[Report 1939] / Medical Officer of Health, Smethwick County Borough.

Contributors

Smethwick (Worcestershire, England). County Borough Council.

Publication/Creation

1939

Persistent URL

https://wellcomecollection.org/works/dvnpa68s

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.







County Borough of Smethwick.

The

Health of the Borough

in

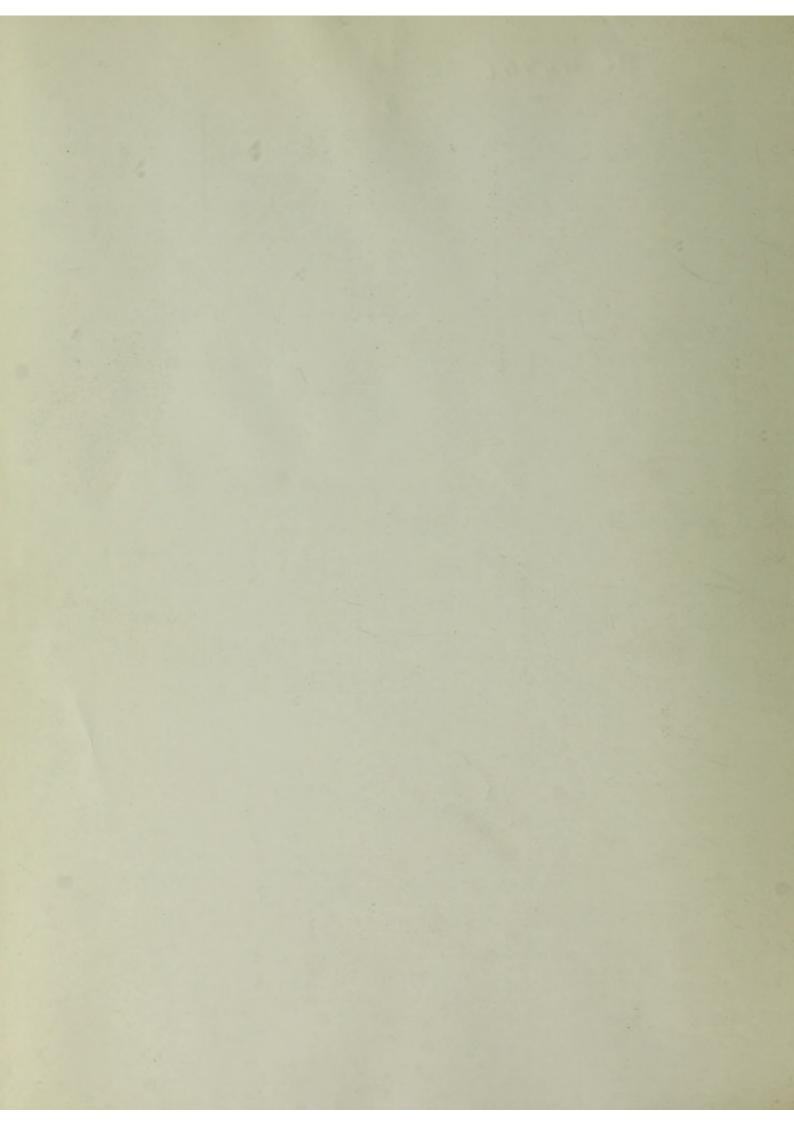
1939.

HUGH PAUL, M.D., D.P.H.,

Medical Officer of Health, Tuberculosis Officer, School Medical Officer and Medical Superintendent of Joint Isolation Hospital and Sanatorium.

JOHN H. WRIGHT, M.S.I.A.,

Chief Sanitary Inspector.



County Borough of Smethwick.

Annual Report of the Medical Officer of Health for the year 1939.

THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE,-

The Minister of Health has wisely ordained that Medical Officers throughout the country, in presenting their annual reports for the year 1939, should confine such reports to a brief summary of events and tendencies and should postpone the presentation of the usual statistics until the war has been won. In accordance with such instructions, I beg to present what must be regarded as an interim report.

Although for only four of the twelve months under review were we actually at war, our main activities for the entire year were devoted to civil defence, and the building up of an organisation to deal with casualties both from air raids and from actual battle. At the moment of writing (August, 1940) this organisation has not been seriously tested, but the experience of other towns in more exposed positions leads one to hope and expect that the foundations of the A.R.P. services have been well and truly laid, and that they will not fail when tested to the utmost.

The effects of the war on the health services has been very varied, and in some respects surprising. Indeed, it is a tragedy that preoccupation with A.R.P. prevents most medical officers of health from studying in greater detail the lessons which might be learned from the dispersal of millions of children into the country, from the wholesale closure of schools for a substantial period, from the black-out in winter time, and from the illogical way in which epidemic diseases have behaved. When victory brings us peace, it may be too late to come to any satisfactory conclusions about these matters.

It is difficult to say what proportion of one's time has had to be devoted to A.R.P., but in my own case it varied from 50 to 75 per cent. Hence much of the ordinary activities of public health have been more or less neglected. School medical work was almost in abeyance for several weeks after the outbreak of war, because of the closure of schools, although strenuous efforts were made by the medical officers and health visitors to maintain touch with the children. The fine weather, however, and the open air life helped to keep the latter well, and I am satisfied that in the main their health is being maintained, if not improved.

Mental deficiency work has been neglected, and few visits have been paid to the homes of persons suffering from this defect.

The ante-natal work, the post-natal work, and the infant welfare activities have been fully maintained. The infant welfare centres, it is true, were closed for a week or two in September, but they were soon re-opened and have been functioning normally ever since.

VITAL STATISTICS

The Smethwick birth rate at 14.5 per 1,000 was almost the lowest on record, and it is sad to note that preliminary figures for 1940 seem to indicate that it will be still lower for 1940. The seriousness of the constantly falling birth rate on the economic life of the country cannot be overstated. The deliberate practice of birth control by the healthy stocks, combined with the free breeding of the types of lowest mentality and physique cannot but have an adverse effect on the quality of our citizens. Add to this the increasing number of stillbirths, many of which I feel are due to deliberate action, and one sees the acute nature of the problem. Not only will the population of this country decline rapidly within the next decade or two, but the age distribution will also alter to our detriment, leaving us in danger of becoming a second-rate nation. The remedy will not wait the coming of victory, unless, indeed, victory is nearer than we anticipate; it is an urgent war matter. The cure is a social one, and stated simply, it is merely one of family allowances. At present a substantial portion of the working classes cannot bring up more than two children without suffering from actual malnutrition in the family. Hence, they feel that they should not bring more children into the world. The country is slowly realising that its greatest assets are its children, and that something must be done to ensure that larger families can be brought up with at least such a minimum standard of life as will give to each and all of them the optimum amount of good nourishing food. This might be done by a very considerable rise in the standard of living, but this method is too slow, and the only safe alternative is the granting of family allowances, as a right, to families with more than two children.

The death rate was, with the exception of 1928, the lowest on record, and it is also pleasing to note that the infant mortality rate at 54 was

lower only on one previous occasion (1937). In spite of the black-out the number of deaths from respiratory diseases has never been lower, and it is particularly satisfactory to be able to record that the death rate from tuberculosis has attained a new low level.

In the short space of 16 years the death rate from tuberculosis in Smethwick has been halved.

The total number of cases of tuberculosis notified has however gone up slightly, but this may at least in part be due to diagnosis at an earlier date.

The tuberculosis service has not been affected by the war. The same sessions have been held by the same doctor, and attendances have been maintained or increased.

INFECTIOUS DISEASES

In spite of our gloomy forebodings, the dispersal of large numbers of children to a new environment in the country did not result in an increase in infectious diseases either in the home town or in the reception areas. Indeed, it is surprising as well as gratifying to note that the incidence of the main infectious diseases was much less than usual.

Scarlet fever declined in incidence once again, the number of cases being little more than half that of the previous year. There were no deaths.

Although there were only 115 cases of diphtheria compared with 183 in 1938, yet this number is 115 too many. Everyone knows, or ought to know, that diphtheria is a preventable disease, and no child feed contract it if the parents are not too lazy or apathetic to take the necessary steps to have their children protected. Ten children, who should be alive now, are dead; they died unnecessarily—from a disease which is easily preventable.

The type of diphtheria prevalent was a rather severe one; the death rate was high.

The incidence of pneumonia declined in 1939.

Although cerebro-spinal fever (spotted fever) is always common in war-time, and although the epidemic in England and Wales has been the most severe of the present century, there was only one case in Smethwick during 1939. In the first seven months of 1940, there were 21 cases, of whom 7 were fatal.

There were no notified cases of food poisoning.

MENTAL DEFICIENCY

On the outbreak of war the preparations for the building of a large colony near Kidderminster for the reception and care of mental defectives was necessarily postponed indefinitely. The City of Birmingham Council, in their usual spirit of helpful co-operation, have agreed to continue for the time being to take our cases in Monyhull, although our agreement with them would normally expire this year.

The Smethwick Council have a total of 81 cases in institutions, of whom 47 are at Monyhull, and 13 at Great Barr. The others are in various institutions throughout the country. In spite of the fact that the fullest possible use is made of the Guardianship clauses of the Act, it is becoming more and more difficult to obtain places in residential institutions for even the most urgent cases.

VENEREAL DISEASES

There is no evidence that the war has caused an increase in the incidence of venereal diseases in Smethwick. Indeed, the number of Smethwick cases dealt with during the year (75) was the lowest for more than a decade.

HEALTH VISITING

In spite of the war the number of visits paid by the health visitors was increased substantially, special attention being paid to nursing mothers. They made approximately 24,000 visits, not including those in connection with the school medical service.

MATERNITY

There were six maternal deaths, of which three occurred in St. Chad's Hospital. One of them was from sepsis.

The scheme for home helps which has been in operation for some years became much more popular during 1939, and 37 mothers (18 in 1938) took advantage of the scheme.

The mothercraft class, which has had such a chequered career during the past few years, died completely in September. It is a pity; it did very useful work, and it will be revived at the earliest possible opportunity, but not, I fear, during the war.

It is very pleasing to be able to record that both ante-natal and postnatal work, not only did not decline in amount or quality during 1939, but was substantially increased. Mr. Chalmers, one of your obstetrical officers, was called to the colours on the outbreak of war, leaving Mr. Lennon to carry on. When it became obvious that the attendances were being maintained, Drs. McLaren and McLeay were each given a proportion of ante-natal work to do, and thus Mr. Lennon was able to do all the post-natal work as well as the bulk of the ante-natal work. The ante-natal clinics are now very heavy, and the average attendances at each of them is over 20.

Since the inception of ante-natal clinics in 1920, the increase in the work has been steady and rapid until in 1935, the position was reached when practically every expectant mother in Smethwick attended an ante-natal clinic. The average attendances for the three years 1935-37 was about 5,000, but on the appointment of a second obstetrical officer in 1926, and a consequent increase in the number of sessions the attendances mounted to 6,226, and last year, in spite of the war, they grew further to 6,739, representing 1,309 individual women, who attended an average of 5 times each.

Dental treatment was provided in 250 cases. Dentures were provided free or at reduced cost where necessary.

The post-natal work continues to develop in spite of the war. A total of 912 attendances was made by 412 mothers, representing 40 per cent. of the total notified births. In 1938 the percentage was 28.

The number of mothers confined in St. Chad's declined owing to the fact that the hospital was emptied in September, and for some weeks no patients were admitted. A total of 391 women entered the hospital. In addition, institutional treatment was given to 108 expectant mothers.

MIDWIVES

The Municipal Midwifery scheme, which came into operation on March 1st, 1937, continued to develop, and more than half of the women who had babies in 1939, were attended by our municipal midwives. Thus, of 1,197 Smethwick births, 1,069 were conducted either by our midwives on the district or in St. Chad's Hospital. The high standard of the work continues to receive commendation from the medical practitioners of the area.

St. Chad's is now a training school for midwives, and is affiliated for the purpose to Loveday Street Maternity Hospital. The latter takes Period I of the training, and St. Chad's Period II. Since the inception of the scheme 3 midwives have been trained and 9 are now in training.

It is disquieting to note a distinct drop in the number of nurses who intend to take up midwifery as a career. This is presumably due to the very natural desire of all nurses to do their utmost to help the national effort, as most of them feel, rightly, that there is an overwhelming demand for fully trained nurses for general hospitals, and they are unwilling to remove themselves from their field of service even temporarily. Taking a long view, however, it is in the national interest

that a certain proportion of these nurses should continue in their training to qualify as midwives, even though they thereby reduce the number of nurses in ordinary wards.

INFANT WELFARE

As stated above, all the infant welfare centres were closed for a short time in September, but were rapidly re-opened, and since then they have continued at the same times as pre-war. There are fourteen weekly sessions, all attended by a doctor.

As might have been expected, however, the attendances have declined at all centres, the decrease being from 37,675 in 1938, to 32,958 in 1939. This decreased attendance has continued during the first half of 1940.

EFFECT OF THE WAR

The question is constantly being asked, what effect our preoccupations with the war effort are having on the health services, and it is not easy to give an answer.

The whole-time medical staff of the department has been reduced by one doctor only, and it now consists of the Medical Officer of Health, the deputy Medical Officer, who is also deputy Medical Superintendent at St. Chad's, a senior assistant who resides at the fever hospital, two lady assistants, and an obstetrical officer and two junior residents at St. Chad's Hospital—a total of eight. There is a whole-time district medical officer who is not included in the above.

The officers in addition to public health work and the care of the municipal hospital, staff the school medical service.

As regards the position of the Medical Officer of Health, about 50 per cent. of my time is now taken up with A.R.P. work. This is considerably less than was the case during the twelve months of 1939, and in the absence of casualty-producing air raids-none of which have occurred up to the time of writing—it will probably decrease still further. This amount of time cannot be given up to A.R.P. work without affecting the general health services, but the bulk of the work has continued as before. There is less detailed supervision of our activities, and the modifications which careful and continued study has in the past been suggesting, appear at more lengthened intervals. At times decisions are more hastily or more speedily arrived at. Considerable relief, however, has resulted from the more infrequent holding of Committee meetings, and the virtual supersession of sub-committees, and the sympathetic restraint on the part of members of the Council in asking for special reports. In addition, a longer working day, evening and week-end work, and curtailed holidays have enabled many more hours of work to be put in.

The deputy medical officer is in control of the E.M.S. services at the hospital, and one of the lady medical officers is in charge of the decontamination work there. The district medical officer administers one of the three first aid posts in the town.

As regards the non-medical staff, the section whose work has suffered most is that of the chief sanitary inspector who has lost just over 50 per cent, of his staff. In spite of the cutting off of housing work, the work of his department as a whole is suffering, and the remedying of defects, especially, takes an inordinately long time.

The clerical and administrative staff have suffered from the loss of many of the officers, male and female, to His Majesty's Forces, and replacements have been difficult to obtain. Nevertheless, an enormous amount of overtime has been very willingly put in and the work has been done.

To sum up, I think it may fairly be stated that in spite of war work the health services have been substantially maintained. In one or two branches, such as mental deficiency and sanitary work, there has been a considerable diminution, but in ante-natal work and in the supervision of school children there has been a notable increase. We all hope that it will be possible in the future to maintain at least the pre-war standard in all branches.

I cannot close without commenting on the one satisfactory feature which the war has brought out, and that is the willingness, amounting to enthusiasm, with which all members of the staff not merely shouldered the extra burden of work, but sought out, and still seek out, means of improving the present standards. For months they have worked abnormally long hours, and have volunteered for extra duty at week-ends, and withal with a cheerfulness and keenness which alone has enabled them to maintain their health. My greatest difficulty has been to persuade them to take sufficient time away from duty to maintain health. They deserve our most sincere thanks.

I should like to express my great gratitude to the members of the Council and my colleagues, the other chief officers, for their ready help and encouragement during a difficult year. It is very doubtful if the townspeople realise the great amount of painstaking, thoughtful and unselfish work which their elected members do on their behalf; only those who work with them day by day throughout the year can visualise the debt the borough owes them. After thirteen years service, I am more than ever convinced that it is a pleasure and a privilege to work for such a Council.

Finally, I should like to thank Alderman Kempton, our enthusiastic Chairman, for his kindly sympathy and ready help, for his tireless energy, and for that consideration for myself and members of the staff that he is always ready and anxious to give.

> I am, Yours faithfully,

> > HUGH PAUL, M.D., D.P.H.
> >
> > Medical Officer of Health.

August, 1940.

Report of the Chief Sanitary Inspector.

SANITARY ADMINISTRATION

In submitting my report on the Sanitary Administration of the Borough for the year 1939, I am unable to point to any important achievement or advance in the realm of environmental sanitation.

The exigencies of the international situation both before and since the outbreak of war have caused serious depletions both in the personnel of my staff and in the availability for routine public health duties of those who remain. Just before war was declared two of the male clerks, V. Lawton and J. Perrins, enlisted in H.M. Forces and immediately afterwards your assistant Sanitary Inspector, H. Herbert, volunteered and was accepted for service in a Hygiene section of the R.A.M.C. I feel sure that members of the Council will be pleased to know that Mr. Herbert has earned steady promotion, and that at the time of writing these notes he holds the rank of Staff-Sergeant, the highest non-commissioned rank attainable in his branch of the service. Staff-Sergeant Herbert was one of that section of the British Expeditionary Force safely evacuated from France.

My staff was further depleted by the loss of my deputy, Mr. W. E. Shaw, who was seconded to the A.R.P. service within a week or two of war being declared.

When to these depletions is added the loss of a substantial proportion of the available time of myself and those members of my staff who remain, members of the Committee will not be surprised to learn that I have been able only to keep going the more urgent and essential services.

In the early months of the year a new and complete survey of the town for the re-ascertainment of overcrowding was undertaken. The information collected and tabulated was more comprehensive than any previously obtained, but the outbreak of war has precluded the possibility of any immediate scheme for the abatement of overcrowding, and so no useful purpose would be served by the inclusion in this report of facts and figures which can have, for the present at least, an academic interest only.

On the instructions of the Ministry of Health, the usual Tables and Summaries will be omitted from this report, and in the following paragraphs only such figures as are necessary to give the Committee some idea of the work which it has been possible to accomplish will be given

SANITARY INSPECTION OF THE AREA

The total number of visits paid to all premises for all purposes was 28,317, and of this number 17,652 were paid by the temporary assistant enumerators engaged on the overcrowding survey. The balance of 10,665 visits compares very unflavourably with the 19,946 visits for 1938. The dwellings inspected on complaint numbered 1,167 and these visits revealed the existence of 2,026 sanitary defects. Altogether the total number of sanitary defects investigated, both as the result of complaints and otherwise, was 2,497 and these were dealt with by the service of appropriate notices.

The total number of notices sent out, including following-up letters, was 2.618.

Only six smoke nuisances were recorded during the year.

INSPECTION AND SUPERVISION OF FOOD

(a) Milk Supply.

Forty samples of milk were examined for bacterial content and 109 for the presence of tubercle bacilli. The number of licences in force to sell specially designated milks in the borough was 45.

(b) Meat and Other Foods.

The total number of animals inspected before, during and after slaughter was 5,465. The percentages of diseased animals were as follows:—

Diseases other than Tuberculosis:-

Cattle	(exclud	ing	cows)	-	-	-	6.81%
Cows	-	-		-	-	-	3.85%
Calves	-	-	-	-	-	-	nil
Sheep	and La	mbs	-	-	-	-	0.24%
Pigs	-	-	-	-	-	-	2.87%

Tuberculosis only :-

Cattle	(excludi	ng	cows)	-	-	-	3.54%
Cows	-	-	-	-	-	-	8.74%
Calves	-	-	-	-	-	-	nil
Sheep	and Lam	bs	-	-	-	-	nil
Pigs	-	-	-	-	-	-	6.55%

(c) Adulteration, etc.

The number of samples of food and drugs submitted for analysis was 219. The percentage of adulteration was 5.02. No unlawful additions of preservatives or colouring matter were discovered.

GENERAL

Slaughterhouses received 1,080 visits, Meat and Food shops 351, Dairies 344, Bakehouses only 21 and Factories 55. Only 50 routine visits were paid under the Housing Acts, and the usual Housing Statistics, although they have been prepared and filed, are not printed in the report.

In conclusion, I wish to thank the Chairman and Members of the Health Committee for their support and forbearance during a difficult year. My grateful thanks are also due to Dr. Paul for his friendly co-operation and for his understanding and help in the numerous difficulties which have beset the work of the department.

The loyalty of my staff has been beyond praise and fully in keeping with the best traditions of the Local Government Service, and in thanking them I wish again to include those who have been temporarily called away to perform sterner tasks.

JOHN H. WRIGHT, Chief Sanitary Inspector.

The Public Health Department, Hales Lane, Smethwick.

20th August, 1940.