# Contributors

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# ANNUAL REPORT

of the

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# MEDICAL OFFICER OF HEALTH

FOR THE YEAR

# 1953

S. LUDKIN, M.B., B.S., D.P.H.

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Lanchester Rural District Council

# **ANNUAL REPORT**

of the

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1953

S. LUDKIN, M.B., B.S., D.P.H.

Health Department, Council Offices, Lanchester, Durham.

# TO THE CHAIRMAN AND MEMBERS OF THE LANCHESTER RURAL DISTRICT COUNCIL

#### MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in presenting my Annual Report on the health, vital statistics and sanitary circumstances of your area for the year 1953.

On the whole, it has been a satisfactory year, with no great variation from last year in the numbers of births, deaths, still births, infant and Tuberculosis deaths; the rates comparing favourably with those for the Country generally. The existing services in the area were well maintained with an improvement in the Chest Clinic Service and the premises from which it is operated.

During the year there was an outbreak of Dysentery at Langley Park, but most cases were mild in nature. Special attention was given to smoke nuisances and food hygiene in the area, and two courses of lectures and demonstrations on the latter subject were given to food handlers. The Council's Schemes for slum clearance were continued and in addition, financial assistance for the improvement of dwelling houses under Section 20 of the Housing Act, 1949, was made available to owners of suitable property.

There has been during the year, an increasing liaison both with the General Medical Practitioners and the Hospital Authorities and I wish to record my appreciation of their ready co-operation.

Finally, I wish to thank the members of the Council for their encouragement and support and the staff for their co-operation.

> I am, Ladies and Gentlemen, Yours faithfully, STANLEY LUDKIN, Medical Officer of Health.

# ENVIRONMENTAL CIRCUMSTANCES AND GENERAL STATISTICS IN THE RURAL DISTRICT

Area (A	cres)								44,243
Populatio	on (Estimated)								15,210
(i)	Estimated num Under 5 years 5-14 years								1,129 1,892
(i) (ii) (iv) (v) (v) (vi)	of Inhabited H Number of Aged Number of Cour Number of Cour Number of Hou Number of Lock Number of Occ have been receiv Estimated num	l Miners acil and acil and ses and c-up Sho upied F ved duri	d' Hon North Shops Douses ng the	Easter Easter combin for wh	n Aged n Asso ied ich for r closu	l Person ciation rmal un	ns Hon Home ndertal	nes s	$\begin{array}{r} 4,275\\21\\70\\1,303\\65\\37\\17\\252\end{array}$
Rateable (i) (ii)	Value : Actual Rateable Sum represente		enny					£282	£76,152 10s. 8d.

The district as at present constituted came into being on April 1st, 1937, and now consists of nine parishes—Cornsay, Esh, Greencroft, Healeyfield, Hedleyhope, Lanchester, Langley, Muggleswick and Satley.

Mainly agricultural, small urbanised areas such as Burnhope, Langley Park and Cornsay Colliery have, however, developed around collieries, and Lanchester Village itself, one of the prettiest in the County, and dating back to the Roman occupation, is the intersecting point of road traffic North-South and East-West.

#### NUMBERS OF EMPLOYED PERSONS

1. 2. 3. 4. 5. 6. 7. 8. 9. 10 11. 12. 13. 14. 15. 16.	Coal Mining Brickworks Coke Works R.D.C. Building Other Builders Cosmetic Manufacturers Clothing Manufacturers British Railways Explosives Sawmills D.C.C. Cottage Homes Hospitals Garages Bakers R.D.C. Staff Wood Machining		$\begin{matrix} Male \\ 1,432 \\ 130 \\ 170 \\ 116 \\ 83 \\ 42 \\ 11 \\ 21 \\ 15 \\ 21 \\ 2 \\ 34 \\ 27 \\ 18 \\ 56 \\ 25 \end{matrix}$	$\begin{array}{c} Female \\ 14 \\ 4 \\ 1 \\ - \\ 3 \\ 192 \\ 19 \\ - \\ 3 \\ - \\ 15 \\ 188 \\ 3 \\ 12 \\ 2 \\ 2 \\ 2 \end{array}$	$\begin{array}{c} Totals \\ 1,446 \\ 134 \\ 171 \\ 116 \\ 86 \\ 234 \\ 30 \\ 21 \\ 18 \\ 21 \\ 17 \\ 222 \\ 30 \\ 30 \\ 58 \\ 27 \end{array}$
15.	R.D.C. Staff		56		58

There are approximately 100 farms employing not more than five person per farm.

# UNEMPLOYED AND DISABLED

		Males	Females	Totals
(a)	Employable Persons out of work	at		
	31.12.53	50	17	67
(b)				
	in above figures at 31.12.53	30	2	32
(c)	Registered Disabled who were on the			
	Tuberculosis Register at 31.12.53	1	1	2
(d)	No. of persons who had special re-			
1.3	habilitation during year	1		1
(e)	No. of Registered Disabled persons			
10	who have been trained during 1953		10	2
(f)	No. of Registered Blind Persons	20	16	36
COMP	ARATIVE RATES			
		England &	Durham	Lanchester
				AP011101100001
		Wales	County	R.D.C.
	of live births per 1,000 population	Wales 15.5	17.8	R.D.C. 16.24
No	of live births per 1,000 population	Wales 15.5 0.35		R.D.C.
No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and	Wales 15.5 0.35	17.8	R.D.C. 16.24 0.39
No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births	Wales 15.5 0.35 0.76	17.8 0.43 0.94	R.D.C. 16.24 0.39 Nil
No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births	Wales 15.5 0.35 0.76 26.8	17.8 0.43 0.94 29	R.D.C. 16.24 0.39 Nil 24.5
No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population	Wales 15.5 0.35 0.76 26.8 11.4	17.8 0.43 0.94	R.D.C. 16.24 0.39 Nil
No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population of Tuberculosis deaths per 1,000 popu-	Wales 15.5 0.35 0.76 26.8 11.4	17.8 0.43 0.94 29 10.8	R.D.C. 16.24 0.39 Nil 24.5 13.95
No No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population of Tuberculosis deaths per 1,000 popu- lation	Wales 15.5 0.35 0.76 26.8 11.4 0.24	17.8 0.43 0.94 29	R.D.C. 16.24 0.39 Nil 24.5
No No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population of Tuberculosis deaths per 1,000 popu- lation of Pulmonary Tuberculosis deaths per	Wales 15.5 0.35 0.76 26.8 11.4 0.24	17.8 0.43 0.94 29 10.8 0.24	R.D.C. 16.24 0.39 Nil 24.5 13.95 0.13
No No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population of Tuberculosis deaths per 1,000 popu- lation of Pulmonary Tuberculosis deaths per 1,000 population	Wales 15.5 0.35 0.76 26.8 11.4 0.24	17.8 0.43 0.94 29 10.8	R.D.C. 16.24 0.39 Nil 24.5 13.95
No No No No	of live births per 1,000 population of still births per 1,000 population of maternal deaths per 1,000 live and still births of infant deaths per 1,000 live births of deaths per 1,000 population of Tuberculosis deaths per 1,000 popu- lation of Pulmonary Tuberculosis deaths per	Wales 15.5 0.35 0.76 26.8 11.4 0.24	17.8 0.43 0.94 29 10.8 0.24	R.D.C. 16.24 0.39 Nil 24.5 13.95 0.13

The standardised birth and death rates for the area, i.e. rates calculated in such a way that allowances are made for the age and sex composition of the population were 18.83 and 14.78 respectively. When comparing the above rates it must be realised that in a population of 15,000 (approx.) the rates frequently fluctuate from year to year, one or two additional deaths producing what would appear at first sight to be a significant change.

## DETAILED VITAL STATISTICS

#### BIRTHS

				Males	Females	Totals
(a)	Live Births Legitimate Illegitimate			$122 \\ 3$		243 5
			Totals	125	123	248
(b)	Still Births Legitimate Illegitimate			2 1	3	5 1
			Totals	3	3	6

	1947	1948	1949	1950	1951	1952	1953
No. of Still Births per 1,000 popula- tion	0.34	0.71	0.32	0.26	0.45	0.32	0.39
No. of Live and Still Births per 1,000 population	10.5	19.2	19.5	16.2	16.0	16.42	16.63
No. of Still Births per 1,000 Live and Still Births	10.0	37.2	16.9	16.3	28.4	20.0	23.6

During the year there were six still-births as compared with five last year

# DEATHS

	Males	Females	Totals
Deaths during the year	122	91	213
Deaths from Puerperal Causes	Nil	Nil	Nil

#### (a) Infant Deaths

The Infant Mortality Rate of 24.5 compares favourably with last year's rate (40.81) and also with that of the country as a whole (26.8).

During the year there were the following deaths under one year of age :---

Legitimate				Males 5	Females 1	Totals 6	Rate per 1,000 Live Births 24.5
Illegitimate					n (		la si mi - bu
	Tota	10		5		6	94.5
	Tota	15	in a				24.5

# For detailed statistics and trends see Appendix A.

(b)	Deaths (General) ALL CAUSES	Males 122	Females 91	Totals 213
1.	Cardio Vascular			
	(a) Vascular lesions of nervous system	25	15	40
	(b) Coronary disease	10	11	21
	(c) Hypertension with heart disease	3	3	6
		14	19	33
	<ul><li>(d) Other heart diseases</li><li>(e) Other circulatory diseases</li></ul>	14	8	22
	Totals	66	56	122
2.	Cancer—			
	(a) Stomach	8	2	10
	(b) Lung, Bronchus	2		
	(c) Breast	_	2	2 2
	(d) Uterus			
	(e) Other Sites, including Lymphatic			
	Neoplasms	11	9	20
	Totals	21	13	34
3.	Chest Diseases-			
	(a) Pneumonia	10	5	15
	(b) Bronchitis	6	1	7
	(c) Other diseases of respiratory sys-			
	tem	3	2 .	5
	Totals	19		27
	Totals			
4.	The home a locie (all former)		0	0
4. 5.	Tuberculosis (all forms) Influenza	_	2	2
6.	Gastro-Enteritis and Diarrhoea	_	-	1
7.	Diabetes		1	1
8.	Nephritis and Nephrosis		1	1
9.	Hyperplasia of Prostate	2	1	2
10.	Congenital Malformations	-		4
11.	Other Defined and Ill-Defined Diseases	10	10	20
12.	Motor Vehicle Accidents	2	10	-0
13.	All Other Accidents	2		$\frac{2}{2}$
14.	Suicide			-
200	the second			

The main causes of death were diseases of the Heart and Circulatory System, Cancer, Pneumonia and Bronchitis, in that order. The first two still remain a great challenge to medical science and preventive medicine. Heart disease, notably Coronary Thrombosis—21 deaths this year as compared with 16 last year—is assuming greater importance year by year. It will be noted that deaths from Carcinoma of the Lung were the same as last year (two in each case) but there was an increase of seven more deaths this year from Carcinoma of the Stomach (10 as compared with 3 last year).

There were 4 fatal accidents of which 2 occurred on the roads. During the year, the report of the "Standing Interdepartmental Committee on Accidents in the Home" was published. This report, based on five years of research, expressed the view that the two most important causes of accidents in the home are faulty design and equipment and in the broadest sense, human frailty; and that of the two, it is the human element—ignorance, carelessness and physical disability—that is the most important. The commonest kind of fatal accidents are listed as falls, burns, scalds, suffocation and gas poisoning. The majority of the victims are young children and old people and in most cases the accidents could have been prevented.

#### **II. HEALTH SERVICES IN THE AREA**

#### 1. Staff of Public Health Department

Medical Officer of Health and County Area Medical Officer for Consett and Stanley Urban and Lanchester Rural Districts :

S. LUDKIN, M.B., B.S., D.P.H.

Sanitary Inspectors :

G. ROWE, CERT. S.I.B. and Meat Inspectors' Certificate. (Senior Sanitary Inspector).

F. E. TERRY, CERT. S.I.B. and Meat Inspectors' Certificate.

Clerical Staff:

K. ROBERTSHAW (Appointment terminated 30.11.53).

H. CLOSE (Commenced duty 1.12.53).

#### 2. Laboratory Facilties

These continue to be provided by the Public Health Laboratory Service, Newcastle, under the direction of Dr. R. Norton.

All specimens for animal inoculation are sent to the laboratory attached to the General Hospital, Newcastle.

The increase in the number of specimens submitted this year is due to an epidemic of Sonne Dysentery which occurred in Langley Park and the surrounding area and the fact that all contacts of Dysentery or Food Poisoning cases are now followed up by the staff of the department. In addition, General Practitioners are making more use of the Laboratory facilities.

Routine annual specimens were taken from three known Typhoid and one known Paratyphoid Carrier.

The number of specimens sent for examination during the past three years being :---

Year			Specimens Submitted	Positive
1950			67	26
1951			61	23
1952			61	12
1953			204	80

Specimens taken at the Lee Hill and Maiden Law Hospitals are dealt with at the Hospital Laboratory, Shotley Bridge and are not included in the above figures.

The following table gives particulars of specimens sent in by the Health Department and the Medical Practitioners in the area for examination during the year.

			Incom		No. of Specimens Submitted.	Positive.
Blood	Ser	ological Examinations)				
		Enteric Fever			1	
	(b)	Other Organisms			1	1
Faeces						
	(a)	Enteric Fever			17	3
	(b)	Dysentery			58	33
	(c)	Food Poisoning			32	22
	(d)	Other Organisms			2	
Urine						
	(a)	Enteric Fever			15	
	(b)	Other Organisms			1	
Swabs		roat, Nasal and Ear)				
	(a)	Diphtheria			4	-
		Haemolytic Streptococci				
	(c)	Other Organisms				-
Sputui		r Tuberculosis			17	10
		Chest Clinics		1.77	47	16
	(b)	Other Medical Services			26	5
		Totals			204	80

#### 3. Local Health Authority Services

In accordance with a scheme adopted by the County Council on 25th February, 1948, the Administrative County is divided into twelve Areas, Lanchester Rural and Consett and Stanley Urban Districts comprising No. 3 Area. For each Area, a Health Sub-Committee has been appointed to exercise on behalf of the County Health Committee, certain functions relating to the services provided under the National Health Service Act, 1946.

This Sub-Committee is composed of three members from the County Council appointed by the County Health Committee, three persons appointed by the County Health Committees not being members of the County Council or District Councils, and fifteen members of the three District Councils in this Area. According to the scheme approved by the Minister and subject to such general or special directions as may from time to time be given by the County Health Committee, and to certain exceptions, I understand the functions of the County Health Committee under Sections 21-29 inclusive, of the National Health Service Act, 1946, can be exercised by this Sub-Committee in its Area.

All day to day administration of all these County Services is carried out at the County Headquarters, Area Medical Officers deputise for the County Medical Officer of Health at the quarterly meetings of the Area Sub-Committee.

I am indebted to the County Medical Officer of Health and his staff for the statistics relating to the personal health services.

#### (a) Clinics.

Although General Practitioners are now paid if they provide an ante-natal or post-natal service, there is in my opinion still a place for the Local Authority Clinics which can provide in addition to medical attention, teaching in mothercraft and general health education, and classes for "relaxation exercises". When well-run, expectant mothers enjoy attending the Clinics. They become members of a group sharing and discussing a common experience and in the case of the first pregancy, are thus able to view the whole event in true perspective.

Infant Welfare Clinics also with their dual medical and educational functions, can play a very valuable part in relating in the mind of the mother, the necessary place of prevention in the scheme of medical services and in ensuring the growth of healthy children.

#### (i) Birth Control.

Clinics for the above are held in the Maternity and Child Welfare Centre, Wetherall House, Medomsley Road, Consett, on alternate Friday mornings.

#### (ii) Ante-Natal

Clinics are held as follows :--

WESLEYAN CHAPEL, LANGLEY PARK-alternate Thursday afternoons.

PARISH HALL, LANCHESTER-alternate Monday mornings.

MINERS' WELFARE HALL, BURNHOPE-alternate Tuesday mornings.

CORNSAY COLLIERY AND ESH COLLIERY AT THE CLINIC, ESH WINNING-alternate Wednesdays.

(iii) Maternity and Child Welfare

PARISH HALL, LANCHESTER-alternate Monday afternoons.

MINERS' WELFARE HALL, BURNHOPE-alternate Thursday afternoons.

CORNSAY COLLIERY AND ESH COLLIERY AT THE CLINIC, ESH WINNING-alternate Wednesdays

#### (iv) Immunisation

Immunisation has been carried out at :---

(a) Maternity and Child Welfare Clinics throughout the Area and

(b) By General Practitioners by personal arrangement with parents

#### (b) Nursing in the Home and Midwifery Services

The County Nursing Association undertook during the year to carry out this service on an agency agreement with the County Health Committee, but have since been taken over completely by the County Council (1st April, 1954). All nursing requisites are now held by the central store at Durham and are sent out to the various patients when requests are received.

The following is a summary of the work carried out in this Area by the County Nursing Association :--

	a ray to	Cases.	Visits.	
Midwifery Maternity General, including Medical and Surgical Casual		45 10 408	$734 \\ 104 \\ 8,466 \\ 356$	
Total		463	9,660	

There are 4 General Nurses operating in the District.

In addition to these, 2 County Midwives live and operate in the District, while 5 operate but are not resident in the area of the Lanchester R.D.C.

The following is a summary of the work carried out by these Midwives :---

Midwifery			103 ca	ises
Maternity			12 ca	ises.

#### (c) Ambulance Service

The Rural District is covered in the main by the County Ambulance Depot situated at Maiden Law Isolation Hospital, Lanchester. This depot also undertakes most of the long distance journeys for the rest of the County and is in the area served by the Durham Control.

During the year the depot undertook the follow	ving work :
------------------------------------------------	-------------

Loumour		Cases carried				
Journeys Undertaken	Stretcher.	Sitting	Total	Miles		
2,646	1,463	6,067	7,530	156,515		

It should be noted that the conveyance of cases actually resident in the Rural District is not restricted to the Lanchester Depot, but is undertaken by the unit which is most convenient at any given time.

When an ambulance is required, contact must be made with either of the following Control points:

- (1) Durham Control-Telephone Durham 587.
- (2) For Healeyfield and Muggleswick Parishes, the local Headquarters are Villa Real Hospital, Consett—Telephone Consett 411

#### (d) Prevention of Illness-Care and Aftercare

Those cases discharged from hospital and requiring aftercare are visited by the Home Nurse if necessary, or supervised and advised by the Health Visitor if this should be requested. Nursing requisites can be hired from the Central Depot.

#### (e) Domestic Help Service

This service has been used even more extensively during the year than previously. The objects of the service is to provide domestic help for households "where such help is required owing to the presence of any person who is ill, lying in, an expectant mother, mentally defective, aged, or a child not over compulsory school age".

The service cannot provide a twenty-four hour one for bedridden invalids nor are Home Helps sick visitors; they are experienced housewives who can cook, wash and clean, and who can only stay in the house just as long as it takes them to get through the necessary work.

Charges are made, the amount depending on the income of the household, but these are extremely generous.

The service, in my opinion, meets an outstanding need, but if abusedand cases of abuse occasionally occur-this valuable but expensive amenity will easily be destroyed.

At the beginning of January, 1953, 68 cases in this district were being served by a home help. There were 16 new cases during the year, and of the total assisted 55 were aged people, 1 a Tuberculosis case, 6 maternity cases, the remainder being cases of illness or accident, making a total of 84 households being provided with the services of a home help.

#### 4. Hospital Services

The Local Hospital Services are administered by the North-West Durham Hospital Management Committee on behalf of the Newcastle Regional Hospital Board. The Secretary has kindly provided the following information on the Hospitals and Clinics serving this Area.

#### Maiden Law Hospital

Until April, all patients in the area suffering from infectious diseases, were admitted to this Hospital, but after this date, all these cases drained to the Chester-le-Street Infectious Diseases Hospital.

At 31st December, 1953, the following number of beds were available :---

Ear, Nose and Throat Chest Unit (Tuberculosis)		 36 72
Total		108

#### Lee Hill Hospital

This Hospital, with a complement of 295 beds (62 of which are used as Part III accommodation for the County Council) and a Medical Out-patients' Department, deals with the Chronic Sick and includes a section for Orthopaedic Tuberculosis cases.

Bed allocation is as follows :---

Orthopaedic		38
Mental		32
Chronic Sick Part III Accommodation		173
Part III Accommodation		62
Total		295

#### Shotley Bridge Hospital

Out-patient facilities for all the Specialities exist at this Hospital. The 557 beds are allocated as follows :---

Surgical Medical			122
			98
Gynaecological			43
Orthopaedic			27
Paediatrics			26
Thoracic Surgery			150
Radiotherapy			50
Plastic Surgery			41
	Total		557

(A certain number of General Medical, Surgical and Gynaecological cases from the Langley Park area also drain to Dryburn Hospital).

#### **Richard Murray Hospital**

There are 30 Obstetric beds at this Hospital.

#### **Chest** Clinic

As from 12th October, 1953, the newly-opened Chest Clinic at Villa Real replaced the service provided at the old dismal premises at 11, East Parade, Consett. At this pleasant, spacious well-equipped unit converted from a wing of the old Infectious Diseases Hospital, the following sessions operate :---

Tuesday mornings	9.15 a.m. each week	Contacts of known cases of Tube culosis.
Wednesday mornings	-9.15 a.m. each week	
Wednesday afternoons	-2.00 p.m. each week	-Artificial Pneumothoraxr and Pneumoperitoneum refills.
Friday mornings	-9.15 a.m. each week	-Females.
Friday afternoons		<ul> <li>—Children—upto 16 years of age.</li> </ul>

#### Venereal Diseases

Treatment and diagnostic facilities are provided by Clinics outside the Area as follows :---

Newcastle General Hospital, Westgate Road, Newcastle-on-Tyne. Males and Females :---

Monday to Friday : 9.30 a.m. to 12 noon ; 2 p.m. to 7 p.m. Saturday : 9.30 a.m. to 1 p.m. Sunday (Emergency only) : 10 a.m. to 12 noon.

#### Durham County Hospital.

Females : Monday and Thursday : 2 p.m. to 4 p.m. Males : Monday and Thursday : 4.30 p.m. to 5 p.m.

#### 5. Executive Committee, Durham

This Committee controls the services under Part IV of the National Health Service Act. There are ten General Medical Practitioners, two opticians and one chemist operating in the area.

#### 6. Prevention of Damage by Pests

During the year, 825 inspections were made to private dwellings, business premises, Local Authority's properties and agricultural premises (See Appendix E).

The maintenance treatments of sewers and sewage disposal works were completed at two six-monthly intervals as required by the Ministry of Agriculture and Fisheries. During the first treatment in March, 160 manholes were pre-baited and poisoned, and 56 were found to be infested. In the September treatment, 224 manholes were treated and 88 were found to be infested.

Close relations have been maintained with the representatives of the Northern Division of the Ministry of Agriculture and Fisheries and valuable information has been obtianed from circulars received during the year.

#### 7. Disinfestation

During the year 208 private houses were inspected prior to the tenants taking over the tenancies of Council Houses. Five were found to be infested with bed bugs and were disinfested. The method of disinfestation carried out is by spraying with insecticides, removing or destroying infested woodwork and washing down articles with soap and water.

#### 8. Refuse Removal and Disposal

The collection service continued to function efficiently during the year there being an absence of any major complaints, the only difficulty being that of obtaining relief labour to cover staff absences and so maintaining a regular service.

The demolition of old properties with conservancy type of sanitation and the rehousing of tenants in new Council houses has reduced the overall average tonnage of refuse removed during the year by approximately 200 tons. As the district becomes cleared of its old property and more old fashioned and wasteful types of solid fuel appliances in both Council and private houses are replaced by approved types of ranges, it is expected that the total weight of ash and refuse will steadily be reduced, the times of collection speeded up and possibly the frequency of calls increased where this is necessary. A weekly collection is maintained in most of the area except where concessionary coal allowances are made and in these cases it is essential to collect twice a week.

Despite increases in wages, etc., the annual average cost for collecting at each household has only increased 2d. from 35/51d to 35/71d.

#### Ash-Bin Removal Scheme.

The scheme whereby new standard Ash-Bins are supplied and delivered at the request of the owner at cost price plus a small charge for administration continues to work quite smoothly.

During the year, 25 bins have been supplied under the scheme to various owners.

#### 9. Trade Refuse

Trade refuse was collected during the year from 24 shops and factories in the area.

#### 10. Salvage

The salvage scheme has, during the year, run quite smoothly. The staff involved in the scheme do the work of baling and sorting in their own time and are paid approximately 5/6ths of the value of all paper sold and 50% of all other materials such as metals, rags, tyres, etc.

The value of the salvage materials sold during the year was £382 7s. 4d. of which £249 18s. 1d. was paid to the workmen, leaving a balance, after sundry expenses, of £119 8s. 2d. credit to the Council.

#### SANITARY CIRCUMSTANCES OF THE AREA

#### 1. Water

(a) All houses in the area with the exception of those mentioned in the subsequent table are supplied by the Durham County Water Board mains and all have the supply on tap in the house; none being served by a stand pipe.

	No.	of		Type of Supply			Me	thod of 1	Distributio	on		
Parish	Houses	Occu-	Public	Private	Reser-	Spring	Well	Carried	Gravi- tation	Pumped	HouseS	ervic
		pants			voir		-		Piped		inside	Ou
Cornsay Esh Greencroft	5 2 1	17 8 3		5 2 1		$\frac{3}{1}$	2 2 	3	2	2	22	3
Healeyticld Lanchester Langley	23 67 3	80 234 10	2	16 34 2	Ξ	14 32 2	2 4	5 23 3	17 28	2 16	16 38	7 29
Muggleswick Satley	56 33	191 124		33 16	1	31 15	$\frac{1}{2}$	9 13	44 12	3 8	47 17	3 9 16
Totals	190	667	3	109	1	98	13	56	104	31	122	68

(b) The Durham County Water Board supply during the year was very satisfactory apart from a complaint of chlorine taste at certain properties in Langley Park. This matter was remedied after the attention of the Board's Engineer had been drawn to the complaint.

The completion of a section of the Dunleyford-Burnhope water main from the Bank Top Reservoir into Burnhope village appears to have remedied the long standing trouble with regard to shortage of water supply to Burnhope.

Independent supplies to the following houses in the Allansford area have been found to be constantly contaminated :---

> Allansford Hall. Ivy Cottage, Allansford. Wharnley Burn Farm.

Occupiers of these premises were warned that all water used for cooking or drinking purposes should be boiled. Discussions with representatives of the Consett U.D.C. are to be held to consider the possibility of extending the mains supply from Castleside to these latter properties and in addition three cottages just over the Rural District boundary in the area of the Consett U.D.C.

(c) The following lengths of pipes were laid in the area by the Durham County Water Board during the year :---

970 yards of 9 ins. diameter pipes. 368 yards of 4 ins. diameter pipes. 1,042 yards of 3 ins. diameter pipes.

#### (d) Results of Water Samples.

Thirty one samples of water were sent to the Public Health Laboratory during the year and particulars of the results are as follows :---

	Grade 1	Grade II	Grade III	Grade IV	Total
Spring Supply Mains Supply	11 2	Ξ	2	15 1	28 3

In addition a sample of the Durham County Water Board's Supply was sent for chemical analysis. It was found to be pure and safe for drinking and domestic use.

It has been decided by the Durham County Water Board to appoint a full-time chemist and establish the laboratory in Consett. The Board's routine samples taken for bacteriological and chemical analyses, will then be undertaken at this laboratory.

	Dise	Disco		Grade				
Type D.C.W.B. Mains Supply			No. of Samples	1	2	3	4	
Mains	Langley Park Castleside		2 1	2	_	Ξ		
	Totals		3	2	_	-	1	
Springs	Parish							
· · · · · · · · · · · · · · · · · · ·	Healeyfield Lanchester Muggleswick		13 8 7	3 5 3		2	10 1 4	
	Totals		28	11	2 12221	2	15	

#### WATER SAMPLING

#### 2. Drainage and Sewage

A sewer extension was completed to Cadger Bank, Lanchester, thus enabling the four existing properties to be drained to the sewer and abandon their respective cesspools. The sewer will also provide for building development in this part of the village.

Prior to street making at Peartree Village, it was found that the sewer and certain branch connections required to be overhauled and this work was carried out.

The provision of a Canteen and Staff Rooms at Malton Colliery necessitated the laying of a drain to join the village sewage system.

The following three properties were connected to the public sewer.

N	orth Farm	and H	olly	Cottage,	Satley	
V	Voodbine C	ottage,	Esh			

To provide independent drainage and disposal systems for isolated dwellings remote from public sewers the following works were carried out during the year :

21

		New drainage system, tank and filter.
Heugh Farm, Esh		Í
Low Woodside Farm, Green	croft	1
The Croft, Rowley		1
Ward's End Farm, Satley		
The Hythe Farm Satley		1 4 1
Biggen Farm, Esh		Provision of new tank and filter.

#### 3. Atmospheric Pollution

Our attention was drawn to two major problems in the district ; one, the old-fashioned Coke Works at Langley Park Bye-Products Works and the other, the Healeyfield Smelt Mills at Castleside. In the case of the former, we met representatives of the Management and discussed the situation and it was agreed that a system be adopted which would, while not removing all the smoke produced, considerably reduce it and lesson the inconvenience complained of. In the latter case, because of the situation of these works, the expense of abating the nuisance appeared to the firm to be completely uneconomical and they, therefore, decided to concentrate their work in another area and discontinue using the Lead Furnace at Castleside.

The Smoke Deposit Gauge purchased by the Council, together with other two, were sited in the district and proved to be of considerable value.

# 4. Sanitary Conveniences

Twelve privy conversions were carried out during the year. 83 new houses provided a similar number of additional W.C's. while the clearance of 74 substandard properties reduced the total of conservancy closets.

The revised figures for sanitary accommodation at 31st December, 1953, are as follows :---

Water Closets				4,145
Ash Closets		 		247
Pail Closets		 		12
Privy Ashpits		 	 	171
Privies		 		36
Chemical Close	ets	 		5

#### 5. Housing

#### (a) New Properties :

Private Enterprise :

Two houses were erected privately during the year, one at Lanchester and the other at Rowley.

Prospect House, Lanchester, was converted into two flats, thereby providing one additional house.

#### Local authority :

During the year, the following Council houses were erected :--

Langley Park			48
Hamsteels			21
Castleside			14

#### (b) Repairs and Reconditioning :

A considerable amount of work of improvement was achieved during the year boosted by the adoption of the scheme for improvement grants under Section 20 of the Housing Act, 1949. Seven approved schemes were commenced during the year and, of these, three were completed, as follows :—

> 1, Millgate Cottages, Ushaw. 1, Esh Hall Farm Cottages. Click-em-in-Farm, Quebec.

If all the worth-while properties in the area could be modernised under this Scheme, it would certainly reduce the number of applications for Council houses.

17

The following properties were modernised by the provision of modern range, bathroom, hot and cold water services, sinks, etc. :

Charity Farm, Satley	1
10 & 11, Front Street, Esh	2
1, Cobblers Cottages, Satley	1
11, Kitswell Road, Lanchester	1
1, Whitefield Houses, Esh	1
10 Hawthorne Terrace Langley Park	1
8, Brown's Terrace, Langley Park	1
15, Clifford Street, Langley Park	1
2, Burnhopeside Hall Cottages, Lanches	ter I
Hillrise, Quebec	1
7 & 8, Wilks Hill, Quebec	2
Marley's Houses, Quebec	1
Stonefoot Hill Farm, Cornsay	1
Whiteside Farm, Burnhope	
The Hythe Farm, Satley	1
Total	17

Provision of new ranges, hot and cold water services and sinks were effected to the following fourteen houses :-

1 & 2, Hallgarth Terrace, Lanchester Logan Street, Langley Park	·	$\frac{2}{12}$
Total		14

In accordance with a previous agreement the following two back-to-back houses were converted into a Self-Contained house :---

2 & 21, Prospect Place, Satley.

#### (c) Demolition and Closures :

The following properties were scheduled for demolition during the year, and these will be dealt with as and when the tenants can be re-housed in Council houses :---

High Street, Cornsay Colliery		30
West Street, Cornsay Colliery		10
Gillow Street, Cornsay Colliery		27
		-
Total		67

Undertakings were received to close the following properties once they are vacated by the present tenants :--

44 & 441, Quebec Street, Langley Park	2
17 & 19, Rowley Bank, Castleside	2
Lyredene Cottage, Rowley	1
1 & 2, White Houses, Castleside	2
1 & 2, Tower Cottages, Greencroft	2
1, 2, 3, 4, 9, 10, 11 & 12, High Row, Waskerley	8
1-4, Cross Row, Waskerley	4
3, 4, 9, 10 & 11, Low Row, Waskerley	5
25 & 251, Commercial Street, Cornsay Colliery	2
Ivy Cottage, Esh	1

Total

29

Informal Agreement has been reached with the owners concerned not to relet the following properties when they are vacated by the present tenants :

Park House Farm, Langley Park		1
19, Hill Top, Esh		1
1-20, Church Row, Burnhope		20
1-20, Fell Row, Burnhope		20
Langley Old Hall (Part)		1
Chapmans Well Farm, Maiden Law		1
1-4, Carters Cottages, Langley Park		4
Total		48

During the year the following houses were demolished :

1-26, Chadwick St A., Cornsay Collie			_ 26
1-19, Liddle Street, Cornsay Colliery	Tures		19
1-6, 16 & 17, School Street, Cornsay	Collie	rv	8
3, 4, 13 & 14, Union Square, Cornsay			4
1 & 2, Mainsfield Cottages, Rowley			2
4, College View, Cornsay Village			1
23, Cowsley Cottages, Cowsley			1
Happyland, Greencroft			7
1-5, East Side, Cornsay Village			5
6, Post Office Row, Cornsay Village			1
Total			74

#### 100

#### (d) Medical Priority

The Council's very sound practice of allocating a number of new houses and casual lettings to medical cases has continued and in view of our concern to reduce the incidence of Tuberculosis in the Area, all of these were granted to overcrowded families or families living in insanitary circumstances who had, in addition, one or more members suffering from Tuberculosis.

#### (e) Overcrowding

There were 70 recorded cases (involving 91 families and 520 persons) on the register at the beginning of the year to which were added 8 new cases (involving 9 families and 40 persons).

Nine of these cases were in local authority property while the remainder were in private houses, many of them living in areas scheduled for demolition.

During the year 29 cases (involving 29 families and 219 persons) were relieved, two being in local authority houses and the remainder in private dwellings.

The greater number of cases (20) were relieved by re-housing by the local authority and the remaining nine cases were abated through various causes such as the tenant finding larger accommodation, the family being reduced in size, etc.

At the end of the year, there were 49 cases on the register, involving 71 families and 341 persons.

The Council's policy in relating the size of house allocated to the size of family concerned and carrying out the practice of moving small families from large to smaller houses is helping to reduce the extent of overcrowding.

### 5. Factories

During the year 29 inspections were carried out in the various factories in the area. (See Appendix C.).

The following is a list of factories in the area at 31st December, 1953.

Trade.		With Power.	Without Power.	Total.
Alloy Reclamation		-	1	1
Agricultural Contractor		2	-	2
Bakeries		2	-	2
Blacksmiths		1	1	2
Benzol Recovery		1		1
Boot Repairers		1	2	3
Brick and Pipe Works		2	-	2
Builders' Yards		1	6	7
Clothing Manufacture		1		1
Cosmetics		1	-	1
Ice-Cream Manufacture		2		2
Ioiners		5	1	6
Motor Repairers		6	5	11
Paint Mixing			3	3
Printing			1	1
Sausage Makers		14		14
Sawmills		2		2
Tailoring		_	2	2
Glove Making		1		ī
Locomotive Repairs		1	_	i
Laundries		2		2
Marine Store Dealers		_	1	ĩ
nume orono boundio				
Totals		45	23	68

## 6. Public Health and Housing Acts

(For analysis of inspections see Appendix D.).

The following is a summary of notices served under the Public Health and Housing Acts :---

•			Informal Notices	Formal Notices	Nuisances Abated
Foul Conditions			26		26
Structural Defects			1038		719
Overcrowding					11
Dairies and Milk Shops			1		1
Cowsheds					
Bakehouses			7		7
Slaughterhouses				-	
Ashpits and Privies and As	sh Bins	5			35
Deposits of Refuse and Ma	nure		135	_	135
Water Closets			53		48
Defective Yard Paving			9		9
Drainage Faults			162		134
Water Supply			77		62
Pigsties			9		3
Animals Improperly Kept			4		4
Smoke Nuisances			7		5
Offensive Trades			1		1
Other Nuisances					23
Food Shops			16		16
Vermin Infestations			16		16
Ice Cream			1		1
Rats and Mice			17	-	17
Totals			1676		1273

#### III. INSPECTION AND SUPERVISION OF FOOD

#### (a) General

Particular attention has again been directed to the maintenance of hygienic conditions in all those establishments where food is manufactured, prepared, sold and distributed, and on the whole all have been well conducted.

While the powers of inspection of premises and the standards of conditions as laid down in the Food and Drugs Act are essential as a background, the education of food handlers on personal and food hygiene is of primary importance. With this in mind, arrangements were made in December to give two courses of lecture-demonstrations together with film shows on this subject to food handlers in the district. The cause of food poisoning outbreaks was explained, how they could be prevented and the part which the food handler must play if the public are to be protected from this unnecessary infection. Booklets giving the main facts abour food poisoning and the principles of food hygiene were distributed. The response from traders and manufacturers was most encouraging.

Many careless food handlers and van salesmen, however, still fail to appreciate their responsibilities to the public and to realise that by their neglect or dirty habits, they may be the cause of widespread epidemics. Customers while demanding a high standard, must also play their part by patronising the clean retailer and manufacturer and also assist him to maintain his standards.

**Hygiene in Hospital Catering Establishments.** During the year a Ministry Memo (HMC(53)49) was considered by the Shotley Bridge Hospital Management Committee. It reminded Hospital Authorities of the dangers of food poisoning and suggested that in each hospital a Senior Medical Officer should be responsible for advising the Hospital Authority and the Catering Officer on hygiene in the Catering Department and should also be responsible for arranging lectures in hygiene to the catering staff. It also urged the Authority to enlist the help of the Medical Officer of Health of each district.

In accordance with this recommendation, a designated Medical Officer was appointed at each of the five hospitals in the North West Durham Group and the Medical Officer of Health was invited to undertake regular inspections of the Catering Department.

(b) Milk and Dairies Regulations, 1949

The following were on the regsiter at the 31st December, 1953 :---

Dairies (not dairy farms) Nil Distributors 7

(c) Milk (Special Designation) (Raw Milk) Regulations, 1949. The following licences were issued during the year under review :—

> Dealers' Licence to use the special designation "Tuberculin Tested" with regard to raw milk Supplementary Licence (Tuberculin Tested Milk)

1

1

#### (d) Milk (Special Designation) (Pasteurised and Sterilised) Regulations, 1949

The following licences were issued during the year under review :---

Dealer's Licence to use the special designation "Pasteurised"	3
Dealer's Licence to use the special designation "Sterilized"	14
Dealer's Supplementary Licence to use the special designation "Pas-	
teurised"	1
Dealer's Supplementary Licence to use the special designation "Steri-	
lized"	1

#### (e) Food and Drugs Act, 1938

Routine inspections were carried out at all the premises used for the manufacture, sale and storage of food.

The following premises were registered under the Act at the 31st December, 1953.

Ice Cream Manufacture	2
Ice Cream Storage and Sale	26
Preparation or Manufacture of Sausages, Potted or Pressed Food	14
Preparation of Preserved Food—Fried Fish	10

#### (f) Ice Cream (Heat Treatment) Regulations, 1947 and 1948

All premises used for the manufacture of ice-cream were inspected during the year and a good standard of hygiene was maintained.

Five samples of ice-cream were submitted for examination. Four samples were graded I and the other II.

#### (g) Meat and Other Foods

The slaughter of animals for human consumption was carried out at the Ministry of Food Slaughterhouse, Prospect Place, Consett. This is a centre for supplying all the butchers in the Consett Urban and Lanchester Rural Districts, and caters for a population of approximately 55,000. In conjunction with the North Eastern Wholesale Meat Supply Association and the Consett Retail Buying Group, home-killed and imported meat carcases are allocated to the various retail butchers' shops throughout the Area, this district receiving 20% of all allocations of meat received at these premises. The majority of live animals for slaughter are received from collecting centres situated at Blackhill, Lanchester and Rowlands Gill.

Commo	lity		No.	Jars	Tins	lbs.	OZS.
Cherries	1446				15	15	15
Peaches					9	10	8
Plums					11	14	14
Pineapple				4	2	6	4
Sliced Apple					1	5	8
Raspberries					1	6	4
Pears					5	6	3
Fruit Salad					1		151
Apricots					2	2	
Prunes					4	4	
Jellied Veal					11	53	8
Luncheon Meat					29	- 23	8258
Veal and Ham I	oaf				2	- 1-	5
Stewed Steak					16	15	8
Minced Meat Los	af				7	5	4
Tongue					19	74	
Chopped Pork					12	22	8
Canned Chicken					1	1	13
Chopped Ham					2	10	8
Corned Beef		-				6	
Cooked Ham						122	14
Ham Roll					5	20	
Bacon and Ham						33	4
Beef						418	8
Mutton						33	
Lamb		1-100				42	
Butter						28	12
Cheese						46	8
Milk					10		
Soups					5	4	131
Beef Paste				1			11
Tomatoes					61	99	12
Split Peas						14	_
Beans					. 14	13	4
Peas					9	9	4
· · · · · · · · · · · · · · · · · · ·						65	_
Fish Cakes			77				

Food found to be unfit for human consumption during the year :---

# (h) Slaughter of Animals Act, 1933

There were 26 licensed slaughtermen on the register at the end of the year.

# IV. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

There was a decrease in the number of confirmed cases during the year as compared with 1952 (241 as against 271). For analysis of notified and confirmed cases of notifiable diseases see Appendix B.

The Shotley Bridge Hospital Management Committee considered the recommendation of their Medical Advisory Committee on the control of communicable diseases in hospitals and it was decided that each Consultant be the designated medical officer for his own department and that the Medical Advisory Committee act as the Control of Infection Committee, the Medical Officer of Health to be consulted when necessary and co-opted to the Executive Sub-Committee when matters of mutual concern were under discussion.

From the beginning of April, all infectious diseases needing hospitalisation from the area formerly served by Maiden Law Hospital were admitted to the Chester-le-Street Infectious Diseases Hospital.

From the beginning of May onwards this also included Poliomyelitis and Meningitis patients.

Notifiable Diseases reported during the year 1953.

The following table gives particulars of the incidence of notifiable diseases (other than Tuberculosis) in the Area during the year :---

Disease	Total No. of Cases Notified.	Total No. of Cases Confirmed.	Cases Admitted to Hospital.	Total Deaths
Food Poisoning	15	15		
Pneumonia	15	15		
Dysentery	67	67		
Erysipelas	1	1		
Meningitis	1	1		
Poliomyelitis (paralytic)	1	1		
Whooping Cough	52	52	1	
Measles	63	63		
Scarlet Fever	24	24	11	
Puerperal Pyrexia	2	2	-	-
Total	241	241	12	

Searlet Fever-The number of cases decreased from 44 in 1952 to 24 this year.

It must be realised however that the same organism (Haemolytic Streptococci), in addition to causing Scarlet Fever can produce Tonsilitis, Catarrhal Infections, Septic Sores and Erysipelas, and can also be carried in the throats of resistant carriers. Of the latter infections only Erysipelas is notifiable and therefore the rest constitute an unassessed reservoir of infection. The futility of notifying one disease and not all others must of course be obvious. The disease was mild in type, only eleven were admitted to hospital and there were no deaths. Measles—There were 71 less cases notified this year than in the previous year—63 as compared with 134 for 1952. There were no deaths.

Whooping Cough—Fifty-two cases were notified throughout the year— 23 less than the previous year. The worst months appeared to be August, September and October, although fortunately no deaths occurred from the disease during the year. It is true that the treatment of the disease by antibiotics has improved, and if given early in the illness reduces the number and severity of the paroxysms, but until widespread immunisation with whooping cough vaccine is instituted, we are completely at the mercy of this potentially dangerous disease to which infants are so vulnerable.

**Diphtheria**—No cases were notified or occurred in the district during the year. While the annual incidence of cases and numbers of deaths from diptheria has diminished dramatically since the commencement of immunisation, it must, however, be realised that this continued decline is conditional upon the maintenance of an adequate level of immunity in the child population. If we are to ensure the prevention of the recurrence of this disease in an epidemic form, it is agreed we must attempt to immunise at least 75% of the children before they reach the age of one year.

In the Lanchester Rural District 42% of children under 5 years of age and 48.05% of children between 5 and 15 years of age have at some time been immunised.

At the time of writing this report, in an attempt to raise these rates, we are engaged in a School Immunisation Scheme, all eligible school children being offered immunisation at the school and during school hours.

Diphtheria Notification Rates (per 1,000 population) and numbers of Deaths from Diphtheria are as follows :

Year of Diphtheria	No. of Confirmed Notifications	Notification Rate per 1,000	No. of Deaths from Diphtheria Population
1934	63	1.9	8
1935	48	1.4	10
1936	66	2.5	5
1937	91	5.8	12
1938	60	3.8	4
1939	7	0.45	
1940	5	0.33	
1941	12	0.8	
1942	10	0.7	
1943	14	0.96	
1944	11	0.8	1
1945	3	0.2	
1946	5	0.3	
1947	1	.006	
1948	-	0.00	
1949	1	0.06	
1950		0.00	
1951		0.00	
1952		0.00	Research I
1953		0.00	

**Sonne Dysentery**—On Thursday, 3rd December, 1953, we were first notified of what appeared at first sight to be an outbreak of food poisoning in the Langley Park district. Houses in which there were affected persons were immediately visited and specimens submitted to the Public Health Laboratory. On further investigation, it was discovered that many other cases with very mild symptoms had been occurring for the previous two or three weeks.

Bacteriological results proved the outbreak to be due to Sonne Dysentery. A total of forty-eight cases were notified.

Particular attention was paid to Food Handlers and other persons likely to help the spread of infection whilst engaged in their work and all General Practitioners in the district were informed of the outbreak. With the applicacation of general measures the incidence of new cases diminished and the epidemic subsided.

**Typhoid and Paratyphoid**—Three known carriers of Phaged-typed Typhoid organisms and one of Paratyphoid organisms reside in the district. Routine specimens are taken annually from these unfortunates.

Smallpox—Between 1837-40, there were in England and Wales, some 41,000 deaths from Smallpox. However with the introduction of free vaccination in 1840 (made compulsory in 1853), with the exception of an epidemic in 1870, the number of deaths from this disease declined steadily so that we are now relatively free from it. Nevertheless, in recent years, several outbreaks have occured in Britain, all started by infected people entering the Country from abroad. Fortunately, in each case, it was kept under control and wide-spread epidemics avoided.

We must, however, be constantly on guard against the disease for with the great increase in air travel, the possibility of its introduction from abroad has also increased. This fact, together with the extreme difficulty of diagnosing a modified attack, makes it unlikely that Smallpox will cease to be a very rare cause of death.

The value of vaccination in preventing deaths from Smallpox has long been well established, yet the practice of vaccination commenced to decline in 1898 with a further decline since it became entirely optional at the inception of the National Health Service Act. In 1903, 75% of infants in England and Wales were vaccinated ; in 1936 it had dropped to 39% while in 1949, the acceptance rate for primary vaccination in those under one year was 28%.

A pamphlet regarding vaccination is sent from the County Health Department to parents when their children attain the age of three mnoths and the Health Visiting Staff are provided with details of children vaccinated in order that they can visit those not protected.

#### TUBERCULOSIS

Like those notifiable diseases already mentioned, Tuberculosis is an infectious disease and as with most of these infections during the past decade, its death-rate, apart from interruptions during the war periods, has shown a steady decline. The fall in mortality proceeded even before the causal organism was discovered in 1882, probably due to improving social conditions for the connection between poverty and overcrowding and Tuberculosis has long been established—aided after this date by preventive procedures based on the knowledge of the contagious nature of the disease. More recently, earlier detection by X-Rays, the institution of surgical measures and the introduction of new drugs, has been followed by a tremendous acceleration in this falling death-rate.

Nevertheless, this disease is still one of the main killing and incapacitating conditions affecting people of working age, and there has not been the same rate of decline in the numbers of new cases notified each year. The Chest Clinic is becoming increasingly the focus for all services responsible for the patient, and his family, both medically and socially; the Chest Physician being now responsible in addition for the hospital treatment. Control of Tuberculosis however, depends on many factors and the co-ordination of many services including the very important adequate, and readily available local care and after-care facilities, proper functioning care committees, and schemes for rehabilitation and re-settlement where necessary. A well-informed general public who can co-operate in building up the general and specific resistance of the community is of vital importance. We must see that our efforts do not merely build up an increasing register of cases which ultimately increase our reservoir of infection—our success can best be judged by the control of morbidity from Tuberculosis.

#### I. Statistics.

			Pulmonary	Non- Pulmonary	Total
(a) No. of new cases	notified sinc	e 1.1.5	3 :—		
Males Female			2 6	1 5	3 11
	Totals			6	14
(b) No. of Deaths Re Males Female			2 2		2 2
(c) No. of cases on at the 31st Decer	Tuberculos nber, 1953 :	is Reg –	ister		
Males Female	s S			15 20	40 53
	Totals		58	35	93

Age Period	Pulmo	onary	No Pulm	on- onary	Pulme	onary		on- onary
Years	М.	F.	M.	F.	М.	F.	М.	F.
0-4		-	_	2				
5-10				2				-
11-15	-	-	-		_		-	
16-20		1					-	
21-25	1	1			_			-
26-30	-	2	-	-	-			-
31-35	-	-	-	-	-		-	-
36-40			-			1	-	
41-45				0-0	1		-	
46-50	-	-	1	-				
51-55		2		1				-
56-60		-	-	-		1		
61-65		-			and the second second			-
66-70		11.111		111		10		
71-75	-			ditte.	In Dol	012101		1.000
76-80	-							-
81 and over	-		1 months		(Internet	127.301	han an	
Countrittee 3	2	6	1	5	144	2		1-4
a collection and a			-	~~	5			
	ALL NO.	8	6	5	2		-	

Age distribution of new cases and deaths are as follows :

Number and rate per 1,000 population of notifications and deaths over the last 16 years :

	Year	No. of Notifications	Rate per 1,000 pop.	No. of Deaths	Rate per 1,000 pop.
1	1938	19	1.227	4	0.26
	1939	21	1.360	9	0.58
	1940	11	0.729	5	0.33
	1941	24	1.634	9	0.61
	1942	15	1.059	7	0.49
	1943	15	1.082	9	0.65
	1944	14	1.010	9	0.64
	1945	24	1.714	7	0.50
	1946	13	0.897	4	0.27
	1947	21	1.441	4	0.27
	1948	20	1.306	8	0.52
	1949	15	0.997	4	0.39
	1950	20	1.304	9	0.57
	1951	36	2.349	2	0.13
	1952	18	1.182	3	0.19
	1953	14	0.921	2	0.13

#### II. Notification of Tuberculosis

There has been a decrease in the number of notifications of this disease. The general public are much more conscious of the importance of the early diagnosis and are much more ready to take advantage of Mass X-ray facilities and seek medical advice.

#### III. Deaths from Tuberculosis

It is very pleasing to find that there were only 2 deaths from Tuberculosis and I feel sure that this is the result of early diagnosis and the more effective treatment now available.

#### IV. Tuberculosis Services in the Area

(i) Chest Clinics are situated at Stanley (which drains the Burnhope area), Chester-le-Street (draining Langley Park and Esh Winning areas) and Consett (draining the Lanchester and Castleside areas).

(ii) Those cases needing sanatorium treatment are, in the main, admitted to the Maiden Law Tuberculosis Unit. This unit was gradually enlarged throughout the year to a maximum of 72 beds.

(iii) There were 93 patients on the Tuberculosis Register at the end of the year.

(iv) After-care responsibilities now rest entirely with the Durham County Council. All day to day administration is carried out centrally and nursing requisites, etc., are stored at Durham.

(v) The ad hoc Tuberculosis Liaison Committee, consisting of representatives of the North-West Durham Hospital Management Committee, a Chest Physician, Radiologist and your own Medical Officer, meet whenever it is necessary to discuss matters of mutual interest or importance.

(vi) A number of new Council houses and casual lettings have been given to Tuberculosis cases. APPENDIX A.

							29											
	er- sis.	.Iu <sup>q</sup> .no <sup>N</sup>	00	12	4	6	ŝ	3	10	10	8	6	ŝ	4	9	6	4	9
	Tuber- culosis.	.In <sup>d</sup>	П	8	7	15	10	10	4	14	10	12	15	П	14	27	14	œ
ied.	ts.	Food P.	1	1	1	1	1	1	1		1	1	I	1	1	1	1	15
ss Notif	Bowel Complaints	Enteric	1	1	I	I	I	1	1	2	1	5	-	1	1	1	1	1
Iseas	Ŭ	Dysentery	1	8	. 1	1	-		1		1	3	1		i	1	61	67
tious D		Polio- mycli- tis	I	1		I	I	1	1	I	1	3	I	I	1	1	4	1
of Infec		Diph- theria	60	7	5	12	10	14	11	3	5	1	1	1	1	1	1	I
No. of Cases of Infectious Diseases Notified		Scarlet Wh'ping Fever Cough	1	3	5	22	6	9	7	14	25	40	67	42	79	53	75	52
No.		Scarlet Fever	33	5	30	16	37	37	21	9	11	46	06	59	47	15	44	24
		Measles	I	3	54	133	23	96	63	76	153	181	184	244	222	288	134	63
		Neo- Natal Death Rate	1	1	1	-1	1	1	l	I	1	1	21.1	23.6	20.4	46.0	20.4	16.12
		Neo- Natal Deaths	1	1	1	1	1	1	I	1	I	I	9	7	5	11	5	4
		Infant Death Rate	67	28	57	99	59	61	63	61	42	30	45	27	40	67	40.81	24.5
		Infan- tile Deaths	16	9	13	17	14	16	18	16	11	6	13	80	10	16	10	9
		Birth Rate	15.4	14.2	14.9	17.0	16.6	18.9	20.5	18.7	17.8	20.0	18.5	19.2	16.0	15.6	16.09	16.24
		Live Births	238	214	226	251	236	262	285	262	159	294	284	296	245	239	245	248
		Death Rate Live Deaths (crune) Births	10.2	11.4	11.6	6.11	12.4	12.5	11.0	11.3	10.9	11.7	10.1	11.1	13.1	13.0	11.23	13.95
		Deaths	158	178	176	176	176	174	157	159	158	172	155	171	202	199	171	213
		Popu- lation	15.480	15.440	15,080	14,690	14,170	13,850	13,850	14,000	14,490	14,580	15,310	15,340	15,310	15,300	15,220	15,210
		Year	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953

APPENDIX B.

ANALYSIS OF THE NOTIFIED AND CONFIRMED CASES OF NOTIFIABLE DISEASES UNDER AGE GROUPS FOR 1953

S		15	15	67	-	1-	-	52	63	24	0	1-
TOTALS	C	1						1	9	61		241
	N	15	15	67	-	-	1	52	63	24	10	241
Age Not known	0			1		1	1	1	1	1	1	1
ANkne	Z	1	1			1					1	1
66 and Over	C	2	4	4	-			1				=
@ 8 Q	Z	101	4	4	-	1		-		1		=
46-65	C	0	3	3						1		11
	Z	0	3	3						1		=
36-45	0	-	-	3							1	1
	Z	-	-	32				1		1		1
21-35	C	0	0	10					-	10	10	25
21	z	S	5	10					-	10	101	25
16-20	C		-	3					-			0
16	z		-	3		1			-			5
11-15	C			4	1					12		6
11.	z			4						2		9
6-10	C		-	14			-	4	4	6		33
-9	z		-	14			-	4	4	6		33
5	C			10				10	15	4	12	39
	Z			10				10	15	4		39
4 -	C			3				4	00	3		20
	Z			Lic .				4	8	3		20
33	C			3				10	8	101		23
	Z			2 3				3 10	8	10		23
61	C	-						00	10	-	1	57
	Z	-		2 2				9 8	9 10	-		2 2
-	C	1 1		2				3 6	6	-		2
	Z			61		-		2 5	5			7 2
Under 1 year	C	-		57		-		1	1			17 17 22 22 22 22
D7	Z											-
ease		ß										
Name of Disease		Food Poisoning	Pneumonia	Dysentery	Erysipelas	Meningitis	Poliomyelitis (Paralytic)	Whooping Cough	Measles	Scarlet Fever	Puerperal Pyrexia	Totals

# APPENDIX C.

# FACTORIES ACT, 1937

1. Inspection of Factories

		N	UMBER OF :	
	Premises	Inspections.	Written Notices.	Occupiers Prosecuted.
Factories		70	3	-

There were no outworkers in the area at the 31st December, 1952.

# 2. Defects found in Factories

2 2 2 2 11 1	Nu	mber of def	ects	
Particulars	Found.	Remedied.	Referred to H.M. Inspector.	Prose- cuted.
Nuisances under the Public				
Health Acts	-	-	11111 march 1	_
Want of Cleanliness				
Nant of Ventilation	_	_		
Overcrowding	_	_		_
Vant of Drainage of Floors		_		
Other Nuisances	2	2		-
Sanitary Accommodation : (a) Insufficient	2	2		
(b) Unsuitable or defective	_	-		
(c) Not separate for sexes	-	-	-	
Totals	4	4		_

LATIN	223	319	595	35	746	71	323	103	2415
Other Matters	9	8	19	x	19	1	4	61	67
Smoke Nuisances		-	I	1	15	3	13	1	32
Rod g t Control	8	8	16	1	5	1	1	5	32
Water Supplies	Ξ	10	15	1	7	13	33	24	113
Ice-Cream		1			5	1		1	61
Factories	8	13	15	1	32	1	61	1	70
sdous Miilk	1		1	1				1	1
I.D. Investigation	63	6	3	5	30	1	so.	1	51
W.C. Conversions	61	1	-	1		3	9	1	12
Sanitary Accommodation	9	10	66	1	47	2	40	12	221
sqiT əsuləX	80	23	2	60	26		26	2	100
Refuse Removal and Salvage	18	21	ŝ	1	42		24	14	124
Drainage	58	53	31	1	38	12	95	00	295
Verminous Premises	60	-	4		16			1	24
gnizuoH	93	143	362	22	424	32	75	31	1182
Food Shops Meat and Other	5	4	8		17			1	34
Aleat and Other Food Inspection and Slaughter Houses	1	20	10	1	26	1	1	1	56
	Burnhope Peartree Holmside	Lanchester—Malton Greencroft Maiden Law	Cornsay—Quebec Hamsteels Hedleyhope and Hedleyhill	Esh Colliery	Langley Park Esh Village and Hill Top	Satley and Butsfield	Castleside Rowley and Knitsley	Muggleswick-Waskerley	Totals

# APPENDIX D.

# APPENDIX E.

# Prevention of Damage by Pests

			Тур	e of Prope	rty	
		Local Authority	Dwelling Houses	Agri- cultural	All other (including Business and Industrial)	Totals
I.	Total number of prop- erties in Local Auth- ority's District	32	3965	245	265	4507
II.	Number of properties inspected by the Local Authority during the 12 months ended 31st December, 1953, as a result of (a) notifica- tion (b) survey under the Prevention of Damage by Pests Act, 1949 (c) otherwise, e.g. when visited pri- marily for some other purpose	(a) 17	24 154 544	6 15 52	1 84 70	48 281 696
III.	Number of properties (under II) found to be infested by rats	Major 4 Minor 13	2 26	=		6 40
IV.	Number of properties (under II) found to be seriously infested by mice		10	_	3	13
V.	Number of infested properties (under III and IV) treated by the Local Authority		38	_	4	59
VI.	Number of informal notices served under Section 4 :		_	_	_	
_	(i.e. Proofing)		-		-	
	Totals	-	-	-		
VII.	Number of cases in which default action was taken by Local Authority following issue of notice under Section 4		_	_	_	_
VIII.	Legal Proceedings		-		-	-
IX.	Number of "block" control schemes car- ried out		-	-	_	10

Location of Sewage Type of Treatment	Area Drained	System	No. of Pr Draining	No. of Properties Draining to Works	No. of Properties Draining to Works Estimated
			Houses	Bldgs.	ropmanon
Tank and Filter	Lanchester, Maiden Law, and approx. half of Burnhope	Part Separate	632 177	15	2,206 619
Tank and Filter	Approx half Burnhope	Part Separate	408	13	1,428
Tank and Filter	Peartree	Part Separate	28	I	100
Tank and Filter	Holmside	Part Separate	32	1	112
Tank and Filter	Langley Park and Esh Village, part by gravitation part by pumping	Part Separate	1,458	20	5,057
Esh Winning vested in Lanchester R.D.C. & Brandon U.D.C. jointly	Part of Cornsay Colliery, new Hamsteels Estate, Hamsteels. Property in Brandon U.D.C. Area	Part Separate	5:8	18	1,943
Tank and Filter	Hedleyhill	Part Separate	11	1	38
Tank and Filter	East Hedleyhope	Part Separate	46	3	162
Hedleyhope Colliery Tank and Filter	Hedleyhope Colliery	Part Separate	21	1	70
Tank and Filter	Cornsay Village	Par: Separate	25		78
Tank Contact Beds Filter	Quebec and Wilkes Hill	Part Separate	92	3	322
Tank and Filter	Hollinside	Part Separate	20	I	75
Tank and Filter	Malton Colliery	Part Separate	37	5	129
Tank and Filter	Satley	Part Separate	41	3	143
Tank and Filter	Western half of Castleside. Sewage from the remainder of Castleside accepted for treatment by Consett U.D.C.	Part Separate	144	ο,	504

APPENDIX F.

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