas throughout the country, this is nearing the stage of becoming a practical proposition. The veterinary aspect of the problem is outside the province of this report, but the lack of guidance from the Ministry of Agriculture and Fisheries is difficult to appreciate. Whilst an effort is being made in this county to deal with the problem fairly and uniformly, it appears that practice throughout the country varies from county to county.

It is a pleasure to record the co-operation of the Director of the Public Health Laboratory and the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries in connection with this work.

Clinical Examinations and Tuberculin Testing of Cattle

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

(a) Clinical examination of dairy of	attle :		No. of herd inspections	No. of cattle examined
"Tuberculin Tested" and "C	Certified" l	nerds	843	43,446
"Accredited" or Standard h	erds		536	12,338
Non-designated herds			512	7,095
(b) Tuberculin testing of "Tuberculin testing of the testing of th	ılin Testeo	1"		
Number of cattle tested				48,414
Number of reactors found				327 (0.67%)

At the end of the year there were 702 Attested and 73 Supervised Herds in the County.

Milk and Dairies Regulations, 1949

The following table shows the distributors and dairies registered under the above regulations and the work carried out in connection therewith:

Milk and Dairies Regulations 1949

						a est	Contrav	Contraventions		1100
	No. on	No. on Register	Inspections	tions	255	Dairies		I	Distributors	dan
	Dairies	Distribu- tors	Dairies	Distribu- tors	Found	Remedied	Out- standing, 31.12.53	Found	Remedied	Out- standing, 31.12.53
Urban Districts						lum lum				
Ashby-de-la-Zouch	4	=	19	1	1	1	1	1	1	1
Ashby Woulds	1	7	1	1	1	1	1	1	1	1
Coalville	12	39	42	152	1	1	-	1	1	1
Hinckley	00	20	30	36	6	00	ũ	10	2	9
Loughborough M.B	18	00	97	00	1	-	1	1	1	1
Market Harborough	8	e	42	1	3	1	67	1	1	1
Melton Mowbray	2	67	17	4	3	00	1	1	1	1
Oadby	1	4	9	9	1	1	1	1.	1	1
Shepshed	4	1	90	11	1	1	1	1	1	1
Wigston	67	28	00	48	1	1	1	5	4	1
Rural Districts			-	1000		da da	100			
Ashby-de-la-Zouch	22	6	2	27	1	1	1	1	1	1
Barrow-upon-Soar	13	1	124	1	9	9	1	1	-	1
Billesdon	1	1	1	1	1	1	1	1	-	-
Blaby	10	38	98	73	1	1	1	1	-	1
Castle Donington	+	36	12	19	1	1	1	1	1	-
Lutterworth	80	00	99	00	1	1	1	1	1	-
Market Bosworth	20	119	21	09	4	+	1	6	80	1
Market Harborough	3	5	24	31	1	1	1	1	1	1
Melton and Belvoir	4	89	12	124	1	1	1	4	4	1
Totals	121	406	648	607	27	24	00	29	22	00
The second secon										

Milk Sampling by District Councils

The following is a summary of the milk samples taken by the districts for examination by the Public Health Laboratory. It will be noted that Undesignated milk provides the bulk of the unsatisfactory samples.

rollysimess 2	Class	Number of Samples	Satisfactory	Unsatis- factory
	"Tuberculin Tested"	136	119	17
District	"Accredited"	69	64	5
Designated	"Pasteurised"	226	221	5
general or side	"Sterilized"	29	29	
Undesignated	i	376	321	55

Pasteurised and Sterilized Milk Plants

Fifteen pasteurised and one sterilised milk plants were licensed and supervised by the County Council as the Food and Drugs Authority. A total of 796 inspections were carried out at the plants during the year and 1,043 samples of pasteurised and sterilised milk were taken at the dairies by the County Sanitary Department. A check is also kept regularly on the efficiency of bottle and churn washing facilities. It has been found that bottle-washing machines require careful cleansing and regular attention to assure near sterile bottles being filled with safe milk.

The following table gives particulars of the plants in the county and it is noted that the plants are dealing with more milk each year. A number of the larger plants are pasteurising and bottling milk for the smaller dairymen, who thus become independent roundsmen in effect.

Type of Pla	int	Capacity in gallons per hour	Approximate daily output in gallons	Efficiency
H.T.S.T.		500—1,000	6,000	Excellent
H.T.S.T.		350	2,000	Excellent
H.T.S.T.		400	850	Excellent
H.T.S.T.		300	300	Excellent
H.T.S.T.		150	480	Excellent
H.T.S.T.	0.7	350	1,000	Excellent
H.T.S.T.		350	630	Excellent
Holder		400	2,000	Excellent
(continuo	us)	THE RESIDENCE OF THE PERSON OF	Harris and and	II THE THE COLUMN SE
Holder		250	900	Excellent
Holder		200	350	Excellent
Holder		100	290	Good
Holder		100	240	Excellent
Holder		100	100	Excellent
Holder		75	280	Good
Holder		75	120	Good
Sterilized		150	350	Good

Milk Supplies to Schools, etc.

The County Sanitary Department supervises the milk supplies to 316 establishments throughout the county, namely 297 schools and 19 county homes, children's homes and day nurseries.

One thousand and thirteen samples of milk were taken for examination by the Public Health Laboratory during the year.

The following table shows the various types of milk supplied to the schools at the end of the year. The four schools still receiving Accredited and Undesignated milk are isolated rural schools where it was impossible to arrange a supply of pasteurised milk. All raw milk supplies to schools are frequently submitted for biological examination and are kept under review to effect a change when the opportunity arises.

Schools Supplies at 31st December, 1953

Schools	"Tuberculin Tested"	"Pas- teurised"	"Accred- ited"	Undesig- nated	Totals
Secondary Grammar	1	11		1-112-min	12
Secondary Technical	-	3	-	-	3
Secondary Modern	_	23	_	_	23
Primary	38	216	2	2	258
Nursery	-	1	-	-	1
Totals	39	254	2	2	297
Comparable figures at 31st December, 1952	29	255	3	11	298

ICE CREAM

Details are given of the premises registered under the Food and Drugs Act, 1938, for the manufacture and sale of ice cream. In proportion to the total quantity sold, very little ice cream is manufactured locally and the majority is of the well-known makes. The percentage of samples classified as Grades 1 and 2 at 98.1 per cent is excellent and on the whole the manufacture and sale of ice cream is now carried out with a high standard of hygiene.

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		ICE	Cherin		0 0 0			
	Number	Number of premises registered	gistered		Number	Number of samples collected	collected	onty.
District	Manufacture and Retail	Manufacture only	Retail only	Grade 1	Grade 2	Grade 3	Grade 4	Total
Urban Districts								
Ashby-de-la-Zouch	1	1	15	00	1	1	1	00
Ashby Woulds	1	1	3	1	1	1	1	1
Coalville	1	1	69	17	67	1	1	19
Hinckley	2	1	94	9	7	-	-	13
Loughborough M.B	es	1	128	13	+	1	1	18
Market Harborough	1	1	31	1	67	1	1	6
Melton Mowbray	-	1	41	9	1	1	1	9
Oadby	63	1	00	1	1	1	1	1
Shepshed	1	1	15	27	9	1	1	33
Wigston	1	1	47	37	61	1	1	40
Rural Districts				,				
Ashby-de-la-Zouch	67	1	35	13	1	1	1	14
Barrow-upon-Soar	69	1	93	32	11	00	1,	47
Billesdon	1	1	10	1	1	1	1	1
Blaby	6	1	64	83	10	1	1	93
Castle Donington	1	1	22	1	1	1	1	1
Lutterworth	63	1	26	00	1	1	1	00
Market Bosworth	67	1	44	1	1	1	1	1
Market Harborough	1	1	20	1	1	1	1	1
Melton and Belvoir	1	1	45	=	1	1	1	12
Totals	32	67	810	268	46	5	1	320

Per cent of samples within Grade I ... 83.7 per cent Per cent of samples within Grades I and II ... 98.1 per cent

MEAT INSPECTION

The tables below give the details of the slaughtering carried out at the four Regional Slaughterhouses and at other places throughout the county. The details of the inspections also include those made at the Knackers' Yards. The second table gives the details of the number of carcases inspected and condemned, together with the weights of meat involved, and dealt with at the different Slaughterhouses.

District	No. of regional slaughter houses	No. of in- spections at time of slaughter	Total No. of animals slaughtered	Total No. of animals examined	No. of knackers' yards	No. of inspections
Urban Districts					19.1	
Ashby-de-la-Zouch	_	_	_	_	1	3
Ashby Woulds	-	_	_	_	2 4	_
Coalville	1	594	17,818	17,818	1	-
Hinckley	1	505	10,425	10,435	1	7
Loughborough M.B.		73	73	73	1	14
Market Harborough	1	383	9,003	9,003	- 11	-
Melton Mowbray	1	522	11,292	11,292	1	4
Oadby	-	36	36	36	- 12	-
Shepshed	_	20	24	20	_	-
Wigston	_	_	72	72	1	14
Rural Districts						3 11 10
Ashby-de-la-Zouch		-		-	2	6
Barrow-upon-Soar	1 1	1 -	1 1 -5- 11	10	2	44
Billesdon	-	- 1		1	-	-
Blaby	-	29		41	-	-
Castle Donington	-	-	-	-	1	21
Lutterworth		-	2	2	1	2
Market Bosworth	-	43	936	57		-
Market Harborough	-	_	-	-	THE REAL PROPERTY.	-
Melton and Belvoir	-	-	-	-	1	4
Totals	4	2,206	49,681	48,860	12	119

Production of the Production o	Cattle exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs	Total weight in lbs.
Number killed (if known)	6,691	2,145	2,254	27,630	9,848	-
Number inspected	6,691	2,145	2,254	27,630	9,848	_
All Diseases except Tuberculosis: Whole carcases condemned	25	33	82	237	76	57,708
Carcases of which some part or organ was condemned	2,465	1,085	24	3,852	1,120	85,741
Percentage of number in- spected affected with disease other than tuber- culosis	36.3%	52.2%	4.2%	10.8%	12.1%	Jesty Cr Months Minorco
Tuberculosis only: Whole carcases condemned	35	59		-	12	62,895
Carcases of which some part or organ was condemned	930	606		-	415	64,295
Percentage of number in- spected affected with tuberculosis	14.4%	31.0%		_	4.3%	500000 50000 50000 50000

FOOD AND DRUGS

Food and Drugs Act, 1938

The provisions of the Food and Drugs Act, 1938, relating to the composition and adulteration of food and drugs, were administered by the Weights and Measures Inspectors of the County Council. The following is a summary of the samples taken during 1953 and the County Analyst's reports:

	Number nalysed	Number Unsatisfactor	ry Remarks
Milk	 192		Added water—10 Deficient in milk fat—13 Deficient in milk fat and contained added water —1
Milk, Channel Island	 2	1	Deficient in milk fat

97

G

		Nu	mber	Number	
			alysed	Unsatisfacto	
Arrowroot			1	-	
Baking Powder			2		
Butter			4		
Cocoa		J.:	2		
Coffee			4	de la	
Coffee and Chicon			2	determine and	
Cooking Fat			2	_	
Cream			6	1	Deficient in milk fat
Curry Powder			4	2	Denote in init iat
Fish Cakes			4	_	
Fish Paste			2		
Gelatine			2	has of Land	
Glucose Spread			1		
Gravy Powder			1	_	
Ice Cream			49	_	
Jam			4		
T 11			2	_	
Jelly Crystals			2		
Meat Paste			2	1	Contained preservative
Mincemeat			1		Contained preservative
Mustard			2		
Oatmeal, Malted			1		
The state of the s			1	-	
Pepper Pineapple Slices			1		
	Carree a		2		
Sage and Onion Salad Cream			6	7.54	
			16	2	Deficient in meat content
Sausages, Pork Self-raising Flour			2	1 10 2	Dencient in meat content
Soup, Tomato F			1		
			1		
Sponge Mixture Suet, Shredded			4		
Suet, Shredded I	Page		1		
			2		
Sugar Tea			5		
Tomato Ketchup			2		
Thyme, Dried		2000	1	N. HINGS	
	dible.		1	200	
Vegetable Oil, Ed			3		
Vinegar, Malt	nbeles di		•	G DEN DEO	
			343	29	
Wines, Spirits, e	te				
The state of the s					
Brandy Beer			4	-	
Cin			10	House State	
D 1971			1		
D	La it		3	101	
Wine Cocktail			2	-	
1971 1 1			13	1	Deficient in proof enisit
Whisky			10		Deficient in proof spirit
			37	1	
			31		

	Number	Number
	Analysed	Unsatisfactory Remarks
Medicines, Tonics, etc.		- HAR CONTROL OF THE PARTY OF T
Bronchial Mixture		The unumidence courts of me
Bronchial Cough Mixture .	. 3	oluria - Illia va atra e i la testa
Bronchial Linctus	. 1	draw to residue tod cutted out to thousand
Chemical Food	. 2	in the busine steam (treserverses
Children's Tonis Food	. 1	for the preservation of pourigi mest, i
Chlorodyne	. 1	factorers of the meet paste, _
Cod Liver Oil Emulsion .	. 1	_
Cold and Influenza Mixture .	. 1	The two unsatisfactory samples of
Cough Elixir	. 1	content to the extent of 22 per ce
0 1 11	. 1	invitated with regard to the 27 per
0.10	. 1	to the second free and the second second
TT UL . T ! OU O !	. 1	- The Park CT norm fractions
T 11	. 1	dw to a local veine bissens out to
Influenza Mixture	. 4	term to - on bolledel demodels rates
Influenza and Fever Mixture .	. 1	the same and of popular plants of the same straight
Lemon, Glycerine and Hone	y	and man and so to prepare the management
111	. 1	the disease when their red was a selection
Mentholated Balsam	. 1	- Committee of the control of the co
Pectoral Balsam, Honey Hore	-	now meeting sur-former portrain tod.
hand and Tabella	. 1	who have taken steps to property or
Saccharin Tablets	. 6	_
Slippery Elm Food	. 1	_
Wissenia Commission	. 2	_
Vitamin Tablets	. 1	-
Vitamin Tonic	. 1	1 Not labelled satisfactorily
	_	_
	35	1
	_	_
"Appeal to cow" milk samples.	. 29	
Grand Totals .	. 444	31
		_
1952	. 454	11
	_	_
1951	. 473	37
		_
1950	. 417	35
	_	_

In connection with the milk samples containing added water, an official caution was given to one producer and further samples taken, and a producer/wholesaler was convicted and ordered to pay £16 4s. fines and costs.

In connection with the milk samples deficient in milk fat, proceedings were instituted in one case and the offender fined £1 and ordered to pay costs. In some cases the deficiencies were brought to the notice of the producers concerned and repeat samples taken. Other cases were referred to the Ministry of Agriculture and Fisheries Inspector for a veterinary examination of the herds concerned.

In respect of the sample of Double Cream found to be deficient in milk fat the offender was cautioned and a further sample taken.

The unsatisfactory sample of meat paste contained preservative to an extent of 110 parts per million of sulphur dioxide, and as no provision is made in the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1940, for the preservation of potted meat, the matter was taken up with the manufacturers of the meat paste.

The two unsatisfactory samples of pork sausages were deficient in meat content to the extent of 27 per cent and 18 per cent. Proceedings were instituted with regard to the 27 per cent deficiency, the manufacturer was convicted, fined £5 5s., and ordered to pay the Analyst's fee.

The unsatisfactory sample of whisky contained only 65.2 per cent proof spirit, although labelled 70 per cent. It did, however, comply with the legal minimum standard of 65 per cent proof spirit.

In connection with the unsatisfactory sample of vitamin tonic which was not labelled satisfactorily, the matter was taken up with the manufacturers, who have taken steps to properly relabel existing and future stocks.

Statistical Tables

T.B.1.-Return showing the work of the Chest Clinics during the year 1953

	Res	Respiratory	P (Non	Non-Respiratory	atory	1	Total	t	Grand
	W.		Cb.	W.	F.	ë.	W.	-:	G.	Lotals
(1) Number of notified cases of T.B. on clinic registers on 1st JANUARY, 1953	722	595	62	115	121	142	837	716	204	1,757
the year	‡	31	10	41	4	-1	84	35	9	89
Number of NEW CASES diagnosed as tuberculous during the year: T.B. MINUS	40	46 34	3.6	12	981	34	54 66	52	60	166
Bied (all causes)	32 22	335	20-1	24	120	20	98	49	25 22	140
(4) Other reasons	52	36	61		40		59	10	1	104
D. (1) Number of notified cases of T.B. on clinic registers on 31st DECEMBER, 1953	742	617	78	101	110	149	843	727	227	1,797
preceding six months	108	22	-	1	1	1	108	55	1	164
Diagnosed as Tuberculous Not Tuberculous Not determined (as at 31st December.	11	11	11	11	11	11	228	112	13	30
1953)	1	1	1	1	1	1	1	1-	1	1
Number of patients on clinic register awaiting admission to T.B. Institution	4	10	-	1	1	1	4	5	1	10
	1	1								

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.2-Sanatoria, Hospitals, and other Residential Institutions for the Treatment of Tuberculosis for the year 1953

Name and situation of Institution	Class of Case	Number of Leicestershire patients who were under treatment on 31st December, 1952	Stat December, 1755	Number of Leicestershire patients who were discharged or died in the Institution during the year ended 31st December, 1953	Total number of days during which patients referred to in Col. 5 were resident in the Institution	Average number of days which patients referred to in Col. 5 were resident in the Institution	Number of Leicestershire patients who were under treatment on 31st December, 1953
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
The Sanatorium, Markfield	Male adults Female adults Children Male adults Female adults NF Children NF	52 5 —	142 138 15 1 2	148 144 12 — 1	23,088 18,296 1,779 — 79	156 127 148 — 79	63 46 8 1 1
Isolation Hospital and Chest Unit, Leicester	Male adults Female adults Female adults Female adults Female Fema	. 1	12 15 1	13 13 1	862 604 151	66 46 151	3 3 —
General Hospital, Leicester	Male adults NF Female adults NF Children NF	_	3 1 5	5 1 5	2,929 15 813	586 15 163	$\frac{1}{4}$
Holy Cross Sanatorium, Haslemere	Female adults F	. 1	2	2	731	366	1
	TOTALS	139	337	345	49,347	143	131

R—Respiratory Tuberculosis. NR—Non-respiratory Tuberculosis

						URB	AN DI	STRIC	TS									RI	TRAL	DISTRI	CTS										WHOL	E COU	STY							A	GGREG	ATES		
CAUSES OF DEATH	0-	-	1		5	15		25-		45	65-		75	0-	- 1	los	3-	-	11-	25-	- 1	45-	65-	- [T5	-	-	1-	-	-	15	21	-	65	65	-	15—	Lyne	n Diviri	icts R	urat Die	stricts	Whol	le County
	м.	F.	м.	P. N	. F.	М.	F.	M.	F. M	1.	M.	F. A	L F.	M.	F	4. F.	54.	F. 3	L F	M	F	M. F.	ML	F. 7	L F.	M.	F.	M. F.	M	F.	M. F	. M.	F.	M. P	ML	р.	M. F	. 11.	F. T	oral M	L E	Total	M.	F. To
L Tuberculosis, respiratory	-	-	-			1	-	2	1	9 -	3	2	1 1	-	-		-	-	. 3	7		5 4	1	2	- 1	-	-		-		1 1	14	0	14	4 4	4	1	3 21	4	25 1	3 19	32	24	23
Tuberculosis, other	-	-				-	-	- 1	-		1 6		8 3	-	-		-		1	-	2	1 1	1	-	5 '	-	-		-	-	1 1	-	3	1	1 1	-	-		-	- 2	3 5	8	3	- 5
Syphilitic disease	-	-	-		-	-	-	-	-	3 -	1	-	1 -	-	-		-	- 1	-	-	-	-	-	-	1 1	-	-		-	*				3	- 4	- 8	2	- 1	-	5	1 -	1	- 6	3
Diphtheria		-	-		-	-	-	-	-		-	-		-	-		-	- 1		-	-		-	-		1 -			-	*		9 3				-	-			-		-	+	3
Whooping cough	-	-	-		-	-	-	-	-		-	-		-	-		-	- 1		-	-		-	-		-	-		-	*	+ 3	1.5				-				-		-		-
Meningeococal infections	-	-	-		-	-	5	-	-		-	-		1	-		-	- 3		-	-		-	-	5 3	11		5 5	-	-			-				-	3 -		6	1 -	1	1	-
Agune poliomyelicia	-	-			-	-	2	-	1		-	-		-	-		-	-		-	-		-	-	-1 -	1 -	-			-	- 3	-	1	-	-		3	-	3	3		-		3
Messles	-	-	-		-	-	-	-	-		-	-		-	-		-	- 3	- -	-	-		-	7	-1 -	1	-			33	. 3					-	3	-		-		-		-
Other infective and parasitic documen	-	-	-		-	-	-	-		- 1			-	-	-	1 -	-	- 1		-	1	5 -		-	7	-	-	-	-			1 -	1		1 3			1	1	1	1 2	3	1	3
Malignant neoplasm, stomath	-	-	-		-	-	-	1		7 6	7	0 1	11 6	-	-		-	- 1		2	-	9 8	10		6 1	-			-					16 1	4 22	10	12 1	21	11	43 2	2 22	49	53	39
Malignant neoplasm, lung, bronchus		-	-		-	1	-	2	1 1	0 6	12	2	3 -	-	-		-	- 1		-	1	26 6	100	2	1	-	-		-	-	1 -	1.5	2	14 1	0 22		4	- 41		67 3	0 7	42	83	16
Malignant neoplasm, breast	-					-	-	-		1 14	-	6	- 7	-	-		-	- 1		-	3	- 20	-	3	- 1	-	3	- -	-	-			3	1 2	4	9	- 1	5 1	21	29	- 36	34		61
Malignant neoplasm, uterus	-	-	-		-	-	-	-	100	- 4	-	4		-	-		-	- 1		-	2	- 1			3 3	-	-		-	-			3		1 -		5	3 -	3	9	- 12	12	-	21
Other malignant & lymphatic neoplasma.	-	-	-			-	1	2	6: 1	6 23	24	24 3	16 21	-	-		-	-	1 -	6	4	22 20	39	25	25 21	-			-	-	1 1	8	8	45 4	3 54	50	40 4	80	73	161	1 76	118	172	147 3
Leukemia, sleukemia	-		-			-	-	1	-	1 2	- 3	3	1 1	-	1	1 -	-	-		-	2		1 5	3	1 1	-	2.	1 -	-	-		1	2	1	1 1		3	2 3	4		2 4	3	6	11
Diabetes	-	-	- 1			-	-	*	-	2 1	1	2	- 2	-	=		-	- 1	- 1	-	-	- 2	2	2	3 3	-		5 5	-	-	- 1			3	3 3	1.5	1	3 3		8	3 6		6	11 1
Vascular lesions of nerveus system	-	2	-	- 3		-	-	1	1 1	5 30	20	65 1	51 22	-	-		-	- 1			1	29 53	45	41	60 74	-	-		1.5	-	- 1	1.5	3	41 6	6 87	87 1	111 10	100	557 2	10 13	9 108	299		316 55
L Coronary disease, angina	12		- 1	- 8		-	-	3	1 4	2 20	35	24 3	19 33	-	-		-	- 1		3	3	32 14	50	22	43 3	-	-	- -	-	-	- 1		*	74 3	1 50	10	72 7	0 110	75	197 12	8 76	264		10 10
Hypertension with heart discuss	-	-	-	- 0		-	-	1	-3	6 3	15.	9	7 13	1 -	-		-	- 1		-	1	7 3	11	9	8 11	-	-			-			1	13	. Do	18	15 2	200	23	10 1	9 22		66	
Other heart disease			-	- 1		-	-	5	2 1	8 19	34	31 1	61 23	-	-		-	- 1	- 1	6	8	16 24	60	36 1	09 130	-	-	- 8	1.		- 1	11	10	36 4	3 24	67 1	170 20	G 110	123 2	144 17	3 199	372		324 6
Other circulatory disease	-		-			-	-	-	- 1	1 4	18	11 3	25 50	-	-		-	- 1		1	-	10 4		5	21 11	-			-	*		1	-	21	8 21	16	02 0	1 10	17	20 1	26	12	0.5	
Influenza	1			- 1			-	1	-	1 -	1	1	2 2	-	2		-	- 3		2	-	- 1	4	3	2 11	1	2	- 5	-	*		- 3	-	1 3	2 0	4	4 1	7 6	3		27		14	25 1 49 M
Pneumonia		3		- 6				1	- 1	1 2	4	11	12 12	1 4	2	1 1	-	2		-	1	9 3	5	2	6 1	10	2	1 1	-	2		1	1	50	9	13	18 2	2 24	28	63 2	3 29	46		
Beonchitia	1	80		_			- 1	-	- 1	1 1	26	1	20 12	2	0	2 1	152	-		1	-	17 -	15	5	26 11	3	-	2 1	-	-				27	1 28	12	45 2	B 11	23	N2 N	15	73	116	
Other diseases of respiratory system.								-	- 1	4 1	1 2	1	1 5	-	-	1 -	-	-	1 -	3	-	7 1	2	1	- 1	-	8	1 -	-	-	3 -	1	-	6	1 2	2	1			12	1 3	14	14	12 1
Ulcer of stomach and duodenum	100	13						1	19 8	4 2	3	-	3 -	-	-		-	-		-	-	1 -	0	4	6 1	-	-	- 3	-	-		1	3	6	2 0	4	2	3 11	3	13 1	5 3	21	25	6 1
Gastricis, enteritis and discribes				8			2	-		2 1	1	1	4 -	-	-	1 1	100	-	- 1		-	1 -	-	1	- 1	1	-	1 1		-	- 3	1		3	1	3	5	1 1	3		5 6	17	6	
Nephritis and prohessis	18			-				5	- 1	2 2	3	4	3 6	-	-		1	-		1	4	1 -	1	2	3 1	-	-			-		4	- 9	4	4			1 3	62	-	10	12	20 26	
k Hyperplasis of prostate		100	4					4			3	-	11 -	-	-		-	3		-	-		1	-	11	1 -	-			-	-						22	1 16	5	11 "		12	26	- 3
E. Pregnancy, childbirth, sbortion	13			-			-		1		-	-		-	-		-	-	- 1	-	2		-	-		1 :	-				-	-	3					1 .	14	* 1	1 10	55	21	21 0
I. Congraital melformations		12		-	1 2	1	1	1	-	1 1	1	-		10	11.	- 3		-		-	10		-	-		14	23	2 3	1	2	1						3 3	3 "		90 79		175		196 36
Other defined and ill-defined discuses	29	37	1	3		1	1	3	6	15 20	16	11	17 41	24	16	3 -	2	1	1 1	6	3	13 10	8	23	21 31	53	35	4 3	1.5	3	3 2		7	25 3	24	20	7	5 5		15 16		22	27	10 3
Motor vehicle accidents	1.0	1	6		1 1	3		1	1	5 1	-	-	- 1	1 -	-	1 1	3	-	1 1		-	4 1	1	2	1 1	-	-	2 1	1 4	1		4	100	1		3	1	1 "		35 20		36		24 7
4. All other accidents	2	1			1	2	-	4	3	9 2	2	4	2 8	1	1	1 -		-	2 -	4	1	4 1	2	3	1 1	1	2	1 -	1	-	4 -		18	10			1	1 2				1	29	3 2
8. Suicide	12		-				-	2	-	4 2	4	-	2 1	-	-		-	-		2	-	3 -	-	-	1 .	1 -	-		-	13				1		6	8			1 1	1	3	3	1
M. Homicide and operations of war	-	-	-	-		-	-		-		1	-		-	-			1		1	-	1 -	-	-	-	1-	-		-	1				1	100	4							-	_
	-			-		-	1				100	-10		1.0	22				7 16	10	53 3	214 174	254	201 2	62 404	85	66	6 10	12	0 1	12 18	103	70 4	18 24	509	412 6	107 130	E 300	802 1,7	03 941	884	1,831 1	,848 I,	,686 3,53

Whole 0.49 0.36 0.36 0.31 0.38 0.35 0.35 0.25 0.16 0.25 0.20 0.33 Death Rates Rural 0.48 0.37 $0.32 \\ 0.10$ 0.31 0.30 0.28 0.34 0.25 T.B.4-Tuberculosis (Respiratory and Other). Notifications, Deaths and Death Rates 0.20 0.18 0.30 0.17 Urban 0.36 0.01 0.32 0.47 0.41 0.43 0.36 0.15 0.25 0.30 0.23 0.36 Whole 111 200 154 37 23 119 310 124 98 23 11 14 Number of Deaths Rural 37 18 52 61 61 52 10 14 50 9 250 333 52 Urban 41 37 75 52 59 18 125 69 28 3 3 12 22 Whole 239 210 182 216 245 230 201 217 230 186 Number of Notifications 173 86 Rural 110 121 39 92 39 35 34 103 91 33 99 91 Urban 33 109 113 135 109 130 131 109 91 99 35 34 Respiratory Other ... Respiratory Other Respiratory Other Respiratory Other ... Localisation Average for above ten : Year years 1953 1952 1948 1949 1950 1943 1945 1946 1947 1951 1944

T.B.5-Tuberculosis, Notifications and Deaths. Showing Age Periods, year 1953

AGE PERIODS Respiratory Non-Respiratory Respiratory 0- 1 1 — — 1- 4 — 9 5 — 5- 9 12 9 20 — 15- 9 12 9 12 — 45- 34* 15* 1 1 1 65- 21 34* 15* 1 1 65- 21 1 1 1 4 4 65- 9 15* 1 1 4 4 65- 15* 1 1 4 4 4 65- <th>2000</th> <th>THE PARTY OF</th> <th>100</th> <th>NEW CASES</th> <th>ASES</th> <th>-12</th> <th>-12</th> <th>DEATHS</th> <th>THS</th> <th>2.5</th>	2000	THE PARTY OF	100	NEW CASES	ASES	-12	-12	DEATHS	THS	2.5
Males Females Males Females Males 1 1 — — 9 12 9 50 — 9 12 9 20 — 94 12 9 15 — 34* 15* 1 1 14 2* 3* 1 1 5 Total 111* 90* 32 36 34	AGE PI	ERIODS	Respi	iratory	Non-Res	piratory	Respi	ratory	Non-Respiratory	piratory
4 — — — — — — — — — — — — — — —	1000		Males	Females	Males	Females	Males	Females	Males	Females
	9	Divide L		1	281	1				201
613 594 12 9 20 — 343 151 1 1 1 5 21 33 1 1 5 21 33 34	7		4		6	10	1	1	1	1
613 594 12 9 15 343 15 ¹ 1 1 1 1 2 ¹ 3 ² 1 1 5 90 ⁷ 32 36 34	-5-	1 100 PM	6	12	6	20	1	1	88	31
34 ³ 15 ¹ 1 1 1 14 2 ¹ 3 ² 1 1 5 32 36 34	15-	1000	613	594	12	6	15	12	16 80	4
Total 1117 907 32 36 34	45-	11000	343	151	1	101	14	4	1,000	1.0
1117 907 32 36 34	65-		21	38	-1	1	9	7	1	-
The second secon	Tot	al	11117	206	32	36	34	23	3	20

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

Urban and Rural Districts, year 1953 T.B.6-Tuberculosis Notifications and Deaths.

	Dorimon	NOTIFIC	ATIONS (NOTIFICATIONS OF TUBERCULOSIS	JLOSIS	DEATE	IS FROM	DEATHS FROM TUBERCULOSIS	OSIS
District	population mid-year	Respiratory	Artack Rate	Non- Respiratory	Attack Rate	Respiratory	Death Rate	Non- Respiratory	Death Rate
Urban			9111	2.0			1		
Ashby-de-la-Zouch	6,515	1	0.15	1	0.15	9	0.46	1	1
Ashby Woulds	3,368	1	1	1	1	1	I	1	1
Coalville	25,630	14	0.55	00	0.12	9	0.23	1	1
Hinckley	39,310	32	0.81	5	0.13	00	0.20	1	-
Loughborough M.B.	35,740	24	0.67	11	0.31	50	0.14	T T	1
Market Harborough	10,340	9	0.58	1	0.10	63	0.19	1	1
Melton Mowbray	14,260	5	0.35	4	0.28	1	0.07	1	1
Oadby	6,253	11	1.76	1	1	1	I	1	1
Shepshed	6,364	1	0.16	-	1	-	1	1	1
Wigston	15,720	15	0.95	61	0.13	1	1	-	1
Totals	163,500	109	0.67	27	0.17	25	0.15	,	1
Rural									
Ashby-de-la-Zouch	13,820	9	0.43	4	0.29	1	0.07	2	0.14
Barrow-upon-Soar	49,160	29	0.59	13	0.26	6	0.18	1	1
Billesdon	7,862	4	0.51	60	0.38	1	1	60	0.38
Blaby	39,810	22	0.55	1	0.03	9	0.15	67	0.02
Castle Donington	9,958	4	0.40	1	0.10	1	1	1	1
Lutterworth	11,940	9	0.50	60	0.25	4	0.34	1	1
Market Bosworth	26,790	12	0.45	00	0.30	7	0.26	1	0.04
Market Harborough	10,010	4	0.40	1	1	es	0.30	1	1
Melton and Belvoir	18,650	10	0.27	00	0.43	61	0.11	1	1
Totals	188,000	92	0.49	41	0.22	32	0.17	œ	0.04
	-								

TABLE 1.—Vital Statistics

	C	OUNTY	OF I	LEICES	TER 1	953
	Ur	ban	Ru	ıral	Whole	County
Area, in acres	161	3,860 1,728 3,500	184	,548 ,104 ,000	345	5,408 5,832 ,500
a Banalata- I ad	No.	Rates	No.	Rates	No.	Rates
Live births Stillbirths	2,602 62	15.91 0.38	2,820 61	14.99 0.32	5,422 123	15.43 0.35
Deaths (all causes and all ages)	1,703	10.42	1,831	9.74	3,534	10.05
Deaths (under one year)	77 53	*29.6 *20.4	75 48	*26.6 *17.0	152 101	*28.0 *18.6
Causes of death grouped by inter- national classifications :		333				
Infective and parasitic diseases	34	0.21	43	0.23	77	0.22
Neoplasms	308	1.88	302	1.60	610	1.74
Allergic, endocrine system, metabolic,						-
and nutritional diseases	8	0.05	9	0.05	17	0.05
Diseases of the nervous system and	855					5.19
sense organs	263	1.61	289	1.54	552	1.57
Diseases of the circulatory system	584	3.56	709	3.77	1,293	3.67
Diseases of the respiratory system	165	1.01	163	0.87	328	0.93
Diseases of the digestive system	19	0.12	27	0.14	46	0.13
Diseases of the genito-urinary system	39	0.24	29	0.15	68	0.19
Deliveries and complication of preg-				The same of		
nancy, childbirth, and puerperium.	1	0.006	3	0.02	4	0.01
Congenital malformations	27	0.16	23	0.12	52	0.14
Symptoms, senility, and ill-defined	2000	14.00	-		E E E	1
diseases	190	1.16	171	0.91	361	1.03
Accidents, poisonings and violence	66	0.40	69	0.37	135	0.38

Note.—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 1953

Provisional figures based on Quarterly Returns

11011310114	B.	ires baseu o	ii Quarterly	recturing	
		England and Wales	160 County Boroughs and Great Towns (including London)	Towns (resident population 25,000-50,000 at 1951 Census)	London Administrative County
Births:		Rates	per thousand	Home Popula	tion
Live births		15.5	17.0	15.7	17.5
		0.35	0.43	0.34	0.38
Still births	{	22.4 (a)	24.8 (a)	21.4 (a)	21.0 (a)
Deaths:		100.00			
All causes		11.4	12.2	11.3	12.5
Typhoid and paratyphoid	100				
fevers		0.00	0.00	_	_
Whooping cough		0.01	0.01	0.00	0.00
Diphtheria		0.00	0.00	0.00	
Tuberculosis		0.20	0.24	0.19	0.24
Influenza		0.16	0.15	0.17	0.15
Smallpox		0.00	0.00	0.00	_
Acute poliomyelitis (include	ding	0.00	0.00	0.00	
polioencephalitis)		0.01	0.01	0.01	0.01
Pneumonia		0.55	0.59	0.52	0.64
rneumonia		0.00	0.00	0.02	0.01
Notifications (corrected):					100100
Typhoid fever		0.00	0.00	0.00	0.01
Paratyphoid fever		0.01	0.01	0.01	0.01
Meningococcal infection		0.03	0.04	0.03	0.03
Scarlet fever		1.39	1.50	1.44	1.02
Whooping cough		3.58	3.72	3.38	3.30
Diphtheria		0.01	0.01	0.01	0.00
Erysipelas		0.14	0.14	0.13	0.12
Smallpox		0.00	0.00	0.00	_
Measles	::	12.36	11.27	12.32	8.09
Pneumonia	1000	0.84	0.92	0.76	0.73
Acute poliomyelitis (include	ding			20000000	2000000
polioencephalitis)	375 15 15		- 02		20.200.00
Paralytic		0.07	0.06	0.06	0.07
		0.04	0.03	0.04	0.03
The desired of		0.24	0.25	0.24	0.38
Puerperal pyrexia		18.23 (a)	24.33 (a)	12.46 (a)	28.61 (a)
Deaths:		Rates per	1,000 Live B	irths	
All causes under 1 year of	200	26.8 (b)	30.8	24.3	24.8
Enteritis and diarrhœa un		20.0 (0)	00.0	21.0	
0		1.1	1.3	0.9	1.1
2 years of age		1.1	1.0	, 0.0	***

Maternal Mortality in England and Wales.

Material Mortant	y in Engineer		
Intermediate List No. and Cause	Number of deaths	Rates per thousand Total (Live and Still) Births	Rates per million womenaged 15—44
All5 Sepsis of pregnancy, childbirth and the puerperium	68 7	0.10 0.01	
A116 Other toxemias of pregnancy and the puerperium	166	0.24	-
childbirth All8 Abortion without mention of	90	0.13	_
sepsis or toxæmia	30	0.04	3
A119 Abortion with sepsis A120 Other complications of pregnancy,	39	0.06	4
childbirth and the puerperium	125	0.18	-

⁽a) Per 1,000 Total (Live and Still) Births.

⁽b) Per 1,000 related live births.

TABLE 3.—Notifiable Diseases

Disease	Total cases (or notification		Total cases (corrected notifications)
Scarlet fever	495		492
Whooping cough	1,218		1,220
Acute poliomyelitis : paralytic	28		31
non-paralytic	12		11
Measles	6,165	1	6,165
Diphtheria	6		
Acute pneumonia	351		353
Dysentery	42		42
Smallpox	90-		
Acute encephalitis: infective	, 1		. Agency masses
post-infectious	1		3
Enteric or typhoid fever			- stratile
Paratyphoid fevers	5		5
Erysipelas	39		39
Meningococcal infection	5		6
Food poisoning	56		51
Puerperal pyrexia	21		25
Ophthalmia neonatorum	15-	1	Total Total Control
Malaria	4		4

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Table 4.—Corrected Notifications of Infectious Diseases in Age Groups

				Ag	Age groups (years)	ars)			-
Disease	0-	-	÷	5—	10—	15—	25 and over	Age	Totals
Scarlet fever Whooping cough Acute poliomyelitis: paralytic non-paralytic Diphtheria	99 150	269 269 4 1,232	355 4 1,638	312 442 11 2,916 —	46 37 1 133	82 62 4	15 17 17 18 18	12 12	492 1,220 31 11 6,165

2 1 1 2 6 6 6 6 6 6 6 6 6
10

Diseas	Se			Age group not stated
Puerperal pyrexia	:	:	:	21
Ophthalmia neonatorum		:	:	1
Malaria				4

	URBAN DISTRICTS									RURAL DISTRICTS											WHOLE COUNTY												AGGREGATES													
CAUSES OF DEATH	0-	.	1-		5	1		16	-	65		65	15-		0		1-	1 3	-	15-		25-	45-		65	13-		0	1		5	1	15	21-		45	62		23	Urba	n Distri	cis Fi	urul Dis	tricts	Whol	te Cer
	M	E.	M.	P. 3	M. 3	. м	F.	M	F.	M.	F. M	P.	M.	Р.	ML I	. M	F.	M	F.	м. 1	F. M	F.	M.	F. A	F.	M.	F. 1	A. F	M	Ъ.	M. 1	F. M.	F.	34.	E. M	F.	ML	P. 8	M. F.	M	F. Ti	out M	L E.	Total	M.	F.
herculosis, respiratory	-	-	-			. 1	-	7	1	9	-	3 2	1	1				1	1-1	-	2 1			4	1 2	-	2		-	-	-	- 1	3	14	9 1	4 4	4	4	1 3	2 21	4	25 13	3 19	32	34	23
berculosis, other			-			- 2	-	-	-	-	-	-	-	-			1 2	-	-	1	1 -	. 3	1	1	1 -	-	-		-	-		E 100	1	-	3	1 1	1	-	4 7	4	2	- 18	3 5		3	5
bilitic disease		120	-				-	-	-	3	-	1 -	1	-				-	- 1	-			-	-		- 1	-		-	-	-		18			3 -	1		2 7	- 3	72	3	1 -	1	4	-
oberia		2	-					-	- 1	-	-		-	-				-	- 1	-			-	-		-	-		-	-	-	6 6	13	-				-	- 7	4 -		- 1			100	-
ping rough								1	201	3	-			-	- 1			-	1 - 1	-			-	-		-	-		-	- 1	-			-								- 7			-	172
ognesocial infections		26						20	100					- 1	1			1 0		- 1			-	-		-	- 1	1 -	-	-		200	130	-					- 1	4		- 7	1 -	1	-	
poliomyelitis	10	120					2	2	18	-	-		-	-	-		-		-	-		1 -	-	4		100	-		-	-	-		2	-	1						3	3				3
		153		31				1		2	2			-	-				-	-			-	4		-	-		-	-	-		-	-				-	- 7			-		-		
									1000		1		The last									. 1	-	2	- 1	-	-		1	-	-	2 2	13	-	1	- 1		1		4	1	11	1 2	2	1	3
infective and parasitic diseases	-				3 1		100	1 30	050	-	-		11				113	11150	0.8	CONT.	- 1	ALIEN .			0 5	4			1 2	-		2 3	-	3	- 7	6 16	12	10	0. 17	26	17	40 21	2 12	42	83	39
ant proplaim, stemach			-	-				1 4	100				1	31				11.53					74	4	0 2				1 2	- 1		SION		2	2 3	4 10	22	4	4	- 11	1	67 30		42	83	16
ant neoplasm, lung, bronchus	-	-	-	-			15		18.	7		1 :	1						181			1	ALC: U	60.		1831			1 2	- 1					3	1 34			- 15		27	21 .	- 34	34	1	61
ant neoplasm, breast	-	-	-	-				-	5	- 0.1			10.5		8		16	1163	181	601		30		-						-		8 8	133		5	- 11	13	4	- 7			4	18	17	3	21
ant neoplasm, uterus	-	-	-	-	-		1 3	3		-							1 3	15	2	500		41137	44	m .	10	61	74		3 20		99 6	SIN	100		. 1	6 41	64	80 4	41 41	e m	23 6	161 14	1 74			142
nalignant & lymphatic neoplesme	-	-	-		- 1			1.		20	23 2	20	26					1 3	2	ALC: U	- "	100	150		1			- 1				2010		1		1 2	11631	4	9 7	4 3	4	4	9 4	7	6	11
mis, sleukremis	-	-	-	-	- :		-	13	-	8.1	3	- 3	1	- 1	-		1 -	15	3	65	2 0						- 1						10		8117		3	1	1 1	4 3	4	2	2 4		6	11
m	-	-	-	-			-	1 3		3	1	1 2	-	3	- 1		-	1 5	10	-		3	1101	-					9 9						- 1	1 100	10	67 11	11 117	1 100	107 2	163 135	8 164	260		208
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