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Somerset County Council.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1944

J. F. DAVIDSON,
O.B.E., M.B., Ch.B., D.P.H.,
County Medical Officer of Health.

To the Chairman and Members of the Public Health and Housing Committee,
Somerset County Council.

THE CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my Eighth Annual Report upon the Health Administration of the County. Owing to the present circumstances, this report is reduced in size, and it is, in fact, mainly a summary.

I regret that pressure of work and shortage of staff prevented this report being published at the usual time. This matter of staff difficulties gives us great concern, and, in some sections of the Department, the work has suffered very considerably.

Generally the health statistics for the year are satisfactory, but in certain respects much urgent work will be required to regain our pre-war position.

I am,

Your obedient Servant,

J. F. DAVIDSON,
County Medical Officer of Health.

Taunton.
December, 1945.

CONTENTS

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres): 1,028,992.

Population (1944): 455,140.

Live Births:—Total 8,215; Legitimate 7,571; Illegitimate 644; Still births 221.

Deaths:—Total 5,818; Urban 2,806; Rural 3,012.

Rateable value:—£2,765,528 (1944).

Sum represented by a penny rate:—£11,140 (1944-45); £11,262 (1945-46).

Birth rate:—18.05. Illegitimate births, 7.84 per cent.

Death rate:—12.78.

Deaths under 1 year of age:—305. Rate of infantile mortality:—37.1.

The birth rate is higher than for any period since 1921. Unfortunately the percentage of illegitimate births has also risen greatly. The normal is between 3 and 4 per cent; for 1943 it was 6.46 and for 1944 it was 7.84, double the usual rate.

The death rate is still low, 12.78, but higher than for the previous year, 12.30. The rate of infantile mortality is only 37.1, but it is above the remarkably low figure of 32.85 for 1942.

The chief causes of death were heart diseases (1,525 deaths), cancer and other forms of malignant disease (911 deaths), bronchitis and pneumonia (420 deaths), and tuberculosis (235 deaths).

The essential statistical returns covering births, infantile mortality, and deaths are given in the following Tables from 1 to V.

TABLE I.

Causes of, and Ages at Death during the Year 1944.

CAUSES OF DEATH.	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT						
	All ages.	Under 1 year.	1 and under 5 years	5 and under 15 years	15 and under 45 years	45 and under 65 years	65 and upwards.
Typhoid and paratyphoid fevers	1	0	0	0	1	0	0
Cerebro spinal fever	8	0	2	0	4	1	1
Scarlet fever	0	0	0	0	0	0	0
Whooping cough	13	9	4	0	0	0	0
Diphtheria	3	0	2	1	0	0	0
Tuberculosis of respir. system..	187	1	0	2	111	55	18
Other forms of tuberculosis ...	48	2	7	8	17	11	3
Syphilitic diseases	25	0	0	0	4	11	10
Influenza	70	1	1	2	8	15	43
Measles	1	0	1	0	0	0	0
Acute poliomyelitis and polio-encephalitis	4	0	0	1	2	1	0
Acute inf. encephalitis ...	8	0	2	0	1	3	2
Cancer of buc. cavity & œsoph. (M), uterus (F)	98	0	0	0	4	42	52
Cancer of stomach & duodenum	178	0	0	0	3	62	113
Cancer of breast	121	0	0	0	10	59	52
Cancer of all other sites ...	514	0	0	0	24	188	302
Diabetes	46	0	0	0	6	3	37
Intra-cranial vascular lesions ...	746	0	0	0	9	158	579
Heart disease	1525	0	3	4	37	239	1242
Other diseases of circ. system...	163	1	0	0	2	31	129
Bronchitis	259	10	0	1	3	49	196
Pneumonia	161	27	12	5	10	32	75
Other respiratory disease ...	84	2	1	0	10	27	44
Ulcer of stomach or duodenum	58	0	0	0	7	33	18
Diarrhœa, under 2 years ...	36	34	2	0	0	0	0
Appendicitis	31	0	1	4	6	10	10
Other digestive diseases ...	128	3	1	4	9	36	75
Nephritis	203	0	1	4	16	40	142
Puerperal and post-abort. sepsis	6	0	0	0	6	0	0
Other maternal causes ...	10	0	0	0	9	1	0
Premature birth	80	80	0	0	0	0	0
Congenital malformations, birth injuries, infantile diseases ...	117	103	0	1	8	4	1
Suicide	34	0	0	0	7	17	10
Road traffic accidents	50	0	6	11	14	8	11
Other violent causes	136	14	8	15	32	19	48
All other causes	666	18	3	17	48	80	500
	5818	305	57	80	428	1235	3713

TABLE II.

Causes of Death at all Ages in each District during the Year 1944.

RURAL DISTRICTS.

CAUSES OF DEATH.	Axbridge.	Bathavon.	Bridgwater.	Chard.	Clutton.	Dulverton.	Frome.	Langport.	Long Ashton.	Shepton Mallet.	Taunton.	Wellington.	Wells.	Williton.	Wincanton.	Yeovil.	Total Rural Districts.
Typhoid and paratyphoid fevers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Cerebro spinal fever	0	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	3
Scarlet fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Whooping cough	1	0	1	0	0	0	1	0	0	0	1	1	1	1	0	4	11
Diphtheria	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Tuberculosis of respir. system..	8	5	8	5	9	2	1	8	6	0	6	1	2	5	5	9	80
Other forms of tuberculosis ...	3	1	4	1	0	0	0	1	1	2	3	1	1	0	2	3	23
Syphilitic diseases	2	2	1	1	1	0	0	0	2	0	2	0	0	1	3	1	16
Influenza	1	4	5	1	2	0	3	1	2	0	1	1	2	3	8	1	35
Measles	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Acute poliomyelitis and polio-encephalitis	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	2
Acute inf. encephalitis ...	0	1	1	0	1	0	0	0	1	0	0	0	0	1	1	0	6
Cancer of buc. cavity & œsoph. (M), uterus (F)	6	6	7	4	4	0	2	2	2	1	3	3	2	4	3	0	49
Cancer of stomach & duodenum	7	7	9	4	9	2	3	2	5	4	7	2	3	8	8	8	88
Cancer of breast	10	3	3	2	1	2	4	5	6	5	3	0	2	4	3	9	62
Cancer of all other sites ...	23	28	15	10	23	4	15	15	21	15	22	15	18	16	23	15	278
Diabetes	1	0	0	1	1	0	3	2	3	1	2	1	1	2	2	5	25
Intra-cranial vascular lesions ...	45	34	35	25	29	5	15	20	30	9	30	19	12	19	35	36	398
Heart disease	99	67	62	29	71	14	33	49	75	32	70	26	38	51	56	57	829
Other diseases of circ. system...	10	13	3	2	6	1	7	4	4	3	10	8	2	3	2	5	83
Bronchitis	7	14	10	6	17	4	10	7	13	3	6	3	4	16	5	7	132
Pneumonia	7	7	8	5	2	1	1	4	6	2	4	3	4	8	5	1	68
Other respiratory disease ...	2	3	6	0	2	6	1	3	4	2	7	0	0	4	3	1	44
Ulcer of stomach or duodenum	3	4	2	2	1	0	0	3	3	1	0	2	1	2	3	1	28
Diarrhœa, under 2 years ...	3	0	2	3	0	0	0	1	1	2	2	1	2	0	0	1	18
Appendicitis	3	2	2	0	2	0	1	1	0	0	1	0	0	1	0	1	14
Other digestive diseases ...	4	5	8	3	2	1	1	6	4	2	4	1	0	6	2	3	52
Nephritis	5	9	12	4	8	0	3	7	8	3	13	5	6	3	8	2	96
Puerperal and post-abort. sepsis	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	2
Other maternal causes ...	0	0	0	1	1	0	0	0	0	1	0	0	0	1	0	0	4
Premature birth	8	3	6	2	2	0	1	4	0	2	1	0	2	2	3	2	38
Congenital malformations, birth injuries, infantile diseases ...	9	5	5	1	3	2	2	5	3	4	1	1	2	5	4	4	56
Suicide	0	1	3	0	1	1	0	2	4	1	0	0	1	0	0	0	14
Road traffic accidents	2	0	5	2	1	0	1	2	3	2	5	3	3	0	1	2	32
Other violent causes	12	4	3	2	1	1	4	4	6	2	12	2	2	3	6	7	71
All other causes	41	19	31	29	25	7	14	14	22	16	22	10	5	25	33	39	352
All causes	323	247	258	146	225	53	128	172	235	115	238	109	118	195	225	225	3012

TABLE III.

Causes of Death at all Ages in each District during the Year 1944.

URBAN DISTRICTS.

CAUSES OF DEATH.	Bridgwater.	Burnham.	Chard.	Clevedon.	Crewkerne.	Frome.	Glastonbury.	Ilminster.	Keynsham	Minehead.	Norton-Radstock.	Portishead.	Shepton Mallet.	Street.	Taunton.	Watchet.	Wellington.	Wells.	Weston-super-Mare	Yeovil.	Total Urban Districts.	County Total.
Typhoid and paratyphoid fevers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Cerebro spinal fever	0	0	0	0	0	0	1	0	0	1	1	0	0	0	0	0	0	0	0	2	5	8
Scarlet fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Whooping cough	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	13
Diphtheria	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2	3
Tuberculosis of respir. system..	14	5	3	2	1	3	1	1	2	3	4	3	1	1	23	1	7	4	14	14	107	187
Other forms of tuberculosis ...	7	0	0	0	0	1	1	0	0	1	1	2	0	0	2	0	2	0	5	3	25	48
Syphilitic diseases	2	0	0	0	0	1	0	0	0	2	0	0	0	0	2	0	0	0	2	0	9	25
Influenza	3	3	1	0	0	6	2	4	0	2	1	2	1	0	6	0	0	2	2	0	35	70
Measles	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Acute poliomyelitis and polio-encephalitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	4
Acute inf. encephalitis ...	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	8
Cancer of buc. cavity & œsoph. (M), uterus (F)	7	1	1	4	1	1	1	0	2	1	1	0	0	1	6	1	2	0	11	8	49	98
Cancer of stomach & duodenum	7	3	4	4	1	6	7	0	1	2	7	2	1	4	18	0	2	1	11	9	90	178
Cancer of breast	3	5	2	5	0	2	3	0	1	3	2	0	3	0	10	0	4	0	9	7	59	121
Cancer of all other sites ...	18	9	5	20	2	16	5	1	7	17	9	5	8	5	21	2	9	1	51	25	236	514
Diabetes	1	2	0	2	2	0	1	1	0	1	0	0	0	2	1	1	1	2	3	1	21	46
Intra-cranial vascular lesions ...	37	18	6	14	7	20	5	4	8	17	18	9	10	4	47	4	7	13	70	30	348	746
Heart disease	53	38	11	38	10	32	13	9	15	26	35	10	24	13	107	7	22	20	154	59	696	1525
Other diseases of circ. system...	13	2	3	3	1	4	4	0	0	3	3	2	2	2	11	1	8	1	7	10	80	163
Bronchitis	10	5	3	9	5	4	2	0	8	3	3	1	2	1	12	2	6	6	29	16	127	259
Pneumonia	16	3	4	3	0	7	3	1	1	6	6	2	1	0	14	1	1	3	12	9	93	161
Other respiratory disease ...	3	3	1	4	3	1	0	1	2	0	2	3	1	0	4	0	0	0	8	4	40	84
Ulcer of stomach or duodenum	2	0	0	1	1	3	0	0	0	1	0	2	2	0	5	0	2	1	4	6	30	58
Diarrhœa, under 2 years ...	3	0	1	0	1	1	2	0	0	0	0	1	0	0	4	0	1	0	2	2	18	36
Appendicitis	3	1	0	2	0	1	0	0	1	0	0	0	0	0	6	0	0	0	3	0	17	31
Other digestive diseases ...	6	2	3	5	0	6	2	1	3	3	3	0	4	3	7	1	2	1	19	5	76	128
Nephritis	7	2	0	10	2	9	3	1	0	1	6	1	2	9	11	0	1	10	25	7	107	203
Puerperal and post-abort. sepsis	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2	0	4	6
Other maternal causes ...	3	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	6	10
Premature birth	2	3	0	0	1	1	2	0	1	2	3	1	0	0	6	1	3	2	11	3	42	80
Congenital malformations, birth injuries, infantile diseases ...	10	2	3	1	0	1	1	0	2	1	1	0	1	2	8	0	1	1	15	11	61	117
Suicide	2	0	3	2	2	1	0	0	0	1	1	1	0	0	2	0	0	1	3	1	20	34
Road traffic accidents	2	1	0	1	0	2	0	0	1	0	0	1	0	0	6	0	0	1	2	1	18	50
Other violent causes	5	2	5	2	1	5	0	0	2	5	1	2	2	0	9	3	2	2	11	6	65	136
All other causes	33	16	13	23	8	22	5	5	8	10	6	5	8	5	46	7	13	5	51	25	314	666
All causes — —	272	126	72	155	49	157	66	29	66	112	114	55	73	52	398	32	96	77	538	267	2806	5818

TABLE IV.

Table showing, for each Rural District, the number of Births and Deaths, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

DISTRICT.	Area. Acres.	Births.	Deaths.	Deaths under 1 year.	Population.	Birth Rate.	Death Rate.	Infantile Mortality Rate.
RURAL:—								
1. Axbridge ...	90,551	460	323	23	24,980	18.41	12.93	50.0
2. Bathavon ...	42,106	379	247	13	22,320	16.98	11.07	34.3
3. Bridgwater ...	86,769	368	258	17	19,410	18.96	13.29	46.2
4. Chard ...	54,600	206	146	8	12,600	16.35	11.59	38.8
5. Clutton ...	42,641	339	225	7	17,400	19.48	12.93	20.6
6. Dulverton ...	78,980	69	53	2	4,751	14.52	11.16	29.0
7. Frome ...	51,933	184	128	4	10,220	18.00	12.52	21.7
8. Langport ...	59,407	218	172	11	12,720	17.14	13.52	50.5
9. Long Ashton ...	46,515	441	235	8	22,810	19.33	10.30	18.1
10. Shepton Mallet..	47,777	213	115	10	10,730	19.85	10.72	46.9
11. Taunton ...	70,682	302	238	8	18,280	16.52	13.02	26.5
12. Wellington ...	37,911	131	109	2	3,187	16.00	13.31	15.3
13. Wells ...	57,175	157	118	5	9,992	15.71	11.81	31.8
14. Williton ...	97,364	201	195	7	12,560	16.00	15.53	34.8
15. Wincanton ...	64,540	323	225	8	16,990	19.01	13.24	24.8
16. Yeovil ...	53,495	352	225	13	18,920	18.60	11.89	36.9
Totals of Rural Districts ...	982,446	4,343	3,012	146	242,870	17.88	12.40	33.6

TABLE V.

Table showing, for each Urban District, the number of Births and Deaths, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

DISTRICT.	Area. Acres.	Births.	Deaths.	Deaths under 1 year.	Population.	Birth Rate.	Death Rate.	Infantile Mortality Rate.
URBAN.—								
1. Bridgwater ...	1,677	454	272	19	20,040	22.65	13.57	41.9
2. Burnham ...	2,246	148	126	6	8,327	17.77	15.13	40.5
3. Chard ...	1,030	80	72	4	4,770	16.77	15.09	50.0
4. Clevedon ...	3,296	154	155	1	9,429	16.33	16.44	6.5
5. Crewkerne ...	1,291	70	49	2	3,835	18.25	12.77	28.6
6. Frome ...	1,194	215	157	7	12,000	17.92	13.08	32.6
7. Glastonbury ...	5,019	76	66	6	4,895	15.53	13.48	78.9
8. Ilminster ...	531	40	29	0	2,607	15.34	11.12	0.0
9. Keynsham ...	4,170	128	66	4	7,089	18.06	9.31	31.3
10. Minehead ...	2,816	95	112	4	7,752	12.25	14.45	42.1
11. Norton-Radstock	3,370	222	114	5	11,570	19.19	9.85	22.5
12. Portishead ...	911	72	55	2	3,804	18.93	14.46	27.8
13. Shepton Mallet..	2,278	72	73	3	4,857	14.82	15.03	41.7
14. Street ...	3,069	99	52	2	5,204	19.02	9.99	20.2
15. Taunton ...	2,428	553	398	27	30,470	18.14	13.06	48.8
16. Watchet ...	493	47	32	1	2,372	19.81	13.49	21.3
17. Wellington ...	2,211	118	96	6	6,998	16.86	13.72	50.8
18. Wells ...	1,336	70	77	3	5,841	11.98	13.18	42.9
19. Weston-s.-Mare..	4,923	669	538	32	37,930	17.64	14.18	47.8
20. Yeovil ...	2,257	490	267	25	22,480	21.80	11.88	51.0
Totals of Urban Districts	46,546	3,872	2,806	159	212,270	18.24	13.22	41.1
Administrative County	1,028,992	8,215	5,818	305	455,140	18.05	12.78	37.1
England and Wales, 1944	—	—	—	—	—	17.6	11.6	46.0

Mental Treatment Act, 1930.

The clinics are held regularly at the following centres:—

Name of Clinic.	Started.	Medical Officer.	No. of Sessions.	New cases seen.	Average attendance per Session.
Taunton and Somerset Hospital	April, 1931	Dr. J. Mackay ...	50	88	16.9
Weston-super-Mare Hospital	Dec., 1932	Dr. J. McGarvey ...	23	39	5.0
Bridgwater Health Centre	May, 1938	Dr. J. Mackay ...	24	19	3.5

This Table shows some expansion in this work; it is to be hoped that this trend will be continued.

Blind Persons Acts, 1920 and 1938.

The general work under these Acts is carried out by the Somerset Blind Association on behalf of, and with a grant from, the County Council. This Association also deals with necessitous Blind and their dependents. Six Home Teachers were employed by the County Blind Association during 1944. There are 19 Home Workers under the supervision of the Bristol Royal Blind Asylum Workshops. At the end of 1944 there were 885 persons in the County registered as blind, compared with 895 at the end of 1943. Certification by a medical practitioner with special experience in ophthalmology is required before registration. Where possible we make use of the County Oculist, Dr. I. B. Georgeson, for certification purposes and during 1944 he examined 18 cases, 8 of whom were admitted to the register.

Prevalence and Control over Infectious and other Diseases.

Generally, the Isolation Hospital beds which were available were the same as for the previous year. The cases of notifiable diseases and their distribution are set out in table VI.

The hospital accommodation was found to be adequate for the needs. Staffing difficulties in various hospitals were acute, and this matter gives continual anxiety.

With regard to the individual diseases, the low number of cases of diphtheria (54 cases) as against 111 in 1943 and as against 218 in 1933, is outstanding. It is clear that diphtheria immunisation is now on a scale considerable enough to have an effect on the prevalence of the disease. Scarlet fever showed a considerable prevalence with 1,018 notified cases and the factor of importance here is that not a single death was recorded from this cause. Whooping cough showed moderate prevalence with 1,103 cases and with, unfortunately, 13 deaths. During the year measles declined to 1,320 cases against 5,845 cases in the previous year. Enteric diseases with also dysentery showed a slight rise but there was no serious public health issue in these returns.

Cancer. In November, 1944, the draft scheme for cancer treatment in Somerset was approved with certain reservations by the Ministry of Health.

In summary, the main provisions were: (1) treatment by radiotherapy and, where necessary, in-patient accommodation at the Bristol Royal Hospital and at Kewstoke E.M.S. Hospital so long as facilities were available there; and (2) surgical treatment and the necessary in-patient accommodation at the Bristol and Bath General Hospitals, and (3) that these facilities would be available for all persons in the County who are suffering from cancer.

Certain other local arrangements advanced by the County Council were held back for further discussion and arrangement.

About the same time, co-ordinating machinery was set up in the form of a committee consisting of representatives of the Bristol Royal Hospital and the neighbouring local authorities, thus facilitating the negotiation of uniform charges for the various services, and decisions on matters of organisation.

It must be said that, for various reasons, the progress of this scheme has been tediously slow, but, gradually, it gathers strength, and, in due course, it should be an important unit in the general fight against this dread disease.

NOTIFICATION OF INFECTIOUS DISEASES.

TABLE VI.

	Measles.	Scarlet Fever.	Diphtheria.	Enteric and Paratyphoid Fevers.	Puerperal Fever and Puerperal Pyrexia.	Ophthalmia Neonatorum.	Cerebro-spinal Meningitis.	Dysentery.	Whooping Cough.	Pneumonia.	Acute Poliomyelitis.	Encephalitis Lethargica.
URBAN												
Bridgwater	154	76	2	0	10	13	8	0	25	9	0	0
Burnham	3	19	0	0	0	0	0	0	10	3	2	0
Chard	71	22	1	0	5	2	1	0	37	6	0	0
Clevedon	1	7	0	1	0	0	1	1	8	5	1	0
Crewkerne	87	5	0	0	3	0	0	0	0	0	1	1
Frome	4	16	0	0	3	0	2	0	9	6	0	1
Glastonbury	5	9	0	0	0	0	1	0	43	9	1	0
Ilminster	39	5	2	0	0	0	1	1	18	1	0	0
Keynsham	0	9	2	0	1	0	0	0	99	6	0	1
Minehead	20	8	0	0	0	0	0	0	5	1	0	0
Norton-Radstock	4	24	0	0	1	0	0	0	9	11	0	0
Portishead	1	11	0	0	1	0	0	0	13	2	0	0
Shepton Mallet	7	10	2	0	0	1	1	0	10	4	0	0
Street	12	21	4	0	0	0	0	0	79	2	0	0
Taunton	45	67	13	0	15	1	3	54	48	6	1	0
Watchet	1	0	0	0	0	0	0	0	4	0	0	0
Wellington	9	7	0	0	7	0	0	0	4	0	0	0
Wells	28	5	1	0	2	0	3	0	8	0	0	0
Weston-super-Mare	31	99	5	0	5	4	2	0	70	24	1	1
Yeovil	28	131	0	0	9	1	3	0	22	12	2	0
RURAL												
Axbridge	80	76	7	2	3	1	3	0	44	20	3	0
Bathavon	8	34	1	1	1	0	1	0	24	7	0	0
Bridgwater	80	41	2	0	1	1	3	6	57	4	1	0
Chard	163	32	0	0	1	0	0	0	24	14	0	1
Clutton	15	0	0	0	1	0	0	0	56	7	0	0
Dulverton	8	2	1	0	0	0	0	0	19	18	0	0
Frome	0	20	0	0	1	0	1	0	4	3	0	0
Langport	7	11	1	0	3	0	0	0	16	1	3	0
Long Ashton	11	39	4	2	3	0	2	1	137	11	0	0
Shepton Mallet	48	18	2	0	6	1	1	1	31	4	0	0
Taunton	31	27	3	0	6	0	0	5	13	11	1	0
Wellington	3	24	0	0	0	0	0	0	1	3	0	0
Wells	53	37	0	15	2	0	1	0	21	7	0	0
Williton	79	17	0	0	1	0	0	0	59	0	0	0
Wincanton	160	38	1	1	3	0	3	0	43	12	0	0
Yeovil	24	51	0	0	6	1	0	0	33	11	0	2
Urban Districts	550	551	32	1	62	22	26	56	521	107	9	4
Rural Districts	770	467	22	21	38	4	15	13	582	133	8	3
Administrative County	1320	1018	54	22	100	26	41	69	1103	240	17	7

VENEREAL DISEASES.

The attendances of Somerset cases at the various clinics for the past three years have been as follows:—

Clinic.	New Cases.				Attendances.			
	1942	1943	1944	Increase or decrease during 1944.	1942	1943	1944	Increase or decrease during 1944
Bath	59 (30)	79 (48)	50 (29)	− 29	440	664	930	+266
Bristol	87 (27)	92 (45)	92 (58)	—	910	1,001	1,132	+131
Taunton	47 (25)	92 (37)	75 (44)	− 17	1,348	1,337	1,427	+ 90
Yeovil	78 (34)	141 (80)	139 (81)	− 2	909	998	953	− 45
Bridgwater ...	103 (64)	143 (80)	146(106)	+ 3	772	1,049	1,078	+ 29
Frome	41 (24)	67 (30)	59 (28)	− 8	428	550	358	−192
Minehead	13 (8)	22 (16)	26 (19)	+ 4	85	178	179	+ 1
Weston-super-Mare	64 (43)	83 (63)	111 (75)	+ 28	1,028	1,303	1,699	+396
All Clinics	492(255)	719(399)	698(440)	− 21	5,920	7,080	7,756	+676

The table now distinguishes between the ca ses which are definitely venereal and those non-venereal who attended for investigation and diagnosis, the second group figures being in brackets. It will be seen that the figures show a slight decrease in cases but an increase in attendances. The increases are both for gonorrhœa and for syphilis. In addition 527 military cases were treated.

During the year the following examinations were made:—

Samples.	For Clinics and Hospitals.	For Medical Practitioners.	Total.
Wasserman ...	900	864	1,764
Gonococcus ...	0	18	18
Spirochetes ...	0	1	1
Fixation and other tests ...	337	58	395
	1,237	941	2,178

Contacts and Defaulters. There are no venereal disease Almoners in Somerset. It is doubtful if results would justify their employment in this rural area. The examination of contacts and follow up of defaulters depends upon the discreet use of Health Visitors and the co-operation of the patient and the patient's doctor.

Patients are often unable and seldom willing to give the name of the person who infected them. If this is available, a letter or a Health Visitor is sent, unless the patient is able to persuade the contact to attend the clinic. Family contacts are particularly important in some cases of syphilis. These contacts are usually obtained by the patient's persuasion or that of the private doctor.

Letters, and sometimes Health Visitors, are sent to defaulters but too vigorous a follow up in these cases may defeat its own end by making patients wary of paying the initial visit to the clinic—a visit which normally requires considerable fortitude.

Regulation 33B. has brought the Department many anxieties. Information is usually extremely vague, incomplete and occasionally deliberately misleading. Despite its difficulties and dangers, the regulation has proved of some value.

TUBERCULOSIS.

Year.	Phthisis Death rates.			Other Tuberculous Diseases			Tuberculosis Death-rate.	Deaths in a population of 406,000.	
	Rural.	Urban.	County.	Rural.	Urban.	County.	County.	Phthisis.	All Tuberculosis
1944	0.33	0.50	0.41	0.09	0.12	0.11	0.516	166	210

TABLE VII.

New cases of tuberculosis and deaths from the disease in the County during 1944.

Age Periods.	New cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M	F.	M.	F.	M.	F.	M.	F.
0—1	1	0	0	1	0	1	0	2
1—5	0	1	7	8	0	0	2	5
5—10	5	7	16	13	1	1	8	0
10—15	3	5	7	11				
15—20	27	34	7	8	50	61	9	8
20—25	49	51	4	5				
25—35	86	97	10	12				
35—45	45	47	7	5				
45—55	38	18	2	2	38	17	8	3
55—65	22	11	3	2				
65 and upwards	9	6	1	2	9	9	2	1
Totals	285	277	64	69	98	89	29	19

This table shows there were 101 more pulmonary but 4 fewer non-pulmonary notifications than in the previous year. There were 28 more pulmonary and 8 fewer non-pulmonary deaths. The tuberculosis death rate was slightly higher, *i. e.*, 0.516 for 1944 than for 1943 which was 0.467.

TABLE VIII.

Tuberculosis Notifications and Deaths.

URBAN DISTRICTS.	Number of primary cases notified.		Number of Deaths during the year from Pulmonary Tuberculosis.	Number of Deaths during the year from other varieties of Tuberculosis.	RURAL DISTRICTS.	Number of primary cases notified.		Number of Deaths during the year from Pulmonary Tuberculosis.	Number of Deaths during the year from other varieties of Tuberculosis.
	Pulm.	Non-Pulm.				Pulm.	Non-Pulm.		
Bridgwater	53	13	14	7	Axbridge	23	6	8	3
Burnham	9	10	5	0	Bathavon	26	4	5	1
Chard	6	1	3	0	Bridgwater	29	6	8	4
Clevedon	15	4	2	0	Chard	11	2	5	1
Crewkerne	4	0	1	0	Clutton	16	5	9	0
Frome	8	2	3	1	Dulverton	10	3	2	0
Glastonbury	3	1	1	1	Frome	2	1	1	0
Ilminster	3	0	1	0	Langport	11	1	8	1
Keynsham	5	0	2	0	Long Ashton	21	6	6	1
Minehead	19	4	3	1	Shepton Mallet	9	2	0	2
Norton-Radstock	6	0	4	1	Taunton	31	5	6	3
Portishead	4	1	3	2	Wellington	4	2	1	1
Shepton Mallet	5	1	1	0	Wells	6	1	2	1
Street	3	2	1	0	Williton	43	4	5	0
Taunton	43	14	23	2	Wincanton	11	3	5	2
Watchet	3	2	1	0	Yeovil	24	5	9	3
Wellington	8	3	7	2					
Wells	5	0	4	0					
Weston-s-Mare	53	13	14	5					
Yeovil	30	6	14	3					
Totals	285	77	107	25	Totals	277	56	80	23

TABLE IX.

Admissions to Sanatoria during 1944.

Sanatorium.	Men.	Women.	Children.	Total.
Quantock	97	67	2	166
Chard	11	56	3	70
Taunton	31	15	—	46
Wincanton	23	—	—	23
Compton Bishop	—	—	51	51
Bath Orthopædic Hospital ...	4	4	8	16
,, St. Martin's Hospital...	2	10	—	12
Other non-county beds ...	14	10	6	30
	182	162	70	414

TABLE X.

Cases treated through the County Dispensaries.

Dispensary.	Persons treated at Dispensaries during 1944.		Under treatment at Dispensaries December 31st, 1944.		Total Dispensary Attendances 1944.	Total Persons examined 1944.
	Insured.	Uninsured.	Insured.	Uninsured.		
Bath (County) ...	11	34	8	18	357	146
Bridgwater	390	220	20	38	2,014	640
Bristol	16	24	5	12	375	159
Chard	20	18	13	7	525	165
Clevedon	58	61	28	19	603	160
Frome	11	14	2	4	179	78
Glastonbury	9	3	4	2	234	135
Minehead	73	95	26	45	985	305
Portishead	12	10	1	1	66	28
Radstock	54	37	6	4	213	92
Shepton Mallet ...	3	6	2	2	102	65
Taunton	328	238	133	120	1,877	801
Weston-super-Mare ...	68	82	34	48	1,247	391
Wincanton	0	10	0	1	49	33
Yeovil	25	31	1	11	717	367
	1,078	883	283	332	9,543	3,565
	1,961		615			

Quantock Summer Camp. The Camp was not held this year.

Tuberculosis Allowances Scheme. Up to the end of the year 247 cases have been accepted since the adoption of the Scheme in Somerset on 4th July, 1943. Payment of allowance has ceased, however, in 128 of these cases owing to return to work (38) and for other reasons (90).

Tuberculosis Officer's Clinical Report for 1944.

Dr. Short, County Tuberculosis Officer, has written the following report:—

Our great concern in the past year was to find beds for the increasing number of patients found to be tuberculous on first examination. These numbered 412, or 38 more than in 1943, and the type of case was again more severe than in peace time and 24 more cases than in 1943 already had T.B. + sputum.

Non-pulmonary tuberculosis has kept at much the same level during recent years.

The Dispensaries have been extremely busy, with doctors referring more and more patients for expert diagnosis (186 more than in 1943).

Artificial Pneumothorax treatment has again increased, and it has proved very successful, enabling a number of patients to resume work who would not otherwise be fit to do so.

There were more deaths from pulmonary tuberculosis in 1944 than for many years past, and this must be partly attributed to the delay in obtaining proper treatment for patients who have been discovered early.

The Staff and Voluntary Care Committees have again been most loyal and helpful, and I should like to express my thanks to them for their generous assistance.

Sanatorium or hospital treatment was given to 414 cases. In addition, many open-air shelters were provided, those in actual use on December 31st, 1944, being 33, which is the number of shelters available. Milk, for a period of six or eight weeks was provided in 41 cases, dental treatment for 9 cases, X-ray examinations for 947.

Treatment by the use of artificial pneumothorax has been continued and the cases dealt with are shewn in the following table:—

	At Dispensary or home of patient.	At Institutions.	Total.
Primary inductions	1	8	9
Refills	443	857	1,300

The new cases seen numbered 2,185, and were classified as follows:—

PULMONARY TUBERCULOSIS.	T.B. Negative	207	
	T.B. Positive Stage 1 ...	20	
	T.B. Positive Stage 2 ...	147	
	T.B. Positive Stage 3 ...	38	
		——	412
NON-PULMONARY TUBERCULOSIS.	Bones and Joints ...	15	
	Abdominal	19	
	Other Organs ...	5	
	Peripheral Glands ...	42	
		——	81
Not Tuberculous			1,633
Diagnosis not completed on 31st December, 1944 ...			59
			——
			2,185
			═══

Quantock Sanatorium. The Medical Superintendent, Dr. V. C. Martyn, has furnished the following report:—

The Sanatorium has been open for the reception of 111 cases (66 males and 45 females) throughout the year. During this time 166 cases have been admitted, of whom 97 were males and 69 females. 142 patients were discharged, 81 males and 61 females. One of these cases was not tuberculous. There were also 6 deaths. The average stay for male patients was 236 days and for female patients 239 days. This is an average of 34 weeks for each patient.

Artificial pneumothorax treatment was carried out in all suitable cases. There were 36 inductions, 705 refills for in-patients and 174 for out-patients.

X-ray. 277 films were taken and 402 cases were screened.

6 cases were operated on for Phrenic Evulsion at Minehead Hospital. 9 cases received Sanocrysin treatment. There were 6 aspirations and replacements by air.

RESULTS OF TREATMENT.

Weights.

Increase in weights in Kilos. (1 Kilo. = 2.2 lbs.)

	Less than 6.	*6—12.*	*12 and over.*	*Total.*
Males	39	23	6	68
Females	32	17	4	53

The average gain in weight of 121 patients weighed on discharge = 5.90 kilos.
,, ,, 68 male patients weighed on discharge = 6.27 ,,
,, ,, 53 female patients weighed on discharge = 5.44 ,,
The average loss in weight of 18 patients weighed on discharge = 4.22 ,,

9 patients were not weighed on discharge, including 4 who died.

Working capacity of patients on admission and discharge.

	Full Working Capacity.		*Fit for light work.*		*Unfit for work.*	
	Admission.	Discharge.	Admission.	Discharge.	Admission.	Discharge.
Males ...	0	28	0	13	83	42
Females ...	0	22	0	7	65	36

On admission all patients were unfit for any work. On discharge 33.78 per cent. of all patients were fit for full work; 13.51 per cent. for light work; and 52.70 per cent. were unfit for work.

Classification on admission of patients discharged during 1944.

				Tubercle Bacilli.			
				Positive.		Negative.	
Classification.	M.	F.	Total.	%	M.	F.	M.	F.
Early	36	41	77	52.03	2	2	34	39
Intermediate ...	31	13	44	29.73	20	9	11	4
Advanced	16	11	27	18.24	14	10	2	1

Complications presented by patients were:—Larynx infection, Pleura.

Chard Sanatorium. During the year the cases admitted were 51 pulmonary cases and 19 non-pulmonary (12 female, 7 male).

From the pulmonary wards there were 36 discharged and 7 deaths, from the female surgical ward 11 discharged and 1 death; and from the male surgical ward 7 discharged and 1 death.

X-ray: 174 films were taken and 386 screenings made. Collapse treatment was again used, and was the greatest single aid to treatment. 7 inductions and 554 refills were done during the year.

Compton Bishop Children's Home. During the year 27 boys and 24 girls were admitted, and of these 16 boys and 16 girls were under 10 years of age. The average stay for "definite" (notified) cases was 39 weeks, and for observation cases 20 weeks. The discharges numbered 47, 25 boys and 22 girls, who will be kept under regular supervision at the County Clinics.

TABLE XI.

Quantock Sanatorium.

Duration of Treatment and Condition on Discharge.

		Under 3 months.			3—6 months.			6–12 months.			More than 12 months.			Totals.			Grand Totals.
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Class TB Minus.	Quiescent	2	2	1	4	4	0	19	22	2	0	2	0	25	30	3	58
	Not quiescent	2	0	0	0	0	0	0	1	0	0	0	0	2	1	0	3
	Died in Institution	0	1	0	0	0	0	0	1	0	0	0	0	0	2	0	2
Class TB + Group 1.	Quiescent	0	0	0	0	0	0	2	2	0	0	0	0	2	2	0	4
	Not quiescent	0	0	0	1	0	0	0	1	0	1	0	0	2	1	0	3
	Died in Institution	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class TB + Group 2.	Quiescent	0	1	0	3	0	0	8	5	0	2	0	0	13	6	0	19
	Not quiescent	2	0	0	1	0	0	12	5	0	1	2	0	16	7	0	23
	Died in Institution	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class TB + Group 3.	Quiescent	0	0	0	0	0	0	2	0	0	0	0	0	2	0	0	2
	Not quiescent	2	0	0	1	2	0	6	3	0	4	4	0	13	9	0	22
	Died in Institution	1	0	0	1	1	0	0	0	0	0	0	0	2	1	0	3

In 42 out of 77 men discharged the disease was quiescent = 54.55 per cent. In 38 out of 59 women discharged the disease was quiescent = 64.41 per cent. 6 cases, who had been admitted for observation, were discharged as tuberculous and are included in the above figures. No cases who were at the Sanatorium less than 28 days have been included in the above figures.

MATERNITY AND CHILD WELFARE.

The Midwifery Service. 373 certified midwives notified their intention to practise during the year, 322 working under Committees and 51 independent.

Out of the 224 midwives who worked under the S.C.N.A., 27 resigned and 5 notified for emergency work only, leaving 192 still at work. Of the 41 who notified under independent Associations 9 resigned, leaving 32 still at work. Of the 51 trained midwives working on their own 13 had no midwifery or maternity cases, which left 38 actually at work. 15 worked only as maternity nurse under a medical man. The percentage of 1944 births in the County attended by the nurses as midwives was 55.7.

Summary for all Midwives during the Year.

Cases attended as midwife	4,700
Cases attended as monthly nurse	2,846
Doctor sent for for mother	1,822
Doctor sent for for child	271
Stillbirths	67
Death of mother	8
Death of child	40

The midwives working under Committees attended 3,468 midwifery and 2,002 maternity cases, those working independently 96 midwifery and 844 maternity cases. The Association midwives showed a decrease of 62 midwifery and 130 maternity cases, the independent midwives an increase of 11 midwifery and 424 maternity cases.

One independent midwife had more than 25 midwifery cases. 15 of these midwives had no midwifery cases but between them attended 260 maternity cases, while 13 had no cases at all. The 42 midwives in the Maternity Units attended 1,136 cases. Doctors were called in 1,850 times for the mother and 274 for the child; a percentage of 45.2.

Seven deaths of mothers were recorded during the year in which midwives were in attendance as midwives.

Ante-Natal and Post-Natal Work. Under the ante-natal and post-natal scheme the total numbers of Somerset mothers ante-natally examined and of cases post-natally examined were respectively 1,475 and 179, at a total cost to the County estimated at £506 12s. 0d. The corresponding figures for evacuee women are 351 and 190, at a cost of £172 2s. 6d.

Consultants for Midwifery Scheme. Under the County scheme 71 cases were accepted and dealt with by the three consultant officers.

The vacancy created by the death of the late Dr. Douglas A. Mitchell has been filled by the appointment of Mr. A. Leech-Wilkinson, senior hon. gynæcologist and obstetrician at the Royal United Hospital, Bath.

Assisted Admissions to Maternity Homes or Hospitals. During the year 506 applications were received for assisted admissions to a maternity home or hospital. The County Council accepted responsibility for 277 of these cases, a decrease of 44 over the previous year. The reasons for need of institutional treatment were:—

Actual or anticipated obstetric difficulty	153
Intercurrent disease	19
Housing or social	26
Toxæmia	57
Abortions	22
	277

Treatment:—

(1) Viable pregnancies:		
Normal delivery		63
Medical treatment (normal delivery)		47
Pre-Natal treatment only (returned home)		12
Surgical obstetric treatment:		
Cæsarean	44	
Induction	47	
Forceps	25	
Manipulation	12	
Craniotomy	2	
		130
Post-Natal treatment		3
(2) Non-Viable:		
Spontaneous abortions ...	10	
Surgical	10	
Planned	2	
		22
		277

Results:—

	Mothers.	Babies.
Well	253 ...	201
Fair	10 ...	10
Born at home, later	12 ...	12
Non-Viable ...	— ...	22
Died	2 ...	32
	277	277

Of the above Somerset women 141 were admitted to Bridgwater emergency maternity unit for their confinement.

Dental Scheme for Expectant and Nursing Mothers.

This Scheme operates partly through private dental practitioners and partly through dental clinics staffed by officers of the County Council.

Private Practitioners' Cases. Of the 19 denture cases uncompleted at the end of 1943, 6 were satisfactorily fitted and the patients are making proper use of their dentures; the remaining 13 did not attend for further treatment. During 1944, 52 applications were received.

26 full dentures and 5 part dentures were fitted, and in each case a report has been received from a Medical Officer or Health Visitor that the dentures were satisfactory and in use. In the remaining 21 cases dentures are not completed and the patients are still attending for treatment.

Under the main scheme clinics were held at Glastonbury, Frome and Bridgwater. The work done is shown in brief in the following table:—

	Glastonbury.	Frome.	Bridgwater.
No. of new patients	12	26	22
No. of sessions	23	21	26
No. of attendances for general treatment ...	57	72	59
Extractions	77	136	229
Fillings	15	24	—
Other treatment	12	21	10
No. of attendances for dentures	69	62	105
Impressions	33	28	81
Bites	33	24	18
Try-Ins	35	27	25
Plates inserted	26	23	41
Other treatment	4	3	2
Cases recommended for dentures	6	19	18

Maternal Mortality.

	1918	1928	1938	1939	1940	1941	1942	1943	1944
Puerperal Sepsis ...	8	14	4	3	5	6	3	6	6
Other Accidents and Diseases of Pregnancy & Parturition	20	12	10	1	10	15	16	18	10
Total ...	28	26	14	4	15	21	19	24	16
Rate per 1,000 Births	5.14	4.36	2.59	0.71	2.57	2.72	2.44	3.13	1.90

Puerperal Sepsis.

During the year 106 cases of Puerperal Pyrexia were notified. Arrangements have been made with different Hospitals to take in County cases, and facilities are offered. During 1944 47 cases were so admitted. The special unit at the Taunton Isolation Hospital again was of very great service.

Care of Infants and Children under School Age.

This work is mainly carried out by home visiting through the appointed Infant Visitors, and supervised by the County Superintendent and staff.

(*a*) **Visits and Advice in the Homes.** During the year 6,511 births were referred to the Infant Visitors, 3,693 being in rural and 2,818 in urban areas. The service is a most important part of the scheme.

(*b*) **Infant Welfare Centres.** At the end of 1944 the Centres in the County, exclusive of those at Yeovil, Taunton and Weston-super-Mare which are outside the County Scheme, were the following:—Banwell, Bishop Sutton, Bridgwater, Burnham, Chard, Chew Magna, Chew Stoke, Chewton Mendip, Cleeve, Clevedon, Coleford, Compton Martin, Creech, Crewkerne, Curry Rivel, Dulverton, Farmborough, Faulkland, Frome, Glastonbury, Harptree, Highbridge, High Littleton, Kewstoke, Keynsham, Kilmersdon, Leigh-on-Mendip, Long Ashton, Mells, Midsomer Norton, Minehead, Nailsea, Paulton, Pill, Portishead, Priddy, Radstock, Shepton Beauchamp, Shepton Mallet, Stanton Drew, Street, Timsbury and Tunley, Wellington, Wells, West Hunstpill, Westbury-sub-Mendip, Woolavington, Wraxall, and Yatton.

The Centres at Bridgwater, Midsomer Norton and Radstock are directly controlled by the Council with the valuable assistance of local Committees; and the County Council also make grants towards the expenses of most of the others. Dr. Evans of the County Health Department also holds two small centres at Banwell and Kewstoke. Dr. Yates of the County staff was the Medical Officer for the Timsbury, Chew Magna and Farmborough groups of centres, Dr. Cooke for those at Chewton Mendip, Westbury and Highbridge, and Dr. Denham for Mells and Leigh-on-Mendip.

Bridgwater Infant Welfare Work.

During 1944, the number of births notified in the Borough (including still-births and cases later transferred to other districts) was 877. 19 babies died during the year, a rate of 21.7 deaths per 1,000 births. Number of children on visiting list 1,577; total visits paid to infants 4,659.

Centre. Number of individual children who attended, 753; individual mothers, 338; average attendance per session—children under 1 year 20, 1 to 5 years 8; average attendance per session of mothers, 20; number of attendances—children 2,568, mothers 1,960; number of medical consultations for infants, 1,976; for women (excluding ante-natal), 320; sessions held 98 The medical work was carried out by Dr. Halliday. No regular ante-natal examinations are now carried out at this centre, but 21 women not covered by the County scheme presented themselves for advice and were seen, making in all 37 attendances. The figures show a decrease in the amount of work undertaken by the Centre, due mainly to the return of many evacuees, and other mothers having gone out to work their children are seen at the wartime nurseries.

Radstock and Midsomer Norton Infant Welfare Centres.

These centres are managed by the County Council with voluntary assistance. Sessions are held twice monthly in each centre, *i.e.*, at the Victoria Hall, Radstock, and the Women's Institute Hut, Welton, Midsomer Norton. Medical consultations are held alternate sessions and educational programmes are arranged for intermediate dates. Dr. Hilda Ashworth, a local practitioner, acts as Medical Officer, attending once a month. The appointed Infant Visitors (the district nurses) attend and the work is carried on in direct relation to the existing Infant Welfare schemes.

The figures for these centres are as follows:—

	Radstock.	Midsomer Norton.
Sessions held	24	22
Individual children who attended	255	269
Individual mothers who attended	200	197
Average fortnightly attendance of children { under 1 year...	48	12
Average fortnightly attendance of children { 1—5 years ...	26	75
Average fortnightly attendance of mothers	—	73
Number of attendances of children { under 1 year	1,154	262
Number of attendances of children { 1—5 years	630	1,653
Number of attendances of mothers	—	1,619
Number of medical consultations { children	265	205
Number of medical consultations { mothers		—
Number of individual children attending centre born in 1944	78	39
Number of individual children attending centre born previous to 1944	177	230
Number of infants attending for the *first time* during 1944:—		
Under 1 year on first attendance	97	61
Aged 1—5 years on first attendance	30	19

Banwell and Kewstoke Infant Welfare Centres.

	Banwell.	Kewstoke.
Sessions held	11	10
Attendances of children under 1 year	207	58
New cases under 1 year	36	15
Attendances of children 1—5 years	209	125
New cases 1—5 years	22	7

(*c*) **Treatment and Supervision of Special and Abnormal Children.** Infant Visitors are encouraged to notify children showing any abnormality or needing extra help, and in previous years extra nourishment grants (Maltoline and Iron) have been extensively used and follow-up enquiries regularly made. Owing to pressure of clerical work and also to the fact that far fewer children need extra nourishment grants from this department, there is not much to report under this section.

Enquiries and correspondence can be grouped under the following heads:—Orthopædic conditions 178, Oculist 53, Blind 3, Ear, Nose and Throat 27. Needing special care owing to ignorance or neglect 44. Mental defects 15. Various 26. Extra nourishment needed and given 30.

The Orthopædic heading includes slight postural defects which may be improved by simple advice, and also surgical conditions treated under the Orthopædic Scheme where the Infant Visitor is kept informed, so that in her visiting she may take an intelligent interest and co-operate in any treatment necessary.

(*d*) **Baby Hospital, Bridgwater.** The following is a summary of the year's work:—Number in Ward, January 1st, 5; admitted during 1944, 32; total 37. The reasons for admission were, as before, mainly nutritional difficulties and prematurity. Average length of stay of cases discharged in 1944—10 weeks. 24 made satisfactory improvement, 1 showed no improvement, and 9 died.

Ophthalmia Neonatorum.

During 1944, 30 cases were notified. Of these 8 cases were sent to hospital. The distribution of the cases is shown in Table VI. All the cases in which treatment was completed showed vision unimpaired at the time of the report.

Birth Control.

During the year the number of applications received by Dr. Halliday from various sources for advice and assistance was 25. These cases were all referred to clinics or to private doctors.

Care of Premature Infants and of Illegitimate Children.

Facilities for the care of premature or immature infants are:—

(1) Small 8-cot ward at Mary Stanley Home, Bridgwater, also used for difficult feeding cases and mal-nourished infants under 1 year; rarely used for older children up to 2 years.

(2) Immature infants born in maternity homes or hospitals and unfit to return home with their mothers are either transferred to Bridgwater or their maintenance and treatment in hospital is paid for by the County Council on request.

47 neo-natal deaths due to prematurity occurred in 1944.
31 of these died in hospital or nursing home.
16 of these died in their own homes.

The responsibility for the care of illegitimate children was placed on my department in September, 1944, and the work is being dealt with by the provision of residential nurseries for infants, of post-natal hostels for mothers and children, and by individual investigation of each case and rehabilitation whenever possible.

Nursing and Maternity Homes.

At the end of the year the number of Homes on the Register was 53. They were all visited from time to time by Dr. Halliday or Miss Nobes to see that the premises were in order and the requirements of the County Council complied with as regards management.

Child Life Protection.

The children on our Register at the end of 1944 numbered 282, and as regards methods of payment may be grouped as follows:—Weekly payments 155, monthly payments 3, single lump sum payment 0, otherwise paid for 10, not stated 110.

The number of foster mothers with one child only is 102, with two children—18, with three children—3, with four children—4, with over four children—11.

The foster mothers who run a regular baby home are therefore few, and those with more than 4 infants in their care at the end of 1944 resided one each at Congresbury (20 children), Brympton (15), Ashbrittle (12) (authorised for 15), Milborne Port (13), Galhampton (13), Trull (11), Wedmore (9), Wellington (9), Bridgwater (7), Crewkerne (5), and Huntspill (5).

Residential Nurseries.

Seven Nurseries were carried on by the County Council, mainly for evacuee children but also taking some local infants. In addition, three Nurseries evacuated into the County were administered by the County Council.

There are also 13 Nurseries in the County, mostly transferred from other areas, which are private or under various local bodies and not supervised by the County Council.

During the year two Nurseries at Martock and Yarlington were taken over by the Public Health Department from Public Assistance.

Day Nurseries.

At the end of 1944 there were thirteen such Nurseries. Four were for children 2–5 years only, at Frome, Clevedon, Wedmore and Dulverton; and nine for children 0–5 at Bridgwater (3), Chard, Clevedon, Keynsham, Paulton, Street and Wells.

ORTHOPÆDIC SCHEME.

The County Scheme, and the results of working during 1944, are described in considerable detail in my report for 1944 as School Medical Officer.

WATER SUPPLIES.

No serious shortage was reported during the year except in the Yeovil area. There were certain difficulties in connection with reduced pressure in the mains and burst pipes due to the severe frost towards the end of the year.

Few schemes of any size were carried out except in cases of emergency owing to war time difficulties.

Improvements to water services were as follows:—

Urban Areas.

BRIDGWATER. Additions to purification system.

GLASTONBURY. Provision of chlorinating plant to low level supply. Augmentation of supply to West Pennard and Baltonsborough parishes (Wells R.D.C.) through the Borough's mains from the North Wootton source (Wells R.D.C.). Consultant engaged to report on the present system and post-war needs.

MINEHEAD. A new supply provided from Higher Moor to the Woodcombe district in substitution of old supply found unsatisfactory.

STREET. New chlorination plant installed at the source of the town's supply and the replacement of a 3in. main by one of 6in. diameter between the high and low level reservoir. A new pumping unit also provided.

YEOVIL. Owing to a serious insufficiency due to a prolonged dry period the supply was augmented from a private borehole in the Bunford area. A new borehole is being sunk at Cattistock.

Rural Areas.

AXBRIDGE. Post-war plans under consideration.

BRIDGWATER. The Nether Stowey supply was improved by the laying of Service pipes.

CHARD. Completion of the scheme regarding the augmentation of the Regional Water Scheme. This comprised the sinking of a borehole at Combe St. Nicholas, the laying of mains to the Dommett reservoir and to a new 50,000 gallon reservoir at Combe Beacon.

DULVERTON. Scheme prepared for Exford.

LONG ASHTON. Negotiations with Bristol Waterworks Company for extension of their mains to improve the supplies to Abbots Leigh, Backwell, Barrow Gurney, Nailsea and Dundry. Scheme under consideration to extend the Yatton supply to Kingston Seymour.

SHEPTON MALLET. The supply and control of the Ditcheat system was improved by the laying of 900 yards of 4in. pipe from the source to the storage reservoir at Milton Hill and a similar length of main between Longhill Farm and Ditcheat reservoir.

TAUNTON. A connection made to the Bridgwater Rural District Council's mains to augment the supply to the lower part of the parish of Stoke St. Gregory. Consideration being given to the provision of piped water supplies to certain areas.

WELLINGTON. Post-war plans under consideration to provide piped water supplies to those parts of the district without a sufficient supply.

WELLS. A fourteen days' test carried out at the Council's springs at Priddy.

WILLITON. Following the failure of a private supply to the village of Monksilver, an emergency main service was laid on. A more permanent scheme for this village under consideration. The supply to Timberscombe village augmented and made abundant.

WINCANTON. Chlorination plant installed at Castle Cary waterworks. Additional spring connected to Charlton Musgrove to augment the supply. The source of supply to Milborne Port and Templecombe developed, materially increasing the yield. A new source located at Combe Bottom, Penselwood, and made ready for connection to this system when required.

YEOVIL. An emergency scheme to meet a shortage at South Petherton came into operation during the year.

The "Rural Water Supplies and Sewerage Act, 1944" came into force during the year. This Act provides for government contributions towards the expenses incurred by a local authority. after the passing of the Act, in providing a supply or improving an existing supply of water in a rural locality. Where such contribution is made the County Council must also give financial assistance, the amount to be agreed upon with the local authority. All schemes must be submitted to the County Council for their observations before they are submitted to the Ministry

of Health. Any expenses incurred by the provision of parish schemes must now be considered as general expenses. It is hoped that the contributions from the Government will be generous, as the cost of providing piped supplies in rural areas is exceedingly heavy.

A Government White Paper entitled "A National Water Policy" was also received. Part I foreshadows legislation setting up regional water advisory committees with statutory powers. Such committees would comprise representatives of local authorities and water undertakers. Their main duty would be to collect information concerning existing and potential sources of supply, the estimating of future requirements, the co-ordinating of resources and the formation of joint boards.

Part II deals with the establishment of River Boards in England and Wales, twenty-nine in all. The duties of such Boards would be to take over the land drainage functions of existing catchment boards and the functions of those authorities responsible for the prevention of water pollution. If the existing law was strengthened it is doubtful if such changes would be necessary.

RIVER POLLUTION AND SEWAGE DISPOSAL.

The labour and materials shortage permitted only the maintenance of Sewage Disposal Works being carried out during the year, plus a little reconditioning. In the Taunton Rural and Wellington Urban districts purification plants were increased in size to cope with the increased inflow and to prevent gross pollution. The disposal plants in many instances are in urgent need of attention; some are beyond repair and will have to be replaced by new and larger works. Many have been unavoidably overloaded due to wartime conditions and reconditioning will be necessary.

Improvements to works carried out during the year by the various authorities and the steps taken towards the improvement of sewerage generally are as follows:—

Urban Areas.

BRIDGWATER. Survey of present sewerage system in progress with a view to the provision of disposal works.

CHARD. Repairs to damaged plant carried out.

CREWKETNE. Consultant engaged to prepare a scheme for new works to the eastern outfall.

GLASTONBURY. Consultant to report on sewerage generally in view of post-war proposals.

FROME. The provision of new media to all the percolating filters completed.

ILMINSTER. Sewage ejector repaired.

PORTISHEAD. Extensive repairs to sewerage system being completed.

WELLINGTON. The disposal works at Mitchell's Pool have been reconstructed, enlarged and modernised due to increased volume of sewage to be dealt with and to prevent gross pollution of the stream. These works can now deal with any new developments in the Pyles Thorne area of the town.

WELLS. Plans completed for new disposal works at a cost of £48,000. The work to be put in hand as soon as possible.

YEOVIL. Reconditioning of existing works carried out in an endeavour to improve the effluent. Plans for new works being considered.

Rural Areas.

AXBRIDGE. Post-war proposals under consideration.

BRIDGWATER. Consultants surveying the area with a view to post-war needs.

TAUNTON. Post-war needs of the whole area with regard to sewerage under review. The disposal works taking the sewage from Norton Fitzwarren and the surrounding area doubled in size to meet the increased flow.

WELLINGTON. Consideration being given to the post-war needs of the district.

WELLS. Survey of district in being with a view to sewerage needs.

WINCANTON. Repairs to the Henstridge works carried out.

With regard to river pollution, constant supervision has been maintained during the year and routine inspections carried out. A few complaints were received and dealt with. The major cases were as follows:—

RIVER AXE. This river suffered from one of the worst pollutions in the County. It was of a constant nature. The Ministry of Health would not give the County Council leave to prosecute the offenders owing to the difficulty the latter had in obtaining suitable treatment apparatus. As the labour and material market improves no doubt the plant will be forthcoming without further delay.

RIVER TONE. There was a little pollution in the Creech St. Michael area but not of a serious nature. Complaints were also received concerning the state of the river in the Athelney area. The cause of the trouble was found and dealt with. Generally speaking the condition of the River Tone is so near the danger limit that any adverse changes, such as a prolonged drought or limited pollution, is liable to affect its equilibrium.

RIVER FROME. There was a loss of fish life in the river in the summer. On investigation the conclusion was reached that it was due to the stirring up of the river owing to a sudden and violent thunderstorm.

RIVER YEO. This river became fouled through the inefficiency of the disposal works of the Yeovil Corporation. They have been overloaded for a considerable time and are worn out. Some miles down the stream at Yeovilton the river was found to be in an offensive state. Steps have been taken to make the works as efficient as possible pending the preparation of plans for the provision of entirely new works. The completion of the proposed works will take some time in view of labour and material difficulties.

During the year the Rural Water Supplies and Sewerage Act, 1944, came into being. This Act provides for contributions by the Government and County Council towards approved schemes submitted by local authorities in making adequate provision for the sewerage or the disposal of sewage, of a rural locality. Contributions hinge on the need for such schemes following the laying of piped water supplies in the locality whether before or after the passing of the Act. The Act makes any expenses incurred in providing sewerage a general district charge.

HOUSING.

A few houses were completed under the Housing of Agricultural Workers Wartime Emergency Programme, but, generally speaking, wartime restrictions prevented house building of any consequence. Owing to the high rent fixed for the agricultural workers' cottages, it is unlikely that they will all be occupied by this class of workman. This goes to show the

economic situation. Many properties are suffering from the lack of attention due to the insufficiency of labour and materials. Unfortunately a good number will have deteriorated to such an extent as to be beyond repair.

The tendency of Government post-war policy appears to be the concentration of labour and materials on new houses. Whilst the need and urgency of such dwellings is obvious, the necessary repairs that existing houses call for must not be lost sight of, if they are to be maintained in a state fit for human habitation and free from conditions prejudicial to the health of the people. It is not in the best interests of all concerned to put up new buildings and neglect the old. It is to be hoped that a percentage of the labour and materials available will be allotted to the repair of existing houses. In one rural area it is estimated that 200 houses are beyond repair, which gives an indication of the serious situation due to maintenance neglect.

Overcrowding is declining but still exists to a serious degree in some parts of the County, mainly in the towns, although one rural authority has 50 cases. A good deal of it is due to the accommodating of war workers and evacuees. I can foresee, however, that until more houses are available the early post-war years will show little improvement, with newly married couples living in with their parents.

Slum clearance, the demolition of unfit houses, and the re-housing of the occupants, will take time in view of the long waiting lists of the local authorities for new houses.

A considerable number of unfit houses which were empty and registered for demolition before the war, are now occupied under licence, and some small chalets normally for temporary summer use are being lived in the whole year round.

As an indication of the need for new houses, one rural authority has 870 applicants for new houses on their file, and an urban over 1,000 applicants, whilst another urban district requires 360 houses to meet slum clearance needs alone. The position is serious and urgent.

During the year, local authorities have been considering and preparing their post-war plans. In most instances sites have been secured for their first year building programme, a good many have acquired ground for the second year, whilst some have been able to arrange for land and formulate their plans on a long term policy ranging from five to ten years.

Following a circular from the Ministry of Health in conjunction with the Ministry of Works, groups of authorities have been formed in order to make use of the personnel and equipment of large Government contractors, who have been engaged on war work, to prepare housing sites, viz., the making of roads, laying of sewers and water mains. Under this scheme housing sites must not be less than five acres. In a few cases a start on individual sites has been made.

I earnestly hope that sufficient labour is made available to those authorities whose sites are less than five acres, where the housing needs are no less urgent.

During the year the report of the Sub-Committee of the Central Housing Advisory Committee, under the chairmanship of Sir Arthur Hobhouse, was published. This was followed by Circular 64/44 from the Ministry of Health in which the Minister fully accepted the recommendations made. The "Hobhouse Report" is a most comprehensive survey of housing in the rural areas of England and Wales. If gives a pre-war history of legislation and the activities of the rural authorities in the various counties, up to the beginning of the war. The situation is unfolded and it makes many recommendations which if conscientiously carried into effect will bring the rural housing standard up to a proper level of fitness within a reasonable time (labour and materials permitting). Two of the main recommendations are: (1) the establishment of Joint County Committees consisting of representatives of Rural District Councils and of the County

Council, in its Health and Housing capacity. This Committee's principal function is the planning of post-war housing standards and programmes; and (2) the immediate carrying out of a comprehensive survey of housing conditions in rural areas. Such houses will fall into one of the following five categories. (1) Satisfactory in all respects. (2) Minor defects. (3) Requiring repair, structural alteration or improvement. (4) Appropriate for reconditioning under the Housing (Rural Workers) Acts. (5) Unfit for habitation and beyond repair at a reasonable expense. Such a classification is bound to prove most useful to local authorities and the officers concerned in formulating plans for future housing needs.

It is also recommended that comprehensive housing surveys of the whole rural area take place at least once in five years.

Housing (Rural Workers) Acts. Grants of £100 each were approved on five houses during the year. The wartime restriction that houses receiving assistance under the Acts can only be occupied by farm workers still applies, also that any proposals must show new and increased accommodation.

The "Hobhouse Report" recommends that consideration be given to increasing the grants. This, if put into effect, would not only make the provisions of the Acts more attractive to owners, but would also help to offset the increased cost of reconditioning work. Builders' prices vary in different parts of the County from 100% to 150% above pre-war level.

Following the aforementioned housing survey I have no doubt that the Housing (Rural Workers) Acts will be able to play a big part in assisting owners and authorities alike in providing a standard of accommodation and amenity that the rural worker richly deserves.

SUPERVISION OVER THE FOOD SUPPLY.

A. Slaughter Houses and Meat Supervision.

Slaughter houses in the County are still under the control of the Ministry of Food. Inspection of the meat is being carried out by District Sanitary Inspectors. By an arrangement the County Sanitary Inspector has with the Health Department, Bristol Corporation, any calves slaughtered in Bristol that have come from farms in Somerset and are found to be suffering from generalised tuberculosis are immediately notified. As soon as this information is received the Divisional Superintendent to the Ministry of Agriculture and Fisheries is contacted. As a result of the investigations that follow many cows (mothers of the calves) and several bulls have been found affected and destroyed.

B. Milk Supply.

It will be seen from the appended table that during the year there has been a decided increase in Tuberculin Tested milk producers. This increase of 145 in twelve months is by far the largest in any year since the Milk (Special Designations) Regulations came into being in 1936. There has been a corresponding drop in "Accredited" licences, many having transferred to the higher grade. The total of designated milk producers shows an increase of 10 over 1943.

Year. (at end of)	T.T.	Accredited.	Total.
1936	126	285	411
1937	159	506	665
1938	264	623	887
1939	320	800	1,120
1940	305	849	1,154
1941	275	817	1,092
1942	297	871	1,168
1943	357	840	1,197
1944	502	705	1,207

Routine inspections have continued and many special advisory visits have been paid to producers who have experienced difficulty in producing milk of a sufficiently high standard to pass the test. This advisory work has been and still is of an arduous nature, for an effort is made to keep the appointment with the producer at milking time so that the whole of the processing of the milk and sterilising of the utensils and equipment can be seen and any weaknesses brought to the notice of those concerned. The staff are working at top pressure all the time and long working days have been necessary to keep the advisory service and inspections going.

Thirty-five producers had their licences suspended during the year owing to their milk not being of a standard equal to passing the official tests. A number had their licences restored following the improvement of conditions and methods .

One of the chief causes of samples proving unsatisfactory is due to inefficient sterilisation of the utensils and equipment. A considerable number of producers do not appear to appreciate this. It is of the utmost importance to see that all plant used in milk production is made sterile before each milking. Effective sterilisation is the closest relation to a container of milk of good keeping quality. Badly washed utensils harbour bacteria and before they are used again these bacteria have grown considerably in numbers. When milk is poured into them the effect is to hasten the growth and thus shorten the life of the milk so far as its sweetness is concerned.

If producers would follow strictly the advice given by the advisory staff there would be little trouble from failing samples.

Inspections show that conditions have been fairly well maintained but that in a lot of cases sterilising has been irregular.

During the year all the milk depots and feeder stations in the County have been visited several times and samples of churn washings taken. The results show that whether churns are machine or hand washed the work must be done by a conscientious staff. Temperatures and the duration of steaming play an all important part and if these are not constantly in the minds of those operating, a lot of the work done is futile.

The County Laboratory examined 2,582 Accredited and 1,851 T.T. and Pasteurised milk samples. The total number of all milk samples examined for various purposes was 5,784.

Special Sampling of Herds. During the year 454 samples of the mixed milk of herds in the County were examined. In 5 the test period was insufficient (the guinea-pig dying prematurely); in 20 tubercle bacilli were found. Investigation of these herds involved the examination of 80 samples from groups of cows and 58 samples from individual cows, from which 17 cows in 14 herds giving tuberculous milk were found and destroyed. In 3 herds the infected animal had probably been removed, but in the other 3 the cause of the infection was not found.

ADMINISTRATION OF THE SALE OF FOOD AND DRUGS ACT.

During the year 923 samples were examined. Of these, 10 were submitted by private individuals and institutions, and 10 were "Appeal to Cow" samples. The percentage found adulterated was 2.88. The following Table shows the nature of the 903 samples submitted by the Inspectors, excluding the 10 "Appeal to Cow" samples.

TABLE XII.

Nature of Samples submitted by Inspectors.

Article.	Number examined.	Number genuine.	Number adulterated.	Per cent. adulterated.
Dairy Products—Milk	471	451	20	4.25
Cheese	10	10	0	0
Butter	36	35	1	2.8
Condensed Milk	8	8	0	0
Dried Milk	3	3	0	0
Edible Fats	35	35	0	0
Cereals	11	11	0	0
Meat and Fish Products	54	52	2	3.7
Tea, Coffee, Cocoa	23	23	0	0
Condiments	45	45	0	0
Sugar Products	23	23	0	0
Food Substitutes—Egg, Lemons, Orange ...	1	1	0	0
Miscellaneous Groceries	81	78	3	3.7
Beer, Spirits and Wine	30	30	0	0
Drugs	72	72	0	0
TOTAL ...	903	877	26	2.88

Five prosecutions were instituted, all for the adulteration of milk with water. There were 5 convictions, and fines from £2 2s. 0d. to £15 were imposed. Fines amounted to £37 2s. 0d. and costs to £8 5s. 0d.

PUBLIC HEALTH LABORATORY.

During the past year 21,783 samples have been examined (excluding all food and drug samples) as follows. Thirty-two tuberculin dilutions were made and sent out.

Drinking Water—	
Bacteriological examinations	1,106
Chemical analyses	37
Sewage, sewage effluents, rivers and streams	55
Swabs for diphtheria bacilli	5,027
Cerebro spinal fluid and post nasal swabs	44
Sputum for tubercle bacilli	2,711
Blood for typhoid, paratyphoid, other Salmonella, dysentery, and Br. abortus	352
Hairs and skin for ringworm	13
Specimens for venereal disease	1,767
Urine for tubercle bacilli, B. typhosum, B. coli, sugar, albumin, casts, etc.	163
Faeces for typhoid, other Salmonella, and dysentery	521
Swabs for hæmolytic streptococci	3,678
Milk for tubercle bacilli	1,042
Milk for bacteriological examination (general)	309
Milk—Accredited	2,582
Milk—T.T. and Pasteurised	1,851
Other specimens	525
Total	21,783