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URBAN DISTRICT OF MATLOCK.

ANNUAL REPORT

OF THE

Medical Officer of Health,
SYDNEY S. PROCTOR, M.D., D.P.H.,

for the year

1937.

MATLOCK

H. ROBERTS & SON, CROWN SQUARE.



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Public Health Officers of the Local Authority.

Medical Officer of Health and Medical Superintendent of the Isolation Hospital	...	S. S. PROCTOR, M.D., M.B., Ch.B., D.P.H.
Matron of Isolation Hospital	...	Miss R. PEARCE.
Sanitary Inspector	... ..	JOHN DORSETT EVANS. Certificate of the Royal Sanitary Institute and Sanitary Inspector's Examiner's Board.
Housing Inspector	... ..	RUTHERFORD G. CHILDS.
Assistant to Sanitary Inspector	...	HORACE E. PAULSON.
Clerk to Medical Officer	... ..	STEPHEN W. MARSH.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1937.

To the Chairman and Members of the Matlock Urban District Council.

Gentlemen,

I beg to submit my Second Annual Report as Medical Officer of Health, on the sanitary circumstances and vital statistics affecting the Urban District of Matlock.

The report is again an Ordinary Report and is written in conformity with the suggestions contained in Circular No. 1650, issued by the Ministry of Health, dealing with Annual Reports.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area	...	...	...	...	...	16,598 acres.
Population:—Estimated by Registrar-General (mid-year 1937)	...	...	...	...	...	16,580
Population, Census 1931	...	...	...	...	...	16,596
Population, Census 1921	...	...	...	...	...	15,716
Number of Inhabited Houses, December 31st, 1937	...	...	...	...	...	5,014
Rateable Value (January 1st 1937)	...	...	...	...	...	£111,153
Product of Penny Rate (ascertained)	...	...	...	...	...	£431.0.8

No new industries have been established and the number of unemployed remains small.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Births

LIVE BIRTHS.			<i>Total.</i>	<i>Male.</i>	<i>Female.</i>
Legitimate	...	...	239	120	119
Illegitimate	...	...	6	3	3
			<hr/> 245	<hr/> 123	<hr/> 122

Birth Rate per 1,000 of the estimated population: 14.77.

STILL BIRTHS.			<i>Total.</i>	<i>Male.</i>	<i>Female.</i>
Legitimate	...	...	8	3	5
Illegitimate	...	...	1	0	1
			<hr/> 9	<hr/> 3	<hr/> 6

Rate per 1,000 total (live and still births): 35.4

			<i>Total.</i>	<i>Male.</i>	<i>Female.</i>
Deaths.	...	...	205	109	96

Death rate (per 1,000 of estimated population: 11.25

Number of persons, dying in, or in consequence of Childbirth:

From Puerperal Sepsis	...	...	...	0
From other Puerperal Causes	...	...	...	0

This corresponds to the following rates per 1000 (live and still) Births:—

Puerperal Sepsis	...	...	...	0
Other Puerperal Causes	...	...	...	0

INFANT MORTALITY.

Deaths of Infants under one year of age.

Legitimate	...	...	...	...	11
Illegitimate	...	...	...	...	1
					<hr/>
Total	...	...	...	...	12

Infant Mortality Rates:—

All infants per 1,000 live births: 48.97.

Legitimate infants per 1,000 legitimate live births: 46.02.

Illegitimate infants per 1,000 illegitimate live births: 166.6.

DEATHS FROM CERTAIN SELECTED CAUSES.

TABLE 1.

	Deaths No.
Cancer	30
Measles	0
Whooping Cough	0
Diarrhoea (under 2 years of age)	0
Diphtheria	1
Scarlet Fever	0
Influenza	12
Pneumonia	10
Tuberculosis of Respiratory System	7
Tuberculosis (all forms)	7
Other Epidemic Diseases	1
Heart Disease	47
Violence	16

DEATHS IN AGE GROUPS, SHOWN FOR SEPARATE WARDS.

TABLE 2.

Ward.	Under one Year.	1-15	15-30	30-45	45-60	60-75	75 and over.	Total
Matlock	3	1	2	3	12	33	38	92
Matlock Bath	2	—	—	—	1	8	3	14
Cromford	—	—	—	—	3	4	3	10
Bonsall	1	1	2	1	1	7	2	15
North Darley	3	2	5	3	8	18	12	51
South Darley	2	—	—	1	2	2	4	11
Tansley	1	—	—	—	3	5	2	11
Total	12	4	9	8	30	77	64	204

Of the total 205 deaths, one is not included in the above table.

COMPARISON WITH ENGLAND AND WALES.

TABLE 3.

	Rate per 1,000 of Population.			Rate per 1000 Live Births
	Live Births.	Still Births.	Deaths all Causes	Deaths under One Year. All causes.
England and Wales	14.9	0.60	12.4	58
County Boroughs and Great Towns including London	14.9	0.67	12.5	62
Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	15.3	0.64	11.9	55
Matlock Urban District	14.77	0.54	11.25	48.97

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

Public Health Officers of the Authority.

A list giving their names and duties appears at the commencement of this Report.

Nursing Arrangements, Hospitals, Treatment Centres and Clinics in the District.

These remain unchanged.

Laboratory Facilities.

There are no changes to report.

Ambulance Facilities.

These remain unchanged and at present appear to be adequate for the needs of the community.

Hospitals.

Facilities for hospital treatment remain the same

111 cases were admitted to the Isolation Hospital during 1937, of these the following 47 were from your District:—

Scarlet Fever	...	...	...	...	28
Diphtheria	...	...	...	...	18
Pneumonia	...	...	...	...	1

One Diphtheria carrier and one suspected case of Diphtheria were also admitted.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.

During the year there was no general shortage of water, although difficulty is still experienced in maintaining a full supply to certain parts of Cromford.

Altogether the water supplies are derived from twenty one different sources. Most of these are from the millstone grit and the water is acid and soft. Waters of this type, under certain circumstances, exert a solvent action on metals. This point is receiving attention at the present moment.

In the past, unless one was suspicious of contamination, examination of public supplies has been purely the concern of the Water Department under your Surveyor, who has periodically submitted samples for chemical examination. It was felt that bacteriological examinations were necessary and a recommendation to this effect has been agreed by the Council. These examinations will now be done quarterly, or more frequently if there is any lowering of the standard of purity.

During the year the Sanitary Department submitted for chemical and bacteriological examination, samples from five public supplies and three from semi-public springs or spouts. Five private sources were sampled and investigated.

The results of the examinations confirm the need for a better scheme for Bonsall and it is hoped that an early start may be made upon the lines suggested by the Water Engineers. Meantime, the Water Department has re-adjusted the supplies so that the worst source is almost entirely cut out, and more recently this water has been chlorinated.

The supply to Riber cannot be classed as satisfactory and the needs of this community should be studied in conjunction with plans for increasing the general water supplies for Matlock.

The water of two of the three semi-public spouts was found to be of unsuitable quality for domestic use. Warning notices have accordingly been posted.

Four of the five private supplies were found to be so contaminated as to be unfit for domestic use. An alternative supply has now been found for one of these. The use of another has been discontinued, and the third is likely to apply for connection to the public supply. In the fourth case the water is supposed to be used only for washing purposes.

SEWERAGE.

North and South Darley.

Some three or four years have now passed since the Engineers were instructed to prepare a scheme. The Council are still waiting for this scheme. When a Council and the community as a whole are prepared to face the cost of a very essential undertaking, it is almost incomprehensible to think that no progress can be made, even after the lapse of several years.

Bonsall.

The position remains unaltered. Practically all sewage discharges untreated into the water courses. Conditions, particularly in warm weather, are extremely bad and urgently call for consideration.

Rivers and Streams.

Pollution of the River Derwent is mainly confined to the North end of the district, where Darley effluents discharge.

Closet Accommodation.

There are still 584 privy middens and 720 pail closets in the district. These large figures are the result of lack of sewage schemes in three Wards, but conversion will require to be pushed in those areas which have a proper sewage scheme.

During the year there were only the following conversions:

Privy middens to water closets	...	29
Pail closets to water closets	...	8
Privy middens to pail closets	...	6

Public Cleansing.

There has been no improvement in the system of scavenging and refuse disposal. Collection is mainly unsatisfactory and frequently erratic. Disposal is by dumping. The tips disgrace the countryside, being an offence to eyes and nose, in addition to providing excellent breeding grounds for insects and vermin of all kinds.

Smoke Abatement.

No statutory action has been taken. Informal discussions have been held with those in charge of several industrial undertakings, and it is hoped that a definite diminution of smoke and dust will result.

Swimming Baths and Pools.

Work on the new Public Swimming Pool is now well advanced, and this new facility should be available in early summer.

The three privately owned baths remain unaltered.

Eradication of Bed Bugs.

No case of infestation was found.

Schools.

A year ago it was reported that the premises of Tansley School were very unsatisfactory. Since then, the County Education Authority have decided to build a new school.

The condition of the Matlock Bath School, regarding situation, general arrangement, ventilation and lighting, has called for some comment, and the attention of the School Medical Officer has been called to the matter.

Cases of mild Diphtheria occurred at intervals in Matlock Bath, and in view of the unsatisfactory nature of the school surroundings, it was decided to close the school a week earlier at Christmas. The Sunday School Authorities co-operated, but so far as one can judge no beneficial result was effected by this action.

Subsequent to cases of Diphtheria, investigations at three schools were carried out in conjunction with the School Medical Service.

Although large numbers of contacts and "catarrhal" children were swabbed, no really useful result appears to have been achieved. A few carriers were excluded or admitted to hospital, but I do not think that the course of the small epidemic was influenced in any way.

Notifications of Infectious Disease among scholars are forwarded by Teachers, but frequently these are received too late for any attempt to be made to check the spread of infection. This is particularly true as regards measles and whooping cough.

SANITARY INSPECTION OF THE AREA.

The Sanitary Officers Order, 1935, requires the Sanitary Inspector, as soon as practicable after the 31st of December in each year to furnish the Medical Officer of Health with reports upon their work during the year. These are reproduced herewith.

ANNUAL REPORT OF SANITARY INSPECTOR.

Area of District ... 16,598 acres.
Estimated number of Houses ... 5,014.

New houses erected in 1937 :

(a) By local authority ... 0.
(b) By private enterprise ... 35.

	Number of Inspections made by Sanitary Inspector	Number of Notices Served		No. of Nuisances abated with or without Notice.
		Informal	Legal	
CLOSETS AND ASHPITS—				
Defective Privies, Pail Closets & Ashpits 2 (not for conversion)	1	0	1	
Conversion of Privies into W.C.'s ... 63	24	0	29	
Conversion of Pail Closets into W.C.'s 15	8	0	8	
Conversion of Privies into Pail Closets 9	6	0	6	
Defective Water Closets ... 17	7	0	7	
Provision of additional Water Closets 5	2	0	2	
Provision of Portable Ashbins ... 8	4	0	4	
Dirty Closets ... 1	1	0	1	
DRAINAGE—				
No Disconnection of Waste Pipe ... 6	3	0	3	
Defective Waste Pipe, Traps, Inlets & Drains ... 154	63	0	71	
Drains Obstructed ... 34	43	0	43	
OTHER DEFECTS—				
Paving of Courts and Yards ... 17	7	0	7	
Roofs, Eaves-Spouts & Down-Spouts 12	6	0	6	
Sinks ... 2	1	0	1	
Insufficient Ventilation ... 0	0	0	0	
Windows ... 0	0	0	0	
Dampness ... 0	0	0	0	
Water in Cellars ... 0	0	0	0	
Water Supply ... 0	0	0	0	
Overcrowding ... 18	0	0	14	
Foul Condition of Houses ... 0	0	0	0	
Offensive Accumulations ... 0	0	0	0	
Animals improperly kept ... 0	0	0	0	
Pigsties ... 0	0	0	0	
Smoke Nuisances ... 4	1	0	0	
Urinals ... 8	4	0	4	
Nuisances not specified above ... 15	5	5	5	
Totals ... 390	186	5	212	

	Number on Register.	Inspections Made	Notices Served.	Nuisances Abated with or without Notice
Dairies, Cowsheds and Milkshops	303	101	0	0
Bakehouses ...	23	10	0	0
Slaughterhouses ...	19	97	0	0
Offensive Trades ...	2	2	0	0
Common Lodging-houses ...	1	6	0	0
Totals	348	216	0	0

Signed JOHN D. EVANS.

SECTION D. HOUSING.

Steady progress was made in the inspection of houses under the Housing Acts. Of the 356 houses inspected 75 were found to be unfit for human habitation. Forty three of these were represented in Clearance Areas and thirty two under Section 11 of the Housing Act, 1936. In twenty four cases proposals for remedying defects were submitted by the owners. In twenty two cases the proposals were accepted and were satisfactorily carried out in thirteen instances, this includes one house represented in 1936.

If substantial progress is to be made in slum clearance the rehousing programme will require to be accelerated. Already, over a hundred houses are urgently required to replace condemned property, some of which was originally represented early in 1936. At the present rate of progress it is problematical if any of the proposed houses will even be erected by the end of 1938.

Overcrowding remains at much the same figure. It is regrettable that the high rental of present Council houses, has in many instances, prevented their being used to abate overcrowding. This is a matter which should receive early consideration by the Council.

Applications for Grant under the Housing (Rural Workers) Act, were received for twenty houses. In each case the grant was refused and a loan offered in all except one instance. Refusal has not been based on the suitability of the property or status of tenant, and to me, this appears to be entirely contrary to the spirit of the Act. In practice, the scheme adopted by the Council is not being used, and it would have been far better had the Urban Council not accepted delegated powers from the County Council.

Housing, 1937.

1. Inspection of Dwelling-houses during the year :—

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	431
(b)	Number of inspections made for the purpose	700
(2) (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	356
(b)	Number of inspections made for the purpose	550
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	75
(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	25

2. 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	25
--	----

3. 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 in respect of which notices were served requiring repairs. ...	3
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a)	By owners	2
(b)	By Local Authority in default of owners	0
(b)	Proceedings under Public Health Acts :—	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	0
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a)	By owners	0
(b)	By Local Authority in default of owners	0
(c)	Proceedings under sections 11 and 13 of the Housing Act, 1936 :	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	15
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	2
(d)	Proceedings under Section 12 of the Housing Act, 1936 :	
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	0
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit.	0

4. Housing Act, 1936. Part IV—Overcrowding :—

(a)	(1) Number of dwelling-houses overcrowded at the end of the year	64
	(2) Number of families dwelling therein ...	67
	(3) Number of person dwelling therein, Adults	370
	Under 10	75
(b)	Number of new cases of Overcrowding reported during the year	17
(c)	(1) Number of cases of overcrowding relieved during the year	14
	(2) Number of persons concerned in such cases Adults	68
	Under 10	11
(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	0

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

The number of dairies, cowsheds and milkshops on the register remained the same. It was felt that the recent amalgamation of Districts made it advisable to call for fresh registration throughout the Urban District. The necessary steps were undertaken during December, so that it is now fairly certain that the new register does include most of those actively engaged in the trade.

Systematic inspection of cowsheds and dairies has been commenced, but progress is slow.

During the year 88 samples, representing 52 producers, were submitted for examination. Of this number 45 satisfied the standard for Accredited Milk, but 23 were bad whatever the standard adopted.

The general standard of cleanliness of milk production leaves much to be desired.

Many buildings are totally unsuited for cowsheds, a proper dairy and facilities for cleaning and washing utensils are frequently absent. While structure and arrangement of premises is admittedly a matter for the landlord, or at least for landlord in conjunction with tenant, I have been impressed by the absolute lack of care taken by farmers whose premises are quite good and where all facilities are available. In reconstructed buildings with suitable modern floor and standings, I have seen filthy cows, uncleaned sheds, dirty milking stools, and utensils lying anywhere but in the dairy.

In justice to certain farmers I have noted the reverse even where the buildings were not up to standard, and some farmers, not necessarily producers of designated milks, do reach a high standard of care, making full use of all improvements which may have been effected. Unfortunately these are in the minority.

Recently, widespread advertisement has been given to the views of the British Medical Association on the question of pasteurisation of all milk. As matters stand at present, one must admit with regret that much of the milk produced is only safe, if so treated. But surely to advise pasteurisation or sterilisation of all milk because producers will not employ cleanly methods of production and handling, is to adopt a policy of defeatism. Here let it be noted that a distinction is being drawn between clean milk and safe milk.

When one considers how best to raise the standard of milk production one finds the powers granted under the Milk and Dairies Acts and Orders, cumbersome and unsatisfactory to operate. To take but one example :—If milk is produced for human consumption, why should the Local Authority, whose duty it is to supervise the premises, have no power to refuse to register unless the producer also retails in the same district. Surely, such a power if wisely used, would more readily improve better production and handling, than prosecution of the offender?

There has been much comment about the relative scarcity of producers of designated milk in this district. The number is certainly small and, without exception, is entirely composed of those supplying

"Accredited Milk" which is the lowest standard of graded or designated milks. But there is another side to the question. Why after all, should there be this arbitrary classification of raw milk? Surely, the primary division should be under two heads (a) Milk cleanly produced and handled and (b) All milk not so produced and handled. Milk in the former category might be further classified (1) If from a tuberculin tested herd (2) If pasteurised.

The question of safe raw milk is a more difficult one. The most scrupulously clean producer cannot guarantee that the milk he sells is absolutely safe, although it is much more likely to be so than that from the careless producer. One of his milkers may be a healthy carrier of say Diphtheria, or one of the herd may, quite unknown to him, be infected with the bacillus of contagious abortion (the cause of Undulant Fever in the human), or may be giving tuberculous milk without any outward sign. I believe that many epidemics of sore throats are attributable to milk.

In many quarters it is held that pasteurised milk has lost some of the nutritional value of raw milk. Experiments tend to show that in the process certain vital elements, quite apart from vitamins, are altered or lost and that children given raw milk to drink thrive better than those having a similar quantity of treated milk. Is this loss compensated for by the added safety? On this question, and having particular regard to tuberculosis, I would quote Sir R. Philip * "However possible it may be to adjust or correct a tubercle-tainted milk supply by methods of post milking treatment, this does not get rid of the damning fact that out of a population of milking cows of over two and a half millions in the United Kingdom, it has been estimated—on a conservative basis—that a million are infected with tuberculosis (Fortunately only a relatively small proportion of these yield tubercle-tainted milk)"

Post milking treatment, of which pasteurisation is the most common, would do nothing to diminish the incidence of tuberculosis among the milk herds. Better cowsheds and conditions generally might do a great deal.

Moreover, for a period of years there has been a steady decline in the number of cases of tuberculosis notified. Non-pulmonary figures have most importance in the consideration of milk borne infection, and these have fallen from over 36,000 in 1913 to 20,000 in 1925 and 14,608 in 1935. Such figures, although still too high, do not lend support to the plea for compulsory pasteurisation.

Meat Inspection.

There are 19 private slaughterhouses on the register. With modern transport methods available there would appear to be no valid reason for this number. As might be expected many are small and unsuitable. Unless the trade itself secures some measure of centralisation, I anticipate that the time is not far distant when legislation will impose this on a very wide basis.

* Transactions of 22nd Annual Conference, National Association for the Prevention of Tuberculosis, 1936.

During the year 97 inspections were made in the course of which 342 carcasses were examined. This amount of supervision is far below what is necessary, but in this District it has to be borne in mind that ten slaughterhouses are in outlying districts, and with no means of transport beyond public service vehicles, it is difficult to give these the attention required. The following table (No 4) gives further details of the meat inspections. The percentage found diseased from all causes appears to me to be unreasonably low and I do not think reflects the true state of affairs.

Table 4. **Carcasses Inspected and Condemned.**

	Cattle	Calves	Sheep and Lambs	Pigs
Number killed	not	known		
Number Inspected ...	91	43	117	91
All diseases except Tuberculosis. Whole carcasses condemned	—	—	—	—
Carcasses of which some part or organ was condemned... ..	—	—	—	—
Percentage of the number inspected affected with disease other than tuberculosis	—	—	—	—
Tuberculosis only. Whole carcasses condemned	—	—	—	—
Carcasses of which some part or organ was condemned	2	—	—	—
Percentage of the number inspected affected with tuberculosis	2.70	—	—	—

Other Foods.

Premises where food is prepared or stored are visited periodically. No statutory action has been required. Certain bakehouses cannot be considered entirely satisfactory and in my opinion, more frequent inspections are desirable.

Milk and Dairies Acts and Orders, 1915-1936.

Milk & Dairies (Consolidation) Act, 1915

Milk & Dairies (Amendment) Act, 1922

Milk and Dairies Order, 1926

Total number of cowsheds in District	...	303
--------------------------------------	-----	-----

Total number of Farms in District	...	154
-----------------------------------	-----	-----

Work done during 1937 :—

Number of Cowsheds.

1. Newly built	2
2. Entirely remodelled internally	7
3. Not now used for milk beast	1
4. Where new floors were laid	0
5. Where floors were repaired	1
6. Where feeding troughs repaired or provided	0
7. Where lighting & ventilation were improved	1
8. Where lofts were removed	0
9. Where loft floors were improved	0
10. Where drain inlets were removed to outside	0
11. Where drainage was provided	0
12. Where walls were rendered in cement	0
13. Where standings were paved	0
14. Where approach paving was repaired	0
15. Which were cleaned up	4
16. Where manure dump was moved	1
17. Where manure dump was improved	0
18. Where work is completed	5
19. Where work is in progress	3

Number of Farms.

1. Where new dairies were built	4
2. Where dairies were improved	0
3. Where cow-keeping was given up	0

SECTION F. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

The total number of cases of Infectious Disease notified during the year was 93. This is an increase of 15 as compared with the previous year. The following table classifies the notifications.

TABLE 5.

Disease.	Total cases notified.	Cases admitted to Hospital.	Total Deaths.
Scarlet Fever	29	28	0
Diphtheria	19	18	1
Pneumonia	13	3	10
Enteric Fever	0	0	0
(including Paratyphoid)			
Puerperal Fever	0	0	0
Puerperal Pyrexia	3	1	0
Ophthalmia Neonatorum	0	0	0
Erysipelas	3	2	0
Meningitis	1	1	0
Tuberculosis (all forms)	25	12	7

In addition to the 19 cases of Diphtheria, two cases admitted for observation proved not to be diphtheria either clinically or bacteriologically.

Scarlet Fever.

Cases of this disease continue to be of a mild type and one has been struck by the absence of complications. Serum is given as a routine measure in all but the mildest cases, but I do not think that this wholly accounts for the absence of complications. Uncomplicated cases, as a general rule, are discharged on the twenty-eighth day of disease. "Return" cases have been so few, than earlier discharge might very well be tried in the majority of patients.

It is now generally realised that the distinction between streptococcal sore throat without a rash and scarlet fever is a very fine one. Indeed the dividing line is so narrow that it is not surprising to find many cases are not recognised as such in the early and most infectious stage. If this difficulty is recognised, we are faced with the question as to the advisability of relaxing quarantine regulations for healthy contacts. Be it noted that stress is laid on the contact being in good health. Further, should Isolation Hospital accommodation be made available for severe streptococcal sore throats with or without a rash? Infectivity is completely independent of the question of rash and this being so, the present attitude provides for notification and hospital treatment of mild sore throat with a rash, while denying similar precautions and treatment for really severe streptococcal sore throat.

Diphtheria.

There has been an increase in the number of cases notified. The majority were mild in type, but even in these, hospital treatment cannot always be curtailed. As a result, the accommodation available was at one time insufficient.

Full use appears to have been made of the facility of free antitoxin for early or home treatment.

Measles.

This disease is not notifiable in the District, but School returns showed the commencement of a severe epidemic towards the end of the year. Here again, the need for suitable hospital treatment is apparent, and I would like to be able to offer beds for cases of measles with pneumonia, where home conditions prevent suitable care and treatment.

I give tables of Infectious Disease classified according to age and to incidence in the several Wards (Tables 6 and 7), also a table showing the incidence of Infectious Disease during the past 3 years.

TABLE 6.

Cases of notifiable diseases at varying ages during 1937.

Disease.	AGE GROUPS.												Total
	Under 1 year	1—	2—	3—	4—	5—	10—	15—	20—	35—	45—	65—	
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	1	1	1	1	8	8	2	7	—	—	—	29
Diphtheria	—	—	2	—	1	8	3	—	5	—	—	—	19
Enteric Fever (including Para-typhoid)	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	1	2	—	—	—	3
Pneumonia	—	1	—	—	—	2	—	—	2	5	1	2	13
Erysipelas	1	—	—	—	—	—	—	—	—	1	1	—	3
Meningitis	—	—	—	—	—	—	1	—	—	—	—	—	1
Ophthalmia	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE 7.

Infectious Diseases Notified During 1937.

Ward.	Cases Notified.							Removed to Hospital.						
	Scarlet Fever	Diphtheria	Pneumonia	Erysipelas	Meningitis	Puerperal Pyrexia	Tuberculosis (all forms)	Scarlet Fever	Diphtheria	Pneumonia	Erysipelas	Meningitis	Puerperal Pyrexia	Tuberculosis (all forms)
Matlock	10	8	9	2	—	1	12	9	8	3	2	—	—	4
Matlock Bath	1	9	—	—	1	—	—	1	9	—	—	1	—	—
Tansley	1	—	—	—	—	—	2	1	—	—	—	—	—	1
Cromford	2	1	—	—	—	—	—	2	1	—	—	—	—	—
Bonsall	3	—	—	—	—	—	2	3	—	—	—	—	—	2
North Darley	10	—	4	1	—	1	8	10	—	—	—	—	—	4
South Darley	2	1	—	—	—	1	1	2	—	—	—	—	1	1

TABLE 8.

Disease.	1935.	1936.	1937.
Scarlet Fever ...	15	39	29
Diphtheria ...	2	7	19
Pneumonia ...	6	12	13
Enteric Fever ...	1	0	0
Puerperal Fever ...	0	0	0
Puerperal Pyrexia	2	3	3
Ophthalmia Neonatorum	0	1	0
Erysipelas ...	3	4	3
Acute Poliomyelitis	1	0	0
Meningitis ...	0	0	1
Tuberculosis (all forms)	12	12	25

Tuberculosis.

The following table shows age, sex distribution and deaths from Tuberculosis during the year,

The number of notifications is double that for the previous year, the increase being greater for the non-respiratory group.

TUBERCULOSIS.

New Cases and Mortality during 1937.

Age period	New Cases.				Deaths.			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	1	—	—	—	—	—
1—	1	—	—	1	—	—	—	—
5—	—	—	3	5	—	—	—	—
15—	—	—	1	—	1	—	—	—
25—	1	1	—	—	—	—	—	—
35—	4	—	—	1	2	—	—	—
45—	2	1	—	1	1	—	—	—
55—	2	—	—	—	2	—	—	—
65 upwards	—	—	—	—	1	—	—	—
Totals	10	2	5	8	7	—	—	—

Of the above seven deaths, four had been notified before 1937.

No occasion arose during the year to take advantage of the powers afforded by the Public Health (Prevention of Tuberculosis) Regulations relating to persons suffering from pulmonary tuberculosis, who were employed in the milk trade, nor under the Public Health Act, which provides for the compulsory removal to hospital of persons suffering from tuberculosis.

I have the honour to be, Gentlemen,

Your obedient servant,

S. S. PROCTOR,

Medical Officer of Health.

Brook House,
Bakewell,

May 10th, 1938.

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspector or Inspector of Nuisances.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
FACTORIES (Including Factory Laundries)	6	...	...
WORKSHOPS (Including Workshop Laundries)	10	...	...
WORKPLACES (Other than Outworkers' premises)	3	...	...
Total	19	...	...

2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of Prosecu- tions. (5)
	Found. (2)	Remedied (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness
Want of ventilation
Overcrowding
Want of drainage of floors
Other nuisances
Sanitary accommodation				
insufficient
unsuitable or defective
not separate for sexes
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of under- ground bakehouse (s. 101)
Other offences
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Minis- try of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total

Signed S. S. PROCTOR.

May 10th, 1938.

THE UNIVERSITY OF CHICAGO
LIBRARY
540 EAST 57TH STREET
CHICAGO, ILL. 60637

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