

[Report 1950] / Medical Officer of Health, Meriden R.D.C.

Contributors

Meriden (England). Rural District Council.

Publication/Creation

1950

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RURAL DISTRICT OF MERIDEN.

ANNUAL REPORT

ON THE

Health of the District

For the Year 1950

— BY —


N. C. MACLEOD, O.B.E., M.B., Ch.B., D.P.H.

Medical Officer of Health



Tamworth :

W. F. Woodcock & Sons Ltd., Printers, 81, Bolebridge Street.



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I, SPRINGFIELDS,

COLESHILL,

1st July, 1951.

To the Meriden Rural District Council.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting herewith my report on the health of the District for 1950, together with the report of the Senior Sanitary Inspector.

2. In the field of infectious diseases the most outstanding and gratifying feature of the year's returns was the absence for the first time on record of any cases of diphtheria.

Unfortunately, there was an appreciable increase in the incidence of tuberculosis, poliomyelitis and food poisoning.

Progress towards the solution of the housing problem was very disappointing but notable improvements in drainage and sewerage were carried out in face of great difficulties.

These matters are referred to in greater detail in the relevant sections of the report.

3. In my reports for 1948 and 1949 reference was made to the introduction and operation of a scheme of Area Administration of the health services of the County Council under the National Health Service Act, 1946. After being in operation for over two years the scheme has proved so successful on the whole that it may well be regarded as in the forefront of modern public health administration in this country. As it has not been done before, it may now be appropriate to give a brief description of the scheme of area administration as it affects the North Western Area of the County which consists of the rural districts of Meriden and Tamworth.

With a few exceptions, the Warwickshire County Council, as Local Health Authority, has delegated the discharge of its functions under Part III. of the National Health Service Act, 1946, to an Area Sub-Committee of the County Health Committee. The Sub-Committee consists of 15 members of whom four are members of the County Council and five and three are members of Meriden and Tamworth Rural District Councils respectively. In addition, there are three members, not members of a local authority, who are appointed by the Health Committee upon the nomination of the Area Sub-Committee.

The Medical Officer of Health for the two districts is Area Medical Officer and the combination of these appointments results in a co-ordinated health service which prevents overlapping and ensures that personal and local knowledge of all aspects of a case can be available in dealing with the many health problems which arise from time to time.

The Area Health Office undertakes, on behalf of the County Council, maternal and child welfare work, domiciliary nursing (nursing, midwifery and health visiting), care and after-care of the sick, a 'Home Helps' service, vaccination and immunisation and the School Health Service.

It would be difficult to divide the activities of the Area Health office as between the two districts but these may generally be regarded as proportionate to the district populations.

There are in the Area 16 Child Welfare Centres and one Ante-Natal Clinic and 42 Schools with 6,444 school children.

The Welfare Clinics are conducted by Medical Officers, Health Visitors and Nurses, with the invaluable assistance of voluntary helpers without whom it would be impossible to deal adequately with some 2,000 children under school age whose attendances reach a total of approximately 13,000 per annum. Great credit is due to these voluntary workers who are carrying out a service of inestimable value to the community.

In the schools over 3,000 children are medically examined each year and where necessary, and after consultation with their family doctor, arrangements are made for such specialist advice and treatment as may be required or, in some cases, for special educational facilities. In addition, cleanliness inspections by Health Visitors are in the region of 10,000 annually.

Members are familiar with the work of District Nurses and Midwives and it need only be mentioned that about 24,000 visits are made each year for general nursing care and that over 400 midwifery cases are undertaken.

It is of interest to note that approximately 50% of local mothers are confined in hospital, probably a result of bad housing conditions, overcrowding and financial considerations.

The Medical, Dental and Nursing Staff approved for the North Western Area and under the day-to-day administration of the Area Medical Officer, consists of :-

- 2 Assistant Medical Officers.
- 2 Dental Surgeons.
- 1 Area Nursing Officer.
- 18 District Nurse Midwives.
- 8 Health Visitors.

There is some difficulty at times in securing and maintaining a full complement of nursing staff and this is largely due to housing problems. Were suitable housing available staff would undoubtedly be forthcoming to ensure adequate health services, as is clearly demonstrated when posts with a house are advertised.

Meriden District Council has rendered very valuable assistance in the housing of District Nurses and Midwives but the majority of our Health Visitors, who are equally essential in a progressive health service, are forced to live outside the area by the housing situation which is also responsible for prolonged vacancies in the establishment.

4. In his report Mr. F.T. Kenyon, the Senior Sanitary Inspector, mentions that, owing to his retirement, this is his last report to the Council. Mr. Kenyon was an able and efficient officer who served the Council for 24 years. During my service in the district I have had reason to be grateful to him for his sound advice and willing co-operation on all matters affecting the public health. His colleagues in the Health Department wish him well in his retirement.

5. In conclusion it should be noted that the report which follows has been prepared to comply with the requirements of the Ministry of Health.

N. C. MACLEOD,

Medical Officer of Health.

MERIDEN RURAL DISTRICT

A. EXTRACT FROM VITAL STATISTICS OF THE YEAR.

Population (estimated) Mid-year, 1950	...	...	...	36,990
Birth Rate	...	...	...	17.5
Still Births—Rate per 1,000 total births	...	...	...	18.2
Death Rate	...	...	...	9.2
Deaths from Pregnancy, Child-birth, Abortion	...	...	...	Nil.
Death Rate of Infants under one year of age :-				
All Infants per 1,000 live births	...	...	...	46
Legitimate Infants per 1,000 legitimate live births	...	...	...	43
Illegitimate Infants per 1,000 illegitimate live births	...	...	...	57
Deaths from Measles (all ages)	...	...	...	Nil
Deaths from Whooping Cough (all ages)	...	...	...	Nil.

Population. The estimated population of 36,990 is 830 greater than that for 1949.

Birth Rate. At 17.5 per 1,000 population the birth rate is a little lower than for the previous year when it was 18.2. The figure for England and Wales for 1950 was 15.8 per 1,000.

Death Rate. 9.2 per 1,000 compares with 11.6 per 1,000 for England and Wales.

Table I. gives the causes of death from which it will be seen that there were 139 deaths (or 41% of the total) from diseases of the heart and circulatory system and 69 (or 20% of the total) from cancer.

While there was an increase in the number of deaths from cancer generally, it was most marked in connection with cancer of the lung from which 15 people died compared with an average of six for the previous seven years. It is of interest to note that the increase was in males only.

Infantile Mortality. The rate of 46 per 1,000 live births is a noticeable increase over last year's 26 per 1,000 and is higher than the 1950 figure of 29.8 per 1,000 for England and Wales.

In plain language the apparently high figure of 57 deaths per 1,000 illegitimate live births represents the death of two out of a total of 35 illegitimate live births.

Statistics for the last few years and also for England and Wales in 1950 are given in Table II.

B. GENERAL PROVISION OF HEALTH SERVICES IN THE DISTRICT.

Public Health Officers.

There were no changes during the year.

C. SANITARY CIRCUMSTANCES OF THE DISTRICT.

I. Water Supplies.

(1) Piped supplies in the district have been satisfactory in quality and the inadequacy of the Arley supply, referred to in last year's report, has been appreciably relieved by an increase in the amount of water provided by Nuneaton Borough Council. Although the situation will not be entirely satisfactory until the proposed extension from the Birmingham supply at Nether Whitacre to Nuneaton has been completed, the recent improvement has been of considerable value and has enabled the District Council to proceed with an urgent housing scheme in the village

(2) No bacteriological or chemical examinations of piped water were made by the Health Department.

(3) There was no case of plumbo-solvent action.

(4) From the report of the Senior Sanitary Inspector it will be seen that, of 11 samples of water from wells and springs, only five were found to be satisfactory on chemical examination and that of 29 samples examined bacteriologically 20 were unfit for human use. As in previous years unsatisfactory wells were cleansed and re-sampled but connections were made to a mains supply where possible.

II. Drainage and Sewerage.

Work continued on the sewerage system and disposal works for parts of the parishes of Berkswell and Balsall. This is a major scheme covering a large rural area and the fact that it has been undertaken in such difficult times reflects the progressive attitude of the Council to matters affecting the health of the district.

A small sewer extension was made at Water Orton to deal with a nuisance arising from farm sewage and an extension at Cole End, Coleshill, receives drainage from 42 houses which was previously discharged into the river without adequate treatment.

The Council's small disposal works at Furnace End was repaired and refitted.

III. *Refuse Collection and Disposal.*

Refuse collection was fairly satisfactory considering the acute shortage of labour for this type of work and improved disposal methods introduced the previous year were continued.

IV. *Miscellaneous.*

Reference was made in last year's report to gentles breeding premises in the district and it is satisfactory to note that, owing to the energetic measures taken by the Council, this offensive and dangerous trade was much reduced, and nearly eliminated, by the end of the year.

D. HOUSING.

From the public health point of view housing of the people remains the outstanding problem in the district and the shortage of decent and adequate accommodation is responsible for much physical and mental infirmity.

Owing to many difficulties encountered last year the number of houses completed by the Council was only 44, compared with 66 the previous year and 264 in 1948. This number is considerably less than that required to meet the normal increase in population and can hardly be regarded as progress towards a solution of the housing problem. However, at the time of writing this report, there are good prospects of a substantial improvement in the 1951 house-building figures.

The number of applicants for Council houses increased from 1,247 at the end of 1949 to 1,482 at the end of 1950. Over 300 of the applicants are already tenants of houses which they wish to vacate for various reasons.

The squatter position, referred to in the 1949 report, has been reconsidered and the Council has accepted responsibility for the settlements at Fen End, Lea Marston and Balsall. This ensures improved sanitary control and makes possible the gradual removal of this problem.

The process will be slow but controlled in such a way as to safeguard the health of the district.

E. INSPECTION AND SUPERVISION OF FOOD.

Particulars of action with regard to meat and other foods is given in detail in the Sanitary Inspector's report.

There is no Ministry of Food abattoir in the district and the carcasses inspected were therefore those of emergency slaughterings only.

Food Hygiene.

Under Section 15 of the Food and Drugs Act, 1938, the Council made byelaws, which came into operation on 14th August, 1950, "for securing the observance of sanitary and cleanly conditions and practices in connection with the handling, wrapping and delivery of food sold or intended for sale for human consumption, and in connection with the sale or exposure for sale in the open air of food intended for human consumption."

It is hoped that the application of these byelaws will eventually result in a substantial improvement of hygienic standards in the preparation and handling of food.

Milk Supplies.

Routine sampling of milk in the district is undertaken by officers of the County Health Department to which I am indebted for the figures given below. Samples are also examined at the various large wholesale dairies. Herds found to produce tuberculous milk are investigated by the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries and his staff.

There is close co-operation between the departments mentioned and my office in deciding and carrying out such preventive measures as are necessary.

Investigations of Tuberculous Milk Supplies, 1950.

Number of completed investigations	...	19
Number of cows examined	... ..	351
Number of milk samples for diagnostic purposes		77
Number of cows slaughtered under T.B. Order		17
Number of cows removed from herds during investigations which may have been infected		9

It was not found necessary during the year to serve any notices under the Milk and Dairies Regulations, 1949, requiring treatment of milk prior to sale for human consumption.

Food Poisoning.

28 cases were notified compared to 3 cases only for the previous year. Most of them were of a mild nature with illness lasting from 24 to 48 hours.

There were 11 cases in an outbreak in an approved school in the district following consumption of a "savory pie" which was found to contain a staphylococcal infection, the poison arising therefrom being responsible for the outbreak.

Two small family outbreaks involving three people in each case were recorded but investigations failed to find the cause of the attacks.

Of 11 single cases one was due to *Salmonella typhi-murium* but no causative agent was determined in the other cases.

F. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

Incidence of Commoner Infectious Diseases since 1940.

		Smallpox.	Diphtheria.	Scarlet Fever.	Enteric Fever.	Pneumonia.	Encephalitis Lethargica.	Puerperal Pyrexia.
1941	...	—	60	47	4	73	—	2
1942	...	—	33	55	—	56	—	4
1943	...	—	18	122	2	91	1	3
1944	...	—	16	60	—	51	—	9
1945	...	—	15	35	—	51	—	13
1946	...	—	9	46	2	48	—	5
1947	...	—	10	48	—	58	1	5
1948	...	—	27	78	1	61	—	5
1949	...	—	1	56	—	86	—	5
1950	...	—	—	58	—	48	—	10

Diphtheria. It is reported with satisfaction that, for the first time on record, there were no confirmed cases of diphtheria throughout the period under review.

During the year a full course of immunisation against diphtheria was completed by 369 children under 5 years of age and by 35 children between the ages of 5 and 14 years, a total of 404.

In addition 234 children were given a re-inforcing or "booster" dose.

Most of the immunisations were carried out at Welfare Centres and Schools.

The immunisation figures show a reduction of some 25% compared to those for the previous year. This is probably the result of much ill-directed, and possibly ill-conceived, publicity regarding the connection between diphtheria immunisation and poliomyelitis which eventually led to suspension of immunisation from July to November.

I have never been convinced of any great danger in this valuable preventive measure and it may well be that a marked reduction in the number of children immunised will prove more costly in the long run, from increased incidence of diphtheria, than any possible ill efforts resulting from immunisation during a moderate outbreak of poliomyelitis.

Everything possible is being done to encourage immunisation for the freedom from diphtheria, which has been achieved after so many years, must not be allowed to give rise to complacency on the part of parents and others responsible for the welfare of children.

Acute Poliomyelitis and Acute Encephalitis. Eighteen cases of acute poliomyelitis were notified during the year, affecting 13 children and 5 adults of whom 8 and 4 respectively showed varying degrees of paralysis. One adult died and all other cases survived, most of them making a complete recovery. A few are still under treatment and making good progress.

There were two fatal cases of acute infective encephalitis in children. It is of interest to note that a small girl developed acute infective encephalitis and that five days later her twin brother was diagnosed as suffering from acute poliomyelitis.

A husband and wife were both stricken with paralytic poliomyelitis within six days of each other. Both made a fair recovery.

The incidence of poliomyelitis and encephalitis in the district during 1950 must be regarded as high, for notified cases represented 54 per 100,000 population.

Considering that only a small percentage of people infected show clinical signs of the disease, it is probable that many mild and abortive cases were missed and it may, therefore, be hoped that a large number of children developed some degree of immunity during the outbreak.

Measles. Measles appeared in epidemic form in Arley, Keresley, Coleshill, Castle Bromwich and Water Orton. The total number of cases notified in the district was 744 compared to 207 the previous year.

School Closures—Nil.

Table III. shows the chief infectious diseases notified during the year together with their age incidence and deaths.

PREVALENCE OF, AND CONTROL OVER, 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	—	—	—
1	—	—	—	4	—	—	—	2
5	1	—	3	1	—	—	—	—
15	5	7	—	—	—	1	—	—
25	6	6	1	—	2	2	—	—
35	7	2	—	—	1	1	—	—
45	2	1	—	—	—	—	—	—
55	1	1	—	—	2	—	—	—
65 and upwards	—	—	—	1	—	—	—	—
TOTALS	23	18	5	6	6	4	—	2

Tuberculosis showed a substantial increase to 52 notifications from 42 for the previous year and is the highest number recorded since 1939. There was one death more than in 1949.

This increase is the more notable when it is remembered that figures for the Country as a whole have shown an appreciable improvement during the year. A disturbing feature was the frequency with which new cases from families already infected were notified, this being due to delays in hospitalisation of infectious cases and lack of facilities for isolation, combined with overcrowding and bad housing.

About 60% of notified pulmonary cases gained admission to a sanatorium but, generally speaking, patients still have to face a waiting period of four or five months.

Until this dangerous gap can be bridged, and adequate housing is available, the problem of tuberculosis control will remain.

Four tuberculous families were re-housed by the Council during the year.

The following table shows the incidence of and deaths from Tuberculosis during the last 20 years :-

Tuberculosis.

	1931	1932	1933	1934	1935	1936	1937
Cases ...	23	21	36	21	35	27	26
Deaths	9	5	18	12	16	7	12
	1938	1939	1940	1941	1942	1943	1944
Cases ...	19	54	35	40	36	49	51
Deaths	6	17	18	18	19	13	20
	1945	1946	1947	1948	1949	1950	
Cases ...	29	38	42	48	42	52	
Deaths	18	9	11	14	11	12	

FACTORIES.

The numbers on the registers are :-

(1) Factories in which sections 1, 2, 3, 4, and 6 of the Factories Act are enforced by the Council—7.

(2) Factories not included in (1) in which section 7 is enforced by the Council—109.

(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)—3.

Three Sanitary defects were found and remedied.

There were no prosecutions.

REPORT OF THE SENIOR SANITARY INSPECTOR.

*To the Chairman and Members of the
Meriden Rural District Council.*

LADIES AND GENTLEMEN,

I beg to present my last report, for the year 1950.

WATER ANALYSIS.

Samples were reported upon as follows :-

Chemical Examination.

	Passed.	Unsatisfactory.	Condemned.	Total.
Old wells .	2	1	3	6
New wells ...	—	1	—	1
Springs ...	3	—	—	3
Stream ...	—	1	—	1
				<hr/> 11

Bacteriological.

	Passed.	Unsatisfactory.	Condemned.	Total.
Old wells ...	6	10	8	24
New wells ...	—	—	1	1
Springs ...	3	1	—	4
				<hr/> 29 <hr/>

FOOD INSPECTION.

286 Inspections were made and the following items were condemned and surrendered for the reasons stated :-

Carcase and organs of pig.	Generalised tuberculosis.
Pig head, liver, lungs (and mesentery).	Tuberculosis.
3-lbs. mutton,	Abscesses.
46-lbs. Beef,	Tuberculosis.
10½-lbs. tinned Ham.	Decomposed.
1,003 tins various Foods.	Blown, damaged or unsound.

Sixteen new registrations were made of premises under section 14 of the Food and Drugs Act, 1938, thirteen for ice-cream, one for fish-frying and two for sausages and cooked meats.

INFECTIOUS DISEASES.

Disinfections numbered 48. For scarlet fever 20, diphtheria 2, encephalitis 1, infantile paralysis 7. cancer deaths 3. tuberculosis deaths 6, removals 8, vermin-infested houses 1.

NUISANCES.

The following were dealt with :-

Ashpits defective ...	...	...	...	...	1
Ashbins dilapidated ...	...	...	...	...	167
Accumulation of refuse ...	...	...	...	...	1
Closets defective ...	...	...	...	...	11
Cesspools overflowing ...	...	...	...	...	27
Closet accommodation inadequate ...	...	...	...	...	13
Closet pails defective ...	...	...	...	...	16
Drains choked and defective ...	...	...	...	...	141
Damp walls... ...	...	...	...	...	68
Dirty house... ...	...	...	...	...	3
Foul ditches ...	...	...	...	...	13
Flooded cellar ...	...	...	...	...	1
Housing repairs ...	...	...	...	...	149
Insanitary caravan ...	...	...	...	...	1
Insanitary privies ...	...	...	...	...	3
Overcrowding ...	...	...	...	...	1
Poultry kept ...	...	...	...	...	1
Polluted well ...	...	...	...	...	8
Rainwaters conductors defective ...	...	...	...	...	11
Roofs defective ...	...	...	...	...	47
Sinks defective ...	...	...	...	...	5
Smoke nuisance ...	...	...	...	...	2
Vermin infested houses ...	...	...	...	...	32
Waterclosets defective ...	...	...	...	...	39
Water supply unsatisfactory ...	...	...	...	...	34
Yard paving defective ...	...	...	...	...	1
Miscellaneous ...	...	...	...	...	5

Thirty-six pail closets were converted to water-closets and half-cost paid by the Council, making 64 converted in the last three years.

I commented in my last report on the growth of reliance on the department as shown by the complaints made of insanitary conditions. The number had risen from 139 in 1939 to 576 in 1949. This year, 1950, it was 853.

Surveys were made of the sanitary accommodation of five villages during the year with results as follows :-

	<i>Dwellings.</i>	<i>Waterclosets.</i>	<i>Pail closets.</i>	<i>Privies.</i>
Coleshill ...	922	790	71	4
Castle Bromwich	1263	1259	4	—
Water Orton	531	502	12	—
Fillongley	228	104	88	33
Hampton-in-Arden	331	292	27	1
	3275	2947	202	38

WATER SUPPLIES.

One small extension of main of 160 yards only was made during the year.

ATMOSPHERIC POLLUTION.

The use of three deposit guages and nine lead-peroxide instruments was continued during the year and I give figures from my report on the year to the Public Health Committee.

Average monthly result from each deposit gauge, compared with the average for the same gauge during 1949 :-

				<i>Total solids.</i> <i>Tons per sq. mile, per month.</i>	
				1950	1949
Lea Marston	...	...	...	24.05	22.09
Bacon's End	...	...	...	9.22	11.99
Berkswell	...	...	...	7.06	8.16

The reports on the nine lead-peroxide gauges giving records of the presence of sulphur-gases in the atmosphere of the district are very similar indeed to 1949, the worst four places, in order, being :-

1949.	1950.
(1) Whitacre Heath.	(1) Whitacre Heath.
(2) Dunton Hall.	(2) Dunton Hall.
(3) Marston.	(3) Marston.
(4) Lea Marston.	(4) Drainage Board, Coleshill.

Total rainfall for the year at Lea Marston was 25.21 inches.

RODENT CONTROL.

The work done under this heading during the year is shown by the following statement :-

Complaints received	...	...	...	113
Premises baited and poisoned.				
Private			578	
Business	...		23	
			—	601
Premises cleared	...	...	...	593
Premises not cleared	...	...	...	8
Dead rats found and buried			...	431

Tips treated. Packington ; Fivefield Road, Keresley ; Fillongley Road, Meriden ; Hill Top and Church Farm, Arley.

Sewage Filler-beds treated. Meriden; Furnace End, Over Whitacre; Hampton-in-Arden (two); Arley (two).

Sewers treated. Castle Bromwich, Coleshill, Curdworth, Marston Green, Hampton-in-Arden, Keresley, Water Orton and Over Whitacre.

NATIONAL ASSISTANCE ACT, 1948.

Two burials were done by the local authority during the year, under section 50 of this Act. They were babies and the total cost was £4.

In closing my last report to the Council I wish to place on record my indebtedness to and appreciation of the long and faithful service in the department of Mr. Haines, Deputy Senior Sanitary Inspector (1938), Mr. Dobb, Additional Sanitary Inspector (1942) and Miss Knight, Housing Assistant (1940). I leave them with all best wishes for their future and that of the department.

Mr. Haines succeeds me and I regret that at the time of writing this report Mr. Dobb is very seriously ill.

I am, Ladies and Gentlemen,

Your obedient servant,

F. T. KENYON,

Senior Sanitary Inspector.

Town Hall,
Coleshill,
Birmingham.

23rd February, 1951.

TABLE I.
MERIDEN RURAL DISTRICT.

CAUSES OF DEATH DURING THE YEAR, 1950.

CAUSE OF DEATH.	MALES.	FEMALES.
All Causes	198	142
1 Tuberculosis, respiratory	6	4
2 Tuberculosis, other	—	2
3 Syphilitic disease	—	—
4 Diphtheria	—	—
5 Whooping Cough	—	—
6 Meningococcal infections	—	—
7 Acute Poliomyelitis	1	—
8 Measles	—	—
9 Other Infective and Parasitic diseases	—	4
10 Malignant Neoplasm, stomach	4	5
11 Malignant Neoplasm, lung, bronchus	13	2
12 Malignant Neoplasm, breast	—	7
13 Malignant Neoplasm, uterus	—	2
14 Other Malignant and Lymphatic Neoplasms	25	11
15 Leukaemia, Aleukaemia	1	1
16 Diabetes	2	1
17 Vascular Lesions of Nervous System	16	23
18 Coronary Disease, angina	24	12
19 Hypertension with Heart Disease	10	4
20 Other Heart Disease	19	24
21 Other Circulatory Disease	5	2
22 Influenza	—	2
23 Pneumonia	6	5
24 Bronchitis	18	1
25 Other Diseases of Respiratory System	1	1
26 Ulcer of Stomach and Duodenum	3	2
27 Gastritis, Enteritis and Diarrhoea	2	—
28 Nephritis and Nephrosis	2	4
29 Hyperplasia of Prostate	1	—
30 Pregnancy, Childbirth, Abortion	—	—
31 Congenital Malformations	4	2
32 Other Defined and Ill-defined Diseases	28	14
33 Motor Vehicle Accidents	4	4
34 All other Accidents	3	3
35 Suicide	—	—
36 Homicide and operations of war	—	—

TABLE II.

MERIDEN RURAL DISTRICT.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1950 AND PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Nett.		Under 1 Year of age.		At all ages.	
		Number.	Rate.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8
1941	34,210	564	16.5	35	59	377	10.6
1942	34,510	600	17.4	25	42	321	9.3
1943	34,310	667	19.4	30	45	321	9.4
1944	33,870	679	20.0	30	44	337	9.9
1945	33,110	649	19.5	30	46	309	9.3
1946	33,770	631	19.0	41	65	19	9.5
1947	34,800	773	22.2	30	39	348	10.0
1948	35,380	714	20.2	27	39	319	9.0
1949	36,160	656	18.2	17	26	313	8.7
1950	36,990	646	17.5	30	46	340	9.2

VITAL STATISTICS IN ENGLAND AND WALES, 1950.

ENGLAND AND WALES.

*Birth-rate, Death-rate, and Infantile Mortality during the year 1950.
(Provisional Figures).*

Annual Rate per 1,000 Population.

	Live Births.	Still Births.	Deaths.	Deaths under one year to 1,000 Births
England and Wales	15.8	0.37	11.6	29.8
126 Great Towns, including London	17.6	0.45	12.3	33.8
148 Smaller Towns	16.7	0.38	11.6	29.4
London	17.8	0.36	11.8	26.3

TABLE III.
MERIDEN RURAL DISTRICT.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1950.

NOTIFIABLE DISEASE.	Number of Cases notified.								Total cases removed. to Hospital.	Total Deaths.
	At all Ages.	At Ages—Years.								
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards.		
Measles	744	15	343	363	15	8			3	
Whooping Cough	154	15	85	54						
Diphtheria (including Membranous Croup)										
Erysipelas	2							2	1	
Scarlet Fever	58		15	42	1				11	
Enteric Fever										
Pneumonia	48	4	12	5		9	10	8	1	11
Malaria										
Dysentery	3	1	1		1				1	
Puerperal Pyrexia	10				4	6			10	
Meningococcal Infection	1		1						1	
Acute Poliomyelitis	18		6	7	1	4			15	1
Acute Infective Encephalitis	2			2						2
Encephalitis Lethargica										
Ophthalmia Neonatorum	5	5							1	
Chicken Pox	58		13	44	1					
Pulmonary Tuberculosis	41	2		1	12	21	5		20	10
Other forms of Tuberculosis	11	1	4	4		1		1	9	2
Totals	1155	43	480	522	35	49	15	11	73	26

