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Contributors

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BOROUGH OF LEWES



ANNUAL REPORT

OF THE

Medical Officer of Health

FOR

1937

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FOR

1937

Herald Press, Lewes-A 7900

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PUBLIC HEALTH OFFICE,

TOWN HALL,

LEWES.

June, 1938.

Mr. MAYOR, ALDERMEN AND COUNCILLORS,

I have the honour to present the Annual Report for the year 1937 drawn up in accordance with the instructions of the Ministry of Health. The Report of the Sanitary Inspector is embodied with it.

The general health of the town continues to be satisfactory. No epidemic illness occurred during the year, and the incidence of infectious diseases was low.

The Council will be satisfied to learn that the closest co-operation exists between the respective Departments concerned with the water supply which is analysed regularly and maintains its purity and high quality.

An account of the housing activities is given on p. 13. An interesting feature of the year's work has been the notable improvement in health in the families removed from clearance areas to the Winterbourne Estate.

I desire to acknowledge the valuable assistance given to me during the year by the Sanitary Inspectors.

> I am, Your obedient servant, W. R. DUNSTAN,

> > Medical Officer of Health.

Public Health Staff:

Medical Officer of Health (part time): W. R. Dunstan, M.SC., M.B., D.P.H. Sanitary Inspector (whole time): A. L. Vigar*†

Additional Sanitary Inspector (whole time): K. Appleton*† (from 11th January)

Temporary Assistant Sanitary Inspector (whole time): J. J. K. Helmer* (to 17th April); C. T. E. Lockley*† (10th May to 4th September)

Contribution to the salaries of these officers is made by Exchequer grants.

*Sanitary Inspectors' Certificate.

+Meat and Food Inspectors' Certificate.

Hospital for Infectious Diseases

Nurse Matron: Mrs. Cowlam Caretaker, Mr. H. A. Cowlam

General Statistics

Area	• •					1,981 acres
Resident Popu	lation, 19	37 (R.G. e	stimate	d)		11,920
Number of in	habited h	nouses (end	l of 19	37), acco	rding t	0
Rate Book	s					3,467
Rateable Value	e (estimate	ed)				£111,155
Sum represent	ed by a p	enny rate				£445

Natural and Social Conditions of the District

The town is situated on the tidal River Ouse. The greater part is on the chalk, rising from the alluvium, at the lower part of the Town, 18 feet above high water mark to 380 feet above high water mark at the highest part of the Town.

The Town is largely residential, but Ironworks, Cement Works and Breweries provide occupation for a considerable industrial population.

There is no occupation particularly influencing the public health.

Unemployment in Lewes has been too slight in occurrence and degree to allow any conclusions as to its effect on nutritional state.



Deaths	 	 	83	78	Death Rate 10.80
	Total	 		161	

e: 1

Deaths from puerperal causes (Headings 29 and 30 of the Registrar General's Short List):

				Deaths		Rate per 1,000 Total Births
No. 29.	Puerperal sepsis			0		0.00
No. 30.	No. 30. Other puerperal of		2220	0	22	0.00
	Total			0		0.00

Death Rate of infants under one year of age:	
All infants per 1,000 live births	 44.30
Legitimate infants per 1,000 legitimate live births	 46.36
Illegitimate infants per 1,000 illegitimate live births	 0.00

Deaths from Cancer (all ages)		16
Deaths from Measles (all ages)	14.3	0
Deaths from Whooping Cough (all ages)		0
Deaths from Diarrhoea (under 2 years of age)	0

There has been no unusual or excessive mortality during the year.

Comparative Statistics

	1933	1934	1935	1936	1937
Population estimated to					
middle of year	11,440	11,790*	11,850	11,910	11,920
Birth-rate per 1,000	11.51	10.76	11.13	13.43	13.26
Crude death-rate	13.02	$11 \cdot 36$	$11 \cdot 30$	13.77	$13 \cdot 50$
Adjusted death-rate	10.42	9.09	9.04	11.02	$10 \cdot 80$
Death-rate per 1,000 from Zymotic diseases (ex-					
cluding consumption)	·17	·26	·42	· 33	·08
Death-rate from respira- tory tuberculosis	· 34	· 85	·75	·50	• 34
Death-rate under 1 year to 1,000 live births	55.11	39.68	53.03	50.00	44.30
Deaths over 65, percentage of total deaths	59.73	60.09	62.12	58.53	65.21

* The population figure for 1934 statistical purposes was 11,708. The variation was necessitated by the alteration of the Borough boundary during the course of that year.

Causes of Death in Lewes

CIVILIANS ONLY

· · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	83 5 3 2 1 6	78 1 2 1 1 1 1 10
· · · · · · · · ·		5 3 2 1 6	1
· · · · · · ·		5 3 2 1 6	1
· · · · · ·		3 2 1 6	1 1 10
 		2 1 6	1
 	•••	1	10
•••		6	10
			10
		1	
		3	2
		26	23
		1	
		3	
		3	1
		3	7
		1	1
		3	
			3
		3	3 3
			1
	- 32	2	6
		3	1
			8
1.000		2	
		2	2 2 3
		5	3
	· · · · · · · · · · · · · · · · · · · ·		$\begin{array}{cccccccccccccccccccccccccccccccccccc$

Birth-rates, Death-rates, Analysis of Mortality, Maternal Death-rates, and Case-rates for certain Infectious Diseases in the year 1937.

	England and Wales	125 County Boro's and Great Towns including London	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	London Administrative County	LEWES
		Rates p	cr 1,000 Popt	ilation	
Births :					
Live	$14 \cdot 9 \\ 0 \cdot 60$	$ \begin{array}{r} 14 \cdot 9 \\ 0 \cdot 67 \end{array} $	15·3 0·64	$13 \cdot 3 \\ 0 \cdot 54$	$ \begin{array}{c} 13 \cdot 3 \\ 0 \cdot 4 \end{array} $
Deaths:					
All Causes	12.4	12.5	11.9	12.3	10.8
Typhoid and Paratyphoid					
Fevers	0.00	0.01	0.00	0.00	$(0 \cdot 0)$
Smallpox	0.02	0.03	0.02	0.01	0.00
Conduct Discourse	0.01	0-01	0.01	0.01	0.08
Whooping Cough	0.04	0.04	0.03	0.06	0.00
Diphtheria	0.07	0.08	0.05	0.05	0.00
Influenza	0.45	0.39	0.42	0.38	0+59
Violence	0.54	0.45	0.42	0 - 51	0.67
Notifications :					
Smallpox	0.00		0.00		
Scarlet Fever	2.33	2.56	2.42	2.09	0.75
Diphtheria	1.49	1.81	1.38	1.93	0.59
Enteric Fever	0.05	0.06	0.04	0.05	0.00
Erysipelas	0.37	0.43	0.34	0.44	0.59
Pneumonia	1.36	1.58	1.20	1.18	0.25
		Rates p	er 1,000 Live	Births	
Deaths under 1 year of age	58	62	55	60	44
Deaths from Diarrhoea and			100		
Enteritis under 2 years of age	5.8	7.9	3 · 2	12.0	0.00
Maternal Mortality: Peurperal Sepsis Others Total	$\left. \begin{smallmatrix} 0 \cdot 97 \\ 2 \cdot 26 \\ 3 \cdot 23 \end{smallmatrix} \right\}$	Not	available		$\begin{cases} 0\cdot 00\\ 0\cdot 00\\ 0\cdot 00 \end{cases}$
	Rate	s per 1,000 T	'otal Births (i	.e. Live and S	till)
Maternal Mortality:— Puerperal Sepsis	0.94)				€0.00
Others	$2 \cdot 17 \\ 3 \cdot 11 $	Not	available		$ \begin{cases} 0.00 \\ 0.00 \\ 0.00 \end{cases} $
Notifications:— Peurperal Fever } Peurperal pyrexia	13.93	17.59	11.52	{ 4·15 14·34	24·54 0·00

(Provincial figures based on Weekly and Quarterly Returns)

Clinics and Treatment Centres

	Name	Situation	Nature of accommodation	Provided by
Maternity and Child Welfare Centre	Lewes	Town Hall	Ample	Voluntary. Nurse provided and receives grant through County Council
Infant Welfare	Lewes	Watergate	Ample	do.
School Clinic	Lewes	Market Tower	Waiting and consulting room, medical and dental	Lewes Education Authority
Orthopaedic	Lewes	Castlegate	Sufficient	East Sussex County Council
Tuberculosis	Lewes	Castlegate	Sufficient	East Sussex County Council
Venereal Disease	E. Sussex	Sussex County Hospital, Brighton	Out-patient or In-patient as required	East Sussex County Council
Nervous Disorders Clinic	Lewes	Victoria Hospital	Out-patient Department	East Sussex County Council

Laboratory Facilities

Specimens for bacteriological examination for Diphtheria and Enteric Fever are sent to the Clincial Research Association, London; material for Cerebro-Spinal Meningitis, to the pathological department of the Sussex County Hospital, Brighton. A letter sent to all medical practitioners in the Borough shewed the arrangements and procedure adopted.

The Council pay for these examinations, also for the supply of Diphtheria anti-toxin in most cases.

Examination of material for the detection of tubercle bacilli is undertaken generally by the Medical Officer of the East Sussex County Council.

Analysis of the Lewes water supply is made, bacteriologically and chemically, by Dr. S. Allinson Woodhead. Bacteriological examination of milk samples is also undertaken by him.

Hospitals

Service	Hospitals, etc.	
General Medical	Sussex County, Brighton Lewes Victoria, Lewes	
General Surgical	Lewes Victoria, Lewes	
Children	Alexandra, Brighton	Beds are available
Maternity	Sussex Maternity Hospital, Brighton	as requisitioned under agreements with the Hospitals
Venereal Diseases	Sussex County, Brighton	Beds available in
Tuberculosis	Sanatorium, Robertsbridge	>the Lewes Isola-
Chronic Sick	Infirmary, Chailey Infirmary, Steyning	tion Hospital num- ber 12. Permanent Staff, a matron.
Mental	Asylum, Hellingly Asylum, Haywards Heath	Additional nursing assistance is ob-
Mental Deficiency	Various Institutions	tained as required
Orthopædic	Heritage, Chailey	
Ear, Nose and Throat	Sussex Throat, Brighton]

Ambulance Facilities

Two motor ambulances are provided and maintained by the Council. One is used exclusively for infectious diseases; the other is for noninfectious sickness and accidents.

The ambulance service is available for the use of patients in districts outside the Borough at a fixed charge per mile run. The scale of charges adopted by the Council provides for the free use of the ambulance up to twenty miles when ordered through the private medical practitioner in the case of residents of the Borough. A special rate is charged for use by other public administrative bodies.

During the year 209 journeys were made covering 2,134 miles. Receipts amounted to $\pounds 80$ 8s. 6d. ; repairs, running costs, etc., $\pounds 117$ 2s. 6d. Owing to special circumstances the Committee modified the charges in one case.

Nursing in the Home

(a) General. None provided by the Sanitary Authority, but services of District Nurses from the Lewes Nursing Association are available, and are voluntarily provided in cases of necessity; in other cases fees are charged according to the circumstances of the patient.

(b) Infectious diseases (e.g., Measles). The Local Authority have authorised the provision of nurses in certain cases. There are private nurses residing in the town, and nurses can be obtained from Brighton and other towns, but there is no financial or other arrangements between them and the Local Authority.

Sanitary Circumstances

Water Supply.—The water supply is derived almost entirely from the Lewes Corporation Waterworks. The Cliff Well and some private wells are still being used.

The Corporation Waterworks are situated at the south-west end of the Town. The water is pumped from the well into the four covered distributing reservoirs, i.e. Jubilee Park, The Race Hill (2) and Western Road. The supply is constant, of good quality and sufficient for the needs of the community.

Analyses of the water were made during the year. The Analyst reported that both chemically and bacterially this supply maintains its very high degree of purity and remains perfectly safe for drinking purposes and domestic use.

Drainage and Sewerage.—Water carriage system; a few houses only being connected to cesspools. The sewers were extended during the year on the Landport Estate.

The sewerage system provides for the converging of all sewers to a central station at Southerham, where the effluent, after the passing of the sewage through screens and settling tanks, is discharged into the River Ouse at suitable states of the tide.

Rivers and Streams.—No statutory proceedings to prevent pollution of rivers or streams were necessary during the year.

Closet Accommodation.—Practically all water closets; part hand flushed but chiefly by flushing cisterns. 20 flushing cisterns have been provided at existing premises during the year.

Scavenging.—The collection of house refuse is carried out once a week over the whole district by contract under the supervision of the Sanitary Inspector. The contract covers a five year period ending on 30th September 1940, and provides for the use of approved motor vehicles. The annual contract price is $f_{1,150}$, with an additional charge of 8s. per house per annum for every five houses erected and occupied after 1st October 1935.

The disposal of the refuse takes place at the Council's Sewage Works on the outskirts of the town. After reduction by burning the residue is utilised in the sludge drying beds, and for filling up the low-lying adjacent ground.

REPORT OF THE SANITARY INSPECTOR

Sanitary Inspection

.

(a) Visits and Inspection	ons:					
Houses and premises insp	ected	12223		1.1		318
Houses inspected		2020				233
Complaints attended to				12.2		154
Visits to slaughter houses		etc.				1078
Visits to cowsheds and m		1.1		14.14		53
X ** *				1.0		16
Visits to fried fish and oth		shops	1000			22
Drains tested by smoke o						4
Ph 1						11
						1193
Visits for sundry purpose						113
Visits under the Factory :						102
Visits under Shops Acts				2.2		15
Notices to Employers, re						15
						114
Patients removed to Hosp						21
Visits, re-disinfection						60
Visits to remove infected		etc.				30
Rooms disinfected						52
Sets of bedding, etc., disi						26
Articles disinfected		1223		122	10.1	184
Inspections of verminous	houses	0.000		2.22		36
Visits re Rats and Mice E		on Act,				67
Vision en della						51
Samples of water for anal						6
Samples of milk						34
1	32.2	0.223				114
Visits to Markets						29
						8
Inspections re Petroleum						63
Inspections of Marine Sto		1212		1920	222	3
Inspections of pig keeper's			22.22	2.22		27
Inspections of dwelling va						4
T						90
Notices to the Secretary I						90
Notices to Parents			intee			113
Reports re Infectious Sic	kness pi	repared	for Medi	ical Offic	er of	111
						37
						210
Condemned Food notes is	sued	1010		100		139
(b) Nuisances abated an	d Repair	Works	carried ou	t:		
Choked drains						15
Choked W.C.s						4
Drains relaid or repaired						9
Inspection chambers						5
Intercepting traps			4.4			6
W.C.s repaired or reconstr	ructed	4.4				26
W.C.s flushing apparatus	1.1					16
W.C.s cleansed			× .			12

Soil pipes	* *			1.1			3
Vent pipes							3
Fresh air inlets			**				5
Gully traps							19
Sinks							8
Sink waste pipes	and chan	nels					23
Eaves guttering :			s				20
Ashbins provide						•••	84
Cesspool cleanse							1
			56.00 56.00				24
Roofs							21
Doors and door							12
Windows and fra				4.4			52
Ventilation in lie			•••				17
Fireplaces and ra			**	4.4		• •	
Washing coppers		• •					22
		• •	• •		11		11
Floors			• •		* *		25
Staircases		* *					28
Ceilings and inte							60
External wall pla	ister						16
Brickwork	• •						26
Internal water su		ided					2
Dampness remed							36
Overcrowding al							28
Rooms cleansed							36
Yards cleansed							12
Verminous house	es						8
Cowsheds and d	airies clear	ised					2
Bakehouses clear	nsed						1
Slaughterhouses	cleansed						1
Urinals cleansed							2
Accumulations r	emoved						14
Accumulations o	r manure	removed					5
Manure conveya				1000			3
Animals imprope							6
Van dwellings in							1
and an onlings in	- Proberty	realized		1.1		• •	

Smoke Abatement.—Twenty-six observations of smoke emissions were made, and 4 cautionary letters were sent. As other cases occurred in connection with exempted processes no action could be taken. The considerable nuisance from offensive fumes emitted from a cement works situated outside the Borough boundary was dealt with during the year by the Alkali Department of the Ministry of Health.

Rag Flock Acts, 1911 and 1928.—No upholsterer in the Borough was found to be using flock other than that supplied under warranty. No samples were taken.

Swimming Baths and Pools.—The open-air Swimming Bath at the Pells is Council owned. The bath capacity is 244,000 gallons, and is completely emptied and refilled fortnightly. Also the condition of the water is maintained by regular chlorination and the daily changing of a volume of the water approximating to one-sixth of the total bath capacity. Analysis of the bath water has shown it to be bacteriologically satisfactory. An open air swimming bath at the County Secondary School for Boys is used five days each week in the season. The water is changed weekly but is not chlorinated.

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Eradication of Bed Bugs.—Eight instances of bug infestation were found during the year. No case was at Council owned property. All the above houses were disinfested by owners to the requirements specified by the Sanitary Inspector, i.e. thorough stripping of walls, the removal of skirtings, architraves, and other wooden fixtures from walls and treatment by plumbers blow lamp, disinfestation by efficient fumigation or vermicide solution, and subsequent repair, cleansing and distempering of plasterwork and repair and replacement of wooden fixtures where necessary. The houses and belongings of tenunts about to be rehoused from Clearance Areas are inspected prior to transfer to Council houses and arrangements made for disinfestation in case of any vermin found. The Council has apparatus for steam disinfection which is available for use in disinfesting bedding.

Schools.—There are eight public elementary schools, two secondary schools and a number of private schools in the Borough. These are all adequately supplied with water from the town mains. Defective sanitary conditions are reported to the Local Education Authority for necessary attention as they arise. Routine medical inspections are held regularly and Clinics twice weekly. Exclusion from school in the case of infectious disease is based on the 1927 Memorandum (see Appendix on p. 21). No school closure was necessitated during 1937.

Housing Statistics

Number of new houses erected during the year:	
(a) Total	134
(1) By Local Authority	62
(2) By other Local Authorities	
(3) By other bodies or persons	72
(b) Additional dwellings by conversion into flats	
1. Inspection of dwelling houses during the year:	
(1) Total number of dwelling-houses inspected for housing	
defects (under Public Health or Housing Acts)	233
Total number of inspections made	554
(2) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations,	
1925	185
Total number of inspections made	413
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human	
habitation	86
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	97
2. Remedy of Defects without Service of formal Notices:	
Number of defective dwelling-houses rendered fit in con- sequence of informal action by the Local Authority or	
their Officers	89
3. Action under Statutory Powers:	
A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936.	
(1) Number of dwelling-houses in respect of which	
notices were served requiring repairs	8
(2) Number of dwelling-houses which were rendered	
fit :	
(a) by owners	8
(b) by Local Authority in default of owners	

P. Dramadings and D. LP. H. LL I	
B.—Proceedings under Public Health Acts.	
(1) Number of dwelling-houses in respect of which	
notices were served requiring defects to be remedied	_
(2) Number of dwelling-houses in which defects were remedied;	
(a) by owners	
(h) by Local Authority in default of	
(b) by Local Authority in default of owners C.—Proceedings under sections 11 and 13 of the Housing	
Act, 1936.	
(1) Number of dwelling-houses in respect of which	
Demolition Orders were made	2
(2) Number of dwelling-houses demolished in pur-	4
suance of Demolition Orders	9
DProceedings under section 12 of the Housing Act, 1936.	1
(1) Number of separate tenements or underground	
rooms in respect of which Closing Orders were	
made	
(2) Number of separate tenements or underground	
rooms in respect of which Closing Orders were	
determined, the tenement or room having been	
rendered fit	
4. Housing Act, 1936.—Part IV.—Overcrowding:	
A. (1) Number of dwellings overcrowded at the end of the	
(2) Number of families dwelling therein	94
(2) Number of families dwelling therein	98
	551
B. Number of new cases of overcrowding reported during	
C. (1) Number of cases of overcrowding relieved during	3
()	10
(2) Number of persons concerned in such cases	19 95
D. Particulars of any cases in which dwelling-houses have	95
again become overcrowded after the Local Authority	
have taken steps for the abatement of overcrowding	
5 Unbookthy Assoc	

5. Unhealthy Areas.

Fifteen unhealthy areas were dealt with at a Public Inquiry held in September. The Minister of Health confirmed Orders requiring the demolition of 67 houses in the Union Place, Chapel Hill (No. 1), Fleets Passage, South Street (Hill Cottage), South Street (The Green). Bates Cottages, North Court, Foundry Lane, Greens Passage, Norfolk Street, White Hill, Walwers Lane (No. 1), South Parade, St. Pancras Lane and Southover High Street Areas.

Six further unhealthy areas comprising sixty dwelling houses were represented.

The new housing estate at Winterbourne and the block of flats at South Place were both completed and occupied by families from the clearance areas during the year.

Inspection and Supervision of Food

(a) Milk Supply.—The greater supply of the milk is drawn from farms outside the Borough. There are three cowkeepers with 35 cows, and 19 retailers registered within the Borough. Three retailers held licences under the Milk (Special Designations) Order, 1936, for the sale of "Tuberculin Tested" milk. Sterilized bottled milk was sold at six premises. Premises were kept in a generally clean condition. Notices were served in two cases regarding unsatisfactory conditions. No milk was examined for visible dirt content, but 34 samples were submitted for bacteriological examination with the following results:

Satisfied Coliform and Methylene I	Blue tests			18
Failed Coliform test only			11	4
Failed Methylene Blue test only				6
Failed Coliform and Methylene Blu	ie tests		(A)	6
Acid fast organisms were not found	l in any sa	ample.		

Pus cells were present in one sample.

Streptococci present in three samples.

Staphylococci present in three samples.

(b) Meat and other Foods.—Inspections of the seven registered slaughterhouses, also the butchers' and other food shops have been made regularly throughout the year, and satisfactory conditions maintained. Examination of carcases and internal organs in the slaughterhouses was made on most occasions of slaughter, and 3 tons, 0 cwt., 0 qtrs. 4 lbs. of meat found unfit for human consumption was voluntarily surrendered by the owners on condemnation.

The following table shows details of meat condemned:

		DI	SCRIPT	NON			Number of a parts of .	
		Tubercu- losis	Other causes					
Beast	s (whole ca	rcase, i	neluding	internal o	organs)		3	
	(part care	ase)					1	1
	Heads	1.10	1.4.1.4			1.1.1	22	
	Tongues						22	
**	Lungs						17	-
+ 2	Hearts	+ +					8	
	Livers	20.00				1.1	4	18
11	Other org						10	5
Calve	s (whole ca	rease, i	neluding	internal (organs)		2	
	(part care	ase)						1
	Heads	1.1	1000					
	Tongues							
	Lungs	1.1		* *		1.1		-
	Hearts						81114	
**	Livers	+ +				1.1		
	Other org							
Sheet	p (whole ca	rease, i	neluding	internal e	ergans)	1.1		1
	(part care	ase)						1
10	Heads					× + .:		
	Tongues							
	Lungs	18.16						12
	Hearts							
	Livers							10
	Other org						-	
Pigs ((whole care	ase, inc	luding in	iternal org	(ans)		12	
	Heads						36	1
	Tongues	+ +					14	1
	Lungs		* *	1.4			17	32
	Hearts	7.0					17	21
	Livers						20	82
	Other org	ans					13	9

Total Animals		Total number of Animals affected with Tuberculosis	Percentage	Whole Carcase Condemned	Percentage	
Beasts		246	40	16.26	3	1.22
Calves		338	2	0.59	2	0.59
Sheep Pigs		1302 1560	52	3.33	12	0.77

The number of animals found affected with tuberculosis is shown in the following table:

Unsound meat is either destroyed by incineration or disposed of to waste products merchants after treatment with disinfectants.

Other foods condemned and destroyed were 74 lbs. Cod fillets.

(c) Adulteration, etc.—Analysis under the Food and Drugs (Adulteration) Act, 1928, is undertaken by the East Sussex County Council. The Inspector, Mr. W. Chamberlain, has kindly furnished the particulars of samples taken: New Milk, 12, Pork and Beans, tinned, 1, Glace Cherries, bottled, 2, Honey, 1, Lemon Cheese, 1, Tomatoes, tinned, 1, and Dripping, 1.

One milk sample was deficient in fats. All other samples were genuine. No legal proceedings were taken during the year.

Nutrition.— The special work on Nutrition has been continued on the lines laid down in the 1933 report.

Children attending the elementary schools are provided with milk at a reduced price under the Milk Marketing Board Scheme. Pasteurised milk forms approximately half the total supplied.

Factory and Workshops Acts

TABLE REQUIRED BY HOME OFFICE

1.—Inspection of Factories, Workshops and Workplaces

		Numb	er of	Omining	
Premises	Inspections	Written Notices	Occupiers Prosecuted		
Factories	 	24	1		
(including Factory Laundries) Workshops	 	18	2		
(including Workshop Laundries) Workplaces	 •••	60	6	-	
(other than Outworkers' premises) Notices <i>re</i> Outworkers' lists	 • •	-	15		
Total	 	102	24	_	

2	Delaste	found in	Rastanias	Washehate	and Workplaces
4.	-Inejects	jouna m	raciones,	workshops	and workplaces

		2	fects	No. of			
Partici	Found	Remedied	Referred to H.M. Inspector	Prosecu- tions			
Nuisances under the Public He							
Want of cleanliness				9	9		
Want of ventilation							
Overcrowding							
Want of drainage of floors							
Other nuisances							
Cinsul	ficient			-			
Sanitary Junsu		defective					
		for sexes					
Offences under the Factory an Illegal occupation of u	d Worksi	hop Acts:					
			i				
Other offences (excluding offences rela offences under the Sect Schedule to the Ministr and Workshops Transf 1921)	ions me y of He	ntioned in alth (Facto	the ories	_	-		_
Tot	al			9	9		

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

3.—Outwork in unwholesome	premises, Section 108	 	Nil

Petroleum Act, 1928

63 visits were paid respecting the storage of Petroleum Spirit and Carbide of Calcium.

42 licences were authorised: 33 for storage of Petroleum Spirit, and 9 for Carbide of Calcium.

The total quantities that might be kept under these licences were petroleum spirit, 67,315 gallons; Carbide of Calcium, 3,724 pounds.

Fees amounting to $f_{,29}$ were received.

Rats and Mice Destruction Act, 1919

67 visits were paid under the Act, and advice given as conditions indicated. Copies of the advisory leaflet issued by the Ministry of Agriculture and Fisheries were distributed to occupiers of rat invaded premises.

The Council's refuse tipping area and the banks of the adjoining Cockshute Stream have received routine treatment throughout the year.

Disease			Total Cases Notified	Cases admitted to Hospital	Total Deaths
Diphtheria			 7	7	
Scarlet Fever			 9	9	1
Erysipelas			 7	.5	
Pneumonia			 3		10
Puerperal Fever			 3		
Ophthalmia Neo	onator	um	 4		
Tuberculosis:					
		(Males	 9	4	3
(a) Pulmonary	v	{ Females	 1	1	1
		[Total	 -10	—5	_4
		(Males	 1	1	2
(b) Non-Pulm	onary		 3		1
(-) - 04 - 04		Total	 4	-1	—3

Notifiable Diseases during the Year

Most of the cases of Tuberculosis are notified; nearly all cases are referred by the medical attendant to the Tuberculosis Officer of the East Sussex County Council; these receive appropriate treatment according to the circumstances of each case. The houses of all known cases are visited, and any necessary sanitary work carried out. Cases not attending the Tuberculosis Clinic are urged to take advantage of its benefits. All deaths from Tuberculosis were of previously notified cases.

Distribution of Sickness

it the year thi		Scarlet			Searlet
	Diphtheria	Fever		Diphtheria	Fever
January	—	1	July		
February	—	2	August		1
March	1	1	September	—	
April			October	1	
May	1	1	November	1	1
June	—	1	December	3	1

The cases of Diphtheria and Scarlet Fever were distributed throughout the year thus:

Analysis of Infectious Diseases Notified and arranged in Age Groups

		Un- der 1 vear	1 10 2	2 to 3	3 to 4	+ to 5	5 <i>to</i> 10	10 10 15	15 <i>to</i> 20	20 <i>to</i> 35	35 <i>to</i> 45	45 <i>to</i> 65	65 and over
Scarlet Fever	 	-				4	4	1					_
Diphtheria	 			1	1		2		1	1	1	_	
Puerperal Fever	 									3			
Ophthalmia Neo	um	4											-
Pneumonia	 						-		-	1		2	
Erysipelas	 			1				-	-	2		2	2

Tuberculosis-New Cases and Mortality

	New Cases				Deaths			
	Pulmon ary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	М	F	м	F	м	F	м	F
0	-		1				1	
1							1	
5	2							
10	1							
15				1				1
20	1			1	1			
25	1				1	1		
35	2				1			
45	1		-	1				_
55		1				1.1.1		S-14
65 and upwards	1					-		-
	9	1	1	3	3	1	2	1

Methods of Procedure in dealing with Infectious Disease

Notifiable Disease

On receipt of notification the house is visited and enquiries made into all the circumstances under which the sickness has arisen; also the conditions of the house and surroundings, milk supply, school and contacts, and any other information ascertained which would lead to the source of infection, and restrict the further spread of disease.

When the patient is removed to the Hospital for Infectious Diseases, which is always urged in the cases of Scarlet Fever, Diphtheria and Enteric Fever, and generally agreed to, the room is afterwards disinfected, by either spraying or fumigation, followed by the removal of the bedding, wearing apparel, etc., to the Council's Steam Disinfecting Station with a printed list of articles removed, which is signed by the owner on their safe return.

Stripping, etc. of walls is required according to circumstances, and thorough cleansing of rooms is urged in all cases.

A card is left with the parent or guardian containing instructions *re* visiting patient at the Hospital and the symptoms which should be regarded as being suspicious of infection in other members of the family.

A certificate, excluding the patient and contacts from Day and Sunday School, is left with the parent and also sent to the Secretary of the Education Committee.

Non-Notifiable Diseases (i.e. Chicken Pox, Measles, Whooping Cough, Scabies, etc.)

Notice is sent by the Head Teachers of the Elementary Schools to the Medical Officer of Health, on forms provided for the purpose, of any absentees from School owing to sickness arising from the above diseases, or other suspicious sickness.

The homes of these children are visited, the facts ascertained as nearly as possible, and exclusion certificates given to parents and teachers as the conditions indicate.

When it is found that no doctor is in attendance the parents are advised to obtain medical advice.

In the case of Scabies, special treatment of hot baths and application of Liquor Calcis Sulph. and Ung. Sulphuris (with disinfection of the clothing of School Children) is provided by the Council, the treatment being carried out by the School Nurse.

Appendix—Incubation and Exclusion Periods of the Commoner Infectious Diseases

The following table showing the exclusion periods adopted in the Borough is included to assist head teachers and others to co-operate effectively in preventing the spread of infectious diseases. The table is adapted from that published in the Memorandum on Closure and Exclusion from School issued jointly by the Ministry of Health and the Board of Education.

Discase	Incubation period	Interval between onset of illness and appear- ance of rash	Period of Exclusion			
			Patient	Contacts		
Scarlet Fever	1-8 days	1-2 days	Three weeks after return from hospital, or in the case of patients treated at home, three weeks after release from isolation.	Two weeks after remova of patient to hospital, or in the case of patients at home two weeks after release from isolation.		
Diphtheria	2-10 days	_	Three weeks after end of attack; or until pro- nounced free from infec- tion by a medical practi- tioner.	Two weeks after removal of patient to hospital, or in the case of patients treated at home, ten days after release from isola- tion.		
Measles	7-21 days	4 days	Three weeks from date of appearance of rash.	Other children, who have not had the disease, three weeks from date of onset of last case in house.		
German Measles	5-21 days	0-2 days	Three weeks from the date of appearance of rash.	Other Children, who have not had the disease three weeks from date of onset of last case in house.		
Whooping Cough	6-18 days	-	Six weeks from com- mencement of cough.	Infants only, for three weeks from date of last exposure to infection.		
Mumps	12-23 days	-	Three weeks, or until one week after subsidence of swelling.	No exclusion.		
Chicken Pox	11-21 days	0-2 days	Three weeks or until all scabs have disappeared.	Other children, who have not had the disease three weeks from the date of last exposure to in- fection.		
Smallpox	10-14 but usually 12 days	3 days	Six weeks or until the patient is certified free from infection by a medi- cal practitioner.	Sixteen days unless re cently vaccinated, when exclusion is unnecessary		



