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CITY OF PETERBOROUGH



ANNUAL



REPORTS

OF THE

MEDICAL OFFICER OF HEALTH

AND OF THE

CHIEF SANITARY INSPECTOR

FOR THE YEAR

1952





With the Compliments of the City Medical Officer of Health

Fublic Health Department, Town Hall, Peterborough. Peterborough 2241. Ext. 25



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CITY OF PETERBOROUGH

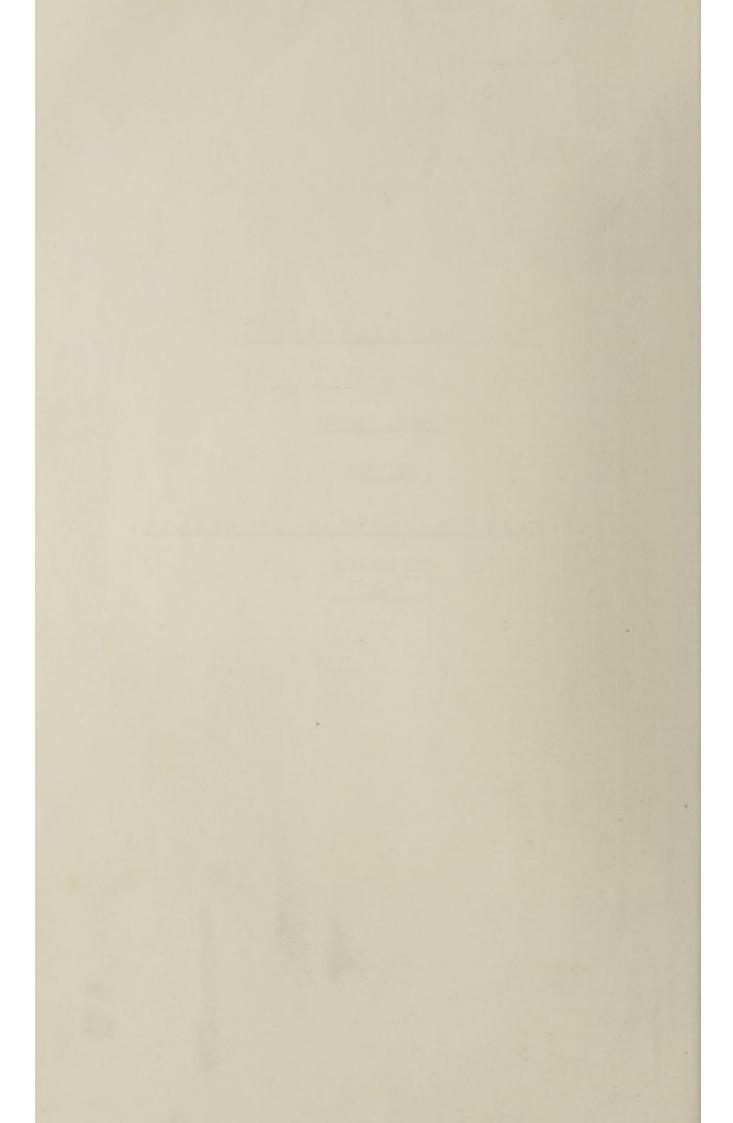
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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1952.



To The Right Worshipful the Mayor, Aldermen and Councillors of the City of Peterborough.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the health of the City for the year 1952.

The health of the City has, on the whole been good, throughout that period and there are few ma ters which call for other comment than that contained in the body of the report.

The Registrar General's estimate of Mid 1952 population shows a decrease on the corresponding figure for 1951, which was, itself, below the preliminary census figure recorded in the same year. With a natural increase (the figure by which the number of births exceeds the number of deaths) of 185 and 147 in 1952 and 1951 respectively and with the abundant employment opportunities afforded in the City to attract people to it from less favoured localities it is difficult to see how this conclusion is reached.

It has been the custom in this Report for some years past to compare statistics for the City with those of England and Vales and of Towns having a population of between 25,000 and 50,000 based on the 1931 census. The corresponding Table on this occasion contains, for comparative purposes, figures relating to towns having a population of more than 50,000 at the 1951 census. On a strict population basis the City of Peterborough now lies in this urban group but it is felt that it has more in common with the 25,000 - 50,000 bracket, which has therefore again been included.

The continued progress in housing is noted with much satisfaction. The fight for a diminishing list of waiting applicants having new been successfully waged for two consecutive years, it is perhaps possible to see the end, in the not too distant future, of this formidable problem in its most acute phase, but sight must not be lost of the fact that in the City there are houses, ripe for demolition, not all of the occupants of which have approached the City Council for rehousing.

In conclusion, I should like to take this opportunity of expressing my thanks for the help I have received throughout the year - not only in the compilation of this Report - from all Departments in the Town Hall: for the co-operation extended to me by General Practitioners in the City: for the work of Doctor C.C.B. Gilmour of the Peterborough Public Health Laboratory in undertaking all bacteriological examinations and finally to Mr. E.H. Colman who has again, and without my asking for it, made available for the purposes of this Report his records of the rain fall in the City during the year.

I am, Yours faithfully,

1.1. Thrimmy

City Health Department, Town Hall, Peterborough.

PETERBOROUGH.

ANNUAL HEALTH REPORT,

PUBLIC HEALTH COMMITTEE

(as at 31st December, 1952)

Chairman - Alderman H.J. Farrow.

Vice-Chairman - Councillor R.W. North.

THE MAYOR (Councillor Mrs. M. Wood J.P.) (ex-officio)

THE CHAIRMAN, FINANCE COMMITTEE (ex-officio)

Councillor G.R. Chamberlain.

Councillor F.G. Eagle.

Councillor J.W. Fowler.

Councillor H.R. Horrell Councillor A.W. Viney M.B.E. Councillor Acb. Robinson M.B.E., J.P. Councillor Mrs. M. Wood J.P.

Councillor G.A. Smith

Councillor J.E. Swain. O.B.E., J.P.

Councillor Mrs. M. Swift.

MEDICAL OFFICER OF HEALTH

HENRIETTA YOUNG, M.B., B.Ch., B.A.O. (Temporary appointment until 29th February, 1952)

W.D. Swinney, M.B., Ch.B., D.P.H. (from 1st March, 1952)

CITY OF PETERBOROUGH.

General Statistics, 1952.

Area of City in acres			 10,022
Population: - Census 1951 Registrar-General's Estima do. do.	te, Mi	d 1951	53,412 53,060 52,960 Ø
Density of Population, Persons per acre			 5.28
Number of Inhabited Houses, End of 1951 do. do. End of 1952		:::	15,900 (approx) 16,280 (approx)
Housing Density, Houses per acre			 1.62
Mean number of occupants per house			 3.25
Rateable Value as at 1st October, 1952			 £368,543
Product of a Penny Rate			 £1,491:10:8d.

Ø Statistics in this Report are based on this estimate of resident population.

VITAL STATISTICS, 1952.

Live Births.			
	Male	Remale	Total
Legitimate	421	328	749
Illegitimate	21	22	43
Total Live Births	442	350	792
Live Birth Rate per 1,000 estimated re	esident	population:	14.95
Still Births.	Male	Female	Total
Legitimate	4	8	12
Illegitimate	0	0	0
Total Still Births	4	8	12
Still Birth Rate per 1,000 total (Live	and S	till) births	: 14.92
Still Birth Rate per 1,000 population	:		0.22
Total Birth Rate (Live and Still) per	1,000	population	15.17
(Comparability fact	or, 1.0	0)	

+

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m	10	-	*	34	O'N	
122	c	Y.L.	-14			

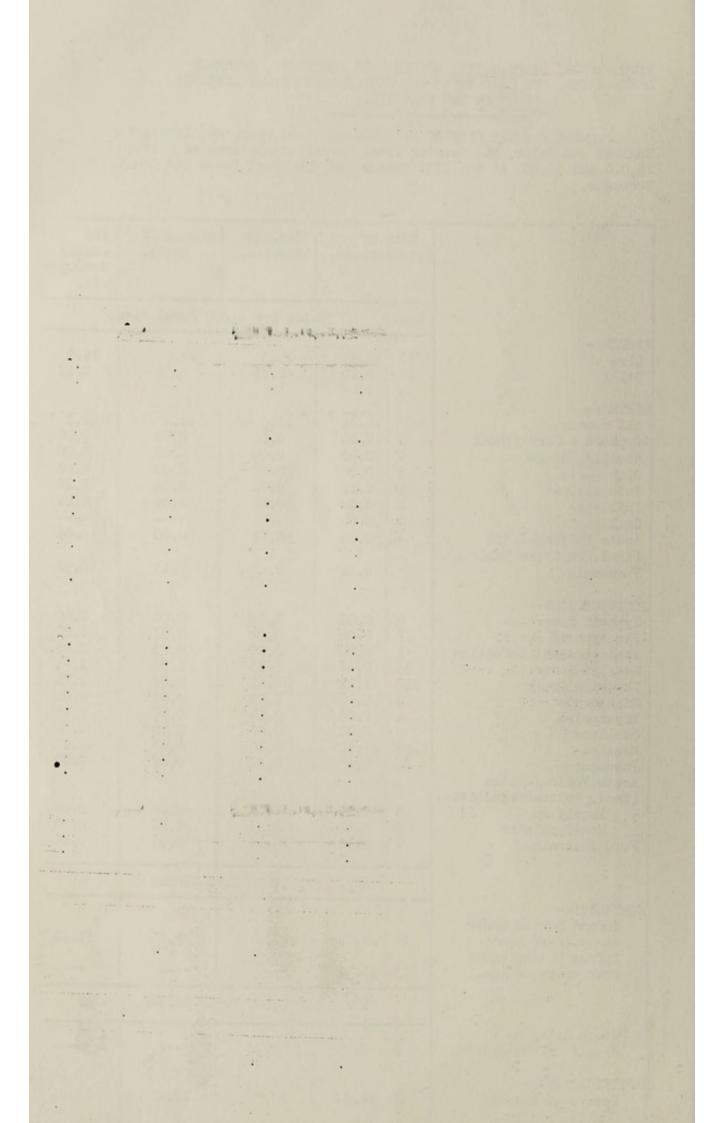
		_					
	Nale	Female	Total				
	306	301	607				
Crude De	ath Rate per 1,00	00 population:	11.46				
Index De	ath Rate per 1,00	00 population:	11.23				
(Comparability factor, 0.98)							
Mean Age	at Death: 66.02	yorra.					
Maternal	Mortality.						
			lt of childbirth:- -General's Short List)				
		Deaths	Rate per 1,000 Total Births				
Pregnancy	y, childbirth, abortion.	0	0.00				
Infant Me	ortality.						
	(Deaths of inf	Cants under one j	year of age)				
	Male 1	Female	Total				
	11.	7	18				
Infantil	e Mortality Rate	per 1,000 Live 1	Births: 22,72				
Neonatal	Mortality.						
	(Deaths of infa	nts under four w	eeks of age)				
	Male	Pemale	Total				
	6	7	13				
Neonatal	Mortality Rate	per 1,000 Live B	irths: 16.41				
OTHER STATISTICS, 1952.							
Deaths from Enteritis and Diarrhoea (under 2 years) 0							
	" Coronary Disc	ease, Angina (all	l ages) 79				
. 11	Other Cardia	c Conditions	" 97				
11 1	" Malignant Ne	oplasm,	." 112				
"	Measles,		" 0				
11 1	" Whooping Cou	gh,	" 0				

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BIRTH-RATES, DEATH-RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH-RATES, AND CASE-RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1952.

Figures for the City of Peterborough, and where available, for England and Wales, 160 Smaller Towns having populations of between 25,000 and 50,000 at the 1951 Census and 160 Great Towns and County Boroughs.

		y of berough.	England & Wales.	160 Smaller Towns.	160 County Boroughs etc.	
	Nos.	R	ates per 1,0	000 Population	١.	
BIRTHS:- Live Still	792 12	14.95	15.3 0.35	15.5 0.36	16.9	
DEATHS:- All causes Typhoid & Paratyphoid Whooping Cough Diphtheria Tuberculosis Influenza Smallpox Acute Poliomyelitis (incl. Polioencephalius) Pneumonia	607 0 0 0 9 1 0 2	11.23 0.00 0.00 0.00 0.17 0.02 0.00 0.04	11.3 0.00 0.00 0.00 0.24 0.04	11.2 0.00 0.00 0.00 0.22 0.04 0.00	12.1 0.00 0.00 0.00 0.28 0.04 9:01	
NOTIFICATIONS:- Typhoid Fever Paratyphoid Fever Meningococcal Infection Scarlet Fever Whooping Cough Diphtheria Erysipelas Smallpox Measles Pneumonia Acute Poliomyelitis (incl. Polioencephalitis) Paralytic Non-Paralytic Food Poisoning	0 2 1 35 112 0 4 0 1,458 24 3 2 2	0.00 0.04 0.02 0.66 2.12 0.00 0.08 0.00 27.55 0.45	0.00 0.02 0.03 1.53 2.61 0.01 0.14 0.00 8.86 0.72	0.00 0.03 0.03 1.58 2.57 0.03 0.12 0.00 8.49 0.62	0.00 0.02 0.03 1.75 2.74 0.01 0.15 0.00 10.11 0.80	
		Rates p	er 1,000 Liv	e Births		
MORTALITY:- Infant Deaths under one year of age Infant Deaths under four weeks of age.		22.72	27,6	25.8	31.12	
	Rates per 1,000 Total Births.					
Women dying as a result of childbirth.	0	0.00	0.72			
NOTIFICATIONS:- Peurperal Pyrexia	42	52.23	17.87	10.22	23.94	



-7-STATISTICAL ANALYSIS OF CAUSES OF DEATH 1952.

Causes of Death as given in the	N	Number	s.	Rates per	Rates per
Registrar-General's Short List.	M	F	Total	1,000 pop.	1,000 Deaths.
manual de Desiration				0.170	21.76
Tuberculosis, Respiratory	9	0	9	0.170	14.76
Tuberculosis, other	0	0	0	0.000	0.00
Syphilitic Disease	0	4	6	0.113	9.84
Diphtheria	0	0	0	0.000	0.00
Whooping Cough	0.050	0	0	0.000	0.00
Meningococcal Infections	0 2		0	0.000	0.00
Acute Poliomyclitis	1 50	0	2	0.037	3.28
	0	0	0	0.000	0.00
Other infective & parasitic discoses		2	2	0.037	3.28
Malignant Neoplasm; stomach	11	11	22	0.415	36.08
Halignant Neoplasm; lung, bronchus	14	1 1	15	0.263	24.60
Malignant Neoplasm; breast		17	7	0.259+	23.24+
Malignant Neoplasm; uterus		4	4	0.148+	13.28+
Other Malignant & Lymphatic	70	77	1 17	7 770	307 70
Neoplasms	32	31	63	1.379	103.32
Leukaemia, Aleukaemia	1	0	1	0.019	1.64
Diabetes	1	6	7	0.132	11.48
Vascular lesions of Nervous System	39	59	98	1.852	160.72
Coronary Disease, angina	45	34	79	1.493	129.56
Hypertension with Heart Disease Other heart disease	2	4	6	0.113	9.84
Other circulatory disease	39	52	91	1.719	149.24
Influenza	0	19	31	0.585	50.84
Fneumonia	9	13	22	0.189	1.64 36.08
Bronchitis	14	12	226	0.491	42.64
Other diseases of respiratory	14	12	220	0.491	42.04
system	1	1	2	0.037	3.28
Ulcer of the stomach & duodenum	12	0	12	0.226	19.68
Gastritis, Enteritis & Diarrhoea	2	2	4	0.075	6.56
Nephritis & Nephrosis	7	4	11	0.207	18.04
Hyperplasia of Prostate	10	-	10	0.3800	32.300
Pregnancy, childbirth, abortion		0	0	0.000+	0.00+
Congenital malformations	1	4	5	0.945	8.20
Other defined & ill-defined diseases		19	44	0.831	72.16
Motor vehicle accidents	7	í	8	0.152	13.12
All other accidents	5	8	13	0.245	21.32
Suicide	4	2	6	0.113	9.84
Homicide & operations of war	0	0	0	0.000	0.00
TOTALS	306	301	607		

⁺ Rates per 1,000 estimated female population and per 1,000 female deaths.

Ø Rates per 1,000 estimated <u>Male</u> population and per 1,000 <u>male</u> deaths.

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COMMENTARY ON VITAL STATISTICS 1952.

Birth Rates.

It would now appear that the annual birth rate in the City has become more or less stabilized following the fluctuations in this figure resulting from the abnormal social conditions of war and immediate post-war years. The local figure, unfortunately, compares unfavourably with the birth rate for England & Weles and with that of various types of communities throughout the Country.

Comparison of Total Birth Rates per 1,000 population, 1952.

City of Peterborough.	15.17
England & Wales	15.65
160 Great Towns.	17.33
160 Smaller Towns.	15.86
London Administrative County.	17.94

The still birth rate is, however, a different matter and here the City of Peterborough compares very favourably with other rates throughout the Country, as grouped by the Registrar General for statistical comparison. These vary from 0.34 to 0.43 per 1,000 population and from 19.2 to 24.6 per 1,000 total births, the corresponding Peterborough figures being 0.22 and 14.9

Death Rate.

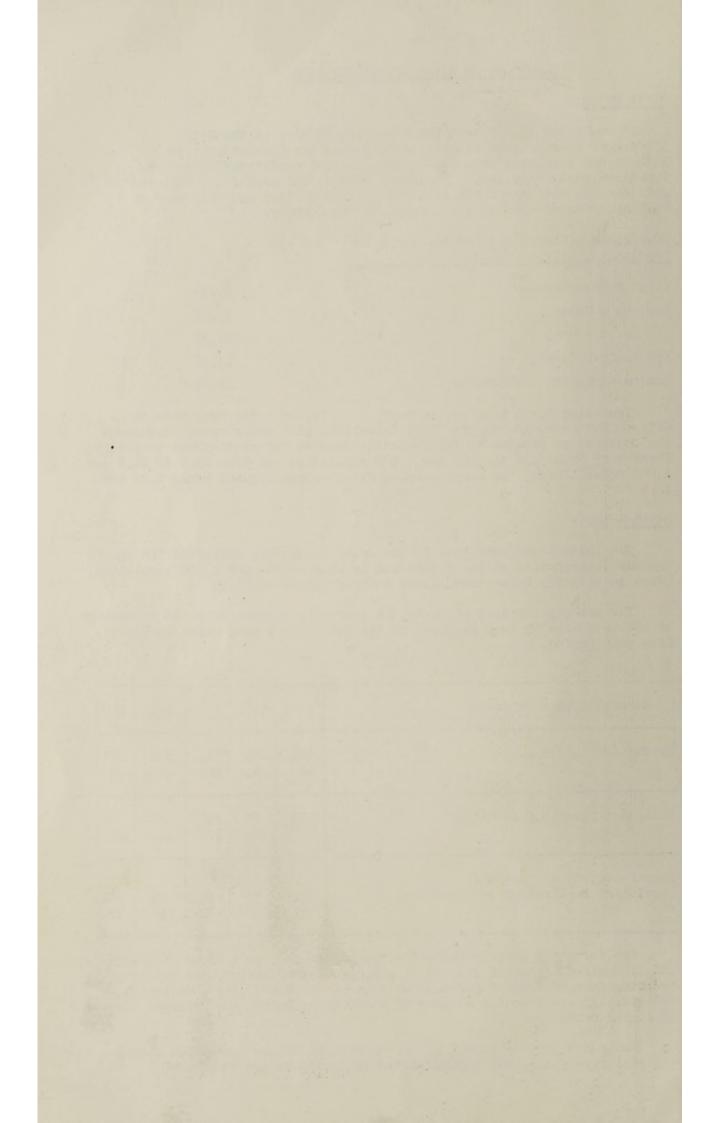
The index death rate, that is the crude death rate corrected for age and sex distribution of the population is 11.2 deaths per 1,000 population, which is slightly below the England & Wales figure of 11.3.

The principal causes of death, in general groupings with the percentage of totals caused by them is given in the following table, which covers a five year period.

	Year.				
General Causes of Death.	1952	1951	1950	1949	1948
Circulatory System Disease	305 51%	289 45%	314 48).	290 45%	238 42).
Malignant Disease (all sites)	112	93 14%	107	89 1455	98 18%.
Respiratory System disease (excluding respiratory tuberculosis)	51 8%	92 145	54 8%	70 115	56 10%

The foregoing clearly indicates the importance, as a cause of mortality, of all manifestations of disease of the circulatory system, and a further breakingedown of those figures shows that of all these, the most important individually are Vascular Lesions of the Nervous System and Coronary disease or angine pectoris.

Malignant disease in all sites, which with but one exception during the past five years, has ranked second in mortality importance to



Circulatory System disease causes on the average only about one third of the number of deaths for which the latter is resp.nsible.

Beginning with the year 1950, it has become possible, from the information supplied by the Registrar General, to compare the number of deaths resulting in the City from Malignant disease in certain different sites, in the two sexes. In this three year period, Malignant pathology of the stomach has caused 29 male deaths and 28 female:
Malignant disease of the lung has been responsible for the deaths of 33 men but of only 7 women and in all other sites the figures for deaths from Malignant disease have been male, 90 and female 116, the latter figure being reduced to 81, if Malignant Meoplasms of uterus and breast, amounting to 35 cases and which have no corresponding parallel in the male, are excluded.

What is immediately striking in those figures is the comparative similarity in sex distribution of two of them and the great discrepancy in the third - deaths from malignant disease of the Lungs and Bronchus. These figures, in themselves too small in the aggregate to justify any dognatic deduction neverthless do tend to substantiate the findings in many other parts of the country and indeed, of the world, that Malignant Neoplasms of the Lungs and Bronch is a disease more prepondrant in the male sex than would happen by mere chance, but the reason for this, dispite many articles in professional journals and the lay press is by no means clearly established at the present time.

On studying the causes of death one cannot fail to notice that 27 deaths resulted from causes which must, in the ultimate analysis, be regarded as preventable: - 8 deaths from motor vehicle accidents, 13 from accidents of other kinds and 6 from suicide - and it is not without interest and importance to note that of the 13 accidental deaths not involving motor vehicles, only 3 (deaths by accidental drowning) occurred other than in the home. There were no accidental deaths resulting from employment, except when that employment involved the use of a motor vehicle.

The ages at which accidental death occurred are as here listed; which bears out that the old, even more than the very young, form the most accident prone section of the population.

Years.	0-1	2 - 9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59
No. of accidental deaths.	1	2	-	3	2	2	-
Years	60 - 75	Over	75.				
No. of accidental deaths.	4	7					

The 6 suicidal deaths occurred in the age range of 10 - 65 years and it may be asked why they should be considered as capable of prevention. All suicides are basically the outcome of one thing - an unsuccessful resolution of conflict between the individual and his environment and their prevention lies in the provision of social services which will make available, where and when it is required, the necessary help and guidance to resolve that conflict successfully: social services, also, which are able to acquaint themselves of specific needs for their help before it is too late.

It is satisfactory to report that, despite the epidemic proportion of measles notifications during the year, no deaths occurred from this, or any other common childhood infection, but it is with regret that two deaths from acute policyclitis are recorded.

Deaths in age groups and by sexes 1952.

Age Groups (in years)	Male	Penale	Total
0 -	11	7	1,8
1 -	2	0	2
5 -	3	'n	4
15 -	6	0	6
25	18	13	31
45 -	88	60	148
65	87	76	163
75 -	91	144	235
Totals	306	301	607

The above table gives the ages at which death occurred in the two sexes and strikingly bears out the longevity of women compared with men. Only 29.7% of male deaths occurred over the age of 75 years whereas 47.8, of female deaths occurred in this period. In the age group 65 - 75 years male deaths exceeded female deaths, thereby reducing the possible male deaths over the age of 75 years and the same is true of deaths occurring between the ages of 45 and 65 years.

Maternal Mortality Rate

No deaths under this heading occurred during the year. There was one such leath in 1951 and a total of six since 1945.

Infant Mortality Rate.

The deaths of children under one year of age totalled 18 during the year, representing a rate of 22.72 for 1,000 live births. This is the lowest figure yetattained in the City and compares most favourably with corresponding indices for England and Wales and other statistical subdivisions of the Country as reference to the detailed table shows. We have not, however, yet reached the stage when infant mortality figures cannot be expected to improve still further: certain of the Scandanavian countries in particular are shead of us in this respect, but a local improvement of from 56.0 infant deaths per 1,000 live births in 1946 to 22.72 in 1952, cannot but give cause for satisfaction.



-llThe following table gives details of infant deaths:-

Age	Number of deaths.	Causes of death.
Under 1 day.	5	Prematurity Atelectasis and Prematurity.
Under 7 days but over 1 day.	3 1 1 1	Prematurity. Hydrocophalus and Spina bifida Anencephalus. Corebral Birth Injury and Prematurity.
Under 4 weeks but over 1 week.	1	Congenital heart disease.
Under 6 conths but over 1 month.	1 1 1	Asphyxia by inhalation of regurgitated food. Acute intestinal obstruction and Intuspusception. Acute Broncho-preumonia.
Under 12 months but over 6 months.	1	Lung Abscess. Acute Broncho-pneumonia.

Neo-Natal Mortality Rate.

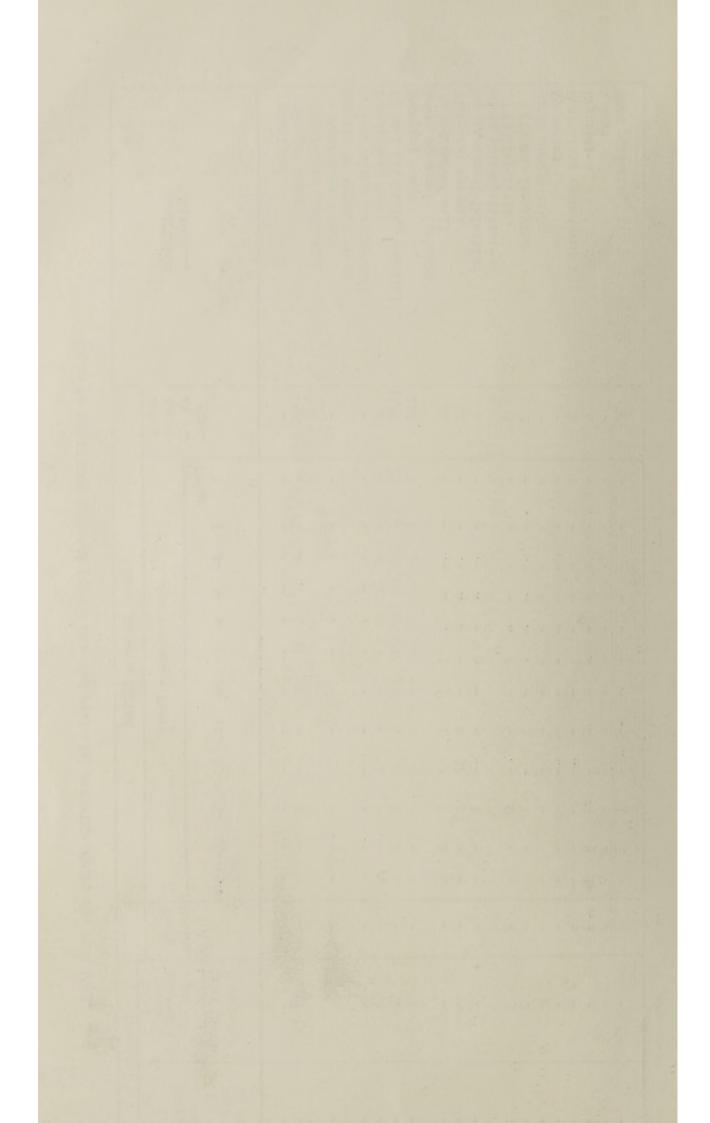
Included in the 18 deaths of children under 1 year of age are 13 which occurred under the age of 4 weeks. This constitutes a Neo-Natal Mortality rate of 16.41 per 1,000 live births as compared with 14.01 in 1951. No figures are available from other perts of the country for purposes of comparison.

In 1951 there were 11 Neo-Natal deaths.



Acute policinyclitis:-Puerperal Pyrexia Meningococcal Infection Acute pneumonia (primary Enterie or typhoid fever Food poisoning Erysipelas Ophthalmia neonatorum Acute encephalitis Whooping cough Paratyphoid Fever Measles (excluding rubella, referre Scarlet Fever Diphtheria (including membranous croup) and influenzal (excluding paratyphoid) (1) Paralytic (2) Non-Faralytic Notifiable Diseases. 14,58 11,2 cases at all Total eges. 51 454 0811 Under 116 911 ۲ 14.5 1 Total Cases Notified 2592 3-Age Periods - Years 206 5 797 5-10-1511 NO I 15-1511 20- 35- 45-65 over . 37 2 10.1 N Deaths Total cases removed from the district 51 11111100 Hospital to district. belonging Hospital persons Deaths 1 1 1 1 1 1

Challes ON INFECTIOUS DISEASES (other than Tuberculosis) NOTIFIED DURING THE YEAR 1952.



NOTIFIABLE INFECTIOUS DISTASES.

Scarlet Fever.

The position with regard to this disease changed little during the year, when 35 cases were notified compared with 36 in 1951. This number of notifications represents an incidence of 0.66 cases per 1,000 population, the corresponding figure for the country as a whole being 1.53.

It is difficult to find the logic underlying the continued notification of Scarlet Fever when Streptococcal Sore Throat or Tonsillitis - Scarlet Fever without a rash - has never been the subject of compulsory notification. It would seem only reasonable that all upper respiratory tract Streptococcal infections should be notified to the Medical Officer of Health, or none at all.

Paratyphoid Fever.

For the first time since 1949, when there was one case, Paratyphoid Fever, appeared in the notification lists, two cases occurring in the same family. Despite the fullest of investigations the source of infection could not be established. In connection with those enquiries, great thanks are due to Dr. C.C.B. Gilmour, Director of the Peterborough rublic Health Laboratory, for his work in attempting to trace the source of infection through the sewage system of the City.

Despite a prolonged stay in hospital both cases of this disease had to be discharged as Paratyphiod carriers a condition which persisted for several months. All home contacts were inoculated with T.A.B. Vaccine, but eventually the carrier condition in both patients cleared up, no further cases having occurred.

Measles.

Following on the quiet year of 1951, with only 108 cales of this disease notified, 1952 again demonstrated the bienniel epidemic trend of measles with a total of 1,458 cases, the highest number in a twelve month period since notification was instituted. The attack rate of 27.55 per 1,000 population was more than treble the index of 8.86 for England & Wales.

When it is considered that 634 cases were children below school age, including 144 cases in children under 2 years, and that only 23 cases occurred in those over 10 years, it is extremely satisfactory to report that there were no deaths from Meakles during the year.

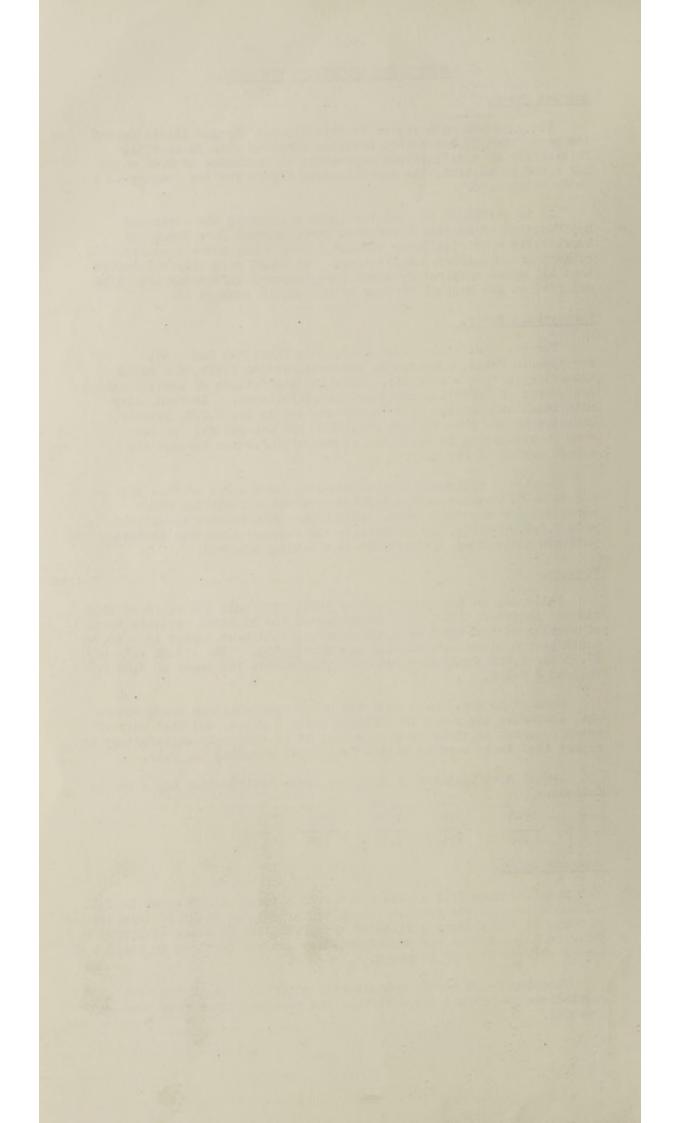
Annual notifications of Measles, since notification began are as follows:-

1948	1949	1950	1951	1952.
	-	-	No. of Concession of Concessio	SATEMATICAL PROPERTY.
504	291	1120	108	1458.

Whooping Cough.

Notifications fell to 112 cases from a total of 398 cases in 1951 and again no case was fatal. As with heasles, the brunt of this disease is borne by the younger section of the population 68 cases occurring in children below school age and no notification was received in respect of a case over the age of 10 years.

Thooping Cough became compulsorily notifiable under the same regulations as Measles and notifications received since that time are appended.



1948	1949	1950	1951	1952.
197	117	88	398	112

The incidence in 1952 was, in England and Wales, 2.61 cases per 1,000 population and in the City of Peterborough, 1.11: a complete reversal of the previous year's figure when the local incidence was almost double that of the general.

Pneumonia (Primary)

The notification of 24 cases of acute primary Fneumonia gives an incidence of 0.453, which compares favourably with the National index of 0.72. There were no deaths among these cases, but one death, occurring in the City was certified as due to Lobar Pneumonia, only.

In 1951 Pheumonia notifications totalled 21, again with no fatal cases.

Puerperal Pyrexia.

In the first full year covered by the Puerperal Pyrexia Regulations, 1951, 42 notifications of this condition were received. In the previous year, in which only the last five months of the year were covered by the new Regulations, there were 35 notifications. All cases, in both periods, occurred in Maternity Hospitals, but this is no reflection on the obstetric standards in these institutions but rather a credit to the staffs for their meticulous observance of notification requirements.

Enquiries about many of these cases elicited the information that the rise in temperature, which is the basis for notification, was not in any way directly associated with child-bearing - it was frequently due to an interment cold or some similar condition. As the Regulations at present stand, notification figures for Puerperal Pyrexia are a completely worthless and even misleading indication of the true incidence of infection properly attributable to childbirth.

Meningococcal Infection.

One case, confirmed bacteriologically, was notified during the year, the first notification of this disease since 1947. The patient made a complete recovery.

Poliomyelitis.

The 5 cases of acute policyelitis notified in 1952 give an incidence of 0.09 per 1,000 population which corresponds exactly with the index for England and Wales. Of these cases 3 were paralytic and 2 non-paralytic. Two of the paralytic cases were unfortunately fatal, a 7 year old boy and a man of 35 years. The third case in this category suffered from severe and extensive paralysis and still, a year later, has very considerable residual disability although continuing to make progress.

One of the notified non-paralytic cases was the father of the boy who succumbed to this disease, otherwise there was no demonstrable connection between cases.

The 40% mortality Rate, in this series of 5 cases, represents a death rate of 0.03 per 1,000 population, which is substantially higher than the corresponding national figure of 0.01 deaths per 1,000 population from this cause.

Ophthalmia Neonatorum.

The one case of this disease notified caused no damage to the baby's eyes.

Erysipelas.

Four cases were notified in 1952. In 1951 there were 2.

Food Poisoning.

Two unrelated cases were notified during the year, in both of which symptons were mild and of short duration. Bacteriological examination of faecal specimens gave negative results and in neither case was it possible to implicate any particular food stuff.

The national incidence of food poisoning is 0.13 cases per 1,000 population; the figure for Peterborough being 0.03.

General.

It has now become almost an accepted routine matter to remark on yet another year of freedom from Diphtheria and it is, regrettably almost an equally routinised procedure to call for a higher diphtheria immunisation rate among young children. It is difficult to know what can effectively be done to procure this end, when there are parents who are blind and deaf to publicity and educational campaigns and to all forms of personal approach. Of such parents the most charitable thing to think is that it takes all kinds to make a world and that all are not endowed with the same degree of reason and common-sense.

The foregoing remarks concerning Diphtheria immunisation are equally applicable to Small-pox vaccination.

TUBERCULOSIS.

New Cases and Mortality during 1952.

		New Ca	ises.			Deaths		
Age Periods.	Respi	ratory	Respi	on- ratory Respir		ratory	Respin	on- ratory.
	'M.	F.	15.	F.	II.	F.	M.	F.
Years 0 - 1 - 5 - 10 - 15 - 20 - 25 - 35 - 45 - 55 - 65 and upwards.		2 3 8 9 14 2 2 1	1 - 2 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 3 3 1			
Totals 1952.	39	41	5	1	9	-	-	-
Totals 1951.	36	25	4	1	13	1	-	1
Totals 1950.	43	30	1	-	8	6	-	-

Total notifications of Respiratory Tuberculosis rose in 1952 to 80, an increase of 19 from the 1951 figure of 61, the corresponding figure in 1950 being 73.



There was little change in the incidence of notifications of non-Respiratory disease, 6 cases being notified in 1952 and 5 in 1951.

In considering the increase of Respiratory notifications it must be borne in mind that a visit to the City of a Mobile Mass Radiography Unit took place during the year and that this Unit discovered 21 fresh cases of lung infection in the Administrative County of the Soke of Peterborough. From reference to locally kept records it appears that 20 of these were residents of the City. Notification figures in post-war years would at first sight suggest that there has been, however, an absolute increase in this condition, as the following table shows.

Year	New cases of Tuberculosis	
1946 1947 + 1948 1949 1950 1951 1952 +	32 44 33 43 73 61 80	

+ Visit of Mass Radiography Unit.

That this is a correct interpretation of these figures is at least open to doubt and the part played by other factors is impossible to estimate. Among such factors are the National Health Services having made medical attention freely available to all, thereby helping to ensure that medical advice is sought without having to count the cost and the extension of welfare provisions which have undoubtedly made it possible for many to face up to illness, its dignosis and treatment, instead of fighting a losing battle with a condition, the recognition of which too often spelled an end to family financial security. Credit should also be given to Health Education which has, in the field of Tuberculosis helped many sufferers to seek advice in the knowledge that a confirmation of their fears is no longer a death sentence, or at best a living death.

For the second successive year deaths from Respiratory Tuberculosis shows the same disproportion between the sexes: 9 male deaths and no female deaths but it is satisfactory to note that this is a total decrease of 5 deaths compared with 1951.

Tuberculosis Register - 1952.

	Resp	iratory	Non- Respiratory	
	14	F	M	F
No. on Register 1/1/1952.	122	103	8	6
Notified during 1952 Removed during 1952	21	7	1	-
No. on Register 31/12/1952.	143	137	12	7

3. .

Mass Radiography Survey, 1952.

During the period leth April - 3rd July an X-Ray Survey was undertaken in Peterborough by the Cambridge Mobile Mass Radiography Unit. Public response was most satisfactory, necessitating the establishment of subsidiary appointment bureauxin addition to the central bureau originally set up and expected to be adequate for the anticipated demand. Throughout the whole period of the Units visit every session was fully booked and more requests were received for examination than time, unfortunately, permitted.

Special attention was directed towards the investigation of the following groups, although any person over the age of 14 years was accepted for examination:-

- 1. Food Handlers.
- 2. Contacts of cases of Tuberculosis actually attending a chest clinic.
- 3. School Teachers, Nursery Nurses and others in contact with young children.
- 4. Expectant Mothers.
- 5. Persons referred by General Medical Practitioners.

Appropriate measures, by liaison in the proper quarters, were taken to ensure a high attendance of those in the foregoing categories and in addition to nine weeks during which the survey was open to the general public, two weeks were devoted to a survey of the staff of a large industrial (engineering) firm.

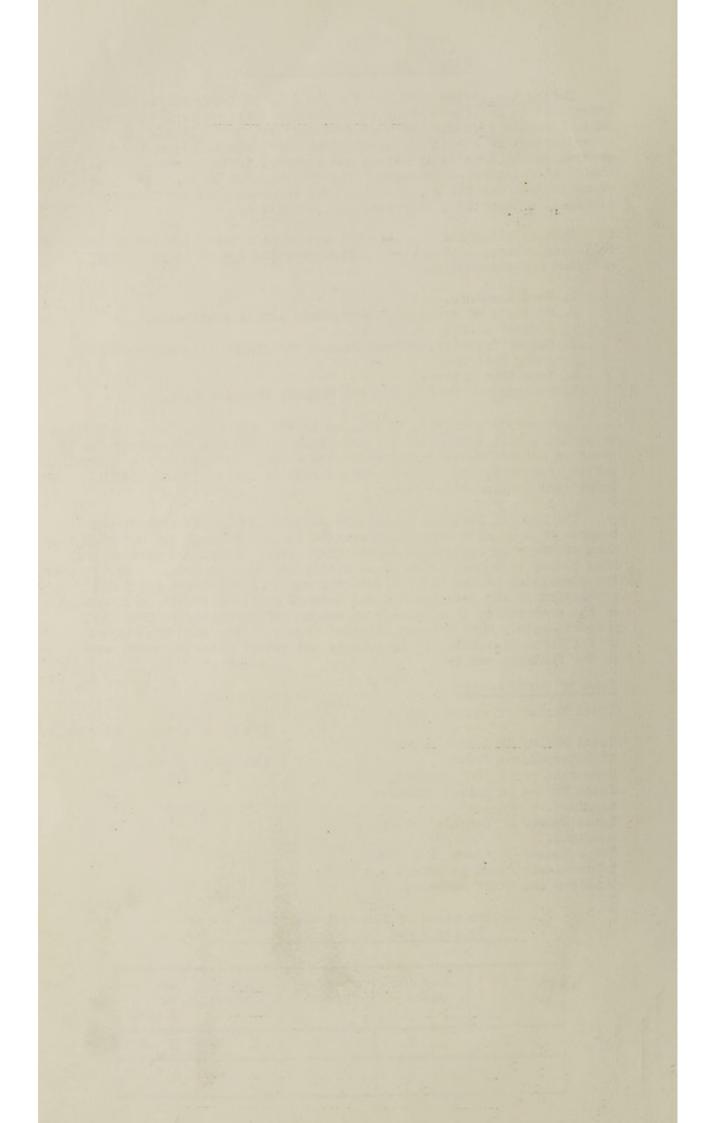
The Medical Director has kindly made available all statistical records of the units work while centred in Peterborough but unfortunately none of these is applicable to the City alone, the entire area of the Soke having been dealt with as an entity for this purpose. As, however, the population of the City of Peterborough so far exceeds the total population of the Peterborough and Barnack Rural Districts, and because of the probability that, purely on account of proximity to the unit, proportionately more persons attended from the City than from either of the Rural Districts, it is perhaps not out of place to quote some of the findings here:-

Soke of Peterborough.

Total Number of Attendances.	11,892
Total Number of Active Cases of Tuberculosis found.	(18.6% of total population.) 21 (13 Male: 8 female.)
Case rate per 1,000 examined.	1.7
Total Number of School Children	2 017
examined. Total Number of Schools' Staff	1,043
examined.	227
Total Number of cases of active Tuberculosis found in School	
Children and Staff members.	0

Active cases of Tuberculosis found, by sexes and age groups.

15 - 24 years	25 - 34 years	35 - 44 years	45 - 60 years	over 60 years.
M F	H F	LI F	li F	11 F
- 3	9 4	2 -	1 -	1 1



Other figures provided deal with the Survey as a whole and include persons examined from the areas of Health Authorities surrounding the Soke of Peterborough and it has therefore been thought inedvisable to include them, but it is worth noting that in the survey of an industrial unit in the City the case rate per 1,000 examined was 5.7 compared with a figure of 1.7 for the Soke of Peterborough and 2.1 for the entire survey of the general public. This, it is pointed out, may possibly be due to the higher group. response of the staff of an industrial undertaking usually in the region of 70% - 80% - compared with the 18% response of the general population.

ENVIRONMENTAL HYGIENE

Housing

Statistics.

(Figures in brackets, inserted for easy comparison, refer to the year 1951.)

No. of (New Houses erected during 1952 :-

(i) By the City Council 337 (268)

(ii) By other bodies and persons 47 (32)
Total 384 300

Types of New Housing accommodation comprising (i), above :-

(a) Houses 301 (152)

(b) Flats for single persons (spinster or widow) 8 (24)

(c) Bungalows for aged persons 12 (12)

(d) Flats for childless couples 16 (0)

(e) Aluminium Bungalows for Key
Workers

Total 337 (268)

Additional Housing Accommodation made available by the City Council other than by new building.

(a) River Lane Hostel 7 flats

(b) Ministry of Works property, Bishops Road. 3 bungalows.

Total 10 units.

Total housing units becoming available during the year, excluding private building 347 (297)



Provision was also made during the twelve month period for a further 133 families, granted tenancies of council houses available for re-letting, this figure including 44 inter-estate transfers, arranged to ensure the best possible use of houses, to alleviate overcrowding which had arisen by increasing family sizes and to minimise under-occupancy of properties the tenants of which, no longer required so large a house.

The total number of new family units rehoused during 1952 is thus 426, compared with 334 in 1951 and 224 in 1950.

Housing Requirements.

The following table summerises the condition of the City Housing Register of applicants at the year's end and contrasts the totals with the corresponding figures for twelve months previously.

	Distribution according to number of children.								Totals.			
Category	S.P.	0	1.	2	2 3	4	5	6	7	8	1952	1951
General	-	701	503	228	84	28	8	2	-	1	1,555	1,919
Single Persons Flats.	53	_	-	-	-	-	-	-	-	-	53	67
Old Persons Bungalows.	-	14	-	-	-	-	-	-	-	-	14	35
Sub-Totals.	53	715	503	228	84	28	8	2	-	1.	1,622	2,021

It is nost satisfactory to note the improvement in the total of waiting applicants between December 1951 and December 1952 and this improvement has now been maintained for two successive years, whereas at the end of 1950 the waiting list had increased by 256 in the preceding twelve month period.

These 1,622 applicants represent a total number of 4,574 persons. The corresponding figure one year earlier was 5,826.

Included in this total of 1,622 are 217 applicants who already hold the tenancy of houses alequate to their needs and who cannot be considered as seriously qualifying for rehousing by the City Council.

The assumption by Local Authorities of so much of the responsibility for housing and re-housing the people does not end with the supply of houses and it is, perhaps, not out of place here to note that during 1952, the City Housing Manager and his Staff dealt with 2,802 complaints from tenants concerning matters of defects and disrepair of properties and carried out 3,184 housing enquiries.

Housing Schemes - Progress during 1952.

C

In the course of the year the under mentioned Housing Schemes were brought to their maximum planned development, the last named, Mountateven Avenue Estate, being entirely built during this period.

	Number	of Houses.
	1952	1951
rown Street Estate	86	46
logsthorpe/Newark Estate	746	722
Countsteven Avenue Estate	54	Nil



Building on the following sites was begun and proceeded as shown

	Ultimate development in Housing Units.	Units completed by December 1952.	
Dogsthorpe North Estate	300	27	
Eastfield Estate	320 (approx)	304	

Allocation of Council Houses.

During the year, the City Housing Committee gave further consideration to the points scheme for selection of tenants, which was amended, with effect from 1st January, 1953, to provide points on a matrimonial hardship basis, determined by the period, since marriage, that an applicant has been without a separate home.

It is not too much to state that this angle of the problem of rehousing is of the greatest sociological importance as the securing of an earlier tenancy, because of hardship of this type, may well be the means of salvaging marriages, tending to founder, - with disastrous repercussions on family life and unity, - because of cramped accommodation, insufficient privacy and many other factors which, although perhaps small individually, in the mass build up over a period of time to a set of circumstances which for many, render marriage and family life a well-nigh insupportable mockery.

Overcrowding.

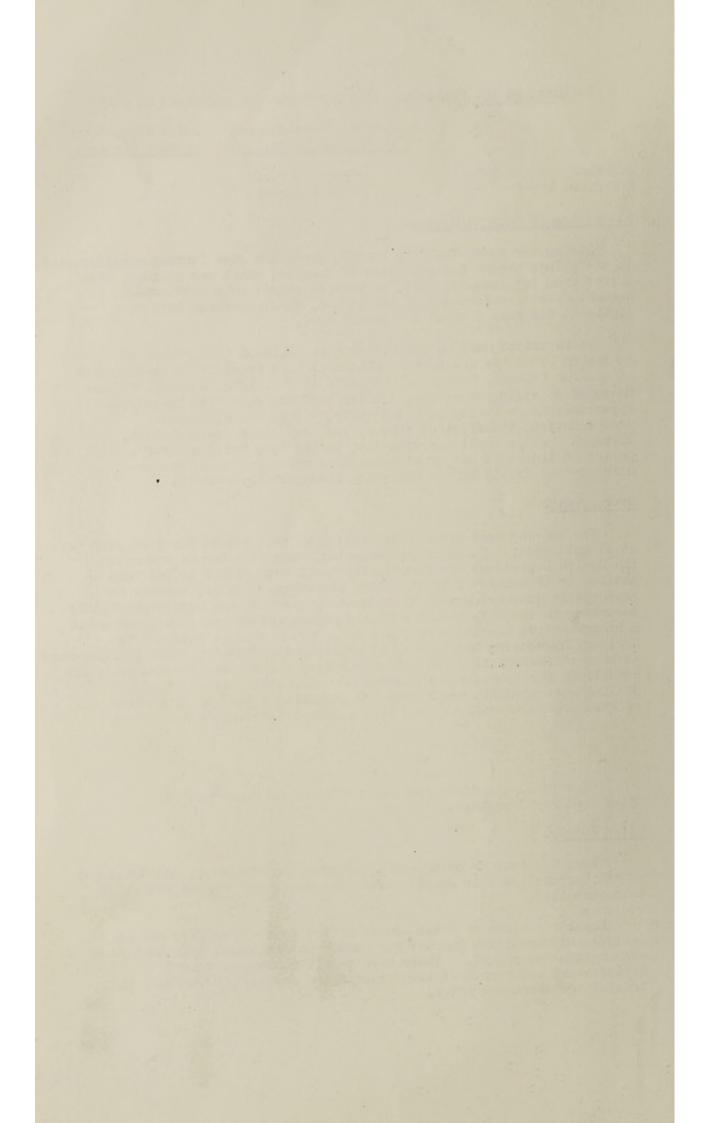
The remarks made under this heading in this report for last year still hold good. Cases of overcrowding, when they become known to the Health Department are immediately dealt with either by informal action, or if necessary by Statutery procedure. It is, however an inescapable conclusion that there must be a great deal more overcrowding occurring in the City than the Health Department knowns about, and until a comprehensive housing survey can be undertaken or an increase in Sanitary Inspectorate Staff makes it possible for District Sanitary Inspectors to have sufficient time available to survey their districts and ascertain conditions for themselves - instead of being endlessly employed in dealing with specific complaints and enquiries - the complete scope of this problem cannot be more than a matter for conjecture.

Other housing matters are dealt with in the Report of the Chief Sanitary Inspector.

Water Supply.

There has been no change in the source, distribution, and treatment of the Corporation main supply during the year, nor has any new plant been installed.

Regular samples of water are submitted to the Council's Public Analyst and Consulting Chemist for both bacteriological and chemical examination and report. These have on all occasions proved satisfactory and representative reports are appended, covering both treated and untreated water.



Reports by Public Analyst on: -

- 1. Untroated Water dated 22/6/52.
- 2. 3 Reports on Treated Water 17/6/52.

"Analysis of a Sample of Raw Water taken, 4/6/52.

Chemical Results in Parts per Million.

Appearance: Faint opalescence with a few mineral particles.

Turbidity: Less than 3.

Colour: Filtered: Nil		Odour: Nil	
pH	7.3	Free Carbon Dioxide	17
Electric Conductivity Chlorine present as	610	Total Solids	410
Chloride	22	Alkalinity as Calcium Carbonate	235
Hardness: Total 310	Carbons	te 235 Non-carbonate	
Nitrate Nitrogen	1.0	Nitrite Nitrogen less t	han 0.01
Ammoniacal Nitrogen	0.043	Oxygen Absorbed	0.20
Albuminoid Nitrogen	0.008	Residual Chlorine	absent.
Metals Iron:	0.08	Other metals absent.	

BACTERIOLOGICAL RESULTS.

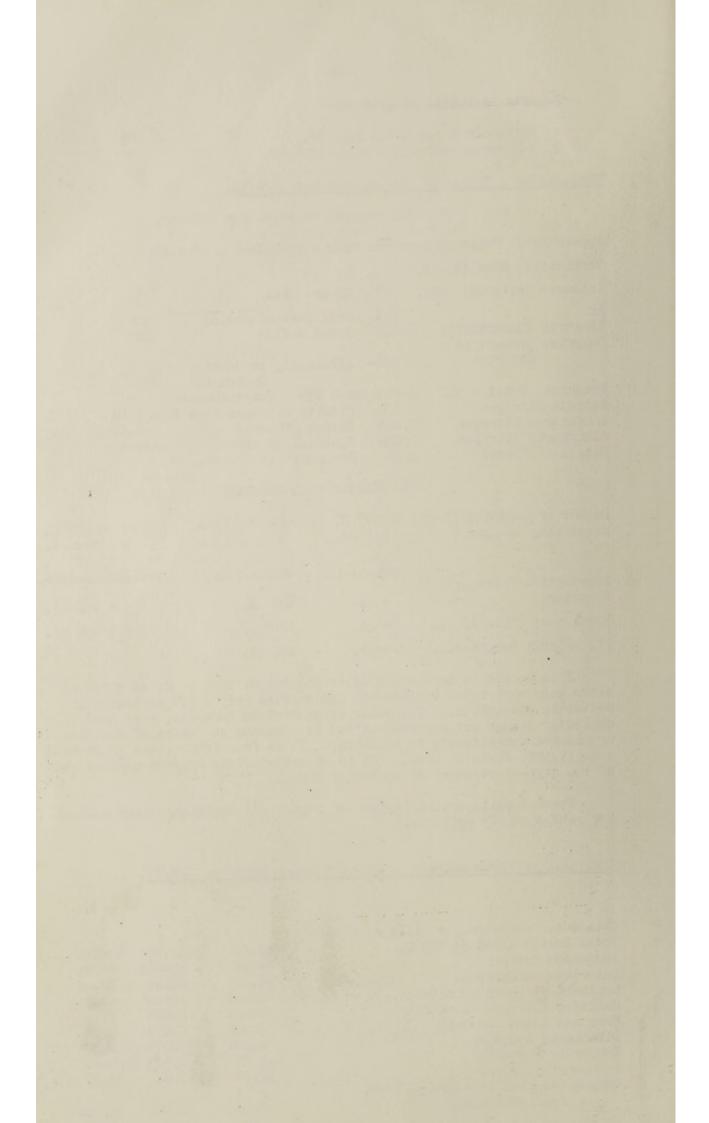
Number of Colonies (1 day developing on agar (0			3 days at 20° C: 2 per ml.
Presumptive Coli-maragenes	Present in.	Absent from.	Probable number.
Reaction	- ml.	100 ml.	0 per 100 ml.
Bact. coli (Type 1)	- ::1.	100 ml.	0 per 100 ml.
Cl. welchii Reaction	- ml.	100 ml.	

This sample is reasonably clear and bright in appearance since it shows only very faint opalescence and carries only a few particles of matter in suspension. The water is neutral in reaction, very hard in character though not excessively and it contains no excess of salinity or mineral constituents in solution. It is free from metals apart from a negligible trace of iron. It is of satisfactory organic quality and of the highest standard of bacterial purity.

These results are indicative of a pure and wholesome water suitable for public supply purposes."

"Analysis of three Samples of Treated Water taken on 12/6/52.

	1.	2.	3.
This water contains per million parts:-			
Total Solids dried at 180°C.	425.00	440.00	430.00
Suspended Matter	trace	absent	trace
Chlorides as chlorine	28.40	28.40	28.40
Oxidised Nitrogen as nitrate	absent	absent	absent
Oxidised Nitrogen as nitrite	absent	0.002	0.012
Free and saline Armonia	0.056	0.589	0.400
Albuminoid Ammonia	0.401	0.008	0.024
Temporary Hardness	245.00	240.00	245.00
Permanent Hardness	60.00	100.00	90.00
Oxygen absorbed in 4 hrs. @ 80°F.			
from N/80 Klin04	0.00	0.080	0.080



	1.	2.	3.	
pH value	7.10	7.10	7.10	
Appearance Slightly	y turbid	Clear	Slightly	turbid.
Odour	none	none	none	
Taste & Colour	normal	normal	normal	
Heavy Metals	absent	absent	absent	
Free Chlorine	0.020	Absent	0.450	
No. of colonies developing per ml.				
on agar at 21°C. in 72 hours.	70	3	2	
No. of colonies developing per ml.				
on agar at 37°C. in 24 hours.	0	0	0	
No. of colonies developing per ml.				
on agar at 37°C. in 48 hours.	22	1	0	
Coli - aerogenes count per 100 mls.				
at 37°C. in 48 hours.	0	0	0	
Faecal coli count per 100 mls.				
at 44°C. in 48 hours.	0	0	0	
Bacillus Coli (Presumptive) Absent in	100	100	100	
	mils.	mils.	mils.	

At the time of sampling these three waters were of satisfactory bacterial and chemical quality for human consumption, demestic use and dairy purposes."

Details of the volume of water supplied by the undertaking and its distribution in the City area are as here stated:-

average daily quantity of water supplied:to the City 2,670,000 gallons.
to neighbouring authorities ... 1,168,000 gallons.

(a)	with direct water supply	No. of dwellings in the City.	Estimated Population.
	by tap in the house.	15,719	51,094
(b)	with water supplied by standpipe.	548	1,825
(c)	with private supplies from wells, springs etc.	13	41

Drainage and Sewerage.

The construction of the Corporation's new Sewage Disposal plant at Fengate proceeded during the year, when the following work was completed.

Grit channels. All approach and grit channels were completed and the comminutors installed.

Storm water tanks. Completed ready for use.

Effluent drain. Excavation was completed during the year.

Sludge Pumping Station. The walls and roof were constructed and pumping plant installed.

Sedimentation tanks. Excavation was completed and 10,0 of the concreting carried out.

Aeration tanks. Excavation completed and 25% of concreting carried out.

. And the second s Final settlement tanks. Excavation completed and scaling coat laid.

Sludge drying beds. All were excavated and half of the concrete walls were built during the year.

Sewerage. During the year the 9" sewer in Welland Road was extended to Eastern Avenue.

Public Cleansing and Scavenging.

No change has been necessary in methods and equipment relating to the above.

Approximately 18,000 moveable ash bins are in use and there are no dry ash pits in the City area.

A very few complaints of non-removal of household refuse have reached the Health Department and have always been promptly dealth with on reference to the City Engineer.

These complaints have all been caused by basically the same trouble - a shortage of staff which, while reflecting well on employment opportunities in the City, does occassion difficulties to the Cleansing Branch of the Engineer's Department. There are comparatively few men whose final choice of employment is collection of garbage and many accept such work purely as a temporary measure till they can find some more congenial (and remunerative) occupation, with the result that disruptions of the service which depends for its efficiency on a full staff, working to a fixed time table, inevitably occur.

Public Swimming Pool.

From 3rd May to 14th September the Corporation's open air pool catered for 101,385 bathers and 23,291 spectatators. The corresponding figures for 1951 were approximately 74,000 and 21,000 Despite the great increase in actual bathers the "Break Point" method of chlorination, with a 6 hour turnover of the 360,000 gallons of water in the pool proved entirely capable of dealing with what was demanded of it and no sample of pool water was the subject of adverse bacteriological report. A typical report by the Council's Analyst follows.

Report on Water taken from the Swimming Pool at 12.0 noon August 13th 1952. Air temperature 70°F. Water temperature 65°F.

No. of swimmers previous day: - 1,036.

This water contains per million parts:-	200
Total Solids dried at 180°C.	870.00
Suspended Matter	Absent
Chlorides as chlorine	219.45
Oxidised Nitrogen as nitrate	1.60
Oxidised Nitrogen as nitrite	absont
Control of the Contro	
Free and saline Amonia	0.032
Albuninoid A.monia	0.080
Temporary Hardness	40.00
Permanent Hardness	326.00
Oxygen absorbed in 4 hours @ 80°F.	
from N/80 KMn04	0.04
pH value	7.10
Appearance	clear and bright.
Odour	none
Taste & Colour	normal
Heavy Metals	absent
Free Chlorine	0.275
No. of colonies developing per ml.	
on core of 0100 in 70 hours	2
on agar at 21°C. in 72 hours.	-
No. of colonies developing per ml.	
on agar at 37°C. in 24 hours.	0



2

0

No. of colonies developing per ml. on agar at 37°C. in 48 hours. Coli - aerogenes count per 100 mls. at 37°C. in 48 Hours. Faecal coli count per 100 mls. at 44°C. in 48 hours. Bacillus Coli (Presumptive) Absent in 100 mils.

At the time of sampling this water was of satisfactory bacterial and chemical quality for use in the swimming pool.

Public Baths.

Weekly average attendance.

1950 1951. 1952. 1,000 (approx) 830

The above figures demonstrate the decreasing use made of the Council's public Slipper Baths over the last three year period, a decrease which, it may be fairly inferred is not without relationship to the accomplishments of an expanding housing programme.

Rainfall, 1952.

The total rainfall for the year, 20.83 inches compared with 25.93 inches in 1951, was slightly below the average annual figure of 21.47, covering the period for which statistics are available.

Generally the summer was dry, only twenty days with rain being recorded between 8th May and 1st August and although it may seem hard to believe February "fill dyke" was the dryest month of the year (0.38 inches) closely followed by July. The month of August just failed to maintain its recent lamentable record, being only the second wettest month of 1952, but August Bank Holiday Monday, with 1.23 inches, the heaviest daily fall of the year, did what is could to atone for this failure.

The undermentioned matters are dealt with in the Annual Report of the Chief Sanitary Inspector.

> Camping Sites Fairgrounds Disinfection of Promises Factories Act, 1937 Disinfestation of Premises Food & Drugs Acts, 1938 - 49 Courson Lodging Houses Meat & Food Inspection. Canal Boats Prevention of Damage by Pests Act, 1949. Offensive Trades Outworkers.

NATIONAL ASSISTANCE ACT, 1948: SECTION 47. NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951.

During the year twelve cases were referred from various sources to the City Health Department as persons appearing to be in need of care and attention which they were not receiving. All these cases were promptly investigated and in nine of them it was apparent that the conditions did not justify the use of Section 47 of the National Assistance Act. In several of these the patient was already awaiting willing admission to hospital or to Part III accommendation or was willing to be persuaded of the advisability of such a course, and in others the living conditions did not fulfil the essential requirement of being insanitary, although often dusty, untidy and neglected. Cases in the former category were dealt with by expediting their admission to suitable accompodation and in this connection thanks are due to those officers of the Regional Hospital Board and the County Council whose co-operation and help made this possible. In the latter category of case it was sometimes possible to enlist the help of relations who had either been unaware of or disinterested in the needs of their elderly relations, and sometimes the provision of the services of a home help brought about the desired improvement. All such cases are kept under periodic review.

In three cases, however, action was obviously essential to secure the required degree of care and attention for old people, who would not voluntarily accept it, despite all persuasion.

Details are as follows: -

Case 1.

Male, aged 83 years, living alone and assisted by neighbours who were unable to continue with this help: suffering from general paresis and in highly insanitary circumstances. Resisted all attempts at persuasion to seek voluntory admission to any institution and would not co-operate with own Doctor.

Removed to Part 111 accommodation under provisions of National Assistance (Amendment) Act, 1951. Subsequently a son arranged for the old man's transfer to a private nursing home, where he settled down very contentedly. Although, previous to this he had been unwilling to co-operate with any relations in matters of his own welfare.

The patient died in the nursing home five months after admission.

Case 2.

Male, aged 75 years, living with wife and doughter. Almost bedridden; doubly incontinent: believed by his own Doctor to be suffering from Carcinoma but so obstructive and un co-operative that he would not permit medical examination, would not entertain the idea of entering hospital and would accept no medical treatment in his own home. Living circumstances were, because of continual double incontinence, highly insanitary - both wife and daughter were unable any longer to deal with the situation, or to persuade the old man to allow himself to be admitted to hospital.

A first visit to the patient failed to change his mind about admission to hospital and a second visit the following day met with no greater success. He was therefore removed under the provisions of the National Assistance (Amendment) Act to the Peterborough Memorial Hospital, for a period not exceeding three weeks, before the expiry of which time an order under the National Assistance Act, Section 47 was obtained. The patient was subsequently transferred to St. John's Hospital (for the aged sick) in which he died less than two months after his removal from home.

Case 3.

Female, aged 83 years, living alone in insanitary conditions. Bodily very dirty, and undernourished. No known relatives and very firmly opposed to entering any institution or accepting the services of a home help, even supposing one would undertake the considerable task of trying to improve the living conditions.

Removed to Part 111 accommodation on a National Assistance (amendment) Act Order and subsequently retained there on two Orders under the National Assistance Act, Section 47. As the old Lady had, by that time settled down well, no further orders were applied for and she continues voluntorily in Part 111 accommodation.



CITY OF PETERBOROUGH

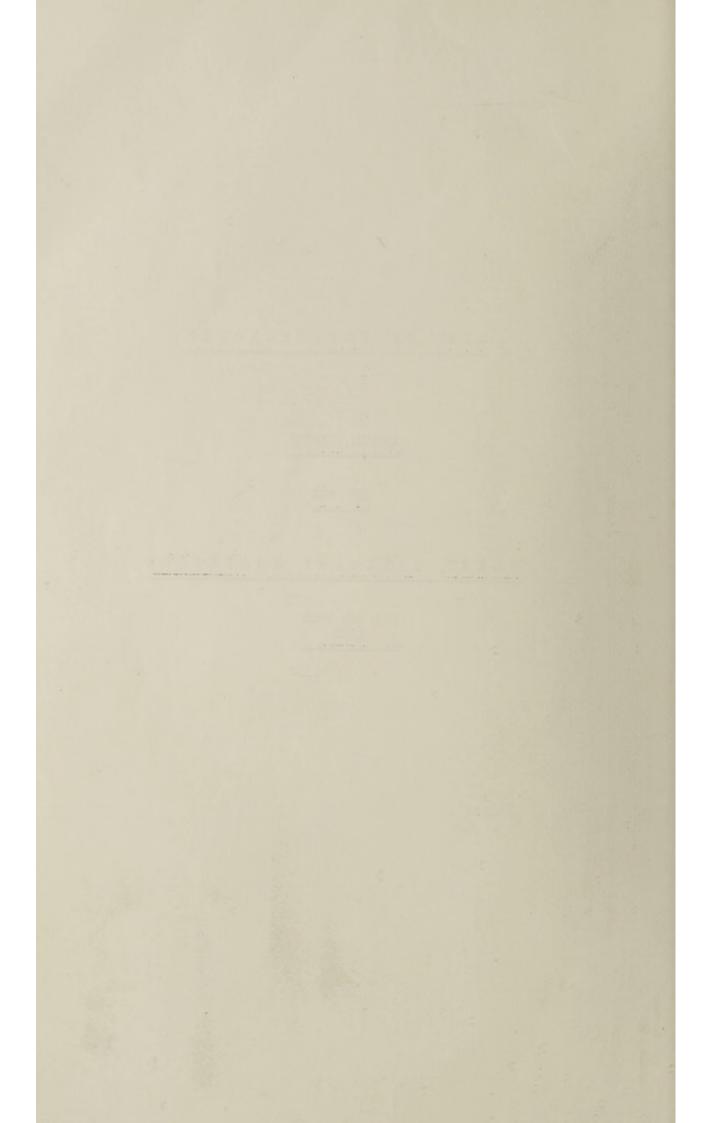
II

ANNUAL REPORT

OF THE

CHIEF SANITARY INSPECTOR

FOR THE YEAR 1952



SANITARY INSPECTOR'S DEPARTMENT STAFF 1952

Chief Sanitary Inspector

J.HALL, M.S.I.A., A.M.I.S.E., Cert.R.San.I.

Sanitary Inspectors.

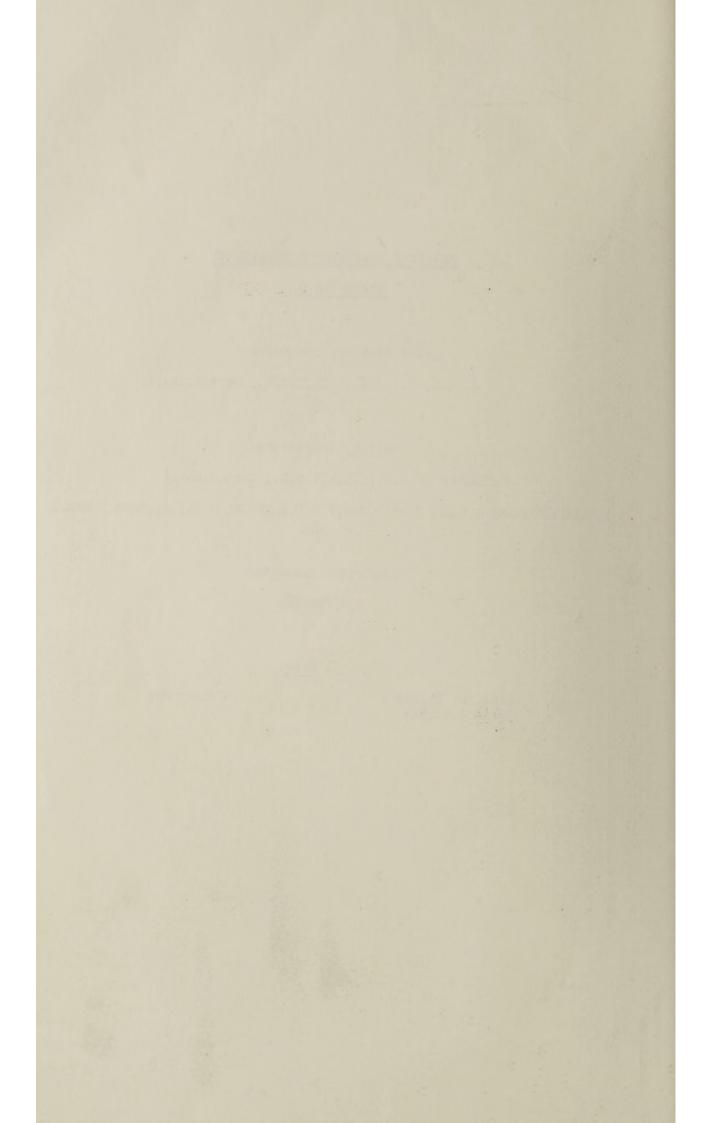
L.DEARDEN, M.S.I.A., A.M.I.S.E., Cert.R.San.I.

P.LANGSTON, M.S.I.A., Cert.R.San.I. B.A.IRWIN, M.S.I.A., Cert.R.San.I.

Assistant Inspector
A.N.VENTERS.

Clerks.

Miss. G. Lilley (from 1.12.52) A.Morton.



CHIEF SANITARY INSPECTOR'S REPORT 1 9 5 2.

Sanitary Inspector's Office, Town Hall, Peterborough, 1953.

To The Right Worshipful the Mayor, Aldermen and Councillors of the City of Peterborough.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in submitting my report for the year 1952. This is my fourth Annual Report.

The number of complaints appears to have steadied at between 400 and 450 per annum. It becomes increasingly difficult to get work done informally, due, I believe, to disrepairs accumulating and protective work to property being neglected. It is highly probable that this is an economic phenomenon. A small amount of slum clearance is becoming possible.

Routine inspection of premises such as canteens, cafe kitchens snack bars etc. continues to be below what I feel should be done but even so the standard of cleanliness rises. This is the result of a more discriminate public, perhaps following the Clean Food Exhibition of last year.

As the result of Warfarin the number of premises inflested with rats has fallen but the infestations discovered which are caused be defective drains remains about the same as the years since the City organised the service.

As the result of the action of the Public Health Consittee, many improvements have been carried out at the Abattoir, Westfield Rd.

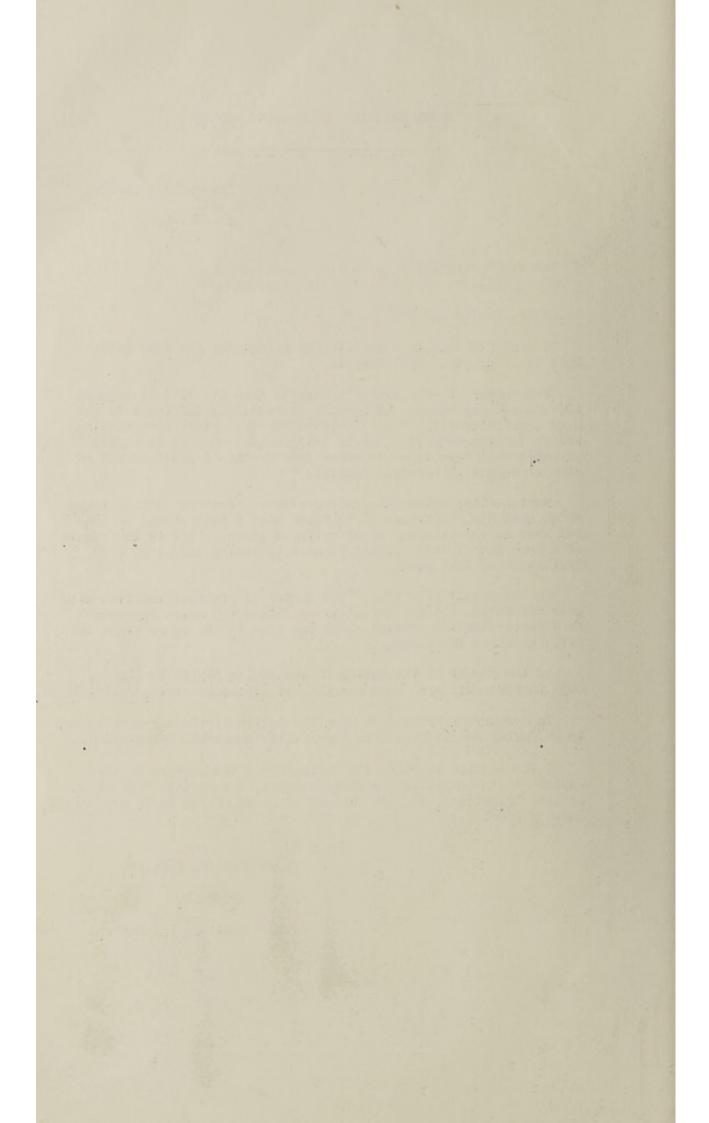
In January Mr. Irwin took over the duties previously carried out by Mr. Oakley and in December, Miss Lilley replaced Miss Bingham.

I should like to thank the Chairman and the members of the Public Health Committee for their support, the Medical Officer of Health, Dr. Swinney, and the members of my staff for their co-operation and loyal help.

I am, Your obedient Servant,

J. HALL.

Chief Sanitary Inspector.



INSPECTIONS AND COMPLAINTS.

1.

Complaints of defects and nuisances number•d 444 (excluding rat complaints). Very little work was outstanding at the end of the year. It was necessary to serve 68 statutory noti•es (14 Housing Act, 1936: 44 Public Health Act, 1936; 9 Water Act, 1945 and one Prevention of Damage by Pests Act, 1949), to enforce compliance with previous Informal Notices and letters sent. The remainder of the work was completed by informal action.

529 houses were inspected, for which it was necessary to make 959 visits.

PUBLIC HEALTH ACT, 1936.

I give below an abridged list of nuisances abated and defects remedied:

Drains relaid, repaired, cleansed, etc
W.C.'s and urinals repaired, renewed or reconstructed 60
Roofs repaired, rain-water pipes renewed, etc
Chimney stacks rebuilt, ext.walls rebuilt and
repaired, interior repairs to walls 25
Woodwork repaired (floors, windows, doors, etc.) 56
Water laid on inside house 2
New sinks fixed, waste pipes refitted, etc 17
Accumulations of refuse and manure removed 13
Miscellaneous

Again the amount of drainage work remains high because of the large number of complaints of rat infestations which are found to be centred around defective drains.

TENTS, VANS AND SHEDS.

At the end of the year 180 caravans were sited on 59 licensed sites, to which a large number of visits were paid. On only one occasion has the department received a complaint of a nuisance caused by licensed caravans. Action was taken and the nuisance abated. In addition it was found necessary to take action in the case of 4 unlicensed moveable dwellings.

INFECTIOUS DISEASES.

I give below an analysis of the work carried out:-

Number of rooms disinfected for

Infectious disease41
Tuberculosis64

For non-notifiable diseases

INFESTATIONS.

Property in the City does not appear to be very heavily infested with insect vermin. Most infestations are dealt with by the tenant or landlord, but in any case with modern insecticides available there is no excuse for heavy infestations to exist.

13 houses were disinfested by this Department and 13 filthy premises were cleaned by occupiers. There were no Council houses disinfested.

COLORON LODGING HOUSES.

There are now 2 Common Lodging Houses registered in the City, both of which serve a very useful purpose in supplying cheap lodgings to people who would have great difficulty in finding any other lodging, other than that provided by the Soke of Peterborough County Council's accommodation at St.John's Close. Most of the occupants of these Common Lodging Houses are more or less permanent.

Work carried out is as follows:-

Roof and spouting repaired
New firegrate fixedl
New W.C. flushing cistern and
W.C. seat1
Redecoration and Linewashed6
Verbal cautions5
Letter sent1

CANAL BOATS

No visits have been paid to any canal boats as the only traffic on the river at present is for the maintenance of its banks.

OFFENSIVE TRADES.

The only offensive trade carried on in Peterborough is that of Rag and Bone merchant. Recently the trades of scrap metal dealers have been registered by this Authority.

KMACKERS YARDS.

The only knackers yard in the City closed down during the year because of the death of the owner. The business has now been sold but is not yet operating.

FAIRGROUNDS

Inspections were made of the Fairs during the year. All vans were provided with proper means of sanitation and water supply. The premises at which food was sold or given away as prizes received the department's attention.

PROVISION OF SANITARY ACCOUNTEDATION

All the premises which are licensed at the Brewster Sessions have been visited at regular intervals during the year; these include public houses, music halls, theatres, cinemas and miscellaneous places of entertainment.

FRIED FISH SHOPS

There are 37 shops on the register. Two mobile vans operate in the surrounding district, with Peterborough as their centre. In each case a suitable room is provided for preparing the food.

Visits	paid	19
New pre	paration	rooms. 2
Verbal	cautions	1
Letter	sent	

FOOD AND DRUGS ACTS 1938-49

Inspections and details of work carried out at the various food premises are given under the different headings below. Several talks have been given to the public. Notices sent by the Hedical Officer of Health, on a pattern suggested by the Ministry of Food, have been left at most of the premises where food is handled or sold.

BAKEHOUSES. There are 36 bakehouses in the City of which 21 are situated at the rear of shops selling the products. 64 visits were paid to these premises. 9 verbal cautions were given and one letter sent with regard to defaults. The following improvements were carried out:-

ICE) CREAL PREMISES, "MAKING) UP" PREMISES RESTAURANT AND CAFE KITCHESS.

ICE-CREAL. There are now only 4 manufacturers of ice-cream in the City; two by Heat Treatment and two by Cold Mix. None of the samples taken from the premises heat-treating the ice-cream showed lack of success in pasteurisation. The results were, out of 34 samples takem, 14 Grade I, 4 Grade 2, 10 Grade 3, and 5 Grade 4.

In addition to the above there are 156 premises selling ice-cream. Two premises manufacture ice-cream from an approved cold-mix, selling their ice-cream direct to the public and are the only two shops selling unwrapped ice-cream in the City.

MAKING-UP FREMISES. There are 46 premises in the City to which 97 visits were paid. In addition to various simple repairs one room was completely reconditioned and hot water laid on by gas geyser. A new storehouse was provided on one premises. After verbal cautions a further making-up room was redecorated.

CAFE & RESTAURANT KITCHENS. 108 visits have been paid to the 55 kitchers in the City, and the following works carried out:-

CANTEENS. Factory and school canteens in the City are visited regularly.

SHOPS. As many food shops as possible are inspected, but as you will appreciate, it is impossible to inspect every one regularly. It is hoped to do more of this work in the coming year.

MARKET. Improvements in the display of foods has been effected especially in the case of fruit and fish dealers. In addition to work under the byelaws, your Officers have been busy enforcing the Merchandise Marks Act, 1926, with relation to the marking of tomatoes and fresh fruit.

MEAT INSPECTION.

The total number of animals slaughtered during the year was:-Beasts (including cows) 3,788; Calves 818; Sheep and Lambs 11,236; Pigs 8,840

Cysticercus Bovis seems to be on the decline and it is hoped that soon it will only be of academic interest.

All cases of Generalised Tuberculosis are reported to the Ministry of Agriculture and Pisheries (Animal Health Division).

An attempt has been made to group causes of condemnations under the headings listed in Nemo 3/Foods.

BEEF (for tuberculosis) 18 Beasts	tones.
40 Cows Beef (forequarters, hinds and part carcases)	
OTHER CAUSES	
1 Cow Acute Septic Mastitis 1 Cow Acute Septic Metritis 1 Cow Acute Septic Pericarditis 1 Beast Acute Septic Pericarditis 1 Beast Decomposition (Generalised) 4 Beasts Emaciation (Pathological) 7 Cows Emaciation (Pathological) 1 Cow Extensive Bruising 1 Cow Oedema (Generalised) 1 Beast Pyaemia 1 Beast Tumours (Malignant with secondary growths) Beef (bruised and heated) Beef (abscesses, etc.)	62 35 44 46 106 216 216 216 216 36 151 95 41
OFFALS (edible)	
Heads & Tongues: 301 (T.B.) 647 stones; 70 (Actinolycosis) 1542 97 (Actinobacillosis, Cysticercus Bovis, etc.) 1784 stones. Lungs: 425 (T.B.) 290 stones; 130 (Pleurisy, etc.) 87 stones. Livers: 271 (Distona) 285 stones; 65 (Cavernous Angioma) 572 stones; 92 (T.B.) 100 stones; 256 (Abscesses) 2844 stones; 67 (Cirrhosi cysts, etc) 72 stones. Part Livers: Distona 182 stones; others 24 stones. Other Edible Offals: 500 stones.	tones;

SHEEP.

OTHER CAUSES.	Stones.
1 Sheeps carcase 7 " "	Bruising 2 Decomposition (Generalised) 37½ Proposition (Pathological)
23 " " " " " " " " " " " " " " " " " " "	Extensive nutilation
13 " "	Pneumonia, Acute septic 743
Mutton (bruised etc.)	Pyaemia

OFFALS

<u>Livers</u>: 47 (Distona) $7\frac{1}{2}$ stones; 359 (Parasites) 58 stones; 32 (Abscesses, etc) 5 stones. Other Edible Offals: $14\frac{1}{2}$ stones.

PIGS (for tu	berculo	sis)	Sto	
5 Pigs	s carca	ses			781
OTHER	CAUSES				
1 " 1 " 5 4 " 1 " 7 1 " 1 " 1 " 1 " 1 " 1 " 1 " 1 "	" "		Decomposition (Generalised) Fever (including salmonellosis) Jaundice Metritis, acute septic. Moribund Oodoma Peritonitis, acute septic. Pleurisy, Septic Pneumonia, acute septic Pyaemia Swine Erysipelas, Acute.		35½ 63 19½ 53 7
Heads	us offe	ues: 3	39 (T.B.) 391 stones. 001 stones. culosis)		ones.
3 Cal	ves cal	rcases			
2 Cal	Lves ca		Emaciation, pathological		102
1 4	11	"	Oedema		221
	"	"	Pyaemia		8
	11	**	Uraemia		114
Vari			ole offals	e offal i	11
	NOTE:		entire carage is condemned all the condemned.	e oriar r	

SLAUGHTER OF AMINALS ACT, 1933.

Only slaughtermen actively engaged at the abattoir and bacon factory hold licences with your Authority - a total of 19.

No horses are killed in the City, and no shops retail horseflesh for human consumption.

CARCASES INSPECTED AND CONDEMNED.

е.	Cattle xcluding Cows	Cows	Calves	Sheep and Lambs	Pigs.
Number killed	2,765	1,023	818	11,236	8,440
Number inspected	2,765	1,023	818	11,236	8,440
All diseases except T.B. Whole carcases condemned	-8	12	10	47	27
Carcases of which some part or organ was condemned		488	4	475	191
Percentage of the number inspected affected with disease other than T.B.		49.85%	1.71%	4.65%	2.58%
T.B.ONLY. Whole carcases condemned.	18	40	3	-	5
Carcases of which some part or organ was condemmed.	265	387	-	1	333
Percentage of the number inspected affected with T.B.	.10.23%	41.7490	.37%	.01%	4.00%



OTHER FOODS.

218 requests were received during the year which resulted in 996 Condemnation Notes being issued covering 21,568 tins of food and 2 tons 2 cwts. 2 qrs. of other foodstuffs.

FOOD SAMPLING.

100 Formal and 11 Informal Samples were obtained and submitted to the Public Analyst for his report as follows:-

Nature of Sample	Formal	Informal	Total
Milk	61	-	61
Pepper	2	-	2
Sausages	22	-	22
Mincemeat	1	-	1
Synthete Cream Powder	1	-	1
Vitacream	1	-	1
Tea	1	-	1
Tea Tablets	-	1	1
Butter	2	-	2
Cocoa	1	-	1
Cornflour	1	-	1
Vinegar	1	-	1
Maltola	1	-	1
Blaekcurrant Jan	1	-	1
Ice-cream	1	1	2
Sage	1	-	1
Milk Whipping Cream		2	2
Borax.	1	-	1
Bicarbonate of Soda	1	-	1
Guava Jelly	-	1	1
Mint Sauce	-	1	1
Banana Bars	-	1	1
Saccharin Tablets	-	1	1
French Mustard	-	1	1
Cocktail Sausages.	-	1	1
Parsley	-	1	1
	100	11	111

With the exception of milk they were all genuine.

The average composition of the milks gave 3.40% Fat and 8.61% Solids-not-Fat.

DEFICIENCIES

Sample No.	Article.	Adulteration or other irregularity.	Action taken.
57 96	Milk "	Deficient in milk fat. ditto.	Samples 57 & 96 which had a presumed deficiency in milk fat and solids not fat, proved on following up to be genuine.
592 598	"	22% added water Appeal-tocow following up 592.	The samples were to be the subject of a prose-cution but owing to abnormal delay in the service of the court summons by the Court Officer, so that there was not 14 clear days be tween the service of the summons and the hearing of the case in court, the case was withdrawn.

² Samples of milk were taken for microscopic and biological examination for tuberculosis and were found to be negative.

MILK (SPECIAL DESIGNATION)(PASTEURISED & STERILISED MILK) REGULATIONS, 1949.

Milk is treated at three premises in the City, two by the H.T.S.T. method and other by the "holder" method.

54 Samples of milk were taken, none of which failed to pass the phosphatase test (a test for the efficiency of pasteurisation). 2 samples failed in the methylene blue test. The remainder of the samples were satisfactory.

With the exception of 22 gallons daily, the entire milk supply of nearly 4,500 gallons of the City is either Tuberculin tested or Heat Treated. The particulars are as follows:- 4304 pasteurised; 80 gallons Sterilised; 162 gallons Tuberculin tested and 22 gallons of raw milk.

HOUSING.

1.	Insp	ect:	ion of dwelling-houses during the year :-
	(1)	(a)	Total number of dwelling-houses inspected for house defects (under Public Health or Housing Acts)
	12	(b)	Number of inspections made for this purpose961
	(2)	(a)	Number of dwelling-houses (included under sub-heading (1) above), which were inspected and recorded under the Housing Consolidated Regulations, 1925
		(ъ)	Number of inspections made for the purpose
		dan	ber of dwelling-houses found to be in a state so gerous or injurious to health as to be unfit for an habitation
		ref	ber of dwelling-houses found (exclusive of those erred to under the prededing sub-heading) not to be all respects reasonably fit for human habitation430
2.	Reme	dy o	of defects during the year without service of Formal Notice:-
	cons	eque	of defective dwelling-houses rendered fit in ence of informal action by the Local Authority or Pficers
3.	Acti	on t	under Statutory Powers during the year:-
			ry Notices served under Section 11 of the Housing
	Stat	uto	ry Notices served under Section 9, Housing Act, 1936 8
			of houses demolished which were condemned pre-war which "squatters" had been living 0
sh	mplet	ely e i	are quite a number of dwelling-houses in the City which are unfit and are just squalid slums, but even with the housing t is hoped to commence a systematic clearance of unfit the new year.

DEFENCE OF THE REALM REGULATIONS 68AA

16 Slum Clearance Houses were licensed under the above Regulations for temporary occupation.

FACTORIES ACT, 1937.

Every factory should be regularly inspected but unfortunately, because of the amount of work to be done, it has been possible to visit only on complaint, and on notice from H.M. Inspector of Factories.

Number of Factories on Register (Mechanical 182, Non-Mechanical 39)	570
Letters sent	5
Defaults remedied:-	
Alterations to sanitary accommodation and drainage system Defective W.C.'s repaired Premises and sanitary conveniences cleansed and redecorated Provision of chemical closets Roof and plaster repaired W.C.s., urinals and auto-flush to urinal Intervening ventilated space provided/extractor fan provided	3 2 3 1 5

Building Sites: -

4 main sites were visited regularly.

OUTWORKERS.

Lists of Outworkers are received from employers and other authorities of outworkers residing in the district. All the addresses in the City area are visited.

Addresses of Outworkers

Received from other Councils....6
Received from employers84.

REPORT FOR YEAR ENDED 31st DECEMBER, 1952.

MANTE OF LOCAL AUTHORITY City of Peterborough
ADMINISTRATIVE COUNTY Soke of Peterborough.

		Type of Property.				
		Local Authority	Dwelling Houses		All other (including Business and Industrial)	Total
I.	Total number of properties in Local Authority's District.	22	15,325	101	2,228	17,676
II.	Number of properties in- spected by the Local	(a) 7.	173	-	52	232
	Authority during 1952 as a result (a) of notification or (b) ptherwise.	(b) 12	675	12	217	916
III.	Number of properties (under	Major 1	-	1	-	2
	II) found to be infested by rats	Minor 15	164		54	233
IV.	Number of properties (under II) found to be seriously infested by mice	If	I		L	
v.	Number of infested properties (under III and IV) treated by the Local Authority.	18	182	-	54	254
VI.	Number of notices served under Sec.4 (1)Treatment		-	-	1	1
	(2)Structural Works(i.e. proofing)	- N	I	1	-	-
VII.	Number of cases in which default was taken by Local Authority following issue of notice under Section 4.	- N	I	I		-
VIII.	Legal Proceed- ings.	- N	I	L		_

