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"SALUS POPULI SUPREMA LEX"



CITY OF PORTSMOUTH

THE HEALTH OF THE CITY OF PORTSMOUTH 1965

PETER G. ROADS
M.D.(Lond) D.P.H.
MEDICAL OFFICER OF HEALTH

*Principal School Medical Officer
and Port Medical Officer*

ANNUAL REPORT OF THE
MEDICAL OFFICER OF HEALTH
including
THE REPORT OF THE PUBLIC ANALYST

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STATE POPULAR SERVICE TEXT



CITY OF PORTSMOUTH



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The Right Worshipful the Lord Mayor

ALDERMAN FRANK LINES, J.P.

HEALTH COMMITTEE

1965-1966

Chairman

COUNCILLOR H. W. J. FORD

Vice-Chairman

COUNCILLOR L. C. ROGERS

Aldermen

DR. MAXWELL BRESLER

J. P. D. LACEY

Councillors

A. GIBBS

W. G. HUNT (until 7-2-66)

MISS P. LOE, M.B.E., S.R.N., R.M.N.

J. T. O'DRISCOLL

MISS M. SEAMAN

E. G. SHEEN

MRS. K. I. D. STANLEY-EDWARDES

C. W. STEVENS, O.B.E., J.P.

A. C. WEST (from 8-2-66)

Co-opted Members

DR. C. N. BURNHAM SLIPPER

DR. M. J. CLARKE WILLIAMS

MR. E. O. DAY

MR. K. G. DRYDEN

MRS. F. M. HEWAT

MRS. L. C. NICHOLSON

DR. V. M. TOMPKINS

SENIOR MEMBERS OF HEALTH DEPARTMENT STAFF

*Medical Officer of Health,
Principal School Medical Officer,
Chief Administrative Medical Officer to the City Council and
Medical Officer of Health to the Port of Portsmouth*

P. G. ROADS, M.D., D.P.H.

*Deputy Medical Officer of Health and Deputy Principal
School Medical Officer
Deputy Medical Officer of Health to the Port of Portsmouth*

T. HALL, M.A., M.B., B.CHIR., M.R.C.S., L.R.C.P., D.P.H.

Senior Medical Officer for Maternal and Child Welfare and Geriatrics

N. MERCY PLOWRIGHT, M.B., CH.B., D.P.H., D.C.H.

Senior Medical Officer for School Health Services and Civil Defence

D. D. HILTON, M.B., CH.B., D.P.H., D.R.C.O.G., D.T.M. & H.

Senior Medical Officer for Mental Health

R. G. CONGDON, M.B., B.S.(LOND.), D.P.M.

Vaccination and Immunisation Medical Officer

E. D. B. WOLFE, E.D., M.B., CH.B., D.P.H.

Medical Officer, Maternal and Child Welfare

AUDREY E. STEWART, M.B., CH.B., D.R.C.O.G.

Chief Health Inspector

W. F. APPLETON, F.R.S.H., F.A.P.H.I.

Principal Administrative Assistant

H. S. WOODCOCK

Superintendent Health Visitor

MISS E. M. BUSSBY, S.R.N., S.C.M., H.V.CERT., D.N.(LOND.)

Supervisor of Midwives

MISS D. J. KINSEY, S.R.N., S.C.M., M.T.D.

Ambulance Officer

T. F. WARD, F.I.A.O.

Joint Appointments with Regional Hospital Board

Consultant Chest Physician

J. H. DADDS, M.B., B.S., M.R.C.P.

Chest Physician

J. C. HESKETH, M.B., B.S.

Venereologist

J. B. WOOLLEY, M.B., CH.B.

Consultant Paediatrician

J. H. MOSELEY, M.A., M.B., B.CHIR., M.R.C.P., M.R.C.S.

Public Health Department,
1 Western Parade,
Portsmouth.

My Lord Mayor, Ladies and Gentlemen,

I have the honour to report on the health of the City of Portsmouth for the year 1965.

STATISTICAL COMMENT

The birth rate of 17·99 per 1,000 is almost the same as in the previous year, and approximates closely to the national figure of 18·1 per 1,000. The infant mortality rate is 16·04 per 1,000 total live births. This is notably below the national average of 19 deaths per 1,000. The infant mortality rate for illegitimate children is, however, higher than for the child born in wedlock, viz., 20·84, illustrating a facet of our society which has been obvious for many years. The rate is, however, slightly higher locally than in 1964, as are the other statistics relating to illegitimacy. Illegitimacy rates vary considerably throughout the country and at the beginning of this century the highest rates in England were recorded in agrarian and outlying counties, and not in the large towns. Apparently illegitimacy did not seem to constitute a serious problem in urban communities until the 1930's, although these rates must be interpreted cautiously, and due allowance made for errors and anomalies of registration. It is interesting in comparison to note that, in most of the major cities of Europe at the turn of the century, illegitimacy rates were very high indeed. Nowadays the high rates occur overwhelmingly in the towns with considerable differences in rate between one part of the country and another. This latter fact only serves to emphasize the multiplicity of causative factors involved. Detailed medico-sociological studies in each area might be able to explain matters more satisfactorily but would require much precious staff time and adequate financial backing to succeed. Essential research of this kind, however, must always, it seems, be sacrificed to the dragon of stringency currently masquerading under the guise of a national squeeze.

INFECTIOUS DISEASES

In 1965 the general pattern of the more orthodox infectious diseases remained much the same as in the preceding year. Newly diagnosed cases of tuberculosis continued to decline. The following up of children immunised against measles in the Medical Research Council's trials of the vaccine continued.

An outbreak of epidemic vomiting occurred at one of the City's schools in October and, whilst the clinical features of some of the initial cases suggested an organic cause, it became apparent as the epidemic progressed that many subsequent cases were purely functional. No positive bacteriological findings could be demonstrated and epidemiological investigations were inconclusive. A full retrospective analysis of the outbreak was subsequently made, and at the time of writing this has already appeared in the form of a paper in the *British Medical Journal*.¹

MATERNITY, CHILD HEALTH AND OTHER SOCIAL SERVICES

The number of early discharges from hospital again rose and I should like to express my appreciation to the Domiciliary Midwifery Service for coping so efficiently with the increased work-load involved. The risk

1. Two School Epidemics—McEvedy, Griffiths and Hall—*B.M.J.* 26-11-66.

of 'cold injury' in new born babies was highlighted this year by a series of articles in the medical and national press and the importance and difficulty of maintaining room temperatures at 70° cannot be emphasized enough. As the Superintendent Health Visitor points out in her report it is in matters such as these that midwives' considerable responsibilities in the field of health education are clearly demonstrated.

By the end of the year initial steps implementing the first part of the scheme for special study of 'at risk' babies had been taken, but, unfortunately, developmental assessment in the child welfare clinics was held because of staffing difficulties.

The year saw the further development of co-operation between all the services concerned with geriatric care. The monthly co-ordinating case conferences continue to prove most valuable.

INITIATION OF NEW SCHEME

A pilot service for the provision of laundry facilities for the inworker was started this year.

MENTAL HEALTH

The report 'Towards Community Care' was submitted to the Health Committee in October.

No Medical Officer of Health can be unaware of the fact that mental health now represents a major and rapidly expanding section of his work. The report deals with various problems posed by the mental illness arising in this community, and the responsibilities which the local authority should assume as part of their statutory obligations within the field of public health. Existing resources and their further expansion in the context of the overall development of the City's Health Services over the next 10 years are considered.

This is an appropriate moment to record my appreciation of the continuing work done in the changing field of community mental health by all our social workers.

HEALTH VISITOR/GENERAL PRACTITIONER LIAISON

In 1965 Health Visitor recruitment, training and the further development of the community development liaison scheme with general practitioners started in 1964 became the province of the Deputy Medical Officer of Health. An account of the first six months of the Portsmouth scheme appeared in the *Lancet* in June², and a copy of my report to the Health Committee on the subject is included as Appendix 'A'.

ENVIRONMENTAL HEALTH

Shortages of trained staff, together with increased responsibilities placed a pressing burden on the shoulders of the Public Health Inspectorate. The Chief Public Health Inspector's report illustrates in more detail some of the extra tasks shouldered by the Department during 1965.

An added difficulty is that many experienced members of the staff are now approaching retirement, and the difficulty of replacing them adds to the gloomy picture presented at the end of the year.

2. Experiment in co-operation—Hall—*Lancet* 19-6-1965.

FLUORIDATION OF WATER SUPPLIES

The Ministry of Health in its Circular 15/65 (referring also to Circulars 12/63 and 28/62) stressed the necessity for the making of arrangements whereby fluoride is added to public water supplies which are naturally deficient in this compound to the level appropriate for the prevention of dental decay.

The Circular drew attention to the point that in the Government's view a public water supply authority has the power under English law to add fluoride to the water it supplies and referred to a recent court case and decision in support of this opinion.³

The Minister is formally of the view that the need, value, safety and advantages of fluoridation are now established and the provision will be both beneficial and completely safe. The Minister further urged that all Local Health Authorities should take steps to implement its introduction forthwith. He stated that free indemnity in the event of any legal proceedings either relating to lack of power or damage to health would be provided.

Following the receipt of the Circular the Medical Officer of Health accordingly submitted a report to the Health Committee on the proposed fluoridation of the Portsmouth water supply, recommending that the Portsmouth City Council should approve this decision in principle and authorise discussions to make the necessary arrangements with the Portsmouth Water Company. (A copy of this report is included as Appendix 'B').

The local position is, of course, complicated by the fact that the Portsmouth Water Company supplies a wide area and it would not be practicable to fluoridate selected districts. Any application for fluoridation would need the support of the Hampshire and West Sussex County Councils (including Gosport Borough, Fareham, Havant and Waterloo U.D.C.'s and Droxford and Winchester R.D.C.'s and Chichester Borough, Bognor U.D. and Chichester R.D.C.)

The Health Committee of the Portsmouth City Council approved the recommendation as outlined above, but, unfortunately, at the subsequent full Committee meeting of the City Council the proposal was heavily defeated and only four members voted in favour.

STAFF CHANGES

In February Dr. Ruby Pike, Senior Medical Officer for Maternity and Child Welfare, retired after 40 years of service with Portsmouth Corporation. I pay tribute to Dr. Pike's drive, enthusiasm and sustained achievements over these years and wish her well in her retirement. Dr. Pike was succeeded by Dr. N. M. Plowright, who, in addition, retains her responsibilities for the Geriatric Service.

Mr. L. J. Threlfall, Principal School Dental Officer, who joined the service on 20th October, 1930, retired in August. He made many valuable contributions to the dental health of the City during this long period and will be sadly missed by his colleagues. I trust that he will have many active years in retirement.

I welcome to the City the Senior Medical Officer for Mental Health, Dr. R. G. Congdon, who took up his duties on 1st January, and the Principal School Dental Officer, Mr. P. D. Bristow, who took up his duties on 1st September.

3. Foxwell v. Watford Corporation—1963.

Mr. A. F. T. Rose, Executive Officer, Mental Health Services, transferred to the Public Health Inspector's Section as a Technical Assistant in July. I should like to acknowledge his many years of loyalty and devotion to the City and his work in relation to the development and provision of services for the mentally handicapped.

I extend my sincerest sympathy to the family of Mr. W. G. Mundy, Public Health Inspector, who died on 5th June, after being with Portsmouth Corporation since February, 1947.

CONCLUSION

To the Deputy Medical Officer of Health and the staff of the Health Department I extend my warmest thanks for their continued help and co-operation during a difficult year. I should further like to say how grateful we all are to the Chairman and Members of the Health Committee for their encouragement and advice during 1965.

I am, my Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

P. G. ROADS,

Medical Officer of Health.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

STATISTICAL SUMMARIES FOR 1965

(Numbers in Brackets indicate Previous Years' Figures)

Estimated mid-year population	..	..	..	216,280	(221,470)
Population 1961 Census	..	..	..	215,077	
Area in acres (land and water)	..	..	..	9,249	
Number of dwellings (as at 31-12-65)	..	..	..	63,382	(62,841)

VITAL STATISTICS

LIVE BIRTHS:

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	.. ..	1,630 (1,765)	1,631 (1,634)	3,261 (3,399)
Illegitimate	.. ..	236 (205)	244 (212)	480 (417)
Total	.. ..	1,866 (1,970)	1,875 (1,846)	3,741 (3,816)
Crude Birth Rate per 1,000 population	.. ..			17.30 (17.23)
Comparability Factor	.. ..			1.04 (1.04)
Adjusted Birth Rate	.. ..			17.99 (17.93)
England and Wales Birth Rate for 1965	.. ..			18.1

In Portsmouth, illegitimate live births formed 12.83% (10.92%) of the total and of the live births which occurred 6.87% were premature.

STILLBIRTHS:

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	.. ..	29 (25)	23 (35)	52 (60)
Illegitimate	.. ..	9 (3)	3 (5)	12 (8)
Total	.. ..	38 (28)	26 (40)	64 (68)
Stillbirth Rate per 1,000 population	.. ..			17.11 (17.50)
England and Wales Stillbirth Rate for 1965	.. ..			15.7

TOTAL LIVE AND STILLBIRTHS .. 3,805 (3,884)

DEATHS:

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Crude Death Rate per 1,000 population	.. ..	1,362 (1,389)	1,424 (1,344)	2,786 (2,733)
Comparability Factor	.. ..			0.87 (0.89)
Adjusted Death Rate	.. ..			11.1 (11.19)
England and Wales Death Rate for 1965	.. ..			11.5
Natural increase (number by which births exceeded deaths)	.. ..			955 (1,083)

INFANT MORTALITY:

Deaths of infants under 1 year of age.

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	..	30 (44)	20 (27)	50 (71)
Illegitimate	..	5 (5)	5 (3)	10 (8)
Total	..	35 (49)	25 (30)	60 (79)

Infant mortality rate per 1,000 total live births ..	16.04 (20.70)
Legitimate infant mortality rate per 1,000 legitimate live births	15.33 (20.88)
Illegitimate infant mortality rate per 1,000 illegitimate live births	20.84 (19.18)
England and Wales Infant Mortality Rate for 1965 ..	19.0

NEO-NATAL MORTALITY:

Deaths of infants under 4 weeks.

	<i>Male</i>		<i>Female</i>		<i>Total</i>	
Legitimate ..	15	(30)	11	(17)	26	(47)
Illegitimate ..	5	(2)	3	(2)	8	(4)
Total	20	(32)	14	(19)	34	(51)

Neo-Natal mortality rate per 1,000 total live births ..	9.08 (13.36)
Legitimate neo-natal mortality rate per 1,000 live legitimate births	7.975 (13.82)
Illegitimate neo-natal mortality rate per 1,000 live illegitimate births	16.66 (9.594)
England and Wales neo-natal mortality rate for 1965 ..	13.0

EARLY NEO-NATAL MORTALITY:

Deaths under 1 week.

	<i>Male</i>		<i>Female</i>		<i>Total</i>	
Legitimate ..	15	(28)	11	(14)	26	(42)
Illegitimate ..	5	(2)	2	(1)	7	(3)
Total	20	(30)	13	(15)	33	(45)

Early neo-natal mortality rate per 1,000 total live births	8.82 (11.79)
Legitimate neo-natal mortality rate per 1,000 legitimate live births	7.975 (12.35)
Illegitimate neo-natal mortality rate per 1,000 illegitimate live births	14.58 (7.19)

PERINATAL DEATHS:

Stillbirths and deaths under 1 week combined.

	<i>Male</i>		<i>Female</i>		<i>Total</i>	
Legitimate ..	44	(53)	34	(49)	78	(102)
Illegitimate ..	14	(5)	5	(6)	19	(11)
Total	58	(58)	39	(55)	97	(113)

Perinatal mortality rate per 1,000 live and stillbirths ..	25.49 (29.09)
Legitimate perinatal mortality rate per 1,000 legitimate live and stillbirths	23.55 (29.32)
Illegitimate perinatal mortality rate per 1,000 illegitimate live and stillbirths	38.62 (25.88)

MATERNAL MORTALITY:

Deaths due to pregnancy, childbirth, abortion ..	2 (3)
Maternal mortality rate per 1,000 total live and stillbirths	0.52 (0.77)
Total maternal mortality rate for England and Wales for 1965	0.25

TABLE I
ANALYSIS OF CAUSES OF DEATHS

No.	Cause of Death	Male	Female	Total	Proportional Death Rate	1964		
						Male	Female	Total
1	Tuberculosis—respiratory	10	7	17	0.61	6	3	9
2	Tuberculosis—other ..	—	1	1	0.04	2	—	2
3	Syphilitic disease	2	2	4	0.18	4	2	6
6	Meningococcal infections	—	—	—	—	1	—	1
9	Other infective and parasitic diseases	1	3	4	0.18	2	5	7
10	Malignant neoplasm—stomach	21	33	54	1.84	41	22	63
11	Malignant neoplasm—lung and bronchus ..	120	26	146	5.14	106	22	128
12	Malignant neoplasm—breast	—	36	36	1.29	—	52	52
13	Malignant neoplasm—uterus	—	25	25	0.89	—	19	19
14	Other malignant and lymphatic neoplasms ..	124	130	254	9.11	145	112	257
15	Leukaemia, aleukaemia ..	8	5	13	0.46	8	8	16
16	Diabetes	6	11	17	0.61	4	10	14
17	Vascular lesions of nervous system	121	243	364	13.0	137	219	356
18	Coronary disease—angina	342	238	580	20.70	360	224	584
19	Hypertension with heart disease	35	41	76	2.63	27	31	58
20	Other heart disease ..	93	171	264	9.47	101	197	298
21	Other circulatory disease	42	83	125	4.38	60	58	118
22	Influenza	1	1	2	0.90	—	—	—
23	Pneumonia	94	121	215	7.61	59	87	146
24	Bronchitis	113	42	155	5.56	90	47	137
25	Other diseases of respiratory system ..	12	4	16	0.57	12	6	18
26	Ulcer of stomach and duodenum	11	7	18	0.64	13	9	22
27	Gastritis, enteritis and diarrhoea	5	10	15	0.53	7	11	18
28	Nephritis and nephrosis ..	7	4	11	0.39	7	5	12
29	Hyperplasia of prostate ..	8	—	8	0.36	11	—	11
30	Pregnancy, childbirth and abortion	—	2	2	0.09	—	3	3
31	Congenital malformations	11	10	21	0.65	12	10	22
32	Other defined and illdefined diseases	93	89	182	6.53	84	120	204
33	Motor vehicle accidents ..	28	9	37	1.32	19	9	28
34	All other accidents ..	33	50	83	2.88	43	34	77
35	Suicide	19	20	39	1.30	28	17	45
36	Homicide and operations of war	2	—	2	0.09	—	2	2
	TOTAL ..	1,362	1,424	2,786	100.00	1,389	1,344	2,733

TABLE SHOWING BIRTH-RATE, DEATH-RATES AND POPULATION
FOR YEAR 1965 AND THE TEN PRECEDING YEARS

<i>Year</i>	<i>(Crude) Birth-rate per 1,000 population</i>	<i>(Crude) Death-rate per 1,000 population</i>	<i>Total Deaths of children under 1 year— percentage of total deaths</i>	<i>Total Deaths of children under 1 year— per 1,000 total live births</i>	<i>Population (R.G.'s estimate)</i>
1965	17.30	12.87	2.15	16.04	216,280
1964	17.23	12.34	2.89	20.70	221,470
1963	17.96	14.06	3.26	25.50	224,900
1962	17.35	13.06	2.87	21.62	226,670
1961	16.19	13.20	2.92	23.85	227,930
1960	16.99	12.61	2.11	15.69	217,520
1959	15.86	12.86	2.61	21.18	220,300
1958	15.70	12.28	2.93	22.28	222,800
1957	15.57	11.74	2.86	21.52	226,900*
1956	15.08	12.22	2.97	24.10	231,100*
1955	14.16	10.77	3.15	23.96	238,700*
Average for 10 years, 1955-64	16.20	12.51	2.85	22.04	

(The most favourable figures in the statistics are shown in heavy type). * Total population

DEATHS BY SEX AND AGE GROUPS

Ages	1965			1964		
	Male	Female	Total	Male	Female	Total
Under 1 year	35	25	60	49	30	79
1—4 years	8	7	15	12	2	14
5—14 years	5	4	9	4	6	10
15—24 years	29	5	34	19	8	27
25—34 years	15	15	30	16	6	22
35—44 years	26	24	50	27	25	52
45—54 years	95	57	152	90	62	152
55—64 years	251	145	396	269	154	423
65—74 years	385	336	721	411	309	720
75 and over	513	806	1,319	492	742	1,234
TOTAL	1,362	1,424	2,786	1,389	1,344	2,733

ANALYSIS OF DEATHS FROM CANCER, 1965

	Under 1		1-5		5-14		15-24		25-44		45-64		65-74		75 and over		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Malignant neoplasm— stomach	-	-	-	-	-	-	-	-	-	-	12(13)	5 (4)	6(16)	8(10)	3(12)	20 (6)	21 (41)	33 (22)
Malignant neoplasm— lung, bronchus	-	-	-	-	-	-	-	-	2 (-)	60 (55)	13 (4)	40(38)	6 (8)	20(11)	5 (9)	120(106)	26 (22)	
Malignant neoplasm— breast	-	-	-	-	-	-	-	-	3 (6)	-	8(16)	-	12(15)	-	13(15)	-	36 (52)	
Malignant neoplasm— uterus	-	-	-	-	-	-	-	-	1 (3)	-	11 (6)	-	7 (7)	-	6 (3)	-	25 (19)	
Other malignant and lym- phatic neoplasms	-	-	2(-)	1(1)	-	1(1)	-	9(5)	3 (3)	30(42)	41(31)	41(42)	36(32)	42(54)	48(46)	124(145)	130(112)	
Leukaemia, aleukaemia	-	-	-	1(-)	-	1(-)	-	1(-)	1(-)	-	1 (4)	3 (3)	2 (1)	3 (2)	1 (2)	8 (8)	5 (8)	
TOTAL	-	-	-	2(1)	-	2(1)	-	2(1)	-	101(102)	79(65)	90(99)	81(75)	68(79)	83(81)	273(300)	255(235)	

METEOROLOGY — 1965

BAROMETER. The mean barometric pressure (corrected to sea level) for the year was 29.902 inches (29.996). The highest observed reading was 30.737 on 2nd February (30.841), and the lowest 28.650 on 20th January (29.130).

TEMPERATURES. The mean temperature in the shade was 50.5°F. (51.1°).

Maximum. The mean maximum temperature in the shade was 55.5°F. (56.1°), the highest being 74°F. on 12th August (79°).

Minimum. The mean minimum temperature was 45.6°F. (46.1°), the lowest being 23°F. on 3rd March (24°).

Minimum on Grass. The mean minimum temperature on the grass was 40.4°F. (40.2°), the lowest being 9°F. on 3rd March (9°).

Earth Temperature. The mean temperature in the shade, one foot below the ground was 51.8°F. (53.0°), and at four feet 52.4°F. (53.1°).

Frosts. The minimum temperature in the shade, four feet above the ground fell to and below freezing point on 36 days (18), and there were 90 (80) ground frosts during the year.

SUNSHINE. 1,670 hours 0 minutes (1,619 hours 36 minutes) of sunshine were recorded by the Campbell-Stokes recorder. The greatest amount on one day was 14 hours 30 minutes on 28th June (14 hours 48 minutes).

RAINFALL. The total rainfall was 29.08 inches (24.13). The greatest fall in 24 hours was 1.14 inches on 30th July (0.70).

HUMIDITY. The mean humidity on the air (saturation 100) was 80 (81).

The following phenomena were recorded:—

HAIL on two occasions (0).

SNOW or SLEET on twelve occasions (9).

THUNDER on nine occasions (9).

FOGS on eight occasions (17).

GALES on ten occasions — 1 fresh, 9 moderate (4 fresh, 6 moderate).

AVERAGES FOR THE PAST TEN YEARS (1956-65)

<i>Rainfall</i>	<i>Sunshine</i>	<i>Mean Temperature</i>
27.99 inches	1,728.7 hours	51.33°F.

(Figures in brackets refer to 1964)

MONTHLY METEOROLOGICAL SUMMARY FOR THE YEAR 1965

Month	Mean Pressure (ins.)	Mean	Temperature—Degrees F.				Sunshine		Rainfall		Relative Humidity (Saturation 100)			
			Absolute		Mean		Mean Daily Range	Total No. of hours	Days of 0.5 hrs. or more	Total m.m.		Total ins.	Days of 0.01 ins. or more	
			Max.	Min.	Max.	Min.								
January	29.793	40.5	51	28	44.4	36.5	7.9	84 hrs.	30 mins.	20	94.2	3.71	18	85
February	30.310	38.7	50	29	42.9	34.6	8.3	53 "	12 "	18	7.9	0.31	7	78
March	29.920	43.2	67	23	48.5	37.8	10.7	149 "	6 "	23	47.8	1.88	17	85
April	29.894	48.4	64	37	54.7	42.2	12.5	163 "	6 "	29	25.9	1.02	15	79
May	29.937	54.1	71	41	59.3	48.9	10.4	205 "	0 "	25	39.1	1.54	13	76
June	29.967	58.7	72	47	64.2	53.2	11.0	196 "	18 "	26	53.8	2.12	10	78
July	29.897	60.2	72	48	65.1	55.2	9.9	161 "	42 "	26	84.8	3.34	16	76
August	29.940	61.7	74	50	66.9	56.4	10.5	186 "	48 "	29	57.7	2.27	15	79
September	29.773	57.0	66	46	62.0	52.0	10.0	141 "	48 "	26	94.2	3.71	11	81
October	30.049	55.4	70	43	60.5	50.3	10.2	157 "	18 "	28	13.5	0.53	3	82
November	29.739	44.5	59	28	49.2	39.8	9.4	100 "	42 "	19	114.0	4.49	18	80
December	29.613	44.2	53	25	48.4	40.0	8.4	70 "	36 "	18	105.7	4.16	21	85
TOTAL	—	—	—	—	—	—	—	1,670 "	0 "	287	738.6	29.08	164	—
MEAN	29.902	50.5	—	—	55.5	45.6	9.2	139 "	2 "	24	61.5	2.42	14	80

Portsmouth (Southsea) Meteorological Station

MONTHLY ANALYSIS OF WIND DIRECTIONS—1965

(recorded at 9 hours G.M.T.)

1965	N	NE	E	SE	S	SW	W	NW	Calm	Totals
January ..	2	7	1	1	2	11	6	1	—	31
February ..	6	10	1	—	—	1	3	5	2	28
March ..	1	3	8	3	2	5	5	1	3	31
April ..	3	2	2	2	1	8	7	4	1	30
May ..	3	3	1	3	3	12	2	1	3	31
June ..	1	4	1	2	4	12	4	—	2	30
July ..	1	3	2	1	2	16	3	3	—	31
August ..	2	1	1	3	1	16	6	1	—	31
September ..	2	1	1	3	1	15	6	1	—	30
October ..	2	6	12	2	1	5	1	2	—	31
November ..	3	8	5	1	2	6	5	—	—	30
December ..	1	3	1	1	1	14	8	2	—	31
TOTALS ..	27	51	36	22	20	121	56	21	11	365
%(approx.) ..	7	14	10	6	5	33	16	6	3	100%

MATERNAL AND CHILD WELFARE DEPARTMENT

The retirement of Dr. Ruby Pike as Senior Medical Officer for Maternal and Child Health in February 1965 was the major event of the year. She came to the Department in 1925 when Maternal and Child Welfare Clinics were in their infancy — she left a mature on-going service as her permanent memorial. It is rarely given to a person today to spend the whole of their professional life in one local authority — but those who have done so have been the architects and the builders of the present services — and Dr. Pike has her honoured place among them. Those who remain and those who succeed her are at one in acknowledging their collective and often personal debt to her, but this is as nothing compared with the debt the mothers and children of Portsmouth owe to her foresight in planning the services and her ready human understanding of their problems.

Her long service culminated in an informal gathering at the Guildhall, attended by the Lord Mayor and Lady Mayoress and representatives from many walks of life, when she was presented with a gold watch as the outward and visible sign of her colleagues' affection and gratitude.

Dr. Mercy Plowright succeeded Dr. Pike as Senior Medical Officer for Maternal and Child Health but in view of her continuing responsibilities for the Domiciliary Geriatric Service which had been built up in the last four years, some re-organisation of responsibility within the department was necessary. Health visitor recruitment, training and General Practitioner liaison became the province of the Deputy Medical Officer of Health; the Domiciliary Geriatric Service was transferred from the Mental Health Department to the main Health Department offices.

MIDWIFERY SERVICE

It was possible to maintain the complement of domiciliary midwives during the year — in fact recruitment was better than for some years previously. The Housing Committee co-operated very generously in providing accommodation for staff and undoubtedly this paid dividends when new appointments came to be made.

In view of the proven risk of gas-air analgesia to the infant, all gas-air machines were replaced in December by Entonox equipment, delivering a constant mixture of gas and oxygen to the mother, and of course through her to the infant. Twenty-five machines were in use at the end of the year. Disposable syringes came into general use during the year and were much appreciated by the midwives.

The following are the statistics for the service:—

DOMICILIARY SERVICE OF MIDWIVES	1965	1964
Number of domiciliary midwives employed in Portsmouth at 31st December (full and part-time)	39	37
Number of cases booked	2,745	2,806
Number of patients delivered	1,540	1,641
Doctor present at	341	405
	(22·1%)	(24·7%)
Number of patients delivered in hospital and discharged to care of domiciliary midwives ..	857	779
Number of cases in which medical assistance was sought where no doctor was engaged ..	5	11

Excluding holidays and sickness:

Average number of cases per midwife per month	5.7	6.3
Average number of cases per midwife per annum	68.2	76.0
Average weekly number of bookings ..	52.8	54.0
Hospital confinement rate	56%	
Domiciliary confinement rate	40%	

MIDWIVES PRACTISING IN NURSING HOMES

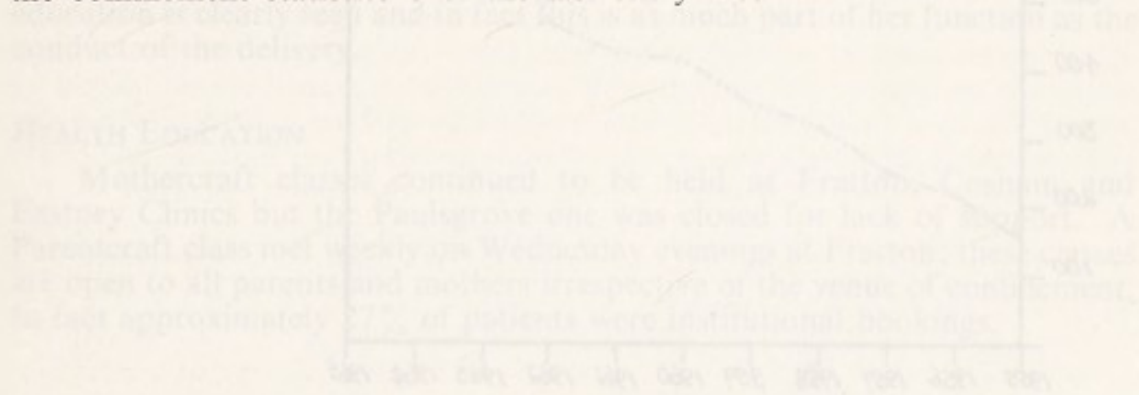
Number of midwives practising in nursing homes at 31st December	7	7
Total number of cases delivered by them ..	576	623

The difference of 1,205 between the number of cases booked for domiciliary confinement and those actually delivered at home is due to the mobility of the population of the City, as well as to medical or obstetric conditions arising in later pregnancy or during labour.

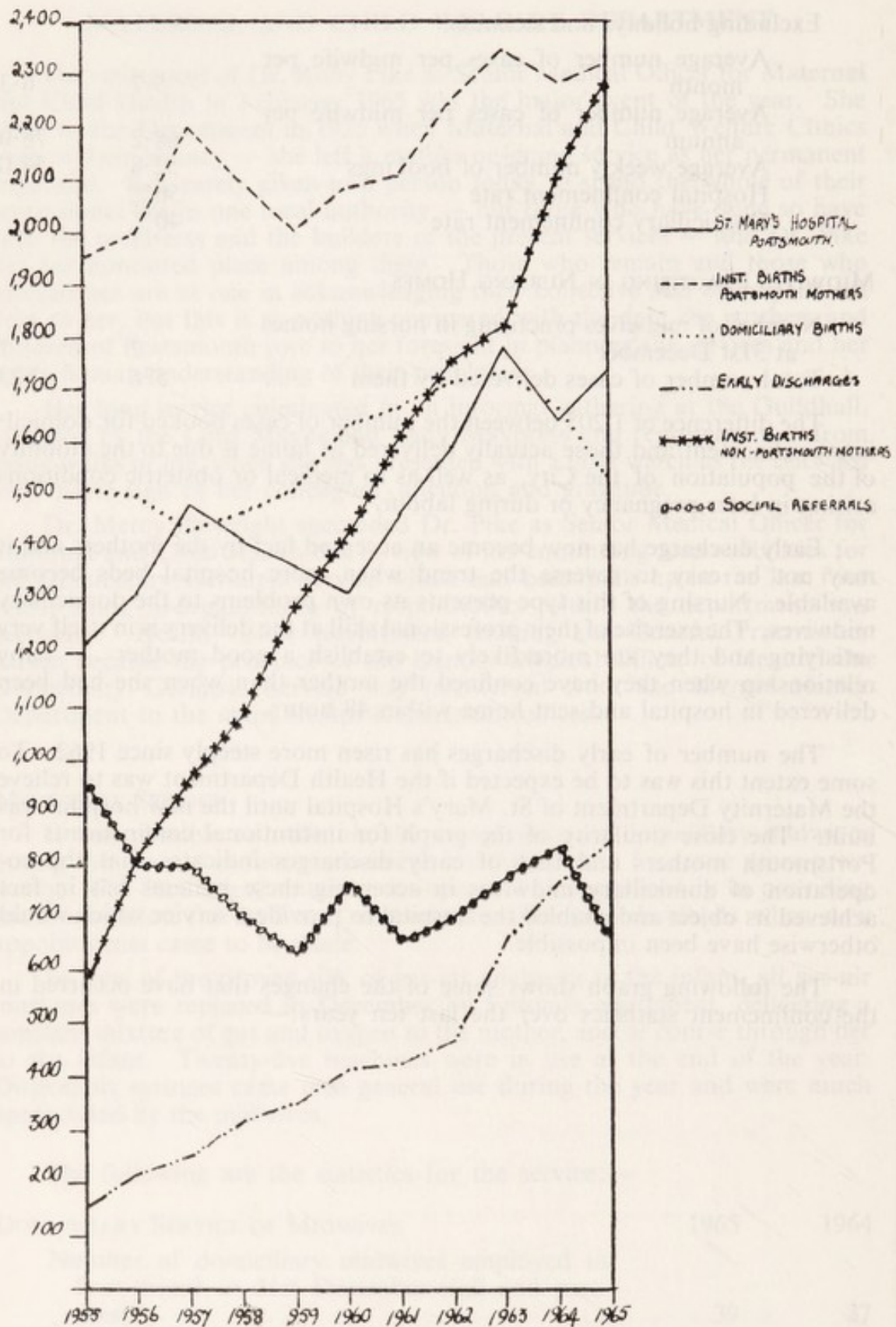
Early discharge has now become an accepted fact by the mothers and it may not be easy to reverse the trend when more hospital beds become available. Nursing of this type presents its own problems to the domiciliary midwives. The exercise of their professional skill at the delivery is in itself very satisfying and they are more likely to establish a good mother — baby relationship when they have confined the mother than when she had been delivered in hospital and sent home within 48 hours.

The number of early discharges has risen more steeply since 1962. To some extent this was to be expected if the Health Department was to relieve the Maternity Department of St. Mary's Hospital until the new hospital was built. The close similarity of the graph for institutional confinements for Portsmouth mothers and that of early discharges indicates that the co-operation of domiciliary midwives in accepting these patients has in fact achieved its object and enabled the hospital to provide a service which would otherwise have been impossible.

The following graph shows some of the changes that have occurred in the confinement statistics over the last ten years:—



It will be noted that there has only been a slow rise in the number of Portsmouth mothers delivered in institutions compared with the steep rise for women from outside the City. The reason for this is that the steady increase in the number of cases referred to the hospital prior to booking has been reversed in the last year; 175 fewer patients were seen in this way. 1873 cases were referred for investigation; 415 were booked to domiciliary midwives, 239 were allocated hospital accommodation.



It will be noted that there has only been a slow rise in the number of Portsmouth mothers delivered in institutions compared with the steep rise for women from outside the City.

The steady increase in the number of cases referred for social investigation prior to booking has been reversed in the last year; 175 fewer patients were seen in this way. 672 cases were referred for investigation, 412 were booked to domiciliary midwives, 259 were allocated hospital accommodation.

One cannot but be concerned at this fall at a time when one hears on all sides of the difficulties under which the nursing staff in particular are working in the Maternity Unit at Saint Mary's Hospital.

Flying Squad calls during the year totalled 91; 33 of these related to Portsmouth residents. The following is an analysis of these calls initiated by the domiciliary midwives:—

Retained placenta	12
P.P.H.	3
Shock	1
Raised B.P.	1
	—
	17
	—

In the remaining cases (16) the domiciliary midwifery service was not involved; the calls being made for transfers from Bowlands (6) or for gynaecological emergencies — abortions (3) and ectopic pregnancies. In one case the flying squad was called in error.

MORTALITY FIGURES:—

Two maternal deaths occurred during the year due to:—

1. Puerperal embolism — this occurred on the 9th day after delivery. Pelvic Venous Thrombosis.
2. Cerebral Venous Thrombosis — this occurred on the 14th day after delivery.

Both were classified as unavoidable.

CARE OF INFANTS

Special provision for the care of the prematurely born and low birth-weight babies were continued as in previous years. The risk of 'cold injury' in new-born babies was constantly in the domiciliary midwives mind; room and low reading thermometers had been available since 1963 but the importance — and the difficulty of maintaining a room temperature of 70° was not always appreciated by the family — or in some cases — the general practitioners. In these circumstances, the midwives responsibility for health education is clearly seen and in fact this is as much part of her function as the conduct of the delivery.

HEALTH EDUCATION

Mothercraft classes continued to be held at Fratton, Cosham and Eastney Clinics but the Paulsgrove one was closed for lack of support. A Parentcraft class met weekly on Wednesday evenings at Fratton; these classes are open to all parents and mothers irrespective of the venue of confinement. In fact approximately 27% of patients were institutional bookings.

PARENCRAFT

36 sessions — 213 attendances by couples

188 attendances by mother only

Number of sessions ..	10	9	8	7	6	5	4	3	2	1
Number of couples ..	1	4	4	2	3	8	—	4	11	4
Number of mothers ..	2	2	4	6	4	4	4	7	6	8

MOTHCRAFT CLASSES

	<i>Institutional Booked</i>	<i>Domiciliary Booked</i>	<i>Total No. of Mothers</i>	<i>Total Attendances</i>	<i>Average</i>
1965	139	373	512	2,312	4.5
1964	199	455	654	3,076	4.7
1963	236	418	654	3,378	5.16

Health visitors and midwives shared the responsibility for the informal talks and discussions covering various aspects of pregnancy, labour and infant care. It is in this setting that the natural apprehensions of pregnant women can be brought into the open and fears allayed. The fall in the average attendance rate is, therefore, disappointing but it is to some extent off-set by the attendance at Parentcraft classes. The Assistant Superintendent Health Visitor continued to give valuable assistance to the staff in supplying visual aids for these courses.

Mothers clubs continued to thrive at Paulsgrove, Cosham and Eastney; one club has adopted a local lunch club for the elderly, others regularly include elderly people in their parties and outings. This is in addition to promoting friendship among mothers in different areas.

OBSERVATION REGISTER

The procedure for notification of infants at risk of handicapping conditions and the maintenance of the register was reviewed during the year. Birth notifications and the discharge letters from the Paediatric Department had been the basis of notification in the past, the register being kept by the Superintendent Health Visitor. It was agreed that more detailed information and closer supervision of the register were desirable but that this should be linked with a more active assessment of the children than had been possible in the past. By the end of the year the initial steps to implement the first part of the scheme had been taken; developmental assessments in the child welfare clinics had to wait until additional staff could be appointed and others trained.

DAY NURSERIES AND CHILD MINDERS

During the year all premises registered as day nurseries and all persons undertaking the day care of three or more children under 5 years of age for gain, were visited by a Medical Officer. The visits were carried out without prior notice and in the majority of cases, the opportunity was seized of asking for and giving advice on a number of matters. Where necessary, prospective child minders were offered the opportunity of visiting one of the local authority Day Nurseries.

There would appear to be a growing demand for facilities for the day care of children as evidenced by the steady rise in applications for registration of private premises and persons.

Nurseries and Child Minders Regulation Act, 1948.

Number of premises registered	..	..	16
Number of places	..	..	400
Number of persons registered	..	..	32
Number of places	..	..	420

This is largely accounted for by the need for the mother to work — either because she is the sole breadwinner, or to supplement income where the husband is only earning a small wage, or the couple are saving for a house, etc.

It is likely, however, to be the pattern in future years in view of the increasing early age of marriage and the demand for married women to return to work, both in the professions and industry. In this connection, it was interesting to receive two enquiries from firms considering establishing day nurseries as an incentive to married women employees.

The five Playgroups run by the Save the Children Fund continued to provide play facilities for children potentially handicapped by the lack of adequate opportunity for using these facilities.

LOCAL AUTHORITY DAY NURSERIES

One hundred and four children were admitted to St. Peter's and Twyford Avenue Day Nurseries. The heating problem became acute at both nurseries during the year; a suspended ceiling at Twyford Avenue and new gas convector heaters at St. Peter's provided effective remedies to the problem.

Handicapped children were admitted to the local authority day nurseries where they were felt to need intensive care. To some extent all children in the local authority day nurseries are potentially handicapped by reason of their home circumstances and it is therefore regrettable that a waiting list should have built up during the year.

NURSING HOMES

The change in the administration of the department provided opportunity for a detailed inspection of Nursing Homes to be undertaken during the latter part of the year. There were thirteen Registered Nursing and Maternity Homes in the City, all of which had been inspected.

CHILD WELFARE CLINICS

Seventeen child welfare sessions are held weekly. All except one, at Eastney, are in the afternoon; 9 sessions are held in church or other public halls which, with the best will in the world, cannot provide all the amenities required in present day clinics. Heating and lack of small rooms for privacy are constant problems but the attendances at these clinics are evidence that the need for this provision continues to exist.

Medical Officers attended twelve sessions weekly but with only one full-time Medical Officer available for clinic and other work in the department, it was necessary to use local medical practitioners on a sessional basis to provide an adequate service.

As the Drayton clinic was attended largely by patients whose family doctor provided an advisory service, a Medical Officer ceased to attend after July. The figures for Silver Street demonstrated the need for a clinic in that area but lack of adequate available accommodation meant that the advice of a Medical Officer was not available to mothers there.

DOMICILIARY GERIATRIC SERVICE

The steady growth of co-operation between all the services and officers working with the elderly was the outstanding feature of the year. Monthly Case Conferences continued to be held in the Northern, Central and Southern areas of the City. These conferences, as well as providing support for the field workers, provided a useful channel for the dissemination of information e.g. hypothermia; suggestions for improving or extending the service were also discussed and if necessary referred to the Medical Officer of Health or other organisation for consideration. It was at one of these conferences, for instance, that the possibility of establishing a Lunch Club for the elderly at Hillside Youth Club was originally raised and referred to the Old People's Welfare Committee.

The Senior Medical Officer continued to visit patients in their own homes at the request of Medical Practitioners and field staff in general; 62 patients, the majority in the Southsea and Landport areas, were visited in this way — 19 were admitted to hospital, 13 to Welfare Services Homes and 1 to a nursing home. Six were admitted under National Assistance Act orders, the remainder were able to remain in their own homes.

In the last six years the stock of nursing equipment for home use has steadily increased and has eased considerably some of the problems of domiciliary care. Incontinent pads have been supplied free to patients since the early months of 1963 — in 1964 they were made available to the Mental Health Service and in the last year both branches of the Victoria Nursing Association have had a regular allocation. No serious problem with regard to disposal has yet been met but in those cases where it has, arrangements have been made for an extra collection by the Cleansing and Haulage Department and no further difficulty has been experienced.

Laundry Service was provided for 34 incontinent patients during the year, but it was only possible to help those in urgent need. Experience over the last two years suggests that a central linen supply would result in a considerable saving of time at present spent in sorting and checking patients own laundry, as well as on collection and delivery.

The Night Attendant Service operated in a small way — 13 cases received this help; while it was not widely publicised, it was possible to provide help whenever a need was shown.

Elderly tenants in multi-storey blocks of flats were found to be making inordinately large demands on the Wardens, to the detriment of their other duties. A scheme for the appointment of a Home Mother in two multi-storey blocks of flats was agreed in October 1965 but the appointments were not made before the end of the year. It was envisaged that the Home Mothers would give friendly supervision in the way that a relative might provide it, but that where tenants required the services of a Home Help or District Nurse, they would be referred to the appropriate service.

CHIROPODY SERVICE

Six clinics continued to be held weekly, using the same three chiropodists on a sessional basis as in previous years. The steady rise in referrals and the delay in completion of the premises at Northern Parade resulted in a very considerable increase in the time interval between treatments, or before new patients could be seen. This was unsatisfactory in every way. Various possibilities of providing additional sessions were discussed but none proved feasible.

CHIROPODY STATISTICS 1965

	<i>No. of Sessions</i>	<i>No. of Attendances</i>	<i>No. of Patients</i>	<i>No. of New Cases</i>
Queen Alexandra ..	198	1,456	532	158
St. Mary's	101	736	284	95
	299	2,192	816	253
Domiciliary Visits ..	—	1,604	261	52
TOTAL	299	3,796	1,077	305

Average number of clinic attendances per session — 7.3.

<i>Categories of Patients</i>					
<i>Elderly</i>	<i>Handicapped</i>	<i>Expectant Mothers</i>			<i>Total</i>
1,016	61	Nil			1,077

<i>Sources of Referral of New Patients</i>					
	<i>G.P.</i>	<i>H.V.</i>	<i>District Nurse</i>	<i>Others</i>	<i>Total</i>
Clinic Patients ..	144	99	9	1	253
Domiciliary Patients	16	26	10	—	52
TOTALS ..	160	125	19	1	305

It will be seen that domiciliary visits increased considerably — largely because of the increasing disability of patients referred, but occasionally it was the only means by which treatment could be given; the need for a domiciliary visit was usually discussed between the Senior Medical Officer and the person referring the patient.

Patients who had attended the chiropody clinic in connection with one of the community centres were transferred to the local authority clinics when the chiropodist retired.

The heavy demand that this service makes on ambulance transport needs to be seen to be appreciated. Delays are inevitable when this service is used to convey patients to and from clinics and hinder the smooth working of the chiropody service to the frustration of patients, chiropodists and ambulance staff alike. It says much for the forbearance of all those concerned that the service has continued to operate as successfully as it has under the increasing pressure of the last year.

The Old People's Welfare Committee and the Visiting Service have provided valuable cover for the elderly in their own homes. The year saw the establishment of three more lunch clubs, which have become a recognised feature of the service to the elderly in the City. The close liaison that exists between the various statutory officers and those of the Old People's Welfare Committee and the Visiting Service, has enabled a wide variety of help to be given to the very considerable number of the elderly in need in the City.

MATERNAL AND CHILD WELFARE STATISTICS

	<i>Total Attendances</i>	<i>New Cases</i>	<i>Seen by Medical Officers</i>
Fratton	8,573	680	947
Hilsea	4,199	226	356
Epworth Road	11,146	474	707
Drayton	4,690	208	152— (no doctor after July)
Eastney	8,971	681	1,156
Silver Street	3,488	270	—
Portsea	2,639	160	352
Twyford Avenue	7,017	403	521
Tangier Road	3,935	196	365
Cosham	5,590	297	321
Falmouth Road	1,860	135	345
Hempsted Road	3,799	153	261
TOTALS	65,907	3,883	5,483
TOTALS FOR 1964	69,670	3,998	5,225

DAY NURSERIES

The following are the statistics relating to the two day nurseries:

	<i>Admissions</i>	<i>No. on register at 31-12-65</i>	<i>No. awaiting admission at 31-12-65</i>
ST. PETER'S DAY NURSERY (Complement 35)	61	44	} 18
TWYFORD AVENUE DAY NURSERY (Complement 35)	43	42	
	104	86	18

ANTE-NATAL AND POST-NATAL CLINICS

Details of the work carried out at Ante-Natal and Post-Natal Clinics during the year are given below:—

	ANTE-NATAL				POST-NATAL	
	<i>No. of new patients</i>		<i>Total attendances</i>		<i>Total attendances</i>	
	1965	1964	1965	1964	1965	1964
Fratton (A.N., 4 clinics weekly) (P.N., 1 clinic monthly) ..	1,103	1,301	6,114	6,765	29	62
Paulsgrove (A.N., 1 clinic weekly) (P.N., 1 clinic monthly) ..	155	201	954	1,268	42	43
Eastney (A.N., 2 clinics weekly) ..	485	346	2,617	2,008	—	—
Cosham (A.N., 1 clinic weekly) ..	209	221	1,101	1,194	—	—
Portsea (A.N., 1 clinic weekly) ..	201	172	947	913	—	—
TOTALS	2,153	2,250	11,733	12,148	71	105

HEALTH VISITOR/GENERAL PRACTITIONER LEAGUE

In 1965 the experimental scheme started in June 1963 was extended to cover 11 practices involving 13 health visitors and 11 general practitioners in all. Results of the liaison scheme continue to be most encouraging corroborating the favourable impressions received at the end of 1964. The Deputy Medical Officer of Health, Dr. J. Hall, prepared an account of the scheme which was accepted for publication in the *Lawyer* in June 1965, and a copy of the Medical Officer of Health's report to the Health Committee is included as Appendix 'A'.

INFANT MORTALITY 1965

DEATHS FROM STATED CAUSES AT VARIOUS AGES
UNDER ONE YEAR OF AGE

Cause of Death	Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under 1 year
	Meningococcal infections	-	-	-	-	-	-	-	-	-
Other infective	-	-	-	-	-	-	-	-	-	-
Pneumonia	1	-	-	-	1	2	2	-	2	7
Bronchitis	-	-	-	-	-	1	3	3	-	7
Other respiratory	1	-	-	-	1	-	-	-	-	1
Gastritis, enteritis and diarrhoea ..	-	-	-	-	-	-	-	1	-	1
Congenital malformations	7	-	1	-	8	2	-	-	1	11
Injury at birth	3	-	-	-	3	2	-	-	-	5
Post-natal asphyxia and atelectasis	5	-	-	-	5	-	-	-	-	5
Immaturity	9	-	-	-	9	1	-	-	-	10
Other causes	7	-	-	-	8	-	2	2	-	12
Accidents	-	-	-	-	-	-	-	1	1	2
Homicide	-	-	-	-	-	-	-	-	-	-
TOTALS	33	-	1	-	34	8	7	7	4	60
Previous Year (1964)	45	3	1	2	51	9	11	3	5	79

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND PRE-SCHOOL CHILDREN

Number provided with dental care:

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>	<i>Made Dentally Fit</i>
Expectant and Nursing Mothers ..	116	93	93	68
Children under 5	113	106	106	60

Forms of dental treatment provided:

	<i>Scalings and Gum Treatment</i>	<i>Fillings</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Radio-graphs</i>
Expectant and Nursing Mothers	21	241	49	10	3
Children under five	—	298	140	39	—

HEALTH VISITING

The health visitors paid 64,552 (66,960) visits during the year:—

	<i>Total Number of Visits</i>	
	1965	1964
Visits to children under 5 years of age ..	48,889	50,858
Visits in respect of old people	7,595	7,824
Visits in respect of tuberculosis patients ..	4,464	4,628
Visits to expectant mothers and cases of illness	3,604	3,650

Details of the health visitors' work in schools are given in the report of the Principal School Medical Officer.

HEALTH VISITOR/GENERAL PRACTITIONER LIAISON

In 1965 the experimental scheme started in June 1964 was extended to cover 11 practices involving 13 health visitors and 31 general practitioners in all. Results of the liaison scheme continue to be most encouraging consolidating the favourable impressions received at the end of 1964. The Deputy Medical Officer of Health, Dr. T. Hall, prepared an account of the scheme which was accepted for publication in the *Lancet* in June 1965, and a copy of the Medical Officer of Health's report to the Health Committee is included as Appendix 'A'.

HOME HELP SERVICE

This Service continued to have many demands made upon it and all cases receiving assistance were carefully selected and supervised.

In May, 1965, an Assistant Home Help Supervisor was appointed, and in consequence greater outside supervision was exercised and a total of 1,347 home visits were made.

The group scheme, in which a home help is given the care of several elderly people whose homes are in close proximity to one another, continued to work satisfactorily and these are being greatly increased in number, thus giving the elderly a regular service with the same home help.

The number of hours worked by home helps for old people and chronic cases represents 95.6% (96) of the work of the Service.

Number of home helps at the end of the year	.. .. .	195
Number of maternity cases helped	.. .. .	106
Number of tuberculosis cases helped	.. .. .	10
Number of chronic cases helped (including the aged and infirm)	.. .. .	1,815
Number of cases of illness helped (on a temporary basis)	.. .. .	127
Number of hours worked for maternity cases	.. .. .	2,930 $\frac{1}{4}$
Number of hours during which home helps were employed		
	TOTAL	248,062 (203,428 $\frac{1}{2}$)

HOME NURSING

Report on the Work of the Portsmouth Victoria Nursing Association.

Throughout 1965 there was an increasing demand for skilled nursing care. The total number of patients nursed increased from 4,461 to 4,564 and the number of visits totalled 127,144 compared with 123,397 in the previous year, an increase of 3,747. Visits to patients over 65 years of age numbered 92,782 which was 5,882 more than in 1964 and as a result of this much time was spent in the nursing of terminal illnesses and medico-social problems.

Pressure on the Nursing Sisters has been considerably relieved by the employment of District Auxiliaries who render invaluable service to the aged and infirm and are greatly appreciated by both staff and relatives. They have now been equipped with a brown outdoor uniform and are recognised members of the nursing team.

The staff position, though fairly good early in the year, deteriorated later when a number of Nursing Sisters left for a variety of reasons. The usual District Training Course was held but difficulty was experienced in finding a sufficient number of state registered nurses willing to undergo training. Constant advertising appears to be the only solution to the staff problem. An increasing number of nurses use their own cars for duty and the committee found it possible to withdraw two of the Association's cars from service.

The introduction of disposable syringes in April was welcomed by the Sisters as a great improvement on previous methods of giving intra-muscular injections which continue to be an important feature of the work. Unfortunately the saving in time and energy by their use was to some extent nullified by an increase in the need for surgical dressings and a new directive to allow ten minutes for boiling instruments. With many more patients being discharged early from hospital, pre-sterilised dressings and disposable forceps would be a welcome addition to nursing procedures.

The supply of incontinence pads has helped both relative and nursing staff but the need for an adequate laundry service still remains a major problem and lack of linen, washing and drying facilities still causes great distress in many homes. Relatives nursing patients at home with terminal and long-term illnesses are under severe emotional strain which is aggravated by this need and without clean linen nurses are often unable to leave the patient comfortable.

An excellent liaison prevails with general practitioners, hospital staff and all branches of the health services. In conclusion, members of the Executive Committee wish to thank the Superintendents and nurses for their hard work throughout the year and to express their appreciation of the help afforded the Association by representatives of Portsmouth Corporation.

REPORT OF THE MEDICAL OFFICER OF HEALTH
 PORTSMOUTH VICTORIA NURSING ASSOCIATION
 STATISTICS FOR 1965

	NURSES' HOMES				TOTAL	
	<i>Radnor House</i>		<i>Beddow House</i>			
	1965	1964	1965	1964	1965	1964
Number of nurses employed for visiting (average) ..	21	23½	17	18	38	41½
Maximum in any one month	22½	21	14	17	36½	38
Minimum in any one month ..	19	24	18	22	37	46
Supervisory Staffs	3	3	3	3	6	6

	NO. OF CASES				NO. OF VISITS			
	<i>Radnor House</i>		<i>Beddow House</i>		<i>Radnor House</i>		<i>Beddow House</i>	
	1965	1964	1965	1964	1965	1964	1965	1964
Pre-school children	97	118	60	42	691	821	468	303
School children ..	74	69	44	56	650	654	485	677
Over 65	1,636	1,620	1,184	1,132	61,887	57,587	30,895	29,312
Others	932	894	537	530	17,314	18,766	14,754	15,277
TOTAL ..	2,739	2,701	1,825	1,760	80,542	77,828	46,602	45,569

VACCINATION AND IMMUNISATION

Smallpox Vaccination

The numbers vaccinated by the Health Department and general practitioners were as follows:—

	1965			1964		
	<i>Primary</i>	<i>Re-Vaccs.</i>	<i>Total</i>	<i>Primary</i>	<i>Re-Vaccs.</i>	<i>Total</i>
Health Department	707	339	1,046	822	466	1,288
Practitioners	1,773	203	1,976	1,457	201	1,658
	<u>2,480</u>	<u>542</u>	<u>3,022</u>	<u>2,279</u>	<u>667</u>	<u>2,946</u>

In accordance with the Ministry of Health's recommendation, children are vaccinated in the second year of life, except for a few younger children who are going abroad with parents and require international certificates.

The parents of children who have reached the age of 13 months and for whom we have no record card are sent a letter encouraging them to have their children vaccinated at a child welfare clinic or by the general practitioner.

315 (217) international certificates were completed for persons going abroad.

Vaccination can be obtained at all the child welfare clinics, at the Vaccination Clinic, Priorsdean Hospital and from general practitioners.

One case of encephalopathy following vaccination was admitted to hospital during the year. The child, age one year, recovered.

Sterilisation of Syringes

From January to August inclusive, the Sterile Supply Service of the Portsmouth and Isle of Wight Area Pathological Board supplied a sterile syringe for each individual inoculation. Disposable needles were used for the inoculations. From September onwards disposable syringes and needles were used for all types of inoculations.

One State Enrolled Nurse is employed part-time for syringe filling and the other part of her time is spent in dealing with verminous persons at the branch school clinics and in the home.

Reactions

Out of 1,176 children immunised with triple vaccine in the child welfare clinics and nurseries, 76 were known to have had reactions and these were mild or moderate. There were no severe reactions.

Anti-histamine tablets have been used with success in the anticipation and prevention of reactions.

Whooping Cough (Pertussis) Immunisation

Immunisations were carried out with triple or quadruple vaccine in all cases. Although pertussis vaccine is available it was not used during the year.

60 cases of whooping cough, compared with 126 cases for 1964 were notified by the general practitioners. Of the 60 cases, one had been immunised in 1965, three in 1964, two in 1963, four in 1962, one in 1961 and three in 1960. Of the remainder, no record could be found.

Diphtheria Immunisation

Immunisation can be obtained at all child welfare clinics, the Vaccination Clinic, Priorsdean Hospital and private practitioners.

Primary immunisations with triple vaccine are carried out from the age of four months. On the completion of the course of immunisation with three inoculations, the parent is given a record card indicating that triple vaccine has been used, and is told to produce the record card in the event of the child having an accident or injury which might require anti-tetanic treatment.

Booster doses of triple vaccine are given to infants when they reach the age of 18 months and reminders are sent to parents asking them to attend at the clinic for this purpose. The record cards for the immunisation which have been completed by the private practitioners are returned to them in order that they may give the booster doses to their own patients.

1,876 of these booster doses were given during 1965 by general practitioners and at child welfare clinics.

School children are immunised with combined (diphtheria and tetanus) vaccine for primary immunisations. After the second inoculation a record card is posted to each parent with the advice that a third dose of tetanus toxoid should be given in six months time. Diphtheria (T.A.F.) or combined (diphtheria and tetanus) vaccine is used for supplementary immunisation depending upon whether the child has had triple or combined vaccine for primary immunisation. These supplementary immunisations are given at the ages of five, nine and thirteen years in the schools.

The following table indicates the work done during the past ten years:—

<i>Year</i>	<i>Completed course</i>	<i>'Booster' doses</i>	<i>Cases of diphtheria admitted to hospital</i>	<i>Deaths from diphtheria</i>
1956	3,176	8,059	—	—
1957	2,967	7,502	—	—
1958	3,040	8,132	—	—
1959	3,245	8,263	—	—
1960	3,856	6,916	—	—
1961	4,364	9,629	—	—
1962	3,728	8,462	—	—
1963	3,741	8,400	—	—
1964	3,758	6,486	—	—
1965	3,654	7,954	—	—

Six-monthly visits to Council schools continued and as the children became due for immunisation, lists were sent to the head teachers.

The help given by the head teachers has again been excellent.

Six private schools were also visited for diphtheria immunisation.

There were no cases of diphtheria notified within the City during the year, nor have there been since 1956.

The proportion immunised by the various agencies (shown as a percentage of children under the age of 5 years) was:—

	1965	1964
Clinics	33.6	33.9
Schools	0.7	0.2
Nurseries	0.6	0.5
Private Practitioners	65.1	65.4

Number of children who received the completed course:—

	1965	1964
Under five years	3,334	3,398
Five to fifteen years	318	357
Over fifteen	2	3
	<hr/>	<hr/>
Supplementary doses given to school aged children	3,654	3,758
	7,954	6,486
	<hr/>	<hr/>
	11,608	10,244

The number of children primarily immunised since the inception of the scheme in 1935 is 119,135.

STATISTICS RELATING TO PERTUSSIS IMMUNISATION

	1965	1964
Completed courses: Under five	3,334	3,391
Five to fifteen	61	59
Over fifteen	2	1
	<hr/>	<hr/>
	3,397	3,451

Cholera, Typhoid and Tetanus

362 (355) individuals, mostly persons going abroad, were vaccinated for one or more of the above diseases.

The actual numbers were:—

	1965	1964
Cholera	108	75
Cholera-typhoid	79	64
Typhoid and para-typhoid	174	208
Tetanus-typhoid	—	8
Tetanus toxoid	59	19
Typhus	1	—
	<hr/>	<hr/>
	421	374

187 (139) international certificates of cholera were issued.

Needle Sharpening

In 1965 disposable needles replaced the traditional type of needle.

B.C.G. Vaccination of 13-year-old School Children

The annual visits to the Local Education Authority's schools were arranged during the winter months to avoid doing vaccinations in the summer.

The Assistant Superintendent Health Visitor visited the schools, by appointment, and applied the 'Heaf' test. The Medical Officer-in-Charge of Immunisation visited seven days later to read the results of the tests and to vaccinate the negative reactors.

The acceptance rate amongst the 13-year-old school children in the Local Education Authority's schools was 95.7% compared with 89.4% in 1964. This level can be considered as most satisfactory.

STATISTICS RELATING TO B.C.G. VACCINATION

L.E.A. SCHOOLS

<i>Year</i>	<i>No. of schools visited</i>	<i>Forms sent out</i>	<i>No. of acceptances</i>	<i>No. tested</i>	<i>Already attending Chest Clinic</i>	<i>Negative reactors (vaccinated)</i>	<i>Positive reactors (X-rayed)</i>
1965	21	1,613	1,545 (95.7%)	1,639	16	1,351 (89.6%)	157 (10.4%)
1964	31	2,203	1,970 (89.4%)	2,206	9	1,802 (89.9%)	218 (10.1%)

The increased figure of the number tested compared with the number of acceptances is caused by the absentees from testing and vaccination from the previous year.

NON-L.E.A. SCHOOL

<i>Name of School</i>	<i>No. tested</i>	<i>Negative reactors (vaccinated)</i>	<i>Positive reactors (X-rayed)</i>
Portsmouth Grammar School	60	54	4

The children who were either absent from school for 'Heaf' testing or vaccination, and who would have left school by the next annual visit to that school, were referred to the Consultant Chest Physician for this purpose, so that they would not miss the opportunity of being vaccinated before leaving school.

Poliomyelitis Vaccination

Vaccination is available to all persons over the age of six months and can be obtained at all child welfare clinics, the Vaccination Clinic, Priorsdean Hospital, and general practitioners. Most vaccinations are done with Sabin-oral vaccine but one or two general practitioners still use Salk vaccine. Three general practitioners used Quadruple (diphtheria, whooping cough, tetanus and poliomyelitis) vaccine occasionally.

The 100 general practitioners in Portsmouth participate in the scheme and vaccinate their own patients.

Expectant mothers are offered vaccination when attending for examination at the ante-natal clinics.

Children who missed vaccination at infancy are offered it at school entry by the head teachers. These vaccinations are done by a nurse at the schools.

Fourth doses of vaccine, which are given to children between the ages of five and sixteen years, are not given in the schools. These doses can be obtained at any child welfare clinic or through the general practitioners, depending on where the initial vaccination is given. As children become due for fourth doses, the record cards are returned to the general practitioners who gave the original vaccination and reminders are sent for those vaccinated in the child welfare centres.

ANNUAL STATISTICS 1965

Persons completing primary vaccination.

<i>Vaccine given</i>	<i>Year of Birth of Persons Vaccinated</i>							<i>Total</i>
	1965	1964	1963	1962	1958-61	<i>Others under age 16</i>	<i>Others over age 16</i>	
Sabin-oral.. ..	668	1,941	290	125	1,064	99	75	4,262
Salk	—	15	2	—	—	—	2	19
Quadruple ..	39	25	1	1	1	—	—	67
TOTALS ..	707	1,981	293	126	1,065	99	77	4,348

Persons receiving re-inforcing doses.

<i>Vaccine given</i>	<i>Year of Birth of Persons Vaccinated</i>							<i>Total</i>
	1965	1964	1963	1962	1958-61	<i>Others under age 16</i>	<i>Others over age 16</i>	
Sabin-oral.. ..	—	4	—	—	1,588	30	—	1,622
Salk	—	3	4	—	14	—	—	21
Quadruple ..	—	—	—	—	5	—	—	5
TOTALS ..	—	7	4	—	1,607	30	—	1,648

Distribution of Poliomyelitis Vaccine

Vaccine is supplied, on application, to general practitioners at the Vaccination Clinic, Priorsdean Hospital. In addition Mr. R. G. Tremlett, Pharmacist, has been most helpful in the distribution of vaccine which he delivers, free of charge, to many of the general practitioners.

There were no cases of poliomyelitis notified within the City during the year.

Measles Vaccination

At the request of the Medical Research Council, all children of the control group for the 1964 Field Trial of measles vaccines were offered vaccination in the autumn.

The vaccination consisted of one dose of killed vaccine followed one month later by a further dose of attenuated vaccine.

Statistics relating to the vaccination of the controls and defaulters is given below.

Statistics relating to the measles vaccination of Control and Defaulters done in Autumn 1965

<i>Clinic</i>	<i>Appointments sent out</i>	<i>Did not keep appointments</i>	<i>Percentage of kept appointments</i>	<i>Given killed vaccine</i>	<i>Given live vaccine</i>	<i>Did not attend for live vaccine</i>	<i>Percentage of appointments who completed course</i>
'F' Ward, Priorsdean Hospital	199	103	48%	96	88	8	44%
St. Michael's Church Hall, Hempsted Road	53	34	36%	19	15	4	28%
Clinic, St. George's Square	42	24	43%	18	12	6	29%
Clinic, Northern Road	90	36	60%	54	47	7	52%
Community Centre, Twyford Avenue	89	48	46%	41	41	—	46%
Health Advisory Centre, Prince Albert Road	95	57	40%	38	34	4	36%
TOTAL	568	302	47%	266	237	29	42%

CITY AMBULANCE SERVICE

EMERGENCY SERVICE

The total number of calls via the '999' system during the year was 3,862. This was an increase of 3·8% in comparison with last year, but this percentage increase was appreciably lower than the increases of recent years; in comparison with five years ago, however, calls increased by approximately 28%, and in comparison with ten years ago, they increased by about 56%.

About 11% of the calls were to incidents wherein there were no casualties. This aspect of emergency calls continues to show public awareness of the need for quick action. There were some emergency calls made for an ambulance, however, when rightly the callers should have contacted their general practitioner. Quite often such calls were made because of a degree of panic, or because their family doctor was not immediately available. This percentage of emergency calls remains about the same as in previous years.

There were 39 malicious calls during the year, about the same level as in the previous year.

There were 3,637 emergency cases conveyed in response to '999' calls, an increase of 3% in comparison with the previous year but this increase was not as steep as it has been in the last few years. In comparison with five years ago, however, the increase was 25%, and with ten years ago approximately 57%.

Those suffering injuries due to road accidents were 28·8% of emergency call cases — a very slight increase in comparison with last year. December had the highest number of road accident cases and February the lowest; the highest number in one day was 13 and the highest number from any one accident was 9, but there were 135 other road accidents that had two or more casualties from each.

Persons suffering injury from causes other than road accidents were 30·8% of the whole, and in this group there was a slight decrease in comparison with the previous year. August had the highest number and February the lowest; the highest number in one day was 14 and the highest from any one incident was 2.

Cases of sudden illness were 32% of the total, an appreciable increase in comparison with last year. July had the highest number of cases and March the lowest; the highest number in one day was 10 and the highest number from one incident was 5 (St. Lukes School).

Emergency maternity and gynaecological cases were 1·8% of emergency call cases, a considerable reduction compared with the previous year. March and December had the highest number and November the lowest; the highest number in one day was 2.

Overdoses of pills (4·1%) and coal gas poisoning (0·9%) were appreciably less than last year. July had the highest figure and March the lowest; the highest number in one day was 3.

Burns (0·6%) and scalds (0·7%) were very slightly higher than last year. The highest number was in September and the lowest in October; the highest number in any one day was 3 burns cases, all from the one incident.

Drowning cases were 0·3% of the whole, a slight increase compared with last year. July and August had the highest number.

In general, the level of emergency work continued upward with the greater percentage of emergency call cases continuing to be people who were injured, either in road accidents or from other causes. Generally the greater number of seriously injured people were those involved in road accidents.

The busiest part of the day for emergency call cases was in the afternoons and the busiest days continued to be Fridays and Saturdays. The average time taken from the receipt of a call to arrival at the incident was 6.5 minutes and the average time taken from call to arrival at hospital was 17.0 minutes. These average times are similar to those of last year despite a noticeable increase of traffic in all parts of the City during the day.

The youngest emergency call case during the year was 3 weeks and the eldest was 94 years.

GENERAL SERVICE

In comparison with the previous year, *admissions* continued their downward trend with a very slight decrease, the whole of this decrease was in sitting case admissions. Again, the greater number of admissions were semi-urgent or urgent removals, and there was a noticeable reduction in the number of 'waiting list' admission by ambulance.

Discharges increased very slightly in comparison with the previous year. The stretcher case element in this category increased considerably, with an almost corresponding decrease in sitting cases. This is the first year wherein cases requiring two men to handle them were more than those requiring one man.

There was an appreciable decrease in *inter-hospital transfers* in both stretcher and sitting cases, and this was particularly noticeable in sitting cases.

There was a considerable increase in the *outpatient* category of patient conveyance, this increase was wholly in the stretcher case element. There was a noticeable decrease in sitting cases.

SUPPLEMENTARY SERVICES

The Voluntary Organisation continued to provide ambulance cover during the summer weekends at Clarence Pier (S.J.A.B.) and on Portsdown Hill (B.R.C.S.) They also provided ambulance and first-aid cover at various sporting events throughout the year.

The Hospital Car Service, in comparison with previous years, conveyed a considerably increased number of patients to places outside the City. The greater number of these were to places in the South, but they also conveyed a number to places in the Midlands and the West country. Throughout the year there were many occasions when requests were of very short notice, but the Area Organiser met every demand — some, of which at less than an hour's notice. There was no break in the service provided by this Voluntary Organisation for holidays, etc., and this says much for its organisation and flexibility.

Mental Welfare Officers conveyed a number of cases to various places outside the City, the volume ranged about the same as last year.

GENERAL

In comparison with the previous year the overall increase of patient conveyance was 2%; in comparison with five years ago (1960) the increase was 16%, and with ten years ago (1955) was approximately 44%.

Outpatients continued to be by far the greater percentage of all patients conveyed and with the increase of patients in this category requiring two men to handle them, it absorbed almost the whole of the manpower on duty during the day time. Outpatients continued to have the greatest number of abortive journeys, and although few in relation to the whole, they absorbed time and mileage that could have been more gainfully utilized. It was again obvious that treatment departments were having to adhere to strict time-tables to deal with the volume of outpatients. In consequence, any lateness on the part of the Ambulance Service tended to reduce the patient's time under treatment.

The main bulk of patient conveyance continued to be between 8 a.m. and 5 p.m. with peak periods between 10 and 11.30 a.m. and between 2.30 and 4 p.m. Generally the Service was under pressure at all times during the day from Monday to Friday and on occasions there were delays to patients, particularly in the return of outpatients.

The number of patients to places outside the City increased in comparison with last year, the greater bulk of them to places in South East Hampshire. Ambulance journeys to the London area decreased in the latter part of the year with the opening of a neuro-surgical unit in Southampton and patients conveyed by train increased slightly in comparison with last year, again about 40% of them were to the London area.

Even though there were a number of new, and consequently inexperienced ambulance crews, public relations between staff and patients remained good. Very few complaints from patients were received, but there were a considerable number of messages and letters of appreciation. Co-operation and relationships with hospital staffs also remained very good.

Year	Males	Females	Total	C.C.P.	O.P.	Males	Females	Patients	
								Other	Other
1940	100	100	200	10	10	100	100	100	100
1941	110	110	220	12	12	110	110	110	110
1942	120	120	240	15	15	120	120	120	120
1943	130	130	260	18	18	130	130	130	130
1944	140	140	280	20	20	140	140	140	140
1945	150	150	300	22	22	150	150	150	150
1946	160	160	320	25	25	160	160	160	160
1947	170	170	340	28	28	170	170	170	170
1948	180	180	360	30	30	180	180	180	180
1949	190	190	380	32	32	190	190	190	190
1950	200	200	400	35	35	200	200	200	200
1951	210	210	420	38	38	210	210	210	210
1952	220	220	440	40	40	220	220	220	220
1953	230	230	460	42	42	230	230	230	230
1954	240	240	480	45	45	240	240	240	240
1955	250	250	500	48	48	250	250	250	250
1956	260	260	520	50	50	260	260	260	260
1957	270	270	540	52	52	270	270	270	270
1958	280	280	560	55	55	280	280	280	280
1959	290	290	580	58	58	290	290	290	290
1960	300	300	600	60	60	300	300	300	300
1961	310	310	620	62	62	310	310	310	310
1962	320	320	640	65	65	320	320	320	320
1963	330	330	660	68	68	330	330	330	330
1964	340	340	680	70	70	340	340	340	340
1965	350	350	700	72	72	350	350	350	350
1966	360	360	720	75	75	360	360	360	360
1967	370	370	740	78	78	370	370	370	370
1968	380	380	760	80	80	380	380	380	380
1969	390	390	780	82	82	390	390	390	390
1970	400	400	800	85	85	400	400	400	400
1971	410	410	820	88	88	410	410	410	410
1972	420	420	840	90	90	420	420	420	420
1973	430	430	860	92	92	430	430	430	430
1974	440	440	880	95	95	440	440	440	440
1975	450	450	900	98	98	450	450	450	450
1976	460	460	920	100	100	460	460	460	460
1977	470	470	940	102	102	470	470	470	470
1978	480	480	960	105	105	480	480	480	480
1979	490	490	980	108	108	490	490	490	490
1980	500	500	1000	110	110	500	500	500	500
1981	510	510	1020	112	112	510	510	510	510
1982	520	520	1040	115	115	520	520	520	520
1983	530	530	1060	118	118	530	530	530	530
1984	540	540	1080	120	120	540	540	540	540
1985	550	550	1100	122	122	550	550	550	550
1986	560	560	1120	125	125	560	560	560	560
1987	570	570	1140	128	128	570	570	570	570
1988	580	580	1160	130	130	580	580	580	580
1989	590	590	1180	132	132	590	590	590	590
1990	600	600	1200	135	135	600	600	600	600
1991	610	610	1220	138	138	610	610	610	610
1992	620	620	1240	140	140	620	620	620	620
1993	630	630	1260	142	142	630	630	630	630
1994	640	640	1280	145	145	640	640	640	640
1995	650	650	1300	148	148	650	650	650	650
1996	660	660	1320	150	150	660	660	660	660
1997	670	670	1340	152	152	670	670	670	670
1998	680	680	1360	155	155	680	680	680	680
1999	690	690	1380	158	158	690	690	690	690
2000	700	700	1400	160	160	700	700	700	700
2001	710	710	1420	162	162	710	710	710	710
2002	720	720	1440	165	165	720	720	720	720
2003	730	730	1460	168	168	730	730	730	730
2004	740	740	1480	170	170	740	740	740	740
2005	750	750	1500	172	172	750	750	750	750
2006	760	760	1520	175	175	760	760	760	760
2007	770	770	1540	178	178	770	770	770	770
2008	780	780	1560	180	180	780	780	780	780
2009	790	790	1580	182	182	790	790	790	790
2010	800	800	1600	185	185	800	800	800	800
2011	810	810	1620	188	188	810	810	810	810
2012	820	820	1640	190	190	820	820	820	820
2013	830	830	1660	192	192	830	830	830	830
2014	840	840	1680	195	195	840	840	840	840
2015	850	850	1700	198	198	850	850	850	850
2016	860	860	1720	200	200	860	860	860	860
2017	870	870	1740	202	202	870	870	870	870
2018	880	880	1760	205	205	880	880	880	880
2019	890	890	1780	208	208	890	890	890	890
2020	900	900	1800	210	210	900	900	900	900
2021	910	910	1820	212	212	910	910	910	910
2022	920	920	1840	215	215	920	920	920	920
2023	930	930	1860	218	218	930	930	930	930
2024	940	940	1880	220	220	940	940	940	940
2025	950	950	1900	222	222	950	950	950	950
2026	960	960	1920	225	225	960	960	960	960
2027	970	970	1940	228	228	970	970	970	970
2028	980	980	1960	230	230	980	980	980	980
2029	990	990	1980	232	232	990	990	990	990
2030	1000	1000	2000	235	235	1000	1000	1000	1000

WHOLE SERVICE

TABLE 'A'

Category	Directly Provided	Train and Boat	Supplementary			Totals	% of Total
			H.C.S.	V.O.	M.W.O.		
Accident and Emergency ..	3,637	—	—	40	—	3,677	3·8%
Admissions	5,879	38	31	—	17	5,965	6·1%
Discharges	5,813	85	146	—	—	6,044	6·2%
Transfers	15,064	77	353	—	8	15,502	15·9%
Outpatients	65,073	106	122	—	—	65,301	66·9%
Others	1,054	—	—	—	—	1,054	1·1%
TOTAL	96,520	306	652	40	25	97,543	100%
Mileage	324,677	22,074	20,648	390	1,788	369,577	
Miles per patient	3·3	72·1	31·6	9·7	71·5	3·7	

EMERGENCY CALL PATIENTS

Directly Provided Service

TABLE 'B'

Month	Injuries		Illness	Matty.	O.D.	C.G.P.	Burns	Scalds	Drn.	Total
	R.T.A.	Other Causes								
Jan. ..	80	72	90	3	13	2	3	2	—	265
Feb. ..	65	67	86	7	12	8	4	2	—	251
Mar. ..	76	92	66	8	7	2	2	1	1	255
Apr. ..	86	76	88	7	14	3	4	2	1	281
May ..	113	104	112	4	10	1	4	2	—	350
June ..	75	107	112	4	15	—	—	3	1	317
July ..	104	109	114	6	16	5	3	1	3	361
Aug. ..	80	123	109	6	18	—	—	2	3	341
Sept. ..	89	106	80	7	8	2	—	8	—	300
Oct. ..	94	106	100	4	13	3	—	1	—	321
Nov. ..	71	81	103	2	14	3	1	2	1	278
Dec. ..	114	76	104	8	9	3	2	—	1	317
TOTAL ..	1,047	1,119	1,164	66	149	32	23	26	11	3,637

WORK OF THE TUBERCULOSIS SERVICE

By the Consultant Chest Physician

There have been no general changes in policy in the work of tuberculosis control during 1965.

The scope of this work is gradually contracting, along with the control of chronic infectious tuberculosis, and, while it is clearly necessary to continue all methods of case finding, and contact control, as rigorously as ever, it is gratifying to see the number of newly diagnosed cases continuing to slowly decline from year to year.

DEATHS

Year	1960	1961	1962	1963	1964	1965
Number of deaths	17	14	12	10	8	12

PRIMARY NOTIFICATIONS

Year	1960	1961	1962	1963	1964	1965
Number of notifications	10	11	12	13	14	15

NEW PATIENTS EXAMINED

Year	1960	1961	1962	1963	1964	1965
Number of patients examined	1,233	1,190	1,157	1,124	1,091	1,058

CONTACTS

Year	1960	1961	1962	1963	1964	1965
Number of contacts	373	352	341	330	319	308

NUMBER OF CASES ON REGISTER—31st DECEMBER

	1960	1961	1962	1963	1964	1965
RESPIRATORY	1,516	1,377	1,272	1,204	1,152	1,088
NON-RESPIRATORY	102	88	88	90	94	95
TOTAL	1,618	1,465	1,360	1,294	1,246	1,183

DEATHS

Year	Respiratory	Death Rate per 100,000 population	Non- respiratory	Death Rate per 100,000 population
1960 ..	17	7.8	4	1.8
1961 ..	14	6.1	2	0.9
1962 ..	11	4.6	1	0.4
1963 ..	15	6.6	2	0.9
1964 ..	6	2.7	1	0.4
1965 ..	15	6.6	1	0.4

PRIMARY NOTIFICATIONS

Year	Respiratory	Non- Respiratory	Total
1959	97	10	107
1960	86	18	104
1961	85	4	89
1962	82	2	84
1963	70	8	78
1964	65	7	72
1965	64	4	68

NEW PATIENTS EXAMINED

1960	1961	1962	1963	1964	1965
1,225	1,180	1,157	1,196	1,052	995

CONTACTS

	1960	1961	1962	1963	1964	1965
No. of new contacts examined	690	585	469	561	525	373
No. of contacts proved definite cases ..	5	6	2	10	10	10

SUMMARY OF CASES OF TUBERCULOSIS ON CLINIC REGISTER 1965

DIAGNOSIS	RESPIRATORY			NON-RESPIRATORY			TOTAL			GRAND TOTAL
	MEN	WM.	CH.	MEN	WM.	CH.	MEN	WM.	CH.	
	A. (1) No. of definite cases of tuberculosis on register 1st January 1965 ..	690	424	38	47	41	6	737	465		44	1,246
(2) Transfers from other authorities ..	4	6	1	—	1	—	4	7	1	12
(3) Lost sight of cases returned during year ..	1	2	—	—	—	—	1	2	—	3
B. No. of new cases diagnosed as tuberculosis during 1965	14	4	12	1	1	2	15	5	14	34
(1) Class A. (T.B. minus) ..	25	9	—	—	—	—	25	9	—	34
(2) Class B. (T.B. plus) ..	—	—	—	—	—	—	—	—	—	—
C. No. of cases included in A and B written off the Register during the year as:	32	30	2	1	2	—	33	32	2	67
(1) Recovered ..	25	13	—	—	1	—	25	14	—	39
(2) Dead (all causes) ..	16	14	—	—	—	—	16	14	—	30
(3) Removed to other areas ..	8	2	—	—	—	—	8	2	—	10
(4) For other reasons ..	—	—	—	—	—	—	—	—	—	—
D. No. of definite cases of tuberculosis on Register 31st December 1965	653	386	49	47	40	8	700	426	57	1,183

NOTIFICATIONS BY AGE GROUPS

AGE GROUP	* NEW CASES						GRAND TOTAL
	RESPIRATORY		NON-RESPIRATORY		COMBINED		
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	
0—1	- (-)	- (1)	- (-)	- (-)	- (-)	- (1)	- (1)
1—4	4 (1)	- (3)	1 (-)	- (-)	5 (1)	- (3)	5 (4)
5—14	3 (2)	5 (3)	1 (1)	- (1)	4 (3)	5 (4)	9 (7)
15—24	8 (5)	2 (3)	- (-)	- (-)	8 (5)	2 (3)	10 (8)
25—34	3 (5)	3 (3)	1 (1)	1 (1)	4 (6)	4 (4)	8 (10)
35—44	8 (3)	2 (4)	- (-)	- (-)	8 (3)	2 (4)	10 (7)
45—54	9 (6)	2 (4)	- (-)	- (-)	9 (6)	2 (4)	11 (10)
55—64	4 (10)	1 (2)	- (1)	- (-)	4 (11)	1 (2)	5 (13)
65 plus	7 (8)	3 (2)	- (1)	- (1)	7 (9)	3 (3)	10 (12)
TOTAL	46 (40)	18 (25)	3 (4)	1 (3)	49 (44)	19 (28)	68 (72)

* Includes all primary notifications and new cases coming to the notice of the Medical Officer of Health by other means.

(Figures in brackets are those of 1964)

DEATHS BY AGE GROUPS

AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GRAND TOTAL
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	
0—1	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)
1—4	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)
5—14	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)
15—24	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)
25—34	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)	- (-)
35—44	- (1)	- (-)	- (-)	- (-)	- (1)	- (-)	- (1)
45—54	2 (-)	1 (-)	- (-)	- (-)	2 (-)	1 (-)	3 (-)
55—64	2 (-)	- (-)	- (1)	- (-)	2 (1)	- (-)	2 (1)
65 plus	7 (4)	3 (1)	- (-)	1 (-)	7 (4)	4 (1)	11 (5)
TOTAL	11 (5)	4 (1)	- (1)	1 (-)	11 (6)	5 (1)	16 (7)

(Figures in brackets are those of 1964)

MEDICAL SOCIAL WORKER'S REPORT

In March 1965 the Whitley Councils for the Health Services issued a circular stating that 'Almoners' should be re-designated 'Medical Social Workers'. Patients who have used the Almoner's services in the past have found the change of name confusing, but to the new patients the name seems to be acceptable and self-explanatory.

Statistics have not been kept during the year for patients who merely require information, for example, about National Health Insurance, pensions, National Assistance, etc., but these queries are time-consuming and involve many telephone calls. Casepapers have been recorded for 250 patients, all of whom presented complex problems. About 50% of these were tuberculous patients and the remainder were those suffering from other chest diseases including Lung Cancer.

A considerable amount of time was spent on home visits, helping the family to make and carry out plans for the patient's care and assisting them to bear emotional strain, especially in terminal illness. There were, too, problems of bad housing and unsatisfactory living conditions; family relationships and personality problems; also the difficulties of finding suitable work for patients handicapped through illness.

It was necessary to find accommodation on discharge from hospital for patients who had previously been of no fixed abode, or were living in lodging houses where they had to fend for themselves. Apart from the fact that it is very difficult to get a vacancy at St. Mary's House, patients often refuse to go there as they associate it with the old Poor Law Institution. There is no hostel for men in Portsmouth and it is not easy to find private lodgings as landladies do not like taking people from hospital.

There is still the problem of patients who do not need hospital treatment but who are not fit to go into ordinary lodgings. For them arrangements have been made in private Homes where they can get a little nursing care, if necessary. The Portsmouth Voluntary Care Committee for Tuberculosis and Lung Diseases have supplemented the fees in these instances, as patients are not usually in a position to pay for it themselves, and the National Assistance Board cannot give more than the ordinary board and lodging allowance which does not meet the cost.

The Care Committee have again helped in many other ways; they have supplied furniture to families who have been rehoused, milk to patients who do not qualify for this under the Free Milk Scheme, clothing, beds and bedding where necessary. They have also paid arrears of rent, rates and hire purchase instalments, and have helped relatives with fares for hospital visiting. They continued their holiday scheme for patients and their families and during the year holidays were arranged for 27 families (54 individuals).

Patients in Hospital and at home have very much appreciated the Art Therapy Scheme sponsored by the Care Committee. All art materials are supplied free of charge, and this is a great help as most of the patients at home are those whose income is National Assistance only and who are handicapped by Bronchitis.

In September 1965 Mrs. Gardner was appointed part-time Social Worker at the Chest Clinic.

A new general professional training leading to the Certificate in Social Work has come into being as a result of the implementation of the Young-husband Report. This is a two-year course and the first one in Portsmouth

started at the Highbury Technical College in September 1965. The Social Work Department at the Chest Clinic is being used for long term placements in practical work — two days a week for six months for first year students, and three days a week for six months for second year students. Supervision of the students and the fortnightly meetings of supervisors at Highbury have increased the work-load considerably.

It is hoped that these Courses, which are excellent, and are based on generic principles, will do much to alleviate the acute shortage of professionally trained social workers.

MASS RADIOGRAPHY — 1965*Report of the Medical Director***ADMINISTRATION**

The Units are administered by the Wessex Regional Hospital Board although quite a lot of work is done for the South West Metropolitan Regional Hospital Board. There are three Units:—

15A *Mobile Unit.* General Public and Industrial.

15B *Mobile Unit.* Sessions primarily for General Practitioners throughout East Hants, West Sussex and Portsmouth.

15C *Static.* Large films at Headquarters.

An additional Session was started at Gosport in order to enable films to be taken for the Chest Physician at Gosport Chest Clinic and also because of an increase in the number of patients referred by General Practitioners.

In passing, I would like to record that I consider that increased use could be made of Mass Radiography Units by relieving general radiological departments of most of their chest work.

MEDICAL STAFF

Owing to the fact that the Portsmouth Group Chest Physicians have absorbed the work of two recently retired Chest Physicians, the work for each remaining individual has increased and, for half the year, the whole of the work of both Units has been carried out by myself with a resultant reduction on the clinical side and the clinical work is no longer carried out in the outlying areas.

ATTENDANCE

The total X-rayed was 66,976, a drop of some 4,000 compared with 1964. As previously, a third of the total examinees have never been X-rayed before and another 27% have not had a film for more than three years.

CASES REFERRED BY GENERAL PRACTITIONERS

This service is becoming increasingly popular and the figure of 14,230 individuals referred is the highest total yet and is a rise of 990 over the 1964 figure. In addition to being the largest number referred, the increase is also the largest to date.

The bulk of significant cases of tuberculosis were found by this service (34 out of 57) and 113 cases of bronchial carcinoma were found out of a total of 135.

PULMONARY TUBERCULOSIS

The incidence of 0.85 per 1,000 is virtually the same as in the previous year. The Portsmouth figure is 0.77 per 1,000 which is the lowest ever recorded.

CARCINOMA OF THE BRONCHUS

The overall incidence remains the same at 2.2 per 1,000 but as can be seen from the tables it is about 12 per 1,000 in the Worthing and Shoreham area. This is no doubt partly due to the fact that almost all the examinees from these places were referred by General Practitioners and is partly due to the high proportion of retired people living in this area.

PORTSMOUTH

A total of 29,706 were examined throughout the year and 23 significant cases of tuberculosis (.77 per 1,000) and 45 cases of carcinoma (1.51 per 1,000) were found; in both diseases the incidence was well below the average for the whole of East Hants and West Sussex.

I wish to thank all members of the staff for their hard work especially as some of the places visited are at such a distance that they either have to travel in their own time or have to live away from their families.

I would also like to thank all the Chest Physicians for their help in dealing with the cases referred to them and to the Medical Officers of Health for their continued co-operation.

TOTAL NUMBERS EXAMINED IN AGE GROUPS

TABLE I

Age Group	—14		14		15/19		20/24		25/34		35/44		45/54		55/59		60/64		65+		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male ..	167	.25	176	.26	3,983	5.95	3,753	5.6	6,698	10.0	7,038	10.51	6,322	9.44	2,793	4.17	2,257	3.37	2,624	3.92	25,811	53.47
Female ..	141	.21	144	.21	4,318	6.45	3,414	5.1	5,731	8.56	6,388	9.54	5,283	7.89	2,138	3.16	1,488	2.22	2,120	3.19	31,165	46.53
TOTAL ..	308	.46	320	.48	8,301	12.39	7,167	10.7	12,429	18.56	13,426	20.05	11,605	17.33	4,931	7.36	3,745	5.59	4,744	7.08	66,976	100.

Number recalled for Clinical Examination—35

Percentage of total examined—.05

ANALYSIS BY AGE—CASES SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS

(Rate per 1,000 in each group)

TABLE II

Age Group	—14		14		15/19		20/24		25/34		35/44		45/54		55/59		60/64		65+		Total	
	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000	No.	per 1,000
Male ..	—	—	—	—	2	.5	4	1.07	3	.45	6	.85	12	1.9	—	—	4	1.77	4	1.52	35	1.36
Female ..	1	7.09	—	—	2	.46	6	1.76	5	.87	3	.47	1	.19	—	—	3	2.02	1	.47	22	.71
TOTAL ..	1	3.25	—	—	4	.48	10	1.4	8	.64	9	.67	13	1.12	—	—	7	1.87	5	1.05	57	.85

TABLE III
ANALYSIS OF ABNORMAL FINDINGS

SECTION A. NEWLY DISCOVERED CASES OF PULMONARY TUBERCULOSIS						Male	Female	Total	Rate per 1,000
0. Cases of Tuberculosis referred to the Chest Clinic or Hospital and considered on investigation to require close Clinic supervision or treatment:—									
						35	22	57	·85
					(a) Not infectious				
					(b) Infectious				
					(c) Not examined				
					(d) Domiciliary treatment				
					(e) Hospital treatment				
					Code (a)	2	—	2	
					(ad)	9	6	15	
					(ae)	7	2	9	
					(bd)	3	4	7	
					(be)	14	9	23	
					(cd)	—	1	1	
					1. Cases of Tuberculosis requiring occasional out-patient supervision only:—	124	116	240	3·58
SECTION B. NON-TUBERCULOUS CONDITIONS									
					2. Malignant neoplasms:				
					(a) Primary carcinoma bronchus	113	22	135	2·2
					(b) Others	9	7	16	
					3. Non-Malignant Neoplasms	4	3	7	
					4. Lymphadenopathies—excluding sarcoids	—	—	—	
					5. Sarcoids—including enlarged hilar glands	9	19	28	
					6. Congenital cardiac abnormalities	3	2	5	
					7. Acquired cardiac abnormalities	43	36	79	
					8. Pneumoconiosis without P.M.F.	2	—	2	
					9. Pneumoconiosis with P.M.F.	2	—	2	
					20. Bacterial and virus infections of the lungs	115	92	207	
					21. Bronchiectasis	18	16	34	
					22. Pulmonary Fibrosis (Non-Tuberculous)	30	11	41	
					23. Spontaneous Pneumothorax	15	2	17	
					24. Abnormalities of the diaphragm and oesophagus	10	21	31	
					25. Pleural effusion (Non-Tuberculous)	5	2	7	

SURVEY ANALYSIS
ORGANISED GROUPS
TABLE IV

TYPE OF SURVEY	Code No.	NUMBER EXAMINED			NUMBERS SHOWING EVIDENCE OF SIGNIFICANT PULMONARY TUBERCULOSIS					
		Male	Female	TOTAL	Male		Female		Combined Total	Combined Incidence per 1,000
					No.	Incidence per 1,000	No.	Incidence per 1,000		
General Public..	7	9,052	12,490	21,542	3	.33	4	.32	7	.32
Industrial Groups ..	6	16,990	10,632	27,622	7	.41	5	.47	12	.43
School Children—positive reactors ..	3V	142	99	241	—	—	—	—	—	—
General Practitioner referrals ..	2	7,516	6,714	14,230	24	3.19	10	1.49	34	2.39
Psychiatric Hospitals ..	9	220	102	322	—	—	—	—	—	—
Contacts ..	4	81	66	147	—	—	2	30.3	2	13.61
Contacts of positive reactors..	40	83	113	196	—	—	—	—	—	—
Out-patients—General Hospitals ..	0	1,004	932	1,936	—	—	1	1.07	1	.52
Persons in Prisons, Borstals, etc. ..	6X	723	17	740	1	1.38	—	—	1	1.35
TOTALS ..		35,811	31,165	66,976	35	.98	22	.71	57	.85

PORTSMOUTH
 CASES OF SIGNIFICANT TUBERCULOSIS

TABLE V

Age Group	—14		14		15/19		20/24		25/34		35/44		45/54		55/59		60/64		65+		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number examined	59	71	36	29	2,156	2,130	1,853	1,736	2,914	2,216	3,193	2,545	2,977	2,412	1,288	897	951	540	943	760	16,370	13,336
Number of active cases	-	-	-	-	2	1	2	1	-	3	6	-	5	-	-	-	1	2	-	-	16	7
Number per 1,000 examined	-	-	-	-	.93	.47	1.08	.58	-	1.35	1.88	-	1.68	-	-	-	1.05	3.7	-	-	.98	.52
Combined rate ..	-	-	-	-	.7	-	.84	-	.58	-	1.05	-	.93	-	-	-	2.01	-	-	-	.77	-

MENTAL HEALTH SERVICES, 1965

Progress during 1965 in the development of the Community Mental Health Services was maintained. Plans formulated in 1962 ('The Ten Year Plan') were reviewed in a comprehensive Report entitled 'Towards Community Care'. The reader of this short report is referred to this 120 page document in which the responsibilities of the Community towards those mentally ill and mentally handicapped are reviewed.

It was not anticipated at the time that the Report would do more than form a document for referral as the years passed, although when brought to the Health Committee it excited considerable comment both locally and by those Authorities to whom it was referred at a national level.

Recruitment to the Local Authority Services was satisfactory during 1965, and the field work staff was increased. The reorientation of the community services to avoid the excessive cost of numbers of hostel type buildings and in favour of field work staff has started but financial difficulties both at a local and national level slowed the impetus of these plans.

Langstone House Centres

Work in the Junior Centre and also in the Adult Centre continued under the auspices of Miss W. D. Cornelius, M.B.E. and Mr. C. D. Branchflower respectively. Continued encouragement and financial help from the Portsmouth and District Society for the Mentally Handicapped was forthcoming.

A Social Club each Tuesday evening was but one activity undertaken out of hours and voluntarily by the Staff.

Lacey Lodge

The Superintendent and Matron (Mr. and Mrs. J. Buckner) took up their appointment in August and by the end of the year, the Hostel was well filled. Some mentally ill patients were accommodated and it is hoped to increase the proportion of the mentally ill using this purpose built facility.

Staff

Staff recruitment was maintained without undue difficulty although the remuneration of well trained persons devoted to caring for those mentally and physically afflicted appears to be falling behind those whose occupation is tangibly involved in producing consumer goods and services. The adverse effect of this disparity on the morale of all those engaged in social work in its widest context is beginning to be felt.

Activity directed towards helping those agencies in the Community involved in psychiatric casework, for example the Samaritans, the Probation Department and Marriage Guidance Council was maintained.

Money apportioned by the Health Committee towards pre and after-care of the mentally ill and in Mental Health Education was above the national average in 1965 and the benefit of this, if continued, will undoubtedly be felt in the future.

Problems to be faced in the future among the younger generation particularly the increased tendency to mis-use drugs is causing concern and contingency plans were put in hand during the year.

STATISTICS FOR THE MENTAL HEALTH SECTION

Care of the Mentally Ill

Cases referred and admitted:

Section 5 (Informal)	..	..	..	..	321
Section 25	..	..	..	..	82
Section 26	..	..	..	..	14
Section 29	..	..	..	..	116

Referrals:

General Practitioner	..	..	..	..	427
Hospital — after in-patient treatment	..	..	..	..	1
Hospital — after out-patient treatment	..	..	..	..	32
Local Education Authority	..	..	..	..	—
Police and Courts	..	..	..	..	61
Other sources	..	..	..	..	383
Total Referrals	..	..	..	..	904

Care of the Subnormal :

Subnormal	..	..	..	..	173
less than 16 years of age	..	..	..	..	27
Severely subnormal	..	..	..	..	130
less than 16 years of age	..	..	..	..	83
Guardianship cases	..	..	..	..	23
Resident in Home or Hostel at Local Authority expense	..	..	..	..	3
Boarded out at Local Authority expense	..	..	..	..	18
In attendance at the Day Training Centre	..	..	..	..	188
Receiving home teaching	..	..	..	..	14

PRIORSDEAN HOSPITAL*By the Physician Superintendent*

Total beds available for Infectious Diseases — 90.

ADMISSIONS

During the year the total admissions numbered 2,004 (2,027). Of this total 984 (993) were cases of Infectious Diseases. 64 (42) were Geriatrics, 192 (404) were cases admitted to the Chest Unit (Pulmonary Tuberculosis and other Chest Diseases), 576 were post-operative gynaecological cases, 145 were medical cases and 43 were renal cases.

The number of Infectious Diseases cases discharged during the year was 976 and there were 35 deaths.

AGE GROUPS (DEATHS)

Under 1 year	..	..	7
1 — 5 years	..	..	7
5 — 20 years	..	..	3
20 — 70 years	..	..	12
70 + years ..	..	..	6
			—
TOTAL	..	..	35
			—

It will be noted that of the 35 deaths, 13 occurred in the extremes of life, i.e. under 1 year and 70 + years (20). 10 deaths occurred within 24 hours of admission to this hospital. The following table gives a more detailed analysis of the ages of the cases which died within 24 hours of admission.

Under 1 year—	0—14 days	..	..	..	—
	14—24 days	..	..	..	1
	1— 3 months	..	..	..	—
	3— 6 months	..	..	..	—
	6— 9 months	..	..	..	1
	9—12 months	..	..	..	—
1— 5 years	..	..	..	..	4
5—20 years	..	..	..	..	1
20—70 years	..	..	..	..	2
70+ years..	..	..	..	..	1
					—
TOTAL	..	..	..	..	10
					—

ADMISSIONS

The following table shows in greater detail the type of infectious disease cases admitted during the year under review:

Streptococcal Infection

(a) Scarlet Fever	19	} 48
(b) Erysipelas	..	..	10
(c) Puerperal Pyrexia	..	..	19

Diphtheria

There were no cases of Diphtheria admitted during the year.

Meningitis 57

Gastro Intestinal Infections

(a) Paratyphoid	—	} 315
(b) Typhoid	4	
(c) Dysentery	3	
(d) Gastro Enteritis ..	153	
(e) Enteritis	3	
(f) Diarrhoea	52	
(g) Diarrhoea and Vomiting	75	
(h) Vomiting	17	
(i) Food Poisoning ..	2	
(j) Gastritis	1	
(k) B. Coli Infection ..	—	
(l) Salmonella Infection ..	5	

Measles 61

Pertussis 21

Influenza 2

Poliomyelitis 4

Miscellaneous 476

Poliomyelitis

Of the 4 cases admitted as suspected Poliomyelitis, none proved to be this disease. The 4 cases proved to be:

- (a) Thrombo-Phlebitis
- (b) Cerebral Aneurysm
- (c) Virus Meningitis
- (d) Influenza

In addition 29 old standing Respiratory Poliomyelitis cases were re-admitted for respiratory treatment.

Meningitis

Of the 57 cases admitted, the following is a table of the 42 which proved to be this disease:

(a) Meningococcal	5	} 42
(b) Pneumococcal	—	
(c) Influenzal	5	
(d) Tuberculous	5	
(e) Purulent	—	
(f) Virus	26	
(g) No Pathogens	—	
(h) Infected	—	
(i) Aseptic	1	

There were 2 old cases of Meningitis admitted.

DEFINITE CASES OF MENINGITIS (Age Groups)

	0—5 yrs.		5—10 yrs.		10—15 yrs.		15—20 yrs.		20+ yrs.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Meningococcal ..	2	2	1	—	—	—	—	—	—	—
Pneumococcal ..	—	—	—	—	—	—	—	—	—	—
Influenzal ..	3	1	—	1	—	—	—	—	—	—
Tuberculous ..	1	1	1	—	—	1	—	—	1	—
Purulent ..	—	—	—	—	—	—	—	—	—	—
Virus ..	1	1	5	—	3	2	3	—	8	3
No Pathogens ..	—	—	—	—	—	—	—	—	—	—
Infected ..	—	—	—	—	—	—	—	—	—	—
Aseptic ..	1	—	—	—	—	—	—	—	—	—

TOTAL—42

Pertussis

Of the 21 cases admitted as Pertussis, 13 proved to be the disease. The following is a table of the age groups of these 13 cases:

	Male	Female
0— 3 months	—	2
3— 6 months	3	1
6—12 months	3	1
1— 2 years	1	—
2— 3 years	2	—
3— 4 years	—	—
4— 5 years	—	—
5—10 years	—	—

Measles

There were 61 cases admitted as Measles. They all proved to be this disease.

Streptococcal Infections

There were 19 cases admitted as Scarlet Fever (1964—8). The following 12 cases proved to be this disease:

	Male	Female
5—10 years	6	3
10—15 years	1	—
15—20 years	1	—
20—70 years	1	—

Intestinal Infections

The total admissions during the year numbered 315, made up as follows:

AGE GROUP (ADMISSIONS)

	0—5		5—10		10—15		15—20		20—70		70+ yrs.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Paratyphoid	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid	—	—	—	—	—	—	—	1	2	1	—	—
Dysentery	1	—	1	—	1	—	—	—	—	—	—	—
Gastro enteritis	86	58	—	2	1	—	—	—	2	2	1	1
Enteritis	1	—	—	—	—	—	—	—	—	1	—	1
Diarrhoea	15	10	1	—	—	1	1	—	4	16	—	4
Diarrhoea & vomiting	26	22	1	2	2	2	—	—	4	11	1	4
Vomiting	11	3	—	—	—	—	—	1	1	1	—	—
Food poisoning	—	—	—	—	—	—	—	—	2	—	—	—
Gastritis	—	—	—	1	—	—	—	—	—	—	—	—
Salmonella Infection.. .. .	—	—	2	2	—	—	—	—	—	1	—	—
B. Coli infection	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	140	93	5	7	4	3	1	2	15	33	2	10

The total number of discharges and deaths was 192 comprised as follows:

(a) Dysentery	—	} 187
(b) Enteritis	2	
(c) Gastro Enteritis	91	
(d) Diarrhoea	61	
(e) Diarrhoea and Vomiting	16	
(f) Vomiting	—	
(g) Gastritis	—	
(h) B. Coli Infection	4	
(i) Salmonella Infection	13	
(j) Food Poisoning	—	

Deaths—

Gastro Enteritis	5
--------------------------	---

Total—

Discharges and deaths	192
-------------------------------	-----

Acute Infectious Gastro Enteritis

During the year 91 cases were discharged, diagnosed as suffering from this condition:

Neo-natal	11	} 91
In Childhood	76	
In Adults	4	

The Analysis of the causal organisms shows:

No Pathogens	80	} 91
B. Coli 0127	1	
Salmonella Heidelberg	—	
B. Coli	1	
Guardia Lamblia	—	
E. Coli	4	
E. Coli 126	1	
E. Coli 055	1	
Parenteral	—	
Salmonella	2	
Coli Pyelitis	1	

Miscellaneous Admissions: See attached table.

MISCELLANEOUS ADMISSIONS

Broncho-Pneumonia	28	Tracheitis	2
Septic Face	1	Laryngo-Tracheo-Bronchitis	2
Staphylococcal 80 Infection	7	T.B. Meningitis	7
Laryngo-Tracheitis	10	Failure to Thrive	1
Convulsions	10	Infective Hepatitis	7
Bronchitis	11	Cerebro-Vascular Accident	2
Sonne Dysentery	12	Walking Exercises	1
Varicella	15	Distended Abdomen	1
Conjunctivitis	3	Sprue	1
Abscess	22	Septic Fingers	1
Chest	12	Infected Foot	1
Pneumonia	21	Primary Complex	1
Upper Respiratory Infection	26	Threadworms	1
Infected Varicose Veins	3	Ulceration of Legs	1
Appendectomy	1	Vincent's Angina	1
Pyelitis	3	Septic Foot	3
Herpes Zoster	4	Rubella	3
Infected Wound	19	Vaginal Discharge	1
Meningeal Irritation	3	Septic Umbilicus	1
P.U.O.	20	Headache	2
Jaundice	5	Osteomyelitis	1
Croup	9	Meningo-Tracheitis	1
Cervical Adenitis	2	Ulcerative Colitis	3
Colitis	1	Cervical Haemolytic Streptococci	1
Sticky Eyes	2	Loss of Weight	1
Throat	2	Myasthenia	1
Septic Wound	4	Pyrexia	2
Post Measles	2	Ulcerative Stomatitis	4
Tonsillitis	9	Tetanus	1
Blood in Stools	1	Lumbar Puncture	1
Old A.P.M.	29	Swollen Shoulder	1
Observation of Legs	1	Bed Sore Infection	1
E. Coli Infection	2	Nephritis	1
?Appendix	1	Erythema Nodosum	2
Pilonidal Sinus	1	Infected Hydrocele	1
Contact Measles	1	Virus Infection	1
Nursing Care	3	Carotid Aneurysm	1
Rash	14	Impetigo	1
Laryngeal Spasm	1	Spots	2
Abortus Fever	1	Infected Haematoma	1
Paronychia Leprosy	1	Asthma	1
Stomatitis	3	Meningism	1
Observation	9	Haemoptysis	1
Bronchial Spasm	3	Carbuncle	1
Glandular Fever	9	Old T.B. Meningitis	2
Cellulitis of Leg	1	?Rigors	1
Polyneuritis	2	Pustule Eye	1
Herpes	1	Feeding Problem	1
Healthy Mother	4	Muscle Rigidity Blackout	1
Haematoma	1	Investigation	4
Healthy Baby	18	Staphylococcal Infection of Eye	2
Encephalitis	2	Muscular Dystrophy	1
Fever with Rash	1	?Malaria	1
Bronchiolitis	1	Routine Check	2
Otitis Media	2	Cholecystectomy	1
Herpes Ophthalmicus	2		
Pemphigus	1		
Staphylococcal Pneumonia	2		
Epileptic	1		
Mastoiditis	1		
		TOTAL	476

INFECTIOUS AND OTHER NOTIFIABLE DISEASES

	Scarlet fever		Whooping cough		Acute poliomyelitis				Measles (excluding rubella)		Diphtheria		Dysentery		Meningococcal infection	
	M	F	M	F	Paralytic		Non-paralytic		M	F	M	F	M	F	M	F
					M	F	M	F								
Numbers originally notified																
Total (All Ages)	62	75	23	38	—	—	—	—	1,436	1,416	—	—	12	18	1	2
Final numbers after correction																
Under 1 year	—	2	4	8	—	—	—	—	72	65	—	—	—	1	1	2
1—	—	1	4	8	—	—	—	—	168	164	—	—	2	1	—	—
2— years	5	3	3	4	—	—	—	—	215	229	—	—	—	2	—	—
3—	6	8	5	3	—	—	—	—	209	193	—	—	1	—	—	—
4—	6	3	2	5	—	—	—	—	243	229	—	—	2	—	—	—
5— 9	33	34	5	10	—	—	—	—	506	510	—	—	2	—	—	—
10—14	8	15	—	—	—	—	—	—	8	18	—	—	1	2	—	—
15—24	1	6	—	—	—	—	—	—	9	4	—	—	—	4	—	—
25 and over	3	3	—	—	—	—	—	—	6	3	—	—	—	6	—	—
Age unknown	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Total (All Ages)	62	75	23	38	—	—	—	—	1,436	1,416	—	—	8	16	1	2
	Ac. pneumonia		Small-pox		Acute encephalitis				Typhoid fever		Paratyphoid fever		Erysipelas		Food poisoning	
	M	F	M	F	Infective		Post-infectious		M	F	M	F	M	F	M	F
					M	F	M	F								
Numbers originally notified																
Total (All Ages)	9	12	—	—	—	1	—	—	—	—	—	—	6	5	15	16
Final numbers after correction																
Under 5 years	2	2	—	—	—	—	—	—	—	—	—	—	—	—	6	8
5—14 years	1	—	—	—	—	—	—	—	—	—	—	—	—	—	5	3
15—44	1	3	—	—	—	1	—	—	—	—	—	—	1	2	3	4
45—64	3	3	—	—	—	—	—	—	—	—	—	—	3	2	1	—
65 and over	2	4	—	—	—	—	—	—	—	—	—	—	2	1	—	1
Age unknown	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total (All Ages)	9	12	—	—	—	1	—	—	—	—	—	—	6	5	15	16

There was one case of Gonorrhoeal Ophthalmia in a girl, aged 3.

Numbers originally notified	Tuberculosis						Other notifiable diseases					
	Respiratory		Meninges & C.N.S.		Other		Total of new cases coming to the knowledge of Medical Officer of Health otherwise than by formal notification		Original		Final	
	M	F	M	F	M	F	Males	Females	M	F	M	F
Total (All Ages)	46	18	3	—	—	1						
Final numbers after correction												
Under 1 year	—	—	—	—						
1— year	1	—	—	—	11	6				
2— 4 years	3	—	1	—						
5— 9	2	3	1	—						
10—14	1	2	—	—						
15—19	3	1	—	—						
20—24	5	1	—	—						
25—34	3	3	1	—						
35—44	8	2	—	—						
45—54	9	2	—	—						
55—64	4	1	—	—						
65—74	5	2	—	—						
75 and over	2	1	—	—						
Age unknown	—	—	—	—						
Total (All Ages)	46	18	3	—						

Puerperal pyrexia			
—	54	—	54

Ophthalmia neonatorum			
1	2	1	2

Anthrax			
—	—	—	—
—	—	—	—
—	—	—	—

SPECIAL TREATMENT CENTRE

By the Consultant Venereologist

There has again been an increase in the total number of fresh cases seen in the Special Treatment Centre — 1,213 in 1965 as against 1,032 in 1964. This seems to be in conformity with the general pattern in the country as a whole.

Syphilis

The total number of primary cases remained the same as last year but shows a different sex ratio — 7 males (4) — 2 females (5). Of this total 7 were acquired in the locality of the Clinic, 1 (M) elsewhere in Britain and 1 (M) abroad. I am again happy to state that no case of congenital syphilis occurred in the locality.

Gonorrhoea

There has been a considerable increase in the number of fresh cases reporting to the Clinic — males 201 (149), females 95 (60). This seems to be almost the same percentage increase as nationally. The proportion of female to male, i.e., almost 1—2, is however much higher than average and reflects great credit on the Social Worker (Miss V. A. Albertolli) attached to the clinic in her efforts at contact tracing.

AGE GROUPS OF CASES OF PRIMARY AND SECONDARY SYPHILIS

<i>Age Groups</i>	<i>Male</i>	<i>Female</i>	<i>Totals</i>
Under 16	—	—	—
16 and 17	—	—	—
18 and 19	1	—	1
20—24	2	2	4
25 and over	4	—	4
TOTALS	7	2	9

AGE GROUPS OF CASES OF GONORRHOEA

<i>Age Groups</i>	<i>Male</i>	<i>Female</i>	<i>Totals</i>
Under 16	—	—	—
16 and 17	1	12	13
18 and 19	18	18	36
20—24	57	38	95
25 and over	125	27	152
TOTALS	201	95	296

There was one case of Gonococcal Vaginitis in a girl, aged 3.

REPORT OF THE MEDICAL OFFICER OF HEALTH
SPECIAL TREATMENT CLINIC
WARD C.2, SAINT MARY'S HOSPITAL, PORTSMOUTH

		TOTALS	MALE	FEMALE	
SYPHILIS	NEW CASES OF SYPHILIS	(i) Primary	4	4	—
		(ii) Secondary	5	3	2
		(iii) TOTAL OF LINES 1 (i) and 1 (ii)	9	7	2
		(iv) Latent in the first year of infection	1	1	—
		(v) Cardio-vascular	—	—	—
		(vi) Of the nervous system	—	—	—
		(vii) All other late and latent stages	7	2	5
		(viii) Congenital, aged under 1 year	—	—	—
		(ix) „ „ 1 but under 5 years	—	—	—
		(x) „ „ 5 but under 15 years	—	—	—
		(xi) „ „ 15 and over	—	—	—
		(xii) TOTAL OF LINES 1 (iii) to 1 (xi)	17	10	7
	2 AGE GROUPS OF CASES IN ITEM 1 (i) & 1 (ii) ABOVE	(i) Under 16	—	—	—
		(ii) 16 and 17	—	—	—
		(iii) 18 and 19	1	1	—
(iv) 20—24		4	2	2	
(v) 25 and over		4	4	—	
3 CASES TRANSFERRED FROM OTHER CENTRES IN ENGLAND AND WALES AFTER DIAGNOSIS	4	2	2		
4 CASES IN WHICH TREATMENT AND OBSERVATION WERE COMPLETED	12	6	5		
GONORRHOEA	5 NEW CASES OF GONORRHOEA	(i) Post-pubertal infections	296	201	95
		(ii) Vulvo-vaginitis	1	—	1
		(iii) Ophthalmia neonatorum	—	—	—
		(iv) TOTAL OF LINES 5 (i) to 5 (iii)	297	201	96
	6 AGE GROUPS OF CASES IN ITEM 5 (i) ABOVE	(i) Under 16	—	—	—
		(ii) 16 and 17	13	1	12
		(iii) 18 and 19	36	18	18
		(iv) 20—24	95	57	38
		(v) 25 and over	152	125	27
	7 CASES TRANSFERRED FROM OTHER CENTRES IN ENGLAND AND WALES AFTER DIAGNOSIS	11	9	2	
8 CASES IN WHICH TREATMENT AND OBSERVATION WERE COMPLETED	123	70	53		
OTHER CONDITIONS	9 NEW CASES OF OTHER CONDITIONS	(i) Chancroid	—	—	—
		(ii) Lymphogranuloma Venereum	—	—	—
		(iii) Granuloma Inguinale	—	—	—
		(iv) Non Gonococcal Urethritis	219	219	—
		(v) Non Gonococcal Urethritis with Arthritis	1	1	—
		Late or Latent Treponematoses presumed to be non-Syphilitic	—	—	—
		Other conditions requiring treatment (vii) within the centre	313	119	194
		(viii) Conditions requiring no treatment within the centre	366	296	70
		(ix) Undiagnosed conditions	—	—	—
		(x) TOTAL OF LINES 9 (i) to 9 (ix)	899	635	264
	10 CASES TRANSFERRED FROM OTHER CENTRES IN ENGLAND AND WALES AFTER DIAGNOSIS	4	2	2	
11 CASES IN WHICH TREATMENT AND OBSERVATION WERE COMPLETED	603	416	187		

	TOTALS	MALE	FEMALE
12 NUMBER OF INDIVIDUAL PATIENTS ATTENDING IN YEAR WITH NEW INFECTIONS OF:			
(1) PRIMARY OR SECONDARY SYPHILIS			
AGE GROUPS			
(i) Under 16	—	—	—
(ii) 16 and 17	—	—	—
(iii) 18 and 19	1	1	—
(iv) 20—24	4	2	2
(v) 25 and over	4	4	—
(2) GONORRHOEA (Post-pubertal)			
AGE GROUPS			
(i) Under 16	—	—	—
(ii) 16 and 17	13	1	12
(iii) 18 and 19	34	17	17
(iv) 20—24	89	55	34
(v) 25 and over	143	118	25
13 LOCALITIES IN WHICH INFECTIONS TOOK PLACE			
(1) PRIMARY OR SECONDARY SYPHILIS			
(i) In locality of Centre	7	5	2
(ii) Elsewhere in Great Britain and Northern Ireland	1	1	—
(iii) Outside Great Britain and Northern Ireland	1	1	—
(iv) Not known	—	—	—
(2) GONORRHOEA			
(i) In locality of Centre	235	142	93
(ii) Elsewhere in Great Britain and Northern Ireland	44	41	3
(iii) Outside Great Britain and Northern Ireland	7	7	—
(iv) Not known	11	11	—
14 ATTENDANCES AND DIAGNOSES OF CONTACTS			
(1) Contact slips issued to patients with			
(i) Syphilis, primary and secondary	5	5	—
(ii) Gonorrhoea	152	150	2
(2) Contacts attending with			
(i) Syphilis, primary and secondary	3	2	1
(ii) Gonorrhoea	77	2	75
(iii) Other Conditions	55	6	49
15 TOTAL ATTENDANCE OF ALL PATIENTS			
(i) Syphilis	482	273	209
(ii) Gonorrhoea	1,467	1,028	439
(iii) Other conditions	3,968	2,972	996
(iv) ALL CONDITIONS (TOTAL OF 15 (i) (ii) and (iii))	5,917	4,273	1,644
16 Cultures for the gonococcus	1,976	314	1,662

PARASITIC INFESTATION

Pediculosis

The figures for the year show a marked decrease from those for the previous year.

During the year 41 households of 41 families, comprising 140 individuals attended, compared with 65 households of 66 families, comprising 250 individuals in 1964.

Total number of patients attending during the year:—

			1965	1964
Cases	..	..	104	169
Contacts		..	36	81
			<hr/> 140	<hr/> 250

The distribution as to age and sex was:—

	Under 5			5—15			Over 15 *			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Infested	4	8	12	34	37	71	11	10	21	49	55	104
Non-Infested	1	1	2	4	6	10	10	14	24	15	21	36
Total of first attendances ..	5	9	14	38	43	81	21	24	45	64	76	140
Subsequent attendances ..	4	8	12	35	36	71	8	8	16	47	52	99

School children aged 5—15 years accounted for 68·3% of the infested cases, compared with 80·0% in 1964.

Five cases were sent by local general practitioners, two from the hospitals, one by a Reception Centre, one from Havant, one from Fareham and one family by a Probation Officer. The remainder were found during cleanliness inspections in the schools and referred by the School Health Service.

There were eight cases of *Phthirus Pubis* (crab lice) and one case of body lice.

No cases required prosecution under Section 85 of the Public Health Act, 1936.

The following table shows numbers infested for the last twelve years:—

1954	..	279	1960	..	78
1955	..	135	1961	..	118
1956	..	82	1962	..	225
1957	..	62	1963	..	111
1958	..	59	1964	..	169
1959	..	57	1965	..	104

The marked decrease in the attendances of pediculosis cases at the Disinfestation Clinic is partly accounted for by the domiciliary visits paid by the assistant nurse to the habitually verminous families. At these visits heads are inspected and early re-infestations dealt with. This procedure keeps many children at school who otherwise would have been excluded and

would have had to pay several visits to the Disinfestation Clinic before being allowed back to school. Our policy in this respect has been prevention rather than cure.

Particulars of the cases treated at school clinics are given below:—

<i>Clinics</i>	<i>Old Cases</i>	<i>New Cases</i>
Hillside	303	209
Victoria Road North ..	28	33
St. George's Square ..	312	173
	—	—
	643	415
	—	—

158 home visits were made by the Assistant Nurse.

Scabies

There was a marked decrease this year compared with 1964.

During the year 37 households of 40 families, comprising 68 individuals attended.

Total number dealt with during the year:—

	<i>1965</i>	<i>1964</i>
Cases	49	82
Contacts	19	41
	—	—
	68	123
	—	—

In addition to the above, two families, comprising 8 individuals resident outside the City area were sent by other authorities. These have not been included in the figures shown above.

Sixteen cases were sent by general practitioners, twelve by the local hospitals; the remainder were sent by the School Health Service.

Distribution as to age and sex was:—

	<i>Under 5</i>			<i>5—15</i>			<i>Over 15</i>			<i>Total</i>		
	<i>M.</i>	<i>F.</i>	<i>T.</i>	<i>M.</i>	<i>F.</i>	<i>T.</i>	<i>M.</i>	<i>F.</i>	<i>T.</i>	<i>M.</i>	<i>F.</i>	<i>T.</i>
Infested	3	—	3	6	7	13	22	11	33	31	18	49
Non-Infested	—	2	2	5	3	8	3	6	9	8	11	19
Total of first attendances ..	3	2	5	11	10	21	25	17	42	39	29	68
Subsequent attendances ..	3	1	4	5	7	12	21	11	32	29	19	48

The following table shows the number of infested cases and contacts for the past ten years:—

Year	Cases	Contacts
1956	41	49
1957	44	36
1958	90	58
1959	92	60
1960	67	54
1961	94	78
1962	45	24
1963	72	40
1964	82	41
1965	49	19

INSPECTION AND SUPERVISION OF FOOD

FOOD AND DRUGS ACT, 1955

During the year, 1,498 samples were purchased or taken. 87 were found to be adulterated, incorrectly labelled, or otherwise unsatisfactory, or 5·81% compared with 4% in 1964. Of these, 21 were formal samples and 66 informal or test samples

All the above adulterated, incorrectly labelled, or otherwise unsatisfactory samples, were dealt with by caution.

MILK (SPECIAL DESIGNATION) REGULATIONS, 1963, AS AMENDED

1 Dealers' Licence was issued for the sale of Pasteurised Milk. 136 visits were made in connection with the renewal of Dealers and Pasteurisers Licences for the 1966-1970 Licensing period.

197 samples of pasteurised milk were examined. All passed the appropriate tests.

29 samples of pasteurised milk supplied to Schools were satisfactory.

144 samples of Channel Island (Pasteurised) milk were examined, no failure being reported.

36 samples of sterilised milk were found to be satisfactory.

49 samples of untreated milk tested resulted in one failure.

MILK

896 samples were taken during the year. 10 samples were found to be adulterated. 115 samples were below the presumptive limits of the Sale of Milk Regulations, being reported genuine, however, following the Freezing Point Depression test. Of this total number, 441 represented milk supplied by producers to retailers in the City.

Consignments of farm milk from two producers were found to be watered. 'Appeal to Cow' sampling proved the 'adulterator' to be in fact leaking coolers.

Extraneous water present in a pasteurised milk supplied to a School was found to be due to inefficient draining of pipe lines prior to the first bottling of the day.

ANTIBIOTICS IN MILK

Of 413 samples tested, 388 gave negative results. The 25 positive results gave:—

18 at less than 0·05 i.u. per ml.

7 at greater than 0·05 i.u. per ml.

ICE CREAM: FOOD AND DRUGS ACT, 1955 — SECTION 16

23 premises were registered for the sale of ice cream.

68 samples, comprising of 62 ordinary and 6 dairy ice creams, were taken and examined for hygienic quality, with the following results:—

33 samples were Grade 1 15 samples were Grade 3

7 samples were Grade 2 13 samples were Grade 4

16 samples, comprising of 14 ordinary and 2 dairy ice creams, were taken and examined for compositional quality. All proved to be satisfactory.

DRUGS

106 samples of drugs were taken and 10 were found not to be in accordance with the requisite legislation.

A reluctance on the part of pharmacists to supply Sampling Officers with samples of drugs obtained only by prescription, resulted in the Ministry forwarding to Food and Drugs authorities a circular in relation to the 'Procuring of Samples of Drugs'.

A 'form of receipt in lieu of a prescription' was devised in accordance with the circular, which, as far as Portsmouth is concerned, was readily accepted by our pharmacists.

SCHOOL MEALS SERVICE

During the year, 47 samples were submitted for analysis.

MERCHANDISE MARKS ACT, 1926 AND ORDERS IN COUNCIL MADE THEREUNDER

107 visits were made during the year to business premises to see that the provisions of these Orders were being complied with.

WATER

377 samples of water were taken, this number being derived at as follows:—

25 City Supply Waters	24 Paddling Pool Waters
4 Well Waters	162 Sea Waters
162 Swimming Pool Waters	

WASHED MILK BOTTLES

276 samples were taken from the two processing dairies in the City.

One Sample was bacteriologically borderline, the remainder being satisfactory.

REPORT OF THE CHIEF HEALTH INSPECTOR

It would have been pleasant to have recorded a serene year devoted entirely to the improvement of the citizens' environment. Unfortunately, the latter years have been fraught with anxiety through shortage of qualified staff. The proposed Parliamentary enquiry into the structure of Local Government will move too ponderously to bring a novel solution to the problem of implementing more statutes with less staff. Meanwhile an increasingly pressing factor in the staff problem is the ageing of the solid core of the inspectorate whose devoted service to the Corporation is often dismissed as lack of enterprise. No one is indispensable but the difficulty of replacement after some impending superannuations is going to emphasise the quality of these veteran officers.

The inspectorate lost not only a personable character but an inspector of experience and understanding in the sudden death of Mr. W. G. Munday. His return to light part-time duties misled his colleagues into thinking his rehabilitation after a serious heart attack was almost complete. Mr. Munday's absence from the scene has made a great impact both on the inspectorate and the district he served for many years as a respected public official.

The West lured yet another inspector away from Portsmouth when an enthusiastic young man, formerly a student and qualified for six years, took his enterprise and energy to a more promising appointment in the New Forest. His departure, coming shortly after the loss of Mr. Munday left an inadequate coverage of the districts and is reflected in an uneven surveillance of food establishments.

Four pupil public health inspectors were appointed during the year to set out on the four years hard graft to the Statutory Diploma, and the subsequent regeneration of the inspectorate. Another welcome addition to the staff was the replacement for the supervisory rodent officer, wherein the Corporation fortunately secured the services of a notably keen officer to oversee the intricacies of pest destruction.

With the appointment of Mr. T. Owen as Senior P.H.I. in charge of the operation, the campaign against unsatisfactory working conditions opened on 1-1-65 under the aegis of the Offices, Shops and Railway Premises Act, 1963. This statute having had a chequered career, being passed as the Offices Act, 1960, repealed, and re-enacted in its present form, became law on 31st July, 1963, its main provision becoming operative on 1st August, 1964. Replacing the timid Shops Acts, and having certain parallels to existing factory legislation the Act requires registration of a wide variety of businesses; literally all enterprises employing labour for more than 21 hours per week (other than self or certain specified relatives) come within its scope. The enforcement of the Act is divided between the Local Authority and H.M. Factory Inspectorates, with the former receiving the lion's share of the Offices and Shops, whilst the latter is tactfully entrusted with the inspection of Local Authority's establishments. Responsibility for certain premises is ill-defined and consequently the Offices and Shops and Railway Premises Act section of the Public Health Inspectorate has established a close co-operation with H.M. Factory Inspector's local office.

Although this Act is a further burden on the inspectorate it is one of the most important public health achievements for some considerable time. Designed to promote the health, safety and welfare of a large number of

workers not previously catered for, its implementation by employees is being scrutinised by the watchful eye of the Trade Unions.

A resumé of the requirements are:

1. Notification of employment of persons in offices, shops, etc., by registration of the premises in the prescribed form O.S.R.1.
2. Cleanliness of places of employment, including furniture, furnishings, etc.
3. Prevention of overcrowding whilst work is in progress.
4. Maintenance of reasonable temperatures and provision of thermometers.
5. Effective and suitable ventilation.
6. Suitable and sufficient natural or artificial lighting.
7. Suitable and sufficient sanitary conveniences.
8. Suitable and sufficient washing facilities with clean running hot water, soap and clean towels.
9. Adequate, wholesome and easily accessible drinking water.
10. Suitable and sufficient clothing storage, together with facilities to enable employees to dry outdoor clothing.
11. Suitable and sufficient seating facilities.
12. Suitable and sufficient facilities where persons employed eat meals on the premises.
13. Prevention of danger to employees or public by improperly constructed or ill-maintained buildings.
14. Guarding of dangerous machinery.
15. Control of practices dangerous or injurious to employees.
16. Notification and investigation into cause of accidents causing death or incapacitation.
17. Provision of specified first aid equipment.

Regulations defining the specific requirements attached to any of the above provisions may be issued by the Ministry from time to time, and a number of these statutory directives are already in force. The uniform application of the Act throughout the country is ensured by annual reports to the Ministry of Labour, copies of these documents being available for purchase by the general public. The figures for Portsmouth's first year operation of the Act are given later in this report.

Six technical assistants were engaged for work in connection with Housing and Offices and Shops. The substitution of qualified officers by unqualified staff is, of course, statutorily barred, but in the first year of their employment technical assistants have proved extremely useful in carrying out preliminary surveys and securing advance information.

Environmental Health

1965 was one of the most prosaic years in the history of the inspectorate. Normally the public provide some incident to quicken the tempo of the official pulse or to lighten the tedium of routine but this year has no deviation from the normal to enrich the thin gravy of a statistical report.

Even the weather conspired to confuse what seemed to be a trend of many years in which the rainfall figures reciprocated the number of complaints received. An increase of 2.08 inches over 1964's rainfall would normally induce more complaints of defective premises, instead of which there was a 20% reduction to 2,071 general complaints. 1,059 referred to disrepair. In surveying for the remedy of this disrepair a grand total of 4,697 inspections and the following public health action resulted:

Intimation notices issued	..	..	..	622
Abatement notices served	..	..	..	384
'Without further delay' letters sent	..	..	..	8
'Seven day' letters sent	..	..	..	80
'Forthwith' letters sent	..	..	..	5

Of the 384 Abatement notices over 20% deteriorated into a position where the law had to be enforced by legal proceedings detailed below:

Referred to Town Clerk's Department, for legal proceedings	..	..	..	70
Settled prior to legal proceedings starting	..	..	..	55
Withdrawn before hearing of case	..	..	..	2
Adjourned Sine Die	..	..	..	4
Orders to abate nuisances	..	..	..	9
Work completed before proceedings heard, but costs awarded to Corporation	..	..	..	6

At 31st December, 1965 outstanding notices totalled:

Intimation — 350	Abatement — 184
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NUISANCES FROM DEPOSITS, SMELLS, DUST, NOISE, ETC.

The British Public is notoriously leaden-footed in any movement to improve its environment and this is especially marked in regard to its self-created problem, the sometimes insanitary, always unsightly accumulations of litter. Previous generations took accidental open spaces and turned them into things of beauty or utility, but some of the present generation regard any uncovered surface purely as a dumping ground. Any city in the throes of clearance and redevelopment must, at some time, present an unkempt appearance, but at no time should it be allowed to deteriorate to the grotesque or insanitary as now frequently occurs.

Ordinary household and trade refuse is efficiently dealt with by the Corporation's Cleansing and Haulage department, and, under certain circumstances, other unwanted material will be removed or received at the Corporation's properly conducted tips. It is, therefore, more than exasperating to find that in spite of the adequate facilities which are provided for the maintenance of a clean city, people exist who leave a trail of refuse in their wake, detract from the City's appearance, and add to the local authority's expenses. For example, this year the conditions in a Corporation owned house awaiting demolition were drawn to the attention of the department by the derelict property's long suffering next door neighbours. It was found that the whole of the vacant house's long garden had been filled with refuse to the height of the six foot boundary wall, making a ramp of insanitary material up to first floor window level. Such was the filthy pile that the pressure on the curtilage wall put an alleyway in jeopardy of premature closure. This tumulus, if left to the kindly hand of nature, would have provided some future archeologist with a wonderfully revealing dig. It would also have generated much wonderment as to why such an unhealthy accumulation could occur in proximity to dwellings. The inevitable and logical conclusion would be that the twentieth century inhabitants of the city of Portsmouth

tolerated a large number of anti-social elements in their community and closed their eyes and nostrils to the activities of this insanitary minority. However, all these hypotheses were frustrated by the Herculean efforts of five men, who, over two days, cleaned out this Augean stable by removing eight lorry loads of material. The expense, was, of course, an addition to the local authority's budget.

A similar mediaeval midden was found in a property in Gloucester Street, where some jackdaw-minded persons had accumulated a vast representation of the unnecessary. Fortunately this appalling excrescence was eliminated by a bulldozer during clearance operations and threw no extra expense on the civic exchequer.

It is a sorry reflection on present day values that the hygienist striving to secure a better environment for the public should have to emphasize monetary considerations, but it is fact that the citizen reacts more quickly to the threat to his purse than the threat to his pulse. What is the latter threat? The dangers to health snowball with the size and type of accumulation. The ubiquitous and indiscriminate fly is one moment hiking over faecal deposits on old W.C. pans, or perambulating through excretions on urine soaked mattresses and seconds later in the dwelling house, wiping its feet on the householder's food. Lice, fleas, bugs, all unconcerned from whom their feeding blood is syphoned lurk for lengthy periods in those deplorable mattresses flowering in the litter gardens, until some exploratory juvenile host presents himself. Happiest of all is the disgusting rat, emerging from the sewer to forage in this rodent paradise, to proliferate and threaten the health and economy of the nation. All these are not conjectural threats but established occurrences resulting from such senseless depositing of litter.

How then to fight this problem and win? The ardent sanitarian dreams of successful court actions in which the aim for a healthy environment is backed by a stunning fine on the anti-social defendant. Excite the overburdened ratepayer by the affronts of these additional costs to his budget and enlist his interest and vigilance to report the offenders and their offences.

The proper place, the household refuse bin, the street litter bin, the Corporation tip must be used. If reason cannot be restored to that proportion of the public threatening the hygiene and appearance of the City then plain clothes litter wardens should be employed and equipped with powers to graduate fines for the improper casting away of anything from a bus ticket to a bus. In this wide range could also be included that unsavoury individual who, aspiring to the masculine by drinking a man's drink, reveals his immaturity by pewking like a baby in some ratepayer's doorway. This increasing and nauseating habit is one which should be outlawed as required by the existing Bye-Laws.

Righteous indignation is always a little unpleasant because of the inherent guilt in all of us, for who has not thrown down a bus ticket or discarded a cellophane wrapping. There must however be a very limited number of people who have jettisoned a gas stove, or a fouled W.C. pan, a questionable mattress or a hundred-weight of rotten potatoes, or vomited down a shopfront, and this retrograde minority must be disciplined by the law abiding majority. It is to be hoped that these observations will be noted by the local press and that the *Evening News* will, as it has done over so many municipal issues, awaken lethargic Portmuthians to their civic duty.

Having had so much to say on the insanitary pursuits of the allegedly higher animal it is perhaps unfair to comment on the other arch-depositor, the dog. At least it differs from man in that it is not an indiscriminate minority that is given to foul habits. Nevertheless, why the dog, which can be host to so many transmissible parasites, is permitted to continue its

irresponsible contamination is best answered by the public health law-makers.

Noise

No legal action in regard to noise nuisance was entered into in 1965, but many complaints were investigated. The acceleration in the tempo of modern life is unfortunately accompanied by a cacophony approaching an unbearable crescendo. Undoubtedly one of the worst offenders is the internal combustion engine, especially, as operated in those arch-noise generators, the motor cycle and the motor scooter, which have proliferated so amazingly since World War II. In an age when other nationals are silently tracking through space at five figure velocities, it is deplorable to think that a representative section of British youth is trying, in the city streets, to achieve the moronic ton on propulsive noise nuisances. One has sympathy with young exuberance, but so many of these mercurial youths are dependent on their elders for maintenance, that they should learn to conserve their sources of supply by seeing that elderly nerves are not frayed to breaking point. The noisy element should be indoctrinated with the principle that the quietly operated machine is the efficient one and that in more respects than one, noise generates friction. Fortunately for the Inspectorate, the Public Health Department's role in noise abatement is not primarily concerned with traffic noise, although quite a deal of time is absorbed in discussion with complainants before the matter is referred to the police.

Nevertheless to anyone involved in the struggle to reduce noise, it is obvious that Parliament will have to introduce legislation requiring internal combustion engines to be fitted with effective silencers. Meanwhile, the elderly who spent their youth in an urban hush may well ask 'Of what value is longevity in a world of growing disquiet?'

One static noise complaint originated from a residential area where a petition drew attention to the tuning and retuning of motor cycles in a private garage and subsequent circuits of the houses by a crowd of enthusiasts. A preliminary survey revealed excessive oil deposits in run-in and garage and indicated a change of use of the property from private to business premises. A word with the householder and reference to the Development Department and Police restored tranquility to this area.

A second petition related to the activities of a large garage in the north of the city. Incensed neighbours made an omnibus complaint covering noise from car engines under test, personnel, the growingly popular public address system in the garage, nuisances from oil and cotton waste, fumes from engine exhausts, etc. Further intercession after the preliminary investigation was avoided when the noise-generating section of the establishment moved to a distant location. The investigating inspector glowed with a sense of achievement when the complainants admitted to 'being quite happy at the great improvement'.

Portsmouth's land famine often results in industrial and residential areas being brought into close proximity one with the other and inevitably there is a clash of interests. The resident expects serene leisure and undisturbed sleep. The industrialist intent upon production and exports sometimes with a twenty-four hour day of operation is often unaware of the effect his industry is having on his neighbours.

In Farlington, where the factory zone presses on private houses, this happened. Householders adjacent to a night working firm alleged that their sleep was disturbed by factory noises of such intensity that a petition was subscribed by a large number of residents and forwarded to the Department.

This complaint was found to be amply justified. In this period of our national history when the magic word "production" is the excuse for every practice, it was elevating to note the offenders' response to criticism of their processes. To re-establish a good relationship with an irritated public they consulted one of Britain's leading experts in noise suppression, Professor Richards of Southampton University. An investigation of the plant by the Institute of Sound and Vibration Research ended with a concise report on the noise sources with specifications for their suppression. Since the latter's application, not only have the residents' slumbered undisturbed at night but their former friendly relations with the factory have been re-established.

Less fortunate in its outcome was a complaint by residents at Old Portsmouth about noisy maintenance repairs carried out on the Isle of Wight car ferries at night. During the peak holiday season the small hours are the only time when these vessels are available for such essential repairs to be done. The nature of the maintenance requires easy access to the shore marine workshop otherwise work could have been executed at a distance off-shore. A predominant feature of the noise was whine from an electricity generator providing direct current to the marine electrical apparatus which, most unfortunately, will not function on the shore supply of alternative current. Discussions with the transport undertaking reached an impasse in which the only palliative offered to the complainants was the poor one that the noise would be kept to the minimum during the comparatively short holiday season.

Similar in vein, but successfully resolved, was a complaint of nocturnal noise revolving round the activities of a Portsea bakery. Bulk-flour delivery vehicles manoeuvring to deliver supplies, the ringing of an alarm bell on some bakery apparatus and the whacking of a giant flour-dredger shattered the Portsea night. Blissfully unaware that their firms' shortcomings were the root cause of local insomnia the management were most co-operative and made sensible readjustments to their work-pattern. Now flour delivery has been re-scheduled to the daylight hours, a sibilant buzzer has replaced the clamorous alarm, and the dredger's congestions are freed by a less primitive method than thumping.

Other noise complaints investigated and dealt with according to their merits concerned piledrivers, panel-beaters, taxi services, and the inevitable laundrette.

The role of the public health inspector in regard to noise suppression may appear unheroic but the condensed factual recounting of the major cases does not reveal the time and patience expended in mediation between alleged noise-sufferers and suspect noise-creators. For instance, one irascible complainant verbally went to town about the persistent noisiness of his neighbours, and on investigation, his idea of persistence was reduced to its right proportions — one Hogmanay.

FOOD PREMISES

An unbudgeted windfall for the civic exchequer resulted from lists of catering establishments compiled from the inspectors' record cabinets at the request of two firms interested in possible marketing of goods. Fees amounting to £12 12s. 0d. were earned for this painless extraction. The department was not similarly reimbursed by one of the Ministries for a somewhat like task but which required additional specific information and therefore took much longer to compile.

Catering premises were not greatly to the fore in 1965. Most public criticisms arose during the holiday season and was undoubtedly sparked off by adverse weather affecting the critic's tolerance. It has been noted before, that, given a sweltering summer, the British holiday-maker will suffer queues,

shortages, expense and encarnadined epidermis and not gripe, but on a blustery rainy day he will demand the death penalty for a hint of lipstick on a cafe cup. Thus, nearly all the complaints of sub-standard conditions in catering establishments originated in the vicinity of the sea front, and were made by visitors to the city. This is a matter which intrigues me. The natural pride one has in one's domicile has a pallel in the attitude that the public health inspector adopts to the various establishments under his surveillance, and it is with a sense of personal slight that he receives adverse criticism of the catering businesses in his authority. The personal angle is even more acute when the complaint is levelled against Corporation cafes and personnel, for there can be few food vendors in the city who have not been subject to explanation, exhortation or coercion in regard to food hygiene requirements, let alone Corporation staff. It is therefore most important that the British customer should be encouraged to protest to the management at the time of offence pointing out the nature of the contravention. If complaint is ill-received then it would greatly assist health authorities if complainants were more specific in their identification of the place, time, offender and nature of offence, for the short-staffed inspectorate has little time in which to search the length and breadth of a sea front for an obscure cafe. In this respect it would probably benefit the trade and the customer if the main requirements of the Food Hygiene (General) Regulations, 1960 were published in the national and local press at suitable intervals.

A senior inspector was detailed for the exacting task of vetting premises of applicants for advertising space in the City's holiday guide, and, heading a triumvirate composed of one member of the local Hoteliers' Association, one non-member and the inspector, carried out 32 inspections of hotels and boarding houses. Minimum standards of requirements in accommodation laid down by the Corporation were rigorously applied. Seven fell below these standards and were rejected from the list of approved accommodation due for publication. One of the seven later retrieved the situation and a reinspection of the premises found that they had been refurbished so that that the team reversed its decision.

A remarkable feature of the interviews with the management of the rejected establishments was the inevitable production of the visitors book eulogising the accommodation. One of the smaller concerns, faulted for having a lunch table laid with egg-clogged tines in the forks, had a double entendre comment entered by a guest who recorded that 'Mrs. — provides many extras at table without charge!' The necessity for a close watch being kept on holiday accommodation was underlined by a complaint during the Season. One property of excellent address with an extremely good letting potential turned out to be a slovenly conducted affair, with an unprepossessing decoration of unwashed empty milk bottles littering the storm doors. On the inside the same deplorable lack of domestic hygiene showed on every surface, whilst the kitchen, the operations in which can make or mar a guest's holiday, was a chaos of neglect and repair. The inspector having seen some of the delightful homes presented by some boarding house keepers to their guests, was appalled at the let-down and left the offender in no doubt that she and her housekeeping discredited the city as a resort.

A new vogue in holiday accommodation has been established in the city — holiday flatlets. Designed to accommodate families or individuals with personal problems ranging from special diets to limited resources, these bedsitters and miniature suites are undoubtedly providing seasonal billets for holidaymakers at cheaper than normal bed and breakfast rates. Like many innovations its continued success depends upon the management keeping up the inspired enthusiasm shown at the introduction of the scheme. Again the management relies increasingly upon an efficient and loyal staff to see that

bookings are satisfied with clean, well maintained accommodation. Arising out of a holidaymaker's complaint after returning from a Southsea holiday, one block of flatlets was visited. At that time the complainant's grouses could not be upheld, but there was some evidence to show that dissension in the resident staff sparked off the complaint.

The sub-division of large buildings into temporary dwellings propounds grave problems for health departments not the least of which is to ensure clean habits by that cross section of the public resorting to the flatlets. A snap check of many of the flatlets in the block in question showed that they were clean and well maintained. Their occupants were of the opinion that they were having a jolly good holiday at reasonable cost.

Although many verbal notices of contravention were given to persons engaged in food businesses no prosecutions took place for offences against the regulations. It is obvious that the public is becoming much more discerning in its purchasing habits, so that complaints against the conduct and premises of shopkeepers is lessening. Except for a questionable general shop off the beaten track most food premises present an attractive clean appearance. It was therefore, surprising for a district inspector to find that a shop in a main road showing obvious signs of neglect and mismanagement had not already been the subject of complaint. Mice damage to sweets and chocolates was evident and the cause of the unhappy affair was patent when the shopkeeper was found to be mentally ill. A large quantity of damaged and unfit foodstuff was removed for destruction.

SMOKING

There can be few people in the food trade who are unaware of the fact that they must, whilst so engaged, refrain from the use of tobacco, or any other smoking mixture or snuff whilst handling any open food or in any food room in which there is open food. Yet this condign breach of the regulations is occurring with such monotonous regularity that one wonders at the beguiling power of the weed. The procedure adopted by the public health inspectors when observing smoking contraventions is to warn verbally on the first occasion, explaining to the offender that it is not the incineration of a plant that matters, but the constant touching of the lips and transference of infective agents to the handled food. The commission of a second offence nets a warning letter to the offender. Persistence after written warning leads to prosecution and it is a richly rewarded worker who can afford the stiff fine for a quick drag. Two prosecutions resulted in 1965 and defenders were fined.

Public house staff are frequent offenders against the smoking prohibition, and if despite the circulation of special warning notices to the brewers, contraventions continue, particular attention will be directed to public houses in 1966.

Similar attention will also be paid to another aspect of food hygiene, the non-observance of regulation 30 by meat porters loading and unloading meat. Why they persist in flagrant breaches of the regulations when the proper protective clothing is supplied and available is an exasperating riddle. There were less general contraventions of the Food Hygiene (General) Regulations 1960 than previously and only 35 written notices were issued. Due to the overlap of notices from 1964 notices complied totalled 48. 257 verbal warnings were given for readily corrected offences.

Recorded contraventions numbered 103 and are tabulated as under:—

Regulation

No.

5	Insanitary premises	..	..	..	..	2
6	Cleanliness of equipment	..	..	..	..	8
8	Protection of food against contamination	..	..	..	..	3
9	Personal Cleanliness	..	..	..	..	2
14	Sanitary conveniences	..	..	..	..	18
15	Supply of water to food premises	..	..	..	..	7
16	Hand-washing facilities	..	..	..	..	23
17	First Aid materials	..	..	..	..	6
19	Facilities for washing food equipment	..	..	..	..	6
23	Cleanliness and repair of food rooms	..	..	..	..	23
24	Accumulation of refuse	..	..	..	..	5

EXTRANEOUS MATTER IN FOOD

The complaints generating activity in this sphere were both varied and intriguing this year. The occurrence of extraneous matter in food has one advantage over other forms of complaint in that it has substance. The results of enquiry are sometimes richly rewarding and lead to positive improvement in food production techniques. At other times the futility of the complaint is so exasperating as to tax the patience almost beyond bearing. But rarely a year passes without a ludicrous reminder of the fact that appearances are deceptive. The sudden manifestation of any extraneous matter in food is always a personal affront to the purchaser, its effect being roughly calculable according to the associations of the additive and to the cholera of the customer. Inanimate matter not normally an ingredient generates considerable warmth in consumers, but nothing like the heat following the disclosure in their foodstuffs of something with a human connection. That the human cheerfully contemplates and eats practically anything animal, but boggles at a glimpse of anything of human origin is paradoxical and except to cannibals, inexplicable.

Thus, general revulsion was experienced throughout the office, when a complainant produced a pork savoury in which she had found an object described as a piece of human eyelid with eyelash in situ. It was pointed out to her that as it was a faggot it would probably be an artificial eyelash, but the close scrutiny of the Public Analyst's microscope identified a pig bristle in a fragment of hide. Undesirable, undoubtedly and because of the assumed human origin, revolting, but a fair hazard of purchase, not warranting further comment than the observation that it labels the article inferior in quality, but fit to eat.

Similarly deceptive was a tooth not belonging to the consumer which appeared in fresh cream meringue. Again, the revealing microscope of the Analyst showed this purported dental fugitive to be nothing more than poorly reconstituted egg white.

A generous helping of nine fragments of glass in a home-made milk pudding propounded a riddle that was inadequately answered after much time and thought devoted to the mystery. Examination of the pudding's constituent corn flour, sugar and milk revealed no further traces of glass, but one of the fragments of glass bore a letter comparable with lettering on the milk bottles in use. Inferences were drawn but no conclusions were made.

The production of Christmas pudding prior to the festive season plus the enquiry as to what should be done with it tempts one to the classic retort, and literally as a wall decoration the specimen submitted to the department would have been a great success. It had a large piece of translucent material in its succulent content. The highly reputable producers, whose products have at some time or other stimulated the appetites of every household in Britain were most unreasonably worried into 1966, having shortly before been warned by the Town Clerk for the accidental inclusion of a wasp in some preserve.

Glass was also alleged to have been found in a mince pie, purchased in a canteen.

Insects intruded more frequently than before and turned up in such diverse foods as cummin seed, loaves, puddings, tinned blackberries, milky lunch bar, ham, beef, potato chips, walnuts. Some of the intruders originated from abroad, their indigenous nature proving beyond doubt that the insect was included during the canning process. In identification of the more obscure insects I have had invaluable guidance from the British Museum of Natural History, and this together with the Public Analyst's reports have often provided conclusive evidence that the insect was actually in the contents when the tin was opened.

Dark and seemingly foreign matter in meat products caused concern because of the unpleasant appearance. In sliced braised beef in gravy these unnecessary occurrences were collagen and other proteinaceous matter included through bad trimming of the meat. Although this matter detracted from the commercial appearance of the product it was not prejudicial to the health or purse of the purchaser. No further action was taken after drawing the attention of the producers to this undesirable inclusion.

Similar dark protein matter caused comment on the appearance of pies put up by two other manufacturers. The unprepossessing ingredient was explained to the customers who were quite satisfied with the action taken.

Instances are still occurring where inferior metal containers lead to subsequent black staining of the meat contents. The sulphide action on the poorly lacquered tin produces a marked discolouration often referred to by the purchaser as 'contamination' or 'decomposition'. It is difficult to convince the hard-pushed housewife that the product is not unfit, and it looks as though the Senior Food Inspector, demonstrating the fitness of these queried purchases will continue his steady intake of corned beef. Packers, notably of corned beef, should not rely on the continued impartiality of the inspectorate, but should look to their canning materials and techniques, for it is noteworthy that the customer, even when assured of the products' fitness, invariably declares an intention never to purchase that brand again.

Moderate hilarity greeted the announcement that rust on bloomers was not due to cycling in the rain but oxide marring the appearance of white vienna loaves, and a local bakery had to look more searchingly into the cleaning of its utensils.

Simulating the appearance of mould and dirt, fine particles due to friction between sugar and aluminium foil were deposited on mince pies in transit. A watchful Inspector saw the deposit, made a purchase, and asked for an explanation from the shopkeeper. At the Analyst's Department, the Inspector's find was being interpreted microscopically when the shopkeeper arrived considerably aggrieved by a fresh delivery of pies similarly contaminated by friction in transit from the bakery to the shop. A useful service was thus performed to the producer, retailer and public by the vigilance of the Inspector, for the use of the foil in question has now been discontinued.

The emphasis on systematic stock rotation especially in smaller concerns is reiterated this year. A side street shopkeeper took delivery of a chocolate product in March and sold it in December complete with moth larvae, undoubtedly acquired during its prolonged shelf residence. No dossier of similar neglect existed on this optimistic vendor, so he escaped with a warning.

The prize for the most futile complaint, if awarded, would have gone to the discoverer of some maggots in ham bought for a quoted price in a non-existent shop. The 'ham', which was bacon, was a joint of some 6lb. and alleged to have originated from a self-service store in Arundel Street. With the tenacity of the Mounties, the food inspector, pursued the complaint through several self-service stores till he found one in another area selling a similar product. Here the manager and inspector were baffled by a purchaser who paid 9/10 for 6½lb. joint that was retailed at 2/1 per pound. The complainant then wrote in to say that the purchase had been made on the previous Friday which allowed sufficient time for the larvae to have hatched from eggs deposited in the complainant's home. With considerable patience the inspector explained that legally the case for a prosecution was a little sketchy. With equally commendable persistence the aggrieved purchaser demanded her money back. The cycle of futility ended when the self-service store manager earned his commendation by refunding the probable purchase money as a gesture of good will and infinite understanding.

One of the mysteries submitted for revelation was a hair grip, so firmly embedded in the crumb of a loaf, that it was undoubtedly introduced prior to baking. No females are employed at the bakery concerned and it is illuminating to record that none of the males wore that modern coiffure requiring such female impedimenta. A gravely concerned management were left with the conclusion that the grip had started its journey from a laundry where female staff prepared dough bowl canvas covers for transit to the bakery. This was an interesting theory and the only one likely to satisfy the baffling way in which the grip escaped the various screening devices to prevent such intrusions. Nevertheless it is a lack of vigilance on the part of the employees both at the laundry and at the bakery which brings their employees into discredit with the public, and adds to the department's dossier on the firm.

Allied to the foregoing complaint were two others of extraneous matter in bread. The more serious discovery was a steel nut which could have devastated several molars. Shed from a flour sieve together with a washer, the latter was recovered, but the nut was lost. It is difficult to fathom the reasoning which allows such a potential danger to go unpursued into a finished product, and any employees worth their salt should safeguard their employer's reputation and exchequer. It is a pity that the subsequent warning which was recorded against the bakers was not directed to the individual responsible.

The second matter was completely inane. A loaf generously sprinkled with black carbon, the product of burnt sugar and edible oil, could have been hygienically wiped free of this unsightly but unharmed matter by the shop assistant. Brought to the attention of the management more because of the undesirable appearance of the loaf than any other consideration, the bakers were full of apologies for the time and trouble wasted on such a triviality. The inspector suggested that a casual survey in the retail shop would have avoided the incident and that this comment should be passed to the defaulter.

Mould abruptly terminated a well-intentioned drive to increase a large dairy firm's door to door sales. An arrangement to provide a Monday alternative to the cold remains of the Sunday joint by the selling of meat pies from roundsmen's floats seemed sensible business. Unfortunately one household purchased four pies, two of which were found to be mouldy. The manufacturer indentified the wares which proved to be nine days old

from cooking to sale. The management closed the scheme, and, to the chagrin of an enterprising branch manager, collected a warning from the Town Clerk.

In all, 97 complaints relating to foodstuffs were brought to the Department's notice.

HOUSING

Attention in 1965 centred on the second, third and fourth groups with primary work on the fifth, sixth and seventh groups of houses not included in the priority groups.

These groups were:—

- (2) Landport
- (3) Southsea
- (4) Stamshaw
- (5) Cosham
- (6) Old Portsmouth
- (7) Eastney

Classification followed survey of the areas which were finally designated as:—

- Group (2) Portsea No. 2
 Portsea No. 3
 Landport No. 19
 Landport No. 20
 Landport No. 21
- Group (3) Southsea No. 15
 Southsea No. 16
 Southsea No. 17
 Southsea No. 18
- Group (4) Stamshaw No. 1
 Stamshaw No. 2

These Clearance Areas were followed by Compulsory Purchase Orders, namely:—

Kent Street No. 1	Compulsory Purchase Order
Lion Terrace No. 3	Compulsory Purchase Order
Clarendon Place No. 1	Compulsory Purchase Order
Mill Lane No. 1	Compulsory Purchase Order
Trafalgar Place No. 1	Compulsory Purchase Order
Belmont Street No. 1	Compulsory Purchase Order
Stanley Lane No. 1	Compulsory Purchase Order
Ashby Place No. 2	Compulsory Purchase Order
Wisborough Road No. 1	Compulsory Purchase Order
Rudmore Road No. 1	Compulsory Purchase Order
Tipnor Street No. 1	Compulsory Purchase Order

Declaration of Unfitness Orders:— Nil

Individual Houses Represented as Unfit:

Houses unfit for human habitation represented to the Committee under Part II, Housing Act 1957:—

Closing Orders	Nil
Demolition Orders	Nil
Undertakings not to be used for human habitation	Nil
Parts of buildings closed	1
Undertakings to demolish	Nil

The results from 1964's programme are shown in the following table of Public Inquiries which were held during 1965:—

<i>Local Public Enquiry</i>	<i>Date held</i>	<i>Result</i>
City of Portsmouth (Ridge Street No. 1) Compulsory Purchase Order 1964	19. 1.65	Confirmed without modification by Minister of Housing and Local Government on 6.8.65
City of Portsmouth (Netley Street No. 1) Compulsory Purchase Order 1964	2. 3.65	Confirmed with modification on 8.11.65
City of Portsmouth (Prospect Road No. 1) Compulsory Purchase Order 1964	4. 5.65	Awaiting confirmation
City of Portsmouth (Stamford Street No. 1) Compulsory Purchase Order 1965	10. 8.65	Awaiting confirmation
City of Portsmouth (Fitzroy Street No. 1) Compulsory Purchase Order 1965	26.10.65	Awaiting confirmation
City of Portsmouth (Cobourg Street No. 3) Compulsory Purchase Order 1965	15.12.65	Awaiting confirmation

Orders Confirmed by Minister of Housing and Local Government

City of Portsmouth (East Street No. 1) Compulsory Purchase Order 1964	Confirmed with modification by Minister of Housing and Local Government on 14.1.65
City of Portsmouth (Prince Regent Street No. 1) Compulsory Purchase Order 1964	Confirmed with modification on 22.1.65
City of Portsmouth (Omega Street No. 1) Compulsory Purchase Order 1964	Confirmed with modification on 5.7.65
City of Portsmouth (Ridge Street No. 1) Compulsory Purchase Order 1964	Confirmed without modification on 6.8.65
City of Portsmouth (Kent Street No. 1) Compulsory Purchase Order 1965	Confirmed without modification on 24.9.65
City of Portsmouth (Netley Street No. 1) Compulsory Purchase Order 1964	Confirmed with modification on 8.11.65
City of Portsmouth (Trafalgar Place No. 1) Compulsory Purchase Order 1965	Confirmed without modification on 26.11.65

Whilst the foregoing were being resolved, field work was proceeding in the Eastney, Southsea, Landport and Old Portsmouth areas in which the following were included:—

Albert Road, Arundel Street, Beatrice Road, Besant Road, Bishop Street, Broad Street, Canal Walk, Claxton Street, Curtis Terrace, Delhi Street, Fratton Road, Glidden Street, Gunner Street, Highfield Street, Kilmiston Street, Lake Road, Leopold Street, Milford Road, Newcastle Street, Prince Albert Road, Railway View and Somers Road North.

PORTSEA No. 2 CLEARANCE AREA

Kent Street No. 1

No. of houses	.. .. .	4
Kent Street Nos. 59, 61, 63 and 65 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	4
No. of persons	.. .. .	9

PORTSEA No. 3 CLEARANCE AREA

Lion Terrace No. 2

No. of houses	.. .. .	23
Lion Terrace Nos. 12, 13, 14, 15, 17, 18, 19, 20, 21, 22, 23, 24, 25, 27, 28, 29, 30, 31, 32, 33, 34, 35 and 36		
No. of other buildings	.. .. .	2
Hay Street No. 15 Lion Terrace No. 16 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	41
No. of persons	.. .. .	107

LANDPORT No. 19 CLEARANCE AREA

Clarendon Place No. 1

No. of houses	.. .. .	6
Clarendon Place Nos. 5, 6, 7, 8, 9 and 10 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	4
No. of persons	.. .. .	7

LANDPORT No. 20 CLEARANCE AREA

Mill Lane No. 1

No. of houses	.. .. .	4
Mill Lane Nos. 1, 2, 3 and 4 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	2
No. of persons	.. .. .	4

LANDPORT No. 21 CLEARANCE AREA

Trafalgar Place No. 1

No. of houses	.. .. .	11
Trafalgar Place Nos. 19, 21, 27, 29, 2, 4, 6, 8, 10, 12, and 14 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	11
No. of persons	.. .. .	39

SOUTHSEA No. 15 CLEARANCE AREA

Green Road No. 1

No. of houses	.. .. .	2
Green Road Nos. 26 and 28 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	—
No. of persons	.. .. .	—

Belmont Street No. 1

No. of houses	.. .. .	45
Belmont Street Nos. 11, 13, 15, 17, 25, 27, 29, 31, 33, 35, 37, 39, 43, 45, 47, 49, 57, 2, 4, 6, 8, 10, 12, 14, 18, 20, 22, 24, 26, 28, 30, 32, 38, 40, 42, 44, 46, 48, 50 and 52 Green Road Nos. 14, 16, 18, 20 and 22		
No. of other buildings	.. .. .	1
Belmont Street No. 41 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	45
No. of persons	.. .. .	96

Belmont Street No. 2

No. of houses	.. .. .	31
Belmont Street Nos. 61, 63, 65, 67, 71, 73, 75, 77, 79, 58, 60, 62, 64, 66 and 68		
St. Helen's Avenue Nos. 1, 3 and 5		
Smith's View Nos. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12 and 13		
No. of other buildings	.. .. .	1
Belmont Street No. 69		
and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	29
No. of persons	.. .. .	72

Cottage Grove No. 1

No. of houses	.. .. .	5
Cottage Grove Nos. 30, 32, 34, 36 and 38		
and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	6
No. of persons	.. .. .	22

The Census of the number of persons who were occupying the buildings comprised in the Clearance Areas was taken on 10th February, 1965.

SOUTHSEA No. 16 CLEARANCE AREA**Stanley Lane No. 1**

No. of houses	.. .. .	14
Lennox Road North Nos. 15/17, 19, 21, 23, 25,		
Stanley Lane Nos. 1, 2, 3, 4, 5, 6, 7, 8 and 9		
and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	15
No. of persons	.. .. .	40

Chester Place No. 1

No. of houses	.. .. .	25
Boxgrove Place Nos. 2, 3, 4, 5, 6, 7, 8, 9 and 10		
Chester Place Nos. 3, 4, 5, 7, 8 and 9		
Fontwell Road Nos. 2, 3 and 3a		
Lennox Road North Nos. 50, 52, 54, 56, 58, 60 and 62		
No. of other buildings	.. .. .	1
Chester Place No. 5a		
and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	36
No. of persons	.. .. .	85

Richmond Road No. 2

No. of houses	.. .. .	8
Chester Place No. 10		
Richmond Road Nos. 2, 4, 6, 8/8a, 10, 12 and 14		
and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	15
No. of persons	.. .. .	27

SOUTHSEA No. 17 CLEARANCE AREA**Ashby Place No. 1**

No. of houses	.. .. .	14
Ashby Place Nos. 5, 7, 9, 11, 13, 15, 2, 4, 6, 8, 10, 12, 14 and 16 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	6
No. of persons	.. .. .	10

SOUTHSEA No. 18 CLEARANCE AREA**Napier Road No. 1**

No. of houses	.. .. .	6
Dock Mill Cottages Nos. 1, 2, 3, 4, 5 and 6 (also known as 'Milcote', Wis- borough Road.) and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	6
No. of persons	.. .. .	16

The Census of the number of persons who were occupying the buildings comprised in the Clearance Area was taken on the 14th April, 1965.

STAMSHAW No. 1 CLEARANCE AREA**Rudmore Road No. 1**

No. of houses	.. .. .	20
Commercial Road Nos. 515, 517, 519 and 521 Rudmore Road Nos. 3, 5, 7, 9, 11, 13, 15, 17 and 19 Watergate Road Nos. 1, 2, 3, 4, 5, 6 and 7		
No. of other buildings	.. .. .	1
Commercial Road No. 523 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	31
No. of persons	.. .. .	72

Rudmore Road No. 2

No. of houses	.. .. .	64
Rudmore Road Nos. 30, 32, 34, 36, 38, 40, 42, 44, 46, 48, 50, 52, 54, 56, 58, 60, 62, 64, 66 and 68 Sea View Nos. 6, 8, 10, 12, 14, 16, 1, 3, 5, 7, 9, 11 and 13 Silverlock Street Nos. 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 27, 29, 31, 33, 35, 37, 39, 41, 43, 45, 47, 49, 51, 53, 55, 57, 59, 61 and 63 Twyford Avenue No. 5 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	60
No. of persons	.. .. .	189

Byerley Street No. 1

No. of houses	.. .. .	6
Byerley Street Nos. 2, 4, 6 and 8 Commercial Road Nos. 533 and 535 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith		
No. of families	.. .. .	6
No. of persons	.. .. .	17

The Census of the number of persons who were occupying the buildings comprised in the Clearance Areas was taken on 2nd June, 1965.

STAMSHAW No. 2 CLEARANCE AREA

Rudmore Place No. 1

No. of houses	9
Rudmore Place Nos. 1, 2, 3 and 4	
Rudmore Square Nos. 1, 2, 3, 4 and 5 and any yards, gardens, outhouses and appurtenances belonging thereto, or usually enjoyed therewith	
No. of families	8
No. of persons	22

Tipnor Street No. 1

No. of houses	114
Cobbett Road Nos. 3, 5, 7, 9, 11, 13, 15, 17, 2, 4, 6, 12, 14, 16, 18, 20 and 22	
Garibaldi Street Nos. 1, 3, 5, 7, 9, 11, 13 and 15	
Rudmore Wharf Road Nos. 2, 4 and 6	
Sea View Nos. 15, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44, 46, 48, 50, 52 and 54	
Silverlock Street Nos. 2, 4, 6, 8, 10, 12, 14, 16, 20, 22, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44, 46, 48, 50, 52, 54 and 56	
Tipnor Street Nos. 1, 3, 5, 7, 9, 11, 13, 15, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, 43, 45, 47, 49, 51, 53, 2, 4, 6, 8, 10, 12, 14, 16, 20 and 22	
Twyford Avenue Nos. 11, 19, 39, 41, 43 and 45 and any yards, gardens, outhouses, and appurtenances belonging thereto or usually enjoyed therewith	
No. of families	93
No. of persons	264

The Census of the number of persons who were occupying the buildings comprised in the Clearance Areas was taken on 8th September, 1965.

HOUSING ACT 1964

Improvement Areas

Following the Council's decision to implement the provisions of Part II of the Housing Act 1964, dealing with Improvement Areas, preliminary surveys were carried out to ascertain the conditions prevailing in the following areas:—

- (1) Southsea
- (2) Stamshaw

(1) Southsea—

The following were included:—

Delamere Road, Esslemont Road, Francis Avenue, Jessie Road, Londesborough Road.

(2) Stamshaw—

The following were included:—

Island View Terrace, Lower Derby Road, Ranelagh Road, Stanley Road, Twyford Avenue.

As the result of these surveys, and having regard to the defects and lack of standard amenities, the statistics indicated that there was very little difference between the two areas, but as the figures did not disclose the degree of defectiveness, the general condition of the houses in the Southsea area was rather better than those in the Stamshaw area, although this was not to say that the Stamshaw area could not be improved. In the circumstances the Council decided that the Southsea area should form the subject of detailed surveys which could lead to a recommendation being made for the declaration of a formal Improvement Area.

PRELIMINARY SURVEY—SOUTHSEA AREA

Number of dwellings inspected, built before 1945	237
Number of dwellings no admission	34
<hr/>	
Total number of dwellings in the area	271
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Number of dwellings tenanted	96
Number of dwellings owner-occupied	141
Number of occupants—Adult Male	240
Adult Female	286
Children Male	45
Children Female	50
Number of families	241

Defects

Number of dwellings defective in repair	226
Number of dwellings defective in stability	197
Number of dwellings defective in freedom from damp	220
Number of dwellings defective in natural lighting	212
Number of dwellings defective in ventilation	18
Number of dwellings defective in drainage	201
Number of dwellings defective in food preparation	10
Number of dwellings defective in food cooking	—
Number of dwellings defective in disposal of waste water	205

Standard Amenities

Number of dwellings lacking a fixed bath or shower in a bathroom or elsewhere in the dwelling	89
Number of dwellings lacking a wash hand basin	149
Number of dwellings lacking a hot and cold water supply at a fixed bath or shower	105
Number of dwellings lacking a hot and cold water supply at a wash hand basin	170
Number of dwellings lacking a hot and cold water supply at a sink	112
Number of dwellings lacking a water closet in and accessible from within the dwelling	145
Number of dwellings lacking satisfactory facilities for storing food	206
Number of dwellings having all standard amenities:—	
Assisted by standard grant	9
Assisted by discretionary grant	2
Without grant aid	11
<hr/>	
	22
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PRELIMINARY SURVEY—STAMSHAW AREA

Number of dwellings inspected, built before 1945	233
Number of dwellings no admission	56
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Total number of dwellings in the area	289
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Number of dwellings tenanted	104
Number of dwellings owner-occupied	129
Number of occupants—Adult Male	304
Adult Female	317
Children Male	61
Children Female	58
Number of families	238

Defects

Number of dwellings defective in repair	225
Number of dwellings defective in stability	191
Number of dwellings defective in freedom from damp	215
Number of dwellings defective in natural lighting	212
Number of dwellings defective in ventilation	27
Number of dwellings defective in drainage	207
Number of dwellings defective in food preparation	15
Number of dwellings defective in food cooking	—
Number of dwellings defective in disposal of waste water	219

Standard Amenities

Number of dwellings lacking a fixed bath or shower in a bathroom or elsewhere in the dwelling	81
Number of dwellings lacking a wash hand basin	157
Number of dwellings lacking a hot and cold water supply at a fixed bath or shower	119
Number of dwellings lacking a hot and cold water supply at a wash hand basin	177
Number of dwellings lacking a hot and cold water supply at a sink	119
Number of dwellings lacking a water closet in and accessible from within the dwelling	171
Number of dwellings lacking satisfactory facilities for storing food	214

Number of dwellings having all standard amenities:—

Assisted by standard grant	3
Assisted by discretionary grant	5
Without grant aid	4

—

12

Houses considered for Purchase in Advance of Requirements	167
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Housing Act 1957

Number of inspections	1,530
Number of visits	2,577
Number of inspections <i>re</i> demolition	3,497

Housing Act 1964

Number of inspections	812
Number of visits	
Visits of no admission	90

RENT ACT, 1957**FIRST SCHEDULE****Part I.—Applications for Certificate of Disrepair**

1. Number of applications for certificates	3
2. Number of decisions not to issue certificates	Nil
3. Number of decisions to issue certificates:—	
(a) in respect of some but not all defects	1
(b) in respect of all defects	1
4. Number of undertakings given by landlords under paragraph 5 of the First Schedule	1
5. Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	Nil
6. Number of Certificates issued	2

Part II.—Applications for Cancellations of Certificates

7. Applications by landlords to Local Authority for cancellation of certificates	1
8. Objections by tenants to cancellation of certificates	Nil
9. Decisions by Local Authority to cancel in spite of tenants' objections	Nil
10. Certificates cancelled by Local Authority	1

SUMMARY OF WORK CARRIED OUT

INSPECTIONS:—

4,697	Dwelling houses
1,185	New dwelling houses
3	Common lodging houses
31	Tents, sheds, caravans, caravan sites, etc.
79	Verminous premises
19	Offensive trades
123	Smoke and colour tests to old drains
558	Sewers and drains
10	Underground rooms
701	Power factories
28	Non-power factories
12	Building sites
1,669	Offices, Shops, Railways Premises Act, 1963
201	Outworkers
1	Agricultural workers
70	Nursery schools and child minders
29	Nursing homes
27	Cinemas
29	Theatres, funfairs, circuses and clubs
15	Old peoples homes
33	Rent Act 1957
208	Swimming and paddling pools and beaches
130	Rodent control
2	Farms
139	Tips and refuse accumulations
16	Formal applications for discretionary grants
259	Formal applications for standard grants
48	Informal applications for discretionary grants
440	Informal applications for standard grants
29	Completed certificates for discretionary grants
241	Completed certificates for standard grants
3	Sewer swabs
260	Hairdressers
64	Schools
31	Public conveniences
24	<i>Re</i> water supply
162	Hotels
44	<i>Re</i> air pollution
972	Air pollution meters
7	<i>Re</i> flooding
108	<i>Re</i> smells
5	<i>Re</i> bonfires
136	<i>Re</i> infestations (flies, beetles, etc.)
37	Section 89, Public Health Act
3,497	<i>Re</i> demolitions—(3,484 H. Act + 13 Prefabs).
1,530	Housing Acts
812	Improvement area surveys
82	Cellar, sub floor and subsoil water
12	<i>Re</i> grit deposit gauge

- 13 War damaged sites
 - 2 Stables
 - 189 Ships, Port Health, etc.
 - 6 Allotments
 - 2 Youth clubs
- INSPECTION OF FOOD PREMISES:—
- 51 School meal kitchens
 - 101 Milk and dairies
 - 143 Prepacked milk depots
 - 186 Ice cream (retailers)
 - 49 Ice cream manufacturers and depots
 - 1 Tripe boilers
 - 195 Bakeries
 - 106 Fish fryers
 - 116 Fishmongers (wet and retail)
 - 104 Fish wholesalers
 - 1,034 Restaurants, cafes, factory canteens, etc.
 - 251 Sweet shops
 - 389 Greengrocers
 - 751 Grocery
 - 465 Butchers (retail)
 - 218 Butchers (wholesale)
 - 130 Bread and cake shops
 - 91 Sausages and cooked meat
 - 32 Preserved food premises—Section 16
 - 8 Shellfish vendors
 - 2 Soft drink manufacturers
 - 1,041 Market stalls and vans
 - 3 Potato crisp manufacturers
 - 4 Breweries
 - 136 Public houses and off-licences
 - 11 Poulterers
 - 45 Supermarkets
 - 12 Food warehouses
 - 162 Hotels, boarding houses
- OTHER ACTION *Re* FOOD:—
- 2,118 Meat and food inspections
 - 40 Merchandise marks
 - 45 Milk vending machines
 - 34 Milk floats
 - 201 Interviews
 - 1 H.M. Ships
- VISITS:—
- 3,301 To dwelling houses *re* notices, etc.
 - 42 To factories *re* notices, etc.
 - 2,577 *Re* Housing Act
 - 513 C.P.O. census
 - 295 Obstructed and defective sewers and drains
 - 27 Rodent infested premises (not included in Rodent report)

33	Revisits in connection with Rent Act 1957	13
1,603	Abortive visits	3
857	New buildings	100
91	Verminous premises	6
42	<i>Re</i> air pollution	3
29	Public houses	3
13	Noise	1
1,100	Miscellaneous and interviews	41
452	Discretionary and standard grants	101
238	<i>Re</i> food complaints	141
2	Cemeteries	100
842	Testing fittings	44
	INVESTIGATIONS:—	
2,071	Recorded complaints in register	193
27	Smoke and dust nuisances and observations	10
221	Infectious diseases	18
45	Suspected typhoid and typhoid carriers	104
15	Smallpox contacts	1,014
25	Other contacts of infectious diseases	301
235	Food poisoning, D. and V. dysentery, psittacosis, virus infections, etc.	26
697	Council houses applications, etc. transfers etc.,	181
29	Noise	20
27	Rodent infestation and complaints other than in Rodent report	118
3	Sewer swabbing	13
69	Insect infestations	170
208	Swimming and paddling pool water, etc.	91
51	Pet Animals Act, 1951	32
78	Childminders	8
267	Plans, etc.	2
	NOTICES AND NOTIFICATIONS:—	
384	Abatement notices (Public Health Acts 1936 and 1961)	1
622	Letter forms <i>re</i> defects (intimation notices)	4
8	Letters requesting work without further delay	176
80	Letters requesting work in 7 days	11
5	Letters requesting work forthwith	42
3	Notice of intentions to enter buildings	13
15	Dangerous structures	105
57	Obstructed or defective sewers	10
Nil	Factories Act—formal	
15	Factories Act—informal	
56	Factories Act—verbal	112
35	Food hygiene regulations notices	90
257	Food hygiene regulations—verbal	42
992	Occupation certificates	44
241	Completion certificates for standard grants	100
11	Verbal notices to hairdressers	1
	LOCAL LAND CHARGES:—	
4,167	Searches against properties. There was a considerable increase in the work involved by property sales, in that several thousand additional records had to be searched through for outstanding Offices, Shops and Railways Premises, Act 1963 changes.	

ADMINISTRATION OF OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

POLICY OF ENFORCEMENT

The enforcement of the Act is being carried out in the following stages:—

1. Initial inspections of all registered premises and notifications to persons responsible for compliance with the Act of all contraventions. This stage will be completed early in 1966.
2. Street by street survey for unregistered premises and inspection of these premises.
3. Revisit of premises on which contraventions were found during initial visits.
4. Appropriate action in cases of continued non-compliance with the Act.

REGISTRATION OF PREMISES

It is estimated that at least 20% of the premises to which the Act applies and which were operating on the 1st May 1964 have not been registered and only a very small proportion of new businesses or businesses transferred from other premises are being registered. This is due mainly to the employers not being aware of their obligation to register. It appears to be generally thought that the initial registration at the commencement of the Act was in the form of a census and not a continuing obligation, a misapprehension possibly contributed to by the wording of the introductory preamble on Form O.S.R.1. The legal profession must also bear some responsibility for failing in some cases to advise their clients of the necessity to register their premises.

The discovery of unregistered retail shops is a relatively easy matter and registration of these is being obtained as a routine matter by personnel engaged on the initial inspections of the registered premises. The discovery of other unregistered premises, particularly offices, will however prove much more difficult and it is in these obscure establishments that the majority of contraventions occur. It is unfortunate that Section 49 of the Act precludes any action being taken after 12 months of commencement of the Act against anyone who was employing persons on that date but did not register.

GENERAL COMPLIANCE

The co-operation of employers in general has been very good. There have been exceptions, particularly among the smaller shopkeepers and professional men and, rather surprisingly among the older type of shop manager who adopt the attitude that 'what was good enough for me is good enough for these youngsters'.

Contraventions of the Act

CLEANLINESS

Number of contraventions 122.

The general standard of cleanliness was found to be satisfactory, the majority of the contraventions were minor infringements due to bad decorative conditions, perished wall plaster, etc.

OVERCROWDING

Number of possible future contraventions 18.

No case of excessive overcrowding demanding immediate action was found although it was noted that the worst working conditions prevailing were in premises which will be excluded from the numerical space standards of the Act, particularly banks.

The exclusion from the numerical space standards of 'rooms to which the public are invited to resort' is no doubt justified in such cases as large departmental and self-service stores in which the public and employees are mixing together to such an extent as to make any space standard impossible to administer, but the exclusion from these standards of such premises as banks, betting offices, insurance offices, enquiry offices, kiosks, etc. where the employees are separated from the public by a counter, grill, etc. is not so justified and it is difficult to understand why the large number of persons employed in such 'rooms' are left without the protection of even this minimum health standard.

The number of employees adversely affected by this exclusion may be considerably higher than was anticipated when the Act was drafted, as the wording 'room to which members of the public are invited to resort' can have very wide interpretation, for instance many general offices containing 20, 30 or many more employees have an enquiry hatch or a grill where money is paid in. According to the Ministry's Circular No. 9 to local authorities such an office would be exempt and in view of such exemption the overcrowding of any such office would have to be at a very dangerous level before any court would convict.

TEMPERATURE

Failure to maintain reasonable temperature ..	87
Absence of thermometer	204
Fumes from heating appliances	5
	<hr/>
Total	296
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The worst offenders in this instance are those butcher shops exempt from Section 6(1) and (2) where no means are provided to enable employees to warm themselves.

VENTILATION

Number of contraventions	48
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It is interesting to note that the attempts to improve ventilation are often objected to by female employees who appear to dislike any air movement and to prefer a temperature of about 70 degrees Fahrenheit to work in while male employees often prefer a temperature lower than the minimum prescribed.

LIGHTING

Details in separate report.

SANITARY CONVENIENCES

Number of contraventions:	
Inadequate conveniences	35
No intervening ventilated space	57
Conveniences not ventilated	11
Conveniences not marked	55
Disposal of sanitary dressings	11
Door fasteners	6
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Total	175
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WASHING FACILITIES

Number of contraventions	346
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The majority of these contraventions are failures to provide a supply of hot or warm water but the biggest difficulty in administering this part of the Act is in obtaining the provision of fixed wash basins in place of existing sinks which are not designed nor suitable for personal washing.

DRINKING WATER

Number of contraventions	6
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The above contraventions all occurred in kiosks.

ACCOMMODATION FOR OUTDOOR CLOTHING

Number of contraventions	135
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The only real difficulty encountered in this respect is the provision of facilities for drying clothes in small food shops. In such establishments outdoor clothing is often left in lockers in a food room but the necessity to provide facilities for drying clothing means that some form of heating is required in or under the locker which must therefore be ventilated to allow the escape of the damp air back into the food room thus defeating the objects of the Food Hygiene (General) Regulations 1961.

SEATING

Number of contraventions	31
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FACILITIES FOR TAKING MEALS

Number of contraventions	12
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FLOORS, PASSAGES AND STAIRS

Number of contraventions:

Dangerous condition of floors	280
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Absence of handrails — dangerous stairs, etc.	111
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Floor wells not guarded	7
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Total	398
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DANGEROUS MACHINERY

Number of contraventions	14
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The supervision of dangerous machinery is new ground to most local government officers administering this Act and although the Ministry's Circulars on the subject are of considerable help, a short course of practical instruction would have been invaluable.

FIRST AID EQUIPMENT

Number of contraventions	280
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PROVISION OF ABSTRACTS OF ACT

Number of contraventions	310
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It is most regrettable that shortly after the coming into operation of the Information for Employees Regulations 1965 that for some two months Forms O.S.R.9 and O.S.R.9B required to be exhibited by these Regulations, were unobtainable from H.M. Stationery Office, a situation which did nothing to encourage employers to view other requirements under the Act of the local Authority with any sense of urgency.

EXEMPTIONS

Only two applications for exemption were received, both of which were for exemption from providing sanitary conveniences on the grounds of inadequate space. Granting of exemption was recommended in both cases for a period of two years.

NOTIFICATION OF ACCIDENTS

Total notifications received	..	..	..	102
<i>Causes of Accidents:</i>				
Non-power driven machinery	..	..	..	1
Power driven machinery	..	..	..	2
Cleaning bacon slicing machine	..	..	..	1
Movement of non-power driven vehicles	..	..	..	2
Fire	..	..	..	1
Use of hand tools (mainly butchers knives)	..	..	..	15
On stairs	..	..	..	9
On ladders	..	..	..	1
Falls from one level to another	..	..	..	8
Falls on same level	..	..	..	17
Stepping on or striking against object	..	..	..	16
Handling or dropping goods	..	..	..	21
Struck by falling objects	..	..	..	7
Burns by cooking fat	..	..	..	1

It is probable that only a small proportion of accidents are notified, mainly through employers' ignorance of their obligation to notify accidents but also possibly to avoid the possible consequences when the accident was caused by the act or omission of the employer.

REPORT ON LIGHTING STANDARDS*Ministry of Labour Circular 9 (Supplement No. 1) to Local Authorities.*

The general impression obtained during the last three months of 1965 of lighting conditions in offices and shops is that the majority of shops maintain a very good standard of lighting in sales areas and showrooms but that this standard is not maintained in those parts of the premises not used by the public; this is particularly so in the case of the smaller shops employing only a few assistants. Lighting of office desks was found to be generally adequate although several exceptions were found in solicitors' and similar offices in older type buildings. Lighting of bank counters was frequently found to be poor.

One outstanding piece of information obtained by the survey was the poor standard of lighting in the food preparation rooms in catering establishments generally.

Lighting of staircases, corridors, washplaces and sanitary conveniences varied considerably and it was in this category that the majority of the contraventions requiring action were found, the absence of artificial lighting to external sanitary conveniences or the approaches thereto being the most common.

Where a standard has been recommended, that of the Illuminating Engineering Society has been quoted, but in all cases it has been pointed out that no legal standard is at present in operation and that if any standard is introduced it may differ from that of the Illuminating Engineering Society code.

Only two bad cases of glare were found, both of which occurred in the same premises. In the one instance the manager's office faced into the shop and was raised eight feet above the floor of the shop, the fluorescent tubes used for lighting the shop being only slightly above the eye level of persons working in the office, the other instance occurred in the butcher's cutting room which was long and narrow with a low ceiling. The room was well lit and the lights at one end of the room only slightly above the eye level of persons working at the other end.

One point which was obvious from the survey carried out in November is that reliable readings of lighting conditions can only be obtained on a day when the sky is heavily and continuously overcast, slight but rapid variations in cloud conditions causing widely varying meter readings inside a building.

Tables enclosed:

TABLE 1. Artificial and Natural Lighting at working areas in shops. (November, 1965).

TABLE 2. Artificial Lighting at working areas in Shops, Catering Establishments and Warehouses. (November, 1965).
Records of light meter readings taken in November, 1965 are enclosed.

TABLE 1

Offices — Artificial and Natural Lighting — November, 1965

<i>Lumens/ Sq. ft.</i>	<i>Artificial and natural light</i>	<i>Desks, bank counters etc.</i>	<i>Type- writers, compto- meters</i>	<i>Filing cabinets, shelves and cupboards</i>	<i>Drawing boards</i>	<i>Dupli- cating and printing machines</i>	<i>Tele- phone switch- boards</i>
1 to 5	Art.	0	0	9	0	1	1
	Nat.	55	4	41	1	5	3
6 to 10	Art.	10	2	21	2	1	0
	Nat.	25	5	21	3	0	1
11 to 15	Art.	11	2	19	0	2	0
	Nat.	12	3	2	0	0	0
16 to 25	Art.	49	10	22	0	2	1
	Nat.	25	7	4	3	1	0
26 and over	Art.	87	28	17	20	1	3
	Nat.	37	18	6	15	1	1
Average Lu/Sq.ft.	Art.	36	43	22	104	22	29
	Nat.	22	25	9	51	10½	11½

TABLE 2

Shops, Catering Establishments (Including Canteens), Warehouses — Artificial Lighting — November, 1965

LUMENS/SQ.FT.	SHOPS		CATERING ESTABLISHMENTS Preparation Rooms	WAREHOUSES Storage Areas
	<i>Sales Areas</i>	<i>Stock- rooms</i>		
1 to 5	0	4	10	15
6 to 10	1	8	9	3
11 to 15	1	3	2	0
16 to 25	3	0	1	1
26 and over	31	1	1	0
Average Lu/Sq.Ft. ..	44	8½	8	4

Table A — Registrations and General Inspections

(1) Class of premises	(2) Number of premises registered during the year	(3) Total number of registered premises at end of year	(4) Number of registered premises receiving a general inspection during the year
Offices	37	625	154
Retail shops	55	1,148	677
Wholesale shops, warehouses	13	94	22
Catering establishments open to the public, canteens	16	365	83
Fuel storage depots	1	8	3

Table B — Number of Visits of all kinds by Inspectors to Registered Premises 1669**Table C — Analysis of Persons Employed in Registered premises by workplace**

Class of workplace	Number of persons employed
(1)	(2)
Offices	7,196
Retail shops	8,317
Wholesale departments, warehouses	1,231
Catering establishments open to the public	2,406
Canteens	156
Fuel storage depots	26
Total	19,332
Total Males	7,765
Total Females	11,567

Table D — Exemptions

M/c. Line No.	Class of premises (1)	No. of exemptions current at 31st Dec. (2)	No. of exemptions granted or ex- tended during year (3)	No. of applications refused or exemptions withdrawn during year (4)	No. of cases in cols. (3) and (4) where employees opposed application (5)	Appeals to Court against refusal to grant or extend an exemption or against the with- drawal of an exemption	
						No. made (6)	No. allowed (7)
Part I—Space (Sec. 5(2))							
1	Offices						
2	Retail shops						
3	Wholesale shops, ware- houses						
4	Catering establishments open to public, canteens						
5	Fuel storage depots						
Part II—Temperature (Sec. 6)							
11	Offices						
12	Retail shops						
13	Wholesale shops, ware- houses						
14	Catering establishments open to public, canteens						
15	Fuel storage depots						
Part III—Sanitary Conveniences (Sec. 9)							
21	Offices						
22	Retail shops	1	1	Nil	Nil	Nil	Nil
23	Wholesale shops, ware- houses	1	1	Nil	Nil	Nil	Nil
24	Catering establishments open to public, canteens						
25	Fuel storage depots						
Part IV—Washing Facilities (Sec. 10)							
31	Offices						
32	Retail shops						
33	Wholesale shops, ware- houses						
34	Catering establishments open to public, canteens						
35	Fuel storage depots						

Prescribed Particulars on the Administration of the Factories Act 1961

PART I OF THE ACT

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

<i>Premises</i> (1)	<i>Number on Register</i> (2)	<i>Number of</i>		
		<i>Inspections</i> (3)	<i>Written notices</i> (4)	<i>Occupiers prosecuted</i> (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	4 19	10 17	— 1	— —
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	227 352	305 369	— 15	— —
(iii) Other Premises in which Section 7 is enforced by the Local Authority† (excluding out-workers' premises)	—	—	—	—
TOTAL	231 371	315 386	— 16	— —

2. Cases in which DEFECTS were found
(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more 'cases').

<i>Particulars</i> (1)	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i> (6)
	<i>Found</i> (2)	<i>Remedied</i> (3)	<i>To H.M. Inspector</i> (4)	<i>By H.M. Inspector</i> (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—	—
Inadequate ventilation (S.4) ..	—	—	—	—	—

† i.e. Electrical Stations (Section 123(1)), Institutions (Section 124) sites of Building Operations and Works of Engineering Construction (Section 127), Slaughterhouses, (Section 175(1)(d) and (e)) and Railway Running Sheds (Section 175(2) and (10)).

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4) By H.M. Inspector (5)		
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7):—					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective ..	53 27	31 25	— —	— —	— —
(c) Not separate for sexes ..	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work)	—	—	—	—	—
TOTAL	53 27	31 25	— —	— —	— —

PART VIII OF THE ACT

Outwork

(SECTIONS 133 AND 134)

Nature of Work (1)	SECTION 133			SECTION 134		
	No. of out-workers in August list required by Section 133 (1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing Apparel } Making etc. ..	140	—	—	—	—	—
} Cleaning and Washing ..	—	—	—	—	—	—
Household linen	—	—	—	—	—	—
Lace, lace curtains and nets	—	—	—	—	—	—
Curtains and furniture hangings	—	—	—	—	—	—
Furniture and upholstery ..	—	—	—	—	—	—
Electro-plate	—	—	—	—	—	—
File making	—	—	—	—	—	—
Brass and brass articles ..	—	—	—	—	—	—
Fur pulling	—	—	—	—	—	—
Iron and steel cables and chains	—	—	—	—	—	—
Iron and steel anchors and grapnels	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—
Locks, latches and keys ..	—	—	—	—	—	—
Umbrellas, etc.	—	—	—	—	—	—
Artificial flowers	—	—	—	—	—	—
Nets, other than wire nets ..	—	—	—	—	—	—
Tents	—	—	—	—	—	—
Sacks	—	—	—	—	—	—
Racquet and tennis balls ..	—	—	—	—	—	—

PART VIII OF THE ACT—*continued*

Outwork

(SECTIONS 133 AND 134)

Nature of Work (1)	SECTION 133			SECTION 134		
	No. of out-workers in August list required by Section 133 (1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Paper bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
Hand painted signs on tapestry canvas	1	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons etc.	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosaques, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—
Lampshades	—	—	—	—	—	—
TOTAL	141	—	—	—	—	—

PEST CONTROL

RODENTS: Number of complaints received	2,011
Number of premises visited during survey	621
	2,632
Total	2,632
Number of premises treated by local authority	2,109
Of the above 1,417 were private dwellings	
361 were Business premises	
331 were Local Authority	

Of the private dwellings 717 were found to have minor infestations of rats and 700 minor infestations of mice.

Only two business premises treated were found to have major infestations of rats but 169 had minor infestations. There were also 190 minor infestations of mice in other premises.

The Local Authority areas were found to have 3 major infestations of rats, 263 minor infestations and 66 minor infestations of mice.

The City's sewerage system comprises 4,246 manholes. 3,502 were treated on the Number 1 maintenance in April resulting in 21.4% complete takes. This took 10 weeks to accomplish using three gangs each of three men. Number 2 treatment started in October when 1,224 manholes were treated and 31.12% complete takes resulted, absorbing some weeks using similar labour. The actual cost of such labour alone amounted to £1,450.

This expenditure is now transferred to the drainage account of the City Engineer's department. It is anticipated that mechanisation to save three men's labour, plus a change in type of poison used in baiting will secure a considerable reduction in the expense of these very necessary operations, when put into effect in 1966.

Surveys and inspections are made frequently where refuse tips, fore-shores, sewerage disposal stations, parks and allotments are concerned.

There exists a contract between the City Council, the Director of Navy contracts and the War Office for rodent control, in their establishments within the City boundary.

No resistance has been found in rodents baited with warfarin which is the principal poison. Zinc Phosphide is used when practicable on heavy infestations as quicker results are obtained.

DISINFESTATION AND FUMIGATION

No. of rooms treated for bed bugs	262
No. of rooms treated for fleas	461
No. of premises treated for cockroaches	25
No of rooms required to be fumigated	6

Insecticides in use are Lindane/pyrethrum water miscible. D.D.T. water miscible. Coopers multispray oil base, Killgercide oil base, D.D.T. dust 5%, Lindane dust 1%. The above insecticides are mostly used for the control of bed-bugs and fleas. Dieldrin water miscible and Dieldrin dust are used for the control of cockroaches.

PIGEONS

The increase in feral (wild) pigeons in the City must be obvious to everybody. The increase and the amount of damage to property, plus the possibility of ornithologically spread infectious disease make the reduction of the pigeon numbers essential.

A request from British Rail to disinfect the Town Station high level platform was met by operation 'Pigeon' which commenced on 11-11-65 and was continued into 1966. In 1965, 73 pigeons were removed. This exhausting operation against a wily bird was successfully carried out by the Public Health Department's Pest Control personnel which count among their numbers not only enthusiastic pest controllers, but well known pigeon fanciers. Of necessity the removal of the annoying and damaging birds had to be carried out in the early hours of the morning under conditions of darkness and inaccessibility which made the work quite hazardous.

A total of 4 mechanical sweepers are now in use and these sweepers with manual vacuums carry out the clearing of the City streets. The birds are disposed of in the City by means of a night refuse bin which is emptied with a hand truck and the contents taken to the refuse tip. The birds are then disposed of through local channels and buried.

Deluge activities continued but were confined to the collection of rain water for use in the City. The work for this purpose was carried out by the Public Health Department's Pest Control personnel.

Private: 3 Burdett Grove, Southampton, Portsmouth 33 123

SECTION II—Amount of Shipping Entering the District During the Year

TABLE B

Ships from	Number	Tonnage	Number of cases reported as being imported or being lost during the voyage	
			by the Medical Officer of Health	by the District Inspector
Foreign Ports	117	26,075		95
Coastwise*	4,538	1,001,479		102
Total	4,655	1,027,554		197

* Includes local traffic between Southampton, Isle of Wight and Portsmouth.

SECTION III—CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

There was no passenger traffic during the year.

Cargo Traffic: The principal imports were coal, cement, stone, oil, timber, glassware, building materials, ironwares, onions, potatoes, mushrooms, citrus fruits, apples, pears, lemons, nuts, chocolate and general cargo traffic from France, Italy, Holland, Belgium, Germany, Sweden, Finland, Norway, North Africa, Spain and Channel Islands.

REPORT ON CLEANSING

I am indebted to the General Manager, Cleansing and Haulage Department who has kindly submitted the following report for the year 1965.

The weekly collection of household refuse was maintained in 1965. Test weighings of refuse collected were carried out quarterly and the trend towards the reduction in density was noted. Further large containers were purchased during the year bringing the total number in use to over 1,400. Forty of these containers were installed in the Royal Naval Barracks bringing all naval and military establishments into this system of refuse storage and collection. Revenue from the collection of trade refuse maintained its high level. Work Study of the house and trade refuse service commenced in September 1965.

Controlled tipping continued at Milton Lake.

A total of 9 mechanical sweepers are now in use and these, together with manual sweepers, carry out the cleansing of the City streets.

Approximately 1,000 cars were disposed of at the tip by means of a mobile crushing plant capable of dealing with a hundred prepared car bodies per day. This machine, which crushes the cars into bales, was brought in after disposal through local channels had failed.

Salvage activities continued, but were confined to the collection of rags and non-ferrous metals only. The market for these materials remained steady.

The expenditure is now transferred to the drainage account of the City Engineer's department. It is anticipated that mechanisation to save three men's wages, plus a change in type of power used in tipping will secure a considerable reduction in the expense of these very necessary operations, when the full effect is felt.

Services and inspection of public premises where refuse bins, dust-chests, cigarette disposal stations, parking arrangements are concerned. There exists a contract between the City Council, the Director of Town Councils and the Town Director of refuse control, in their establishments within the City boundary.

No instance has been found in refuse dealt with normally which is the principal pest. Zinc Phosphide is used when practicable on heavy infestations as quicker results are obtained.

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Disinfectants and Fumigants

No. of rooms treated for bed bugs	762
No. of rooms treated for fleas	49
No. of premises treated for cockroaches	25
No. of rooms required to be fumigated	6

Disinfectants in use are the standard quaternary water miscible D.D.T. water miscible. Carbonyl sulphide oil base, Kalliglyde oil base D.D.T. dust 5%, Lindane dust 1%. The above disinfectants are mainly used for the control of bed bugs and fleas. Dieldrin water miscible and Dieldrin dust are used for the control of cockroaches.

PORT HEALTH AUTHORITY

Public Health Department,
1 Western Parade,
Portsmouth.

To the Chairman and Members of the Port Health Authority.

Ladies and Gentlemen,

I have the honour to present my Report on the work of the Port Health Authority of Portsmouth during the year 1965.

SECTION I — STAFF

TABLE A

Name of Officer	Nature of appointment	Date of appointment	Qualifications	Any other appointments held
P. G. ROADS	Port Medical Officer of Health	1.9.59	M.D., D.P.H.	Medical Officer of Health and Principal School Medical Officer, City of Portsmouth.
W. F. APPLETON	Chief Port Health Inspector	1.1.52	F.R.S.H., F.A.P.H.I.	Chief Public Health Inspector, City of Portsmouth.

Address and Telephone Number of Medical Officer of Health:

Official: 1 WESTERN PARADE, PORTSMOUTH 22251, Ext. 305.

Private: 8 BURBIDGE GROVE, SOUTHSEA, PORTSMOUTH 33325.

SECTION II—AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

TABLE B

Ships from	Number	Tonnage	Number Inspected		Number of ships reported as having, or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Health Inspector	
Foreign Ports ..	337	86,074	—	95	—
Coastwise* ..	4,528	1,001,479	—	106	—
TOTAL ..	4,865	1,087,553	—	211	—

* Includes local traffic between Southampton, Isle of Wight and Portsmouth

SECTION III — CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

There was no passenger traffic during the year.

Cargo Traffic. The principal imports were coal, cement, stone, oil, timber, glassware, building materials, tomatoes, onions, potatoes, cauliflower, citrus fruits, apples, pears, peaches, nuts, chocolate and general cargo traffic from France, Italy, Holland, Belgium, Germany, Sweden, Finland, Norway, North Africa, Spain and Channel Islands.

The principal exports were pitch, machinery, scrap iron, fertilisers, oxide, barley and general cargo.

SECTION IV — INLAND BARGE TRAFFIC

There is no inland barge traffic.

SECTION V — WATER SUPPLY

No change.

SECTION VI — PUBLIC HEALTH (SHIPS) REGULATIONS, 1952 to 1963

No change.

SECTION VII — SMALLPOX

- (1) Cases of smallpox are removed to the smallpox hospital at Weyhill, near Andover.
- (2) Cases are conveyed by the Portsmouth Ambulance Service, the vaccinal state of the ambulance crews being: 54 vaccinated in 1964.
- (3) The smallpox consultant is Dr. O'Driscoll, Physician Superintendent, Priorsdean Hospital, Portsmouth (Tel. 22331).
- (4) Facilities for Laboratory diagnosis of smallpox exist, by arrangement with the Portsmouth and Isle of Wight Area Pathological Service, at the Central Laboratory, Priorsdean Hospital, Portsmouth.

SECTION VIII — VENEREAL DISEASE

No change.

SECTION IX — CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

TABLE D

Category	Disease	Number of cases during the year		Number of ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	—	—	—	—
Cases which have occurred on ships from foreign ports, but have been disposed of before arrival	—	—	—	—
Cases landed from other ships	—	—	—	—

SECTION X — OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

No malaria occurred in ships during the year.

SECTION XI — MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No plague or suspected plague occurred in ships during the year.

SECTION XII — MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

- (1) Vessels arriving from abroad are examined periodically by the Port Health Inspector. Rat disinfestation is carried out by the Rodent Control Section of the Health Department in the port area.

- (2) Bacteriological or pathological examination of rodents can be carried out at the Central Laboratory, Priorsdean Hospital; none was examined during the year.
- (3) The Port is not approved for the deratting of ships and, by agreement with Southampton Port Health Authority, this is undertaken by them. 12 deratting exemption certificates were issued during the year.
- (4) When necessary, rat guards are placed on ropes between ships and quays.

TABLE E

Rodents destroyed during the year in ships from foreign ports:—

<i>Category</i>	<i>Number</i>
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

TABLE F

Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.

(Not applicable)

SECTION XIII — INSPECTION OF SHIPS FOR NUISANCES

TABLE G

Inspections and Notices

<i>Nature and Number of Inspections</i>	<i>Notices served</i>		<i>Result of serving Notices</i>
	<i>Statutory Notices</i>	<i>Other Notices</i>	
Primary 186	—	25	25 complied
Other 25	—	—	—
TOTAL 211	—	25	25 complied with

SECTION XIV — PUBLIC HEALTH (SHELLFISH) REGULATIONS, 1934 AND 1948
No change.SECTION XV — MEDICAL INSPECTION OF ALIENS (APPLICABLE ONLY TO PORTS APPROVED FOR THE LANDING OF ALIENS)
*(Not Applicable)*SECTION XVI — MISCELLANEOUS
No change.

I desire to express my thanks to the Queen's Harbour Master and H.M. Collector of Customs and their staff for their cordial co-operation and valuable assistance during the year, and to record my appreciation of the excellent service rendered by the Chief Port Health Inspector.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

P. G. ROADS,

*Medical Officer of Health,
City and Port of Portsmouth.*

HEALTH EDUCATION

(1) Smoking and Health Campaign

A prominent feature of health education work during 1965 continued to be the Portsmouth Smokers' Advisory Clinic under the general direction of Dr. D. D. Hilton. Although the pattern of organisation has become fairly settled, there is considerable variation between the different techniques used by the several doctors who have taken groups of people requiring this sort of help.

A total of 135 persons registered during the year. Of these, only 15 appeared on a single occasion, so that 120 might be considered 'effective attenders'. These were dealt with in six groups, giving each doctor an average of about 20 people to support in their determination to give up smoking.

Announcements that the clinics would be held appeared in the local press. A proportion of cases were referred by their family doctor and occasionally by hospital doctors. There are indications that the value of these clinics is considerably greater than the help received by the individuals who attend the sessions.

For instance some of our patients reported the favourable progress of colleagues at work and other members of their family. Occasionally, however, their own success clearly caused envy in their associates and this may cause a certain amount of temporary embarrassment. The short-term results were sufficiently encouraging to warrant continuation of these clinics.

The poster material displayed on the sites available to the Health Department in the City has been largely devoted to support for this campaign. Arrangements have been made to ensure regular and more frequent change, using mainly the Ministry of Health posters.

Every quarter, fifteen thousand Ministry of Health book marks were distributed through the City libraries. Once instituted, this arrangement is almost free of cost because the book marks are provided by the Ministry of Health without charge, and their distribution depends entirely on the borrower at the Library picking up a book mark as he leaves with his books. Mrs. D. L. Covington, the Assistant Superintendent Health Visitor, who is responsible for health education material, arranged the supply and distribution of considerable numbers of posters and leaflets to youth clubs and other organisations, family doctors, clinics, schools, bill-boards and the window of the Welfare Foods Centre.

(2) Portsmouth Council of Social Services Exhibition, May 1965

Facets of the work of the Public Health Department were colourfully and lucidly displayed on a large area of pegboard material, interestingly arranged and illuminated in a foyer of the Guildhall, at the time of the Portsmouth Council of Social Services Conference and Exhibition in May. Leaflets on several topics were available from a leaflet dispenser and the display was manned until 8 p.m. each evening by a rota of health visitors and public health inspectors. The display was further enlivened by the inclusion of a colour film on mouth-to-mouth resuscitation appearing by back projection on the screen of a single concept 8mm. film loop viewer.

(3) First Aid and Home Nursing Courses

As part of the Local Authority's Civil Defence responsibility, courses have been held for Corporation employees on first aid and home nursing techniques.

(4) Mother Craft

Two series of twelve talks were given by the Assistant Superintendent Health Visitor to groups of twenty or twenty-five Secondary Modern School girls.

(5) Parentcraft

Three courses, each consisting of 14 talks, were given to girls at Secondary Modern Schools.

(6) Child Care

Talks on this subject were given to girls in Secondary Modern Schools and to St. John's Ambulance Brigade, the British Red Cross Society and the Girl Guides.

(7) Safety

A set of six talks on safety was given three times:—

- (a) To girls at Secondary Modern Schools, who were taking part in the Duke of Edinburgh Award Scheme.
- (b) To Girl Guides.
- (c) To Rangers.

(8) Mothers Clubs

Films were shown on Safety, Care of the Teeth, Mouth-to-Mouth Resuscitation, Smoking, Child Care and Food Hygiene. Discussion was stimulated in this way.

(9) College of Education

Three talks and demonstrations were given to student teachers on Minor Ailments, First Aid, Emergency Resuscitation and Infectious Diseases.

(10) Food Hygiene in Hospital

Members of the Department were among the Tutors and Lecturers in a three-day course organised by the Ministry of Health and Wessex Regional Hospital Board for four categories of Hospital Staff concerned with Food Hygiene.

(11) Other Organisations

A variety of talks was given by Mrs. D. L. Covington and Dr. D. D. Hilton to other organisations on subjects including Home Safety, First Aid, Toddler Management, Available Services, Care of the Feet, Safety for Toddlers, Health and Hygiene, Smoking and Health, Child Care, Women in the Welfare State, Services for the Elderly, Dental Health, New Approaches to Child Welfare, Venereal Diseases, the Work of the Public Health Department, the School Health Service and an Introduction to the National Health Service for Overseas Students.

Fluoridation of Water Supplies

The Ministry of Health in its Circular 15/65 (referring also to Circulars 12/63 and 28/62) stressed the necessity for the making of arrangements whereby fluoride is added to public water supplies which are deficient in it naturally to the level appropriate for the prevention of dental decay.

The Circular drew attention to the point that in the Government's view a public water supply authority has the power under English law to add fluoride to the water it supplies and referred to a recent court case and decision in support of this opinion. (1).

The Minister is formally of the view that fluoridation is now established and will provide public health measures beneficial and completely safe and he urged that all Local Health Authorities should take steps to implement its introduction forthwith. He further stated that indemnity in the event of any legal proceedings either on lack of power or damage to health would be given.

Following the receipt of the Circular the Medical Officer of Health accordingly submitted a report to the Health Committee on the proposed fluoridation of the Portsmouth water supply, recommending that the Portsmouth City Council should approve this decision in principle and authorise discussions to make the necessary arrangements with the Portsmouth Water Company. (*A copy of this Report is included as Appendix 'B'*).

The local position is, of course, complicated by the fact that the Portsmouth Water Company supplies a wide area and it would not be practicable to fluoridate selected districts. Any application for fluoridation would need the support of the Hampshire and West Sussex County Councils (including Gosport Borough, Fareham, Havant and Waterloo U.D.C's and Droxford and Winchester R.D's and Chichester Borough, Bognor U.D. and Chichester R.D.C.)

The Health Committee of the Portsmouth City Council approved the recommendation as outlined above, but, unfortunately, at the subsequent full Committee meeting of the City Council the proposal was heavily defeated and only four members voted in favour.

It is interesting to record that of all the other authorities whose areas are supplied by the Portsmouth Water Company, five have considered and rejected it, five have considered and have accepted the proposal, and one authority has considered these proposals but has reached no decision in the matter.

(1) Foxwell v Watford Corporation 1963.

APPENDIX 'A'

**REPORT OF THE MEDICAL OFFICER OF HEALTH ON THE
LIAISON SCHEME BETWEEN HEALTH VISITORS AND
GENERAL PRACTITIONERS**

At the February meeting of the Health Committee, the Medical Officer of Health reported on discussions which has been held with the Local Medical Committee regarding the establishment of a scheme for greater co-operation between health visitors and general practitioners in the City. The Committee resolved that the proposals of the Medical Officer of Health for the establishment of a pilot scheme should be approved and requested that a report should be submitted after the scheme had been in operation for a trial period.

Background to Health Visitor Liaison

Schemes in which health visitors are attached to particular practices have been suggested as a means of ensuring closer co-operation between the two services and have been carried out with varying degrees of success in different parts of the country. In Portsmouth, the Medical Officer of Health and the Local Medical Committee, after discussing the matter fully, came to the conclusion that, whilst the closest co-operation between health visitors and general practitioners is highly desirable, the idea of a strict attachment of health visitors to individual practices was not a practicable proposition locally because, amongst other reasons, of the discrepancy which exists between the number of health visitors at present employed by the local authority and the number of general practitioners and practices in the City. (At present, there are the Superintendent and Deputy Superintendent Health Visitors, and 26 other full-time health visitors (plus two part-time). There are 125 general practitioners in the Portsmouth area and 53 practices in the City). The Medical Officer of Health's liaison scheme recommended that a health visitor should visit the general practitioners at their surgeries at a mutually convenient time — say weekly — in order to discuss any problems which might have arisen and in which joint action was desirable. A decision could then be made on the best plan of action in the circumstances. Co-operation between health visitors and general practitioners has, of course, existed for many years, but it was hoped that the establishment of a regular meeting on this personal basis would result in a much more satisfactory link-up between the Health Department and other social services.

The Pilot Scheme

Nine practices were selected: six of these involved three or more partners: one was a practice in which there were two partners, and the remaining two were single-handed practices. It was thought practicable to second two health visitors to each of the larger multiple practices, with the result that eleven health visitors were involved in all. The health visitors were already responsible for casework in allocated areas of the City, and in some instances these roughly overlapped or covered the area of the chosen general practice. The liaison scheme health visitor would not herself visit individual cases residing in other areas, but would make herself responsible for any action to be taken in respect of such cases by contacting the health visitor concerned, reporting back to the family doctor, and finally relaying any relevant information back to her colleague again.

Before the scheme started, preliminary visits by the Deputy Medical Officer of Health and the individual health visitor concerned were made to each of the practices taking part and the various aspects of health visitors' work, together with the general aims of the services and of the scheme were discussed in the atmosphere of a friendly group. It was decided to invite the general practitioners to submit their individual comments and then evaluate the success or otherwise of the scheme at the end of six months.

Results

At the end of a six-month period, it appears that the scheme as devised has been so far a signal success. The general practitioners have sought the help and advice of the health visitor in dealing with many problems connected with the elderly, but they have also sought aid in dealing with cases involving housing and social problems, 'problem families' and child welfare. Health visitors in turn have themselves referred geriatric cases, child welfare and 'problem family' cases to the weekly discussion groups.

The exchange of information at these weekly meetings has proved extremely worthwhile and both health visitors and general practitioners are most anxious that the scheme should continue. Other general practitioners have now expressed a desire to participate in this scheme and they appear to be contacting health visitors in their areas much more frequently since this scheme has been in operation.

Further Developments

Following up these encouraging results, it is recommended that an extension of the scheme should now be made to include a further three multiple practices involving three additional health visitors. Nearly all the larger practices in the City will then be participating, and it is considered that, as far as the present staffing of health visitors is concerned this should represent a limit. Fourteen health visitors will be involved in the scheme. The remaining twelve full-time health visitors on the local authority staff have heavy commitments in other fields, such as special clinics and special schools, and will not be able to undertake further liaison work.

Regular follow-up meetings at six-monthly intervals will be held and should Portsmouth be fortunate enough to increase its staff of health visitors at some future date then a closer integration of family doctors and health visitors may be thought both desirable and practicable.

APPENDIX 'B'

PROPOSED FLUORIDATION OF THE PORTSMOUTH WATER SUPPLY

1. The Present Situation

The fluoridation of public water supplies is a matter which, up to the present time, has given rise to a great deal of discussion. To date more than 4,000 papers have been written on the subject and much favourable evidence stemming from observations of cases in Great Britain and the United States now exists. Yet controversy continues in spite of the lack of any real case against fluoridation. The opposition, although numerically small, is vociferous and has gained the ear of certain sections of the press.

Why is fluoridation necessary? At twelve years of age only five in every one hundred school children have no decayed teeth. Every year 40,000 children are fitted with dentures. Dental decay is, in fact, the most neglected health problem that we have. Yet fluoridation could more than halve the dental decay in our community.

What are the objections to fluoridation? In brief they can be divided into three groups:—

(a) *That Fluoridation is not effective.* To support this statement would be to ignore historical observations and epidemiological evidence of several years intensive study both here and in America. Attempts to discredit the studies are not supported by any positive findings. It is also postulated that the real answer to dental decay lies in improved methods of oral hygiene. While few would dispute the importance of maintaining oral hygiene it cannot be said that this is in any way the complete answer to dental decay.

(b) *That Fluoridation is dangerous.* Fluorine is a poison if taken in gross amounts. But so is excess of chlorine and many other things which form part of our daily diet. There is no evidence to suggest that fluorine in its recommended concentration of one part per million causes any ill effects whatsoever. Fluorine occurs naturally in water supplies in certain areas in much greater concentrations than this and no systematic aberrations in health of any kind, save for the mottling of teeth enamel, have been detected. As for the mottling of teeth, at a concentration of one part per million this is negligible. And prevention of dental decay, although not complete, is over 50%. A very small percentage of the fluoride is deposited in bone but at a water concentration of one part per million the intake of a lifetime would still leave the fluoride content of bone far below the level at which abnormal changes have been found to occur.

(c) *That Fluoridation is unethical.* It has been stated that the general fluoridation of water supplies is a form of mass medication and is an interference with individual liberty. The measure is to some extent analogous to chlorination, and without the acceptance of such procedures as a social obligation the great progress which has been made in the past in public health and hygiene could not have been possible. The replacement of fluoridation by a scheme in which fluoride tablets instead are given to children whose parents do not object would have very obvious disadvantages.

In a circular addressed to Local Authorities (Circular No. 15/65) the Minister of Health confirms earlier assurances of the safety and usefulness of fluoridation and urges its introduction. Lest fluoridation be held up through fear of legal action, the Minister undertakes to indemnify local health authorities or statutory water undertakers in England and Wales against costs or damages awarded against them either for adding fluoride to a water supply without statutory authority or because the addition of fluoride has caused or might cause injury to health. Under Section 28 of the National Health Service Act, 1946, a 'local authority may with the approval of the Minister . . . make arrangements for the purpose of the prevention of illness'.

2. Local Complications

Some local complications exist which will, however, complicate the addition of fluoride to the City's water supply. The Portsmouth Water Company supplies a wide area, and it would not be possible to fluoridate a selected district. Any application to the Company for fluoridation would need the support of the Hampshire County Council, the West Sussex County Council, as well as the Portsmouth County Borough Council. Presumably the Hampshire County Council would obtain the views of Gosport Borough, Fareham Urban District, Havant and Waterloo Urban District, Droxford Rural District and Winchester Rural District Councils, and the West Sussex County Council the views of Chichester Borough, Bognor Urban District and Chichester Rural District Councils.

3. Cost

The Minister of Health gave a figure of 10d. per head per annum, which was obtained by the pilot experiments held in Anglesea and Watford. The Sub-Committee of the British Waterworks Association which reported on this work in June 1963, said, however, that costs may vary appreciably as they would be dependent on the choice of chemicals, equipment and method of operation. Specialists' advice would have to be obtained if it is decided to go ahead with the scheme. At 10d. per head, the annual costs would come to about £25,000 per annum, and this would be proportioned to the three health authorities, either by estimated population or by estimated consumption, as they would agree. Provision would need to be made for the possibility of individual health authorities wishing to reverse their decision at any time. This state of affairs has already happened in some areas. This would, presumably, lead to the cessation of fluoridation, but the question of maintenance of equipment would need to be considered. Further figures which have been supplied to the Portsmouth Water Company estimate that the capital cost of installation would be in the region of £50,000, but the running costs may be reduced to £22,000 per annum. The population supplied by the Portsmouth Water Company is approximately 564,000 people. Portsmouth's share of the capital cost would be £17,800 and running cost £7,800 per annum, i.e., a figure of 9.37d. per annum, which is a little lower than the Ministry figures.

Fluoridation plants are safe and can be constructed so that they are incapable of delivering more than the recommended dose of fluoride.

4. Conclusion

Britain's teeth are the worst in the world and fluoridation of public water supplies is a positive measure to improve this state of affairs. No valid evidence has come to light against it, and it would seem that objections to its use must be regarded as emotional rather than medical. The general public as a whole is apathetic in the extreme with regard to fluoridation. Perhaps this is because it is not a matter of life or death. But this apathy should not provide a reason for denying the benefits of improved dental health to present and future generations of children.

Finally, it is, perhaps, worth mentioning that in America at least 45,000,000 people are drinking fluoridated water without any apparent ill effects, and that as far back as 1958 the World Health Organisation's Expert Committee on Water Fluoridation, reporting on all the evidence submitted to them from world-wide sources concluded that the effectiveness, safety and practicability of fluoridation as a caries-preventive measure had been established.

It is recommended, therefore, that the Portsmouth City Council should approve in principle the decision to fluoridate the City's water supply, and authorise discussions to make the necessary arrangements with the Portsmouth Water Company.

REPORT OF THE PUBLIC ANALYST

The Public Analyst's Department,
Trafalgar Place,
Clive Road,
Portsmouth.

To the Chairman and Members of the Health Committee.

I have the honour to present for the late Public Analyst, A. L. Williams, F.R.I.C. his Annual Report for the year ended 31st December, 1965.

Mr. Williams died on the 1st October, 1965, whilst at the peak of his career as your Public Analyst and as President of the Association of Public Analysts. His guidance and expert opinion will be sorely missed by all who knew him, whether professionally or personally.

I would like to take this opportunity to express my personal appreciation of the efficient and unfailing co-operation given by the whole staff and the sampling officer throughout the year, as a result of which a full service has been maintained.

The total number of samples submitted for examination was 4,425.

Food and Drugs Act	1,498
Designated Milk	450
Ice Cream (hygienic quality)	68
City Water	25
Swimming Bath Water	186
Sea Water	162
Fertilisers and Feeding Stuffs Act	12

SAMPLES EXAMINED FOR:—

Borough of Gosport	163
Isle of Wight County Council	176
Fareham Urban District Council	171
Havant and Waterloo Urban District Council	232
Other Local Authorities	61
Portsmouth Corporation Departments	367
Miscellaneous	854

TOTAL 4,425

ATMOSPHERIC POLLUTION TESTS:

Daily Sulphur Dioxide	1,320
Daily Smoke	1,320
Rain Gauges	12

Of the 1,498 samples purchased in the City of Portsmouth for analysis under the Food and Drugs Act, 87 (equal to 5·8 per cent.) were found to be adulterated, incorrectly labelled or otherwise unsatisfactory.

I am, Mr. Chairman and Members,

Your obedient servant,

A. J. HARRISON,
Deputy Public Analyst.

MILK

665 samples of ordinary milk and 231 Channel Island milks were examined during the year, all were free from added colour and preservative.

The samples were derived from the following sources:—

426 in pint bottles and cartons from retailers selling to the public.

441 ex-farm milks being delivered to dairies.

29 in one-third pint bottles delivered to various schools.

ORDINARY MILK

Of the 282 samples of milk contained in pint bottles and cartons with satisfactory milk fat contents, 42 were of poor quality, i.e. free from added water but deficient in solids-not-fat.

354 samples of ex-farm milk were derived from 152 herds, and analysis showed that 54 herds were producing milk of inferior quality, 68 samples were deficient in solids-not-fat and one deficient in milk fat. There was no evidence of the deliberate abstraction of cream or the addition of water in these cases.

9 samples of ex-farm milk from two farmers contained added water when received at the dairy. 5 samples from one farm contained between 1 and 9 per cent added water and examination of the milk cooling system revealed a faulty pipe union which caused water to enter the milk. The farmer was severely cautioned. 2 samples from another farm contained between 1 and 4 per cent added water. The farmer detected a leak in his milk cooling system and further samples taken at this time were found to be satisfactory. Systematic checks were made on the milk supplied by this farm and subsequently two further samples were found to contain between 1 and 5 per cent added water. This time a leak was discovered in the "in churn" cooling system and the farmer was cautioned.

Of the 29 samples of school milk, one was of inferior quality due to a deficiency in solids-not-fat. Another sample contained 0.3 per cent added water. The dairy was informed and follow up samples were found to be satisfactory.

14.9 per cent of the samples of milk on sale to the public were found to be naturally deficient in solids-not-fat as opposed to 21.8 per cent in 1964.

The natural seasonal variations in quality follow the same pattern as before but, as shown in the monthly variation table below, the overall average for solids-not-fat in 1965 shows a distinct improvement when compared with 1964.

Month	% Fat	% Solids-not-Fat	% Total Solids	No. of Samples examined
January	3.73	8.51	12.24	28
February	3.70	8.47	12.17	26
March	3.63	8.43	12.06	23
April	3.52	8.56	12.08	24
May	3.40	8.75	12.15	22
June	3.50	8.70	12.20	33
July	3.56	8.68	12.24	30
August	3.65	8.67	12.32	19
September ..	3.73	8.74	12.47	26
October	3.83	8.75	12.58	26
November ..	3.86	8.70	12.56	31
December ..	4.03	8.49	12.52	23
Average 1965 ..	3.68	8.62	12.30	311
.. 1964 ..	3.71	8.56	12.27	349
.. 1963 ..	3.75	8.65	12.40	408

CHANNEL ISLAND MILK

144 pint bottles of Channel Island milk were examined from retailers selling to the public. All these samples were satisfactory in that they contained at least 4.0 per cent of milk fat as required by law.

The quality of Channel Island milk sold to the public has been maintained. The average per cent fat compared with that of ordinary milk distributed by the dairies is shown below.

	<i>Channel Island Milk</i>	<i>Ordinary Milk</i>
1964	4.48	3.71
1965	4.52	3.68

In addition, 87 samples of ex-farm Channel Island milk delivered to local dairies were examined. Of these, 13 samples from 7 farms were deficient of the minimum standard of fat prescribed for Channel Island milk. Further samples from these farms showed 4 to be satisfactory and 3 persistently low in milk fat. The milk from 2 farms was classified by the dairy as ordinary milk until the standard could be satisfied. In the third instance the deficiencies were traced to two cows which were segregated from the herd and their milk separately submitted to the dairy as ordinary milk. The bulk milk from the remainder of the herd was satisfactory.

HYGIENIC QUALITY OF MILK

365 samples of milk were examined by the phosphatase test to check the efficiency of the pasteurisation and all were found to be satisfactory.

Of the 414 samples of milk tested for keeping quality by the methylene blue test only one failed. This sample was a cartoned milk from a refrigerated vending machine. An investigation by the producer revealed that his employee had failed to change the code number stamped on the cartons for three days and the distributor was, therefore, unable to distinguish between these deliveries. The producer was cautioned.

36 samples of sterilised milk supplied by three local dairies were examined and found to be adequately sterilised.

ANTIBIOTICS IN MILK

During the past year 413 samples of ex-farm milk have been examined for penicillin and other antibiotic residues. Of these, 388 (94 per cent) were found to be free from antibiotics, 18 samples (4.3 per cent) were found to contain traces of penicillin, i.e. less than 0.05 i.u. per millilitre and the remaining 7 samples (1.7 per cent) contained penicillin residues in the range 0.05 to 0.15 i.u. per millilitre. No antibiotic residues, other than penicillin were detected.

In 1964, some penicillin was detected in 11 per cent of the ex-farm milks analysed. By comparison only 6 per cent of the samples submitted for analysis in 1965 were found to be contaminated which is, undoubtedly, due to more informative labelling of penicillin preparations by including a statement of the time which must be allowed to elapse before the milk from a treated animal may be submitted to the dairy.

In each case, where penicillin was detected at or above 0.05 i.u. per millilitre, the dairy and the farmer were informed.

ICE CREAM

NUTRITIVE QUALITY

16 samples of ice cream examined for compliance with the Food Standards Ice Cream Order proved to be satisfactory. Analysis indicates that most manufacturers are still marketing a product which is superior in fat content to the legal minimum of 5 per cent.

<i>Fat per cent by weight</i>	<i>Number of Samples</i>	<i>Number of Manufacturers</i>
Less than 5%	—	—
5%—7.9%	6	3
8.0%—9.9%	7	5
10% and over	3	3

Two samples of 'Dairy Ice Cream' satisfied the legal requirements in respect of milk fat content.

HYGIENIC QUALITY

68 samples of ice cream were examined by the methylene blue test and 13 were found to be unsatisfactory from a hygienic (bacteriological) viewpoint.

Ice cream may be graded according to the efficiency of its heat treatment and subsequent handling. The following table indicates the percentage of ice cream falling into the respective grades during the last three years:—

		1965	1964	1963
Satisfactory	Grade 1	47%	62%	66%
Satisfactory	Grade 2	12%	15%	20%
Inferior	Grade 3	22%	8%	10%
Unsatisfactory	Grade 4	19%	15%	4%
		59%	77%	86%

It should be stressed that the above table does not give an indication of the general standard in the City because manufacturers found to be producing inferior or unsatisfactory quality ice cream are revisited and further samples taken. Nevertheless there is an increase over previous years in the number of inferior quality ice cream which required further investigation.

FOODS OTHER THAN MILK

Four samples of pork sausages from two retailers were found to contain less than the minimum meat content accepted in this area, i.e. 65 per cent meat. In each case the retailer was cautioned and agreed to work to an amended formula in the future. Undeclared sulphur dioxide preservative was found in sausages and sausage meat purchased from three retailers; all were cautioned and undertook to comply with the law in the future.

Two samples of canned casserole of meat contained 54 per cent and 58 per cent meat respectively. The labels implied that the articles contained not less than 95 per cent meat. Both products were imported; one importer was advised to ensure that future consignments were free from misleading labels, the other importer could not be traced.

Prunes in four samples of imported mixed dried fruit contained the non-permitted preservative sorbic acid. The samples were purchased from two retailers who immediately withdrew their remaining stock from sale. The importer stated that the packs were shipped to this country in error and undertook to ensure that future shipments complied with the law.

Two samples of home-made lemon curd were deficient in soluble solids and the retailer undertook to ensure that, in future, supplies would comply with the legal minimum.

Imported canned noodles were found to contain 2.4 and 2.8 parts per million of lead instead of not more than 2 parts per million as required by the Lead in Food Regulations. The American manufacturer has been contacted via the importer and has agreed to make a thorough investigation to try and establish the source of the lead. It has been suggested to the manufacturer that excessive handling of a dry brittle product such as this may have eroded lead from the soldered seam of the can thus contaminating the product.

Two samples purchased by the Sampling Officer in the normal course of his duties were criticised because the fat had deteriorated as a result of prolonged storage. One sample, a biscuit slimming aid, was also criticised for failing to declare the presence of vitamins and minerals in accordance with the Labelling of Food Order. Investigations revealed that the sample had escaped an earlier attempt by the manufacturer to recall all stocks when they discovered that the label was in need of amendment. In the second case a sugar confection containing coconut and cashew nut kernels had also become rancid rendering the product unpalatable. Here again investigation showed the sample to be old stock. The manufacturer's recommended shelf life is 3 to 4 months and the samples were 7 months old. These instances lend support to suggestions that foodstuffs should be labelled in some way with the expected shelf life. They certainly highlight the retailers responsibility to know the shelf life of his stocks and to see that they are adequately rotated.

Two retailers were cautioned for selling cake confectionery filled with imitation cream in response to a demand for real cream cakes. In each case the retailer claimed that the purchaser would normally be informed at the time of sale. However, both retailers have now agreed to display a notice in the shop informing the customer that unless otherwise stated all cake confectionery fillings are imitation cream. Investigation of two other instances involving the sale of ordinary bread in response to a demand for milk bread proved that, in fact, neither bakery manufactured a milk bread. These examples illustrate how easily the public may be misled by shop assistants who are not fully conversant with the goods which they sell.

A sample of raisin flavoured ready-to-drink soft drink was found to contain saccharin in excess of that permitted by the Soft Drink Regulations and, in addition, failed to declare the presence of artificial sweetener on the label. A thorough investigation of the manufacturing procedure and the drink ingredients was made when it was established that the manufacturing formula did not include saccharin. Moreover, the sample did not contain benzoic acid preservative which should have been present if the formula had been adhered to. It was established that two solutions, one containing benzoic acid preservative and the other saccharin, were stored in identical inadequately labelled polythene containers on the same shelf in the factory preparation room. It was apparent that saccharin solution had been added in error for preservative solution.

Two samples of skimmed milk powder were found to contain excessive moisture in addition to labelling errors. In one instance the skimmed milk powder was imported from France with a guaranteed moisture content of less than 4 per cent, it was then packed in laminated paper bags for distribution. As a result of this criticism the product is now packed in heat sealed polythene bags enclosed in a cardboard carton. The second sample was packed from a bulk consignment by a local retailer into polythene bags

and sealed with a wire twist. A subsequent sample was found to be satisfactory and it would seem that either the bulk consignment contained excess moisture in the first instance or the repacking procedure was not as efficient as usual.

LABELLING OFFENCES

33 samples of prepacked foods were criticised for failing to comply with the requirements of the Labelling of Food Order 1953. They fall into the following categories:—

Label failed to identify the packer.	Casserole of meat, blackcurrant drink, mint jelly, honey, lemon curd, instant potato crackers, horseradish, fruit flavour drink, carrots.
No common or usual name given on the label.	Honey, farmhouse pate.
Ingredients not disclosed in the correct order of proportion by weight.	Scotch beef dinner.
List of ingredients not declared or incomplete.	Sauce, strawberries in syrup, mayonnaise, cocktail onions, lard, mint jelly, honey, jellied eels, biscuits, mint sauce, cranberry sauce, savoury ducks.
Incorrect designation of the product.	Deviled ham, bread.
Non-specific descriptions used for ingredients.	Blackcurrant drink, farmhouse pate, sugar compound, stuffed pork roll, glace cherries, sugar confection.
Statutory declaration not in the prescribed form.	Skim milk powder.

In each case the manufacturer undertook to amend the offending label accordance with the criticism.

DRUGS

A sample of Extra Strong Seidlitz Powders was erroneously labelled B.P.C. This preparation ceased to be an official B.P.C. preparation in January 1964. The retailer, not a pharmacist, stated that the sample was part of the stock purchased with the shop. The remainder of the stock was destroyed.

Fifty per cent of the aspirin tablet samples taken throughout the year failed the B.P. test for free salicylic acid. In each case the deterioration was due to prolonged or unsatisfactory storage often caused by overstocking with this item.

CHANGES IN LEGISLATION

Changes in legislation involving the revision of old standards and the introduction of new ones have further affected the work of the department this year. Many revisions of existing legislation have been proposed and two major reports have been produced by the Food Standards Committee.

THE DRIED MILK REGULATIONS 1965 amended and superseded the 1964 regulations before these came into force. The principle changes involve the specification of maximum and minimum fat contents for four descriptions of dried partly skimmed milk as well as specifications for dried full cream milk and dried skimmed milk. The regulations require that all descriptions of dried milk shall contain less than 5 per cent moisture.

THE MILK (SPECIAL DESIGNATION) (AMENDMENT) REGULATIONS 1965 introduce the new special designation 'Ultra heat treated' for milk and include an appropriate method for the bacteriological examination of milk so treated.

THE CHEESE REGULATIONS 1965 will come into operation in February 1967. These long awaited regulations specify standards for the composition of named cheeses, processed cheese and cheese spreads. A list of permitted additives is given which includes alginic acid and alginates, carrageen, edible gums, starches and flavourings for addition to cheese. The regulations also include detailed requirements for the labelling of the different grades of cheese.

Proposals for new legislation. These proposals are made in the form of draft Regulations which are frequently subject to modification before being laid before Parliament. However, in the absence of other legislation they are useful as presumptive standards.

PROPOSED REVISION OF ANTIOXIDANT REGULATIONS seek to further reduce the use of butylated hydroxytoluene and add to the list of permitted substances two more antioxidants capable of limiting the deterioration of apples and pears in transit.

REVISED PROPOSALS FOR CANNED MEAT REGULATIONS. Minimum standards are proposed for a variety of canned meat products from 100 per cent meat down to articles containing not less than 35 per cent meat, all of which will be deemed to be canned meat products. Labelling requirements are specified and it is intended that certain specific descriptions shall be applied to each of the categories proposed. With this information linked to guaranteed minimum meat contents the prospective purchaser will be better informed and able to assess a value for money purchase more easily.

REVISED PROPOSALS FOR REGULATIONS ON MEAT PIES incorporate minimum proposed meat contents for a wide variety of meat pies, taking into account variations in the size of these products. The proposed regulations also make provisions for the labelling and advertising of these products.

PROPOSALS FOR REGULATIONS ON SAUSAGES AND OTHER MEAT PRODUCTS. These proposals, if accepted, will reimpose minimum meat standards for sausages and sausage meat together with black puddings, polony, liver sausage, frankfurters, etc. and several other meat products such as meat loaf, to bring them into line with the proposals for canned meat products referred to above. Proposals are also made for the labelling of these products.

PROPOSALS FOR REGULATIONS ON COFFEE, COFFEE MIXTURES AND COFFEE EXTRACT incorporate and combine two previous orders concerned with liquid coffee essences and coffee mixtures and introduce standards for instant coffees and decaffeinated coffees together with the appropriate labelling requirements.

PROPOSALS FOR THE REVISION OF THE COLOURING MATTER IN FOOD REGULATIONS. Long term toxicity studies reported in 1964 have cast doubts on the suitability of some of the permitted synthetic colouring matters. The proposals, therefore, recommend the withdrawal of six such colours and the addition of one new colour. If these recommendations are implemented, only 25 colours will be permitted for use in food as opposed to 30 in the 1957 regulations.

PROPOSALS FOR REGULATIONS AMENDING THE MINERAL HYDROCARBONS IN FOOD REGULATIONS 1964. These proposals will introduce amended specifications for mineral hydrocarbons together with a new test to detect polycyclic hydrocarbons which are considered undesirable and potentially carcinogenic.

PROPOSED REGULATIONS ON ICE CREAM re-enact the earlier ice cream regulations with the addition of a definition of an ice cream, and an extension of the requirement that pre-packed ice cream made from non-milk fat shall declare 'contains vegetable fat' or 'contains non-milk fat' to all ice cream of this type.

PROPOSALS FOR REGULATIONS ON SALAD CREAM AND MAYONNAISE contain the same compositional standards as were laid down in the previous Order and in addition they include a definition of salad cream. The proposals do not contain provision for disclaimers to be printed on salad creams of sub-standard composition as permitted in the present Order.

PROPOSALS FOR REGULATIONS ON BUTTER suggest maximum limits for the content of non-fat milk solids and water with a minimum of 80 per cent of milk fat.

PROPOSALS FOR REGULATIONS ON MARGARINE seek to apply a minimum standard of 80 per cent fat of which not more than one-tenth may be milk fat and a maximum water content of 16 per cent. The proposals re-enact the vitamin requirements as laid down in the present Order but make no reference to the expression of any beta carotene present as Vitamin A. The proposals also dispense with the unsatisfactory official method for the determination of Vitamin A in the present Order.

PROPOSALS FOR REGULATIONS ON THE LABELLING OF FOOD have now been received which generally implement the recommendations of the Food Standards Committee. These proposals are now being examined by all interested parties and comments will be considered before the proposed Order is laid before Parliament.

Food Standard Committee Reports are often commissioned as a first step towards future legislation. They represent the recommendations of an expert committee who have made a full investigation of data submitted to them by manufacturing and trade interests in addition to scientific evidence relating to the toxicity of the material under consideration.

REPORT ON FLAVOURING AGENTS. Having considered a wide variety of natural and synthetic flavourings, the Committee have recommended that as an interim measure a list of non-permitted flavourings (16 in all) be prohibited by legislation. It is hoped that a further review of flavourings will be undertaken in five years time when more toxicological information should be available. The Committee intend that in the long term a list of permitted flavourings will be produced which will afford greater protection to the consumer and the food manufacturer.

REPORT ON FISH AND MEAT PASTES reviews the compositional and labelling requirements of the wide variety of products sold under this heading. The main recommendations of the report are that the minimum meat content of meat pastes should be raised from 55 per cent to 70 per cent as for fish pastes. Limits are suggested for the amount of fat which may be calculated as meat together with labelling amendments intended to remove the present confusion referred to in the Committee's report on food labelling.

Codes of Practice. During 1965 two Codes have been agreed between the Local Authorities Joint Advisory Committee (LAJAC) and representatives of the trades concerned. These Codes represent a 'gentlemen's agreement' on food standards in cases where no official standard exists and may form the basis for future legislation.

CODE 4 describes the standards of fill, composition and size of canned fruit and vegetables which have been accepted as the recognised practice of the British canning industry.

CODE 5 has been agreed with the Food Manufacturers Federation Incorporated and prescribes standards for 'Beans in or with Tomato Sauce' and 'Baked Beans in or with Tomato Sauce' specifying minimum limits for the content of beans, tomato solids and sugar.

FERTILISERS AND FEEDING STUFFS ACT

12 samples of fertilisers were examined. 2 samples were sold without the statutory statement of composition which the law requires. However, when the statements were subsequently provided one sample was found to be satisfactory, the other was 0.4 per cent deficient of nitrogen. The latter sample was old stock and a further sample from the new supply proved to be satisfactory. Both vendors were cautioned.

4 samples of fertilisers contained constituents in excess of the maximum limits of variation. Although the amounts were in excess of the permitted limits of variation, they were not to the prejudice of the purchaser. The vendors were advised.

SWIMMING POOL WATERS

During the summer months samples of water from two outdoor swimming and paddling pools were taken for bacteriological and chemical examination. On two occasions trace bacteriological contaminations were detected which were rectified, there was no evidence of continued contamination.

All the samples taken from the Victoria Park swimming and immersion pools throughout the year were completely satisfactory.

Samples from five school swimming pools were found to be satisfactory in all respects.

Efficient control of the residual chlorine and alkalinity has produced a high standard of swimming pool water and no complaints were received from bathers.

CITY WATER SUPPLY

A complaint from a consumer that the water supply had a metallic taste was not substantiated. Protective hardness scale from pipework caused a complaint that a flaky deposit was seen in the water drawn from a household tap.

Routine sampling from a public drinking fountain and a standpipe showed the water drawn to be slightly contaminated with organisms derived from dust. The drinking water fountains in a school were examined in an attempt to find the cause of a sickness epidemic amongst schoolchildren. Although slightly contaminated with organisms derived from dust there was no health hazard involved.

A very high standard of bacteriological purity has been maintained throughout the year and the chlorination of the supply has been adequately controlled. The water, as supplied to the consumer, was of good chemical and bacteriological quality and free from significant metallic contamination.

ATMOSPHERIC POLLUTION

During the year a total of 2,640 sulphur dioxide and smoke determinations were carried out in connection with the National Survey of Atmospheric Pollution. This is the fourth year we have contributed information to the Survey. The figures are obtained from five stations situated throughout the City, sampling a variety of areas from 'light residential' to a 'commercial working area'.

The results obtained indicate, as in previous years, a below average contamination of the atmosphere when compared with other published figures.

A monthly analysis of the rain water collected by a gauge at Church Road, Fratton, continued to indicate that there is a relatively low degree of contamination of the atmosphere with dust and other materials leached out of the air by rain water.

OTHER FOOD AND DRUG AUTHORITIES

Acting in the capacity of official Public Analyst the following samples were examined for neighbouring authorities:—

	<i>Isle of Wight</i>	<i>Gosport</i>	<i>Fareham</i>	<i>Havant</i>
Food and Drugs	176	163	171	232
Unsatisfactory	24	12	19	12
Percentage unsatisfactory ..	13·6	7·4	11·1	5·2

As many of these foods are distributed over a wide area these criticisms are of general interest.

ISLE OF WIGHT

An article designated 'Raspberry Seedless, failed to identify the contents with the common or usual description 'preserve' as required by the Labelling of Food Order. Bread sold in response to a demand for milk bread was found on analysis to be skimmed milk bread. A trade name used for an edible gum in the list of ingredients of dietary biscuits was regarded as uninformative to a purchaser and likely to be misleading, especially as the amount present was quoted in milligrams together with claims for vitamins and minerals. Two samples of flavoured separated milk drinks were criticised for failing to give a list of ingredients and for being erroneously labelled T.T. A commercial pack of a scampi preparation claimed 75 per cent scampi; 45 per cent was found and the claim criticised accordingly. One sample of canned stewed steak contained only 84 per cent meat instead of not less than 95 per cent and the manufacturer was advised to redesignate the product as 'stewed steak with gravy'. The can containing lemon pie filling was corroded as a result of the breakdown of the film of protective lacquer on the can; the manufacturer was advised. A sample of 'butter' from a hotel was found to contain 60 per cent of margarine and the hotelier was warned.

GOSPORT

A sample labelled 'Frying Oil' was criticised for failing to declare in specific terms to a prospective purchaser the true nature of the oil. Similarly, the labels of two samples were criticised for failing to designate the articles as biscuits. An item of sugar confectionery was labelled 'milk covered caramels', an erroneous description as the couverture contained ingredients other than full cream milk. It was agreed with the manufacturer that the expression 'milk chocolate covered caramels' should not be used in view of the fact that the couverture did not contain cocoa butter. It was concluded that, either the product should be upgraded to a full cream milk and cocoa butter couverture or that no reference should be made to the couverture until the position regarding the definition of chocolate is clarified. A sample of gin claiming proof spirit 70 per cent was found to contain only 66·6 per cent. Two complaint samples were submitted during the year. A sausage from a 'hot dog' was found to have a metal tack embedded in the sausage meat; grooves cut in the tack could well have been caused by the action of machinery during the manufacture of the sausage. A cream filled chocolate bar contained insect webbing and excreta.

FAREHAM

Two samples of milk were criticised for not being labelled with the appropriate designation 'Untreated Milk' required by the Milk (Special Designation) Regulations 1963. Another sample of milk was submitted in a bottle carrying the description 'Tuberculin Tested Milk' printed on the side;

this designation ceased to be approved in December, 1964. Investigation showed that the bottles had been sold secondhand to a small producer who was unaware of the changes in legislation, the remaining bottles were destroyed. 'Cassercle Steak' contained 72 per cent instead of not less than 95 per cent meat and should have been designated 'casserole steak in gravy'. A sample of instant full cream milk made the statutory declaration of equivalent pints in print of inadequate size. The prunes contained in a sample of mixed dried fruit were found to contain 170 parts per million of sorbic acid preservative contrary to the Preservatives in Food Regulations 1962. Four instances of the presence of foreign matter in food were examined during the year. A sponge cake contained fragments of glass, and slivers of wood were found in a loaf. A canned meat product containing egg had been badly stained due to sulphiding of the can. 'Dairy Cocktail' was fermenting as a result of contamination by yeasts.

HAVANT

The generic term 'cereal' was used in the list of ingredients of three canned meat products instead of a specific description as required by the Labelling of Food Order; two further samples, dressed crab and luncheon meat, failed to declare the presence of carbohydrate. The list of ingredients on a sample of Rose Hip Syrup failed to declare the presence of the permitted artificial colour Ponceau MX. The label on a can of beef steak with gravy declared a meat content of 65 per cent, the sample contained 61 per cent of meat, further samples are to be examined to establish the variation from can to can. Three complaint samples were submitted during the year. Shortcake biscuits with an unusual taste were shown to be rancid as a result of prolonged or inadequate storage. Canned carrots contained a white flaky deposit of water hardness salts presumably derived from the preparation process. Although the flakes contained high proportions of lead, copper and zinc, these metals were not detected in significant quantities in the carrots. Investigations were made into a complaint of an objectionable flavour in ice lollies. Analysis showed a high chloride content suggesting contamination of the lolly mix with brine solution. An examination of the lolly moulds showed several to be defective.

MISCELLANEOUS

TOXICOLOGY

A total of 198 specimens were submitted by the Coroners for Portsmouth, South Hampshire and the Isle of Wight in connection with 76 inquests.

Of the 25 cases submitted for alcohol, 17 were in connection with road accidents of which over 50 per cent had positive blood alcohol levels in the following ranges:—

<i>Milligrams per 100 mls.</i>	<i>Number of Cases</i>
0—100	2
100—200	5
over 200	2

Barbiturates were detected and identified in 35 of the remaining cases of which 5 were associated with alcohol, 3 associated with carbromal and 1 with alcohol and carbromal. There were two instances of salicylate overdoses during the year. Of the 14 remaining cases 12 were reported as negative after exhaustive searches for a wide variety of drugs which were known to have been available to the deceased. In two instances compounds were detected which had not previously been encountered; in the first a crystalline material was isolated from the gastric contents which proved to be succinic acid and in the second case the phenothiazine Stelazine was detected and estimated in the various specimens submitted.

Whilst barbiturates remain the principle group of drugs detected in toxicological specimens, the wide variety of new drugs now available, coupled with a tendency to prescribe several different drugs over a period of time, has greatly increased the number of 'possibilities' which must be investigated. It is sometimes necessary to establish whether any of the drugs available were responsible or even contributory to the cause of death. To cope with this situation the laboratory has, in some instances, to modify existing techniques or develop new ones in order to screen post mortem specimens for drugs when there is only a limited amount of technical information available.

SCHOOL MEALS

47 samples of a variety of foods derived from school meals kitchens were examined for the School Meals Service.

A complaint that a custard trifle, prepared in a school meals kitchen, was unpalatable was confirmed. Investigation at the kitchen revealed that the custard portion had been stored at temperatures approaching blood heat for several hours which had encouraged the production of an unpalatable flavour. The kitchen staff were advised of the appropriate storage conditions for this kind of food. It is unlikely that a health hazard was involved. Glace cherries were suspected to be contaminated with a white substance adhering to their surfaces. Microscopical examination and chemical analysis showed the substance to be a mixture of sugars naturally present in glace cherries which had become crystalline on storage.

7 samples of canned meat preparations for use in the school kitchens were examined for value at contract price. An opinion was given on the basis of the proportion of cereal filler, the ratio of fat to lean meat, the proportion of skin and gristle, texture, spicing and palatability as compared with price.

FOREIGN MATERIALS IN FOOD

60 complaints made by the public of the presence of foreign matter in food were investigated in the department compared with 49 last year. The following summary lists some of the materials which were identified in the foods indicated.

Bread	Moth, flakes of rusted metal, dust, grit, flour beetle, hair grip.
Sugar	Common salt.
Cake confectionery	Flakes of distemper.
Meat preparations	Mould, animal hide and hairs, iron sulphide, woven tape, bone tissue from animal, diesel oil or paraffin, bluebottle, insect.
Frozen peas	Slug.
Almonds	Grub, webbing and excreta.
Blackberries in syrup	Beetle.
Milk	Spider, glass, mould spores and hyphae, bottle cap, dust associated with dried milk solids.

CONSTRUCTORS JOHN BROWN LIMITED

In July of this year the Committee gave its approval for C.J.B. Ltd., to make use of the Public Analyst's laboratory on an economic basis for analytical work in connection with the Company's experimental sewage plant at Cosham. To date some 370 samples have been examined by chemical and bacteriological techniques including some bench scale experimental work. The income from this source for the year ended December 1965 was £337.

FEES

Fees charged for miscellaneous samples together with the fees for work carried out under official appointments to neighbouring authorities amounted to a total of £3,736.

TABLE 1. FOOD AND DRUG SAMPLES SUBMITTED, 1965

Nature of Sample	Number Examined	Number Genuine	Number Irregular
Foods			
Milk	896	872	24
Alcoholic Beverage	7	7	—
Angelica	4	4	—
Arrowroot	3	3	—
Beef Curry with Rice (hydrated)	2	2	—
Biscuits	9	7	2
Bread	5	3	2
Butter	8	8	—
Cake Confectionery	2	—	2
Cake and Pudding Mixture	2	2	—
Canned Cream Soup	1	1	—
Canned Fish	6	5	1
Canned Fruit	18	17	1
Canned Meat Preparations	26	19	7
Canned Meat Pudding	1	1	—
Canned Noodles	2	—	2
Canned Pudding	1	1	—
Canned Soup	8	8	—
Canned Tomatoes	9	9	—
Canned Vegetables	24	23	1
Celery Salt	1	1	—
Cereals	9	9	—
Cheese	4	4	—
Christmas Pudding	3	3	—
Coffee Essence	5	5	—
Coffee Instant	1	1	—
Cocoa	3	3	—
Colouring	4	4	—
Cooking Fat	1	1	—
Cranberry Sauce	2	1	1
Cream	5	5	—
Crystallised Fruit	5	4	1
Curry Powder	3	3	—
Dried Fruit	12	8	4
Dried Herbs	2	2	—
Dried Milk	7	5	2
Edible Oil	6	6	—
Fish Cakes	4	4	—
Flavoured Milk Drink	3	3	—
Flour (plain and self-raising)	8	8	—
Fruit Confection	1	1	—
Fruit Curd	6	3	3
Fruit in Jelly	1	1	—
Fruit Juice	10	8	2
Ground Almonds	3	3	—
Health Food	1	1	—
Honey	5	3	2
Horseradish	3	2	1
Ice Cream	16	16	—
Ice Lolly	6	6	—
Instant Mashed Potato	3	3	—
Jam	4	4	—
Lard	11	10	1
Lemon Pie Filling	2	2	—
Margarine	16	16	—
Marmalade	4	4	—
Marzipan	3	3	—
Meat Preparations	3	2	1
Milk Drink	1	1	—
Minced Meat	6	6	—
Mint Sauce	3	1	2
Mustard	5	5	—
	1,235	1,173	62

TABLE 2

SAMPLES OTHER THAN MILK NOT IN ACCORDANCE WITH STANDARD

No.	Nature of Sample	Formal Infor- mal	Nature of Offence	Observations
X5	Casserole of Meat (canned)	I	Misleading description. Contained only 58 per cent. meat instead of not less than 95 per cent. Label carried a misleading illustration of the contents of the article and failed to give the address of the packer.	Australian product. Importer could not be traced. No further action.
X6	Sauce	I	Label failed to disclose the presence of artificial colour in the list of ingredients.	Label to be reprinted
X13	Casserole Beef Steak (canned)	I	Misleading description. Contained only 54 per cent. meat instead of not less than 95 per cent. meat. Label should read 'Casserole Beef Steak and Gravy'	Importer advised to ensure that future imports were free from misleading labels.
X15	Tarragon Mayonnaise	I	Label failed to disclose the presence of artificial colour in the list of ingredients.	Label to be amended
X26	Strawberries in pure Sugar Syrup (canned)	I	Label failed to disclose the presence of artificial colour in the list of ingredients	Label to be amended
X43 X123	Pork Sausages Pork Sausages	I F }	Contained 62 per cent. and 60 per cent meat respectively instead of not less than 65 per cent. meat	Retailer cautioned having agreed to increase the meat content
X44	Pork Sausages	I	Contained 300 parts per million undeclared sulphur dioxide preservative	Retailer cautioned
X45 X124	Pork Sausage Meat	I F }	Contained 59 per cent. and 56 per cent. meat respectively instead of not less than 65 per cent. meat and 260 parts per million undeclared sulphur dioxide preservative	Retailer cautioned. Manufacturing formula amended
X47	Beef Sausages	I	Contained 220 parts per million undeclared sulphur dioxide preservative	Retailer cautioned
X49	Deviled Ham (canned)	I	Contained 20 per cent. added water and therefore an appropriate description for this article would be 'Deviled Ham Spread' or 'Paste'	Manufacturer advised

No.	Nature of Sample	Formal Informal	Nature of Offence	Observations
X101	Blackcurrant Health Drink	I	Label correctly claimed the presence of Vitamin C but mislead the purchaser as to the Vitamin C equivalent in alternative quantitative terms.	Satisfactory amended label now in use
X106	Blackcurrant Health Drink	I	Label failed to declare the Vitamin C content and identify the packer in the manner prescribed by law	Label to be amended
X107	Cocktail Onions	I	Label failed to disclose the presence of artificial colour in the list of ingredients	Label to be amended
X108	Lard (prepacked)	I	Label failed to disclose the presence of the antioxidant butylated hydroxytoluene	Label to be amended
X188	Milk Bread	I	Misleading description. Contained only a trace of milk solids	Ordinary Bread sold erroneously when milk bread was demanded. Retail staff advised
X189	Milk Bread	I	Misleading description. Contained only a trace of milk solids	Ordinary bread sold erroneously when milk bread was demanded. Retail staff advised
X190	Mint Jelly	I	Not labelled in accordance with the Labelling of Food Order	Label to be amended
X191	Honey	I	Sample carried no label	Label to be provided
X192	Lemon Curd	I	Contained only 58 per cent. soluble solids instead of not less than 65 per cent. and the label failed to disclose the name and address of the packer	Retailer has withdrawn remaining stocks from sale
X193	Farmhouse Pate	I	The generic term 'cereals' used in the list of ingredients instead of specific names and no common or usual name for the product given on the label	Label to be amended
X195	Filletted Jellied Eels	I	Label failed to give a list of ingredients	Label to be amended
X230	Extra Strong Seidlitz Powder B.P.C.	I	Erroneously labelled B.P.C.	Old Stock. Retailer advised
X254	Pure Chichester Honey	I	Label failed to disclose the name and address of the packer	Packer cautioned

No.	Nature of Sample	Formal Informal	Nature of Offence	Observations
X418 X652	Mixed Dried Fruit	I I	The prunes contained respectively 500 and 200 parts per million of the non-permitted preservative sorbic acid	Retailer's stock with drawn from sale. Importer to comply with the requirements in future
X562	Lemon Curd (home-made)	I	Soluble solids only 62.7 per cent. instead of not less than 65 per cent.	Retailer to comply with requirements in the future
X568 X748	Sandwich Biscuits (slimming aid)	I I	Unpalatable due to rancidity developed during storage. Declaration of vitamins and minerals not in accordance with the Labelling of Food Order	Remainder of retailer's old stock withdrawn from sale. Label amended by manufacturer
X641	Sugar Compound	I	The artificial sweetener used was declared as 'Soluble Gluside' instead of 'Soluble Saccharin' the appropriate designation	Manufacturer to amend label
X755	Instant Potato Crackers	I	Label failed to give the name and address of the packer	Old stock. Label amended
X766 X1027	Chow Mein Noodles	I I	Contained 2.4 and 2.8 parts per million of lead instead of not more than 2 parts per million required by law	Manufacturer making a full investigation to establish source of contamination. Correspondence incomplete
X790	Mint Sauce	I	Label failed to disclose the presence of artificial colour in the list of ingredients	Sale of the product to be discontinued by the retailer
X791	Lemon Curd	I	Contained only 64 per cent. soluble solids instead of not less than 65 per cent.	Retailer to comply with requirements in the future
X819	Horseradish	I	Label failed to give the address of the packer	Sale of the product to be discontinued by the retailer
X876 X878	Koray Tablets Koray Tablets	I I	Failed the B.P. test for free salicylic acid as a result of prolonged or inadequate storage	Existing stocks from two retailers surrendered. Retailers (not pharmacists) to discontinue the sale of the product
X881	Aspro Tablets	I	Failed the B.P. test for free salicylic acid as a result of prolonged storage	Retailer (not a pharmacist) undertook to restrict the storage time in the future

No.	Nature of Sample	Formal Informal	Nature of Offence	Observations		
X895	Aspirin Tablets	I	Failed the B.P. test for free salicylic acid as a result of prolonged or inadequate storage	Retailer (not a pharmacist) restricted the storage time to a minimum. Investigation at wholesaler proved inconclusive as the aspirin tablets are now manufactured by a new supplier		
X899 X1079 X1080	Aspro Tablets Aspro Tablets Aspro Tablets	I I I	Failed the B.P. test for free salicylic acid due to prolonged storage	Pharmacist surrendered his stocks of the product for destruction and undertook to restrict storage time in the future		
X1025	Cranberry Sauce	I			List of ingredients on the label not given in a clearly legible and conspicuous manner	Manufacturer to discontinue the product
X1057	Fruit Flavour Drink	I			Label failed to give the name and address of the packer	Manufacturer to amend the label
X1077	Carrots	I	Label failed to give the name and address of the packer	Importer to amend the label		
X1081	Savoury Ducks	I	Label failed to give a list of ingredients	Manufacturer to amend the label		
X1141 X1161	Mixed Dried Fruit	I I	The prunes contained respectively 150 and 200 parts per million of the non-permitted preservative sorbic acid	Importer to comply with the requirements in the future		
X1147 X1246	Scotch Beef Dinner	I I	Ingredients on the label not given in the correct order of proportion by weight. Undue precedence given to the declaration of butter	Manufacturer has now amended the label		
X1211	Aspirin Tablets	I	Failed the B.P. test for free salicylic acid as a result of prolonged or inadequate storage	Existing stock surrendered. Retailer (not a pharmacist) to discontinue the sale of the product		
X1212	Aspirin Tablets	I	Failed the B.P. test for free salicylic acid as a result of prolonged or inadequate storage	Retailer (not a pharmacist) stated that stock had been held for only one month. Wholesaler to purchase smaller quantities for distribution to retailers		
X1267	Cream Filled Chocolate Slices (sold as real cream)	I	Filling consisted wholly of imitation cream.	Retailer cautioned		

No.	Nature of Sample	Formal Informal	Nature of Offence	Observations
X1277	Stuffed Pork Roll	I	The generic term 'cereal' used in the list of ingredients instead of a specific name	Manufacturer agreed that the label offended the Labelling of Food Order but asked to defer amendment until the requirements of the new Order became known. This was accepted
X1283	Glace Cherries	I	The generic term 'glucose' used in the list of ingredients instead of the specific term 'glucose syrup'	Manufacturer cautioned. The label was criticised in 1959 but had not been amended. A new pack to be produced
X1297	Cream Filled Doughnuts (sold as real cream)	I	Filling consisted wholly of imitation cream	Retailer cautioned
X1427	Raisin Flavour Drink	I	Contained saccharin in excess of the permitted limit. Label failed to declare the presence of saccharin	Manufacturer cautioned. Formula did not contain saccharin which had been incorporated in error
X1478	Skim Milk Powder	I	Statutory declaration on the label not in the prescribed form. Contained excess moisture	Packer / retailer to amend label. Moisture content of further sample satisfactory.
X1479	Instant Skimmed Milk Granules	I	Statutory declaration on the label not in the prescribed form. Contained excess moisture	Label to be amended. The product to be packed in heat-sealed polythene bags in future to prevent excessive moisture
X1487	Sugar Confection	I	Voluntary list included alternative ingredients 'sugar/glucose as available' instead of a true statement of composition	Label to be amended
X1488	Sugar Confection	I	Unsatisfactory taste due to rancidity. Voluntary list of ingredients on the label not listed in the order of proportion by weight	Retailer removed remainder of the product from sale. Manufacturer had agreed to amend the label in 1964 but had failed to carry out the undertaking. Cautioned

TABLE 3

MISCELLANEOUS SAMPLES

Consulting Service	Purchaser's Complaints	Borough of Gosport
Alcoholic Brew .. 1	Almonds 1	Atmospheric Deposit 2
Apple Juice 1	Bread 8	Water 1
Blood 1	Cake Confectionery.. 6	
Bread Rolls 1	Canned Fruit 3	Borough of Newport
Cake Confectionery 1	Cornflour 1	Bread 1
Calcinated Magnesia 1	Cornflour Pudding .. 1	Cake Confectionery.. 2
Chicken Fat 4	Canned Soup 1	Piccaililli 1
Chromate Solution .. 1	Dried Milk Powder .. 1	
Human Hair 1	Garden Peas 1	Borough of Ryde
Lighter Fuel 1	Grapefruit Drink .. 2	Sewage Effluent .. 2
Milk 2	Meat Pie 7	Water 2
Nitrofurantoin 1	Meat Preparations .. 13	
Tablets 1	Meat Pudding 1	Borough of Lymington
Norgren drain 1	Milk Bottles 12	Baked Beans 1
containing deposits 1	Penotrane Tincture .. 2	Corned Beef 1
Oil 1	Sugar 1	Deposit from Plastic
Paint 1	Sweets 1	Tap Attachment .. 1
Paint Scrapings .. 1		Stream Water 7
Plastic Toy Tool Set 1	Coroners' Specimens	
Polyurethane Rubber 2	Portsmouth 118	Bognor Regis U.D.C.
Pond Water 1	Isle of Wight 29	Corned Beef 1
Semolina 3	South Hampshire .. 51	Deposit from Beach.. 1
Sewage Effluent .. 1		Mouth Organ 1
Sludge 2	Health Department	
Soil 4	Corned Beef 5	Chichester R.D.C.
Stomach Contents .. 1	Foreign Matter from	Water 1
Substance from ex-	City Supply Water 1	
haust pipe 1	Foreign Material from	Fareham U.D.C.
Tallow 23	Cigarette 1	Dried Milk Powder .. 1
Urine 5	Hyacinth Bulb .. 1	Foreign Matter from
Vomit 1	Paint Powder .. 1	Bread 1
Wallpaper 1	Plastic Toys 5	Sewage 3
Water 19	Tobacco 1	Soil 5
Well Water 1	Sub-Floor Water .. 14	Woollen Garment .. 1
Whisky 1	Washed Milk Bottles 276	
	Architect's Department	Fleet U.D.C.
Constructors John	Wood Treated with	Water 2
Brown Limited—	Preservative 5	
Clarifier Effluent .. 100	Soil 1	Havant U.D.C.
Crude Sewage 50		Water 1
Effluent 55	Education Department	
Ex-Mixing Zone .. 2	School Meals Service 47	Isle of Wight R.D.C.
Sea Water 5		Bread 1
Sewage 158	Engineer's Department	Sewage Effluent .. 1
	Grease 1	Spring Water 2
Laboratory Information	Sub-Floor Water .. 1	Stream Water 2
Aspirin Tablets .. 2	Water 1	
Bulk Milk 4	Contracts and Supplies	Isle of Wight River and
Fruit and Vegetables 102	Metal Polish 2	Water Authority
Ice Cream Filled Ice	Soap 4	Water 3
Lolly 1		
Milk Bottles 12	Aldershot U.D.C.	Petersfield
Penicillin Tablets .. 4	Water 10	R.D.C. and U.D.C.
Pesticide Preparations 6		Sewage Effluent .. 2
Sugar 2	Alton R.D.C.	Swimming Pool Water 1
Sweets 1	Corned Beef 1	Water 2



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