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North Riding of Yorkshire County Council

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1962



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INTRODUCTION

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

Mr. Chairman, My Lords, Ladies and Gentlemen,

I regret the delay in submitting my annual report for the year 1962. It does not include details of the work of the school health service because a separate annual report is presented to the Education Committee dealing with this aspect of the work of the medical department; points relating to the co-ordination of services in the medical field are covered in this report.

The tables at the end of the printed text are compiled in accordance with the appropriate Ministry of Health circular; perusal of these tables will show that no case of diphtheria or smallpox occurred in the Riding during the year under review.

Members will be interested to note the changing pattern of the midwifery service. Many more deliveries are taking place in hospitals but a system of early discharge (that is to say discharge before the end of the period of ten days mentioned in the Rules of the Central Midwives Board) has been instituted in certain areas. It is vital, of course, that the patient's midwife and doctor should be advised in advance of any such early discharge. When carefully controlled by obstetricians, the system has certain advantages in that additional beds are made available for deliveries but the statistics tend to give a misleading picture of the amount of work which County midwives carry out. In 1950, 56.5% of North Riding mothers had their babies at home: in 1962 this figure fell to 31.8%, but in the latter year 655 mothers who had been delivered in hospital were attended by midwives after discharge, in many cases on a twice daily visit basis. In the aggregate (see page) the total number of women attended by County midwives was greater than in 1950.

The statistics on vaccination against smallpox shown on page 21 are interesting. There was a phenomenal rise in the demand for calf lymph and its issue had to be carefully controlled. From one town alone applications were received from doctors in one morning for enough lymph to vaccinate 11,000 persons; this was based on a false rumour that a girl who had been in contact with smallpox in Bradford had arrived in that town

Members who are interested in environmental hygiene will find a very full statement of the activities of the staff of the County Health Department and of the local sanitary authorities in connection with milk, refuse disposal, water supplies and sewerage schemes, housing and allied matters. The problem of uncontrolled tipping is still very much a burning question: too often one sees such "tips" on fire.

In conclusion, I wish to thank members of the Health Committee for their support and my colleagues in other departments of county administration for their co-operation. I wish also to extend my best thanks to the staff of the central office and to the medical nursing and other staff employed all over the Riding, because without their loyal support the routine work of the medical department in the field of preventive and social medicine would have been impossible.

I remain,
Mr. Chairman, My Lords, Ladies and Gentlemen,
Your obedient servant,
J. A. FRASER,
County Medical Officer.

NORTH RIDING OF YORKSHIRE COUNTY COUNCIL.

ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

STAFF OF COUNTY HEALTH DEPARTMENT.

County Medical Officer of Health		J. A. Fraser, M.B., Ch.B., D.P.H.
Deputy County Medical Officer of Health		J. T. A. George, M.D., Ch.B., D.P.H.
Medical Officer for Maternity and Child Welfare	}	Marjorie J. M. Dow, M.B., Ch.B., D.P.H. (retired 30-9-62)
Assistant Medical Officer—Mobile Maternity & Child Welfare Unit	}	Edna M. Dunn, M.R.C.S., L.R.C.P.
Chief Dental Officer		I. J. Faulds, L.D.S.
District Medical Officers of Health		See Table on pages 6 and 7.
Chest Physicians	ls	B. Couts, M.D., D.P.H. G. Walker, M.B., M.R.C.P., D.P.H. R. B. N. Wilsdon, M.D., M.R.C.P. W. Helm, M.R.C.P., M.R.C.S., L.R.C.P. Kathleen M. Barran, M.B. W. Davidson, M.B.E., M.B., D.P.H. D. P. Degenhardt, M.D., M.R.C.P.
Area Nursing Officers	{	Elizabeth Chapman, s.R.N., s.C.M., M.T.D., H.V.CERT. (left 13-6-62) Kathleen A. Dawson, s.R.N., s.C.M., H.V.CERT. Joan Scott, s.R.N., s.C.M., H.V.CERT. (commenced 1-10-62)
Chief County Health Inspector		G. D. Aspin, C.S.I.B., A.F.S.(E).
County Health Inspectors	5	D. Nurse, M.R.S.I. R. Wharin, M.S.I.A.
	1	A. Firth, M.R.S.H.
Chief Clerk		H. A. Roebuck, D.P.A.
County Ambulance Officer		E. J. Draper.
Senior Mental Welfare Officer	{	R. P. Hendry, A.C.C.S., A.I.S.W. (commenced 21-3-62)
Senior Sectional Clerks		T. A. Hutchinson Margaret Hardcastle, D.P.A. A. R. Elliott. C. Rutherford. J. G. Easby. G. C. Robinson.

Area and estimated mid-1962 Population	County Districts	Assistant County Medical Officer	Medical Officer of Health for Sanitary Services
Area 1 (50,090)	Thornaby Borough Stokesley R.D.	J. McGovern, M.B., Ch.B., D.P.H., Area Health Office, Francis Street, Thornaby- on-Tees	J. McGovern.
Area 2 (37,410)	Eston U.D	T. P. Binns, M.R.C.S., L.R.C.P., D.P.H., Health Office, South Terrace, South Bank.	T. P. Binns.
Area 3 (45,720)	Redcar Borough Saltburn & Marske U.D.	P. S. R. Burrell, M.B., Ch.B., D.P.H., Area Health Office, "Teeswold," Coatham Road, Redcar.	P. S. R. Burrell.
Area 4 (33,840)	Guisborough U.D Loftus U.D. Skelton & Brotton U.D.	T. M. B. Rohan, M.B., B.Ch., B.A.O., D.P.H., Area Health Office, Park Lane, Guisborough	T. M. B. Rohan.
Area 5 (23,130)	Whitby U.D Whitby R.D.	B. Schroeder, M.B., Ch.B., D.P.H., Area Health Office, Grape Lane, Whitby.	B. Schroeder.
Area 6 (28,390)	Malton U.D Malton R.D. Pickering U.D. Pickering R.D. Helmsley R.D. Kirkbymoorside R.D.	W. R. M. Couper, M.B., ch.B., D.P.H., Area Health Office, Train Lane, Pickering.	W. R. M. Couper.
Area 7 (60,270)	Easingwold R.D Flaxton R.D. Wath R.D. Thirsk R.D.	H. Gray, M.D., Ch.B., D.P.H., Area Health Office, Manor Road, Easingwold.	H. Gray.
Area 8 (34,380)	Northallerton U.D Northallerton R.D. Aysgarth R.D. Leyburn R.D. Masham R.D.	H. Diggles, M.B., Ch.B., D.P.H., Area Health Office, Leyburn.	H. Diggles.
	Bedale R.D.		*A. W. Hansell, M.B., Woodrow, Bedale.

Area and estimated mid-1962	County Districts	Assistant County Medical Officer	Medical Officer of Heartn for Sanitary Services
Area 9 (37,080)	Richmond Borough Richmond R.D	H. R. Morrison, M.D., D.P.H., Area Health Office, Quaker Lane, Richmond.	H. R. Morrison.
	Reeth R.D.		*W. C. Spiers, M.B., Langthorne House, Reeth, Richmond.
Area 10 (57,080)	Scarborough Borough Scalby U.D. Scarborough R.D.	W. G. Evans, M.B., B.chir., D.P.H., Area Health Office, King Street, Scarborough.	W. G. Evans, (also Divisional School Medical Officer) Elizabeth R. Cameron, M.B., ch.B., D.P.H., Deputy M.O.H., Borough of Scarborough.

^{*}These officers are not debarred by their terms of appointment from private medical practice.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA. GENERAL STATISTICS.

Area (in acres)						 1,354,657
Number of separate	e private d	wellings oc	cupied (C	Census 19	61)	 124,341
Number of private	household	s (1961)				 125,015
Average number of	persons p	er house (1	961)			 3.01
Population (Census	1951)					
Urban Districts Rural Districts		}				378,209
Population (Census	1961)					
Urban Districts Rural Districts		}				 396,707
Population (estimat	ed to mid	year 1962)				
Urban Districts Rural Districts	222,350 185,040	}				 407,390
Rateable Value (1st	April, 19	52)				 £5,524,327
Estimated product	of a penny	rate (1st A	April, 196	2)	.,	 £22,291

Area.

The North Riding of Yorkshire is the third county in order of size in England, its acreage being 1,354,657. Broadly speaking the North Riding includes the southern half of Tees-Dale; all Swaledale, Wensleydale and Coverdale, the Cleveland Hills and North Yorkshire Moors; the Hambleton and Howardian Hills; the Vales of Mowbray, Pickering and much of the Vale of York; and a considerable stretch of rocky Yorkshire coastline.

Population.

The population as estimated by the Registrar General at mid-year 1962 is set out in the table below; the population for the years 1931, 1938, 1957, 1958, 1959, 1960 and 1961 are also shown for comparative purposes:—

	Urban population	Rural population	Total
1931	 182,279	148,822	331,101
1938	 186,000	147,500	333,500
1957	 208,800	177,800	386,600
1958	 209,200	178,400	387,600
1959	 211,100	179,700	390,800
1960	 214,860	183,210	398,070
1961	 218,720	181,390	400,110
1962	222,350	185,040	407,390

Social Conditions and Occupations.

The main industries in the north-eastern part of the Riding are the manufacture of steel and chemicals: the latter industry is being rapidly developed. On the seaboard there are many holiday resorts; and in the rural districts agriculture and allied industries provide employment for many.

Extracts from vital Statistics of the Year.

Live Births	Legiti	imate	 Total 7,352	M 3,757	F 3,595	Crude Birth rate per 1,000 of
Still births	Cinegn	imate	 323 167	163 96	160 71	the estimated home population 18.8 adjusted birth rate 19.2 Rate per 1,000 total (live and
Deaths			 4,643	2,428	2,215	still) births 21·30 Crude death rate per 1,000 of the estimated home population
						11.4. Adjusted death rate 12.08

Principal Vital Statistics relating to Mothers and Infants.

Total live births registered					 7,675
Live birth rate per 1,000 population	n—crude				 18.84
Live birth rate per 1,000 population	n-adjuste	d			 19.22
Proportion (per cent) of illegitimate			al live bi	rths	 4 21%
Total stillbirths registered					 167
Stillbirth rate per 1,000 total births					 21.30
Total live births and stillbirths					 7,842
Total infant deaths (under one year	r) regi, tere	ed			 150
Infant mortality rate per 1,000 live					 19.5
Mortality rate of legitimate infants		legitima	ate live b	irths	 19.72
Mortality race of illegitimate infant					 15-48
Neo-natal mortality rate per 1,000					 12.51
Early neo-natal mortality rate per 1					 11.47
Perinatal mortality rate per 1,000 to					 32-52
Total maternal deaths (including al					 3
Maternal mortality rate per 1,000 t					 -38
					00

Infantile Mortality.

There was a decrease in the number of deaths of infants under 1 year, the total number for the year under review being 150, 2 less than the previous year. The infantile mortality rate of 19.5 compares with 20.9 for the previous year and 21.6 for England and Wales.

Live Births and Birth Rates.

During the year ended 31st December, 1962, the live births registered in and belonging to the Riding numbered 7,675 (393 births more than the previous year, an increase of 5.40%).

The birth rate for the Riding as a whole was 18.8 (per 1,000 estimated population), being higher than the rate for England and Wales—18.0.

Particulars of the rates in the several sanitary districts of the Riding are shown in Table I of the statistical tables appended to this report.

Illegitimacy.

The number of illegitimate live births registered during 1962 was 323 (19 less than in 1961): the position shows a marked improvement on 1944 and 1945 when the numbers were 462 and 547 respectively.

On the basis of population the illegitimate birth rate was ·79 per thousand compared with ·85 in 1961 and ·89 in 1960, the rate per 1,000 live births being 42·08 as compared with 46·97 in 1961 and 50·11 in 1960.

Stillbirths.

The number of stillbirths registered in 1962 was 167, a decrease of 14 on the previous year. Further analysis of these figures into sexes indicates that there were 96 male and 71 female stillbirths. The rate per 1,000 total births was 21.30 in 1962; this rate compares with 24.85 in 1961 and 21.93 in 1960.

Deaths and Death Rates.

During 1962 the total number of deaths registered for the Riding was 4,643 (2,428 males and 2,215 females). The total figure gives an annual death rate of 11.4 in 1962 (per 1,000 estimated population), which is slightly lower than the figure for the previous year (11.6); in terms of urban and rural districts the death rates for the seven years ended 31st December, 1962, were as follows:—

	1956	1957	1958	1959	1960	1961	1962
North Riding :-			-		-		-
Urban Districts	12.3	12.1	13.1	12.0	12.4	12.5	12.2
Rural Districts	10.4	10.3	10.7	10.1	10.2	10.5	10.4
Administrative County	11.4	11.3	12.0	11.1	11.4	11.6	11.4
England and Wales	11.7	11.5	11.7	11.6	11.5	12.0	11.9

The particulars of the number of deaths and the rates in the several sanitary districts are tabulated at the end of this report.

Mortality at different ages from various causes.

The details supplied by the Registrar General are shewn on Table 3 at the end off this report.

The principal causes of death in the County during 1962 were as follows, the figures for 1960 and 1961 being also given.

		8		1960	1961	1962	(and percentage of total deaths)
Influenza				7	52	23	.50%
Heart Diseases				1,679	1,720	1,715	36.94%
Other circulatory	diseases			162	170	177	3.81%
Bronchitis				180	178	182	3.92%
Pneumonia				178	232	213	4.59%
Congenital Malfo				40	44	33	.71%
Tuberculosis of t	he respira	tory s	ystem	14	12	15	.32%
Cancer, malignan	t disease			782	796	791	17.04%
Vascular lesions	of the ner	vous sy	ystem	718	691	751	16.17%
Nephritis and ne	phrosis			42	37	33	.71%

The position in the various sanitary districts is set out fully in Tables 4, 5, 6, 8 and 9. Whereas in 1938, 11 deaths were ascribed to diphtheria, one was allocated to this cause in the years 1948, 1949 and 1957, two in 1953 and none in the years 1950, 1951, 1952, 1954, 1955, 1956, 1958, 1959, 1960, 1961 and 1962.

CANCER, MALIGNANT DISEASE.

Cancer was responsible for 791 deaths in the Riding in 1962, and the following tabular statement shows the position for the last ten years:—

	Total	Number of	Deaths	Death rate per 1,000 population						
		Urban	Rural		Urban	Rural	England			
Year	County	Districts	Districts	County	Districts	Districts	& Wales			
1953	 696	442	254	1.84	2.16	1.47	1.99			
1954	 674	401	273	1.77	1.95	1.55	2.04			
1955	 723	435	288	1.88	2.10	1.62	2.06			
1956	 756	458	298	1.95	2.20	1.66	2.07			
1957	 703	421	282	1.82	2.02	1.59	2.09			
1958	 797	463	334	2.06	2.21	1.87	2.12			
1959	 739	426	313	1.89	2.02	1.74	2.14			
1960	 782	488	294	1.96	2.27	1.60	2.15			
1961	 796	490	306	1.99	2.24	1.69	2.16			
1962	 791	487	304	1.94	2.19	1.64	2.18			

Heart Diseases.

The deaths classified to the heart diseases are shown in the following Table, the death rates per 1,000 of the estimated population, and the corresponding figures for the previous five years:—

	Diseas	nary se and gina		rtension th Disease	Otl Heart I	ner Disease	Total all forms		
Year	No. of	Death	No. of	Death	No. of	Death	No. of	Death	
	deaths	rate	deaths	rate	deaths	rate	deaths	rate	
1957	 750	1.94	96	.25	807	2.09	1,653	4.28	
1958	 819	2.12	93	-24	839	2.16	1,751	4.52	
1959	 793	2.03	68	.17	740	1.89	1,601	4.10	
1960	 853	2.14	73	-18	753	1.89	1,679	4.22	
1961	 922	2.30	72	.18	726	1.82	1,720	4.30	
1962	 945	2.32	59	-14	711	1.75	1,715	4.21	

Distribution by age group and sex of the deaths classified to "coronary disease, angina" annually since 1957 is given below:—

		45	45-	4564			65—74			75+			
Year		M	F	T	M	F	T	M	F	T	M	F	T
1957		14	4	18	159	49	208	157	110	267	124	133	257
1958		16	2	18	174	49	223	175	120	295	144	139	283
1959		11	1	12	165	45	210	175	109	284	162	125	287
1960		15	3	18	191	64	255	173	111	284	152	144	296
1961		16	5	21	175	58	233	187	138	325	169	174	343
1962		14	3	17	183	56	239	195	124	319	200	170	370

The following Table shows the Infant mortality rates for the last ten years :-

	Urban	Rural	Administrative	England
Year	Districts	Districts	County	& Wales
1953	 33.0	26.8	30.2	26.8
1954	 32.5	20.9	27.6	25.5
1955	 28.0	27.4	27.7	24.9
1956	 29.7	20.2	25.6	23.8
1957	 28.5	24.0	26.6	23.0
1958	 28.7	18.0	24.1	22.5
1959	 27.9	20.3	24.6	22.0
1960	 22-2	21.7	22.0	21.7
1961	 19.7	22.5	20.9	21.4
1962	 22.7	15.6	19.5	21.6

The main causes of deaths among children under one year of age were as follows :-

		1962
Congenital malforn	nations	 24
Pneumonia		 28
Prematurity		 58

Measles.

During 1962 there were 3,346 notified cases of measles: this figure excludes all known cases of Rubella. One death was ascribed to this disease: for the last ten years the total number of measles deaths is seventeen. Obviously the treatment of the complications of measles is now more effective than it was in the years before 1939 for there were 72 deaths from measles in 1934 alone and 18 deaths in 1936.

Whooping Cough.

The total number of notified whooping cough cases in the Riding was 35 compared with 266 for 1961: no death was registered as being due to this condition. The total morbidity following whooping cough is not known, but one occasionally comes across evidence of brain haemorrhage which seems to follow attacks of pertussis. This serious complication should stimulate parents to accept protection against this unpleasant disease.

Infantile Paralysis.

Six notifications of acute poliomyelitis (paralytic and non-paralytic) were received during the year under review, with no deaths, as compared with five notifications and no deaths in 1961. The responsibility for the treatment of paralytic conditions following this type of virus infection lies with the Regional Hospital Boards, but notification secures active enquiries into the sanitary conditions, and enables one to promote immunisation campaigns.

Administration.

The local health services have been administered as in previous years; my report for 1954 set out in detail the powers and duties and methods of administration and it is not proposed to repeat them here.

Use of voluntary organisations.

In general, the local health authority uses voluntary organisations where such bodies can do the necessary social work satisfactorily and with less formality than officers of the Council; for example, for the care of the unmarried mothers and the adoption of children, the County Council makes grants to various Diocesan bodies employing after-care workers and making arrangements in connection with admission to hostels and allied matters. The payments for the use of the hostels are now generally made on a customer basis. The County Council also uses the Scarborough Council for Social Service in connection with after-care.

CARE OF MOTHERS AND BABIES.

At 92 places in the Riding, child welfare clinics are held, 3 more than in 1961. In 29 out of the 92 centres, ante-natal patients are also examined. The total number of attendances at infant welfare centres keeps on increasing, the total attendances at infant welfare centres in the administrative county in 1962 being 78,257 as compared with 77,827 in 1961, and 69,571 in 1960. As regards the care of premature infants the provision of certain equipment on loan continues.

The average annual attendance per county-administered centre is 851 as compared with 874 in the previous year and 782 in 1960. The following table gives details of the clinics held, the persons who attended and the attendances for the year 1962.

INFANT WELFARE CENTRES.

Area	Number of centres provided at end	of Child Welfare	Number of children who first attended a centre during the year, and who at their	Number of children who attended during the year and who were born in :			Total Number of children who attended	Number during children of att	Total Attend- ances		
	of year	during the year	first attend- ance were under 1 year of age	1962	1961	1960- 57	during the year	Under 1 year	1 but under 2	2 but under 5	during the year
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
1	9	303	949	742	498	239	1,479	9,567	1,225	686	11,478
2	3	152	629	537	432	97	1,066	7,115	376	69	7,560
3	4	192	656	502	421	342	1,265	7,225	795	876	8,896
4	8	272	545	599	486	498	1,583	6,685	1,809	1,842	10,336
5	6	136	232	387	240	281	908	2,184	424	490	3,098
6	10	131	182	144	168	241	553	1,408	579	995	2,982
7	25	473	934	805	790	575	2,170	8,843	1,917	1 563	12 323
8	10	186	411	596	444	564	1 604	4,189	1,235	1,739	7,163
9	11	214	678	544	520	348	1,412	5,363	1,241	825	7,429
10	6	338	612	519	387	246	1,152	5,790	676	526	6,992
Γotal	92	2,397	5,828	5,375	4,386	3,431	13,192	58,369	10,277	9,611	78,257

In addition North Riding children attended centres established by local authorities in adjacent areas as follows :—

Barnard Castle	25	8	5	3	-	8	53	-1	-1	53
Boroughbridge	49	5	7	6	9	22	118	26	27	171
Darlington Middleton-in-	570	4	3	1	1	5	9	9	-	18
Teesdale	25	1	1	1	-	2	4	1	-	5
Vork	152	22	17	12	6	35	155	83	10	248
Γotal	821	40	33	23	16	72	339	119	37	495

Care of Expectant and Nursing Mothers and Children under School Age.

29 ante-natal clinics are held on premises owned or rented by the County Councill at places in the Riding either separately or in conjunction with infant welfare sessions; these are staffed by medical officers with special experience in this type of work.

Specimens of blood are taken at all the County Council ante-natal clinics for transmission to the pathological laboratories set up either in the hospital service or in the Regional Blood Transfusion Service. In certain areas, practitioners refer patients to the ante-natal clinics so that blood specimens can be taken. The number of women who attended increased from 2,121 to 2,234; the total number of ante-natal attendance at North Riding clinics increased by 1,575.

Pregnant women from the Riding have attended formal ante-natal clinics in Middlesbrough, Ripon and York. Unfortunately there is still a large proportion of ante-natal women whose blood is not taken for examination during every pregnancy; this is only revealed when an investigation of stillbirths and neo-natal deaths is carried out.

As regards mothercraft training, this is one of the essential services provided at ante-natal and infant welfare clinics. The absence of such teaching at general practitioners' ante-natal sessions is the main difference between a private ante-natal clinic and one operated by the local authority. Film strips, posters, leaflets and models are used to illustrate the points in the talks given by medical officers and health visitors.

Maternity outfits containing sterilised dressings and cord powder are provided through clinics and by midwives for all women who intend to have a domiciliary confinement. Each of the ten divisional offices has some accommodation for storage; in addition, midwives hold spare outfits in their houses. The outfit supplied includes all the items set out in the appropriate Ministry's circular.

The following table shows the variation between the numbers of attendances made by women at county ante-natal clinics between 1958 and 1962. The relative fall, in relation to the total number of pregnancies, can be ascribed to two causes, the tendency of hospital ante-natal clinics to hold on to their patients and not to refer them for health education to local authority clinics and to increased bookings by general practitioners.

		1958		1959		1960		1961		1962	
Item		Ante- Natal	Post Natal	Ante- Natal	Post Natal	Ante- Natal		Ante- Natal		Ante- Natal	Post
Clinics		37	4	36	4	34	4	34	4	29	3
Sessions		1,110	90	1,090	90	1,141	90	1,203	108	973	72
Women attending		2,008	33	2,058	22	2,214	27	2,121	26	2,234	22
Total attendances		5,164	33	4,993	23	4,956	27	5,014	28	6,589	22

In many rural areas special transport is hired to convey mothers and young children to centres established in nearby townships. In 1962, 29 centres were provided with this additional service at an approximate cost of £957. Sessions are held weekly, fortnightly or monthly, depending upon the need and the availability of staff and premises. Medical advice was available to mothers at all centres either from whole-time medical officers or from part-time medical practitioners who were paid sessional fees. Qualified nursing staff were in attendance at all sessions.

Mobile Infant Welfare and Ante-Natal Unit.

Many of the rural villages and outlying hamlets in the North Riding within a radius of 25 miles of New Earswick are provided with a good service by means of a mobile clinic; this unit, during the year under review, was drawn by a Land Rover. The unit is staffed by a woman medical officer, a qualified health visitor and a driver/clerk. Waiting rooms are hired in villages for use in conjunction with this clinic. The car is also used for the purpose of transporting mothers and children from hamlets and outlying dwellings to and from the unit. The attendances are set out in the following table; these attendances are aggregated with those for static centres in the totals on page 12.

	1956	1957	1958	1959	1960	1961	1962
Villages visited	20	19	19	18	19	16	16
Sessions held during the year	 575	614	624	620	590	578	586
Expectant Mothers, Nursing							
Mothers and/or children using the service	 1,177	1,042	945	914	973	1,102	1,199
Total number of attendances	 5,875	5,642	5,301	5,346	6,265	6,728	6,877

Care of Unmarried Mothers and their Babies.

Grants were made to the following moral welfare association who gave, through their paid and voluntary workers, valuable help and advice to expectant and nursing unmarried mothers:—York Diocesan Association for Moral Welfare (York and North Riding Branch); The Five Deaneries Moral Welfare Association; Co-ordinating Moral Welfare Council for the Deaneries of Middlesbrough, Guisborough and Stokesley; Richmondshire Moral Welfare Association.

Fifteen unmarried mothers were admitted to Heworth Moor House, York, during 1962; another 43 patients were admitted to mother and baby homes at Birmingham, Darlington, Harrogate, Hull, Kendal, Leeds, London, Newcastle, Gateshead and Salford. The social workers employed by the diocesan associations continued to provide excellent service in this field.

The Care of Crippled Children (pre-school age groups).

Orthopaedic clinics, attended by an orthopaedic surgeon or orthopaedic registrar were held in premises provided by the County Council at Thornaby, South Bank, Normanby, Guisborough, Redcar, Loftus, Whitby, Malton, Northallerton, Richmond and Scarborough; clinics were also held at the Adela Shaw Orthopaedic Hospital, Kirkbymoorside and, by arrangement with the York City Council, in the York School Clinic.

Some 430 children attended orthopaedic clinics during the year; of these 294 (a decrease of 19) were new cases. The total number of attendances at these clinics during the year was 1,102 as compared with 1,143 in 1961.

Children over the age of two years who are materially handicapped by crippling defects come within the ambit of regulations made by the Minister of Education under the Education Act, 1944. Admissions of crippled children under the age of two years to hospitals were arranged for 23 children during 1962; none of these children was suffering from tuberculosis.

The Chief Dental Officer reports as follows:-

Dental Treatment for Expectant and Nursing Mothers.

Though this year has shown a decline in the number of patients examined, again a slightly higher number of patients continued until their course of treatment was completed. This drop in the number of patients examined, is to be expected as the work for expectant and nursing mothers can now be carried out free of all charges under the National Health Service Act. The number of fillings and of dentures supplied remains about the same as last year.

Dental Treatment for Children under School Age.

The increase in the number of children under school age attending clinics is again encouraging, and I think the reduction in the number of extractions completed for the young school child may be the result of this early attendance at the clinics. I would, however, like to see more mothers taking advantage of this scheme. The dental staff is grateful to the Health Visitors and Midwives whose support make this scheme possible.

(a) Number provided with dental care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	. 121	108	104	94
Children Under 5	1,891	746	665	1,681

(b) Forms of dental treatment provided.

all page 180 a								ntures vided	Radiographs
	Scalings and Gum treatment	Fillings	Silver nitrate treatment	Crowns or Inlays	Extractions	General Anaesthetics	Full upper or lower	Partial upper or lower	
Expectant & Nursing Mothers	26	80	-	-	523	75	75	27	16
Children under 5	9	359	399	110	746	341	_	_	8

Family Planning.

Grants of £25 each were made to the local branches of the Family Planning Association at Northallerton, Richmond, Scarborough, Thornaby and Whitby.

DOMICILIARY MIDWIFERY SERVICE.

Domiciliary Midwifery.

The whole of the domiciliary midwifery service provided under the National Health Service Act is administered directly by the County Council. At the end of the year under review 16 whole-time midwives and 1 part-time were employed in urban districts, 30 full-time nurses (plus 6 part-time) undertook combined duties and 57 nurses (plus 3 part-time) were carrying out generalised duties in rural districts.

The number of domiciliary confinements during the year is set out in the table below. For comparative purposes, figures for the years 1950, 1955, 1958, and 1961 are also given:—

	1950	1955	1958	1961	1962
Total Domiciliary Confinements	 3,017	2,306	2,410	2,490	2,493
Percentage of total notified births	56·5	39·9	46·4	33·2	31·8

Deliveries attended by midwives employed by the County Council during 1962 :-

Doctor n	ot booked	Docto	r booked	7000
Doctor present at time of delivery of Child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Total
14	69	535	1,785	2,403

During the year, 655 mothers, delivered in hospital, were attended by domiciliary midwives after discharge before the tenth day, an increase of 104 on the previous year. Too many women pregnant for the 5th, 6th or 7th time do not go to hospital but have their babies at home. It is in this group that most maternal deaths occur; practitioners and midwives have difficulty in persuading these multiparae to go to hospital, but these women together with those having their first baby should have priority on medical grounds.

Ante-natal supervision is provided by medical officers and midwives at the antenatal clinics and at certain infant welfare centres, as well as at special midwives' clinics; in addition, those midwives who are booked by expectant mothers who don't attend clinics, visit their patients at intervals. There is, on the whole, good co-operation between county midwives and general practitioners who undertake domiciliary midwifery under the maternity medical services scheme. A large percentage of women who wish to have a domiciliary delivery are booking their doctor under these arrangements

Notification of Intention to Practice.

It is the duty of every midwife who wishes to practice in the area of a local supervising authority to notify that authority each year of her intention to do so; the following table shows the number who registered during the year 1962 in various categories (figures for preceding year in brackets).

No. of Midwives	Employed by the County Council	Engaged in private practice	Employed by Hospital Management Committees
*173	113	4	48
*(168)	(111)	(2)	(48)

^{*}Included in the total are 8 midwives employed at the Military Families Hospital at Catterick Camp.

Medical Aid Records.

The Central Midwives Board is empowered by statute to make rules regulating supervision and restricting, within due limits, the practice of midwives. A midwife acting as such, or as a maternity nurse, is obliged to observe these rules. One of the most inportant of these rules is that she must send for medical aid in all cases of illness of the patient or child or for any abnormality occurring during pregnancy, labour or lying-in period. The following table shows the nature of some of the reports sent in by the county midwives, district nurse/midwives, independent midwives and midwives employed in maternity homes or nursing homes during the period under review as compared with the previous five years:—

	1957	1958	1959	1960	1961	1962
Requests for medical aid	 654	612	581	723	537	358
Stillbirth reports	 38	51	34	47	72	31
Rise in temperature	 32	16	17	18	1	8
Death of mother	 1	-	1	-	-	-
Death of infant	 12	8	14	9	14	5
Laying out dead body	 15	11	22	8	11	14
Liability to be a source of infection	 47	27	44	40	25	17

The following is a classification of the stages when midwives had to summon medical aid-

medicar aid—	1957	1958	1959	1960	1961	1962
During pregnancy	 97	89	69	90	100	70
During labour	 347	354	332	450	319	210
During lying-in period	 110	84	79	98	45	36
In respect of child	 100	85	101	85	73	42

Liability to be a Source of Infection.

In accordance with the Rules of the Central Midwives Board, there is an obligation on a midwife to notify the local supervising authority when she is liable to be a source of infection. The number of notifications received each year since 1948 has varied from 103 in 1948, to 25 in 1953, and 44 in 1959, and 17 in 1962. The medical officers in charge of the ten administrative areas have been given the duty of ensuring that proper steps are taken by each midwife before she returns to duty. In this connection, the assistance of the Public Health Laboratory Service is gratefully acknowledged for investigation into nose, throat, ear and other infections of midwives when the safety of mothers and babies requires such steps to be taken.

Stillbirth and Neo-Natal Deaths.

Investigation by the Area Nursing Officers was made into 114 stillbirths and 33 neo-natal deaths.

Premature Births.

			PREM.	ATURE	LIVE	BIRTH	S			PRI	-	TURE RTHS
Born in hospital		Born at home and nursed entirely at home		Born at home and transferred to hospital on or before 28th day		Born in home and transferred to nursing home and ursed hospital on or hospital on or hospital or or or transferred to home and		transferred to hospital on or before 28th		in hospital	at home	Born in nursing home
Total	Sur- vived 28 days	Total	Sur- vived 28 days	Total	Sur- vived 28 days	Total	Sur- vived 28 days	Total	Sur- vived 28 days	Born	E E	Bornin
372	314	64	62	21	17	-	-	1	-	67	15	-
					1957	1958	-	959	1960	196		1962
			e births I-births		414 75	410		70	390 74	46	4	458 82

Notification of Puerperal Pyrexia.

In 1962, 18 notifications were received; the circumstances of 13 patients who had a rise in temperature were investigated by the superintendent nursing officers.

Public Health (Ophthalmia Neonatorum) Amendment Regulations, 1937.

Ophthalmia neonatorum is an infectious condition of the eyes of infants commencing within twenty-one days of the date of birth, and under these Regulations the duty of notifying cases is placed on the medical practitioner in attendance. If a midwife is in attendance, she is obliged by the Rules of the Central Midwives Board to call in a doctor where there is any eye discharge, however slight. In 1962 no cases were reported.

Analgesia used by Midwives.

At the end of 1962, 111 domiciliary midwives employed in the Council's service were qualified to use gas and air analgesia.

The following table may be of interest; it concerns the midwives employed by the County Council (the figures in brackets are those for 1961).

Domiciliary midwives	midwives trained to Sets of use gas/air apparatus		Patients re gas/air domiciliary	from	Patients receiving pethidene from domiciliary midwives		
use gas/air		domiciliary	Doctor not	Doctor	Doctor not	Doctor	
apparatus		births	present	present	present	present	
111	101	2,403	1,321	451	944	333	
(108)	(95)	(2,423)	(1,223)	(336)	(995)	(292)	

HEALTH VISITING.

The general arrangement is that in populous areas certificated health visitors are employed on health visiting and school nursing duties. Thirty-eight such nurses were employed whole-time and one part-time in 1962. In addition one qualified health visitor was employed jointly on tuberculosis and venereal disease work in the Scarborough district and an experienced but uncertificated health visitor continued tuberculosis visiting and school nursing in the Thornaby area. In rural districts nurses are employed on generalised duties; 36 of these nurses held the health visitor's certificate.

Health visiting had to be more selective in certain areas where there was a shortage of staff. The following table sets out details of visits made by health visitors during 1962, classified as requested by the Ministry of Health.

lane	Expectant mothers	Children under 1 yr. of age	Children age 1 and under 2 yrs.	Children age 2 but under 5 years	Tuber- culous house- holds	Other cases
Effective Visits	1,747	36,360	17,405	34,932	2,684	17,480
Ineffective Visits	241	4,123	2,275	3,198	706	695

The total number of children under 5 years of age visited was 35,103 and 27,420 household were concerned in these visits.

Training.

The County Council altered its basis of payments during health visitor training. Six to eight trainees are appointed each year at \(\frac{3}{4} \) of the commencing salary of a certificated health visitor and sign an agreement to serve in the North Riding for two years after receiving this training payment for an academic year. Even this re-alignment has not been fully successful in filling vacancies in the industrial areas: in my view London weighting should be given to salaries of the health visitors working in congested urban areas.

As in previous years, facilities have been afforded to trainees at the Bolton Technical College to obtain a week's experience of work in rural areas.

Liaison with General Medical Practitioners and Hospitals.

It is not usually possible to allocate the services of a health visitor solely to one medical practice. Close liaison exists in some parts of the Riding but there is scope for improvement in others: this form of co-operation is encouraged where practicable.

The extent to which "follow up" of patients discharged from hospitals depends largely upon each hospital supplying the necessary information. Requests, when made, receive prompt attention: it is vital that some days' notice be given by hospital staff if a special bed or other non-standard equipment is required for the proper home nursing of seriously disabled patients.

HOME NURSING SERVICE.

When the County Council took over the home nursing service from district nursing associations in July, 1948, it was decided to employ whole-time home nurses in the urban areas. Following the changed pattern of midwifery, it has become the practice to appoint doubly qualified nurses to undertake combined duties in these districts. On 31-12-62 there were 22 whole-time home nurses, 21 part-time home nurses, 30 nurses (and 7 part-time) undertaking midwifery and home nursing, and in the rural districts 57 nurses (and 3 part-time) were undertaking duties of a generalised character: home nurses have worked very well with the general practitioners and complaints regarding them are rare.

The main types of cases attended by home nurses are medical, surgical and tuberculosis cases. There is no night nursing service as such, although many nurses do an evening round; a night nursing service does not seem practicable or justifiable in an area which is mainly rural.

During the year under review 24,217 patients received domiciliary visits to the total number of 191,719 and an analysis of these patients is set out below.

Type of Case	Medical	Surgical	Infec- tious diseases	Tuber- culosis	Maternal compli- cations	Others	Total
Number of cases Number of visits	19,036 146,310	4,551 31,943	9 30	543 9,365	48 655	30 3,416	24,217 191,719

Of the total patients 3,045 were over the age of 65 at the date of the first visit and 94,418 (an increase of 8% on the preceding year) visits were made to elderly patients. In addition 2,401 visits were made to 465 children who were under the age of 5 at the first visit.

Training.

Arrangements are made through the Queen's Institute of District Nursing for suitable candidates to take a three or four month's course of district training. In some cases recipients of health visitors scholarships undertake combined district and health visitors training under the auspices of the Queen's Institute Scheme.

VACCINATION AND IMMUNISATION.

The health visitors are given the duty of stimulating the interest of patients in immunisation of the child population against diphtheria and poliomyelitis but it is most difficult to interest a parent in vaccinating a child. The virtual disappearance of diphtheria and smallpox tends to make parents careless and difficult to convince on the merits of protective measures. Many practitioners, though they have a financial incentive to immunise, are not active in this matter until a case of diphtheria occurs, or a positive swab is reported.

During 1952 the County Council added a scheme for immunising children against whooping cough and for some years both single antigens and a combined pertussis were supplied. Triple antigen was also provided at the urgent request of local medical practitioners. Sessional meetings were held as in previous years in the urban areas, mostly staffed by whole-time officers.

A fee of 5/- is paid to general medical practitioners for every notification of immunisation or vaccination except when sessions are organised by area offices when the proper sessional fee is payable.

DIPHTHERIA IMMUNISATION.

The maintenance of a high cegree of immunity against diphtheria depends to a great extent on the work of the health visitors; unfortunately in the densely populated Tees-side area the health visiting staff has been depleted for some time and this has affected the figures shown below for the year 1962.

		CHILD	REN BOR	N IN TH	IE YEARS			
	1962	1961	1960	1959	1958	1953-57	1948-52	Total
Primary series	 1584	2818	343	97	74	448	65	5429
Booster doses	_		22	14	41	2442	154	2677

SMALLPOX VACCINATION.

The following table sets out the position as regards vaccination against smallpox in the year under review. The smallpox epidemic which affected various parts of the United Kingdom spread to Yorkshire and caused some panic: the figures show the effect on vaccination. The issue of lymph was controlled in conjunction with the staff of the Public Health Laboratory Service.

			Vacin	ations		Re-vaccinations						
Yea	r	Under 1 yr.	1–14 years	15 yrs. & over	Total	Under 1 yr.	1-14 years	15 yrs. & over	Total			
1956		1,850	264	166	2,280	13	100	262	375			
1957		1,897	257	139	2,293	2	120	293	415			
1958		2,306	351	168	2,825		147	305	452			
1959		2,155	400	166	2,721		143	306	449			
1960		2,353	684	201	3,238	-	102	346	488			
1961		2,358	1,038	301	3,697		150	378	528			
1962		2,453	8,332	7,978	18,763	2	3,872	11,790	15,664			

POLIOMYELITIS VACCINATION.

In February, 1962, the Ministry of Health informed local authorities that oral poliomyelitis vaccine (Sabin) would become available during that month. Special arrangements for storage had to be made and the oral vaccine came into use in the Administrative County in April. Salk vaccine was still available and during the year under review was used but the simpler method of administration of the Sabin vaccine caused a smaller demand for Salk vaccine. The following table shows the use of Salk and Sabin vaccine in the County during the year under review. General practitioners participated in the scheme but the majority of the work was undertaken by the County Council's medical officers.

	Sabin							SALK		
Year of Birth 1 Dose	1 Doss	2 Doses	3 Doses	Reinfe	10000	Voor of	ion	ons	suo	ons
	1 Dose	2 Doses	3 Doses	After 2 Injections of Salk	After 3 Injections of Salk	Year of Birth	1 Injection	2 Injections	3 Injections	4 Injections
1943-62	797	814	3,971			1943-62	27	2,767		
1933-42	110	108	659			1933-42	8	727		
Others	129	172	1,191			Others	9	1,121		
Total	1,036	1,094	5,821	7,230	7,148		44	4,651	6,721	781

Whooping Cough Immunisation.

(Figures refer to year of birth).

	19	62 1961	1960	1959	1958	1953-57	1948-52	Total
Primary course	16	70 2249	279	74	56	302	39	4669

NOTES ON THE AMBULANCE SERVICE.

County Medical Officer's Report, 1962.

The Ambulance Service has been provided in the following ways:-

1. A direct service by the Health Committee.

2. Customer arrangements with the adjoining authorities.

Stations.

The new Depot at Redcar came into use in November, 1962, and a start was made on a new Station at Thornaby.

Radio Control.

The system of radio control continues to operate from the Police masts at Richmond, Cold Kirby, Boulby and Ravenscar.

In April, 1962, the benefits of radio control were extended to the whole of the ambulance fleet by the purchase of 29 mobile sets for the vehicles not previously equipped with wireless. A set was also placed in the County Ambulance Officer's private car. This has ensured still further co-ordination of journeys and helped in maintaining the lower figure of miles per patient.

Statistics.

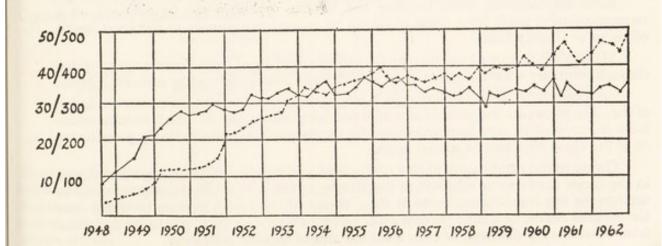
The same reasons that have operated in past years for the increased demand on the Ambulance Service are advanced again for 1962 and the Ambulance Service remains at full stretch.

It will be noted, however, that although there has been an increase of 35,484 patients between 1955 and 1962, the mileage run during 1962 was 29,447 less than the 1955 mileage.

Yea	r	Patients	Mileage
1954		138,737	1,355,759
1955		149,399	1,402,950
1956		147,062	1,390,834
1957		140,147	1,288,011
1958		144,953	1,242,171
1959		152,763	1,251,459
1960		161,810	1,288,422
1961		174,792	1,321,770
1962		184,883	1,373,503

____ QUARTERLY MILEAGE

----- QUARTERLY PATIENTS



Personnel.

The number of personnel directly employed by the County Council on December, 31st, 1962, was as follows:—

	1st Jan., 1961	31st Dec., 1962
Redcar Depot	 21	21
Scarborough Depot	 19	19
Malton Station	 6	6
Northallerton Station	 8	8
Thirsk Station	 8	8
Haxby Station	 8	8
Richmond Station	 7	8
Whitby Station	 4	4
Thornaby Station	 7	7
Kirkbymoorside Station	 4	4
Bainbridge Station	 3	3
Guisborough Station	 7	8
Carlin How Station	 4	4
	106	108

Two additional driver/attendants were appointed in May, 1962, one at Guisborough and the other at Richmond in an endeavour to maintain adequate emergency cover in these areas.

Vehicles.

In June, 1962, the establishment of ambulance vehicles was increased by one traditional ambulance and one dual purpose vehicle. These are available as temporary replacements for vehicles undergoing repairs. This resulted in a total of 72 vehicles, 59 relying on ordinary petrol for fuel and 13 on diesel oil.

SECTION 28, PREVENTION OF ILLNESS— CARE AND AFTER-CARE.

(a) Tuberculosis.

The proposals made by the County Council under Section 28 of the National Health Service Act, 1946, as approved by the Minister of Health provide for the carrying out of the Health Committee's functions by area sub-committees; in fact several of the functions of the Health Committee under Section 28 are carried out by area after-care committees. Care committees are established in four out of ten health areas; care work in the other six is carried out directly by the local health sub-committees; the grants made during 1962 are set out below.

Extra nourishment, beds, bedding and nursing requisites can be obtained on a recommendation made by a chest physician or general practitioner to the local health office, or to County Hall.

Materials for occupational therapy for patients discharged from santoria are provided through voluntary organisations, e.g. the British Red Cross Society, or by care committees.

Each person notified as suffering from tuberculosis can obtain on the recommendation of the chest physician one pint of extra milk per day without charge. Additional nourishment is provided by care committees on the recommendation of the family practitioner or of the chest physician in special cases.

Owing to the rural nature of this county and to the policy of providing chest clinics in the major towns in or adjacent to the Riding, it has not usually been practicable to arrange for the regular attendance at these clinics of the health visitors in whose area the patients reside, as a large percentage of the patients seen on any particular day come from other nurses' districts, or even from the area of another authority.

Local housing authorities have co-operated well in the matter of re-housing tuber culous families; help is generally readily given by housing allocation committees. In the course of follow up some 700 home contacts of tuberculous families have been examined by the chest physician: 5 of these contacts received some degree of specialist treatment for tuberculosis.

It has been the practice since 1950 to reimburse care committees the amount of their approved expenditure for the previous year. During the financial year 1962/3 grants were made to the various committees to enable them to assist tuberculous patients and patients suffering from other forms of illness; details of these grants are as follows:—

Care Committee Iston		sources	Net expenditur reimbursed by County Counci			
	£ 510	£	£ 370			
	40	5	43			
		3	87			
	277		277			
	:	510 48 87	510 140 48 5 87 —			

(b) Mental Illness or Defectiveness.

Arrangements for the care and after-care of persons suffering from mental illness or defectiveness are dealt with by the Mental Health services sub-committee of the Health Committee; see page 27 for details of the work of this standing sub-committee.

(c) OTHER TYPES OF ILLNESS

As regards illness generally, certain items of equipment, e.g. special beds and mattresses, can be obtained on request from local health offices; in addition each home nurse has access to a supply of nursing requisites which she may lend to a patient without charge. Health visitors are being used by medical officers of health in most areas to follow up cases of notifiable disease and to ensure that adequate nursing is available for those not in hospital. They are better able to give advice to parents on the prevention of further infection and the care of children than other staff, particularly now that terminal disinfection has been virtually abandoned except after certain serious diseases, e.g. tuberculosis, typhoid fever and smallpox.

(d) Convalescent Home Accommodation.

Convalescent accommodation was offered to 30 individuals in 1962 as compared with 26 in 1961, 30 in 1960, 26 in 1959 and 53 in 1955. Accommodation is found for adults and children of both sexes and is limited to a maximum stay of 4 weeks. As this service is a type of holiday-rest service for those who are "run-down," care has to be exercised to guard against persons using it as a means of obtaining a holiday for little or no cost.

The following table gives details of admissions to convalescent homes through the County Council's scheme in 1962:—

	No	. ac	lmit	ted	Total	Aver.							Net	+ 0	not
Convalescent Home	Adı	ılts	Chil- dren		Stay in	Stay in	Cost including travelling			Amount Recovered			(excluding admini- stration)		
	М	F	М	F	days	days	tra	vem	ing				Str	atic	n)
							£	s.	d.	£	s.	d.	£	s.	d.
Blackburn, St. Anne's	5	8	-	-	182	14-0	184	9	6	26	3	4	158	6	2
Bearwood, Scarborough	1	8	2	1	163	13.6	139	7	3	15	4	6	124	2	9
Brentwood, Blackpool	-	1		1	-28	14-0	27	7	6		2	0	27	5	6
Semen, Ilkley	-	2	-	-	28	14.0	22	1	6	3	15	4	18	6	2
Morris Grange,						1									
Middleton Tyas	1	-	-	-	9	9.0	3	8	0	ly di	8	0	3	0	0

PROTECTION OF CHILDREN FROM TUBERCULOSIS.

During 1962, 30 employees of the Children's Committee were surveyed in connection with their work or proposed employment in close contact with groups of children; the cost is charged to Section 28 of the National Health Service Act, 1946. These examinations are carried out by the Mass Radiography Service when surveys are being held in a suitable locality; in other cases arrangements are made with a private radiologist, who uses full size films.

In addition 272 persons employed by the Education Committee and 179 applicants for admission to a teachers' training college were x-rayed. The co-operation of the medical and technical staff of the mass miniature radiography units has been much appreciated.

HEALTH EDUCATION.

Advice on personal and environmental hygiene is freely given by health visitors to mothers with children under school age and to families in which a clinical case of tuberculosis has occurred; generally the advice is welcomed and accepted. Advice is also given on health matters at infant welfare centres, ante-natal and post-natal clinics, both orally and by means of pamphlets. Members of the medical and nursing staff and two members of the lay staff have given talks; the county health inspectors have systematically dealt with the peculiar problems of food handling in talks given to employees in the school meals service. A film projector has been provided by the Council to help in this work: films are hired from time to time and a number of films are leased under 6 year agreements. The provision of more new clinics with adequate waiting rooms, capable of being blacked out makes health shows more easy to organise. Leaflets, posters and films were used and talks given to draw attention to the hazards to health of smoking.

CHIROPODY SERVICE.

In 1961 the County Council decided to provide a chiropody treatment service for

(a) Persons aged 65 years and over.

(b) The physically handicapped.(c) The mentally disordered.

(d) Expectant mothers.

It was not possible to start the service until early in 1962 although chiropody treatment had for some time been provided in certain areas by voluntary organisations without financial assistance from the County Council. The scheme provides for treatment of those in the approved catagories when referred by a registered medical practitioner or a County Council district nurse, midwife, health visitor or school nurse. The standard charge made to patients is 2/- for each treatment; persons over 65 whose sole income is derived from one of the state pensions or from the National Assistance Board, are not required to pay anything. Treatment is largely centred on fixed clinics, although urgent cases who are unable to travel by public transport will be provided with treatment at home or will be transported to a fixed centre in an ambulance service vehicle or a hospital service car.

Whole-time or part-time chiropodists treated 2,238 patients at 13 centres: the same chiropodists also gave 269 domiciliary treatments. Chiropodists employed by voluntary associations treated 5,903 patients at 20 centres: 96 domiciliary treatments were also provided through these organisations. This service is expected to expand as the demand increases and further chiropodists become available.

DOMESTIC HELP SERVICE.

The domestic help service continues to develop. In 1947, 46 families were given help by 45 part-time helpers as compared with 681 families in 1954, 766 in 1956, 953 families in 1958, 1,263 in 1960, 1,431 in 1961, and 1,583 in 1962. In December, 1957, the number of helpers employed by the County Council was 25 whole-time and 150 part-time; in December, 1962, the corresponding service had 20 whole-time and 537 part-time employees. It has been found desirable in rural areas to employ part-time domestic helps in order to avoid waste of time travelling between towns and villages.

Priority is given (i) to women having a domiciliary confinement, (ii) to persons requiring help because of sickness or pregnancy of the housewife or her absence in hospital, (iii) to other cases of acute illness particularly of children, where there is a number of healthy children to be cared for, and (iv) to aged persons or chronic sick persons who are unable to obtain admission to hospital. During the year under review the establishment was increased from 154 to 160 full-time helps or their equivalent in part-time workers.

At the end of 1962, the standard charge to persons obtaining demestic helps was 4/- per hour; recovery of whole or part of the cost of providing the service from the person receiving domestic help is assessed according to a scale. The following table gives the number of helps employed, the hours worked, the familes who received help and those who paid the standard charge in each of the ten health areas of the Riding.

	Г	Domestic Helps	s	Recipients of Domestic Help				
Area	Emplo regist at end	ered	Hours worked	No. who received help	No. who paid standard charge			
	Whole-time	Part-time						
Thornaby	 12	22	37,100	184	27			
Eston	 1	33	52,220	227	12			
Redcar	 -	28	37,909	227	25			
Guisborough	 4	16	26,147	106	3			
Whitby	 -	15	15,198	95	21			
Ryedale	 -	51	28,620	93	1			
Bulmer	 _	45	24,501	147	26			
Wensleydale	 -	63	23,614	136	17			
Richmond	 -	36	25,892	93	13			
Scarborough	 3	28	32,837	275	36			
Totals	 20	337	304,038	1,583	181			

MENTAL HEALTH SERVICES.

The Mental health service has continued to expand. There is evidence that the enlightened attitude fostered by the Mental Health Act, 1959, is gaining ground, and interchange between hospital and community now occurs much more freely.

Mental Illness.

A comprehensive service is being provided throughout the Riding. The mental welfare officers work on a rota system for duty outside office hours; those on duty are available for consultation and for the admission of patients to psychiatric hospitals.

The number of patients referred by general practitioners and hospitals during the year shows an increase of 19% over that for the previous year, and the high standard of co-operation between the authorities concerned has been maintained. A psychiatric out-patient clinic, staffed from St. Luke's Hospital, Middlesbrough, was opened at the Friarage Hospital, Northallerton, in November, and this is attended by the mental welfare officers as required.

Patients have, in approved cases, been sent for rehabilitation to hostels provided for this purpose by York and Darlington County Boroughs and by the Mental After-Care Association.

A psychiatric social club was established by the mental welfare officers in Scarborough, and has proved most successful.

Admissions to Hospital.

	Proc	edure		1961	1962
(i)	Section	5 (Inform	nal)	218	188
(ii)	Section	25		32	20
(iii)	Section	26		15	17
(iv)	Section	29		87	140
(v)	Section	40		-	3
(vi)	Section	60		1	1
(vii)	Section	135		-	2
		Totals		353	371

The figures for years prior to 1961 have been omitted as they relate to admissions under the old procedures and provide no basis for comparison.

Number of Patients referred during the year to 31-12-62.

	1	Ment	ally i	11	P	sycho	path	ic		To	tals		
Referred by		der 16	16 and over			der 16	16 and over		Under age 16		16 and over		Grand Total
	M	F	M	F	M	F	М	F	М	F	M	F	nehit in
(a) General Practitioners	-	-	103	237	-	-	4	6	-	-	107	243	350
(b) Hospitals, on dis- charge from in- patient treatment	2	_	86	141	_		3	7	2	_	89	148	239
(c) Hospitals, after or during out-patient or day treatment	_	_	35	58	_	_	_	_	_	_	35	58	93
(d) Local education authorities	_	_	_	_	_	_	_	_	_	_	-		_
(e) Police and courts	-	-	17	21	_	-	2	2	-	_	19	23	42
(f) Other sources	-	-	26	33	-	-	1	1	-	_	27	34	61
(g) Totals	2	_	267	490	_	_	10	16	2	_	277	506	785

Total number of patients under Local Health Authority care at 31-12-62.

N	Aent	ally I	11	P	sycho	opath	ic		To	otals	1				
Unage			and	1,00000	der 16		16 and Und			16 and over		Grand Total			
м	F	М	F	М	F	М	F	М	F	М	F	-00551			
2	1	128	217	_	_	10	12	2	1	138	229	370			

Visits made in connection with the care and after-care of patients-3,401.

Mental Subnormality.

As in previous years, my thanks are due to the psychiatrists employed by the Leeds and Newcastle-upon-Tyne Regional Hospital Boards for their invaluable help in the assessment of difficult cases, and to the various hospitals for co-operation in the provision of short-term care. The numbers awaiting long-term admission in both urgent and non-urgent categories show a reduction as compared with the figures for last year; there can be no doubt that, with the help given by training centres and mental welfare officers, many patients whose admission to hospital would formerly have been regarded as essential can now remain in the community.

During the year, a successful youth club for subnormal girls and boys has been established by the Scarborough mental welfare officers at the Alderman Cockerill Junior Training Centre.

Admissions to Hospital.

1. Hospital admissions, discharges and deaths during 1962, with comparative figures for the five preceding years, are given in the following table:—

Van	Adm	itted	Disch	arged	Dea	iths
Yea	M.	F	M.	F.	M.	F.
1957	 14	4	8	13	4	4
1958	 15	13	10	11	7	3
1959	 17	6	10	7	1	5
1960	 21	10	6	3	5	7
1961	 8	10	6	7	1	4
1962	 7	6	6	1	5	6

2. Number of patients in Local Health Authority area on waiting list for admission to hospital at 31-12-62.

01				Subn	orma	1			erely orma	1		То	tals		
			Un	der 6		and er	Un	der 6		and er		der 6	-	and ver	Grand Total
			М	F	М	F	М	F	М	F	М	F	М	F	
(a)	In urgent need hospital care	of 	1	_	1	_	6	4	_	_	7	4	1	-	12
(b)	Not in urgent no of hospital care	ed	_	1	_	2	. 1	2	1	1	_	3	1	3	7
(c)	Totals		1	1	1	2	6	6	1	1	7	7	2	3	19

3. Number of admissions for temporary residential care (e.g. to relieve the family).

		Subn	orma	1		Seve	erely orma	1		То	tals		
	-	Under 16		and		Under 16 ar 16 ove							Grand Total
	М	F	М	F	M	F	М	F	М	F	M	F	
(a) To N.H.S. hospitals	2	-	2	_	17	17	1	_	19	17	3	-	39
(b) To L.A. residential accomodation	-	-	_	-	-	-	-	-	-	-	_	-	There's
(c) Elsewhere	-	-	-	1	1	_	-	-	. 1	-	-	1	2
(d) Totals	2	_	2	1	18	17	1	_	20	17	3	1	41

Number of patients referred during the year to 31-12-62.

		Subn	orma	1			erely orma	1		То	tals		
Referred by		der 16		and er	Under age 16			16 and over		der e 16	16 and over		Grand Total
3 8	M	F	М	F	М	F	М	F	М	F	М	F	
(a) General Practitioners	-	_	-	-	1	1	-	-	1	1	-	-	2
(b) Hospitals, on dis- charge from in- patient treatment	_	_	6	3	_	1	_	_	_	1	6	3	10
(c) Hospitals, after or during out-patient or day treatment			_	-	_		_	_	_	_	_	_	_
(d) Local education authorities	10	6	6	3	12	9	3	_	22	15	9	3	49
(e) Police and courts	-	-	-	-	-	_	-	_	-	-	-	-	-
(f) Other sources	2	-	15	13	7	8	5	5	9	8	20	18	55
(g) Totals	12	6	27	19	20	19	8	5	32	25	35	24	116

Total number of patients under Local Health Authority care at 31-12-62.

		Subn	normal		Severely Subnormal		Totals						
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Grand Total
	М	F	М	F	М	F	М	F	М	F	М	F	
(a) Total number	24	40	150	132	82	56	60	55	106	96	210	187	599
(b) Attending day training centre	3	24	19	10	39	33	10	10	42	57	29	20	148
Awaiting entry thereto	6	5	1	2	7	8	1	_	13	13	2	2	30
(c) Resident in residen- tial Training Centre	_	_	11	7	_	-	2	_	_	_	13	7	20
Awaiting residence therein	2		3	7	_	_	_	_	2	_	3	7	12
(d) Receiving home training	_	_	-	_	_	_	_	_	_	_	-	-	_
Awaiting home training	_	_	_	_	_	_	_	_	_	_	-	_	A NEO
(e) Resident in L.A. Home/Hostel	_	_	_	_	_	_	_	_	_	_	_	_	_
Awaiting residence in L.A. home/hostel	_	_	_	-	_	_	_	_	_	_	_	_	_
Resident at L.A. expense in other resi- dential homes/ hostels						1				1			1
Resident at L.A. expense by boarding out in private house-						1	2	1		1	2	1	4
(f) Receiving home visits and not included under (b) to (e)	13	11	116	105	36	14	46	45	49	25	162		386

Visits made to subnormal patients-1,720.

Junior Training Centres.

An additional assistant supervisor was appointed at "The Dales" and commenced duty in February. Authority was given for the secondment of the Supervisor at "The Dales" to the one-year Diploma Course for Teachers of the Mentally Handicapped in 1963-64, and for other unqualified staff to attend subsequent courses.

As the premises at Grangetown had become seriously inadequate, plans were made during the year for adaptation of part of the former Sir William Turner's School, Redcar, for use as a Junior Training Centre.

Details of attendances of children at junior training centres are given below :-

	Atten	dance	Staff					
Centre	Number on register at 31-12-62	Percentage attendance	Supervisors	Assistant Supervisors	Part-time Assistant Supervisors			
Alderman Cockerill, Scarborough	*27	81-9%	1	1	_			
Cleveland, Grangetown	53	80.3%	1	3	1			
"The Dales," Morton-on-Swale	35	81.1%	1	2	_			

^{*} Includes 10 children from East Riding County Council area.

A number of children continued attendance at junior training centres controlled by other bodies. In December, 1962, the figures were :—

			Numbers
Cen	tre		attending
York			 11
Middlesbr	ough	 1	
Claypenny	Hospital S	chool	 12

Industrial Training Centre.

The year was mainly one of consolidation, but it was nevertheless found necessary to establish a Minor Sub-Committee to consider the increasing volume of business relating to Upsall Hall and to make recommendations to the Mental Health Services Sub-Committee. The number of trainees was gradually built up, and on 31-12-62 there were 24 day trainees (17 boys and 7 girls) and 21 residents (13 boys and 8 girls) on the register.

Negotiations with the Ministries of Health and Labour concerning the promised financial assistance from the Exchequer were pursued throughout the year. Pending the outcome of these negotiations, a system of interim payments was devised to provide an incentive for the trainees.

Residential Hostel.

The Minister of Health finally authorised the inclusion of this project in the 1962-63 capital building programme, and plans were finally approved for the erection of a hostel to provide for twelve children and to include accommodation for resident staff on a site adjoining the Alderman Cockerill Junior Training Centre, Scarborough.

PUBLIC HEALTH ACT, 1936, (NURSING HOMES).

The number of nursing homes registered at the end of 1962 was 7 one less than in the previous year. Any premises which are the subject of an application for registration are inspected and reported upon by a medical officer; after registration, nursing homes are supervised and inspected by officers of the medical department. One certificate of registration was surrendered voluntarily owing to the discontinuance of the use of the premises for the purpose of a nursing home.

The number of beds provided in these nursing homes at the end of 1962 was 101 (maternity 8; others 93).

BLIND PERSONS.

The number of persons whose names were on the register of blind persons at 31st December, 1962, was 708. Of these, 65 (25 males and 40 females) were ascertained on form B.D. 8 during 1962.

The numbers of registered blind persons for whom operative treatment for cataract or glaucoma had been recommended since 1934 are 182 and 8 respectively.

During 1962 operative treatment was recommended for 4 people, 3 for cataract and 1 for glaucoma. Of the people with cataracts, in one case the operation was successful, 2 refused operation for health reasons and 1 did not wish operation. The person recommended for glaucoma treatment later removed from the North Riding and the result of any treatment is unknown.

TUBERCULOSIS.

New Cases.

The number of notifications of all forms of tuberculosis received in 1962 was 108 as compared with 142 in 1961 and 113 in 1960.

Table I shows the number of new notifications during the last twelve years :-

TABLE I.

Year		Total	Pulmonary	Non-Pulmonar		
1951		298	250	48		
1952	10.	224	188	36		
1953		266	231	35		
1954		233	202	31		
1955		193	169	24		
1956		214	192	22		
1957		175	156	19		
1958		192	169	23		
1959		137	118	19		
1960		113	99	14		
1961		142	128	14		
1962		108	97	11		

Table II shows the number of primary notifications of new cases of tuberculosis in age and sex groupings and Table III the age and sex distribution of new cases notified and deaths during the year.

TABLE II.
Formal Notification.

		Nu	mber	of P	rimar	y No	tifica	tions	of ne	w cas	ses of	tub	erculo	sis
Age-Periods	Under 1 year	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages)
Pulmonary—														
Males	-	-	2	2	1	7	7	7	10	11	9	5	-	61
Females	-	-	-	1	-	8	4	5	10	4	3	1	-	36
Non-														
Pulmonary														
Males	-	-	-	2	1	-	2	-	1	-	1	-	-	7
Females	-	-	-	-	-	-	-	2	-	1	-	1	-	4

TABLE III.

		N	New Cas	es Notifie	ED	DEATHS				
Age Peri	ods	Pulmonary		Pulmonary Non-Pulmonary		Pulmonary		Non-Pulmonary		
		M.	F.	M.	F.	M.	F.	M.	F.	
0-		-	-	-	-	-	_	_	-	
1-		2	-	-	-	-	-	-	-	
5-		3	1	3	-	-	-	-	-	
15-		31	27	3	2	2	_	1	-	
45-		20	7	1	1	10	-	-	-	
65-		5	1	-	1	3	-	-	_	

In Table IV the distribution of new cases district by district with comparative figures for the five preceding years is given: the deaths from tuberculosis are similarly set out in Table 5 at the end of this report.

TABLE IV.

		19	57	19	58	19	59	19	60	19	61	19	62
	District	Pul.	Non- Pul.										
	URBAN DISTRICTS.		100						100				
	Eston	25	5	47	7	33	3	29	1	30	2	13	1
	Guisborough	2	1	3	2	5	-	6	-	9	2	2	-
	Loftus	1	-	4	-	-	-	-	-	-	-	2	-
	Malton	-	-	2	-	1	-	-	-	-	-	1	-
	Northallerton	5	-	2	1	2	-	2	-	-	1	-	-
	Pickering		-	-	-	1	-	-	-	-	-	-	-
	Redcar		2	15	2	16	-	12	2	10	2	7	1
	Richmond	2	-	6	-	7	-	1	-	4	-	1	-
9.	Saltburn	5	-	3	-	10	1	2	-	4	-	3	1
10.	Scalby	-	-	4	-	-	-	1	-	3	-	1	-
	Scarborough	9	-	21	2	6	1	11	1	13	3	11	1
12.	Skelton & Brotton	9	-	4	-	-	-	1	-	2	-	5	-
13.	Thornaby-on-Tees	14	1	8	-	13	1	7	-	10	1	10	-
14.	Whitby	7	3	3	-	1	-	-	-	5	-	8	-
	Total Urban	99	12	122	14	95	6	72	4	90	11	64	4
	RURAL DISTRICTS.					5							
1	Aysgarth	_	_	_	_	_	_	1	_		_	_	_
	Bedale	0	_	3	_	1	_	2	1	4	_	1	_
	Croft		_	2	_	1	1	_	_	_	_	3	_
	Easingwold		_	2	_	1	1	3	2	3	_	2	-
	Flaxton	0	1	9	3	3	3	3	3	13	1	4	2
	Helmsley		2	1	_	_	-	1	_	1	_	4	-
	Kirbymoorside		_	_	1	1	1	_	_	_	_	1	-
	Leyburn	0	-	_	-	2	i -	_	_	_	1	2	-
	Malton		-	3	_	_	_	_	_	3	_	_	_
	Masham	1	_	_	_	_	_	_	_	_	_	_	-
	NT 1 - 11 1 1	3	_	2	_	1	4	1	_	-	-	3	-
	Distantan	0	1	1	_	-	_	_	1	1	-	1	2
	D l		_	1	_	_	2	1	_	_	_	_	_
	Richmond	10	_	9	3	4	_	7	_	4	-	5	_
	Scarborough		_	1	_	-	_	1	-		1	_	-
	Startforth		1	_	_	_	_	_	_	2	-	2	_
	Stokesley	-	1	9	_	3	1	5	1	3	1	4	2
	Thirsk		-	2	1	3	-	1	_	3	_	1	_
	Wath		-	2	1	-	-	_	1	-	_	_	_
	Whitby .	0	1	_	-	3	-	1	1	1	-	-	1
	Total Rural		7	47	9	23	13	27	10	38	3	33	7
		_	-				-				-		
Ad	ministrative County	156	19	169	23	118	19	99	14	128	14	97	11

Deaths and Death Rate.

16 deaths were ascribed to tuberculosis in 1962 as compared with 13 in 1961, 19 in 1960, 34 in 1959, 35 in 1958, and 31 in 1957. Modern drugs have improved the prognosis in this disease: reference to table 5 will show where notifications were made.

		D	eaths fi	rom Pu	ılmonaı	y Tube	rculosi	is.	
	1954	1955	1956	1957	1958	1959	1960	1961	1962
No. of deaths	 16	35	31	26	26	32	14	11	15
Rate per 1,000 population	 0.09	0.09	0.08	0.07	0.07	0.08	0.04	0.03	0.04
		Dea	ths fron	n Non-	Pulmo	nary Tu	bercul	losis.	
No. of deaths	 7	8	3	5	9	2	5	2	1
Rate per 1,000 population	 0.04	0.02	0.008	0.01	0.02	0.005	0.01	0.004	0.002

The whole-time and part-time health visiting staff of the Riding made 2,684 visits in connection with the after-care of tuberculous persons. The home nurses also made 9,365 visits to 543 tuberculous patients.

Contacts of cases of tuberculosis are examined by the chest physicians. This also applies in those cases where tuberculosis is not ascertained until after the death of the patient. In the County area during 1962, 700 contacts were examined as a result of 97 notified cases of pulmonary disease. The corresponding figures for 1961 were 1,067 and 128 respectively. Of the 700 contacts examined 5 were found to have clinical tuberculosis.

There is no specific county-wide scheme for ascertaining early cases amongst children and others. Some are detected by the mass radiography service; others are referred to chest physicians by general practitioners; they are then kept under supervision and if necessary admitted to hospital. Mass radiography surveys are helpful but are only held at infrequent intervals in the more populated parts of the Riding. The selective radiography of patients referred by family doctors is more productive of results than the regular visits of the M.M.R. units; experience shows that the same group of volunteers come forward each time and those who fear the result stay away.

Many cases of tuberculosis after reaching quiescence return to their former employment. If that is entirely unsuitable, the patient is referred to the Ministry of Labour Resettlement Officer with a view to finding more suitable work. Disablement Resettlement Officers and chest physicians have generally kept in close touch regarding quiescent and "cured" cases of pulmonary tuberculosis.

PREVALENCE OF INFECTIOUS DISEASES.

The number of infectious diseases notified to the local medical officer of health of the several sanitary districts during 1962 is given in table 7 at the end of this report; it will be seen that no notification of diphtheria was received.

The Public Health (Infectious Diseases) Regulations, 1953, which came into operation on the 1st April, 1953, superseded the Public Health (Infectious Diseases) Regulations, 1927, and the Infectious Diseases (London) Regulations, 1927. In their general substance and form, the new regulations are similar to the old; that is to say, they require notification of malaria, dysentery, acute primary pneumonia and acute influenzal pneumonia, and provide for preventive steps to be taken against a spread of certain diseases specified in the fourth schedule to the regulations. The provisions about action to be taken by local authorities and medical officers of health against the risk of food poisoning applied under the old regulations to enteric fever and dysentery. They now apply to "typhoid fever, para-typhoid fever and other salmonella infections, dysentery and staphylococcal infection likely to cause food poisoning." The new regulations provide for action to be taken, not only as regards a person suffering from the disease in question, but also against those shown to be carriers of disease; and a person in either class may now be prevented, not only from continuing to work in an occupation connected with food or drink, but also from entering such an occupation.

VENEREAL DISEASES.

The following table gives the summary of the first attendances made by North Riding patients at the hospital named during certain years between 1950 and 1962.

Treament		Numbe	er of No	orth Ric	ling pat	ients tr	eated fo	r the fir	rst time	,
Centre	1950	1951	1952	1954	1955	1957	1959	1960	1961	1962
Darlington Hundens										
Hospital	55	30	24	41	22	21	27	32	24	29
Harrogate General				1	100	Was I	100			
Hospital	11	1	1	9	2	3	-	-	-	-
Leeds General Infirmary	6	8	2	1	-	-	-	-	-	
Middlesbrough General								See and		
Hospital	159	121	112	105	90	101	85	114	112	102
St. Mary's Hospital								-TO ME		
Scarborough	95	52	74	37	32	33	27	37	46	34
Stockton & Thornaby							1			
Hospital	33	25	33	17	7	15	27	21	17	21
York County Hospital	27	27	30	27	26	39	40	32	54	68
South Shields	-	-	-	-	1	1	-	-	-	-
Totals	386	264	276	237	180	213	206	236	253	254

LABORATORY FACILITIES.

A comprehensive service is available at the two laboratories of the Public Health Laboratory Service that have been established at Northallerton and Middlesbrough. In addition to undertaking the examination of specimens the directors of the laboratories can help when eequired in epidemiological field work in co-operation with medical officers of health. The Middlesbrough laboratory serves, in addition to Tees-side, the southern part of County Durham and the northern half of the Riding. The Northallerton laboratory serves the remainder of the Riding, except for the Scarborough area which relies on a similar laboratory at Hull and to a lesser degree on a clinical laboratory at the Scarborough Hospital for this service.

The Northallerton laboratory is also a main distributing centre for vaccine lymph for immunising persons against smallpox: the staff at County Hall wish to acknowledge the considerable assistance given by Dr. Donald Payne, particularly in the field of suspected food poisoning and undulant fever.

ENVIRONMENTAL HYGIENE.

The following statistics summarise the work of the county health inspectors during 1962.

		Visits	Samples
Visits of inspection to works of water supply		50	
Samples of water submitted for examination			1,007
Visits in relation to works of sewage disposal		239	
Visits to school premises (all purposes)		1,605	
Samples of school milk supplies			1,517
Samples of milk from school canteens and kitchens			357
Samples of milk from Children's and Old People's H	lomes		96
Food and Drugs Act, 1955—Section 31:			
Samples of milk submitted for Ring Test			581
Samples of milk taken during retail sale			3,479
Milk (S.D.) Regulations, 1960—inspections		1,084	
Inspections of pasteurising plants and premises		103	
Samples of milk taken from pasteurising plants			213
Bottle rinses taken at pasteurising dairies			156
Diseases of Animals (Waste Foods) Order-inspection	ns	607	
Refuse disposal—inspection of tips		71	
Swimming baths—water purification		40	42
Ministry meetings or inquiries attended		10	
Miscellaneous visits		263	
		4,072	7,448

The number of visits of inspection and samples taken during the year have increased by $28 \cdot 3\%$ and $29 \cdot 4\%$ respectively; these increases were necessitated by the transfer of licensing and supervision of milk retailers to the County Council and the request of the Diseases of Animals Committee for greater frequency of inspections of waste food boiling plants; the appointment of an additional county health inspector from 1st January, 1962, enabled the increased duties to be carried out according to schedule. A decline in the number of inspections relating to water supply reflects the inactivity of water undertakers, due to (a) the need to survey and assess the requirements of the re-grouped areas and (b) the failure of local authorities in the western dales to reach agreement on the formation of a joint water undertaking. The number of water samples taken for bacteriological examination increased by $18 \cdot 8\%$ and there were corresponding increases in milk sampling (except at pasteurising plants where a reduction in the number of plants in operation resulted in a fall in the number of inspections and samples). Samples of milk formerly shown under "Specified Areas" are now included under the heading of "retail sale."

Sampling under Section 31 of the Food and Drugs Act, 1955, for investigation of milk-borne infection has again been a feature of the year's work; increased sampling has mainly been due to the discovery of Brucella abortus on a scale not hitherto experienced, both in cattle and in consumers of raw milk.

The co-operation of the Directors and Staff of the Public Health Laboratory service has been freely given and greatly appreciated; the county health inspectors have also had the co-operation of the majority of the public health inspectors in county districts, and of the inspectors of the River Boards.

WATER SUPPLY.

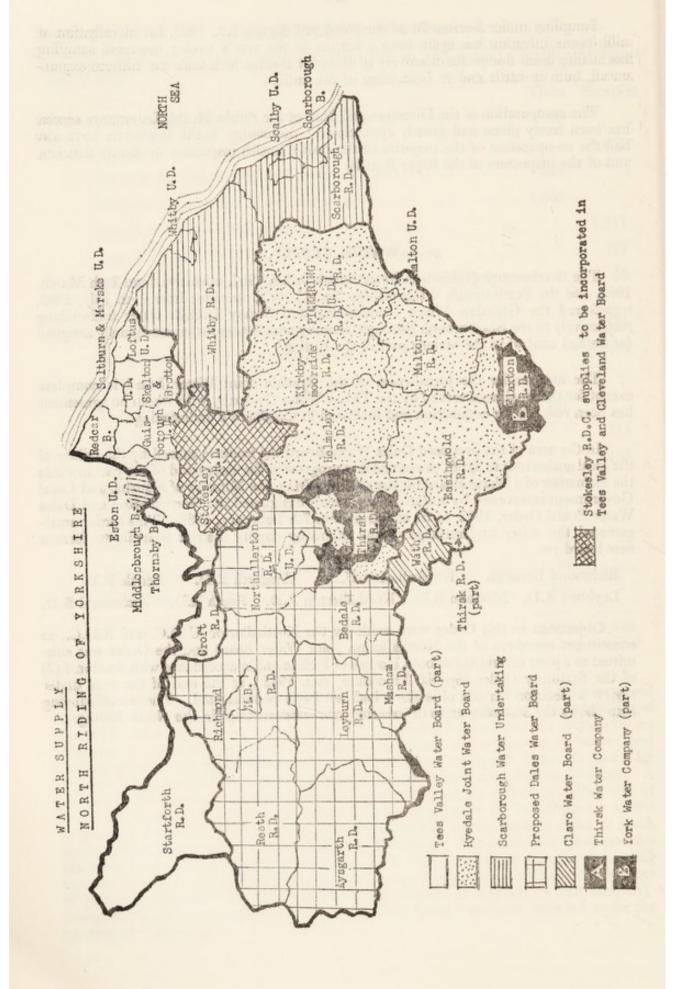
The Scarborough (Glaisdale Waterworks) Order, 1962, operative from 28th March, 1962, and the Scarborough Water (Order No. 2,) 1962, operative from 19th July, 1962, transferred the Glaisdale Water Undertaking and Scalby U.D.C. water undertaking respectively to the Scarborough Borough, thereby completing the area originally assigned for unified control in the eastern part of the Riding.

The area under the jurisdiction of the Ryedale Joint Water Board is complete except for the small area served by the Thirsk Water Company with whom no agreement has been reached for acquisition and inclusion in the Board's undertaking.

In the area of the proposed Dales Water Board the impasse caused by the failure of the local authorities to agree, prevented any progress in the early third of the year towards the formation of a Water Board for the area: in May, the Minister of Housing and Local Government intervened by statutory instrument designated the Northallerton and Dales Water Board Order, 1962, to be effective from 7th February, 1963. This Order amalgamated the water undertakings of the following county district councils to form a new board:—

Richmond Borough Northallerton U.D. Aysgarth R.D. Bedale R.D. Leyburn R.D. Masham R.D. Northallerton R.D. Reeth R.D. Richmond R.D.

Objections to this Order were made by the Northallerton U.D.C. and R.D.C., as constituent members of the Northallerton Joint Water Board and the Order was submitted to a joint committee of both Houses of Parliament in accordance with Section 4 (2) of the Statutory Order (Special Procedure) Act, 1945; at the end of the year under review a decision on the objections had not been promulgated. The accompanying map shows the statutory areas of existing water undertakings in the North Riding.



Pending the formation of the Northallerton and Dales Water Board, urgently needed schemes for improvement of water supplies in the area were in abeyance; comparison might be made with the Scarborough Water Undertaking which has already submitted proposals for large scale improvements in the newly acquired Whitby area. This Undertaking submitted on 10th May, 1962, a scheme, estimated to cost £70,000, for the Randymere Reservoir on the Sneaton Castle main supply and on 26th November, 1962, a £3,000 scheme for supplying North Moor Cottages at Wykeham.

The Chief County Health Inspector made 44 inspections when investigating new schemes for supply, work in progress and checking existing facilities; detailed reports on the new schemes were made; these formed the basis of the County Council's observations which are sent to the relevant local authorities and must accompany all proposals submitted to the Minister of Housing and Local Government for grant aid under the Rural Water Supplies and Sewerage Acts.

The Minister of Housing and Local Government held a private meeting to investigate proposals submitted by the Ryedale Joint Water Board for mains extensions at Amotherby.

During the year the county health inspectors took 1,006 samples of water for bacteriological examination and one for chemical analysis, the results were as follows:—

Test	No. taken	Satisfactory	Unsatisfactory	Not
Bacteriological examination .	. 1,006	961	39	6
Chemical analysis .	. 1	1	_	_

76 samples of raw and chlorinated water were taken for bacteriological examination from the East Ness headworks of the Ryedale Joint Water Board; all samples of chlorinated water were satisfactory, but three samples of raw water from the headworks gave unsatisfactory results.

The only areas in the Riding not served by piped water are isolated individual houses and farms in sparsely populated parishes; these cannot be piped at reasonable cost.

The number of schools at which it was necessary to boil water prior to consumption owing to intermittent contamination of sources of supply, was further reduced to seven, the lowest figure yet recorded; the policy of installing porcelain-type filters on individual taps in remote rural schools has again been justified by the satisfactory results obtained.

The transfer of water supply and distribution functions from local authorities to water boards has caused a period of quiescence during which little progress has been made towards the provision or improvement of water supplies; the principal activities in county districts during 1962 were:—

LOFTUS U.D.

The Tees Valley and Cleveland Water Board started a scheme to supply Liverton Mines and Liverton village.

SCARBOROUGH BOROUGH

No major schemes were actually commenced, but extensive re-laying of mains to replace existing old mains was carried out.

THORNABY BOROUGH

A scheme was commenced in preparation for development of Thornaby Aerodrome as a building site, 9" and 6" mains being laid.

BEDALE R.D.

A 6" link main was laid connecting Morton-on-Swale in Northallerton R.D. to Leeming Bar in the Bedale R.D.

CROFT R.D.

Richmond R.D.C. took over mains and water supply to Barton and Newton Morrell.

Masham R.D.

Improvements to water supply in Swinton area were completed.

RICHMOND R.D.

Schemes for provision of water supply to Marske and Barton were started during the year.

STARTFORTH R.D.

Scheme to serve South Thorpe area was started.

WHITBY R.D.

New schemes involving the laying of a 10" trunk main from Randymere reservoir to Whitby and a trunk main Sleights to Robin Hood's Bay were commenced as was construction of a 500,000 gallon reservoir at Westerdale. A scheme involving 11,284 yards of 6" main to Hutton Mulgrave was completed.

In addition the provision of supplies to new building sites and estates have been carried out throughout the Riding.

In my annual report for 1961 I referred to the probable decrease in the number of main water supplies as a result of the formation of Water Boards; this has occurred as anticipated, there being 122 sources of supply, 20 fewer than in 1961, at the end of the year under review. Centralisation of control and elimination of unsatisfactory and uneconomic supplies have been of advantage to the consumers.

The 122 remaining water supplies serve 127,363 houses; the 4,554 houses not connected to mains supplies consist for the most part of isolated farmhouses and groups of houses which cannot be supplied at reasonable cost. These have local wells or spring supplies of varying degrees of purity.

Officers of county districts and Water Boards took 2,406 samples during the year for bacteriological examination and 107 for chemical analysis; 313 of the former were "unsatisfactory" but the reports by analytical chemists were satisfactory. The percentage of unsatisfactory samples in relation to the total number of samples taken has progressively declined for a number of years, the figures being:—

1958	1959	1960	1961	1962
-			-	
22.9%	19.1%	15.4%	14.1%	13.0%

This is mainly due to improvement of supplies in the northern, eastern and central areas supplied respectively by the Tees Valley Water Board, the Scarborough Borough Water Undertaking and the Ryedale Water Board. Some other mains supplies are, however, liable to gross pollution after heavy rainfall and one cannot be complacent at the water supply position in the statutory area supplied by the Thirsk Water Company nor in parts of the Dales where chlorination (the only precautionary measure) has been shown to be unreliable.

Continued sampling by officers of county districts to ensure that supplies at point of consumption are pure and wholesome is essential: such sampling is complementary to that undertaken by the Water Boards at source, or at treatment works and is regarded as an essential service. I am glad to report that in spite of the lapses above-mentioned no case of identifiable water-borne disease occurred during the year.

The following block graph gives the results of bacteriological examination of water supplies for the whole of the county for the past five years to enable a comparison to be made of the improvement in the quality of the water supplies.

RESULTS OF BACTERIOLOGICAL EXAMINATION OF WATER SAMPLES Number of samples taken Number of unsatisfactory samples 1958 1959 1960 1961 1962 -

The following statistical table gives details of sampling results from individual county districts and will be of interest in view of preceding comments.

						Resu	ults fro	m Samı	oling	
		No. of Mains	No. of houses	No. of houses		Chemica analysis			cteriolog kaminati	
DISTRICT		supplies in District	con- nected to mains supplies	not con- nected to mains supplies	Total taken	Satisfactory	Unsatisfactory	Total taken	Satisfactory	Unsatisfactory
URBAN. Eston Guisborough Loftus Malton Northallerton Pickering Redcar Borough Richmond Borough Saltburn & Marske Scalby Scarborough Boroug Skelton & Brotton Thornaby Borough Whitby	:	1 1 1 1 1 1 1 2 1 1 1 2 1 1	11,365 3,895 2,777 1,378 2,258 1,485 10,686 1,998 4,452 2,794 14,699 4,273 6,824 4,901	19 46 1 46 1 11 5 20 1	 78 23 	 78 23 		8 12 54 96 52 36 25 24 — 12 434 4 78	4 12 39 74 48 36 24 24 — 12 417 4 4 67	15 222 4 1 1 - 17 - 11
Total Urban		16	73,785	160	101	101	_	839	765	74
RURAL. Aysgarth Bedale Croft Easingwold Flaxton Helmsley Kirkbymoorside Leyburn Malton Masham Northallerton Pickering Reeth Richmond Scarborough Startforth Stokesley Thirsk Wath Whitby		17 1 5 1 2 3 1 9 1 6 2 11 20 3 1 7 4 2	1,040 2,515 585 3,312 10,039 1,347 1,412 2,026 1,830 507 2,928 1,454 631 2,578 2,795 895 8,860 4,190 663 3,971	204 6 68 47 31 103 128 72 36 80 168 364 273 872 218 560 350 109 71 634	- 1 - 2 - - 3 - - - - - - - - - - - - - - -	- 1 - 2 - 3 - - - - - - -		13 26 328 201 28 120 108 29 11 13 5 89 — 86 80 33 22 195 29 151	26 325 138 23 104 98 24 10 11 3 70 72 59 26 14 192 26 107	13 3 63 5 16 10 5 1 2 2 2 19 — 14 21 7 8 3 3 44
Total Rural		106_	53,588	4,394	6	6	_	1,567	1,328	239
Administrative County	y	122	127,363	4,554	107	107	_	2,406	2,093	313

SEWERAGE AND SEWAGE DISPOSAL.

During the year, twenty schemes for the provision of sewerage and sewage disposal facilities were submitted to the County Council with applications for grant-aid under the Rural Water Supplies and Sewerage Acts; these were examined by the Chief County Health Inspector who inspected the areas concerned and reported on the adequacy of the schemes for present and foreseeable future needs, suitability of works sites and facilities for effluent dispersal at the proposed outfalls. These reports formed the basis of observations sent to district councils and accompany all schemes sent to the Ministry of Housing and Local Government for approval.

Problems arising from the definition of farm drainage as "trade effluent" (Public Health Act, 1961) were largely overcome by most district councils during the year after surveys, and after discussions with farmers concerned. The general trend has been to exclude farm drainage from the sewers unless payment for treatment is made; in most cases farmers have decided on conservation of effluent for use on the land rather than pay, and this tendency must meet with general approval.

Although improvements to water supply were held up pending the establishment of the Northallerton and Dales Water Board, eight schemes for sewerage and sewage disposal (which is of course dependent upon adequate water supplies) were submitted from the western dales area where the need for schemes is greatest. The Stokesley R.D.C. also submitted seven schemes from villages within their area; many of these were urgently required in order to meet new building "development."

The year under review saw the introduction of sewage treatment by the "self-contained activated-sludge-aeration units"; this idea is not new, being based on processes first mooted some forty years ago. Various claims have been made for such units, particularly economy in purchase and maintenance and some district councils are showing interest.

Approval of such plants should not be withheld but should be given without prejudice to future decisions in the light of experience of the plants in operation.

Details of the schemes submitted are given in the following schedule.

Authority	Date submitted	Scheme	Esti- mated Cost	Observations by County Council
Aysgarth R.D	21-11-62	Askrigg	£ 33,412	Approved in principle. Attention of district council drawn to:— (a) the circuitous and deep sewers necessitated by the gravity scheme, which would not arise in a pumping scheme; and
		regge leveling the personal regge leveling the personal regge leveling the personal regge		(b) the need to exclude farm drainage from the sewers unless satisfac- tory agreements are reached for the treat- ment of such trade work as laid down in the Public Health Act, 1961.
Bedale R.D	17-3-62	Snape	6,770	Approved in principle. Attention of the district council drawn to the fact that the scheme would not rank for grant-aid because the proposals relate only to the provision of new sewage disposal works, the existing sewers being suitable and adequate for the
Croft R.D	26-4-62	Dalton-on-Tees	17,300	sewerage of the village. Approved in principle, in so far as the proposals relate to present day requirements. Attention of district council drawn to inadequacy of provision at sewage disposal works to provide for future development in Dalton and Croft.
Leyburn R.D	20-10-62	Horsehouse	3,522	Approved in principle. Attention of the district council drawn to the fact that the present settling tank capacities are based on operation of the works on the septic tank principle with a six months sludge retention.

Authority	Date submitted	Scheme	Esti- mated Cost	Observations by County Council
Pickering R.D	1-10-62	Newton-upon-Rawcliffe (Revised proposals)	£ 1,516	Approved in principle.
Reeth R.D	6-2-62	Reeth, Fremington and Grinton	14,880	Approved in principle.
Richmond R.D	4-1-62	Ravensworth	18,844	Approved in principle. The attention of the district council drawn to the fact that if farm drainage was to be accepted into the sewers and treated, it should be subject to agreement from the standpoint of the treatment of trade waste.
do	13-4-62	Downholme	6,897	Approved in principle.
Scarborough R.D.	2-3-62	Sewer extensions to :— (1) Cloughton Newlands £8,313 (2) Weydale Cottages, Brompton, £1,135 (3) Quarry Bank (Stone Quarry Road), Cloughton, £2,521	11,969	(1) Approved in principle. Attention of district council drawn to the need to exclude farm wastes from the sewer. (2) Approved in principle (3) Approved in principle
do	1-10-62	Seamer Regional Scheme —separation of surface water—Osgodby, Brompton. Snainton (additional)	10,485	Approved in principle.
Startforth R.D	13-2-62	Boldron	8,200	Approved in principle. Attention of district council drawn to proximity of the sewage works to dwellings in the village.
Stokesley R.D	17-1-62	Kirkleavington	6,700	Approved in principle.
do	5-2-62	Hutton Rudby and Rudby	84,400	Approved in principle.
do	21-3-62	Marton and Nunthorpe (Revised)	95,000	Approved in principle.
do	2-4-62	Seamer	24,650	Approved in principle.
do	30-8-62	Potto	9,350	Approved in principle.
do	30-8-62	Swainby	45,850	Approved in principle.
do	19-10-62	Nunthorpe, Poole Hospi- tal and Marton Moor House area	30,565	Approved in principle.

Nine meetings convened by the Ministry of Housing and Local Government to investigate proposals for sewerage and sewage disposal were attended by the Chief County Health Inspector who reported thereon; the district councils concerned and the schemes under review were as follows:—

Authority	Date of Meeting	Scheme	
Whitby U.D.C.	 28-11-62	East Side Trunk Sewer.	testi R.D
Easingwold R.D.C.	 28-11-62	Huby and Sutton-on-Forest.	
Leyburn R.D.C.	 4-12-62	Thornton Steward.	
Richmond R.D.C.	 15-3-62	Colburn.	
do	 5-6-62	Ravensworth.	
Scarborough R.D.C.	 28-9-62	Regional sewage disposal.	
Thirsk R.D.C.	 20-2-62	Kirby Hill, Langthorpe and Milby	
Wath R.D.C.	 3-1-62	Asenby.	
Whitby R.D.C.	 27-11-62	Hawsker.	

As the County Council have given grants in respect of the majority of schemes submitted, inspection of works in progress and of the completed works are made from time to time to ensure that

- (a) they have been carried out in accordance with plans submitted with applications for grant-aid,
- (b) that completed works are being satisfactorily maintained and
- (c) that the best use is being made of the facilities provided.

The number of inspections made for these purposes in 1962 was 239.

A brief summary of the more important developments in connection with sewerage and sewage disposal in the county districts is given below:—

ESTON U.D.

New trunk sewer completed. Sewage treatment plant communication therewith under construction.

Guisborough U.D.

Mount Pleasant sewage works completed. Extension to Guisborough sewage disposal works commenced.

SALTBURN AND MARSKE U.D.

West of Marske sewerage scheme completed.

SCARBOROUGH BOROUGH

Construction of new outfall, Marine Drive, for southern area; outfall sewer commenced.

THORNABY BOROUGH

Main outfall sewer and on-site main drainage commenced for development of Thornaby aerodrome building site.

Easingwold R.D.

Yearsley sewerage and sewage disposal scheme commenced. Newton-on-Ouse scheme completed.

FLAXTON R.D.

New pumping station at Meadowfields and rising main to Haxby Road commenced. Extensions to Stockton-on-Forest sewage disposal works commenced.

Kirkbymoorside R.D.

New sewage disposal works for Kirkbymoorside completed.

LEYBURN R.D.

Carlton and Melmerby sewerage and sewage disposal scheme commenced. Prestonunder-Scar scheme completed.

MALTON R.D.

Sheriff Hutton scheme commenced. Bulmer and Terrington scheme completed.

Masham R.D.

Fearby sewerage and sewage disposal scheme completed.

RICHMOND R.D.

Moulton, Sleegill and Tunstall schemes completed.

Scarborough R.D.

Gristhorpe and Lebberston schemes completed.

STARTFORTH R.D.

Startforth sewerage scheme commenced. Barningham scheme completed.

STOKESLEY R.D.

Newby and Carlton schemes commenced. Extension of sewerage system at Meadowfields, Stokesley, completed.

THIRSK R.D.

Bagby scheme commenced.

WHITBY R.D.

Castleton, Danby and Ainthorpe schemes commenced. Glaisdale village scheme completed.

Reports from the county districts show that the under-mentioned areas require sewerage and sewage disposal facilities:—

Guisborough U.D. ..

.. Yearby village.

Loftus U.D.

Liverton village.

PICKERING U.D.

. Stape.

WHITBY U.D.

. Ruswarp.

Aysgarth R.D.

. Askrigg, Newbiggin, Thornton Rust, Thoralby and

West Burton.

BEDALE R.D.

.. The whole of the area with the exception of Bedale and Aiskew, Leeming, Leeming Bar and Thornton

Watlass.

CROFT R.D.

Manfield, Cleasby, Dalton and Stapleton.

Easingwold R.D. Crayke, Huby, Sutton, Stillington, Carlton Husthwaite, Thormanby, Skewsby, Whenby, Strearsby, Brandsby, Tholthorpe, Raskelf, Coxwold, Farlington, Flawith and part of Easingwold. FLAXTON R.D. Lilling, Towthorpe, Bossall-with-Buttercrambe. HELMSLEY R.D. Old Byland, Cold Kirby, Hawnby, Rievaulx, Cawton, Coulton, Stonegrave, Wass, Pockley. KIRKBYMOORSIDE R.D. Nunnington, Hutton-le-Hole, Lastingham, Great Edstone, Appleton-le-Moors, Gillamoor and Fadmoor. LEYBURN R.D. Thornton Steward, Redmire, Horsehouse and Hauxwell. Malton R.D. Barton-le-Willows, Thornton-le-Clay, Great Habton, Whitwell-on-the-Hill. NORTHALLERTON R.D. All villages except Brompton, Romanby, Appleton Wiske, Nether Silton and Osmotherley. Pickering R.D. All parishes except Thornton Dale, Middleton and Sinnington. REETH R.D. Marrick, Fremington, Langthwaite, Arkletown, Whaw, Low Row, Ivelet, Thwaite, West Stonesdale. New disposal works required at Reeth, Grinton, Keld, Muker, Gunnerside. RICHMOND R.D. Appleton, Aske, Brough, Caldwell, Carkin and Forcett, Colburn (village), Dalton, Downholme, Easby, Marske, Ellerton, Gayles, Kirby Hill, East Layton, West Layton, Marske, New Forest, Ravensworth, Stainton, Stanwick, Uckerby, Walburn and Whashton. Scarborough R.D. Cloughton Newlands, Hackness, Silpho, Suffield, Harwood Dale, Stainton Dale and Troutsdale. STARTFORTH R.D. Bowes, Ovington, Hutton Magna, and Boldron. Kildale, Ingleby Greenhow and Faceby. STOKESLEY R.D. THIRSK R.D. All villages except Thirsk, Sowerby, Sandhutton, South Otterington, Kirby Knowle, Catton, Howe. Schemes being prepared for all outstanding villages. WATH R.D. Asenby village scheme ready to begin early 1963. Scheme for Dishforth village ready to submit to Ministry. WHITBY R.D. Commondale, Hawsker, Lealholm, Sneaton, Westerdale

pleted.

villages require sewering. Mickleby village requires re-sewering and 16 small villages and hamlets need consideration when the above programme is comThe following table gives details of the number of houses with and without water carriage system of sanitation and the number of conversions carried out during the year under review. The number of 10,065 without water carriage system includes farms and out-lying properties beyond the reach of any sewer which could be laid at reasonable cost, but the greater part of this number is made up by properties in village communities which have not so far been provided with sewerage and sewage disposal facilities.

DISTRICT	No. of houses with water carriage system	No. of houses without water carriage system	Conversions to water carriage system in 1962
T.T	le less bein belign	Bellimens ylled	nsq astumgo l
URBAN Eston	11 265		
	11,365	47	6
Guisborough	3,803		48
Loftus	2,703	120	
Malton	1,363	15 10	5
Northallerton	2,248		19
Pickering	1,361	172	
Redcar Borough	10,686	10	_
Richmond Borough	1,999		and the second second
Saltburn & Marske	4,449 2,790	3 5	4
Scalby	14 220	10	4
Scarborough Borough	14,239	10	71
Skelton & Brotton	4,281 6,824	12	/1
Thornaby Borough	4,901	20	
Whitby	4,901	20	-
Total Urban	73,012	425	153
Rural			
Aysgarth	1,053	188	20
Bedale	2,000	480	43
Croft	529	163	5
Easingwold	2 478	839	54
Flaxton	9 646	424	28
Helmsley	1.043	407	29
Kirkbymoorside	*	_*	34
Lauburn	1,795	303	38
N.f14	1 300	557	105
Machan	450	116	38
Monthallerton	1 965	1,133	29
Dieleging	1 295	504	37
Reeth	734	170	10
Dielemand	1 938	1,260	37
Caarlaanayah	2.616	569	42
Canadonalo	751	704	22
Stokesley	8 775	435	48
Thirsk	3 823	441	39
Wath	608	126	7
Whitby	3,784	821	65
Total Rural	46,592	9,640	730
Administrative County	119,604	10,065	883

^{*} Not known by R.D.C.

REFUSE DISPOSAL.

There has been no major change in the overall position of refuse disposal since my last report; Croft R.D.C. and Thirsk R.D.C. now dispose of refuse by controlled tipping which is an improvement on their previous methods of partially controlled tipping, but Masham R.D.C. have reverted to uncontrolled tipping.

The following is a summary of methods of disposal in operation by district councils throughout the Riding :—

19 operate controlled tipping.

7 use partially controlled tipping.

1 operates partially controlled tipping and controlled tipping at separate tips.

1 operates an incineration plant.

1 uses incineration for part of the area and partially controlled tipping for the remainder.

5 still use uncontrolled tipping.

The problem of finding suitable sites for refuse disposal tips becomes more difficult each year, and appears to need a solution beyond the restriction of district council boundaries. Approval was given to Reeth R.D.C. to use a high level site in Arkengarth-dale but this was not considered suitable for winter use as it would involve a long haul and is, therefore, uneconomical in operation.

The total cost of refuse collection and disposal in the Riding for the year under review was £297,209.

Inspections of tips were made by the county health inspectors on 71 occasions. Indiscriminate dumping of refuse, particularly in rural districts, is still prevalent; the most common offenders being itinerant scrap metal dealers; the litter baskets provided at "lay-by" for lorry crews and road users generally have been well used for the most part and have proved their value since introduction, when they have been regularly cleared.

The following table gives details of the frequency of collection, the method of disposal of refuse and the cost in respect of each local authority in the Riding; the benefit of this service is not however measureable in terms of expense but is reflected in the health of the community.

District		Estimated cost of service	Method of refuse disposal	Frequency of collection
Urban		£		
Eston		28,000	Controlled tipping	Weekly collection
Guisborough		9,300	do	do
Loftus		4,942	do	do
Malton		4,234	Partially controlled	do (remote rural premises-monthly)
Northallerton		4,550	Uncontrolled tipping	do (collection at three weekly intervals
Pickering		2,041	do	Weekly collection in town area.
rickering		2,011	40	Quarterly collection at Stape and Bean Sheaf
Dadaar Daray	. orb	20.072	Controlled tinging	Weekly collection.
Redcar Borou	-	29,072	Controlled tipping	
Richmond		4,299	do	do
Borough		40.000		
Saltburn &		10,390	do	do
Marske				
Scalby		6,505	do	do (Outlying farms—fortnightly).
Scarborough		48,239	do	do
Borough			The state of the state of	
Skelton &		7,830	do	do
Brotton				
Thornaby		12,955	do	do
Borough		12,700		4.0
Whitby		16,111	Incineration	do
· · · · · · · · · · · · · · · · · · ·		10,111	Incineration	
RURAL				
Aysgarth		1,203	Uncontrolled tipping	Fortnightly collection. Remote areas monthl
Bedale		5,000	Controlled tipping	Weekly in Bedale, Aiskewand Leeming R.A.F Station. Fortnightly collection in other areas
Croft		1,250	Controlled	Fortnightly collection.
Easingwold		7,000	Controlled tipping	Weekly collection at Linton R.A.F. Station Remainder—every 10 days.
Flaxton		9,103	Partially controlled	Weekly collection.
			Controlled tinning	
Helmsley	: 1:	1,600	Controlled tipping	Fortnightly collection.
Kirkbymoors	ide	1,995	Partially controlled	Weekly collection in Kirkbymoorside, Nawton, Wombleton, Kirby Mills,
			100	Keldholme. Monthly in Farndale and Bransdale.
		2 2 2 4	D	Fortnightly elsewhere.
Leyburn		3,354	Partially controlled	Weekly collection—Leyburn and Middleham
			and uncontrolled	Fortnightly collection—remainder of area
Malton		1,550	Partially controlled	Collection monthly.
Masham		1,197	Uncontrolled	Weekly collection-Masham, Swinton and
			except for burning	Burton.
			of paper.	Monthly collection—Ellingstring,
				Ellington, Fearby and Healey.
Northallerton	1 1	6,456	Partially controlled	Weekly collection.
Pickering		1,160	Uncontrolled tipping	Fortnightly collection.
Reeth		2,560	Uncontrolled tipping	Weekly collection. Farms monthly.
Richmond		3,335	Controlled tipping	Weekly collection
Scarborough		4,894	do	Fortnightly collection from large communitie
				Monthly collection from small communities.
Startforth		3,674	Partially controlled	Weekly collection.
Stokesley		19,592	Controlled tipping	Weekly collection in larger areas, Fortnightl
			apping	in more rural districts.
Thirsk		17,900	Controlled	Weekly collection.
Wath		1,109	Controlled tipping	Weekly collection at Dishforth R.A.F.
Traili		1,109	Controlled apping	Station. Fortnightly collection elsewhere
Whitby		16,012	Partially controlled	Weekly collection in 30 villages.
Transity.		10,012	94%	Fortnightly collection in 22 villages.
				orangita concentor in 22 vinages.
			Incineration 6%	

DETECTION OF NUISANCES.

The decrease in the number of inspections made under Part III of the Public Health Act, 1936, has been reversed, the figure of 9,524 being slightly higher than in 1961; however, the number of nuisances found and abated by informal action has again decreased. Statutory action to secure abatement has been necessary in only 54 cases, i.e. 50% less than the previous year. Nuisances arising from housing inspections are not included in these figures but with the environmental improvements brought about by new housing of lower density the annual trend should be one of progressive decrease in nuisance complaints. The following table gives details of the work involved annually in the abatement of nuisances and conditions prejudicial to health.

NUISANCE INSPECTIONS (other than Housing Inspections).

DISTRICT	Total number of	Number of nuisances	Number abated during year 1962			
DISTRICT	inspections	found	Informal action	Statutory action		
Urban						
Eston	 1,541	1,315	1,306	32		
Guisborough	 388	374	385	_		
Loftus	 203	191	187	_		
Malton	 136	38	34	_		
Northallerton	 108	38	38	_		
Pickering	 59	17	16	1		
Redcar Borough †	 1,886	1,069	1,051	_		
Richmond Borough	 112	80	56	_		
Saltburn & Marske	 76	40	40	_		
Scalby	 180	65	65	-		
Scarborough Borough	 1,089	213	219	8		
Skelton and Brotton	 137	55	55	-		
Thornaby Borough	 1,022	520	508	11		
Whitby	 90	73	73	-		
RURAL						
Aysgarth	 12	6	6	_		
Bedale	 115	63	63	_		
Croft	 6	3	3			
Easingwold	 205	42	34	1		
Flaxton	 325	202	201	1		
Helmsley	 64	32	32	_		
Kirkbymoorside	 37	24	24	_		
Leyburn	 478	72	72	-		
Malton	 78	18	18	-		
Masham	 10	10	10	_		
Northallerton	 217	178	178	_		
Pickering	 72	5	3	-		
Reeth	 23	16	16	-		
Richmond	 387	104	96	_		
Scarborough	 76	27	21	_		
Startforth	 68	12	12	_		
Stokesley	 55	26	25	_		
Thirsk	 49	31	31	_		
Wath	 36	29	29	_		
Whitby	 184	82	82	-		
Totals	 9,524	5,070	4,989	54		

[†] These figures include niusances found during housing inspections, which are not included in the returns of other authorities.

DISEASES OF ANIMALS (WASTE FOODS) ORDER 1957.

The county health inspectors have made 607 inspections of waste food boiling plants during the year; these have consisted of pre-licensing inspections and routine inspections to ensure that all waste food is sterilised by boiling prior to feeding pigs and poultry.

The object of this Order is to prevent the spread of infectious disease *i.e.* swine fever, fowl pest etc., by untreated waste foods.

HOUSING.

Overall, there was no marked change from previous years in the number of new houses erected, an increase in the number of houses erected by district councils being largely offset by a decrease in private development.

Clearance Areas for the purpose of slum clearance and re-housing were approved in Eston U.D., Skelton and Brotton U.D. and Thornaby Borough. In the latter district works to provide the ancillary services necessary for housing development on the aero-drome site were in progress during the year.

Improvements to existing properties by grant-aid were carried out in Northallerton U.D., Saltburn and Marske U.D., Scalby U.D., Bedale R.D., Leyburn R.D., Northallerton R.D., and Thirsk R.D.

The following statistical table gives details of progress in relation to housing and moveable dwellings during the year.

HOUSING

		New I	Houses		UNFIT HOUSE	s (Housing
DISTRICT		No. of houses rected by local authority	No. of houses erected by private persons	No. of inspections made	No. inspected for housing defects	No. of unfit houses capable of repair
Urban						
 Eston Guisborough Loftus Malton Northallerton Pickering Redcar Richmond Saltburn and Marsk Scalby Scarborough Skelton & Brotton Thornaby-on-Tees 	e	298 19 48 	93 106 5 14 27 38 364 59 85 74 70 26 13	185 154 573 155 577 106 530 153 102 85 1,473 1,072 940	159 63 446 118 154 71 211 92 17 70 566 949 786	112 25 445 — 137 19 86 8 7 5 208 32 96
4. Whitby Total Urban	-	716	1,000	6,105	3,702	1,180
Rural	-	7.10	1,000	0,100	0,702	1,100
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flavton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley 18. Thirsk 19. Wath 20. Whitby		19 19 20 8 4 10 40 4 76 	1 23 9 15 503 2 4 4 14 ——————————————————————————————	61 117 68 85 193 109 87 794 108 35 155 164 87 350 157 397 148 123 27 671	35 47 65 45 61 23 56 421 80 35 127 94 64 206 64 221 79 81 27 376	32 19 2 24 41 21 5 84 500 35
Total Rural		260	1,315	3,936	2,207	1,311
Administrative County		976	2,315	10,041	5,909	2,491

Act, 1957. R	ent Act, 1957)		Mov	VEABLE DWELL	INGS	
No. of unfit houses made suitable for human habitation	No. unfit for human habitation	No. of houses closed	No. of houses demolished	No. of licensed sites	No. of inspections of licensed sites	No. of unlicense moveable dwellings	
112 25 448 9 77 17 81 8 7 5 82 26 95	47 9 446 40 17 20 20 10 17 1 244 54 320	$ \begin{array}{r} 2 \\ 4 \\ \hline 3 \\ 12 \\ 1 \\ 14 \\ \hline 10 \\ \hline 33 \\ 6 \\ 2 \\ 1 \end{array} $		-5 3 -1 5 2 1 5 5 2 9	12 15 10 21 16 10 16 25 31 70	- - - 6 2 - 1 - - - 4	
992	1,245	88	84	38	226	13	
24 33 2 15 41 14 5 29 38 35 84 16 12 52 32 28 22 39 4	32 35 10 21 20 2 8 7 — 98 5 18 66 10 10 32 24 47	16 5 9 1 2 3 7 - 8 3 - 8 - 15 3 - 3	14 7 12 7 — 1 4 — 1 1 1 — 2 — 2 8 5 6	18 5 1 15 5 3 3 5 1 2 1 10 12 40 36 27 35 16 4 51	21 27 1 65 19 9 13 22 9 2 2 4 58 176 129 56 74 30 12 66	- 3 4 - 1 8 - 2 - 4 - 4 17 9 2 2 -	
525	445	83	70	290	795	60	
1,517	1,690	171	145	328	1,021	73	

MILK SUPPLIES.

Milk (Special Designation) Regulations, 1960.

Milk dealers licences in operation under the above Regulations on 31-12-62 were as follows:—

Pasteurisers .. 2 Pre-packed .. 501 Tuberculin Tested 17

There was an increase of 25 in the number of licensed dealers during the year, and 1,187 inspections were made by the county health inspectors of facilities for handling, storage and treatment of milk; only three contraventions of the Regulations were found and these were satisfactorily dealt with by informal action.

3,479 samples of milk have been taken during retail sale (an increase of 1,460 over the previous year); this figure includes samples from approximately 300 producer-retailers licensed by the Ministry of Agriculture, Fisheries and Food. I believe that with few exceptions the aim of quarterly sampling of all milk sold by retail has now been achieved.

By the enactment of the Milk (Special Designation) (Specified Areas) Order, 1962, the remaining area of the Riding consisting of :—

Richmond Municipal Borough; Leyburn Rural District; Richmond Rural District; Aysgarth Rural District; Reeth Rural District; Startforth Rural District;

was made a specified area, thus making compulsory the use of a special designation for retail milk sale throughout the whole Riding. The following table gives the results of samples of milk taken by the county health inspectors during retail sale by licensed dealers.

Conto	No.	Meth : Blue test		Phosphatase test		Turbidity test		Tubercle bacilli		Brucella abortus	
Grade	taken	Pass	Fail	Pass	Fail	Pass	Fail	Neg.	Pos.	Neg.	Pos.
Pasteurised	1967	1854	56	1938	10	-	-	6	-	6	-
Sterilised	485	-	-	-	_	485	-	-	-	-	-
Tuberculin Tested	997	868	66	_	_	_	_	897	_	882	20
Non-designated	30	4	2	-	-	-	-	27	-	27	-

The ten samples of pasteurised milk failing the phosphatase test and forty-nine failing the methylene blue test were produced at dairies outside the North Riding and the investigations into the cause of failure were carried out within the reciprocal arrangements existing between contiguous authorities. The upward trend in the number of samples failing the statutory tests has been reversed the figure being 134 from 3,479 samples taken, against 226 from 2,019 in 1961.

The incidence of brucella abortus in tuberculin tested milk increased during the year, twenty bottled milk samples were found to be infected on biological examination; this trend is dealt with in more detail at a later stage in this Report, under the heading Section 31 Milk-borne Infectious Disease.

Pasteurising Plants.

Two pasteurising plants, one H.T.S.T. and one Holder type, were in continuous use throughout the year; weekly samples have been taken from each plant by the county health inspectors and regular inspections have been made to ensure that the treatment, handling and storage of milk complied with the conditions for licensing laid down in the Milk (Special Designation) Regulations, 1960. Of the 213 samples taken, one from the Holder type plant failed the phosphatase test due to a defect in a recording thermometer and two from the H.T.S.T. Plant failed the methylene blue test; the reason for these failures could not be traced. Details of inspections, visits and samples taken are given below:—

Dlant	Plant Type	No. of	No.	-	hatase st		ylene test	Biolo examir	
No.	Type	Inspec- tions	samples taken	Passed	Failed	Passed	Failed	Nega- tive	Posi-
1	Holder	53	10	106	1	105	_	1	_
2	H.T.S.T	50	106	106	_	104	2	-	-
	Totals	103	213	212	1	209	2	1	_

Washed bottles from the two plants have been taken for rinse tests at regular intervals, groups of six bottles were taken and the results of the tests were as follows:—

Dairy	Method o bottle cleansing	No. of bottles taken	Satisfactory	Unsatisfactory
No. 1	 Machine	 78	78	_
No. 2	 do	 78	66	12

Milk-borne Infectious Disease.

With the attestation of all herds and the designation of the county as a specified area, the risk of infection with bovine tuberculosis has been largely eliminated but other milk-borne infections are still a potential risk to the consumer and will remain as long as raw milk in the form of untreated tuberculin tested milk continues to be sold. Although the demand for sterilised and pasteurised milk has progressively increased in recent years, 605 dealers in the Riding hold licences issued by the County Council, or by the Ministry of Agriculture, Fisheries and Food to sell untreated tuberculin tested milk. In some areas, this untreated milk is the only grade available, but there is also a considerable demand in other areas owing to a preference on the part of the consumer for a visible deep cream-line which heat treatment tends to disperse and which completely disappears on homogenisation.

The most common infection found in samples of raw milk taken in the Riding is brucella abortus, which is highly infective to bovine animals and the causative agent of undulant fever in man.

During the year 1,115 samples of raw milk taken during retail sale and 581 samples from individual animals were submitted to the Ring test for brucella abortus, 309 samples gave a positive reaction; further investigation by biological examination confirmed the presence of living organisms in the samples from 40 cows.

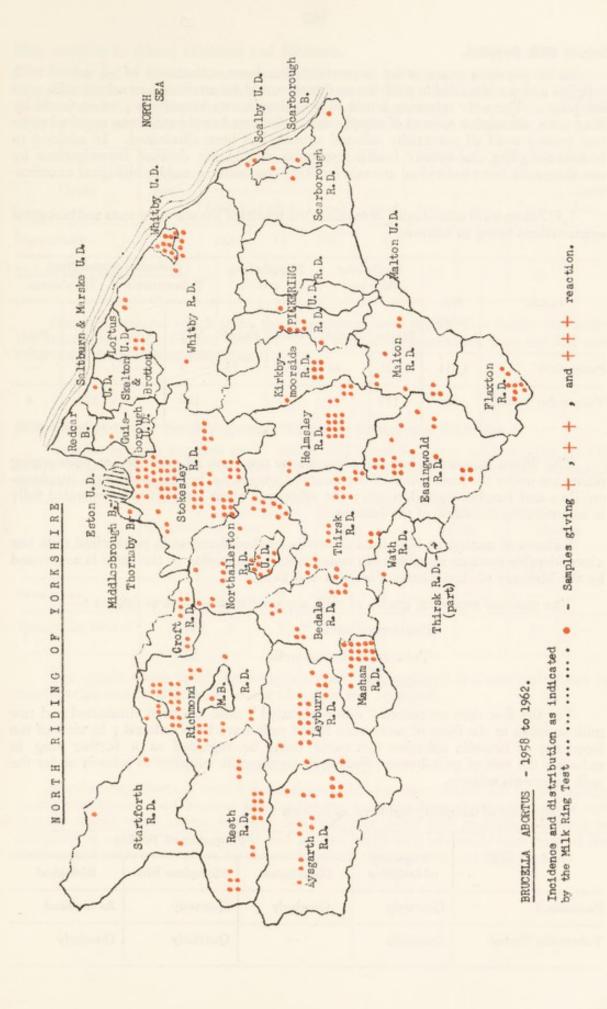
Each District Medical Officer of Health and the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food are notified of such infected milk; owing to fluctuations in the infectivity of brucella abortus which affect laboratory tests and biological results District Medical Officers are reluctant to take statutory action for consumer protection. It has so far been possible to obtain voluntary written undertakings from producers to exclude the milk from infected animals from retail sale unless heat treated.

Divisional Veterinary Officers restrict action to the giving of advice on vaccination of calves. As there is evidence that infection of herds with brucella abortus is becoming more widespread, there is an increasing and urgent need for agreement as to what tests are relevant in the detection of infected milk and an even greater need for amendment and consolidation of statutory measures.

Unfortunately some veterinary surgeons carry out re-vaccination of adult cows; this is of economic advantage to the farmer by preventing abortion, but it invalidates the milk ring test, and at the same time leaves cows still excreting the germs in the milk. It would be of considerable help if, in the consolidation and revision of statutory measures to control brucellosis, vaccination could be restricted by Regulation to calves under eight months old.

The United Kingdom is one of the few countries in the western world without an effective eradication policy.

The following map showing incidence and distribution of infection in the Riding gives some idea of the problem involved, having regard to the fact that many producers operate the "flying herd" system for commercial reasons.



School Milk Supplies.

As in previous years, strict supervision has been maintained of all school milk supplies and no identifiable milk-borne disease could be attributed to school milk consumption. The only infection found in school milk was brucellosis; when found by Ring tests, alternative sources of supply were substituted or the milk was required to be heat treated until all potentially infected animals had been eliminated. In addition to routine sampling, the county health inspectors carried out detailed investigations by sampling milk from individual animals for Ring test, culture and/or biological examination.

1,517 samples of school milk were taken, the results of the statutory tests and biological examinations being as follows:—

	No.	Methylene Blue test		Phosphatase test		Biological examination				
Grade						Tuberculosis		Br. abortus		
	taken	Passed	Failed	Passed	Failed	Neg.	Pos.	Neg.	Pos.	
Pasteurised	1,311	1,231	44	1,195	15	3	-	2	_	
Tuberculin Tested	206	172	24	_	_	189	_	185	4	

The fifteen samples failing the phosphatase test were all produced at pasteurising plants not under the jurisdiction of the County Council, *i.e.* in Middlesbrough, Stockton-on-Tees and Scarborough Borough; the officers of these authorities co-operated fully in investigating the cause of the failures.

Failures of methylene blue tests showed a marked decrease in pasteurised milk but a considerable increase in tuberculin tested milk; production of the latter is supervised by the Ministry of Agriculture, Fisheries and Food.

The position regarding grades of milk supplied to schools is as follows:-

Pasteurised	milk		 331
Tuberculin	Tested	milk	 53
Dried milk			 1

For the first time on record "non-designated" milk has been eliminated and raw milk supplies in the form of tuberculin tested milk have been reduced; in view of the frequency of brucella infection this trend must be regarded as a further step in reducing the risk of milk-borne infection from the milk supplied to schools under the milk in schools scheme.

Frequency of sampling has been as follows :-

Grade of Milk	Fraguanou	Frequency of Testing					
Grade of Milk	Frequency of sampling	Phosphatase	Methylene Blue	Biological			
Pasteurised	 Quarterly	Quarterly	Quarterly	As required			
Tuberculin Tested	 Quarterly	_	Quarterly	Quarterly			

Milk Supplies to School Canteens and Kitchens.

Milk supplied to school canteens and kitchens for cooking purposes are the subject of a separate contract from ordinary "milk in school" supplies and the grade supplied is not necessarily the same; it is therefore sampled separately. During the year, 357 samples were taken from these extra supplies with the following results:—

Grade	Samples	Meth. : Blue test		Phosphatase test		Tubercle bacilli		Brucella abortus	
	taken	Passed	Failed	Passed	Failed	Neg.	Pos.	Neg.	Pos.
Pasteurised	345	312	17	341	3	_	_	-	_
Tuberculin Tested	12	8	3	_	_	10	_	12	_

The three samples which failed the phosphatase were produced at dairies not under the jurisdiction of the County Council. The authorities responsible were notified and subsequent samples were satisfactory.

Milk Supplies to Old People's Homes, Children's Homes and Nurseries.

Samples of milk supplies to 23 homes and nurseries were taken by the county health inspectors; 96 samples were submitted to the statutory tests and biological examination, the results were as follows:—

Grade	Samples		: Blue	Phosp			bercle cilli		cella rtus
Grade	taken	Passed	Failed	Passed	Failed	Neg.	Pos.	Neg.	Pos.
Pasteurised	85	75	6	84	1		-	_	-
Tuberculin Tested	11	7	4	-	-	11	-	11	-

The sample which failed the phosphatase test was produced at a wholesale dairy in Scarborough and an alternative source of supply was arranged.

FOOD HYGIENE.

Regular inspections of school canteens and kitchens were carried out by the county health inspectors; food hygiene standards were found to be satisfactory and the fact that the school meals service has been free from any major food poisoning outbreak or complaint is a credit to the canteen and kitchen staffs who obviously take heed of the training and supervision given by the school meals organisers in this field.

Food Poisoning.

Seventy-five cases of food poisoning were notified during the year for the whole of the Riding; this is a considerable increase on the number notified for 1961, but fifty-six of the cases were at one establishment where the organism responsible for the disease was "salmonella onderstepoort."

Inspection and supervision of food and food shops.

Details of the inspections by district councils' officers of food shops and premises where food is prepared, and the results of action taken are given in the following table.

	DISTRICT		No. of	No. of unsatisfactory conditions	No. re	medied
	DISTRICT		inspections	found	Informally	Statutorily
	Urban					
1	Datas		893	35	32	
2.						10.5
3.	Guisborough		71	2	2	
	Loftus		169	15	15	1101
4.	Malton		52	96	5	
5.	Northallerton		259		59	
6. 7.	Pickering		37	2	2	
8.	Redcar		618	55	49	_
	Richmond		46	18	15 30	
9.	Saltburn and Marske		74 20	30		_
10. 11.	Scalby	- 20		93	67	
12.	Scarborough	**	2,116 14	2	2	The Sale
13.	Skelton and Brotton		738	27	27	
14.	Thornaby-on-Tees	100	396	21	21	
14.	Whitby		390	1.6401	_	_
	Total Urban		5,503	382	307	
	Rural					
1.	Aysgarth		30	2	2	_
2.	Bedale		26	2 3 2 25	2 3 2 25	
3.	Croft		6	2	2	
4.	Easingwold		197	25	25	
5.	Flaxton		85	8	8	_
6.	Helmsley		234	_	_	_
7.	Kirkbymoorside		139	2	2	
8.	Leyburn		69	21	21	
9.	Malton		7	1000	_	1
10.	Masham		10	-	_	_
11.	Northallerton		41	6	6	_
12.	Pickering		21	2	2	_
13.	Reeth		184	_		_
14.	Richmond		177	158	41	_
15.	Scarborough		86	_	_	_
16.	Startforth		87	4	4	_
17.	Stokesley		90	5	4 5	-
18.	Thirsk		47	5	5	_
19.	Wath		32	3	5 3	_
20.	Whitby		27	4	4	
	Total Rural		1,595	250	133	_
Adn	ninistrative County		7,098	632	440	_

Food and Drugs Act.

Sampling under the Food and Drugs Act, for adulteration, inferior quality and/or false description, is carried out by the Weights and Measures inspectors and I am indebted to the Chief Inspector for the following statistics for 1962:—

Total number of samples taken	Number	Number	Number	False
	Genuine	Adulterated	Inferior	Description
768	764	3		1

The following table shows the number and type of samples taken during the year of which some were found to be adulterated or falsely described.

Type of sa	imple	Samples taken	Number Adulterated	Number Inferior	False Description
Milk		355	2	_	_
Honey		1	1	_	_
Vinegar		22	_	_	1

In addition, complaints from purchasers were investigated concerning foreign objects found in food as follows:—

A piece of wood in blackcurrant jam.

A wasp in a tin of jam.

A fly in a loaf of bread.

Foreign matter in a loaf of bread.

Glass in a bottle of milk (three instances).

A milk bottle cap loose in a bottle of milk.

A button in a tin of baked beans.

A spider in a bottle of stout.

A spent matchstick in a fruit cake.

TABLE 1. Number of Births in each District during 1962.

DISTRICT.	Estimated mid-year home population 1962.	Total live births.	Illegiti- mate live births.	Birth- rate per 1,000 popu- lation.	Excess of births over deaths. (Natural increase)	Natural increase per 1,000 popu-
A.—Urban.						
1. Eston 2. Guisborough 3. Loftus 4. Malton 5. Northallerton 6. Pickering 7. Redcar 8. Richmond 9. Saltburn and Marsko 10. Scalby 11. Scarborough 12. Skelton and Brotton 13. Thornaby-on-Tees 14. Whitby	12,520 8,050 4,250 6,430 4,200 32,520 6,570 13,200 7,360 41,900 13,270 22,950	906 303 155 63 123 67 599 108 258 115 602 247 496 239	51 9 7 2 8 6 25 5 13 5 45 13 24 6	24·2 24·2 19·3 14·8 19·1 16·0 18·4 16·4 19·5 15·6 14·4 18·6 21·6 20·4	531 171 60 1 56 14 274 36 135 8 - 62 90 223 34	14·2 13·7 7·5 ·2 8·7 3·3 8·4 5·5 10·2 1·1 6·8 9·7 2·9
Total Urban	222,350	4,281	219	19-3	1,571	7.1
B.—Rural. 1. Aysgarth 2. Bedale		48 168	2 5	14.8	— 3	9.9
3. Croft 4. Easingwold 5. Flaxton 6. Helmsley	2,060 11,480 31,920 5,320	33 171 666 50	1 6 14 6	20·7 16·0 14·9 20·9 9·4	80 16 66 390 2	7·8 5·7 12·2 ·4
7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton	4,520 6,250 5,320 1,580 8,760	63 101 68 22 170	1 7 1 1 7	13·9 16·2 12·8 13·8 19·4	- 2 - 1 4 47	3·8 2·5 5·4
12. Pickering	4,780 1,740 22,350 7,820	62 21 518 99	1 3 9 6	13·0 12·1 23·2 12·7	- 1 - 3 378 - 21	16.9
16. Startforth 17. Stokesley 18. Thirsk 19. Wath 20. Whitby	4,360 27,140 13,590 3,280 11,410	89 557 270 39 179	12 13 1 6	20·4 20·5 20·0 11·9 15·7	41 275 120 23 26	9·4 10·1 8·8 7·0 2·3
Total Rural	185,040	3,394	104	18.3	1,461	7.9
Administrative County	407,390	7,675	323	18.8	3,032	7.4
Totals for 1961	400,110	7,282	342	18-2	2,636	6.6

TABLE No. 2.

Number of Deaths in each District during 1962.

DISTRICT.	Estimated mid-year home population, 1962	Total deaths.	Death-rate per 1,000 population.	Deaths under 1 year.	Total infantile mortality per 1,000 live births.	Illegitimate children, deaths under 1 year.	Illegitimate children, deaths under 1 year per 1,000 illegitimate live births.
A.—Urban.							
1. Eston	37,410	375	10.0	30	33-1	2	39-2
2. Guisborough	12,520	132	10.5		16.5		
3. Loftus	8,050	95	11.8	5 3 2 5	19-4		
4. Malton	4,250	62	14.6	2	31.7		
5. Northallerton	6,430	67	10.4	5	40.7		
6. Pickering	4,200	53	12.6	1	14.9		
7. Redcar	32,520	325	10.0	11	18.4		
8. Richmond	6,570	72	11.0	2	18.5		
9. Saltburn and Marsk		123	9.3	2 6 2 7	23.3		
 Scalby Scarborough 	7,360	107	14·5 15·8	2	17·4 11·6		
12. Skelton and Brotton	41,900	664 157	11.8	5	20.2		
	13,270 22,950	273	11.9	11	22.2	2	83.3
14. Whitby	11,720	205	17.5	7	29.3		00 0
•							
Total Urban	222,350	2,710	12.2	97	22.7	4	18.3
B.—Rural. 1. Aysgarth	3,250	51	15.7	1	20.8		
1. Aysgarth 2. Bedale	8,110	88	10.9	1 1	20-8		
 Aysgarth Bedale Croft 	8,110	88 17	10·9 8·3	1	6.0		
 Aysgarth Bedale Croft Easingwold 	8,110 2,060 11,480	88 17 105	10·9 8·3 9·1	1	6.0		
 Aysgarth Bedale Croft Easingwold Flaxton 	8,110 2,060 11,480 31,920	88 17 105 276	10·9 8·3 9·1 8·6	1 5 4	6·0 29·2 6·0		
 Aysgarth Bedale Croft Easingwold Flaxton Helmsley 	8,110 2,060 11,480 31,920 5,320	88 17 105 276 48	10.9 8.3 9.1 8.6 9.0	1 5 4 1	6·0 29·2 6·0 20·0		
 Aysgarth Bedale Croft Easingwold Flaxton Helmsley Kirkbymoorside 	8,110 2,060 11,480 31,920 5,320 4,520	88 17 105 276 48 65	10·9 8·3 9·1 8·6 9·0 14·4	1 5 4 1 1	6·0 29·2 6·0		
 Aysgarth Bedale Croft Easingwold Flaxton Helmsley Kirkbymoorside Leyburn Malton 	8,110 2,060 11,480 31,920 5,320 4,520 6,250	88 17 105 276 48	10.9 8.3 9.1 8.6 9.0	1 5 4 1	6·0 29·2 6·0 20·0 15·9		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320	88 17 105 276 48 65 77 69 18	10.9 8.3 9.1 8.6 9.0 14.4 12.3 13.0 11.4	1 5 4 1 1 1	6·0 29·2 6·0 20·0 15·9 9·9 14·7		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320	88 17 105 276 48 65 77 69	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0	1 5 4 1 1	6·0 29·2 6·0 20·0 15·9 9·9 14·7		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780	88 17 105 276 48 65 77 69 18 123 63	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2	1 5 4 1 1 1	6·0 29·2 6·0 20·0 15·9 9·9 14·7		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740	88 17 105 276 48 65 77 69 18 123 63 24	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8	1 5 4 1 1 1 1 2 1	6·0 29·2 6·0 20·0 15·9 9·9 14·7 		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350	88 17 105 276 48 65 77 69 18 123 63 24 140	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3	1 5 4 1 1 1 1 1 2 1	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1		
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350 7,820	88 17 105 276 48 65 77 69 18 123 63 24 140 120	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3	1 5 4 1 1 1 1 1 7 3	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3	:: :: :: :: :: ::	
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350 7,820 4,360	88 17 105 276 48 65 77 69 18 123 63 24 140 120 48	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3 11·0	1 5 4 1 1 1 1 1 7 3 4	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3 44·9	:: :: :: :: :: :: ::	
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350 7,820 4,360 4,360 27,140	88 17 105 276 48 65 77 69 18 123 63 24 140 120 48 282	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3 11·0 10·4	1 5 4 1 1 1 1 1 7 3 4 8	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3 44·9 14·4	:: :: :: :: :: :: ::	
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley 18. Thirsk	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350 7,820 4,360 27,140 13,590	88 17 105 276 48 65 77 69 18 123 63 24 140 120 48 282 150	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3 11·0 10·4 11·0	1 5 4 1 1 1 1 1 7 3 4 8 8	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3 44·9 14·4 29·6	:: :: :: :: :: :: ::	
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley 18. Thirsk 19. Wath	8,110 2,060 11,480 31,920 5,320 4,520 6,250 5,320 1,580 8,760 4,780 1,740 22,350 7,820 4,360 4,360 27,140	88 17 105 276 48 65 77 69 18 123 63 24 140 120 48 282	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3 11·0 10·4	1 5 4 1 1 1 1 1 7 3 4 8	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3 44·9 14·4	:: :: :: :: :: :: ::	
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley	8,110 2,060 11,480 31,920 5,320 4,520 6,250 1,580 8,760 4,780 1,740 22,350 7,820 4,360 27,140 13,590 3,280	88 17 105 276 48 65 77 69 18 123 63 24 140 120 48 282 150 16	10·9 8·3 9·1 8·6 9·0 14·4 12·3 13·0 11·4 14·0 13·2 13·8 6·3 15·3 11·0 10·4 11·0 4·9	1 5 4 1 1 1 1 1 1 7 3 4 8 8	6·0 29·2 6·0 20·0 15·9 9·9 14·7 11·8 16·1 13·5 30·3 44·9 14·4 29·6	· · · · · · · · · · · · · · · · · · ·	166.7

TABLE 3.

Deaths according to Age-Groups, 1962.

Causes of Death.		Sex					Dis									ATE DIST	OF RICT	S		
CAUSES OF DEATH.		Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-	65-	75-
ALL CAUSES	}	M F	1414 1296			11						1014 919	30 23	4 5	8			230 138		
1. Tuberculosis, respiratory	}	M F	10					1	7	1	1	5				1:	1	3		
2. Tuberculosis, other	}	M F														1				
3. Syphilitic disease	}	M F	2 3						1	2	1	2 1						1	1	1
4. Diphtheria	}	M F	::						::											
5. Whooping cough	}	M F																		
6. Meningococcal infections	}	M F				::		::					::						::	
7. Acute poliomyelitis	}	M F																		
8. Measles	}	M F	::			::	::					1	::					::	::	
Other infective and parasitic diseases	}	M F	3 2						1 1		i	1 3			1		i	2		
 Malignant neoplasm stomach 	}	M F	48 22	::	1000			1	22	1 2 2	13 7		::				1	9 5	3 5	
 Malignant neoplasm lung, bronchus 	}	M F	69 18	1				1 2			The same						1	26 3	14 1	1
 Malignant neoplasm breast 	}	M F	50					ii	23			25	::	::			4	10	5	
 Malignant neoplasm uterus 	}	F	19					3	5	7	4	10						7	3	
 Other malignant and lymphatic neoplasm 	s }	M F	144 107				4	9	48	34	48	87 72		i	1	1	1	28 21	23 18	3 2
15. Leukaemia aleukaemia	}	M F	8 2				4	3	4		1			1	i		1	1	1	
16. Diabetes	}	M	13			1000	1	9	2	2 4	3 5	7 13					1	2	1 9	
17. Vascular lesions of nervous system	}	M	177 239			1000		1 0	28		83 159							OF	43 51	7
18. Coronary disease, angina	}	MF	338 213				9 333	7 2	112	111	108 102	254 140		::			4			

Table 3-continued.

									TE O					-				E O			
	Causes of Death		Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-	65-	75-
19.	Hypertension with heart disease	}	M F	13 19			::		::	3	3 7	7 9	10 17			::	::		1	5 4	
20.	Other heart disease	}	M F	150 264					2 8	19 19	34 42	95 195	121 176			1	i	1	13		76 137
21.	Other circulatory disease	}	M F	51 43				2	4	8 5	14 11	23 27	41 42						8	9	
22.	Influenza	}	M F	10 4						4	2	4 3	5 4						2	2	1 3
23.	Pneumonia	}	M F	59 71	8 12	·i	1		1	14 11	9	26 38	45 38	4 4	1	1	2 2	1 2	4 3	7 6	25 19
24.	Bronchitis	}	M F	81 24					3	25 2	37 7	16 15	51 26	1					10	18 6	22 17
25.	Other diseases of respiratory system	}	M F	12 5	i				·i	7	4 2	1	4 6						2	1 1	1 4
26.	Ulcer of stomach and duodenum	}	M F	19 8					2	5	5	7 2	11 6					ï	4	3	4 5
27.	Gastritis, enteritis and diarrhoea	}	M F	4 6	1 1				1	1	·	1 3	2						1	1	
28.	Nephritis and nephrosis	}	M F	12 9				2	1 2	2 2	5 2	2	5 7			1		2	1 4	1 1	2
29.	Hyperplasia of prostate	}	M	25						1	8	16	14							3	11
30.	Pregnancy, child- birth, abortion	}	F	3					3												
31.	Congenital malformations	}	M F	15 9	10 8	3	1				1		5 4	3		· .			1		1
32.	Other defined and ill- defined diseases	}	M F	90 97	33 17	1	3	3	5 3	13 13	13 16	22 44	77 68	22 15	1	1	1	3 9		18 12	21 22
33.	Motor vehicle accidents	}	M F	17 4			1	5	6 2	2	1	2	11 5		·i		3	2	5	2	1
34.	All other accidents	}	M F	32 34	2 2	1	2	1	7	7 8	6 4	6	25 20	· i	1	1	5	3 2	4 4	3	8 12
35.	Suicide	}	M F	18 7					9 2	4 3	3 2	2	11 6					1 1	5 4	2	3
36.	Homicide and operations of war	}	M F	1	i				1				3						i		

TABLE 4.

Deaths in Sanitary Districts from the seven chief causes, 1962.

		Can	eer.	Hea		no	natory n- ulosis.	eule	ber- osis- onary.		her culosis	circu	her latory ase.	lesio	eular ons of yous tem.
DISTRICT	2	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.
A.—Urban.															
1. Eston 2. Guisborough 3. Loftus 4. Malton 5. Northallerton 6. Pickering 7. Redcar 8. Richmond 9. Saltburn and Marske 10. Scalby 11. Scarborough 12. Skelton & Brotton 13. Thornaby-on-Tees 14. Whitby		83 16 22 5 8 4 60 12 26 13 123 21 64 30	2·22 1·28 2·73 1·18 1·24 ·95 1·85 1·85 1·97 1·77 2·94 1·58 2·79 2·56	100 45 31 25 30 19 111 21 35 50 299 64 77 90	2·67 3·59 3·85 5·88 4·67 4·52 3·41 3·20 2·65 6·79 7·14 4·82 3·36 7·68	45 15 14 3 4 5 21 9 11 7 62 16 32 8	1·20 1·20 1·74 ·71 ·62 1·19 ·65 1·37 ·88 ·95 1·48 1·21 1·39 ·68	1	·03 ·12 ·· ·03 ·15 ·· ·05 ·13			27 2 5 3 5 6 10 5 4 2 13 1 9 2	·72 ·16 ·62 ·71 ·78 1·43 ·31 ·76 ·30 ·27 ·31 ·08 ·39 ·17	46 33 14 13 11 9 49 12 17 19 86 25 36 46	1·2 2·6 1·7 3·0 1·7 2·1·5 1·8 1·2 2·5 2·0 1·8 1·5 3·9
Total Urban		487	2.19	997	4.48	252	1.13	10	•04			94	•42	416	1.8
B.—Rural															
1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton 10. Masham 11. Northallerton 12. Pickering 13. Reeth 14. Richmond 15. Scarborough 16. Startforth 17. Stokesley 18. Thirsk 19. Wath 190. Whitby		7 10 5 18 51 53 20 111 1 18 9 5 26 20 7 52 18 2 16	2·15 1·23 2·43 1·57 1·60 ·94 ·66 3·20 2·07 ·63 2·05 1·88 2·87 1·16 2·56 1·61 1·92 1·32 ·61 1·40	18 32 3 38 104 11 28 21 26 10 47 29 8 38 45 17 108 63 5 67	5.54 3.95 1.46 3.31 3.26 2.07 6.19 3.36 4.89 6.33 5.37 6.07 4.60 1.70 5.75 3.90 3.98 4.64 1.52 5.87	8 3 10 33 3 3 9	1·23 ·99 1·46 ·87 1·03 ·56 ·66 1·52 ·75 · 1·26 1·26 ·57 ·81 ·38 ·23 1·25 ·66 ·30 ·79	i	-03	i	-19	6 5 .4 8 2 8 3 1 1 8 1 1 9 7 3 6 7 3	1·85 ·62 ·35 ·25 ·38 1·77 ·48 ·19 ·63 ·91 ·21 ·57 ·40 ·90 ·69 ·22 ·52 ·26	11 19 4 17 40 15 13 7 11 4 18 12 7 22 25 9 43 26 4 28	3·3 2·3 1·9 1·4 1·2 2·8 2·8 1·1 2·0 2·5 2·0 2·5 4·0 9 3·2 2·0 1·5 1·9 1·9 1·9 1·9 1·9 1·9 1·9 1·9
Total Rural	3	304	1.64	718	3.88	170	-92	5	-03	1	-005	83	•45	335	1.8
Administrative County		791	1.94	1715	4.21	422	1.04	15	-04	1	·002	177	.43	751	1.8

TABLE 5.

Number of Deaths from certain Diseases in each District during 1962.

		Pulm tuber	nonary rculosis				ther	i.	1		All culosis.			nflu- nza.	and	other irator eases.
DISTRICT.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per
A.—Urban 1. Eston 2. Guisborough 3. Loftus 4. Malton 5. Northallerton 6. Pickering 7. Redcar 8. Richmond 9. Saltburn and Marske 10. Scalby 11. Scarborough 12. Skelton and Brotton 13. Thornaby-on-Tees 14. Whitby	13 2 2 1 7 1 3 1 11 5 10 8	1 1 1 1 2	1300 200 700 100 550 333 800	·03 ·12 ·03 ·15 ·05 ·13 ·09	1 1 1 				14 2 2 1 8 1 4 1 12 5 10 8	1 1 2 3	1400 200 800 100 600 333 800	·03 ·12 ··· ·03 ·15 ··· ·05 ·13 ·09	2 1 2 1 4 2 2 2	·05 ·08 ··· ··· ·06 ··· ·14 ·10 ·15 ·09 ··	16 7 4 2 1 3 9 5 6 5 33 8 17 6	·4. ·50 ·50 ·4 ·10 ·7 ·2: ·7 ·4 ·6 ·7 ·6 ·7 ·5
Total Urban	 64	10	640	·045	4				68	10	680	-045	14	-063	122	-5
B.—Rural 1. Aysgarth 2. Bedale 3. Croft 4. Easingwold 5. Flaxton 6. Helmsley 7. Kirkbymoorside 8. Leyburn 9. Malton	 1 3 2 4 4 1 2	1 2	400	··· ·03 ··· ·32	2	 			1 3 2 6 4 1 2	 1 1 2	600 400 100	·03 ·19 ·32	1 1 1 1 1 1	······································	1 6 1 2 14 2 7 3	·3 ·7 ·4 ·1 ·4 ·3 1·1 ·5
10. Masham 11. Northallerton	 3 1 5	1	300	-11	2				3 3	i	300	-11	··· ·· · · · · · · · · · · · · · · · ·	······································	6 1 1 21	·6 ·8 ·2 ·1
17. Stokesley	 1	1	400	.04	1	::			1 1	1	600		1	.04	21 5 	
Total Rural	 33	5	660	-027	7	1	700	•005	40	6	667	-032	9	·048	87	
Administrative County	 97	15	647	-037	11	1	1100	-002	108	16	675	-039	23	.056	209	

TABLE 6.

Number of Deaths from certain Diseases in each District during 1962.

		chi	gnancy, ldbirth, ortion.		ngenital ermations.
DISTRICT		Deaths	Death-rate per 1,000 births.	Deaths	Death-rate per 1,000 births.
A.—Urban.					
1. Eston				4	4.42
2. Guisborough	::	1	3.30	1	3.30
3. Loftus			5 50		5.50
4. Malton				1	15.87
5. Northallerton				î	8.13
6. Pickering					
7. Redcar				6	10.00
8. Richmond				2 2	18.52
Saltburn and Marske		1	3.88	2	7.75
10. Scalby				1.5	
11. Scarborough		1	1.66	1	1.66
12. Skelton and Brotton			5.5	1	4.05
13. Thornaby-on-Tees				4	8.06
14. Whitby			**	1	4.18
Total Urban		3	0.70	24	5.61
B.—Rural.					
1. Aysgarth					
2. Bedale		1			
3. Croft					
4. Easingwold					
5. Flaxton					
6. Helmsley					
7. Kirkbymoorside				1	15.87
8. Leyburn				1	9.90
9. Malton				1	14.71
10. Masham					
11. Northallerton					
12. Pickering		**			
13. Reeth				1	1.02
14. Richmond 15. Scarborough				1	1.93 10.10
16. Startforth					
17. Stokesley				i	1.80
18. Thirsk				3	11.11
19. Wath					
20. Whitby					11
Total Rural				9	2.65
Administrative County		3	.39	33	4.30

TABLE 7.

Notification of Infectious Disease in 1962, as given in the weekly returns rendered by Medical Officers of Health.

A_URBAN. 1							ру	me	uit	-ca1	01	пс	015	01	11	ean												
A.—URBAN.	Г	DISTRICT.	Smallbox.	Scarlet fever.	Diphtheria.	nteric Fever, includes phoid & paratyphoid.	Acute Pneumonia.	Cholera.	Plague.	eningococcal Infection.	Paralytic physical	io- eli- s	pha	e- ul- s.	Food poisoning.	Dysentery.	phthalmia neonatorum.	Erysipelas.	Malaria (at home).	Malaria (abroad).	Chickenpox.	Measles (excluding Rubella)	Whooping cough.	Puerperal pyrexia	cu	losi	is	Anthrax
1. Eston 2		A — LIPPAN			1	H 1.				Z							0											
9. Saltburn & Marske 3	2. 3. 4. 5. 6. 7.	Eston Guisborough Loftus Malton Northallerton Pickering Redcar		i			8			1	i ::	1			1	i 86	0.00	1		100		42 4 22 12 3 423	15	2	2 2 1 7		1 .	
Brotton 13. Thornaby-on-Tees 3	9. 10. 11.	Saltburn & Marske Scalby Scarborough		. 5			1 19								56	2		1			••	174	2	4	3	1	1	
B.—Rural	13.	Brotton Thornaby-on- Tees		3 18	1000						1				2	7		1		1		46	6	,	10			
B.—Rural 1		Total Urban	-	. 51		1	38			1	2	1			64	110		8		1		1293	31	16	64	1	3 .	-
1. Aysgarth 1 13 7 133 1 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 1 33 3 3 3 3 3 3 3 3 3 3 3 4 2 4 2 4 2 4 2 4 2 4 2 4 4 2 4 4 2 4 4 3 1 3 4 2 4 4 3 1 3 4 4 2 4 4 4 3 1 2 2 1 3 2 2 1 2 1 3 2 1 2 1 3 2 1 2 1 3 1 2 2 1		1961		. 38	.,		59			3			2		8	30	1	11				2937	164	13	90	1	10 .	-
Total Rural 25 46 2 3 113 81 2 1 60 2053 4 2 33 7 1961 32 7 57 3 1 2 8 51 2 2 1 47 2094 102 5 38 3 Administrative County 76 1 84 3 5 1 177 191 10 2 60 3346 35 18 97 1 10	2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18.	Aysgarth Bedale Croft Easingwold Flaxton Helmsley Kirkbymoorside Leyburn Malton Masham Northallerton Pickering Reeth Richmond Scarborough Startforth Stokesley Thirsk Wath		. 1			11333	3		1	1 1			1	9	166 1122 121199 2003				· · · · · · · · · · · · · · · · · · ·	3 57	11 200 247 79 143 77 83 22 2 58 426 42 18 375 70 37	:: :: :: :: :: ::	· · · · · · · · · · · · · · · · · · ·	3 2 4 4 1 1 2 3 1 1 5 2 4 1		2 .	
1961 32 7 . 57 3 1 2 8 51 2 2 1 47 2094 102 5 38 3 Administrative County 76 1 84 3 5 1 177 191 10 2 60 3346 35 18 97 1 10	20.		-	25	-	-	46		-	2	3		-	1		_	-	_	_	-		_		\vdash	_	-		
Administrative County 76 1 84 3 5 1 177 191 10 2 60 3346 35 18 97 1 10			-	- 00	-	-	-	-	-	-	-	-	-	-		_	-	-	-			_				-	7	-
1961 70 7 116 6 1 2 2 16 81 3 13 1 47 5031 266 18 128 1 13	Ad	lministrative	-		-	-	-	-	-	-	-	-	-	-		-	-	-			200	-		-		-	-	-
		1961		. 70	1.	. 7	110	5		6		1	2	2	16	81	3	13		1	47	5031	266	18	128	1 7	13 .	

TABLE 8.

Number of Deaths from Infectious Diseases in each District during 1962.

					ph- eria.	Me	asles.		oping ugh.		neu- onia
		DISTRICT.	medica Sook	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths	Death-rate per
		A.—Urban.									
		I. Eston								29	.78
		2. Guisborough	::							8	-64
		3. Loftus								10	1.24
		4. Malton								1	.24
		5. Northallerton								3	.47
		6. Pickering								2	-48
		7. Redcar								12	.37
		8. Richmond								4	.61
		9. Saltburn and Marske								5	-38
		10. Scalby								2	.27
		11. Scarborough								29	-69
		12. Skelton and Brotton								- 8	-60
		13. Thornaby-on-Tees								15	.65
2.4	12.1	14. Whitby								2	.17
		- Ac to the state of the									
		Total Urban								130	-58
		B.—Rural.					100				
		1 Assessmenth								2	-92
		1. Aysgarth								3 2	-25
		2. Bedale		* *			1.1			2	-97
		3. Croft 4. Easingwold								8	-70
		5. Flaxton				* * *			11	19	-60
		6. Helmsley								1	.19
		7. Kirkbymoorside				**	**		11	3	-66
		8. Leyburn								2	-32
		9. Malton			- ::			::		1	-19
		10. Masham			1			1			
		11. Northallerton						1		5	-57
		12. Pickering								2	.42
		13. Reeth			1			1		1	.57
		14. Richmond				1	.045			12	-54
		15. Scarborough								2	-26
		16. Startforth									
		17. Stokesley								13	-48
		18. Thirsk								4	-29
		19. Wath								1	.30
		20. Whitby								2	.18
		Total Rural				1	-005	1		83	•45
		- ESTATION 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-	-	-	-	-	-	-	- 10
		Administrative County		10		1	.002			213	-52

					15	
	-	20	200	40.00	100	

75														
TABLE 9.—DEATHS,	with their causes, in ea	ch District during 1962.												

DISTRICT.	All causes.	Tuberculosis,	respiratory.	Tuberculosis, other,	Syphilitic disease.	Diohtheria.	Manager of the last	Whoeping cough.	Meningoeseesl infections.	Acute poliomyclitis	Measles.	Other infective	diseases.	neoplasm, stomach.	Malignant neoplasm, here, benedas.	Malignant neoplasm, breast.	Malignant	Deber milimant	& lymphatic neoplasms.	Leuksemia, aleuksemia,	Diabetes.	Vascular Ireions	Corneary	angina. Hypertension	with beart disease.	disease,	Other circulatory disease,	2 Informa-	2 Pasumonia.	Bronchitia.	Other diseases of respiratory	Cleer of storeach	A deodenum, Gastrilia,	& diareboen,	& nephrosis.	of petotate.	Le Congenital	Other defined to the defined	Motor vehicle	All collect	Accidents.	Suicide,	Hemicide & operations of war.	DISTRICT	r.
			1	2	3			5	6	7		1		10	11	12	1 12	3	14	15	16	17	1	8	19	1	21	77	23	24		1.1.	1.1				10	100	MI				MP		
A.—Uman	M	F M	F 2	M F	M F	M	F M	4 F	M F	M F	M	F M	F	MF	M F	M	PP	- 1	# F	MF	M F	M	FM	FM	FM	FN	F	MF	M F	MF	M F	M	754	34	-		NI F	31 /	NI .				-	AURBAN.	
Eston Guisborough Loftus Malhom Northallerton Northallerton Richmond Saltburn and Manke Scallby Scarborough Siedom and Boston Thornally-on-Tess Whathy	66 57 29 32 30 162 38 56 58 323 85 166	38 1 33			1 2 1							1	The state of the s	3 6 3 0 2	3 1 1 1 6 3 3 4 4 4 4 4 15		1 4 4 4 2 1 3 4 9 2 3 1 5 1 5	4 19 4 19 1 26 1 36 1 15	4 12 7 7 7 7 1 2 2 2 1 1 9 13 2 2 7 4 6 31 6 5 16 5 16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13 2 8 7 3 2 8 1 8 1 32 5 13 1 17 1	0 16 6 16 6 16 8 12 4 7 6 34 4 8 9 8 1 16 4 90 2 27	8 1 8 2 21 21 25 9 8 65 4 15 16	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	6 8 2 5 1 36 5 7 1 11	11415442813	2 2 1 2 1	4 6 1 2 1 1 6 6 2 2 3 2 5 14 2 5 10	4 1 1 2 1 1 1 1 8 3 6 3 25 3 4 4	1 1 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1		1	1 2 1 4	1 2 1 1 1 1 1 1 1 1 1	11111	422 1 13	9 22 1 1 5 8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 523	6 3 1	2	1 1	Eston Guishorough Loftus Matoon Northallerton Peckering Richmond Richmond Subburn and Marke Scalby Scarborough Siction and Brotton Thernaby-on-Tree Whithy	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14,
Total Urban	14141	296 10			2 3			,				3	2 4	8 22	69 18	9	0 15	9 14	44 107	8 2	6 13	1772	19,338	213 13	19 19	264.51	43 2	0 4 9	9 71	1 24	12 5	19 8	4 0	12	9 25	3	15 9	90 97	17 4	32	34 18	7	1 1	Total Urban	
B.—Ronal. Aconarth Aconarth Coult Coult Easingwold Flathin Kirkhymoornide Leyburn Northallerton Northallerton Pakering Rainmond Scarborough Scarborough Saraforth Saraforth Wath Wath Whith Wath	24 32 46 38 13 58 32 12 84 61	59 145 1 24 33 31 2 31 65 1 112 56 59 17 17 122 1 62			2							1	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 1 2 2 1 2 2 2 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1 2 3 5 6 11 3 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2 3 1 5 3 1 10 4 1 0 3 4 1 7 4 1 1 1 3 8 9 6 1 1 1 4 1 5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 1 3 1 7 7 7 7 4 4 5 3 4 5 1 8 5 1 1 7 7 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 7 2 1 4 30 1 3 28 1 3 28 1 5 12 3 5 13 5 6 13 7 9 12 3 9 12 3 9 12 3 9 12 4 13 1 9 13 4 2 9 13 4 2 9 14 2 9 14 2 9 14 2 9 14 2 9 14 2 9 15 2 9 16 2 9 17 18 2 9 1	9 1 15 12 11 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 4 1 3 1 5 . 5 3 7 1 1 . 3 1 6 . 1 3 2 22 2 27 . 1	7 2 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 2 6 2 6 2 1 3 . 1 8 2 1 2 1		2 6 9 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1	2 . 4		1	1 2 2 2	***************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 2 2 2 1 1 7 4 8 5 1 1 6 11	1 1		1		2	B.—RURMAL Aysgarth Reddle Cooft Pleasing Pleasing Helmsley Helmsley Malkon Malk	1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 16. 17. 18.
Total Rural	NOTAL.	919 5		1 7	2 1						. 1	1. 1	3 2	0 19	51 7	12	5 10	0 87	7 72	8 5	7 13	139/1	96 254)	140 10	17 12	176 41	42	5 4 4	5 38	51 26	4 6	11 6	2	. 5	7 14	100	5 4	77 68	11 5	25	20 11	6	3	Total Rural	



