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COUNTY OF LINCOLN — PARTS OF LINDSEY



ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1956



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COUNTY OF LINCOLN — PARTS OF LINDSEY



ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1956

C. D. CORMAC, M.A., B.M., B.Ch., D.P.H. County Medical Officer of Health

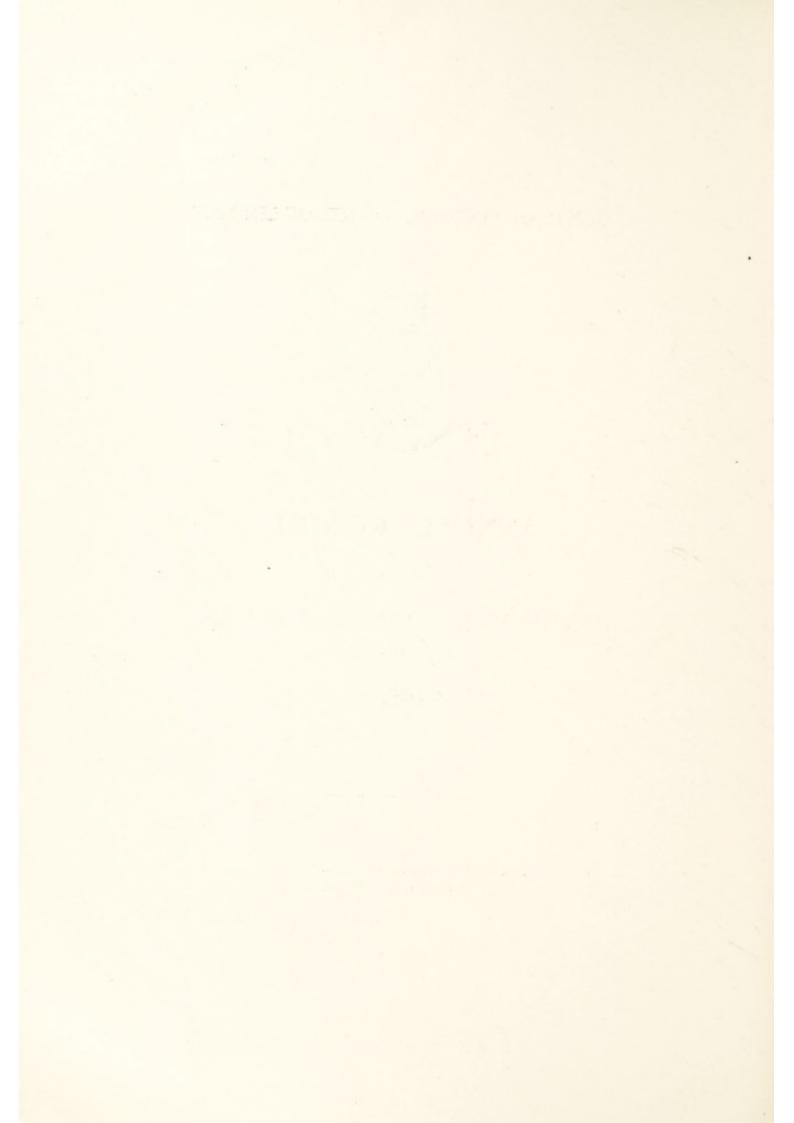




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PUBLIC HEALTH OFFICERS OF THE AUTHORITY

County Medical Officer of Health
CYRIL D. CORMAC, M.A., B.M., B.Ch., D.P.H.

Senior Assistant County Medical Officer of Health H. HARTLEY DAVIES, M.R.C.S., L.R.C.P., D.C.H.

Assistant County Medical Officers

JOHN C. MACARTNEY, M.D., Ch.B., D.P.H.

WILLIAM J. KERRIGAN,

M.B., ChB., B.A.O., L.M., D.P.H.

RALPH J. R. MECREDY,

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

STANLEY A. O'HAGAN, M.B., B.S., D.P.H.

SIDNEY CHILDS, M.A., L.R.F.P., & S.G., M.B., Ch.B. D.P.H., D.P.A., D.T.M. & H.

CECIL A. McCLEARY, M.B., B.Ch., B.A.O., D.P.H.

ARTHUR J. BEVERIDGE,

C.B., O.B.E., M.C., M.B., B.Ch., B.A.O., L.M., M.Sc., D.P.H.

DOROTHY W. O'HAGAN, M.B., B.S.

DORIS S. WILLIAMS, M.B., Ch.B., D.P.H.

ISABELLA M. HARKNESS, M.B., Ch.B., D.P.H.

MARGARET J. S. CATON, M.R.C.S., L.R.C.P.

(Resigned 6/1/56).

MARY HELMER, M.R.C.S., LR.C.P. M.B., B.S.,

D.R.C.O.G. (Resigned 2/6/56).

KRYSTYNA M. KAWA, M.B., Ch.B., D.R.C.O.G., (Resigned 14/8/56).

KATHLEEN A. CLYNE, M.D., B.Ch., B.A.O. (Temporary—appointed 28/5/56).

WILHELMINA SHANKS B.A., M.B., B.Ch., B.A.O. (Appointed 23/4/56).

SHIRLEY E. HOYES, M.R.C.S., L.R.C.P. (Appointed 27/7/56).

MARGARET T. WOOD, D.Obst. R.C.O.G., M.B., Ch.B. (Appointed 8/10/56).

Chief County Dental Officer JOHN D. SYKES, L.D.S.

Assistant County Dental Officers

GEORGE H. TAPPER, L.D.S., R.C.S.

FRANCIS G. HOLLIER, L.D.S., R.C.S.

MARY CLAYTON, L.D.S.

JOAN MUNRO, L.D.S., R.C.S.

(Appointed 12/3/56—Resigned 3/8/56)

FRANK E. PADGETT, L.D.S., R.C.S.

ARTHUR N. STANNARD, L.D.S.

(Part-time)

DOUGALD R. STORR, L.D.S.

DIGBY F. CAME, L.D.S., R.C.S. (Apptd. 11/9/56).

County Health Inspector GEORGE COLLINSON, D.P.A., M.A.P.H.I.

Assistant County Health Inspectors ARTHUR HENRY RANDS, M.A.P.H.I. JOHN CABOURNE, M.A.P.H.I.

Superintendent Nursing Officer
MARY WITTING, S.R.N., S.C.M., Health Visitors Cert. of R.S.H.

Assistant Superintendent Nursing Officers
VIOLET L. MONAGHAN, S.R.N., S.C.M.
AGNES W. MATHER S.R.N., S.C.M., Health Visitors Cert. of R.S.H.

Domestic Help Organiser Mrs. LILLIAN ELLERAY

Chief Clerk CHARLES H. NICHOLSON

Public Analyst WILLIAM W. TAYLOR, B.Sc., F.R.I.C.

Authorised Officers under the Lunacy and Mental Treatment Acts and for the purposes of Section 15 (1) of the Mental Deficiency Act, 1913

G. G. BECK, 48 Oswald Road, Scunthorpe.

A. JAMES, 48 Oswald Street, Scunthorpe.
F. SLINGSBY, 31 Market Street, Cleethorpes.

C. L. VICKERS, 5 Silver Street, Gainsborough.

A. V. SMITH, County Offices, Lincoln.

C. L. WINK, 14 Upgate, Louth.

J. N. RADFORD, Offord House, Spilsby.

B. G. WILLIAMS, 32 Cecil Avenue, Skegness.

DISTRICT MEDICAL OFFICERS OF HEALTH

District	Name	Qualifications	Address
URBAN			
Alford	C. S. E. Wright	B.A., M.B., B.Ch., M.R.C.S., L.R.C.P. D.P.H.	Council Offices, Alford
Barton-upon-Humber	F. P. H. Birtwhistle	M.D., M.B., Ch.B.	Priestgate, Barton-upon-Humber
Brigg	F. J. O. King (resigned	B.A., M.B., B.Ch. B.A.O.	53 Bridge Street, Brigg
	31/3/56) J. H. Willis, temporary from 1/4/56)	M.B., B.S.	
Cleethorpes Borough	C. A. McCleary	M.B., B.Ch., B.A.O., D.P.H.	Health Dept., Council Offices, Cleethorpes.
Gainsborough	J. C. Macartney	M.D., Ch.B., D.P.H.	Health Dept., Council Offices,
Horncastle	S. A. O'Hagan	M.3., B.S., D.P.H.	Lord Street, Gainsborough Council Offices, Horncastle
Louth Borough	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Health Dept., Town Hall, Louth
Mablethorpe and Sutton	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Council Offices, Mablethorpe
Market Rasen	R. J. R. Mecredy	B.A., M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Market Rasen
Scunthorpe Borough	S. Childs	M.A., M.R.F.P. & S.G., M.B., Ch.B., D.P.H., D.P.A., D.T.M., & H.	Health Dept., High Street East, Scunthorpe
Skegness	A. D. F. Menzies	M.B., Ch.B.	Health Dept., Town Hall, Skegness
Woodhall Spa	S. A. O'Hagan	M.B., B.S., D.P.H.	Council Offices, Horncastle
RURAL			
Caistor	R. J. R. Mecredy	B.A., M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Caistor
Gainsborough	J. C. Macartney	M.D., Ch.B., D.P.H.	Council Offices, Lord Street, Gainsborough
Glanford Brigg	F. J. O. King (resigned	B.A., M.B., B.Ch., B.A.O.	53 Bridge Street, Brigg
	J. H. Willis (temporary from 1/4/56)	M.B., B.S.	
Grimsby	C. A. McCleary	M.B., B.Ch., B.A.O., D.P.H.	Health Dept., Council Offices, Deansgate, Grimsby
Horncastle	S. A. O'Hagan	M.B., B.S., D.P.H.	Council Offices, Horncastle
sle of Axholme	J. C. Macartney	M.D., Ch.B., D.P.H.	Council Offices, Epworth, Doncaster
Louth	W. J. Kerrigan	M.B., Ch.B., B.A.O., D.P.H.	Council Offices, Cannon Street, Louth
Spilsby	C. S. E. Wright	B.A., M.B., B.Ch., M.R.C.S., L.R.C.P. D.P.H.	Council Offices, Toynton All Saints, Spilsby
Welton	W. Sharrard	M.B., Ch.B.	"Elmhurst," The Avenue

VITAL STATISTICS, 1956

Registrar	General's estimated mi	d-year	popula	ation		 					316,800
Births											,
	Live 5,303. Still	157.	Tot	al	5,460	Tota	Birth-	Rate p	er 1,000) populat	ion 17.23
						Stillb	oirths-R	late per	1,000	total birt	ths 28.8
	Illegitimate births				292	Illegi	timate	Births-	Rate p	er 1,000	
								total	births		53.5
Deaths											
	from all causes				3,517	Deat	h rate p	per 1,00	00 popi	ulation	11.1
	Deaths of infants und	er 1 y	ear of a	ige	123		per 1,0				22.5
	Maternal deaths				1	Rate	per 1,0	00 birt	hs		0.18
	Deaths from Tubercu	losis									
	Pulmonary				26	Rate	per 1,0	00 pop	ulation	1	0.08
	Other forms				. 5		per 1,0				0.016
	Deaths from Cancer				498		per 1,0				1.57

The births and death rates for the Administrative County continue to compare favourably with those of England and Wales. After correction for the difference in the age and sex distribution of the population the comparative figures are as follows:—

	Live births rate for 1,000 population	Death rate for 1,000 population
England and Wales	 15.7	11.7
Administrative County	 16.7	11.2

Live Births 1956

Districts	Total Births	Legit	timate	Illeg	itimate
		male	female	male	female
Urban					
Alford	34	15	17	1	1
Barton-upon-Humber	101	51	49	1	
Brigg	68	35	32	_	1
Cleethorpes Borough	482	248	212	11	11
Gainsborough	329	146	156	15	12
Horncastle	51	22	27	1	1
Louth Borough	175	81	82	6	6
Mablethorpe and Sutton	80	35	38	3	4
Market Rasen	33	19	14	_	
Scunthorpe Borough	1.093	540	496	27	30
Skegness	202	110	69	12	11
Woodhall Spa	24	18	6		
Aggregate Urban Districts	2,672	1,320	1,198	77	77
Rural					
Caistor	253	135	105	4	9
Gainsborough	228	105	107	7	9
Glanford Brigg	493	242	233	14	4
Grimsby	255	123	120	6	6
Horncastle	193	103	82	3	9 4 6 5 8 8 6
Isle of Axholme	255	134	109	4	8
Louth	298	144	138	8	8
Spilsby	356	168	172	10	6
Welton	300	157	130	7	6
Aggregate Rural Districts	2,631	1,311	1,196	63	61
Whole County	5,303	2.631	2.394	140	138

Still-Births 1956

Districts	Total	Legit	imate	Illegit	imate
		male	female	male	female
Urban					
Alford	2	_	2	_	-
Barton-upon-Humber	2 8 1	2	6	_	_
Brigg		_	1	_	_
Cleethorpes Borough	19 9 1	13	6	_	_
Gainsborough	9	4	4	_	1
Horncastle	1	1	_	-	_
Louth Borough	6 2	4	2	_	_
Mablethorpe and Sutton	2	_	1	1	-
Market Rasen	1	1	_	_	_
Scunthorpe Borough	30	14	13 2 2	1	2
Skegness	6	2	2	i	1
Woodhall Spa	3	1	2	-	_
Aggregate Urban Districts	88	42	39	3	4
Rural					
Caistor	5	2	3		_
Gainsborough	7	3	4	_	_
Glanford Brigg	18 2	2 3 12 2 2	4	2	_
Grimsby	2	2	_	_	_
Horncastle	10	2	6 5	2	_
Isle of Axholme	9	4	5	_	
Louth	9 9 6 3	2 2	5	_	_
Spilsby	6	2	1	2	1
Welton	3	2	1	_	-
Aggregate Rural Districts	69	33	29	6	1
Whole County	157	75	68	9	5

District	Registrar General's estimated population	Live Births	Deaths	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm stomach	Malignant neoplasm, lung, bronchus	Malignant neoplasm, breast	Malignant neoplasm uterus	Other malignant and lymphatic neoplasms	Leukaemia, Aleukaemia	Diabetes
Urban																			
Alford	2,150	34	24	-	-	-	-	-	-	-	-	1	2	-	-	-	3	1	-
Barton upon Humber	6,420	101	86	_	_	_	-	-	_	_	_	_	1	3	3	_	8	_	1
Brigg	4,390	68	68	-	-	1	_	_	_	_	-	-	2	1	2	_	9	_	1
Cleethorpes Borough	30,320	482	355	4	-	-	-	_	_	_	-	_	11	12	1	1	27	2	3
Gainsborough	17,440	329	240	2	-	_	_	_	-	_	-	-	7	6	1	3	20	_	3
Horncastle	3,880	51	40	1	-	1	_	_	_	_	_	_	_	_	1	_	2	_	1
Louth Borough	11,430	175	156	2	-	-	-	1	-	_	_	_	3	3	2	_	9	1	2
Mablethorpe and Sutton	5,260	80	60	1	_	_	_	_	_	_		1	_	2	5	1	4	_	_
Market Rasen	2,160	33	30	_	_	_	_	_	_	_	_	_	3	_	1	_	1	_	_
Scunthorpe Borough	58,760	1093	496	5	2	2	_	_	_	_	_	1	10	20	1	3	36	2	10
Skegness	12,630	202	172	3	_	_	_	_	_	_	_	_	7	7	2	1	13	_	1
Woodhall Spa	2,160	24	47	-	-	-	-	_	-	_	-	-	1	_	_	-	5	-	-
Total	157,000	2672	1774	18	2	4	_	1	_	_	_	3	47	54	19	9	137	6	22
Rural																			
Caistor	14,370	253	176	_	_	_	_	_	_	_	_	_	1	2	3	1	6	2	4
Gainsborough	13,740	228	135	_	_	_	_	_	_	_	_	_	3	1	3	_	7	_	_
Glanford Brigg	32,980	493	318	2	_	1	_	_	1	_	_		7	12	4	1	23	_	2
Grimsby	14,180	255	129	2	_	_	_	1	_	_	_		3	3	_	_	18	_	_
Horncastle	12,550	193	115	-	_	_	_	_	_	_	_	2	1	5	_	_	10	_	1
Isle of Axholme	14,290	255	183	2	2	1		_	1	_	_	_	4	2	1	_	18	3	1
Louth	18,210	298	204	-	1	_	_	_	_	_	_	_	3	1	3	2	14	_	2
Spilsby	23,500	356	308	1	_	-	-	_	_	-	_	1	7	4	3	4	30	1	2
Welton	15,980	300	175	1	_	_	-	_	-	_	_	_	3	2	3	4	10	_	1
Total	159,800	2631	1743	8	3	2	-	1	2	_	_	3	32	32	20	12	136	6	13
Total for Admini- strative County	316,800	5303	3517	26	5	6		2	2			6	79	86	39	21			35

number of births and deaths, together with analysis of causes of death.

Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, cl.:idbirth abortion	Congenital malformations	Other defined and ill-defined diseases	Motor vehicle accidents	All other accidents	Suicide	Homicide and operations of war	District
																		77.00		Urban
1	4	_	1	2	_	1	2	-	_	_	1	_	_	1	3	_	1	_	_	Alford
13	10	5	15	3	-	7	4	1	-	-	-	1	-	1	7	-	1	2	-	Barton-upon- Humber
12	9	_	13	1	_	1	_	1	_		1	_	_	_	11	_	3	_	_	Brigg
52	42	11	51	19	1	24	16	7	9	_	1	4	_	1	40	3	10	3	-	Cleethorpes Borough
26	39	11	32	9	_	3	18	2		_	2	8	_	5	37	_	5	1	_	Gainsborough
5	7	1	8	1	_	2	_	_	1	_	_	2	_	_	5	1	_	1	-	Horncastle
16	19	3	26	22	_	8	9	2	2	1	2	_	_	1	18	-	4	_	-	Louth Borough
8	12	-	14	2	-	1	1	-	1	-	-	3	-	-	4	-	-	-	-	Mablethorpe and Sutton
5	4	2	5	_	1	_	2	_	_	1	_	_	-	_	4	1	_	_	-	Market Rasen
65	100	10	57	23	2	19	22	4	5	_	5	6	_	7	52	10	11	4	2	Scunthorpe Borough
28	18	6	39	8	_	7	2	1	3	1	1	1	1	2	13	2	4	_	1	Skegness
6	5	2	10	3	-	5	-	-	1	-	-	-	-	-	5	-	3	1	-	Woodhall Spa
237	269	51	271	93	4	78	76	18	22	3	13	25	1	18	199	17	41	13	3	Total
																				Rural
25	35	6	35	16	3	5	3		_	3	2	1	_	1	16	_	3	3	-	Caistor
24	16	2	29	4	1	5	4	3	1	_	5	2	_	_	15	3	5	2	-	Gainsborough
35	51	7	68	17	_	8	12	4.	3	_	5	5	-	1	29	5	12	3	-	Glanford Brigg
18	17	4	16	8	_	9	5	1	3	_	1	_	-	1	13	1	3	2	-	Grimsby
16	20	5	14	13	1	3	1	_	-	_	-	1	-	2	13	2	2	3	-	Horncastle
35	27	6	21	2	1	5	12	2	2	_	4	1		2	22	3	1	2	-	Isle of Axholme
35	34	1	32	18	1	11	7	3	_	-	-	1	-	2	23	5	4	1	-	Louth
48	42	8	84	12	-	4	5	5	1	4	3	5	-	2	20	3	5	4	-	Spilsby
23	24	5	39	7	10	12	2	2	2	_	2	1	-	3	13	4	1	-	1	Welton
259	266	44	338	97	17	62	51	20	12	7	22	17	-	14	164	26	36	20	1	Total
496	535	95	609	190	21	140	127	38	34	10	35	42	1	32	363	43	77	33	4	Total for Admini- strative County

Causes of all deaths in the County at different ages, 1956

16. Diabetes	Causes of death	0—	i—	5—	15—	25—	45—	65—	75 and over	Total
2. Tuberculosis, other 3. Syphilitic disease 4. Diphtheria 5. Whooping cough 6. Meningococcal infections 7. Acute poliomyelitis 8. Measles 9. Other infective and parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, stomach 12. Malignant neoplasm, breast 13. Malignant neoplasm, uterus 14. Other malignant and lymphatic neoplasms 15. Leukaemia, aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. To a coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Coronary disease 12. Influenza 13. Pneumonia 14. Other circulatory disease 15. Leukaemia, aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Coronary disease 12. Influenza 13. Pneumonia 14. Other disease 15. Other disease 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Coronary disease 12. Influenza 13. Pneumonia 14. Other disease 15. Other disease or coronary disease 16. Ulcer of stomach and duodenum 17. Acute policy disease 18. Ale disease 19. Al		_	_	_		12	4	9	1	26
3. Syphilitic disease 4. Diphtheria 5. Whooping cough 6. Meningococcal infections 7. Acute poliomyelitis 9. Other infective and parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, stomach 12. Malignant neoplasm, breast 13. Malignant neoplasm, breast 14. Other malignant and lymphatic 15. Leukaemia, aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Other circulatory disease 12. Influenza 13. Pneumonia 14. Other diseases of each of the diseases 15. Other diseases of each of the diseases 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Other circulatory disease 12. Other circulatory disease 13. Pneumonia 14. Other diseases 15. Other diseases of each of the disease		-	-	1	1	2	1 -		-	5
4. Diphtheria 2 — <		-	-	-	100		2	1	1 2	6
5. Whooping cough 2	4. Diphtheria	-	-	-	_				-	0
6. Meningococcal infections	5. Whooping cough	2	_	_		1	1			1 -
7. Acute poliomyelitis .	6. Meningococcal infections	1	1	_	_		1	1		2 2
8. Measles	7. Acute poliomyelitis	_	_	_	_					1 -
9. Other infective and parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, lung bronchus 12. Malignant neoplasm, breast 13. Malignant neoplasm, uterus 14. Other malignant and lymphatic neoplasms 15. Leukaemia, aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 10. Other circulatory disease 11. Other circulatory disease 12. Influenza 13. Pneumonia 14. Other defined and duodenum 15. Other defined and ill-defined diseases 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease 19. Hypertension with heart disease 10. Other heart disease 11. Other circulatory disease 12. Influenza 13. Pneumonia 14. Other defined disease 15. Other defined and diarrhoea 16. Other defined and ill-defined diseases 17. Other defined and ill-defined diseases 18. Nephritis and nephrosis 19. Hyperplasia of prostate 19. Pregnancy, childbirth, abortion 19. Pregnancy, childbirth, abortion 19. Other defined and operations of war. 19. Hyperplasia of prostate 19. Other defined and ill-defined diseases 19. Hyperplasia of prostate 19. Other defined and operations of war.	8. Measles	-	-	_						-
10. Malignant neoplasm, stomach	9. Other infective and parasitic diseases	_	_	_		1	1	1		-
11. Malignant neoplasm, lung bronchus - - - 12 46 24 4 4 4 13. Malignant neoplasm, breast - - - 1 7 3 10 10 11 11 1 1 1 1 1	10. Malignant neoplasm, stomach	_	-	_						6
12. Malignant neoplasm, breast		_	1			1				79
13. Malignant neoplasm. uterus		-	1					1 2 3 3 3		86
14. Other malignant and lymphatic neoplasms — — 2 1 13 64 88 105 15. Leukaemia, aleukaemia — — — — — 2 — — 2 3 2 2 2 1 <td></td> <td></td> <td>1</td> <td></td> <td></td> <td>1</td> <td>1</td> <td>10 00</td> <td></td> <td>39</td>			1			1	1	10 00		39
15. Leukaemia, aleukaemia	14. Other malignant and lymphatic	j			_	1	'	3	10	21
16. Diabetes	The state of the s	-	-	2	1	13	64	88	105	273
17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 20. Other heart disease 21. Other circulatory disease 22. Influenza 23. Pneumonia 24. Bronchitis 25. Other diseases of respiratory system 26. Ulcer of stomach and duodenum 27. Gastritis, enteritis and diarrhoea 28. Nephritis and nephrosis 29. Hyperplasia of prostate 20. Other defined and ill-defined diseases 31. Congenital malformations 23. Other defined and ill-defined diseases 34. All other accidents 25. Suicide 26. Homicide and operations of war	The state of the s	-	2	_	-	2	2	2	2	12
17. Vascular lesions of nervous system — — — 5 64 136 291 18. Coronary disease, angina — — — 7 147 178 203 19. Hypertension with heart disease — — — 1 — 11 38 45 45 20. Other heart disease — — — — 11 38 45 45 45 40 10 44 44 11 — 29 43 117 11 38 45 45 41 — — — — 11 — — — — — — — — 11 — — 29 43 117 11 11 — — 29 43 117 11 11 12 42 110 44 — — — — 2 4 15 32 21 72 11 25 39 58 11 11 11 12 42 11 12 12 12 13 14 12 </td <td>*** *** ***</td> <td>-</td> <td> </td> <td>_</td> <td>-</td> <td>2</td> <td>8</td> <td>12</td> <td>13</td> <td>35</td>	*** *** ***	-		_	-	2	8	12	13	35
18. Coronary disease, angina 19. Hypertension with heart disease		-			_	5	64	136	291	496
19. Hypertension with heart disease		_	-	_	-	7	147	178	10/2/2019	535
20. Other heart disease		_	-	_	1	-	11			95
21. Other circulatory disease	111	1	_	_	1	12	42	and the same		609
22. Influenza		_	_	_	1	_				190
23. Pneumonia	100 miles	_	-		_	_				21
24. Bronchitis 4 — — 1 25 39 58 1 25. Other diseases of respiratory system 2 — — 2 12 6 14 26. Ulcer of stomach and duodenum 2 — — 1 10 9 12 27. Gastritis, enteritis and diarrhoea 1 — — — 2 4 3 28. Nephritis and nephrosis — — — 5 10 12 8 29. Hyperplasia of prostate — — — — 5 10 12 8 30. Pregnancy, childbirth, abortion — — — — — 8 34 31. Congenital malformations 23 2 2 1 <td></td> <td>16</td> <td>4</td> <td>1</td> <td>_</td> <td>3</td> <td>1975</td> <td></td> <td></td> <td>140</td>		16	4	1	_	3	1975			140
25. Other diseases of respiratory system 26. Ulcer of stomach and duodenum 27. Gastritis, enteritis and diarrhoea 28. Nephritis and nephrosis 29. Hyperplasia of prostate 30. Pregnancy, childbirth, abortion 31. Congenital malformations 32. Other defined and ill-defined diseases 69 8 3 2 21 44 52 164 33 32 33. Motor vehicle accidents 33. Motor vehicle accidents 34. All other accidents 25. Suicide 26. Ulcer of stomach and duodenum 27. 10. 9 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4	-	_	_	1	100000			127
26. Ulcer of stomach and duodenum 2 — — — 1 10 9 12 27. Gastritis, enteritis and diarrhoea 1 — — — — 1 2 4 3 28. Nephritis and nephrosis — — — — — — 10 12 8 29. Hyperplasia of prostate — — — — — — 8 34 30. Pregnancy, childbirth, abortion — — — — — — 8 34 31. Congenital malformations 23 2 2 1 3 2 2 1 <td>25. Other diseases of respiratory system</td> <td>2</td> <td>- 1</td> <td>_</td> <td>2</td> <td>2</td> <td></td> <td>1</td> <td></td> <td>38</td>	25. Other diseases of respiratory system	2	- 1	_	2	2		1		38
27. Gastritis, enteritis and diarrhoea 1 — — — — 2 4 3 28. Nephritis and nephrosis — — — — 5 10 12 8 29. Hyperplasia of prostate — — — — — — 8 34 30. Pregnancy, childbirth, abortion — — — — 1 —		2	-	-	_	0 9 1	100			34
28. Nephritis and nephrosis		1	- 1	_	_	_			155	10
29. Hyperplasia of prostate		_	-	_	_	5				35
30. Pregnancy, childbirth, abortion 23 2 2 1 1 1 1 1 1 1 1 3 3 2 3 3. Motor vehicle accidents 2 4 1 2 10 21 10 27 35. Suicide 2 4 1 5 36. Homicide and operations of war		_	- 1	_	_	_ }	_			30.00
31. Congenital malformations 23 2 2 1 1 1 1 1 1 1 2 1 32. Other defined and ill-defined diseases 69 8 3 2 21 44 52 164 33. Motor vehicle accidents 2 4 1 2 10 21 10 27 35. Suicide 2 4 1 2 10 21 10 27 36. Homicide and operations of war		_	_	_	_	,		0	1	42
32. Other defined and ill-defined diseases		23	2	2	1		1	-		22
33. Motor vehicle accidents	32. Other defined and ill-defined diseases	69			7 48 XI					32
34. All other accidents 2 4 1 2 10 21 10 27 35. Suicide 2 4 1 5 8 5	33. Motor vehicle accidente	_	_	2.5	92	5535		773		363
35. Suicide	34. All other accidents	2	4						0.000	43
36. Homicide and operations of war	35. Suicide	_	_			200			6300	77
	36. Homicide and operations of war	-	-	_	_				5	33
Total 123 21 18 26 136 647 858 1688 351	Total	123	21	18	26	136		959	1600	3517

INFANT AND CHILD MORTALITY

Causes of all deaths between ages 0-16 years for 1956

During the year 1956 168 children between 0—16 years of age died. In 1947 the figure was 332 and it will be seen, therefore, that since that time the annual number of deaths has been halved, in spite of the fact that there has been a considerable increase in the population of this age group. The tables which follow show the cause of death and the stage in the life of the child at which death occurred.

Causes of death in infants during first week of life

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Prematurity	41	53 9	20.6
Congenital defects	11	14.5	6.5
Birth injuries	8	10.5	4.7
Respiratory diseases	7	9.2	4.2
Atelectasis	5	6.6	3.0
Other causes Accident or	3	3.9	1.8
Misadventure	1	1.3	.6
	76	100.0	45.3

Prematurity is still by far the greatest single cause of death in this group. The statistics show no improvement in the position over the previous year. Indeed there is by comparison a deterioration as far as some of the causes are concerned for although the total number of deaths from prematurity in 1956 was the same as in 1955 the total number of deaths in this group decreased from 94 in 1955 to 76 in 1956.

Causes of death in infants 1 week-1 month of age

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Congenital defects Respiratory diseases	9 5	42.9 23.9	5.3 3.0
Infection	5	23.9	3.0
Accident	1	4.7 4.7	.6
Other causes	1	4.7	.6
	21	100.0	12.5

From these tables it will be seen that no premature child who survived the first week, died of prematurity at a later date. It might be justly said that this is an indication of the high standard of medical and nursing care bestowed upon the infants, both at home and in hospital.

Congenital defects still heads the list in this group. Medical research is still a long way from discovering the causes but it is obvious that they are genetic and therefore not forseeable.

Respiratory disease and infection figure more prominently as causes of death than one would hope to find in this group and it is regrettable that the number of deaths due to infection has increased considerably compared with the figure for 1955.

Causes of death in infants 1 month-3 months of age

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Respiratory disease Congenital defects	6	67.0 11.0	3.6 0.6
Infection Accident	i	11.0	0.6 0.6
Other causes	i	11.0	0.6
	9	100.0	5.4

This is a quiet period in a child's life. The threat of loss of life from prematurity or congenital defects has largely gone. Infection remains to be met, but at this period the child's social environment remains fairly constant, and contact with infection is usually confined to respiratory infection. Though there were six deaths from respiratory causes, on the whole, this group was very healthy and accounted for only 5.4% of all deaths up to 16 years of age.

Causes of death in infants 3 months-1 year of age

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Respiratory disease Infections Congenital defects Other causes	12 4 1 1	66.7 22.2 5.5 5.5	10.7 2.7 0.6 0.6
	18	100.0	14.6

In this group respiratory disease and other infections take a heavy toll of life, accounting for sixteen of the eighteen deaths.

Causes of death in infants 1-5 years of age

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Respiratory disease Accidents or	7	28	4.1
Misadventure	6	24	3.5
Infection	6	24	3.5
Congenital defects	2	8	1.2
Other causes	4	16	2.4
	25	100	14.7

Of all the deaths in this group, almost a quarter are accidental in origin and it is indeed a misfortune that preventive and curative medicine should have combined to reduce the number of deaths due to illness and disease only to find this reduction largely offset by the number of deaths due to accidents.

Causes of deaths in children 5—16 years of age

Cause	Number of deaths	Percentage of total deaths in this age group	Percentage of total deaths among children up to 16 years of age
Accident or Misadventure Respiratory disease Tuberculosis Congenital defect Other causes	10 2 1 1 5	52.6 10.5 5.3 5.3 26.3	6.0 1.2 0.6 0.6 3.0
	19	100.0	11.4

Once again accidental deaths predominate in this age group accounting for more than half the deaths in the group. It is however pleasing to be able to record a fall of about 25% in accidental deaths compared with 1955.

Causes of death in all ages 0-16 years

Cause	Number of deaths	Percentage of total deaths among children up to 16 years of age
Prematurity	41	24.4 approx.
Respiratory disease	39	23.2
Congenital defect	25	14.9
Accident or	977791	100000
Misadventure	19	11.3
Infection	16	9.4
Birth Injury	8	4.7
Atelectasis	6	3.5
Tuberculosis	1	1.5
All other causes	13	8.8
	168	100

Last year attention was drawn to the fact that year by year since 1947, when statistics were first prepared, the number of infant and child deaths had fallen. Not only has that position been maintained but the reduction in 1956 was a substantial one, the number of such deaths being 168 compared with 199 in the previous year.

SANITARY CIRCUMSTANCES OF COUNTY

Housing

The most important aspect of this work, especially in the rural districts, has been the improvement of property by way of grant aid under the Housing Act, 1949.

Details for the whole county are as follows:-

Boroughs and	Urban Districts	Rural Districts			
No. of houses subject to	No. of houses subject	No. of houses subject to	No. of houses subject		
application for grant	to grant	application for grant	to grant		
69	60	683	602		

It will be seen therefore that grants were made in respect of 662 houses compared with a figure of 640 in 1955. Slum clearance has also been commenced.

Conversion of Pail Closets to Water Closets.

Some 847 pail and vault closets were converted to water closets during the year of which 767 were in rural districts.

This represents an increase of 247 over 1955.

Refuse Collection and Disposal

A weekly collection of refuse is maintained in the urban districts but in the rural districts the period between collections varies on the whole from one to three weeks. In the smaller villages in the Horncastle Rural District the frequency of collection is only quarterly.

The shortage of suitable covering material for refuse tips appears to be fairly general. Fortunately most

tips are a considerable distance from centres of population so that few nuisances to householders arise.

Camping Sites and Moveable Dwellings

There are 355 licensed sites for moveable dwellings and the total number of such dwellings permitted on the sites is 9,015, which represents an increase over 1955. The majority are in the coastal areas and the high standards of hygiene which have been achieved are largely due to the co-operation of all concerned, the public health inspector, camp owner and caravan occupier, and the fullest use has been made of the various services provided by the local authorities.

The County Council's camp at Ingoldmells continued to operate in a satisfactory manner.

Factories

There are 1,642 factories on the registers of district councils. Of these 279 are without mechanical power and the officers of district councils are responsible for the enforcement of provisions relating to general cleanliness, over-crowding, temperature, ventilation, drainage of floors and sanitary accommodation. In the remaining 1,363 factories, mechanical power is used and district councils only enforce the provisions relating to adequate sanitary accommodation.

A total of 2,134 inspections of factories was made during the year, and the number of defects dealt with was 96.

Water Supplies

The year which has passed has marked the commencement of a new policy insofar as water supplies are concerned, by the issue of circular 52/56 by the Minister of Housing and Local Government. The circular requests all statutory water undertakers to proceed as a matter of urgency with the suitable regrouping of undertakings, in order to promote the most effective use of water resources and to provide a reliable and efficient service at an economic cost with adequate technical staff.

The policy had already received consideration in the north of the county and the Minister has issued a draft order relating to the formation of a joint all purpose water board, covering the areas now served by the Grimsby, Cleethorpes and District Joint Water Board, the North Lindsey Water Board and the Caistor Rural District Council. A public inquiry has been held, when the Order was strongly contested and the Minister has since stated that, whilst he is still of the opinion that the long term interests of the area as a whole would best be served by a single board, he will consider two all-purpose water boards to cover the whole area.

The Minister has also suggested that statutory water undertakings in Nottinghamshire which are covered by the Sherwood Area Water Authorities' Regional Advisory Committee and authorities mainly in West Lindsey including Gainsborough Urban District Council, Gainsborough and Welton Rural District Councils, together with Lincoln City Council, should combine to form a single water board. Preliminary discussions have taken place in connection with this matter.

In the eastern sector of the county the East Lindsey Advisory Water Committee has been actively engaged in seeking advice from a team of experts appointed by the British Waterworks Association on methods of improving the undertakings in the area. The grouping of undertakings broadly covering the Louth-Horncastle-Woodhall Spa areas and the Mablethorpe-Alford-Spilsby-Skegness areas has been recommended by the team and is receiving the consideration of the authorities concerned.

All of these proposals cover, very broadly, areas which are served by the same major sources of supply or which on the whole obtain water from the same gathering grounds.

Shortages in the Horncastle Urban District and in the parishes of West Ashby and Hemingby which are served by the Horncastle Water Company continued.

The following table indicates the schemes which have been dealt with for financial assistance under the Rural Water Supplies and Sewerage Acts 1944-1953 and shows the position relating to the stage of the work:—

Rural District	Details of Scheme	Ministry Grant	County Council Grant	Stage of work Work deferred by Ministry. Work nearing completion.	
Glanford Brigg	Extensions of main in parishes of Barnetby, Barrow on Humber, Scawby and Wrawby. Estimated cost—£4,400	£1,100 (lump sum)	£74 for 30 years.		
Horncastle \	Rising main from Raithby Horncastle R.D to Stenigot, Stenigot £110.843, reservoir gravity main to Louth R.D. Horncastle R.D. boundary £7,917	£1,720 for 30 years. £160 for 30 years	£1.720 for 30 years, £160 for 30 years		
Horncastle	Trunk main from Louth R.D.C. boundary. Reservoirs at Winceby, Flint Hill and Mareham on the Hill Estimated cost £118,000	£3,310 for 30 years	£3,020 for 30 years		
Isle of Axholme	Extensions (i) parish of Wroot Estimated cost—£1,220	£275 lump sum	£13 for 30 years	Work	
	(ii) West Hale, Epworth Estimated cost—£1,440 Estimated cost	£400 lump sum	£25 for 30 years	completed	
Spilsby	Further development of (i) £55,000 Regional scheme based on Driby source by two stages (ii) £86,886	£860 for 30 years £1,570 for 30 years	£860 for 30 years £1,570 for 30 years	Work proceeding	

Sewerage and Sewage Disposal

Progress in this field has been curtailed, in accordance with the general policy laid down in the Ministry of Housing and Local Government Circulars 10/56 and 11/56 which relate to the restriction of capital expenditure.

Schemes for the provision of sewerage and sewage disposal have on the whole been affected by the financial

restriction to a much greater extent than those for water supplies.

The following table indicates the schemes which have been dealt with for financial assistance under the Rural Water Supplies and Sewerage Acts 1944-1953 and shows the position relating to the stage of the work—

Rural Dis	trict	Details of Scheme	Munistry Grant	Grant Council	of Work	
		Sturton by Stow and Stow Village Scheme Estimated cost—£43,585	£1,000 for 30 years	£14,100 (lump sum)	Work not ye commenced. Section of scheme to serve proposed school to be carried or as first stage.	
Gainsboro	ough	Gate Burton and Marton Estimated cost—£28,591	£560 for 30 years	£8,139 (lump sum)	Work not ye commenced	
Glanford Brigg		Messingham and Bottesford Stage II Laying sewers—Estimated cost—£147,200	£2,500 for 30 years	£40,722 (lump sum)	Work nearing completion	
Grimsby Humberston—Lay		Humberston—Laying sewers—£31,758	£432 for 30 years	£6,640 (lump sum)	Work complete	
Isle of Axholme		Epworth and Belton Estimated cost—£107,953	£2,000 for 30 years	£29,067 (lump sum)	Schemes divide into 2 stages in order to pro	
		Haxey Estimated cost—£19,920	£440 for 30 years	£6,395 (lump sum)	vide for nev	
		West Butterwick Estimated cost—£12,160	£250 for 30 years	£3,633 (lump sum)	Work deferred by Ministry.	
Spilsby		Ingoldmells part scheme for parish (excluding east of Roman Bank) Estimated cost—£71,450	£1,800 for 30 years	£21,890 (lump sum)	Work deferred by Ministry.	
Spilsby		Anderby Creek—scheme for village Estimated cost—£21,760	£300 for 30 years	£4,612 (lump sum)	Work deferre by Ministry.	
Welton	***	Saxilby scheme for village Estimated cost—£69,800	£1,500 for 30 years	£23,000 (lump sum)	Work deferre by Ministry (Scheme divide into 2 stages).	

INSPECTION AND SUPERVISION OF FOOD AND DRUGS

Sampling of Food and Drugs

The law relating to food and drugs has been subject to little alteration during the year. The new regulations are:—

The Milk and Dairies (Channel Islands and South Devon Milk) Regulations, 1956, which prescribe that milk sold under these designations should contain not less than 4.0 per cent of milk fat.

The Flour Composition Regulations, 1956, which prescribe that flour should contain certain minimum

quantities of nutrients including iron, vitamin B and nicotinic acid.

The Food Standards (Curry Powder) (Amendment) Regulations, 1956, and the Food Standards (Tomato Ketchup) (Amendment) Regulations, 1956, which raise the tolerance of lead which may be present in currry powder and tomato ketchup to 20 and 50 parts per million in lieu of the former standard of 10 and 20 parts per million,

respectively.

No legal standard relating to the meat content has yet been made for pork and beef sausages and deficiencies in accordance with the former standards of 65 and 50 per cent of meat respectively continue to occur. Samples of potted meat have been taken with a view to maintaining potted meat and meat paste as two separate commodities. The trade in general recognise that the former should not contain cereal filler although no legal standard exists, but the latter is governed by the Food Standards (Meat Paste) Order which does permit cereal filler, providing that the minimum meat content is not less than 55 per cent.

During the last quarter of the year a laboratory at the County Offices was equipped with a Gerber Centrifuge and associated apparatus for the testing of informal samples of milk. This has enabled follow-up samples from herds known to be giving milk naturally deficient in fat and non fatty solids to be kept under close observation and improvement effected. Additional routine samples of processed milk, including that supplied by contract to

schools and county homes, have been examined.

The following table gives particulars of samples examined by the Public Analyst:-

								Number Analysed	Genuine	Adulterated or otherwise below standard
1.	Milk							499	437	62
2.	Processed Milk Products (ncludir	ng cro	eam, b	utter ar	nd ice c	ream)	77	74	3
3.	Edible Fats and Oil			***	***			38	38	_
4.	Preserves							16	16	_
5.	Tinned, Bottled and Dried	Article	:S					34	34	_
6.	Alcoholic Beverages	***						19	19	
7.	Non-Alcoholic Beverages							38	37	1
8.	Sugar and Flour Confectio	nery						26	26	
9.	Meat and Fish Products (n	ot incli	ided	in 5)				72	. 54	18
0.	Vinegars, Pickles, Sauces, S	spices,	Flavo	ourings	and E	ssences		51	51	_
1.	Cereal Products							20	20	_
12.	Medicines and Drugs							97	95	2
3.	Miscellaneous							88	88	_
					To	otal		1,080	994	86

Certain samples of milk were found to contain added water and legal proceedings were instituted, as indicated in the following table:—

Sample No. Percer Added		Percentage of Added Water	Fine and Costs				
A	3742	8	£10 fine and £1 1 Od. costs				
A	3846	20	£50 fine and £1 8 Od. costs				
A	3847	65	£75 fine and £1 8 Od. costs } same vendor				
В	3029	5]	£5 fine and £5 0 Od. costs				
В	3030	12	(same vendor)				

In the other cases where samples failed to satisfy the prescribed tests, warnings were issued or advice was given.

In addition four complaints of food not being of the substance demanded were investigated and warnings issued to the firms concerned. These included:—

Ball-pen in loaf of bread Cockroach in biscuit

Pencil sharpener in one pint bottle of milk

Disinfectant in soft drink

Merchandise Marks Acts, 1887 to 1953

Inspections under the above Acts have been carried out in order to ensure the correct marking or labelling of imported food stuffs and informal action has been taken in numerous instances. The work is associated with duties under the Food and Drugs Act.

Specified Areas

The larger part of the County is now included in the two specified areas made by the Minister of Agriculture, Fisheries and Food. The Orders stipulate that all milk which is sold by retail, including sales in catering establishments, must be sterilised, pasteurised or tuberculin tested.

The areas in the county which are covered by these two orders are as follows:-

Cleethorpes and Scunthorpe Boroughs, Barton, Brigg, Market Rasen and Gainsborough Urban Districts, Caistor,

Brigg, Grimsby, Gainsborough and Isle of Axholme Rural Districts.

These districts have a total population of 209,050 which is approximately two thirds of the population of the County. In addition, most of the milk sold in other non specified parts of the County is now designated.

Supervision of Pasteurising Plants

The six pasteurising plants under supervision by the County Council's officers, have functioned satisfactorily during the year, as indicated by the following table.

	Tuberculin tested (Pasteurised		Pasteurised Milk			
Total No. of Samples	Samples failing to satisfy methylene blue reduction test	Samples failing to satisfy phosphatase test	Total No. of Samples	Samples failing to satisfy methylene blue reduction test	Samples failing to satisfy phosphatase test	
272	Nil	2	336	Nil	2	

In addition to routine sampling, the sections of the plant which are important in order to ensure the correct heat treatment of the milk are subject to regular checking. The plants are also subject to periodic examination before use in order to ensure that the system of cleansing and sterilisation, after each day's use, is satisfactory.

Biological Examination of Milk

During the year 730 samples of raw milk were taken for biological examination. Eight samples showed

positive evidence of tuberculosis and, as a result, eight cows, one from each herd, were slaughtered.

As two samples gave inconclusive results, the herds concerned were examined by the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food but no conclusive evidence of infection by tubercle was obtained.

In all cases the milk was normally subject to pasteurisation except that which was consumed by the producer

or his employees.

Of the above samples 36 showed positive evidence of Brucella Abortus. As the milk from six of the herds concerned was retailed in its raw state, quarter samples were taken and the producers advised accordingly.

Food Hygiene Regulations, 1955

Following the coming into operation of the Food Hygiene Regulations, arrangements were made for Mr. Morley Parry, Food Hygiene Advisory Officer of the Ministry of Health, to give a talk about them. The Chairman of the County Council's Health Committee presided over the meeting which was attended by medical officers of health and public health inspectors from all parts of the geographical county of Lincolnshire.

The departments of the County Council concerned with catering, especially the school meals department, have been actively engaged in considering measures necessary in order to bring food premises up to the standards

prescribed by the regulations and considerable progress has been made.

Meat Inspection

The following table shows the amount of meat inspected for human consumption by the officers of district councils. This is almost 100 per cent of all animals slaughtered.

Carca			affected with		No. affect- ed with Cysticec- osis	No. affected with con- tions other than Tub- culosis and Cysticeco		uber-
Animal	Total number	Whole carcases condemned	Parts of carcases condemned	Total	Part carcases or organs	Whole carcases condemned	Parts of carcases condemned	Total
Cows	920	12	107	119	1	13	98	111
Bovines	14,442	44	988	1.032	57	28	2,829	2000
Calves Sheep &	430	_	2	2	-	14	27	2,857
Lambs	35,736	_		_	_	106	580	101
Pigs	40,848	15	1,243	1.258	1	177	259	686
Horses	Nil			-		177	239	436

^{*} No cases occurred where a complete carcase was found to be affected.

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

Once again there was a fall in the number of attendances at ante-natal clinics. The number of expectant mothers who attended increased by 119 but this can be explained by the fact that many expectant mothers are attending merely to have blood specimens taken. Many of them make this one visit and never attend again.

During the year the clinics at Louth and Skegness were closed but a new clinic was opened at Mablethorpe. A start was made in 1956 in giving ante-natal instruction to expectant mothers. A class was opened in Scunthorpe at which a physiotherapist gives instruction in ante-natal exercises and relaxation and a doctor gives talks

and conducts group discussion on ante-natal care. The following table gives details of attendances at ante-natal clinics:-

Attendances at ante-natal clinics, 1956

Clinic					No. of expectant mothers	No. of attendances	Sessions held	Average attendances
Brigg Cleethorpes Crowle Haxey Horncastle Immingham Lincoln Mablethorpe Market Raser Scunthorpe	n				12 210 20 29 12 22 16 31 36 83	44 232 63 95 52 25 48 50 79	23 51 24 23 28 20 24 13 24 51	2 5 3 4 2 1 2 4 3 2
Attendances for Ante-Natal Examination at Infant Welfare Centres			471 33	801 110	281	3		
			Total		504	911	281	

Maternity Outfits

There were 2,019 maternity outfits issued during the year to mothers having their baby at home.

Care of unmarried mothers

There was a considerable increase during the year in the number of unmarried mothers admitted to special homes catering for this type of case. Under this arrangement which the County Council have with the Lincoln Diocesan Association for Moral Welfare 46 cases were dealt with, compared with 21 during the previous year. The increase is considered to be due partly to increases in illegitimate births and partly to the fact that facilities offered by the Diocesan Association are now more widely known. Child Welfare

Infant Welfare Centres

An additional infant welfare centre was opened during the year at Grainthorpe, bringing the total to 56. Although there was a fall in attendances of about 4,500, the centres continue to be well attended and, when one considers the fact that much of the county is sparsely populated and that many mothers have to travel long distances to reach a centre it is evident that the centres are popular and much appreciated.

The following table gives details of infant welfare clinics held during the year:—

Infants attending infant welfare centres during 1956

Alford			r one	and	r one under years	Over and u	r two inder years	Te	otal	ssions	Attendances
Ashby 313 3,550 153 529 299 508 765 4,587 103 458 103 459 103 104 104 104 105 104 104 104 105 104 104 105	Centres	No. Attended	No. of Attend- ances	No. Attended	No. of Attend- ances	No. Attended	No. of Attend- ances	No. Attended	No. of Attend- ances	103 24 28 28 51 51 51 24 24 24 24 24 24 24 24 24 24 24 24 24	
Binbrook	Ashby Bardney Barnetby Barrow-upon-Humber	313 17 20 11	3,550 123 259 174	153 8 13 10	529 51 101 100	299 18 38 26	508 55 202 77	765 43 71 47	4,587 229 562 351	103 24 28 28	45 10 20 13
Cleethorpes	Brigg Broughton Burton-upon-Stather Caistor	32 44 32 17 15	377 1,062 487 170 147	28 26 17 3 10	120 452 157 54 49	33 23 17 14 21	73 290 92 70 55	93 93 66 34 46	570 1,804 736 294 251	51 51 24 24 24 24	11 35 31 12 10 8
Spital Terrace 120 1,000 61 193 93 200 274 1,393 78 18	Cleethorpes Conningsby Crowle East Halton Epworth Fiskerton	48 43 11 27 15	326 426 155 224 180	26 21 14 20 16	47 88 75 78 84	16 31 29 29 34	27 105 177 94 66	90 95 54 76 65	400 619 407 396 330	24 24 24 22 22 24	17 26 17 18 14
Woods Terrace 83 1,138 42 301 86 329 211 1,768 47 38 Goxhill 16 206 8 95 22 100 46 401 24 17 Grainthorpe 6 130 15 71 14 42 35 243 24 10 Haxey 20 138 14 77 42 89 76 304 24 13 Hemswell R.A.F. 44 289 21 57 31 92 96 438 26 17 Horncastle 58 632 33 222 54 325 145 1,179 51 23 Immingham 45 10.05 31 316 36 305 112 1.686 51 33 Keadby 14 187 4 65	Gainsborough Spital Terrace	25000			2000		00000	22220101	200,000	100.00	
Grainthorpe 6 130 15 71 14 42 35 243 24 10 Haxey 20 138 14 77 42 89 76 304 24 13 Hemswell R.A.F 44 289 21 57 31 92 96 438 26 17 Holton-le-Clay 7 97 8 29 14 42 29 168 24 77 Horncastle 58 632 33 222 54 325 145 1,179 51 23 1mmingham 45 401 14 174 29 161 88 736 21 35 Keadby 45 1,065 31 316 36 305 112 1,686 51 33 Keelby 14 187 4 65 26 171 44 423 23 18 Kirton-in-Lindsey 24 232 14 35 17 63 55 330 24 14 Kirton-in-Lindsey R.A.F. 24 138 10 37 22 84 56 259 24 11 Laceby 21 253 11 160 13 183 45 596 23 26 Lincoln 4 18 4 9 22 32 30 59 28 2 Louth 104 1,083 43 244 55 268 202 1,595 52 31 Mablethorpe 87 1,521 50 202 101 399 238 2,122 22 29 Market Rasen 54 580 28 101 38 191 120 872 28 31 Messingham 17 392 11 223 26 189 54 804 50 16 New Holland 10 307 16 181 36 170 62 658 23 28 North Kelsey 3 344 4 43 22 104 29 191 24 8 North Komercotes 10 254 22 180 33 51 55 599 731 51 48 190 48 46 203 24 9 50 50 50 50 50 50 50	Woods Terrace										38 17
Horncastle	Grainthorpe Haxey Hemswell R.A.F	20 44	138 289	14 21	77 57	42 31	89 92	76 96	304 438	24 26	13 17
Kirton-in-Lindsey 24 232 14 35 17 63 55 330 24 14 Kirton-in-Lindsey R.A.F. 24 138 10 37 22 84 56 259 24 11 Laceby 21 253 11 160 13 183 45 596 23 26 Lincoln 4 18 4 9 22 32 30 59 28 2 Louth 104 1,083 43 244 55 268 202 1,595 52 31 Mablethorpe 87 1,521 50 202 101 399 238 2,122 52 41 Manby 33 352 23 146 36 134 92 632 22 29 Market Rasen 54 580 28 101 38	Horncastle Immingham	58 45	632 401	33 14	222 174	54 29	325 161 305	145 88 112	1,179 736 1,686	51 21 51	23 35 33
Lincoln 4 18 4 9 22 32 30 59 28 2 Louth 104 1,083 43 244 55 268 202 1,595 52 31 Mablethorpe 87 1,521 50 202 101 399 238 2,122 52 41 Manby 33 352 23 146 36 134 92 632 22 29 Market Rasen 54 580 28 101 38 191 120 872 28 31 Messingham 17 392 11 223 26 189 54 804 50 16 North Kelsey 3 44 4 43 22 104 29 191 24 28 23 28 North Kelsey 3 44 4 43 32 104 29 191 24 28 29<	Kirton-in-Lindsey R.A.F.	24 24	232 138	14 10	35 37	17 22	63 84	55 56	330 259	24 24	14 11
Market Rasen 54 580 28 101 38 191 120 872 28 31 Messingham 17 392 11 223 26 189 54 804 50 16 New Holland 10 307 16 181 36 170 62 658 23 28 North Kelsey 3 44 4 43 22 104 29 191 24 8 North Somercotes 10 254 22 180 33 151 65 585 27 22 Saxilby 14 107 13 48 19 48 46 203 24 9 Scunthorpe 268 3,718 149 641 259 963 676 5,322 118 45 Skegness 136 2,004 104 312 47 243 287 2,559 51 50	Lincoln Louth Mablethorpe	4 104 87	18 1,083 1,521	4 43 50	9 244 202	22 55 101	32 268 399	202 238	59 1,595 2,122	28 52 52	2 31 41
North Somercotes 10 254 22 180 33 151 65 585 27 22 Saxilby 14 107 13 48 19 48 46 203 24 9 Scunthorpe 268 3,718 149 641 259 963 676 5,322 118 45 Skegness 136 2,004 104 312 47 243 287 2,559 51 50 South Killingholme 22 177 9 74 23 141 54 392 24 16 Spilsby 40 385 18 91 41 255 99 731 51 16 Tetney 26 239 11 36 13 31 50 306 24 13 Ulceby 17 205 9 94 22 121 48 420 23 18 Wainfleet </td <td>Market Rasen Messingham New Holland</td> <td>54 17</td> <td>580 392</td> <td>28 11</td> <td>101 223 181</td> <td>38 26 36</td> <td>191 189 170</td> <td>120 54 62</td> <td>872 804 658</td> <td>28 50 23</td> <td>31 16 28</td>	Market Rasen Messingham New Holland	54 17	580 392	28 11	101 223 181	38 26 36	191 189 170	120 54 62	872 804 658	28 50 23	31 16 28
Skegness 136 2.004 104 312 47 243 287 2.559 51 50 South Killingholme 22 177 9 74 23 141 54 392 24 16 Spilsby 40 385 18 91 41 255 99 731 51 14 Tetney 26 239 11 36 13 31 50 306 24 13 Ulceby 17 205 9 94 22 121 48 420 23 18 Wainfleet 41 521 30 170 84 397 155 1,088 24 45 Waltham New 43 406 21 108 27 123 91 637 22 29 Waltham Old 29 332 24 60	North Somercotes Saxilby	10 14	254 107	22 13	180 48	33 19	151 48	65 46	585 203	27 24	22 9
Tetney 26 239 11 36 13 31 50 306 24 13 Ulceby 17 205 9 94 22 121 48 420 23 18 Wainfleet 41 521 30 170 84 397 155 1,088 24 45 Waltham New 43 406 21 108 27 123 91 637 22 29 Waltham Old 29 332 24 60 28 100 81 492 22 22 Welton, Lincoln 20 177 20 135 28 137 68 449 28 16 Winteringham 18 204 10 98 12 35 40 337 24 14 Woodhall Spa 13 139 16 64 13 37 42 240 23 11	Skegness South Killingholme Spilsby	136 22 40	2,004 177 385	104 9 18	312 74 91	47 23 41	243 141 255	287 54 99	2,559 392 731	51 24 51	50 16 14
Waltham Old 29 332 24 60 28 100 81 492 22 22 Welton, Lincoln 20 177 20 135 28 137 68 449 28 16 Winteringham 18 204 10 98 12 35 40 337 24 14 Winterton 18 146 11 82 28 95 57 323 22 15 Woodhall Spa 13 139 16 64 13 37 42 240 23 11	Tetney Ulceby Wainfleet	17 41	205 521	9 30	94 170	22 84	121 397	48 155	420 1,088	23 24	18 45
Woodhall Spa 13 139 16 64 13 37 42 240 23 11	Waltham Old Welton, Lincoln Winteringham	29 20 18	332 177 204	24 20 10	60 135 98	28 28 12	100 137 35	81 68 40	492 449 337	22 28 24	22 16 14
	Woodhall Spa	13	139	16	64	13	37	42	240	23	11

Toddlers' Clinics

Special toddlers' clinics continue to be held at each of the County Council's main clinics and parents of children aged two to five years are invited to bring these children by appointment for a complete overhaul. During the year 1,891 children were examined at 267 toddlers' sessions. The fact that 266 children were found to need treatment indicates the importance of these periodic examinations during the early years of a child's life and yet only comparative few mothers can be persuaded to bring their children to the toddlers' clinics.

Teeth		***			***	 91	he toddlers' sessions h Lungs				 10
Skin						 15	Development	a.	Hernia		 3
Eyes	a.	Vision				 1		b.	Other		 3
	b.	Squint	****	7.9995	***	 13	Orthopaedic	a.	Posture		 _
	C.	Other				 6		b.	Flat foot		 15
Ears	a.	Hearing				 3		c.	Other		24
	b.	Otitis M	ledia	Rt.	2000	 3	Psychological	a.	Developme		
		Otitis M	ledia	Lt.		 4	- John State Brown	b.	Stability		 1
	C.	Other				 2	Other Defects and		ases		 41
Nose	or Tl	hroat				 17	o their Beleets time	Disco	1505	*	 41
Speech	h					 7					
Cervic	al G	lands				 1					
		Circulatio				 6					

Care of Premature Infants

The County Council's arrangements for the care of premature infants have continued. Those who are born at home are given special nursing care by the County Council's nurse-midwives and when nursing is no longer required the Health Visitor takes over. Those premature infants who are born in hospital or maternity homes are given particular attention by Health Visitors on discharge. Special equipment such as premature baby cots are provided by the County Council where necessary. The number of premature live babies born in 1956 was 334, a decrease of 34 compared with the previous year. There were 74 premature still births compared with 67 in the previous year. The following table gives detailed information regarding premature births:—

Total ... 266

						Pre	matu	re live b	irths								Premat still birth	
Weight at Birth		Born is			rn at hon ursed en at hon	tirely	Tr.	rn at hon ansferre hospital fore 28ti	d to on or	he	rn in no ome and stirely 1	nursed	ferr	rn in n ne and red to he or befo day	trans- ospital			
(1)	T'tl (2)	Died within 24 hrs. of birth (3)	Sur- vived 28 days (4)	T'tl (5)	Died within 24 hrs. of birth (6)	Sur- vived 28 days (7)	T'ti	Died within 24 hrs. of birth (9)	Sur- vived 28 days (10)	T'tl (11)	Died within 24 hrs. of birth (12)	Sur- vived 28 days (13)	T'tl (14)	Died within 24 hrs. of birth (15)	Sur- vived 28 days (16)	Born in hos- pital (17)	Born at home	Born in nurs- ing home (19)
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	27	10	9	2	2		5	1	1			_				22	2	_
(b) Over 3 lb. 4 oz.up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	54	6	43	5		5	7	_	5	_						21	3	
(c) Over 4 lb. 6 oz.up to and including 4 lb. 15 oz. (2,000- 2,250 gms.	63	2	56	6	_	6	4		3	1		1				10	3	
(d) Over 4 lb. 15 oz.up to and including 5 lb. 8 oz. (2.250-2,500 gms.)	105	1	101	43	_	43	10	1	9	2	_	2		_		5	8	
Totals	249	19	209	56	2	54	26	2	18	3	_	3	_	_	_	58	16	_

^{*} The group under this heading includes any cases born in one hospital and transferred to another.

Day Nursery Accommodation

There was in 1956 only one day nursery administered by the County Council still open and the average daily attendance during the year was 14. Nearly half of the children attending the nursery did not come within the classification of priority, there being no need to limit admissions to priority cases in view of small numbers attending.

Welfare Foods

The arrangements for the distribution of welfare foods were extended during the year by the opening of two additional distribution centres. There were at the end of the year 150 centres from which during this year 182,488 tins of national dried milk, 31,246 bottles of cod liver oil, 13,669 packets of vitamin A and D tablets and 195,509 bottles of orange juice were distributed. The following table gives details of the average weekly issues year by year since the County Council assumed responsibility for distribution in 1954. From these figures it will be seen that the decline in the take-up of national dried milk has continued but that there has been a further substantial increase in the issue of orange juice.

Average Weekly Issues of Welfare Foods

Period	National Dried Milk	Cod Liver Oil	Vitamin Tablets	Orange Juice
27 week period ended 31/12/54	4,012	614	195	2,885
1955	3,647	636	243	3,417
1956	3,509	601	263	3,759

Dental Care

The year under review shows a slight improvement on the previous year as regards staffing, but no extension of the areas covered by the staff. Treatment is still not available under the Maternity and Child Welfare scheme in the Brigg, Barton-upon-Humber, Crowle, Epworth, Immingham, Caistor and Gainsborough areas, though it is provided where the patient is willing to undertake the travelling necessary to attend a distant clinic where there is a dental officer.

There has been an increase in the number of mothers applying for treatment. These are referred by general practitioners occasionally, but mostly by doctors on the staff of the health department or health visitors. Those from the general practitioners are predominantly ante-natal cases whilst those from our own staff are now almost entirely nursing mothers attending the infant welfare clinic. The relationship between the number of mothers or children attending maternity and child welfare clinics and attending for dental treatment varies greatly from one clinic to another, as can be seen from the following table:—

Patients attending Clinics

		ty and Child c Clinic	Maternity an Welfare Denta	d Child al Clinic
Clinic	Mothers for Ante-natal care	Children	Mothers	Children
Ashby	_	765	19*	7*
Cleethorpes	210	531	32	61 32
Horncastle	12 2 36	145	L 35	32
Spilsby	2	99	ſ	
Market Rasen	36	120	46	45 9
Louth		202	1	9
Scunthorpe (P.A.)	83	676	25	20
Skegness	annin .	287	2	4

These dental clinics wherever possible are run in conjunction with the maternity and child welfare clinic in order to save unnecessary travelling for the patients. Rarely, however are there enough maternity and child welfare patients to fill all the appointments at these dental sessions. The sessions are therefore mixed sessions of maternity and child welfare and school patients. By dividing these sessions up in proportion to the attendances of each class of patient, the time devoted to maternity and child welfare work can be assessed. It is getting less each year and now represents only a part of one session a week for each officer.

The following statistical analysis is given each year as a simple indication of the effectiveness of the work being done, the aim being to increase the number of teeth saved and reduce the number of teeth extracted and of con-

sequential artificial replacements.

Year	1950	1951	1952	1953	1954	1955	1956
Extractions per patient	6.73	3.40	2.86	1.54	4.57	2.04	3.74
Fillings per patient	.53	1.09	1.16	1.52	.90	1.30	1.20
Dentures per patient	.69	.96	.41	.47	.53	.90	.73
Ratio of partial to full dentures	.133	1.65	2.07	2.75	1.14	1.25	1.00

It will be seen from these figures that the proportion is tending to deteriorate but in view of the small number of patients involved this is of no great significance. Each year 5,000 mothers and 5,000 children become eligible for treatment. The former remain so for about 20 months and the latter for 5 years when they come under the school dental service. The proportion of these who apply for treatment under the maternity and child welfare dental scheme is almost negligible.

Of those inspected 7 mothers and 28 children did not require treatment. The majority of patients applying for treatment do so because of pain or very obvious dental defects. It is encouraging to be able to record however that in respect of dental treatment provided for children three teeth were filled or otherwise treated for conservation for each tooth extracted.

The majority of mothers seen by Mr. Hollier at the Scunthorpe Parkinson Avenue Clinic were referred to Mrs. Opie, the Oral Hygienist. Treatment was given to 17, all of whom were given instruction in oral hygiene. Scalings, polishings, gum treatments, etc., added up to 121.

A portable X-Ray Unit is available when required and film processing is done in the dark-room at the County Offices. The County Council's dental laboratory remained closed during the year but the equipment was moved to new premises in Lindum Road for reopening on 1st January, 1957, in connection with the new orthodontic scheme. Work has been sent out to dental laboratories outside the county.

The following tables give information regarding the number of patients provided with treatment and the form of treatment provided:—

(a) Numbers provided with dental care

	New patients examined	New patients needing treatment	New patients treated	Number made dentally fit	Appointments	Attendances
Expectant and nursing mothers	160	153	134	135	595	517
Children under five	178	150	147	112	186	204

(b) Form of treatment provided

				Expectant and nursing mothers	Children under
Extractions under-	local a	naestl	hetic	 163	20
-1	general	anae	sthetic	 256	48
Administrations of -	local a	naestl	hetic	 78	15
			sthetic	 42	15 32
Fillings				 160	91
Scalings and or gum to	reatme	nt		 64	13
Silver nitrate treatmen	t			 24	104
Other operations, dres	sings.	etc.		 218	23
Radiographs				 6	
Dentures -complete				 41	
—partial				 41	
—repairs				 3	_
Crowns				 _	
Inlays				 _	

MIDWIFERY AND HOME NURSING

The Midwifery and home nursing services in this county are in the main operated jointly by nurses qualified in and undertaking both midwifery and home nursing. At the end of the year the staff consisted of a superintendent nursing officer, two assistant nursing officers, one superintendent in charge (under the Superintendent nursing officer) of the services in Scunthorpe, 67 nurse/midwives, 8 midwives and eighteen district nurses.

Difficulty is still being experienced in filling staff vacancies. Almost invariably the only applications received

for nursing posts are from nurses who have some ties with the county.

In pursuance of the County Council's policy, four nurses and sixteen midwives attended refresher courses

during the year.

On 12th September, an invitation was extended to midwives and health visitors to attend a One Day Course on the education and care of women in childbirth by Dr. Grantly Dick Read. This course was provided by the Central Council for Health Education. Over half the midwives in the County were able to attend while the remainder had the opportunity to go to Grimsby when Dr. Grantly Dick Read gave a similar course there at a later date.

I have little doubt that to those women who have had children, childbirth is the most important event which has taken place in their lives. It seems, therefore, that no efforts should be spared in endeavouring to ensure that the whole process is looked upon by expectant mothers with confidence. Furthermore if expectant mothers are able to understand the actual mechanism of childbirth I have little doubt that pain can be almost eliminated with nearly all normal births.

Dr. Read gave three lectures and showed some interesting films. He talked in a way in which he could be easily understood and undoubtedly those midwives who heard him will be able to bring benefit to many women

they attend in the future.

In a large and sparsely populated county such as Lindsey it is easy for the nurse or midwife to feel isolated and out of touch. To counteract this, regular visits are paid to all members of the staff by the superintendent nursing officer or the assistants and from time to time group meetings of which there were 14 in 1956 are arranged to discuss matters of interest affecting the nurse and her work.

During the year the superintendent nursing officer and the two assistants paid the following visits:-

To midwives and nu	rses	employed	by	the Coun	ty Co	uncil	 		 404
To midwives in priva	ite p	ractice					 		 16
To maternity homes	and	hospitals				***	 	***	 16
To nursing homes							 		 29

Midwifery

The duties placed upon the County Council by the Midwives Act, 1951, are carried out by the superintendent nursing officer and her two assistants. The following table gives the number of midwives in practice in the county at the end of the year:—

Number of deliveries attended by Midwives in the Area during 1956.

			De	eliveries atte	nded	(
		Doctor i	not booked	Docto	r booked		
	No.	Doctor present	Doctor not present	Doctor present	Doctor not present	Totals	Cases in Institutions
Midwives employed by local health authority Midwives employed by hospital management committees	75 52	22	64	494 —	1,245	1,825	3,069
Midwives in private practice	9	1	16	10	31	31	
Totals	136	23	80	504	1,249	1,856	3,069

In addition to the cases shown in the foregoing table, the County Council's midwives attended 1,594 mothers in their own homes who had been confined in hospital but discharged before the fourteenth day, an increase of 306 over the figures for last year.

The number of home visits made by the County Council's Midwives to women in the ante-natal period was

15,603 and in the lying-in period 40,144.

The proportion of expectant mothers who had their confinement at home during the year was 37%, the same percentage as during the previous year.

In 73% of the home confinements gas and air analgesia was administered.

Home Nursing

The demand on the home nursing service, measured in terms of cases dealt with by the County Council's

nurses, again shows a decrease but the number of visits paid by nurses has slightly increased.

The increase in visits is probably accounted for by the increase in the number of visits to patients over 65 years of age who have received an average of 39 visits per patient compared with 25 per patient for all types of cases.

The following table gives details of the demand on the service year by year since 1949:—

Home Nursing 1949—1956

	19	949	1950	1951	1952	1953	1954	1955	1956
County population Nurses employed	299,0)40	308,600	309,800	310,900	312,300	313,500	316,200	316,800
(whole-time equivalent) Cases attended Average case per nurse * Visits paid Average visits per nurse Average visits per patient	167,2		7,208 153 156,719 3,334 21	7,867 163 164,278 3,423 20	8,256 168 182,703 3,729 22	51 8,697 170 191,257 3,730 22	51 8,502 167 201,442 3,950 24	8,001 163 185,528 3,786 23	49 7,557 154 187,861 3,834 25

HEALTH VISITING

There were forty four health visitors on the County Council's staff at the end of the year. Although the service provided during the year was satisfactory and all demands were met, there is little hope of the more important part of the health visitor's work being developed unless it is found possible to recruit up to the establishment of 55 approved by the Minister of Health or to relieve health visitors of tasks which can be carried out equally well by auxiliary helpers. Unless energetic and realistic steps are taken to attract to the profession each year a considerable number of new recruits, there is little or no hope of the number of health visitors in the county being increased to the figure of 55. Indeed the county will be fortunate if the present strength can be maintained. It is important therefore that attention should be given to the possibility of appointing auxiliary helpers to carry out duties which do not call for the training, skill and experience of a health visitor.

The health visitor is being called upon to enlarge the scope of her duties in many ways. For example, problem families are being given particular attention necessitating frequent visits by health visitors. The problem of old age has had its effect on the work of the health visitor who has had to give a great deal of time to dealing with the many problems which old age creates. The developing of health education inevitably involves a considerable extension of the health visitor's work. If she is to have the time to concentrate on these and other important aspects of her work some of the duties at present undertaken by her in connection with school medical inspections, school cleanliness inspections, vaccinations and immunisations at child welfare clinics must be transferred to other staff.

The County Council have a scheme for training health visitors but it was not possible to secure any trainees

during the year.

The County Council arrange for their health visitors to attend refresher courses about once every five years and last year five health visitors attended these courses.

The work which the health visitors carried out during the year is summarised as follows:-

Sessions attended:—				ar auring	Home visits to:—	nows.			
School Clinics			***	860	School children				5,106
Ante-Natal Clinics				281	Expectant mothers				1,623
Infant Welfare Centres				1,970	Infants under 1 year				33,742
Immunisation Clinics			1.00	205	Infants aged 1-5 years				52,072
Hospital Board Clinics				731	Mental defectives				2,724
School Medical inspectio	ns		• • • •	1,137	Tuberculous patients				3,511
Toddlers' Clinics	• • •		***	267	Psychiatric patients				183
					Old people				1,640
					Patients discharged from	n hosp	ital		319
					Others				3,520
		and the second			Examination of school ch	ildren	(cleanli	ness)	82,840

IMMUNISATION AND VACCINATION

Vaccination against Smallpox

Vaccination against smallpox continues to be undertaken both by general practitioners and by doctors employed by the County Council. There were 1,716 primary vaccinations carried out during the year compared with 1,538 for the previous year. Whilst it is gratifying to be able again to record an increase the number vaccinated is still far too low. The number re-vaccinated during the year was 281 compared with 224 for the previous year. In the following table the numbers of vaccinations and re-vaccinations are classified according to age groups and according to the county district in which they were carried out.

Vaccination and Re-Vaccination carried out during 1956

		Prima	ry vaccina	ations			Re-	vaccinatio	ns	
District		Age at d	late of va	ccination			Age at d	late of vac	cination	
	Under 1	1-5	5-15	15 or over	Total	Under 1	1-5	5-15	15 or over	Total
Urban										
Alford	14	3	-	1	18	_			1	1
Barton-on-Humber	20	4	1	5	30	_			3	3 7
Brigg Cleethorpes	18	3	-	6	27	_	_	-	7	1 1 1 1
Borough	78	19	8	23	128	-	1	1	33	35
Gainsborough	113	17	10	39	179	_	2	2	16	20
Horncastle	16	8	10	2	36	-	1	2	4	7 8
Louth Borough	52	7	6	9	74	_	1	-	7	8
Mablethorpe and	46	5	2	5	58	-	-	1	-	1
Manhat Dans	16	1		2	19	_	_	_	_	-
Scunthorpe	10		10 1000	-	1.7					
Borough	160	15	6	17	198		4	2	24	30
Classian	77	21	8	14	120	_	2	3	29	
Woodhall Spa	19	-	_	1	20	_	_	3 3	2	34 5
1										
Rural		7	3	10	86		_	1	11	12
Caistor	66 48	3	6	8	65			1	4	4
Gainsborough	98	9	13	12	132		1	6	20	27
Glanford Brigg		6	4	16	88		3	5	19	27
Grimsby	62 59	9	1	6	75	_	2	11	7	27 27 20
Horncastle		3	73	1	26		-	11	,	20
Isle-of-Axholme	22	3	2	7	80	_		6	12	18
:outh	69	2				-	-		10	14
Spilsby	101	19	-	16 10	136	_	2	5	111	18
Welton	71	35	5	10	121		2	3	11	18
Total	1,225	196	85	210	1,716	_	19	52	220	291

Immunisation against Diphtheria and Whooping Cough

The number of children immunised against diphtheria during the year was 4,354. This is 167 more than the previous year and is the highest figure recorded since 1949. The following table gives information relating to children immunised against diphtheria during 1956:—

Diphtheria immunisations carried out during year ended 31.12.56

	Primary	injections		
District	under five years of age	between 5 and 14 years of age	Reinforcing injections	
Urban Alford Barton-upon-Humber Brigg Cleethorpes Borough Gainsborough Horncastle Louth Borough Mablethorpe and Sutton Market Rasen Scunthorpe Borough	17 14 63 23 2 9 2	1 10 13 73 32 10 23 27 5	29 84 54 408 260 42 220 84 40	
Skegness Woodhall Spa		66 2	137 27	
Rural				
Caistor	27	53 95	210 344	
Glanford Brigg Gainsborough	12	25 35	112	
Grimsby	7	8 4	175 122	
Isle of Axholme	10	72	72 279	
Louth Spilsby Welton	40	100	258 179	
Total	409	782	4,297	

The County Council, in 1954, adopted a scheme for giving protection against diphtheria and whooping cough by the use of a combined vaccine. In 1956, 3,163 children were so immunised, an increase of 465 over the figure for the previous year and details are given in the following table:—

Combined Whooping Cough and Diphtheria Immunisation carried out during year ended 31.12.56

		Age a	at date of	immunisa	ition	
District	Under One	One	Two	Three	Four	Total
Urban Alford Barton-upon-Humber Brigg Cleethorpes Borough Gainsborough Horncastle Louth Borough Mablethorpe and Sutton Market Rasen Scunthorpe Borough Skegness Woodhall Spa	18 65 35 131 184 32 86 39 18 305 89 16	5 12 8 8 83 47 9 37 12 7 157 56 6	-2 4 9 10 1 1 2 3 6 30 18	1 1 2 3 1 5 3 1 12 10 1	- - - 3 8 - - 1 3 1 8 7	24 80 48 228 252 43 131 60 33 512 180 23
Rural Caistor Glanford Brigg Gainsborough Grimsby Horncastle Isle of Axholme Louth Spilsby Welton	88 220 68 105 72 69 109 174 117	22 62 29 62 31 18 49 72 46	7 14 2 9 4 8 11 17	3 4 1 5 1 3 6 6 6	1 4 1 4 - 4 5 3 2	121 304 101 185 108 102 180 272 176
Total	2,040	830	166	71	56	3,163

The following table gives particulars of children who at any time between 1st January, 1942 and 31st December, 1956, had completed a course of immunisation against diphtheria.

Number of children at 31st December, 1956, who had completed a course of immunisation at any time since 1st January, 1942

Age at 31st Dec., 1956	Under 1	1—4	5—9	10—14	
Born in year	1956	1955—1952	1951—1947	1946—1942	Total under 15
Number immunised	534	11,916	20,011	17,209	49,670
Estimated mid-year hild population, 1955	Children under 1 5,140	Children 1—4 20,560	Children 51,4		77,100

The following table gives details of children immunised against whooping cough during the year by the use of a separate whooping cough vaccine. It will be seen that only 101 children were so immunised but it must be remembered that immunisation against whooping cough can be given in combination with immunisation against diphtheria and the majority of parents prefer this method.

		Age at	date of ir	nmunisati	on	
District	Under One	One	Two	Three	Four	Total
Urban						
Alford	1		_			1
Barton-upon-Humber	_	1		1		2
Brigg	_					_
Cleethorpes Borough	_		2	1		3
Gainsborough			1			1
Horncastle	_	_	1	_	1	1 2
Louth Borough	- 1	_	_	_	î	1
Mablethorpe and Sutton			_	_		
Market Rasen	- 1	_	_			
Scunthorpe Borough	1	2	1	4	1	9
Skegness		_	-	2	_	2
Woodhall Spa		-	_	_	-	
Rural	-					
Caistor	14	2	1	4	1	22
Gainsborough	_	_		1	_	1
Glanford Brigg	5	1	2	1	_	9
Grimsby		-	1	2	1	4
Horncastle	1	1	_	2	1	5
Isle of Axholme	_		1	1	_	2
Louth	1	-		1	_	4 5 2 2
Spilsby	9	10	1	5	2	27
Welton	2	2	1	1	2	8
Total	34	19	12	26	10	101

Vaccination against Tuberculosis

The County Council have not so far adopted a scheme for giving B.C.G. vaccination to children nearing school leaving age but proposals were under consideration at the end of the year. The only scheme in operation is that administered by the chest physicians and this is limited to children who are contacts of cases of tuberculosis and to cases of babies born to tuberculous parents although the disease is arrested or cured.

The number of vaccinations performed during the year was 114 compared with 305 during the previous year. when because of the discovery of several new cases of tuberculosis in a rural area of the county, the children attending schools in that area were offered B.C.G. vaccination.

Vaccination against Poliomyelitis

The year was marked by the introduction of a scheme for vaccination against poliomyelitis.

The Minister of Health at the beginning of the year selected as the first age group for registration for vaccination children born in the years 1947 to 1954 inclusive. Parents of all children in Lindsey in this age group were informed of the scheme either through the health visitors or through the schoolteachers. Bearing in mind that the scheme was a new one and introduced quite suddenly the response in this county was very good. Out of a total of approximately 40,000 children in the age group, 17,184 were registered for vaccination.

As supplies of vaccine were limited, the Minister decided that vaccination could only be offered to registered children who were born in the months of March and October in the years 1951 to 1954, August and November in the years 1947 to 1954, with a reserve comprising registered children born in May in the years 1947 to 1954.

At the end of the year 1,885 children had received both injections and 86 had received the first injection.

AMBULANCE SERVICE

The Ambulance Service in Lindsey continues to be operated jointly with the fire service, most of the personnel undertaking both fire fighting and ambulance service duties.

Two new ambulances were introduced into the fleet during the year to replace a similar number of vehicles no longer considered efficient for the work they have to do.

The following table gives details of the mileage travelled in 1956 by the County Council vehicles, by the hospital car service and by vehicles of other authorities on behalf of the County Council:—

	5th July to 31st Dec., 1948	1949	1950	1951	1952	1953	1954	1955	1956
Ambulances: Mileage Hospital Car Service:	157,117	682,588	709,849	560,846	641,641	656,836	685,228	733,800	727,529
Mileage Other Authorities:	85,833	221,049	339,511	511,923	426,735	499,199	532,826	443,697	400,701
Mileage	4,757	21,333	43,382	43,666	48,000	46,699	50,661	48,227	46,754
Total Mileage	247,707	924,970	1,092,742	1,116,435	1,116,376	1,202,734	1,268,715	1,225,724	1.174,984

Again it is possible to record a decrease in mileage compared with the previous year.

It will be seen that the total mileage travelled by the County Council's own vehicles, including the two sitting case vehicles which were introduced into the fleet in 1955, decreased by about 6,000 miles and that there was a further decrease in the Hospital Car Service mileage of about 43,000 miles.

Details of the cases dealt with by the County Council Ambulance Service during the year ended 31st December, 1956

	Cases	for admis hospita	77777 78	Cases	for Out-p		discharge from hosp	Cases ed and tra pital or in	nsferred stitution		Totals	
Stations	Stretcher cases (1)	Sitting cases (2)	Total mileage (3)	Stretcher cases (4)	Sitting cases (5)	Total mileage (6)	Stretcher cases (7)	Sitting cases (8)	Total mileage (9)	Stretcher cases (10)	Sitting cases (11)	Total mileager (12)
Louth Cleethorpes Gainsborough Scunthorpe Skegness Barton-upon	729 1,255 655 1,814 660	280 396 246 869 364	19,313 21,127 18,128 28,635 24,996	226 849 660 3,378 228	12,098 8,355 7,036 23,407 5,981	102,854 63,756 56,512 113,632 62,959	129 276 259 523 175	582 783 492 1,715 587	17,386 11,062 10,845 16,547 19,301	1,084 2,380 1,574 5,715 1,063	12,960 9,534 7,774 25,991 6,932	139,553 95,945 85,485 158,814 107,256
Humber Horncastle Mablethorpe Market Rasen	242 130 151 272	79 219 204 45	8,258 12,043 9,703 11,145	472 24 18 81	2,368 1,959 4,569 1,461	20,220 17,450 29,011 19,264	70 19 9 33	146 129 172 95	2,657 4,125 3,478 3,122	784 173 178 386	2,593 2,307 4,945 1,601	31,135 33,618 42,192 33,531
Totals	5,908	2,702	153,348	5,936	67,234	485,658	1,493	4,701	88,523	13,337	74,637	727,529

Number of accident and emergency cases included in columns (10) and (11) ... 2,295

The following table gives details of cases conveyed by rail during 1956 and for purposes of comparison during 1954 and 1955. Efforts have been continued to send as many long distance cases as possible by rail but although there has been an increase in cases dealt with in this way the result is not too satisfying. The simple fact of the matter is however that Lindsey is not too well served by railway services and consequently many long distance cases still have to go by road because of the inconvenience of a rail journey.

	Stretcher cases	Sitting cases	Rail miles	Mileage travelled by County Council ambulances and Hospital Car Service vehicles in conveying patients to and from stations
Year ended 31st December, 1956	54	542	50,709	4,909
Year ended 31st December, 1955	60	394	42,345	4,767
Year ended 31st December, 1954	54	365	42,837	4,768

The County Council have continued to use the hospital car service for the conveyance of a considerable number of sitting cases and the arrangement with the Lincoln County Borough Council whereby the latter authority covers an area of Lindsey in the north of Lincoln containing approximately 97,299 acres with a population of about 18,250 and with the Holland County Council under which that authority covers an area in Lindsey to the north of Boston containing 26,000 acres and a population of 3,500 have also continued throughout the year. Details of cases dealt with by these two authorities and by the hospital car service are given in the following table:—

Cases dealt with under arrangements with other authorities and by the Hospital Car Service

	St	retcher cas	ses	S	litting case	es	Total number	Total	
	No. of cases (1)	No. of journeys (2)	mileage (3)	No. of cases (4)	No. of journeys (5)	mileage (6)	of cases (7)	of journeys (8)	Total mileage (9)
Lincoln County Borough Council Holland County Council	1,587	676 40	18,682 904	2,217 126 23,713	916 69 8,691	25,650 1,518 400,701	3,804 167 23,713	1,592 109 8,691	44,332 2,422 400,701
3. Hospital Car Service Totals	1 639	716	19,586	26,056	9,676	427,869	27,684	10,392	447,455

Number of accident and emergency journeys included in column (8)

Personnel and Vehicles

The following table gives details by stations of the number of personnel employed and the number of vehicles in use at the end of the year ,compared with the establishment fixed by the County Council. The third main column relates only to paid female attendants. In addition the County Council use as female attendants persons who are prepared to act in this capacity without pay, receiving only subsistence and travelling expenses.

	Whole-time	Men	Retained N	Men	Female Atte	ndants	Ambular	ices
Station	Establishment	Number em- ployed	Establishment	Number avail- able	Establishment	Number en- rolled	Establishment	Avail'ble for use
Louth	9	9	15	14	7	5	5 plus 2 Sitting Case Cars plus 2 spares	5 plus 2 Sitting case car plus 2 spares
Cleethorpes Gainsborough Scunthorpe Skegness Barton-upon-Humber Horncastle Mablethorpe Market Rasen	9 6 14 6 2 2 2 2 2	9 6 13 6 2 2 2 2	12 12 9 12 12 12 12 12 12	9 12 9 12 12 12 10 12	7 7 7 7 3 3 3 3	3 3 4 1 3 1 3	5 4 9 4 1 1 1	5 4 9 4 1 1 1
Totals	52	51	108	102	47	26	31 plus 2 Sitting Case Cars plus 2 Spares	31 plus 2 Sitting case car plus 2 spares

Number of vehicles off the road for repair or overhaul at 31st December, 1956 ... Nil Number of vehicles awaiting disposal 2

Training of Personnel in First Aid

The following statement indicates the position at 31st December, 1956, regarding the qualifications of personnel to administer first aid treatment.

Whole-time Personnel				
Untrained but receiving	train	ing		 3
Trained to CERTIFICA	ATE s	tandard		 3
Trained to VOUCHER	stand	lard	***	 3
Trained to MEDALLIC	ON sta	andard		 42
Retained Personnel				
Untrained but receiving	train	ing		 11
Trained to CERTIFICA				 5
Trained to VOUCHER				 7
Trained to MEDALLIC	DN sta	andard		 79
Female Attendants				
Nursing experience				 17
First Aid qualifications				 9
Untrained				

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

General

Two developments of the County Council's scheme for the prevention of illness, care and after-care were introduced during the year. Arrangements were made for dealing with problem families and a sitting-in service for old people was brought into operation.

Tuberculosis

The environmental circumstances of each newly notified case of tuberculosis are investigated by the health visitors and reports are forwarded to the local chest physicians. The health visitors assist in arranging for the patients and contacts to attend the nearest chest clinic. All cases of tuberculosis are visited periodically and any adverse changes in the home circumstances notified to the chest physician. Unsatisfactory housing and sanitary conditions are also reported to the District Council concerned. Chest physicians make recommendations to the local health authority in connection with the provision of rehabilitation, open-air shelters, extra nourishment and other matters in which they think the authority may be able to help.

Three open-air shelters were in use at the end of the year, the same number as for the previous year.

Seven tuberculous patients were issued with bedsteads and bedding during the year.

The County Council have a scheme for the admission of patients to the Papworth Village Settlement but at

the end of the year no Lindsey patients were being maintained there.

The arrangements which the County Council made some time ago for the medical or X-ray examination of staff whose duties bring them into close contact with children continued during 1956. The number of staff X-rayed under these arrangements during the year was 131 and the number examined without X-ray was 295. All members of such staff are encouraged to undergo X-ray examination through the mass radiography unit as and when they have the opportunity.

During the year arrangements were made for 746 persons who had been in contact with cases of tuberculosis

to be examined giving a ratio of 3.52 for each new case of tuberculosis reported.

The County Council provided during the year extra nourishment, consisting of milk and eggs, in 52 cases where such provision was recommended by the chest physician and where the financial circumstances of the recipients were such that they could not afford to purchase it themselves.

Dr. J. Bauer, Medical Director of the Lincolnshire Mass Radiography Unit, has forwarded the following

details relating to the work of the Unit in Lindsey during the year:-

			Males	Females	Total
Miniatures taken			3,610	3,571	7,181
Recalled for large films			71	73	144
Recalled for clinical examina	tion		35	34	
Referred to Chest Clinic			14	13	69 27
Referred to own doctor			5	5	10
Cases of bronchiectasis				3	10
Cases of pneumokoniosis			_	_	
Cases of neoplasm			3	3	6
Cases of cardiac abnormality			8	7	15
Cases of post primary active	pulmonar	y			13
tuberculosis	***		6	2	8
Cases of post primary inactive	e pulmon	ary			0
tuberculosis			8	3	11

Loan of equipment

Equipment required in the routine nursing of patients is held by the district nurses and supplied on loan as required. Other articles of equipment requested by the doctors or nurses have been supplied direct from the County Health Department as follows:—

Equipment	No. of patients supplied		
Wheel chairs	65		
Dunlopillo mattresses	52		
Spinal carriages	5		
Bedsteads	13		
Crutches	14		
Commodes	5		
Self-lifting poles	5		
Fracture boards	5		
Premature Baby Cots	4		
Bedding	1		
Special walking aids	2		

Convalescence

The number of patients admitted under the Council's scheme to convalescent homes for a recuperative holiday was 21, compared with 19 in 1955. The average stay of the patients admitted in 1956 was 2.75 weeks.

Problem Families

A scheme for dealing with problem families in Lindsey came into operation in August, 1956.

The health visitors have been designated as the caseworkers with the responsibility of taking charge of the problem families in their area, exercising close supervision, ensuring that these families know how to make full use of the various services available to them and, by sympathy and understanding, helping them to achieve a better standard of life.

Selected domestic helpers can be sent into households where there is a need for someone to help the mother with the housework and to show her by practical demonstration how to do the work herself. Domestic help so provided is free of charge except insofar as householders offer to make some payment for the service provided.

Where there is found to be a need for cooking utensils, children's bedding and clothing etc., and where the need cannot be met by the parents, the National Assistance Board or by voluntary orgnisations, such necessary

equipment is provided on loan by the County Council.

Sitters-in can be employed by the County Council to go into homes to care for children both during the daytime and the night time in cases where, because of illness or for some other acceptable reason, the parents are not able to look after them. Persons availing themselves of the services of a sitter-in are required to contribute towards the cost of this service according to their means.

Since the scheme came into operation domestic help was made available in two cases and in one case kitchen

utensils and bedding were issued on loan.

Under the Joint Circular issued by the Ministry of Health, the Ministry of Education and the Home Office on 31st July, 1950, the Children's Officer was appointed by the Council as the officer responsible for securing the coordination of all the services, both statutory and voluntary, dealing with the welfare of children in their own homes. This year regular standing case conferences of the officers dealing with these services were set up for the first time in Scunthorpe under the chairmanship of the District Medical Officer of Health who also holds the position of Assistant County Medical Officer. The conferences have continued at two-monthly intervals and have already proved to be a success. At each conference problem families in the area are discussed. These officers include health visitors and school nurses, district nurses, children's welfare officers, housing officers, district welfare officers, officers of the National Assistance Board, the assistant domestic help organiser, school attendance officers and officers of the N.S.P.C.C. and any others who may be called on through interest in a particular family. Each has an important role to play and in referring to them I have not placed them in any particular order of importance. The part played by each is complementary to the parts of the others.

It has thus been found possible to ensure that in every case everything possible is done for the welfare of the family and, what is extremely important, it has been possible to ensure that there is no overlapping and that nothing is being left undone by one social worker believing the job to have been put in hand by somebody else.

There are so many different officers whose duty it is to look after the welfare of children, either on account of their holding appointments with local authorities or with voluntary bodies and I cannot see how their work can possibly be co-ordinated satisfactorily without their getting together regularly as they are now doing in Scunthorpe. In my view it would be ideal if other standing case conferences were convened to cover the remainder of the County but unfortunately, owing to its rural nature, this may not be practicable in some areas and apart from Scunthorpe where conferences have been regularly held the Children's Officer has called together conferences to deal with specific cases where it has been obvious that an exchange of views in this way would help.

Sitter-In Service

In April, 1956, a sitter-in service was introduced with the aim in view of enabling some old people to continue to live in their own homes instead of being removed to hostels or to similar accommodation. Initially the scheme was limited to those cases where old people were living alone but was later extended to make it possible for sittersin to be provided for infirm old people where no other arrangements could be made and where the alternative might be institutional care.

Persons availing themselves of this service are required to contribute towards the cost according to their means.

This service is supplementary to the domestic help service and there is no reason why the services of a sitter-in and of a domestic helper should not be provided for the same case.

During 1956 help was provided under the sitters-in scheme in 29 cases. A total of 5,228 hours was put in by sitters-in on these cases. There were 24 cases which were investigated but in which for one reason or another a sitter-in was not provided. There was, however, only one case where it was considered a sitter-in was necessary but where it was not possible to provide one.

DOMESTIC HELP SERVICE

There has been no change in the organisation and administration of the domestic help service during the past year. The staff consists of an organiser and three assistant organisers, one of whom is stationed at the branch offices of the service at Scunthorpe and Cleethorpes. Clerical asistance is provided for the organising staff in order that they can spend as much time as possible on the supervision of cases, an essential feature of a satisfactorily operated scheme. The County Council do not employ regular whole-time helpers but rely on women who are willing to act as domestic helpers as and when required. At 31st December there were 291 helpers actually being employed for varying periods of duty, an increase of 51 over the previous year.

One thousand, one hundred and twenty one applications for assistance were investigated by the organising staff compared with 1,014 in the previous year. Domestic help was provided in 909 cases compared with 726 in 1955. There were 212 applications made for help which did not result in help being provided. In most of these cases the applications were withdrawn after the nature of the service had been explained to the applicants. In 15 cases help, although needed, was not provided, owing to the fact that a helper could not be found in the locality where the applicant lived. There were 326 cases where help was recommended by such bodies as the National Assistance Board, the Women's Voluntary Services, by relatives or friends or in some other way, but where no application was made by the person concerned.

The following table shows the classification of the cases in which help was provided and the number of hours put in by domestic helpers on those cases.

Category No. of cases		Total No. of hours worked	
Maternity Tuberculosis Chronic Sick Aged and Infirm Others	82 5 281 431 110	4,411 904½ 85,296¾ 102,708¾ 14,346¾	
Total	909	207.6673	

There has been a tremendous increase in hours worked by helpers compared with the previous year. There appears to be two main reasons for it. Firstly, that part of the population living in the rural and thinly populated parts of the county have been slow to get to know about the service and it is noticeable that in these areas the service has been slower to develop than elsewhere in the county. Secondly, help is being provided for a considerable number of old and infirm people and it is usually the experience that once help is provided for such a case it is needed for a very long time. It will be seen from the above table that out of a total of 909 cases 431 were old and infirm and that out of a total of 207,667, hours 102,708 were put in on such cases. Although the domestic help service is costing a considerable sum of money, one must not lose sight of the fact that very often the provision of domestic help does make it possible for old people to continue to live in their own homes instead of going to hostels or taking up beds in hospital.

MENTAL HEALTH SERVICE

There have been no changes in the administration of the mental health service during the year. Very little is being done in connection with the prevention of mental illness and the after care of the mentally sick, to some extent owing to the fact that the County Council are without the services of a medical officer for mental health and a psychiatric social worker.

Mental Deficiency

The names of 61 mental defectives were added to the register during the year, most of them being newly ascertained cases. The names of 38 cases were removed from the register during the year either because of death or removal from the county or because of their being no longer in need of care and supervision.

The total number of mental defectives whose names were on the register at the end of the year was 1,153

compared with 1,130 at the end of the previous year.

Of the 61 new cases reported, 24 were children who had been found to be ineducable and had been referred by the Education Authority.

The 1,153 cases registered as mental defectives are placed in the following categories:—

Under Statutory Supervision	536	(including 122 on waiting list for institution)
In Institutions	456	
Under Guardianship	6	
Under Voluntary Supervision	155	

Supervision

The health visitors exercise supervision over defectives in their own homes. During the year 2,724 visits were paid in this connection.

Institutional Care

In the previous report attention was drawn to the serious shortage of institutional accommodation and it is only necessary for me to point out that the number on the waiting list has increased from 114 to 122 to illustrate that there has been no alleviation of the situation. Of these cases on the waiting list 58 are classed as urgent and last year only 15 vacancies were allocated to Lindsey cases, making little impression on the size of the waiting list as additional cases requiring insitutional care are arising all the time.

Once again advantage was taken of the provisions of Ministry of Health Circular 5/52 to secure the admission of cases to institutions for short periods in order to afford temporary relief to parents. During 1956 seven vacan-

cies were obtained for these cases.

Guardianship

At the end of the year there were six cases under guardianship under the Mental Deficiency Acts.

Occupation and Training

The County Council have at present three occupation centres for mental defectives, one at Louth, one at Skegness and one at Gainsborough. A fourth is in course of erection at Scunthorpe. In addition the County Council have an arrangement with the Grimsby County Borough Council under which mental defectives from Cleethorpes and the nearby county area attend the Grimsby occupation centre.

These centres in the main cater for children up to the age of 16 years but there are some older mental defectives

attending.

The numbers in attendance at the end of the year were as follows:—

Gainsborough	17	Skegness	 25
Louth	25	Grimsby	 11

The arrangement introduced in 1955 for giving home tuition to mental defectives who were not able to attend an occupation centre has been extended. At the end of the year there were two home teachers on the County Council's staff, both of them having undergone training for occupation centre duties and awaiting the opening of the Scunthorpe centre. At 31st December, 1956, 33 mental defectives were being visited by these two home teachers.

During the year four trainees recruited under the County Council's scheme for training supervisory staff for occupation centres completed their training. One was appointed supervisor of the Gainsborough centre, another supervisor of the Skegness Centre and another assistant supervisor of the Louth centre. The fourth trainee found it impossible to take up an appointment with the County Council. Two other trainees commenced a course of instruction during the year.

Register of Mental Defectives as at 31st December, 1956

	Under	age 16	Aged	16 and over	Total
	M	F	M	F	
Particulars of cases reported during 1956 (a) Cases ascertained to be defectives "Subject to be dealt with"					
Number in which action taken on reports by: (1) Local Education Authorities on children (i) While at school or liable to	-				
attend school	14	10			24
(ii) On leaving special schools	_	1	_		1
(iii) On leaving ordinary schools (2) Police or by Courts	6	4	-	-	10
(3) Other sources Cases reported who were found to be defectives, but were not regarded as "subject to be dealt with" on any	3	1	5	5	14
ground (c) Cases reported who were not regarded as defectives or in which action was incomplete at 31st December, 1956, and are thus excluded from	-	-	4	8	12
(a) or (b)			_		
Total	- 22				
Total	23	16	9	13	61
Disposal of cases reported during 1956 (a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e. at 1(a)), number (i) Placed under Statutory Super-					
vision	23	14	3	5	45
(ii) Placed under Guardianship(iii) Taken to "Places of Safety"	_	_		-	-
(iv) Admitted to Hospitals (b) Of the cases not ascertained to be defectives "subject to be dealt with " (i.e. at 1(b)), number (i) Placed under Voluntary Super-	-	2	2	=	4
vision (ii) Action unnecessary	=	_	4	8	12
Total	23	16	9	13	61
Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1956 and admitted to					
(a) National Health Service hospitals (b) Elsewhere	3	2	2	_	7
		_	_	-	-
Total	3	2	2		7
Total cases on Authority's Registers at 31.12.56.					
i) Under Statutory Supervision	95	82	197	162	536
ii) Under Guardianship iii) In " Places of Safety "	1	-	2	3	6
iv) In Hospitals	30	14	226	186	456
v) Under Volunary Supervision	_	-	75	80	155
Total	126	96	500	431	1,153
Number of defectives under Guardian- ship on 31st December, 1956, who were dealt with under the provisions of Sect- ion 8 or 9, Mental Deficiency Act, 1913	126	96	500	431	1,153
included in 4 (ii))	_	_	_	_	

			Under	age 16	Aged 16	and over	Total
			M	F	M	F	
(a)	care and reported according	1956 (ac-					
, ,	in urgent need of hospital care						
	th and about 12 anne		2		2		
	and bullet have made access		3	4	6	1	11
			5	_	6		2
	high grade cases		4	6	7	7	24
(IV)	high grade cases		1	1	2	7	11
	Total urgent cases		13	11	17	17	58
(2) 1	Not in urgent need of hospital c	are:—					
(i)	West and shair !! saces		1		2	5	8
	ambulant law and a sassa		3	5	2 3	_	11
	madium anada ancas		3	_	16	12	31
	bish and asses			1	7	6	14
()	ingli gittue etties					- 0	14
	Total non-urg	ent cases	7	6	28	23	64
	Total		20	17	45	40	122
(b)	Of the cases icluded in iten (ii) and (v), number conside able for:—						
(i)	accumpation centre		78	67	16	19	180
	industrial contra		70	07	11	16	27
	home training		-	5	4	3	12
(111)						3	12
	Total		78	72	31	38	219
(c)	Of the cases included in 6(b), receiving training on 31/12/5						
(i)	The second secon		35	34	4	5	78
100	To be described assets:		55	34	,	2	10
(11)	Athama		16	12	3	2	33
7,,							.3.3
7,7	Total		51				

Lunacy and Mental Treatment Acts

The Local Health Authority is responsible, through their Authorised Officers, for taking what proceedings are necessary under the Acts to provide care and treatment in hospital for persons suffering from mental illness. These Officers are mainly concerned in cases where certification and the making of statutory orders are necessary though they advise and assist in cases of voluntary admission.

The following is a summary of the cases dealt with in 1956.

Cases investigated	257
Admitted to Mental Institutions as certified patients under Section 16, Lunacy Act, 1890	108
Admitted to Mental Institutions on "Three Day Order" under Section 20, Lunacy Act, 1890	44
Admitted to Mental Institutions on "Fourteen Day Order" under Section 21, Lunacy Act, 1890	65
Admitted to Mental Institutions as voluntary patients under Section 1, Mental Treatment	
Act, 1930	3
Admitted to Mental Institutions as temporary patients under Section 5, Mental Treatment	
Act, 1930	1
No action taken	36

When patients needing after care are discharged from mental hospitals, the medical superintendents notify the local authority whose health visitors carry out visits and forward reports to the hospital superintendents. In 1956 10 new cases were referred from hospital and the health visitors carried out 183 visits. The total number of cases under supervision was 48.

NOTIFIABLE DISEASES

The following table gives details of notifications of infectious diseases made to District Medical Officers of Health during 1956. The total number of cases of infectious disease notified was 3,156 fewer than in 1955, due mainly to the fact that notifications of measles totalled 2,012 compared with 4,929 in the previous year.

Notified Cases of Infectious Diseases in Urban and Rural Districts, 1956.

Sanitary Districts	Total number notified	Scarlet Fever	Whooping Cough	Acute Poliomyelitis (Paralytic)	Acute Poliomyelitis (Non-paralytic)	Measles	Diphtheria and Membranous Croup	Pneumonia	Dysentery	Acute encephalitis (Infective)	Acute encephalitis (Post-infectious)	Erysipelas	Meningococcal Infection	Food Poisoning	Puerperal Pyrexia	Ophthalmia Neonatorum	Malaria (Believed to be contracted abroad).	Tuberculosis respiratory	Tuberculosis other forms
Urban Alford	4	_	_	_	_	2		1	1	_	_	_	_	_	_	_	_		_
Barton-upon- Humber Brigg Cleethorpes	41 17	_	29 2	=	=	7 12	=	1	=	_	=	=	=	Ξ	=	=	=	3	1
Borough Gainsborough Horncastle Louth Borough	206 372 76 28	47 25 2 5	73 10 17	= =		8 289 - 5	=	23 17 1	3 1 50 4	=		6 4 3	2 _ _	1 12 —	13 _ _ _	1 - 1	=======================================	24 10 2 9	5 4 1 1
Mablethorpe & Sutton Market Rasen	2 12	-8	=	=	=	3	=	$\frac{-}{1}$	=	=	=	=	=	=	=	=	=	1	1
Scunthorpe Borough Skegness Woodhall Spa	1244 134 22	34 2 5	85 -5	Ξ	1 1	908 117 —	Ξ	32 3 10	137	=	1	7 1 —	5	<u>1</u>	3 1 —	=	3 —	20 9	7
	2158	130	221	_	4	1351	_	89	198	_	1	21	7	14	18	2	3	79	20
Rural Caistor Gainsborough Glanford Brigg Grimsby Horncastle Isle of Axholme Louth Spilsby Welton	94 125 345 75 371 55 114 240 68	7 15 4 16 5 1 8 9 20	47 17 70 34 47 4 21 39 12		$-\frac{1}{2}$ $-\frac{1}{2}$ $-\frac{2}{2}$	24 58 226 9 96 38 53 146 11		4 8 7 4 12 — 14 20 6	22 21 203 4 11 6	1		2 - - 1 - 1 2 5	_ _ _ _ _ _ _ _ _ _	1 2 - 4 - 3 - 2	1 - 2 1 1 - -			5 2 10 4 -6 7 6 2	2 1 5 5 - 2 - 4
	1487	85	291	6	7	661	_	75	267	1	1	11	2	12	6	1	_	42	19
Total for County	3645	215	512	6	11	2012	_	164	465	1	2	32	9	26	24	3	3	121	39

Poliomyelitis

Seventeen cases of poliomyelitis were reported, of which 6 were paralytic and 11 non-paralytic. The corresponding figures for 1955 were 32 and 23. Of the paralytic cases 3 occurred in children under 5 years of age, 2 in children of school age and 1 in an adult. Of the non-paralytic cases, 1 occurred in a child under 5 years of age, 5 in school children and 5 in adults.

Diphtheria

It is pleasing to be able to report again that no case of diphtheria was notified during the year.

Dysentery

Once again the number of cases of dysentery notified has shown an increase. In 1953, 104 cases were notified, in 1954 the figure was 306, in 1955 the number was 430 and in the year under review the total was 465.

Ophthalmia Neonatorum

Three cases were notified during the year and a follow-up of these cases showed there was no impairment of vision.

Acute Rheumatism

By the Acute Rheumatism Regulations, 1953, acute rheumatism is made a notifiable disease in Lindsey when occurring in a child under the age of 16 years, and the following table gives details of cases notified under these Regulations in 1956. The total number of notifications received was 4, compared with 5 in 1955.

Tabulation by age, sex and clinical classification of cases notified as Acute Rheumatism during 1956

	Clinical electification				Age i	in yea	rs			Tot al	1	Total
,	Clinical classification of cases notified	0	1	5-9)	10-1	14	15		in the	age	both sexes
		M	F	M	F	M	F	M	F	M	F	
1.	Rheumatic pains and/or arthritis without heart disease	_	_	_	1	2	_	_	_	2	1	3
2.	Rheumatic heart disease (Active) (a) with polyarthritis (b) with chorea	=	=	=	1	=	=	=	=	=	1	_1
3.	Rheumatic heart disease (Quiescent)		_	_	_	_	_	_	_	_	_	_
4.	Rheumatic chorea (alone)	-	-	-	-	-	-	-	-	-	_	_
	Total rheumatic diseases	-	_	_	2	2	_	-	-	2	2	4
5	Congenital heart disease	-	_	-	_	_	_	-	-	-	-	-
6.	Other non-rheumatic heart disease or disorder	_	_	_	_	_	_	_	_	-	_	_
7.	Non-rheumatic or cardiac disease	_	_	-	_	_	_	_	_	_	_	_
	Total non-rheumatic diseases	_	_	_	_	_	_	_	_	_	_	_

Tuberculosis

The following table gives particulars of the incidence of tuberculosis during the years 1937 to 1956. The number of cases reported in 1956 was 212 and it is disappointing to have to record an increase of 10 over the figures for the previous year. There was, however, a fall of 10 in the number of deaths due to respiratory tuberculosis. The number of persons dying from tuberculosis who had not been notified during life as tuberculous was 6 compared with 4 in 1955.

Cases of tuberculosis reported from all sources, 1937-1956

Year	Respiratory	Non-respiratory
1937	242	105
1938	264	118
1939	241	118
1940	230	106
1941	198	118
1942	226	106
1943	252	113
1944	253	105
1945	305	104
1946	300	91
1947	311	78 80 52 57
1948	267	80
1949	211	52
1950	219	
1951	250	60
1952	234	43
1953	224	45
1954	220	40
1955	178	24
1956	168	44

Summary of formal notifications during the period from the 1st January, 1956, to the 31st December, 1956.

									Form	al no	tifica	tions				
Age	period	s	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75 and upwards	Total (all ages)
Respiratory males			 _	-	_	2	2	10	9	9	7	11	13	7	2	72
Respiratory females			 _	1	1	2	-	7	5	18	10	3	1	1		49
Non-respiratory males			 _	-	_	4	4	2	1	6	1	3	_	_	_	21
Non-respiratory females			 _	_	2	2	5	2	_	3	2	1	_	1		18

New cases coming to the notice of the Medical Officer of Health during the year, otherwise than by formal notification

Age per	riods		0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75 and upwards	Total cases
Respiratory males		 	-	-	1	-	_	2	3	5	10	3	-	-	1	25
Respiratory females		 	-	_	1	_	_	3	6	5	3	1	1	2	_	22
Non-respiratory males		 	_	_	_	_	1	_	-	_	_	_	_	-	_	1
Non-respiratory females		 	_	_	_	_	_	_	_	2	2	_	=	-		4

Venereal Disease

The following tables give details relating to the incidence of venereal disease. The number of cases of Syphilis and Gonorrhoea under treatment in 1956 was 130 compared with 131 in the previous year.

New cases reported each year since 1943

Year	Syphilis	Gonorrhoea	Total
1943	74	156	230
1944	78	132	210
1945	85	115	200
1946	130	220	350
1947	166	196	330
1948	72		362
1949	59	122	194
1950	63	63	122
1951	40	46	109
1952	49	42	91
	37	44	81
1953	18 33	43	61
1954	33	36	69
1955	18	31	49
1956	14	32	46

Number of cases of Syphilis and Gonorrhoea under treatment during the year 1956 at clinics situated in the County.

Clinic	Syphilis	Gonorrhoea	Total
Gainsborough Louth Scunthorpe Skegness	19 20 54 6	$\frac{4}{20}$	23 20 74 13
Total	99	31	130

WELFARE OF HANDICAPPED PERSONS

General

Under Sections 29 and 30 of the National Assistance Act, 1948, the County Council have power to make arrangements for promoting the welfare of persons who are blind, partially sighted, or deaf and dumb, or who are substantially and permanently handicapped by illness, injury or congenital deformity, and where the Minister of Health so directs are under an obligation to exercise such powers. The Minister has issued such a direction in the case of blind and partially sighted persons and the County Council has for many years had a scheme for the welfare of such classes. The County Council again gave prolonged consideration to the question of providing a service for the welfare of handicapped persons other than the blind and partially sighted and the deaf and dumb and eventually formally adopted a scheme based on the model scheme prepared by the Ministry. Detailed proposals were submitted to the Council for operating the scheme, involving the appointment of almoners to deal with the social work and occupational therapists to give instruction in crafts and handicrafts with the aim of improving where possible the function of the diseased or damaged part, to provide occupation for the patient to maintain his interest and to bring him to a stage where he can earn some money from the sale of the goods he makes or by accepting "outwork" from factories, etc.

No decision had however been reached at the end of the year on the question of how and when the scheme should be implemented.

A conference of representatives of local authorities in Lincolnshire was held during the year to explore the possibility of adopting a joint scheme for the welfare of the deaf and dumb in the geographical county but no definite proposals had been formulated at the end of the year.

Blind and partially sighted persons

During the year 112 new cases were registered, 67 of these being blind and 45 partially sighted. The corresponding figures for 1955 were 91 blind and 29 partially sighted. At the end of the year the register contained the names of 576 blind persons and 134 partially sighted persons compared with 574 and 94 respectively for the previous year.

The following tables give details of new cases registered as blind and partially sighted in 1956, indicating the cause of the eye defect and the age at which it occurred.

Blind-New cases registered in 1956

							Age at	which l	blindnes	s occur	red		
	Cause of Eye I	Defect	s	0-5	5-16	16-20	21-39	40-49	50-59	60-69	70+	Total	%
1.	Cataract			 _	_	_	_	1	_	2	18	21	31.34
2.	Senile Macula Deg	enerat	ion	 -	-	_	-		-	1	13	14	20.89
3.	Glaucoma			 -	-	-	_	-	2	2	2	6	8.96
4.	Optic Atrophy			 1	-	_	2	-	_	-	2 2 3	5	7.46
5.	Retitinits			 -	_	_	-	-	1	-	3	4	5.97
6.	Myopia			 -	_	_	1	-	_	2	-	3	4.48
7.	Retinal Dystrophy			 _	_	_	-		_	-	2	2	2.99
8.	Detachment of Ret			 -	_	_	-	_	_	1	1	2	2.99
9.	Thrombosis			 _	_	_		_	_	-	2	2	2.99
10.	Septicaemia			 -	-	-	1		1		_	2	2.99
11.	Diabetes			 -	-	_			1	_	-	1	1.49
12.	Iritis			 _		_		_	_	1	-	1	1.49
13.	Irido-cyclitis			 -		_	_	-	_	-	1	1	1.49
14.	Choroiditis			 _	_	-	-		-	1	_	1	1.49
15.	Cerebral Tumour			 -		-		1	_	_	-	1	1.49
16.	Schilders Disease			 1	-	-	-	_	-	-	-	1	1.49
	Grand To	tal		 2	_	-	4	2	5	10	44	67	
	Percentage			 2.99	_	_	5.97	2.99	7.46	14.92	65.67		100.00

						Ag	e at wh	ich part	ial sight	occurr	ed		
	Cause of Eye I	Defects		0-5	5-16	16-20	21-39	40-49	50-59	60-69	70+	Total	%
1.				_	_	_	1	_	2	2	9	14	31.5
2.	Senile Macula Degeno	eration		_		_		_	1	-	8	9	20.0
3.	Clausama			_	_	_	_	-	1	1		5	11.1
4.	Myopia			_		_	-	_	-	_	3 2		4.4
5.	Optic Atrophy .			_	1	_		-			1	2 2 2	4.4
6.	Retrolental Fibroplasi			2	_	-		_	_	_	_	2	4.4
7.	Thrombosis			_		_				1	1	2	4.4
8.	Diabetes			_	_	_	1	22	1			2	4.4
9.	Charoiditie			1								ī	2.2
10.	Patinitic			1		_		_	_	1	_	1	2.3
11.	Nustagraus			1								1	2.3
12.	Subluxation of lenses		***	1								1	2.2
13.	Datinal Destarables		***	1	0.07			100,000			1	1	2.2
14.	Yorkson title 1 10 state		4 * * *			1	1000		_			1	2.2
15.	Scleritis		***	+	-	1	-	_	1	_		1	
15.	Scientis	** ***	***	_	177	_	_		1	_	_	1	2.2
	Grand Total			5	1	1	2	_	6	5	25	45	
	Percentage .			11.1	2.2	2.2	4.4		13.4	11.1	55.6		100.00

In respect of the new cases registered in 1956, the following table gives details of the cause of the disability and indicates whether treatment was recommended or not and if it was, the number of cases in which it was received.

	Cause of disability						
	Cataract	Glaucoma	Retrolental Fibroplasia	Other			
(i) Number of cases regis- tered during the year in respect of which para 7(c) of Form BD8 recommends							
(a) No treatment	15	5	1	45			
(Medical, Surgical & Optical)	21	4	1	20			
(ii) Number of cases at (i) above which on follow up have received treatment	10	3		16			

It will be noted that treatment was recommended in 46 cases and only obtained in 30. Of the 16 cases where treatment had not been provided the position was as follows:—

- 4 persons refused treatment
- 6 persons were awaiting admission to hospital
- 2 persons were unfit to undergo treatment
- 2 persons had died
- 2 persons were awaiting the completion of arrangements for treatment

The following table from the annual report of the Lindsey Blind Society shows the position of blind and partially sighted persons in the County as regards education, training and employment at 31st December, 1956.

Blind Persons

					Males	Females	Total	% of Tota
Childre	en under 2							
At I	Home			 	1	_	1	.17
	en 2-4 plus ducable							
	ending Special S	Schools		 	1	_	1	.17
At I	Home			 	_	2	2	.34
). Institutions			 	1	_	1	.17
	Home			 	_	1	1	.17
	en 5-12 plus							
In S	special Schools			 	3	2	5	.86
	D. Institutions			 	1	_	1	.17
	Home			 	1	1	2	.34
Emplo	ved							
	rkshops for the	Blind		 	10	_	10	1.73
	ne Workers			 	15	5	20	3.47
	Others			 	23	6	29	5.03
Under	going Training							
Ope	n employment			 	_	2	2	.34
	Itered employm	ent	• • •	 	1	_	1	.17
Not E	mployed							
	lready trained							
	n Employment			 	3	-	3	.52
	ubject to being							
	en Employment Vithout training		•••	 •••	1	_	1	.17
Ope	en Employment			 	1	-	1	.17
	ot available for	-						
	16-59			 	14	35	49	10.71
	60-64 Tot capable of e	 mnlovm	ent	 	3	10	13]	10.71
	16 50	прюут			13	24	37)	
(b)	60-64			 	11	12	23	75.30
(c)	65 and over			 	139	234	23 373	75.50
	To	tals		 	242	334	576	100

Partially Sighted Persons

	Classificat	ion					Male	Female	Total	% of tota
A.	Prospective Blind Persons (other than chil to become blind and to services									
1.	Employed						_	1	1	.75
2.	Undergoing training . Unemployable but avai		and cap	pable o	f traini	ng or	-	-	-	-
4.	work Incapable of or not available	ilable for	work				14	40	54	40.30
В.	Industrially Handicappe Persons (other than ch likely to be met by prop	ildren) w				are				
1.	Employed						9	3	12	8.95
2.	Undergoing training						_	-	_	_
3. 4.	work							=	4 2	2.99 1.49
C.	Requiring observation Persons (other than coindustrially nor socially a may or may not deterior	a serious h	andica	p and v	vhose v		17	22	39	29.10
D.	Children 5-15 plus									
1.	Attending Special Schoo	ls					9	_	9	6.72
2.	Attending other schools						3	4	7	5.22
3.	Educable but not at scho	ool					3	_	3	2.24
4.	Ineducable						1	-	1	.75
E.	Children 1-4 Plus						2	_	2	1.49
	Totals							-	134	

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

There is one nursery in the County registered under this Act. It is run by a voluntary Committee at Skegness, is open only during the holiday season and provides places for 25 children. The County Council made a grant during the year towards the cost of running the nursery.

At the end of the year only one person was registered under the Act as a daily minder.

PUBLIC HEALTH ACT, 1936—REGISTRATION OF NURSING HOMES

One nursing home was registered during the year, bringing the number on the register at the end of the year to seven. These homes provide beds for 111 cases.

C. D. CORMAC, County Medical Officer.







