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COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

1947



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ROTHERHAM:
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COUNTY BOROUGH OF ROTHERHAM

HEALTH COMMITTEE

as at December 31st, 1947.

HIS WORSHIP THE MAYOR

(Mr. C. Bosworth).

Chairman:

Alderman A. BUXTON, J.P.

Vice-Chairman:

Councillor A. R. SHAYLER.

Alderman S. HALL, O.B.E., J.P.

„ F. HARPER, J.P.

„ F. C. WOFINDEN.

Councillor C. DUFFIELD.

„ C. E. GEARY, J.P.

„ F. H. W. GREEN.

Councillor Mrs. F. L. GREEN, J.P.

„ A. LISTER.

„ J. E. MICKLETHWAIT.

„ Mrs. M. H. MOORHOUSE, J.P.

„ A. WALSH.

„ A. WILDE.

JOINT COMMITTEES.

SHEFFIELD, ROTHERHAM AND DISTRICT SMOKE ABATEMENT COMMITTEE.

Alderman F. HARPER, J.P.

Councillor F. DAVIES

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY DEFECTIVE.

Alderman A. BUXTON, J.P.

Alderman F. C. WOFINDEN.

HEALTH OFFICERS OF THE LOCAL AUTHORITY.

(As at December 31st, 1947.)

WILLIAM BARR, M.D., D.Sc., D.P.H.	Medical Officer of Health and Chief School Medical Officer.
M. E. HOCKEN, M.B., Ch.B., D.P.H.	Deputy Medical Officer of Health and Senior School Medical Officer.
T. V. GRIFFITH, M.B. Ch.B., B.A.O.	Medical Superintendent, Municipal General Hospital; Public Vaccinator, North-West Rotherham and Municipal General Hospital; Police Surgeon; District Medical Officer.
A. C. MORRISON, M.D., D.P.H.	Tuberculosis Officer; Medical Superintendent, Oakwood Hall Sanatorium; Medical Superintendent, Isolation Hospital.
GEORGE E. WESTBY	Lay Administrative Officer.
MR. N. FROGGATT	Senior Clerk.
MISS J. CASELDINE	Secretary, Medical Officer of Health.
General Office	Seven Clerks.

CONSULTANT STAFF (part-time).

H. L. CROCKATT, M.B., Ch.B.	Orthopaedics.
GLYN A. DAVIES, F.R.C.S.Ed., M.R.C.O.G., M.B., Ch.B.	Obstetrics.
H. N. GREEN, M.A., M.D., M.Sc.	Hon. Advisor in clinical pathology.
W. J. LYTLE, F.R.C.S., M.B., B.Ch., B.A.O.	Surgery.
H. A. COLE, M.B., Ch.B.	Mental diseases (Honorary).
W. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.Eng.	Ophthalmology.
A. E. NAISH, M.A., M.D., F.R.C.P.	Paediatrics.
C. L. PATTISON, M.B., B.S., M.R.C.S., L.R.C.P.	Surgical tuberculosis.
H. M. PETTY, M.B., Ch.B., D.L.O., R.C.P.S.Eng.	Diseases of ear, nose, and throat.
C. P. BEATTIE, M.A., M.B., D.P.H.	Hon. Advisor in bacteriology.
R. WARNECKE, M.R.C.S., L.R.C.P.	Psychiatry.

PUBLIC ANALYST (part-time).

H. CHILDS, B.Sc., F.R.I.C.	Public Analyst.
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SANITARY INSPECTORS' SECTION.

MR. L. EASTWOOD, M.S.I.A., A.M.Inst.P.C.	Senior Sanitary Inspector.
(1), (2), (4), (5).	
MR. T. W. PEARCE, M.S.I.A. (1), (2), (5).	Deputy Senior Sanitary Inspector.
MR. G. C. HARRISON, M.S.I.A. (1).	District Sanitary Inspector.
MR. S. MASTIN, M.S.I.A. (1), (2).	District Sanitary Inspector.
MR. L. W. LODGE, M.S.I.A. (1), (2).	District Sanitary Inspector.
MR. T. E. SNAPE, M.S.I.A. (1), (2).	District Sanitary Inspector.
MR. D. G. OWENS, M.S.I.A. (1).	District Sanitary Inspector.
MR. G. C. GARNER, M.S.I.A. (1).	District Sanitary Inspector.
MR. J. H. HOARE (3)	Smoke Inspector (by arrangement with the Sheffield, Rotherham and District Smoke Abatement Committee).

Two Disinfectors.

One Ratcatcher.

Two Clerks.

One Inspector of Common Lodging Houses (part-time).

QUALIFICATIONS.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Meat and other foods).
- (3) Certificate, Royal Sanitary Institute (Smoke Inspector).
- (4) Testamur, Institute of Public Cleansing (Honours).
- (5) Certificate, Board of Education, Building Construction.

HEALTH VISITORS.

MISS J. BARRACLOUGH (1), (5)	Superintendent Health Visitor and Non-Medical Supervisor of Midwives.
MISS E. G. CRESSWELL (4), (5)	Assistant Senior Health Visitor.
MISS S. A. SIMM (3), (4), (5)	Health Visitor.
MRS. M. AIRTON (2), (5)	Health Visitor.
MISS J. OLDERSHAW (3), (4), (5)	Health Visitor.
MISS M. HANSON, (3), (4), (5), (6), (7).	Health Visitor/Social Worker.
MISS E. G. TAYLOR, (3), (4), (5).	Health Visitor.
MRS. A. B. PAYLING	Health Visitor.
MISS E. BATES	Student Health Visitor.
(Three vacancies)	
M. C. W. SECTION	Five Clerks. Two Clinic Assistants.

QUALIFICATIONS.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Health Visitor).
- (3) Health Visitors Exam. under Ministry of Health Regulations.
- (4) State Registered Nurse.
- (5) State Certified Midwife.
- (6) State Registered Fever Nurse.
- (7) Social Study Certificate, University of Glasgow.

SCHOOL HEALTH SERVICE.

M. E. HOCKEN, M.B., Ch.B., D.P.H.

MARY D. BOYD, M.B., Ch.B.

E. H. JEANES, M.C., M.B., Ch.B., D.P.H.

C. H. SHAW, M.D., D.P.H.

D. SALFIELD, B.Sc., A.B.Ps.S.

L. ALDAM, M.I.S.Ch.

R. HEALD, L.D.S.

MISS D. M. BATEMAN, B.Ch.D., L.D.S.

G. W. LOWE, L.D.S.

G. E. BAILEY, L.D.S.

MISS A. C. HAMPTON, C.S.M.M.G.
and M.G. (1)

MISS C. H. CROFTON (1), (2)

MISS G. K. CAVE (1), (2)

MRS. N. LLOYD (1)

MISS E. M. BORMAN (1)

MRS. E. RANDS (1)

MISS N. EASTON (1), (2)

(One vacancy)

MISS S. GRAHAM

(One vacancy)

MISS W. M. COOPER

Five Clerks. Four Dental Attendants.

QUALIFICATIONS. (1) State Registered Nurse.

(2) State Certified Midwife.

(3) State Registered Fever Nurse.

MUNICIPAL GENERAL HOSPITAL.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.

D. BAILANTINE, M.B., Ch.B., F.R.C.S.,
M.R.C.O.G., L.M.

P. R. WOODCOCK, M.B., Ch.B., B.A.O.

M. BEASLEY, L.R.C.P. and S.

M. H. PETTIGREW, M.R.C.S., L.R.C.P.

A. BAGON, L.M.S.S.A.

H. M. MILLS, M.B., Ch.B.

MISS C. E. DAVIS

MISS H. GREEN

MISS N. M. SINGLETON

MISS E. DAWSON

MRS. L. K. LEGGOTT

(One vacancy)

MR. E. E. DAVIES

MISS R. K. COOPER

MISS F. G. WATERHOUSE

MR. S. STOPPARD

MISS G. CALAM

MISS M. M. USHER

Seven Clerks.

Deputy Medical Officer of Health and Senior
School Medical Officer.

Assistant Medical Officer (Schools and Child
Welfare).

Assistant Medical Officer (Schools and Child
Welfare), Medical Officer, Venereal Diseases.

Assistant Medical Officer (Schools and Child
Welfare).

Educational Psychologist (part-time).

Chiropodist (part-time).

School Dental Surgeon.

Assistant School Dental Surgeon.

Assistant School Dental Surgeon.

Assistant School Dental Surgeon.

Physiotherapist.

School Nurse.

School Nurse.

School Nurse.

School Nurse.

School Nurse.

School Nurse (Nurseries and Child Welfare).

School Nurse.

Psychiatric Social Worker.

Speech Therapist.

Senior Clerk.

Medical Superintendent.

Deputy Medical Superintendent and Obstetric
Officer.

Assistant Resident Medical Officer.

Assistant Resident Medical Officer.

Assistant Resident Medical Officer.

District Medical Officer.

District Medical Officer (part-time).

Matron.

Assistant Matron.

Sister Tutor (Nursing).

Sister Tutor (Midwifery).

Warden, Nurses' Homes.

Radiographer.

Physiotherapist.

Senior Dispenser.

Assistant Dispenser.

Clerk and Steward.

Domestic Staff Supervisor.

Senior Clerk.

OAKWOOD HALL SANATORIUM.

A. C. MORRISON, M.D., D.P.H.
T. P. LENNON, L.R.C.P. and S.
MISS L. CRADDOCK
MRS. E. SHARPLES

Medical Superintendent.
Assistant Resident Medical Officer.
Matron.
Teacher (Uncertificated).

ISOLATION HOSPITAL.

A. C. MORRISON, M.D., D.P.H.
MISS C. BARRACLOUGH

Medical Superintendent.
Matron.

TUBERCULOSIS DISPENSARY.

A. C. MORRISON, M.D., D.P.H.
One Clerk.

Tuberculosis Officer.

VENEREAL DISEASES CENTRE.

E. H. JEANES, M.C., M.B., Ch.B., D.P.H.

V.D. Medical Officer.

MR. P. DOANE

Venereal Diseases Orderly

MRS. P. MILLBURN, S.R.N., S.C.M.

Venereal Diseases Nurse.

CLINICAL LABORATORY.

L. P. CLARKE, M.R.C.S., L.R.C.P., D.P.H.
MR. C. W. OLIVER, B.Sc., A.M.I.L.T.
Two Technicians.
One Student Technician.
Two Clerks.

Clinical Pathologist.
Chief Technician.

MIDWIFERY SERVICE.

D. BALLANTINE, M.B., Ch.B., F.R.C.S.,
M.R.C.O.G., L.M.

Obstetric Officer.

MISS J. BARRACLOUGH

Non-Medical Supervisor of Midwives.

MRS. M. J. WALSH

Superintendent Midwife.

MRS. S. E. GOSLING

Deputy Superintendent Midwife.

MISS E. D. JEYES

District Midwife.

MRS. I. MCGANN

District Midwife.

MISS A. SIMM (to 31.12.47)

District Midwife.

MRS. E. PUGH

District Midwife.

MISS K. RAY

District Midwife.

MRS. G. HEWITT

District Midwife.

MRS. M. M. WOOD

District Midwife.

MISS E. ATKINSON

District Midwife.

MISS M. AIRTON

District Midwife.

Mrs. E. CHAPMAN

District Midwife.

Mrs. P. E. SHREEVES

District Midwife.

MISS G. J. BOOKER

Relief Midwife.

DAY NURSERY.

MISS J. LILLEY

Matron, Thames Street Nursery.

PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.

Public Vaccinator, North-West Rotherham and
Municipal General Hospital.

H. R. ELLIOTT, M.R.C.S., L.R.C.P.

Public Vaccinator, South-East Rotherham.

D. P. K. JOCKEL, M.D.

Public Vaccinator, Rawmarsh (part of).

MR. J. BALL

Vaccination Officer.

HEALTH DEPARTMENT,
MUNICIPAL OFFICES,
ROTHERHAM.

I submit herewith the annual report on the health services of the County Borough of Rotherham for the year 1947.

The delay in the presentation of this report has been mainly due to the work involved in drafting proposals under Part III and Section 51 of the National Health Service Act; to the several staff changes consequent on the implementation of the Act, and the transfer of officers to the Regional Hospital Board; and to a general bedding down of the department to its new duties, all of which will be described in detail in the report for 1948.

I cannot let this occasion pass without referring to the retirement of two loyal and valued officials—Mr. Joseph Edward Fuller, Senior Sanitary Inspector, and Mr. William Pearce, Assistant Senior Sanitary Inspector.

Throughout their tenure of office with the Rotherham Corporation their work was always a primarily important value in their lives, and never on any occasion had I any reason to question their integrity of purpose or their deep sincerity in carrying out their official duties.

Finally I wish to thank all those in charge of the various sections of the department and, through them, all the members of the staff, for their effective contribution to surmounting an arduous year.

WILLIAM BARR,
Medical Officer of Health.

SECTION I

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

GENERAL STATISTICS.

Area (in acres)	...	...	...	...	...	...	...	...	9,255
Population (census) 1931: Prior to 1st April, 1936	...	...	...	...	...	...	...	...	69,691
As constituted 1st April, 1936	...	...	...	...	...	...	...	...	75,223
Population (estimated civilian) 1947	...	...	...	...	...	...	...	...	79,920
Number of inhabited houses (1/4/1948)	...	...	...	...	...	...	...	...	22,131
Rateable value (1/4/1948)	...	...	...	...	...	...	...	...	£435,020
Sum represented by a penny rate (1/4/1948)	...	...	...	...	...	...	...	...	£1,730

VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

Live Births:	Total	Male	Female					
Legitimate	1826	925	901	—	Birth rate per 1,000 of the estimated			
Illegitimate	82	45	37		resident population	...	...	23.88
Stillbirths	41	22	19	—	Rate per 1,000 (live and still) births			21.04
Deaths	868	495	373	—	Crude death rate per 1,000 of the			
					estimated resident population	...		10.86
					Adjusted death rate per 1,000 of the			
					estimated resident population			
					(comparability figure—1.15)	...		12.49

Deaths from Puerperal causes:	Deaths	Rate per 1,000 total (live and still) births
Puerperal sepsis	1	0.90
Other puerperal causes	—	—
Total	1	0.90

Death rate of infants under one year of age:

All infants per 1,000 live births	...	...	...	...	...	...	...	57
Legitimate infants per 1,000 legitimate live births	...	...	...	...	...	...	...	54
Illegitimate infants per 1,000 illegitimate live births	...	...	...	...	...	...	...	122
Deaths from measles (all ages)	...	...	...	...	...	...	...	3
Deaths from whooping cough (all ages)	...	...	...	...	...	...	...	2
Deaths from diarrhoea (under 2 years of age)	...	...	...	...	...	...	...	21

In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare and mental deficiency.

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year 1947. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths *registered* in the calendar year, which totalled 868.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which *occurred* during the year, totalling 867 and have been compiled locally.

Cause of death	MALES							FEMALES							Total
	0-	1-	5-	15-	45-	65-	Total	0-	1-	5-	15-	45-	65-	Total	
1. Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Cerebro-spinal fever	-	-	-	-	-	-	-	-	1	-	-	-	-	1	1
3. Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Whooping cough	-	-	-	-	-	-	-	1	1	-	-	-	-	2	2
5. Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. Tuberculosis of respiratory system	-	-	-	4	14	3	21	-	-	-	12	-	1	13	34
7. Other tuberculous diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. Syphilis	-	-	-	-	2	3	5	-	-	-	-	1	-	1	6
9. Influenza	-	1	-	1	2	-	4	-	-	-	-	-	-	-	4
10. Measles	-	1	-	-	-	-	1	1	-	1	-	-	-	2	3
11. Acute polio-myelitis and polio-encephalitis	-	-	-	1	-	-	1	-	-	-	-	-	-	-	1
12. Acute infectious encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
13. Cancer of buccal cavity and oesophagus (M) uterus (F)	-	-	-	-	1	2	3	-	-	-	-	4	2	6	9
14. Cancer of stomach and duodenum	-	-	-	1	5	4	10	-	-	-	-	3	8	11	21
15. Cancer of breast	-	-	-	-	-	-	-	-	-	-	1	8	6	15	15
16. Cancer of all other sites	-	-	-	1	18	20	39	-	-	-	1	11	13	25	64
17. Diabetes	-	-	-	-	1	2	3	-	-	-	1	1	2	4	7
18. Intra-cranial vascular lesions	-	-	1	-	12	22	35	-	-	-	1	12	37	50	85
19. Heart disease	-	-	-	6	45	71	122	-	-	1	1	24	46	72	194
20. Other circulatory diseases	-	-	-	-	3	7	10	-	-	-	1	-	10	11	21
21. Bronchitis	3	1	-	1	13	30	48	3	-	1	1	3	13	21	69
22. Pneumonia	13	3	1	2	4	7	30	5	2	1	2	3	8	21	51
23. Other respiratory diseases	-	-	-	-	5	1	6	-	-	-	1	1	2	4	10
24. Ulcer of stomach or duodenum	-	-	-	2	6	2	10	-	-	-	-	1	2	3	13
25. Diarrhoea (under 2 years of age)	12	1	-	-	-	-	13	8	-	-	-	-	-	8	21
26. Appendicitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
27. Other digestive diseases	-	-	-	-	3	7	10	-	1	1	2	1	2	7	17
28. Nephritis	-	-	-	2	4	5	11	-	-	-	3	3	7	13	24
29. Puerperal sepsis	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1
30. Other maternal causes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
31. Premature birth	12	-	-	-	-	-	12	11	-	-	-	-	-	11	23
32. Congenital malformation, birth injury, etc.	21	-	-	-	-	-	21	7	-	-	-	-	-	7	28
33. Suicide	-	-	-	-	-	1	1	-	-	-	1	1	-	2	3
34. Road traffic accidents	-	2	1	3	1	-	7	-	-	1	-	1	2	4	11
35. Other violent causes	3	1	2	3	9	2	20	5	-	-	-	-	2	7	27
36. All other causes	2	-	1	1	5	43	52	1	1	1	5	3	40	51	103
Total—all causes	66	10	6	28	153	232	495	42	6	7	34	81	203	373	868

In the following table the vital statistics of the Borough in relation to the months of the year are given :—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total 1947
Rainfall—No. of wet days	15	10	24	14	12	14	17	3	11	9	15	15	159
Inches of rain	2.14	1.59	4.30	2.13	1.80	2.23	1.52	0.72	0.96	0.37	1.22	2.13	21.11
Maximum daily fall—day	7th	3rd	12th	23rd	12th	14th	16th	4th	16th	13th	12th	5th	—
Maximum daily fall—inches ..	0.35	0.53	1.03	0.56	0.48	0.81	0.33	0.30	0.24	0.11	0.31	0.43	—
Births— Total	160	167	172	155	169	156	179	181	155	136	116	136	1882
Birth rate	24.02	25.07	25.82	23.27	25.37	23.42	26.87	27.17	23.27	20.42	17.42	20.42	23.56
Deaths— Gross	109	147	115	89	67	72	64	49	67	70	86	100	1035
Outward transfers	22	26	24	16	15	21	9	13	18	17	25	24	230
Inward transfers	2	6	6	6	5	8	4	6	7	2	6	4	62
Nett	89	127	97	79	57	59	59	42	56	55	67	80	867
Death rate (crude)	13.37	19.06	14.56	11.86	8.38	8.86	8.86	6.30	8.41	8.26	10.06	12.01	10.85
Nett deaths under 1 year of age ..	15	18	5	9	14	11	3	5	4	3	8	13	108
Infantile mortality rate per 1000 births ..	94	108	29	58	83	71	17	28	26	22	69	96	57
CASES OF INFECTIOUS DISEASES REPORTED	Acute anterior polio-myelitis	—	—	—	—	1	5	1	—	—	—	—	7
	Acute polio-encephalitis	—	—	—	—	—	1	—	—	—	—	—	1
	Cerebro-spinal meningitis	1	—	1	—	1	—	1	—	—	—	—	4
	Diphtheria	1	—	—	1	4	—	1	—	1	—	—	8
	Dysentery	21	—	—	4	—	—	2	—	—	2	4	33
	Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	—	2	2	1	1	—	1	1	3	2	14
	Malaria	—	—	—	—	—	—	—	—	—	1	—	1
	Measles	159	264	242	78	85	70	49	26	9	6	3	994
	Ophthalmia neonatorum	2	—	—	—	—	6	2	—	1	—	—	12
	Pemphigus neonatorum	—	1	—	—	—	1	—	—	—	—	2	4
	Pneumonia	9	11	7	5	4	7	5	3	1	8	11	77
	Puerperal pyrexia	1	1	—	—	1	—	1	—	2	1	—	7
	Relapsing fever	—	—	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	3	6	7	6	4	3	4	7	4	9	7	66
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers ..	—	—	—	—	—	—	—	—	—	—	—	—
	Typhus fever	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	12	23	30	28	24	15	18	9	10	25	37	273
	Pulmonary tuberculosis— Males	3	—	4	2	2	4	1	2	2	2	3	35
	Females	1	—	1	3	—	—	1	2	3	2	4	20
	Other forms of tuberculosis— Males	1	—	—	—	—	1	—	—	1	—	1	4
	Females	1	—	—	—	—	—	1	—	1	—	2	5
DEATHS	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—
	Measles	—	1	2	—	—	—	—	—	—	—	—	3
	Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	—	—	1	—	—	1	—	—	—	—	—	2
	Tuberculosis—respiratory	4	4	1	2	5	5	1	2	1	2	3	34
	other forms	—	—	—	—	—	—	—	—	—	—	—	—
	Influenza	1	1	—	—	—	—	1	—	—	1	—	4
	Diarrhoea and enteritis (under 2 yrs.)	2	3	1	3	2	3	3	—	1	—	2	22
	Bronchitis	7	18	13	7	2	4	3	1	3	7	1	74
	Pneumonia	11	9	6	5	2	5	2	—	1	2	2	50
	Malignant disease	7	9	11	8	7	7	6	11	14	9	9	107
	Diseases of the heart	18	23	20	21	11	10	12	10	11	12	17	185
	Nephritis and Bright's disease ..	1	4	4	1	2	1	4	—	1	3	—	23

In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

	Clifton Ward	East Ward	Greas- bro' Ward	Kim- ber- worth Ward	Mas- bro' Ward	North Ward	St. Ann's Ward	South Ward	Thorn- hill Ward	West Ward	Total 1947
Estimated civilian population ..	11100	15220	3380	10280	5230	6250	7210	9550	5900	6610	79920
Number of houses, 31/12/47 ..	3067	4248	946	2880	1464	1751	2020	2674	1425	1655	22130
Acreage	785	952	1403	2913	411	300	122	711	212	1446	9255
Density of houses per acre ..	3.91	4.46	0.67	0.99	3.56	5.84	16.56	3.76	6.72	1.14	2.39
Density of population per acre ..	14.14	15.99	2.41	3.53	12.73	20.84	59.09	13.43	24.01	4.57	8.64
Births— Total	200	381	63	179	136	147	211	172	162	231	1882
Birth rate	18.02	25.03	18.64	17.42	26.00	23.52	29.27	18.01	31.83	34.94	23.56
Deaths— Gross	152	143	34	94	59	67	95	73	56	262	1035
Outward transfers	37	—	1	1	1	—	—	1	—	189	230
Inward transfers	14	8	—	9	1	10	4	5	9	2	62
Nett	129	151	33	102	59	77	99	77	65	7	867
Death rate (crude)	11.62	9.92	9.76	9.22	11.23	12.32	13.75	8.06	12.77	11.34	10.85
Nett deaths under 1 year of age ..	15	25	1	11	7	3	8	8	9	21	108
Infantile mortality rate per 1000 births ..	75	66	16	61	51	48	38	47	56	91	57
CASES OF INFECTIOUS DISEASES REPORTED	Acute anterior polio-myelitis ..	2	1	—	1	1	—	—	1	—	7
	Acute polio-encephalitis ..	—	—	1	—	—	—	—	—	—	1
	Cerebro-spinal meningitis ..	—	—	1	3	—	—	—	—	—	4
	Diphtheria	1	4	—	1	—	—	1	1	—	8
	Dysentery	14	4	—	2	—	5	1	—	7	33
	Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	1	—	7	2	—	1	—	1	14
	Malaria	—	—	—	—	1	—	—	—	—	1
	Measles	159	205	9	80	79	88	102	89	131	994
	Ophthalmia neonatorum	—	1	—	1	5	—	—	3	—	12
	Pemphigus neonatorum	—	—	—	1	—	—	—	—	3	4
	Pneumonia	4	15	1	22	9	10	3	7	4	77
	Puerperal pyrexia	—	2	—	1	—	—	2	—	2	7
	Relapsing fever	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	8	15	1	20	4	3	6	4	2	66
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers ..	—	—	—	—	—	—	—	—	—	—
	Typhus fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	24	24	6	48	40	37	7	14	33	273
	Pulmonary tuberculosis—										
	Males	4	8	1	6	6	2	2	3	1	35
	Females	1	7	—	1	2	1	1	2	3	20
	Other forms of tuberculosis—										
	Males	2	—	—	1	—	—	—	—	1	4
	Females	—	—	—	—	1	—	—	2	2	5
DEATHS	Diphtheria	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	—	—	—	—	—	—	—	—	—
	Measles	—	2	—	—	—	—	—	—	1	3
	Scarlet fever	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	1	1	—	—	—	—	—	—	—	2
	Tuberculosis—respiratory ..	3	6	1	2	3	3	1	6	3	34
	other forms	—	—	—	—	—	—	—	—	—	—
	Influenza	1	—	—	1	—	—	—	—	—	4
	Diarrhoea and enteritis (under 2 years)	3	6	1	1	—	5	1	1	4	22
	Bronchitis	13	17	4	8	4	9	2	8	5	74
	Pneumonia	5	6	—	8	6	3	5	4	9	50
	Malignant disease	20	13	2	14	12	15	10	7	4	107
	Diseases of the heart	28	30	9	21	11	20	22	11	15	185
	Nephritis and Bright's disease ..	3	3	2	1	1	2	5	2	4	23

The following table shows the birth-rate, death-rate, and analysis of mortality, during the years 1943-1947, compared with England and Wales as a whole and various other areas.

(The mortality rates for England and Wales refer to the whole population but for London and the towns to civilians only.)

	Year	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 BIRTHS		RATE PER 1,000 LIVE AND STILL-BIRTHS		
		Live births	Still births	All causes	Typhoid & paratyphoid fever	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria	Influenza	Diarrhoea and enteritis under two years	Total deaths under one year	MATERNAL MORTALITY RATE		
														Puerperal sepsis	Other maternal causes	Total
England and Wales	1943	16.5	0.51	12.1	0.00	—	0.02	0.00	0.03	0.03	0.37	5.3	49	0.73	1.56	2.29
	1944	17.6	0.50	11.6	0.00	0.00	0.01	0.00	0.03	0.02	0.12	4.8	46	0.59	1.34	1.93
	1945	16.1	0.46	11.4	0.00	—	0.02	0.00	0.02	0.02	0.08	5.6	46	0.49	1.30	1.79
	1946	19.1	0.53	11.5	0.00	0.00	0.00	0.00	0.02	0.01	0.15	4.4	43	0.31	1.12	1.43
	1947	20.5	0.50	12.0	0.00	0.00	0.01	0.00	0.02	0.01	0.09	5.8	41	0.26	0.91	1.17
126 County Boroughs and Great Towns, including London	1943	18.6	0.63	14.2	0.00	—	0.02	0.00	0.03	0.04	0.36	7.9	58	Not Available		
	1944	20.3	0.64	13.7	0.00	—	0.01	0.00	0.03	0.03	0.10	7.3	52			
	1945	19.1	0.58	13.5	0.00	—	0.02	0.00	0.02	0.02	0.07	7.8	54			
	1946	22.2	0.67	12.7	0.00	0.00	0.01	0.00	0.02	0.01	0.13	6.1	46			
	1947	23.3	0.62	13.0	0.00	0.00	0.02	0.00	0.03	0.01	0.09	8.0	47			
148 Smaller Towns (estimated resident populations 25,000 to 50,000 at Census 1931)	1943	19.4	0.61	12.7	0.00	—	0.02	0.00	0.03	0.04	0.37	4.4	46	Not Available		
	1944	20.9	0.61	12.4	0.00	—	0.01	0.00	0.02	0.03	0.11	4.4	44			
	1945	19.2	0.53	12.3	0.00	—	0.02	0.00	0.01	0.02	0.07	4.5	43			
	1946	21.3	0.59	11.7	0.00	0.00	0.00	0.00	0.02	0.01	0.14	2.8	37			
	1947	22.2	0.54	11.9	0.00	0.00	0.02	0.00	0.02	0.01	0.08	3.7	36			
London (Administrative county)	1943	15.8	0.45	15.0	0.00	—	0.02	0.00	0.03	0.02	0.27	10.4	58	Not Available		
	1944	15.0	0.42	15.7	0.00	—	0.00	0.00	0.04	0.01	0.08	10.1	61			
	1945	15.7	0.40	13.8	0.00	—	0.01	0.00	0.02	0.01	0.07	7.6	53			
	1946	21.5	0.54	12.7	0.00	—	0.01	0.00	0.02	0.01	0.12	4.2	41			
	1947	22.7	0.49	12.8	0.00	—	0.01	0.00	0.02	0.01	0.08	4.8	37			
Rotherham (Adjusted death rates)	1943	18.8	0.55	13.9	—	—	0.04	—	0.06	0.12	0.32	10.7	65	—	3.48	3.48
	1944	23.3	0.66	13.4	—	—	—	—	0.03	0.01	0.08	12.0	60	1.11	1.66	2.77
	1945	20.3	0.82	13.6	—	—	0.01	—	0.03	0.01	0.15	8.4	56	0.61	0.61	1.22
	1946	22.5	0.52	12.6	—	—	—	—	0.01	—	0.09	5.7	51	1.10	0.55	1.65
	1947	23.8	0.51	12.5	—	—	0.04	—	0.02	—	0.05	11.0	57	0.90	—	0.90

NOTE : A dash (—) signifies that there were no deaths.

During the year, 107 deaths from cancer took place and details are furnished in the table below of the location of the disease, together with the age and sex distribution :—

Location of disease		Under 15 years		15-25 years		25-35 years		35-45 years		45-55 years		55-65 years		65-75 years		Over 75 years		Total		Grand total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Buccal cavity and pharynx	M. F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Digestive organs and peritoneum	M. F.	-	-	-	-	-	-	2	1	2	3	7	6	12	10	8	7	31	27	58
Respiratory organs	M. F.	-	-	-	-	-	-	-	-	5	-	2	-	-	-	-	1	7	1	8
Uterus	F.	-	-	-	-	-	-	-	-	3	-	1	-	1	-	1	-	6	-	6
Other female genital organs	F.	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	4	-	4
Breast	F.	-	-	-	-	-	-	1	-	5	-	3	-	5	-	1	-	15	-	15
Male genital organs	M.	-	-	-	-	-	-	-	-	-	-	3	-	2	-	-	-	5	-	5
Urinary organs	M. F.	-	-	-	-	-	-	-	-	-	-	2	-	1	1	-	-	3	1	4
Skin (scrotum excepted)	M. F.	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
Brain and other parts of the nervous system	M. F.	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	1	1	2
Other or unspecified organs	M. F.	-	-	-	-	-	-	-	-	1	1	-	-	2	-	-	-	3	1	4
Totals	..	-	-	-	-	-	-	2	2	8	13	15	12	18	19	8	10	51	56	107

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1943-47 is as follows :—

In 1943 the percentage was 12.5; in 1944, 13.2; in 1945, 14.2; in 1946, 16.1; and in 1947, 12.3.

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

DOMICILIARY SERVICES.

PROFESSIONAL NURSING IN THE HOME.

There is no scheme provided by the Local Authority for professional nursing in the home of either (a) general cases or (b) infectious cases.

There was no change in the arrangements detailed in the last report except that in anticipation of the arrangements for home nursing under the National Health Act, 1946, the Greasbrough District Nursing Association was amalgamated with the Rotherham District Nursing Association as from 11th July, 1947.

Several discussions with this latter association took place during the year in connection with the proposals to be submitted to the Minister of Health for the provision of the home nursing service under the National Health Service Act.

MIDWIVES.

The report on the midwives practising in the Borough during the year will be found in Section IX.

NATIONAL HEALTH INSURANCE.

No change has occurred in the work of the Local Authority which is administered in co-operation with the National Health Insurance service as commented upon in previous reports.

POOR LAW MEDICAL OUT-RELIEF.

The medical care of persons in receipt of outdoor relief is as described in the last report.

REMOVAL OF INFIRM OR DISEASED PERSONS.

Section 101 of the Rotherham Corporation Act, 1928, enables the Medical Officer of Health to apply to a court for the removal of an infirm or diseased person to the Social Welfare Institution. Arrangements can also be made for voluntary removal.

During the year, one application was made to the court for a removal order.

CLINIC SERVICES.

CLINICS AND TREATMENT CENTRES.

The list of the out-patient departments under the control of the Corporation and provided by them, together with the sessional times, given in the Annual Report for 1946 remains unchanged except for the following alterations and additions: —

Ante-natal Clinic, Municipal General Hospital.

This was changed from Monday to Tuesday afternoon.

CHILD GUIDANCE.

The previous arrangements with the Sheffield Education Authority ceased during 1946 and from the beginning of the year the following arrangements operated for school children by appointment: —

Psychiatrist—Fridays, 9 a.m. to 1 p.m.

Psychologist—Mondays, 1.30 p.m. to 5.30 p.m.

Thursdays, 10 a.m. to 5.30 p.m.

Alternate Tuesdays, 10 a.m. to 5.30 p.m.

CHIROPODY.

In September, 1947, a chiropody clinic was instituted for school and pre-school children. This was held alternately at Ferham House and Cranworth Road on Friday mornings from 9 a.m. to 12 p.m.

INSTITUTIONAL SERVICES.

GENERAL HOSPITALS.—(a) MUNICIPAL.

The report on the work of the Municipal General Hospital, Moorgate, Rotherham, will be found in Section V.

GENERAL HOSPITALS.—(b) VOLUNTARY.

A meeting was held in April between the representatives of the Rotherham Hospital and the local authority at which the arrangements were revised for the hospital treatment of ear, nose and throat cases in order that the waiting list of these cases could be more speedily reduced. It was agreed that the external consultative clinic for all patients should be held at the Rotherham Hospital and that the operative treatment for school children should be undertaken at that hospital, whilst the Corporation would make six beds available at the Municipal General Hospital for adult patients.

At the same meeting it was also agreed that the student nurses of the Rotherham Hospital should attend the Preliminary Training School, "Fairfield," Moorgate, on a non-resident basis.

INFECTIOUS DISEASES.

Hospital accommodation for the treatment of cases of infectious disease is provided at the Isolation Hospital, Badsley Moor Lane, Rotherham, and for smallpox at the Kimberworth Hospital, Rotherham. The report of the year's working of these hospitals will be found in Section VI.

TUBERCULOSIS.

Hospital accommodation for the treatment of persons suffering from tuberculosis is provided at the Oakwood Hall Sanatorium, Moorgate, Rotherham, and details of the patients admitted during the year will be found in Section VII of this report.

CANCER.

Special facilities for the treatment of cases of cancer are provided at the Municipal General Hospital. In addition to operative measures, radium and deep x-ray therapy are provided under the direction of a medical consultant from the Sheffield Radium Centre. An outpatient clinic is held weekly at the hospital.

MATERNITY.

Institutional maternity accommodation is provided by the Corporation at the Municipal General Hospital and detailed statistics of the work performed will be found in Section V of this report, which deals with the working of that hospital.

An emergency maternity unit consisting of the Obstetric Officer and his team of midwives with equipment is stationed at the hospital and is available for cases of district midwifery.

During the year, investigations have been made into all maternal deaths occurring in the Borough, and the results of each inquiry have been forwarded to the Chief Medical Officer of the Ministry of Health, or in the case of extra urban deaths, to the responsible authority for the area in which the case was normally resident, for transmission to the Ministry.

All cases of puerperal pyrexia are enquired into by the Obstetric Officer.

MATERNITY AND NURSING HOMES.

No fresh registration of maternity and nursing homes was received during the year.

At the end of 1947, three homes were registered under the provisions of the Public Health Act, 1936, two as maternity homes only and the other as a maternity and nursing home. These were inspected regularly throughout the year.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of the mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for the Mentally Defective, who control the St. Catherine's Certified Institution, Loversall, near Doncaster, and which had at the end of 1947 a total available accommodation of 480 beds.

The occupation of the beds allocated to Rotherham cases is given in detail in Section X of this report. In this section also will be found full detailed particulars of the Rotherham cases in institutions, other than that provided by the joint board.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN.

There have been no changes in the arrangements for the above as enumerated in the report for 1944.

DAY NURSERIES.

The report of the year's working of the Thames Street Nursery will be found in Section IX. This nursery has accommodation for 80 children by day and 26 by night.

ANCILLARY SERVICES.

CLINICAL LABORATORY.

The clinical laboratory is situate in the grounds of the Municipal General Hospital, Rotherham, and the report on its work will be found in Section XI.

AMBULANCE FACILITIES.

One motor ambulance is used for the removal of cases of infectious disease and is maintained at the Isolation Hospital.

Accidents, non-infectious cases and maternity cases were dealt with by the Borough Ambulance Service.

SECTION III

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

During 1947 the water distributed in the area was satisfactory both in quantity and quality.

Bacteriological samples were made

Twice weekly—Ulley and Pinch Mill supplies in distribution.

Weekly—Pinch Mill spring at source.

Monthly—Ulley waters at the intakes to the reservoir, and before and after filtration; Langsett and Derwent waters in distribution (check samples).

The Langsett and Derwent supplies are received in bulk from Sheffield and examined bacteriologically at regular intervals by the Sheffield Waterworks Department.

Five houses in isolated areas are without piped supplies and rely on either spring water or receive water by water cart.

CHARACTER OF WATER.

The following report on samples taken in distribution is typical of those received during the year:—

	Ulley water 15/10/47.	Langsett water 15/10/47.	Derwent water 15/10/47.
Physical characters :			
Suspended matter	None	None	None
Appearance of a column 2 ft. long	Clear, very faintly yellowish	Clear, faintly yellowish	Clear, very faintly yellowish
Taste	Normal	Normal	Normal
Odour	None	None	None
Chemical examination :		Parts per 100,000.	
Total solids dried at 180°C. ..	33.0	7.45	8.55
Chlorides as chlorine	2.50	1.00	1.10
Equivalent to sodium chloride ..	4.12	1.65	1.81
Nitrites	Faint trace	Absent	Absent
Nitrates as nitrogen	0.30	0.07	0.08
Poisonous metals (lead, etc.) ..	Absent	Absent	Absent

	Ulley water 15/10/47.	Derwent water 15/10/47.	Langsett water 15/10/47.
Total hardness	21.20	3.20	3.80
Temporary hardness	9.05	1.25	2.50
Permanent hardness	12.15	1.95	1.30
Oxygen absorbed in 4 hours at 80°F. ..	0.090	0.096	0.078
Ammoniacal nitrogen	0.0024	0.0004	0.0004
Albuminoid nitrogen	0.0096	0.0006	0.0048
pH. value	7.3	7.6	7.6
	Parts per million		
Free chlorine	0.16	0.04	0.02
Bacteriological examination			
B. coli test (MacConkey's bile salt lactose broth)			
Probable number of coliform organisms per 100 ml.	0	0	0

REMARKS.

Satisfactory both chemically and bacteriologically.

RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

DRAINAGE AND SEWERAGE.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the River Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

The area of Greasbrough drains to an independent disposal works at Scrooby Lane, Greasbrough.

Brinsworth and part of Whiston drain to the Aldwarke Sewage Works. The remaining parts of this area drain to the Rotherham Rural District Council works under arrangement with that authority.

Cesspools exist in the unsewered parts of the district.

CLOSET AND ASHPIT ACCOMMODATION.

During the year three privies and one dry ashpit were abolished.

The numbers of the following types remained at the end of the year:—

Privies	...	...	...	...	...	...	...	...	...	168
Trough closets	...	...	...	...	...	...	...	...	...	37
Pail and chemical closets (attached to dwellings)	...	...	...	...	...	...	...	...	...	37
Dry ashpits	...	...	...	...	...	...	...	...	...	14

PUBLIC CLEANSING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer.

The method of disposal is 100 per cent. controlled tipping in low-lying areas.

In order to facilitate the provision and maintenance of moveable ashbins power was granted under the Rotherham Corporation Act, 1930, to enable the Corporation to provide and maintain refuse bins. A charge of 1s. 9d. per annum was made during 1946 in respect of each premises. From the inception of the scheme in April, 1931, to 31st March, 1948, 30,356 bins have been provided.

The amount of house refuse collected and bins provided or renewed during the year ended 31st March, 1948, were as follow:—

Refuse collected	...	...	...	...	...	...	...	23,546 tons
Bins supplied	...	...	...	...	...	...	...	2,240

SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year:—

Complaints investigated	..	..	..	..	..	..	700
Miscellaneous inspections and visits	..	..	..	..	..	..	3388
Re-inspections of nuisances	..	..	..	..	..	..	4738
Inspections of work in progress	..	..	..	..	..	..	423
Visits for sanitary alterations	..	..	..	..	..	..	56
Interviews with owners, agents, and builders	..	..	..	..	..	..	659
Inspections of tents, vans, and sheds	..	..	..	..	..	..	3
factories	..	..	..	..	..	..	261
offensive trades (including fish friers)	..	..	..	..	..	..	118
canal boats	..	..	..	..	..	..	9
cowsheds and dairies	..	..	..	..	..	..	6
common lodging houses (including visits by police inspector)	..	..	..	..	..	..	188
houses let in lodgings	..	..	..	..	..	..	29
premises where made up goods are prepared	..	..	..	..	..	..	46
hairdressers' premises	..	..	..	..	..	..	41

Visits to slaughterhouses (excluding whole-time inspector at Public Abattoir)	..	..	..	40
Cases of infectious diseases investigated	..	..	..	111
Visits to zymotic contacts	..	..	..	5
Food control visits	..	..	..	233
Drains tested	..	..	..	94
Number of verbal intimations	..	..	..	437
preliminary notices and letters	..	..	..	1698
statutory notices	..	..	..	74
Matters referred to other Departments	..	..	..	212
Samples obtained under Food and Drugs Act	..	..	..	150
Milk samples for bacteriological examination	..	..	..	101
Proceedings instituted	..	..	..	-
Applications to Court for removal orders (infirm persons)	..	..	..	1
Number of nuisances abated	..	..	..	2552

HOUSING.

No slum clearance or housing repair work under the provisions of the Housing Acts was carried out during the year.

The standard of fitness for human habitation of dwelling houses continues to decline, due to the restrictions imposed on repair work by the shortage of labour and materials.

Urgent repairs are dealt with in accordance with the nuisance sections of the Public Health Act, 1936, and 1,425 houses were inspected for this purpose during 1947.

SMOKE ABATEMENT.

There were twelve meetings of the Sheffield, Rotherham and District Smoke Abatement Committee held during the year.

Alderman F. Harper, J.P., of Rotherham, who has been Deputy Chairman of the Committee since its inception in 1930, was appointed Chairman, December, 1947.

The year under review was a difficult one with regard to the abatement of smoke nuisances. Very severe weather conditions early in the year caused a general shortage of fuel and almost an "Industrial Crisis," with the result that industrial and domestic consumers alike were compelled to burn combustible material which would not have been used under normal conditions. The situation eased with the improvement of weather conditions, but did not return to normal, because as much fuel as possible had to be conserved in anticipation of a repetition of the previous winters' low temperatures.

Possibly for the first time in the history of Rotherham, adequate supplies of fuel were not available and the shortage awakened in the minds of most of the population the necessity of using more efficient appliances and the conservation of all fuel.

Systematic observations of all industrial chimneys was continued throughout the year and much useful work was carried out in advising the manufacturers and the firemen with regard to improved methods of working.

In conjunction with the Ministry of Fuel and Power, a series of lectures to maintenance engineers and fuel users was given at the College of Technology and attended by over fifty of the work-people concerned. It is thought that much useful information was obtained at these lectures and discussions, which may be continued in the future. The supervision or "Prior Approval" of plans of all heating apparatus for new buildings was continued and it is hoped that this work will eventually help towards a cleaner atmosphere, though the results will not be immediate.

The following is a summary of the work done in the area during the year: —

Number of chimneys observed	...	...	...	...	...	1,326
Number of minutes smoke emitted	...	...	...	...	...	2,028
Average minutes smoke per 30 minutes observation	...	...	...	...	...	1.5
Number of Intimation Notices served	...	...	...	...	...	58
Statutory Notices served	...	...	...	...	...	58
Works visited	...	...	...	...	...	109
Complaints received	...	...	...	...	...	16

The following table gives in summary form the soot deposit and sulphur absorption records taken at the College of Technology and the soot deposit records at the Oakwood Hall Sanatorium during the year: —

COLLEGE OF TECHNOLOGY.

Month	Soot deposit gauge						Sulphur di-oxide monthly estimations (lead cone)
	Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.			Weight of SO ₃ per 100 sq. cms. grammes.
				Total soluble	Total insoluble	Total solids	
January ..	51.6	0.22	0.312	7.52	11.07	18.60	3.91
February ..	34.2	0.276	0.094	9.80	3.33	13.13	3.70
March ..	102.9	0.325	0.83	11.53	13.59	25.13	4.96
April ..	43.0	0.253	0.386	8.98	13.70	22.68	3.57
May ..	38.4	0.162	0.458	5.75	16.25	22.00	1.73
June ..	60.6	0.165	0.370	5.86	13.13	18.99	2.28
July ..	37.7	0.136	0.114	4.83	11.14	15.97	1.75
August ..	13.2	0.095	0.281	3.37	9.97	13.34	1.74
September ..	23.7	0.163	0.322	5.78	11.43	17.21	2.35
October ..	10.0	0.183	0.384	6.49	13.63	20.12	3.45
November ..	29.9	0.203	0.340	7.20	12.07	19.27	4.49
December ..	48.6	0.209	0.431	7.42	15.30	22.71	4.75
Average ..	41.1	0.198	0.340	7.04	12.05	19.09	3.22

OAKWOOD HALL SANATORIUM.

Month	Soot deposit gauge.					
	Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.		
				Total soluble	Total insoluble	Total solids
January ..	43.4	0.092	0.109	3.08	3.66	6.74
February ..	53.7	0.257	0.240	8.62	8.04	16.66
March ..	N	O	R	E	C	O
April ..	59.3	0.180	0.183	6.04	6.13	12.17
May ..	41.7	0.164	0.518	5.50	17.37	22.87
June ..	70.1	0.135	0.329	4.53	11.03	15.56
July ..	47.6	0.166	0.386	5.57	12.94	18.51
August ..	14.9	0.102	0.247	3.42	8.28	11.70
September ..	27.3	0.129	0.295	4.33	9.89	14.22
October ..	14.4	0.15	0.257	4.53	8.62	13.14
November ..	37.2	0.158	0.147	5.30	4.92	10.23
December ..	51.7	0.141	0.249	4.73	8.35	13.08
Average ..	41.9	0.151	0.269	5.06	9.02	14.08

OFFENSIVE TRADES.

There was no change in the number of offensive trades during 1947 and at the end of the year the following were in existence: —

Tripe boilers	2
Gut scrapers	1
Rag and bone dealers	2
Blood driers	1
	—
	6
	—

COMMON LODGING HOUSES.

Two common lodging houses, with accommodation for 64 persons, were in use during the year. They were maintained in a reasonable manner having regard to the type of lodgers. Bugs were introduced into one of the premises but they were eradicated before the place became heavily infested.

188 visits were paid, including visits by the police inspector.

HOUSES LET IN LODGINGS.

At the end of the year the number of registered houses let in lodgings was 20. Twenty-nine visits were paid. No special difficulty was experienced. The bulk of the lodgers occupied these premises because they were unable to get a house of their own on account of the house shortage.

TENTS, VANS, SHEDS AND SIMILAR STRUCTURES USED FOR HUMAN HABITATION.

At the end of 1947 the number of such structures in the Borough was as follows: —

Fixed huts	10
Stationary vans	6
	—
	16
	—

FACTORIES.

The number of factories registered at 31st December, 1947, was 332. During the year 261 inspections were made.

The defects remedied were: —

Want of cleanliness	1
Insufficient sanitary accommodation	4
Unsuitable or defective sanitary accommodation	16

CANAL BOATS.

No canal boats have been registered in Rotherham.

Number of canal boats inspected	...	...	...	...	9
Number of persons on board:	Male adults	...	...	...	18
	Female adults	...	...	...	—
	Children	...	...	...	—
Cases of infectious disease	...	...	...	...	—
Notices served in respect of infringements	...	...	...	...	3

DISPOSAL OF THE DEAD.

Apart from earth burial, cremation facilities are available at the City Cemetery, Sheffield. During the year, 32 persons from Rotherham were cremated there as compared with 32 in the previous year.

SCHOOLS.

SCHOOL HYGIENE.

There have been no major works executed in any of the schools in the County Borough during the year.

CO-ORDINATION.

As outlined in previous reports the co-operation between the school health service and the other health activities of the County Borough has been maintained on a close basis throughout the year.

Reference will be found in other parts of this report to special activities where co-operative effort between the various sections are achieving success, as may be instanced in the diphtheria immunisation campaign, the treatment of scabies, hospital treatment of aural cases, dental treatment, and all the facilities for school and pre-school children.

RAG FLOCK ACT.

No flocks are manufactured in the district. No samples were taken.

PUBLIC MORTUARY.

The arrangement whereby the mortuary at the Municipal General Hospital was used as the public mortuary was continued throughout the year and 45 bodies were received there and detained therein for 186 days. The post mortem room was used on 40 occasions.

SHOPS ACT, 1934.

Routine inspections under the Shops Act are carried out by the officers of the Weights and Measures Department, who report to the Department of Health defects relating to ventilation, temperature and sanitary accommodation.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The free rat destruction service given to Rotherham ratepayers continues to produce good results, in that rat infestations are speedily reported and treated.

Number of visits made	...	...	...	...	...	...	1550
Number of rats killed	...	...	...	...	...	...	5680

During the war years a national campaign was undertaken to reduce the rat population of the country. New methods of destruction have been devised as a result of careful study of the habits of the rat, and have been put into operation throughout the country.

The laying of poison baits in the sewers was begun in December, 1947, and by regular treatment a large proportion of the rats in the sewers of the Borough will be eliminated.

ERADICATION OF HOUSEHOLD PESTS.

The following premises were treated for vermin by the Department:—

					Bugs	Other household pests
Council houses	...	...	...	...	55	23
Private houses	...	...	...	...	73	44
Other premises	...	...	...	...	2	9
					<hr/>	<hr/>
Total	...	...	...	...	130	76
					<hr/>	<hr/>

SWIMMING BATHS.

The management of the two public baths in the County Borough and the measures adopted to ensure a satisfactory condition of the water were described in the Annual Report for 1936.

SHELL FISH.

There are no shell-fish beds or layings in the district, and no action has been taken under the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleansing of Shell-fish) Act, 1932.

SECTION IV

INSPECTION AND SUPERVISION OF FOOD.

MILK.

The following statement shows the number of milk producers in the Borough and also the number of registered retailers at the end of 1947:—

Registered cow keepers (producers within the Borough)	33
Cowkeepers within the Borough retailing their own supplies	19
Retail roundsmen with premises within the Borough	16
Retail roundsmen from premises outside the Borough	34

Nine licences were issued under Milk (Special Designations) Regulations:—

Tuberculin tested:									
Dealer	...	...	...	...	...	...	...	...	1
Supplementary	...	...	...	...	...	...	...	...	3
Accredited:									
Producer	...	...	...	...	...	...	...	...	1
Supplementary	...	...	...	...	...	...	...	...	2
Pasteurised:									
Premises	...	...	...	...	...	...	...	...	1
Supplementary	...	...	...	...	...	...	...	...	1

Fifty-seven samples of designated milk were procured for bacteriological testing with results as shown below:—

Class of milk	Samples tested	Nature of test	Number of samples	
			Passed	Failed
Tuberculin tested ..	20	Methylene blue	13	7
		Coliform	18	2
Accredited	45	Methylene blue	30	15
		Coliform	32	13
Pasteurised	22	Phosphatase	22	—
		Methylene blue	19	3

MEAT.

During 1947, all slaughtering for sale continued under Government control and was centralised at the Public Abattoir. The following figures, supplied by the Markets' Superintendent, give the number of animals slaughtered there during the year:—

Cattle	Calves	Sheep and lambs	Pigs	Total
5,744	709	18,716	767	25,936

In addition to the above, 138 pigs were slaughtered on private premises for home consumption.

The total estimated weight of fresh killed meat and offals condemned during the year was:—

All causes	...	...	...	...	...	64 tons
Tuberculosis only	...	...	...	...	...	38 tons 18 cwts.

The percentage of animals found to be affected with disease and injuries is given in the following table:—

	Cattle exclud'g cows	Cows	Calves	Sheep and Lambs	Pigs
Number inspected.. .. .	4,341	1,403	709	18,716	905
All diseases except tuberculosis :					
Whole carcasses condemned	2	23	32	71	4
Carcasses of which some part or organ was condemned	1,363	271	2	1,003	37
Percentage of the number inspected affected with disease other than tuberculosis ..	31.44	20.95	4.80	5.74	4.53
Tuberculosis only :					
Whole carcasses condemned	6	32	5	1	3
Carcasses of which some part or organ was condemned	1,327	597	—	5	19
Percentage of the number inspected affected with tuberculosis	30.71	44.83	0.70	0.03	2.43

OTHER FOOD.

The following table gives details of food other than fresh killed meat, condemned during the year:—

	Number	lbs.
Bread loaves, rolls and teacakes	17,623	—
Eggs	1,165	—
Meat blocks	3,000	—
Pikelets, pies, etc.	716	—
Rabbits	110	—
Tinned and bottled food	7,449	—
Bacon and ham	—	227
Cereals	—	72
Cheese	—	75
Confectionery	—	200
Crabs, prawns, etc.	—	163
Fats	—	522
Fish	—	1,588
Fruit	—	405
Meat	—	6,084
Vegetables	—	237
Yeast	—	24

FOOD PREPARING PREMISES.

This type of premises includes fried fish shops, bakehouses, premises used for the manufacture of ice cream, meat preparations, etc. The Food and Drugs Act, 1938, sets a standard of fitness and cleanliness for rooms used for food preparation.

During 1948 a systematic inspection of all such premises is planned to begin, with a view to reaching a high standard of cleanliness in the preparation of food for sale.

FOOD AND DRUGS ACT.

During the year, 151 samples of food and drugs were obtained and submitted to the Public Analyst for examination. Seventeen samples were reported to be not genuine.

Six of the nine samples of milk reported not genuine were connected with one supply. Following a sample deficient in fat from a retail purveyor, eleven samples were taken from churns on arrival from the wholesaler, and the milk fat content of the churns varied from 2.4 per cent. to 3.8 per cent., the legal standard being 3 per cent. More than one wholesaler was involved, and as the deficiencies were due to faulty bulk mixing, the Ministry of Food was informed. In two other cases of milk showing a small quantity of added water, enquiries revealed no malpractice. A small quantity of milk submitted by a householder was found to be deficient in fat, but formal samples from the supply were genuine.

Five informal samples of sausages reported to be deficient in meat were followed by formal samples, one of which was not genuine. The facts were reported to the Ministry of Food and a prosecution instituted.

An informal sample of sweet spirits of nitre was reported not genuine, but a formal sample from the same source was satisfactory.

An informal sample of quinine was found to be deficient in ammonia, but as the quinine sulphate content, which is the vital ingredient, was satisfactory, no action was taken in this case.

Details of all samples examined by the Public Analyst are given in the following table:—

No.	Nature of samples	Genuine		Not reported as genuine		Formal samples	
		Formal	Informal	Formal	Informal	Prosecutions instituted	Penalties including costs
							£ s. d.
6	Ammonia ed tincture of quinine	—	5	—	1	—	—
4	Baking powder	—	4	—	—	—	—
2	Camphorated oil	—	2	—	—	—	—
2	Cream of tartar	—	2	—	—	—	—
12	Coffee	—	12	—	—	—	—
2	Curry powder	—	2	—	—	—	—
8	Ground ginger	—	8	—	—	—	—
86	Milk	77	—	9	—	—	—
1	Paregoric	—	1	—	—	—	—
4	Pepper	—	4	—	—	—	—
12	Sausages & sausage meat	—	6	1	5	*1	2 14 0
3	Sweet spirits of nitre ..	1	1	—	1	—	—
9	Vinegar	—	9	—	—	—	—
151	Totals	78	56	10	7	1	2 14 0

* Prosecution instituted by Ministry of Food.

The quarterly average composition of the samples of milk was as follows:—

Period	Percentages.		No. of samples
	Milk-fat	Solids not fat	
1st quarter	3·63	8·68	31
2nd quarter	3·24	8·64	24
3rd quarter	4·10	8·75	6
4th quarter	3·69	8·71	25
The whole year ..	3·66	8·69	86

SECTION V.

MUNICIPAL GENERAL HOSPITAL.

The district served by the hospital remained the same, namely the County Borough of Rotherham and the Rother Valley Public Assistance Area, with an estimated population of 200,000.

BEDS.

The beds provided for sick, medical, surgical, childrens' isolation, gynaecological, maternity, and mental cases were 327, including 72 cots.

STAFF.

The medical staff consists of the medical superintendent, the deputy medical superintendent, and four resident medical officers, together with the following visiting consultants:—Surgeon; ophthalmic surgeon; thoracic surgeon; obstetrician; ear, nose and throat surgeon; paediatrician; medical officer for cancer and radium; one medical officer for nervous diseases; and a visiting anaesthetist.

A radiographer and a physio-therapist are on the permanent staff and the sunlight, massage, and X-ray departments are in operation daily.

The nursing staff is usually kept up to full strength and efficiency. This position is greatly helped by the hospital being a training school, not only for general nursing but for midwifery (part 2) as well. Owing to the shortage of pupil midwives undertaking part 2 training, it was still necessary to employ assistant nurses in the maternity wards. The staff at the end of the year was 28 trained nurses, 8 pupil midwives, 15 assistant nurses of which 2 were males, 68 student nurses, and 12 male nursing orderlies. Eight members of the nursing staff, 3 trained and 5 assistant nurses, were employed on a part-time basis.

PRELIMINARY TRAINING SCHOOL.

The work of the training school developed during the year, and at a meeting held in April with representatives of the Rotherham Hospital, it was agreed to accept student nurses for training from that hospital on a non-resident basis.

IN-PATIENTS.

Details of in-patients (including Service patients) treated are shown in the following table:—

In-patients (including births)								
Civilian cases	...	...	...	...	...	...	...	4960
E.H.S. and Service cases			...	...	...	...		58
							—	5018
Deaths	...	...	...	...	...	...	...	354
Discharges	...	...	...	...	...	...	...	4860

OUT-PATIENTS.

The attendances at the out-patient department during the year for the continuation of treatment, emergency treatment, consultation, etc., were as follow:—

Out-patient: hospital	...	...	...	...	...	...	...	3729
district	...	...	...	...	...	...	...	2835
Physiotherapy	...	...	...	...	...	...	...	4977
Sunlight	...	...	...	...	...	...	...	154
Nervous diseases	...	...	...	...	...	...	...	999
Radium and cancer	...	...	...	...	...	...	...	1180
X-ray	...	...	...	...	...	...	...	666
Ear, nose and throat	...	...	...	...	...	...	...	20
Ante-natal: Municipal General Hospital	...	...	...	...	...	...	...	4148
Ferham House	...	...	...	...	...	...	...	1073
Post-natal	...	...	...	...	...	...	...	49
Gynaecological	...	...	...	...	...	...	...	681
Child Welfare	...	...	...	...	...	...	...	298
Total	...	...	...	...	...	...	...	20,809

* The out-patient clinics continued to be held as listed in the 1946 report, except that the day when the ante-natal clinic was held at the hospital was changed from Monday to Tuesday afternoon.

MATERNITY.

The following table gives particulars of the maternity cases dealt with during the year:—

1. Number of maternity beds exclusive of isolation and labour beds	41
2. Number of beds included in the above which have been allocated to, and reserved for, expectant mothers in need of hospital treatment	4
3. Number of maternity cases admitted during the year	1315
4. Number of women treated during the year in the beds shown against item 2, and which are included in item 3	141
5. Average duration of stay of cases included against item 3..	9 days
6. Number of cases delivered by :	
(a) midwives	1029
(b) doctors	113
7. Number of cases in which medical assistance was sought by the midwife in emergency	410
8. Number of cases admitted after delivery	32
9. Number of cases notified as puerperal pyrexia	3
10. Number of cases of pemphigus neonatorum	3
11. Number of infants not entirely breast fed while in the institution	60
12. Number of infants wholly breast fed on leaving the institution	1047
13. Number of cases of ophthalmia neonatorum	—
14. Number of maternal deaths	2
15. Number of infant deaths :	
(i) stillborn	51
(ii) within 10 days of birth	30

Of the 1,315 maternity cases dealt with during the year, 462 were resident in the area of the West Riding County Council.

Weekly ante-natal clinics were held in conjunction with the maternity ward and also at Ferham House for intending maternity patients. In all, 5,221 attendances were made to these clinics.

Forty-nine women attended during the year at the post natal clinic held at the hospital and made 49 attendances.

An emergency maternity unit consisting of the Obstetric Officer and his team of midwives with equipment is stationed at the hospital and is available for cases of district midwifery.

CANCER.

The arrangements as detailed in previous reports were continued during the year. In addition to operative measures, radium and deep x-ray therapy are provided under the direction of a medical consultant from the Sheffield Radium Centre.

1,180 attendances were made by patients at the radium and cancer clinic held each Thursday afternoon at the hospital.

AURAL.

Following discussions with Dr. Petty, Aural Consultant early in the year, the General Purposes Sub-Committee of the Health Committee met representatives of the Rotherham Hospital and discussed the co-ordination of the two hospitals for ear, nose and throat treatment so as to reduce the waiting lists of patients.

It was agreed that an external consultative clinic for all patients be held at the Rotherham Hospital and that operative treatment for cases be conducted at the hospital together with six beds at the Municipal General Hospital for adult patients.

CHILD WELFARE.

The weekly clinic held on Tuesday mornings attended by Professor A. E. Naish, consultant paediatrician, was continued during the year, 298 attendances were made by the children attending as out-patients. In addition, the children in hospital were also seen and advice given regarding treatment.

NERVOUS DISEASES CLINIC.

The following report has been submitted by Dr. H. A. Cole of the West Riding of Yorkshire Mental Hospitals Board, who is in charge of the psychiatric out-patient clinic held on Wednesday afternoons at the Municipal General Hospital.

Total new cases	...	...	...	...	...	...	...	163
Total attendances	...	...	...	...	...	...	...	999

The work of the clinic has increased considerably in the past 12 months and it has been found necessary to attend on Tuesday afternoons as well as Wednesday. Tuesday is reserved for patients referred by the hospital and for out-patients requiring investigation and treatment by special methods.

With more time available there has been an increase in the number of examinations under narcosis. This form of therapy often shortens the total time of treatment. As an example, two cases of amnesia recovered after one session, and without pentothal it is probable that much time would have been required. E.C.T. has been used sparingly but has been very successful in the cases in which it was employed. As always in clinics of this nature there is a discouraging residue of the chronic cases who remain unaltered no matter what one does.

This year has seen an increase in the number of cases brought into hospital for treatment. It has been possible to use modified insulin and narcosis therapy. This development is very satisfactory as it has been possible to treat patients who needed hospital treatment but were not severe enough to go to a mental hospital.

It has been very pleasant to work at this clinic and I leave it with regret. I wish to thank the nursing staff for their help and patience. Finally, I would like to express my gratitude to Dr. Griffith, Medical Superintendent of the Hospital, for all his help and advice. The developments in the work of the clinic have only been possible because of his encouragement and assistance.

SECTION VI

INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table :—

Disease	1943	1944	1945	1946	1947
Acute anterior polio-myelitis	4	—	—	1	7
Acute polio-encephalitis	—	—	—	—	1
Cerebro-spinal meningitis	5	3	7	2	4
Diphtheria	66	48	24	33	8
Dysentery	3	9	10	22	33
Encephalitis lethargica	—	—	—	—	—
Erysipelas	47	17	20	29	14
Malaria	—	1	—	3	1
Measles	871	50	1466	260	994
Ophthalmia neonatorum	6	10	5	7	12
Pemphigus neonatorum	—	2	1	3	4
Pneumonia	140	89	95	79	77
Puerperal pyrexia	7	7	17	11	7
Relapsing fever	—	—	—	—	—
Scarlet fever	272	270	264	128	66
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	—	—	1	1	—
Typhus fever	—	—	—	—	—
Whooping cough	211	98	303	222	273
Tuberculosis : respiratory	49	36	56	38	55
other forms	8	9	12	6	9
Totals	1689	649	2281	845	1565

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.

[illegible]

ISOLATION HOSPITAL.

The following table shows the number of cases of principal notifiable diseases which were admitted to the Isolation Hospital during the year.

Disease	Cases notified during 1947	In hospital 31st Dec. 1946	Admissions 1947	Discharges 1947	Deaths 1947	Remaining in hospital 31st Dec. 1947	Total patient days
Scarlet fever ..	66	2	47	46	—	3	1335
Diphtheria ..	8	2	7	9	—	—	495
Typhoid fevers ..	—	—	—	—	—	—	—
Cerebro-spinal meningitis ..	4	—	3	3	—	—	90
Other diseases ..	—	—	55	49	4	2	876
Total	—	4	112	107	4	5	2796

Comparative patient-day figures for the various diseases during the past five years are shown below:—

Year	Scarlet fever	Diphtheria	Typhoid fevers	Cerebro-spinal meningitis	Other diseases	Total patient days	Average daily bed occupancy
1943	5589	3637	109	55	1317	10707	29·3
1944	4910	2383	—	53	796	8142	22·3
1945	5228	1305	49	138	585	7305	20·0
1946	2959	1788	60	—	687	5485	15·0
1947	1335	495	—	90	876	2796	7·7

The Kimberworth Smallpox Hospital was available for overflow purposes throughout the year but at no time was its use necessary.

GENERAL OBSERVATIONS ON THE PRINCIPAL DISEASES TREATED.

In considering the following notes on the manner in which the notified cases were dealt with, it should be borne in mind that the figures relate only to notifications of cases occurring within the Borough.

SCARLET FEVER.

Sixty-six notifications of cases of this disease were received during 1947, which was approximately half the number of cases which occurred in 1946 and is the smallest annual total since 1931.

The number of patients admitted to the Isolation Hospital was 47; and the remaining 19 cases were nursed in their own homes. Generally speaking the disease was of a very mild type and unaccompanied by complications.

No death occurred from this disease during 1947, and it is pleasing to record that there has been no death from scarlet fever in the Borough since the year 1937. This fact reinforces the opinion expressed in earlier reports that the hospitalisation of scarlet fever should, in the main, be discontinued. This would allow of priority being given to more acute infections and for the removal of patients whose home conditions preclude proper isolation or nursing facilities.

DIPHTHERIA.

During 1947 the number of notified cases of diphtheria totalled 8, none of whom had received a course of immunisation. This is the lowest annual figure of cases on record. Seven cases were removed for treatment to the Isolation Hospital and one patient was nursed at home. There was no death from diphtheria during the year.

TYPHOID FEVERS.

No case of typhoid fever was reported during the year under review.

CEREBRO-SPINAL FEVER.

Four cases of cerebro-spinal fever were notified, of which three were treated in the Isolation Hospital and one in the Municipal General Hospital. All cases recovered.

OTHER DISEASES.

Included under this heading are the cases of acute polio-myelitis and acute polio-encephalitis which occurred during the year, together with the remaining conditions for which patients were admitted to hospital.

Seven cases of acute polio-myelitis and one case of acute polio-encephalitis were notified during the year. All these patients were admitted to the Isolation Hospital, together with one from the area of the Rotherham Rural District Council. The patient suffering from acute polio-encephalitis died in hospital after eight days residence. In all these cases orthopaedic treatment was commenced at the earliest possible time and the Corporation's specialist, Dr. Crockatt, visited the patients in hospital and arranged for their early transfer to Kirbymoorside. Six of the Borough cases, together with the ex-urban case of acute polio-myelitis were ultimately transferred to the Adela Shaw Orthopaedic Hospital, Kirbymoorside, for orthopaedic treatment. The remaining patient was sufficiently recovered to attend the orthopaedic clinic for treatment. In addition seven patients (one of whom was ex-urban) were admitted to hospital as suspected cases of this disease but after observation the original diagnosis was not confirmed.

The following table lists the cases admitted to the Isolation Hospital from other diseases. This includes the cases referred to in the preceding paragraph, together with those cases of minor infectious illnesses with complications where home nursing was impracticable, and those cases admitted on mistaken diagnoses or for observation.

Acute polio-encephalitis	...	...	1	Meningisms	...	...	...	1
Acute polio-myelitis	...	...	8	Mumps	...	...	...	4
Acute rheumatism	...	...	1	Pneumococcal meningitis	...	...	...	1
Bronchitis	...	...	2	Staphylococcal septicaemia	...	...	...	1
Constipation	...	...	1	Sub-arachnoid haemorrhage	...	...	...	1
Convulsions	...	...	1	Tonsillitis	...	...	...	3
Croup	...	...	2	Whooping cough	...	...	...	7
Dysentery	...	...	4	Whooping cough and pneumonia	...	...	...	1
Enteritis	...	...	1	No apparent disease	...	...	...	6
Influenzal meningitis	...	...	1					—
Measles	...	...	8	Total	...	...	...	55
								—

KIMBERWORTH HOSPITAL.

One patient, who was a contact of a smallpox case, was admitted during the year to Kimberworth Hospital for a period of two days stay.

DIPHTHERIA IMMUNISATION.

No change was made during 1946 in the facilities for immunisation. Fixed clinic sessions were held at Ferham House and Cranworth Road Centres throughout the year and facilities were also available at any Child Welfare or School Clinic Session.

During the year, 778 children under 5 years of age and 49 between 5 and 15 years, a total of 827 children, were immunised. 39 children received reinforcing doses during the same period.

At the end of the year, the position in Rotherham regarding immunisation in relation to child population was as follows:—

Age groups	Estimated mid-year population	Immunised at year end	Percentage immunised
Under 5	7560	3390	44.8
5-14 (inclusive)	11950	8987	75.2
Total	19510	12377	63.4

These figures represent a small percentage increase when compared with those of the previous year, the percentages for the same groups were 42.5, 70.2 and 59.8 respectively.

In the 5-14 years age group, 3,127 children had received stimulating doses by the year end. This represents 34.8 per cent. of the immunised children in that group.

Details of the children who had been immunised at the end of the year, divided into age groups according to the year of birth, was:

1933—858	1938—946	1943—879
1934—913	1939—957	1944—1111
1935—871	1940—909	1945—777
1936—876	1941—883	1946—591
1937—938	1942—836	1947—32

The percentage of immunised children in the one year group at the end of 1947 (i.e. those born in 1946) is disappointingly low. The number of live births in that year was 1,741, and at the end of 1947, only 591 or slightly less than 34 per cent. of these had been immunised. The importance of securing and maintaining a high percentage of immunised children, particularly in the lower age group, cannot be over emphasised.

During 1947, only 8 cases of diphtheria occurred in the Borough and this was the lowest annual figure on record. Two of these cases were in the under 5 age group and 5 in the 5 to 14 years age group. None of the cases had received a course of immunisation. There was no death from diphtheria during the year.

SUPPLY OF DIPHTHERIA ANTITOXIN.

Diphtheria antitoxin in concentrated form was available to medical practitioners on application to the Health Department. This was used mainly for prophylactic purposes pending final diagnosis and removal to hospital if necessary. During the year 18 phials, representing 90,000 units, were issued.

SCABIES.

The incidence of scabies decreased during the year 1947, 383 individuals attended the treatment clinic held at Ferham House and made 910 attendances as compared with 855 persons and 1,965 attendances in 1946. Details of these were as follow:—

Pre-school children	...	...	...	...	55	113
School children	...	...	...	...	182	482
Adults	...	...	...	...	146	315
Total	...	...	...	...	383	910

PUBLIC VACCINATION.

The following details are extracted from the annual returns forwarded to the Registrar-General, and relate to those births which were registered during the year 1946.

Number of live births returned in birth lists	..	..	..	2132
Number successfully vaccinated	..	..	..	750
Number insusceptible of vaccination	..	..	..	2
Number of conscientious objectors	..	..	..	1017
Number who died unvaccinated	..	..	..	102
Number postponed by medical certificate	..	..	..	8
Number removed to other known districts	..	..	..	101
Number removed to places unknown	..	..	..	18
Number remaining not accounted for	..	..	..	134

The number of persons successfully vaccinated and re-vaccinated at the cost of the rates during the year is shown below :—

	NAME OF VACCINATION DISTRICT OR INSTITUTION				Total
	Rotherham South- East	Rotherham North- West	Rotherham Greas- brough	Municipal General Hospital	
Number of successful primary vaccinations	295	249	12	100	656
Number of successful re-vaccinations	9	—	—	—	9
	304	249	12	100	665

SECTION VII

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1947.

NOTIFICATIONS AND DEATHS.—The following table gives details of the number of primary notifications received during the year :—

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
35	20	4	5	64

In addition, the following cases were brought to notice other than by formal notification :—

	Pulmonary	Non-pulmonary
Death returns from local registrars ..	3	—
Transferable deaths from Registrar General	1	—
Posthumous notifications	1	—
Transfers from other areas (other than transferable deaths)	6	—

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods Years			New cases*				Deaths			
			Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
			M.	F.	M.	F.	M.	F.	M.	F.
Under 1	..		—	—	—	—	—	—	—	—
1-5	..	..	1	—	—	1	—	—	—	—
5-10	..	..	—	1	1	—	—	—	—	—
10-15	..	..	1	—	1	—	—	—	—	—
15-20	..	..	5	4	—	—	—	2	—	—
20-25	..	..	4	5	—	2	1	2	—	—
25-35	..	..	6	5	—	1	2	4	—	—
35-45	..	..	7	4	—	1	4	4	—	—
45-55	..	..	8	1	—	—	7	—	—	—
55-65	..	..	6	1	1	—	4	—	—	—
65 and upwards	..		6	1	1	—	3	1	—	—
Totals	..		44	22	4	5	21	13	—	—

*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1947 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death :—

Notification	Pulmonary	Non-pulmonary
After death	1	—
Within 1 month	3	—
1—3 months	3	—
4—6 months	1	—
7—12 months	5	—
1—2 years	1	—
2—3 years	6	—
3—4 years	2	—
4—5 years	2	—
Over 5 years	4	—
From death returns	6	—
Total number of deaths from tuberculosis ..	34	—
Causes other than tuberculosis	5	1

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 5.8. No action was required for cases of wilful neglect or refusal to notify.

REGISTER.—The following cases were removed from the register during the year :—

	Pulmonary		Non-pulmonary		Total
	M.	F.	M.	F.	
Recovery from the disease	8	5	2	4	19
Death (all causes)	25	14	1	—	40
Withdrawal of notification (including transfer lost sight of, etc.)	4	1	1	—	6

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications on the 31st December, 1947, was 426 classified as follows :—

Pulmonary			Non-pulmonary.			Total cases
Males	Females.	Total.	Males.	Females.	Total.	
191	129	320	58	48	106	426

TUBERCULOSIS DISPENSARY.

During the year 465 new cases attended the dispensary, and of these 63 were found to be definitely suffering from tuberculosis. Of these cases 56 were pulmonary, and 26 were found to be sputum positive; the remaining 7 cases were suffering from non-pulmonary disease.

The following table shows the relation between primary notifications and the cases sent to the dispensary and accepted as suffering from tuberculosis:—

				Primary notifications	Accepted cases attending dispensary
Pulmonary	Males ..	..	..	35	38
				Females ..	20	18
Non-pulmonary ..	Males ..	..	..	4	3
				Females ..	5	4
				—	—
				64	63
				—	—

The figures for the accepted cases attending the dispensary for the first time include cases who were notified during the previous year and cases transferred in from other areas.

The following table compares the figures for new cases examined at the dispensary during 1946 with those for the preceding years. The figure for the non-tuberculous cases is still above the average, and shows that greater use continues to be made of the existing facilities.

Years			Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1947	..	..	63	5	397	465
1946	..	..	43	4	456	503
1945	..	..	62	1	420	483
1944	..	..	48	7	433	488
1943	..	..	42	2	455	499
Totals	..	..	258	19	2161	2438

The following table gives the figures for new cases and contacts examined during the preceding 5 years (1938-42), compared with the totals of the above table:—

Years			Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1943-47	..	..	258	19	2161	2438
1938-42	..	..	286	36	1437	1759

CONTACTS.—The arrangements for contacts are as enumerated in the report for year 1942.

NON-TUBERCULOUS CONDITIONS.—The following conditions were revealed in the 397 persons found to be non-tuberculous.

No apparent disease	224	Blood diseases	12
Respiratory diseases	145	Other non-tuberculous diseases ..	9
Circulatory diseases	7		

The following return shows the work of the dispensary during the year 1947 :—

Diagnosis	Pulmonary				Non-pulmonary				Total				Grand total
	Adults		Child.		Adults		Child.		Adults		Child.		
	M	F	M	F	M	F	M	F	M	F	M	F	
A.—(1) Number of definite cases of tuberculosis on the dispensary register at 1st January ..	135	86	12	13	17	4	27	25	152	90	39	38	319
(2) Transfers from other authorities ..	5	—	—	—	—	—	—	1	5	—	—	1	6
(3) Lost sight of cases returned ..	—	—	—	—	—	—	—	—	—	—	—	—	—
B.—Number of new cases diagnosed as tuberculous during the year :—													
(1) Class T.B. minus	20	8	1	—	—	—	—	—	20	8	1	—	29
(2) Class T.B. plus	12	10	—	—	—	—	—	—	12	10	—	—	22
(3) Non-pulmonary	—	—	—	—	1	2	2	1	1	2	2	1	6
C.—Number of cases included in A. and B. written off the dispensary register during the year as :—													
(1) Recovered	4	5	4	—	—	—	2	4	4	5	6	4	19
(2) Dead (all causes)	18	9	—	—	—	—	—	—	18	9	—	—	27
(3) Removed to other areas ..	4	1	—	—	—	—	1	—	4	1	1	—	6
(4) For other reasons	—	—	—	—	—	—	—	—	—	—	—	—	—
D.—Number of definite cases of tuberculosis on the dispensary register at the end of the year	146	89	9	13	18	6	26	23	164	95	35	36	330

Number of attendances at the dispensary (including contacts) 1,015

Number of consultations with medical practitioners :

(a) Personal —
(b) Otherwise 304

Number of visits by tuberculosis officer to homes (including personal consultations) 100

Number of visits by nurses or health visitors to homes for dispensary purposes (all visits) .. 503

Number of :—

(a) Specimens of sputum, etc., examined 195

(b) X-ray examinations made in connection with dispensary work 545

Number of “ recovered ” cases restored to dispensary register and included in B above .. —

Number of “ T.B. plus ” cases on dispensary register on 31st December 126

TUBERCULOSIS ALLOWANCES.

No change was made during the year in the administration of the scheme of allowances authorised by Memo 266/T.

During 1947, eighteen patients were in receipt of allowances granted in previous years; 18 patients were granted maintenance allowances; one patient was granted a discretionary allowance with a special payment; and another was granted a special payment only. Both these latter were for pocket money. The following summary gives the reasons for the discontinuance of allowances during the year:—

Commenced work	...	...	...	...	...	...	...	11
Died	...	...	...	...	...	...	...	3
Ceased on maximum period of allowances	...	...	...	...	...	...	...	2
Refused further treatment	...	...	...	...	...	...	...	2
Re-admitted to sanatorium	...	...	...	...	...	...	...	1
								—
								19
								—

At the end of the year, eighteen patients were in receipt of maintenance allowances and one patient was receiving a special payment for pocket money.

Of the patients detailed above, five were also receiving discretionary allowances when the year began; all of these were for insurance payments and in addition one received an excess rent allowance and another an allowance for hire purchase payments. Four new applications were dealt with during the year; these were for insurance payments, and in one case an additional sum for hire purchase payments was made. Two cases were granted special payments for pocket money. Four discretionary allowances ceased when the patients recommenced work, and another patient's discretionary allowance ceased on death.

The four discretionary allowances being paid at the end of the year were in respect of insurance payments in all cases, one of whom also received an excess rent allowance in addition and another an allowance for hire purchase payments.

One patient was receiving a special payment for pocket money at the end of the year.

The amount of allowances paid during the year were:—

						£	s.	d.
Maintenance allowances	...	...	...	...	...	1500	18	3
Discretionary allowances	...	...	...	...	...	55	9	10
Special payments	...	...	...	...	...	15	10	4
								—
						£1571	18	5
								—

DENTAL TREATMENT.

The scheme of dental treatment remains unchanged, being as comprehensive as is possible under the limits of the patients' physical condition and the dental amenities available in the sanatorium. The provision of a separate dental surgery at Oakwood would enable conservation work to be done there, but since this type of dental treatment is done either before entry to the sanatorium or after the prescribed period of complete rest, there seems, at present, no reason to change the practice by which such ambulatory patients attend one of the dental clinics whenever possible. Patients treated in the sanatorium are usually suffering from toothache or are those whose previous dental care has been non-existent and whose mouths would menace the health of stronger people than themselves. These latter cases often require complete extractions and are given pentothal as an anaesthetic. The provision of dentures for Rotherham cases is financed by assistance from the patient's approved society and by the Tuberculosis Care Committee; West Riding County Council cases are given assistance at National Health Insurance rates, if the patient comes from that area. During 1947 two patients were supplied with full upper and lower dentures and one with a partial denture.

Details of the work performed by the Dental Officers in 1947 in respect of tuberculous patients are as follow:—

Individuals treated	..	..	..	..	..	..	..	20
Attendances made	..	..	..	..	..	..	..	52
Extractions	Permanent teeth	..	..	..	..	..	..	67
	Temporary teeth	..	..	..	..	..	..	7
Fillings	Permanent teeth	..	..	..	..	..	..	1
	Temporary teeth	..	..	..	..	..	..	—
Anaesthetics	Local	..	..	..	..	..	..	17
	General	..	..	..	..	..	..	4
Other operations	..	..	..	..	..	..	..	32
Patients supplied with dentures	..	..	..	..	..	..	..	3

OAKWOOD HALL SANATORIUM.

Owing to staff shortages the sanatorium continues to function as a 68 bed institution.

No major structural alterations were carried out during the year in the sanatorium buildings but the appearance of the layout was improved by the removal of the temporary huts from the side of the main approach to the wards.

A steam sputum sterilizer had been installed before the end of the year but was awaiting boiler adjustments before being put into use.

The following table shows the percentage bed occupancy of the sanatorium during the year:—

Quarter	Patients from			Total
	Rotherham	Yorkshire W.R.	Other areas	
March	33·4	23·1	5·4	60·9
June	36·7	23·5	4·4	64·6
September	37·0	18·4	2·3	57·7
December	37·0	19·2	3·0	59·2
Total 1947 ..	36·0	20·8	3·8	60·6
Total 1946 ..	29·3	22·5	7·2	59·0

ADMISSIONS AND DISCHARGES.—The following table gives details of the number of patients admitted and discharged during the year from the County Borough, and the several authorities renting beds in the sanatorium:—

Authority	Remaining in 1/1/47	Admitted	Discharged	Died	Remaining in 31/12/47
Rotherham C.B.	35	62	51	7	39
Yorkshire W.R.C.C. ..	17	28	19	6	20
Blackpool C.B.	1	—	—	1	—
Hull C.B.	3	1	2	—	2
Dewsbury C.B.	1	1	—	1	1
Total	57	92	72	15	62

Details of the Rotherham patients treated in the sanatorium during the year are given in the following table:—

Number of patients in hospital.				1/1/47	Admitted	Dis- charged	Died	31/12/47		
Obser- vation cases	Adults	M.	..	2	7	7	—	2		
		F.	..	—	6	4	—	2		
	Children	..	..	2	3	2	—	3
Total				4	16	13	—	7
Pul- monary cases	Adults	M.	..	11	22	19	4	10		
		F.	..	13	20	12	3	18		
	Children	..	..	—	—	—	—	—
Total				24	42	31	7	28
Non- pulmon- ary cases	Adults	M.	..	1	3	4	—	—		
		F.	..	—	—	—	—	—		
	Children	..	..	6	1	3	—	4
Total				7	4	7	—	4
Grand total				..	35	62	51	7	39	

GENERAL TREATMENT.—The general principles of treatment employed have been described in previous reports and remain unaltered.

The liaison arrangements with Sheffield Corporation continue to work smoothly. Chest cases requiring surgical treatment are taken to the City General Hospital and return to the sanatorium after their operation. Bone and joint cases continue to be seen by the Orthopaedic Consultant every few months as in the past. Cases of tuberculous laryngitis or suspected cases are seen by the Ear, Nose and Throat Consultant who visits the sanatorium at monthly intervals.

The occupational therapy classes meet four afternoons each week and most of the patients enjoy these. Less difficulty is now experienced in obtaining the necessary materials for handicrafts.

The library has been well used and is kept up to date by the Corporation Librarian.

TUBERCULOSIS CARE COMMITTEE.

The Committee's schemes of assistance by extra nourishment, clothing, and dentures, have all continued to function during the year. Extra nourishment in the form of milk, eggs, fresh vegetables, and groceries, was granted to two patients and amounted to:—

Milk	...	...	...	...	91½ galls.
Egg grants	...	...	...	...	52
Meat grants	...	...	...	...	52
Grocery and vegetable grants	...	...	...	...	52

Nine grants of assistance to patients were made during the year including financial, bedding, clothing, and underclothing. A grant of £2 per month was made to the Medical Superintendent of the Oakwood Hall Sanatorium towards the cost of entertainments and for the provision of prizes at the whist drives, etc., held for the patients at the sanatorium.

Special grants were made during the Christmas period to persons in receipt of assistance from the Committee and those patients receiving treatment under the Corporation's scheme. The arrangement with the Social Welfare Committee whereby the Tuberculosis Officer's certificate was accepted for grants of extra medical necessities to patients in receipt of assistance by that Committee was continued as in previous years.

Every endeavour was made during the year to develop the Car Park Scheme in order to provide ex-sanatorium patients with light employment. Promise of development was very favourable when the year commenced, as the Corporation, after reviewing the car parking facilities in the town, decided to designate the Fairground in Central Road as a car park. This land, providing ample parking space, is controlled by the Markets Department of the Corporation and the arrangement entered into was that the Care Committee should provide the attendants and re-charge the

cost of their wages, etc., to that Department, who would receive the parking fees collected. The original requirement amounted to 54 hours per week, and this, together with the growth of the Care Committee's requirements, necessitated the employment of two additional car park attendants. At the same time, it was decided that the seven men employed as attendants should work a five-day x 40 hour week.

The scheme commenced on 3rd February, 1947, but owing to the heavy fall of snow which swept all over the country in the following days, it was decided to close down the Fairground on the evening of 5th February. For the next few weeks car parking was at a standstill and it was not until the 17th March that it was possible to re-open the Fairground as a car park. In the meantime the Committee continued to pay the wages of all the men, but the parking receipts were negligible as very few cars were on the road.

The car park at the Fairground, however, was not a success and it had to be closed down. This was done on 28th June and the attendants employed were absorbed into the Care Committee's Car Parks until the review by the Tuberculosis Officer of their physical condition, when two men were found able to resume employment and only one man was replaced, thus reducing the number employed to six.

This continued until December, when a review of the staff was made on similar lines, and the number employed was reduced to four.

Throughout the whole of the year the Care Committee endeavoured, by all means, to keep its employment scheme going; but the bad weather, which affected the parking receipts—so much that not once during the year did they reach the pre-blizzard level—was the cause of a heavy loss being sustained on the year's workings.

The County Borough Council at their May meeting reappointed the Tuberculosis Care Committee as then constituted and substituted the members of the Health Committee for those of the Public Health and Housing Committee, together with those members of voluntary bodies who were actually serving on the Committee. The Chairman of the Committee, Ald. F. Harper, J.P., together with Councillor A. Wilde, were appointed as the representatives of the Care Committee to the meeting of the Health (General Purposes) Sub-Committee when the care proposals under the National Health Service Act were considered. These, in effect, represent a continuance of the Care Committee's work, together with proposals for the extension of the Committee's activities.

During the year the Care Committee honoured its Hon. Secretary, Mr. G. E. Westby, with a presentation in acknowledgment of his services since the inception of the Committee in 1929.

As in past years, the Committee again participated in the Christmas Seal Sale organised by the National Association for the Prevention of Tuberculosis. This effort provided the Committee with sufficient funds to carry out its work.

SECTION VIII

VENEREAL DISEASES.

STAFF.

This remained the same as for the previous year, with the exception that Dr. E. H. Jeanes took over the duties of Venereal Diseases Medical Officer with effect from March 3rd, 1947.

CLINIC SESSIONS.

The Tuesday afternoon session for females was closed down in April of this year, it being considered no longer necessary in view of the declining attendances. This leaves three remaining sessions for women, Thursday afternoons, Friday evenings and Saturday mornings, which are considered to be not only adequate, but, in fact, quite liberal.

The following table gives a summary of the patients attending, the diseases treated, the number of attendances, and the number of cases treated with penicillin, during the past 5 years:—

	1943	1944	1945	1946	1947
Number of persons attending who were suffering from :					
Syphilis	328	328	324	369	366
Soft sore.. .. .	—	—	—	—	—
Gonorrhoea	140	129	160	192	116
Conditions other than venereal	319	300	290	358	248
Totals	787	757	774	919	730
Out-patient attendances :					
To see medical officer ..	6467	6198	5183	5394	3710
For intermediate treatment ..	1639	1201	1376	1709	925
Totals	8106	7399	6559	7103	4635
In-patients :					
Patients admitted to hospital	6	4	11	11	1
Total in-patient days	91	61	106	135	1
Number of patients treated with penicillin	—	—	71	158	252

It will be seen from this table that there has been an all-round decline in the number of patients attending the centre during 1947 as compared with the previous year. The numbers are still, however, almost 50 per cent. higher than in pre-war years. It will be seen, also, that there has been a large reduction in the total attendances during the year. This is, in the main, attributable to newer forms of treatment, particularly with regard to penicillin therapy. The reduction is also partly due to a different system of surveillance of patients who have been treated for gonorrhoea, and also partly due to the abandonment of the hitherto popular douching sessions for females, now no longer considered necessary.

INDIVIDUAL DISEASES.

SYPHILIS.

The following table gives the number of new cases of syphilis dealt with at the clinic in each of the past five years:—

	1943		1944		1945		1946		1947	
	M	F	M	F	M	F	M	F	M	F
Primary	16	2	10	2	19	3	30	6	9	2
Secondary	3	15	3	12	5	4	9	10	16	14
Latent in first year of infection ..	5	13	—	5	1	5	6	10	—	5
All later stages	9	10	9	10	3	7	8	6	7	11
Congenital	4	10	5	5	3	—	3	4	4	3
	37	50	27	34	31	19	56	36	36	35
Totals	87		61		50		92		71	

The incidence of syphilis, locally, still remains fairly high, and is approximately twice that of pre-1939 years. There is, however, a decrease when compared with the 1946 figures, and there is no reason to believe that this decline will not continue. The year 1946 was a "peak" one throughout the country so far as venereal disease was concerned. There was a similar state of affairs after the 1914-1918 war. A peak was reached in 1920 followed by a gradual decline.

There was no importation of venereal disease from overseas during the year under review, with the exception of one case, a soldier who contracted syphilis in Germany and passed the disease on to his wife when returning to this country on leave.

EARLY CASES.

The treatment of early syphilis remains substantially the same as in the previous year. There has been a tendency amongst venereologists recently to use higher doses of penicillin than in the past, but it has not been found necessary to do this so far as the Rotherham cases have been concerned. Early cases in this clinic are given

average total dosages of 4,800,000 units of penicillin oil-wax suspension, given by daily injections of 600,000 units for 8 days. This is followed by systematic courses of arsenic and bismuth injections for an average of 6 months, the injections being given at weekly intervals. There is a remarkably low relapse rate with this regime. The important feature in the treatment is the continuation of the arsenic and bismuth injections for at least three months after the first negative blood reactions are obtained. Relapses are more frequently encountered when this is not done. As observed in the report for the previous year, all cases are treated as out-patient and hospitalization is now unnecessary for early syphilis, with few exceptions.

LATE CASES.

It was decided, from March of this year, to try the effect of penicillin on old-standing cases of syphilis, a therapy not previously employed in the Rotherham clinic. Evidence has been conflicting in the literature with regard to the optimum dosage, duration, and form of injection required to treat old cases of syphilis with this antibiotic, so that an empirical trial was made at this clinic. All the old-standing cases were treated, including tabetics, paretics, other neurological, vascular, visceral and cutaneous types, with dosages ranging from three to 12 million units of penicillin, given by weekly injections of 600,000 units. Arsenic and bismuth injections were continued concurrently with this penicillin. Sixty cases in all were treated, and although it is too early to assess the final results of treatment it can be said that no spectacular results were obtained in any of the cases so treated. Symptoms were undoubtedly improved in all cases, but not more than might be expected by using arsenic and bismuth alone. The serological results were rather disappointing; and these were independent of dosage, there being no better result in cases treated with 12 million units than those receiving three million units. In no cases were the Wasserman and Kahn reactions rendered negative, although the Wasserman titre was reduced in more than half the cases. Future observation may, of course, reveal that penicillin has a delaying effect upon the blood reactions, but nothing up to the time of writing has been adduced to suggest this possibility.

Further investigation is obviously needed, both with regard to time-dosage, age and type of case, and mode of administration. Up to the time of writing it appears that there is no need for the technically difficult administration of penicillin by the spinal route, and therefore no need for hospitalization of these late cases.

PRE-NATAL SYPHILIS.

There were twelve cases of syphilis in pregnant women during the year. In all but two of these, the disease was not discovered until after the sixth month of pregnancy. All these cases were put on intensive penicillin treatment and in only three cases were the babies found to have contracted congenital syphilis, and these occurred only where the mother had received no treatment until the last month of pregnancy. It is regretted that the system of routine blood testing at the ante-natal clinics lapsed during the year. Its importance was fully stressed in the Annual Report for 1943.

TOXIC AND SIDE EFFECTS OF TREATMENT.

There were no cases of arsenical jaundice during the year, but one case of dermatitis occurred from high arsenic dosage which, however, quickly responded to treatment with B.A.L. injections. Skin sensitization to penicillin occurred in three cases, and were manifested by the appearance of urticarial rashes. Symptoms cleared rapidly with the administration of the anti-histamine drug Benadryl. No side effects were observed in babies who received massive doses of penicillin.

GONORRHOEA.

There were 69 new cases of gonorrhoea during the year. This is the lowest number since 1943 when there were 64 new cases, and is almost half the peak figure of 113 in 1946. The following table analyses the cases attending for treatment during 1947:—

	Males	Females	Total
Number of cases on 1st January under treatment or observation	18	4	22
Number of cases removed from register during any previous year who returned during 1947 for treatment or observation of the same infection	6	2	8
New cases in 1947, 1st year of infection	55	9	64
New cases in 1947, later than 1st year of infection	—	5	5
Number of cases dealt with for the first time during the year, known to have received prior treatment for the same infection at another centre	17	—	17
Totals	96	20	116

The table below gives the incidence of new cases attending the clinic during the past five years:—

	1943		1944		1945		1946		1947	
	M	F	M	F	M	F	M	F	M	F
First year of infection	38	20	42	27	79	27	93	19	55	9
Later than 1st year of infection	4	2	1	1	—	—	—	1	—	5
Total cases	42	22	43	28	79	27	93	20	55	14
Total both sexes	64		71		106		113		69	

All the cases of gonorrhoea attending during the year were treated as out-patients, and treatment remained substantially the same as in the previous year, that is, by single injection of penicillin oil-wax suspension (300,000 units), with the addition, in the case of females, of 60 grams sulphathiazole spread over two weeks. Local treatment, i.e., douching and packs in the case of females and irrigation in the case of males, has now ceased to have any place in the therapy of gonorrhoea. All cases of uncomplicated gonorrhoea responded well to the above treatment and no relapses were observed either in males or females. There were no cases of the disease in pregnant women during the year and no cases of gonococcal ophthalmia were recorded.

NON-VENEREAL DISEASES.

The number of cases of non-venereal disease attending the clinic was slightly less than in the previous five years. Of the 248 cases attending, 179 were males and 69 were females. Concerning the nature of these non-venereal conditions they comprise, in descending order of frequency (a) non-specific urethritis (some of which cases may have been late gonococcal but were diagnostically inconclusive), (b) minor ulcerative and skin conditions such as balanitis, herpes, scabies, warts, traumatic ulcers, malignant disease, and septic conditions of the skin, (c) worried patients with no disorders, (d) contacts in whom routine blood tests were performed and were found to be negative, and (e) non-specific leucorrhoea in females. Approximately half of these cases required vigilant treatment of some kind, and this applied particularly to the cases of non-specific urethritis, a condition which is frankly more difficult to eradicate than an early case of gonorrhoea. One case of Reiter's syndrome, for example, was met with during the year which failed to respond to 15,000,000 units of penicillin (sufficient to treat 50 cases of simple gonorrhoea).

SOCIAL ASPECTS.

DEFAULTERS.

The following table summarizes, briefly, the work done with regard to defaulting patients during the year:—

	Males	Females	Total
Number of defaulters written to	110	87	197
Numbers attending as a result of letters	45	35	80
Numbers visited by social workers	31	36	67
Numbers attending as a result of visits	13	12	25

The success of the social workers does not appear to be as great as that resulting from letter writing, but this is accounted for by the fact that visits were paid only to patients not responding to letters, and who were, therefore, the most refractory type of persons.

EX- SERVICE FOLLOW-UPS.

Thirty-one letters were sent to ex-Service personnel known to have contracted venereal disease during military service and who had not had a final test of cure before demobilisation. Of these 31 written to, only 11 attended the clinic for tests of cure. None of the latter were found to require further treatment. The system of notification of these ex-Service personnel to Medical Officers of Health has only been applied by the Army authorities. There has been no follow-up system with regard to demobilized Navy or R.A.F. personnel.

REGULATION 33B.

This regulation, which was made under the Defence (General) Regulations, 1939, and which came into force in November, 1942, expired on December 31st, 1947. It will be recalled that this regulation was introduced as a special wartime measure and gave compulsory powers of medical examination and treatment of any individual cited by two other persons, independently, as being the cause of their venereal infection. This regulation served a useful purpose during wartime, when venereal disease was intensified, but, although there was a need to keep the regulation in force during the transitional period since the end of hostilities, the Minister of Health decided, after careful review, that the further continuance of these powers could not be justified beyond the close of the present year.

The Minister has recognised, however, that a useful indirect result of the regulation has been to afford authorities increased opportunity for tracing contacts and persuading considerable numbers of these contacts voluntarily to undertake treatment. This has been made possible by taking action where one report only has been received under the regulation.

So far as the Rotherham clinic is concerned the loss of legal powers of this regulation is not greatly regretted as they were only used as a last resort; but the system of contact tracing, which has been established during the last four years will continue, and even be extended in scope. As stated in the annual report for 1946, in the experience of the Department the success of the three methods for securing the attendance of contacts are, in descending order, as follows:—

1. The utilisation of the persuasive efforts of the patient in securing the attendance of his or her contact.
2. The personal approach of the social worker.
3. Legal powers under Regulation 33B.

There is an excellent system of contact-tracing liaison between the Rotherham Centre and the West Riding Administrative County Medical Officer.

The following table shows the work done during the period January, 1943, to December, 1947, i.e., during the life of the regulation, and refers to patients residing within the Borough:—

	Males	Females
(1) Total number in respect of whom Form I was received ..	7	41
Number included above transferred from other areas	—	4
(2) Number of cases in (1) in which attempts were made outside the scope of the regulation to persuade the contact to be examined before the latter had been named on a second Form I		
(a) Contacts found	3	24
(b) Contacts examined or already under treatment ..	3	19
(3) Number of those in (1) in respect of whom two or more Forms I were received	—	6
(4) Number of those in (3) (a) who were :		
(a) Found	—	6
(b) Examined after persuasion or already under treatment ..	—	6
(c) Served with Form II	—	3
(d) Examined after service of Form II	—	3
(e) Prosecuted for failure :		
(i) To attend for, and submit to medical examination	—	—
(ii) To submit to and continue treatment	—	1
(f) Transferred to other areas	—	1

SECTION IX

MATERNITY AND CHILD WELFARE.

MIDWIVES.

During 1947, 38 midwives notified their intention to practise within the area of the Local Supervising Authority, and, by virtue of a change of the Rules of the Central Midwives Board which came into operation on 1st October, 1947, a further seven midwives notified their intention to practise as maternity nurses.

Of the latter, five were on the staff of the Rotherham District Nursing Association. This Association, by an arrangement with the Council, take over the nursing of abortions, and, during the puerperium, of domiciliary midwifery cases of suspected infection. The other two midwives were practising in a private nursing home which accepts patients only in the care of registered medical practitioners.

The following table gives the analysis of the midwifery practice within the area during the year:—

Number of maternity cases in the area attended during the year by midwives	Domiciliary cases	Institutional cases	Total
Employed by the Council as :			
midwives	661	1156	1817
maternity nurses	150	—	150
Employed by voluntary associations as :			
midwives	31	—	31
maternity nurses	5	—	5
In private practice as :			
midwives	2	91	93
maternity nurses	23	283	306
Totals—as midwives	694	1247	1941
maternity nurses	178	283	461

There is no change to report in the mode of supervision and no penal action was necessary during the year.

Eight domiciliary and six institutional midwives are qualified to administer analgesics, and twelve sets of apparatus for the administration of analgesics by domiciliary midwives are available.

Three midwives attended courses of instruction in the administration of analgesics on the district under the scheme approved by the Central Midwives Board in May, 1947, and it is hoped to continue such courses until all the district midwives have qualified.

In 79 cases in domiciliary practice, analgesics were administered by midwives.

DISTRICT ANTE-NATAL CLINICS.

There is no change to report in the conduct, scope and staffing of these clinics which are all under the personal direction of the Obstetric Officer.

The following table gives the comparative attendance at the four district ante-natal clinics:—

Centre	Sessions held	New cases attending for the first time			Total number of women attending			Total attendances			Average attendance per session
		Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control	
Ferham House ..	24	210	38	6	239	38	7	353	40	12	16·9
Cranworth Road ..	50	384	54	23	440	54	33	719	62	69	17·0
Greasbrough ..	12	57	10	1	68	14	1	139	17	2	13·2
Thorpe ..	10	14	—	—	16	—	—	38	—	—	3·8
Total ..	96	665	102	30	763	106	41	1249	119	83	15·1

MUNICIPAL GENERAL HOSPITAL.

Details of the attendance at the hospital's ante-natal and post-natal clinics, together with particulars of cases admitted into the maternity ward, will be found in Section V of this report, wherein the work of the Municipal General Hospital is described.

NOTIFICATION OF BIRTHS.

The following table gives the births notified during the year:—

Births notified as having taken place within the area :

From institutions or by doctors :

Live births	..	..	..	..	..	..	1487	
Still births	..	..	..	..	..	..	53	
							<hr/>	1540

By midwives :

Live births	..	..	..	..	..	..	865	
Still births	..	..	..	..	..	..	12	
							<hr/>	877

By parents :

Live births	..	..	..	..	..	..	-
Still births	..	..	..	..	..	..	-	-
							<hr/>	2417
							<hr/>	

From information supplied by the registrars, the following births were not notified :—

Born in institutions or attended by doctors :

Live births	..	..	..	..	..	..	11	
Still births	..	..	..	..	..	..	-
							<hr/>	11

Attended by midwives :

Live births	..	..	..	..	..	..	1	
Still births	..	..	..	..	..	..	-	1
							<hr/>	12
							<hr/>	

HEALTH VISITING.

Staffing was one below establishment at the commencement of the year and there were four resignations and two appointments during the year. There was, therefore, a 25 per cent. deficiency in the health visiting staff at the end of the year. Repeated advertising failed to attract candidates for these vacancies, which is not surprising since, in the national scale of salaries now operating, there is no recognition of the disadvantages which attach to working in the grime and gloom of the industrial areas.

There appears to be only two methods by which staff can be recruited in such areas and that is by the loading of the national scale of salaries in favour of workers in the less salubrious areas—the idea of “dirt money” is not new—or by the launching of a student training scheme under which candidates could be bound to serve the Authority for a set period after qualification.

Such a scheme was under consideration at the end of the year; meanwhile clinic assistants and part-time nurses were used to carry on the ante-natal and child welfare centres which were in no way curtailed during the year but home visiting necessarily had to be cut and for periods certain areas were regarded as vacant and written off the visiting list.

The work of the health visitors, including the health visitor/social worker, is summarised as follows:—

Visits and enquiries in respect of:

Expectant mothers—first visits ...	777	Infant deaths ...	7
Expectant mothers—re-visits ...	241	Home helps ...	236
Still-births ...	26	Medical aid enquiries ...	6
Births—1st visits ...	1834	Crowded houses ...	66
Infants under 1 year ...	6911	Measles ...	479
Infants—1 to 5 years ...	13255	Acute polio-myelitis ...	9
Ineffective visits—under 1 year ...	765	Pneumonia ...	19
Ineffective visits—1 to 5 years ...	1396	Whooping cough ...	159
Premature infants under 3 mths. ...	66	Ophthalmia neonatorum ...	6
Illegitimate children—under 1 yr. ...	224	Tuberculosis ...	503
Illegitimate children—1 to 5 years ...	274	Pemphigus neonatorum ...	1
School entrants ...	414	Mental defectives ...	453
Foster children (Public Health Act, 1936) ...	76	Public lavatories ...	40
Pre-adoption enquiries ...	62	V.D. clinic defaulters ...	18
Adoption of Children (Regulation) Act, 1939 ...	7	Cancer clinic defaulters ...	7
Attendances at Sheffield and District Adoption Committee ...	18	Nuisances reported ...	7
Ill-cared for or verminous children—under 1 year ...	181	Attendances at:	
Ill-cared for or verminous children—1 to 5 years ...	566	Ante-natal clinics ...	138
		Child welfare clinics ...	669
		Clubs ...	199
		Nursery ...	6
		Tuberculosis dispensary ...	87
		Paediatric clinic ...	11
Total half-days spent visiting ...	2,508		
Houses visited ...	23,542		

CHILD WELFARE CENTRES.

This service has been carried on without diminution, staff shortage having been met by dilution with less qualified nurses.

Clinic assistants have been employed to undertake preparation of child welfare centres and the weighing of infants, and part-time nurses have been employed to assist the doctors presiding at the Centres.

Not more than two health visitors have been used at any one session; of these, one has conducted health publicity work and the other has interviewed all the mothers attending the session.

A domiciliary midwife, attending with her patients at the district clinics, has been employed to make out the case histories, and health visitors have been used solely for health publicity work in the ante-natal clinics.

By these means, closure of sessions has been avoided, but recruitment of staff remains the urgent consideration.

The following table is an analysis of the attendances at the Centres during the year:—

Centre	Sessions	New cases		Total children attending		Total attendances		Average attendance per session
		Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	
Ferham House	99	390	46	561	392	3284	1507	48·4
Cranworth Road	100	562	77	810	526	3670	1770	54·4
Greasbrough	33	79	4	113	107	493	410	27·3
Thorpe ...	24	40	8	60	50	290	134	17·6
Canklow ...	49	204	23	260	155	1338	401	35·5
Nursery ...	21	10	26	13	57	87	410	23·7
Total ...	326	1285	184	1817	1287	9162	4632	42·4

INFANTILE MORTALITY.

The following table gives the details concerning infantile mortality :—

CAUSE OF DEATH	Under 1 week	1-2 weeks	2-3 weeks	3-4 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 one year
All causes : certified ..	35	10	1	9	55	25	17	10	1	108
uncertified ..	-	-	-	-	-	-	-	-	-	-
Small-pox	-	-	-	-	-	-	-	-	-	-
Chicken-pox	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	1	-	1
Scarlet-fever	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-	-	-	1	-	-	1
Diphtheria and croup	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	-	-	-	-
Tuberculous meningitis	-	-	-	-	-	-	-	-	-	-
Pulmonary tuberculosis	-	-	-	-	-	-	-	-	-	-
Other tuberculous diseases	-	-	-	-	-	-	-	-	-	-
Meningitis (not tuberculous)	-	-	-	-	-	-	-	-	-	-
Convulsions	1	-	-	-	1	1	-	-	-	2
Laryngitis	-	-	-	-	-	-	-	-	-	-
Bronchitis	-	-	-	-	-	-	4	1	-	5
Pneumonia (all forms)	1	3	-	2	6	7	2	2	-	17
Diarrhoea	-	-	-	-	-	-	-	-	-	-
Enteritis	-	-	-	4	4	7	8	2	-	21
Gastritis	-	-	-	-	-	-	-	-	-	-
Syphilis	-	-	-	-	-	-	-	-	-	-
Rickets	-	-	-	-	-	-	-	-	-	-
Suffocation, overlying	-	-	-	-	-	4	2	1	-	7
Injury at birth	5	1	-	-	6	-	-	-	-	6
Atelectasis	7	-	1	-	8	1	-	1	-	10
Congenital malformations	-	4	-	2	6	3	-	1	-	10
Premature birth	20	2	-	-	22	2	-	-	-	24
Atrophy, debility & marasmus	-	-	-	1	1	-	-	-	-	1
Other causes	1	-	-	-	1	-	-	1	1	3
Totals	35	10	1	9	55	25	17	10	1	108

Nett births in the year :	legitimate infants	1826
	illegitimate infants	82
Nett deaths in the year :	legitimate	98
	illegitimate	10
Infantile mortality rate per 1,000 births :	legitimate	54
	illegitimate	122

HOME HELPS.

This scheme, which was revised during 1946 was expanded during the year. Twelve part-time home helps were employed and attended 109 homes giving a total of 1,807 days service.

The service was limited to maternity cases.

OPHTHALMIC TREATMENT.

No change has taken place in the year under review. The following table gives details of the work undertaken for expectant mothers and for children under five years of age:—

Group			Cases	Refractions attendances	Re-inspections	Spectacles prescribed
Mothers	..	..	—	—	—	—
Children	..	..	70	292	289	51

AURAL TREATMENT.

No change occurred in the arrangements for treatment of aural cases during the year.

184 pre-school cases attended the clinics for treatment and made 621 attendances. 31 pre-school cases were admitted to hospital for operative treatment and spent 38 days in hospital.

ORTHOPAEDIC SCHEME.

There was no change to report in the operation of this scheme and the details of pre-school children attending the orthopaedic clinics are given in the following table:—

Sessions held	New cases		Old cases re-attending		Total children attending		Examinations made	
	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year
5	9	25	—	22	9	47	12	60

228 intermediate treatments were given to these patients at the remedial exercises clinics.

Eight pre-school children were admitted to the Adela Shaw Orthopaedic Hospital, Kirbymoorside, for intern treatment. Five of these children were transferred directly from the Isolation Hospital, Rotherham, after the acute stage of polio-myelitis. One of the latter children remained in the hospital at the end of the year and two children were on the waiting list for admission.

CHIROPODY CLINIC.

The clinic was opened on 12th September, 1947, for the treatment of pre-school and school children. 15 sessions were held during the remainder of the year and 2 pre-school children attended for the treatment of contracted toes.

DENTAL TREATMENT.

The following table gives a summary of the dental work done during the year for expectant and nursing mothers and for children under five years of age, compared with similar work in 1946:—

	Maternity	Child welfare	Total 1947	Total 1946
Individuals treated	348	187	535	396
Attendances made	1251	230	1481	1042
Extractions :				
permanent teeth	1791	—	1791	1555
temporary teeth.. ..	—	316	316	121
Fillings :				
permanent teeth	99	—	99	59
temporary teeth.. ..	—	22	22	23
Anaesthetics :				
local	87	—	87	44
general	386	199	585	487
Other operations	850	25	875	474
Patients supplied with dentures	96	—	96	67

The greatly increased number of expectant mothers accepting dental treatment at the clinics is very gratifying and probably represents about 50 per cent. of all such women who require treatment in the borough. An increasing number accept conservative treatment each year, especially among the younger women, and this probably results from the educative effect of their having had their teeth filled either at school or when in the Forces. The dental profession as a whole is more than fully occupied, and will be for several years to come, in repairing the effects of dental decay and gum troubles, culminating in pyorrhoea; with increasing facilities for research perhaps the day is not so far distant when the ravages of these—the commonest diseases of man—will be controllable by less radical means than are now employed. The 850 other operations treated above relate mainly to scalings and the visits incidental to the fitting of dentures. That 96 patients obtained dentures compared with 67 during 1946 is a regrettable increase, though of these 29 were partial dentures. The mechanical work of these dentures is still sent to Sheffield and it would be a great advance to have a dental technician appointed to the staff. In addition to the above-mentioned dentures, 3 dentures were made for tuberculous patients and two for people referred by the Blind Persons Committee.

Eleven patients were referred for X-ray examination to the Municipal General Hospital during the year and this work is greatly appreciated by the dental staff.

The amount of dental work done for patients referred from the child welfare centres shows some increases over the figures for 1946. Sixty-two more children attended and though one less tooth was filled, 197 more teeth were extracted and 70 more general anaesthetics were administered. The average number of teeth extracted per child is 1.7 and is higher than in 1946, when it was 0.9 per child, and it is to be hoped that this retrograde step is only of a temporary duration. The ill effects of the early loss of deciduous teeth have been mentioned in previous annual reports and a big increase in the amount of conservative work done for these little patients is greatly to be desired. The part played by the health visitors in advising and encouraging mothers to obtain early dental care for their children is very important, for the dentist can only treat, and talk to, those who attend his surgery and has little chance of "converting the unbelievers." These people eventually arrive with a youngster who has a swollen face and who has probably not slept, or allowed his parents to do so, for a couple of nights and obviously this child's first visit to the dentist is less pleasant than one who is brought along for a tiny filling before the decay has got too far. It is rather too much to hope that some scheme of routine inspection of these children can be introduced in the near future. Desirable as this would be it would necessitate an increase in staff or conversely a decrease in other work done by the present staff.

The following table gives details of applications for dentures received from expectant and nursing mothers:—

					Full dentures	Partial dentures
Applications received	..	..	..	..	61	33
Granted free	..	..	..	..	5	1
Granted half-cost	..	..	..	..	2	1
Granted at cost	..	..	..	..	54	31
Approximate cost	..	..	..	..	£222/13/0	£68/12/3
Amount recovered	..	..	..	..	£201/0/6	£65/13/9

ILLEGITIMATE CHILDREN.

CIRCULAR 2866 OF THE MINISTRY OF HEALTH.

The scheme of welfare of the unmarried mother and her child implemented in 1946 functioned throughout the year.

The health visitor/social worker made contact with a further 107 girls, 75 of whom were resident in Rotherham at the time of the birth of the child during 1947, and the remaining 32 who had either moved into Rotherham or allowed their children to be placed in the area on a proposal of adoption.

The worker continued to sit as a member of the Sheffield and District Adoption Committee and performed case work on behalf of all the registered adoption societies placing children within the area.

A grant of sixty pounds was made by the authority to the Sheffield Adoption Committee in the furtherance of their work.

The following analysis refers to Rotherham children born during 1947 and dealt with during the year and defines the social state as on the 31st December, 1947.

A. MOTHER AND CHILD TOGETHER AND:

Parents co-habiting	...	...	...	...	...	...	21
Parents now married, child legitimated	...	...	...	...	...	...	2
Child accepted by husband on marriage	...	...	...	...	...	...	2
With relatives	...	...	...	...	...	...	2
At own home	...	...	...	...	...	...	24
In lodgings	...	...	...	...	...	...	1
Total	...	...	...	...	...	...	52

B. MOTHER AND CHILD SEPARATED AND:

Child adopted	...	...	...	...	...	...	8
Child fostered	...	...	...	...	...	...	2
Total	...	...	...	...	...	...	10

Mother and child removed out of area, records sent out	...	...	...	...	...	...	5
Child died within 14 days of birth	...	...	...	...	...	...	1
Child died over 14 days and under 1 year	...	...	...	...	...	...	6
Stillborn	...	...	...	...	...	...	1
Total	...	...	...	...	...	...	13

The following table refers to mothers and/or children who removed into the area during 1947.

Mother and child together in own home	...	...	...	...	...	5
Mother and child together with relatives	...	...	...	...	...	3
Mother and child together in lodgings	...	...	...	...	...	1
Mother and child together and transferred out of area	...	...	...	...	...	3
Mother and child separated but child with relatives	...	...	...	...	...	2
Mother and child separated and child placed for adoption:—						
(1) By a registered adoption society and						
(a) adoption legalised before the end of the year	...	...	...	...	...	9
(b) adoption not legalised before the end of the year	...	...	...	...	...	2
(c) child removed, unsuitable for adoption	...	...	...	...	...	1
(2) By a "go-between" under the Adoption of Children Regulation Act and						
(a) adoption legalised before the end of the year	...	...	...	...	...	1
(3) By a social welfare committee and						
(a) adoption legalised before the end of the year	...	...	...	...	...	1
(4) By the mother (i.e., the "direct" adoption) and						
(a) adoption legalised before the end of the year	...	...	...	...	...	3
(b) adoption not legalised before the end of the year	...	...	...	...	...	1

Three further adoption orders were obtained during the year in respect of children placed before 1947.

The "direct" adoption—the giving away of a child by its mother without any safeguards of investigation by trained workers that either the child is suitable for adoption or that the adopters are competent, in the intangibles of body, mind, and spirit, to nurture a child—remains the unsatisfactory feature in child adoption.

It has been authoritatively computed that three-quarters of the adoptions in this country are "direct" adoptions and since adoption petitions now coming before the courts total 16,000 a year the number of children placed "at risk" is proportionately high.

The Gammon Committee on Child Adoption has published its report on the need for amending legislation and, in particular, for providing the same protection for children and adopters in the case of adoptions arranged privately as is required by statute in those cases arranged by adoption societies.

Unfortunately, the Home Secretary has stated that there is no likelihood of immediate opportunity for the introduction of amending legislation.

The 12,000 "directly" placed do not represent the whole of the problem for many more are placed privately for whom no application for adoption comes before the courts.

Under existing legislation, therefore, the best means of safeguard are afforded in good case work amongst expectant unmarried mothers by a sympathetic and experienced medico-social worker. Practical help at the time of stress and in the re-orientation of life after confinement can do much to preserve the child-parent relationship and the rehabilitation of the mother.

For those cases in which adoption offers the only solution, the social worker, in contact with the mother and working with a registered adoption society can guarantee that the best possible adoption is made.

It is to be remembered that the new Children's Departments which are to be set up under the Children Bill will not be concerned with this group of children deprived, though they may be in some sense of the word. It will still be the concern of the health authority in their schemes of welfare of mothers and children to provide the special care for unmarried mothers and their children, which children are still, for the most part, the candidates for adoption.

CHILD LIFE PROTECTION (SECTIONS 206-220, PUBLIC HEALTH ACT, 1936).

At the beginning of the year seven children were fostered for reward and registrations during the year included premature infants retained in maternity homes after the discharge of the mother. The total number of children under supervision at the end of the year was twelve.

One death of a foster child was recorded; this occurred in a private maternity home.

76 visits were paid by the infant life protection visitors to children fostered under the Act.

THAMES STREET NURSERY.

This day nursery was continued on a 24-hour basis throughout the year with the approval of the Ministry of Health. Following a visit by an inspector of the Ministry a report was received by the Council and it was suggested that the number of places for children of 0-5 years be reduced from 80 to 40 and that a small milk room and an isolation room be provided. The consideration of the report was deferred pending the result of the negotiations with the Ministry of Works on the question of the purchase or rental of the premises and this was still under negotiation at the end of the year. The question of the purchase of the site of the nursery was also considered at the same time, as the nursery is built on requisitioned land.

Following the same report the Nursery was approved for the training of students to deal with children under the age of two years and the Council was requested to arrange for the students taking the Nursery Board's examination to obtain experience with children over two in their nursery school and nursery classes of the Council. This latter suggestion was considered by the Education Committee who recommended as a temporary measure that the Director of Education be authorised to explore the possibility of the Headmistress of the Thornhill Primary Infants School undertaking the supervision of the Nursery insofar as the educational supervision was concerned for the 2 to 5 year age groups. However, nothing materialised during the year on this question and the students at the nursery could only be trained for the under two years old part of their examination. Later on in the year the same Committee considered the revised regulations for admission to the examination of the National Nursery Examination Board with a view to the possibility of suitable courses being provided at the Rotherham Technical College on the lines laid down in the examination syllabus, but with no result.

The nursery is affiliated to the National Society of Children's Nurseries.

A child welfare session is held fortnightly at the nursery and during the year 21 sessions were held. 87 children under one year of age and 410 children over one year were seen, an average of 23.7 per session.

Early in January, 1947, the Matron resigned her appointment and she was succeeded by Miss J. Lilley, S.R.N., who commenced duty 17th February.

The following table gives details of the working of the nursery during the year:—

Month	Nursery open		Total attendances		Average attendance	
	Days	Nights	Day	Night	Day	Night
January	31	31	639	405	20·61	13·06
February	28	28	449	290	16·03	10·35
March	31	31	489	397	15·77	12·80
April	27	26	523	303	19·37	11·65
May	28	27	610	283	21·78	10·48
June	30	30	643	245	21·43	8·16
July	31	31	604	249	19·48	8·03
August	28	28	503	232	17·96	8·28
September	30	30	782	348	26·06	11·60
October	31	31	922	415	29·74	13·39
November	30	30	699	353	23·30	11·77
December	27	26	458	208	16·96	8·00
	352	349	7321	3728	20·80	10·68

SECTION X

MENTAL DEFICIENCY.

In the following table particulars are given for the year 1947 of mental defectives (A) "subject to be dealt with" by the Local Authority, and (B) who may become "subject to be dealt with" by the Local Authority.

A—Number of cases "subject to be dealt with" :—

1. Under "order" :—	Males	Females	Total
(a) (1) In institutions (excluding cases on licence).			
Under 16 years of age	6	10	16
Aged 16 years and over	30	34	64
(2) On licence from institutions.			
Under 16 years of age	—	1	1
Aged 16 years and over	6	3	9
(b) Under guardianship (including cases on licence).			
Under 16 years of age	—	—	—
Aged 16 years and over	1	3	4
2. In "places of safety."			
Under 16 years of age	—	—	—
Aged 16 years and over	—	—	—
3. Under statutory supervision.	27	19	46
of whom—			
Awaiting removal to an institution	13	5	18
4. Action not yet taken under any one of the above headings ..	12	22	34

B.—Number of cases not at present "subject to be dealt with" but for whom the Local Authority may subsequently become liable

34 44 78

The total number of mental defectives under the supervision of the Department at the end of 1947 was 252 comprising 116 males and 136 females. Of this number 90 were the subject of Orders under the Mental Deficiency Acts, 80 being resident in certified institutions, 10 on licence leave from such institutions, and 4 under Guardianship. The placing of these defectives is shown in tabular form below:—

	Detained under Order		Licence Leave	
	Males	Females	Males	Females
Institutional :				
St. Catherine's, Doncaster ..	34	38	6	3
Whittington Hall, nr. Chesterfield ..	—	5	—	1
Stoke Park Colony, near Bristol ..	2	1	—	—
	36	44	6	4
Guardianship :				
Brighton Guardianship Society ..	—	3	—	—
Brother's Guardianship ..	1	—	—	—
	1	3	—	—

MENTAL DEFECTIVES UNDER ORDER.

STATE INSTITUTIONS.

No new Rotherham cases were admitted to State Institutions during 1947. The position at the end of 1947 was that 6 patients (5 males and 1 female) were detained in Rampton State Institution and one male in the Moss Side State Institution. These cases have exhibited strongly vicious or sexual proclivities but in the event of transfer to other institutions this authority would be responsible for their maintenance.

ADMISSIONS TO CERTIFIED INSTITUTIONS.

During 1947 ten patients (4 males and 6 females) were admitted by Order to certified Institutions—in each case to St. Catherine's Doncaster. In six cases (1 male and 5 females) the Orders for admission were granted following petitions presented under Section 6 of the Mental Deficiency Act 1913; two of the patients admitted (one male and one female) were the subject of Orders made by the Secretary of State under Section 9 of the principal Act; one male was admitted by order of the court under Section 8(1) (b); and the remaining male patient was transferred by Varying Order from guardianship.

LEAVE OF ABSENCE ON LICENCE FROM INSTITUTION.

The year under review was exceptionally successful so far as absence on licence leave from institutions is concerned. Particularly as regards the higher grade defectives, admission to institution should be regarded as a last resort and to that extent indicative of failure—failure on the part of the defective to adapt himself to the social requirements of the community or failure (generally on the part of the parents) to afford that extra supervision which is needed in the case of the mentally defective. Leave of absence on licence provides the means whereby the defective is given a period of trial before re-entering normal life and, when this proves successful, provides that evidence (which is usually infrequent or comparatively obscure) of the success of institutional training.

Six patients, three of each sex, were on licence leave at the end of 1946. During 1947, five more (4 males and 1 female) were granted licence, and one man who had been on licence for two years was discharged from Order by the Board of Control. This left ten patients on licence leave at the year end, all of whom were proving successful, with no occasion arising during the period for the cancellation of a licence.

GUARDIANSHIP.

The only change which occurred so far as patients under Guardianship orders were concerned during 1947 was that one feeble-minded man was transferred to St. Catherine's Institution when he became unsuitable for guardianship.

DEFECTIVES UNDER COMMUNITY CARE.

Nine children were notified by the local education authority under Section 57(3) of the Education Act, 1944, during the year as incapable of receiving education at school. Two of these were admitted to St. Catherine's Institution and the remainder were placed under statutory supervision. No notifications were received under Section 57(5) of the Education Act, 1944.

At the close of the year 46 defectives were under the statutory supervision of the local authority and of these 18 (13 males and 5 females) were awaiting removal to an appropriate institution. The 34 defectives included in the table under heading 4 consists of two groups of defectives—those ascertained defectives resident in either the Municipal General Hospital or The Mount (4 males and 10 females) and those in receipt of outdoor relief from the Social Welfare Committee (8 males and 12 females). All the other defectives were under the voluntary supervision of the Health Department in their own homes.

Domiciliary supervision was largely carried out by the district health visitors but the visiting was necessarily reduced by reason of shortage of staff.

Eight defectives gave birth to children during 1947—two of the mothers being unmarried. One male defective married during the year.

Two defectives died during 1947:—

1. A feeble minded woman of 63 who died from heart failure in The Mount where she had been resident for more than twenty years.
2. An imbecile boy of 13 years who died from "status epilepticus." Accommodation at St. Catherine's was offered to the parents for this boy in 1939 but was refused. At the urgent request of the parents he was put on the waiting list in 1940 but it had not been possible to secure a suitable vacancy before his death.

ST. CATHERINE'S INSTITUTION.

Rotherham, as a constituent member of the South West Yorkshire Joint Board for the Mentally Defective, has an allocation of 65 beds at the St. Catherine's Institution. At the end of 1947, 34 males and 38 females were resident in the colony with a further 6 males and 3 females on licence leave. During the year 10 patients were admitted in spite of the very serious overcrowding which is now an accepted feature of all approved institutions of this kind. Three Rotherham patients died at St. Catherine's, 4 more patients were tried out (successfully) on licence leave, and one who had been on licence was discharged from Order during 1947.

OBSERVATIONS.

For many years I have reported on the inadequacy of institutional (and other) accommodation for the mentally defective. Whilst admission to a colony is a step to be taken as a last resort, the fact remains that in some cases, particularly among the lower grades of deficiency, entry into the custodial care of an institution is the only course open for the benefit of the patient. Added to the actual shortage of buildings for this purpose is the complication of nursing staff deficiencies. Particularly during recent years, the most serious effect has been felt among the lower types of patient—idiots and imbeciles whose deficiency borders on idiocy or who have some superimposed physical condition which necessitates a greater degree of nursing care. With this type of patient there is almost no "turn-over"—very rarely is it possible or desirable for such a patient to be allowed leave of absence on licence. It is in wards for these classes that shortage of nursing staff is most acutely felt and rarely is it possible to admit a new patient. But it is for this class—the helpless defective needing continual attention—that the need for institutional care is most pressing. In the meantime, and until the strain of overcrowding is relieved by building more colonies for defectives and by the recruitment of nursing staff, the lists of patients awaiting admission to an institution continue to grow.

It has been felt that a double duty could be served by the acquisition of premises to be used as hostels in conjunction with institutions. There are patients in most mental deficiency institutions who are sufficiently stabilised to be given a trial on licence leave in preparation for a re-entry into civilian life. Under normal circumstances, such patients would be granted leave of absence on licence from the institution to their own homes. Where, however, the defective either has no home or the conditions at the home are such that it would be undesirable to reintroduce a defective thereto, the unfortunate patient must remain under care at the institution or colony. Working hostels for each sex, providing a temporary home and sufficient supervision for patients on licence, would fill the dual purpose of "half-way house" between the institution and normal life for the high grade patient and of ancillary premises to the institution, releasing accommodation for further admissions to the institution proper.

The latter half of 1947 was greatly occupied in the drafting of "proposals" under Part III and Section 51 of the National Health Service Act. So far as the mental health services were concerned, radical changes were proposed by the Act which have been welcomed by all those interested in this field.

Very broadly, the main changes affecting local health authorities envisaged by the Act were:—

1. The transfer (to Regional Hospital Boards) of liability for the provision of hospital or institutional accommodation and treatment.
2. The transfer (from the poor law authority) of responsibility for initial care and conveyance to hospital of persons of unsound mind.
3. A considerable extension of the power (and duty to the extent that the Minister directs) to make suitable arrangements for the care and after-care of mental defectives or persons suffering from mental illness.

These extensions of functions indicated the desirability of setting up a separate mental health section of the Health Department to undertake all aspects of mental health work. The only branch of local mental work which remains (statutorily) outside the purview of the health authority is the Education Committee's responsibility relating to educationally sub-normal pupils and child guidance. In fact, since the medical officers of the health department also act as medical officers in the school medical services, it has been possible to integrate this education aspect into the comprehensive mental health service. To complete this liaison, the proposals under Section 51 suggested that a lay mental health officer, to be appointed for whole-time organisation and supervision of the mental health services, should also supervise cases coming within the school medical service's ambit, the salary of this officer being apportioned between the health and education authorities on a user basis.

SECTION XI

CLINICAL LABORATORY.

The expansion of the work of the laboratory recorded in previous reports continued throughout the year in all its branches and the highest number of units for specimens examined since the laboratory commenced its work in 1944 was recorded.

No staff changes occurred during the year. Approval was received in April from the Ministry of Health under the Local Government (Qualifications of Medical Officers and Health Visitors) Regulations to allow Dr. Clarke to undertake venereal diseases pathological work. The Corporation, later on in the year, agreed to Dr. Clarke acting as visiting Pathologist to the Montagu Hospital, Mexborough, as that hospital was unable to fill the vacancy on their staff. He commenced these duties on 6th August.

In September, when the approval of the Ministry of Health was received to the Corporation's application under the Defence (General) Regulation 56A, the work of extending the laboratory was commenced. The whole of Block D at the Municipal General Hospital, wherein the laboratory was housed, was taken over and adapted to laboratory purposes. This almost trebled the accommodation and provided additional laboratory rooms, sterile room, dark room, consulting and waiting rooms, together with lavatory accommodation for patients and staff. The alterations were still in progress at the end of the year and certain items of new equipment were still outstanding.

The comparative statistics relating to the specimens examined, expressed in unit values, for the past four years are as follows:—

User	Specimens examined (units)				Percentage of total work performed			
	1944	1945	1946	1947	1944	1945	1946	1947
Municipal General Hospital ...	6494	8928	7897	13117	35.6	26.0	23.3	34.7
Rotherham Hospital ...	2823	9215	10739	14719	15.4	26.8	31.7	39.0
Oakwood Hall Sanatorium ...	1016	1333	916	1264	5.6	3.9	2.7	3.3
Isolation Hospital ...	212	541	1440	648	1.1	1.6	4.2	1.7
Practitioner Service ...	793	4574	5040	5921	4.4	13.3	14.9	15.7
Department of Health ...	4192	7301	7064	1348	23.1	21.2	20.8	3.6
Tuberculosis Dispensary ...	361	323	368	407	1.9	0.9	1.1	1.1
Venereal Diseases Centre ...	1223	1694	265	298	6.8	4.9	0.8	0.8
Rotherham R.D.C. ...	1047	415	147	41	5.8	1.2	0.4	0.1
Maltby U.D.C. ...	53	73	43	—	0.3	0.2	0.1	—
Total ...	18214	34397	33919	37763	100.0	100.0	100.0	100.0

The application of the laboratory service to the various hospitals, clinics, etc., and special aspects of the work during the year, are here summarised.

PUBLIC HEALTH AND CLINICS.

The year was singularly free from epidemics and there was a considerable reduction in the work performed, represented by only 3.6 per cent. of the total work of the laboratory. The examination of samples of milk was continued and some samples of water were examined bacteriologically.

HOSPITALS.

The number of investigations carried out for the hospitals continued to increase and represented 78.7 per cent. of the work performed, the main increases being at the two general hospitals, whilst the work for the Isolation Hospital decreased owing to the low number of cases of infectious diseases admitted.

HAEMOTOLOGY.

This represented 47.1 per cent. of the year's working and the tables on the following pages show an increase of 17.0 per cent. over the two preceding years. The work at the Municipal General Hospital increased from 3,490 units in 1946 to 5,848 units in 1947; whilst at the Rotherham Hospital the figure increased from 4,999 in 1946 to 9,045 in 1947. The re-opening of the laboratory at that hospital, referred to in the last report, was no doubt a definite factor in this increase.

PENICILLIN.

Details of the figures for the dispensing of penicillin have been excluded from the unit values of the work done, but the actual amount dispensed was higher than in 1946.

Details of the examination of specimens expressed in unit values performed for the hospitals and services using the laboratory month by month during the year are given in the following table:—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Per cent.
Total number of specimens examined	645	483	550	537	588	547	641	465	580	598	616	551	6801	—
Unit values of specimens examined from :														
Municipal General Hospital ..	1112	824	1046	1184	989	1054	1586	1085	1151	891	1074	1121	13117	34.7
Rotherham Hospital ..	1416	998	1040	917	1150	743	1415	854	1251	1868	1834	1233	14719	39.0
Oakwood Hall Sanatorium ..	102	103	62	167	120	104	132	133	73	106	66	96	1264	3.3
Isolation Hospital ..	40	116	35	20	20	51	105	119	70	35	25	12	648	1.7
Practitioner Service ..	463	293	563	303	618	479	611	352	693	549	471	526	5921	15.7
Department of Health ..	74	60	126	77	168	336	72	82	84	76	141	52	1348	3.6
Tuberculosis Dispensary ..	26	32	60	44	26	34	38	24	31	34	22	36	407	1.1
Veneral Diseases Centre ..	112	82	18	8	14	12	6	10	10	4	10	12	298	0.8
Rotherham R.D.C. ..	—	5	—	—	—	—	—	—	—	26	—	10	41	0.1
Maltby U.D.C. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	3345	2513	2950	2720	3105	2813	3965	2659	3363	3589	3643	3098	37763	100.0

The growth of the work of the laboratory is shown in the following table which gives the number of specimens examined month by month and their unit values during the years 1944 to 1947 :—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Total number of specimens examined :													
1944	241	289	387	273	419	369	415	396	385	410	486	397	4467
1945	515	548	593	601	625	826	563	661	451	616	638	559	7196
1946	728	578	723	557	697	471	477	413	468	468	459	489	6528
1947	645	483	550	537	588	547	641	465	580	598	616	551	6801
Unit values of specimens examined :													
1944	1180	1192	1636	1097	1420	1447	1770	1519	1475	1724	1963	1791	18214
1945	2093	2600	2812	2801	2934	4027	2780	3069	2013	3126	3294	2848	34397
1946	3794	3086	3629	2869	3492	2464	2370	2197	2469	2537	2591	2421	33919
1947	3345	2513	2950	2720	3105	2813	3965	2659	3363	3589	3643	3098	37763

The types of examinations given in unit values performed for the hospitals and services were as follow :—

Specimens examined from	Haemato-logy	Urine	Bio-chemistry	Bacterio-logy	Diphtheria swabs	Tuber-culosis sputa	G.C. smears	Milk	Mis-cellaneous	Total
Municipal General Hospital	5848	1064	1111	3641	460	963	—	—	30	13117
Rotherham Hospital ..	9045	853	1162	3187	105	358	—	—	9	14719
Oakwood Hall Sanatorium	—	—	14	46	15	1133	—	—	56	1264
Isolation Hospital ..	47	—	8	191	400	2	—	—	—	648
Practitioner Service ..	2850	781	173	636	1125	286	—	—	70	5921
Department of Health ..	11	84	—	503	212	—	—	514	24	1348
Tuberculosis Dispensary ..	—	—	—	—	—	389	—	—	18	407
Veneral Diseases Centre ..	—	—	—	—	—	—	298	—	—	298
Rotherham R.D.C. ..	—	—	—	—	41	—	—	—	—	41
Maltby U.D.C. ..	—	—	—	—	—	—	—	—	—	—
Total	17801	2782	2468	8204	2358	3131	298	514	207	37763
Per cent.	47.1	7.4	6.5	21.7	6.3	8.3	0.8	1.4	0.5	100.0

The following summary gives the types of investigations which have been performed since 1944 expressed in unit values and also as a percentage of the total work of the laboratory.

	Haemato- logy	Urine	Bio- chemistry	Bacterio- logy	Diphtheria swabs	Tuber- culosis sputa	G.C. smears	Milk	Mis- cellaneous	Total
Investigations performed (unit values) :										
1944	6404	1204	1084	1812	4404	1975	1223	—	108	18214
1945	10633	2303	3620	9440	3270	2969	1678	404	80	34397
1946	10435	2774	2386	8488	6112	2421	250	612	441	33919
1947	17801	2782	2468	8204	2358	3131	298	514	207	37763
Percentage of total work :										
1944	35.1	6.6	5.9	10.0	24.3	10.8	6.7	—	0.6	100.0
1945	30.9	6.7	10.5	27.5	9.5	8.6	4.9	1.2	0.2	100.0
1946	30.8	8.2	7.0	25.0	18.0	7.1	0.8	1.8	1.3	100.0
1947	47.1	7.4	6.5	21.7	6.3	8.3	0.8	1.4	0.5	100.0

