

[Report 1952] / Medical Officer of Health, St Faith's & Aylsham R.D.C.

Contributors

St. Faith's and Aylsham (England). Rural District Council.

Publication/Creation

1952

Persistent URL

<https://wellcomecollection.org/works/jqkqn3xa>

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.

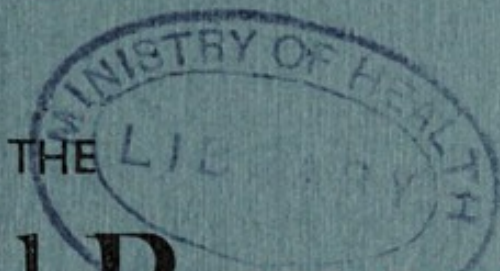
Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

Library

RURAL DISTRICT OF ST. FAITH'S
AND AYLSHAM



Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

(IRENE B. M. GREEN, M.D., B.S., D.P.H.)

TOGETHER WITH THE

REPORT OF THE

SENIOR SANITARY INSPECTOR

(H. S. HAWKINS, A.M.I.S.E., C.R.S.I.)

1952

STAFF

Medical Officer of Health:

IRENE B. M. GREEN, M.D., B.S., D.P.H.

*Senior Sanitary Inspector, Surveyor
and Inspector under Petroleum Acts:*

H. S. HAWKINS, A.M.I.S.E., C.R.S.I.

Deputy Senior Sanitary Inspector:

W. R. FRYER, A.R.SAN.I., M.S.I.A.

Sanitary Inspectors:

B. J. PALMER, A.R.SAN.I., M.S.I.A.

J. TOWNSEND, A.R.SAN.I. (from 19.2.52).

Chief Clerk:

MISS P. RAY.

Clerical Staff:

M. C. DUFFIELD.

MISS M. GOOCH (to 31.5.52).

MRS. R. MANN (from 9.6.52).

MRS. H. FRANCIS (from 11.8.52).

Assistant Surveyor:

F. B. ALVES, A.M.S.E., A.I.A.S.

Temporary Technical Assistant:

W. G. CHASTNEY, A.I.B.E. (from 1.10.52).

THE ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

(IRENE B. M. GREEN, M.D., B.S., D.P.H.)

FOR THE

Rural District of St. Faith's and Aylsham

NORFOLK

for the Year ending 31st December, 1952

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1952.

It was hoped that detailed population figures for the parishes would have been available for analysis in this report but they have not yet been published by the Registrar-General.

The estimated mid-year population is 38,810, an increase of 187 since 1951.

The excess of births over deaths accounts for 143 of these and the small residue must therefore be due to immigration into the district.

WEATHER CONDITIONS.

The cold winter of 1951 continued into 1952, and January and February had both snow and fog. Most of March was unusually mild, and April and May were very fine and warm. It was an exceptionally beautiful spring with abundance of bright sunshine.

The holiday months of July and August were less settled but there was some summer weather.

In the first week of September the temperature dropped by 10 degrees and cold wintry conditions continued without remission till the end of December. September in particular was the coldest ever recorded at Sprowston Agricultural Station.

The main features of the year's weather were the exceptionally warm spring and the very early onset of wintry conditions in the late summer.

VITAL STATISTICS.

There were 529 live births and 386 deaths registered during 1952. This was 16 more births and 48 less deaths than last year. 24 births were illegitimate.

The birth rate has gone up slightly from 13.9 in 1951 to 14.0 but still remains below the figure for the whole country (15.3).

The crude death rate (10.21) has fallen since last year (11.3) and is just below the national figure (11.3).

Comparability figures give an adjusted local birth rate of 14.5 and a death rate of 9.4.

There were 16 deaths of infants under one year, the same as in 1951, but as there were more live births in 1952 the infant mortality rate has declined a little from 31.19 to 30.24, but is still above the national figure of 27.6. All but three of these infants died in the first month of life and 12 of them did not survive the first week. The causes of 11 infant deaths could be termed inevitable, i.e. due to prematurity or congenital defects; possibly avoidable in 2 cases, being due to obstetrical injury and only 3 cases were wholly preventable, the cause being infection in each case. The infections were gastro-enteritis, broncho-pneumonia and meningitis, and two of these infections were complicated by prematurity.

This is a much more satisfactory situation than reported last year, and is no doubt largely due to the absence of a widespread epidemic of influenza and pneumonia, which caused so much illness in 1951. Until we can prevent premature birth, the death rate among the newborn is unlikely to be much further reduced. The fall in the general death rate is accounted for by the small number of fatal cases of respiratory disease which occurred in 1952. There were 44 fewer than in 1951.

No deaths occurred between the ages of 1 and 10 and only one between 10 and 15. 8 deaths only were registered between the ages of 15 and 40. The only death of school age was a congenitally defective child, and the 8 young adults died from the following causes:—

Violence	...	...	2	Accident and Suicide.
Chronic infections	...	...	2	Kidney and Heart.
Acute infection	...	...	1	Pneumonia.
Progressive nervous disease	1			Disseminated Sclerosis.
Cancer	...	...	1	
Acute heart failure	...	...	1	

72% of all deaths took place over the age of 65 and 48% over the age of 75. The commonest causes of death were diseases of the heart and circulation (199), and malignant disease (including cancer) 65 (compared with 58 in 1951).

INFECTIOUS DISEASE.

There were 750 cases of notifiable infectious disease (excluding tuberculosis) during 1952. This increase is more than accounted for by the greater incidence of measles during the year.

Apart from measles and whooping cough, there has been little change in the total amount of other notifiable diseases (144) compared with 1951 (148).

There were minor variations such as less pneumonia, 12 cases compared with 42 in 1951, but more dysentery, 47 cases compared with 18 the year before.

Scarlet Fever.

There were 59 cases of scarlet fever, 20 more than in 1951 and again the bulk of these occurred in early school life. Only one patient was admitted to hospital, no complications were reported and there were no fatal cases. The incidence was almost identical with that in the country as a whole.

Measles and Whooping Cough.

There were nearly three times as many cases of measles as in 1951, the disease being more prevalent in this district than in the whole country. Two cases were admitted to hospital with pneumonia but no fatal cases were reported. Roughly half of them occurred at ages under 5 and the other half were chiefly in the 5—10 group.

There were 30 fewer cases of whooping cough and, although half of these were pre-school children, none was fatal. As 8 cases occurred in infants under one year, this is a very satisfactory result.

It will be interesting to see what effect vaccination will have upon the incidence of this disease. The practice is not yet sufficiently widespread to enable me to judge its effect on local attack rates.

Both diseases were prevalent in the first two quarters of the year, coinciding with the better weather, which may account for the absence of the complications.

Diphtheria.

Again this year the district has been entirely free from diphtheria. The continued support of parents for the immunisation scheme is paying handsome dividends, and it is to be hoped that there will never be any slackening of our combined efforts to protect successive groups of children as they approach the end of their first year and again twice during their school life.

Poliomyelitis.

This year I am glad to report only three cases of poliomyelitis. All were admitted to hospital and none was fatal.

There was only one paralytic case, a married woman of 39 who moved into another district after discharge from hospital and her present condition is unknown.

The two other cases, a boy of 13 and a woman of 36 were both non-paralytic and made complete recoveries.

All these cases were separated widely in time and space and appeared to have no connection with one another or any known case.

The poliomyelitis of 1952 has left no one permanently disabled in the district.

Infective Hepatitis.

There were only 11 cases of infective hepatitis, half last year's figure, and two were admitted to hospital; no deaths or complications were reported.

Enteric Group.

One case of paratyphoid fever was notified, a child of two years who had a fairly mild illness, was a convalescent carrier for 28 days and then made a complete recovery. No other member of his household was infected and no source of the infection was discovered.

There were no cases of typhoid notified during the year.

Dysentery.

47 cases of dysentery were notified, all of the Sonné type. There were two defined groups of cases associated respectively with a hospital and a service station in the district, and these accounted for 22 cases.

The remainder occurred in the parishes of Sprowston and Old Catton and affected 15 households. No common source of infection was discovered, but as these are both fringe parishes it may well have been imported from the city where the disease was fairly prevalent at that time.

No case required hospital treatment and no deaths were reported.

Food Poisoning.

Only one case of food poisoning was notified during the year, a girl of 13 at Hellesdon. It was due to *Salmonella Typhimurium*, and although sausages were the suspected source of infection, no bacteriological evidence could be obtained.

Winter Vomiting.

An outbreak of suspected food poisoning occurred at St. Faith's school in December and 31 pupils and staff were affected. Investigation revealed no source of the infection in food or drink and there were no positive bacteriological findings from the patients.

The disease was mild and the attacks short-lived and the whole incident was over in a few days. It was assumed that this was an epidemic of winter vomiting, the cause of which is unknown but thought to be a virus. It is suggested that the spread may be by respiratory means like influenza.

A similar series of 3 cases occurred in December at Reepham, and in the absence of positive findings were deemed to be another occurrence of winter vomiting.

Tuberculosis.

Pulmonary tuberculosis caused 6 deaths in 1952, and 34 new cases were notified. This is a higher mortality rate than in 1951, when there were only 2 deaths during the year.

The fatal cases were 2 males aged 43 and 45, and 4 females aged 31, 51, 65 and 75. It should be noted that only one of these is under 40 and that two deaths occurred at quite an advanced age.

The new cases followed the familiar trend of incidence among the younger women and the older men but to a less marked degree. The 4 cases notified over the age of 65 show that more attention is at last being paid to the possibility of the chronic cough of the elderly being due to tuberculosis.

The county statistics furnished by the County Medical Officer for both incidence and mortality are shown below compared with the district rates (per 1000 population):

Incidence.

<i>Area</i>	<i>Pulmonary</i>		<i>Non-</i>	
	<i>Rate</i>	<i>Rate</i>	<i>Pulmonary</i>	<i>Rate</i>
County of Norfolk	239	0.64	71	0.19
St. Faith's and Aylsham ...	34	0.87	7	0.18

Mortality.

County of Norfolk	35	0.09	14	0.04
St. Faith's and Aylsham ...	6	0.15	1	0.02
England and Wales (all forms) ...	—	0.24	—	—

There was a further drop in the number of new cases of the non-pulmonary type, only 7 being notified compared with 14 last year. All were under 15 and suffered from infected neck glands except one female of 19 with spinal disease.

In each case, careful investigation of the milk supply was made but no definite evidence was found of a bovine source of the infection in any case.

Close human contacts were offered examination at the chest clinic and in most cases this was accepted.

Diagnosis.

Nature of Specimen Examined	Cases already Notified		Cases not on T.B. Register		Total
	No.	No.	No.	No.	
	Positive	Negative	Positive	Negative	
Sputum ...	24	64	12	139	239

This is 14 more specimens and 10 more positive results than last year.

Treatment.

The number of admissions to Sanatoria has again risen:

				Male	Female	Total
1947	...	...	...	3	2	5
1948	...	...	...	3	3	6
1949	...	...	...	6	4	10
1950	...	...	...	9	9	18
1951	...	...	...	14	16	30
1952	...	...	...	19	23	42

The average length of hospital treatment was about 6 months, some few patients staying up to 12 months or more. There were 42 patients out of a total of 179 pulmonary cases who spent some part of the year in hospital or sanatorium, that is nearly a quarter of them. Considering that there were only 34 new cases during the year and many on the register are cases under observation, or of the longstanding type, it is apparent that there is no longer a serious shortage of beds.

Prevention.

B.C.G. vaccination plays an increasing part in the protection of young and susceptible contacts of a known case and is not only being accepted but in some cases actually requested by parents.

Separate figures for this district alone are not obtainable, but through the courtesy of the County Medical Officer I can give those for the County as a whole:—

B.C.G. Vaccination for the County of Norfolk.

				1952	1951	1950
Contacts of known cases:	0—4 years	...	84	} 151		
”	5—15 years	...	56			
”	over 16 years	...	11			
School leavers	...	...	...	291		
Other negative reactors	...	...	...	35		
			Totals	477	314	99

An extension of this preventive treatment to all school leavers is now under consideration, and though spectacular results cannot be expected, this measure is well worth a trial. If the protection afforded by this

vaccination is found to last through the very vulnerable ages of 15—30, then we will have found a further weapon with which to fight this once terrible destroyer of young life.

General Remarks.

The best comment on the progress of the campaign against tuberculosis is the fact that proposals to rebuild a local Sanatorium have recently been cancelled and much more modest plans of reconstruction put forward. The high tide of hospital beds is now past and the more effective our diagnosis and treatment the more rapid will be its recession.

We need to go further back and educate the citizens before they become patients, specially in the early years of their working lives. The incidence shows that stress is greater for the young woman than for the young man. Possibly, vanity which urges her to starve in order to keep slim and the double responsibility in many cases of work outside as well as inside the home may each play a part. The importance of the wise use of leisure in order to re-create the body and mind cannot be too much stressed. Thus even the wider cultural basis of modern education may be seen as a remote but very real factor in preventive medicine.

FOOD AND DRUGS ACT, 1938-48.

Milk and Dairies Regulations, 1949.

The following table gives a summary of action taken under the above regulations:—

	<i>Brucella</i>	<i>Anthrax</i>	<i>Tuberculosis</i>	<i>Total</i>
No. of restriction notices imposed during 1952 ...	—	—	1	1
No. still operative at beginning of 1952 ...	1	—	1	2
No. withdrawn during the year	1 & a part	—	1	2 & a part
No. of notices still operative at the end of year ...	Part*	—	—	Part

*Note: Part notice operative in respect of three positive animals.

No. of cases of voluntary pasteurisation during the year ...	—	—	2	2
No. of cases of voluntary pasteurisation where sampling incomplete at 31/12/52	—	—	1	1

An increasing amount of milk is being pasteurised prior to its sale and more T.T. attested herds are being built up. This is no doubt the reason why less action had to be taken under these regulations during the year.

It is hoped that milk-borne disease will soon follow diphtheria into the museum of clinical antiquities.

Anthrax Order, 1938.

There was a large increase in the number of restriction notices received from the police under the Anthrax Order. The following table sums up the position:—

		<i>Cattle</i>	<i>Pigs</i>	<i>Total</i>
No. of cases notified ...	...	3	22	25
No. of cases confirmed ...	...	1	8	9
No. of cases not confirmed ...	...	2	14	16

It will be seen that although there was only one confirmed case in cattle there were eight cases among pigs.

The greatly increased incidence among pigs has caused considerable concern and various suggestions have been made as to the cause. The view most widely held is that the spores are present in some imported feeding stuff, possibly bone meal, which is not sterilized before being fed to the pigs.

As anthrax can be a rapidly fatal human infection, it is essential that the disease should be suspected whenever a beast or pig is found dead. All suspected carcasses should be left alone until a veterinary surgeon has examined them and either confirmed the diagnosis or certified that the cause of death was not anthrax.

Precautionary measures of protection had to be taken on a few occasions where infected carcasses had been handled and dismembered by unsuspecting workers. Fortunately, on no occasion did a human contact contract the disease.

Waiting List.

HOUSING.

Applicants at 31st December ...	...	...	1952.	1951.
			1085	1156
<i>Analysis of Waiting List.</i>				
Size of { Families with 2 or less children ...	...	...	960	1035
Family { Families with 3 or more children ...	...	...	125	121
Type of { Agricultural workers ...	...	...	188	202
Family { Others ...	...	...	897	954
<i>Local Authority Houses.</i>				
Position at 31st December:				
Pre-war ...	...	...	565	565
Post-war ...	...	...	822	684
			<hr/>	<hr/>
		Total ...	1387	1249
			<hr/>	<hr/>

Total Houses Completed during the year:—

Local Authority Dwellings	...	...	...	138	146
Private Dwellings	...	...	...	68	38

Ex-Government Camps:

No. of families occupying these Camps at 31st December	...	...	...	104	159
Total number of applicants housed in Camps from waiting list during the year	...	...	...	11	23

There were 71 fewer families on the waiting list at the end of 1952 and 138 Council houses were completed during the year, which is slightly less than in 1951. In addition, 68 private dwellings were erected.

The proportion of the population living in Council houses continues to increase and amounts to about 1 in 8. Unless there is a substantial increase in private building this proportion is bound to rise further.

There are already signs that such increase has begun to take place as the number of private dwellings is almost double the number erected last year.

Again it is a pleasure to note a further substantial reduction in the number of hutments continuing to be used as homes, a further 55 having been vacated and, for the most part, demolished during the year. It is greatly to be hoped that very few families will be obliged to spend a further winter under these very often uncomfortable conditions.

It has not yet been possible to make a real start on slum clearance, and far too much grade V property is still being used for habitation. The best way to ensure that such living conditions do the minimum of harm to health is to re-house as soon as possible families with young children, particularly if there is any overcrowding, whether statutory or not.

WATER SUPPLY.

There has been no shortage of water in the district during the year.

Lenwade village scheme was completed and exploratory works were carried out at the Salle bore. There was a further extension of the Weston supply.

As the water authority the District Council has an overriding responsibility for the safety of the whole water supply of the district. This is mainly obtained from the chalk and it is therefore essential that no unnecessary pollution obtains access to it.

It was with grave concern, therefore, that I learned that the Highways Department of the Norfolk County Council had adopted a policy of deep boring into the chalk for the purpose of road drainage. This boring takes all kinds of crude pollution, organic and chemical, directly into the water-bearing stratum without any percolation or filtration whatever. I view

this procedure with grave misgiving and feel very strongly that it should cease. The depth of this boring seems to me to be quite excessive, and the fact that it can be carried out anywhere in the district without prior reference to this Council is greatly to be deplored.

It is well known that cracks and fissures frequently occur in chalk, and the danger of distant pollution is always in the water experts mind. In my opinion this practice should cease and no deep boring into the chalk for drainage purposes should be permitted without prior reference to the water authority.

SEWERAGE.

The Aylsham Sewerage Scheme made excellent progress during the year, and it was anticipated that it would be in working order early in 1953.

Unfortunately, the very urgently needed scheme for Reepham has still to receive official approval to proceed with the work.

Further trouble was experienced at Coltishall with the sewer ditches, and there is no doubt that a proper scheme for the parish will have to be considered eventually to prevent recurrence of this nuisance.

SOCIAL HEALTH.

Old peoples' clubs continue to flourish as a live component of the community life of the district.

There are now 16 clubs meeting regularly in the following parishes:--

Aylsham	Foulsham	Reepham
Old Catton	Hellesdon	Salhouse
Cawston	Horsford	Sprowston
Coltishall	Marsham	Swannington
Drayton	Oulton	Wroxham
St. Faith's		

This is a real welfare service for the elderly whose numbers steadily increase in proportion to those of the younger age groups.

This gradual rise in the average age of the population increases the importance of the ailments and disabilities of later life. There is now a science of geriatrics which is wholly concerned with health in old age and with the many factors which affect it.

If people are going to live longer it is essential that these extra years should not only be happy but active and, possibly, even productive.

Age of retirement has already shown itself to be too low, and it is in the national interest as well as to the benefit of the individual that active working life should be prolonged as far as possible.

Too often people are allowed to become disabled by age alone who could have been kept on their feet, or restored to them, with a little encouragement and understanding.

It is gratifying to note the appointment of a geriatrician to a local group of hospitals, as this should stimulate interest in this vital subject and lead to a better understanding of the management of the later years.

To become bedridden should be the exception and not the rule, and every endeavour should be made to keep elderly people about as long as possible. Too often clinical disability is accepted as the inevitable result of a fall or other accident, when active treatment and a hopeful outlook would have restored the body to reasonable activity. An old body soon gets stiff and deformed when immobilised and regular activity, however limited, is the only way to prevent this calamity.

Indeed, the older you are the more fatal it is to take to your bed for any length of time. The best advice that can be given to the elderly, is "keep about and keep busy."

Some of our old people's hostels are not wholly blameless in this matter and the complaint has been heard "There is nothing to do."

To sit, even in beautiful surroundings, with constantly folded hands is not necessarily happiness. Occupation is important at all ages for the full health of mind and body.

The next step will surely be the opening of a geriatric out-patient department where elderly patients, not necessarily needing hospital admission, can be expertly examined and assessed in respect of active treatment of their disabilities. The whole emphasis should be on improvement of the life-worthiness of the individual. The words "Nothing can be done" should be heard much less often and then only when an expert assessment of the situation has made it justifiable.

The ranks of the elderly swell yearly. With planning and forethought they may remain assets to the community rather than an increasingly intolerable burden.

COUNTY SERVICES.

Infant Welfare Service.

Full infant welfare centres are held in the following parishes with a Medical Officer in attendance at each session:—

<i>Parish</i>	<i>Address</i>	<i>Date Held</i>	<i>Time</i>
Aylsham ...	Ian Sears Clinic	First Friday every month.	2—4
Hellesdon ...	Mile Cross Methodist Hall	First and third Monday every month.	2—4
Sprowston ...	St. Cuthbert's Church Hall	Second and last Friday every month.	2—4
Wroxham ...	Church Hall	First Wednesday every month.	2—4

In addition, the District Nurses hold weighing centres in the following parishes and a Medical Officer attends occasionally:—

Blickling	...	Social Welfare Centre	First Monday	every 2—4 month.
Buxton	...	Reading Room	Second Tuesday	every 2—4 month.
Cawston	...	Memorial Institute	First Tuesday	every 2—4 month.
Coltishall	.	Church Room	First Wednesday	every 2—4 month.
Foulsham	...	Nurse's House	Last Wednesday	every 2—4 month.
Haynford	...	Parish Hall	First Thursday	every 2—4 month.
Hevingham	...	St. J.A.B.H.Q.	Third Friday	every 2—4 month.
Honingham	...	Institute	First Tuesday	every 2—4 month.
Horsham		Mission Room	Last Thursday	alternate 2—4 months.
		St. Faith's		
Horsford	...	Parish Hall	Last Thursday	alternate 2—4 months.
Lenwade	...	War Memorial Hall	Second Monday	every 2—4 month.
Reepham	...	Bircham Institute	Second Friday	every 2—4 month.
Salhouse	...	Women's Institute	Last Wednesday	every 2—4 month.
Spixworth	...	Social Hall	Third Thursday	every 2—4 month.
Horsham		R.A.F. Station	First and third Tuesdays	2—4 every month.
		St. Faith's		
		Aerodrome		

There is a good attendance of mothers at most of these centres, showing how much the service is appreciated

Welfare Services. Headquarters, Local Health Office, Area No. 4, Aspland Road, Riverside Road, Norwich.

A County Welfare Officer and an assistant provide general welfare services for the district as well as carrying out statutory duties connected with the Mental Health Service.

In addition to the Headquarters Office, the public can obtain advice and help at the following contact points:—

Reepham—Bircham Institute, Wednesday afternoons.

Aylsham—Mr. D. L. Walker's Office (temporarily closed).

This provides a very effective form of citizens advice bureau.

GENERAL SURVEY.

The health of the district has been satisfactory during the year, with much less respiratory disease than in 1951, in spite of the wintry conditions which set in so early in the autumn.

The death rate has declined further and the slight fall follows the national trend, while the birth rate has risen slightly.

Better facilities for diagnosis near the city may account for the incidence of tuberculosis being rather above the average for the County. Tuberculosis mortality remains remarkably low.

CONCLUSION.

In conclusion, I should again like to express my thanks to the Chairman and members of the Public Health Committee for their continued encouragement and support and to the staff for their efficient co-operation.

I have the honour to be,

Your obedient servant,

(Signed) IRENE B. M. GREEN,

Medical Officer of Health.

GENERAL STATISTICS.

Area (in acres)	93,005
Population (Census 1931)	25,648
Population (Estimated Resident 1952)	37,810
Number of structurally separate dwellings (1931)	7,660
Number of structurally separate dwellings (1952)	11,104
Rateable Value, 31st December, 1952	£165,387
Estimated Net Produce of Penny Rate	£626

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

which relate to the net births and deaths after correction for inward and outward transfer as furnished by the Registrar General:

				St. Faith's & Aylsham	England & Wales		
<i>Total Males Females</i>				1952	1951	1952	
LIVE BIRTHS							
Legitimate ...	504	237	268	} Birth rate per 1,000 of esti- mated resident population ...	14.0	13.9	15.3
Illegitimate ...	24	12	12				
Total ...	529	249	280				
STILL BIRTHS							
Legitimate ...	8	6	2	} Rate per 1,000 of estimated resident popu- lation ...	0.23	0.26	0.35
Illegitimate ...	1	1	—				
Total ...	9	7	2				
DEATHS							
Total ...	386	194	192	} Crude death rate per 1,000 of the esti- mated resident population ...	10.21	11.5	11.3

Deaths from puerperal causes—0.

INFANT DEATHS

				<i>Total</i>	<i>Males</i>	<i>Females</i>
Legitimate ...	...	...	...	15	5	10
Illegitimate ...	...	...	...	1	1	—
Totals ...	...	...	...	16	6	10
				St. Faith's & Aylsham	England & Wales	
				1952	1951	1952
Infant Mortality Rate per 1,000 live births				30.24	31.19	27.6

Ages at Death (Infants under 1 year)

<i>Ages</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
1st day ...	1	5	6
1-7 days ...	2	4	6
1-4 weeks ...	1	—	1
1-3 months ...	—	—	—
3-6 months ...	1	1	2
6-9 months ...	1	—	1
9-12 months ...	—	—	—
	6	10	16

<i>Causes of Death (Infants under 1 year)</i>				<i>Males</i>	<i>Females</i>	<i>Total</i>
Total—11						
Inevitable						
	Prematurity	...	...	2	6	8
	Congenital Defects	...	...	2	1	3
Total—2	Obstetrical Injury	...	...	1	1	2
Total—3						
Preventable						
	Infectious	...	...	1	2	3
Preventable						
	Accidental	...	...	—	—	—

The causes of death are given in the following table supplied by the Registrar-General:

<i>Causes of Death</i>				<i>Males</i>	<i>Females</i>	<i>Total</i>
1	Tuberculosis of Respiratory System	...	...	2	4	6
2	Other forms of Tuberculosis	...	...	1	—	1
3	Syphilitic Disease	...	...	—	—	—
4	Diphtheria	...	...	—	—	—
5	Whooping Cough	...	...	—	—	—
6	Meningococcal Infections	...	...	—	—	—
7	Acute Poliomyelitis	...	...	—	—	—
8	Measles	...	...	—	—	—
9	Other Infective and Parasitic Diseases	...	...	—	—	—
10	Malignant Neoplasm of Stomach	...	...	5	6	11
11	Malignant Neoplasm of Lung or Bronchus	...	...	8	2	10
12	Malignant Neoplasm of Breast	...	...	—	3	3
13	Malignant Neoplasm of Uterus	...	...	—	1	1
14	Other Malignant and Lymphatic Neoplasm	...	...	24	16	40
15	Leukaemia and Aleukaemia	...	...	—	1	1
16	Diabetes	...	...	3	3	6
17	Vascular Lesions of Nervous System	...	...	21	46	67
18	Coronary Disease, Angina	...	...	24	17	41
19	Hypertension with Heart Disease	...	...	2	2	4
20	Other Heart Disease	...	...	30	37	67
21	Other Circulatory Disease	...	...	11	9	20
22	Influenza	...	...	1	1	2
23	Pneumonia	...	...	9	4	13
24	Bronchitis	...	...	4	5	9
25	Other Disease of Respiratory System	...	...	1	1	2
26	Ulcer of Stomach and Duodenum	...	...	1	—	1
27	Gastritis, Enteritis and Diarrhoea	...	...	1	2	3
28	Nephritis and Nephrosis	...	...	3	2	5
29	Hyperplasia of Prostate	...	...	8	—	8
30	Pregnancy, Childbirth, Abortion	...	...	—	—	—

31	Congenital Malformations	...	...	3	2	5
32	Other Defined and Ill-defined Disease	...	...	19	26	45
33	Motor Vehicle Accidents	...	...	2	—	2
34	All Other Accidents	...	...	7	2	9
35	Suicide	...	...	4	—	4
36	Homicide and Operations of War	...	...	—	—	—
	All Causes	...	...	194	192	386

DEATHS BY AGE GROUPS, 1952.

Age Groups	Under 1	1-5	5-15	15-30	30-40	40-50	50-65	65-75	75-85	85 and Over	Total
Totals	16	—	1	4	4	19	71	90	120	61	386

NOTIFIABLE DISEASES (other than Tuberculosis).

The incidence of notifiable disease during the year is shown in the two subjoined tables: the first table sets out the total notifications, whilst the second shows the distribution according to age.

Disease	Total Cases	Admitted to Hospital	Notification Rate per 1,000 Population 1952	
			St. Faith's & Aylsham	England & Wales
Scarlet Fever	59	1	1.61	1.53
Whooping Cough	132	—	3.49	2.61
Measles	474	2	12.54	8.86
Poliomyelitis	3	3	0.08	0.09
Pneumonia	12	2	0.31	0.72
Dysentery	47	—		
Erysipelas	3	—		
Infective Jaundice	11	2		
Puerperal Pyrexia	5	3		
Ophthalmia Neonatorum	1	—		
Food Poisoning	1	—		
Paratyphoid Fever	1	—		
Malaria	1	—		
	750	13		

<i>Disease</i>	<i>Ages</i>														<i>Total</i>
	0	1	2	3	4	5	10	15	25	35	45	55	65		
Scarlet Fever ...	—	—	—	2	9	37	8	3	—	—	—	—	—	...	59
Whooping Cough ...	8	9	19	8	15	66	2	2	—	—	1	—	2	...	132
Measles ...	7	29	68	59	68	227	5	7	2	1	1	—	—	...	474
Poliomyelitis ...	—	—	—	—	—	—	1	—	—	2	—	—	—	...	3
Pneumonia ...	—	—	—	—	—	2	—	—	1	1	4	3	1	...	12
Dysentery ...	2	3	5	1	—	9	3	1	3	3	3	3	11	...	47
Erysipelas ...	—	—	—	—	—	—	1	—	1	—	—	—	1	...	3
Infective Jaundice ...	—	—	—	1	—	2	1	3	2	—	—	1	1	...	11
Peurperal Pyrexia ...	—	—	—	—	—	—	—	3	1	1	—	—	—	...	5
Ophthalmia															
Neonatorium	1	—	—	—	—	—	—	—	—	—	—	—	—	...	1
Food Poisoning ...	—	—	—	—	—	—	1	—	—	—	—	—	—	...	1
Paratyphoid Fever ...	—	—	1	—	—	—	—	—	—	—	—	—	—	...	1
Malaria ...	—	—	—	—	—	—	—	—	1	—	—	—	—	...	1
Totals ...	18	41	93	71	92	343	22	19	11	8	9	7	16	...	750

TUBERCULOSIS.

Particulars of the new cases of Tuberculosis, deaths from the disease, and the total number of cases in the area during 1952, are given in the following tables:—

<i>Age Periods</i>	<i>New Cases</i>				<i>Deaths</i>				
	<i>Respiratory</i>		<i>Non-Respiratory</i>		<i>Respiratory</i>		<i>Non-Respiratory</i>		
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
0— ...	—	—	—	—	—	—	—	—	—
1— ...	1	1	1	1	—	—	—	—	—
5— ...	1	1	1	2	—	—	—	—	—
15— ...	4	6	—	2	—	—	—	—	—
25— ...	2	4	—	—	—	—	—	—	—
35— ...	4	1	—	—	2	1	—	—	—
45— ...	1	2	—	—	—	1	—	—	—
55— ...	1	1	—	—	—	—	—	—	—
65— ...	—	—	—	—	—	1	—	—	—
upwards ...	2	2	—	—	—	1	—	—	—
Totals ...	16	18	2	5	2	4	1*	—	—

*From Registrar-General's Return not traceable in Local Records.

<i>Type of Case</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Respiratory ...	91	88	179
Non-Respiratory ...	25	32	57
Totals ...	116	120	236

Sanitary Inspector's Report

FOR THE YEAR 1952

I have the honour of presenting the following report for the year 1952.

NUMBER OF INSPECTIONS AND VISITS MADE DURING THE YEAR IN CONNECTION WITH SANITARY AND OTHER WORK.

Inspections under the Public Health Acts	...	...	...	507
Revisits to ascertain progress of work	...	...	...	80
Inspections under the Housing Acts	...	...	...	757
Revisits to ascertain progress of work	...	...	...	301
Inspections and revisits of Moveable Dwellings	...	...	...	90
Visits to Infectious Disease Cases	...	...	...	328
Inspections of Dairies	...	...	...	52
Rooms Disinfected	...	...	...	36
Inspections of Slaughterhouses	...	...	...	298
Inspections of Food Premises	...	...	...	133
Inspections of Factories	...	...	...	39
inspections in connection with Scavenging Schemes	...	...	...	539
Inspections of Sewerage and Water Supply Works operating and under construction	...	...	...	585
Samples of Water taken for Analysis	...	...	...	273
Inspections under Petroleum Acts	...	...	...	61
Other visits interviewing owners, etc.	...	...	...	595
Inspections under Building Bye-laws	...	...	...	2,154
Inspections in connection with the issue of Building Licences	...	...	...	8
				<hr/>
Total	...	...	...	6,836
				<hr/>

MEAT AND FOOD INSPECTION.

The following are the particulars of the work carried out in connection with Meat and Food Inspection during the year.

The number of carcasses inspected at the Slaughterhouse under the control of the Ministry of Food were as follows:—

Beef	...	...	...	2,235
Pork	...	...	...	1,389
Mutton	...	...	...	3,161
Veal	...	...	...	3,133½
				<hr/>
Total	...	...	...	9,918½
				<hr/>

The following is a summary of the meat condemned as being unfit for human consumption, and the bracketed figures indicate the number which were affected with Tuberculosis:—

BEEF—

55 Carcases and all Offal (17)	109 Mesenteries (52)
19 Forequarters (5)	6 Spleens (1)
11 Hindquarters (2)	16 Hearts (1)
405 lbs. Beef (40)	4 Kidneys
218 Heads (152)	4 Tripes (1)
200 Tongues (26)	2 Sets Ribs
615 Livers (65)	7 Complete sets Offal (2)
518 Parts Livers	2 pt. Forequarters
259 Sets Lungs (149)	4 pt. Hindquarters
2 Hindlegs	1 Tail (1)
3 Paunches	

PORK—

68 Carcases and all Offal (6)	3 Kidneys
235 lbs. Pork	8 Hindquarters
86 Heads (54)	25 Forequarters
22 Sets Lungs (2)	22 Hindlegs (3)
93 Livers	5 Complete sets Offal (3)
30 Mesenteries (10)	10 pt. Livers
1 Set Intestines	15 Forelegs
14 Hearts	2 Pigs Feet
228 Plucks (36)	2 Pigs Hides

MUTTON—

18 Whole Carcases and all Offal	4 Forequarters
30 Heads	33 lbs. Mutton
2 Hindquarters	8 Part Livers
152 Livers	2 Sets Lungs
147 Plucks	2 Hearts

VEAL—

29 Whole Carcases and all Offal	1 Set Lungs
13 Plucks (1)	1 Foreleg
1 Forequarter (2)	4 Hindlegs
1 pt. Hindquarter	6 Heads
6 Livers	

OTHER FOODS CONDEMNED—

278 Tins of Meat and Fish	25 Boxes Dates
351 Tins Milk	10 Pkts. Figs
243 Tins Vegetables, etc.	219 x 500 Grams Cherries
605 Tins Fruit	324 lbs. Cheese
27 Tins Fruit Juice	2 lbs. Danish Blue Cheese
8 Tins Tomato Juice	4 Doz. Boxes Processed Cheeses
30 Tins Soup	2½ lbs. Fancy Processed Cheeses
3,640 Australian Eggs	8¼ lbs. Lard
8,016 Danish Eggs	2 Pkts. Suet
1,102 English Eggs	28 lbs. Sago
6 Tins Jam	9 lbs. Pearl Barley
90 Jars Jam	12 Pkts. Desicated Coconut
32 Jars Marmalade	1 Tin Custard Powder
1 Jar Lemon Curd	10 lbs. Egg Powder
1 Jar Peanut Butter	22 lbs. Haricot Beans
4 Jars Honey	1 gallon Mixed Pickles
6 Tins Syrup	1 gallon Piccalilli
40 Tins Mincemeat	15 Jars Pickles
75 Pkts. of Cereals	1 Jar Tomato Chutney
37¼ lbs. Biscuits	71 Bottles Sauce
140 x 1 lb. Bags Flour	1 Jar Salad Cream
102½ lbs. Dried Friut	2 Tins Coffee
11 x 3 lbs. bags Flour	3 Bottles Coffee
57 Pkts. Cake Mixture	2 Jars Malted Milk
25½ lbs. Fruit Cake	64 lbs. 2 ozs. Ham
13 Swiss Rolls	390¼ lbs. Bacon
2 Sponge Cakes	247 lbs. Beef
2 Christmas Puddings	82 lbs. Pork
3 Bottles Vinegar	7 lbs. Pigs Offal
2 Jars Meat Extract	8 lbs. Mutton

ICE-CREAM SAMPLING—

5 samples of Ice-Cream and 2 Iced Lollie were taken for examination by the Methylene Blue Test, all were placed in Grade I and were regarded as being satisfactory.

SCAVENGING.

Scavenging for the removal of House Refuse and Night Soil is carried out throughout the whole district. House Refuse is collected weekly in 31 of the 48 parishes in the district and fortnightly in the 17 smaller parishes. Night Soil is collected weekly in all parishes, but in Aylsham, Reepham and Great Withingham collection is twice weekly from houses where there are larger families.

The work is carried out by direct labour and the service operated successfully.

The four cesspool emptying vehicles removed 7,145 loads from cess-pools during the year.

SALVAGE.

The income from salvaged materials during the year amounted to £549 2s. 9d., which is considerably below the figure for the previous year. This is due chiefly to the lower price paid, and lesser demand, for waste paper.

The following is a list of materials sold:—

	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>lbs.</i>	£	s.	d.	
Aluminium		4	2	20	11	14	0	
Brass		3	2	0	12	3	9	
Copper		1	1	8	6	18	9	
Lead			1	0		18	9	
Woollens		2	1	10	10	10	6	
Bagging		6	2	6	3	6	7	
Pewter				18	1	16	0	
Heavy Iron	4	10	2	0	18	17	0	
Light Iron		14	1	0	1	8	6	
Motor Covers	1	8	0	0	2	16	0	
Baled Tins	19	2	0	0	58	14	3	
Waste Paper	43	6	3	14	315	9	7	
Rags	4	7	4	20	86	5	8	
Bottle Tops				26		4	8	
	74	8	3	10	£531	4	0	
Insulated Cable: 30 yds. ...						1	10	0
Batteries: 9 x 6 volt ...						2	18	6
Waste Oil: 80 gallons ...						1	10	0
Bottles: 30 Gross 8 Singles						12	0	3
					£549	2	9	

WATER SUPPLY.

Throughout the year the wells in the district provided an adequate quantity of water, the level of water in the wells being generally higher than in the previous few years.

Some progress was made in the provision of piped water supply in the district. In the Norwich Corporation's area of supply mains were laid for supplying part of the parish of Buxton.

In the Council's area of supply the scheme for Lenwade in the parish of Great Witchingham was completed. In the parish of Weston Longville the mains were extended from the Council's Housing Estate in order to supply the small main centre of population in the parish.

The Council decided to furnish a supply of water from its Housing Estate to the new school in the parish of Cawston, with the mains being laid so they could be incorporated in the future major scheme.

At the bore-well at Salle, which is to provide the main source of supply for the western half of the rural district, the further exploratory works were completed and the well was ready for testing at the end of the year. Tests which proved the well to be satisfactory were carried out in January of this year.

SEWERAGE.

The work of laying sewers and building of disposal works in the parish of Aylsham continued, and was near completion at the end of the year.

It is very unfortunate that the Council was not given permission to commence the laying of sewers in Reepham where sewers are urgently needed and a tender was provisionally accepted.

In the parish of Coltishall, the sewer ditches were thoroughly cleaned out, which resulted in a considerable improvement in their condition, but there is an urgent need for a proper sewerage system in this parish.

The provision of sewers for the parishes of Sprowston, Catton and Hellesdon, which are on the boundary of Norwich, is still urgently needed, and unfortunately there appears to be no indication that substantial progress can be made in the immediate future.

HOUSING.

During the year Demolition Orders were made in respect of two houses, and the owners of three houses agreed to demolish without the formality of Demolition Orders being made. In the case of three other houses the owners gave an undertaking not to re-let until the houses were rendered fit and in each case satisfactory repairs have been carried out.

At the end of the year fifteen houses which were subject to Demolition Orders remained occupied and one other subject to an undertaking not to re-let also remained occupied.

There is still difficulty in securing the adequate repair of the poorer type of dwellings due to the high cost of repairs in comparison with the rents, and there is no doubt that deterioration in this type of property is progressing.

BUILDING LICENCES.

The following is a summary of the work involved in connection with the issue of Building Licences during the year. The position in regard to the issue of Licences for the erection of new houses improved so that it has been possible to deal with outstanding applications, and in fact the number of Licences issued exceeded the actual number of applications received during the year.

NEW HOUSES.

Number of applications for Building Licences for New Houses received	...	...	...	...	154
Number of Houses for which Building Licences were issued	...	...	...	...	167

REPAIR OF HOUSES AND OTHER WORKS.

Number of applications received	...	...	...	84
Number of Licences issued	...	...	...	46

In addition to the above, 13 applications were referred to the Regional Licensing Officer of the Ministry of Works.

BAKEHOUSES.

There are 21 Bakehouses in the district and 35 visits of inspection were made but it was not necessary to serve any notices in connection with these premises.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

Throughout the year, 3,772 inspections were made of premises to ascertain if they were infested by rats and 775 premises were suitably treated and cleared. The number of complaints of infestation during the year was only in respect of 126 premises. In general the number of rats found was small and it would appear there has been no serious case of heavy infestation in the district.

SUMMARY OF NUISANCES ABATED AND OTHER WORK CARRIED OUT DURING THE YEAR.

The following is the work carried out in abating nuisances and remedying Housing defects as a result of Informal and Statutory action taken during the year:—

HOUSING:

Source of water supply closed	...	...	...	1
Sinks repaired	...	...	...	1
Piped water supplies provided	...	...	...	7
Well covers repaired	...	...	...	1
Wells repaired	...	...	...	1

Pumps to wells repaired	2
Ashbins provided	6
Closet buildings repaired	3
New pails provided to pail closets	3
Rainwater gutters provided	5
Rainwater gutters repaired	7
Roofs repaired	9
Window frames repaired	14
Window glazing replaced	2
Floors repaired	13
Doors and door frames repaired	7
Ceilings repaired	12
Walls repaired	9
Wall plaster repaired	12
Chimney stacks repaired	12
Stoves repaired	6
Dampness remedied	4
Staircases repaired	4
Water closets repaired	3
Coppers and ovens repaired or replaced	3

DRAINAGE:

Drains cleared	1
Inspection chamber covers provided	1
Cesspools emptied	1
Inspection chambers repaired	1

In conclusion, I should like to thank the Chairman and Members of the Public Health Committee, and the Medical Officer of Health, for their support, and to each member of the staff for their unfailing co-operation.

I have the honour to be,

Your obedient servant,

(Signed) H. S. HAWKINS, A.M.I.S.E.

TUDOR HALL,
ROSE LANE, NORWICH.



ROBERTS PRINTERS (NORWICH) LTD.
30-34, BOTOLPH STREET, NORWICH