## Contributors

Lydd (England). Urban District Council.

## **Publication/Creation**

1950

## **Persistent URL**

https://wellcomecollection.org/works/drxcd845

## License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection 183 Euston Road London NW1 2BE UK T +44 (0)20 7611 8722 E library@wellcomecollection.org https://wellcomecollection.org

Ac. 4412 (1) LYDD

LTH IOV 51 53 LIBRARY

LIBRARY

BOROUGH OF LYDD (KENT)

ANNUAL REPORTS

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

SANITARY INSPECTOR

FOR THE

YEAR

1950.



### BOROUGH OF LYDD (KENT)

### ANNUAL REPORTS OF THE MEDICAL OFFICER OF HEALTH AND SANITARY INSPECTOR FOR THE YEAR 1950.

Mr. Mayor, Aldermen and Councillors,

I have the honour to present to you my annual report for the year ending 31st December, 1950.

The Registrar General's estimate of the mid-year Home Population is 2,623. The number of live-births was 53, less by 3 than in 1949, and the birth-rate was accordingly 20.21 per 1,000 estimated Home Population. The birth-rate for England and Wales was 15.8. The rate for Lydd has thus been maintained at a relatively high figure. Factors influencing the birth-rate are numerous and complex, but on a general basis, a high rate can be regarded as a favourable social sign. The Royal Commission on Population indicated in their report published in 1949 that the number of marriages had greatly increased in recent years owing to the influence of the war. They also found that there has been a remarkable decline in the size of individual families since the middle of the last Century. It is probable therefore that the comparatively high birthrate in the Borough is due to a greater number of post-war married couples, than to any other single factor.

It must be very gratifying to all engaged in the Midwifery and Child Welfare Services in the Borough that no infants under one year of age died during the year. When it is recalled that in England and Wales at the beginning of this Century e.g. 1901, there was 151 deaths per 1,000 live births amongst infants under one year of age, it is not difficult to realise and to measure the effects of the great advance that has been achieved, especially in these latter decennia in medical science, and skill of application and in the efficiency of the administration of the Health Services.

It is also very gratifying that no deaths occured due to pregnancy and childbirth, another index that should truly be a source of satisfaction to those engaged in the Midwifery Services, having regard to the numerous dang rous complications which may beset women who are pregnant or in labour.

There were however, two stillbirths giving a rate of 36.36 per 1,000 total (live and still) births. The national rate has fallen from 40, since registration became compulsory in 1927 to approximately 23. Thorough ante-natal care and obstetric skill are essential to keep the number of stillbirths within the limits of unavoidable causes.

The crude death-rate for the Borough in 1950 was 10.9 per 1,000 estimated home population and when adjusted for age and sex distribution by the Area Comparability factor given by the Registrar General, becomes 9.57. This latter rate compares favourably with the death-rate for England and Wales which was 11.6.

Regarding the causes of deaths there were no significant variables. Diseases of the heart and circulation as in previous successive years took the greatest toll of lives, mostly amongst the aged, and Cancer the second highest number, again amongst the aged. Early diagnosis of Cancer is essential to successful treatment. Many patients seek advice when the discase is too advanced for any other than symptomatic treatment.

It is pleasing to record that there were no deaths from Infectious Disease. Of the notifiable diseases, only 7 cases of Measles, 7 cases of Whooping Cough and 1 case of Erysipelas were notified. Moasles and Whooping Cough are most infectious before the diagnosis is usually confirmed and during this period, commonly about 7 days, the infection is disseminated in classrooms and in other places where children congregate. Control therefore is almost impossible. Fortunately they are not per se killing diseases, like Diphtheria, but their complications such as broncho-pneumonia can be very dangerous in infants. Active immunisation against Whooping Cough is still very uncertain and should not be promised to p rents, unlike immunisation against Diphtheria which can definitely be promised as a safe-guard and which since the mass campaign was begun in 1941 has almost eliminated the disease from the Country. There must however, be no slackening in propaganda and every effort should be maintained to keep the need for it in the minds of p rents. Although the disease is becoming uncommon, the possibility of its occurence should be kept in mind, particularly in adults and in children who have not been immunised or if immunised who have not received further inocula tions to re-inforce waning immunity.

It is noteworthy that no infectious disease of a really serious naure occured in the Borough. For example, no case of Acute Polio-myelitis (Infantile Paralysis) has occured for more than 6 years. No cases of Food Poisoning were notified, but constant supervision of food and food preparing and cooking premises is essential to prevention. The number of outbreaks of Food <sup>f</sup>oisoning has considerably increased throughout the Country since the last war.

One new case of Pulmonary Tuberculosis was notified, and the total number of pulmonary (respiratory) cases on the register at the end of the year was 6. The number of cases therefore is relatively small and the notification rate viz. 0.38 per 1,000 of the estimated population was very low. There are no cases in the Borough of other forms of Tuberculosis. The causal organism in the majority of these latter cases is the Bovine Bacillus, which is conveyed to the human body in most instances by infected milk. It may be assumed therefore, as a corollary, that the milk supplies in the Borough have contained few, if any, of these dangerous organisms. Milk however, is always a potential source of danger and pasteurisation, or boiling especially for infants and young children, of all milk consumed is the only certain safeguard, not only against the Tubercle Bacillus but also against many other types of organism which may cause an outbreak of infectious disease.

In conclusion I should like to thank you for your interest and co-operation in the work of the Department and the staff for their loyal and efficient service.

I am,

- 2 -

Yours obediently,

J. MARSHALL.

### SECTION A.

STATISTICAL AND SOCIAL CONDITIONS OF THE DISTRICT

FOR 1950.

Aroa:- 11,932 acros.

Registrar-General's Estimate of The Resident Population :-	2,623.	
Number of Inhabited Houses According to the Rate Books :-	1,021.	
Ratoablo Valuo :-	£16,343.	
Sum Ropresented by a Penny Rate :-	£64.	

### Social Conditions

Lydd is a very ancient and historical Borough, being mentioned in Saxon Charters from 740 onwards. It is predominantly agricultural being chiefly concerned with sheep and cattle raising and arable farming. There are also four extensive beach quarrying and crushing plants within the District. Of the Sub-Districts, Dungeness is devoted to the fishing industry and Greatstone, where there is a large heliday camp, and at Lydd-on-Sea cater chiefly for heliday-makers. Lydd also contains a large permanent Army Artillery Practice Camp and a large proportion of the civilians are employed there. There is almost no unemployment and by and large social conditions are satisfactory.

## EXTRACTS FROM VITAL STATISTICS

		Total M.F		ydd orough	England & Wales
1.	Live Births	53 31 2		00 01	15.0
	(a) Logitimato	52 -31 2	per 1,000 l ostimated resident	20.21	15.8
	(b) Illegitimate	1 - 3	population		
2.	Stillbirths	2 1 3	Rate por		
	(a) Logitimate	2 1 :		36.36	-
	(b) Illegitimate		still) births		
3.	Deaths	27 14 13		10.29	11.6
4.	Deaths from Puerperal	l Causos 	Rate per 1,000 (live and still) births	-	0.86
5.	Deaths of Infants under One Year of Age (a) Legitimate (b) Illegitimate				
	Infant mortality rate Rate re legitimate in Rate re illegitimate	nfants	live births	Ξ	29.8
6.	Deaths from Cancer (a Deaths from Measles Deaths from Whooping Deaths from Gastritis diarrhoea	(all ages) Cough (all a		5 - -	
	The following cases of during the year 1950	of Infectious	Diseases wer	c notific	đ
	Whoopin Mensles Pneumon Erysipe	nia	7 7 3 1		

# CAUSES OF DEATH IN LYDD BOROUGH

DURING 1950.

	ALL CAUSES	Malos 14	Fomalos 13
1.	Tuberculosis, respiratory	-	_
2.	Tuborculosis, other		-
3.	Syphilitic disense	-	-
4.	Diphtheria	-	-
5.	Whooping Cough .	-	-
6.	Meningococcal infections	-	-
7.	Acute Poliomyclitis	-	-
8.	Monslos	-	
9.	Other infective and parasitic disease		- 7
0.	Malignant neoplasm, stomach	ī	-
1.	Malignant neoplasm, lung, bronchus		-
3.	Malignant neoplasm, breast Malignant neoplasm, uterus		1
4.	Other malignant and lymphatic neoplas	ms 3	1
5.	Leukaemia, aleukaemia	-	
6.	Diabetes	-	-
7.	Vascular lesions of nervous system	2	-
8.	Coronary disease, angina	2	1
9.	Hypertension with heart disease	-	1
	Other heart disease	2	7
1.	Other circulatory disease	-	-
2.	Influenza		-
	Pneumonia	-	-
4.	Bronchitis	2	-
	Other diseases of respiratory system	ī	-
6. 7.	Ulcer of stomach and duodenum Gastritis, enteritis and diarrhoga	Т	-
8.	Nephritis and nephrosis	-	ī
9.	Hyperplasia of prostate	-	T
0.	Prognancy, childbirth, abortion		
i.	Congenital malformations .		-
2.	Other defined and ill-defined disease	s 1	2
3.	Motor vehicle accidents	-	-
4.		-	-
5.	Suicide		-
6.	Homicide and operations of war	-	-

•

. . . . . . .

- 5 -

. . ...

#### Section C.

(a)

#### SANITARY CIRCUMSTANCES OF THE AREA.

### WATER SUPPLY

			sacistactory in quantity and
			quality.
		(b)	Samples of water for bacteriological
			analysis are taken monthly and for
			complete chemical analysis twice year
		(c)	The water is not plumbo-solvent
		(c) (d)	No action was necessary for any .
			form of contamination of the piped
			water supply.
2	AND	SEWERAC	HE .
		and the second second second	

11

The water supply has been

### DRAINAGI

The sewerage scheme for the drainage of the. post-war housing estate is now in operation, and is proving satisfactory. Sewage is carried partly by gravitation and . partly by pumping to the sewage works on the outskirts of the town. The question of further sewering of the town. has been deferred owing to the high cost.

### RIVERS AND STREAMS

No action has been found necessary during the year in connection with the pollution of . rivers and streams.

### CLOSET ACCOMMOD ATION

Practically the whole of the houses within the Borough are provided with water closets, drainin either to the public sewer or cesspool.

### PUBLIC CLEANSING

....

#### (a) House Refuse

House refuse is collected weekly by Co poration workmen, and taken to the authorised tip on the outskirts of the town.

### (b) Trade Refuse

In addition to the removal of house refuse regular additional collections of refuse are made from holiday camps during the summer and from a nearby Military Camp in the winter.

#### (c) Salvage

Salvage is collected at the same time as house refuse, but a separate collection is made from shops in the area. The workmen are paid a bonus to encourage them to collect as much as possible. 8 tons. 18cwts. of salvaged paper was disposed of during the year.

### Section D.

HOUSING

A contract for a further 32 Permanent Houses on the Council's Housing Estate at The Green has been commenced but the Contractor has gone into Liquidation. Four bungalows for old people were completed by the Corporation during the year. In addition two bungalows were completed by private enterprise.

There is still a number of sub-standard dwelling houses in the Borough, but owing to the acute shortage of houses, no action has been taken under the Housing Act for their demolition.

### Section E.

INSPECTION AND		
SUPERVISION OF		
FOOD	Milk	Supply
	Mannahae	an of

maan ooppag	
Number of Milk Producers	3.
Number of hetail Purveyors	3.
Number of Retailers who	
are not Cowkeepers in the	
Borough	3.
Number of Dealers Licences	
in pasteurised milk	1.

Food preparing premises are inspected regularly to ensure a satisfactory standard of hygiene. During the year 149 tins of varied foodstuff and 10 lbs. sausages; 29 lbs. bacon and 220 lbs. meat were condemned.

Animals to be used for human consumption are not slaughtered in the Borough.

### Adulteration, Chemical and Bacteriological Examination of Foods.

The local authority is not a Food and Drugs Authority under the Act, this work being carried out by the Kent County Council.

#### Nutrition

No special work in the dissemination of knowledge on this subject has been considered necessary.

### Shell-fish (Molluscan)

There are no shell-fish gathered for sale in the Borough.

