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Truro Rural District Council.



PUBLIC HEALTH REPORT

FOR 1937.

A. R. FULLER, M.R.C.S., L.R.C.P., D.P.H.,

Medical Officer of Health.

Truro Rural District Council.

PUBLIC HEALTH REPORT YEAR 1937.

Public Health Officers. Medical Officer. Part time, holds diploma of Public Health, is also District Medical Officer, Perranzabuloe District and Public Vaccinator for Perranzabuloe and St. Allen Parishes.

Sanitary Inspector. Mr. E. R. C. Harvey, Associate Royal Sanitary Institute, whole time. Appointed Meat Inspector under the 1924 Public Health Meat Regulations. Inspector under the Milk and Dairies Order, 1926. Inspector under County of Cornwall Act, 1929. (Ice Cream).

Mr. F. Pickering, M.R.S.I., M.S.I.A., whole time, Housing Inspector.

The salaries of the first two are contributed to by the Ministry, under the Public Health Acts, or by Exchequer grants.

To the Chairman and Members of the

Rural District Council of Truro.

LADIES AND GENTLEMEN,

I beg to present my report on the Health and Sanitary conditions of your district for 1937.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

Area 106,504 acres.

Population :-

The estimate mid population for 1937 was 23,760. This indicates a further decrease from 1936.

Many new bungalows and larger houses for the housing of visitors in the summer continue to be built and a large proportion of elderly people come into the area to occupy them. A number of the more enterprising young men and women leave the district as future prospects are so poor—Hence the population continues to be to a large extent elderly with a consequent low birth rate and high crude death rate.

There is now no mining carried on in the area and no large water or drainage schemes to give work to the unemployed.

Farming has not employed more men in fact rather less owing to the continued depression.

More and more does the district become dependent for its prosperity on the summer visitors. These come in ever increasing numbers to enjoy the beauty and grandeur of the Country and at the same time relax and return home refreshed mentally and physically fit.

It is imperative that if the good name at present held by the area is to be preserved, steps must continually be taken to see that modern standards of public health requirements are maintained. Adequate water supplies of good quality; satisfactory drainage and scavenging to prevent nuisances and spoiling of the countryside these and other services impose a heavy and increasing burden on the resident population.

VITAL STATISTICS.

Live Births :-	TOTAL	MALE	FEMALE
Legitimate	287	149	138
Illegitimate	18	8	10
Totals	305	157	148

Live Birth Rate: -12'8 per 1,000 of the population

This rate is a fraction below that of 1936, 129, and remains appreciably below that of the Country as a whole. The large proportion of elderly people in the area is bound to keep the birth rate down.

The continued preponderence of female babies has at last been ended.

Live births, are 75 less than deaths as against 19 last year a very serious adverse balance.

Illegitimate Live Birth Rate 33 per 1,000 live births, a small reduction from the figure of 39 in the year 1936.

The presence of the Rosemundy Home in the area has to be considered when reviewing these figures.

STILL BIRTHS :-	MALE	FEMALE	TOTAL
Legitimate	3	6	9
Illegitimaae	1	arate.	1
Totals	4	6	10

Still Birth Rate:—'42 per 1,000 of the population a satisfactory rate when compared with '60 the figure for the whole country. This year, one as against five of these deaths were of illegitimate children.

Deaths:	MALE	FEMALE	TOTAL
	194	186	380

Crude Death Rate: -16 per 1,000 of the population.

This figure shows a big rise 2'6 per 1,000 from that of the previous year the rise being chiefly males, which makes the male deaths slightly in excess of the female ones.

Owing to the large number of elderly people living in the area, the crude death rate is not a true figure for comparison with the rate for England as a whole or other areas in which the percentage of young and old people may be very different. Adjusting the rate for this variation it is found that:—

Adjusted Death Rate is 11'8 which gives a very satisfactory figure in comparision with 12'4 the figure for the country as a whole.

The local adjusted death rate ratio to the national crude death rate is thus '95 or a mortality 5% below that of the country as a whole.

Death of Infants under 1 year of age:-

	MALE	FEMALE	TOTAL
Legitimate	6	10	16
Illegitimate	1	1 10 2 1	2
Infantile Mortality Rate 5	9 per 1,000 live	e births.	

This rate compares with 58 for the country as a whole and shows an increase from the year previous, of the year before.

The following death rates for certain diseases are worthy of comparision with those of the Country as a whole; being the rate per 1,000 of the population.

Measles	_	England and Wales	.02
Scarlet Fever	_	,,	.01
Whooping Cough	_	,,	.04
Diphtheria	_	,,	.07
Influenza	*38	,,	·45
Violence	'26	,,	·54
Diorrhœa, Infants	-	,,	5'8 per
under 2 years		I,000	live births

The absence of deaths from the common infectious diseases as recorded above is very welcome.

Heart disease accounts again for more than one quarter of the total deaths, cancer for more than in 1936 about one sixth but tubercules at about 1 in 25 shows a marked reduction.

	Deaths	Rate per 1,000 live and still births
Puerperal Sepsis	_	nil
Other Puerperal causes	or resources a	Ann. Halinia
Total	1025	Haymoile -
A very welcome return.		

Detailed Analysis of Causes of Deaths.

20195	CAUSES OF DEATH	MALES	FEMALES
ALI	CAUSES	194	186
1	Typhoid and Paratyphoid	icil <u>a</u> lini	of the
2	Measles	a marky	ing of
3	Scarlet Fever	-	-9 00
4	Whooping Cough	-	To No.
5	Diphtheria		_
6	Influenza	7	2
7 8	Encephalitis Lethargica	1	and the same
9	Cerebrospinal Fever Tuberculosis of Respiratory System	8	3
10	Other Tuberculous Diseases		1
11	Syphilic	2 3	3
12	General Paralysis of the Insane		
	Tabesdorsalis	1	
13	Cancer Malignant Disease	26	22
14	Diabetes	1	4
15	Cerebral Hæmorrhage, etc	8	10
1ó	Heart Disase	57	51
17	Anenrysm	1	0001 15
18	Other Circulatory Diseases	6	12
19	Bronchitis	11	8
20	Pneumonia (all forms)	5	4
21	Other respiratory diseases	3	1
22	Peptic Ulcer	2	1
23	Diarrhœa, etc. (under 2 years)		
24	Appendicitis	2	1
25	Cirrhosis of Liver	ini and	2 2 3 2
26	Other Digastive Diseases	5	4
27 28	Other Digestive Diseases Acute and Chronic Nephritis	0	2
29	Puerneral Sensie		4
30	Other Puerperal Causes		n ballson
31	Congenital Debility, Premature Birth		
-	Malformations, etc	6	9
32	Senility	8	17
33	Suicide		1
34	Other Violence	2 2	1
35	Other Defined Causes	18	15
36	Causes Ill-defined or unknown causes		1
Y	Special Causes (included in 35 above)		PARTY SIGNATURE
	Small-pox	-	- 1
	Poliomyelitis		-
	Polioencephalitis		100

HEALTH SERVICES IN THE AREA.

Nursing Arrangements. The district and parish nurses carry out the work of attending the sick. Additional assistance is available from the County Council's Emergency Nursing Staff for cases of ophalmia neonatorum and puerperal sepsis.

No special nursing facilities otherwise for infectious disease except for those cases removed to the Isolation Hospital.

The District nurses are supported by local, private and voluntary associations, the County Council making grants to all districts.

There are 25 midwives practising in the district, none of whom are employed by Public Health Authorities.

Laboratory Work. The greater part is now sent to Dr. F. D. M. Hockings Laboratory, Royal Cornwall Infirmary, Truro.

Occasional use is made of the Clinical Research Association of Adelphi, London. A free supply of diphtheria antitoxin is available for cases unable to afford it. Also a free supply of antitoxin will be provided on request for immunisation of children whose parents are unable to afford payment.

LEGISLATION IN FORCE.

Adoptive Acts, Bye-Laws and Regulations relating to Public Health:—

Infectious Disease Prevention Act 1880, adopted 1899.
Public Health Amendment Act 1890, adopted 1893.
Public Health Amendment Act 1907 adopted 1913, so amended by the Public Health Act, 1936.
Housing (Rural Workers) Act 1926.

Such sections as are applicable to Rural District Bye-Laws:-

- i. With respect to new building, 1st July, 1896.
- ii. With respect to cleansing of foot ways and the cleansing of earth closets, ash pits, private and cesspools, adopted 1914.
- iii. With respect to nuisances, adopted 1914.
- iv. Registrations and Licensing of Slaughter Houses: Sections 169 and 170 Public Health Act 1878, adopted 1924.

Regulations under the Dairies, Cowsheds and Milkshops Order, 1895.

Registration of Ice Cream Manufacturers and Vendors, County of Cornwall Act 1929, adopted 1930.

HOSPITAL ACCOMMODATION.

- i. Fever. All cases of infectious disease, other than Small-pox, needing hospital treatment, have been admitted to the City Isolation Hospital which is situated in Moresk Road, Truro, and has 26 beds in 5 wards.
- ii. Tuberculosis. Tehidy Sanatorium near Camborne is available for the district; accommodation does not appear to be at all adequate.

Three beds are available at Didworthy Sanatorium for cases that live in Truro Rural District, however, little use is made of them as few will go so far from their homes.

A most serious defect is the absence of any special accommodation for advanced and highly infectious cases.

iii. Maternity. A ward containing five beds is now available for special cases where home or other conditions necessitate hospital treatment, at the Women's Hospital Redruth.

There is now a Children's Ward with 10 beds in the Royal Cornwall Infirmary. This accommodation is inadequate.

An Orthopædic ward has also been opened in the Royal Cornwall Infirmary with 14 beds.

There are also 8 Ophthalmic beds in the Hospital.

The Royal Cornwall Infirmary is available for surgical and a limited number of medical cases, 49 beds. There is not adequate accommodation for medical cases.

A few patients from the western part of the district find their way to the Miner's and Women's Hospital, Redruth.

Chronic sick are taken into the Public Assistance Institution, Redruth. This is outside the area and difficult for relatives to get at.

The same Institution also provides accommodation for unmarried mothers, illegitimate infants and homeless children.

The Rosemundy Home situated at St. Agnes and supported by voluntary effort is for unmarried mothers. There are 16 beds. Girls are kept there for 6 to 12 months and trained for domestic service with much success.

The Council does not support any of the hospitals in any way except the Fever ones.

The Bodmin Mental Hospital provides the accommodation for mental cases. Mentally deficient children are sent to the Elizabeth Barclay Home, Bodmin. Puerperal Fever and Pyrexia. There is no recognised place to which cases can be moved, in case of need, nearer than Plymouth The only aid for such cases is in the form of part-time attendance from a nurse supplied from the Emergency Nursing Staff of the County Council. There should be hospital accommodation available for such cases when needed. The life of the unfortunate mother is jeopardised when treatment has to be carried out in a poverty stricken cottage without any conveniences.

X Ray, opthalmic and massage departments exist at the Royal Cornwall Infirmary. The cost of travelling to and from the outlying districts prevents many patients from having proper treatment.

Ambulance Facilities. i. That belonging to the Home Ambulance Service of the Orders of St. John and British Red Cross Society, stationed at Truro, is available for non-infectious and accident cases. A limited part of the area make use of that at Redruth. Further facilities are badly needed in such a scattered district, especially in the summer months.

ii. Infectious cases. A special Ambulance for such cases is used jointly by the Council and Truro City Council. This is kept at the Truro City Isolation Hospital.

There are no treatment centres or clinics in the area run by the Council; this work is carried out by the County Council, whose clinics are either in Truro or Redruth and Camborne.

Further hospital accommodation for surgical and medical cases is badly needed, also for children's diseases, so that beds may be available to keep some, if not all, cases of tonsils and adenoids in for at least a night after operation.

Beds should be available for old chronic and cancer cases preferably at not too great a distance from their homes and relatives.

Sanitary Circumstances of the Area. Water supply. The summer of 1937 was a time of anxiety in some of the populous villages in the district and in particular St. Mawes and Perranporth and neighbourhood.

At Perranporth early in July it was realised that the amount of water available at the sources would be totally inadequate to deal with the summer influx of visitors. The position being serious, the Council appointed a Committee, with power to act, to get additional source or sources brought into use in the emergency which had arisen.

This Committee got to work, fully realising that unless a source could be brought into use before the 1st August the "season" at Perranporth would be ruined and its effects would linger for a long time. The only practicable source was at Mount, where a good supply was found issuing from a Tunnel or Adit, and steps were taken to bring this water into use. The work necessitated laying a Flying main for about 2 miles and discharging in the main at Rose. The erection of an Engine and Pumps and a Catchment Tank. The work was completed in little over a fortnight and the water pumped into the system. Pumping was carried out continuously—24 hours per day for two months and it is computed that 80,000 gallons were pumped every day. Subsequently pumping was reduced to 16 hours per day and later on to 8 hours per day. Pumping continued until November. It is computed that about 6,000,000 gallons of water was pumped from this source.

At St. Mawes a similar state of affairs arose and here the Council set up an emergency work at Tretham some $2\frac{1}{2}$ miles from the Reservoirs.

The work consisted of setting up a Pumping Station and chlorinating Plant. The laying of a Flying Main from the station to the Reservoirs at St. Mawes. The water was taken from the stream whose source or sources is on Philleigh Moor. Frequent samples were taken and submitted for Bacteriological Examination.

The other parts of the area, which for the greater part are dependent on Wells, suffered to a certain extent from the drought and consequent shortage. Such suffering in the main being that of having to go longer distances for the domestic supply.

Flushing in the Parish of Mylor had a restricted service for many months during the summer.

The scheme for augmenting the supply and distribution in St. Agnes Parish is well in hand, a contract for carrying out the work has been entered into.

The scheme for the supply of water to Probus has been held up as the Ministries Inspector was not satisfied with the results of the exploratory work. One understands that local opinion is on the side of the Minister in this action,

Cubert, Newlyn East, Veryan, Chacewater and district are places where a piped water supply is badly needed.

The Council successfully contested with other Local Authorities the Bill Newquay and district Water Co., promoted in Parliament. The Council's opposition was based mainly on the fact that the Co. sought powers to bring the Parish of Newlyn East in their area of supply to the exclusion, of course, of any other water undertakers, but in return there was no corresponding obligation to supply Newlyn with water. The proposed source was also in Newlyn Parish.

The following report on the water supply of the Parish of Cubert was drawn up in the early Autumn at the request of the Minister.

A Report on the Water Supply of the Parish of Cubert, in the Truro Rural District.

The supply in the Parish is chiefly from springs and wells. There are three main public sources.

1. The pump in the square, by far the most important and most used.

2. A Dip-well at Tresean.

3. A shallow Dip-well at Trevail.

1. This supply is from a deep well, 75 feet, which has never failed and supplies a large part of the village with drinking water and what other water they care to cart.

It has never been known to fail but the water level has dropped appreciably during the past dry spell, in part perhaps due

to the largely increased demand made on it.

Considerable hardship exists for many of those who live at the far end of the village who now have to carry their water some distance.

There is little or no water to be obtained from wells at a

reasonable depth in this part.

2. A considerable amount of water is running to waste at this source, but it is some way from the collection of houses for which it constitutes the supply and the approach in winter is wet and water logged.

3. This source is again situated in marshy ground at some

little distance from most of the users.

In addition at Holywell, a tiny seaside resort of recent growth, a private piped supply has apparently met all requirements during the past summer.

The rest of the Parish mostly scattered farms and their

cottages is dependent on private wells.

Being on the coast the Parish has not escaped the general tendency prevalent in the area for the erection of bungalows and houses for summer letting. The visitors to these and in many cases the owners are accustomed to modern sanitary conveniences and look for an ample supply of water.

The provision of large rain water tanks, the carrying of drinking water from the pumps and wells, cannot be looked on as a satisfactory or sufficient supply for the present requirements of

the area.

The attached Analysts' reports testify as to the quality of the water.

The contamination of the well may be due to a defect in the cover discovered at the time of sampling the water and in that case should be easily remedied.

Bacteriological examination, by cultural and microscopical methods, of the sample of water marked "Trevail Well" collected on 14/9/37. 4.10 p.m. and received here on 15/9/37 has given the following results:—

(1) QUANTITATIVE.

The average number of organisms producing visible colonies on gelatine plates incubated at 20° C. for 3 days, is found to be 60 per c.c.

The average number of organisms producing visible colonies on agar plates incubated at 37. 5° C. for 2 days, is found to be 11 per c.c.

(II) QUALITATIVE.

B. Coli ... present in 50 c.c.
Streptococci ... present in 30 c.c.
Cl. Welchii (Spores) ... present in 100 c.c.

The bacterial content is low and the few excremental organisms present are in all probability derived from surface contamination and not from subsoil pollution.

If the necessary precautions were taken this water might be used for drinking purposes.

Bacteriological examination, by cultural and microscopical methods, of the sample of water marked "Tresean Well" collected on 14.9.37, 3.45 p.m. and received here on 15.9.37 has given the following results:—

I. QUANTITATIVE.

The average number of organisms producing visible colonies on gelatine plates incubated at 20° C. for 3 days, is found to be 23 per c.c.

The average number of organisms producing visible colonies on agar plates incubated at 37. 5° C. for 2 days is found to be 4 per c.c.

(II) QUALITATIVE.

B.Coli ... present in 100 c.c. (not found in less),
Streptococci ... not found in 30 c.c.
Cl. Welchii (Spores)... not found in 100 c.c.

The B. Coli present in this water are not of the communis type, but would come within the B. Coli aerogenes classification. Taking into consideration that this supply is a surface spring these coliform bacilli can be disregarded and the water may be considered satisfactory for drinking purposes as judged from the bacteriological point of view.

Bacteriological examination, by cultural and microscopical methods, of the sample of water marked "Cubert Well' collected on 14.9.37. 3.30 p.m. and received here on 15.9.37, has given the following results:—

I. QUANITATIVE.

The average number of colonies on gelatine pladays, is found to be				574	per c.c.
The average number of colonies on agar plates days, is found to be			for 2	284	per c.c.
II. QUALITATIVE	E.				
B. Coli			 present		5 c.c.
Streptococci		***	 present	in	10 c.c.
Cl. Welchii (Spores)			 present	in	100 c.c.

The result shows that the water is being polluted with some excremental matter to a moderate extent and in its present condition it cannot be regarded as satisfactory for drinking.

Rivers and Streams. No complaints have been made respecting the pollution of any river or stream in the Council's area.

Closet Accommodation. 28 conversions from Midden and Earth Closets to Water Closets have been made during the year.

It is noticeable that the conversions have generally taken place in connection with Farm houses which in the summer months are very largely used as Guest Houses,

Another matter calling for modern sanitation is the number of people who are letting accommodation to the motoring visitor. Signs bearing the words "Bed & Breakfast" are springing up in hundreds and the sanitary conveniences are far from satisfactory at many of them.

Scavenging. Collection of House Refuse and Street Sweeping.

All the large villages in the area now have a systematic collection of House Refuse and during the year the service has been extended to some of the more scattered dwellings.

The refuse is disposed of on a semi-controlled tipping system, and but for an occasional complaint of the presence of a rat everything is conducted in a satisfactory manner. Bait is regularly laid on the dumps to prevent infestation by rats.

A weekly collection is now being undertaken at Kea—Playing Place—where a community of 43 houses have sprung up.

A similar collection is also being made at Veryan, Portloe and district,

The Council are now undertaking the work of Street sweeping in many of the larger villages. This work was previously done by the Highway Authority but since the County Council assumed control of the highways they ceased to carry out this work.

Drainage and Sewerage. Extensions of existing Sewerage schemes continue to be made as the erection of new buildings make same necessary. At Perranporth and St. Mawes such extensions have been made.

During the year Public Conveniences at Portscatho, and Chapel Porth were erected and will be greatly appreciated by the large number of visitors to these charming spots.

Conservancy System. In Mylor Bridge and Flusing the Council undertake the emptying of Closets and Middens. Else where such work is done by the Individual housholders.

Sanitary Inspection of the Area. 2657 visits have been made during the year in connection with the duties of the Sanitary Inspector. This figure does not include inspections made under the Housing Acts, which are referred to later in this Report.

Notices served under the Public Health Act 1875, were 3. Many cases of Nuisances etc. which came to light are remedied by a personal interview with or a letter written to the person concerned.

Special Classes of Premises and Occupations subject to control by the Council:

The Manufacture and Vendors premises connected with Ice Cream are registered with the Council under the County of Cornwall Act 1929.

Underground Sleeping Rooms. There are no known underground rooms habitually used as sleeping places in the area.

Rag Flock Act. There are no premises in the area to which the Act is applicable.

Swimming Pools and Baths. There is only one Swimming Pool in the area, and this is situate at Porthtowan. The water of which is changed naturally by the tides twice in twenty-four hours.

Eradication of Bed Bugs. The Council are never called upon to deal with this pest. It is non-existant in the area.

Premises.	Number of				
(1)	Inspections, (2)	Written Notices (3)	Occupiers Prosecuted, (4)		
Factories (Including Factory Laundries)	28		Nil		
Workshops (Including Workshop Laundries)	62	7	Nil		
Workplaces (Other than Outworkers' premises)					
Total	90	7	Nil		

2.—Defects found in Factories, Workshops and Workplaces

Particulars	Nun	efects	Number of Offences in		
I the bearings make we	Found	Remedied	Referred to H.M. Inspector	respect to whichProse- cutions were instituted	
(1)	(2)	(3)	(4)	(5)	
Want of cleanliness Want of ventilation Overcrowding Want of Drainage of floor Other nuisances Insufficient unsuitable or defective. Mot separate for sexes. Offences under the Factory and Workshop Acts:— Illegal occupation of underground bakehouses. (101) Other offences (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)		3			
Total	7	7			

Schools. The same remarks have again to be reported. Progress continues to be slow in providing the Schools with good lighting and drinking water.—Inprovement in sanitary conveniences could be well carried out in some cases.

The higher the standard set the children the better theirs will be in later years.

HOUSING.

Ceneral Observations.

The systematic inspection and recording of houses occupied by persons of the working classes has been steadily continued, and reveals a considerable number of such houses to be very old and in many cases in a very poor state of repair.

There still exists a number of back to back houses, many of which are occupied by one or two elderly people, who do not appear to suffer in health as a result of occupying such premises.

There are many single detached cottages scattered throughout the area some of which are situated in low lying places or under a hill. It is almost impossible to render such cottages dry and healthy, owing both to their situation and to the fact that damp proof courses are not incorporated in their structure.

In the various villages and hamlets in the district are many very old properties which must be a constant expense to their owners in keeping them up to a reasonable standard of repair.

Inadequate internal sanitary amenities, and lack of proper sanitary conveniences constitute a menace to public health, and where these conditions prevail it is difficult for a Public Health Authority to check the spread of infectious disease. Where possible, it is the constant aim to persuade owners of property to provide larders, introduce better supplies of water for rendering personal and household cleanliness easier, and to abolish that foul anachronism, the privy midden, which in itself is a breeding place for flies and other vermin.

Thatched roofs and cob walls are a feature of the Cornish landscape, and although such structures have a very picturesque appearance, they are generally damp, without sufficient light, and in many cases are infested with vermin which find an easily tunnelled wall and loose warm thatch to be ideally suited to their requirements, much to the discomfort of the occupier of the premises. Such properties, althoug delighting the eye of the artist or visitor to the district, assume quite a different aspect when the artist or visitor takes up his abode in them, and it must be remembered that the occupants of such dwellings are there not always from choice, but because they are unable to afford the rent of better accommodation in the district.

Reasons of Shortage.

There is a growing demand for satisfactory houses to let at low rentals owing to several reasons, the chief of which appears to be the system adopted by owners of such properties at both the sea side and inland in the more wooded and beautiful districts of letting off their houses in the summer to visitors who are prepared to pay more for a few months than the houses would let at for the whole year to a person of the working classes.

Secondly, the speculative builder has ceased his activities in respect of small working class type houses, and prefers to build dwellings to sell round about £600 or £700.

Thirdly, the very high cost of materials in this neighbourhood as compared with the cost of similar materials in places as near as Plymouth. This is an inexplicable fact.

Fourthly, the inability of the District Council to build suitable houses to let at an economic rent unless they are subsidised by a higher Authority. Even then the District Council could only build to replace houses which were to be demolished as unfit for human habitation up to the passing of the Overcrowding Act, when it became possible to build subsidised houses to rehouse overcrowded families only.

Recently, however, a new Statute has been introduced which is to be known as the Housing (Financial Provisions) Act 1938, under which it is hoped this Authority will be enabled to provide a number of new houses of such a size, and at such a rent as will be suitable for persons of the working classes.

Provision of new houses.

During the past year the whole of the Five Year programme which was undertaken by the District Council for "Slum Clearance" and also the whole of the Overcrowding rehousing programme was put in hand.

Under the "Slum Clearance" programme ten houses have been completed and eight are in process of building.

Under the Overcrowding rehousing programme ten houses are being erected. In addition to the above, Clearance Orders have been made which will neccesitate the erection of another twenty houses. Delay has been caused by the difficulty experienced in obtaining suitable sites for the erection of these houses, and it was found necessary to apply for Compulsory purchase powers in two instances, both of which were successful.

It is hoped that during the coming year the whole of these houses will be completed and occupied, and it is with a feeling of gratification that the Council look upon these houses as being well built of good materials to a pleasing and practical design.

General Notes.

In my last report I revealed that this District was bracketed with another Rural Area as being the least overcrowded in the whole of the Country, but the standard set up by Act of Parliament was found to be very low when applied to a Rural Area of such a class as ours, and it is hoped that at some future date another standard will be instituted which will satisfy the peculiar conditions existing in Cornwall.

Some satisfaction, however, will be felt when I say that the Overcrowding Act was responsible for a mass of statistics being compiled which is kept regularly up to date, and from which at any moment, the state of the district from the distribution of population point of veiw can be obtained. Every house of every size in the District is tabulated, and from time to time all births, deaths, and removals are recorded.

These statistics might prove of considerable value in case of any national emergency.

There are still a number of houses which must be dealt with shortly as being unfit for human habitation, and the work of rendering others fit for human habitation is still being carried on-

Inspection of Dwelling Houses during the year 1937 :-

purpose

1.	(a)	Total number of dwelling houses inspected for defects (under Public Health or Housing Acts)	1250
	(b)	Number of inspections made for the purpose	1400
2.	(a)	Number of dwelling houses (including under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regs. 1925	965
	(b)	Number of inspections made for the	

1000

43	3. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation
235	4. Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation
	Remedy of defects during the year without service of formal notice:
206	Number of defective dwelling honses rendered fit in consequence of informal action by the Local Authority or their officers
	Action under Statutory Powers during the year :-
	(a) Proceedings under sections 17, 18 and 23 of the Housing Act, 1930.
1	(1) Number of dwelling houses in respect of which notices were served requiring repairs
	(2) Number of dwelling houses which were rendered fit after service of formal notices
1 Nil	(a) by owners (b) by Local Authority in default
	(b) Proceedings under the Public Health Acts:-
	(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied.
	(2) Number of dwelling houses in which defects were remedied after service of formal notices
Nil	(a) by owners
Nil	(b) by Local Authority in default
	(c) Proceedings under sections 19 and 21 of the Housing Act, 1930:—
2	(1) Number of dwelling houses in respect of which Demolition Orders were made
4	

	(2) Number of dwelling houses demolished in pursuance of Demolition Orders	2
	(d) Proceedings under section 20 of the Housing Act, 1930:—	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
HOUSIN	C ACT, 1936. — PART IV. — OVERCROWD	ING.
(a)	(1) Number of dwellings overcrowded at the end of the year	27
	(2) Number of families dwelling therein	27
	(3) Number of persons dwelling therein	88
(b)	Number of new cases of overcrowding reported during the year	0
(c)	(1) Number of cases of overcrowding relieved during the year	0
(d)	(2) Number of persons concerned in such cases Particulars of any cases in which dwelling houses have again become overcrowded after the	0
	Local Authority have taken steps for the abatement of overcrowding	None
(e)	Any other particulars with respect to overcrowd- in conditions upon which the Medical Officer of Health may consider it desirable to report.	

INSPECTION AND SUPERVISION OF FOOD.

No samples of Milk for Bacterial Count have been taken. Since the 1936 Special Designations Order the County Council have become the Licencing Authority and it is presumed that they take samples of the Designated Milks as required by the Order.

Periodical inspections are made of the premises of Registered Producers and much advice has been given as to the improvement necessary to bring such premises up to the requirements of the Milk and Dairies Order.

No complaints have been received as to the quality of Milk vended in the area nor has there been any infectious disease attributable to same. Very many of the small retailers have ceased to carry on and now in many area in the Country districts it is impossible for the Cottage dwellers to get fresh Milk. It is easier for the farmer to sell all his Milk in bulk to the factories. Hence in many households whole families including children and expectant mothers for months in the year have to use condensed milk. This is highly undesirable and perhaps one of the unforeseen consequences of the Milk Marketing regulations.

Meat. Regular inspections of the Slaughterhouses in the area have been carried out, but with such a large area, containing as it does nearly 100 Registered and Licensed Slaughterhouses, the task of systematic inspection is impossible.

To ensure such inspection some system of centralized slaughtering would be necessary. Some such scheme will, in my opinion, ultimately be found to be the best in the interest of the consumer, and possibly that of the butchers too.

No figures are available of the numbers of Animals slaughtered, but that would run into many thousands, as there are quite a number of Slaughterhouses wholly given over to the Slaughter for the London and other Provincial Markets.

Two whole carcases and four quarters of Bovines were condemned as a result of generalized Tuberculosis. Whilst a number of carcases of Pigs have been condemned for the same reason. A large number of Heads of Pigs have been seized owing to the presence of T.B. in the head glands.



Infectious Disease. 138 visits were paid to cases of infectious disease.

Scarlet fever was prevalent in an endemic state in St. Agnes district for several months. At no time was there an epidemic, two, three or at most four cases occurring more or less at the same time, at varying, and at times long intervals. The majority of cases were among school children in the 7—10 year classes and in a few cases relatives contracted the disease from them. Swabbing of the throats of many of the children in the school and contacts showed almost a third had haemolytic streptococci present in their throats but no greater number of these than the negative contacts swabbed developed the disease. Milk which came under suspicion on certain occasions was found to be satisfactory.

The virulence of the disease was low and it seemed probable that mild cases af sore throat not reported to a doctor may in some cases have been scarlet fever. School closure on two occasions appeared for a time likely to be effective but the disease again showed itself after an interval suggesting a fresh source of infection of possibly a different strain of streptococci. The almost complete absence of diptheria is both welcome and unusual. Two cases were diagnosed as such after admission to hospital with scarlet fever. The same applies to puerperal fever. It is worth noting that in future puerperal pyrexia will include all cases previously notified as puerperal fever.

The incidence of erysipelas was again small and of no significance.

The notifications of pneumonia are more complete and now bear a reasonable ratio to the deaths, but it is certain that some of the milder cases are not notified.

The influenza epidemic in the first few months of the year was widespread and accompanied by a moderate amount of pneumonia and extreme prostration, hence the large increase in deaths in comparison with 1936.

When an epidemic exists cases where there is overcrowding, extreme poverty or inability to isolate adequately are those removed to hospital as well as those more severe cases needing skilled nursing.

No use has been made of the Schick or Dick Tests during the year,

No vaccinations have been performed under the 1917 Public Health Regulations.

Cancer. The following table shows clearly the number of deaths of the two sexes at the different age periods.

AGE	MALE	FEMALE
1—30	unsolo loome have	To been soarlet te
30—40	1	Shoughlerts -
40—50	tion is 1	2
50—60	7	4
60-70	8	7
70—80	7	8
over 80	3	1

The male figures are surprising shewing nearly 40% increase. There is a small decrease in the female numbers, cases in the generative tract are again few. These cases of sarcoma ended fatally. This disease is more rapidly fatal and occurs in younger people than cancer.

No helpful information appears to be gained from the study of the localities in which the cases occurred during this period.

The nearest radium is still at Plymouth and cases are unwilling to go so far from home.

INFECTIOUS DISEASES.

NOTIFIABLE DISEASES (other than Tuberculosis during 1937

DISEASE	Total cases Notified.	Cases admit- ted to Hospital,	Deaths.
Small-Pox		mell mell s	_
Scarlet Fever	38	27	
Diphtheria	05-	2*	-
Enteric (including	_		
paratyphoid) Pneumonia	19	_	9
Puerperal Fever	Concess.	mer to nome	over 2
Puerperal Pyrexia	4	u ne de noi	-No ac
Erysipelas	4	- OF B	
Encephalitis Lethargica	nauo as unuo	1*	1*

^{*} This case was admitted to hospital outside the area before a diagnosis had been made.

An analysis of the notified cases under age groups gives interesting figures:-

Age Group.	Scarlet Fever.	Diph- theria.	Enteric.	Puperar Fever.	Puer- peral Pyrexia.
Under 1	1_		E		20-25
,, 2	3	- Lide En			88- 53
,, 2	-	-	MEN A MEN		35-45
,, 4		na stran	to hall be	the parties	1.66 - 64
,, 5	3	-	- Bridge		5565
5—10	-	_	-	el el	mwqu 29
10—15	5	-			1
15-20		-	In order	orie in a	rolloging
20-25				TOTALS	2
25-35	2				1
35—45	1	Market Skinster			
over 45 years	1				

^{*} These two cases were notified as diphtheria in hospital as well as scarlet fever.

25 OPHTHALMIA NEONATORUM.

Cases.			Vision Unim- pared.	Vision Impar- ed.	Total Blind- ness	Death	
Notified.	Trea	ited.	office		DISEASE		
	at Home	Hospital				ed-lise	
2	1 2	1	29	_	ver to belong	arlet Pi ip \delic eri steric (i	

Prevention of Blindness.

No action taken under Section 66 of the Public Health Amendment Act

TUBERCULOSIS.

New Cases and Mortality during 1937.

Age Periods.		NEW CASES.			DEATHS.				
Age Periods.	Pulmonary Non- Pulmonary			Pulmonary. Non- Pulmonary					
0— 1	nde	M	F	М	F	М	F	M	F
1— 5 5—10 10—15			-thr	id.	wiet.	80	vien	Day	
15—20 20—25 25—35		3 1	2 1 3	1	o in E	1 1	1	1 1	1
35—45 45—55 55—65 65 upwards		3 2 1	I			2 1 2 1	1	No.	
TOTALS		13	6	1	-	8	3	2	1

27

Tuberculosis. For 1937 there is an appreciable increase in male notifications and satisfactory decrease in male deaths otherwise there is little change with male and female figures. It would appear that occupation plays a part in the high incidence among males in middle life, particularly mining. The large number of deaths each year in relation to notifications make it appear propable that many mild cases of tubercular infection are never diagnosed or notified and these recover. The stigma attached to being labelled T.B. prevents a definite diagnosis being made in some of these cases, hence they are only notified later on if they relapse.

Notifications before death are probably better than would appear from bare facts as some patients do all in their power to hide their trouble and move from one area to another where their trouble is not known.

The percentage of cases notified before death was 71%.

Longer periods in the sanatorium appear to be giving better results, but all too often return home means work, worry and insufficient food of the right type and often stuffy and overcrowded rooms. Hence relapses soon occur with disastrous results.

The provision of comfortable homes for advanced cases is a pressing need. The young mother with a family and the wage earner who struggle to the last to carry on fail to realise the harm they may be doing to their family and others.

Education of the public will play a great part in producing a fitter community who given freedom from overcrowding and better housing conditions should rapidly become less susceptable to the disease.

A. RADBURNE FULLER.