[Report 1942] / Medical Officer of Health, Morpeth U.D.C. / Borough.

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BOROUGH OF MORPETH

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR 1942.

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1942.

To the Mayor, Aldermen and Councillors of the Borough of Morpeth.

Mr. Mayor, Lady and Gentlemen,

I beg to present to you the Annual Report of the Medical Officer of Health and in doing so bring to your notice the state of the public health in the Borough and that of the sanitary condition of the district.

In accordance with the directions of the Minister of Health (circular 2773) the outlay of the Report follows closely the style applied to its predecessors, especially in regard to its brevity, condensation of subject matter and the limitation of references.

One important subject which has absorbed a very considerable portion of your Medical Officers' time has been - as predicted in the Report for the preceding year - the investigation and treatment of cases of Scabies or Itch.

The effects of the Scabies Order 1941, began to make themselves evident after the resumption of the schools in early 1942 and from a perusal of the paragraph dealing with this scourge - set out within- it will be apparent that there came to be established a new and extensive service which demanded the attendance of your Medical Officers at six clinics per week for the five districts throughout the year, each clinic requiring a forenoon to itself, i.e. a Medical Officer was engaged for 3½ days per week in dealing with preventable verminous conditions (scabies and lice).

Diphtheria immunisation was also resumed during the year and a steady effort made to maintain the immunity of the school and pre-school population against this insidious and deadly malady.

In conclusion it is a great pleasure to express my appreciation of the consideration and assistance extended to me by the Members of the Corporation, the staffs in the other departments of the Corporation and particularly the staffs of the Sanitary Department, who have carried out their duties with loyalty and efficiency.

I have the honour to be,
Mr. Mayor, Aldermen and Councillors,

Your obedient Servant,

JAMES ANGUS,

Medical Officer of Health.

August, 1943.

BOROUGH OF MORPETH.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1942.

Officers of the Public Health Department of the Local Authority.

Medical Officer of Health, Medical Officer Hospital for Infectious Diseases.	James Angus, M.B., CH.B., B.HY., D.P.H.
Assistant Medical Officer of Health Assistant Medical Officer Hospital for Infectious Diseases.	Catherine B. McGregor, M.B., CH.B., D.P.H.
Chief Sanitary Inspector	F.K. Perkins, M.I.M. & C.E., M.R.S.I.
Assistant Sanitary (Meat) Inspector	J.C. Tweedy, M.S.I.A.
Offices of the Medical Officer of Health.	146, Station Road, Ashington.
Telephone	Ashington 287.
Offices of the Sanitary Inspector	36, Bridge Street, Morpeth.
Telephone	Morpeth 36.
Hospital for Infectious Diseases,	The Common, Morpeth.
Residence. (temporary) of M.O.H.	Hospital for I.D., The Common, Morpeth.
Telephone	Morpeth 433.

BOROUGH OF MORPETH.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1942.

SECTION A.

Statistics and Social Conditions of the Area.

Area in acres - 2,213.

Registrar General's estimate of Resident population mid 1942 ..... Suppressed Min. of H. Circular 2601.

Rateable value - £54,696.

Sum represented by a penny rate - £219.16. 5.

Vital Statistics.

Birth Rate per 1,000 of the estimated resident population - 15.3

Still Birth Rate per 1,000 total (live and still) births - 40.2

Death Rate per 1,000 of the population - 11.7

Death from puerperal causes (headings 29 and 30 of the Registrar General's short list):-

	Death Rate per 1,000 total (live and still) births.
No. 29 Puerperal Sepsis	Nil
No. 30 Other Puerperal causes	Nil

Death Rate of Infants under one year of age :-

All infants per 1,000 live births	62.9
Legitimate infants per 1,000 legitimate live births	58.8
Illegitimate infants per 1,000 illegitimate live births ..	142.7

Deaths from Cancer (all ages).....	13
Deaths from Measles (all ages).....	Nil
Deaths from Whooping Cough (all ages).....	Nil
Deaths from Diarrhoea (under 2 years).....	1

INFANTILE MORTALITY - 1942

Causes of Death.	Und 1 wk	1-2 wks	2-3 wks	3-4 wks	Total under 1 mth	1-3 mths	3-6 mths	6-9 mths	9-12 mths	Total under 1 yr.
Broncho Pneumonia	-	-	-	-	-	-	1	-	-	1
Icterus gravis	1	-	-	-	1	-	-	-	-	1
Injury at birth	3	1	-	-	4	-	-	-	-	4
Pyloric Stenosis (congenital)	-	-	-	-	-	1	-	-	-	1
Gastro Enteritis	-	-	-	-	-	1	-	-	-	1
Mongolism	-	-	-	-	-	-	-	1	-	1
TOTALS	4	1	-	-	5	2	1	1	-	9

There were no deaths registered as being attributed to the following causes:- Measles; Diphtheria; Whooping Cough; Meningitis Tubercular; Erysipelas; Syphilis; Meningitis Non-Tubercular; Congenital malformations; Atalectasis.

SECTION B.

General Provision of Health Services for the Area.

LABORATORY FACILITIES.

Laboratory facilities are available at the Laboratory belonging to the Northumberland County Council. The extent to which these facilities were taken advantage of by the Medical Officer of Health and the local medical practitioners is shown in the table sub-joined.

Specimens sent in by.	Specimen.	Neg.	Pos.
C.C.T.O.	Sputa, tubercle	14	-
Medical Practitioners.	do	21	2
M.O.H.	Swabs for C. diphtheriae	32	-
Medical Practitioners.	do	39	6
M.O.H.	Swabs for S. Vincenti	-	-
Medical Practitioners.	do	1	-
M.O.H.	Swabs for Haemolytic Streptococcus	-	2
Medical Practitioners.	do	6	4

		Neg.	Pos.
M.O.H.	Blood for Enteric Fever.	-	-
Medical Practitioners.	do	3	-
M.O.H.	Faeces for Enteric Fever.	-	-
Medical Practitioners.	do	1	-
M.O.H.	Boiled ham for food poisoning organisms	-	Staphylococcus
Medical Practitioners.	Faeces -do-	-	B. proteus
Medical Practitioners.	Cerebro Spinal Fluid.	Gram negative bacilli, not identified.	

AMBULANCE SERVICES.

The ambulance is a Bedford vehicle which was purchased in June 1939, and is the property of the Corporation of Morpeth.

The scope of the ambulance service became greatly increased by the utilisation of the two Civil Defence ambulance wagons stationed in Morpeth. The use of the latter type of transport became absolutely necessary on account of a very considerable increase in the demand for transport: the increase in the number of calls over 1941 being 172 - equal to 56%.

No. of cases carried during the year..... 477
No. of miles travelled during the year..... 13,974

NURSING IN THE HOME.

District nurses - 3 (one for general nursing and two for mid-wifery cases).

TREATMENT CENTRES AND CLINICS.

The Northumberland County Council is the Welfare Authority for the Borough and sessions are held as follows:-

Infant Welfare Centre - Town Hall, every Monday 10 a.m. - 4 p.m.
(sessions commenced at the Town Hall on the 3.11.41.)
Antenatal Clinic - Town Hall, alternate Thursday, 10.30 a.m.
An Orthopaedic Clinic is also held from time to time.

HOSPITALS, Public and Voluntary.

(1) The Cottage Hospital (voluntary and E.M.S. Hospital) incorporating the Margaret and John Oliver Memorial. For details re staff and accommodation see 1940 Report.

(2) St. George's Hospital, Morpeth.

(3) Hospital for Infectious Diseases - 14 beds - belonging to the Corporation, became leased to the South East Northumberland Joint Hospital Board on 1st October, 1941.

The Public Assistance Institution of the Northumberland County Council, Newgate Street, ceased to exist as such on 10th May, 1942.

SECTION C.

Sanitary Circumstances of the Area.

WATER.

The Corporation possesses its own water undertaking which supplies the major quantity of water to the Borough. A supplementary supply is, however, obtained from the Tynemouth Corporation.

The average daily quantity of water consumed from the Borough undertaking was approximately ... ... 185,843 galls.

The average daily quantity from the Tynemouth Corporation was approximately ... ... 127,658 galls.

Total average daily consumption ... ... 313,501 galls.

This latter quantity was sufficient.

There was continuous chlorination of the water produced from the Borough undertaking throughout the year.

The Tynemouth Corporation commenced to chlorinate its supply of water on the 15th July, 1942.

A number of samples of water was taken from taps in houses in different parts of the town and from the sources of supply and sent for bacteriological examination. The reports were satisfactory.

A regular check up for residual chlorine was also maintained, the orthotoluidine test being the one applied.

All the water mains were flushed regularly.

The new combustion chamber for the Blackstone engine to No. 2 pump at Tranwell was fixed and the engine overhauled.

The two filter beds were periodically emptied and cleaned.

The 9" pipe from the collecting grounds to the reservoirs at Tranwell was cleaned and overhauled.

DRAINAGE AND SEWERAGE.

The undermentioned alterations to and clearance of sediment in the existing drainage and sewerage systems within the Borough were carried out.

The following sewers were cleared of deposits of sand and grit and repaired:-

(1) 12" sewer, Bridge Street, 300 yards.
(2) 12" sewer, Goose Hill, 200 yards.

The 12" and 9" syphons under the River Wansbeck near Bennett's Walk and Dogger Bank were overhauled and cleaned.

A new 6" sewer (840 yards long) and 16 manholes were laid and constructed from the Corporation sewer to the premises on the Common.

A new 4" sewer (347 yards long) was also laid from the 6" sewer to the aforesaid premises.

At the Sewage Works: New steps were constructed to the precipitation tanks.

New impellers were provided for the centrifugal pumps at the pumping station.

A new concrete platform was laid between the filter beds at the sewage works.

The storm water beds were also overhauled and cleaned.

RIVERS AND STREAMS.

No action, except as above indicated, was taken.

CLOSET ACCOMMODATION.

There were two new additional water closets added to the system during the year.

PUBLIC CLEANSING.

Public cleansing is operated by direct labour. Refuse collection is carried out daily and is deposited in an old sand pit at Shadfen, some 1½ miles out of the town proper. This tip is in the area of the Morpeth Rural District Council and is situate 200 yards from the Choppington Road and there are no buildings within 400 yards.

This tip will probably last five years.

SANITARY INSPECTOR'S REPORT.
Sanitary Inspection of the Area.

1.	Defective and insufficient ash accommodation	60
2.	Defective water closets	15
3.	New drains inspected	3
4.	Obstructed drains	108
5.	Disinfected rooms and houses	22
6.	Patients removed to Hospital	10
7.	Dangerous chimney and gables	1

CAMPING SITES.

There are no civilian camping sites within the district.

SMOKE ABATEMENT.

No action taken under this heading.

SWIMMING BATHS AND POOLS.

There is none within the district.

ERADICATION OF BED BUGS.

(1) Number of Council houses found to be infested during the year was seven.

Number of private houses found to be infested during the year was Nil.

(2) The method employed for disinfesting houses is by means of Zaldecide as a spray.

(3) The method employed for ensuring that the belongings of tenants are free from vermin before removal to Council houses is by (2) above.

(4) Disinfestation has been carried out by or under the supervision of, the Assistant Sanitary Inspector.

SCHOOLS.

There are five schools, including the New Senior School at Mitford Road for elementary school children and two schools for secondary education, all having a water supply from the Corporation mains and modern sanitary conveniences. The New Senior Schools have H. & C. water showers.

SECTION D.

Housing.

The following is a tabular statement for the year 1942.

Number of new houses erected during the year:-

	With State Assistance.	Unaided.	Total
By Local Authority	-	-	-
By other Bodies or persons	-	-	-

Inspection of Dwelling Houses during the year:-

1. (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) 186

   (b) Number of inspections made for the purpose ... 210

2. (a) Number of dwelling houses (including under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... ... Nil

   (b) Number of inspections made for the purpose ... Nil

3. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. Nil

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 186

Remedy of Defects without service of formal notices.

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or its officers 186

Action under Statutory Powers - Nil.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

There are eight cowkeepers, none of whom appear on the list of licences for Tuberculin Tested or Accredited Milks issued under the Food & Drugs Act, 1938, Milk (Special Designations) Regulations

1936 - 1941. There are 12 milk purveyors in the Borough, including the eight above mentioned producers.

One of the purveyors supplies Tuberculin Tested (certified) milk while another producer supplies pasteurised milk.

The cow byres have been regularly visited and the dairy premises inspected.

Forty-four samples of milk were taken by your Inspector and sent to the County Laboratory for report.

For Cleanliness: On testing for B. coli there were five samples which failed to pass the test. Further samples, however, taken at a later date were again submitted and proved to be satisfactory.

For Tuberculosis: Twelve samples of milk from herds, some within and some without the Borough, were submitted to the County Laboratory for the biological test for M. tuberculosis. All these samples were found to be free from any such contamination.

Notices for lime-washing of cow houses were sent out and these were complied with.

Dairies & Cowsheds.

Cowkeepers	8	Inspections made	214
Dairies and Milk Purveyors	12	Notices served	36

Meat and Other Foods.

The slaughter houses situated in the Borough were still under the jurisdiction of the Ministry of Food and therein was carried out the slaughtering of cattle for the Borough of Morpeth, and the Rural District of Morpeth.

The slaughtering of the cattle was carried out by a contractor appointed by the Ministry under the supervision of a slaughter house manager, also appointed by the Ministry of Food.

The total number of animals slaughtered for human consumption was as follows:-

Bovine	932
Sheep and Lambs ...	7,159
Pigs	158
Calves	508
	8,757

All these carcases were inspected and the following surrendered as unfit for human consumption:-

Bovine	43
Sheep and Lambs ...	54
Pigs	4
Calves	18
	119

These were handed to the Ministry of Food for appropriate disposal. The weight of these carcases was 7 tons. 1 cwt. 1 qr. 6 lbs.

Below is found in table form certain information relating to the Ante and Post Mortem Inspections of animals.

	Cattle excluding cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
NUMBER KILLED	818	114	508	7,159	158
Number inspected.	818	114	508	7,159	158
All Diseases except Tuberculosis. Whole carcases condemned:-	5	4	17	54	4
Carcases of which some part of organ was condemned:-	33	27	1	25	8
Percentage of number inspected affected with disease other than Tuberculosis:-	4.64	27.19	3.54	1.103	7.59

Tuberculosis Only.	Bovine.	Cows.	Calves.	Pigs.
Whole carcase condemned:-	17	17	2	2
Carcases of which some part or organ was condemned:-	15	6	Nil	Nil
Percentage of the number inspected affected with T.B.	3.91	20.17	0.39	1.26

In addition the following were surrendered:-

	Cwts.	Qrs.	Lbs.
Ox Livers due to Parasitic Diseases, etc.	5	0	20
Beef	16	2	1
Mutton and Lamb	2	0	26
Pork	0	1	26
Ox Head and Tongue	4	1	19
Cows' Udders	6	3	15
Bovine Heart and Lungs	3	0	15
Offal	7	0	27

The following preserved foods were condemned:-

377 lbs. luncheon meat	1 tin carrots
207 lbs. corned beef	15 tins beans
24 lbs. ox tongue	33 tins apples
16 lbs. bacon	6 tins peaches
78 lbs. sausage	36 tins pineapples
4 lbs. boiled ham	79 tins tomatoes
31 lbs. spiced ham	40 tins peas
9 lbs. lentils	24 tins pears
30 lbs. cheese	4 tins apricots
126 lbs. self raising flour	48 tins evaporated milk
8 tins casserole steak	13 tins full cream milk
6 tins salmon	28 lbs. apricot pulp
2 tins lobster	

SECTION F.

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

Hospital accommodation for cases of infectious disease is provided at one of the units of the South East Northumberland Joint Hospital Board, of which Board the Borough of Morpeth is a constituent.

Incidence of Notifiable Diseases (other than Tuberculosis) in the area during 1942.

Disease.	Total cases Notified.	Cases admitted to Hospital.	Total Deaths.
Scarlet Fever	9	4	-
Diphtheria	7	6	-
Paratyphoid B. Fever	-	-	-
Typhoid Fever	1	1	-
Pneumonia	7	Unknown.	2
Erysipelas	6	-	-
Measles	69	-	-
Whooping Cough	7	-	-

Table Showing Analysis of Notified cases of Infectious Diseases under age Groups.

Disease.	Und 1 yr.	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-	65 & over	Total.
Scarlet Fever	-	1	1	-	1	4	1	-	-	1	-	-	9
Diphtheria	-	-	-	1	-	2	3	-	1	-	-	-	7
Paratyphoid B.fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-	1	-	-	-	1
Pneumonia	-	-	-	-	-	-	-	-	1	3	2	1	7
Erysipelas	-	-	-	-	-	-	-	1	-	-	2	3	6
Dysentery	-	-	-	-	-	-	-	-	-	1	1	-	2
Measles	3	3	7	11	5	33	4	1	2	-	-	-	69
Whooping Cough	1	1	2	-	-	3	-	-	-	-	-	-	7

Typhoid Fever.

One case of typhoid occurred in a young adult female who was a nurse at an institution situated in another district, but who lodged in the Borough. She had been associated with the nursing of patients of this institution, amongst whom an outbreak of enteric fever had occurred. She stated she had not been prophylactically treated against the typhoid and paratyphoid fevers, and she was treated for her illness, which proved to be a very severe one, in the Hospital for Infectious Diseases at Ashington. After a protracted convalescence she appeared to have completely recovered.

Food Poisoning.

About mid-day on Saturday, the 11.7.42, a local practitioner reported to me that during the night of 10/11 and in the forenoon of the 11th he had been summoned to attend persons who were suffering from an extremely acute gastro enteritis. Another doctor in the district informed me that he, too, had been called upon to attend a large number of persons suffering from the same complaint.

A visit by your Medical Officer of Health in the early afternoon of the 11th to a few of the families affected, was sufficient to point to food poisoning, the source being attributed to the partaking of cooked ham, bought during the previous day at a certain provision shop. Persons in the households affected who had not partaken of this particular ham escaped the disorder.

The premises were immediately visited with a view to securing the suspected article. The Manageress, however, had just that very morning, because of complaints received from purchasers, returned the remanent portion of the ham to the central stores situated in another district about 25 miles from Morpeth.

In order to secure the portion for bacteriological purposes contact was made with the M.O.H. of the authority in which the central warehouse was situated and the portion of the ham was secured and subjected to bacteriological examination.

In all 28 cases were investigated, involving 10 families, 3, 4 and 5 members in some families being affected at the one time.

The outbreak was found to be due to the contamination of the ham by Staphylococcus.

The Ministries of Health, and Food were at once notified.

Diphtheria.

Of the seven cases notified, five were non-immunised and two had been immunised by the prescribed method. There were no deaths.

Diphtheria Prophylaxis.

Return visits were carried out at all of the Council and Church schools in the Borough in October and November for the purpose of immunising the acceptors amongst the non-immunised. The children at these schools were treated by the Assistant Medical Officer and a Civil Defence trained nurse.

Number of children attending these schools who completed the prescribed course - 86.

The acceptors at the Girls' High and Boys Grammar Schools, Morpeth, were treated by Dr. Pierce, Deputy School Medical Officer at the same time. Number attending these secondary schools who completed the prescribed course - 35.

The following table gives the immunisation state of the child population in certain age groups at the end of December, 1942:-

Under 5 years 51%
Between 5 and 15 years ... 87%

Anterior and posterior Schick Testings are not practised.

Defence (General) Regulations 1939, Scabies Order, 1941, No.33A.

With the resumption of the schools after the Xmas 1941 holidays there commenced to arrive at this office a spate of notifications by the S.M.O. of school children who had been excluded from schools in No.2 Area on account of the existence of scabies.

The method suggested in the Ministry's Order of November 1941 was carried out and in every instance the Sanitary Inspector was directed to visit and inspect all premises ascertain the names and ages of other persons accommodated in the house, and to serve notices in such a fashion that the immediate sufferer was enabled to obtain treatment forthwith at a cleansing station while the others (the contacts) were instructed to appear at the cleansing station for inspection by a Medical Officer on one or other of the bi-weekly consultation clinics that were set up at different centres.

It so happened that your Medical Officers of Health were the Medical Officers engaged by the S.E.N.J.H.B. which covered the five districts for infectious diseases.

The Board has three hospitals, one at Ashington, a second at Bedlington and a third in the Borough of Morpeth.

As all five districts suffered proportionately from this scourge of scabies it was most convenient that the Board should deal with the treatment of cases of scabies at whatever hospitals were available.

Hence Bedlington was available, having three baths with ample supplies of hot water.

A portion of Ashington I.D.H. (with 4 baths) and adequate means for providing large supplies of hot water, was also deemed suitable.

The Hospital for Infectious Diseases in the Borough of Morpeth was not convenient by reason of its much smaller size and its inaccessibility.

Nevertheless sufficient alternative premises with ample ablution facilities were found at the cleansing station for Morpeth Borough and Morpeth Rural situated in the First Aid Post, Borough of Morpeth. Here there were six female and six male over-head showers, and it was decided that these premises could be most conveniently utilised.

The problem of staffing these cleansing stations was overcome by the following means. For male cases wholetime C.D. lay superintendents or First Aid Party men were trained as scabies orderlies and were responsible under medical supervision for carrying out the bathing and painting with the prescribed medicaments. For the females it was necessary to detach nurses from the Board's permanent staff to travel daily to the Hospital at Bedlington and to the cleansing station at Morpeth. The services of one wholetime C.D. nurse were also enlisted, and in addition it was found necessary to train two female scabies orderlies who could be engaged by the hour as and when necessary.

These last three operated at the Hospital at Ashington.

These three cleansing units were in action daily including in many instances Sundays, in order to accommodate persons whose long hours of work during the week prevented their attendance during the week days.

The Medical Officers attended the stations regularly as follows throughout the year.

Ashington - Tuesday and Friday, in the forenoons,
Bedlington - Wednesday and Saturday, -do-
Morpeth - Wednesday and Saturday. -do-

From time to time it was necessary to hold extra clinics under special circumstances, e.g. in the evenings or on a Sunday for the benefit of certain sufferers and in order not to interfere with their employment in industry.

It will thus be evident that a considerable amount of the time of your Medical Officers has been taken up in dealing with this pestilence in an efficient manner - almost without fail amounting to 3½ days per week for the treatment of scabies only, and this does not take stock of the time required where it became necessary for the Medical Officers themselves to visit and inspect the premises and persons in their homes.

The cleansing units served the various parts of the area as follows:-

Hospital at Bedlington dealt with all cases in Bedlingtonshire occurring within a reasonable travelling distance thereof, except those parts of the Shire West Sleekburn, Stakeford, Guide Post, Choppington, for which the I.D. Hospital at Ashington was more conveniently placed and which unit all patients from these parts were directed to attend.

Hospital at Ashington provided the ablution and treatment facilities for all Ashington cases, all Newbiggin cases and those cases occurring in the villages of the Morpeth Rural District known as Lynemouth, Ellington and Linton.

The Cleansing Station at the First Aid Post in Morpeth Borough

accommodated for out-patient treatment all the cases from the Borough of Morpeth and the remainder of the Morpeth Rural District, including Pegswood, Longhirst, Stobswood, Broomhill etc.

In accordance with the Senior Regional Officer's, of the Ministry of Health, Circular 170 C.D. ambulances were used to bring the sufferers and contacts from their homes to the appropriate stations and also return them.

Without this fleet of C.D. vehicles placed at our disposal, it would have been absolutely impossible to carry out the intention of

the Scabies Order on account of (1) distances to be covered, (2) numbers in the families, (3) the necessity for returning the mother to the home as speedily as possible in these industrial districts, (4) the strictly limited numbers of public service vehicles available, and (5) the fact that it could never be in the public interest for verminous persons knowingly to be in contact with presumably uninfested persons.

A further point that I should like to make is that had not these conveyances been available the regular attendance of the sufferers at the clinics could not have been maintained or expected, and the numbers of "contacts" to be inspected would have been greatly reduced.

The source of the majority of the intimations of the existence of scabies during the year was, without doubt, the School Medical Service through the School Medical Officer, though at times school nurses, head teachers and school attendance officers also sent information to my office, which latter proceeding afforded opportunities for immediate action and eliminated a time lag which took place by correspondence between the head masters and the offices of the Director of Education and School Medical Officer on the one hand and the School Medical Officer and myself on the other.

General practitioners were not slow in directing their patients to avail themselves of the well known advantages to be had at the cleansing stations, for the number of houses in this area occupied by persons of the working classes which have baths with H.& C. water is relatively very small.

Of course many of the collieries have pit head baths which are exclusively open to men, so the persons most likely to require treatment, that is the dependents of the employees, have, it will readily be appreciated, very inadequate ablution facilities in the home. The number of men treated was relatively few as a consequence.

Your Medical Officers do not act as School Medical Officers in any of the districts, so all formal notifications of the existence of scabies in school children were forwarded to my office by the S.M.O. or his deputy. No other verminous condition was ever specified, such as pediculosis (head and/or body lice) but a reference to the subjoined table will demonstrate the appalling state of affairs that existed amongst considerable numbers of school children disclosed by the very thorough examination to which they were subjected at the cleansing stations on their first visit. Very many of these school children - boys & girls alike - referred for scabies only, were found to be afflicted or infested with head lice (insects & nits) and very often their "contacts" were found to be in a similar verminous state and were also found to be suffering from scabies and/or lice.

Quite a number of adolescent females and adult women, many of the latter the mothers of school children, were disclosed to be in a plight similar to their off-spring, i.e. harbouring the itch-mite and the head louse.

In fact amongst certain classes of the community infestation with head lice seemed to be a familial affair and many of the mothers regarded the presence of lice and nits in the heads of their children as a natural sequence of their childrens' attendance at school.

Had evacuation at short notice of school children from many parts of No.2 Area been necessary, the authorities in the reception areas would have had every reason to express their annoyance and disgust with the verminous condition of many of the evacuees.

In No.2 Area where thousands of houses have no baths and no H. & C. water system, infestation by the itch mite might be excusable, but there cannot be any mitigating circumstances advanced for the continued and recurrent presence of head lice amongst certain classes of school children, their sisters and brothers, and the mothers, for in none of the more largely populated villages in the area is there a shortage of water supply, and I would say that even in those parts where the water is scarcest there is always ample to be obtained for the purpose of maintaining the head of everyone in a clean and vermin-free state.

In cases of scabies of long standing there was much septic inflamation associated with the scabetic state, and this secondary infection was always found very difficult to cure. The medicament relied upon for the eradication of scabies was 25% Benzyl Benzoate emulsion or lotion, and the sufferers were required to attend daily at the clinic, sometimes for a week, some for two weeks, others for three or more until the Medical Officers were satisfied that the infestation had been stamped out and the length of their attendance was very often determined by the amount of sepsis that had occurred. Many long standing cases showed profuse pigmentation of the skin at the sites where infestation and infection had been worst.

The Ministry's memorandum of April 1942 implies that in uncomplicated cases of scabies two treatments should suffice, but this surely can only apply to experimental scabies.

One has only to visualise what happens when a child, notified as scabies and thereby excluded from school, has had his first treatment. He immediately regards his enforced absence from school as a holiday and he is probably more in need of a bath the next day when he appears at the clinic than he would have been, had he not been excluded from school.

In order to minimise the evil effects of scratching, it became necessary to give attention to the trimming of the nails of the hands and the feet, and this manicure and pedicure was carried out by the nurses and scabies orderlies.

The eradication of the head louse very often exceeded in time the cure of the scabies for which latter condition all had been originally referred. Many of the infestations were severe with large numbers of lice and a profusion of nits, and the quickest way to rid the person of this vermin was to close crop the hair, but for

this, written consent of the parent was required and many were reluctant to grant such permission.

Hair cropping gave the quickest and best results, especially where there were infected sores on the head with involvement of cervical glands. Lethane "special" 384 was also used in large quantities, but one was never sure whether or not some of the nits might remain viable and at a later date hatch into active larvae.

In my opinion amongst the girls and adolescents, the manner of hair dressing has much to do with the presence of head lice. The styles mostly affected being the "page boy", "long bob" and "short bob", and the tresses drooping over the sides of the head and nape of the neck concealed in many instances, it was found, large aggregations of nits or ova.

I feel certain that the introduction of some other style of hair dressing after the fashion of th "Eton crop" which would be acceptable to school girls, would in large measure diminish the prevalence of head lice.

As for the boys there is no reason why the hair should not be close cropped at the back, the sides and well on to the crown of the head.

There are, however, difficulties in obtaining hair cuts for school children, especially boys, where many hair dressers decline to undertake boys hair cutting at the weekends, or, in order to prevent their appearance at this time, increase the charges.

I have reached the conclusion that since the Board of Education through the School Medical Service deals with all kinds of abnormalities in school children, such as the giving of treatment for dental disease, tonsils and adenoids, squints, etc. there might be made the suggestion of a further extension of their activities by way of appointing mobile hair dressers who would visit the schools from time to time for the purpose of cutting school children's hair, for were this so, and assuming parental permission, children would be required to have their hair cleaned before keeping their appointment with the hair dresser on the following day, and also to be franked for cleanliness by the school nurse.

An alternative would be to have contracts with the local hairdressers in those townships with large numbers of school children. Of course, I realise that difficulties might be met in obtaining parental consent.

I am however familiar with the Board of Education's circular 1604, 28th August 1942, where so far as the school medical service is concerned the memorandum sets out certain suggested rearrangements in the service "in view of the growing demands of the Forces, coupled with the need of safeguarding the health of young children". In one such suggested rearrangement in paragraph 3 - Working of the Nursing Staff, I note "in many areas trained nurses are still being employed

on the inspection of children's heads for nits and lice and the cleansing of verminous children, which could be equally well carried out after a brief period of training by women without professional qualifications".

This was precisely what had to be carried out at the cleansing stations of the S.E.N.J.H.B. by the engagement of female and male scabies orderlies. I am of opinion that employment for such trained orderlies in the S.M.S. could be found as reinforcements to the school nurses to assist in their inspections for cleanliness and verminous conditions amongst school children to everyone's benefit.

Such would bring about more frequent inspections which seem to be necessary for verminous conditions are admittedly on the increase and in the long run their appointment would save a considerable amount of school nurses' time. Many a time I have been told by school nurses that they had cleaned up certain children before the school holidays for lice, only to find that they were as bad as ever on their resumption of their attendance at school after the holiday. Here again the explanation would be that some other members of the family, probably not school children were infested and by these the school children would presumably become re-infected.

There can be no excuse whatever for continued lousiness in one or more members of a family, and from what I have seen of it in the last year, I cannot resist the conclusion that certain mothers are neglectful of sufficient attention to, and inspection of, their children's hair and when I find certain mothers themselves and their adolescent daughters similarly afflicted, I feel constrained to express my view that they are apathetic indolent and neglectful in permitting the continued existence of such a state of affairs.

Below are set out the various categories into which it has been found convenient to divide the various persons coming to the stations.

Aggregates for No. 2 Area during 1942:-

	Scabies Only.		Scabies & Lice.		Lice Only.		Scabies & Lice not discovered.	
	M.	F.	M.	F.	M.	F.	M.	F.
Over 16 yrs.	200	261	1	64	-	7	41	96
5 - 16 yrs.	334	224	72	204	17	77	81	52
Under 5 yrs.	85	73	15	41	7	6	24	14
	619	558	88	309	24	90	146	162

The above total includes the figures for the Borough, which were for 1942 as follows:-

	Scabies Only.		Scabies & Lice.		Lice Only.		Scabies not discovered.	
	M.	F.	M.	F.	M.	F.	M.	F.
Over 16 yrs.	16	34	-	2	-	1	2	9
5 - 16 yrs.	50	41	-	10	-	7	6	13
Under 5 yrs.	11	9	-	-	-	-	4	-
	77	84	-	12	-	8	12	22

Another class of patient, namely those suffering from infectious disease in the same five districts and admitted to the Isolation Hospital for treatment during a twelvemonth, showed the following amount of lice infestation discovered at the moment of their entrance into the Hospital. The total admissions for that period numbered 145 and of these 51 were found to be verminous.

	No. 2 Area.	Borough of Morpeth.
Over 16 yrs.	8	-
5 - 16 yrs.	36	3
Under 5 yrs.	7	-
	51	3

In the main these patients were young children either pre-school or school.

Verminous conditions amongst young adolescent females ages 14½ to 16 years, engaged in a factory dealing with the packing of a powered food product, were disclosed as follows: out of a score of employees, seven were found to be afflicted with head lice and three with scabies.

This denouement came about very simply by the discovery of a severe infestation with lice in a sister of one of the employees of this factory, who had been admitted to a Hospital for Infectious Diseases suffering from diphtheria. The routine swabbing of the contacts of this patient's household afforded an opportunity to examine the scalp of the sister who was found to be just as severely affected.

These revelations in turn caused the manageress to request an examination of the remainder of the operatives with the above result.

The Public in the first place should understand the public health definition of the terms "vermin" and "verminous" which are as follows

Public Health Act, 1936, Section 90 -

> "vermin," in its application to insects and parasites, includes their eggs (nits), larvae and pupae, and the expression "verminous" shall be construed accordingly."

In the interest of clean children either in schools, clinics and hospitals or elsewhere, as well as the staffs attached thereto, lousiness in the shape of insects and/or eggs should not be tolerated, and I consider that a higher standard of personal cleanliness should be taught and required, to achieve which houses in industrial areas should have ablution facilities with showers or baths with H. & C. water laid on -alternatively the erection of more public baths and wash houses is called for.

The above measures along with the more intensive teaching of personal hygiene in schools coupled with the exhibition of films on Scabies & Lice would, I am sure, go a long way to eradicate these disgusting and preventable afflictions, especially if backed by more stringent action against defaulting parents.

Of course, where co-operation on the part of the parents or guardians was not forth coming, the assistance of the Inspector of the National Society for the Prevention of Cruelty to Children has been invoked, always with the desired effect, and hence perhaps during the year 1942 no prosecutions were undertaken either under the Children & Young Perons Act 1933 or under the Defence Regulations 1939.

In conclusion I should like to emphasise that the above observations and comments are the outcome of our experience with a select group of persons and their "contacts" who were primarily brought to the M.O.H.'s notice on account of the existence of scabies only.

It is indeed very likely that there are those of the remainder of the pre-school and school populations and over sixteens, who, although not suffering from itch, are infested with head lice and the question comes to be how these ambulant reservoirs are to be found and dealt with, for without doubt they will continue to bring about the propagation of the parasite.

TUBERCULOSIS.

New Cases and Mortality during 1942.

Age Periods	New Cases. Resp. M.	New Cases. Resp. F.	New Cases. Non-Resp. M.	New Cases. Non-Resp. F.	Deaths. Resp. M.	Deaths. Resp. F.	Deaths. Non-Resp. M.	Deaths. Non-Resp. F.
0-	-	-	-	-	-	-	-	-
1-	-	-	-	-	-	-	-	-
5-	-	1	-	-	-	-	-	-
15-	-	1	-	-	1	2	-	-
25-	-	-	-	1	-	-	-	-
35-	1	-	-	-	-	-	-	-
45-	-	-	-	1	-	-	-	1
55-	1	-	-	-	1	-	-	-
65 & upwards.	-	-	-	-	-	-	-	-
	2	2	-	2	2	2	-	1

There were 2 non-notified deaths from Tuberculosis.
Total deaths from Tuberculosis - 5.

Public Health (Tuberculosis) Regulation 1942, wherein it is notified that the Minister of Labour & National Service require certain information about women with a tuberculous history in an additional age group being called before medical boards prior to enlistment in the W.A. Forces.

CANCER MORTALITY.

	Males. 20	30	40	45	55	65	Total.	Females. 20	30	40	45	55	65	Total.
Stomach	-	-	-	1	-	-	1	-	-	-	-	-	-	-
Oesophagus	-	-	-	-	-	1	1	-	-	-	-	-	-	-
Pancreas	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Breast	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Colon	-	-	-	-	2	-	2	-	-	-	-	-	1	1
Rectum	-	-	-	-	1	-	1	-	-	-	-	-	-	-
Cervix uteri	-	-	-	-	-	-	-	-	-	-	-	1	1	2
Kidney	-	-	-	-	-	1	1	-	-	-	-	-	-	-
Lung	-	-	-	1	-	-	1	-	-	-	-	-	-	-
	-	-	-	2	3	2	7	-	-	-	-	1	5	6

Birth-rates, Civilian Death-rates, Analysis of Mortality, Maternal Mortality and Case rates for certain Infectious diseases in the Year 1942. Provisional figures based on Weekly and Quarterly Returns.

	England and Wales.	126 C.Bs and Great Towns including London	148 Smaller Towns Resident Pop. 25,000 - 50,000 at 1931 Census	London Adm. County
* Rates per 1,000 Civilian Population:-				
Live Births	15.8 ≠	17.3	18.4	14.0
Still "	0.54 ≠	0.66	0.62	0.48
Deaths:-				
All Causes	11.6 ≠	13.3	12.1	13.9
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00
Scarlet Fever	0.00	0.00	0.00	0.00
Whooping Cough	0.02	0.03	0.02	0.04
Diphtheria	0.05	0.06	0.04	0.02
Influenza	0.09	0.09	0.10	0.07
Smallpox	-	-	-	-
Measles	0.01	0.02	0.01	0.01
Rates per 1,000 Live Births:-				
Deaths under 1 Year of Age	49	59	46	60
Deaths from Diarrhoea & Enteritis under 2 years of Age	5.2	7.5	4.8	8.6
* A dash (-) signifies that there were no deaths				
≠ These rates are those published in the Quarterly Return.				
* Rates per 1,000 Civilian Population:-				
Notifications:-				
Typhoid fever	0.01	0.01	0.01	0.02
Paratyphoid fever	0.01	0.01	0.01	0.01
Cerebro Spinal Fever	0.14	0.17	0.12	0.15
Scarlet Fever	2.19	2.49	2.34	1.86
Whooping Cough	1.73	1.97	1.58	2.72
Diphtheria	1.05	1.35	0.91	0.76
Erysipelas	0.30	0.36	0.26	0.43
Smallpox	0.00	0.00	-	0.00
Measles	7.46	9.27	7.39	8.62
Pneumonia	1.07	1.30	0.94	0.94
Rates per 1,000 Total Births (Live and Still):-				
Maternal Mortality:- (Excluding Abortion)				
Puerperal Infection (No. 147)	0.42)			
Others	1.59)	NOT AVAILABLE		
Total	2.01)			
Notifications:-				
Puerperal Fever)) " Pyrexia)	12.61	15.94	10.80	(3.10 ((17.69 ≠

≠ Including puerperal fever.