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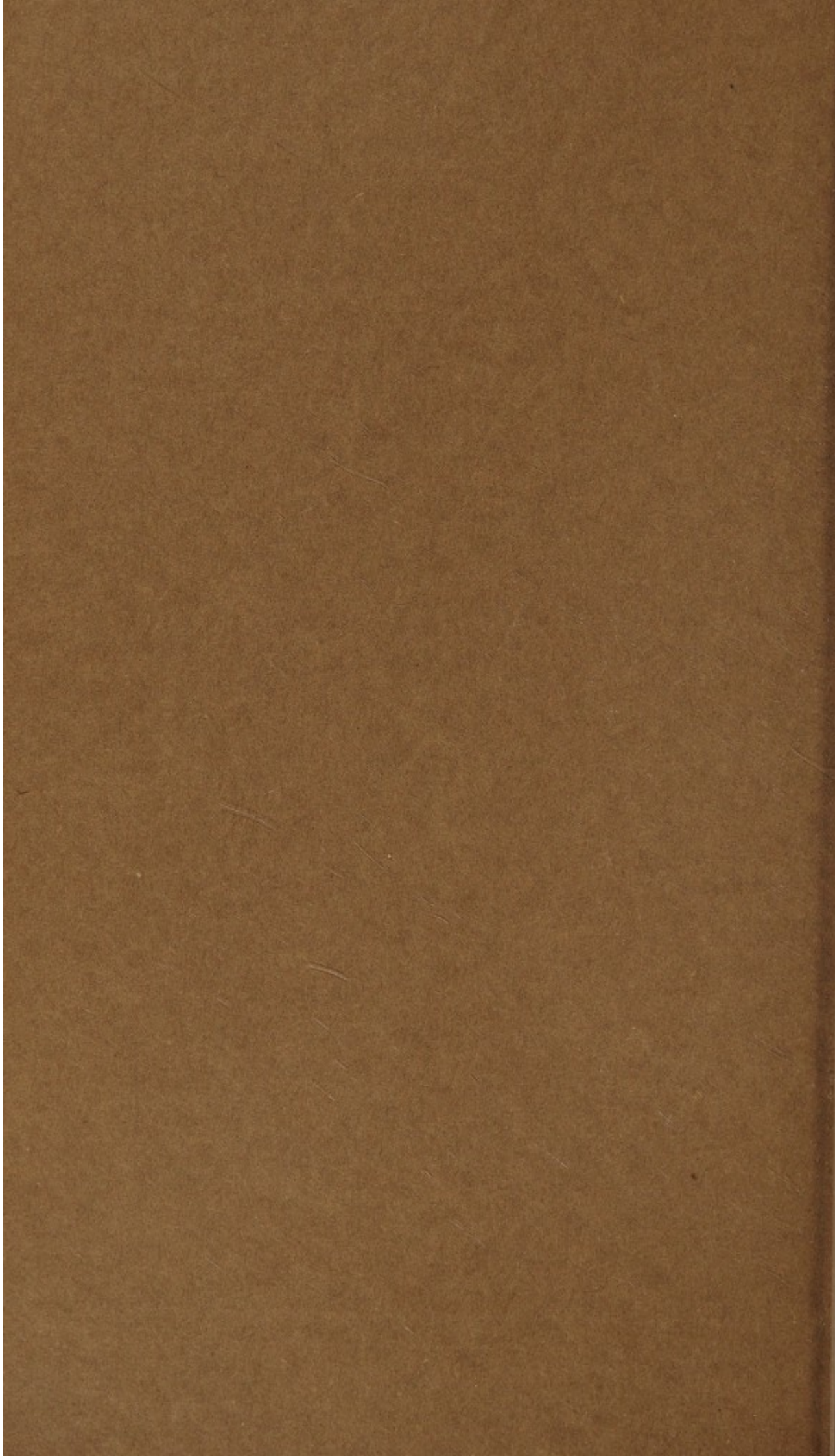


COUNTY BOROUGH OF OLDHAM

ANNUAL REPORT

OF THE
MEDICAL OFFICER OF
HEALTH

1947





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To the Chairman and Members of the Health Committee,

Mr. Chairman, Mrs. Morrell and Gentlemen,

I have the honour to present my Annual Report on the Health of Oldham and the work of the Public Health Department for the year 1947.

One reviews the year with mixed feelings. It has been a year of stress and strain for the administrator, the preparations for the "appointed day" have been in addition to the daily routine. This is the last full year that the hospital services will remain the responsibility of the Health Committee and when they pass to the Regional Hospital Board we shall sever with regret our happy connections with many senior staff who have served us well. The vital statistics are fully reviewed but the cold "snap" of January and February coupled with the "Fuel Crisis" raised our death rates. The period of excessive cold with severe frost and snow combined with a breakdown in the supply of coal to industry and the domestic consumer caused hardship to all classes, but especially did the aged and young infants of the poor classes suffer. In many cases of illness and confinement there was not even enough coal to light a fire and the Department was able to secure priority delivery of the necessary fuel.

No maternal deaths occurred during the year. This is indeed a great achievement and a fitting reward to all those who have toiled to achieve this aim. This cannot be a regular occurrence as there will always be some risk attaching to pregnancy—the accidents of pregnancy and other complications cannot always be prevented. A grave responsibility rests on all who have a share in this service and they must be constantly on the alert for any dangers that may arise.

The birth rate continued to rise and at 21.48 per thousand of the population is the highest since 1920 when the rate was 23.6. The death rate of 14.95 compares with 14.56 for the previous year. The infant mortality rate of 58 per thousand live births compares with a rate of 43 for the previous year, and is the highest since 1943, when a rate of 62 was recorded. There were 75 deaths due to Tuberculosis (all forms) and the death rate of .63 compares with .50 for the previous year.

Full details regarding the prevalence of infectious disease are contained in the body of the report. The feature of the year was the outbreak of Acute Poliomyelitis which involved the whole country. It was possible to provide all the facilities for diagnosis and treatment at Westhulme Hospital. Unfortunately there is no specific method of prevention and more tragic still, no specific cure once infection has occurred. The disease can be tragic in its consequences and the epidemic will have created a large number of cripples who will require special provision. Many theories have been expounded to explain the virulence and prevalence of the epidemic including the return of troops from the East and the recent association of American troops with this country. Whatever the true cause I feel we must expect further outbreaks in the years ahead.

The housing conditions of the Borough remain most unsatisfactory. No progress has been made in Slum Clearance since the pre-war years, and there is no immediate prospect of any amelioration of these conditions. The building of new houses makes slow progress, only 52 permanent houses being erected during the year. There are approximately

10,000 houses to be scheduled for demolition under the Housing Acts and at least half of this number can be regarded as being totally unfit for human habitation and only fit for immediate demolition.

Early in the year the formulation of the proposals under the National Health Service Act was commenced and these are briefly detailed at the end of the report. The proposals as approved by the Ministry of Health will be fully printed in the Annual Report for next year and only brief mention is made of them at this stage. New responsibilities will come to the Health Committee—the administration of the Ambulance Service, the Mental Health Service, the Home Nursing Service and at some future date the provision of Health Centres. When preparing the proposals the first duty was to review the existing services and then to formulate proposals on the lines laid down by the Ministry of Health. It was indeed gratifying to find with regard to the Midwives Service, Ambulance Service, Vaccination and Immunisation Service, that this Authority had anticipated and was already providing services which needed little, if any, alteration, and in the case of the other services, only minor extensions.

Mr. H. A. Lord, the Lay Administrative Officer, and Miss R. L. Holt, a member of the clerical staff, were successful in gaining the B.A. (Admin.) of the Manchester University and deserve our sincere congratulations.

A number of staff changes occurred during the year, Dr. J. H. Hilditch was appointed Assistant Medical Officer of Health in February and Dr. J. L. Hill, Temporary Senior Assistant Medical Officer of Health in May, on the recruitment of Dr. J. Starkie to H.M. Forces. In July, Dr. F. A. Williams joined the staff as Assistant Medical Officer of Health for Maternity and Child Welfare.

In December, Mr. Lord resigned his appointment as he had decided to emigrate to Canada with his family. Mr. F. Standring was appointed to succeed him as Lay Administrative Officer. Mr. Lord joined the Department in November, 1940, and was the first Lay Administrative Officer to be appointed following a re-organisation of the Medical and Senior Administrative staff. He came to the Department at a most difficult time and proved that the new arrangement was highly successful and the efficiency of the Department was increased. The Committee recorded their appreciation of the services he had rendered to the Department. Mr. J. Butterworth, the Maintenance Officer, left in December having been appointed to the Maintenance staff of the Manchester University. The Committee decided not to fill this post in view of the transfer of the Hospital Services in the near future.

In November, Councillor Bannon ceased to be a member of the Health Committee as also did Mrs. Morrell and Messrs. Glover and Simpson who ceased to be members of the Council. I wish to record my appreciation of the willing co-operation these members always gave to myself and my staff.

I wish to tender my sincere thanks to the Chairman and Members of the Public Health Committee and the Maternity and Child Welfare Sub-Committee for their continued support and encouragement. My thanks are also due to all members of the staff for their loyal co-operation and assistance during a difficult year.

I have the honour to be,

Your obedient Servant,

J. T. CHALMERS KEDDIE.

Medical Officer of Health.

THE HEALTH COMMITTEE, 1947.

Chairman:

Alderman S. T. Marron, J.P.

Deputy Chairman:

Councillor Dr. G. A. Taylor, M.B., Ch.B.

The Mayor:

Councillor J. Berry, J.P.

Alderman A. Hallwood, J.P.	Councillor W. T. Glover.
Alderman A. Tweedale.	Councillor G. Halbert.
Councillor J. A. Arthurs.	Councillor Mrs. G. Morrell, J.P.
Councillor J. Bannon, J.P.	Councillor A. L. Simpson.
Councillor S. Dunkerley.	Councillor J. W. Steadman.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

Chairman—Alderman S. T. Marron, J.P.

Deputy Chairman—Councillor Dr. G. A. Taylor, M.B., Ch.B.

The Mayor.	Councillor W. T. Glover.
Alderman A. Tweedale.	Councillor G. Halbert.
Councillor S. Dunkerley.	Councillor Mrs. G. Morrell, J.P.
	Councillor J. W. Steadman.

with—

Mrs. A. Hoole.	Mrs. L. Peach.
Mrs. M. Jackson, J.P.	Mrs. H. Whittaker.

GENERAL HOSPITAL SUB-COMMITTEE.

Chairman:—

Councillor J. Bannon, J.P.

Deputy Chairman:—

Councillor Dr. G. A. Taylor, M.B., Ch.B.

The Mayor.	Councillor W. T. Glover.
Alderman S. T. Marron, J.P.	Councillor G. Halbert.
	Councillor Mrs. G. Morrell, J.P.

WESTHULME HOSPITAL AND TUBERCULOSIS SUB-COMMITTEE.

Chairman:—

Councillor W. T. Glover.

Deputy Chairman:—

Councillor Mrs. G. Morrell, J.P.

The Mayor.	Councillor J. A. Arthurs.
Alderman S. T. Marron, J.P.	Councillor A. L. Simpson.
	Councillor J. W. Steadman.

GENERAL PURPOSES SUB-COMMITTEE.

*Chairman:—*Alderman A. Tweedale.

*Deputy Chairman:—*Councillor A. L. Simpson.

The Mayor.	Alderman S. T. Marron, J.P.
Alderman A. Hallwood, J.P.	Councillor J. A. Arthurs.
	Councillor J. W. Steadman.

GENERAL STATISTICS FOR 1947.

Area in Statute Acres (1931 census)	4,735 acres
Enumerated Population (1931 census)	140,314
Registrar General's Estimate of Population (middle of 1947)	117,900
Density of Population, i.e., Number of persons per acre (whole Borough)	25
Number of Houses in the Borough, December, 1947 —	
Permanent	40,645
Temporary (Prefabricated)	350
Number of New Houses erected in 1947:—	40,995
Permanent	
(i) By local authority	42
(ii) By other bodies	10
Temporary (Prefabricated)	52
(i) By local authority	197
(ii) By other bodies	—
Rateable Value (March, 1947)	249
Sum represented by a Penny Rate (March, 1947)	£706,905
Amount of Poor Law (Outdoor) Relief paid in 1947	£2,722
Weekly average number of persons in receipt of outdoor relief (569 cases)	£34,842 6 10
Approximate total number of insured persons, 31st December, 1947	930
Number of Marriages during 1947	71,913
Persons married per thousand of population	1,192
	10.11

EXTRACTS FROM VITAL STATISTICS.

Live Births. (Males 1,324, Females 1,209)	2,533
Birth rate per 1,000 of estimated population	21.48
Stillbirths. (Males 35, Females 35)	70
Stillbirth rate per 1,000 Births	26.89
Deaths. (Males 902, Females 861)	1,763
Death rate per 1,000 of estimated population	14.95
Maternal Deaths	0
Maternal Mortality Rate per 1,000 Births	0.00
Deaths of Infants Under One Year	147
Infant Mortality rate per 1,000 live births	58.03
Other Death Rates per 1,000 of estimated population:—	
Tuberculosis:—	
(a) All forms	0.63
(b) Pulmonary	0.53
Other Respiratory Diseases	0.10
Cancer	2.09
Smallpox, Enteric Fever, Measles, Scarlet Fever, Whooping Cough and Diphtheria	0.06

Births.**VITAL STATISTICS.**

There were 4,076 live births (2,089 males and 1,987 females), registered in the Borough during the year. After correction for inward (40) and outward (1,583), transferable births, the net total of births is 2,533 (1,324 males and 1,209 females). The illegitimate live births numbered 143, or 5.65% of the total live births.

Stillbirths.

During the year 109 stillbirths were registered. After being adjusted by inward and outward transfers, the number is 70.

Deaths.

During the year, 2,213 deaths (1,156 males and 1,057 females), were registered in the Borough. After correction for inward (74) and outward (524), transferable deaths, the net total deaths is 1,763 (902 males and 861 females), an increase of 70 on the total for 1946.

Of the 1,763 deaths, 809 (45·88%) occurred in one or other of the following Institutions:—

Boundary Park General Hospital	...	...	299
Westwood Park Institution	...	...	328
Oldham Royal Infirmary	...	...	90
Westhulme Hospital	...	...	16
Strinesdale Sanatorium	...	...	23
Other Institutions			
(including outside Institutions)	...	...	53

Of the total deaths, 997 or (56·55%) occurred in persons aged 65 years or over.

The following are the chief causes of death in order of frequency:—

Heart Disease	...	...	...	...	566
Cancer	...	...	...	...	246
Cerebral Haemorrhage	...	...	...	...	197
Bronchitis	...	...	...	...	142
Tuberculosis	...	...	...	...	75
Arterial Disease	...	...	...	...	70
Pneumonia	...	...	...	...	61
Nephritis	...	...	...	...	52
Suicide and Other Violence	...	...	...	...	43

These groups of diseases represent 1,452 deaths occurring during the year, or 82·36% of the total deaths registered.

Infantile Mortality.

There were 205 deaths (125 males and 80 females), of infants under one year of age registered in the Borough. After correction for inward (7) and outward (65) transferable deaths, the net total of infant deaths is 147 (88 males and 59 females), an increase of 55 on the total for 1946. Of the 147 infant deaths, 15 were those of illegitimate children and 67 occurred in infants under 4 weeks old, equivalent to a neo-natal mortality of 26·45 per thousand births.

The following table shows the neo-natal mortality, compared with the infantile mortality during the last five years:—

Year	Infant Deaths under one month	Neo-Natal Mortality Rate per 1,000 births	Infant Deaths under one year	Infantile Mortality Rate per 1,000 births
1943	42	22·76	114	61·79
1944	51	25·21	108	53·38
1945	47	24·75	96	50·55
1946	47	22·05	92	43·15
1947	69	26·45	147	58·03

COMPARATIVE STATEMENT OF VITAL STATISTICS FOR THE YEAR 1947.

	Birth Rate	Death Rate	Infantile Mortality Rate		Death Rate from Phthisis	Death Rate from other Tubercular Diseases	Maternal Mortality Rate (per 1,000 total live and still births).				
			Year 1947	Average Five Years 1942-1946			(140) Abortion with Sepsis	(141) Abortion without Sepsis	(147) Puerperal Infections	(142-6) (148-150) Other Causes	Total
England & Wales ...	20.5	12.0	41	47	*	*	0.10	0.06	0.16	0.85	1.17
126 Great Towns ...	23.3	13.0	47	54	*	*	*	*	*	*	*
Birkenhead ...	24.8	14.3	73	69	0.90	0.06	—	0.26	—	0.86	1.12
Burnley ...	21.89	16.23	45	53	0.44	0.04	—	—	—	—	—
Bury ...	20.63	15.05	38	47	0.30	0.05	—	—	—	2.51	2.51
Halifax ...	19.9	14.8	41	43	0.40	0.06	0.52	—	—	—	0.52
Huddersfield ...	20.50	14.64	53	57	0.38	0.04	—	—	—	1.15	1.15
Liverpool ...	26.4	13.5	69	72	0.80	0.10	—	—	0.05	0.78	0.83
Manchester ...	23.09	13.79	59	59	0.66	0.06	0.31	0.12	0.25	0.86	1.54
Oldham ...	21.48	14.94	58	54	0.53	0.10	—	—	—	—	—
Preston ...	22.07	13.54	67	58	0.55	0.07	0.32	—	—	—	0.32
Rochdale ...	20.0	16.2	55	52	0.47	0.10	—	—	1.69	0.56	2.25
Salford ...	24.2	13.3	61	61	0.80	0.09	*	*	*	*	0.07
St. Helens ...	25.2	12.7	69	62	0.64	0.09	—	—	0.72	1.09	1.81
Stockport ...	21.59	13.28	48	64	0.31	0.07	—	—	—	0.95	0.95
Wallasey ...	21.79	12.91	51	47	0.48	0.07	—	—	—	0.46	0.46
Wigan ...	22.41	13.38	67	62	0.76	0.03	0.513	—	1.026	2.052	3.59

*Not available.

Table of Causes of Death at Different Periods of Life during the Year 1947

CAUSES OF DEATH	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
ALL CAUSES	M	902	88	4	3	8	11	20	31	76	171	275	215
	F	861	59	2	6	4	6	13	35	67	162	249	258
1 Typhoid and Paratyphoid Fever	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
2 Cerebro-spinal Fever	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	1	1	...	...	...	...	...	...	...	...	...	...
3 Scarlet Fever	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
4 Whooping Cough	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	1	...	...	...	...	...	...	...	...	...	...
5 Diphtheria... ..	M	2	1	...	...	1	...	...	...	...	...	...	...
	F	1	...	...	1	...	...	...	...	...	...	...	...
6 Tuberculosis of Respiratory System	M	51	...	...	...	...	5	8	12	8	13	5	...
	F	12	...	...	...	...	...	5	2	1	4	...	...
7 Other forms of Tuberculosis	M	5	...	...	2	...	...	1	...	1	1	...	...
	F	7	...	...	1	2	...	1	2	...	1	...	...
8 Syphilitic Diseases	M	8	1	...	...	...	...	1	1	...	1	4	...
	F	4	...	...	...	...	...	...	...	2	2	...	...
9 Influenza	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
10 Measles	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	2	1	...	1	...	...	...	...	...	...	...	...
11 Acute Polio-myelitis and Polio-encephalitis	M	1	...	...	...	...	1	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
12 Acute Infective Encephalitis	M	1	...	...	...	...	...	...	...	...	1	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
13 Cancer of Buccal cavity & Oesophagus	M	12	...	...	...	...	...	...	...	1	5	2	4
	F	4	...	...	...	...	...	...	1	...	1	2	...
14 Cancer of Stomach & Duodenum... ..	M	31	...	...	...	...	...	...	1	6	12	10	2
	F	14	...	...	...	...	...	...	...	3	5	13	3
15 Cancer of Uterus	F	19	...	...	...	...	...	...	1	5	7	6	...
16 Cancer of Breast	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	19	...	...	...	...	...	...	3	4	5	3	4
17 Cancer of all other sites	M	77	...	...	...	...	...	1	2	6	17	39	12
	F	60	...	...	1	...	...	...	3	9	13	22	12
18 Diabetes	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	8	...	...	...	...	...	...	...	1	3	2	2
19 Intra Cranial Vascular Lesions	M	76	...	...	...	...	...	...	...	3	11	30	32
	F	121	1	...	...	...	...	...	2	7	29	42	40
20 Heart Diseases	M	289	...	...	...	...	2	2	4	18	46	109	106
	F	277	...	...	...	1	1	3	7	16	44	90	115
21 Other Diseases of the Circulatory System... ..	M	30	...	...	...	...	...	1	...	3	2	10	14
	F	40	...	...	...	...	...	...	...	7	4	8	21
22 Bronchitis... ..	M	81	3	...	...	...	1	1	2	11	28	18	17
	F	61	2	...	...	...	...	...	2	2	15	20	20
23 Pneumonia	M	38	13	...	...	1	...	...	...	3	6	9	6
	F	23	14	...	...	...	...	...	...	...	1	5	3
24 Other Respiratory Diseases	M	12	...	...	...	...	...	1	2	...	4	4	1
	F	10	1	...	...	...	...	...	1	2	3	1	2
25 Ulcer of Stomach or Duodenum	M	10	1	...	...	...	...	1	...	...	5	3	...
	F	4	...	...	...	...	...	...	...	...	1	3	...
26 Diarrhoea (under 2 years)	M	16	15	1	...	...	...	...	...	...	...	...	...
	F	14	13	1	...	...	...	...	...	...	...	...	...
27 Appendicitis	M	4	...	...	...	1	...	...	...	2	1	...	...
	F	3	...	...	...	...	...	1	...	1	...	...	1
28 Other Digestive Diseases	M	15	2	...	...	...	...	...	...	3	4	4	2
	F	20	...	...	...	...	1	...	2	1	6	6	4
29 Nephritis	M	20	...	...	...	...	...	...	1	4	6	7	2
	F	32	...	...	...	...	2	...	5	2	6	9	8
30 Puerperal and Post Abortive Sepsis... ..	F	...	...	...	...	...	...	...	...	...	...	...	...
31 Other Maternal Causes	F	...	...	...	...	...	...	...	...	...	...	...	...
32 Premature Birth	M	19	19	...	...	...	...	...	...	...	...	...	...
	F	10	10	...	...	...	...	...	...	...	...	...	...
33 Congenital Malformation, birth injury, etc.	M	23	22	...	...	1	...	...	...	...	...	...	...
	F	14	12	1	1	...	...	...	...	...	...	...	...
34 Suicide	M	5	...	...	...	...	...	...	1	2	1	1	...
	F	3	...	...	...	...	...	...	...	1	2	...	...
35 Road Traffic Accidents	M	3	...	...	...	...	...	...	1	...	1	1	...
	F	1	...	...	...	...	...	...	...	...	...	...	1
36 Other Violent Causes	M	15	3	1	...	2	1	1	1	1	2	2	1
	F	16	...	...	1	...	...	1	...	...	...	4	10
37 All Other Causes	M	58	6	2	1	2	1	2	3	4	4	17	16
	F	50	3	...	...	1	2	2	4	2	10	12	10

INFANTILE MORTALITY DURING 1947.
Deaths from stated causes and various ages under one year.

CAUSE OF DEATH.	Under 1 day.	1-2 days.	2-3 days.	3-4 days.	4-5 days.	5-6 days.	6-7 days.	Total under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under one month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total under 1 year.
ALL CAUSES—Certified ... Uncertified	18	6	3	4	3	3	...	37	11	12	7	67	36	25	12	7	147
Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1	2
Whooping Cough ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1
Diphtheria ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Syphilis ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	...	2
Meningitis ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	2
Convulsions... ..	...	...	...	...	...	...	...	...	...	...	...	...	1	3	1	...	5
Bronchitis ...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	...	3
Pneumonia ...	...	...	1	...	...	1	...	1	2	2	2	7	9	6	1	1	24
Broncho-Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Other Respiratory Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Inflammation of Stomach ...	...	...	...	...	...	...	...	...	...	...	...	...	1	5	6	2	28
Diarrhoea and Enteritis ...	...	1	...	...	...	...	...	2	2	1	...	5	1	2	...	...	8
Congenital Malformations	1	...	...	...	1	...	...	1	...	...	1	2	1	1	...	1	5
Congenital Debility and Sclerema	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	1
Icterus ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature Birth ...	10	4	2	4	...	...	...	20	2	5	2	29	...	...	...	...	29
Atelectasis ...	2	1	...	...	1	...	...	4	1	...	...	5	...	...	...	...	5
Congenital Heart Disease	...	...	...	...	...	...	...	...	...	...	...	...	2	1	...	...	3
Injury at Birth ...	3	...	...	...	1	2	...	6	1	2	...	9	...	...	...	...	9
Other Causes ...	2	...	...	...	...	...	...	2	2	...	1	5	4	...	2	2	13
Accidental Death ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	...	3
TOTALS	18	6	3	4	3	3	...	37	11	12	7	67	36	25	12	7	147

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

Pathological Services.

The pathological and bacteriological work of the department was undertaken by the Oldham Laboratory Board and the Public Health Laboratory, Manchester.

The following figures show, in unit values, the work undertaken by the Board for the Oldham Royal Infirmary and the Public Health Department during the year.

	Specimens Examined.	Units.
Oldham Royal Infirmary ...	18,567	66,676
Boundary Park General Hospital	21,988	73,997
Public Health Department ...	1,982	12,212
Tuberculosis Dispensary ...	1,088	2,198
Westhulme Hospital ...	1,777	8,396
Strinesdale Sanatorium ...	643	1,385
Venereal Diseases Department	10,120	20,364
	56,165	185,228

Specimens were also examined for private practitioners and outside authorities from which the Board derived an income of £206 10s. 6d.

The work of the Board continued to increase and by the end of the first quarter of the year the pathological work of the V.D. Service was being undertaken at the Laboratories.

In January intimation was received from the Home Office that the Animal House which formed part of the Laboratory Service of the Boundary Park General Hospital, had been registered as a place at which experiments on living animals might be performed.

In January, Dr. T. K. Owen, M.Sc., M.B., Ch.B., M.R.C.P. was appointed Medical Director vice Dr. H. J. Voss, M.R.C.S., L.R.C.P. who had held this appointment in a temporary capacity from August, 1944.

Councillor R. Roberts, J.P. was again appointed Chairman of the Board and Alderman S. T. Marron, J.P. Chairman of the Health Committee, was appointed Deputy Chairman of the Board. Councillor R. Roberts, J.P. resigned his appointment in May and Mr. F. W. Barnett, Honorary Secretary to the Board also resigned and was succeeded by Mr. H. A. Lord, Lay Administrative Officer of the Public Health Department.

The following were the representatives of the Health Committee on the Board:—Alderman Hallwood, Alderman Marron, J.P., Alderman Tweedale A., Councillor Bannon, Councillor Glover, Councillor Morrell, Councillor Simpson and Councillor Taylor.

In October, Dr. C. H. Adderley, M.A., M.B., D.P.H., was appointed Pathologist and Medical Director following the resignation of

Dr. T. K. Owen, who had accepted an appointment in Bournemouth. Mr. H. A. Lord, Honorary Secretary to the Board, also tendered his resignation in December, consequent upon his proposed emigration to Canada.

Supply of Insulin.

The arrangements for the supply of insulin in accordance with Ministry of Health Circular 2734 continued. During the year 45 persons were supplied with insulin, including school children. The cost to the Council was £185 13s. 4d.; patients' contributions amounted to £5 0s. 0d. and £18 11s. 10d. was received from the Education Committee.

Supply of Liver Extract.

The arrangements for the supply of Liver Extract in certain cases continued and nine persons received supplies. The net cost to the Council was £23 5s. 10d.

MEDICAL EXAMINATIONS—CORPORATION EMPLOYEES.

During the year the Medical Staff of the Department undertook medical examinations for the various Corporation Departments as follows:—

Department.	Entrants.	Disability Pensions.	Special Exams.	Total
Baths and Wash Houses ...	13	—	1	14
Borough Ambulance Service ...	—	—	—	—
Borough Engineer & Surveyor's ...	40	—	—	40
Borough Treasurer's ...	12	1	—	13
Boundary Park General Hospital ...	33	—	—	33
British Restaurants ...	8	—	—	8
Carrying and Cleansing ...	27	—	—	27
Education ...	36	2	—	38
Electricity ...	50	1	2	53
Fire Service ...	1	—	—	1
Gas, & Gas and Water ...	95	3	—	98
Health ...	18	1	3	22
Housing ...	6	—	—	6
Maternity and Child Welfare ...	45	—	2	47
Markets ...	—	—	—	—
Parks and Cemeteries ...	13	—	1	14
Passenger Transport ...	242	6	1	249
Police ...	4	—	—	4
Public Assistance ...	26	5	2	33
Public Libraries ...	7	—	—	7
Sewage ...	2	—	—	2
Street Lighting ...	23	—	—	23
Town Clerk's ...	7	—	—	7
Waterworks ...	19	1	—	20
Totals ...	727	20	12	759

SPECIAL EXAMINATIONS.

Carried Forward	759
Borough Engineer & Surveyor's—Registered Disabled Persons	1
Education—Teachers	6
Electricity—Registered Disabled Persons	1
Gas, and Gas and Water—Registered Disabled Persons	9
Housing—Registered Disabled Persons	2
Street Lighting—Registered Disabled Persons	5
Transport—Road Traffic Acts	63
Waterworks—Sickness	2
Entrants	61
Registered Disabled Persons	2
For other Authorities	3
Total	914

There were 63 samples of blood for widal tests and 123 samples of faeces taken from employees of the Waterworks Department.

BOUNDARY PARK GENERAL HOSPITAL.

The number of admissions 10,156 shows an increase compared with 9,346 for 1946. The number of confinements increased from 2,709 to 3,028, which is the highest figure recorded since the opening of the Maternity Unit in 1940 and reflects the greatest credit on the staff of the Hospital.

Mr. J. Fenton, Senior Dental Officer, has attended the hospital at weekly intervals, and inspection and treatment has been carried out for in-patients. These cases are selected by the Medical Staff when it is thought that dental treatment would be beneficial to their general condition. In addition out-patients from the Maternity and Child Welfare Department have attended the hospital for treatment. Facilities for hospitalising certain cases referred from the Dental Clinics are advantageous when extensive dental treatment is required.

In February, the Ministry approved in principle, the proposal to adapt the ground floor of the Children's Block for use as a Venereal Diseases Treatment Centre and the Borough Engineer and Surveyor was requested to obtain the necessary tenders. The Ministry of Health also gave approval in principle in accordance with Circular 202/46 to the appointment of a full-time Venerologist, but the making of this appointment was deferred until the new Treatment Centre would be ready for use.

Intimation was received in March that the Ministry of Health were prepared to recommend the issue of a civilian building licence by the Ministry of Works in connection with the alterations to D.1 Ward to provide for an out-patients and reception unit, and loan sanction in respect of the sum of £2,100 for this project was received from the Ministry of Health in September.

In February, Dr. Ellis Pigott, was appointed Visiting Dermatologist to hold one session per week at the hospital. Following the sudden death of Dr. Pigott in June Dr. G. Auckland was appointed to act as locum tenens.

In June, a foot clinic was commenced and one weekly session was held. Mr. John Hall, F.Ch., was appointed Visiting Chiropodist.

During the year the number of physiotherapists employed in the Physiotherapy Department and at the Orthopaedic Institute, Gainsborough Avenue, was increased to one Superintendent Physiotherapist and three Assistant Physiotherapists. Miss H. I. Schofield undertook duties of Superintendent Physiotherapist.

Dr. J. Starkie, a Senior Assistant Medical Officer of Health, was appointed Clinical Assistant in Medicine. This appointment will promote closer liaison between the hospital and the School Health Service. During the year 330 school children received in-patient treatment at the hospital. All admissions and discharges of school children are notified to the School Medical Officer.

This is the last complete year that the hospital will function under the control of the Health Committee. The number of admissions exceeded all records and the staff have carried out their duties under very difficult circumstances.

(a) In-Patients.

1. Total number of admissions (including infants born in Hospital)	...	...	...	10,156
2. Number of women confined in Hospital	...	...	...	3,028
3. Number of live births	...	...	...	2,965
4. Number of stillbirths	...	...	...	87
5. Number of deaths among newly-born (i.e., under four weeks of age)*	...	...	...	83
6. Total number of deaths of children under one year (including those given under 5)	...	...	...	133
7. Number of maternal deaths among women admitted to hospital for confinement	...	...	...	0
8. Total number of deaths	...	...	...	508
9. Total number of discharges (including infants born in Hospital)	...	...	...	9,594
10. Number of beds occupied (excluding cots in maternity wards)				
(a) average during the year	...	...	...	391
(b) highest: 477 on 27.3.47.				
(c) lowest: 301 on 27.12.47.				
11. Number of surgical operations under general anaesthetic (excluding dental operations)	...	...	...	2,354

** This figure only relates to children born in the hospital.*

(b) Surgical Clinic.

Patients seen	2,178
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(c) Medical Clinic.

Patients seen	515
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(d) Skin Clinic.

No. of new patients seen. (from 11.4.47)	91
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(e) Ante-Natal Clinic.

Number of sessions held	520
Attendances	21,174
New cases attending	2,158

LOCAL GOVERNMENT ACT, 1929.

ADMINISTRATIVE SCHEME.

Arising out of a report submitted to the General Hospital Sub-Committee, the Health Committee in January passed the following resolution which was confirmed by the Council:

“(a) That the Council be recommended to approve:

- (i) That, as from the 1st April, 1947, the functions of the Public Assistance Committee in connection with the administration of the Westwood Park Institution, shall, pursuant to the provisions of section 4 (4) of the Poor Law Act, 1930, be discharged by the Health Committee, on behalf of, and subject to the general direction and control of the Public Assistance Committee.
- (ii) That for this purpose the Administrative Scheme for the County Borough of Oldham, made by the Council and approved by the Minister of Health under the Local Government Act, 1929, be amended accordingly, and that the Town Clerk be authorised to make formal application, pursuant to the provisions of the said Act, for the approval of the Minister of Health in respect of such amendment of the Scheme.

The following is an extract from a report submitted to the General Hospital Sub-Committee in February.

“Under the Administrative Scheme for the County Borough of Oldham made under Part I of the Local Government Act, 1929, the Council declared that all assistance to necessitous persons as regards the provision for the use of inhabitants of the County Borough of Hospitals for the reception of the sick should be provided exclusively by virtue of the Public Health Acts. The Council have had under consideration the best means of implementing this declaration so far as the Westwood Park Institution is concerned. A number of suitable premises have been obtained for the accommodation of the able-bodied inmates from the Institution but it was not possible to complete the work necessary to adapt these premises.

The administration of the Westwood Park Institution by the Health Committee will facilitate appropriation and also assist the smooth transfer of the hospitals under their control and the Institution to the new Regional Hospital Board. By the early removal of the infirm cases who are suitable for residence in a hostel, and the healthy children to a nursery, the Institution will become what it really is—a hospital, and future administration will be simplified.”

This proposal when effected will be a further step towards fully implementing the Administrative Scheme and will increase the confidence of the public in their present Hospital Services and in the new hospital set up, which is laid down in the National Health Service Act.

In April a communication was received from the Ministry of Health stating that careful consideration had been given to the Council's proposal to amend the Administrative Scheme and suggesting that having regard to the approaching operation of the National Health Service Act, and the introduction of a measure for the break up of the Poor Law, it would be a waste of time to operate the rather complicated machinery necessary for the amendment of the Administrative Scheme at that time. As the "appointed day" was expected to be April 1st, 1948, it was clear that no satisfactory further progress could be made in this matter in the time available.

WESTWOOD PARK INSTITUTION.

The Westwood Park Institution continues to be administered by the Public Assistance Committee.

NURSING HOMES.

There is one registered Nursing Home in the Borough, the Woodfield Nursing Home, which receives, medical, surgical and maternity cases and provides 20 beds. During the year no new Nursing Homes were registered or applications for registration received.

OLD PEOPLE'S WELFARE COMMITTEE OF THE OLDHAM COUNCIL OF SOCIAL SERVICE.

Mrs. R. H. Jackson, Honorary Secretary of the Old People's Welfare Committee has kindly supplied the following report:—

"The Local Old People's Welfare Committee was set up in June, 1945, to create increased interest and activity in the Welfare of the Old People of the town, and for this purpose the Committee are affiliated to the National Old People's Welfare Committee.

One paramount factor arising with old age is loneliness, and already the Local Committee have set up a system of visiting old people, especially those who live on their own, and who ask for and welcome visitors. The Committee further extended their activities by inaugurating an Old People's Club at St. John's Church School, Werneth, Oldham. This Club was opened on 11th September, 1946, with a membership of 40, and soon had a membership of 140, the membership list having to be closed temporarily. The success achieved at the St. John Club encouraged the Committee to open an additional Club situated at the Community Centre, Clegg Street, Oldham (formerly the Winston Club). The apparent need of this service for the old people and the welcome given to it by them, are sufficient justification for the setting up of further Old People's Clubs, and the Committee intend to do this as and when facilities arise. In the no distant future it is hoped to provide Club premises which will be available for members daily, instead of the one day per week as at present.

The further activities of the Committee include the provision at no distant date of Hostels or Homes for aged men and women. In the Committee's experience it has already been found that many old people are either living alone, or living in accommodation much too large for their needs and that they would welcome some system of communal living. It is felt too, that in many instances there are aged couples who would be glad of the provision of accommodation say, two rooms in a large house, to which they could bring their own furniture, and who are

able to pay for such accommodation either by rental or an inclusive figure covering the provision of accommodation and meals and other analogous services. The provision of these services, it is anticipated, would help to alleviate the present housing shortage. The Committee's object in this direction is therefore in support of, and not in competition with the local Authority in their plans for the provision of accommodation for old people.

It is generally known that the balance of the population in this country is shifting, and that for some years to come there will be an increasing number of old people. The work of Old People's Welfare Committees is entirely voluntary, and much time, effort, and money is devoted by men and women who are alive to the situation, and who feel that it is imperative that much more should be done, as they know it can be done, to ease the burden of old age. This is a problem which calls for something more than financial aid."

MATERNITY AND CHILD WELFARE.

The Child Welfare Centre is adjacent to the Town Hall. There are six branch centres in widely separated parts of the town.

In April, a breakdown in the heating apparatus at the Hollins Welfare Centre interrupted the holding of regular weekly sessions and in December, alternative accommodation was arranged at the Beulah Baptist Sunday School, until more satisfactory arrangements could be provided. Miss W. M. Mills was appointed Deputy Superintendent Health Visitor. In July, Dr. Frances L. Williams joined the staff of the department as Assistant Medical Officer of Health for Maternity and Child Welfare.

Student Health Visitors. Difficulties have been experienced during the year in obtaining Health Visitors and at times the number employed was much below the recognised establishment. The Establishment Committee had previously given approval to the proposal to employ Student Health Visitors and in October Miss M. J. Newman, Miss C. Briggs, Miss J. B. McLeod and Miss C. Williamson commenced training. At the completion of the course and on obtaining the Health Visitors' Certificate these students will automatically join the staff as Health Visitors.

Attendances at the Central Welfare Clinic during 1947.

Number of individual cases who attended, and who at the end of the year were:—

Under 1 year	282	
1—5 years	114	
	—	396

Number of attendances (mother and baby count as one):—

Under 1 year	3,814	
1—5 years	513	
	—	4,327

Total number of new cases attending:—

Under 1 year	348	
1—5 years	48	
	—	396

Number of sessions held	98
Average attendance per session	44

Attendances at the Branch Centres during 1947.

Centre	Sessions	New Cases	Individual Cases Under 1 year	Attending 1—5 years	Average Attendance	Total Attendances
Brunswick	48	262	155	105	63	3,029
Hollinwood	47	180	157	23	43	2,036
Pitt Street East ...	46	225	167	58	62	2,857
St. Ambrose	61	300	196	89	57	3,525
St. Barnabas	45	261	165	61	72	3,245
Scottfield	61	312	187	127	49	3,031
TOTALS ...	308	1,540	1,027	463	346	17,723

Births.

During the year 2,540 notifications of birth were received relating to 2,471 live births and 69 stillbirths. In addition, 1,589 notifications were received which were transferred to other authorities concerned.

The 2,540 live and stillbirths were notified by:—

Midwives	2,538
Doctors and Parents	2

Transferred Births.

The names and addresses of 1,683 infants and young children who left the borough (including children born in Oldham hospitals whose home addresses were outside the borough), were notified to the Medical Officers of Health of the areas of their destination, and 67 were notified as coming to live in the borough.

Health Visiting.

Details of visits made by Health Visitors:—

Visits to newly-born infants	2,542
Re-visits—Infants under 12 months	2,351
Infants 1—5 years	1,080
Visits to cases of Ophthalmia Neonatorum	32
Measles	955
Whooping Cough	190
Infantile Deaths	28
Ante-Natal Cases	74
Special Visits	2,094

Infant Life Protection.

The supervision of infants under the age of nine years, received for maintenance and reward, is carried out by Health Visitors. These children are visited frequently and are also medically examined at the Infant Welfare Centres. The following are the figures for 1947:—

Number of Foster Parents on the Register—

(a) at the beginning of the year	3
(b) at the end of the year	3

Number of Children on the Register—

(a) at the beginning of the year	3
(b) at the end of the year	3
(c) who died during the year	—

New cases during the year 8

Removed from the Register during the year:—

Returned to Parents	4
Over 9 years	—
Adopted by Foster Parents	1
Removed from the District	—
Transferred to Homes or Hostels	3

The Adoption of Children (Regulation) Act, 1939.

The Oldham Adoption Committee submitted its fourth Annual Report. During the period 26 babies were placed in suitable homes and 17 legal adoptions carried through, leaving 9 cases awaiting completion at the end of the period.

Complete liaison exists between this Department and the Adoption Committee, to which the Health Committee made a grant of £5 towards expenses. In December, Mrs. L. Peach, a co-opted member of the Maternity and Child Welfare Sub-Committee, was appointed to represent that Sub-Committee on the Oldham Adoption Committee.

Care of Illegitimate Children.

The Superintendent Health Visitor, together with the Hospital Almoner, work in close co-operation with the Social Worker of the Oldham Council for Moral Welfare, who is a full-time officer.

The Maternity and Child Welfare Sub-Committee makes an annual grant of 20 guineas to this Society.

No mother and baby home is provided by the authority and no women were referred to homes or hostels provided by other bodies during the year.

DAY NURSERIES.

On the 1st January, Westhill, Overens Street, Horsedge, Fernholme and Park House Nurseries were providing accommodation for 251 children. In addition Fernholme was providing residential accommodation for 21 children.

Formal notice was received from the owners of Fernholme in September for the Corporation to vacate these premises in July, 1948. Every endeavour was made to find suitable alternative accommodation but without success and at the end of the year the owners were requested to consider granting the Corporation an extension of the lease of the premises.

The closing of Fernholme Nursery will necessitate the provision of new residential accommodation and the Maternity and Child Welfare Sub-Committee accepted a recommendation that the premises 16-18 Mayall Street should be adapted for this purpose.

In October, following visits made to the Nurseries by a Public Health Nursing Officer and an Inspector of the Ministry of Education, Westhill, Overens Street, Horsedge and Fernholme Nurseries were approved as Training Schools.

In December, a tender for the necessary adaptation of the premises in Tate Street, previously used as a social Club by the Gas Department, was accepted and application was made to the Ministry of Health for the necessary loan sanction.

Consideration was given to a nursery being erected on a plot of land situated in Cardwell Street. The Ministry of Health approved the appropriation of the land for this purpose but it was subsequently decided to explore the possibility of obtaining a piece of land in Honeywell Lane in substitution for the land in Cardwell Street.

Consideration was also given to the provision of a nursery to serve the Strinesdale and Moorside areas but no detailed proposals were completed by the end of the year.

Industrial Nurseries.

The only nursery functioning on the 1st January was the Greenbank Mill Nursery with accommodation for 44 children.

Following Ministry of Health approval, nurseries at the Central Mill, Coldhurst Hall Mill and Werneth Spinning Company, were opened and final plans for five further nurseries were approved.

The following table summarises the accommodation available at the 31st December:—

Name of Nursery	Age Groups.			Total Places.
	0—1	1—2	2—5	
Greenbank.		17	27	44
Central Mill.	6	9	12	27
Coldhurst Hall.			30	30
Werneth Spinning Co.	10	15	20	45
Totals:	16	41	89	146

Close co-operation exists between this department and the industrial firms concerned and by arrangement with the management of these firms, regular visits are made to the nurseries by the medical staff for inspection and immunisation against Diphtheria. The Superintendent Health Visitor or her deputy visits these Nurseries regularly, and general advice on all matters is given, and the firms are encouraged to consult this Department if any difficulties arise.

HOME AND DOMESTIC HELPS.

The arrangements for the provision of domestic and home helps in homes where there is sickness continued, and 33 women were engaged in this service throughout the year. Home helps were provided in 31 cases and domestic helps in 87 cases.

Home and domestic helps are employed in a full-time or part-time capacity varying according to the requirements of the service and the personnel available. The recruitment of personnel for this particular work has improved considerably throughout the year. The Superintendent Health Visitor is responsible for the organisation of the service but the day-to-day routine duties are undertaken by a full-time senior female clerk.

In July, revised conditions of service were agreed, these provide for a payment of 1/8d. per hour; overalls to be provided and the supply of travelling tokens.

This service is without doubt rapidly extending and up to the present time has proved a constant source of comfort to many households.

MUNICIPAL MIDWIFERY SERVICE.

At the beginning of the year, 10 midwives were employed by the Council. Two new appointments were made and four resignations received.

In May, the Secretary of the Central Midwives Board notified Local Supervising Authorities of a scheme to assist them in the training of existing practising midwives in the administration of Gas and Air Analgesia. Under this scheme, approval was subsequently given by the Board to this authority for the direct supervision in our domiciliary midwifery service of midwives in the administration of Gas and Air Analgesia on the district, under an approved teacher and arrangements were made for three lecture demonstrations to be given at Boundary Park General Hospital.

At the end of the year, only one midwife, who was appointed in December, did not possess the certificate of proficiency in the administration of Gas and Air Analgesia. She obtained this certificate shortly after appointment.

The following is a summary of the work done by the municipal midwives during the year:—

Confinements.

Number of cases booked	...	...	...	734
Number of confinements attended	...	...	...	703
Number of cases receiving analgesia	...	...	...	406

Visits.

Ante-Natal	...	...	...	3,722
During lying-in period	...	...	...	13,221
Post Natal	...	...	...	451

Fees.

Patients paying full fee	...	...	...	680
Patients paying reduced fee	...	...	...	17
Necessitous cases (no fee)	...	...	...	6

Amount of fees received £1,320.

During the year 4,129 live and stillbirths were notified. Of these 3,319 (80.38%) were institutional and 810 (19.61%) domiciliary. Of the latter 723 (89.25%) were attended by municipal midwives and the remaining 87 (10.74%) by midwives in private practice.

Supervision of Midwives.

During the year 42 midwives notified their intention to practise, compared with 54 in 1946. Of these, 11 were municipal midwives; 3 midwives in private practice; 21 midwives in Boundary Park General Hospital and 7 midwives in the Woodfield Nursing Home.

The following notifications were received from midwives practising in the Borough.

Stillbirths	...	...	...	...	...	18
Deaths	...	...	...	...	...	5
Artificial Feeding	...	...	...	...	...	66
Liability to be a source of infection	...	...	...	...	...	3

There were 302 Medical Aid Forms sent in by midwives as compared with 306 in 1946. The conditions for which medical aid was sought were as follows:—

Conditions in Mother.		Conditions in Child.	
Ante-partum Haemorrhage...	5	Inflammation of or discharge from the eyes ...	46
Other Ante-Natal Conditions	1	Cyanosis ...	6
Delayed Labour ...	22	Foetal Distress ...	5
Adherent Placenta ...	5	Congenital Deformity ...	2
Placenta Praevia ...	1	Icterus Neonatorum ...	—
Post-partum Haemorrhage...	3	Skin Infections ...	6
Malpresentation ...	16	Atelectasis ...	—
Pyrexia ...	8	Convulsions ...	—
Ruptured Perineum ...	107	Asphyxia ...	1
Phlebitis ...	1	Difficulty in Feeding ...	1
Obstetric Shock ...	1	Circumcision ...	3
Toxaemia of Pregnancy ...	1	Tongue Tied ...	8
Oedema ...	3	Swelling head ...	1
Albuminuria ...	6	Haemorrhage ...	2
Premature Labour ...	18	Jaundice ...	1
Jaundice ...	2	Macerated Foetus ...	1
Baby Stillborn ...	2	Talipes ...	3
Uterine Inertia ...	1	Other conditions ...	5
Prolapsed Cord ...	3		
Maternal Distress ...	2		
Other Conditions ...	3		
	211		91

The total cost of these claims was £245 2s. 6d. of which £158 3s. 11d. was recovered from the patients.

Ophthalmia Neonatorum.

During the year 10 cases of Ophthalmia Neonatorum were notified. The following are the results of these cases:—

Vision unimpaired ...	9
Still under treatment ...	—
Died ...	1
Removed from district ...	—

Puerperal Pyrexia.

The following case of Pyrexia was notified during the year:—

Woodfield Nursing Home...	1
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Emergency Maternity Unit.

This service continued to operate in accordance with the arrangements for previous years and was called out for the following emergencies:—

Post-partum Haemorrhage...	4
Retained Placenta and Intra-partum Haemorrhage	3

Plasma was used on four occasions and six of the cases were later taken into Hospital.

Dental Inspection and Treatment.

The Senior Dental Officer, Mr. J. Fenton., L.D.S., reports as follows:—

Expectant and Nursing Mothers.

During the past year it has been possible to expand this service and the increase is reflected in the table of comparison shown below:—

	1947	1946	1945	1944	1943	1942	1941	1940
Number of new cases commencing treatment.	198	161	112	41	55	48	75	35
Number of attendances for treatment.	837	675	506	285	344	399	420	267
Number of permanent teeth extracted.	1,171	769	830	394	503	649	621	233
Number of permanent teeth filled.	84	25	32	21	44	17	5	4
Number of Scalings.	42	51	33	No	previous record.			
Number of other operations.	667	580	355	192	218	269	279	184
Number of administrations of general anaesthetic.	68	50	63	31	45	62	80	No record
Number of X-rays taken.	38	X-Ray machine only installed in 1947						
Number of patients supplied with dentures.	58	47	39	No	previous record.			
Number of dentures supplied.	95	81	65	44	45	69	42	40

Many of the prejudices which have existed in the past concerning dental treatment during pregnancy are gradually being overcome, and it is felt that these patients are now beginning to appreciate the value of dental treatment, and the advantages gained from the possession of a clean healthy mouth. It is pleasing to note that 198 new cases commenced treatment during the year as compared with 35 cases in 1940. The practice of attending the Ante-Natal Clinic at Boundary Park General Hospital for the inspection of these cases has been continued. The advantages gained over the previous method of patients being referred direct to the Dental Clinics by the Medical Staff, are apparent. Treatment is commenced much earlier during their pregnancy than was previously possible, and many minor dental defects are revealed which would have been overlooked in the old arrangement.

Owing to the neglected state of many of these patients' mouths it has been necessary to carry out total extractions in a number of cases. Consequently it has been necessary to supply these patients with dentures. During the year 1,171 teeth were extracted and 95 dentures were inserted.

Efforts have been made to improve the standard of Oral Hygiene, and the scaling of teeth together with gum treatment has been carried out in many cases. This treatment, together with chair side instruction in Oral Hygiene, should enable many of these patients to retain their teeth for a much longer period than would have been possible otherwise. During the year there was an increase in the number of teeth filled. This was a considerable increase on previous years but still falls short of the amount of this type of work which should be performed, particularly in the case of the young mothers. Here again considerable dental education is necessary to break down the prejudices concerning this type of work.

Where it has been necessary for the administration of a general anaesthetic the services of the Visiting Anaesthetist have been utilised. These arrangements are very satisfactory and enable the efficiency of the treatment to be maintained. The installation of a Dental X-Ray Unit at Cannon Street Dental Clinic has also been a valuable asset to the service, since it greatly assists in correct diagnosis.

Finally it is pleasing to report that very few appointments for treatment have been broken, and that the majority of cases commencing treatment have continued to attend until their treatment has been completed."

The following is a summary of the treatment given and the fees received during 1947:—

New cases commencing treatment	...	...	198
Attendances of patients	...	...	837
Extractions	...	...	1,171
Fillings	...	...	84
General Anaesthetics given	...	...	68
Other operations	...	...	667
Dentures provided	...	...	95
Patients paying full fee	...	...	22
Patients paying reduced fee	...	...	9
Necessitous cases (no fee)	...	...	23

Amount of fees received £74. 12s. 0d.

MATERNAL MORTALITY.

During the year no deaths were attributed to childbirth but 4 deaths associated with childbirth occurred. The maternal mortality rate is "nil". This is very gratifying and compares with 2.29 for the previous year. Such a low rate cannot be maintained as there will always be a certain number of deaths even where the maternity services are highly efficient.

"A"—Deaths due to Sepsis:—0.

"B"—Deaths due to other Puerperal Causes:—0.

"C"—Deaths associated with Pregnancy:—4.

The cause of death in each case was as follows:—

Case No. 1. Age 31.

1. (a) Congestive Cardiac Failure.
(b) Mitral Stenosis.
2. Delivery of child 7 weeks ago.

Case No. 2. Age 21.

1. (a) Myocardial Failure.
(b) Chorea Insaniens.
2. Miscarriage, 6 months.

Case No. 3. Age 25.

1. Shock due to detachment of placenta.
2. Haemorrhage from Uterus.
"Inquest held. Conviction of Manslaughter."
"Attempted Abortion."

Case No. 4. Age 40.

1. (a) Myocardial Failure.
(b) Mitral Stenosis.
(c) Rheumatic Fever.
2. Post-Partum Haemorrhage.
Full term pregnancy. Caesarean section for disproportion because of Achondroplasia.

THE ORTHOPÆDIC CLINIC.

The Orthopaedic Clinic provides treatment for cases from the Maternity and Child Welfare Centres, the School Health Service, the Tuberculosis Dispensary and from Private Practitioners. During the year 11,174 attendances were made by patients.

The following table shows the defects from which the cases examined by the Orthopaedic Surgeon were suffering and the source of reference of these cases.

Defects	Maternity and Child Welfare	School Health Service	Tuberculosis Dispensary	Private Doctors	Public Health Department	Boundary Park General Hospital	Total Number of Cases Referred
Postural Defects ... ..	...	16	...	2	...	1	19
Little's Disease ... ..	...	...	...	...	...	...	...
Paresis	1	1	...	...	...	...	2
Spastic Paralysis	2	1	...	...	...	...	3
Infantile Paralysis	4	6	...	1	3	...	14
Torticollis	3	1	...	...	...	...	4
Brevicollis ... ..	...	...	...	...	...	...	...
Congenital Deformity	16	7	...	...	...	...	23
Other Deformities	2	7	...	1	...	1	11
Injuries (including Fractures) ... ..	...	16	...	5	1	2	24
Genu-Valgum	92	35	...	8	...	...	135
Genu-Varum	6	2	...	1	...	...	9
Pes Planus	1	5	...	2	...	...	8
Pes Planus with Genu Valgum ... ..	...	...	...	...	...	...	...
Pes Cavus ... ..	...	1	...	...	...	...	1
Hallux Valgus ... ..	...	6	...	1	...	...	7
Rheumatism ... ..	...	1	...	2	...	1	4
Arthritis ... ..	...	1	...	4	1	4	10
Pronated feet ... ..	...	1	...	...	...	...	1
Weak Ankles ... ..	...	1	...	...	...	...	1
Ganglion Tendon ... ..	...	...	1	...	...	...	1
Delay in Walking	4	...	...	...	...	...	4
Hallux rigidus ... ..	...	1	...	1	...	...	2
Coxa vara ... ..	...	...	...	1	...	...	1
Pain abductor region ... ..	...	...	...	...	...	1	1
Haemotoma ... ..	...	1	1	...	...	...	2
Pain in back ... ..	...	...	...	...	...	1	1
Epiphysitis	1	...	...	1	...	...	2
Inversion feet	3	4	...	...	...	...	7
Bursitis ... ..	...	...	...	1	...	...	1
Amytomia ... ..	...	...	...	1	...	...	1
Pseudo-Coxalgia ... ..	...	...	...	1	...	...	1
Eversion Feet	2	3	...	...	...	...	5
Hammer Toe ... ..	...	1	...	...	...	...	1
Osteochondroma ... ..	...	...	...	...	...	1	1
Tendon Click ... ..	...	1	...	...	...	...	1
Loose Cartilage	1	...	...	...	...	...	1
Diagonosed N.A.D.	3	8	...	5	...	...	16
Tuberculosis Bones and Joints ... ..	...	...	58	...	...	...	58
Tuberculosis Tenosynovitis ... ..	...	...	1	...	...	...	1
	143	127	61	38	5	12	385

WATER SUPPLY.

The Waterworks Engineer and Manager (Mr. C. Busfield) has kindly supplied the following particulars:—

“During the past year a constant supply of water of a high standard of purity was maintained to all premises within the Department's area of supply, which are supplied through the Department's domestic distribution system.

Despite the very dry weather which was experienced for a large portion of the year no restrictions of any kind relating to the use of water were imposed upon consumers.

Practically all dwelling-houses within the Department's area of supply, numbering about 66,500, are connected direct to this Department's mains and very few supplies are provided by means of common stand taps. The estimated population in the Department's area of supply is 216,000.

The pH values of the water supplied from the Piethorne and Hanging Lees sources, all of which is unfiltered, varied between 5.0 and 8.0. The pH values of the water supplied from the Castleshaw source, which is filtered, ranged between 8.0 and 8.5, and the pH values of the water supplied from the Readycon Dean source, which is also filtered, ranged between 5.0 and 8.0. No cases of contamination by lead of the water supplied were noted.

During 1947 samples of water were submitted for chemical and bacteriological examination as follows:—

Reservoir.	Chemical.	Bacteriological	Remarks.
Piethorne.			
Raw water:—			
From Main	—	1	No B.Coli in 100 c.c.
From Butterworth Hall Inlet.	—	1	No B.Coli in 100 c.c.
From Tom Clough Inlet.	—	1	No B.Coli in 100 c.c.
After Sterilisation.	4	10	B.Coli present in one sample—1 per 100 c.c.
Hanging Lees.			
Raw Water.	—	1	No B.Coli in 100 c.c.
After Sterilisation.	4	10	No B.Coli in 100 c.c.
Castleshaw.			
Raw Water.	—	1	No B.Coli in 100 c.c.
After Filtration and Sterilisation.	4	10	No B.Coli in 100 c.c.
Readycon Dean.			
Raw Water.	—	1	No B.Coli in 100 c.c.
After Filtration and Sterilisation.	4	10	No B.Coli in 100 c.c.”

DRAINAGE AND SEWERAGE.

I am indebted to Mr. J. Taylor, the Sewage Works Manager, for the following information:—

“The treatment plant consists of Detritus Tanks, Sedimentation Tanks, Bio-Flocculation Tanks, Percolating Filters, Humus Tanks, Storm Tanks and Heated Sludge Digestion Tanks. This method of treatment was placed in operation in 1938.

Grit deposited in the detritus tanks was removed weekly and either buried or used after drying for the making of footpaths. The total amount collected was approximately 475 tons.

Trouble was experienced in the latter half of the year due to a breakdown in the Screening plant, this allowed rags and cotton waste to pass to the sludge pumps and block the pipe-lines and splash plates in the heated digestion tanks.

The bio-flocculation plant was in operation for the whole of the year and the resulting effluents obtained were very fair. Airtiles in the seven units were removed and cleaned, several were found to be badly cracked and these had to be replaced, the first major replacements in eight years of continuous working.

In March an unusual breakdown deprived us of the use of one air-compressor for the remainder of the year, a crosshead broke and in doing so bent the crank-shaft, smashed the large cast-iron base and in addition did minor damage to the machine. The cause of the breakage was fatigue.

For part of the year the percolating filters were a little overloaded because five distributors were being renewed. The final effluents discharging to the river have been reasonably fair in quality, with the exception that the suspended matter has been borderline on several occasions, this will continue until the available humus tanks capacity is increased or the design altered in such a way that the flow through is more evenly distributed and it is along the latter lines that experiments are being conducted.

The whole of the raw sludge produced in the Purification Plant was given treatment in two out of three heated primary Digestion Tanks, the third unit, being out of use for repairs and cleaning.

Sludge gas produced from the digesting sludge was fairly steady at an average rate of 70,000 cubic feet per day and the output was used on the works for heating purposes.

The demand for sludge cake from the drying beds by farmers and allotment holders has again been very good and approximately 4,500 tons were removed from the Works.

Samples of the final effluents leaving the purification plant were taken periodically by the inspector of the Lancashire Rivers Board; all the samples conformed to the standard required.

Sludge Disposal.

The total sludge produced in the settling tanks during the year was 36,000 tons which is equal to 16.9 tons per million gallons of sewage treated.

Sewage Flow.

The total amount of sewage received for treatment during the year was 2,130,502,000 gallons, which is equal to an average daily flow of 5,836,940 gallons."

PUBLIC CLEANSING.

The Director of Public Cleansing (Mr. A. Millward) has kindly supplied the following particulars:—

There are no ashpits in the Borough. All the house refuse from the 39,659 ash cans is collected by motor vehicles. 54% is dealt with by tipping under the controlled system, and the remainder by separation and incineration at the Refuse Disposal Works.

There is only one Refuse Disposal Works, and this is situated at Rhodes Bank. The Cleansing and Transport Committee intend to proceed with the erection of a new Refuse Disposal Works on the Glodwick Road Site, and this will replace the existing works at Rhodes Bank.

It may be of interest to note that from the 1st October, 1939, to the 31st December, 1947, the quantity of material salvaged was 20,965 tons and the amount realised £76,163, this includes:—

5,848 tons of paper which realised	...	...	...	£33,340
4,642 tons of raw kitchen waste which realised	...	...	...	£ 9,529
4,393 tons of concentrated waste which realised	...	...	...	£19,892
4,252 tons of baled scrap waste which realised	...	...	...	£ 7,312
759 tons of bottles and jars which realised	...	...	...	£ 2,369
1,071 tons of sundry material which realised	...	...	...	£ 3,721

The conversion of the sanitary pail closets to the fresh water system goes on very slowly. The Surveyor's Department are finding many engineering difficulties in the way of rapid conversion.

There are 163 miles of streets in the Borough cleansed as follows:—

Daily	...	...	...	...	6 miles
Three times weekly	...	...	...	...	9 miles
Twice weekly	...	...	...	...	7½ miles
Once weekly	...	...	...	...	102½ miles
Less than once weekly	...	...	...	...	38 miles
Square yards of streets cleansed (exclusive of footpaths)	...	...	...	...	1,839,200

Gulley cleansing.

Number of gullies cleansed	...	...	...	...	18,782
Number of cleansings during the year	...	...	...	...	49,616

The following figures indicate the amount of work done during the year:—

House and Trade Refuse Collection.

Number of Ashbins emptied	...	...	...	...	2,054,721
" Sanitary Pails emptied	...	...	...	...	46,809
" Collections of Garbage	...	...	...	...	17,637
" Loads of Excreta collected	...	...	...	...	561
" " Garbage Collected	...	...	...	...	624
" Tons of Ashes taken to Refuse Disposal Works	...	...	...	...	14,138
" " " " Corporation Tips	...	...	...	...	14,611
" " Clinker removed from Refuse Disposal Works	...	...	...	...	6,374
" " Baled tins sold	...	...	...	...	576
" " Mortar sold	...	...	...	...	459

Waste Water Closets and Latrines.

Blockages cleared (W.W.C.'s)	...	...	...	...	6,160
Blockages cleared (Latrines)	...	...	...	...	1
Drains cleared	...	...	...	...	134
Drains found blocked, requiring excavating	...	...	...	...	544
Tippers found not working and re-adjusted	...	...	...	...	11
Tippers, fittings, etc., found broken	...	...	...	...	1,367
New Tippers, fittings, etc., fixed	...	...	...	...	1,294
Visits paid flushing latrines	...	...	...	...	7,837

Closet Accommodation.

The total number and type of closets in the borough at the end of 1947 are shown below:—

Fresh Water Closets	...	...	...	...	15,938
Waste Water Closets	...	...	...	...	24,139
Latrines	...	...	...	...	2,287
Pail Closets	...	...	...	...	884

GENERAL SANITARY INSPECTION.

To the Medical Officer of Health.

Sir,

I have pleasure in submitting my report for the year 1947. During the year Mr. F. Bailey, Mr. H. Corscadden, and Mr. W. Urmson were appointed Assistant Sanitary Inspectors, and Mr. D. W. Saunders resigned to take up a similar appointment elsewhere.

During the year 10 student sanitary inspectors attended the Department for practical training under the whole time course for ex-service-men organised by the Ministries of Health, Education, and Labour. The Council also agreed to the engagement of 2 pupil sanitary inspectors in the Department to enable them to qualify for the sanitary inspectors' examination.

In March, the Ministry of Health gave approval under the provisions of Section 66 of the Food and Drugs Act, 1938, to the appointment of Mr. T. W. Lovett as Deputy Public Analyst.

Sanitary Defects.

Drainage.....	Cleansed ...	...	...	...	271
	Repaired or altered	...	...	...	215
	Reconstructed	...	...	...	23
	Provided	...	...	...	—
Public Sewers.....	Cleansed ...	...	...	...	—
	Repaired or altered	...	...	...	9
	Reconstructed	...	...	...	—
Eaves Gutters repaired or renewed, cleansed	...	...	...	...	218
Rain Water Pipes repaired or renewed	...	...	...	...	118
	Disconnected	...	...	...	29
Sinks renewed or provided	...	...	...	...	39
Sink Waste Pipes repaired or renewed	...	...	...	...	55
Water Closets.....	Provided ...	...	...	...	17
	Repaired	...	...	...	100
	Cleansed	...	...	...	18
Waste Water Closets	Repaired	...	...	...	167
	Cleansed	...	...	...	44
Closets converted to Water Closets (or abolished)—					
	Latrine	...	...	...	8
	Pails	...	...	...	1
	Waste Water	...	...	...	17
Other Closets.....	Provided ...	...	...	...	—
	Repaired	...	...	...	15
	Cleansed	...	...	...	4
Soil Pipes repaired or renewed	...	...	...	...	8
Water supply provided or improved	...	...	...	...	40
Miscellaneous.					
Dustbins repaired or renewed	...	...	...	...	425
	Extra provided	...	...	...	31
Nuisances abated.....	Animals and Birds	...	...	...	—
	Accumulations	...	...	...	17
	Other Conditions	...	...	...	—
Information in Rent Books	...	...	...	...	—

Common Lodging Houses.

Five premises remained on the Register during the year with accommodation for 84 persons; of these four receive men only and one women only.

Offensive Trades.

Offensive trades carried on in the Borough, numbering 20 in all, are as follows:—

Tripe Boilers...	...	...	...	...	7
Marine Stores	...	...	...	...	8
Gut Scrapers	...	...	...	...	2
Hide and Skin Depôt	...	...	...	...	1
Chemical Works	...	...	...	...	2
					<hr/> 20 <hr/>

During the year 48 visits were paid to these premises. No notices were served in respect of defects.

Bakehouses.

During the year 2 new premises were registered; none were discontinued, leaving 283 on the register at the end of the year.

One basement bake house remains in use, the Council having granted a certificate permitting its use for a period of 5 years from 1st October, 1944.

Factories Act, 1937.

In accordance with Ministry of Health Circular 13/47 of March, 1947, form 572 of the Ministry of Labour and National Service, containing particulars to be furnished in respect to certain matters in Parts I and VIII of the Act, is submitted.

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises (1)	M/c line No. (2)	Number on Register (3)	Number of		
			Inspection (4)	Written notices (5)	Occupiers prosecuted (6)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	1	Mech. 520	136	25	
(ii) Factories not included in (i) to which Section 7 applies		N Mech. 132	21		
(a) Subject to the Local Authorities (Transfer of Enforcement) Order, 1938 ...	2				
(b) Others...	3				
(iii) Other Premises under the Act (excluding out-workers' premises) ...	4				
TOTAL ...		652	157	25	—

2.—Cases in which DEFECTS were found.

Particulars (1)	M/c line No. (2)	Number of cases in which defects were found				Number of cases in which prosecu- tions were instituted (7)
		Found (3)	Remedied (4)	Referred		
				To H.M. Inspector (5)	By H.M. Inspector (6)	
Want of cleanliness (S.1)	5				6	
Overcrowding (S.2)	6					
Unreasonable temperature (S.3) ...	7					
Inadequate ventilation (S.4) ...	8				4	
Ineffective drainage of floors (S.6)	9					
Sanitary Conveniences S.7)						
(a) insufficient... ..	10	4			9	
(b) Unsuitable or defective ...	11	3	1			
(c) Not separate for sexes ...	12				10	
Other offences (not including off- ences relating to Homework) ...	13	1	2		5	
TOTAL		8	3		34	

Outworkers. One list relating to one outworker was received during the year. The premises were found to be satisfactory.

Smoke Abatement. During the year 9 smoke observations of 30 minutes duration were taken. The extent of the emission of black smoke was as follows:—

No black smoke ...	7
Under 1 minute ...	1
1—2 minutes ...	—
2—3 minutes ...	1
3—4 minutes ...	—
Over 4 minutes ...	—

Rats and Mice Destruction Act, 1919.

During the year 330 complaints were received, in 198 of these cases it was found that the rat infestation was due to defective drainage.

RAT SURVEY.

(1) Circular N.S.12—Private Dwellings Special Scheme.

The survey commenced in 1946 continued, and an extension of time to the 31st December, 1947, to complete the work was granted by the Ministry of Food. The survey was completed by the end of the year and the following are details of the position as at 31st December, 1947.

Private Dwellings.

Houses Visited	...	...	...	...	35,095
Reported infested by rats	...	...	...	...	1,026
Infestation not confirmed—no action	...	...	...	...	595
Infestation confirmed—referred to	...	...	...	...
Inspectors	...	...	...	...	431

All houses reported to be infested have been revisited.

Notices complied	...	...	...	...	358
Notices outstanding	...	...	...	...	62
Receiving attention	...	...	...	...	11

Business Premises.

Premises Visited	...	...	...	...	3,366
Reported infested by rats	...	...	...	...	168
Infestation not confirmed—no action	...	...	...	...	112
Infestation confirmed—referred to	...	...	...	...
Inspectors	...	...	...	...	56

All premises reported to be infested have been re-visited.

Notices complied	...	...	...	...	44
Notices outstanding	...	...	...	...	5
Receiving attention	...	...	...	...	7

(2) Circular N.S.11—Sewer Maintenance Treatments.

The second sewer maintenance treatment for the financial year 1946/47 and the first sewer maintenance treatment for 1947/48 were carried out during the year when the following results were obtained:—

	1946/1947.	1947/1948.
Number of manholes baited	1,974	1,963
Number of manholes showing pre-bait take	1,663	1,625
Number of manholes showing complete pre-bait take	877	1,289
Total number of deaths	17,067	14,900
Average intensity of infestation	66.0%	41.4%
Average extent of infestation	52.7%	79.45%

Baiting was carried out on two consecutive days and on the third day a poisoned bait was put down. The bait base was sausage rusk and the poison zinc phosphide and arsenic.

Rodent Control.

During the year the Workable Area Committee and the Regional Rodent Consultative Committee held meetings regularly. The Workable Area Committee consists of a Technical Officer and a representative from each authority in the area and the Regional Rodent Consultative Committee consists of a Chairman and a Technical Officer from each of the Workable Area Committees in the region. These meetings have proved mutually advantageous to the local authorities concerned and to the Ministry of Agriculture and Fisheries in promoting effective collaboration in rodent control.

HOUSING.

Pre-War Slum Clearance. At the end of the year 3 families affected by pre-war slum clearance schemes, were still awaiting re-housing.

The demolition of properties affected by outstanding clearance orders was continued and 5 houses in clearance areas were demolished by such action.

Other Demolitions. Information was received with regard to the demolition of 30 houses by voluntary action.

Individual Unfit Houses. It was found necessary to make Demolition Orders in respect of 48 houses involving the displacement of 46 families (109 persons). At the end of the year 24 families (69 persons) had moved into Corporation houses, and 2 families (7 persons) had found their own accommodation.

The following is a summary of the individual unfit houses dealt with during the years 1943 to 1947:—

Year	Houses Represented	No. of Families	No. of Persons	Houses Vacated	Position as at 31st December, 1947				
					Persons Rehoused		Total No. of persons awaiting Rehousing at Dec. 31st.	Houses Demolished	Total No. of Houses awaiting Demolition
					By Corporation	By Own Arrangements			
1943	12	9	44	12	44	...	...	12	...
1944	11	8	37	11	28	9	...	11	...
1945	20	15	50	20	46	4	...	20	...
1946	37	47	128	31	72	11	45	18	19
1947	48	46	109	13	34	...	75	...	48

Overcrowding. During the year 64 new cases of overcrowding were discovered. In 19 of these it was found to be deliberate overcrowding but in view of the serious housing shortage no legal action was taken. It is apparent that persons deliberately overcrowd premises to attempt to gain priority for re-housing, by the award of additional points, and the Housing Committee refused to give additional points to such cases, but in 4 of these cases letters of warning were issued.

Eradication of Bed Bugs. The following figures show the number of houses inspected and the number disinfested:—

	Corporation.	Others.
Houses inspected ...	148	325
Found infested during year	5	80
Disinfested by H.C.N. ...	4	—
Disinfested by spraying with liquid insecticide ...	4	63

During the year the furniture of 84 families was disinfested prior to removal to Corporation houses.

DISINFECTION.

The arrangements for disinfection continued as in previous years. During the year 59,787 articles were disinfected and 2,519 destroyed. The total number of houses disinfected was 1,087 and 5,509 rooms.

SHOPS ACT, 1934—Section 10(6).

One certificate of exemption was issued during the year.

RENT AND MORTGAGE INTEREST RESTRICTIONS (AMENDMENT) ACT, 1933.

During the year four applications for certificates as to state of repair were received. Two certificates were granted and two applications were withdrawn.

SWIMMING BATHS AND POOLS.

The General Superintendent of Baths, Mr. J. M. Buckley, has kindly supplied the following particulars:—

"There are seven swimming bath establishments, comprising a total of nine swimming pools. None of the bath establishments are modern, all of them being built between the years 1854 and 1905.

Six of the establishments have modern filtration plants installed and the remaining one will be completed within the next few weeks.

All establishments are fitted with Chlorinating plants and briefly the method taken to ensure satisfactory condition of the water is, continuous filtration and application of Chlorine Gas through the Filtrate to ensure a residue of .2 to 15 parts per million and the pH maintained between 7.0 and 7.6. All tests are taken by means of a Lovibond Comparator.

The technique of Break Point Chlorination is now being tested at the Central Baths, this involves the application of Chlorine through the Filtrate in large quantities and reaching a Chlorine residue of 1.75 to 2 parts per million, the pH value of 7.6. The advantages gained by this method are:—

1. Sterilization is very rapid.
2. Oxidisation of any impurities takes place and the colour and appearance of the swimming bath water is distinctly improved.

By using this method it has been found that free residual Chlorine is without offence to bathers, to their senses of taste and smell and also irritation to the eyes.

I wish to point out, however, that this technique, insofar as the Central baths is concerned, is still in a very experimental stage and in conjunction with the Chief Sanitary Inspector and the Borough Analyst, laboratory tests, chemical and bacteriological, are to be carried out."

INSPECTION AND SUPERVISION OF FOODS.

MILK SUPPLY.

Milk Samples. During the year 215 samples of milk were reported upon for the presence of Tubercle Bacilli. Of these, 106 were from farms within the Borough, three (2.83%) of which contained Tubercle Bacilli. The remaining 109 were from milk produced outside the Borough of these eight (7.34%) contained Tubercle Bacilli.

There were seven animals slaughtered under the Tuberculosis Order, 1938, following investigation in respect of the above positive samples.

There were 5 samples of raw milk examined, 3 for Bacterial Count and B. Coli, which were satisfactory, and 2 Methylene Blue and B. Coli which were unsatisfactory. Of 17 samples of sterilized milk examined for Methylene Blue and Phosphatase, 1 was unsatisfactory.

Milk Purveyors. The following figures have been compiled from the register:—

Milk Shops on Register, January 1st, 1947 ...	509
Discontinued during the year	—
Registered during the year	—
Milk Shops on Register at December 31st, 1947	509

At the end of the year there were 25 Oldham farmers on the Register, and 93 farmers and dairymen residing outside the borough.

Dairies and Cowsheds. There were 25 farms in the borough, comprising 61 cowsheds, housing approximately 466 cows.

Milk (Special Designations) Regulations, 1936-1946. The following licences were issued:—

- 1 Supplementary licence to sell milk as "Tuberculin Tested."
- 4 Licences to produce and sell milk as "Accredited."
- 4 Supplementary licences to sell milk as "Accredited."
- 11 Supplementary licences to sell milk as "Pasteurised."
- 1 Licence in respect of Pasteurising Establishments.

During the year, 161 samples of designated milk were submitted for examination—128 Pasteurised for Methylene Blue and Phosphatase Tests; 18 Accredited for Methylene Blue and B. Coli Tests; and 15 Tuberculin Tested for Methylene Blue and B. Coli Tests. Of these 16 Pasteurised, 5 Accredited, and 5 Tuberculin Tested, failed to conform to the standard of Milk (Special Designations) Regulations, 1936—1946.

MEAT INSPECTION.

One slaughterhouse remained in use during the year.

Number of animals killed and inspected during the year, together with the amount of meat condemned:—

	Beasts & Cows		Sheep	Pigs	Calves	Total
No. killed.	3,731.	2,755	17,839	15 M. of F. 47 Cottages	3,300	27,687
Weight.	4,267,995 lbs.		831,662 lbs.	3,070 lbs.	174,014 lbs.	5,276,741 lbs.
Weight condemned.	44,291 lbs.		3,561 lbs.	702 lbs.	826 lbs.	149,350 lbs.
Percentage condemned.	3.380%		0.428%	22.866%	0.471%	2.830%

Carcases Inspected and Condemned.

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)...	3731	2755	3300	17839	62
Number inspected	3731	2755	3300	17839	62
ALL DISEASES EXCEPT TUBERCULOSIS:					
Whole Carcases con- demned	6	26	14	33	3
Carcases of which some part or organ was con- demned	1004	1243	4	994	1
Percentage of the number inspected affected with disease other than Tuberculosis	27.177	46.061	0.545	5.757	6.451
TUBERCULOSIS ONLY:					
Whole Carcases con- demned	12	67	7	—	—
Carcases of which some part or organ was con- demned	484	1164	1	—	1
Percentage of the number inspected affected with Tuberculosis	13.294	44.682	0.242	—	1.612

Congenital tuberculosis was found in 5 calves and reports were forwarded to the appropriate Divisional Inspectors of the Ministry of Agriculture and Fisheries, 3 dams of the calves found to be tubercular were slaughtered.

In one case the dam was slaughtered prior to the report being made.

The following figures show the percentage of cows affected with Tuberculosis for the years 1943—1947.

				Cow Carcases Examined	Percentage affected with Tuberculosis	
1943	...	...	...	1410	...	60.14
1944	...	...	...	1994	...	50.55
1945	...	...	...	2568	...	44.47
1946	...	...	...	3345	...	47.11
1947	...	...	...	2755	...	44.68

The total weight of meat and offal destroyed was—for tuberculosis, 88,466 lbs; for diseases other than tuberculosis, 60,884 lbs.

Summary of Diseased and Unsound Food destroyed during 1947.

Cattle	(111 whole carcasses)	...	...	56,915 lbs.
Sheep	(33 „ „ )	...	...	1,504 lbs.
Pigs	(3 „ „ )	...	...	619 lbs.
Calves	(21 „ „ )	...	...	818 lbs.

Parts of Carcases and Offal:

(4,896 Cattle, Sheep, Pigs and Calves)				89,494 lbs.
Vegetables	...	...	...	12,023 lbs.
Preserved Food	...	...	...	10,307 lbs.
Biscuits, Semolina and Flour	...	...	...	3,220 lbs.
Frozen Beef	...	...	...	2,057 lbs.
Cooking Fat and Oil	...	...	...	1,680 lbs.
Tripe	...	...	...	1,027 lbs.
Fish	...	...	...	759 lbs.
Egg Yolk	...	...	...	288 lbs.
Bacon and Ham	...	...	...	279 lbs.
Butter and Cheese	...	...	...	113 lbs.
Soyaggetti	...	...	...	112 lbs.
Liquorice Root	...	...	...	54 lbs.
Fruit	...	...	...	16 lbs.
Oats	...	...	...	6 lbs.
Tea	...	...	...	5 lbs.

Total ... 181,296 lbs.

Slaughter of Animals Act, 1933. The Department granted 5 renewal licences during the year.

Horseflesh. Two shops remain open in the borough for the sale of horseflesh. Arrangements for slaughtering and inspection continued as in the previous year.

FOOD AND DRUGS ACT, 1938.

Mr. S. Ernest Melling, F.I.C., Borough Analyst, has kindly furnished the following report which summarises the work undertaken during the year:—

"I have the honour to report that during the year ended 31st December, 1947, a grand total of 405 samples of food and drugs (including soft drinks) were submitted for analysis, compared with 243 in 1946. Of these 373 were formal samples and 68 informal.

With an estimated population of approximately 118,000, there were thus 3.4 samples per 1,000 which is fully in accord with the requirements of the Ministry of Health.

Included in the total of 31 (equivalent to 7.6% of all samples submitted), were 25 milks, five soft drinks and one whisky, which will be referred to later. The foregoing percentage rate of "adulteration" appears to be about 2½% more than the mean calculated figure (5.3%) over the country during the ten pre-war years (1929/38) but, is shown in a better light, contrasted with some of the latest individual records available, *i.e.* for 1946. As regards milk, which represents the main bulk of articles analysed throughout the country, the Oldham record of the sophisticated, as distinct from abnormal, though legally, genuine samples, need not fear comparison with that of the country as a whole and indeed, is superior to some of the cities and large industrial areas.

It would be appropriate at this point, to indicate how the duties of the Public Analyst have been seriously increased since 1939. In addition to the 1938 Act and several Public Health Regulations (*e.g.* Preservatives etc. in Food, 1925-1940, Condensed Milk, 1923-1943 etc.) implementation of the Pharmacy and Medicines Act, 1941 (Sec. 11) involves the disclosure of the composition of medicines as declared on the label and, the determination of each of the active constituents thereof. Moreover, from 1941 to date, numerous Ministry of Food regulations have come into force, of which the Defence (Sale of Food) Regulations, 1943, is of prime importance in protecting the purchaser against erroneous claims. These govern the composition of a formidable range of foodstuffs (meat products, flour confectionery, preserves, self-raising flour, condiments etc.) whilst the Labelling of Food Order (1944 *et. seq.*) requires equally close attention. On the other hand, the Soft Drinks Order has recently ceased to operate and this industry is now free to resume normal manufacture.

Systematic inspection throughout the year, inclusive of the above-mentioned adulterated and/or non standard samples, was reasonably comprehensive and without going into detail, the general description and number of samples analysed were as follows:—

Milk 325 (25 reported against); Groceries (including edible fats) 25; Household Medicaments and Remedies 10; B.P. preparations (ointments and powders) 9; Rum 7; Soft Drinks and Cordials 6 (5 contravened the Soft Drinks Order); Whisky 5 (1 adulterated with excess water) and 18 miscellaneous (unclassified) articles.

Many foodstuffs in the foregoing list were of the pre-packed variety and it rarely happens that these are found to be other than satisfactory. The reason is, of course, that in modern food manufacture, great care

is exercised to ensure wholesomeness and purity and the required composition of the commodity, mainly by internal analytical control of ingredients and proportion, or by reference to the Technical Department of the Association or Federation to which the firm is a member or subscriber.

The proportion which milk bears to the total number of samples submitted (80%) is in keeping with the clamant need to maintain its nutritional value at the highest level and for the nourishment and well-being of the young, never more so than at the present time! In Oldham, the rate of adulteration and/or samples *naturally* deficient in either fat or non-fatty solids was gratifyingly low and, further, the composition of the supply—as detailed in the certificate of analysis of every sample—compares most favourably with similar urban areas throughout the country. These facts are established upon quite a simple basis. The Sale of Milk Regulations, 1939 (made by the Ministry of Agriculture and Fisheries) require, inter-alia, that when a sample of milk contains (a) less than 3% of milk-fat or (b) less than 8.5% of milk solids other than milk-fat, it shall be presumed, for the purpose of the Food and Drugs Act, 1938, *until the contrary is proved*, that the milk is not genuine, by reason of (a) the abstraction therefrom of milk-fat or, the addition thereto of water or (b) the abstraction therefrom of milk solids other than milk-fat or, the addition thereto of water. It is not illegal however, to sell milk which is below either or both these standards, and this is fortunate for those producers whose herds are yielding milk more or less naturally deficient in one or other constituent. Milk falling within the latter category need not be considered here since it scarcely arises and, when all samples have been taken into account, one finds the following record:—

Milk Fat Percentage.

	Number	Percentage of Total
Below 3.0%	9	2.8
3.0% to 3.5%	123	37.8
3.5% to 3.75%	83	25.5
3.76% to 4.0%	53	16.3
4.01% to 4.5%	42	12.9
Over 4.5%	15	4.7
	325	100.0

* Including 2 "Appeal to cow" samples.

Non-Fatty Solids.

	Number	Percentage of Total
Below 8.5%	20	6.1
8.51% to 8.6%	51	15.7
8.61% to 8.7%	37	11.4
8.71% to 8.8%	46	14.2
8.81% to 8.9%	84	25.8
8.91% to 9.0%	49	15.1
Over 9.0%	38	11.7
	325	100.0

* Including 5 samples adulterated with extraneous water, and 15 samples naturally deficient in Non-fatty solids.

Average for the Year.

Milk-fat ... 3.7% Non-fatty solids ... 8.8%

It should be added here that in all cases where the addition of water is suspected, the vital Freezing Point (Hortvet) test—which is based on a physiological concept and not on a chemical analysis—is carried out and experience during the past twenty years or so has demonstrated its dual value in protecting the innocent vendor and, as proof of tampering. A satisfactory feature of the milk supply throughout, was the absence of preservative addition and artificial colouring agents and no microscopical evidence was afforded of particulate contamination in any of the samples.

The Soft Drinks Order of 1946 (S.R.O. 945) required, inter-alia, specified contents of citric acid, added sugar, etc., in the preparation of 'popular' beverages. Five samples failed to satisfy these regulations in that they showed, more or less, deficiency in citric acid and/or added sugar, viz, four cordials, (peppermint, orange, raspberry flavour and lime juice) and one lemon squash. As already mentioned, this Order has now ceased to function.

Twelve spirits (7 rums and 5 whiskies) were submitted at the year's end. The statutory requirement is a minimum 65% Proof Spirit content and in only one case (whisky) had dilution been carried beyond this limit, resulting in the presence of 7.65% of excess water. Whilst on this subject, it is not inappropriate to refer to a sample of whisky taken on December 23rd, 1946, and which was reported as adulterated with 9.28% of excess water. Legal proceedings against the Vendor were taken and, at the first hearing, the Defendant's Solicitor contended that his client had, unknowingly at the time, served the Inspector with brandy and consequently the certificate of analysis was invalid in that the spirit was referred to as whisky. At the request of the Defence, I was called and cross-examined, essentially if not solely, to confirm the statement *made of the title of the article*, viz. whisky, which was mentioned at least three times in the certificate. Technical questions regarding the absence or presence of excess water—the real purpose of analysis—were not put, nor was one given the opportunity of informing the justices that, irrespective of the volume available ($\frac{3}{4}$ fluid oz.) it is not competent, on analytical grounds, for any Public Analyst to swear that a certain sample of potable spirits is either brandy or whisky! The third portion of the sample was referred by the Justices to the Government Laboratory to decide the issue and eventually the Chief Government Chemist expressed an opinion—based upon organoleptic indications, coupled with certain conventional analytical determinations which neither proved nor disproved the allegation of the Defendants,—to the effect that (1) the sample had the character of brandy and (2) in strength was 42.8 degrees under proof, which is 7.8 degrees below the legal limit for brandy. The summons was, therefore, dismissed, despite that a potable spirit had been diluted beyond the legal limit, but now the certificate of a whisky or brandy is worded in such manner as to provide against any legal flaw of the foregoing type.

Finally as regards the various foods, condiments, galenicals and so forth, analysis showed them to conform with Ministry of Food Orders, Public Health requirements and to be of sound commercial quality."

Ice Cream (Heat Treatment etc.) Regulations, 1947.

These regulations came into operation on the 1st May, 1947. They will strengthen the powers of local authorities and assist in securing a much higher standard of premises and equipment. All the ice cream premises in the borough have been visited and arrangements for the modernisation of buildings and plants are progressing. These should be completed early next year.

Results of Action taken with regard to Samples Not Genuine.

Sample No.	Article	Result of Analysis	Action Taken
<u>Formal.</u>			
10	Milk	1.8% Deficiency in Non-fatty solids.	No action. Natural deficiency proved by Hortvet Test.
18	Milk	16.1% added water	Fined £3, £4. 4. 0.
19	Milk	1.7% deficiency in non-fatty solids.	Analyst's fee
27	Milk	Sample * of Cream —not milk	No action. Natural deficiency proved by Hortvet Test.
50	Milk	42% fat deficiency	Sample taken in course of delivery in connection with Sample No. 18 and purchased as milk.
58	Milk	9% fat deficiency	No proceedings taken (see result of sample No. 18).
63	Milk	12.4% added water, and further fat deficiency of 23.1%.	No proceedings—delivery of samples irregular.
64	Milk	1.7% deficiency in non-fatty solids.	No proceedings—defective date on Analyst's certificate
65	Milk	12.1% added water	No proceedings—error in course of delivery samples
66	Milk	1.8% added water	
75	Milk	0.47% deficiency in non-fatty solids.	
76	Milk	0.35% deficiency in non-fatty solids.	
77	Milk	2.1% deficiency in non-fatty solids.	
78	Milk	2.0% deficiency in non-fatty solids.	

Sample No.	Article	Result of Analysis	Action Taken
Formal			
79	Milk	1.76% deficiency in non-fatty solids.	No proceedings—error in course of delivery samples.
80	Milk	2.1% deficiency in non-fatty solids.	
81	Milk	0.23% deficiency in non-fatty solids.	
83	Milk	0.23% deficiency in non-fatty solids.	
84	Milk	1.17% deficiency in non-fatty solids.	
85	Milk	2.1% deficiency in non-fatty solids.	
87	Milk	1.29% deficiency in non-fatty solids.	
92	Milk	5.6% fat deficiency	Fined £5, £4. 0. 0. Analyst's fee. £4. 4. 0. Advocates fee. 5/- witness fee.
210	Milk	22.3% added water	
213	Milk	17% fat deficiency	
214	Milk	26.6% fat deficiency	
331	Whisky	7.65% added water	Fined £5, £1. 1. 0d. Analyst's fee, £2. 2. 0. Advocates fee.
Informal			
A.25	Peppermint Cordial	Slightly deficient in added sugar	No action—Diluted for trade use.
A.21	Lemon Squash	27.7% deficient in Citric acid, and 13.3% in added sugar	Referred to Ministry of Food.
A.48	Orange Cordial	30% deficient in sugar	No action—Diluted for trade use.
A.49	Raspberry Flavour Cordial	Deficient in sugar and free acid to 31% and 25% respectively	No action—Diluted for trade use.
A.50	Lime Juice Cordial	Deficient in sugar and free acid to 58% and 30% respectively	No action—Diluted for trade use.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The following Table shows the Attack Rate and Death Rate.

Disease	Attack Rate per 1,000 of the Population		Death Rate per 1,000 of the Population		Death Rate per 1,000 Cases
	England & Wales	Oldham	England & Wales	Oldham	
Small Pox ...	0.00	0.00	0.00	0.00	0.00
Diphtheria...	0.13	0.48	0.01	0.02	53.57
Erysipelas ...	0.19	0.09	0.00	0.00	0.00
Scarlet Fever ...	1.37	0.80	0.00	0.00	0.00
Enteric Fever ...	0.02	0.00	0.00	0.00	0.00
Puerperal Pyrexia ...	7.16*	0.38*	—	—	—
Acute Primary Pneumonia...	0.79	0.45	—	0.12	264.15
Measles ...	9.41	7.24	0.01	0.02	3.51
Whooping Cough ...	2.22	1.23	0.02	0.008	6.90
Influenza ...	—	—	0.09	—	—

*Rates per 1,000 total births (i.e., live and still).

DIPHTHERIA.

During the year there were 56 cases notified as compared with 51 in 1946. There were 3 deaths registered from this disease compared with 3 in the previous year. Only 1 of these deaths is regarded as a typical case of diphtheria—a boy aged 10 years who was admitted to hospital with faucial diphtheria and died 5 days after admission. In the other 2 cases—a child aged 2 years and a child aged 1 month, the diagnosis was on bacteriological grounds and neither case was removed to hospital. The child of 2 years was under treatment for pneumonia; a throat swab was sent for examination and reported K.L.B. positive. The child died and death was certified by the practitioner as due to

1 (a) Acute broncho pneumonia.

(b) Diphtheria.

The child aged 1 month was found dead in bed by the mother. This child had received no medical treatment nor had it previously been seen by a doctor. A swab taken after death on smear showed numerous organisms, morphologically identical with Klebs-Löffler bacillus but was negative on culture. The post-mortem findings showed a marked toxic myocarditis accompanied by a toxic liver. The cause of death was given as diphtheria.

Of the 56 cases notified 8 were pre-school children, 39 were in attendance at school and 9 over school age. These cases were classified clinically as follows:—

Faucial Diphtheria	Extremely severe	...	1
	Severe	... ..	11
	Moderate	... ..	25
	Mild	... ..	14
	Late Cases	... ..	3
Nasal Diphtheria	...	...	2

Of the total cases 18 had been immunised. Of the 3 children who died none had been immunised.

Of the 39 cases occurring in school children, 19 were distributed among 15 schools. The remaining 20 were confined to Beever County Primary and Parish Church Voluntary Schools. These schools were associated with an outbreak towards the end of the year involving 16 cases. In both these schools the percentage of children immunised was well below safety level.

Supply of Diphtheria Antitoxin: This is supplied free to General Practitioners and can be obtained at the Public Health Office during the day or at the Central Police Station at other times.

Diphtheria Immunisation: The following figures indicate the number of children immunised during the year, and the percentage of immunised children in the Borough at the end of the year.

	Age 0-4 (inclusive)	Age 5-14 (inclusive)
Number of children completing the full course of immunisation	1,145	176
Total immunised at 31st December	5,721	13,295
Percentages of immunised children at 31st December	59.90%	92%

SCARLET FEVER.

The number of cases notified was 94, compared with 131 in 1946. Of these, 65 were removed to hospital. No deaths were recorded from this disease.

ERYSIPELAS.

There were 11 cases notified compared with 28 in 1946. Of these 1 was removed to hospital. No deaths occurred from this disease. Of the 11 cases notified, 9 occurred in persons 45 years of age and over.

ENTERIC FEVER.

No cases of typhoid or para-typhoid fever were notified during the year.

CEREBRO-SPINAL FEVER.

During the year 5 notifications were received, and 2 deaths were registered as due to this disease.

ACUTE POLIOMYELITIS AND POLIO-ENCEPHALITIS.

During the summer months Poliomyelitis was prevalent throughout the country. Prior to the 5th July notifications of this disease showed mainly single cases, but later reports of multiple cases were noted in several districts. On the 18th July the Ministry of Health issued a Memorandum and expressed the opinion that an unprecedented prevalence could be expected.

During the months of July, August and September, 14 cases, including one case of Polio-Encephalitis, were confirmed and of these, 6 were school children. The first case was brought to the notice of the department on the 30th July and the second case on the 31st July. Indirect contact was established between these cases when it was discovered that the sister of Case 1 (D.E.) was in attendance at the same school (Oldham High School East) as Case 2 (W.R.). The school had closed two days previously but the names and addresses of all children in the class attended by Case 2 were obtained and home visits made in each case. No information was forthcoming regarding any missed cases and no further cases were reported among children attending this school. The third case was admitted to hospital on the 5th August and seven further cases occurred during this month and four in September.

There was one death, Case 11 (A.H.) a male aged 18 years who was admitted to hospital on the 1st September with partial paralysis of the left arm and left leg. The day after admission respiratory paralysis commenced and he was placed in the respirator but his condition deteriorated and he died on the 3rd September from acute polio-encephalitis. This patient was employed as a labourer on a farm in the Saddleworth district and it is interesting to record that on 31st August a boy aged 3 years, who was closely associated with case 11, and accompanied him on the milk delivery round was admitted to hospital from this farm. In view of the possible spread of infection by milk, arrangements were made with the farmer concerned for immediate pasteurisation before distribution, of all the milk produced on his farm. This co-operation was freely given and continued until 20th September.

Facilities for the treatment were provided at Westhulme Hospital and respirators were kept in readiness for the treatment of respiratory paralysis. The services of Miss Schofield the Superintendent Physiotherapist were made available and Dr. R. M. Maher the Consultant Physician and Miss E. L. Willis the Orthopaedic Surgeon, visited the hospital regularly to supervise the treatment.

It was considered advisable to close the swimming baths for the swimming classes organised by the Education Committee and this was effected from 4th August to 17th September inclusive. By arrangement with the Oldham Cinema Managers Association, cinema clubs for children held on Saturday mornings were closed from 9th August to 20th September inclusive. There was no closure of schools or classes and when the schools re-opened on 17th September after the summer holidays full school activities were resumed.

The closest co-operation existed with the local general practitioners who were all circulated after the occurrence of the first cases and advised that cases of poliomyelitis were likely to occur and that facilities were available for a medical officer of the Department to see any suspected case in consultation.

Early in September, the Ministry of Health's Film "The Early Diagnosis of Acute Anterior Poliomyelitis" was shown at the Oldham Royal Infirmary and at Boundary Park General Hospital. Prior to the showing of the film details of the outbreak locally were given by the medical staff of the Department. The film was much appreciated and there was full attendance of medical and nursing personnel.

Since 1940, only two cases of poliomyelitis have been notified, one in 1942, and one in 1946, but six cases occurred in 1940, five in the months of July, August and September. Of these, five were under five years of age and the other in the age group 5-16. These were anxious days but I am sure that had we had the knowledge and the press publicity that occurred during the present outbreak, our notifications would have been doubled.

The following figures relate to the visits made by the staff during the period under review.

Medical Staff:—

At the request of general practitioners ...	29
Other visits	70
Health Visitors	51

The following details relate to the fourteen cases which were confirmed:—

Case 1. (D.E.) a girl aged 11 years, admitted to hospital 30/7/47 with wasting and weakness of the right leg and right foot drop. Her condition improved with physiotherapy and she was discharged 10/10/47 for observation at the Orthopaedic Clinic.

Case 2 (W.R.) a girl aged 13 years, admitted to hospital 31/7/47 with complete paralysis of the left arm and partial paralysis of the right arm. Respiratory paralysis developed within 24 hours and she was placed in the respirator where she remained until 6/9/47. Some slight movement of the right arm returned but the patient still had complete paralysis on transfer to the E.M.S. Hospital, Southport, on 8/10/47.

Case 3 (B.A.) a boy aged 4 years, admitted to hospital 7/8/47 with weakness of right leg. He was discharged on 12/11/47 with a right foot drop and wasting of the right leg muscles for observation at the Orthopaedic Clinic.

Case 4 (S.S.) a baby girl aged 10 months, admitted to hospital 12/8/47 with paralysis of the right deltoid. No improvement occurred with physiotherapy and splinting and there was no movement of the right deltoid on discharge to the Orthopaedic Clinic on 17/10/47.

Case 5 (R.A.) a boy aged 9 years, admitted to hospital 13/8/47 with a history suggestive of prodromal symptoms. No paralysis developed but as he was a house contact of a definite case admitted 7 days previously, a diagnosis of Poliomyelitis (Abortive) was made. The patient was discharged 6/9/47.

Case 6 (P.M.) a girl aged 10 years, admitted to hospital 14/8/47 with neck rigidity and backache. Wasting and loss of power of the lumbar muscles of the left side developed but improved under treatment. She was discharged 27/9/47 for observation at the Orthopaedic Clinic.

Case 7 (R.W.) an apprentice joiner aged 15 years, admitted to hospital 18/8/47 with weakness of both legs. His condition improved with physiotherapy and on discharge to the Orthopaedic Clinic on 17/10/47, the gait was fairly good, but some wasting of the left leg remained.

Case 8 (S.B.) a married woman aged 26 years, admitted to hospital on 23/8/47 with paralysis of left leg. Paralysis developed in the right leg on the following day and there was some slight respiratory paralysis which cleared. She was transferred on 8/10/47 to the E.M.S. Hospital, Southport, with almost complete paralysis of both legs.

Case 9 (J.R.) a boy aged 10 years, admitted to hospital 25/8/47 with stiffness of the neck and headache. Palatal paralysis developed on 26/8/47 but recovery was complete when the patient was discharged on 10/10/47.

Case 10 (W.M.) a bus conductor aged 26 years, admitted to hospital 28/8/47 with weakness of both legs. The weakness disappeared and on discharge to the Orthopaedic Clinic on 26/9/47 no abnormality could be found.

Case 11 (A.H.) a male aged 18 years, admitted to hospital 1/9/47 with partial paralysis of left arm and left leg. Respiratory paralysis developed the following day and he was placed in the respirator. His condition deteriorated and he died 4/9/47. This was a case of Acute Polio-Encephalitis.

Case 12 (R.N.) a baby boy aged 10 months, admitted to hospital 3/9/47 with cerebral irritation and spasms of both legs. Weakness of the left leg developed after admission. On discharge 14/11/47 to the Orthopaedic Clinic no apparent weakness of limbs and condition appeared normal.

Case No. 13 (B.M.) a boy aged 8 years, admitted to hospital 16/9/47 with wasting and weakness of left leg. The condition improved with physiotherapy but there was still some wasting but no weakness when he was discharged on 17/10/47 for observation at the Orthopaedic Clinic.

Case 14 (B.L.) a boy aged 18 months, admitted to hospital 29/9/47 with neck rigidity and spasm of both legs. Subsequent right foot drop and wasting of the calf muscles developed and he was discharged 13/12/47 to the Orthopaedic Clinic.

All these patients were kept under review and the following details were available 12 months after discharge from hospital.

Case 1 (D.E.) There is still some slight wasting of the right quadriceps and gastrocnemius muscles, but the power of the leg is almost normal; gait is normal and the leg only turns when running uphill. Little or no disability remains although there is some weakness if the exercise is severe.

Case 2 (W.R.) This patient was transferred from the E.M.S. Hospital to the Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry. Her condition is extremely poor with complete paralysis of the left arm and almost complete paralysis of the right arm but there is some active movement in the fingers and wrist. The back and abdominal muscles are weak but she can walk if assisted to her feet. The condition since discharge from hospital has only slightly improved.

Case 3 (B.A.) The right leg is now normal in tone and power. Movements are full and there appears to be no disability.

Case 4 (S.S.) There is now little or no disability and movements and power of the right arm appear normal.

Case 5 (R.A.) General physical condition is excellent. No abnormal signs found on examination.

Case 6 (P.M.) This patient is still attending the Orthopaedic Clinic. There is now considerable deformity of the back with a marked scoliosis causing the head to be placed towards the right and the left shoulder to droop. There has been a general deterioration of the condition with little or no response to treatment.

Case 7 (R.W.) There is some slight wasting of the muscles of the right leg with a limp on walking. He has been working since December 1947, and does not feel any disability exists.

Case 8 (S.B.) Some months after admission to the Emergency Hospital at Southport this patient was transferred to a hospital in the South of England. On transfer her condition showed little or no improvement.

Case 9 (J.R.) General condition satisfactory. No abnormal signs found on examination.

Case 10 (W.M.) Both limbs are still weak and tire easily on exertion. He was formerly a bus conductor but has not returned to this occupation and is now working in the office.

Case 12 (R.N.) Generalised weakness and loss of power of all muscles. Child can stand with aid, but still unable to walk. Progress has been extremely slow.

Case 13 (B.M.) There is no loss of power or tone in the right leg; gait is normal and there is no apparent disability.

Case 14 (B.L.) He can now walk with the aid of a walking caliper although there is considerable wasting of right leg and foot with loss of power and tone.

Cases also occurred in the adjacent County Districts—Chadderton 1, Failsworth 1, Royton 2, Saddleworth 3. These were admitted to Westhulme Hospital for diagnosis and treatment. No cases were reported from Crompton, Lees or Limehurst districts. The following are brief details of the confirmed cases:—

Chadderton.

Case 1—a boy of 8 years, admitted to hospital on 1/9/47 with weakness of the upper thigh muscles of both limbs. On discharge on 10/10/47 he was walking well. He was seen subsequently and the last report states "he appears to have made a complete recovery."

Failsworth.

Case 1—a boy of 7 years, admitted to hospital on 29/9/47 with marked rigidity of the neck. He was discharged on 31/10/47 fully recovered.

Royton.

Case 1—a boy of 2 years, admitted to hospital 8/9/47 with mild febrile symptoms and later developed definite facial paralysis. He was discharged on 17/10/47 fully recovered.

Case 2—a girl of 2 years, admitted to hospital 15/9/47 later developed facial paralysis which completely cleared prior to discharge on 17/10/47.

Saddleworth.

Case 1—a married woman aged 23 years who was pregnant. She arrived in Saddleworth on 3/8/47 from Mirfield and complained of not feeling well and was admitted to hospital on 5/8/47. Soon after admission slight weakness of both legs and paralysis of the left deltoid developed. This was followed by "jump paralysis". Bulbar paralysis soon followed and she died on 14/8/47.

Case 2—a boy of 3 years, admitted to hospital on 31/8/47 with muscle twitching. No paralysis developed but the diagnosis was confirmed by lumbar puncture. He was discharged fully recovered on 3/10/47.

Case 3—a girl of 11 years, admitted to hospital on 11/9/47 with sore throat and febrile symptoms. No paralysis was apparent and she was discharged on 17/10/47. After discharge she developed a mild degree of left foot drop.

ACUTE ENCEPHALITIS LETHARGICA.

No cases were notified, but 1 death of a case notified previously was registered as due to this disease.

PNEUMONIA (ACUTE PRIMARY AND INFLUENZAL).

There were 53 cases of Acute Primary Pneumonia notified and 7 cases of Influenzal Pneumonia. The deaths from all forms of Pneumonia numbered 61.

INFLUENZA.

During the year no deaths were attributed to this disease compared with 13 in 1946.

MEASLES.

The number of cases notified was 854 compared with 1,941 for the previous year. Of these 42 cases were removed to hospital, and 3 deaths were registered as due to this disease. The outbreak which began in October of the previous year continued during January and February, 661 cases being notified during these two months.

WHOOPING COUGH,

The number of cases notified was 145, compared with 260 in 1946. Of these, 8 cases were removed to hospital and 1 death was registered as due to this disease.

WHOOPING COUGH PROTECTION.

The arrangements for Whooping Cough Protection were continued throughout the year and 728 children received a full course of protective inoculations.

DYSENTERY,

One case of Sonné Dysentery, a child aged one year was notified, compared with 14 in 1946. This child was attending a nursery of an adjacent authority in which a case of Sonné dysentery had occurred.

SMALLPOX.

No cases of smallpox occurred during the year.

In March, one patient with symptoms of smallpox was seen in consultation at the request of a general practitioner but a diagnosis of smallpox was not confirmed.

In May, an outbreak of smallpox occurred in a common lodging house in Barnsley and information was received from the Medical Officer of Health, Huddersfield, that contacts might make their way to Oldham. During the following three weeks 5 contacts of this outbreak arrived in the town. The necessary administrative arrangements were made to ensure that they were under daily medical surveillance. Vaccination was offered to those not recently vaccinated and to all vagrants arriving at the Westwood Park Institution. Where the intended destination was known at the time of departure the Medical Officer of Health of the area concerned was advised so that continuity of surveillance could be effected.

The common lodging houses in the town were visited regularly and arrangements made for any persons arriving from Barnsley and district to be medically examined.

The number of visits and examinations made by members of the staff during the relevant period were as follows:—

Medical Staff	...	...	...	...	12
Sanitary Inspectors	...	...	...	...	164
Number of Vaccinations	...	...	...	...	1

CHOLERA.

In November information was received from the Medical Officer, R.A.F. Station, Lyneham, Wiltshire, that a contact of cholera had arrived in this country from Egypt and was proceeding to Oldham. A similar notification was received in December. Both cases were kept under surveillance.

OTHER DISEASES.

No cases of Anthrax, Malaria, Undulant Fever or Glandular Fever were brought to the notice of the department during the year.

Table showing the Number of Cases of Certain Diseases notified, and the Deaths registered from these Diseases During the Several Months of the Year.

MONTHS	Measles		Scarlet Fever		Diphtheria		Para- Typhoid		Typhoid		Puerperal Pyrexia		Cerebro- Spinal Fever		Acute Poliomyelitis / Polio- Encephalitis		Whooping Cough		Erysipelas		Acute Primary Pneumonia		Acute Influenzal Pneumonia	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
January	545	2	16	—	3	—	—	—	—	—	—	—	—	—	—	—	10	1	2	—	8	1	2	—
February	116	1	5	—	1	1	—	—	—	—	—	—	1	—	—	4	—	1	—	6	4	3	—	
March	16	—	6	—	4	1	—	—	—	—	—	—	—	—	—	12	—	2	—	2	2	1	—	
April	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—	9	—	—	—	—	2	3	—	
May	5	—	4	—	4	—	—	—	—	—	—	—	2	1	—	11	—	1	—	7	—	—	—	
June	5	—	8	—	4	—	—	—	—	—	—	—	—	—	—	17	—	—	—	5	—	—	—	
July	24	—	12	—	4	—	—	—	—	—	—	—	—	—	2	21	—	—	—	2	—	—	—	
August	14	—	5	—	3	—	—	—	—	—	—	—	—	—	8	7	—	—	1	6	—	—	—	
September	10	—	3	—	2	—	—	—	—	—	—	—	—	—	4	16	—	—	1	3	—	—	—	
October	27	—	10	—	10	—	—	—	—	—	—	—	1	—	—	13	—	—	2	3	1	—	—	
November	35	—	13	—	14	—	—	—	—	—	—	—	—	—	—	8	—	—	—	1	—	—	—	
December	54	—	9	—	7	1	—	—	—	—	1	—	1	—	—	17	—	—	1	5	1	1	—	
TOTALS	854	3	94	—	56	3	—	—	—	—	1	—	5	2	14	1	145	1	11	—	53	14	7	—

Smallpox—None.

Acute Encephalitis Lethargica —1 death.

TABLE SHOWING CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1947.

Notifiable Disease.	Notifications in Age Groups						Notifications in the Various Wards of the Borough													
	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	St. Mary's.	St. Peter's.	Werneth.	Westwood.	St. Paul's.	Coldhurst.	Hartford.	Hollinwood.	Clarksfield.	Mumps.	St. James'.	Waterhead.	
Smallpox
Cholera—Plague
Diphtheria	...	13	34	6	3	7	2	16	...	...	...	3	4	2	2	4	19	3	2	...
Erysipelas	...	31	57	5	2	...	...	5	...	...	...	5	...	1	8	...	5	1	2	...
Scarlet Fever	1	...	...	...	...	...	...	15	5	...	...	...	...	13	10	...
Typhus Fever
Para-Typhoid
Typhoid	...	57	154	4	2	...	...	30	31	75	45	184	35	55	132	77	32	77	81	...
Measles	...	637	36	...	1	...	...	6	2	3	22	28	9	13	3	11	14	10	24	...
Whooping Cough	...	21	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	2	...	...
Cerebro-Spinal Fever...	...	3	...	...	2	...	...	...	2	2	3	3	...	...	...	1	1	1	1	...
Acute Poliomyelitis	...	2	6	1	2	...	...	1	2	1	1	...	...	...	...	...	...	...	...	...
Acute Polio-Encephalitis	1	...	...	...	2	...	2	1	1	1	2	...	...	...	...	...	...
Ophthalmia Neonatorum	...	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory Tuberculosis	...	1	2	26	49	21	3	11	7	17	2	12	4	7	7	9	5	10	11	...
Other forms of Tuberculosis...	...	8	9	3	2	4	...	...	2	2	3	3	1	1	2	4	1	3	4	...
Malaria
Dysentry	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Acute Influenzal Pneumonia	...	1	...	1	...	3	...	1	...	...	...	...	...	...	4	...	...	2	...	...
Acute Primary Pneumonia	...	3	3	7	13	10	4	7	2	2	...	...	3	4	4	5	5	12	7	...
Acute Encephalitis Lethargica
TOTALS	98	794	301	54	78	45	9	79	50	112	86	256	62	92	163	120	82	134	143	...

* Sonnè Dysentery—I

WESTHULME HOSPITAL.

Infectious Diseases. At the beginning of the year there were 44 patients in hospital, these with 540 admitted during the year made a total of 584 cases under treatment. Of this total, 518 were discharged, 27 died and 39 were in hospital at the end of the year. The number of cases treated, 584, compares with 530 in 1946.

The daily average number of infectious cases was 35, the highest being 62 and the lowest 18.

Authority	Diph.	S. Fever.	Measles.	Erys. W.	Cough.	Other.	Total.
Oldham	91	67	44	1	14	138	355
Chadderton	6	22	1	1	4	9	43
Royton	5	2	5	—	—	13	25
Crompton & Shaw	3	2	1	—	—	7	13
Limehurst	—	4	—	—	—	—	4
Failsworth	8	36	2	2	2	9	59
Saddleworth	7	2	1	—	2	10	22
Lees	1	5	—	—	—	1	7
Middleton	—	—	1	—	—	1	2
Whitworth	—	—	—	1	—	—	1
Others	1	3	1	—	—	4	9
Totals	122	143	56	5	22	192	540

The 192 "Other Diseases" admissions were made up as follows:—

Anterior Poliomyelitis ...	49	Ophthalmia Neonatorum ...	1
Cerebro-Spinal Fever ...	10	Rubella	4
Chicken Pox	15	Tonsillitis	12
Dysentery	5	Otitis Media	6
Enteric Fever	4	Pneumonia	2
Enteritis	72	Diabetes	1
Mumps	1	Malaria Relapse	2
Tuberculosis	4	Food Poisoning	2
Rheumatic Fever	1	Abortus Fever	1

Boundary Park General Hospital—Transfers. In addition to the above during the period 21st April to 18th August, inclusive, 44 non-infectious medical cases were admitted from Boundary Park General Hospital. Of these 26 were Oldham cases and 18 cases from adjacent areas.

CANCER.

The facilities for diagnosis and treatment were continued as in the previous year.

The number of deaths attributed to cancer shows an increase of 6 compared with 1946.

The figures for the last 5 years are as follows:—

1943	...	...	...	...	...	222
1944	...	...	...	...	...	204
1945	...	...	...	...	...	237
1946	...	...	...	...	...	240
1947	...	...	...	...	...	246

The following is an analysis of the age and sex distribution of all persons who were certified as dying from cancer during the year:—

Ages	Males	Females	Total
0—15	—	1	1
15—25	—	—	—
25—35	1	—	1
35—45	3	8	11
45—55	13	21	34
55—65	34	31	65
65—75	51	46	97
75—	18	19	37

Localisation of the Disease.

Buccal Cavity and Pharynx ...	{	Tongue	1
		Tonsil	1
		Mouth	1
		Pharynx	4
		Fauces	1
Digestive Tract	{	Oesophagus	8
		Stomach	55
		Rectum	21
		Liver and Biliary	
		Passages	7
		Pancreas	11
		Colon	31
		Caecum	3
Respiratory Organs	{	Peritoneum	1
		Larynx	5
Male Genito-Urinary	{	Lung	22
		Bladder	4
		Prostate	8
		Kidney	2
Female Genital Organs	{	Scrotum	3
		Uterus	19
Breast		Ovary	7
Skin			19
Other Organs			2
			10

BOROUGH CORONER'S REPORT FOR THE YEAR.

The following report has been supplied by Mr. J. L. Watson, the Borough Coroner:—

"The deaths reported to the Coroner during the year 1947 were 254 (males 155, females 99). Of this total 30 were lunatics and mental defectives in institutions.

In 76 of the cases reported the deaths were investigated by the Coroner but no inquests held.

There were 178 inquests held (122 males and 56 females). Of the 178 inquests 37 were held with a jury.

There were 146 post mortem examinations in 31 of which no inquest was held. The expenses of the inquests amounted to £570. 9. 0d.

The verdicts returned were:—

Suicides 9 (males 6, females 3); Accident or Misadventure 72 (males 46, females 26); Natural causes 82 (males 59, females 23); Open verdicts 10 (males 9, females 1); Want or exposure—1 male; Excessive drinking—1 female; Stillborn—1.

The ages of the 9 suicides were as follows:—

Under 21 years of age	...	...	...	...	none
Between 21 and 30 years of age	...	...	...	...	1
Between 30 and 40 years of age...	...	...	...	...	0
Between 40 and 50 years of age...	...	...	...	...	2
Between 50 and 60 years of age...	...	...	...	...	4
60 years of age and over	...	...	...	...	2

The types of suicide included:—

Gassing	...	...	...	...	...	4
Hanging	...	...	...	...	...	4
Throwing himself from window	...	...	...	...	...	1

There were no inquests on infants suffocated whilst in bed with their parents.

There were no inquests on newly born children.

In 1946 there were 233 deaths reported, 176 inquests were held and the expenses were £384. 15. 6d."

TUBERCULOSIS.

The Dispensary.

Arrangements were approved for an additional evening session to be held at the Dispensary each month, making two evening sessions per month for those patients who are employed during the day and others who are not able to attend the day-time sessions.

Attendances at the Dispensary compared with the two previous years, are as follows:—

	1945	1946	1947
Insured persons	1980	2282	2150
Non-insured persons	229	201	290
Children	743	650	714
	<hr/> 2952	<hr/> 3133	<hr/> 3154

The tuberculosis nurse paid 553 visits to the homes of tuberculous patients.

X-ray Work. During the year 702 films were taken compared with 584 in 1946. Of the films borrowed 26 films were retained by the Department.

Pathological Examinations. During the year 635 specimens of sputum were examined. Of these 135 were positive and 500 negative.

Notifications. During the year 138 new cases were placed on the Register of Notifications (108 pulmonary, 30 non-pulmonary) compared with 126 (112 pulmonary and 14 non-pulmonary) for the previous year. The following table gives particulars of the number of new cases of tuberculosis notified in recent years together with the case rate per thousand of the population. Cases notified in other areas which later moved into the Borough have been excluded.

Year	Pulmonary		Non-Pulmonary		All Forms	
	Cases	Rate	Cases	Rate	Cases	Rate
1943	115	1.02	50	.45	165	1.47
1944	103	.92	40	.35	143	1.27
1945	109	.98	38	.34	147	1.32
1946	112	.96	14	.12	126	1.08
1947	108	.92	30	.25	138	1.17

Deaths. The number of deaths registered, 75 (63 pulmonary and 12 non-pulmonary) gives a rate per thousand of the population of .63 (.53 pulmonary and .10 non-pulmonary) compared with 58 deaths (52 pulmonary and 6 non-pulmonary) and a rate of .50 (.45 pulmonary, .05 non-pulmonary) for 1946.

The Dispensary Register. The total number of accepted cases on the Register on the 31st December, 1947 was 673. Of these 229 were cases in which tubercle bacilli had been found in the sputum at some period of the illness.

	Pulmonary			Non-Pulmonary			Total		
	Male	Fem.	Total	Male	Fem.	Total	Male	Fem.	Total
No. on Register on 31/12/46	282	187	469	118	103	221	400	290	690
Cases previously removed, returning during 1947	5	2	7	1	...	1	6	2	8
New cases placed on Register during 1947 (Trans. from Non-Pulm.)	61	41	102	20	7	27	81	88	129
	...	1	1	...	...	...	...	1	1
Cases removed during 1947 (Trans. to pulmonary) ...	61	40	101	33	20	53	94	60	154
	...	...	...	...	1	1	...	1	1
No. on Register on 31/12/47	287	191	478	106	89	195	393	282	673

During the year 154 patients were removed for the following reasons:

1. Recovery	43	or 27.9% of total removals
2. Removal out	27	
3. Not desiring further treatment ...	20	or 32.5% of total removals.
4. Lost sight of	—	
5. Diagnosis not confirmed... ..	4	
6. Death	60	or 39.6% of total removals.

Of the 43 recovered cases, 10 were pulmonary—6 or 60% Tb. Minus, 1 or 10% Tb. Plus 1, and 3 or 30% Tb. Plus 11.

Of the 60 deaths 55 were pulmonary cases, classified as follows:

Tb. Minus 5 or 9.0%	Tb. Plus I-4 or 7.3%
Tb. Plus II-34 or 61.9%	Tb. Plus III-12 or 21.8%

Cases not formally notified. These number 32, 22 pulmonary and 10 non-pulmonary. Of these 22 were live transfers from other areas, 6 were notified posthumously and 4 came to notice through the local Registrar's returns.

The number of non-notified deaths from pulmonary tuberculosis was 7, equal to 11.1% of the deaths from this form of the disease.

3 non-pulmonary deaths not notified during life occurred, being 25% of the total of such deaths.

The percentage of non-notified deaths from all forms of tuberculosis was 13.3.

PULMONARY TUBERCULOSIS.

New Cases. During 1947, 109 new cases were placed on the Dispensary Register and were classified as follows:

Tb. Minus (Sputum negative or absent)	42
Tb. Plus 1 (Early cases, sputum positive)	4
Tb. Plus 11 (Intermediate cases, sputum positive)	51
Tb. Plus 111 (Advanced cases, sputum positive)	12

In addition 11 other cases came to notice but were not placed on the Register.

Deaths. During the year 63 patients, compared with 52 in the previous year, died from pulmonary tuberculosis. This represents a death rate of .53 per thousand of the population.

In addition 2 pulmonary cases died from causes other than tuberculosis.

Of these 63 deaths, 9 or 14.3% had been notified more than 5 years. A further 8, or 12.7% had been notified 3 to 5 years whilst 16 or 25.4% died 1 to 3 years after notification. The remaining 30 deaths (47.6% of total) occurred within 1 year of coming to notice and included 8 which escaped statutory notification, 3 being notified posthumously and 5 coming to notice through the Local Registrar's Returns.

The following table shows the length of time between notification and death of the remaining 22:—

Under 1 week	...	...	...	...	4
1 to 4 weeks	...	...	...	...	3
1 to 2 months	...	...	...	...	6
2 to 3 months	...	...	...	...	5
3 to 6 months	...	...	...	...	3
6 to 9 months	...	...	...	...	1
9 to 12 months	...	...	...	...	—

Thus of the 63 patients dying during the year 54 or 85.7% died within 5 years of coming to notice.

NON-PULMONARY TUBERCULOSIS.

New Cases. The number of new cases placed on the Dispensary Register during the year was 28. Five other cases came to notice. These compare with 15 and 1 for 1946.

The localisation of the disease, compared with 1946 and 1945, was as follows:—

	1945	1946	1947
Bones and Joints	7	7	12
Abdomen	12	1	4
Meninges	4	2	6
Skin	1	—	—
Peripheral Glands	10	3	8
Other Organs	6	2	3
Generalised	—	1	—
	—	—	—
Totals	40	16	33
	—	—	—

Deaths. During the year there were 12 deaths compared with 6 for 1946. This represents a death rate of .10 per thousand of the population.

Of these, 8 died in our own hospitals, 2 in the Oldham Royal Infirmary, 1 in the Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry, and one at home, the localisation of the disease being as follows:—

Meninges 9, Spinal Cord 1, Abdomen 1, Peripheral Glands 1.

In addition, 1 non-pulmonary case died from other causes.

The following is a summary of the new cases and deaths during the year.

Age Periods					New Cases				Deaths			
					Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
					Male	Fem.	Male	Fem.	Male	Fem.	Male	Fem.
0 to 1	...	...	...	...	1	...	...	...	...	...	...	...
1 to 5	...	...	...	...	...	...	7	2	...	...	2	1
5 to 10	...	...	...	...	1	...	4	1	...	...	...	...
10 to 15	...	...	...	...	1	...	3	2	...	...	...	2
15 to 20	...	...	...	...	4	4	1	1	1	...	...	...
20 to 25	...	...	...	...	12	15	2	1	4	...	...	...
25 to 35	...	...	...	...	18	12	2	2	9	5	1	1
35 to 45	...	...	...	...	14	7	...	1	11	2	...	2
45 to 55	...	...	...	...	8	1	1	...	8	1	1	...
55 to 65	...	...	...	...	12	6	2	1	13	4	1	1
65 and upwards	...	...	...	...	3	1	...	...	5	...	...	...
TOTALS	...	...	...	...	74	46	22	11	51	12	5	7
1947					...	120	33	...	63	...	12	...
1946					...	126	16	...	52	...	6	...
1945					...	111	40	...	63	...	12	...
1944					...	110	41	...	70	...	9	...

The following list gives a summary of the principal occupations of new cases and deaths:—

					New Cases.		Deaths.		
					Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	
Cotton Operatives	...	...	...	...	18	3	7	2	
Household duties	...	...	...	...	22	1	9	3	
Engineers, fitters, etc.	...	...	...	...	12	3	6	—	
Labourers	...	...	...	...	10	—	12	—	
Clerks	...	...	...	...	6	1	5	—	
Brass and Sheet Metal Workers	...	...	...	...	5	—	2	—	
Iron Workers	...	...	...	...	5	—	7	—	
Shop Assistants and Salesmen	...	...	...	...	3	—	2	—	
No Occupation	...	...	...	...	4	1	—	—	
Transport Workers	...	...	...	...	6	1	3	—	
School Children	...	...	...	...	2	13	—	2	
Children under school age	...	...	...	...	1	8	—	3	
Nurses	...	...	...	...	3	1	—	—	
Wood workers	...	...	...	...	3	—	2	—	
Miners	...	...	...	...	2	—	—	1	
Other Occupations	...	...	...	...	18	1	8	1	
Totals	...	...	...	...	120	33	63	12	

STRINESDALE SANATORIUM.

In September the Ministry of Health gave approval in principle to the purchase of three further chalets to be placed in the grounds of the Sanatorium. In the same month a tender was accepted for the provision of a Handicraft Hut for the use of the patients. Application was made to the Ministry of Health in respect of the sum of £2,350 0. 0d. for the erection of this and the necessary furniture and fittings.

A reply was received from the Ministry in November suggesting that this proposal be deferred until the supply position became easier. The Committee, however, decided to press the Ministry to grant permission for the work to be proceeded with, and if the request was not granted for the Borough Engineer and Surveyor to endeavour to obtain an Army Hut for the purpose.

During the year 96 patients were admitted.

Artificial Pneumothorax and Pneumo Peritoneum treatment.

At the commencement of the year 19 patients were undergoing this form of treatment as inpatients (16 artificial pneumothorax and 3 pneumo peritoneum) whilst 20 were attending as outpatients for A.P. refills. A further 33 (24 artificial pneumothorax and 9 pneumo peritoneum) were introduced during 1947 and treatment was discontinued in 26 cases including 4 who had received this form of treatment for five years. The number of refills given totalled 1255.

In a number of outpatient cases refills are given at Westhulme Hospital; 23 such cases attending during the year, 248 refills being given.

Sanocrysin. Sanocrysin has been given to 10 patients during the year including one patient who commenced a course in the previous year. In 2 cases treatment had to be discontinued before a complete course had been given. A total of 132 injections were given during the year.

Other Treatment. 17 pleural aspirations were performed during the year and the following examinations carried out:

Blood Sedimentation 627; Urine 2135; Sputa 568; X-ray 168.

Dental Treatment. The arrangements for treatment remain unaltered and the following is a summary of the treatment carried out.

New cases.	Attendances for treatment	Dental Extractions	Fillings	Other Operations	Dentures Provided
60	320	165	12	225	53

The following figures give some further indication of the work of the Sanatorium.

Admissions.	1945	1946	1947
A. Definite Cases of Tuberculosis	98	105	90
B. Observation Cases	6	5	6
Deaths.			
A. Definite Cases of Tuberculosis	28	19	26
B. Observation Cases, Non-T.B.	1	—	—

Discharges.

Transfers to Boundary Park General Hospital	...	1	—	—
Transfers to Papworth Village Settlement	...	1	—	1
Transfers to Strinesdale Open Air School	...	2	—	—
Transfers to Manchester Royal Infirmary	...	—	2	—
Transfers to Preston Hall Settlement	...	1	—	—
Transfers to Oswestry	...	1	—	—
Discharged home	...	70	89	63

Condition of Patients on Discharge.

Observation Cases, Non-T.B.	...	2	5	2
Disease Quiescent	...	7	21	4
Improved	...	55	56	48
No material improvement	...	14	9	10

OTHER HOSPITALS.

The policy of sending suitable cases to sanatoria owned by other authorities has been continued. During the year 21 pulmonary cases were admitted to the following sanatoria:—

The Liverpool Sanatorium, Frodsham	...	19
Papworth Village Settlement, Cambridge	...	1
The Abergele Sanatorium	...	1

Twenty-four cases of bones and joints disease were admitted to the following orthopaedic hospitals:—

Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry	...	23
Wrightington Hospital, Wigan	...	1

Of the 23 patients admitted to the Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry, 9 had previously received treatment there and were re-admitted for review.

BOUNDARY PARK GENERAL HOSPITAL.

The following figures relate to the work of the Hospital with regard to Oldham Tuberculosis patients:—

Admissions.		1945	1946	1947
A. Definite Cases of Tuberculosis:				
Pulmonary	...	7	11	18
Non-Pulmonary	...	7	3	16
B. Observation Cases:				
Pulmonary	...	11	19	12
Non-Pulmonary	...	10	4	6
Deaths.				
A. Definite Cases of Tuberculosis	...	8	5	9
B. Observation Cases, Non-T.B.	...	—	—	1
Discharges.				
Transfers to other Institutions.	Pulmonary	8	11	10
	Non-Pulmonary	5	1	8
Discharged home	...	12	20	24

Maintenance Allowances and Grants.

The arrangements for the granting of financial and other assistance under Memo. 266/T and the Authority's Local Scheme remain as described in the report for 1942.

The following summaries give particulars of the number of applicants and applications dealt with and amounts expended during the year.

1. Memorandum 266/T.

Period 3.1.47 to 31.12.47.

		Amounts expended.
Total number of applicants—1947.	47	
Number carried forward from 1946.	41	
Total number of applications—1947	83	£3,245 9. 3.

Maintenance Allowances.

Number of applicants—1947. ...	36	
Number carried forward from 1946.	40	
Number of applications—1947. ...	70	£3,170 2. 3.

Discretionary Allowances.

Number of applicants—1947. ...	7	
Number carried forward from 1946.	2	
in Maintenance Allowances ...	7	
Number of applications—1947 ...	7	£58. — 9.

Special Payments

Number of applicants—1947. ...	6	
Number carried forward from 1946.	1	
in Maintenance Allowances ...	—	
in Discretionary Allowances ...	—	
Others	6	
Number of applications—1947. ...	6	£17. 6. 3.

2. Local Scheme.

Period 4.1.47 to 1.1.48.

Total number of applicants—1947.	18	
Number carried forward from 1946.	36	
Total number of applications—1947.	43	£2,730. 6. 11.

Maintenance Allowances.

Number of applicants—1947. ...	16	
Number carried forward from 1946.	35	
Number of applications—1947. ...	35	£2,673. 1 10.

Discretionary Allowances.

Number of applicants—1947.	2		
Number carried forward from 1946.	2		
in Maintenance Allowances.	2		
Number of applications—1947.	2	£15.	18. 2.

Special Payments.

Number of applicants—1947.	6		
Number carried forward from 1946.	1		
in Maintenance Allowances	4		
in Discretionary Allowances.	—		
Others	2		
Number of applications—1947.	6	£41.	6. 11.

In addition to the above, special payments covering the provision of clothing were made to 6 applicants (7 applications), amounting to £27. 16. 11.

VACCINATION.

During the year 1947, the Vaccination Officer issued 2,416 Q Notices requesting parents' compliance with the Acts. There were no defaulters and it was therefore unnecessary to issue any K. Forms.

The Vaccination Officer paid 172 home visits and notified the Public Vaccinators on H. Forms of 849 cases requiring vaccination.

The following table gives details of the work of the Public Vaccinators during the year:—

District	No. of successful Primary Vaccinations of Persons			No. of successful re-vaccinations
	Under 1 year of age	One year and upwards	Total	
1 & 2.....	191	9	200	4
3	88	6	94	6
4	41	9	50	12
5	81	16	97	4
6	126	17	143	1
Totals ...	527	57	584	27

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Part I.—Summary of Notifications during the period from 1st January, 1947, to the 31st December, 1947, in the area of the County Borough of Oldham.

Age Periods.	Formal Notifications											
	Number of Primary Notifications of new cases of tuberculosis											
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 & upwards	Total (all ages)
Pulmonary Males	1	...	1	1	3	8	17	14	7	9	1	62
Females	...	...	...	...	5	10	13	5	3	2	2	40
Non-Pulmonary Males	...	7	4	2	1	1	1	...	1	3	...	20
Females	...	1	1	2	1	...	1	...	...	...	...	6
TOTALS	1	8	6	5	10	19	32	19	11	14	3	128
												135

Part II.—Supplemental Return.

New Cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by Formal Notification.

Age Periods.	0—1	1—5	5—10	10—15	15—20	20—25	25—35	35—45	45—55	55—65	65 and up.	Total
Pulmonary, Males	4	3	1	3	2	1	14
Females	4	1	...	...	3	...	8
Non-Pulmonary Males	...	1	...	1	1	1	1	...	...	...	...	5
Females	1	1	...	1	1	...	...	...	...	5
TOTALS	...	1	1	2	1	10	6	2	3	5	1	32

Source of Information.	No. of Cases	
	Pulmonary	Non-Pulmonary
Death Returns—from local Registrars	...	...
transferable deaths from Registrar General	4	...
Posthumous Notifications	...	...
"Transfers" from other areas (other than transferable deaths)	2	4
Other Sources, if any (specify)	16	6
TOTALS	22	10

TREATMENT OF TUBERCULOSIS
Return relating to the work of the Dispensary during the year ending 31st December, 1947.

Diagnosis.	Pulmonary						Non-Pulmonary						Total				Grand Total		
	Adults			Children			Adults			Children			Adults		Children				
	M.	F.	—	M.	F.	—	M.	F.	—	M.	F.	—	M.	F.	—	M.		F.	—
A.—(1) Number of definite cases on the Dispensary Register at the beginning of the year ...	270	176	12	11	50	54	68	49	320	230	80	60	690						
(2) Transfers from other Authorities during the year ...	8	7	—	—	2	1	—	1	10	8	—	1	19						
(3) Lost sight of cases returned during the year ...	1	—	—	—	—	—	1	—	1	—	1	—	2						
B.—Number of new cases diagnosed as tuberculous during the year :—																			
(1) Class T.B. minus ...	23	10	3	—	—	—	—	—	23	10	3	—	36						
(2) Class T.B. plus ...	31	27	—	—	—	—	—	—	31	27	—	—	58						
(3) Non-Pulmonary ...	—	—	—	—	5	2	13	3	5	2	13	3	23						
C.—Number of cases included in A. & B. written off the Dispensary Register during the year as :—																			
(1) Recovered ...	3	6	—	1	10	6	14	3	13	12	14	4	43						
(2) Dead (all causes) ...	42	13	—	—	2	—	1	2	44	13	1	2	60						
(3) Removed to other areas ...	9	12	—	—	2	2	1	1	11	14	1	1	27						
(4) For other reasons ...	6	8	1	—	2	7	1	—	8	15	2	—	25						
D.—Number of definite cases of Tuberculosis on the Dispensary Register at the end of the year ...	273	181	14	10	41	42	65	47	314	223	79	57	673						

VENEREAL DISEASES.

There was no material change in the arrangements for the diagnosis and treatment of Venereal Diseases. Dr. C. H. Strachan and Dr. G. K. Kirkland continued to undertake duties in this service and at the end of the year the following clinics were being held at the Oldham Royal Infirmary:—

Male Clinics.	Tuesday	7. 0 p.m.	Syphilis.
	Wednesday	7. 0 p.m.	G.C.
	Thursday	3-30 p.m.	Syphilis.
Female Clinics.	Monday	7. 0 p.m.	Syphilis and G.C.
	Wednesday	11.30 a.m.	Syphilis and G.C.

It was not possible to implement the proposals to transfer the clinic to Boundary Park General Hospital and to appoint a full-time Venerologist owing to the alterations to the Old Children's Block at the hospital for use as a Venereal Diseases Clinic, not being completed.

Regulation 33B.

During the year Form 1 was received in respect of 5 females resident in the borough. Visits were undertaken by the Superintendent Health Visitor and all 5 were traced. In no case was a second Form 1 received.

Supplies of Arsenobenzene Compounds.

Four doctors on the list availed themselves of this free supply, and 80 doses of various strengths of these compounds were supplied.

Diagnosis and Treatment.

The returns overleaf relate to all persons who were treated at the Treatment Centre, together with details of the pathological work involved during 1947. In addition to the numbers given on this return the following figures indicate the number of Oldham residents making their first attendance at clinics in other areas.

Syphilis 12.

Gonorrhoea 11.

Non V.D. 28.

RETURN relating to all persons who were treated at the

	Syphilis		Soft Chancre		Gonorrhoea		Non- venereal or undiag'd conditions		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
1. Number of cases on 1st January under treatment or observation ...	274	200	...	...	85	23	19	17	378	240	618
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	2	...	...	...	...	...	...	...	2	...	2
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary ...	56	7	...	...	...	...	...	...	56	7	63
" secondary ...	16	26	...	...	...	...	...	...	16	26	42
" latent in 1st year of infection*	...	8	...	...	...	...	...	...	...	8	8
" all later stages ...	18	32	...	...	...	...	...	...	18	32	50
" congenital ...	3	9	...	...	...	...	...	...	3	9	12
Soft Chancre ...	...	...	...	...	...	...	...	...	...	...	...
Gonorrhoea, 1st year of infection ...	...	...	...	...	100	35	...	...	100	35	135
" later ...	...	...	...	...	1	...	...	...	1	...	1
Non-venereal conditions ...	...	...	...	...	...	...	89	42	89	42	131
Conditions remaining undiagnosed at 31st December ...	...	...	...	...	...	...	16	13	16	13	29
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation, at other Centres or Service Hospitals, or by General Practitioners approved under Ministry of Health Circular 2226 ...	11	8	...	...	7	1	3	...	21	9	30
TOTALS OF ITEMS 1, 2, 3 AND 4 ...	380	290	...	...	193	59	127	72	700	421	1121
5. Number of cases discharged after completion of treatment and final tests of cure or after diagnosis as non-venereal ...	10	5	...	...	77	19	105	57	192	81	273
6(a). Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary ...	20	3	...	...	...	...	...	...	20	3	23
" secondary ...	7	6	...	...	...	...	...	...	7	6	13
" latent in 1st year of infection *	...	9	...	...	...	...	...	...	...	9	9
" all later stages ...	22	27	...	...	...	...	...	...	22	27	49
" congenital ...	1	10	...	...	...	...	...	...	1	10	11
Soft Chancre ...	...	...	...	...	...	...	...	...	...	...	...
Gonorrhoea, 1st year of infection ...	...	...	...	...	27	12	...	...	27	12	39
" later ...	...	...	...	...	...	...	...	...	...	...	...
6(b). Number of cases under treatment or observation which died :—											
From the disease ...	...	...	...	...	...	...	...	...	...	...	...
From treatment ...	...	...	...	...	...	...	...	...	...	...	...
From other causes ...	1	1	...	...	...	...	...	...	1	1	2
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure ...	40	14	...	...	31	7	...	...	71	21	92
8. Number of cases transferred to other Centres or to institutions, or to care of private practitioners ...	19	3	...	...	4	2	6	2	29	7	36
9. Number of cases remaining under treatment or observation on 31st December...	260	212	...	...	54	19	16	13	330	244	574
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 ...	380	290	...	...	193	59	127	72	700	421	1121
10. Number of cases in the following stages of Syphilis included in Item 6 which failed to complete one course of treatment of either penicillin or of arsenic and bismuth :—											
Syphilis, primary ...	8	3	...	...	...	...	...	...	8	3	11
" secondary ...	4	5	...	...	...	...	...	...	4	5	9
" latent in 1st year of infection ...	...	4	...	...	...	...	...	...	...	4	4
" all later stages ...	4	10	...	...	...	...	...	...	4	10	14
" congenital ...	1	2	...	...	...	...	...	...	1	2	3

* "Syphilis, latent in 1st year of infection," applies to cases presenting no clinical sign of syphilis but discovered (by blood test, etc.) to have contracted this disease within the preceding 12 months.

Treatment Centre during the year ended 31st December, 1947.

	Syphilis		Soft Chancre		Gonorrhoea		Non-venereal or undiagn'd conditions		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
11. Number of attendances :—											
(a) for individual attention of the medical officer(s) ...	4090	3480	...	...	1064	263	497	268	5651	4011	9662
(b) for intermediate treatment, e.g., irrigation, dressing, Penicillin injections and prostatic massage ...	1028	943	...	...	457	101	58	36	1543	1080	2623
TOTAL ATTENDANCES ...	5118	4423	...	...	1521	364	555	304	7194	5091	12285
12. In-patients :—											
(a) Total number of persons admitted for treatment during the year	4	9	...	...	...	1	2	1	6	11	17
(b) Aggregate number of "in-patient days" of treatment given ...	38	150	...	...	...	2	2	1	40	153	193
13. Number of cases treated with penicillin	94	83	...	...	85	38	Other Dis.				
							M.	F.			
							16	5	195	126	321
14. Number of cases of congenital syphilis in Item 3 above classified according to age periods ...	Under 1 yr.		1 and under 5 years		5 and under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
	1	3	...	...	...	1	2	5	3	9	
15. Pathological Work :—	Microscopical			Serum		Cerebro-spinal fluid		Others for diagnosis of Venereal Disease			
	for Syphilis	for Gonorrhoea	Cultural for Gonorrhoea	for Syphilis	for Gonorrhoea						
(a) Number of specimens examined at, and by the medical officer of, the Treatment Centre ...	106	1283	—	—	—	—	—	17	—	—	
(b) Number of specimens from patients attending at the Treatment Centre sent for examination to an approved laboratory (if available) ...	—	—	—	1883 wrs	195	17 wrs	16Kahn	—	—	—	

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Oldham	Lancashire	Yorkshire	Rochdale	Cheshire	Blackpool	Manchester	Total
A. Number of cases from each area included under the following headings in Item 3 :—								
Syphilis ...	109	55	5	4	...	...	2	175
Soft Chancre ...	...	...	...	...	...	...	...	...
Gonorrhoea ...	80	46	6	3	1	...	...	136
Non-venereal and undiagnosed conditions ...	78	68	7	2	1	...	4	160
TOTAL ...	267	169	18	9	2	...	6	471
B. Total number of attendances of all patients residing in each area ...	7514	3862	499	263	30	14	103	12285

NATIONAL HEALTH SERVICE ACT, 1946.

The National Health Service Act, which received the Royal Assent on the 6th November, 1946, provides for the establishment of a comprehensive health service in England and Wales, and places a general duty upon the Minister of Health to promote such a service for the improvement of the physical and mental health of the people; and for the prevention, diagnosis and treatment of illness. Under the provisions of the Act, the mental and physical health services are brought closer together in a single service.

The service will be available to everyone and there will be no limitation as regards financial means, age, sex, employment or vocation, area of residence or insurance qualification. The service with certain minor exceptions will be free.

In early circulars it was anticipated that the appointed day would be 1st April, 1948, but in June the Prime Minister made a statement in the House of Commons to the effect that the appointed day for the coming into operation of the complete National Insurance Scheme and of the National Health Service would be 5th July, 1948.

The following services have to be provided:—

Under Part II Hospital and Specialist Services.

Under Part III Local Health Services.

Under Part IV General Practitioner Services.

PART II.

HOSPITAL AND SPECIALIST SERVICES.

This part of the service covers hospital and consultant services of all kinds, including general and special hospitals, maternity accommodation, tuberculosis sanatoria, infectious diseases units; provision for the chronic sick; mental hospitals and mental deficiency institutions; accommodation for convalescent treatment and medical rehabilitation, and all forms of specialised treatment, *e.g.*, orthopaedics, cancer, neuro-surgery, plastic surgery, paediatrics, gynaecology, ophthalmic services, ear, nose and throat treatment, and others.

Under the Act the existing premises and equipment of voluntary and public hospitals are transferred to the Minister. The endowments of voluntary teaching hospitals and of other voluntary hospitals are to pass to special funds and will be administered by statutory regulations.

The Minister will effect the control of the Hospital and Specialist Services by entrusting their administration to Regional Hospital Boards together with separate Boards of Governors for the teaching hospitals. The Boards will be composed of persons chosen and appointed by the Minister for their individual suitability for the task, but before making the appointments, the Minister will consult with the Universities, representatives of the Medical Profession, Local Health Authorities of the area and others concerned including, initially those with the experience of the voluntary hospital system.

The first task of Regional Hospital Boards is to review the hospitals in their area and to submit to the Minister, schemes for the appointment by them of Hospital Management Committees. A Management Committee being appointed for each large hospital or related group of hospitals forming a reasonably self-contained hospital service unit.

In June, the Regional Hospital Boards were constituted and varied in size from 22 to 32 members depending on the peculiar circumstances and needs of the areas they served.

Manchester Regional Hospital Board.

In June, the Board for the Manchester Regional Hospital Area was constituted consisting of a chairman, Sir John Stopford, Vice Chancellor of the University of Manchester and 28 members.

PART III.

LOCAL HEALTH SERVICES.

Under Part III of the Act, the Local Health Authorities, who are the County Councils and County Borough Councils, have powers and duties in respect of:—

- (a) The provision of health centres.
- (b) The care of expectant and nursing mothers and young children.
- (c) The provision of midwifery, health visiting and home nursing services.
- (d) Arrangements for vaccination and immunisation.
- (e) The provision of ambulance services.
- (f) Arrangements for the prevention of illness and the care and after-care of persons suffering from illness or mental defectiveness.
- (g) The provision of domestic help services.

In February, Ministry of Health Circular 22/47 was received requesting that the Council should begin the consultations which were an essential preliminary to the submission of proposals for the carrying out of the powers and duties imposed upon them by Sections 21 to 29 and 51 of the Act. A timetable giving the last dates on which proposals were to be submitted to the Minister was given in the circular but with the exception of the proposals under Section 26 (Vaccination and Immunisation) and Section 27 (Ambulance Service) the timetable was subsequently amended.

Much time was spent by the staff and the Committee in the preparation of the proposals and discussions took place with the Oldham Executive Council and with the voluntary organisations likely to be affected or concerned.

All the proposals with the exception of those for Home Nursing were approved by the Health Committee prior to the scheduled dates but had to await confirmation by the Council. In the case of the proposals under Section 25 (Home Nursing) these were delayed as the discussions with the Oldham Nursing Association were not at the time completed.

At the end of the year no guidance had been received in connection with the submission of proposals for the provision of Health Centres nor had approval been received of any of the proposals already submitted.

In accordance with Section 20 (2) of the Act, copies of the proposals were served upon:—

- (1) The Oldham Executive Council.
- (2) The Manchester Regional Hospital Board.
- (3) The voluntary organisations affected or concerned with the proposals.
- (4) The Lancashire and West Riding County Councils as adjacent Health Authorities.

The proposals as approved by the Minister of Health will subsequently be published in full but it is felt that the following brief notes should be included at this stage.

SECTION 22. Care of Mothers and Young Children.

The Maternity and Child Welfare Committee have provided an extensive service for the Care of Mothers and Young Children and the proposals embody the existing arrangements with some necessary extensions.

The dental service is to be extended to provide for the examination by a dental officer of every expectant mother and to provide for the routine dental inspection and treatment of pre-school children over three years of age. From the appointed day dentures will be provided free to expectant and nursing mothers.

The present arrangements for the supply of maternity outfits through the municipal midwives to expectant mothers making arrangements to be confined at home will be continued but no charge will be made for these articles.

There is need for a residential nursery which will provide accommodation for the children under three at present in the nursery of the Westwood Park Institution, and other children of this age needing temporary accommodation. It is proposed, subject to the approval of the Ministry of Health, to convert premises in Mayall Street now loaned to the Public Assistance Committee and used as a children's home. It is intended that this residential accommodation shall be provided in discharge of the duty which will rest on the County Borough Council under the Children Act. It will be administered in such a manner as may be provided in the Act and the Regulations made thereunder.

It is not proposed to make any provision for daily guardians or creches in the Infant Welfare Centres.

SECTION 23. Midwives Service.

Since July 1st, 1937, the Council has provided a Domiciliary Midwifery Service under the Midwives Act, 1936. All the district midwives are State Registered Nurses and possess the certificate of proficiency in the administration of gas and air analgesia.

It is proposed to continue the existing arrangements but the services of the midwife will free and fees paid to a practitioner called in by a midwife will no longer be recoverable.

SECTION 24. Health Visiting.

The present arrangements provide for the supervision of expectant and nursing mothers and all children from birth to school age. Visiting of cases of infectious diseases is also undertaken by Health Visitors.

The Council will provide a complete health visiting service for the purpose of giving advice as to the care of persons suffering from illness, to expectant and nursing mothers and to mothers and others with the care of young children. The health visitor will be concerned with the health of the household as a whole, including the preservation of health and precautions against the spread of infection. It will be the duty of the health visitor to work in close co-operation with the family doctor and not to encroach upon the work of the nurse provided under the Council's Home Nursing Service or the sanitary inspector.

It will be necessary for the number of health visitors to be increased substantially as the needs of the service grow. With the expansion of the service and at an early date it is hoped to co-ordinate more closely the duties of the health visitor and school nurse.

SECTION 25. Home Nursing.

A Home Nursing Service has been provided for many years by a voluntary organisation, the Oldham Nursing Association, which is affiliated to the Queen's Institute of District Nursing. The Association which has an agreement with the Oldham Royal Infirmary Contributory Scheme Association to provide home nursing free for their members, recently purchased 57, Queen's Road, Oldham, for use as a Nurses Home.

No Home Nursing Service has been provided by the Council and this will be another new responsibility for the Health Committee. The service will be under the general direction of the Medical Officer of Health and arrangements will be made, subject to agreement of the Committee of the Oldham Nursing Association, for the Council to take over the service which is provided by them including the nursing staff. It will be necessary to provide a home for such nurses as will require residential accommodation and discussions are taking place with the Association for the use of the present Nurses' Home for this purpose.

It is anticipated that the demand for nursing in the home will increase as the service becomes more widely known and appreciated, and consideration will, therefore, be given to increasing the present staff, in accordance with the demand and the availability of suitable personnel.

SECTION 26. Vaccination and Immunisation.

Diphtheria Immunisation. Immunisation against Diphtheria first commenced in 1933 but the early arrangements were rather spasmodic and it was not until 1938 that a comprehensive scheme was established. Since this date a high degree of immunity has been maintained and at December 31st, 1946, 64.46% of pre-school children and 93.98% of school children had been immunised. Under the proposals the present arrangements which require no alteration, are to be continued.

Vaccination against Smallpox. Vaccination against smallpox is carried out under the Vaccination Acts 1867 to 1907. The Borough is divided into six districts, each comprising two wards and there are five general practitioners, together with the Medical Superintendent of the Boundary Park General Hospital, who hold the appointment of Public Vaccinator. One Vaccination Officer is employed in a part time capacity. On the appointed day these Acts will cease to have effect and the compulsory vaccination of infants against smallpox and the functions and appointments of Public Vaccinators and the Vaccination Officer will come to an end.

Under the proposals arrangements will be made for the carrying out of vaccination in individual cases by general practitioners and to supplement these arrangements, group sessions for vaccination will be arranged if considered necessary.

Whooping Cough Protection. In March, 1942, approval was given for a scheme for immunisation against Whooping Cough to be established. This protection has been confined to children under two years of age.

The Minister has not directed that arrangements for immunisation against Whooping Cough be made, but Circular 66/47 stated that if the Local Health Authority, on the advice of their Medical Officer of Health, desire to continue any arrangements of this nature, the Minister would be prepared to consider their proposals. It is proposed to continue the existing arrangements subject to the necessary approval.

SECTION 27. Ambulance Service.

The present Borough Ambulance Service was established in 1922 and under an agreement the area served included, in addition to the borough, the Urban Districts of Chadderton, Crompton, Failsworth, Lees, Royton and Springhead (now part of Saddleworth). The agreement provided that the Corporation should send ambulances for the purpose of removing persons injured by accidents and patients of medical practitioners within the area of the District Councils, except those patients suffering from infectious diseases or lunatics. Rate payers in the area covered by the agreement are conveyed free of cost within a radius of 10 miles. The service was carried out by members of the Fire Brigade staffs under the control of the then Chief Constable, Mr. A. K. Mayall, O.B.E.

Following the formation of the National Fire Service, the Ambulance Service passed to the Civil Defence Service for operational purposes and came under the control of the Emergency Committee. In August, 1945, the service was transferred to the Carrying and Cleansing Committee and came under the control of the Director of Public Cleansing.

The Health Committee provides an Ambulance Service for the removal of all cases of infectious diseases, including tuberculosis in respect of the county borough, and all infectious cases removed to Westhulme Hospital from the adjacent districts.

Under the proposals the whole of the service will be administered by the Health Committee and the ambulances at present under the control of the Cleansing and Transport Committee will be transferred to the Health Committee. The existing garage arrangements are not regarded as satisfactory and it is proposed to establish a New Ambulance Station. Arrangements have been made with the Lancashire County and West Riding County Councils to continue the existing arrangements for their areas for such periods as may be agreed.

SECTION 28. Prevention of illness, care and after-care.

Tuberculosis. Under Section 28 the Local Health Authority may with the approval of the Minister, and to such extent as the Minister may direct shall, make arrangements for the purpose of the prevention of illness, the care of persons suffering from illness or mental defectiveness or the after-care of such persons. In the case of tuberculosis, the Minister has directed that arrangements shall be made under this Section. For a number of years the Health Committee has provided after-care provision free to patients needing nursing requisites, extra nourishment, clothing, etc. It is proposed to continue the existing arrangements.

Provision of Nursing Requisites. In addition to the arrangements for the supply of nursing requisites to tuberculous patients, the Midwifery service provides for the loan of nursing requisites required for the mother and her baby. The Oldham Corps of the St. John Ambulance Brigade also provides for the issue of sick room requisites to the general public.

It is proposed to continue these arrangements under the Midwifery and the Tuberculosis Services, nursing requisites being supplied on loan and no charge being made to the patients and other relatives. The Council will arrange with the Oldham Corps of the St. John Ambulance Brigade for domiciliary and nursing requisites to be supplied on loan from their Park Road Depot for cases other than midwifery and tuberculosis.

SECTION 29. Domestic Help.

The existing service provides for domestic and home helps but the main demand is for domestic helps. This service will continue to operate on the present lines as from the "appointed day" but it is anticipated that the demand for domestic helps will increase as the service becomes more widely known and it will be necessary to increase the number of domestic helps to meet the increased demands of this service.

SECTION 51. Mental Health Service.

The Act also provides for the transfer to the Minister of the powers and duties under the Lunacy and Mental Treatment Acts and Mental Deficiency Acts. The effect of this provision is, broadly, to transfer to the Minister the medical and administrative functions of the Mental Health Service, leaving to the Board of Control the quasi-judicial functions relating to the liberty of the subject.

In June, Circular 100/47 was received which gave guidance to Local Health Authorities in the preparation of their schemes under Section 51 of the Act.

In the future the Mental Health Service of a Local Health Authority will be a single service combining the mental treatment and mental deficiency services of the past. The Health Committee will be responsible for the control of the combined service and the Medical Officer of Health will be responsible to them for its administration. The functions devolving upon Local Health Authorities under the Acts relating to mental treatment and mental deficiency will now be as follows:—

- (i) **Mental Treatment.** The appointment of officers duly authorised to take initial proceedings in providing care and treatment for persons suffering from mental illness.
- (ii) **Mental Deficiency.** The duty of ascertaining what persons in the area are defectives; providing suitable supervision or taking steps to secure that the defectives are placed under institutional care or guardianship; and securing training or occupation for those not in institutions.
- (iii) **Generally.** The power, and, to the extent that the Minister directs, the duty to make arrangements for the care and after-care of persons suffering from mental illness or defectiveness.

These will be new duties as the care of mental defectives is the responsibility of the Lancashire Mental Deficiency Acts Committee and patients suffering from mental illness and requiring hospital treatment are admitted to one of the hospitals under the control of the Lancashire Mental Hospitals Board or to the Westwood Park Institution which is under the control of the Public Assistance Committee. The relieving officers of this Committee have duties under the Lunacy and Mental Treatment Acts.

As recommended in the Circular, the Health Committee will establish a Sub-Committee—the Mental Health Sub-Committee—which will have all the necessary powers and duties required under the Acts.

This service will provide a new responsibility and opportunity for embarking upon a fresh field of preventive medicine. It is recognised that it is not possible to provide anything like a complete service from the appointed day. There will have to be a period of initial transition owing to the shortage of suitably qualified social workers and specialists but as there is an Occupation Centre in the Borough, which will become the responsibility of the Health Committee, it is anticipated that the service will set off with a good start.

SECTION 21. Health Centres.

It shall be the duty of every local health authority to provide, equip and maintain premises which shall be called "Health Centres" at which facilities shall be available for the provision of general medical and dental services and pharmaceutical services which have to be provided under Part IV of the Act. Also for the provision of services of specialists or other services provided for outpatients under Part II of the Act and for the provision or organisation of any of the services which the local service will set off with a good start.

It is the duty of the local health authority to maintain and staff the Health Centres and it is anticipated that they will be administered by a Sub-Committee of the Health Committee with co-opted members. Ministry of Health Circular 22/47 advised that the submission of pro-

posals for Health Centres must be received no later than the 30th November but this was later cancelled by Circular 105/47 which specified 31st December, 1947, as the last date, no proposals were submitted during the year.

PART IV.

GENERAL MEDICAL AND DENTAL SERVICES, PHARMACEUTICAL SERVICES AND SUPPLEMENTARY OPHTHALMIC SERVICES.

Part IV of the Act covers the personal health services provided by general medical practitioners and dentists and the supply of drugs, medicines and appliances. To arrange these services locally, new bodies—to be called Executive Councils—are to be established in each county and county borough and they will succeed but with wider powers the Insurance Committees which have for 36 years administered medical benefit.

Each Executive Council consists of a chairman appointed by the Minister and twenty-four other members appointed as follows:—

Eight — by the local health authority for the area of the Executive Council.

Four — by the Minister.

Seven — by the Local Medical Committee.

Three — by the Local Dental Committee.

Two — by the Local Pharmaceutical Committee.

Oldham Executive Council.

In February, following receipt of a communication from the Ministry of Health, the Health Committee resolved that the Chairman (Alderman S. T. Marron, J.P.), the Deputy Chairman (Dr. G. A. Taylor), Alderman A. Tweedale, Councillors Bannon, Halbert, Morrell and Simpson and the Medical Officer of Health, be appointed as members of the Executive Council.

Mr. A. C. C. Robertson, Chairman of the Insurance Committee for a number of years, was appointed by the Minister as Chairman of the new Council and the first meeting was held on the 13th June.

The order of retirement of the original members was determined by lot and the representatives of the local health authority retire as follows:—

To retire 31st March, 1949:—Councillor J. Bannon.
Councillor G. A. Taylor.
Dr. J. T. Chalmers Keddie.

To retire 31st March, 1950:—Alderman S. T. Marron, J.P.
Alderman A. Tweedale.
Councillor G. Morrell.

To retire 31st March, 1951:—Councillor G. Halbert.
Councillor A. L. Simpson.

In December Councillor A. L. Simpson submitted his resignation from the Executive Council as he had ceased to be a member of the local health authority.

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