## [Report 1923] / Medical Officer of Health and Sanitary / Public Health Inspector, Peterborough City.

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CITY & BOROUGH OF PETERBOROUGH.

# REPORTS

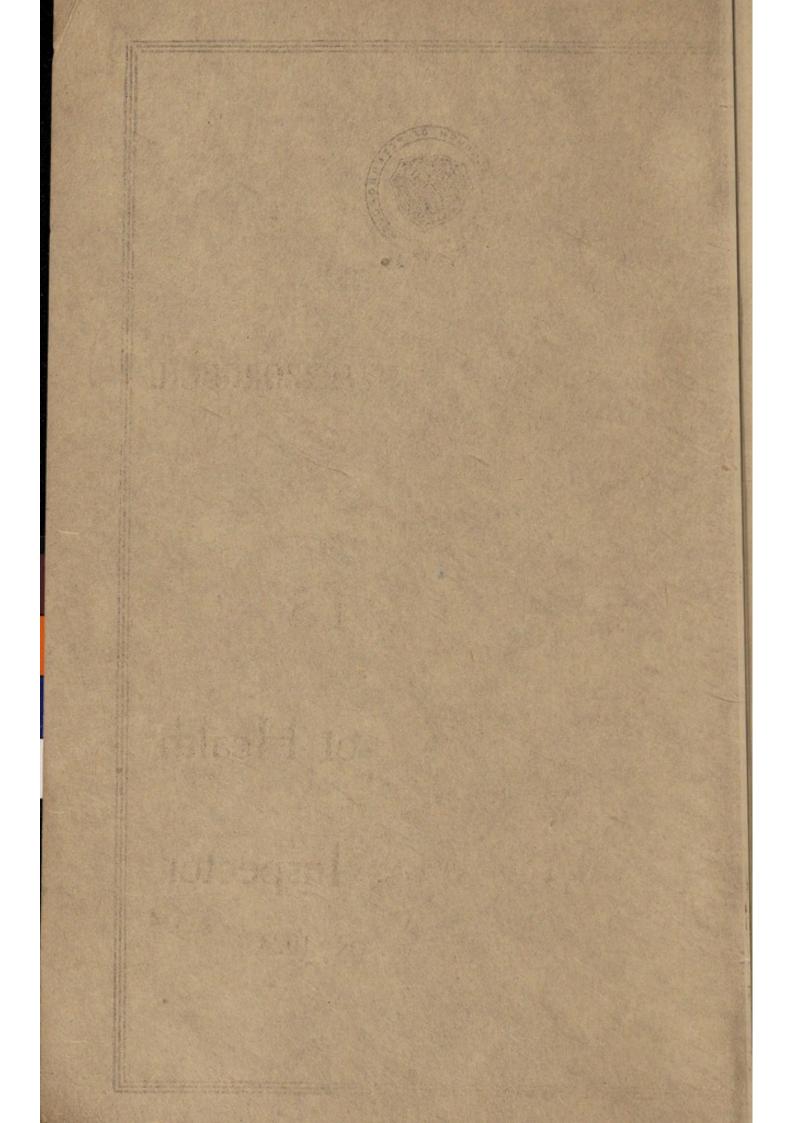
OF THE

# Medical Officer of Health

AND OF THE

# Chief Sanitary Inspector

FOR THE YEAR 1923.





## CITY & BOROUGH OF PETERBOROUGH.

I.

# REPORT

OF THE

# Medical Officer of Health

FOR THE YEAR 1923.

WM. JOHNSTONE, M.D., B.Ch., D.P.H., Medical Officer of Health and School Medical Officer.

#### CITY AND BOROUGH OF PETERBOROUGH.

## Health Committee, 1923-24.

Chairman:

Alderman WHITSED,

Vice-Chairman:

Alderman C. T. VERGETTE,

THE MAYOR (ex-officio),

Alderman LAMPLUGH, J.P., Alderman RISELEY, Councillor FLETCHER, Councillor FARROW, Councillor FISHER. Councillor MANSFIELD, Councillor NICHOLLS, J.P., Councillor PALMER, J.P., Councillor WRIGHT.

## Maternity and Child Welfare Committee.

The above Committee, and

THE MAYORESS (ex-officio), MRS. BARTON,

MRS. H. S. COLMAN,

MRS. KNEE, MRS. NICHOLLS,

MISS NOAKES.

## Staff of the Public Health Department.

Medical Officer of Health, School Medical Officer, Medical Superintendent of the Isolation Hospitals, and Medical Officer to the Maternity and Child Welfare Committee.

WM. JOHNSTONE, M.D., B.Ch. (Glas.), D.P.H. (Camb.)

Deputy Medical Officer of Health.

JOHN N. COLLINS, M.D., (Lond.).

Health Visitor.

MISS ELLEN M. TAMPLIN, SR. S.N., C.M.B., A.R.San.I.

Matron Borough Isolation Hospital.
MISS ADA H. GREEN, S.R.N.

Sanitary Inspectors.

Chief: J. L. SEDEN, Cert. R. San. I. Assistant: EDWARD NOBLE.

Clerks.

Chief: H. A. GOODACRE.

Junior: R. E. GROOM.

Inspector under Food and Drugs Acts and Inspector of Meat,
J. L. SEDEN, Cert. R. San. I.

Public Analyst.

WM. ELBORNE, M.A. (Camb.).

## Health Report for Year 1923.

To The Chairman and Members of the Health Committee of the Peterborough City Council:

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to submit the Annual Health Report of the City and Borough of Peterborough for 1923, being my fourth in series.

In an otherwise healthy year, generally, there were three instances of outbreaks of visitants rather out of yearly ordinaries amongst the infections, viz., Smallpox, Paratyphoid Fever, a case each of Cerebro-spinal Fever, and a fatal one of Cerebro-spinal Meningitis.

I commend to your particular attention a special report prepared on certain aspects of Cancer as affecting this Borough, together with some further comments germane to the subject; also some unsatisfactory matters revealed by the Census in connection with housing conditions.

You continue to be loyally served by Miss Green, the Matron of the Isolation Hospital, Miss Tamplin, the Health Visitor, and Mr. H. A. Goodacre, Chief Clerk, to all of whom my appreciation of services must here find a place.

I am,

Your obedient servant,

WM. JOHNSTONE,

Medical Officer of Health.

Public Health Dept.,
Broadway,
Peterborough.

MAY, 1924.

## CITY AND BOROUGH OF PETERBOROUGH.

## Annual Health Report, 1923.

#### 1. GENERAL STATISTICS FOR 1923.

Area of Borough in Acres		F4.4	1,878
Population (1923), (R.G)			36,200
No. of Inhabited Houses, 1921 (Census)	• • • •		8,422
No. of families or separate occupiers (1921)			8,916
Rateable Value			£211,615
Sum represented by a penny rate			£773
Birth rate per 1,000 population			17
General Death rate per 1,000 population			10.4
Infantile mortality rate, per 1,000 births	22,121		46.6
Phthisis death rate, per 1,000 population			.58
Tuberculosis (all forms) death rate, per 1,000	popula	ation	.66
Cancer death rate, per 1,000 population			1.6

### 2. EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Births (	legitimate illegitimate	22	M. 318 11 329	F. 282 11 293		rate <b>17</b>			o pop.		
Deaths No. of	women dying	<b>379</b> g in or	206 in cons	173 equer	Death ice of	rate 10 (a) from	.4 pe	r 1,00	o pop.		
of parturition (b) other causes 3											
Deaths	Deaths of infants (under one year old)										
	(a) legitimat	e 27.	(b)	illegi	timate	2.	Tota	1 29.			
Total i	nfant mortal	ity, per	1,000	births			1	B.	46.6		
Deaths	from measle	es (all	ages)						1		
,,	,, whoop	ing cou	igh (all	ages	)				2		
- ,,	,, diarrh	œa (un	der 2 ye	ears o	1d)				1		

## 2. Causes of Deaths in Peterborough, M.B., 1923.

(Registrar General's Figures).

	CAUSES OF DEATH.		MALES.	FEMALES.	TOTAL
Civi	lians only, All Causes		211	171	382
Ι.	Enteric fever		bearing	iones -	
2.	Smallpox				
3.	Measles		I		
4.	Scarlet fever		, Ca		
5.	Whooping cough		2		
6.	Diphtheria				
7.	Influenza		1	1	
8.	Encephalitis lethargica	11			
9.	Meningococcal meningitis			I	
0.	Tuberculosis of respiratory syst	em	16	6	
Ι.	Other tuberculosis disease	***	2	2	
12.	Cancer, malignant disease		31	27	
13.	Rheumatic fever				
14.	Diabetes		4	4	
15.	Cerebral hæmorrhage, etc.		16	15	
6.	Heart disease		22	30	
7.	Arterio-sclerosis		5	5	
8.	Bronchitis		19	7	
19.	Pneumonia (all forms)		17	7	
20.	Other respiratory diseases		4	3	
21.	Ulcer of stomach or duodenum				
22.	Diarrhœa, etc. (under 2 years)			I	
23.	Appendicitis and typhlitis		I	2	
-	Cirrhosis of liver		I	21,510	
18	Acute and chronic nephritis		6	7	
	Puerperal sepsis		IND. SCATE	3	
27.	Other accidents and diseases	of		Do	
	pregnancy and parturition			2	
28.	Congenital debility and malforn	na-			
	tion, premature birth		9	4	
29.	0 1 11		I	****	
30.	Other deaths from violence		6	6	
31.	Other defined diseases		44	37	
32.	Causes ill-defined or unknown		3	1	

## 2.—continued. Infantile Mortality—1923.

#### Causes and Age Groups.

CAUSE OF DEATH.	UNDER ONE WEEK.	UNDER FOUR WEEKS.	ı—6 MONTHS	6—12 MONTHS	TOTAL DEATHS UNDER 1 YEAR.
Congenital Debility	 3	1		1844491918	4
Malformations	 	2			2
Premature Birth	 7	I			8
Measles	 		1		I
Convulsions	 I			I	2
Gastro-Enteritis	 			I	1
Whooping Cough	 		I		I
Bronchitis	 		I	2	3
Pneumonia	 		2	2	4
Icterus	 			I	I
Congenital Syphilis	 I				I
Overlaying	 		1		1
Totals	 12	4	6	7	29

Infant Mortality Rate, Peterborough ... ... 46.6

Do. England and Wales ... 69

## Age Groups of Cases of Infectious Diseases Notified during 1923.

	No. of cases Notified							es Re- Hospital it. of emoved		
Notifiable Disease.	Ages		A	t Ag	es—	Year	rs.		Cases F to Hos	cent. of Removed Hospital.
=	At all Ag	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards	Total Cases Re- moved to Hospit	Per c Cases to H
Scarlet Fever	88		12	63	13				80	91%
Diphtheria	21		2	12	5	2			19	90.5%
Smallpox	1		74.19	1	1		1			
Enteric Fever (including paraty- phoid)	1			1		T 4	-		6	
Erysipelas	11		8	1		3	6	1		
Ophthalmia Neonatorium	4	4							0=:	
Pneumonia	36	2	10	6	2	12	2	2		
Encephalitis Lethargica	1		in the second		1				ignus ( )	
Puerperal Fever	2				1	1	8 7		7121	
Cerebro-Spinal Meningitis	2	1977	-	TER	7	2				

3. Notifiable Diseases during 1923.

	1	over 55 and	9   : :	: :9		-: ::	1
		S9 01 St	::	: :∞	:::::	9 : ::	
	hs.	St of Sz	::	: : 4	11111	: 1 :: 13	Deaths
	Deaths.	Sz of SI		: : +	11111	" ! ! !	
		S to 15		:::		i i i i	on on
		2 of 1	::	::"		BOY1	Total Blindness
	Co.	Under 1		: : 4	la l do la		Blii
	Cases admitted Hospital	% of Wotified.	90.5	111		11 11	on red
.	는 로 프로 프	Total.	19	:::			Vision
0		65 and	1 1	1 1 7 1	B	p4 : : :	orium
		59 of 54	1::	: : 0 :	9 : : : :	n n : :	Neonate Vision unimpaired
1	d.	St of Ss	n : .	1 2 :	mn::::	3 3	nia un
	Cases Notified.	12 to 25	75. 82		1111	2 4	Ophthalmia
	Cases	S to 1 S	63	: : 9 :	- : - : :	10 8 4	Но
		2 of I	12 2	: :0 :	:::::	1 : 61	Treated
		Under 1	1:	: N :	4	11 1131	At Home
		Total.	88	36 1	E 01-4-	67	At
	Disease.		Scarlet Fever Enteric Fever (including paratyphoid)	Fer	Cerebro-Spinal Fever Acute Poliomyelitis Ophthalmia Neonatorium Encephalitis Lethargica	M. 28 F. 39 hary M. 16	Cases Notified
			Diphtheria Scarlet Fever Enteric Fever	Puerperal Fe Pneumonia Smallpox Frueineles	Cerebro-Spinal Acute Poliomy Ophthalmia N Encephalitis L Tuberculosis:-	Pulmonary Non-Pulm	C3

## Isolation Hospital.

#### STATISTICAL RETURN FOR 1923.

Disease	In Hospital 31-12-22	Admitted during 1923	Discharged during 1923	Died during 1923	In Hosp!tal 31-12-23
Scarlet Fever	 12	81*	86	nil	7
Diphtheria		22*	22		
Other Diseases		I	miles in the second		I
Measles		I	1		
Totals	 12	105	109	nil	8

<sup>\*</sup> The above return includes one case of scarlet fever and four cases of diphtheria from Peterborough Rural District.

The average period in hospital for scarlet fever 58.31 days For diphtheria (Borough cases only) ... 40.3 days

The Isolation Hospital continues its usefulness in the control of infectious diseases and was in more than usual demand in 1923 for scarlet fever, as the statistical return above shows.

91 per cent. of cases of scarlet fever and 90.5 per cent. of diphtheria occurring in the borough were isolated and treated at the Isolation Hospital during 1923.

The readiness with which parents avail themselves of the Isolation Hospital facilities is evidence of its popularity in that 90 per cent. of the diphtheria and scarlet fever cases were removed and treated there.

Special mention should be made that there was not a death during 1923, a record which, as far as records available show, has not been touched for 19 years, and is especially gratifying, having regard to some increase in the number of cases treated over immediately preceding years.

These results are achieved by the assiduity and efficiency of the Matron (Miss Green) in the supervision and administration of the duties of her nursing staff, which normally comprises a charge nurse, a staff nurse, two assistant nurses and two probationer nurses.

### Notifiable Infectious Diseases.

#### 1-SMALLPOX.

After an interval of seventeen years, the City had, in 1923, a visitation of smallpox. The outbreak was, fortunately, restricted to one case, but the circumstances had some disquieting aspects, inasmuch as the patient, a man of 24, employed as correspondence Clerk at one of the large engineering works in the City, and never vaccinated, had gone to work in a roomful of clerical staff for two or three days with the rash both in process of erupting and in the latter period well out.

The escape of those and other members of the staff may reasonably be attributed to the efficiency of vaccination while serving with the Forces during the war and to re-vaccination and prompt primary vaccination of others not so protected.

The most untoward feature of the visitation was that, despite every possible effort to trace, the source of the infection remained undiscoverable.

The department had, during 1923, three notifications from Port Sanitary Authorities of persons proceeding to homes in Peterborough who had been on board ship where there had been an outbreak.

One of these concerned the ex-Lord Bishop of the Diocese returning from India (probably unbeknown to him) and two other notifications concerned the same person—a ship's officer on different voyages.

Another notification was from the Surrey County Council concerning a Peterborough man engaged as a teacher, and involved in an outbreak at Carshalton (Surrey).

These facts are mentioned in order to demonstrate the known potentialities of an outbreak, and so long as the Doncaster, Notts. and Derby areas are involved (the latter, as it has turned out, increasingly heavy), so long must Peterborough regard itself as in the realm of being menaced.

#### II.—CEREBRO-SPINAL FEVER AND MENINGITIS.

Two cases of this group were notified in January, 1923, both of whom were married women, and, though living in the same locality, nothing in common as regards source of infection was traceable, and both were quite distinct clinically.

One recovered completely without any complication or sequel. The other was an acute fulminating case having an illness, measureable in hours, and proceeding to a rapidly fatal termination.

The diagnosis was made absolute only a few hours before death, in which the Health Department Laboratory played a useful and immediate part.

Neither case was removed to Hospital.

#### III.—PARATYPHOID FEVER.

The case of paratyphoid fever was a sporadic one and was of quite a mild type.

#### TUBERCULOSIS.

During the year there were notified to the department 67 cases of tuberculosis of the respiratory system, and 25 cases of tubercle of other organs or locations.

22 cases of pulmonary tuberculosis and 4 cases of other tuberculous diseases were fatal during 1923, equivalent to an annual fatality rate for all forms of tuberculosis of .66 per 1,000 of the population and .58 for consumption alone.

#### SCARLET FEVER.

88 notified cases; no deaths. Type of disease: Generally mild, with few exceptions.

Total incidence (attack rate), 2.4 per 1,000 of population, the last quarter of the year having fewest cases. The remainder were evenly distributed throughout the other three quarters.

#### DIPHTHERIA.

21 notified cases; no death; case mortality therefore nil, compared with 7 per cent. previous year. No laryngeal cases.

Case incidence, .58 per 1,000 of population—a most satisfactorily low figure.

Death Rate, nil, compared with .11 for England.

### Non-Notifiable Infectious Diseases.

MEASLES was sporadic in this borough during 1923 and otherwise unimportant. One death.

## Smallpox Hospital.

After a 17-years' intermission the smallpox hospital was put into commission in February, 1923, for reception of a case of smallpox. The period of hospitalization of this case was four weeks.

#### CONFERENCE with Peterborough Town Council of representatives of the five surrounding Authorities comprised in the Peterborough Union.

A Conference, constituted as above, was held on the 11th April, 1923, to consider:—

(a) An increase in the retainder payment of each of the District Councils for the right of use of beds in the Peterborough Smallpox Hospital in the event of cases of smallpox arising in any of the areas concerned. These areas comprise:—

Peterborough R.D.C. Old Fletton U.D.C. Norman Cross R.D.C. Thorney R.D.C. Crowland R.D.C.

(b) For each of the District Councils to enter into a formal agreement with Peterborough Town Council in the matter. Finally the following decision was reached, viz. :-

- That the Corporation maintain the Smallpox Hospital for the admission of patients suffering from smallpox, and provide accommodation for the isolation and treatment of any cases which may arise within the Union.
- 2. That the annual cost of the up-keep of the institution and of the maintenance of any patients therein be borne proportionately by the Corporation and the different District Councils in the Union, and that the annual contribution payable by each District Council be calculated proportionately upon the basis of the population living in the area of each Council as at the last Census.
- 3. That if any outbreak of smallpox shall involve an increase of the annual expenditure beyond the normal in maintaining the Institution, or if necessity shall arise for any capital expenditure, representatives from each of the Local Authorities be invited to consult with the Council before such expenditure is incurred.
- That these arrangements be embodied in written agreements to be sealed by the Corporation and by each of the Local Authorities concerned.

## 6. Public Health Laboratory Report, 1923.

NATURE OF SPECIMEN.	POSITIVE.	NEGATIVE.	DOUBTFUL.	TOTAL
Throat and nose swabs		66	2	79
Swab of other discharges			I	I
Other specimens			***	1
Scalp hairs to determine in Ringworm spores present		2	3	11
Cerebro-spinal fluid	. I	I		2

#### LIST OF ADOPTED ACTS (PUBLIC HEALTH).

94.

Total No. of Specimens examined.

	D	ATE OF ADOPTION.
Infectious Diseases (Notification) Act, 1889		3 ust Dec., 1889
Public Health (Amendment) Act, 1890		24th Nov., 1890
Infectious Diseases (Prevention) Act, 1890		24th Nov., 1890
Private Street Works Act, 1892		June, 1896
Public Health Acts Amendment Act, 1907,		
Sections 78, 79, 80, 81, 84, 85, 86		30th July, 1908
Parts II, III, IV, V, VI, and X		16th Dec., 1908
Offensive Trades		17th Mar., 1922

#### FOOD SUPPLY.

# Public Health (Milk and Cream) Regulations, 1912 and 1917.

Report for the Year ended 31st December, 1923.

1.-Milk and Cream not sold as preserved cream.

	(a) Number of Samples examined for the presence of a Pre- servative.	(b) Number in which Preservative was reported to be present, and percentage found in each sample.
Cream	50	nil.
Milk	2	nil.

#### 2.—Cream sold as preserved cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label were correct: One. Satisfactory. Receptacle labelled.

#### Milk and Dairies (Amendment) Act, 1922.

The Health Committee devoted a large amount of time and attention during 1923 to matters arising out of the licensing of purveyors and retailers of milk in this Borough, and the Officers to the inspection of premises and personnel and animals of such.

No applications were received during 1923 for licences to sell milk as Grade A. Certified &c. under the Milk (Special Designations) Order, 1923. It was hoped that one large combine distributor would have applied for a licence to sell pasteurized milk, inasmuch as the firm already does something in this direction, but being by the "flash" process, and therefore out of conformity to the regulations, the process cannot be recognized for licensing. Officially "certified" or Grade A., or any specially designated (clean) milk cannot therefore be obtained in Peterborough. The nearest sources are Cambridge on one side and Grantham on the other.

This is not creditable to Peterborough and District, especially as there is insistence in certain quarters that the District is an agricultural one of no mean order. Why not bacteriologically clean milk than as one of the manifestations of superiority?

## 7. Sanitary Administration.

The work of the Sanitary Department during the year is detailed in the Chief Sanitary Inspector's Report which is appended.

### 8. Public Health Staff.

The Public Health Staff has not changed in personnel or constitution, and are as reported in the report for the previous year.

To the Chairman and Members of the Health Committee of the Corporation.

## Report on Cancer.

Gentlemen,

In the annual Health Report for 1920, an endeavour was made to focus attention, with the object of getting some action taken, on what was at that time regarded, and since accentuated, as the excessive mortality attributable to cancer in the Peterborough district.

The City Council, through the Health Committee, followed up this lead by getting into communication with the Ministry of Health on the subject during 1921, and a certain reply from the Ministry was elicited.

There the matter has remained in so far as Peterborough has been concerned; but there is evidence that elsewhere, notably at the hub of Empire, more intensive measures, better organisation and more of it, greater facilities for research, and, not least important, more liberal grants-in-aid are required: all coupled with the best brains that can bring their powerful minds to grapple with this baffling subject.

The Ministry of Health has deemed it necessary and wise to make itself heard and to add its quota to the overwhelming amount which has already been written on one or other aspect of this obscure human affliction.

And so we have the Cancer Memorandum (Circ. 426) designed, it is averred, for the guidance of local health authorities, but as the recommendations are not entirely applicable in a borough of this size, and so much is the City Council desirous that anything which can be accomplished ought to be undertaken, that I have been set by the Health Committee the agreeable task of committing to writing any observations which may be considered desirable and advisable to make applicable to this borough and district.

It has been argued that the supposed increased incidence of cancer is to be accounted for by better diagnosis and more exact certification of cause of death. The Ministry's memorandum gives the following critical statement:—

"It has long been matter for discussion to what extent this increase has been due to improved diagnosis and more accurate certification of cause of death.

"There can be little doubt that these factors have been contributory, but, unfortunately, it has now to be recognized that they will not account for the whole of the recorded increase."

In 1851-60, out of a population of some 19 millions, 60,196 persons were recorded as dying of cancer, i.e., 317 per million living per annum.

In 1911-20, in an estimated mean population of 35\frac{3}{4} millions, the number of deaths ascribed to cancer was 399,511, i.e., 1,117 per million living per annum. In other words, in the space of two generations the recorded mortality has trebled.

Again, the remarks on the Proclivity to Cancer are extremely significant:-

"Hereditary predisposition to cancer has not at present been proved to be of any practical importance in man; that . . . . the use of any particular article of food increases liability to cancer or prevents it from appearing; . . . and that no danger of cancer has been proved to result from inhabiting houses or districts in which cancer happens to have been exceptionally common. There is no evidence to show that cancer is an infectious or contageous disease."

What, therefore, are the findings with regard to fatal cases of cancer in Peterborough, and of what nature may practicable recommendations be for diminution or amelioration?

The facts are these. There occur in Peterborough borough alone in the region of 55 deaths every year arising from, or attributable to, malignant disease in all forms, but chiefly carcinoma.

On analysis, it is found that about 55% of the deaths take place between the ages of 40-65 years.

This is one of the sinister features of the situation, viz., that more than half of the fatal cases occur in people who may be assumed to be in their full usefulness both to their families, and, perhaps also, to the community generally.

No fewer than sixteen of the deaths during 1922 were in persons who had not attained 56 years of age.

Again, on further analysis of the cases in this 40-65 age period, it is found that, as regards locations of the disease, half or 50% are certified as being relegated to stomach or bowel; 27% is from cancer of stomach alone.

(In the aged, i.e., those over 67, half the deaths in this group were from cancers of bowel alone).

A further 21% in the 40-65 group arises from cancers in the organs of generation; leaving a miscellaneous list of a further 29% made up of locations much as detailed on p. 13 of the Annual Health Report for 1920—q.v.

#### RECOMENDATIONS.

1.—One of the chief recommendations centres round the 27% of fatal cases from cancer of the stomach in the 40-65 age group, because, it seems to me, that it is in early diagnosis of this, by the extended use of what is known as the test meal stomach analysis, that there is hope of eliminating, or reducing to an absolute minimum, this cause of death (provided the patient seeks treatment early enough) even in the present state of our knowledge regarding cancer.

This scientific method of examining the stomach contents for early cancer is at the present time being elaborated and made more perfect and precise as evidenced by a contribution made to the subject at the British Medical Association's annual congress this year.

It is suggested that the City Council, having regard to the facts above presented, draw the attention of the medical profession of the City for their serious consideration as to the best means of applying the fractional test meal test as a factor in the early diagnosis of cancer of the stomach, in the investigation of stomach trouble in persons over 40 years of age.

Second Recommendation.

2.—In the application of No. 1 recommendation in the Ministry's Memorandum, viz. :—

"Improving the local facilities for clinical consultations and for pathological examinations."

A centre for pathological examinations and research in cancer questions for this area should be established at Cambridge, the Ministry of Health, through one of the Cancer Research organizations, finding a Research Fellow who might perhaps be located at the Field Laboratories, Milton Road, Cambridge, failing any other suitable location, there being no Pathologist on the staff of Peterborough General Infirmary.

WM. JOHNSTONE, M.D.,

Medical Officer of Health.

Broadway,
Peterborough,
Sept. 14th, 1923.

Col. Smallman, of the Ministry of Health, Secretary of the Committee on Cancer (Ministry), in acknowledging the above on 26th October, 1923, stated:—

Some considerable time ago my attention was directed to . . a chart of cancer death rates, 1901-20 (in Peterborough). The view of the statistical department was that from the data available no safe inference could be drawn.

This view may, of course, be subject to revision with later and fuller information.

. . Steps will be taken to bring . . report before Committee on Cancer at an early meeting. . . .

There the matter as regards Cancer stood at the end of 1923. Nothing further was heard as to what the consideration of Peterborough's case by the Cancer Committee amounted to.

Certainly no steps by a central department or otherwise had come to notice as being taken by the close of 1923 to give effect to the Medical Officer of Health's recommendations either as regards I or II

## Maternity and Child Welfare.

The Infant Welfare Centres in the City are as set out under the heading Clinics and Treatment Centres.

The Corporation Infant Clinics and Infant Welfare arrangements were the subjects of inspection by Ministry of Health representatives (female) during 1923.

First, a forerunner lady (lay) Inspector made a preliminary inspection for the purpose, it was said, of reporting to her superior (lady) Medical Officer.

The Lady Medical Officer (Dr. Cunningham) came down about a month afterwards, and went more fully into details, both intrinsic and administrative, with regard both to the problems presented and most aspects of the work.

She viewed Queen Street and the South Ward Centres, and witnessed a clinic in operation at the Eastgate Centre.

The result of this inspection had its exposition in receipt by the Town Council of a letter from the Ministry of Health, dated 3rd April, 1923, the salient features of which are:—

- Appreciation of progress made by Town Council in Maternity and Child Welfare work.
- Existing arrangements for health visiting of district inadequate, and Town Council to consider augmenting Health Visitor staff to secure efficient carrying out of work in all parts of the district when financial conditions more favourable.
- Premises in which centres are conducted are not very suitable for purpose. . . Town Council to bear in mind necessity of securing better premises when circumstances permit.

The falling off at Queen Street centre is due to no provision for pram shelter (this has now been erected). The centre at New England is the best attended of the four, and whatever the reason the fact remains, that practically every week—certainly every month—New England has proved itself paramount over Queen Street, inasmucia in 1923, 1,579 attendances were made compared with 1,314.

The results of Infant Welfare work cannot be measured merely by the number of attendances made at the centres. The system is intended as well for propaganda purposes as for an essai in preventive medicine, and a little leaven leavens the whole body of maternal knowledge and opinion in transmission from one another even in casual conversation.

Before Infant Welfare work became an ordered body of policy, the rearing of infants was a matter of tradition, custom, and lore, coming even as near to realities as pure tittle-tattle. The specific committee concerned ought ever to be mindful of the fact that its name is a joint one—not only is it an Infant Welfare Committee, but also a Maternity and Child Welfare Committee. There is room for advancement in this direction, in other words the progress of the future must inevitably have its channel in the development of some ante-natal work as well also as rather more intensive neo-natal. So long as there is a single infant in the City dying or maimed through a preventable cause (there were 11 in 1923, and 15 the year before,

together with 22 in 1920), so long will there be a field for activity, operation, observation, and progress.

In four years a reduction in the deaths of the "Innocents" from 10% to 4.6% or a saving to the community of 33 lives in 1923, if the Infantile Death Rate of 1919 had still obtained. These figures constitute records which have never been obtained in the whole of the City's history. Furthermore, who shall say that the disability or maiming rate is not any better either?

For it is a well-known fact that with a high mortality rate inevitably goes a high disability or maim rate of those that have through mismanagement come near to death, but have in varying degree escaped it.

Every inducement is held out to the mother, particularly the young and newly-constituted mother to take advantage of the facilities offered. For instance, there are four different varieties of dried milk from which to choose at each centre. About £500 worth of dried milk is sold annually at the centres, in addition to other articles adjuvant to the thriving of the young or benefit of the mother. All the accepted principles for the improvement of the physique and prevention of preventable morbidity are put into execution in connection with the Infant Welfare work of Peterborough, and the results are what they are by the splendid efforts of the Health Visitor, and her most excellent band of assistants, whose devotion to the cause must find record here, and ought to go down to the posterity of Peterborough as matters of history, to whose energy and enthusiasm many future citizens will undoubtedly owe their very lives.

## Infantile Mortality.

During 1923, there were 29 deaths of infants under twelve months of age compared with 33 in the previous year, equivalent to an infant mortality rate for the year 1923, of 46.6 per 1,000 births. This is the lowest infant mortality rate in the history of the city.

38 per cent. of these deaths may be classified as arising from preventable causes. 45 per cent. are what may be termed neo-nated or inability to survive through some pre-natal cause, such as prematurely presaging the need for ante-natal work.

### Notification of Births Act.

This Act operates very effectively in Peterborough. It had a 97 per cent. efficiency during 1923, 607 births being notified to the Department out of a total registration figure of 622.

Coincidently to relate, the percentages of births notified by medical practitioners are practically identical with those of the previous year, and therefore appear more or less constant percentages for this borough, viz., 82 per cent. by doctors and 18 per cent. by midwives.

## Clinics and Treatment Centres.

Centre.	Situation.	By whom provided.
Queen Street	Queen Street Fire Station	Maternity and Child Welfare Committee.
New England Eastgate	St. Paul's Church Hall Wesley Hall, Hampden Rd.	Do.
South Ward	Palmerston Road Church Hall.	Do.
School Clinic	24, Priestgate.	Education Committee.

## Health Visitor's Report for 1923.

(January—December).

Number	of first visits			655
,,	Return visits under 1	year		471
,,	,, over i	year		185
,,	Visits to still-births			. 5
,,	,, Cases of Infar		lity	II
,,	" Ante-natal ca	ses		34
	Total number of vi	isits paid		1361
,,	Notified Births			607
>>	Un-notified Births			15
,,	Refused advice			0
,,	Died before visit			4
,,	Wrong address given			7

The Paris Committee of the	At first visit	At 3 months	At 6 months
Babies breast fed entirely	433	220	46
Babies breast fed partly Artificially fed in the following manner:—	56	27	26
Hygienic Bottles Long Tube Bottles	A CONTRACTOR OF THE PARTY OF TH	130	40
Medicine Bottles	15	11	22
Glaxo		19	21
Milk and Water diluted	22	29	9
Infants sleeping alone	223	134	110

ATTENDANC	E AT CLINICS.	
Centre	1922	1923
Queen Street	1270	1314
Eastgate	284	552
New England	1483 266	1579
South Ward	266	156

## 9. Housing.

#### FACTS FROM CENSUS, 1921.

Undivided private houses	8,233
Total dwellings occupied by private families	8,422
Total private families (or separate occupiers)	8,916
Dwellings occupied by two families	439
Dwellings occupied by three or more families	26

#### HOW THE POPULATION IS HOUSED.

and the same	281			1921.	IQII.
Families	in	1-roomed houses		1.4%	1.1%
,,		2-roomed houses		6.4%	2.2%
,,		3-roomed houses		4.3%	1.9%
,,		4-roomed houses		15.1%	13.4%
,,		5-roomed houses		25.9%	19.6%
,,		6 and 7-roomed		41.4%	53.7%
,,		8 and 9-roomed		4.1%	5.9%
,,	in	10 and more-room	ned ,,	1.4%	2.2%

13 instances are recorded of 3 persons in the family and 3 cases where there are four in the family in a one-roomed house! At once a moral as well as a social and health problem!

25% of the total families have 3 persons in the family and dually 19% and 13% have 2, 4, and 5 persons in the family respectively.

#### OVERCROWDING.

The population living more than two persons to a room, i.e., in a state which is usually the empirical standard as a basis of estimating overcrowding:—

In 1921, 891 persons or 2.6% of total private family population. Compared with

In 1911, 356 persons or 1.1% of total private family population.

In other words the amount of overcrowding has gone up more than double in ten years.

### The Census.

In the course of the year under review, the Census results taken in June, 1921, appeared.

## INDUSTRIES AND OCCUPATIONS OF THE POPULATION.

The total number of occupied males in the whole Census population of 35,532 is 11,615, and of occupied females 4,137.

The following is an abbreviated list arranged according to numerical gradation, viz. :--

num	erical gradation, viz. :			
				PER CENT. OF OCCUPIED
		MALES.	FEMALES.	
i	Metal Workers	2623	14	22.5%
ii	Transport (Railways, &c.)	2560	55	22 %
iii	Commercial pursuits (including Finance and Insurance, but excluding			
	Clerks)	1194	659	11.8%
iv	Clerks (general), non- Civil Service or Local			
v	Authority Workers in wood and	661	401	6.7%
vi	furniture Labourers and unskilled	649	7	5.4%
	workers	560	8	5 %
vii	Builders, bricklayers, &c.	533		4.6%
viii	Agricultural occupations (including tractor driv-	Manual Indian		
Reti	red from previous gainful occupation (not Naval or	345	20	3 %
Une	Military) mployed (not retired - and	635	34	
	not gainfully occupied)	1103		

Peterborough population increased by 1,958 or 5.8% during the intercensal period, 1911-1921.

At the time of the Census the population was divided into 16,931 males and 18,601 females.

The death rate at 10.4 per 1,000 of population is the lowest authentic death rate in the city's history, the very low rates per 1,000 given for the years 1908-9-10 being quite evidently inadvertent errors through a gross overestimation of the population of those years and consequent understatement of their death rates per 1,000 of population.

One of the estimates of population given during the three years prior to the 1911 Census was not attained until 13 years later!

While the Census showed about 1% aged people over 80 years of age, there are no centenarians in Peterborough.

## 9. Housing.

Year ended 31st December, 1923.

POPULATION, TATE		1
1.—GENERAL.	Sandania David	
Number of new houses erected during 1923 (a) Total	28	to nemm
(b) With State assistance under the Housing Acts, 1919 or 1923:	and the same	Microlinia
(i) By the Local Authority	Nil.	
(ii) By other bodies or persons	Nil.	2 Cases pending
2.— UNFIT DWELLING HOUSES.	201	1913 · 4
I.—INSPECTION.	Suring	1302
(1) Total number of dwelling houses in- spected for housing defects (under Pub- lic Health or Housing Acts)		
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations,	206	India de la companya
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Per pour les	(olgania)
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation		See below III.
II.—REMEDY OF DEFECTS WITHOUT SERVICE of Formal Notices.		
Number of defective dwelling houses ren- dered fit in consequence of informal action by the Local Authority or their officers	302 P.H.A. 164 H.A.	

-9		
III.—ACTION under Statutory Powers.		
A.—Proceedings under section 28 of the Housing, Town Planning, etc., Act, 1919.		
(1) Number of dwelling houses in respect of which notices were served requiring repairs		
(2) Number of dwelling houses which were rendered fit—		
(a) by owners (b) by Local Authority in default of		
owners (3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close		
B.—Proceedings under Public Health Acts.		
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	314	
(2) Number of dwelling houses in which defects were remedied—		
(a) by owners	302	12 pending
(b) by Local Authority in default of owners	Nil	
C.—Proceedings under sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909.		
(1) Number of representations made with a view to the making of Closing Orders	Nil	
(2) Number of dwelling houses in respect of which Closing Orders were made	Nil	
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	Nil	
(4) Number of dwelling houses in respect of which Demolition Orders were made	Nil	
(5) Number of dwelling houses demolished in pursuance of Demolition Orders	Nil	

III. ACTION made Sciented Person

A Proceedings under seitime 28 of the

Number of dwelling Souses in respecting

(a) Mumber of duciling bouses which were

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Presentings under Ending Streets Acts.

(1) Number of dwelling houses in request

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Name of the Party of the Party

the by Local Ambority to delault of

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(1) Number of representations that, with a

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16



## CITY & BOROUGH OF PETERBOROUGH.

II.

# REPORT

OF THE

# Chief Sanitary Inspector

FOR THE YEAR 1923.

J. L. SEDEN, Cert. R. San, I.



## CITY & BOROUGH, OF PETERBOROUGH.

H

# REPORT

SHT TO

Chief Sanitary Inspector

J. L. SEDEN, Cat. R. San, J.

Sanitary Inspector's Office, Broadway,

1924.

To the

RIGHT WORSHIPFUL THE MAYOR, ALDERMEN AND COUNCILLORS OF THE CITY OF PETERBOROUGH.

MR. MAYOR AND GENTLEMEN,

Herewith I beg to submit for your consideration my report for the year 1923, this being my thirteenth annual report.

For ease of comparison the report is built up on similar lines to former reports.

Throughout the year a systematic inspection of the district has been maintained, and all necessary steps have been taken to secure the abatement of nuisances discovered, particularly without having to report defaults to the Health Committee and the serving of legal notices. I am again pleased to record that it has not been found necessary to institute legal proceedings under the Public Health Acts and Regulations. Special attention has been paid to slaughterhouses, making-up premises, and shops where food is sold.

I regret that it is impossible to report any marked improvement in regard to house accommodation; hence the observation in my last report on this important matter applies with equal force at the present time. In this connection, however, it is interesting to note that the recently published Census returns for 1921 give the following details for the city:—18.9 persons per acre, 5.55 rooms per house, 1.34 rooms per person. 439 houses—chiefly 5 to 8-roomed houses—are given as occupied by two families. In practically the bulk of these nothing approaching legal overcrowding can be said to exist. In the few cases where the cubic capacity is low the difficulty of suggesting improvements, or the occupants obtaining better accommodation, is, at the present time, insurmountable. Re-arrangement of the occupation of sleeping rooms is urged, and frequently meets the case.

Speaking generally, however, it is probably not so much overcrowding, i.e., a larger number of persons per room than obtained years ago, as overpacking of houses, i.e., more families per house, that is the difficulty, and this is a condition that interferes perhaps less with health than it does with comfort, convenience and the amenities of life generally.

#### INSPECTIONS, NOTICES, COMPLAINTS.

INSPECTIONS .- Total, 2,576. Re-visits, 793.

NOTICES.—Under the Housing Acts, 4 statutory notices were issued, and under the Public Health Acts, 2. 105 informal notices were served

COMPLAINTS.—Total formally received, 107, all of which were investigated. Action taken in 83 cases.

#### HOUSE INSPECTION.

1,023 inspections of houses were made, at 206 of which the formalities necessary under the Housing, Town Planning, etc., Act were complied with. At 302 houses defects were remedied under the Public Health Acts; 12 are pending; repairs were carried out at 64 houses under the Housing Act, and at 10, work is outstanding at the end of the year.

### NUISANCES ABATED AND SANITARY DEFECTS REMEDIED.

Drains cleared, cleansed or repaired		85
Drains partly relaid		100
Stoneware gully traps fixed in place of def		55
"D" trans	ective	
"D" traps		28
New ventilating shafts fixed, or shafts repair	ed	12
New W.C. pans and traps, or pans only fixe	hed	57
W.C.s cleared or pans cleansed		6
W.C. apartments repaired, reconstructed or	1:	0
	lime-	
		15
New W.C. apartments and pans and traps fix	ed	10
Flushing cisterns adjusted		26
New flushing apparatus provided		
Window frames repaired, made to open, etc.	***	5
Dirty houses cleaned	***	60
Overgrounding about 1		2
Overcrowding abated		4
Floors repaired or renewed		32
Paving repaired or relaid		39
Roofs repaired		
New sink or baths	***	55
Rain water pines and cutters remaind and		9
Rain water pipes and gutters repaired and rer	newed	66
Accumulations of manure and refuse removed	i	14
Miscellaneous nuisances abated		287
Total		96-
10001		867
		Statement

### INFECTIOUS DISEASE.

107 visits were made respecting 102 cases, and a number of re-visits.

Comparison with the ten previous years is as follows :-

1922		80	visits	respecting	82	cases.
1921	***	91	,,	,,	97	,,
1920		101	,,	,,	107	,,
1919		83	,,	,,	86	,,
1918		141	,,	"	157	,,
1917		106	,,	,,	121	,,
1916		127	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	141	,,
1915		220	,,	,,	238	,,
1914		132	,,			
1913		70	,,	,,	78	,,
1914		132	,,	,,	133	,,

#### DISINFECTION.

The number of rooms disinfected is as follows :-

Infectious Disease	 	 120
Phthisis Non-notifiable Disease	 	 16
Schools	 	 2

139

Bedding was removed to the Fever Hospital to be disinfected from :

111 houses (after Infectious disease) ... 955 articles.
5 houses (after Phthisis) ... 74 articles.

1029

104 articles of bedding, etc., were also removed by request from various houses in the city after non-notifiable diseases, and for which payment has been made.

The following is a list of all the articles removed :-

Beds				 	94
Blankets				 	274
Pillows				 	222
Bolsters				 	IOI
Mattresses				 	65
Counterpan	es, et	C.,		 	71
Palliasses				 	5
Carpets, etc				 	15
Clothing					97
			***	 	
Miscellaneo	us			 ***	180
					-
					1133
					-

#### COMMON LODGING HOUSES.

67 visits were paid to the 5 registered houses. The houses generally have been kept in good order, and the bye-laws observed. It was found necessary to send only 1 cautionary letter and to give 2 verbal warnings. At one house improvements are anticipated in the new year under a change of management, the registered keeper having arranged for a more efficient deputy to be in charge.

HOUSES LET IN LODGINGS .- 13 houses are on the register; 27 visits paid

SLAUGHTER HOUSES.

704 visits have been paid to the 23 licensed slaughter-houses which, on the whole, have been found well managed, and the bye-laws observed. It was found necessary to report to the Health Committee contraventions of the bye-laws—after repeated warnings—at 2 slaughter houses, and, on the Committee's instructions, warning letters were sent by the Town Clerk to the occupiers concerned. 5 cautionary letters were also sent to other occupiers respecting various matters.

The licenses of 20 of the slaughter-houses have, for several years past, been granted annually. Owing to changes in occupation since the original license was granted, viz., prior to 1890, the three remaining slaughter-houses were also put on a yearly licensing basis at the end of the year.

Bye-laws 2 of your "Bye-laws as to Slaughter-houses" requires that the slaughter-house shall be thoroughly limewashed once in every three months. The Health Committee, in granting licenses for the current year, made it a condition that limewashing should be carried out during the first 21 days of the months of March, June, September and December.

I may be permitted to point out that your slaughter-house bye-laws were made and confirmed as far back as 1877, and while not so complete, in many details, as the present Model Bye-laws, yet, if carefully observed, result in a good standard of cleanliness and efficiency of management. Bye-law 9, which requires that notice be given of any diseased or unsound animal brought to or slaughtered at any slaughterhouse is particularly valuable.

#### FOOD INSPECTION.

The following articles have been surrendered and condemned as unfit for human food :-

The carcase and edible offal of-

2 ox beasts; 38 and 42 stones, respectively. 3 cows; 33½, 43 and 45½ stones, respectively. 1 small "plain" heifer; 16 stones.

The hind quarters and certain edible offal of 2 cows; 204 and 23 stones, respectively.

One hind quarter and certain edible offal of a cow; 134

One forequarter and certain edible offal of a cow; 1312 stones.

all of which were affected with generalized tuberculosis.

1 large sow (injury); 42 stones. I pig (erysipelas); 101 stones.

2 boxes frozen beef kidneys; 2 stones 2lbs.

2 stones whelks.

12 stones cod fish.

74 lbs. beef.

I case fresh herrings.

1 box (5 loins) frozen pork; 50 lbs. Sundries.

#### BAKEHOUSES.

46 bakehouses are on the register. 44 visits have been paid. 2 warning letters have been sent. On the whole the bakehouses have been found clean, and attention has been given to limewashing. Notices of 3 changes in the occupation of bakehouses were received from H.M. Inspector of Factories and Workshops.

#### SALE OF FOOD AND DRUGS ACTS.

85 samples were purchased and submitted to the Public Analyst, as follows :-

110.						
Milk				Formal.	Informal.	Total.
				44	6	50
Butter				5	6	II
Potted Meat			e	_	4	4
Sausage			***	_	4	4
Sponge Cake				_	7	7
Lard				-	2	2
White Precip	itate	Ointr	ment	<u> </u>	I	1
Ammon. Tinct	ure of	f Qui	nine		I	I
Seidlitz Powde	er			HITTER TO THE	3	. 3
Infants' Malte	d Foo	d		-	2	2
					-	_
				49	36	85
				and the same of	-	

The average composition of the 46 genuine milk samples is 3.81

per cent. milk fat; 8.84 per cent. solids not fat.

One informal sample of milk was reported 133 per cent. deficient in fat. Two "following up" samples from the same vendor were reported genuine.

One formal sample taken from a very small shopkeeper was reported against for deficiency in fat. A second sample taken later was reported genuine. The vendor was cautioned by the Town Clerk,

on instructions from the Health Committee.

A formal and informal sample of milk taken from a small shopkeeper were reported adulterated by a small amount of added water —under 3 per cent. The vendor was cautioned by the Town Clerk, on instructions from the Health Committee. Other samples taken proved genuine.

The samples of potted meat and sausage each contained small

amounts of boric acid preservative.

7 samples of sponge cake were taken after receipt of a circular from the Ministry of Health respecting preservative in an excessive amount being found in this class of food. 5 of the samples were reported free from preservative, and 2 contained a very small trace of boric acid.

MILK AND CREAM REGULATIONS.—3 samples of cream were submitted for analysis, viz.:— 2 genuine cream and 1 preserved cream, the latter being in accordance with the regulations as regards label and preservative used.

#### DAIRIES, COWSHEDS AND MILKSHOPS.

MILK AND DAIRIES (AMENDMENT) ACT, 1922.

26 persons are on the register who are resident in the city, viz., 10 cowkeepers, 8 purveyors of milk and 8 milksellers, i.e., small general shopkeepers who sell from approximately 1 to 4 gallons of milk daily for accommodation.

go visits were paid, several of which were in company with the

Medical Officer of Health.

The following work has been carried out :-

One cowshed—overhauled, new floor, additional light, etc.

One cowshed-floor overhauled.

A washing-up room with new floor, copper, etc., was provided by two purveyors of milk.

#### SHOP ACT, 1912, 1920, 1921.

57 visits were paid. 2 formal complaints were received and investigated. Towards the end of the year, on the instructions of the Health Committee, a handbill was left at each shop in the city, setting out the main provisions of the Acts and Local Closing Order as to closing times, etc.

#### FACTORY AND WORKSHOP ACT.

FACTORIES AND WORKSHOPS.—149 workshops and workplaces are on the register. 11 notices of changes, or the opening of new workshops, were received from H.M. Inspector of Factories, and also 6 notices of nuisances or sanitary defects at various workshops or factories, all of which have received attention. 49 visits were paid.

OUTWORKERS.—A circular letter was sent out by the Town Clerk, in the early part of the year, to all possible employers of outworkers.

14 lists were received, with a total of 32 outworkers thereon. Some

of the names appear on several of the lists. This indicates that the amount of outworking done locally is very small. 19 visits were paid.

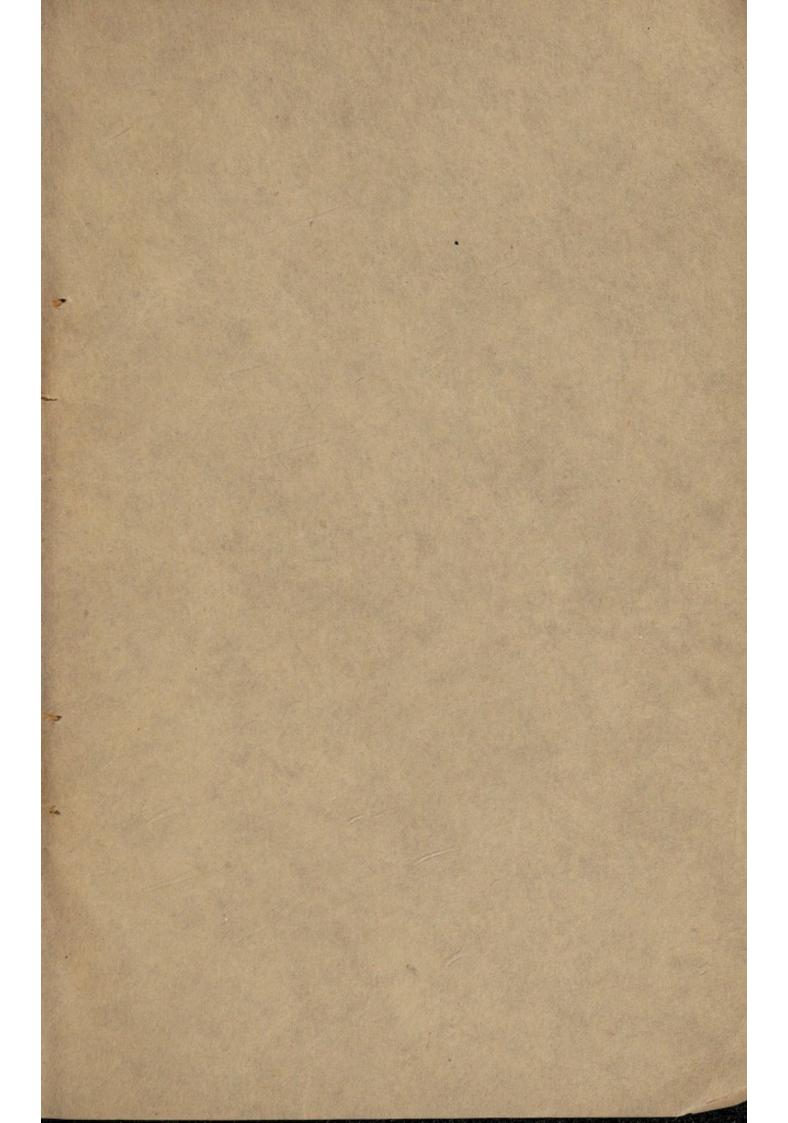
#### CANAL BOATS ACTS.

52 boats are on the register, the bulk of which are not met with locally. 2 boats were transferred during the year. 7 inspections were made, and the boats were found satisfactory. No case of infectious disease occurred on any of the boats. The amount of river traffic locally is now almost negligible.

PLEASURE BOATS.-4 boatmen and 67 boats licensed. 57 visits were

made.

I am,
Mr. Mayor and Gentlemen,
Your obedient Servant,
J. L. SEDEN,
Chief Sanitary Inspector



"Standard" Printing Works, Cross Street, Peterborough.