

[Report 1950] / Medical Officer of Health, Maidstone U.D.C. / Borough.

Contributors

Maidstone (England). Urban District Council.

Publication/Creation

1950

Persistent URL

<https://wellcomecollection.org/works/dgg6k4bq>

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>

BOROUGH OF MAIDSTONE



ANNUAL REPORT

FOR

— 1950 —

ON THE

HEALTH OF MAIDSTONE

BY THE

MEDICAL OFFICER OF HEALTH



P. JACOB GAFFIKIN, M.C.,
M.D., B.Ch., B.A.O., D.P.H.



MAIDSTONE:
YOUNG & COOPER LTD., PRINTERS, BANK STREET

Report of the Medical Officer of Health for the Year 1950

*To, The Mayor, Aldermen and Councillors of the Borough of
Maidstone.*

MR. MAYOR, LADIES & GENTLEMEN,

I have the Honour to present to you my Annual Report on the Health and Sanitary Condition of the Borough of Maidstone, for the Year ended December 31st, 1950.

In the year under review, we have been gathering more knowledge of the results of the transfer of so many of the functions and responsibilities, formerly entrusted to the Borough Councils, to the larger organisations of the County and County Borough Councils. The care of the public health is still in some measure the responsibility of the Borough Councils and their Health Committees and, to form a clear picture of what part these smaller Authorities still have to play, it is advisable that we should consider what "Health" is, or should be. I would set before you the definition of "Health," as declared by the newest of the organisations in the international field, the United Nations. It reads "Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity." Considered in the light of this definition, it will be seen that every Local Authority, large or small, and every Committee of such Authorities, not only the designated Health Committee has a share in the promotion of the Public Health. Practically every activity of local government has some bearing on the securing for the citizen of "Complete physical, mental and social well-being" and as such, is a health activity.

In my last Report, I ventured to assert that modifications and adjustments of the scheme by which the County Councils were entrusted with many of the duties formerly performed by

the Local Authorities were inevitable, and that these would, of necessity, be in the direction of delegation of some of these functions to the smaller Authorities and a return, in some part at least, to a more local and individual form of health administration. Another year of experience has made it even more apparent that, if " Complete physical, mental and social well-being " is to be the aim, such delegation will have to be a real delegation of responsibility and power to the smaller authorities and of freedom and initiative to their Officers. Without such outlet for initiative, discretion and action, the consequent feeling of frustration will spell the end of local government as we have known it and local pride and patriotism, which have evoked so much devoted service in the past, will suffer irreparable damage. Men and women will not be willing to spend their energies and their time in service on Town Councils which are shorn of their powers, and recruits to a service which offers nothing but a life-time spent in a subordinate position with but a slight possibility of doing constructive work, will not be forthcoming. Already, the falling-off in the number of candidates for the Diploma in Public Health indicates that the younger medical men and women are avoiding local government service and that clinical and curative medicine is more alluring than the preventive side. In other Departments, it is becoming more and more difficult to obtain suitable and qualified Officers and the Local Government Service will be the loser, if Officers, of the high quality known in the past, are no longer to be found in it.

The health of the Borough in the past year has been good, but there was a considerable amount of scarlet fever, fortunately of a mild type, and a severe outbreak of measles. We were fortunate that in 1950 only one case of polio-myelitis was notified. Three outbreaks of food poisoning were discovered, in which 31 people were affected, and I am glad to record that there were no deaths from this cause.

For the third year in succession, I have the satisfaction of recording the maternal death rate as " NIL ."

Housing is still the great and clamant problem of all public health administration and the immediate barrier to a realisation of "Complete physical, mental and social well-being." Though the efforts of your Council have been unremitting, progress is still lamentably slow. The list of applicants grows as fast or faster than the tale of those provided with houses. The plight of young folk who cannot hope for a home of their own until their children are growing out of babyhood is pitiable. It is of small use giving the elder girls in the schools instruction in house-craft, if there are to be no houses in which they can apply the lessons when they marry. And such is the need for any kind of a house, that many unfit and unhealthy houses, which have long been ripe for demolition, have to be retained and occupied.

To the Council, and in particular, to the Chairman and Members of the Health Committee, I would express my thanks for the continued interest and support which I have received during the year and, to the staff of the Health Department, for their enthusiastic co-operation, which has been of so great assistance in maintaining the standard of the Health Services in the Borough, and,

I have the Honour to be,

Mr. Mayor, Ladies & Gentlemen,


Your obedient Servant,

P. JACOB GAFFIKIN,

Medical Officer of Health

Health Department,
13 Tonbridge Road,
Maidstone.

August 16th, 1951



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

General Statistics.

AREA :—5,972 acres.

POPULATION :—Census 1921—37,448.

,, 1931—42,259.

ESTIMATED RESIDENT POPULATION, 1950 :—

For calculation of Birth and Death Rates, etc. 54,940.

NUMBER OF INHABITED HOUSES (end of 1950) 14,346.

RATEABLE VALUE :—£476,628

SUM REPRESENTED BY A PENNY RATE :—£1,928.

Extracts from Vital Statistics.

LIVE BIRTHS.	Male.	Female.	Total.
Legitimate ...	385	350	735
Illegitimate ...	22	21	43
Birth rate per 1,000 of the estimated resident population			14.16
Live Birth Rate for England and Wales ...			15.8
for 126 County Boroughs & Great Towns ...			17.6
for 148 Smaller Towns ...			16.7

STILLBIRTHS :—26

Rate per 1,000 total (live and still) births	...	14.06
Still birth rate per 1,000 population	...	0.40
for England & Wales	...	0.37
for 126 County Boroughs & Great Towns		0.45
for 148 Smaller Towns	...	0.38

DEATHS	Male.	Female.	Total.
... ..	319	331	650
Death rate per 1,000 of estimated resident population			11.83
" " for England & Wales			11.6
" " for 126 County Boroughs & Great Towns			12.3
" " for 148 Smaller Towns			11.6

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

	Deaths.	Rate per 1,000 total (Live and Still) births
No. 29 Puerperal Sepsis ...	Nil	Nil
No. 30 other Puerperal causes	Nil	Nil

Death Rate of infants under 1 year of age :—

All infants per 1,000 live births	...	...	29.563
Legitimate infants per 1,000 live births	...	...	28.57
Illegitimate	"	"	46.51		
Deaths from Cancer (all ages)	...	...	98
"	"	Measles (all ages)	Nil
"	"	Whooping Cough (all ages)	1
"	"	Diarrhoea (under 2 years of age)	1

General Provision of Health Services in the Area.

The changes that have resulted from the establishment of the National Health Service have caused cessation of direct responsibility of the Borough Council for many of the services, but have not lessened,—and I hope never will lessen,—the interest shown by the Corporation and in particular by the Health Committee, in these vital services. I therefore propose to continue inclusion of notes on the health services in the Borough in my Report and I am sure that the Borough Council will find cause for satisfaction in the knowledge that the foundation laid by it in past years has provided the basis for future expansion.

SCHOOL CLINICS. The Education Act of 1944 transferred this part of the work to the County Education Committee and the School Clinic is now held at Foster Street. The National Health Service and the School Medical Service should ensure complete medical provision for school children, when co-ordination of these two services can be obtained, but there is at present a considerable lag in obtaining necessary treatment.

MATERNITY AND CHILD WELFARE SERVICES. The Infant Welfare Centres and the Ante-Natal Clinics are also now part of the County Council's activities, but the existing clinics have been continued and additional Infant Welfare Centres have been established.

HOSPITALS. All the local Hospitals are now administered by the South-East Metropolitan Regional Board and by the Mid-Kent Hospital Management Committee. Considerable improvements have already been made in the general hospitals and I hope that before long, the Isolation Hospital at Fant Lane, which was formerly the direct charge of the Health Committee, will be brought up-to-date by the provision of the cubicles for which I have asked for twenty years. Maternity hospital beds

have had increased calls on the available accommodation, for the shortage of housing makes it more imperative that many confinements should take place in hospital and the Maternity Home at the West Kent Hospital which the Borough Council had provided and which is now included in the hospital service, has been widely used as well as maternity beds in other hospitals.

BIRTHS NOTIFIED DURING 1950

Live Births	...	...	...	...	...	...	...	778
Still Births	...	...	...	...	.....	...	...	26

HOME & DOMESTIC HELPS. This service is also supplied by the County Council. Assistance is provided for invalids and for aged persons who cannot look after themselves, as well as for maternity cases at the time of confinement, but the recruiting of suitable Home and Domestic Helps has proved to be a difficult problem.

THE AMBULANCE SERVICE. The Ambulance Service is also provided by the County Council, but in Maidstone I am glad to say that this service has been organised through the old and trusted friends of the Maidstone people, the St John Ambulance Brigade.

DAY NURSERIES. Only one of the three Nurseries which were started during the war is still in existence and the numbers are now only about 30% of those in the war years. Admission is now limited to priority cases and of these a large proportion are illegitimate children. I am dubious of the desirability of such restriction, for it is only too easy for the ordinary citizen to get the notion that admission to a nursery is synonymous with illegitimacy and from such errors, it is the child that suffers.

SUNLIGHT CLINIC. This Clinic has continued to function with success at the Old Palace and many children have derived benefit as their Mothers have been pleased to testify.

TUBERCULOSIS & CHEST CLINIC. This is now part of the National Health Service and complete facilities for examination

and X ray are available. The great need in the tuberculosis campaign is for nursing staff, so that the beds which are available can be used to the utmost.

VENEREAL DISEASES. A Clinic is now established at the West Kent Hospital as part of the National Health Service.

CHILD LIFE PROTECTION. This is now transferred to the control of the Kent County Council and in this department, I am glad to say that there is still close co-operation between the Health Department, the County Health Visitors and the N.S.P.C.C. Inspector in Maidstone.

Sanitary Circumstances of the Area

(a) **WATER SUPPLY.** The public water supply in the Borough of Maidstone is furnished by the Maidstone Water Company. The supplies are drawn from deep bore-holes and springs and are pumped to reservoirs in various parts of the town. The water, though hard, is consistently of good quality and during 1950, the supplies have been adequate for the demands. In some parts of the town, where complaint had been received of lack of pressure, measures have been taken to remedy this defect. Improvements have been carried out at the Company's pumping station at Forstal, where new pumping machinery to replace the engine which had given many years of service, has been installed and extensions and improvements of the reservoirs and water towers are proposed, which should ensure an adequate supply for all the needs of the town for many years.

Details of the sources and gathering grounds have been given in previous reports. The regular patrolling and care of the springs, sources and gathering grounds by the Water Company's staff have been continued and the provision for sterilisation of the water, by ozone and by chlorine, which were described in earlier Reports, have proved very satisfactory. Regular chemical analysis and bacteriological examinations of samples from the various sources have been made, some by the Water Company's Analysts and some at the County Laboratories and the results obtained have been consistently good. There is no evidence of plumbo-solvent action.

The average results of the regular chemical analyses made during the year are set out in the Table below:—

Average Results, 1950	BOARLEY.	COSSING- TON WELL.	FORSTAL.	FARLEIGH ENGINE HOUSE	BOXLEY WELL.	COSSING- TON SPRINGS.	BOXLEY BOREHOLE.
	Pts. per 100,000	Pts. per 100,000	Pts. per 100,000	Pts. per 100,000	Pts. per 100,000	Pts. per 100,000	Pts. per 100,000
Total Solid Residue ..	38.9	18.3	58.5	52.3	30.9	34.3	20.1
Chlorine ..	2.746	1.946	3.796	3.304	2.025	2.175	2.036
Nitrogen (Nitrates) ..	.178	.042	.155	.189	.131	.159	.046
Nitrogen (Nitrites) ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Ammoniacal Saline ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Albuminoid Ammonia ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Iron ..	.002	Nil	Nil	.007	Nil	Nil	Nil
Oxygen absorbed ($\frac{1}{2}$ hour at 27° C.)	.0094	.0113	.0111	.0115	.0059	.0100	.0117
Oxygen absorbed (4 hours at 27° C.)	.0227	.0196	.0261	.0180	.0138	.0218	.0217
Total Hardness ..	24.4	12.4	38.7	32.8	22.6	23.3	12.4

In general it is the practice in Maidstone for the water from the public supply to be brought directly into the houses, but there are some areas where the supply is from stand-pipes, to which the inhabitants go for their water. I am glad to say that the number of such houses is not very large, 103 houses, served by 23 stand-pipes and the approximate number of inhabitants of these houses is 330. The clearance of undesirable houses in the Borough will remove this defect in our housing system, with the raising of the housing standard.

(b) DRAINAGE & SEWERAGE. The sewage disposal works has continued to operate as in previous years and there have been no extensions to the works during 1950. The extensions and additions to the drainage system for the development of the housing estate at Shepway were installed in 1949 and there were no new lengths of sewer laid in 1950.

(c) RIVERS AND STREAMS. In each succeeding Annual Report I have commented on the state of the river Medway and its tributary the Len and have expressed a hope that the pollution, much of which is avoidable, would be remedied and that the people of Maidstone would be moved to demand that what should be a beautiful river and one of the glories of the town, should not be allowed to become foul and noisome. But alas, it has been a case of "Using vain repetition" and the

hope deferred that makes the heart sick. With the establishment of the rivers authority, it may come that the needful action will be taken and the river be saved, for it is quite erroneous to think that industrial prosperity necessarily means the spoiling of the country's rivers.

(d) CLOSET ACCOMMODATION. In Maidstone, the majority of the houses are equipped with water closets and connected to the public sewers, but there are parts of the Borough area in which the sewers are not available and which are still so rural in character or of such difficult contour, that it is not practicable to sewer these areas. In some houses where the sewer is not available but which have adequate water supply, there are water closets, discharging into cess-pits and in a few cases, earth closets are still to be found. Pail closets have to be used in some places, particularly in the camps in Mote Park where hutments left after the war are still in use as dwellings. These hutments increase the number of pail closets but the number is gradually being reduced. Sixteen of the hutments were demolished during the year and I trust that it will not be necessary to retain these huts as homes for more than a few years.

I give below the number of dwellings having the various types of closet accommodation.

Properties with W.C.'s discharging into the sewer system	15,028
Dwellings with W.C.'s discharging into cess-pits	... 223
Dwellings with earth closets or privy middens	... 18
Dwellings with pail closets (Mote Park 58; other 75)	... 133

(e) SANITARY INSPECTION OF THE AREA. The Chief Sanitary Inspector has supplied the details of the work done which are set out in the following tables. Routine work is being brought up to date and inspections and re-inspections have been more numerous and frequent, but there is still difficulty in getting the requisite work done for materials and labour are still short and are needed for new construction and there is the further difficulty in a shortage of money for many owners of property are not in a financial position to carry out any extensive repairs. There is still much property in the town which cannot be made satisfactory and on which it would be unreasonable to require any large expenditure. For such property, demolition is the only remedy and with a more rapid supply of new houses I trust that before long we shall be able to eliminate these unfit houses.

Annual Report, 1950.

Accumulation of manure and other refuse removed	2
Bakehouse inspections	26
Chimneys repaired	42
Cement sinks removed and glazed provided	15
Cooking Stoves renewed or repaired	39
Dairies and Milkshops inspected	43
Common Lodging House inspections	62
Coppers repaired	41
Drains cleansed on complaint or by flushing staff	1,373
" choked and cleansed	812
" reconstructed	18
" tested with smoke	52
" tested with water	27
" inspection chambers provided	14
" inspection chambers airtight covers provided	17
" stoneware pipes laid, feet	1,387
" iron pipes laid, feet	28
" trapped from sewer and ventilated	7
Dustbins provided	154
Factory, workplaces and outworkers' premises inspected ..	214
Fresh air inlets provided	8
Grates renewed or repaired	32
Houses, cement floors provided in cellars	—
" floors to living-rooms provided or repaired	27
" chuting or guttering repaired or renewed	457
" roofs repaired	341
" rooms where dirty or loose paper has been removed and walls and ceilings repaired and distempered	702
" walls made dry by insertion of damp course or other method	63
Inquiries into cases of Infectious Diseases	1,023
Inspection of houses on complaint or otherwise	2,327
Re-inspections	4,321
Mortar joints to brickwork repaired	51
Miscellaneous defects remedied	13
Outbuildings or Washhouses repaired or rebuilt	5
Poultry or animals removed	3
Schools inspected	4
Sink or other wastepipes removed disconnected or trapped ..	18
Sinks, new channels provided or repaired	22
Slaughterhouse inspections	5
Stairs repaired	27
Stoneware gullies provided	53
Strainers provided to gullies	8
W.C.'s, Walls and ceilings repaired	82
" flushing apparatus provided or repaired	51
" new pans and traps provided	28
" structural defects remedied	58
" seats	37
Water supplies provided or repaired	67
Window frames repaired	203
Window sashes hung so as to open full size and ends screwed	23
Verminous rooms cleansed	186
Yard pavement repaired or provided in connection with houses	19
Preliminary Notices served	932
Statutory Notices served	112

(f) **Factories, Workshops and Workplaces.**

(1).—INSPECTION OF FACTORIES AND WORKPLACES.
Including Inspections made by Sanitary Inspectors.

Premises (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories with Mechanical Power	51	9	—
Factories without Mechanical Power	248	5	—
Other premises	2	—	—
Total	301	14	—

—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

PARTICULARS. (1)	Number of Defects.			Number of Prosecutions. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Factories Act 1937 and the Public Health Act, 1936 :				
Want of Cleanliness	—	—	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage Floors	—	—	—	—
Other Nuisances	—	—	—	—
Sanitary Accommodation. { Insufficient	1	1	—	—
{ Unsuitable or Defects	6	6	—	—
{ Not Separate for Sexes	—	—	—	—
Offences under the Factories Act, 1937 :				
Illegal Occupation of Underground Bakehouse (s.54)	—	—	—	—
Other Offences	2	1	—	—
(Excluding Offences relating to the outwork and Offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer or Powers Order, 1921).				
Total	9	8	—	—

(g) Premises and Occupations which can be controlled by Bye-laws.

These are as follows :—

Common Lodging Houses	5
Slaughter Houses	2
Houses let in Lodgings	6
Dairies	6

Housing.

During 1950, the number of new houses erected in the Borough was 258. Of these 208 houses were erected by the Local Authority and 50 houses were provided by private enterprise.

The following Table gives the housing statistics which are asked for:—

HOUSING STATISTICS.

I.—Inspection of Dwelling-houses during the Year.	
(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	762
(b) Number of inspections made for that purpose	923
(2) (a) Number of dwelling-houses (included under subsection (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	—
(b) Number of inspections made for that purpose	—
(3) (a) Number of dwelling-houses found to be in a state so injurious to health as to be unfit for human habitation	23
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	727
II.—Remedy of Defects during the year without Service of formal Notices.	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	625
III.—Action under Statutory Powers during the Year.	
A.—PROCEEDINGS UNDER SECTIONS 9, 10 AND 16 OF THE HOUSING ACT, 1936.	
(1) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) by owners	26
(b) by Local Authority in default of owners ..	4
B.—PROCEEDING UNDER PUBLIC HEALTH ACTS.	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	59

Housing Statistics—(continued).

(2) Number of dwelling-houses in which defects were remedied after service of formal notice :—	
(a) by owners	47
(b) by Local Authority in default of owners	—
C.—PROCEEDINGS UNDER SECTION 11 AND 13 OF THE HOUSING ACT, 1936.	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	23
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	7
D.—PROCEEDING UNDER SECTION 12 OF THE HOUSING ACT, 1936.	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—
IV.—Housing Act, 1936—Part 4—Overcrowding.	
(a) (1) Number of dwellings overcrowded at the end of the year Indeterminable	—
(2) Number of families dwelling therein	—
(3) Number of persons dwelling therein	—
(b) Number of new cases of overcrowding reported during the year	31
(c) (1) Number of cases of overcrowding relieved during the year	17
(2) Number of persons concerned in such cases	78
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	—

It is impossible to make any accurate estimate of the number of cases of overcrowding in the Borough. Fresh cases arise every week, and it is a very usual happening for a young man to return from his military service, hoping to start a home with the girl of his choice and perhaps with a baby for which to find a home, and rooms for any young couple with a baby are almost impossible to find. Of course, their parents try to make room for them and so the waiting list in the Housing Department outstrips the number of completed houses. This housing shortage is the great problem of our time and Maidstone is no different from other towns in the country. I venture to suggest that there is hardly a problem of

our time,—apathy, low industrial efficiency, crime and delinquency, marital unhappiness, child neglect or any other of the manifestations that all is not well in the community, that is not, in some way, connected with the housing shortage. The rate of production of new houses is lamentably slow and this is but another result of the frustration that is felt by the workers. Exhortation to greater output, appeals to patriotic sentiment, will not produce a tithe of the effort that would result from the prospect of the worker securing a home of his own for his wife and children. No amount of planning or control will alter the law of which Kipling wrote,—“ Till we are fashioned like Angels, with hamme rand chisel and pen, We will work, for ourselves and a woman, for ever and ever, Amen.”

I am especially sympathetic with the plight of the young folk, for it is a poor start for married life to have to share with “ In-laws,” but there appears to be a wait of from four to six years required for those who have but one child, and very little hope for those who decide to wait for a home before starting a family. I have every sympathy with those who maintain that those who have waited longest should have first consideration and that no one should “ Jump the queue ” but the factor of the greatest need must be given due weight. More houses, built more quickly, is the solution and when this housing shortage is overcome, I am confident that we shall see the end of many of our difficulties, which have their origin in overcrowding, frustration and disillusionment.

Verminous Dwellings.

During the year 1949, the following work in the eradication of bugs and other vermin in houses was carried out:—

(a) Council Houses found to be infested	... 13
(b) Other Houses found to be infested	... 46

Council Houses disinfested:—

(a) By gassing with “ Thermatox ”	... 11
(b) By spraying and the burning of insecticides...	2

Other Houses disinfested:—

(a) By gassing with “ Thermatox ”	... 13
(b) By spraying and the burning of insecticides...	33

Verminous households fumigated before removal to a Council House or during transfer to another Council house	39
Council Houses inspected and found clean	... 98
Other Houses inspected and found clean	... 139

Inspection and Supervision of Food.

The majority of the Borough Sanitary Inspectors are now holders of the Certificate of Inspector of Meat and other Foods and this has enabled the inspection of food to be much more complete. Before the war, there were a number of slaughter-houses in use in the Borough, which added to the difficulty of inspection of more than a proportion of the carcasses intended for human consumption, but now that slaughtering is concentrated in a central slaughter house it is possible to ensure that all animals slaughtered are inspected. This is an advantage but it is unfortunate that the only available slaughter house is old, inadequate and unsatisfactory. The provision of an up-to-date and sufficient abattoir, with adequate facilities and equipment for the care and humane slaughter of animals intended for food and with space for complete investigation of any suspected carcass or organ, is an urgent need and should be regarded as a necessary adjunct of the Maidstone market and essential to the needs not only of Maidstone but of the Mid-Kent area.

The number of carcasses inspected and the amount condemned in 1950 are as follows:—

	Cattle ex- cluding cows.		Cows.	Calves.	Sheep & Lambs.	Pigs.
Number killed ..	2695	886	918	5505	247	
Number inspected ..						
ALL DISEASES EXCEPT TUBERCULOSIS.						
Whole carcasses condemned	1	—	1	13	8	
Carcasses of which some part or organ was condemned	1207	26	6	358	57	
Percentage of the number inspected affected with disease other than tuberculosis	44.8%	2.9%	0.9%	6.7%	26.3%	
TUBERCULOSIS ONLY.						
Whole carcasses condemned	18	35	—	—	4	
Carcasses of which some part or organ was condemned	361	21	1	—	3	
Percentage of the number inspected affected with tuberculosis	12.2%	6.3%	.1%	—	2.8%	

Approximate weight condemned : 30 tons, 16 cwts, 2 qrs.

During 1950, foods of various descriptions, in the following quantities were found to be unfit for human consumption. This unfit food, which in every case was surrendered, included the following:—

Annual Report, 1950.

	Tons	Cwts.	Qrs.	lbs.	ozs.
Tinned Meat	—	5	0	2	—
Fruit and Fruit Juices	—	—	2	14	—
Peas	—	—	3	7	—
Fish and Fish Paste	1	12	2	0	—
Cereals	—	4	1	5	—
Bacon	—	7	0	17	—
Cheese	—	2	3	5	—
Sugar	—	1	2	0	—
Pies	—	—	1	14	—
Paste	1	16	1	9	—
Cake and Cake Mixture	—	—	3	2	—
Suet	—	—	—	2	—
Flour	—	5	0	0	—
Tea	—	—	—	13½	—
Fats	—	—	3	7	—
Biscuits	—	—	—	2	—
Bread	—	2	3	15	—
Soup	212	tins			
Meat	1,253	tins			
Coffee	242	bottles			
Vegetables	1,176	tins			
Fruit and Fruit Juices	1,503	tins			
Beans	217	tins			
Sauce	212	bottles			
Pickles	107	jars			
Pudding Mixtures	974	packets			
Jam	176	tins			
„	27	jars			
Peas	612	tins			
Tinned Milk	4,727	tins			
Fish and Fish Paste	857	tins			
Cereals	132	tins			
„	51	packets			
Eggs, Fresh	1,762				
Beverages	17	jars			
Cheese	12	boxes			
Sweetmeats	13	lbs. & 14 bars			
Pies	62				
Paste	92	tins			

FOOD AND DRUGS, 1950. During the year the following samples of Food and Drugs were taken for analysis and the results are recorded below:—

Article.	Number of samples Obtained.	Number Genuine.
New Milk	61	58
Sterilised Milk	1	1
Condensed Milk	2	Nil
Butter	7	7
Margarine	4	4
Cooking Fat	2	2
Spirits	3	3
Pepper	3	3
Beef Sausages	3	3
Pork Sausages	2	2
Saccharin Tablets	3	3
Dried Milk	1	Nil
Malt Vinegar	2	2
Tinned Potatoes	7	1
Cereals	4	4
Cheese	1	1
Tomato Ketchup	1	1
Pudding Mixture	1	1
Jelly Crystals	2	2
Jelly	1	1
Almond Essence	1	1
Baking Powder	4	4
Sardines	1	1
Coffee and Chicory Extract	4	4
Cocoa Powder	1	1
Lemonade Crystals	1	1
Mixed Spice	2	2
Gelatine	1	1
Mustard	1	1
Custard Powder	1	1
Cream of Tartar	1	1
Malted Milk Tablets	1	1
Ground Almonds	1	1
Dessert Powder	1	1
Aspirin Tablets	1	1
Goats Milk Cream	1	1
Ice Cream	4	4
	138	126

Food Poisoning

During the year 1950, cases of food poisoning occurred in the Borough as follows.

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
16	nil	14	1
Total 31			

These cases were in 3 outbreaks, one of 16 cases, in which the causal organism was identified and the food by which the infection was carried was discovered to be pork chitterlings: one outbreak of three cases, in which the causal organism was identified and the affected food was found to be fish pie which had been made with a duck egg. One outbreak of 11 cases, mostly children, was discovered, but the infecting organism could not be determined, nor was the source of the outbreak determined, though there were grounds for suspecting ice "Lollies" as the means by which infection had occurred: in one instance there was a single case, in which the infecting organism was isolated. The possible source of infection was a jam tart, but it was not possible to establish this as a certainty.

The changes in the habits of the population, by which so much food prepared in factories is consumed and the extension of communal feeding and the use of canteen and restaurant facilities, have increased the risk of food poisoning and adequate supervision of canteens and places where food is prepared and sold is very necessary. In particular, the practice followed in many canteens of preparing food the day before and re-heating it before it is eaten, is not without danger. Such things as stews and gravy, prepared on the preceding day and liable to contamination while becoming cooled and then warmed up for use are a very likely source of risk, especially as the re-heating may be merely of a Laodicean nature, and not sufficient to destroy any organisms that may have contaminated the food. Scrupulous care and cleanliness is needful and education in the need for such care in all catering establishments is required.

Prevalence of, and Control over, Infectious Disease.

I give below, in tabular form, details of the cases of notifiable diseases, other than Tuberculosis, which occurred in the Borough during 1950.

DISEASE.	Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Chickenpox	10	—	—
Scarlet Fever ..	127	75	—
Diphtheria	2	2	1
Puerperal Fever and Puerperal Pyrexia	1	1	—
Ophthalmia Neonatorum	—	—	—
Pneumonia ..	3	1	10
Food Poisoning ..	31	2	—
Meningococcal Infection	3	3	1
Measles	775	—	—
Whooping Cough ..	47	1	1
Dysentery ..	4	4	—
Erysipelas	5	1	—
Acute Polio-myelitis and Polio-encephalitis	1	1	—
Totals	1009	91	13

SCARLET FEVER. There was a considerable incidence of scarlet fever in 1950, 127 cases being notified, but I am glad to report that the disease was of a very mild type and that there were no fatal cases. In fact, the disease might almost be regarded as one of the minor ailments. Admission to hospital was not urgently needed and of these cases, 75 were admitted, mostly on account of housing conditions and the difficulty of nursing them at home.

DIPHTHERIA. Two cases of diphtheria were notified, but neither of them was in a child which is eloquent evidence of the value of immunisation.

ACUTE POLIO-MYELITIS AND POLIO-ENCEPHALITIS. In 1950, we were fortunate in that there was only one case notified, which happily recovered. The knowledge that we possess of how this scourge is spread is still deficient, but there is certainly some evidence that flies play a part in its transmission, and the campaign against the fly menace should enlist the support of every household. Another contributory factor seems to be tiredness and exhaustion and if poliomyelitis is present in the community, care should be taken that children do not become over-tired or exhausted.

PUERPERAL FEVER AND PUERPERAL SEPSIS. One case was notified and admitted to hospital and it is pleasing to record that there were no deaths from puerperal sepsis. For the third consecutive year there have been no deaths from puerperal causes and the maternal death rate is "Nil." May this happy state of affairs long continue!

MEASLES. During 1950, there was a heavy incidence of measles in the Borough, 775 notifications having been received. None were admitted to hospital: the disease was not severe, and there were no deaths.

IMMUNISATION AGAINST DIPHTHERIA. Diphtheria is now almost unknown in Maidstone. There was but two cases notified in 1950 and none among children under 15 years of age. Both the cases were in the age-group 20 to 35 and when we recall that diphtheria was formerly common and very frequently fatal in children, we can be satisfied that the efforts to secure immunisation in the child population have practically banished this scourge. Immunisation in Maidstone was first started in 1935 and it has become almost the universal rule for babies to be thus protected before the first birthday. The immunisation clinic is now the responsibility of the County Health Department though I still attend the Clinic as of old. I am sorry to say that I have noted a falling-off in the numbers

attending the Clinic, though this may be partly off-set by the fact that some children are immunised by the family Doctor. The happy state of affairs which we have reached in Maidstone is the result of a long campaign of education and by the efforts of the Health Visitors and the Teachers in the schools and we can look back with pride on the results of our labours. I can only hope that the transfer of this activity to the County Health Department will not result in a slipping back from the position which we reached with such a struggle.

In order that the progress of immunisation on the Borough may be appreciated, I give below a Table showing the primary immunisations and the re-inforcing inoculations, according to the ages of the children. The Table also shows the position as regards vaccination against smallpox and while it is many years since smallpox was found in Maidstone, it should not be forgotten that there is an increasing risk of the introduction of smallpox into the country, from the growth of air travel, and the proportion of the population which are adequately protected is not sufficient. I hope that the abandonment of compulsion will show that the British common-sense is sufficient to secure that voluntary vaccination will be more wide-spread than any attempt at compulsion could obtain.

Immunisation against Diphtheria and Vaccination against Smallpox, 1950.

(a) DIPHTHERIA IMMUNISATION

Year of Birth	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938	1937	1936	Total
Primary Inoculations	48	382	34	13	7	13	22	21	30	16	8	10	1	2	—	607
Immunised in 1949 and received in 1950	—	1	20	2	1	—	—	—	—	—	—	—	—	—	—	24
Reinforcing Inoculations	—	—	—	—	3	40	66	16	28	10	6	30	30	43	47	319

(b) VACCINATION

Age at 31st December, 1950		Under 1	1 to 4	5 to 14	15 or over	Total
Number Vaccinated		186	150	8	19	363
Number Re-Vaccinated		—	4	13	71	88

**Diphtheria Notifications & Deaths in Relation to Immunisation
for 1950.**

NOTIFICATIONS.			DEATHS.		
Age at date of Notification.	Number of cases notified.	Number of cases included in preceding column in which the child had completed a full course of immunisation.	Age at date of Death.	Number of Deaths.	Number of cases included in preceding column in which the child had completed a full course of immunisation.
Under 1	—	—	Under 1	—	—
1	—	—	1	—	—
2	—	—	2	—	—
3	—	—	3	—	—
4	—	—	4	—	—
5 to 9	—	—	5 to 9	—	—
10 to 14	—	—	10 to 14	—	—
Totals	—	—	Totals	—	—

Laboratory Facilities.

The examination of pathological and bacteriological specimens from the Borough is carried out at the Laboratories at County Hall. This service was for many years one of the notable features of health administration in Kent and under the new Health Service, when the Laboratory is closely linked with the hospitals as well as serving the Health Departments of the Local Authorities, is even more complete and valuable than in the past.

Distribution of Infectious Disease Incidence.

I give below an analysis of the notifications of Infectious Disease, according to the Wards of the Borough in which they occurred.

	High Street	Stone Street	King Street	North	Heath	Bridge	Shep- Way	Total
Scarlet Fever ...	13	30	6	15	13	8	42	127
Diphtheria ...	—	—	—	1	1	—	—	2
Puerperal Pyrexia	—	—	1	—	—	—	—	1
Pneumonia ...	1	1	—	1	—	—	—	3
Erysipelas ...	1	—	1	1	2	—	—	5
Meningococcal Infection	—	—	1	—	2	—	—	3
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—
Measles ...	109	119	112	108	102	104	121	775
Whooping-cough	3	4	5	4	18	8	5	47
Malaria ...	—	—	—	—	—	—	—	—
Chicken-pox ...	—	4	—	4	1	—	1	10
Cerebro-spinal meningitis	—	—	—	—	—	—	—	—
Dysentery ...	—	—	—	—	4	—	—	4
Polio-myelitis	—	—	—	—	—	1	—	1
Food Poisoning	3	2	8	13	5	—	—	31
	130	160	134	147	148	121	169	1009

Malignant Disease.

The figures showing the number of deaths from malignant disease in Maidstone during the past five years and a Table showing the age-groups of the deaths from this cause during 1950, are given below. The research into the cause of cancer and for a remedy for this disease still continues but advances in surgery have given increased hope of saving life, if surgical treatment can be undertaken sufficiently early. Information and instruction to the public of the necessity for avoiding delay in seeking advice if there is any suspicion of malignant disease are very much to be desired. If the patient can be re-assured, the mental relief is incalculable: if the condition proves to be malignant, the prospect of success from early operation is vastly greater. Delay and temporisation are disastrous.

The number of deaths from Cancer in Maidstone during the past 5 years is as follows:—

	Number of deaths	
1946...	...	83
1947...	...	100
1948...	...	95
1949...	..	101
1950...	...	98

Deaths from Cancer during 1950 under age groups.

Age Periods.	Male.	Female.
0—1	—	—
1—5	—	—
5—15	—	—
15—25	—	—
25—35	—	2
35—45	3	5
45—55	3	10
55—65	13	12
65 and over	24	26
Totals	43	55

Prevention of Blindness.

I am glad to report that during 1950, there were no notifications of Ophthalmia Neonatorum.

Tuberculosis.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 ..	—	—	—	1	—	—	—	1
1—5 ..	1	—	—	—	—	—	—	1
5—15 ..	4	5	1	2	—	—	—	—
15—25 ..	7	5	—	1	2	—	—	—
25—35 ..	5	3	1	1	2	2	—	1
35—45 ..	4	3	—	2	3	5	—	—
45—55 ..	3	—	—	1	6	1	—	—
55—65 ..	4	—	—	—	2	2	—	—
65 and over	2	3	2	—	1	2	—	—
Totals ..	30	19	4	8	16	12	—	3

The number of deaths from Tuberculosis which had been notified was 31. The number which had not been notified was 5. The ratio of non-notified T.B. deaths to the total number of T.B. deaths was thus .13 to 1.

TABLE I.
1950

Causes of death.							M.	F.
All Causes	..	..	..	..	..	..	319	331
1	Tuberculosis, respiratory	..	..	..	..	..	13	15
2	Tuberculosis, other	..	..	..	..	..	1	2
3	Syphilitic disease	..	..	..	..	..	2	—
4	Diphtheria	..	..	..	..	..	1	—
5	Whooping Cough	..	..	..	..	..	—	1
6	Meningococcal infections	..	..	..	..	..	—	1
7	Acute poliomyelitis	..	..	..	..	..	—	—
8	Measles	..	..	..	..	..	—	—
9	Other infective and parasitic diseases	..	..	..	..	..	—	1
10	Malignant neoplasm, stomach	..	..	..	..	..	9	11
11	Malignant neoplasm, lung, bronchus	..	..	..	..	..	8	2
12	Malignant neoplasm, breast	..	..	..	..	..	—	9
13	Malignant neoplasm, uterus	..	..	..	..	..	—	5
14	Other malignant and lymphatic neoplasms	..	..	..	..	..	26	28
15	Leukaemia, aleukaemia	..	..	..	..	..	4	—
16	Diabetes	..	..	..	..	..	3	3
17	Vascular lesions of nervous system	..	..	..	..	..	47	55
18	Coronary disease, angina	..	..	..	..	..	24	24
19	Hypertension with heart disease	..	..	..	..	..	3	8
20	Other heart disease	..	..	..	..	..	60	82
21	Other circulatory disease	..	..	..	..	..	15	15
22	Influenza	..	..	..	..	..	2	—
23	Pneumonia	..	..	..	..	..	8	2
24	Bronchitis	..	..	..	..	..	24	9
25	Other diseases of respiratory system	..	..	..	..	..	2	2
26	Ulcer of Stomach and Duodenum	..	..	..	..	..	7	—
27	Gastritis, enteritis and diarrhoea	..	..	..	..	..	2	1
28	Nephritis and nephrosis	..	..	..	..	..	3	4
29	Hyperplasia of prostate	..	..	..	..	..	7	—
30	Pregnancy, childbirth, abortion	..	..	..	..	..	—	—
31	Congenital malformations	..	..	..	..	..	4	5
32	Other defined and ill-defined diseases	..	..	..	..	..	32	39
33	Motor vehicle accidents	..	..	..	..	..	7	2
34	All other accidents	..	..	..	..	..	3	5
35	Suicide	..	..	..	..	..	2	—
36	Homicide and operations of war	..	..	..	..	..	—	—

TABLE II.

Analysis of Cases of Notifiable Diseases under Age Groups, 1950.

Disease.	Un- der 1	1-2	2-3	3-4	4-5	5- 10	10- 15	15- 20	20- 35	35- 45	45- 65	65 & over	Total.
Scarlet Fever ..	2	1	—	28	—	84	9	2	1	—	—	—	127
Diphtheria ..	—	—	—	—	—	—	—	—	2	—	—	—	2
Poliomyelitis	—	—	—	1	—	—	—	—	—	—	—	—	1
Puerperal Fever and Pyrexia ..	—	—	—	—	—	—	—	—	1	—	—	—	1
Pneumonia ..	—	—	—	—	—	—	—	—	—	—	2	1	3
Erysipelas ..	—	—	—	—	—	—	—	—	—	3	2	—	5
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro- spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ..	—	2	3	11	16	11	—	—	4	—	—	—	47
Chicken Pox	—	—	—	1	2	5	—	—	2	—	—	—	10
Measles ..	8	28	57	138	66	471	1	—	6	—	—	—	775
Dysentery ..	—	—	—	—	—	—	—	—	2	—	1	1	4
Malaria ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	2	—	11	3	—	12	3	—	31
Meningoco'al Infection	—	—	—	—	1	—	—	—	—	—	1	1	3
Totals ..	10	31	60	179	87	571	21	5	18	15	9	3	1009

TABLE III.

Analysis of Deaths from Notifiable Diseases under Age Groups, 1950.

Disease.	Under 1	1-2	2-3	3-4	4-5	5-10	10- 15	15- 20	20- 35	35- 45	45- 65	65 and over	Total.
Whooping Cough ..	1	—	—	—	—	—	—	—	—	—	—	—	1
Meningoco'al Infection	—	—	—	—	—	—	—	—	—	—	1	—	1
Diphtheria ..	—	—	—	—	—	—	—	—	—	—	1	—	1
Puerperal Sepsis ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Puer- peral Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ..	—	—	—	—	—	—	—	—	1	—	2	7	10
Poliomyelitis and Polio- encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ..	1	—	—	—	—	—	—	—	1	—	4	7	13

TABLE IV.

Deaths.

Month.	Deaths apportioned to the Wards of the Borough.							Totals
	High Street	King Street	North Ward	Stone Street	Bridge Ward	Heath Ward	Shep-way	
January	10	7	9	8	11	7	1	53
February	8	10	9	13	10	7	2	59
March	11	14	12	13	11	7	1	69
April	8	10	9	12	17	3	1	60
May	10	5	12	11	10	7	2	57
June	9	12	8	10	8	6	1	54
July	7	6	8	9	8	5	3	46
August	6	8	6	9	10	8	1	48
September ..	9	10	8	6	11	6	—	50
October	7	9	11	5	8	9	—	49
November ..	8	9	7	9	6	8	—	47
December ..	7	11	9	10	12	8	1	58
Totals ..	100	111	108	115	122	81	13	650

TABLE V.

Birth-Rates, Death-Rates and Analysis of Mortality in the year 1950.

	Rate per 1,000 population.		Annual Death-rate per 1,000 population.							Rate per 1,000 Live Births.	
	Live Births.	Still Births.	All Causes.	Typhoid & Paratyphoid Fevers.	Whooping Cough	Diphtheria	Influenza.	Small-pox	Measles.	Diarrhoea and Enteritis (under two years).	Total Deaths under one year.
England and Wales	15.8	0.37	11.6	0.00	0.01	0.00	0.10	0.00	0.00	1.9	29.8
126 County Boroughs and Great Towns, including London	17.6	0.45	12.3	0.00	0.01	0.00	0.09	0.00	0.00	2.2	33.8
148 Smaller Towns Resident Populations 25,000 to 50,000 at 1931 Census	16.7	0.38	11.6	0.00	0.01	0.00	0.10	0.00	0.00	1.6	29.4
London	17.8	0.36	11.8	0.00	0.01	0.00	0.07	—	0.00	1.0	26.3
Maidstone	14.16	0.04	11.83	—	—	—	0.03	—	0.00	1.0	29.563

Maternal Mortality in England and Wales

International List No. and cause	Rates per 1,000 Total (Live and Still) Births	Rates per million women aged 15-44
551 Abortion with sepsis	0.09	7
550, 652 Other abortion	0.05	4
540-649, 670-678 Complications of pregnancy and delivery	0.54	
581 Sepsis of childbirth and puerperium	0.03	
580, 682-680. Other complications of the puerperium	0.15	

Maidstone

Per 1,000 Total Births	Puerperal Infections	Others	Total
.. ..	Nil	Nil	Nil

TABLE VI.

INFANT MORTALITY, 1950. NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER 1 YEAR OF AGE.

Causes of Death.	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total Deaths under 1 year
Prematurity	4	—	—	—	4	—	—	—	—	4
Enteritis	—	—	—	—	—	—	1	—	—	1
Whooping Cough	1	—	—	—	1	—	—	—	—	1
Pneumonia	—	—	—	—	—	1	2	1	—	4
Congenital Malformation	—	—	—	—	—	—	—	—	—	—
Tuberculosis	—	—	—	—	—	—	—	1	—	1
Atelectasis	2	—	1	—	3	—	—	—	—	3
Cerebral Haemorrhage	2	—	—	—	2	—	—	—	—	2
Other Causes	2	—	—	—	2	3	1	—	1	7
Totals	11	—	1	—	12	4	4	2	1	23
Nett Live Births in the year	{ Legitimate 735 { Illegitimate 43									
Nett Deaths in the year ..	{ Legitimate 21 { Illegitimate 2									

METEOROLOGY.

TABLE VII.

MONTH.	Average Barometer.	Average Thermo- meter (Max.)	Average Thermo- meter (Min.)	Rainfall.	No. of days on which .01 fell.
January	30.17	44	34	1.47	13
February	29.76	49	36	4.18	17
March	30.08	54	39	.96	10
April	29.69	55	38	2.67	19
May	29.91	64	46	2.04	14
June	29.78	77	53	1.24	9
July	29.71	75	57	2.31	19
August	29.70	74	54	2.24	15
September	29.75	65	49	2.53	21
October	30.20	57	42	.21	8
November	29.68	48	37	5.61	24
December	29.85	38	29	2.24	19
Average and Total for the year	29.85	58	42	27.70	188

TABLE VIII.
RECORD OF SUNSHINE DURING 1950.

Month.	Hours.	Minutes.
January	21	36
February	40	24
March	122	54
April	130	36
May	119	30
June	239	48
July	160	24
August	162	34
September	78	6
October	79	36
November	18	56
December	4	15
Totals	1178	39

TABLE IX.

RELATIVE PROPORTION OF WIND DURING 1950.

	N.	N.E.	N.W.	S.	S.E.	S.W.	E.	W.
January	2	1	2	2	8	11	5	—
February	—	—	3	6	4	12	—	3
March	—	3	3	6	3	11	—	5
April	1	—	9	2	4	9	1	4
May	—	4	8	1	2	10	3	3
June	—	3	2	3	3	15	1	3
July	2	—	2	6	—	18	—	3
August	—	—	1	9	3	13	—	5
September	—	—	1	4	—	21	—	4
October	—	—	—	7	8	11	3	2
November	—	2	5	4	5	10	—	4
December	3	—	6	4	7	8	—	3
Totals	8	13	42	54	47	149	13	39

BOROUGH OF MAIDSTONE.

GENERAL SUMMARY.

Population (estimated 1950)	54,940
Number of Inhabited Houses (1921)	8,472
Number of Inhabited Houses (end of 1950) according to Rate Books	14,346
Average Number of persons per house (1921) ...	4.6
Average Number of Persons per House (1950) ...	4.5
Area	5,972 acres
Density	8.12 persons per acre
Annual Birth Rate per 1,000 population	14.16
Annual Death Rate „ „ „	11.83
Phthisis Death Rate „ „ „	.65
Cancer Death Rate „ „ „	1.7
Infantile Death Rate per 1,000 Births	29.563
Live Births, Males, 407. Females, 371	778
Deaths, Males, 319. Females, 331	650
Excess of Births over Deaths	120

ELEVATION.—The population reside at a mean elevation of 70 feet above sea level, ranging from 20 to 250 feet.

