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Contributors

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TO THE CHAIRMAN AND MEMBERS
OF THE
LOFTUS URBAN DISTRICT COUNCIL.

GENTLEMEN,

I beg to submit my Annual Report for the year 1944, in accordance with the Ministry of Health Circular 49/45. It is shorter than pre-war reports, but, in view of the removal of the restriction on the publication of population figures, etc., I have thought it might be of interest to resume the inclusion in the report of summaries of figures providing some measure of the health of the population, in order that an estimate may be made of the direction and extent of any progress or change.

The Registrar-General estimates the population of the urban district at the middle of 1944 as 6,602. When the district was enlarged in 1932, and the recent census furnished precise figures, the population was estimated to be 8,184; since then the estimates have steadily declined each year until now it has dropped 1,582 below the 1932 figure. This fall in population is doubtless associated with the closing of two ironstone mines.

The number of births in the year was 156, the largest number since the period 1924—28 during which the average yearly number of births was also 156. The birth-rate for the year is therefore 23·6 per thousand of the population, which may be compared with the rate of 13·9 to which the births had shrunk in the period 1934—38 just before the war.

There were 82 deaths of residents of the district during 1944, corresponding to a death-rate of 12·4, which compares with the average death-rate of 12·2 during the years 1934—38, and 13·0 during the five years 1939—43.

The number of infant deaths during the year was 7; this gives an infant mortality rate of 45 infants dying per thousand live births. On the small local yearly figure of births this rate might by chance vary widely: during the five years 1939—1943 the yearly rate varied between 10 and 84, and averaged 53 infant deaths per thousand births. The infant mortality rate for the whole country for 1944 was 46; that for the Combined Districts 38; so the local figure does not vary widely from these.

These vital statistics, and the figures for earlier five-year periods for comparison, are given in Table 1 at the end of this report. The table covers a period of sixty years. The earliest "Annual Report of the Medical Officer of Health" for this district that I have is for the year 1882, and a few figures will illustrate the changes that have occurred since then. In 1882 the population of the district was estimated at 6,699—97 persons more than in 1944; the number of deaths in 1882 was 101, and 37 of these occurred under the age of 1 year and 16 at the age of 60 years or upwards. Compare this with the 7 infant deaths and 40 deaths at the age of 65 years or upwards that occurred in 1944 out of the total of 82 deaths. Expressing this in another way, the average age of those dying in the district in 1882 was $24\frac{1}{2}$ years; in 1944, it was $57\frac{1}{4}$. One cannot conclude that in these sixty years the span of life in the district has been lengthened by 33 years, for that is vitiated by the fact that the population in 1882 included a far larger proportion of children and a much fewer number of old people than now: there were, for instance, 296 children born in 1882 compared with what we now consider the large figure of 156. The altered incidence of death is partly the cause and partly the result of the changed age-condition of the population. As well as the

alteration in the age at which death strikes it has changed its chief weapons: in 1882 there were 20 deaths from the common acute infectious diseases and 5 from diarrhoea in young children; in 1944 there were in the district no deaths from the acute infections, and two from diarrhoea in young children.

No infectious disease was very prevalent in the district during the year although the number of cases of scarlet fever was the largest since 1938. There were 21 cases in all, four in October and four in November, but these were scattered widely. This disease is now usually one of the least dangerous of the infectious diseases and, for those cases removed to hospital and treated with scarlet fever antitoxin, an isolation period of two weeks is usually found sufficient.

Three cases only of measles, and none of whooping-cough, were notified.

Nine cases of diphtheria were notified but with two children the diagnosis was not confirmed after admission to hospital and laboratory investigation. At the end of 1944 it was estimated that 48% of the children under 5 years of age and 75% of those from 5 to 14 years old had been immunised. In the summer leaflets were distributed to parents through the schools by the kind assistance of the head teachers and slides were exhibited at the local cinemas urging immunisation as a protection against diphtheria. The number immunised in this and adjoining districts during 1944 are given in the following table; in this district 114 children were immunised, 14 less than the number of children born in 1943 who would, in 1944, have reached an age at which they should be protected by immunisation.

Diphtheria Immunisation : N. R. Combined Districts.

	Guisborough U.D.	Loftus U.D.	Redcar Borough.	Saltburn and Marske U.D.	Skelton and Brotton U.D.
No. of children immunised :					
during 1943	145	223	890	176	410
during 1944	134	114	437	111	58
Estimated number of children under 5 years of age	620	635	1810	459	1090
Estimated percentage of these immunised at end of 1944	63	48	66	80	60
Estimated number of children aged 5—14 years	1187	1225	3698	816	1957
Estimated percentage of these immunised at end of 1944	72	75	65	98	60
(A) Cases of diphtheria in 1944 in children under 15 years	1	7	36	0	1
(B) Number included in (A) known to have completed a course of immunisation not less than 12 weeks before the onset	0	4	16	—	0
(C) Deaths from diphtheria in 1944 in children under 15 yrs.	0	0	2	0	0
(D) Number included in (C) known to have completed a course of immunisation not less than 12 weeks before the onset of the disease	—	—	0	—	—

Three sporadic cases of cerebro-spinal fever (spotted fever) were notified during the year; all recovered.

There were three new cases of tuberculosis during the year and four deaths from this disease: the number of fatal cases has been somewhat increased during the war years. The following table illustrates the progress that has been made in dealing with tuberculosis:—

Deaths from Respiratory Tuberculosis: N. R. Combined Districts.

	Number of deaths from Resp. Tuberc.	Unnotified before death.	Number	Notified before Death.		
				Percentage known sputum positive.	% dying within one month of notification.	% dying five years or more after notification.
1920—24	187	70	117	25	26	0·0
1925—29	173	36	137	46	17	3·6
1930—34	110	17	93	58	16	7·5
1935—39	105	18	87	68	13	13·8
1940—44	125	17	108	71	10	9·3

The number of deaths decreased in each successive period with the exception of the last, when war conditions were responsible for some increase. The proportion of cases unnotified before death has fallen from 1 in 3 to about 1 in 7, and most of these latter, occurring in institutions outside the area, may have been notified in the district of occurrence. The percentage of the notified cases known to be sputum positive has increased steadily from 25% to 71%, owing to the increasing use being made of laboratory facilities provided. In the earliest period 26% of those dying died within one month of notification, as against 10% in the last period, while in the five years prior to the war over 13% of those dying had survived at least five years after notification, the largest proportion so far achieved.

Verminous Infestation: Although there has probably been, due to war-time conditions, some deterioration of personal and household cleanliness in the district, the number of cases of scabies or of infestation with lice that has come to notice has been small. During the year 1944 six cases of scabies were notified by school teachers. Of 25 patients admitted from this district to the Joint Fever Hospital during the year one only was found to be infested with head-lice. No case of infestation with body-lice has come to notice. After the issue of the Ministry of Health Circular 2645, in May, 1942, dealing with scabies, I was informed by the County Medical Officer that the County Council had approved the recommendation "that the whole-time health visitors of the County Council be instructed to visit premises in which cases of scabies are reported at the request of a district medical officer of health or on the instructions of the county medical officer; and that no charge be made to the District Councils for such services." Advantage has been taken of this when it seemed expedient. No cleansing station has been provided by this District Council as the need for one is so slight.

Venereal Disease: Assistance has been given in affording publicity to educative work in combatting venereal disease by displaying in public lavatories posters on the subject supplied by the County Council.

Water-Supply: The water-supply of the area has been generally satisfactory, in quality and in quantity, during the year.

One bacteriological examination of a piped supply (Cleveland Water Co.) was made on September 18th; the report gave the colonies from 1 c.c. growing on Agar in 3 days at 22°c. as 50, on Agar in 2 days at 37°c. 1, and coliform organisms, streptococci or bacillus enteritidis sporogenes not found.

No water in the district is known to have a solvent action on lead, and no action was required in respect of contamination.

The proportion of dwelling-houses in the district supplied from public water-mains direct to the houses is estimated at 86%; and by standpipes 11%. The proportion of the population so supplied may be taken as the same.

Post-war Housing: The Council's post-war programme has been declared as the erection of 65 houses in the first two years. Negotiations were instituted for the purchase of two sites at Liverton Mines, containing together about 14½ acres, sufficient to accommodate 174 houses at 12 to the acre.

I am, Gentlemen,

Your obedient servant,

C. R. GIBSON,

Medical Officer of Health.

Guisborough,

August 2nd, 1945.

APPENDIX.

Statistics and Social Condition of the District.

Area (in acres): 10,595.

Registrar-General's estimate of resident population, mid-1944: 6,602.

Number of inhabited houses (end of 1944) according to Rate-books: 2,096.

Rateable value: £25,952.

Sum represented by a penny rate: £108 : 2 : 8.

The main industries are iron and steel works, ironstone mining, and agriculture.

1. SUMMARY OF VITAL STATISTICS.

Period.	Population.	Births.	Deaths.	Deaths at Ages		Deaths from all forms of Tuberculosis.	Yearly Birth-rate.	Yearly Death-rate.	Infant Mortality Rate (Infant deaths per thousand births).
				Under 1 year.	1-4 years.				
1884—1888	6,453	1172	505	161	62	--	36.4	15.7	137
1889—1893	6,208	1018	465	126	59	--	32.8	15.0	124
1894—1898	6,200	989	440	135	60	--	32.1	14.2	136
1899—1903	6,508	1150	496	159	53	--	35.4	15.2	138
1904—1908	7,600	1310	547	161	60	45	34.5	14.4	123
1909—1913	8,872	1465	600	172	72	45	33.0	13.5	117
1914—1918	8,700	1175	576	141	--	46	27.0	13.3	120
1919—1923	9,120	1148	481	93	47	39	25.2	10.6	81
1924—1928	8,342	872	458	43	17	28	18.8	11.0	55
1929—1933	7,997	648	461	38	18	19	16.4	11.7	59
1934—1938	7,744	539	473	40	13	16	13.9	12.2	74½
1939—1943	7,025	605	458	32	10	18	17.2	13.0	53
1944	6,602	156	82	7	1	4	23.6	12.4	45

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2. NOTIFIABLE DISEASES, 1944
(other than Tuberculosis).

	All Ages	Under 1 year	1 year	2	3	4	5	10	15	25	35	45	65	Cases Admitted Hospital	Total Deaths
Scarlet Fever ...	21	—	—	1	—	1	14	3	2	—	—	—	—	12	—
Diphtheria ...	7	—	—	—	—	—	4	2	1	—	—	—	—	7	—
Pneumonia ...	5	—	—	—	—	—	—	—	2	—	—	3	—	—	5
Erysipelas ...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—
Measles ...	3	—	—	—	2	—	1	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever ...	3	—	—	—	—	—	—	1	1	1	—	—	—	3	—

3. PATIENTS ADMITTED TO GUISBOROUGH & DISTRICT
JOINT ISOLATION HOSPITAL
(from North Riding Combined Districts).

	1/4/33 to 31/3/34	34/35	35/36	36/37	37/38	38/39	39/40	40/41	41/42	42/43	43/44
Scarlet Fever ...	149	290	148	220	227	128	26	48	27	32	110
Diphtheria ...	54	132	23	30	32	73	32	56	73	36	22
Enteric Fever ...	2	3	—	44	4	1	2	1	2	—	—
Erysipelas ...	2	1	2	2	—	—	—	—	—	3	1
Puerperal Fever ...	3	3	4	5	3	1	—	—	1	1	1
Poliomyelitis ...	—	—	—	—	—	6	1	2	1	—	1
Cerebro-spinal Fever ...	—	—	—	—	—	1	12	18	5	6	4
Others ...	—	—	—	—	—	—	12	29	30	36	40
TOTAL ...	210	429	177	301	266	210	85	154	139	114	179
Service & outside patients (included)	—	—	—	—	—	—	16	25	24	29	32

