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North Riding of Yorkshire County Council.

ANNUAL REPORT
OF THE
COUNTY MEDICAL OFFICER
OF HEALTH.

1941.

NORTH RIDING OF YORKSHIRE COUNTY COUNCIL.

ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER
OF HEALTH
FOR THE YEAR 1941.

To the Members of the North Riding of Yorkshire County Council.

Mr. Chairman, my Lords, Ladies and Gentlemen,

I have the honour to submit the annual report on the public health service of the County Council for the year 1941.

The Ministry of Health issued instructions in a circular (No. 2604 dated 24th March, 1942) regarding the features of such a report both as to the matters which shall receive comment and the statistical data which must be omitted for reasons of national security. Accordingly, no statement is made which includes information as to population movements, nor are the estimated mid-year figures for 1941 given for the North Riding administrative area or for the area of any of the constituent authorities. Information is available, however, to duly authorised persons who may desire such statistical data.

This report is, like those of 1939 and 1940, of an interim character and is as brief as possible in view of the need for economy in the use of paper. Appropriate information regarding the health services has been compiled as in pre-war years and will be used as the Minister of Health may direct. I submit my observations on the statistics which may be published and on the outstanding matters which arose during the year.

(i) Vital Statistics.

The *birth rate* for the whole county for 1941 showed an increase from 15.5 (1940) to 16.6: this increase was more marked in the urban areas, particularly in the borough of Richmond, but the rural districts of Richmond and Wath also showed birth rates in excess of 25 per 1,000 of the population.

The *death rate* for the administrative county was 13.6 per 1,000 of the population in place of 13.8: the fall was more noticeable in the rural areas where some low rates were recorded.

The *infantile mortality rate* rose from 48.1 in 1940 to 58 in 1941. The urban areas showed an increase to 61.6: the corresponding rate for rural areas was 53.6. The comparative figure for England and Wales as a whole was 59, and for Scotland 83. The *death rate from congenital malformation, birth injuries, premature birth and infantile disease* per 1,000 births showed an increase from 30.31 for 1940 to 36.53 for 1941.

(ii) Cancer.

The total number of deaths ascribed to "cancer" occurring in persons normally resident in the Riding was 547 as compared with 569 for 1940.

At the December 1941 meeting of the County Council an interim scheme for the treatment of persons suffering from cancer was approved: the scheme did not however, come into operation during the year under review.

(iii) Infectious Diseases.

During 1941 the commoner infectious diseases showed diminished incidence on the whole but measles and whooping cough occurred in minor epidemics in the more populous areas, especially during the first half of the year. The general use of convalescent measles serum is not practicable at present: possibly after the cessation of hostilities quantities of dried plasma will be available for reconstitution for the treatment or modification of measles instead of being held in reserve for use in blood transfusion services. Fortunately the measles cases were mild for the most part and only 15 deaths were registered as due to this disease out of 4,700 cases notified. The incidence of these diseases is set out in Table 2. During the year attention was again directed to diphtheria immunisation and officers on the staff of the county health department assisted medical officers of sanitary districts in sessional clinics: premises owned or rented by the County Council were also made available without charge to the district councils for the purpose of holding immunisation clinics. The recommendations of the Ministry of Health regarding dosage of diphtheria antigens were anticipated: most district medical officers of health were using the increased dosage before the end of the year under review, according to information submitted at the quarterly meetings of the local medical officers of health.

I am glad to be able to report that the *death rate for diarrhoeal diseases* in children under two years of age fell from 3.98 per 1,000 births to 1.99: in urban areas alone the corresponding figure was 2.27.

(iv) Maternity and Child Welfare.

The arrangements made under the Midwives Act, 1936, continued during 1941; 86.7% of the confinements in the Riding were carried out by the domiciliary service. As in previous years unsuitable housing conditions and the need for skilled obstetrical assistance were the factors determining the admission of maternity cases to hospital at the cost of the County Council.

A slight rise in the *maternal mortality rate* was observed but the numbers involved in this Riding are relatively small so that an increase of three deaths makes a noticeable difference in calculating the rate. In certain cases reports have revealed that eclampsia had suddenly developed during labour, the blood pressure having been normal when taken a few days previously. The cause of this sudden failure of the metabolic processes has not been ascertained but has, I believe, been observed in other areas. This seems to be a suitable subject for investigation by obstetrical experts.

An additional burden was thrown on the administrative staff by the issue of clothing coupons to expectant mothers and by arrangements for the distribution of vitamin products to children under the age of 5. Full co-operation was afforded to government departments e.g. the Board of Trade

and the Ministry of Food, in connection with the above schemes but unfortunately certain local food executive officers did not avail themselves of the facilities offered.

(v) Tuberculosis.

The *death rate from pulmonary tuberculosis* in the administrative county for 1941 was .43 per 1,000 of the population : the rate for all urban areas was .50 and for all rural areas .35. The corresponding figures for 1940 were .38, .46 and .28 respectively. As regards tuberculosis other than pulmonary, the death rate for the administrative county was .14 per 1,000 as compared with .11 for 1940. It will be seen that the death rates from this disease showed an increase : the environmental factors which operate particularly in time of war are no doubt responsible.

(vi) Blind Persons.

The number of blind persons (as defined in the Blind Persons Acts) on the register for the administrative county on the 31st December, 1941, was 790 as compared with 791 at the end of 1940 and 757 at the end of 1939. During the year grants were made to 446 unemployable blind persons in accordance with the County Council's amended scale.

At the end of the year the Yorkshire School for the Blind gave notice of termination of the arrangement whereby this body supervised the welfare of blind persons in the southern part of the Riding and since that date suitable steps have been taken to administer this service directly in that area.

(vii) Supervision of Milk Supplies.

During 1941 the Ministry of Agriculture and Fisheries issued 449 attested licences in the Riding : the total number of tuberculin tested herds and accredited herds supervised by the County public health committee under the Milk (Special Designations) Orders were 141 and 218 respectively as compared with 146 and 218 in 1940.

(viii) Public Assistance.

During 1941 the difficulty of securing suitable and sufficient accommodation for chronic sick persons who made application for institutional relief at various times continued. Unfortunately, owing to war conditions, little progress was made in the erection of the new ward block at Guisborough Institution but the new nurses' home there is nearly ready for occupation.

(ix) Mental Deficiency.

As in previous years certain medical officers on the staff of the county health department acted as certifying officers under the Mental Deficiency Acts and thereby assisted the Committee for the Care of the Mentally Defective in their statutory duties. The assistant school medical officers and the school nurses also gave material assistance in the ascertainment of cases of amentia. 28 cases were examined at the request of the executive officer of the committee with a view to the completion of a statutory certificate.

(x) Civil Defence.

The administration of the civil defence casualty services in the Riding took up a considerable proportion of the time of the professional and clerical staff of the department during the year. The flow of circulars, instructions and explanatory memoranda from Government departments has not abated : many of the items received have necessitated the issue of instructions to district medical officers of health each acting as head of service in his own area : numerous returns have been required for various purposes, and I should like to record my appreciation of the willing co-operation which I have received in these matters. Regular meetings of medical officers of health continued throughout the year and provided a valuable link between the county and district administrations.

(xi) Government Evacuation Scheme.

Various difficulties have been experienced in connection with the billeting of children evacuated from danger areas : conflicts occurred between hosts and guests and separation of the contestants has been the only immediate remedy. During the year under review the Ministry of Health approved the appointment of a psychiatric social worker whose principal duty is to assist the billeting authorities in cases where incompatibility or conflicting standards of behaviour cause friction or problem conditions in billets. Mrs. I. J. Shawyer, M.A., took up duty in this post on the 1st November, 1941.

(xii) Venereal Diseases.

In December, 1941, the County Council adopted a scheme for the treatment of patients suffering from venereal disease by approved general practitioners in areas from which, under war-time conditions, it is difficult for patients to attend existing clinics at Scarborough, York, Darlington, Harrogate, Middlesbrough, Stockton and Leeds.

(xiii) General.

Numerous additional duties fell to be undertaken by the department during the year under review and resulted in a large increase in the amount of administrative work under difficult conditions, as the regular staff was depleted by recruitments to H.M. Forces. The adjustment of the work to meet the new conditions and the training of temporary staff presented a problem which is still only partly solved.

In conclusion, I desire to express my sincere thanks to the Chairman and members of the various committees of the Council whose activities are associated with the county health services for the generous assistance afforded to me : also my gratitude to the members of the staff of the department for their loyal assistance and to my colleagues in other departments for their active co-operation.

I have the honour to be,

Mr. Chairman, My Lords, Ladies and Gentlemen,

Your obedient Servant,

J. A. FRASER,

July, 1942.

County Medical Officer of Health.

TABLE 1.

Birth and Death Rates, 1941.

DISTRICT.	Birth rate per 1,000 population.	Natural increase per 1,000 population	Death rate per 1,000 population.	Total infantile mortality per 1,000 live births.
A.—URBAN.				
1. Eston	20.1	6.1	14.0	59.7
2. Guisborough	20.5	6.4	14.1	51.0
3. Loftus	17.9	5.8	12.1	62.0
4. Malton	14.1	—	14.1	80.6
5. Northallerton	15.4	2.7	12.7	59.5
6. Pickering	15.6	3.8	11.7	61.5
7. Redcar	16.1	3.5	12.5	50.8
8. Richmond	26.1	15.6	10.4	59.2
9. Saltburn & Marske	17.1	—	18.2	61.4
10. Scalby	12.4	1.6	10.8	80.6
11. Scarborough	13.0	—	17.7	75.3
12. Skelton & Brotton	18.6	5.6	13.0	67.8
13. Thornaby-on-Tees	20.1	7.0	13.1	58.4
14. Whitby	15.0	—	16.0	52.6
Total Urban ..	17.1	2.9	14.3	61.6
B.—RURAL.				
1. Aysgarth	11.9	—	18.2	20.4
2. Bedale	17.2	4.1	13.2	57.4
3. Croft	17.9	4.6	13.3	51.3
4. Easingwold	15.4	1.6	13.9	59.9
5. Flaxton	16.9	6.5	10.4	42.2
6. Helmsley	15.6	1.6	13.9	75.9
7. Kirbymoorside	14.3	3.1	11.2	26.7
8. Leyburn	12.6	—	12.7	57.5
9. Malton	14.1	1.9	12.2	92.0
10. Masham	11.6	—	19.7	130.4
11. Northallerton	14.6	4.1	10.5	8.2
12. Pickering	12.7	—	14.9	54.8
13. Reeth	13.6	—	14.4	—
14. Richmond	25.5	17.0	8.6	34.8
15. Scarborough	12.4	—	12.4	69.0
16. Startforth	14.2	0.6	13.6	55.6
17. Stokesley	14.7	0.8	13.9	93.1
18. Thirsk	16.2	3.3	12.8	62.5
19. Wath	26.4	17.1	9.3	74.1
20. Whitby	14.5	—	16.5	41.9
Total Rural ..	16.0	3.2	12.8	53.6
Administrative County ..	16.6	3.0	13.6	58.0

TABLE 2.

Notifications of Infectious Disease in 1941, as given in the weekly returns rendered by Medical Officers of Health.

DISTRICT.	Smallpox.	Scarlet Fever.	Diphtheria.	Pneumonia.	Cholera.	Plague.	Cerebro-spinal Fever.	Acute Poliomyelitis.	Acute Polio-encephalitis.	Encephalitis Lethargica.	Typhus Fever.	Typhoid Fever.	Paratyphoid Fever.	Trench Fever.	Dysentery.	Ophthalmia Neonatorum.	Erysipelas.	Malaria (at home).	Malaria (abroad).	Chickenpox.	Measles.	Whooping Cough.	Anthrax.	Puerperal Pyrexia
A.—URBAN.																								
1. Eston ..	22	45	33	..	..	..	5	..	..	..	..	..	..	..	1	..	4	..	..	..	435	69	..	3
2. Guisborough ..	2	7	11	..	..	..	2	1	..	..	..	..	..	..	..	..	3	..	..	..	171	11	..	..
3. Loftus ..	..	15	3	..	..	..	2	1	..	..	..	..	..	..	..	..	2	..	..	..	303	1	..	1
4. Malton ..	8	8	..	..	..	..	3	..	..	..	..	..	1	..	..	..	..	..	..	..	76	5	..	1
5. Northallerton ..	7	13	4	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	66	29	..	5
6. Pickering ..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	..	..	..
7. Redcar ..	41	47	19	..	..	..	4	..	1	..	1	..	..	..	..	1	5	..	..	..	234	31	..	1
8. Richmond ..	5	..	3	..	..	..	1	..	..	..	..	..	..	..	..	..	2	..	..	30	34	8	..	2
9. Saltburn & Marske ..	4	7	11	..	..	..	1	..	..	..	..	..	..	..	..	..	3	..	..	1	96	30	..	1
10. Scalby ..	3	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	29	3	..	..
11. Scarborough ..	41	28	30	..	..	..	18	..	..	..	..	4	6	..	2	..	1	..	..	3	360	84	..	16
12. Skelton & Brotton ..	4	10	2	..	..	..	5	1	..	2	..	..	..	..	..	..	1	..	..	..	377	15	..	1
13. Thornaby-on-Tees ..	34	7	40	..	..	..	3	..	..	..	..	..	1	..	2	3	11	..	..	1	434	93	..	1
14. Whitby ..	4	3	15	..	..	..	2	..	..	..	..	..	..	..	1	..	4	..	1	..	17	27	..	2
Total Urban ..	178	190	171	..	..	..	47	3	..	3	..	5	9	..	6	5	36	..	1	35	2636	406	..	34
1940 ..	376	199	248	..	..	..	54	3	..	1	..	3	..	..	11	7	65	..	..	3	819	127	..	20
B.—RURAL.																								
1. Aysgarth ..	13	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	54	..	..	..
2. Bedale ..	2	4	5	..	..	..	2	..	..	..	..	..	..	..	..	..	2	..	..	..	162	28	..	1
3. Croft ..	1	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Easingwold ..	19	5	29	..	..	..	3	..	..	..	..	..	1	..	..	1	4	..	..	62	221	58	..	3
5. Flaxton ..	9	18	6	..	..	..	6	3	2	..	..	..	..	..	..	1	..	..	..	2	225	78	..	..
6. Helmsley ..	43	2	13	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	19	63	57	..	..
7. Kirbymoorside ..	5	11	5	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	..	..	9	60	..	1
8. Leyburn ..	3	1	7	..	..	..	2	..	1	..	1	..	1	..	..	..	1	..	..	..	101	29	..	..
9. Malton ..	12	4	1	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	95	15	..	..
10. Masham ..	9	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	63	15	..	..
11. Northallerton ..	15	31	11	..	..	..	3	..	..	..	..	2	..	..	..	..	2	..	..	..	77	16	..	..
12. Pickering ..	1	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	12	26	..	1
13. Reeth ..	2	1	3	..	..	..	..	..	..	..	..	..	..	..	..	1	4	..	..	..	22	79	..	..
14. Richmond ..	20	10	6	..	..	..	18	..	..	..	..	..	..	..	4	..	1	..	1	29	174	72	..	1
15. Scarborough ..	5	..	7	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	101	26	..	1
16. Startforth ..	3	3	5	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	3	16	19	..	..
17. Stokesley ..	7	15	31	..	..	..	3	2	..	..	..	..	..	..	..	..	1	..	..	1	495	119	..	..
18. Thirsk ..	3	1	3	..	..	..	4	..	..	..	..	..	..	..	..	..	1	..	..	3	64	4	..	..
19. Wath ..	1	2	2	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	13	28	..	1
20. Whitby ..	4	1	4	..	..	..	3	..	..	..	..	..	..	..	..	..	1	..	..	..	97	39	..	..
Total Rural ..	177	113	140	..	..	..	51	5	2	2	..	2	2	..	5	4	21	..	1	119	2064	768	..	9
1940 ..	412	139	159	..	..	..	49	7	2	2	..	8	..	..	1	3	54	..	1	77	851	101	..	18
Administrative County ..	355	303	311	..	..	..	98	8	2	5	..	7	11	..	11	9	57	..	2	154	4700	1174	..	43
1940 ..	788	338	407	..	..	..	103	10	2	3	..	8	3	..	12	10	119	..	1	80	1670	228	..	38

TABLE 3.
Infectious Disease Death Rates, 1941.

DISTRICT.	Scarlet Fever.	Diphtheria.	Typhoid Fever in- cluding paratyphoid).	Measles.	Whooping Cough.	Pulmonary Tuber- culosis.	Other Tuberculosis.	Influenza.	Pneumonia.	Bronchitis and other Respiratory diseases.	Cancer.	Diarrhoea (under 2 years).	Puerperal and post abortive sepsis.	Other maternal causes.	Congenital malformations birth injury, premature birth, infantile disease.
A.—URBAN.												*	*	*	*
1. Eston	·10	·03	·73	·28	·24	·62	1·31	1·73	..	..	5·12	32·42
2. Guisborough	·66	·13	..	·27	·80	1·20	..	..	12·74	44·59
3. Loftus	·28	..	·43	·28	·14	·57	·57	1·42	..	..	..	46·51
4. Malton	·23	..	..	..	·47	..	..	·70	·47	1·88	..	..	16·13	16·13
5. Northallerton	·19	·19	·58	1·16	2·89	..	..	..	35·71
6. Pickering	·48	2·63	·72	..	..	..	30·77
7. Redcar	·17	..	·04	·04	·67	..	·25	·51	1·01	1·85	5·08	..	..	30·46
8. Richmond	·52	..	..	·35	·35	1·04	..	..	..	52·63
9. Saltburn & Marske	·16	..	..	..	·31	·31	·93	·47	1·09	3·42	8·77	8·77	..	17·54
10. Scalby	·60	·20	..	·60	..	·60	..	..	..	48·39
11. Scarborough	·03	..	..	·06	·50	·08	·17	·53	·89	1·79	4·30	4·30	8·60	43·01
12. Skelton & Bretton	·08	..	·16	..	·08	·24	·32	·48	·80	1·77	4·24	..	8·47	38·14
13. Thornaby-on-Tees	·05	..	·19	·14	·53	·14	·14	1·15	·81	1·77	2·34	..	2·34	32·71
14. Whitby ..	·10	..	..	..	..	·39	·20	·30	·59	·69	1·48	..	..	6·58	26·32
Total Urban ..	·006	·05	..	·07	·04	·50	·15	·21	·60	·94	1·74	2·27	·97	4·54	35·64
B.—RURAL.															
1. Aysgarth	·48	..	·48	..	1·19	2·39	..	..	..	20·41
2. Bedale	·14	..	..	..	·58	·14	·14	·72	1·01	2·03	..	..	..	40·98
3. Croft	·92	..	·46	·46	1·84	·46	..	..	..	25·64
4. Easingwold	·09	·09	·09	·46	·28	·28	·46	·55	1·65	..	..	5·99	47·90
5. Flaxton	·05	..	·05	..	·27	·16	·33	·22	·27	1·15	3·25	..	3·25	25·97
6. Helmsley	·20	..	..	..	..	..	·82	·41	·41	1·84	..	..	..	63·29
7. Kirbymoorside	·20	..	..	..	·20	..	·59	·20	·39	·79	..	..	..	26·67
8. Leyburn	·29	..	·88	·73	·73	·88	..	..	..	45·98
9. Malton	·16	..	..	..	·32	·16	..	·65	·65	·49	..	..	..	57·47
10. Masham	·48	·48	1·93	·48	2·89	·96	..	..	..	86·96
11. Northallerton	·25	·12	..	·62	·50	·62	..	..	..	8·20
12. Pickering	·36	·18	..	..	·54	1·08	1·79	..	..	..	41·10
13. Reeth	·85	..	..	..	·85	3·39	..	..	..	..
14. Richmond	·37	·07	·30	·15	·67	·97	5·80	2·90	..	23·19
15. Scarborough	·14	..	·43	·14	..	1·30	·86	2·45	..	..	..	45·98
16. Startforth	·62	·21	·41	·41	·62	2·47	..	..	..	41·67
17. Stokesley	·19	..	..	·12	·37	·25	·25	·50	·75	2·05	..	..	4·05	68·83
18. Thirsk	·24	·32	·08	·08	·39	·87	2·05	4·81	..	..	24·04
19. Wath	·49	..	1·47	·49	·98	..	..	..	55·56
20. Whitby	·27	·19	·36	·27	1·16	2·23	..	5·99	..	41·92
Total Rural	·05	·006	·02	·05	·35	·14	·30	·45	·75	1·59	1·64	·82	1·23	37·64
Administrative County	·003	·05	·003	·04	·04	·43	·14	·25	·53	·85	1·67	1·99	·90	3·07	36·53

* These death rates are per 1,000 births.
The other death rates are per 1,000 population.