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NEWCASTLE-UNDER-LYME RURAL DISTRICT COUNCIL

# Annual Report

OF THE

Medical Officer of Health (W. F. YOUNG, M.B., Ch.B., D.P.H.)

FOR THE YEAR 1944

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88888888888888888888888888888 NEWCASTLE-UNDER-LYME RURAL DISTRICT COUNCIL Annual Report OF THE Medical Officer of Health (W. F. YOUNG, M.B., Ch.B., D.P.H.) FOR THE YEAR 1944 8888 888888 888 Audley: John Dodd, Printer

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# ANNUAL REPORT

OF THE

### MEDICAL OFFICER OF HEALTH

(W. F. YOUNG, M.B., Ch.B., D.P.H.)

for the Year 1944.

The Chairman and Members of the Newcastle-under-Lyme Rural District Council.

GENTLEMEN,

Ministry of Health Circular No. 48/45 of March 19th, 1945, requires that Annual Reports of Medical Officers of Health should be prepared on similar lines to those laid down for the years 1939-43, viz.: that they should be confined to essential matters which had affected the Public Health during the year, and should pay special attention to such of these as arose from or were connected with the War.

For a considerable time, however, the Council's Public Health Department has been engaged on work in connection with postwar reconstruction, and since the surrender of Germany in May, this work has been speeded-up. It seems desirable that progress should be referred to in this Report, and I have therefore dealt with such subjects as water supplies, sewerage, sewage disposal, and housing in some detail.

My aim has been to present such information of conditions in the District at the end of the War in Europe as may perhaps be of value as a basis of comparison in future years.

The restrictions previously imposed on the publication of population figures, etc., have now been lifted; and I have therefore included certain vital statistics, rates of incidence of infectious diseases, etc., together with comparisons with those for England and Wales as a whole.

I may perhaps take this opportunity of thanking the Chairman and Members of the Council for their encouragement and support during the year.

I am, Gentlemen,

Your obedient servant,

W. F. YOUNG,

Medical Officer of Health.

#### SECTION A.

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area: 40,015 acres.

Rateable Value: £57,435.

Sum represented by a penny rate: £226.

Registrar-General's estimates of resident population: 16,190.

Number of inhabited houses as at 1st April, 1945: 4,606.

Table I Shows the distribution of these houses by parishes.

#### TABLE I.

	Paris	sh		P	arish	
Ashley			325	Madeley		 758
Audley			2315	Maer		 169
Balterley				Mucclesto	ne	 125
Betley			190	Tyrley		 231
Chorlton			120	Whitmore	e	 166
Keele			145			

#### SOCIAL CONDITIONS.

These have been detailed in previous war-time reports and there is no change to record.

#### EVACUEES.

A considerable number came to the District at mid-summer from the London area. Their condition generally was satisfactory. Difficulties in connection with billeting were smoothly and efficiently dealt with. By the end of the year the number remaining was small.

The relaxation of enemy air-activity during the year lifted a great burden of anxiety. It is to be noted with much relief that although high-explosive and incendiary bombs fell in the District earlier in the War, no casualties were caused.

TABLE 2.

# VITAL STATISTICS.

			Newcastle-u-Lyme R.D.	England and Wales
LIVE BIRTHS:			tes per 1,000 of the mated resident Civil- ian Population	Rates per 1,000 Total Population
	M	F		2 opiiiiiiiiiii
Total 304			18.8	17.6
Legitimate 284			17.5	- *
Illegitimate 20			1.2	_ *
inegrimate 20	0	12	1.2	
STILLBIRTHS:	M	F		
Total 8	4	4	0.49	0.50
Legitimate 6		3	0.37	_ *
Illegitimate 2	I	I	1.12	*
DEATHS:				
		0-		6
Total 184	99	05	11.4	11.6
		Rat	es per 1,000 Related	d Live Births.
			Newcastle-u-Lyme	
DEATHS UNDER ON	Ξ		R.D.	and Wales
YEAR OF AGE:	3.5	Т.		
	M	F		
Total 13	7	6	43	46
Legitimate 12	7	5	42	*
Illegitimate I	-	I	50	*
	*	Rates n	ot available.	

	Rates per 1,000 Live Births		
	New castle-u-Lyme $R.D.$	England and Wales	
Deaths from Diarrhoea and Enteritis			
under two years of age	3.3	4.8	

The general death-rate of 11.4 is the crude rate. No Comparability Factor is available for 1944, and the correcteddeath-rate cannot therefore be calculated. The corresponding rate in 1938 was 12.6.

It may be seen from the above Table that while the birth-rate in the District during the year was 1.2 per 1,000 population higher than that for England and Wales as a whole, the deathrate was 0.2 per 1,000 lower.

Similarly, the infantile mortality rate was 3 per 1,000 total live births lower than that for England and Wales. The figure of 43 is very satisfactory. Corresponding figures for the District and for England and Wales in 1938 were 53 and 49.

#### SECTION B.

# GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

There is no change to record in the general provision detailed in previous reports, and during the year there was no change in personnel.

#### SECTION C.

#### SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

In April, 1944, the Government issued a White Paper on "A National Water Policy", and an Act implementing the proposals therein became law in August, 1944. The White Paper and the Act together set up an important landmark in the history of water supplies and sewage disposal in this country.

Shortly after the issue of the White Paper, the Council requested that I should, in conjunction with the Chief Sanitary Inspector, prepare a statement on the subject. This statement summarised such proposals in the White Paper as are applicable to this District, and in addition, contained particulars of water supplies and sewage disposal by Parishes.

In view of the importance of the subject, it seems desirable that a record of the state of affairs in the District at about the time of the passing of the Rural Water Supplies and Sewerage Act of 1944 should be available, and I am therefore reproducing the statement in full.

#### NEWCASTLE-UNDER-LYME RURAL DISTRICT COUNCIL.

The Chairman and Members of the Newcastle-under-Lyme Rural District Council.

Gentlemen,

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

- I. In accordance with your request that I should, in conjunction with the Sanitary Inspector, prepare a statement, I beg to report as follows.
- 2. The Act recently passed by Parliament provides that Exchequer grants totalling £15,000,000 may be made to Local Authorities to aid in the provision of water supplies, whether a new supply or an improvement on an existing supply; and in providing for the sewerage and sewage disposal necessary in consequence of the provision, whether in the past or future, of a piped water supply.

Expenses in the provision of water supplies and sewerage are to be charged to District general rates instead of to special Parish rates. Provision is also to be made for contributions by County Councils to grant-aided schemes.

- 3. In consequence of the Council's far-sighted policy in connection with the provision of piped supplies of water the District as a whole is relatively in a highly satisfactory position, a supply having been made available to the major part at least of each of the eleven Parishes. For a variety of reasons however, the position with regard to the disposal of the increased amount of sewage resulting from the provision of piped water is not so fortunate, and here the Government's proposals are to be welcomed for their potential assistance in the solution of a number of difficult problems.
- 4. The Government's White Paper on a National Water policy (published in April of this year) stated that as result of work done under the Act of 1934 the percentage of persons living in

Rural Districts, and not served by a piped supply, was reduced to about 30 per cent of the population of these Districts. Recent figures show that the percentage of population in this District not so served is about 10 per cent. \* The White Paper anticipated that under the financial provisions of the present Act the percentage of persons living in Rural Districts, and not served by a piped supply, would be reduced to very small proportions.

It is proposed that piped water should be made available to all "sizeable groups" of houses, and it is suggested that the extension of mains to such groups would often enable a supply to be given to farms and farm-buildings on the route, a matter of great importance from the point of view of clean milk-production, etc. In this connection it is to be noted with satisfaction that the Ministry of Agriculture and Fisheries is proposing legislation under which the scheme for the supply of piped water to agricultural land, with financial assistance from the Exchequer, will be extended to include supplies to isolated farms and cottages. Care will be necessary to avoid overlapping between this plan and that of the Ministry of Health. The number of sizeable groups of houses in the District without a piped supply of water is small, but on the other hand there is a number of outlying agricultural and domestic premises with no satisfactory sources of supply, piped or other.

- \* Percentages by Parishes are given in Table 4, page 16
- With the assistance of the Senior Sanitary Inspector I have prepared the summary which appears at the end of this Report. This summary can of course deal only with existing conditions, and the consideration of a number of difficult questions must be deferred until further information is forthcoming. This would include for example, water supplies and sewerage, etc., in areas where new building will be undertaken under planning schemes and in connection with the housing of population to be displaced from Clearance Areas, overcrowded premises, and as a result of the demolition of individual unfit houses. In the more populous parts of the District the question of a potential supply for Industry will have to be taken into account, and in this connection it will very probably be found that it will be necessary to instal watersoftening plant. Further information will also be necessary with regard to the position and size of new schools. Planning under these headings will of course have a bearing on the important question of the provision of piped supplies of water to farms and farm buildings as mentioned in paragraph 4.

The White Paper referred to above emphasises the great importance of adequate supplies of piped water for agricultural purposes, and states that in the past production has in many areas been seriously hampered by lack of water. It forecasts that this will become even more apparent as the success of modern scientific methods of alternate husbandry, and the improvement in the quality, as well as the quantity, of the milk supply depends largely on adequate supplies of water on the farms. The subject of the material affection of the reduction of disease in farm animals by lack of water is also mentioned. It is unnecessary for me to emphasise the importance of these considerations in a District such as this.

- 6. It will have to be borne in mind that the potential requirements of new industries and of agriculture will have to be carefully weighed if the unavoidable increase in domestic supplies is not to be prejudiced. As standards of living improve the quantity of water used on domestic premises will increase considerably—indoor sanitation is said nearly to double the consumption of water, while the greater use of baths and the highly desirable provision of constant hot water all add to the demand. It may be added, however, that the White Paper asserts that there is in this country ample water for all needs, and that the problem is not one of total resources, but of organisation and distribution.
- 7. The provision of adequate supplies of pure water, and the hardly less important subject of its satisfactory disposal after use, have their place in the great mosaic of post-war planning, and the opportunity now seems to offer for action to be taken which cannot fail to have a marked influence on a widely-spread improvement in general health and well-being.

I am, Gentlemen,
Your obedient Servant,
(Sgd.) W. F. YOUNG,
Medical Officer of Health.

29th August, 1944.

#### ASHLEY.

WATER—The greater part of the Parish has mains water, but there are so far few W.C.s and baths.

Sewerage, Etc.—A scheme estimated to cost about £14,000 was under consideration by the Council at the outbreak of the War.

#### AUDLEY.

WATER—Mains water is available in all the populous parts of the Parish. Supplies are at present adequate.

Sewerage, Etc.—There is still no adequate provision in a considerable area, some of which is semi-urban, viz.: Alsager's Bank, part of Halmerend, Miles Green, Wereton, Scot Hay and Wood Lane. Night-soil is collected in these parts, and sewage is discharged into open ditches. In July, the Council's Consulting Engineer presented a revised scheme for sewerage and sewage disposal in these areas at a cost of £58,500. This scheme took into consideration a proposed housing site in the locality of Chester Road, Audley, and another possible site at Alsager's Bank. It also provided for the possible increase of population in this area. In August, the Council approved this revised Scheme, and application was to be made to the Ministry of Health for formal consent to the borrowing of the money. At Dunkirk, near the Kidsgrove boundary, there is need for improved arrangements.

#### BETLEY.

WATER—Mains water is available in a large proportion of this Parish.

Sewerage, Etc.—Scheme necessary to deal with Betley Village, Betley Common, etc., and Wrinehill.

#### CHORLTON.

Water—Mains water is available in a considerable proportion of the Parish.

SEWERAGE, ETC.—At Baldwin's Gate there is considerable nuisance which it is impossible to remedy without a scheme. A scheme for this area, to include also Hill Chorlton and Chorlton Moss at a cost of about £7,500 was considered by the Council just before the outbreak of the War.

#### KEELE.

WATER—The more populous part of the Parish is supplied by mains.

Sewerage, Etc.—Keele Village is in need of a scheme of sewerage and sewage disposal.

#### MADELEY.

WATER—As for Keele Parish. Eight houses at Bowsey Wood are in need of a piped supply.

Sewerage, Etc.—A scheme for the re-conditioning of the disposal plant at Madeley was prepared in 1935 at an estimated cost of £4,000. Provision for the drainage of Leycett (about 100 houses) was included. Night soil has to be collected here. There is some need for improved arrangements at Barr Hill, Wateringtrough Bank, and Onneley.

#### MAER.

WATER—Mains supplies are available in parts of the Parish. A private supply is being purchased by the Council at Aston. Two other main supplies are available here.

Sewerage, Etc.—A scheme will be necessary if development takes place. There is at present need for better arrangements at Weymouth.

#### MUCCLESTONE.

WATER—A main supply is available in most parts of the Parish. SEWERAGE, Etc.—Improved arrangements are necessary at Knighton Village.

#### TYRLEY.

WATER—The more populous parts of the Parish are supplied by one private and one public main. A supply is desirable at Oakley Folly Council houses. The supply to eight houses at Tyrley Wharf (from a spring) is sometimes intermittent. There is no main near. A supply is needed at the Four Alls.

Sewerage, Etc.—Hales Village sewerage is adequately dealt with by septic tanks, etc. Sandy Lane Council houses have a mains water supply but sewage disposal is inadequate and serious nuisance results. A scheme for sewage disposal is in course of preparation.

#### WHITMORE.

Water—Whitmore Village, Acton, and part of Baldwin's Gate are supplied by private mains. The Village supply is occasionally intermittent, and its quality variable. The chief supply at Butterton Village is a spout at the road-side from a spring. Recent analyses have been satisfactory but there is an urgent need for a mains supply.

Sewerage, Etc.—The majority of the houses are satisfactorily dealt with by tanks. Serious nuisance occurs at Baldwin's Gate. This question is dealt with under Chorlton Parish.

The statement was duly considered by the Council's water and Public Health Gommittees on September 11th. A few suggestions, including a recommendation with regard to the taking-over of privately-owned piped supplies in Whitmore Parish, were made to the Council by the Water Committee.

The Public Health Committee made the following recommendations with regard to sewage and sewerage disposal:—

#### ASHLEY PARISH.

That a consulting engineer be instructed to revise a scheme prepared by him some years ago, with a view to its submission to the Ministry of Health.

#### AUDLEY PARISH.

Proposed action is referred to in the schedule to my statement.

#### BETLEY PARISH.

That a consulting engineer should be approached with regard to the preparation of a scheme.

#### CHORLTON PARISH.

That a scheme for Baldwin's Gate, etc., prepared some years ago, should be submitted to the Ministry of Health.

### KEELE PARISH.,

Action to be deferred for further consideration.

#### MADELEY PARISH.

That it should be recommended to the Council that an existing scheme (including the reconstruction of the disposal works at Madeley) should be revised, having regard to town planning proposals, and submitted to the Ministry of Health.

#### MUCCLESTONE PARISH.

That a consulting engineer should be asked to prepare a scheme for Knighton village.

#### TYRLEY PARISH.

Proposed action is referred to in the schedule to my statement.

#### WHITMORE PARISH.

The portion of Baldwin's Gate lying in this Parish is included under Chorlton Parish in the schedule.

All the above recommendations were duly adopted by the Council at its meeting on September 18th.

Table 3.

Summary of Results of Analysis of Water
Supplies During 1944.

	Bacter	iological:	Cher	Chemical:		
	Satis- factory	Unsatis- factory		Unsatis- factory		
PUBLIC MAINS:						
Market Drayton Water Co.	I		-	-		
Audley	4	-	4	-		
Staffs. Potteries Water						
Board	I	-	I			
Bearstone	3	_	3	_		
L.M.S. (Baldwin's Gate)	I	_	I	-		
	10	_	9			
Action to the second						
PRIVATE MAINS:						
Aston Area	2	4	4	I		
Hales Estate	2	I	3	_		
Keele Hall	I	_	I	-		
Maer Estate	-	-	-	-		
Whitmore and Acton	3	I	3	I		
	8	6	II	2		

OTHER PRIV	VATE	SUPPLI	ES				
(By Parishes)			Bacteri	ological:	Chemical:		
				Satis-	Unsatis-	Satis-	Unsatis-
				factory	factory	factory	factory
Ashley				I	I		I
Audley					_	-2	
Balterley			***		- 1	-	I
Betley				3	10-	I	2
Chorlton				-	_	-	
Keele				I	_	I	-
Madeley				4	5	8	2 .
Maer				I	· I	I	I
Mucclestone				-	_	_	T Control
Tyrley				I	I	-	_
Whitmore				2	_	2	-
				13	8	13	7
TOTAL NUM ANALYSES.	BERS	OF					
Public Main	S			10		9	_
Private Mai				8	6	II	2
Other Priva				13	8	13	7
		11	-				
				31	14	33	9

It will be noted that all the unsatisfactory analyses are those of waters taken from private mains of other private supplies, e.g., pumps, etc.

The question of the acquisition by the Council of two of the more important private main supplies was under consideration during the year.

The tenants of houses deriving supplies from unsatisfactory private sources were advised as to the precautions to be taken. Mains supplies were available near a number of these houses, and the question of connections was under consideration at the end of the year.

With regard to the above results of analyses of public mains water, the samples submitted were those of water in supply. Chlorination plant is installed at the Council's water-works at Audley, and arrangements have been made for pre-treatment samples to be submitted in future, as well as samples of the water in supply.

Of the two other larger public undertakings supplying water to the District, I am informed that samples of the Staffordshire Potteries Water Board supplies are submitted for analysis before as well as after treatment. The Bearstone supply (from Nantwich Rural District) is not subjected to chlorination.

Supplies generally throughout the District during the year were adequate in quantity.

Chemical analysis shows no evidence of plumbo-solvent action.

Action taken in respect of contamination is referred to on page 15.

Approximately twenty houses only are supplied with mains water through stand-pipes.

Table 4 shows estimated percentages by Parishes of domestic premises supplied (A) from publicly- and privately-owned mains, and (B) from publicly-owned mains only.

TABLE 4.

Parish				(A)	(B)
Ashley				83	83
Audley				99	99
Balterley				84	84
Betley				92	91
Chorlton				90	88
Keele				95	95
Madeley _				93	92
Maer				80	49
Mucclestone				57	57
Tyrley *				66	26
Whitmore				80	0
Total estimat	ted pr	ecentag	ges	91	86

<sup>\*</sup> The Cheshire Joint Sanatorium, with a total population of about 400, is situated at Loggerheads in this Parish. The water

supply is derived from two deep wells, and samples are submitted for analysis to the Sanatorium's Bacteriological Department and to public analysts engaged by the Cheshire County Council. Results of analysis have always been satisfactory. The supply is not subjected to chlorination.

With regard to the percentages of *population* supplied, no accurate figures are available. They are likely, however, to approximate to those given for premises.

Of the total number of houses in the District (4,606) it is estimated that 1,140 have baths fitted.

The estimates given above were supplied through the courtesy of Mr. F. W. Ramm, Valuation Officer to the Council.

DRAINAGE AND SEWERAGE.

These subjects are dealt with in the statement reproduced on pages 8-14.

With regard to Public Cleansing, Mr. Scawn, Chief Sanitary Inspector, reports as follows:—

"Difficulties were experienced in obtaining labour to carry out the routine emptying of privy lavatories. At Madeley, one of the two men engaged on this work had to join the forces, although the impossibility of finding a substitute was stressed at the time. The actual contractor carried on the work under great difficulty with temporary assistance whenever available.

"In other parts of the District labour difficulties were also experienced, apparently due to other more amenable work being available to those wanting employment."

These seems to be a growing need for the extension of the public collection of house-refuse service to certain parts of the Area, for example, to Ashley Village and Ashley Heath, parts of Mucclestone Parish, including Knighton Village, and to parts of Tyrley Parish.

#### SECTION D.

#### HOUSING.

Great difficulty continued to be experienced in dealing with the increasing dilapidation of the older properties. Essential repairs were carried out in a number of cases.

A temporary increase in the number of cases of over-crowding took place in July, when as a result of V-bombing there was an incursion of families and individual children from the London area.

Six houses for agricultural workers, built under the joint scheme of the Ministries of Health and Agriculture, were occupied at weekly rentals of ten shillings, plus rates, in the first half of the year. Two of these were as Aston, two at Chapel Chorlton, and two at Madeley.

#### TOWN AND COUNTRY PLANNING.

The building programme referred to in my Annual Report for 1943 received further consideration during the year.

In October the Council set up a Town Planning and Housing Committee. At its first meeting, and again in February, 1945, preliminary proposals were detailed by the Chief Planning Assistant to the County Surveyor. These were duly approved.

It seems appropriate that mention should be made here of the third report on rural housing prepared by a sub-committee of the Central Housing Advisory Committee, and published in May, 1944.

This document contains a wealth of useful information together with carefully considered suggestions, and it should be of great value to Rural District Councils in connection with their post-war housing activities. It emphasises the importance of the improvement of rural and particularly of agricultural housing, and makes recommendations among which are the formation of Joint County Committees, and the carrying out of comprehensive surveys of housing conditions in rural districts. It is suggested that the surveys should be completed as soon as possible, say within a period of twelve months after the termination of the European war. These surveys should form the basis of a long-term

programme of repair; reconditioning; the provision of new houses for general needs; the relief of overcrowding; and the replacement of houses to be demolished; all to be carried out within a period of years to be prescribed by the Minister of Health. Ministry of Health Circular 64/44 of May 24th, 1944, accepted the recommendations made in the Report, and laid down the classification to be adopted in the survey.

In January, 1945, I made a report to the Council referring to housing conditions generally, action taken in the past in connection with the Clearance Areas, etc., and to the state of the survey started towards the end of 1944. Proposals for the speeding-up of this were also specified, and these were considered further in a report I submitted in April, 1945, which dealt also with the Minister's suggestions with regard to the facilitation of the survey referred to in Circular 67/45 of April 10th, 1945. Copies of these reports were submitted to the Minister of Health and to the County Council.

Up to the present time (July, 1945), a proportion of my suggestions have been agreed to and the remainder are still under consideration.

The total number of houses inspected under the survey up to the end of July, 1945, was 443.

Table 5 details the numbers inspected to date according to the categories suggested by the Ministry of Health.

#### TABLE 5.

C

Ca	teg	ory	
	I.	Satisfactory in all respects	178
	2.	Minor defects	14
	3.	Requiring repair, structural alterations or im-	
		provement	118
	4.	Appropriate for reconditioning under the Housing (Rural Workers) Acts	2
	5.	Unfit for habitation and beyond repair at	
		reasonable expense	92
	6.	Houses to be classified on completion of survey	39
			443
			-

#### SECTION E.

#### INSPECTION AND SUPERVISION OF FOOD.

Mr. L. Scawn, Chief Sanitary Inspector, reports as follows :-

#### "FOOD.

All slaughtering and inspections of carcases is carried out at a Central Slaughtering House outside the District, with the exception of pigs killed under licence at domestic premises.

the year. These premises include butchers' shops, grocers' stores and bakeries, and unsatisfactory conditions were found to exist in one case only.

Foodstuffs condemend during the year :-

24 lb. Cheese 20 lb. Fish

50 lb. Butter and Margarine 143 oz. Tinned Milk

31 lb. Tinned Meat 120 lb. Tinned Jam.

67 pigs killed under licence at domestic premises were inspected during the year. Owners were recommended to destroy any meat considered to be unfit for human consumption.

#### MILK.

The inspection of farm premises continued during the year as far as was possible. A few premises were found which were below standard in regard to cleanliness, but the great majority were in very good condition under the circumstances.

In one case it was found necessary to withdraw a licence. This action was taken after a number of poor samples of milk had been obtained, and owing to the very unsatisfactory condition of the shippons."

#### SECTION F.

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

The following Table shows the numbers of cases notified during the last five years together with the annual average numbers during this period.

TABLE 6.

(C	(Civilians only).					
	1940	1941	1942	1943	1944	for 5 years
Scarlet Fever	24	6	29	13	20	18.4
Diphtheria	2	3	12	7	3	5.4
Whooping Cough *	19	52	69	159	19	63.6
Measles *	73	345	152	192	144	181.2
Ac. Poliomyelitis	_	I	I	1000	I	0.6
Ac. Polioencephalitis	_		_	-	_	_
Typhoid Fever	_	_	_	_	_	
Paratyphoid Fevers	-	3	_	I	_	0.8
Acute Pneumonia†	26	21	3	18	13	16.2
Dysentery	_	_	_	_	_	_
Cerebrospinal Fever	3		2	2	_	1.4
Ac. Encephalitis Lethargica				_		_
Erysipelas	9	2	4	8	14	7.4
Smallpox	-	-	_	_	_	_
Puerperal Pyrexia		_	2	I	5	1.6
Ophthalmia Neonatorum	4	I	5	2	I	2.6

<sup>\*</sup> Became notifiable in October, 1939.

<sup>†</sup> Notifiable cases only, viz.: primary or influenzal.

## TABLE 7.

DEATHS FROM INFECTIOUS DISEASES DURING 1944. (Civilians only).

(A)	NOTIFIABLE	CASES.
-----	------------	--------

Measles			I	Pneumonia	(all	forms)	 10
Meningcoccal	Menin	gitis	I				

### (B) NON-NOTIFIABLE CASES.

Influenza	 	I	Diarrhoea (children under	
			two years of age)	I

#### TABLE 8.

Comparison of the Rates of Incidence in the District of Certain Infectious Diseases during 1944 with those for England and Wales.

	(Ra	England and Wales ates per 1,000	Newcastle-u-Lyme Rural District Civilian Population)
NOTIFICATIONS:			Mary Mary
Typhoid Fever		0.01	0.00
Paratyphoid Fevers		0.01	0.00
Cerebrospinal Fever		0.05	0.00
Scarlet Fever		2.40	1.24
Whooping Cough		2.49	1.17
Diphtheria		0.58	0.19
Erysipelas		0.29	0.86
Smallpox		0.00	0.00
Measles		4.16	8.89
Pneumonia		0.97	0.80
Puerperal Fever and Pyre	xia*	10.34	16.03

<sup>\*</sup> Rates per 1,000 total births (live and still)

#### TABLE 9.

Comparison of Death-Rates from Certain Infectious Diseases during 1944.

England Newcastle-u-Lyme and Wales Rural District

(Rates per 1,000 Civilian Population)

#### DEATHS.

Typhoid a	nd Pa	raty	ohoid		
Fevers				.0.00	0.00
Scarlet Fev	er			0.00	0.00
Whooping	Cough			0.03	0.00
Diphtheria				0.02	0.00
Influenza				0.12	0.06
Smallpox				0.00	0.00
Measles				0.01	0.06

#### DIPHTHERIA PROPHYLAXIS.

Satisfactory progress continued to be made during the year with the immunisation campaign, and protective inoculation was offered for approximately all un-immunised children from the ages of ten months to fourteen years.

Table 10 gives some particulars with regard to immunisation in 1942, 1943 and 1944.

#### TABLE 10.

(A) NUMBERS OF CHILDREN WHO COMPLETED COURSES OF IMMUNISATION IN 1942, 1943 AND 1944.

	One to Five years of age		Five to Fourteen years of age	Total
1942	 275		257	532
1943	 379		399	778
1944	239	.,	150	389
	893		806	1699

(B) ESTIMATED PERCENTAGES OF CHILDREN WHO HAD COMPLETED COURSES OF IMMUNISATION BY THE ENDS OF THE YEARS 1942, 1943 and 1944.

	One to Five	Five to Fourteen
encone;	years of age	years of age
1942	 70%	 59%
1943	 90%	 80%
1944	 84%	 90%

The estimated total percentage of children of one to fourteen years of age immunised as at the end of 1944 was 88%

The figures for the "under fives" group given in Table 10 are based on the numbers of children *eligible* for immunisation, (viz.: aged *one* to five years,) and differ therefore from percentages supplied to the Ministry of Health, which requires percentages to be based on ages 0-5 years.

I am glad to be able to report that during the year no cases of diphtheria among persons of less than fifteen years were notified, and no deaths in this group were registered.

It may be of interest to compare the numbers of cases and deaths from diphtheria among children of ages 0-14 years during the periods 1935-39 and 1940-44, *i.e.*, before and after the commencement of the present immunisation campaign.

Particulars of numbers of cases notified and of deaths registered among children of this age-group during these periods are given in Table 11.

m.		
IA	BLE	TI.

	No. of cases of	
	Diphtheria among	Deaths among
Year	Children	Children
1935	 II	I
1936	 8	_
1937	4	OCCUPANT TO SECURE
1938	 II	I
1939	 . I	I
	25	
	35	3
1940	 I	- 190 H
1941	 I	
1942	 8	I
1943	 3	_
1944	 Where -	_
	13	I

(The fatal case in 1942 was that of a child of three years who had not been immunised).

Although the above series are too short to have real statistical value, it is possible nevertheless that there may be some correlation between the fall in the incidence of the disease and the commencement of immunisation on a comparatively large scle.

It is satisfactory to note that the present percentages estimated to have had courses of immunisation are higher than the 75% considered to be adequate if epidemics are to be avoided. My aim has not been so much the prevention of epidemics as the protection of every child.

The percentages of refusals, evasions, etc., as at the end of the year were as follows:—I-5 Group, 3.5%; 5-I4 Group, 3.7%.

With regard to children of school age, I may add that, by the end of the year, of the twenty schools in the District, ten showed percentages of children immunised of 95 and over, (one school showed 100%), four between 90 and 95, and five between 80 and 90. Only one school, a small one, showed under 80% (75%).

#### SCABIES ORDER, 1941.

Use continued to be made of such measures as were available with regard to the ascertainment of cases. The co-operation of general practitioners, head teachers of elementary schools, and of health visitors and district nurses was of great value.

Towards the end of the year an increasing number of cases came to notice.

Work at the Treatment Centre at Raven's Lane continued to proceed smoothly and efficiently. A proportion of cases were cared for by their own doctors, and treatment at the Centre was in the main restricted to cases in which attention at home was unlikely to be effective, e.g., in severe cases and where whole families were involved. Civil Defence vehicles continued to be used for the transport of cases living at a distance, but the proportion of these was small.

The application used was benzyl benzoate emulsion, and the great majority of cases seemed to have been cured after either one or two treatments.

Tables 12 and 13 give particulars of the numbers of cases attending the Treatment Centre.

TABLE 12.
SCABIES TREATMENT CENTRE.

# Quarterly Attendances in 1944.

Quarter		Adults		School Children		Children under Five		Totals	
		New	Old	New	Old	New	Old		
First		 9	9	12	12	I	I	40	
Second		 2	2	6	5	5	5	25	
Third		 2	_	2	_	I	_	5	
Fourth		 14	4	16	25	7	10	76	
		23	15	36	42	14	16	146	

Total number of Cases dealt with during the year	 72
Average number of attendances per case	 2.0
Number of recurrences	 3
Number of Sessions held during the year	 30

## TABLE 13.

# TOTAL NUMBERS OF ATTENDANCES SINCE THE CENTRE WAS OPENED (July, 1942).

			ool	Child		
Adu New		Chile New		under New		Totals
98	97	128	161	25	28	537

Total number of Cases dealt with since opening	ıg	249
Average number of attendances per case		2.2
Total number of sessions held since opening		81

#### TUBERCULOSIS.

Table 14.

New Cases and Mortality during 1944.

				1	New cas	ses	Deaths			
			Respiratory		Non- Respiratory Males Females		Respiratory Males Females		Non- Respiratory Males Females	
Age Periods			Males	Females						
0										
I										
5					2	I				
15			2				2			
25			2	I		I				
35			2							
45			I	I						
55 65 a	nd	***	I					I		
upwa									•••	
To	TALS		8	2	2	2	2	I		

The numbers of new cases notified and coming to knowledge otherwise than by notification and the numbers of deaths during the last five years are shown in Table 15.

TABLE 15.

NOTIFICATIONS, ETC	D.	1940	1941	1942	1943	1944
Pulmonary Non-Pulmonary		18 7	9 6	4 6	13	10
DEATHS.						
Pulmonary		6	5	3	6	3
Non-Pulmonary		I	0	2	2	0

The possible increase in the number of pulmonary cases as a result of war conditions was referred to in my Annual Report for 1943. It is of interest to note in this connection that the number of new pulmonary cases (10) coming to knowledge in 1944 was 0.9 less than the average number for the last ten years, and that the number of deaths of pulmonary cases during the year (3), was 1.2 less than the average number during the same period.

The subjects of the examination of suspected cases and of contacts at the Dispensary, and of the Allowances Scheme, were dealt with in my Report for 1943, and there is no change to record.

TABLE 16.

CAUSES OF DEATH

IN NEWCASTLE-UNDER-LYME RURAL DISTRICT IN 1944.

				,,,
				Death Rates per 1,000 Civilian
	Lavaged groundingst globaling	M	F	Population
	All Causes	99	85	11.4
I.	Typhoid and para-typhoid fevers	0	0	0.00
2.	Cerebro-Spinal Fever	0	I	0.06
3.	Scarlet Fever	0	0	0.00
4.	Whooping Cough	0	0	0.00
5.	Diphtheria	0	0	0.00
6.	Tuberculosis of Respiratory			
	System	2	I	0.19
7.	Other forms of Tuberculosis	0	0	0.00
8.	Syphilitic Diseases	0	0	0.00
9.	Influenza	I	0	0.06
10.	Measles	I	0	0.06
II.	Acute polio-myelitis and polio- encephalitis	0	0	0.00
12.	Acute infectious encephalitis	0	0	0.00
	Cancer of mouth and oesoph-	U	0	0.00
13.	agus (M) and uterus (F)	I	5	0.37
14.	Cancer of Stomach and Duo-			
	denum	4	I	0.31
15.	Cancer of Breast	_	2	0.12
16.	Cancer of all other sites	. 5	7	0.74
17.	Diabetes	I	2	0.19
18.	Intercranial vascular lesions	6	7	0.80
19.	Heart Disease	25	21	2.84
20.	Other diseases of the circu-			
	latory system	4	2	0.37
21.	Bronchitis	5	0	0.31
22.	Pneumonia	5	5	0.62
23.	Other respiratory diseases	I	0	0.06

					Death Rates per
					1,000 Civilian
			M	F	Population
24.	Ulcer of Stomach and Duc	0-			
	denum		0	I	0.06
25.	Diarrhoea under two years .		I	0	0.06
26.	Appendicitis		0	0	0.00
27.	Other digestive diseases .		2	0	0.12
28.	Nephritis		3	8	0.68
29.	Puerperal and post-abortiv	re			
			-	0	0.00 *
30.	Other maternal causes .		-	I	3.21 *
31.	Premature Birth		2	2	0.25
32.	Congenital malnutrition, birt	h			
	injuries, infantile diseases		2	2	0.25
33.	Suicide		3	0	0.19
34.	Road traffic accidents .		I	I	0.12
35.	Other violent causes		12	4	0.99
36.	All other causes		12	12	1.48

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