[Report 1941] / Medical Officer of Health, Nottingham City.

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CITY OF NOTTINGHAM.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1941.

CYRIL BANKS,
M.D., B.S.(Lond.), D.P.H.(Sheff.),
Medical Officer of Health.

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HEALTH COMMITTEE MEMBERS

1941 (mid-year.)

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Vice-Chairman :—COUNCILLOR W. B. BLANDY, M.R.C.S., L.R.C.P., L.D.S.

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VICE-CHAIRMAN.
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COUNCILLOR ARBON.
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The Chairman of this Sub-Committee is Alderman R. Shaw, and the Vice-Chairman, Councillor (Mrs.) Hazard.

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CHAIRMAN.
VICE-CHAIRMAN.
COUNCILLOR KERRY.

HEALTH DEPARTMENT STAFF, 1941.

(Condensed List).

MEDICAL.

Medical Officer of Health—
Cyril Banks, M.D., B.S.(Lond.), D.P.H.(Sheff.).

Tuberculosis Officer and Deputy Medical Officer of Health—
John V. Whitaker, M.B., Ch.B., D.T.M., D.P.H.

Assistant Tuberculosis Officer—
Fredk. H. W. Tozer, M.D., B.S.(Lond.), M.R.C.P.(Lond.).

Assistant M.O.H. and Medical Supt., City Isolation Hospital and Sanatorium—
Thomas A. Don, M.B., Ch.B., D.P.H.

Resident Medical Officer, City Isolation Hospital and Sanatorium—
One appointment—held for 6 or 12 months.

Senior Medical Officer, Maternity and Child Welfare—
Isabella M. Harkness, M.B., Ch.B., D.P.H.

Bacteriologist—
Elliott J. Storer, M.R.C.S., L.R.C.P.

Medical Superintendent, Newstead Sanatorium—
Geoffrey O. A. Briggs, M.A., M.B., B.Ch., M.R.C.P.(Lond.), D.P.H.

Medical Officers—

Maternity and Child Welfare.	7 (3 full-time, 4 part-time).
Venereal Diseases.	5 (part-time).
U.V. Ray Clinic.	2 (part-time).
Relief Districts (14).	12 (part-time).
Public Vaccinators.	5 (part-time).
Diphtheria Immunisation.	2 (1 for 5 mos. only).

NON-MEDICAL.

Chief Sanitary Inspector—Alfred Wade, F.R.San.I.
Chief Clerk—Herbert Read.

Sanitary Inspectors (all branches)			17
Clerks (excluding Hospitals)			21
,, Casualty Bureau and Group Officer			2
Women Housing Officers			5
Vaccination Officers (part-time)			2
Health Visitors, Supervisors of Midwives, Tuberculosis Nurses			28
Clinic Nurses, orderlies, etc. (4 part-time)			10
City Midwives			31
Hostels for Unmarried Mothers			6
Ultra-violet Ray Clinic			2
Bacteriological Laboratory			4
Mortuary Attendants			2
Office Porter			1
Cleaners			13
General Labourer			1
Venereal Diseases Hospital			5
Small-pox Hospital (Caretakers: man and wife)			2
City Isolation Hospital and Sanatorium—			
	Nursing	42	
	Others (F.)	33	
	,, (M.)	16	
		—	91
Newstead Sanatorium— Preliminary Staff			4

CITY HOSPITAL.

Medical Superintendent—Dr. C. L. C. Crowe.

Deputy Medical Superintendent	1	Pharmacists	2
1st Assistant Medical Officer	1	Dispensers	3
Assistant Medical Officer	1	Apprentice Pharmacist	1
Assistant Surgical Officers	3	Teachers	2
Obstetrical Officers	3	Masseuses	4
Consulting Physicians*	3	Cook (female)	1
Consulting Surgeons—		Assistant Cooks (female)	7
General*	3	Chef	1
Special*	4	Assistant Chef	1
Other Medical, etc.—Staff*	5	Assistant Cooks (male)	2
Steward	1	Maids	24
Assistant-Steward	1	Kitchen-boy	1
Matron	1	Seamstresses	6
Assistant-Matrons	2	Clerks	9
Ward Sisters	27	Medical Supt's Secretary	1
Night Superintendent	1	,, ,, Typists	2
Night Sisters	3	Hospital Porters	36
Tutor Sisters	2	Telephone Operators	3
Home Sisters	2	Laboratory Attendants	3
Housekeeping Sister	1	Lodge Porters	2
Theatre Sisters	2	Male Receiving-Ward Attendt.	1
X-Ray Sister	1	Female ,, ,, ,,	1
Staff Nurses	31	Linen Storekeeper	1
Ambulance Nurses	3	Labourers	7
Probationers	147	Window-cleaners and sweeps	2
Sub-probationers	8	Scrubbers	92
Assistant Nurses	11	Kitchen Porters	3
Ward Orderlies	50	Office-boy	1
Maternity Pupils	22	Assistant Storekeeper	1
Charge Male Nurses	3	Mortuary Attendant	1
Male Nurses (Probationers)	7	Scrubbers (part-time)	3

* Part-time.

CIVIL NURSING RESERVE.

Ward Sisters	5	All on full-time duty.
Staff Nurses	5	
Nursing Auxiliaries	62	
Assistant Nurses	2	

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1941.

To the Chairman and Members of the Health Committee.

For the third year in succession, the Annual Report is published in a condensed form. Actually it has been prepared just as fully as ever and the officers in charge of the various branches of the Department have compiled the detailed reports and statistics which are necessary for reference : these reports are filed away for future use and all that is published here is a summary giving a general idea of the vital statistics and of the work carried out in the City's Health Services during 1941. The abbreviated form of publication saves paper and printers' labour, but for the reasons given it does not save any work within the Department ; in these busy days it is not possible to prepare the report for issue as early as was customary in peace-time and no apology is necessary for the lateness of its appearance.

GENERAL STATISTICS FOR 1941.

In accordance with the instructions of the Ministry of Health, no figures are to be published which might give useful information to the enemy. Therefore, figures of inhabited houses, populations and actual numbers of births and deaths are withheld.

Rateable value (1st April, 1941)	£2,140,892
Sum represented by a penny rate (1941-2) ..	£8,230
Rates in the £ (1941-2)	15/4

Births.

Birth-rate per 1,000 of population .. .. 16·04

This compares with 16·49 in 1940, but is higher than any other year since 1932.

The illegitimate births showed an increase of 33·7% over 1940.

Still-births declined in number, the rate per 1,000 births (live and still) falling from 34·85 in 1940 to 31·66. This may be a result of the improved ante-natal care now bestowed and of improved midwifery. It is satisfactory and it is to be hoped subsequent years may show a further fall.

Deaths.

Death-rate per 1,000 of population .. .. 14·03

This compares with 15·45 for 1940, which was a very high rate, but the figure for 1941 was higher than usual; it had never been above 14·0 since 1929. As pointed out last year, these war-time death-rates refer to the civilian population, and as most of the healthy young adults are in the Services, it is natural to expect a higher rate in those who remain as civilians. Therefore, these higher rates do not necessarily indicate a set-back in the healthiness of the people as a whole. Deaths from violence were increased by enemy action.

Infant Mortality.

There was a set-back in the infant death rate in 1941. It was 80 per thousand births, against 61 in the previous year (the record low figure for Nottingham). The increase was due to a run of infantile gastro-enteritis. It is a striking commentary on modern conditions to

point out that about twenty years ago an outbreak of the same size would hardly have aroused comment; indeed it would have been looked upon as a minor event. Now it happens so rarely, that when it does, it causes much anxiety. As a result of the outbreak, the Hospital Sub-Committee decided that with the opening of the Sanatorium at Newstead and the consequent closing of the male tuberculosis pavilion at the Isolation Hospital, the latter should be reconstructed to form a cubicle block for the treatment of gastro-enteritis in infants. In the first quarter of the year, deaths from respiratory causes were high and were probably associated with severe weather conditions.

The deaths in the first month of life showed an increase (though still-births were fewer). Undiagnosed venereal infection in the parent or parents may sometimes be a cause of such deaths showing the need for pressing on with the campaign against venereal disease.

Maternal Death-Rate.

The deaths of mothers in childbirth worked out at 2·75 per thousand births, a slightly higher figure than the previous year, but still satisfactory. It was not so low as the rate for England and Wales as a whole (2·23) which is unusual, for Nottingham has often shown the lower figure.

The following particulars are of interest.

25% of the deaths were in women over 42 years of age.

$33\frac{1}{3}$% were associated with abortion (not necessarily criminally induced).

50% of the deaths were among women who had not availed themselves of the facilities for ante-natal supervision. Some of the deaths would probably have been prevented by ante-natal care.

Deaths from Puerperal Causes.

Rate per 1,000 (live and still) births.

	Nottingham.	England and Wales.
Sepsis	0·46	0·48
Other Causes	2·29	1·75
Total	2·75	2·23

Puerperal Pyrexia.

The notified cases are classified in the accompanying table :—

Disease.	Cases Notified.	Admitted to Hospital.	Cases arising in Hospital.	Notification—Age Group.			
				15–20	20–25	25–35	35–40
Pyrexia ..	53	14	30	2	15	32	4

SANITARY CIRCUMSTANCES OF THE CITY.

The Chief Sanitary Inspector (Mr. A. Wade) has prepared his usual report in detail for future reference, and the following is based upon that report.

Water Supplies.

There are now few houses in the city without piped water supplies, and they are in situations remote from mains. The Health and Water Departments are in constant co-operation to safeguard the purity of the town's water, with the help of the Public Analyst. Bomb damage to water-mains, with sewers also damaged, has from time to time provided problems which have had to be taken seriously, in order to prevent danger to health from water-borne diseases.

The public should take the following advice :—

After a serious air-raid all tap-water should be boiled before being used for drinking or cooking. This should be done all over the town until announcements have been made by notices or by loud-speaker van, district by district, saying that boiling need no longer be done. These announcements will be made without delay in districts found to be unaffected.

Sanitary Inspections.

The inspection of houses for nuisances or defects continued as usual, though with a smaller staff. The same remarks apply to duties under the Shops Acts (health and comfort of shop-workers, employment of young persons, closing hours), the Factories Act 1937 and all the usual sanitary provisions of general and local Acts.

Rats and Mice (Destruction) Act 1919.

Advice on the destruction of rats and mice is always available at the Health Department. The aim of the department is not merely to destroy rats, but to deal with the sources of the infestation. In this connection it may not be sufficiently widely known that many rat nuisances in built-up areas are traceable to defective drains.

Eradication of Bed-Bugs.

The difficult problem of verminous premises is receiving the closest attention. Owners and agents are usually willing to co-operate in order to secure efficiency in disinfestation work. With a view to preventing infestation or re-infestation of properties provided for the re-housing of displaced persons, the women housing officers (employed by the Housing Committee, but

working under the Chief Sanitary Inspector) make periodic visits and give such advice as may be necessary. This, of course, is only one aspect of the valuable services rendered by these women officers.

Housing.

Although slum clearance work is in abeyance during the war, housing inspections and the procedures necessary to remedy defects continue. Overcrowding continues to be a problem, even when measured by the rather low standard set by existing legislation. Houses-let-in-lodgings are the worst feature of the housing problem ; on the other hand, the common lodging-house position in Nottingham is good, beyond all criticism, thanks to those who initiated the Sneinton House Municipal Lodging-house for men.

Inspection of Food.

There is nothing of unusual interest to say about the supervision of the meat, fish and vegetable trades, with a view to ensuring the freshness and soundness of the articles sold. This work proceeded on its customary lines with a substantial amount of co-operation on the part of the traders themselves.

A very different story is to be told about the work of the inspectors under The Food and Drugs Act and of the City Analyst, for this reveals the methods of some of those get-rich-quick traders who do not hesitate to take advantage of the extraordinary circumstances of the period to enrich themselves by fraudulent misrepresentation. It may be that some of the offenders merely misunderstood their responsibilities, as regards labelling ; it may be that genuine mistakes were made in some instances, but those of us who have the advantage of

reading the legal cases reported in the journals devoted to analytical matters are aware of the existence of large-scale fraud which is, possibly, very remunerative to its perpetrators in spite of the fines inflicted on them in many parts of the land.

The following legal proceedings were instituted in Nottingham in 1941 :—

1 Tin Roast Pork containing starch filler 73·12%	Fined £10/0/0.
1 Tin Roast Pork bearing false label ..	Fined £10/0/0 and 10/6d. Analyst's fee.
Egg Squares with false label	Fined £2/0/0 and £4/4/0 costs.
Peakegg (Egg Substitute) bearing false label	Fined £200 and £4/4/0 costs.
(Appeal to Quarter Sessions—appeal upheld)	Fined reduced to £20/0/0.
Teafusa (Tea Strengthener), false label attached	Fined £6/6/0 and £4/4/0 costs.
Lemon Cheese containing excess water 28·2%	Case dismissed.
Vinegar deficient in acetic acid 30% ..	Fined £1/0/0 and 5/- costs.

In addition, there was the usual crop of offences by milk-dealers selling milk deficient in fat or with added water.

Examination of Milk for Tubercle Bacilli.

A considerable amount of bacteriological testing of the milk supply is carried out yearly. One of the important points to watch is the presence of tubercle bacilli which gain access to the milk when some of the cows suffer from tuberculosis of the udder. Tuberculosis, especially of the bones and joints, can be conveyed to children unless the milk is treated by heat, either by boiling or by pasteurising.

The following figures show the percentage of the samples tested, which yielded evidence of the presence of tubercle bacilli (biological test) :—

1938	..	6·1%	1940	..	5·5%
1939	..	6·7%	1941	..	11·4%

This increase in the percentage of samples yielding positive evidence of tuberculosis in the milk is alarming, and there is no ready explanation. The samples were not from suspected animals, but were from mixed milks collected at random. The results were immediately reported to the appropriate authority so that veterinary examination of the cattle could take place, with a view to the exclusion from the herds of the affected animals. The figures quoted lend support to the view that pasteurisation of milk ought to be made compulsory throughout the land in order to protect the public from tuberculous infection by way of milk.

Synthetic Cream.

In spite of considerable improvements in manufacturing methods, artificial cream continues to be a very dirty article of food, at any rate, by the time it finds its way into use in the bakehouse. Of seventeen samples examined bacteriologically, twelve were unsatisfactory, showing a high bacterial count and the presence of bacillus coli. This is an article of food better left alone, for in various parts of the country outbreaks of illness have followed the consumption of some batches of it.

MATERNITY AND CHILD WELFARE.

Dr. I. McD. Harkness is able to report ever-increasing activity in the work of her section of the Health Department. The statistics given in an earlier page prove the need for continued concentration on the

problems of infant and maternal welfare so as to save the lives of mothers and children, to diminish the amount of ill health following pregnancy and to give the infants the best possible start in life. Owing to war-time conditions, the responsibilities of this branch of work have increased considerably.

The existing circumstances may prove prejudicial to the welfare of mothers and their infants. Anxiety following the husband's absence from home, the occupation in industry of so many pregnant women working long hours, the stress of occasional air-raid warnings, housing difficulties and many other features of the times, all add to the risks of the mother and her young children. As far as possible, the Department seeks to minimise the ill effects of such circumstances.

With the excellent food arrangements which have characterised the conduct of the war in this county, actual instances of nutritional deficiency are not common, but a watch has to be kept for lack of essential constituents of the diet such as iron, calcium and the vitamins. The national milk scheme and the distribution of vitamin-containing substances by the Ministry of Food are provisions of great value, and the Department has co-operated willingly in making a success of these arrangements.

The chief new extension of work has been the provision of war-time nurseries for the young children of women engaged in work. The Maternity and Child Welfare Committee is the body selected by the Ministry of Health and the Board of Education to undertake this responsibility. At the same time, the Education Committee has vastly extended its own useful work in the provision of nursery classes with the same object in view.

There were at the outset of the war, three existing day nurseries in the City, two being privately managed institutions subsidised by the Corporation (Heathcoat Street and Pearson Street) and one belonging to the Corporation (Queens Drive). The latter was increased from 28 to 40 places as a war measure. A new war-time nursery of 20 places was opened in premises kindly placed at our disposal by the Education Committee and this was linked up for management purposes with the Heathcoat Street Nursery. A war-time nursery was erected on the recreation ground in Queens Drive (40 places). Further nurseries were projected, and at the time of writing one in Ashburnham Avenue (40 places) is already open and five others are being constructed in different localities. Approved costs of these schemes are borne by the Ministry of Health.

With the object of enabling mothers to go to work, the Government devised a scheme by which women are found to look after, in their homes, by day, the children of women war workers. This has proved a great success in Nottingham, the " minders " (as they are called) being selected by two special health visitors employed for the purpose. The houses are visited and all the circumstances are under close control and supervision. In regard to the number of staff required in relation to the number of mothers released for war work, this scheme has an advantage over the Day Nursery scheme, and so long as the " minders " and their homes are regularly supervised after careful selection the arrangement has much to recommend it. By the end of 1941, 342 minders were looking after 380 babies and this number has since been greatly increased. The minders are paid partly by the mothers and partly by the Ministry of Labour.

As explained in previous reports, midwifery is now very largely a public utility service provided by the Corporation either in the home or in the municipal hospitals. Nearly half the births in the town are attended by City Midwives acting as midwives or maternity nurses, and the other half are mostly conducted in the municipal hospitals. The number of confinements conducted in nursing homes and in private houses by medical practitioners is comparatively small.

In these circumstances, it is becoming increasingly possible to ensure that pregnant women receive proper ante-natal supervision in the various ante-natal clinics linked up with the pre-natal visits of midwives to the homes of their patients.

Ante-natal Clinics are held at the centres at Huntingdon Street, Edwards Lane, Aspley, Basford, Wilford Road, Bulwell, Radford Boulevard and Sneinton. During the year 16,070 attendances were made by pregnant women to these clinics. (This is exclusive of those who attended the City Hospital's own ante-natal services at Edwards Lane and The Firs). It will be seen that the facilities for medical supervision during pregnancy are being made use of to an increasing and valuable degree. The numbers were up by nearly 3,000 visits, made by 400 more women than in the previous year.

The Corporation paid £657 to medical practitioners called in by midwives to difficult or complicated cases of labour in accordance with the rules of the Central Midwives' Board. Some of this money is recovered from the patients, the amount charged varying according to a scale of income. Some of these cases were subsequently admitted to the City Hospital, as the need arose.

Excellent co-operation exists between the City Midwifery Service and the City and Firs Hospitals. The home and hospital midwifery provisions thus dove-tail together to the benefit of all concerned.

Only 18 cases of inflammation of the eyes of the new born were notified (ophthalmia neonatorum) under the scheme for following up and treating this disease. Every case cleared up without any impairment of vision. This disease used to be a prolific source of recruitment for our blind institutions ; now it is rare for any serious damage to the eyes to result. This is a great triumph for the health services of the country and it is proper that such triumphs should be recorded and remembered.

As to the care of young children, the following statistics give some idea of the work done.

Visits paid by Health Visitors to the homes :

Primary visits	4,021
Revisits under one year	10,641
Revisits 1—5 years	25,127
Other visits	1,278

Infant Welfare Centres.

Number of sessions in 1941 :

Infant Clinics	1,070
Toddlers Clinics	117

Usual number of sessions per week : 27.

Attendances of new cases :

Up to 2 years	3,123
Aged 2—5 years	48

Total attendances :

Up to 2 years	48,145
Aged 2—5 years	2,185

Attendances were adversely affected during the early months of 1941 by severe weather. Throughout the year many women were at work. Older women who look after the children find little time after shopping and caring for home and children to attend the clinics regularly. Visits often are for the purpose of obtaining supplies of cod liver oil and dried milk. The visits made by " toddlers " was small but represents an attempt to restore this service after it had been necessarily cut down early in the war.

The Ministry of Food now has a clerical staff at each infant welfare centre to distribute national dried milk. This staff works in the closest co-operation with our health visiting staff during clinic sessions. The local Food and Milk Officers have given valuable and cordial assistance in making arrangements to maintain a satisfactory state of nutrition in children under five years of age and in expectant and nursing mothers.

BIRTH CONTROL.

Owing to lack of funds the clinic held at the Women's Welfare Centre, Market Street, had to be closed down on the 15th January, but was re-opened on the 14th July 1941, at the Adult Schoolroom, Friar Lane, following an increase in the subsidy granted by the Health Committee towards running expenses.

Women attending municipal clinics and needing birth control instruction on the grounds that further pregnancies would be detrimental to health are referred to the centre by our medical officers.

During the period the clinic was open in 1941, 47 women were referred for advice but only 19 attended.

DISTRICT NURSING.

The Health Committee has continued to take a lively interest in the provision of nurses for the service of the sick in their own homes. There are many sufferers, both chronic and acute, who need such care, and an adequate number of district nurses covering the whole area of the city would reduce the calls for hospital accommodation.

The Nottingham District Nursing Association, and other associations, have done excellent work for many years, but charitable funds in these days are insufficient to meet the need for expansion and development. It is understood that the law as it stands at present gives no power to the Corporation to conduct its own district nursing service, though it may provide funds to help existing agencies.

The Health Committee has expressed its opinion that Parliamentary powers should, in due course, be sought so that a municipal district nursing service could be provided, just as there is already a municipal midwifery service. In the meantime the best that can be done is to give help from the rates to the existing associations so that their beneficent work may be continued and extended.

The Health Committee gives the following financial help :—

Nottingham District Nursing Association :	£
General grant	150
Towards Aspley nurse	150
Towards Sherwood nurse (1942) ..	150
Subscriptions formerly made by other Corporation Committees now paid by Health Committee	171
	£621

Bulwell Nursing Association	.. ..	25
Basford Nursing Association	.. ..	15
Manor Farm Community Centre	..	200
Beeston & Stapleford Association (in respect of Lenton Abbey)	..	25

(N.B.—Some of these amounts have been substantially increased for 1942).

Further extensions of district nursing work with financial aid from the Health Committee are likely to be under consideration by the Health Committee.

THE CITY HOSPITAL AND THE FIRS MATERNITY HOSPITAL.

Under the vigorous management of Dr. C. L. Crawford Crowe, the Medical Superintendent, the City Hospital and its annexe, The Firs Maternity Hospital, have continued to increase their usefulness to the citizens. The City Hospital, being included in the Ministry of Health Emergency Scheme, admits air-raid casualties and personnel of H.M. Forces. It is not proper to discuss this aspect of the work in the way one would like, but it is permissible to say that the important position the hospital has taken in the war-time scheme reflects very great credit on Dr. Crowe and the medical and surgical staffs of the institution, who have undoubtedly met in full the demands made upon them to provide general and specialised contributions to the requirements of the period.

Vale Brook Lodge, the Social Welfare Committee's adjacent institution, is linked with the City Hospital in the Emergency Scheme, and but for the willingness of that Committee and its officers to accept numerous working difficulties, it would not have been possible for the City Hospital to place itself so usefully at the disposal of the Ministry of Health in the national effort. This fact should not be overlooked.

The building extensions so greatly to be desired, the nature of which was worked out prior to the war, cannot be undertaken yet, and it is impossible to forecast when the scheme can be taken in hand again. The new portion of the staff home, opened in 1939, has proved to be a very satisfactory building, and the Committee can be satisfied that the nurses are housed and treated in a way which enables them to enjoy their off-duty hours. Such ideal conditions should favour the recruitment of nursing staff.

The training schools for general nurses and for midwives continue to meet with success and form an important feature of the administration. The hospital's reputation is such that a shortage of new entrants to the training school has not been experienced to the same extent as has been the the case in some places. There is, however, a staffing difficulty in most hospitals, particularly as regards trained staff nurses, and the City Hospital is no exception.

The fact is that the increased demand for nurses in the country cannot be met by the available supply, even when the services of state-registered nurses are supplemented by assistant (that is, partly trained) nurses, and by auxiliary nurses specially recruited to undertake the less skilled portions of nursing work.

A great extension of the midwifery work of the City Hospital has taken place, as the statistical tables show. In addition the Abel Collin Maternity Hospital was taken over by the Corporation on 1st May 1941, to be conducted as an annexe of the City Hospital under the name of "The Firs Maternity Hospital." The combined accommodation of the two hospitals provides a large maternity

unit, capable of dealing with normal and abnormal midwifery, and with complications of pregnancy requiring hospital treatment. These departments work in close co-operation with the City Midwifery Service, which is controlled from the Health Department. It is true to say that nearly all the midwifery of the city is now municipally conducted, either in the homes by the city midwives or in the City Hospital or The Firs.

The training of midwifery pupils commenced in the City Hospital and continued in The Firs, is completed on the district with the help of city midwives.

The following tables, extracted from a much larger compilation which has been made for subsequent reference gives a fair idea of the volume of work transacted in the two hospitals :—

City Hospital.

Beds (War-time Accommodation).

Specialised Wards (Tuberculosis, Venereal, Isolation and Maternity)	314
Male Medical	154
,, Surgical	150
Female Medical	234
,, Surgical	170
Children Medical	66
,, Surgical	56
	1,144

Averages for the year 1941.

Beds—Average daily number occupied ..	736·065
Admissions—Average daily number ..	25·24
Duration of stay of patients :—	
Under 4 weeks	5,993
4 weeks and under 13	2,511
13 weeks or more	614
Maximum number of beds occupied, 2nd December	824
Minimum number of beds occupied, 23rd August	611

These figures vary from the previous year by an increase of 23 in the average daily occupation, and an increase of nearly four in daily admissions. The peak day in 1940 was in February and the lowest was in December.

Statistical Table for Year ended 31st December, 1941.

Remaining in hospital, January 1st ..	648	
Admitted	7,754	
Born in hospital	1,459	
	——	9,861
Discharged	8,162	
Deaths	956	
Patients treated to a conclusion ..		9,118
Remaining in hospital, 31st December, 1941		743

Comparative Table for three years.

	1939	1940	1941
Admissions	5,777	6,912	7,754
Births	929	1,030	1,459
Deaths	979	817	956
Admissions—daily average ..	18·37	21·76	25·24
Operations performed ..	1,408	1,685	2,394

Clinical Laboratory.

The work in this department during the year was somewhat increased in volume, partly on account of the work received from The Firs Maternity Hospital, but also because of the number of genito-urinary cases admitted under the war emergency arrangements, by which the City Hospital has undertaken specialized duties. The technique of the laboratory is keeping pace with modern developments, and some new and more efficient apparatus has been acquired. 6,000 reports were issued regarding 2,687 patients.

Massage Department.

Number of treatments given (massage, electrical, ultra-violet ray, infra-red ray, exercises) :—

Civilians	17,235
Military	11,837
	29,072
Increase over previous year	4,648

X-Ray Department.

Patients investigated	5,201
Increase over previous year	2,193

Dental Department.

Extractions	2,345

Maternity Department.

	City Hospital.	The Firs.*
Live births	1,459	262
Stillbirths	63	8
Born in ambulance	29	—

* Admitting patients from 17/5/41 only.

A very complete classification of all these midwifery cases, dealing with the technical details, has been prepared by Dr. J. B. Cochrane, and is available for reference, but it is too lengthy for publication in war-time circumstances.

Total Admissions for Ante-Natal Care.

City Hospital	702
The Firs	114

Theatre Department.

Number of operations conducted in the theatres (Ear, Nose and Throat, Gynæcological, Orthopædic, Chest, Genito-urinary, General Surgery) :—

Total .. 2,394

Ambulance Service (per Mr. G. W. Gould, Vale Brook Lodge).

(Year ended 31/3/42).

Mileage	31,219 (previous year	25,364).
Average miles per gallon ..	9·594 (,, ,,	10·514).
No. of patients removed ..	3,970 (,, ,,	3,586).
No. of journeys	3,502 (,, ,,	3,135).

BLOOD TRANSFUSION SERVICE.

The Blood Transfusion Service which largely traces its local beginnings to the City Hospital, has now become an important organisation, the constituent bodies being the City Council, the County Council and voluntary hospitals in the city and county. A committee representative of these bodies has been formed under the chairmanship of Alderman Robert Shaw, J.P.

The Ministry of Health pays a portion of the cost of the Service because the scheme is regional in extent. Blood donors are enrolled as volunteers and, in due course, attend one of the hospitals for bleeding, or are bled by the staff of a mobile unit which travels about the region under the direction of a medical officer of the Ministry of Health. The collected blood is stored for use when required, or is used for the preparation of dried plasma at the Regional Transfusion Laboratory at University College, Highfields, where there is a paid staff supplemented by voluntary workers. Blood from store, or the dried plasma, is used for giving transfusions to anyone needing it. This treatment is invaluable for the treatment of shock after injuries, including burns, or for cases of severe hæmorrhage. The plasma is available for any of the hospitals in the North Midland Region, or for the Forces, and the R.A.F. not only uses the plasma but has its own Mobile Blood Transfusion Unit attached to the Regional Laboratory for collecting blood. When the

civilian E.M.S. hospitals are fully stocked the main demand will be to supply the fighting services at home and abroad with the plasma they require. The service is thus fulfilling a most useful function in saving the lives of members of the Forces as well as of civilians.

CIVIL NURSING RESERVE.

The work of this body was continued in accordance with the description given in the last Annual Report.

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

Statistical Tables are omitted, but Dr. T. A. Don, the Medical Superintendent of the Isolation Hospital, who undertakes the epidemiological work of the Health Department, reports in the following terms :—

Smallpox.—There were no cases of smallpox during the year 1941. As always, the Smallpox Hospital was kept in a state of readiness. Actually this hospital was used for about three months early in the year for the treatment and isolation of some twenty children from a children's institution who were suffering from both Measles and Whooping-cough. This was necessary on account of the City Isolation Hospital being rather full at the time.

Enteric Fever.—Twenty-seven cases of enteric fever were notified during the year. These included five patients who had contracted the illness outside the city. Actually twenty-three patients were admitted to the Isolation Hospital believed to be suffering from this complaint. The diagnosis was confirmed in twenty cases. Of these twenty, five proved to be suffering from Typhoid Fever, whilst the remaining fifteen were suffering from the

somewhat milder Paratyphoid B. Fever. All these "Enteric" patients were admitted between May and November, the highest incidence of cases being six in August. Painstaking enquiries failed to reveal any common source of infection, although a geographical grouping of four of the cases was at least suspicious. The illnesses were in the main mild in form and all recovered.

Scarlet Fever.—The year 1941 proved to be rather a heavy one as regards Scarlet Fever. Altogether 756 cases were notified to the Health Department. The heaviest months as regards incidence unfortunately coincided with the most prevalent months for Diphtheria admissions. Thus it was not possible to treat as many cases of Scarlatina in hospital as one would have liked. Accordingly, general practitioners were circularised in November with a view to encouraging, wherever possible, the "home treatment" of Scarlet Fever cases. This step was considered necessary so as to prevent overcrowding of the wards at the Isolation Hospital. In spite of war-time difficulties, medical practitioners loyally co-operated and thus enabled the hospital to deal with all the notified diphtheria cases and those cases of Scarlet Fever which, for purely medical reasons or where home conditions were quite unsuitable for isolation, were best treated in hospital.

The clinical type of Scarlet Fever was again mild in form and no deaths occurred either from the disease itself or from any of its varied complications. Actually 489 of the 498 cases admitted to hospital proved to be suffering from Scarlet Fever. Four further patients who had been notified as suffering from Diphtheria were

found to be suffering from Scarlet Fever only. Thus a total of 493 actual cases of Scarlet Fever were admitted to hospital for treatment ; only two of these cases required operation due to mastoid complications. As will be seen from the accompanying table, the average duration of hospital detention was 34·6 days. A negligible number of " return " cases occurred, although it is a well-known fact that the bacteriological criterion for the termination of isolation in Scarlet Fever is unreliable.

Diphtheria.—455 cases were notified to the Health Department during 1941, although 464 patients were admitted to the Isolation Hospital thought to be suffering from this disease (these included Service patients from the city and county of Nottingham). A final analysis reveals that 409 of these 464 patients were actually diphtheria sufferers (this compared with 391 cases during 1940).

As regards sex distribution, there were 59 more female than male patients. Altogether 12 deaths occurred in the City Isolation Hospital due to this disease, although a further patient who had been admitted in December 1940 died early in the New Year. One patient—a woman—died from diphtheria in another hospital in the city. It was not possible to have her transferred to the Isolation Hospital when or after the diagnosis was made. Thus, 13 persons died from diphtheria in Nottingham during 1941.

Eleven of these fatal cases were children under 10 years of age. It is significant that none of the fatal cases had been immunised against diphtheria. Five of the 13 fatal cases died within 24 hours of admission to hospital.

Doctors and nurses who work, or have worked in fever hospitals, are well-versed in the tragedies of diphtheria, which is a disease so liable to attack young children, especially those under 10 years, with fatal results all too often.

It may be repeated as in previous years that children under 5 years are *particularly* liable to contract this illness. The Government has realised the danger of diphtheria, especially during war-time, and has vigorously sponsored a diphtheria immunisation campaign all over the country since the autumn of 1940. Treatment is safe, simple and FREE and available at Child Welfare and School Clinics. Whilst the response has been fairly satisfactory here in Nottingham it must be stated that the " under five's " have not come forward in sufficient numbers to call the local scheme an unqualified success. As the 1 to 5's age-group would benefit most from the prevention treatment, it is the duty of parents and guardians to see that their children of pre-school age are immunised before it is too late.

Immunisation against diphtheria is effected by the giving of two " pin pricks " in all at intervals of four weeks or so. It takes about three months after the final treatment for the necessary degree of immunity to develop. Thus it is self-evident that it is unwise to delay having the treatment carried out until the disease is prevalent in epidemic proportions. Only 13 children who had been immunised (for three months or more) were admitted to the Isolation Hospital suffering from diphtheria during 1941. All but two of these 13 children were suffering from a *very mild* form of the disease, the remaining two made a good eventual recovery. It is

quite possible that had these latter two cases not had some degree of protection (from previous immunisation) they might indeed have died. Certain it was that they were infected by a particularly severe clinical type of the disease in question.

Measles.—This infectious disease which has been made compulsorily notifiable since the outbreak of war, yielded 1,333 cases during 1941 with only six deaths, compared with 3,572 cases and five deaths in 1940. Only 32 of these patients were admitted to the Isolation Hospital for treatment ; one death occurred in hospital.

Whooping-cough.—As in the case of measles, whooping-cough is at present a notifiable disease. Altogether 765 notifications with 17 deaths were received at the Health Department (in 1940 there were 543 cases with 5 deaths). Only 11 cases were admitted to hospital, mainly owing to lack of accommodation, and two of these cases terminated fatally.

NOTIFIABLE DISEASES OF THE CENTRAL NERVOUS SYSTEM.

Cerebro-spinal Meningitis.—As was to be expected, a decided increase above pre-war levels of notifications of cerebro-spinal fever were received, as occurred in 1940. A total of 73 cases were reported in Nottingham with 15 deaths. 41 of the above 73 cases were admitted to the City Isolation Hospital with 6 deaths, giving a mortality rate of 14·6%. If we exclude those deaths which occurred within 24 hours of admission (3 in all), this leaves three deaths out of 38 cases, i.e. a mortality rate of 7·9%, which is a decided advance compared with the results achieved before the advent of chemotherapy a few years

ago. As in last year's series of Spotted Fever cases, sulphapyridine was the drug of choice. Only in a few instances was it found necessary to resort to other sulphonamide drugs, and then only temporarily during the course of treatment with sulphapyridine (M. & B. 693).

Encephalitis Lethargica.—No acute cases were notified during the year, although five deaths due to this disease were registered. These were, presumably, patients who had contracted the initial illness many years ago and were really chronic cases of "Sleepy Sickness."

Acute Anterior Poliomyelitis.—Two cases were notified with one death from this disease. None were treated within the Isolation Hospital.

Other Cases.—26 other cases not previously mentioned were admitted to the City Isolation Hospital at the request of medical practitioners (hospital and private).

Service Cases.—In all, 41 cases of Service personnel were admitted to the City Isolation Hospital for treatment.

TUBERCULOSIS.

The outstanding feature of the year 1941 in the local fight against tuberculosis was the progress made in the building of the sanatorium at Newstead. At the time of writing this Report it is possible to chronicle the opening ceremony which took place on August 31st, 1942, by the Right Honourable Ernest Brown, M.C., M.P., the Minister of Health, who was accompanied by Sir Wilson Jameson, Chief Medical Officer of the Ministry.

This was a notable event in the history of public health endeavour in the city, and one which will redound to the credit of the Health Committee, who persevered in their task of overcoming the delays and difficulties inseparable from the war period. The actual date of admission of the first small batch of patients was August 17th, 1942.

The wisdom of appointing the Medical Superintendent (Dr. Geoffrey O. A. Briggs) as long ago as November 1940, was apparent when the extraordinary difficulties experienced in selecting and purchasing equipment had to be overcome. The sanatorium will be more fully dealt with in the Report for 1942.

Summary of Tuberculosis Statistics.

TUBERCULOSIS DEATH-RATE (NOTTINGHAM)

Ten years' average 1931-40—	
Respiratory only	0·82
All forms of Tuberculosis	0·97
For 1941—	
Respiratory only	0·91
All forms of Tuberculosis	1·09

NEW CASES (including primary notifications, cases not notified during life but first intimated by death returns, and transfers from other areas) :—

Pulmonary :	Males	191	Females	118
Non-pulmonary :	,,	30	,,	36

DEATHS.

Pulmonary	Males	131	Females	110
Non-pulmonary :	,,	23	,,	24

No. of persons on clinic register on 31st December 1940 = 1,336

No. of X-ray examinations in connection with clinic work = 3,802

Patients admitted to Institutions.

City Isolation Hospital:

Males ..	..	57	Pulmonary.
Females..	..	36	
Children	..	13	
		106	
Children	..	1	Non-pulmonary.

City Hospital:

Males ..	..	139	Pulmonary.
Females..	..	74	
Children	..	5	
		218	
Males ..	..	11	Non-pulmonary.
Females..	..	6	
Children	..	15	
		32	

The foregoing statistics show that during 1941 there was an increase in Nottingham deaths attributable to tuberculosis of the lungs over the average of the previous ten years. This was great enough to send up the "all forms" figure also above the average, though actually the deaths from non-pulmonary tuberculosis were fewer than in the previous year.

It is known that there has been a general increase in tuberculosis in the country since the beginning of the war, and this increase is the subject of investigation by the Medical Research Council.

While an increase in tuberculosis is expected during war-time, it must not necessarily be taken from the above figures that tuberculosis is actually on the increase in Nottingham to the extent which the figures might indicate. Some of the increase is more apparent than real. During the last few years our fight against tuberculosis in Nottingham has been more active. For some years now there have been two doctors working at the Tuberculosis Clinic, and an X-ray plant has been available there.

This extra activity, coupled with the publicity associated with the building of the Newstead Sanatorium, was expected and intended to bring to light more cases of tuberculosis previously existing but not recognised as such. Doctors are tending to refer their doubtful cases for skilled diagnosis at an earlier stage, now that they have greater confidence in the services provided. The X-ray plant has given immeasurably greater accuracy in diagnosis, and has enabled the diagnosis to be made at an earlier stage in the disease. Therefore, cases are being labelled as tuberculosis which previously would have escaped notice. This is all to the good and is exactly what is wanted, so that at last we are getting a more true idea of the amount of tuberculosis among us.

Then cases are being referred to the tuberculosis officer by medical boards which deal with male and female entrants to the Forces, and although the numbers of those referred who were found to be infected was comparatively small (males 14 or 5·8%, females 0), this procedure does help to discover cases which otherwise might never have been correctly labelled.

In short, there is an increase in tuberculosis due to the war, but the apparent increase is in part due to cases being brought to light which formerly would have escaped correct diagnosis.

The rate of increase in the numbers now coming forward is indicated in the following table :—

Number of Cases of Tuberculosis on Clinic Register on 31st December.

1937	..	..	..	904
1938	..	..	..	1,014
1939	..	..	..	1,191
1940	..	..	..	1,212
1941	..	..	..	1,336

Dr. Whitaker, the Tuberculosis Officer, from whose report these figures are extracted, states that the extra amount of work carried on at the clinic, including X-ray diagnosis and artificial pneumothorax treatment, is so great as to interfere with the educational work of the clinic, and to make it increasingly difficult to follow up " contacts " in the way he would like. This, of course, is a matter of great importance, and were it not for the war-time shortage of doctors the need for increasing the medical staff would have to be considered. It is hoped that when all treatment is concentrated in the Newstead Sanatorium, and Dr. Tozer has no longer to look after the tuberculosis patients now remaining in the City Isolation Hospital, he will be able to give more time to following up " contacts " ; thus solving the problem for the time.

The clinic has had a considerable amount of work to do at the request of the Ministry of Pensions in making provision for service cases discharged on account of tuberculosis. A useful arrangement in which the clinic

has its part is that by which when certain age-groups of men and women are about to be called up, information is supplied as to those who are known by the Tuberculosis Officer to be tuberculous ; these are steered clear of the recruiting machinery, and so waste of effort is avoided.

The use of miniature X-rays photography for the large scale examinations of employees and entrants into industry has continued to be the subject of discussion by industrial medical officers. The Ministry of Health is having a number of standardised sets of apparatus made, and one has been promised to Nottingham. The Ministry will provide advice on staffing and procedure, and it is hoped to make a beginning on this new form of work. It has already proved its value as a means of detecting unsuspected and symptom-less tuberculosis among members of the Forces, and in some industrial undertakings.

Major chest surgery has continued to be undertaken at the City Hospital, the operator being Mr. G. A. Mason, F.R.C.S., of Newcastle, who, with his specialist anæsthetist, visits both city and county at intervals to deal with tuberculous and non-tuberculous cases needing this form of treatment.

CARE OF THE BLIND.

The blind persons on the register at 31/12/41 are classified as follows :—

Blind Trainees (maintained by Education Committee)	5
Blind Workshop Employees, including blind persons on the staff of the institution	64
Home-workers	8
Unemployable blind receiving assistance ..	286
Blind persons not in receipt of any form of financial help from the City Council	155
Blind Home Teachers	1
	519

The total is five more than a year ago.

The Royal Midland Institution for the Blind continues to carry out blind welfare duties on behalf of the Corporation in its usual efficient manner, under its secretary, Mr. A. C. V. Thomas. The Blind Persons' Sub-Committee of the Health Committee held many long meetings to work out problems connected with financial aid to the blind. The cost of these services for the year ended 31/3/42 stands at £22,758. 0s. 0d., subject to certain adjustments.

ULTRA-VIOLET RAY CLINIC.

The Health Department continues to provide treatment by ultra-violet and infra-red rays under medical supervision at the clinic in Heathcoat Street. During 1941 there were 6,534 treatments administered to 325 persons.

CREMATION.

Cremation as a substitute for earth burial is increasingly practised at the Wilford Hill Crematorium. The Medical Officer of Health, or his deputy, acted as medical referee during 1941 in 455 instances, by far the largest number since the crematorium was established in 1931. Less than one-third of these were from the city.

VENEREAL DISEASES.

Throughout 1941 the unsatisfactory temporary clinic premises in Postern Street continued in use, but at the time of writing this Report, the proposed new building in Glasshouse Street is about to be commenced, the necessary permission having been granted by the Government.

There is an increase in venereal disease, as usually has been the case in previous wars. Cases in the Forces are dealt with largely by the Services themselves, but the civilian clinics also undertake a considerable amount of treatment of Service cases.

		1938	1939	1940	1941
Patients	—Males ..	1,482	1,212	1,202	1,405
	Females ..	475	456	451	491
Attendances	— Males ..	35,033	24,562	20,746	21,522
	Females ..	17,313	13,611	9,597	9,692

The fall in the number of attendances per patient in recent years is due to the introduction of certain new drugs which reduce the length of the courses of treatment. Venereal diseases, so dangerous in their results if untreated, can be cured if only people will attend. It is feared that many infectious persons remain a danger to themselves and to others because they will not avail themselves of the free treatment provided in conditions of secrecy at the clinic.

The Greendale House Hospital for women and children, and for confinements of women suffering from venereal disease continues its good work, both for in-patients and out-patients.

In 1941 430 out-patients made 2,120 attendances and 69 in-patients were in residence for 3,455 "in-patient days."

All the venereal disease treatment in the above institutions is open not only to city residents but to people from Notts. and other counties.

CITY BACTERIOLOGICAL LABORATORY, CUMBERLAND PLACE.

The laboratory examined 29,574 specimens, the largest number for many years. The work done is classified as follows :—

Venereal disease	12,089
Infectious disease, Foods, Milk, Water ..	16,390
Clinical pathology	1,095

This service was performed on behalf of municipal and county health departments and for medical practitioners.

CONCLUSION.

This report deals in only a fragmentary way with the ever-increasing volume of work performed by the various branches of the Health Department. Each sub-department is in charge of its own responsible director, and to them I wish to give credit for the high quality of the services rendered, in some instances at the cost of very prolonged and sustained administrative effort.

Among all grades of staff there is on the whole a cheerful and enthusiastic spirit of public service which I wish to acknowledge.

To the Health Committee and its sub-committees I respectfully tender my thanks for their friendly attitude towards the staff, and my appreciation of their determined attitude of progress in matters of public health.

CYRIL BANKS,
Medical Officer of Health.

HEALTH DEPARTMENT,
HUNTINGDON STREET,
NOTTINGHAM.
October, 1942.

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