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RAUNDS URBAN
DISTRICT COUNCIL

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
A. McINNES, M.B., D.P.H.

1962



RAUNDS URBAN

Chairman, 1962: E.W. Wilson, Esq.

Chairman: E.W. Wilson

RAUNDS URBAN

DISTRICT COUNCIL

Medical Officer: A. McInnes, M.B., D.P.H.

Public Health Inspector and Surveyor: E.W. Wilson, M.B., D.P.H.

Area of District: 4,400 acres

Population: 4,500

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

A. McINNES, M.B., D.P.H.

Year	Population	Area (Acres)	Rate per 1,000
1954	4,500	4,400	135. 6. 0.2
1955	4,500	4,400	139. 12. 3.3
1956	4,500	4,400	157. 8. 3.77
1957	4,500	4,500	161. 1. 6.42
1958	4,500	4,500	162. 6. 8.99

1962

Year	Population	Area (Acres)	Rate per 1,000
1959	4,500	4,400	163. 1. 8.99
1960	4,500	4,400	164. 1. 8.99
1961	4,500	4,400	165. 1. 8.99
1962	4,500	4,400	166. 1. 8.99
1963	4,500	4,400	167. 1. 8.99
1964	4,500	4,400	168. 1. 8.99
1965	4,500	4,400	169. 1. 8.99

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RAUNDS URBAN DISTRICT

Chairman, 1962: R.W. Holmes, Esq.

Clerk: B.M. Killick

Public Health Officers

Medical Officer of Health: A. McInnes, M.B., D.P.H.

Public Health Inspector
and Surveyor: G. Whittam, F.I.A.S., M.R.S.I.

Area of District: 6,483 acres

Population: 4,610

PARTICULARS of Separate Dwellings, Population, Rateable Value and
Product of 1d Rate.

		Dwellings	Population	Rateable Value £	Penny Rate £. s. d
1958	...	1,621	4,650	35,572	136. 6. 0.2
1959	...	1,615	4,680	39,693	139. 12. 3.9
1960	...	1,637	4,670	40,305	157. 8. 3.77
1961	...	1,650	4,570	40,886	161. 1. 6.42
1962	...	1,669	4,610	41,524	162. 8. 8.99

Census Returns

			Population	No. of Houses	No. per house
1901	...	...	3,811	847	4.5
1911	...	...	3,874	850	4.5
1921	...	...	3,761	920	4.08
1931	...	...	3,687	1,012	3.65
1941	...	...	5,392	1,395	3.86
1951	...	...	4,579	1,512	3.02
1961	...	...	4,570	1,650	2.77

RAUNGS URBAN DISTRICT

Chairman, 1902: R.W. Holmes, Esq.
 Clerk: D.M. Killick

Public Health Officers

Medical Officer of Health: A. Holmes, M.D., D.P.H.
 Public Health Inspector and Surveyor: G. Whiston, F.I.A.S., M.R.S.I.
 Area of District: 6,483 acres
 Population: 4,610

PARTICULARS of Separate Dwellings, Population, Rateable Value and Product of 1d Rate.

	Dwellings	Population	Rateable Value	Penny Rate
1902	1,669	4,610	41,524	10s. 8d. 39
1901	1,650	4,570	40,886	10s. 1d. 42
1900	1,637	4,670	40,305	10s. 8d. 77
1909	1,615	4,680	39,693	10s. 15d. 39
1908	1,621	4,650	39,572	10s. 6d. 02

General Returns

	Population	No. of Houses	No. per house
1901	4,570	1,680	2.72
1902	4,579	1,512	3.02
1903	5,392	1,392	3.86
1904	5,687	1,012	5.62
1905	5,761	920	6.26
1906	5,874	820	7.16
1907	5,811	617	9.42

Mr. Chairman,

The Annual Public Health Report is given herewith. Besides giving the Health Report for the year 1962, included is a good deal of public health history. Vital statistics extending over a period of sixty years and more must not be interpreted too narrowly. Shifts in numbers suffering from a specific disease may be due to better means of diagnosis and this is especially true of Pulmonary Tuberculosis and Pulmonary Cancer. Nevertheless, better housing, better wages, combined with the social services and antibiotics have contributed most to the improvement of Public Health. With all this improvement there is an increase of the expectation of life and at the end of the road there is the problem of the aged.

Raunds is an urban district in the east of Northamptonshire. It is completely surrounded by parishes of the Oundle & Thrapston Rural District except where it borders Huntingdonshire in the east. The River Nene separates it from the parish of Lt. Addington of the Oundle & Thrapston Rural District. The parish of Hargrave borders it on the east, Chelveston on the south and Denford and Ringstead on the north. Its latitude is 52° 20' N and longitude 32° W.

Local Government and Population

Up to the year 1897 Raunds was a parish of the then existing Thrapston Rural District, when it became an independent urban district. It began its urban career with an estimated population of 3,800 and an area of 4,387 acres. In 1935 its boundary was extended to include the neighbouring parish of Stanwick of the Thrapston Rural District. At the time of the amalgamation the estimated population of Raunds was 3,617 and this population rose to 4,440 and the area to 6,483 acres. As can be verified by tables given at other parts of this report, the population has been essentially static throughout sixty six years of existence. During the first world war different figures for population were given for estimating (1) Birth Rate, (2) Death Rate on the assumption that while men in the forces did not contribute to the death rate, they contributed to the birth rate. The difference in the two sets of population would give a fair estimate of Raunds' contribution to the fighting forces. During the second world war the population was increased by evacuation from London.

Industry

The making of boots and shoes, especially of the heavy kind for the Army and Navy has long been the chief industry in Raunds. A greater variety of shoe is now made. There are six chief shoe factories, one of which is in Stanwick. There are also workshops for making accessories for the boot and shoe industry. Besides, there is a tannery, a toy factory, a shirt factory, a clothing factory and a brickworks.

During the first world war the female out-workers stitched and turned the heavy leather sea boots. In these days most of the females work within the factory machining boot uppers.

In the first world war the female out-workers on the heavy sea-boots suffered from teno-synovitis of the wrist and often a muscular paresis of the forearms. The work was physically heavy.

Below is given an extract from the Public Health Report of 1930 describing a somewhat similar disease of pounding machining operators.

"At the time of the census in 1921, 509 males and 237 females out of every 1,000 of each sex over the age of 12, were engaged in the making of textiles and articles of dress, chiefly boot making. It is unlikely that the proportion has changed materially in 1930.

"Boot and shoe-making is not an unhealthy industry and does not give rise to excessive illness of any kind. During the year the M.O.H. was asked by the Boot and Shoe Union to inquire into the disease sometimes called "the dead hand" of the pounding machine operators. Eight operators were examined. All the men complained of deadness of those fingers most subject to vibration from their work. The numbness was most marked after washing in the evening and in the early morning just before starting work. During attacks the fingers feel dead and only coarse objects can be picked up by the fingers. Four of the men showed slight wasting of the muscles of the right arm, and all four were right handed. At the time of examination no sensory disturbance would be detected, although there is a marked dulling of all sensations at the part during an attack. None of the men were disabled from work. The disease is in the nature of a "local syncope", no doubt due to the excessive vibration acting on the sympathetic nerve supply of the arteries, causing arterial contraction. This would also explain the slight muscular wasting. There was no disease of the spinal nerves."

Geology

Raunds is situated in a hollow in the valley of the River Nene. The long main street, over a mile in length, runs along the bottom of this hollow and is based on the upper Lias Clay. The land rises rapidly on both sides of the main street, roughly on the east and west and on either side shows the same alternation and thickness of strata. From the upper Lias Clay the strata in order are:-

- (1) The lower estuarine deposit (ironstone). 12 - 14 feet thick.
- (2) The upper estuarine deposit. 1 foot thick.
- (3) Great oolite limestone. 10 - 16 feet thick.
- (4) Great oolite clay. 3 - 6 feet thick.
- (5) Cornbrash. 5 feet thick.

On the east the cornbrash is covered by the Oxford Clay which rapidly thickens as it travels east. On the west, towards the River Nene, the upper Lias Clay again comes to the surface.

The old parish of Stanwick shows a similar geological structure.

Meteorology

Rainfall over a large number of years varies from 32" to 13" a year with an average of 23" to 24". The average number of hours of sunshine varies from 800 to 1600 hours a year. There is a difference of about 40°F. between mean summer temperature (70°F - 75°F) and mean winter temperature (29°F - 34°F).

Birth Rate

The number of births and a series of rates are given below. Up to 1950 only crude Birth Rates could be given, but for 1950 and afterwards a comparability factor has been issued so that standard Birth Rate = crude Birth Rate x comparability factor. For Raunds the comparability factor for 1959, 1960, 1961 and 1962 was 1.16.

Live Births

TOTAL LIVE BIRTHS in Raunds Urban District:-

					1959		1960		1961		1962	
					M	F	M	F	M	F	M	F
Legitimate	...	...	...	...	30	28	21	35	35	30	33	27
Illegitimate	...	...	...	...	1	1	0	0	0	2	0	1
TOTAL	...	...	...	...	31	29	21	35	35	32	33	28

Illegitimate rate per 1,000 Live Births 33.3 0.0 29.87 16.4

BIRTH RATES per 1,000 of population:-

Raunds U.D.C. - Crude	...	...	12.82	12.0	14.66	13.2
Standard	...	...	14.87	13.92	17.4	15.3
England and Wales	...	...	16.5	17.1	17.4	18.0
Administrative County	...	...	16.6	17.7	18.04	

Still Births

A still birth is defined as the issue of a dead child after twenty-eight weeks of pregnancy. The single still birth was of a child born in hospital.

					1959		1960		1961		1962	
					M	F	M	F	M	F	M	F
Legitimate	...	...	...	...	2	0	0	0	1	0	0	1
Illegitimate	...	...	...	...	0	0	0	0	0	0	0	0
TOTAL	...	...	...	...	2	0	0	0	1	0	0	1

Rate per 1,000 of Live and Still Births:- 1959 1960 1961 1962

Raunds Urban District	...	...	32.0	0.0	15.0	16.1
England and Wales	...	...	20.7	19.7	19.1	18.1
Administrative County	...	...	19.2	16.32	17.6	

Deaths of Children under 1 year

					1959		1960		1961		1962	
					M	F	M	F	M	F	M	F
Legitimate	...	...	...	...	0	0	1	0	0	3	1	0
Illegitimate	...	...	...	...	1	0	0	0	0	0	0	0
TOTAL	...	...	...	...	1	0	1	0	0	3	1	0

Rate per 1,000 of Live Births 1959 1960 1961 1962

Raunds Urban District	...	...	16.6	17.86	46.0	16.1
England and Wales	...	...	22.0	21.7	21.6	21.4
Administrative County	...	...	20.2	22.57	17.61	

Deaths of Children under 4 weeks

					1960		1961		1962	
					M	F	M	F	M	F
Legitimate	...	...	...	...	1	0	0	2	1	0
Illegitimate	...	...	...	...	0	0	0	0	0	0
TOTAL	...	...	...	...	1	0	0	2	1	0

Deaths of Children under 1 week

					1961		1962	
					M	F	M	F
Legitimate	...	...	...	...	0	2	1	0
Illegitimate	...	...	...	...	0	0	0	0
TOTAL	...	...	...	...	0	2	1	0

Live Births

TOTAL LIVE BIRTHS in Ramoth Urban District:-

	1959		1960		1961		1962	
	M	F	M	F	M	F	M	F
Legitimate	30	28	21	32	15	30	33	27
Illegitimate	1	1	0	0	0	0	0	1
TOTAL	31	29	21	32	15	30	33	28

Illegitimate rate per 1,000 Live Births 33.3

BIRTH RATES per 1,000 of population:-

Ramoth U.D.C. - Crude	12.82	12.82	12.0	14.66	13.2
Standard	14.67	14.67	13.28	17.4	13.3
England and Wales	16.2	16.2	17.1	17.4	18.0
Administrative County	16.6	16.6	17.7	18.04	

Still Births

A still birth is defined as the issue of a dead child after twenty-eight weeks of pregnancy. The single still birth was of a child born in hospital.

	1959		1960		1961		1962	
	M	F	M	F	M	F	M	F
Legitimate	2	0	0	0	1	0	0	1
Illegitimate	0	0	0	0	0	0	0	0
TOTAL	2	0	0	0	1	0	0	1

Rate per 1,000 of Live and Still Births:-

Ramoth Urban District	32.0	0.0	12.0	12.0	16.1
England and Wales	20.7	19.7	19.1	19.1	16.1
Administrative County	19.2	16.32	17.6		

Deaths of Children under 1 year

	1959		1960		1961		1962	
	M	F	M	F	M	F	M	F
Legitimate	0	0	1	0	0	3	1	0
Illegitimate	1	0	0	0	0	0	0	0
TOTAL	1	0	1	0	0	3	1	0

Rate per 1,000 of Live Births

Ramoth Urban District	16.6	17.66	46.0	16.1	
England and Wales	22.0	24.7	27.6	24.4	
Administrative County	20.2	22.37	17.61		

Deaths of Children under 1 week

	1959		1960		1961		1962	
	M	F	M	F	M	F	M	F
Legitimate	1	0	0	2	1	0	0	0
Illegitimate	0	0	0	0	0	0	0	0
TOTAL	1	0	0	2	1	0	0	0

Deaths of Children under 1 week

	1959		1960		1961		1962	
	M	F	M	F	M	F	M	F
Legitimate	0	2	1	0	0	0	0	0
Illegitimate	0	0	0	0	0	0	0	0
TOTAL	0	2	1	0	0	0	0	0

This division of Infantile Mortality into under a week, under a month and under a year is an attempt to separate statistically inherent causes of death from social causes. This child died in hospital very soon after birth.

Maternal Mortality

	1959	1960	1961	1962
	0	0	0	0
Rate per 1,000 Live and Still Births:-				
Raunds Urban District ...	0.0	0.0	0.0	0.0
England and Wales ...	0.38	0.39	0.33	
Administrative County ...	0.20	0.37	0.55	

There has been no maternal death since 1935, the date of the inclusion of Stanwick in the district.

One case of Puerperal Pyrexia was notified in 1960. There have only been 6 notifications of Puerperal Pyrexia in 28 years. None were notified in 1957, 1958, 1959, 1961 or 1962.

Death Rate

Below are given the number of deaths and a table of death rates per 1,000 of population. A Comparability Factor has been given so that Crude Death Rate x Comparability Factor = Standard Death Rate. The necessity of this factor for the purposes of comparison is due to an unequal distribution of age groups and also, to a lesser degree, of the sexes. For example: Bournemouth and Cheltenham are more likely to have a greater number in the older age groups than say Coventry or Wigan, where most are of the earning ages. Females have a greater expectation of life than males. This also allows for the presence in a district of institutions especially for the elderly. You may have noticed that deaths exceed births.

A classification of the causes of death is given in tables at the end of the report.

Number of Deaths

	1959	1960	1961	1962
Males				
January - September } ...	30	35	{ 21 } 23	{ 19 } 27
October - December } ...			{ 2 }	{ 8 }
Females				
January - September } ...	32	21	{ 25 } 35	{ 33 } 37
October - December } ...			{ 10 }	{ 4 }

In 1958 there were 20, in 1959, 17, in 1960, 18, in 1961, 23 and in 1962, 32 inward transfers of persons normally resident in Raunds who died in hospital or while temporarily resident away from home. Of the inward transfers in 1962, 14 were over 80 and 20 over 70 years.

Analysis of ages at death were:-

	1958	1959	1960	1961	1962
Over 90 ...	1	0	2	1	3
80 - 90 ...	13	18	14	19	24
70 - 80 ...	20	16	14	19	16
60 - 70 ...	12	14	17	12	9
50 - 60 ...	5	8	4	3	9
40 - 50 ...	1	1	2	1	0
30 - 40 ...	0	1	2	1	0
20 - 30 ...	0	1	0	1	1
10 - 20 ...	0	0	0	0	1
*Under 1 ...	0	1	1	1	1
*See Infantile Mortality Rate	52	60	56	58	64
Percentage of deaths over 70	66%	57%	53.57%	67.2%	67.2%

Of the 30 deaths over 70 in 1960 19 were males and 11 females.

"	"	39	"	"	70	"	1961	13	"	"	"	26	"
"	"	20	"	"	80	"	1961	9	"	"	"	11	"
"	"	43	"	"	70	"	1962	15	"	"	"	28	"

DEATH RATE:-

				1959	1960	1961	1962
Raunds Urban District - Crude	...	...		13.24	12.0	12.7	13.88
		Standard	...	11.12	10.3	10.53	11.8
England and Wales	...	...	...	11.6	11.5	12.0	11.9
Administrative County	...	...	...	10.77	10.88	11.18	
Comparability Factor	1958	=	0.85				
"	"	1959	=	0.84			
"	"	1960	=	0.86			
"	"	1961	=	0.83			
"	"	1962	=	0.85			

The total Death returns of a public health district are made up of (1) Residents who die in the district and (2) Residents who die outside the district and their death transferred inwardly to the home district. Below are two tables for periods of 10 years each, (1) After the National Health Service Act and (2) Before the inception of the Act. Although the figures involved are small there is consistent evidence that people are living longer and also that the number of inwardly transferable deaths is increasing in proportion to the total deaths. Most of these inward transfers are of elderly people dying in institutions outside the district. This increase in the proportion of transferable deaths suggests that the family as the basis of social life is giving way to that of the community. The old people are without doubt well treated in the State institutions but nevertheless there is a severance of a link.

Year	Total Deaths	After N.H.S.			Inward Transfers	Rate	Year	Total Deaths	Before N.H.S.			Inward Transfers	Rate
		No. over 70	Rato						No. over 65	Rato			
1953	41	26	63%		16	39%	1916	48	18	37%		7	16%
1954	44	30	70%		19	43%	1917	41	18	44%		4	10%
1955	81	45	60%		23	28%	1918	54	17	31%		7	13%
1956	56	39	70%		24	43%	1919	40	26	50%		5	12.5%
1957	52	33	63%		12	23%	1920	45	22	50%		8	18%
1958	52	34	65%		20	39%	1921	39	21	54%		4	10%
1959	62	34	55%		17	28%	1922	34	12	35%		0	0%
1960	56	30	54%		18	32%	1923	46	20	44%		4	9%
1961	58	39	67%		23	40%	1924	41	18	44%		7	17%
1962	64	43	67%		32	50%	1925	32	14	44%		11	30%

It is to be noted that from 1953 the number is over 70 years and from 1916 the number is over 65 years. The expectation of life is distinctly better from 1953 and this table also shows distinctly more inward transfers.

IMMUNISATION 1962

Smallpox Vaccination

	Under 1.	1.	2 - 4	5 - 14	15 or over	Total
Primary	25	2	29	134	192	382
Re-vaccination	-	-	-	11	65	76

Poliomyelitis Vaccination

Under 1.	1.	2.	3.	4.	5-9	10-14	Total.	15 and over	Third Injections	Fourth Injections
-	11	2	-	1	3	-	17	11	62	32

Diphtheria Immunisation

	Under 1.	1.	2.	3.	4.	5-9	10-14	Total	Booster
Diphtheria Immunisation only	-	-	-	-	-	-	-	-	-
Combined Dip/Whoop Triple	28	3	8	1	1	1	-	42	13
Total Diphtheria Immunisations	28	3	8	1	1	1	-	42	13
Whooping Cough only	-	-	-	-	-	-	-	-	-

Number of Children who have completed a full Course of Diphtheria Immunisation

Age at 31.12.62 i.e. Born in year	Under 1. 1962	1. 1961	2. 1960	3. 1959	4. 1958	5-9 1953- 1957	10-14 1948- 1952	Total Under 15
Number Immunised	6	42	43	47	53	255	224	670

Scarlet Fever

2 cases were notified of a very mild type. This disease is now generally so mild that a diagnosis can be difficult.

Erysipelas

There were no notifications.

Pneumonia

One case was notified.

Typhoid and Paratyphoid

There were no notifications.

Cerebro-Spinal Fever

There were no notifications.

Measles

There were 29 notifications. These cases of measles were at the same time as an epidemic of Rubella.

Whooping Cough

There were no notifications.

Acute Poliomyelitis and Polio-encephalitis

There were no notifications

Enteric Fever

There were no notifications.

<u>Diphtheria Immunization</u>									
Number of Children who have completed a full course of Diphtheria Immunization									
Age at 31.12.62	Under 1	1	2	3	4	5-9	10-14	Total	Booster
1.0. Born in year	1962	1961	1960	1959	1958	1957-1958	1948-1955	Under 15	Total
Number Immunized	6	42	43	47	51	222	224	670	
<u>Whooping Cough</u>									
Number of Children who have completed a full course of Whooping Cough Immunization									
Age at 31.12.62	Under 1	1	2	3	4	5-9	10-14	Total	
1.0. Born in year	1962	1961	1960	1959	1958	1957-1958	1948-1955	Under 15	Total
Number Immunized	6	42	43	47	51	222	224	670	
<u>Scarlet Fever</u>									
Number of Children who have completed a full course of Scarlet Fever Immunization									
Age at 31.12.62	Under 1	1	2	3	4	5-9	10-14	Total	
1.0. Born in year	1962	1961	1960	1959	1958	1957-1958	1948-1955	Under 15	Total
Number Immunized	6	42	43	47	51	222	224	670	

2 cases were notified of a very mild type. This disease is now generally so mild that a diagnosis can be difficult.

Measles

There were no notifications.

Parotitis

One case was notified.

Typhoid and Paratyphoid

There were no notifications.

Cerebro-Spinal Fever

There were no notifications.

Meningitis

There were 29 notifications. These cases of meningitis were of the same type as an epidemic of Rubella.

Whooping Cough

There were no notifications.

Acute Polio-myelitis and Polio-encephalitis

There were no notifications.

Enteric Fever

There were no notifications.

Enteric Fever

The last case of this disease in the district was in 1955 and this was contracted out of the district. The virtual disappearance of this disease in this country was due to the substitution of public water supplies for private wells. Any water supply that is not properly protected and frequently analysed cannot be safe. Other factors are the proper control of workers engaged in the preparation of food and drink and also the proper disposal of sewage.

The history of the disease in Raunds:-

1886	-	Serious outbreak
1889	-	60 cases
1890	-	40 "
1892	-	5 "
1893	-	7 "
1894	-	12 "
1895	-	153 "
1896	-	13 "
1897	-	2 "
1898	-	7 "
1899	-	27 "
1900	-	30 "
1901	-	155 "
1901 to		
1912	-	11 "
1918 to		
1940	-	10 "

Food Poisoning

There were no notifications.

Influenza

There were no notifications.

Puerperal Pyrexia

No case was notified.

Tuberculosis

One case of bone tuberculosis was notified in 1962. There were no cases of Pulmonary Tuberculosis.

Tuberculosis - Number on Register

The number of cases of Tuberculosis on the Register during the past ten years was as follows:-

					<u>Respiratory</u>	<u>Non-respiratory</u>
31st December, 1953	...	...	...	24	5
31st December, 1954	...	...	...	29	7
31st December, 1955	...	...	...	22	5
31st December, 1956	...	...	...	22	5
31st December, 1957	...	...	...	24	6
31st December, 1958	...	...	...	18	4
31st December, 1959	...	...	...	15	4
31st December, 1960	...	...	...	11	5
31st December, 1961	...	...	...	10	4
31st December, 1962	...	...	...	9	4

Polio

The last case of this disease in the district was in 1955 and this was contracted out of the district. The virtual disappearance of this disease in this country was due to the substitution of public water supplies for private wells. Any water supply that is not properly protected and frequently analyzed cannot be safe. Other factors are the proper control of persons engaged in the preparation of food and drink and also the proper disposal of sewage.

The history of the disease in Honduras:-

1886	-	Barlow outbreak
1889	-	60 cases
1890	-	40 "
1892	-	5 "
1893	-	7 "
1894	-	12 "
1895	-	123 "
1896	-	13 "
1897	-	2 "
1898	-	7 "
1899	-	27 "
1900	-	30 "
1901	-	155 "
1904 to	-	
1912	-	11 "
1918 to	-	
1930	-	10 "

Food Poisoning

There were no notifications.

Intoxication

There were no notifications.

Pharyngeal Erythema

No cases were notified.

Tuberculosis

One case of bone tuberculosis was notified in 1925. There were no cases of pulmonary tuberculosis.

Tuberculosis - Number on Register

The number of cases of tuberculosis on the Register during the past ten years was as follows:-

Year	Male	Female	Total
1923	24	...	...
1924	29	...	...
1925	22	...	...
1926	22	...	...
1927	24	...	...
1928	18	...	...
1929	12	...	...
1930	11	...	...
1931	10	...	...
1932	9	...	...

Like Enteric Fever, Tuberculosis is on its way out, due to improved social conditions and specific treatment and the abolition of the disease in milk cows. The following report may be of historic interest.

Report to Raunds Urban District Council on the
Prevalence of Tuberculosis in the Boot and
Shoe Industry, 21/7/24.

General Statement. So far as statistics are available for England and Wales, that is from the decennial period 1851-60 to the decennial period 1901-10, there has been a progressive decline in the death-rate from tuberculosis. This decrease is noticeable at all ages, but is most marked at the ages between 20-25 years. Among males the decline dates from the period 1881-90, while among females it became evident in the previous decennium 1871-1880. The same statistics also show that there is considerable variation in the age incidence of deaths from tuberculosis in the various counties of England and Wales. In some counties the greatest death rate is at the ages 20-25, in others at 45-51, and again in others at the ages 55-65 years. A peculiar point is that early phthisis is most common in seaboard and agricultural counties. The boot and shoe trade in Northampton and Leicester is characterised by the "early" phthisis type, while the boot and shoe trade in London, on the other hand, shows the "late" phthisis type. The factors contributing to the general decline in the phthisis death-rate are many, but industrially they are the various Factory Acts, less hours of labour and higher wages.

Boot and Shoe Industry. Machinery was first introduced in the years 1857-60. Statistics from 80 factories show that of the whole staff 18 per cent are engaged in clicking, 30 per cent in machinery, 10 per cent in press room, 20 per cent in making up, 17 per cent in finishing, and 5 per cent in shoe room and warehouse. At the census of 1911, 169,171 males and 44,523 females in England and Wales were engaged in the boot, shoe, patten and clog making industries.

The figures for various occupations, which have become available since 1890, show an undoubted excess of deaths from Tuberculosis in the boot and shoe industry. In deaths from all causes among boot and shoe operatives for the years 1890-92 there is an increase of 21.6 per cent over the mean annual death-rate for all occupied males in England and Wales, whereas from tuberculosis the increase is 37.3 per cent. In 1900-1902 the relative figures were 20.4 per cent and 51.5 per cent; in 1910-12, 36.6 per cent and 64 per cent. So you see that while there is a small increase in the death-rate from all causes among boot and shoe operatives, there is a marked increase in deaths from tuberculosis.

Statistics also show generally that if there is a high mortality from phthisis in any industry, the percentage which deaths from phthisis bears to deaths from all causes in that industry is also high. Below is a small table for the years 1900-1902 which shows the percentage which deaths from phthisis bore to the total number of deaths among occupied and retired males divided according to age groups (1) in England and Wales, (2) in the boot and shoe industry.

	15	20	25	35	45	55	65 years
England and Wales	22.5	35.4	34	26.6	17	7.3	1.4
Boot & Shoe Industry	38.8	56.8	49.4	44.5	24	9.4	2.0

Like Enteric Fever, Tuberculosis is on its way out, due to improved social conditions and specific treatment and the abolition of the disease in milk cows. The following report may be of historic interest.

Report to London Hygiene Medical Council on the
Prevalence of Tuberculosis in the Foot and
Shoe Industry, 1917-22.

General Statement. So far as statistics are available for England and Wales, that is from the decennial period 1871-80 to the decennial period 1901-10, there has been a progressive decline in the death-rate from tuberculosis. This decline is noticeable at all ages, but is most marked at the ages between 20-25 years. Among many cases the decline dates from the period 1881-90, while among females it becomes evident in the previous decennium 1871-1880. The same statistics also show that there is considerable variation in the age incidence of deaths from tuberculosis in the various counties of England and Wales. In some counties the greatest death rate is at the ages 20-25, in others at 45-55, and again in others at the ages 75-85 years. A peculiar point is that early phthisis is most common in westward and agricultural counties. The foot and shoe trade in Northampton and Leicester is characterized by the "early" phthisis type, while the boot and shoe trade in London, on the other hand, shows the "late" phthisis type. The factors contributing to the general decline in the phthisis death-rate are many, but industrially they are the various Factory Acts, less hours of labour and higher wages.

Foot and Shoe Industry. Machinery was first introduced in the years 1857-60. Statistics from 60 factories show that of the whole staff 18 per cent are engaged in stitching, 30 per cent in machinery, 16 per cent in press room, 20 per cent in making up, 17 per cent in finishing, and 5 per cent in shoe room and warehouse. At the census of 1911, 169,171 males and 44,523 females in England and Wales were engaged in the foot, shoe, pattern and shoe making industries.

The figures for various occupations, which have become available since 1890, show an undoubted excess of deaths from tuberculosis in the foot and shoe industry. In deaths from all causes among foot and shoe operatives for the years 1890-92 there is an increase of 21.6 per cent over the mean annual death-rate for all occupied males in England and Wales, whereas from 1900-1902 the increase is 17.5 per cent. In 1900-1902 the relative figures were 60.4 per cent and 51.5 per cent; in 1910-12, 50.6 per cent and 44 per cent. So you see that while there is a small increase in the death-rate from all causes among foot and shoe operatives, there is a marked increase in deaths from tuberculosis.

Statistics also show generally that if there is a high mortality from phthisis in any industry, the percentage which deaths from phthisis bear to deaths from all causes is that industry is also high. Below is a small table for the years 1900-1902 which shows the percentage which deaths from phthisis bear to the total number of deaths among occupied and retired males divided according to age groups (1) in England and Wales, (2) in the foot and shoe industry.

	15	20	25	35	45	55	65 years
England and Wales	22.5	32.4	34	26.6	17	7.3	1.4
Foot & Shoe Industry	38.8	36.8	49.4	44.5	24	9.4	2.0

These figures show a marked preponderance of phthisis among boot and shoe operatives, and also that the greatest mortality from this cause among them is at the ages 20-40 years.

A consideration of comparative mortality figures for the years 1900-2 is interesting.

		Phthisis	Other Lung Diseases	Accident	Alcoholism
All occupied males	...	100	100	100	100
Shoemakers	... ..	145	84	38	77
Tin miners	... ..	436	419	92	28

This table shows that although there is an excess of phthisis among boot and shoe workers, there is less than the average of other lung diseases. Tin-miners, who are specially susceptible to phthisis on account of the inhalation of dust, show an excess of other lung diseases as well. These figures suggest that the inhalation of dust is not a factor in the high tuberculosis death rate in the boot and shoe industry. In both shoe-making and tin-mining there is less than the average number of deaths from alcoholism and from accident, which may be taken as predisposing causes of phthisis - both of them acting by causing poverty and consequent malnutrition.

Statistics for the towns of Northampton and Leicester show that the average mortality from phthisis in the boot and shoe industry of these towns is higher than the average mortality from phthisis prevailing for the whole population of each of these towns. In consequence of this the phthisis death rate for Northampton and for Leicester is higher than for the whole country. In other words, it is the boot and shoe industry which causes Northampton and Leicester to have high phthisis death rates.

With regard to the various departments of the shoe industry, below is a table of percentages of phthisis deaths to total deaths at various ages.

		20-25	25-35	35-45	45-55	55-65	65 and upwards	At all ages
Clicking	... ..	66.7	66.0	48.5	31.4	31.4	3.2	44
Lasting & making up		53.3	65.0	43.9	23.2	23.2	6.2	32
Finishing	... ..	59.7	55.5	46.9	28.5	28.5	2.7	32
All other departments		60.8	55.1	35.3	11.0	11.0	.6	11.5

These figures were obtained by a consideration of 356 total deaths in clicking, 779 total deaths in lasting and making up, 780 total deaths in finishing, and 1033 in all other departments. Although not based on very large figures, the results are sufficient to indicate that clickers are by far the most susceptible to tuberculosis.

Consideration of possible causes of high Phthisis death-rate in the Boot and Shoe Industry.

Clicking Department. The average clicker is stooping and round-shouldered and generally weak in the chest. His physical condition may be explained by the attitude he assumes at work. In leaning forward at his work he compresses his abdomen and lower ribs against the bench so that diaphragmatic breathing is interfered with. Besides, in the action of steadying the template, the shoulder girdle is fixed, and this interferes with the lifting of the ribs during inspiration. The act of breathing is faulty, leading to faulty aeration of the lungs and ultimate permanent change in the shape of the chest. The occupation is more or less

sedentary and because of the lack of exercise cold is readily felt so that all windows are closed with consequent poor ventilation of the clicking room.

In almost all factories the air space in the clicking room is very much in excess of the 250 cub. ft. required under the Factory Act often exceeding 800-900 cub. ft. On account of the good light necessary the clicking department is usually on the top floor, the healthiest part of the factory.

Clicking is peculiar in that the mortality from Phthisis has not diminished in anything like the proportion in which it has diminished in other departments of the shoe trade. Although clicking machines may now be coming more into use, they have not displaced the hand-clicker as other machinery has the hand-workers in other departments. Speaking generally the incidence of phthisis in the shoe trade has diminished with the introduction of machinery.

Machining Room. In this department the females sit in long benches facing each other. The inhalation of infection from saliva is very likely.

Press Room. Here there is considerable physical effort, with the result that the workman can keep the windows open and ensure good ventilation. The phthisis death rate in the press room is one of the lowest in the shoe trade.

Lasting Room. The posture at machinery is erect, and the workman is never so cramped as the hand-laster. The windows are generally dirty. The incidence of phthisis among lasters has diminished since the introduction of machinery.

Finishing Room. Here there is less physical effort than in the lasting room. The windows are usually opaque, and ventilation is usually poor, with numerous gas jets adding to the impurities in the atmosphere of the room.

The factors leading to a high death rate from phthisis in the boot and shoe industry may be summarised as:-

1. Cramped position at work. Tuberculosis has diminished among lasters since the introduction of machinery. It has not diminished in the clicking room where machinery has not been introduced.

2. Lack of light. Sunlight is the best disinfectant, readily killing the tubercle bacillus. The windows of shoe factories are usually dirty, necessitating artificial illumination.

3. Sedentary occupation. Cold is readily felt by people in sedentary occupations. The result is the blocking of air inlets and outlets, with resultant poor ventilation.

4. Proximity of work-people to one another is a possible factor in most departments, and especially in the machining room.

5. Material. The continuous inhalation of the volatile substances used in the preparation of the leather may have a deleterious effect on the lungs. The leather does not carry the tubercle bacillus as this is killed in the process of tanning.

6. Overcrowding, as we have seen, is not a factor in the clicking rooms.

sedentary and because of the lack of exercise cold is readily felt so that all windows are closed with consequent poor ventilation of the clicking room.

In almost all factories the air space in the clicking room is very much in excess of the 750 cu. ft. required under the Factory Act often exceeding 800-900 cu. ft. On account of the good light necessary the clicking department is usually on the top floor, the best part of the factory.

Clicking is peculiar in that the humidity from the machines has not diminished in anything like the proportion in which it has diminished in other departments of the shoe trade. Although clicking machines may now be coming more into use, they have not displaced the hand-clicker as other machinery has the workmen in other departments. Speaking generally the incidence of phthisis in the shoe trade has diminished with the introduction of machinery.

Machine Room. In this department the females sit in long benches facing each other. The incidence of infection from saliva is very likely.

Press Room. Here there is considerable physical effort, with the result that the workmen can keep the windows open and ensure good ventilation. The phthisis death rate in the press room is one of the lowest in the shoe trade.

Leather Room. The posture at machinery is erect, and the workmen are never so cramped as the hand-leather. The windows are generally dirty. The incidence of phthisis among leatherers has diminished since the introduction of machinery.

Finishing Room. Here there is less physical effort than in the pressing room. The windows are usually open, and ventilation is usually good, with numerous gas jets adding to the impurities in the atmosphere of the room.

The factory leading to a high death rate from phthisis in the boot and shoe industry may be summarized as:-

1. Cramped position at work. Tuberculosis has diminished among leather since the introduction of machinery. It has not diminished in the clicking room where machinery has not been introduced.

2. Lack of light. Sunlight is the best disinfectant, readily killing the tubercle bacillus. The windows of shoe factories are usually dirty, necessitating artificial illumination.

3. Sedentary occupation. Cold is readily felt by people in sedentary occupations. The result is the blocking of air intake and outtake, with resultant poor ventilation.

4. Proximity of work-people to one another in a possible factor in most departments, and especially in the machine room.

5. Humidity. The continuous inhalation of the volatile substances used in the preparation of the leather may have a deleterious effect on the lungs. The leather does not carry the tubercle bacillus as this is killed in the process of tanning.

6. Overcrowding. As we have seen, is not a factor in the clicking rooms.

7. Predisposition of individuals is not a likely cause, for after all the death rate from phthisis in the boot and shoe industry in Leicester and Northampton is higher than the corresponding death rate for the rest of the population of these towns. Nevertheless, predisposition is an important personal factor.

8. Housing is just as good as in other industrial areas.

9. Poverty is not a factor, as wages are as good in the shoe trade as in other trades with a low phthisis death rate.

10. Alcoholism is not a factor, for we have seen that the death rate from alcoholism is below the average.

11. Dust. If dust were an important factor we should expect a death rate above the average from other diseases of the lungs as well as from phthisis. We have seen that in the boot and shoe trade the death rate from "other diseases of the lungs" is below the average. But all floors should be well damped before sweeping.

A. McINNES, M.O.H.

Water Supply

Raunds is supplied with water by the Nene and Ouse Water Board and the following is an analysis of a sample of water from the Raunds Meadows supply:-

Sample of Water labelled "Treated Water, Cartrill Street, Raunds" received on the 13th March, 1962 from Dr. A. McInnes, Medical Officer of Health, Raunds Urban District Council.

Physical Characters	...	...	...	Good
Reaction	...	...	...	pH 7.1
<u>The Sample contained:-</u>				<u>Parts per 100,000</u>
Chloride	...	...	...	6.7
Ammonia (free and saline)	...	...	...	absent
Ammonia (albuminoid)	...	...	...	0.0096
Oxygen absorbed in 3 hours at 37°	...	...	...	0.0758
Nitrate (as N)	...	...	...	0.30
Nitrite	...	...	...	absent
Poisonous Metals	...	...	...	absent
Total Hardness	...	...	...	39.3

BACTERIOLOGICAL EXAMINATION

Coliform organisms absent in 100 mlg.
 No. of microorganisms per ml at 37°C = nil
 No. of microorganisms per ml at 21°C = 6

MICROSCOPICAL EXAMINATION OF DEPOSIT

None

R E M A R K S

The results obtained on the analysis of this sample do not show any evidences of pollution with harmful organic or inorganic matter.

I am of opinion that this water is fit for drinking purposes.

S. GREENBURGH

Public Analyst.

19th March, 1962.

Stanwick receives most of its water supply from Woodford source. An analysis of a sample from this supply is given herewith:-

Sample of Water labelled "Treated Water from Ringstead Source (taken at Chelveston)" received on the 13th March, 1962, from Mr. B. Lewis, Oundle and Thrapston Rural District Council.

Physical Characters	...	...	...	...	Good
Reaction	...	...	...	...	pH 7.0

The Sample contained:-

Parts per 100,000

Chloride	...	...	...	...	5.1
Ammonia (free and saline)	...	...	...	...	0.0032
Ammonia (albuminoid)	...	...	...	...	0.0156
Oxygen absorbed in 3 hrs. at 37°C	...	...	...	...	0.1419
Nitrates (expressed as Nitrogen)	...	...	...	...	0.30
Nitrites	...	...	...	...	faint trace
Poisonous Metals	...	...	...	...	absent
Total Hardness	...	...	...	...	37.3

BACTERIOLOGICAL EXAMINATION

Coliform organisms absent in 100 mls.

No. of microorganisms per ml developing at 37°C = 7 + mould

No. of microorganisms per ml developing at 21°C = 9 + mould

MICROSCOPICAL EXAMINATION OF DEPOSIT

None.

I N F E R E N C E

The results obtained on the analysis of this sample indicate a hard water containing an appreciable amount of organic matter though containing relatively few bacteria.

I am of opinion that this water, as evidenced by the sample, is fit for drinking purposes. It is to be recommended however that the supply be kept under close observation.

S. GREENBURGH

Public Analyst.

19th March, 1962.

Fluoridation of Water Supplies

The Council accepted the principle of Fluoridation of water supplies up to one part per million.

Extracts from Old Reports

Schools

In 1910 a public meeting decided that the existing schools were quite inadequate for the children. This meeting thought that provision should be made for 700 children, but the County Education Committee decided to make provision for 450 children. A site at the top of Hill Street was chosen. The new school was opened in 1914.

Housing

At the census of 1911 there were 910 houses in the district of which 56 had no tenants. It was believed that housing was more than adequate.

1919 Report

The total number of houses in the area was 914 of which 860 were inspected. Those houses were classified:-

A Scullery, 1 Living-room, 2 Bedrooms	-	166
A Scullery, 1 Living-room, 3 Bedrooms	-	41
A Scullery, 2 Living-rooms, 2 Bedrooms	-	33
A Scullery, 2 Living-rooms, 3 Bedrooms	-	348
A Scullery, 2 Living-rooms, 4 Bedrooms	-	41

The remaining houses, being larger, did not come under the survey. More than 231 satisfied the Ministry's standard as to size. There were 32 houses with more than 2 persons per room and the number of people in these 32 houses was 260.

Thirty houses were unfit for human habitation and 128 badly needed repairs. Two houses were closed after the issue of Closing Orders.

Water

The 1908 report said that the water scheme was proceeding satisfactorily. In 1909 the reservoir was ready for covering and the pipes nearly all laid. Chlorination and filtration were applied to the water supply in 1941.

Sewerage

At this time there were over 500 slop closets in 850 houses. Sewage treatment was by sedimentation and broad irrigation. But in view of the new water supply the Surveyor advised having filters for sewage treatment. In 1910 125 pail closets were converted and over 100 slop closets converted to cistern flushing. In 1912 there were only 39 pail closets and 12 cesspools.

New Cemetery, 1915

Ground for a new cemetery was bought by a loan of £305 for 50 years and a loan of £178 for 21 years for laying out and fencing. In view of the cost of fencing the Council decided to hold the work in abeyance until prices became nearer normal.

A. McINNES

Medical Officer of Health.

The total number of houses in the Province 914 of which 800 were inspected. These houses were classified:-

A Sanitary, 1 living-room, 2 bedrooms	-	166
A Sanitary, 1 living-room, 3 bedrooms	-	41
A Sanitary, 2 living-rooms, 2 bedrooms	-	33
A Sanitary, 2 living-rooms, 3 bedrooms	-	218
A Sanitary, 2 living-rooms, 4 bedrooms	-	41

The remaining houses, being larger, did not come under the survey. More than 231 satisfied the Ministry's standard as to size. There were 32 houses with more than 2 persons per room and the number of people in these 32 houses was 200.

Thirty houses were unfit for human habitation and 128 badly needed repairs. Two houses were closed after the issue of Closing Orders.

Water

The 1908 report said that the water scheme was proceeding satisfactorily. In 1909 the reservoir was ready for covering and the pipes nearly all laid. Distribution and filtration were applied to the water supply in 1911.

Sanitation

At this time there were over 500 also closets in 150 houses. Sewage treatment was by sedimentation and broad irrigation. But in view of the new water supply the Surveyor advised having filters for sewage treatment. In 1910 125 half closets were converted and over 100 also closets converted to closet flushing. In 1912 there were only 39 half closets and 15 cesspools.

New Cemetery, 1912

Ground for a new cemetery was bought by a loan of £300 for 50 years and a loan of £175 for 21 years for laying out and fencing. In view of the cost of fencing the Council decided to hold the work in abeyance until prices became nearer normal.

A. McIVER

Medical Officer of Health.

CAUSES OF DEATH

Causes of Death	1959			1960			1961			1962		
	Ttl	M	F	Ttl	M	F	Ttl	M	F	Ttl	M	F
1. Tuberculosis, respiratory ...	0	0	0	0	0	0	0	0	0	0	0	0
2. Tuberculosis, other ...	0	0	0	0	0	0	0	0	0	0	0	0
3. Syphilitic diseases ...	0	0	0	0	0	0	0	0	0	0	0	0
4. Diphtheria ...	0	0	0	0	0	0	0	0	0	0	0	0
5. Whooping Cough ...	0	0	0	0	0	0	0	0	0	0	0	0
6. Meningeal Infections ...	0	0	0	0	0	0	0	0	0	0	0	0
7. Acute Poliomyelitis ...	0	0	0	0	0	0	0	0	0	0	0	0
8. Measles ...	0	0	0	0	0	0	0	0	0	0	0	0
9. Other Infective and Parasitic diseases ...	1	1	0	0	0	0	1	0	1	0	0	0
10. Malignant Neoplasm, Stomach	2	1	1	3	3	0	2	1	1	1	0	1
11. " " Bronchus	1	1	0	2	2	0	1	0	1	3	3	0
12. " " Breast	0	0	0	1	0	1	1	0	1	1	0	1
13. " " Uterus	0	0	0	3	0	3	0	0	0	0	0	0
14. Other Malignant and Lymphatic Neoplasms ...	6	3	3	1	1	0	8	3	5	6	3	3
15. Leukaemia, aleukaemia ...	0	0	0	0	0	0	0	0	0	0	0	0
16. Diabetes ...	1	1	0	0	0	0	0	0	0	1	0	1
17. Vascular lesions, nervous system	6	2	4	12	8	4	6	1	5	9	5	4
18. Coronary disease, angina ...	15	7	8	7	4	3	17	8	9	11	4	7
19. Hypertension with Heart disease	3	1	2	0	0	0	1	1	0	0	0	0
20. Other Heart Disease ...	7	2	5	9	5	4	3	1	2	13	2	11
21. Other Circulatory Disease ...	4	0	4	1	0	1	2	2	0	1	1	0
22. Influenza ...	0	0	0	0	0	0	2	1	1	1	0	1
23. Pneumonia ...	1	1	0	2	1	1	2	0	2	0	0	0
24. Bronchitis ...	2	2	0	5	5	0	0	0	0	3	2	1
25. Other Diseases of Respiratory system ...	1	1	0	0	0	0	1	1	0	0	0	0
26. Ulcer of Stomach and Duodenum	2	2	0	0	0	0	0	0	0	1	1	0
27. Gastritis, Enteritis, Diarrhoea	0	0	0	0	0	0	0	0	0	0	0	0
28. Nephritis and Nephrosis ...	1	1	0	0	0	0	0	0	0	0	0	0
29. Hyperplasia of Prostate ...	1	1	0	0	0	0	0	0	0	1	1	0
30. Pregnancy, Childbirth, Abortion	0	0	0	0	0	0	0	0	0	0	0	0
31. Congenital malformations ...	0	0	0	0	0	0	0	0	0	0	0	0
32. Other defined and ill defined disease ...	8	3	5	10	6	4	6	1	5	8	4	4
33. Motor Vehicle accidents ...	0	0	0	0	0	0	3	2	1	0	0	0
34. All other accidents ...	0	0	0	0	0	0	1	0	1	4	1	3
35. Suicide ...	0	0	0	0	0	0	1	1	0	0	0	0
36. Homicide and Operations of War	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL ALL CAUSES ...	62	30	32	56	35	21	58	23	35	64	27	37

	1960	<u>Raunds</u>		1962	<u>Administrative County</u>	
		<u>% of Total Deaths</u>			<u>% of Total Deaths</u>	
		1960	1961		1961	
Tuberculosis	0.0 (0.68)	0.0 (0.63)	0.0 (0.5)			
Circulatory Disease	51.78 (54.3)	50.0 (53.3)	53.0 (52.3)		50.8	
Respiratory "	12.5 (9.0)	8.5 (12.49)	4.7 (12.6)		9.9	
Cancer	17.8 (19.6)	20.7 (19.0)	17.1 (19.03)		17.6	
Lung Cancer	3.57 (4.36)	1.7 (4.3)	4.7 (4.43)			

Figures in brackets are equivalent percentages for England and Wales.

ILLEGITIMATE BIRTHS

Table No. 2.

RATES PER 1,000 TOTAL BIRTHS

YEAR	RAUNDS	CUNDLE & THRAPSTON	COUNTY
1935	00.0	36.0	36.0
1936	55.0	32.0	34.0
1937	46.0	34.6	36.0
1938	16.0	32.0	37.0
1939	54.0	45.6	37.0
1940	46.0	37.0	36.0
1941	17.0	79.4	44.0
1942	55.0	52.4	54.0
1943	84.0	64.3	69.0
1944	79.0	82.6	83.0
1945	20.0	129.2	109.0
1946	111.0	45.0	68.0
1947	20.0	60.0	55.0
1948	65.0	54.0	49.0
1949	15.0	62.9	46.0
1950	57.0	84.6	46.0
1951	60.0	80.0	50.0
1952	73.0	39.9	44.0
1953	00.0	40.34	41.0
1954	55.0	65.0	51.0
1955	16.0	51.3	45.0
1956	67.5	74.7	44.0
1957	61.0	60.8	41.0
1958	50.0	52.6	38.0
1959	33.3	43.0	41.0
1960	00.0	50.0	41.0
1961	30.0	41.6	51.0
1962	16.4	61.6	49.7

Corresponding rates for Raunds since 1908 were:-

1908	33.0	1917	86.0	1926	36.0
1909	10.9	1918	16.0	1927	15.0
1910	00.0	1919	70.0	1928	53.0
1911	40.0	1920	37.0	1929	20.0
1912	25.0	1921	50.0	1930	00.0
1913	12.5	1922	54.0	1931	00.0
1914	51.7	1923	20.0	1932	00.0
1915	25.0	1924	50.0	1933	20.0
1916	37.5	1925	00.0	1934	20.0

FORMATION OF THE DISTRICT ON 1st APRIL, 1935.

DEATHS

Estimated Population	Births			All ages			Under 1		Pulm. Tubercu.		Non-Pulm. Tubercu.		Cancer	
	No.	Rate per 1000 Pop.		No.	Rate per 1000 Pop.		No.	Rate per 1000 Births	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.
1935	45	10.6	4440	40	8.5		1	22.0	1	0.22	0	0.00	6	1.4
1936	62	14.0	4425	65	13.37		3	48.0	4	0.90	0	0.00	12	2.7
1937	65	14.7	4423	67	13.7		1	15.0	4	0.90	0	0.00	12	2.7
1938	63	14.2	4427	49	10.07		1	16.0	4	0.90	0	0.00	5	1.1
1939	55	12.3	4443	45	9.2		3	59.0	0	0.00	0	0.00	7	1.6
1940	65	14.21	4562	55	10.3		2	30.0	1	0.22	0	0.00	2	0.4
1941	58	10.7	5392	62	11.5		3	51.0	2	0.37	1	0.18	7	1.3
1942	73	14.1	5170	48	9.8		0	0.0	4	0.77	0	0.00	9	1.7
1943	71	14.7	4833	56	11.6		6	84.0	2	0.41	0	0.00	9	1.8
1944	85	20.7	4256	61	14.3		3	36.0	1	0.23	1	0.23	12	2.8
1945	80	18.9	4222	71	16.8		4	50.0	2	0.47	0	0.00	9	2.1
1946	89	20.4	4356	53	12.16		5	56.0	1	0.23	0	0.00	7	1.6
1947	98	22.2	4412	58	13.14		6	61.0	1	0.22	0	0.00	10	2.6
1948	77	17.18	4482	65	14.5		5	65.0	1	0.22	0	0.00	8	1.8
1949	65	14.3	4543	65	11.8		3	46.0	0	0.00	0	0.00	8	1.8
1950	53	12.8	4584	64	11.6		3	57.0	0	0.00	0	0.00	6	1.3
1951	67	16.0	4579	62	11.1		1	15.0	2	0.43	0	0.00	10	2.2
1952	55	13.1	4521	75	13.6		2	36.0	1	0.22	0	0.00	10	2.2
1953	66	16.5	4663	41	7.2		2	30.0	0	0.00	0	0.00	6	1.3
1954	73	18.13	4690	44	7.41		2	27.3	0	0.00	0	0.00	3	0.6
1955	62	15.46	4690	81	13.6		2	27.3	1	0.21	0	0.00	17	3.6
1956	74	18.5	4680	56	10.05		1	13.5	1	0.21	0	0.00	11	2.35
1957	82	20.41	4660	52	9.48		2	24.4	0	0.00	0	0.00	10	2.14
1958	60	14.19	4650	52	9.5		0	0.0	1	0.21	0	0.00	8	1.72
1959	60	14.87	4680	62	11.12		1	16.6	0	0.00	0	0.00	9	1.92
1960	56	13.92	4670	56	10.3		1	17.86	0	0.00	0	0.00	10	2.14
1961	67	17.0	4570	58	10.53		3	46.0	0	0.00	0	0.00	12	2.62
1962	61	15.3	4610	64	11.8		1	16.1	0	0.00	0	0.00	11	2.38
TOTAL FOR 28 YEARS :-	1887			1627			67		34		2		246	
1935-62														
Raunds Urban District														

Birth Rate is Standard Rate from 1951 onwards.
Death Rate is Standard Rate except for 1942-1948, both inclusive.

A TABLE OF BIRTH RATES AND DEATH RATES FROM SPECIAL CAUSES 1899 - 1934

Table No. 4

	Estimated Population	Births			All ages			Under 1			Pulm. Tubercu			Non-Pulm. Tubercu.			Cancer		
		Births			All ages			Under 1			Pulm. Tubercu			Non-Pulm. Tubercu.			Cancer		
		No.	Rate per 1000 Pop.		No.	Rate per 1000 Pop.		No.	Rate per 1000 Births		No.	Rate per 1000 Pop.		No.	Rate per 1000 Pop.		No.	Rate per 1000 Pop.	
1899	...	109	28.6	3811	38	9.9		11	109										
1900	...	123	32.2	3811	42	11.0		10	81										
1901	...	118	30.2	3901	44	11.2		7	59										
1902	...	115	28.5	4031	48	11.9		12	104										
1903	...	109	25.8	4211	45	10.6		14	128										
1904	...	109	24.9	4376	47	10.7		13	119										
1905	...	101	23.0	4381	36	8.2		10	99										
1906	...	103	23.5	4381	42	9.5		8	77.6										
1907	...	99	23.7	4284	47	10.9		9	91										
1908	...	120	27.8	4320	52	12.0		13	108		8	1.85		2	0.46		2	0.46	
1909	...	91	21.6	4320	40	9.2		4	44		6	1.39		2	0.46		5	0.46	
1910	...	78	18.0	4320	47	10.9		8	102		7	1.61		6	1.38		5	1.38	
1911	...	76	19.6	3874	50	12.9		5	65		4	1.03		4	1.03		6	1.03	
1912	...	60	20.6	3874	35	9.0		4	50		3	0.77		2	0.50		2	0.50	
1913	...	81	20.9	3874	51	13.1		7	86		7	1.80		6	1.54		5	1.54	
1914	...	58	14.9	3874	47	12.1		5	86		5	1.30		4	1.05		5	1.05	
1915	...	80	19.7	4081	51	12.5		9	112		2	0.50		4	1.00		5	1.00	
1916	...	80	19.7	4081	48	11.7		7	87		5	1.22		2	0.50		6	0.50	
1917	Births Deaths	62	15.5	4609 3596	41	11.1		2	32		6	1.66		3	0.83		2	0.83	
1918	Births Deaths	62	14.6	4221 3767	54	14.3		3	48		5	1.325		5	1.326		4	1.326	
1919	Births Deaths	57	13.3	4215 4004	40	9.9		2	35		2	0.49		0	0.0		7	0.0	
1920	...	80	19.0	4205	45	10.7		5	62		4	0.936		1	0.234		5	0.234	
1921	...	62	16.2	3818	39	10.2		3	48		2	0.52		1	0.26		2	0.26	
1922	...	55	14.3	3842	34	8.8		3	54		6	1.5		0	0.0		1	0.0	
1923	...	53	13.9	3822	46	12.0		7	134		5	1.3		2	0.52		2	0.52	
1924	...	60	15.6	3824	41	10.7		5	83		3	0.78		2	0.52		6	0.52	
1925	...	53	13.8	3837	32	8.3		1	18		5	1.3		0	0.0		4	0.0	
1926	...	55	14.6	3753	50	13.3		2	36		1	0.26		0	0.0		6	0.0	
1927	...	41	11.1	3690	37	10.0		3	73		1	0.26		0	0.0		0	0.0	

1928	...	...	3715	56	15.0	32	8.6	00	2	0.54	2	0.54	4
1929	...	...	3753	46	12.2	48	12.7	87	5	1.35	1	0.27	3
1930	...	...	3753	41	10.9	34	9.0	00	3	0.798	1	0.266	2
1931	...	...	3687	37	10.0	40	10.8	27	2	0.54	1	0.27	8
1932	...	...	3626	37	10.2	48	13.2	135	1	0.27	0	0.0	7
1933	...	...	3561	46	12.9	48	13.4	44	5	1.4	0	0.0	6
1934	...	...	3617	52	14.3	45	11.3	135	1	0.27	1	0.27	8
TOTAL FOR 36 YEARS :- 1899 - 1934 Raunds Urban District				2685		1568		212		107 in 27 yrs.		50 in 27 yrs.	118 in 27 yrs.

The table below tells its own story, but it would be a delusion to conclude that cancer is on the increase. The apparent increase is due to more exact diagnosis.

	Mortality Under 1 Year		Mortality Pulm.Tubercu.		Mortality Cancer	
	Total No.	Rate per 1000 Births	Total No.	Rate per 1000 Pop.	Total No.	Rate per 1000 Pop.
Raunds Urban District						
1899-1908	107	97.0				
1909-1918	54	72.0	53	1.3	43	
1919-1928	31	54.0	34	0.9	37	
1936-1945	26	38.9	24	0.517	84	
1952-1961	16	24.43	4	0.085	96	
Administrative County						
1936-1945	1560	42.15	1028	0.44		
1952-1961	993	21.63	253	0.09		

Natural Increase of population is Birth numbers - Death numbers which, in 1962, was 61 - 64 = -3. It should be understood that Standard Rates are for comparison with the rest of England and Wales, whereas Crude Rates are the actual rate. From the foregoing Table, Standard Births : Deaths are 15.3 : 11.8, whereas the Crude Rates are as 13.2 : 13.88, which means a reduction in population of 4,610 of 3. The natural increase in the whole of England and Wales for 1962 was 283,111; in 1961 an increase of 252,900 and during the years 1956-1960 an average increase of 215,311. The total population of England and Wales at 30th June, 1962 was estimated to be 46,669,000, made up of 22,651,000 males and 24,018,000 females.

It may be of general interest to know that the total population of 46,669,000 at 30th June, 1962 was according to age groups and sex, made up of:-

	All Ages	0-	5-	15-	25-	35-	45-	55-	65-	75-
Males	22,651	1,942	3,473	3,251	2,980	3,157	3,132	2,568	1,457	691
Females	24,018	1,841	3,303	3,170	2,883	3,182	3,240	2,945	2,136	1,318

These figures are expressed in number of thousands. Evidently the males predominate until between the ages of 25 to 35, after which the females predominate. Over 70 females : males are as 3 : 2; at 80 the rate is 2 : 1.

The groups between the working ages of 15 - 60 years represent 60% of the total; those over 60 represent 17.4% of the total.

The table below tells its own story, but it would be a delusion to conclude that cancer is on the increase. The apparent increase is due to more exact diagnosis.

Rate per 1000 Pop.	Total No.	Mortality Rate		Mortality Rate		Mortality Rate	
		Under 1 Year		Males, Tubercu.		Cancer	
Rate per 1000 Births	Total No.	Rate per 1000	Total No.	Rate per 1000 Pop.	Total No.	Rate per 1000 Pop.	Total No.
1952-1954	16	24.43	4	0.085	43	0.085	43
1936-1945	26	38.9	24	0.517	37	0.517	37
1919-1928	31	54.0	34	0.9	84	0.9	84
1909-1918	54	75.0	53	1.3	96	1.3	96
1899-1908	107	97.0					

Romney Urban District

Administrative County

Natural increase of population is birth numbers - death numbers which in 1952, was 61 - 64 = -3. It should be understood that Standard Rates are for comparison with the rest of England and Wales, whereas Crude Rates are the actual rate. From the foregoing Table, Standard Births : Deaths are 15.3 : 11.8, whereas the Crude Rates are as 13.5 : 11.88, which means a reduction in population of 4,810 of 3. The natural increase in the whole of England and Wales for 1952 was 283,711. In 1951 an increase of 232,900 and during the years 1950-1952 an average increase of 212,311. The total population of England and Wales at 30th June, 1952 was estimated to be 46,600,000, made up of 23,657,000 males and 24,018,000 females.

It may be of general interest to know that the total population of 46,600,000 at 30th June, 1952 was according to age groups and sex, made up of:-

	All Ages									
	15-	15-	15-	15-	15-	15-	15-	15-	15-	15-
Males	23,657	1,542	3,473	3,251	2,980	3,127	3,132	2,568	1,457	891
Females	24,018	1,641	3,303	3,170	2,883	3,182	3,240	2,942	2,136	1,318

These figures are expressed in number of thousands. Evidently the males predominate until between the ages of 25 to 35, after which the females predominate. Over 70 females : males are as 3 : 2; at 60 the ratio is 2 : 1.

The groups between the working ages of 15 - 60 years represent 60% of the total; those over 60 represent 17.5% of the total.



