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Warwickshire County Council.

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1951.

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Office of the County Medical Officer of Health, Shire Hall,

WARWICK.

To the Warwickshire County Council.

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to report on the Health of the County of Warwickshire during 1951,

There has been a check in the generally falling trend of two vital statistics. The still-birth rate increased from 18.9 per 1,000 births in 1950 to 23.4 in 1951, and the infant mortality rate increased from 26.9 per 1,000 live births in 1950 to 28.4 in 1951. The corresponding facts for England and Wales as a whole are that the stillbirth rate rose very slightly from 22.7 in 1950 to 22.9 in 1951, and the infant mortality rate fell from 30.0 in 1950 to 29.6 in 1951, a much smaller drop than in previous years.

It is too early yet to comment on the significance of these facts. They may represent a temporary halt in the steady downward progress.

In sharp contrast is the continuation of the fall in the death rate from pulmonary tuberculosis which began in 1949. This fall is discussed in detail in a later section of the report. Notifications of the disease were slightly higher in 1951 than in 1950.

Rirth Rate.

For the first time since 1948 the birth rate did not fall, but rose slightly from 15.7 in 1950 to 15.8 in 1951. The birth rate for England and Wales as a whole fell from 15.8 in 1950 to 15.5 in 1951, a smaller drop than in previous years.

In order that recent changes in the birth rate may be seen in their true perspective, a diagram has been prepared (see page 9), showing the birth rates in Warwickshire, and in England and Wales since 1910. The diagram shows the big fluctuations, very different in kind, which took place around the two war periods, and it also shows the steady downward trend which took place in the late 1920's and early 1930's. When such large fluctuations are possible, it is clear that predictions about the future must be highly speculative.

It is interesting to note the very close correspondence between the birth rate for Warwickshire and that for England and Wales, the only exception being the period from 1938 to 1945 when the Warwickshire rate was considerably higher than that for England and Wales.

Illegitimate Birth Rate.

The number of illegitimate live births has fallen sharply from 374 in 1950 to 291 in 1951. This fall can be judged against its proper background if reference is made to the diagram on page 10, which shows the illegitimate birth rates for Warwickshire and England and Wales since 1919. The diagram shows the very steep rise which took place from 1941 to 1944, and also shows that the big fall during 1951 has still not restored the rate to its pre-war level.

Stillbirths.

The number of stillbirths per 1,000 total births increased from 18.9 in 1950 to 23.4 in 1951, the highest figure since 1945. Study of Table 8 shows that most of the increase occurred in the Eastern, North Western and Central Areas of the County, and in Solihull. The number of premature stillbirths increased from 82 in 1950 to 105 in 1951, these numbers being 55% and 57% respectively of the total number of stillbirths.

Infant Mortality.

The infant mortality rate also rose, from 26.9 per 1,000 live births in 1950 to 28.4 in 1951, just below the 1949 figure of 28.8. The increase has occurred entirely in the neo-natal period, the deaths between one month and one year having fallen from 9.5 to 8.2 per 1,000 live births. Increases have occurred in all areas of the County except the North Western, where the rate for Meriden fell from the high level it reached in 1950.

It is of interest that in Sutton Coldfield there was not a single death of a child between the age of one month and one year. The causes of death, both in the neo-natal period, and in the period between one month and one year are shown in Tables 9 and 10 for 1951 and 1950. It will be seen that the increase in neo-natal deaths is almost entirely due to an increase in the number of deaths from prematurity alone. These have increased from 31 in 1950 to 53 in 1951. In addition 30 deaths in 1950 and 36 deaths in 1951 had prematurity as an associated cause. Thus 46% of all neo-natal deaths in 1950 and 57% of all neo-natal deaths in 1951 had prematurity as the main or associated cause.

In the deaths between one month and one year there was a slight increase in the number of deaths from bronchitis and pneumonia, both as the main and as the associated cause. This increase was more than offset by a decrease in the number of deaths from infections of the central nervous system and from miscellaneous other causes.

Premature Births.

Table 6 shows that the number of premature births notified per 1,000 total notified births was higher in 1951 than in 1950. The percentage survival was 83 compared with 86 in 1950, and this lower survival rate, coupled with the higher number of premature births has brought about the increase in the neo-natal mortality rate previously noted.

Maternal Mortality.

There were 4 maternal deaths in 1951, a death rate of 0.50 per 1,000 total births, compared with 3 deaths in 1950, a death rate of 0.38 per 1,000 total births. The provisional figure for England and Wales for 1951 is 0.79 per 1,000 total births.

Ophthalmia Neonatorum.

A recent enquiry by the Ministry of Health has revealed that 40% of local health authorities and 50% of hospitals have abandoned the use of chemical prophylactics as a routine measure at birth in domiciliary and institutional midwifery. There has been no appreciable rise in the incidence of ophthalmia neonatorum or sticky eyes as a result, indeed, in a considerable number of instances the incidence has fallen.

In this county chemical prophylactics are not given as a routine measure, but a supply of collosol argentum is given to the midwives for use at birth at their discretion. It is mainly used for emergency or unbooked cases and where there is any reason to suspect the presence of infection in the mother.

There were 5 cases of ophthalmia neonatorum notified (3 Warwickshire and 2 Birmingham) during 1951, 2 from domiciliary confinements and 3 from institutional confinements; of the three Warwickshire cases there was no permanent damage to the eyes.

The Uptake of Ministry of Food Vitamin Products.

A factor of considerable importance to the health of the expectant mother and the preschool child is the use made of the Ministry of Food's scheme for the supply of vitamin products, either free as cod liver oil and vitamin A and D tablets, or at a small charge as orange juice (5d. per bottle). The Midland Regional Office of the Ministry of Food publishes quarterly figures of the average weekly uptake of vitamin products in the county, together with estimates of the percentage of the potential uptake which has been achieved. The last figure is calculated from the actual issue and the potential issue based on the number of expectant mothers and children under 5 in each district. A summary of these figures is given in Table 29, from which it will be seen that there are considerable variations in uptake in the different districts. Thus for example Sutton Coldfield and Solihull have a consistently higher uptake than the North Eastern and North Western areas.

In this connection it is interesting to note one of the findings contained in a report by the Central Office of Information on an enquiry into the uptake of these foods made for the Ministry of Food in 1951. I quote:—

"Children whose fathers have high incomes take more welfare food than children whose fathers have low incomes. Although the groups of the sample were small, those children whose fathers earned more than £10 a week were taking orange juice four times as much and cod liver oil nearly three times as much as the children whose fathers earned less than £5 a week. Compared with children of the poorer fathers, about twice as many children of richer fathers took their supplements."

A further interesting paragraph reads as follows:-

"The evidence based on this small sample indicated that the main factor was whether or not the mother was pregnant for the first time. Three quarters of those who were pregnant for the first time took their vitamin preparations whilst only a third of those who had already had two children took their supplements. There was also evidence that the wives of manual workers take their preparations less than the wives of non-manual workers."

Thus it appears that the very people who need the extra foods most are taking them least.

Pulmonary Tuberculosis.

There were 418 notifications of new cases of pulmonary tuberculosis in 1951, compared with 407 in 1950. They were made up of 64 children under 15, 210 males and 144 females over 15. The comparable figures for 1950 were 58 children under 15, 191 males and 158 females over 15.

The mobile unit of the Regional Hospital Board's Mass Radiography Centre made four surveys in the County during 1951. Two were in large industrial undertakings in Rugby, one was in a colliery in Ansley, and one was in a hostel for industrial workers at Rugby. 20 out of 7,306 men X-rayed (0.3%), and 2 out of 1,823 women X-rayed (0.1%) were referred to dispensaries as suspected active pulmonary tuberculosis, and of these, 12 cases were subsequently confirmed, 2 were not confirmed and 8 are still under observation.

68 males and 35 females died from pulmonary tuberculosis during the year compared with 85 males and 37 females in 1950.

The death rate from pulmonary tuberculosis has fallen sharply in the last three years. After having remained fairly steadily between 0.40 and 0.45 per 1,000 population for the whole of the period 1935 to 1948, it fell to 0.30 in 1949, to 0.24 in 1950 and 0.21 in 1951.

When changes of such magnitude are taking place it is of interest to examine them as closely as possible, and to this end the deaths for two years, 1938 and 1939, before the fall, and two years, 1950 and 1951, after the fall, have been analysed and compared in detail. The results are shown diagramatically on page 14.

The deaths for the two periods have been sub-divided into males and females, and this reveals two points. The first is that the male death rate was higher than the female death rate in both periods, and the second that the female death rate has fallen very much more than the male. The result is that for the two years 1950 and 1951 the female death rate was less than half the male.

The deaths have been further sub-divided according to the age at death. This has been indicated on the diagram by blocks of different types of shading showing the proportions of the total deaths occurring in each age group. Two more points emerge from this sub-division. The first is that in 1938 and 1939 more females than males died under 45, but considerably more males than females died over 45. The second and major point is that the fall in the death rate between the two periods has been confined almost entirely to deaths under 45 years, the number of deaths over 45 years having remained practically unchanged.

The reason for the greater fall in the female than the male death rate is now clear; it is due to the higher proportion of female deaths occurring under 45, the age-group in which the improvement has been concentrated.

To complete the investigation the numbers of notifications in the four years 1938, 1939, 1950 and 1951 have been similarly grouped and compared. The results are shown diagramatically on page 15. The diagram shows that for males the number of notifications has increased in all age groups, and that for females the increase has been less, and is chiefly confined to the age-group under 15. Thus although the number of deaths has fallen dramatically in the last few years there has been an increase in the numbers of people who are known to have contracted the disease. This may be due to better case-finding, and if this is so it is to be expected that the result will be a much lower rate of notifications in succeeding years due to the removal of the pool of infective cases.

Classification of the stage of disease at diagnosis has been obtained for the majority of newly notified cases during 1951, and detailed figures are given in Table 23. About half the total classified cases (154 out of 338) were in an early stage of the disease at the time of diagnosis. This proportion varies with age, it is about two-thirds for persons under 25, but less than one-third for persons over 25. This last proportion is very low, and constitutes a major problem to the tuberculosis service.

The search for the early case will be most successful if it is directed to those groups of people who are most likely to be affected. Thus it seems to me that the most effective means of detecting them are as follows:—

- Examination and X-ray of all contacts of known cases, both home contacts and work contacts,
- X-ray of persons of sub-normal health, many of whom are attending general practitioners' surgeries and hospital out-patients departments.

Experience in other parts of the country has shown that the percentage of active cases found at general practitioners' sessions of mass miniature radiography units is about 3, compared with 0.3 to 0.4 found by the majority of mobile mass radiography units making surveys in factories, schools and the like.

- Systematic Mantoux testing of school entrants and investigation of family contacts of positive reactors.
 - 4. Systematic surveys of populations in compact socially depressed areas.

These subjects are under active discussion with the chest physicians.

Specialist treatment is generally speaking immediately available for the case diagnosed in an early stage, as priority is rightly given to early, curable cases. The problem, however, is still extremely difficult for the more advanced case as it is more difficult to obtain adequate treatment for him and he is usually infectious.

Steps to prevent the spread of infection.

The primary consideration is to find cases early and treat them before they are infectious. But if this has not been done and a case is found in an infectious condition, clinical treatment is given, the home is visited and the case together with the family given instructions in hygiene which, if carried out, very greatly reduce the infectivity of the case. When suitable a shelter is provided.

One of the greatest dangers is the infection of the children, and under the B.C.G. Scheme which is now being started the children are tested, and if found to be susceptible, are given immunising injections.

It should not be forgotten that in the attack on pulmonary tuberculosis the general standard of housing and food supply is still of paramount importance.

Milk and Dairies Administration.

Samples for biological testing are taken from all grades of milk, and, as in previous years, not a single sample of Pasteurised or Tuberculin Tested milk proved to be positive. On the other hand 3.5% of the samples of Accredited and non-graded milk were found to be positive.

The positive samples found by our own routine sampling and that of neighbouring authorities are referred to the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries who makes investigations with the object of finding the source of infection. As a result, 57 infected cows were slaughtered during the year.

While this work is of great value in reducing the amount of tuberculosis in the herds, it should be realised that it does not guarantee safety to the people drinking Accredited and non-graded milk.

The eight pasteurising plants in the County were supervised by frequent inspections and milk samples during the year. Milk samples showed an improvement over 1950 and a remarkably good achievement on the part of the dairies as a whole.

Almost all the milk supplied to school children in schools is Pasteurised or Tuberculin Tested, and is sampled after delivery to the schools, at least once in each school term.

A more detailed account of this work is given on page 44.

Smallpox.

The County remained immune from smallpox during 1951.

Early in the year all Medical Officers of Health were informed of the smallpox outbreak at Brighton and Hove, which was announced as "all clear" on the 1st February.

Precautionary steps were taken in respect of the incidence of smallpox on board S.S. "Strathmore," which arrived from Australia in the Port of London on the 12th February, and in the case of the S.S. "Ranchi," which reached Tilbury on the 8th May.

Presumed contacts from these ships who subsequently arrived in the County were kept under surveillance for the recognised period but no cases were reported.

Diphtheria.

10 cases of diphtheria were notified in 1951, compared with 14 in 1950. 4 of the individuals had been immunised. There were 3 deaths, compared with 1 in 1950. They were a boy of 4, a boy of 6 and a girl of 11, none of whom had been immunised.

Diphtheria Immunisation.

The number of children immunised against diphtheria during 1951 was the highest for a number of years. 7,401 children completed courses of primary immunisation and 7,063 were given booster doses. These higher figures were partly due to the fact that there was no stoppage of immunisation for poliomyelitis.

At the present time only about 60% of the children in the County are immunised, as will be seen from the diagram on page 11. If the higher rate of immunisation achieved in 1951 were maintained, this figure would be increased to about 80% for children born in 1951 and subsequently.

Poliomyelitis.

The outbreak of poliomyelitis during 1951 was relatively mild, both in numbers attacked and in severity of attack. There were 37 notified cases, 11 paralytic and 26 non-paralytic, compared with 133 notified cases, 92 paralytic and 41 non-paralytic in 1950. There were no deaths. The varying incidence of this disease during the past five years is shown in the diagram on page 12.

Although the number of notifications was small, it was nevertheless higher than average for England and Wales, although not as high as in Coventry or Birmingham. The incidence was highest in the North Eastern and North Western areas of the County.

The age grouping of the notified cases is shown in Table 21, together with a summary of the state of the paralytic cases at the beginning of 1952.

Other Infectious Diseases.

The number of notified cases of measles and whooping cough in 1951 was even higher than in 1950 and was, in fact, the highest on record in the County since the diseases became notifiable in 1940. Measles was particularly prevalent in Solihull, and in the Central and Southern parts of the County, while whooping cough was most prevalent in the Eastern, North Western and Southern parts of the County.

There were 3 deaths from measles and 7 from whooping cough.

Following the favourable conclusions on the effectiveness of vaccines against whooping cough reached by the Medical Research Council after an extensive survey, it has been decided to make the vaccines available in Child Welfare Centres throughout the County, and this immunisation has already begun.

There has been a considerable increase in the number of notifications of puerperal pyrexia due to the changed definition of the disease which came into operation on August 1st, 1951. Under the new definition a case is to be notified as puerperal pyrexia if the temperature reaches 100.4°F once within 14 days of childbirth or miscarriage. Under the old definition it was necessary for a temperature of 100.4°F to have been maintained for 24 hours or to have recurred within 24 hours before the case was notifiable.

Venereal Disease.

There was a substantial fall in the number of new cases of syphilis treated at the clinics, from 98 in 1950 to 54 in 1951. The number of new cases of gonorrhoea coming under treatment was the same as in 1950, a continuation of the low level established in that year.

The social worker was asked to investigate 37 defaulters from the clinics during the year, 6 men and 31 women. She was successful in inducing 30 of them to attend the clinics. Of the remainder, 5 left the County before attending a clinic and 2 refused to attend. These latter were not in an infectious condition.

Ante-Natal and Post-Natal Clinics.

This work is closely allied to the Regional Hospital Board and during the year one clinic was transferred to the Board. The Local Authority has a duty to see that all expectant mothers have adequate medical treatment and, although in many instances this is effectively discharged by the Regional Hospital Board and General Practitioners, there remain some areas where Local Authority Ante-Natal Clinics are still required to close the gap. There is considerable overlap between the three services, and although every effort has been made to produce satisfactory integration, there is still room for improvement.

There has been a small decrease in the proportion of domiciliary confinements, from 36% of all confinements in 1950 to 33% in 1951, a continuation of the trend of recent years.

Dental Treatment of Expectant and Nursing Mothers and Pre-School Children.

During the year, there were several changes in the professional staff and the average number of dentists employed in terms of whole-time officers to provide all the dental services in the County was 5.5, 1 less than in the previous year. This is less than a third of establishment and it is consequently impossible to operate a comprehensive dental service under this section of the Act. No attempt was made to carry out a routine inspection of every case attending the M. & C.W. Clinics, but only those who requested or were referred to the County Dental Officers for treatment. Actually more cases were treated than during the previous year, namely 61 expectant and nursing mothers and 348 pre-school children, compared with 47 expectant and nursing mothers and 294 pre-school children in 1950. There is little likelihood of being able to effect much improvement until there is a substantial increase in staff.

In the Southern area there is a mobile dental clinic, which while primarily intended for school children, is also available for the treatment of expectant and nursing mothers and preschool children.

The Illegitimate Child and its Mother.

There were no major changes in the nature of the work from that described in my 1950 Report. Although the number of illegitimate births fell considerably during the year, the number coming to the notice of the Social Worker was 270, only 30 less than in 1950. 203 of the cases were given help of some kind. The remaining 67 were offered help but did not require it. As will be seen from Table 11, they were mainly rather older women,

In 76 of the 270 cases the children were placed for adoption, in 5 they were placed in children's homes, and in 10 they were placed with foster-mothers. In the majority of the remaining cases the mother kept the child.

As in 1950 the Guild Street Ante-Natal and Post-Natal Hostel for unmarried mothers and their children was used to capacity, 85 mothers having been admitted during the year. Of the 50 women who made ante-natal stays, 31 stayed for less than one month and 19 for more than one month. Of the 67 women who made post-natal stays, 49 stayed for less than one month and 18 for more than one month.

12 women were sent for ante-natal stay and 2 for post-natal stay in other Homes, and as in 1950 this was mainly to relieve pressure on the Guild Street Hostel or to enable mothers requiring some form of special training to obtain it.

Day Nurseries and Nursery Nurses' Training Scheme.

The Training Scheme for Nursery Nurses continued successfully throughout the year. The number of students in training at the end of 1951 was 41, compared with 40 in the previous year. 23 students passed the County Examination and 22 passed the National Nursery Examination Board examination. There were no failures.

The day nurseries have not been working to capacity, as the rigid conditions for admission have reduced the admissions to a level in which on an average only 60% of the 40 places in each nursery have been used. In consequence the costs per place have been somewhat high. It has now been decided to widen the categories of admission and to charge all cases either the full cost or a proportion of the full cost assessed according to a scale.

Nurseries and Child Minders Regulation Act, 1948.

At the end of the year 5 certificates of registration for child minders were in force covering 30 children. Inspections of child minders are made every 6 months, and during inspections made in 1951 they were all found to be satisfactory.

The one certificate of registration of premises in force at the end of 1950 was cancelled during 1951, as the owner decided to relinquish the work, and no new certificates were issued.

Registration of Nursing and Maternity Homes.

During 1951 one nursing home was closed by the proprietors and one new nursing home was registered.

Table 14 gives details of the 14 Homes which were on the register at the end of the year. Inspections of these nursing and maternity homes are made every 6 months and during 1951 they were all found to be maintaining satisfactory standards.

Care and After-Care Loan Scheme.

Table 24 shows the growth since 1948 of the Care and After-Care Loan Scheme initiated under Section 28 of the National Health Service Act, 1946. 32 different items of equipment have been issued on loan, ranging from beds and invalid chairs down to small items such as back-rests and bed-tables, conducive to the well-being of the patient making a long stay in bed. For almost every item the numbers issued were considerably higher in 1951 than in 1950, and it is possible that the numbers will rise still more as the service becomes better known.

The equipment is kept in a central store from which it is supplied direct to the house where it is needed, on request from the Area Medical Officer. Each house where equipment is on loan is visited every two months by a health visitor who checks that the items are still required. This ensures that there is not too long a delay before the items are returned and also that the equipment is being used with care.

County Ambulance Service.

During the past year 1,035,301 miles were covered by the Ambulance Service compared with 1,045,111 miles in 1950 and 1,011,602 miles in 1949.

The W.V.S. Hospital Car Service, which operates mainly in the rural areas, covered 103,366 miles in the same period as compared with 102,599 miles in 1950 and 98,395 miles in 1949.

In the annual report for 1950 it was stated that the service had become stabilised and the figure for 1951 bears out this statement, although it should be emphasised that with the growth of the Tuberculosis Service and the establishment of new Physiotherapy and Deep X-ray units a considerable increase in ambulance miles is anticipated. Many of the patients using these facilities are out-patients and require regular transport for prolonged periods.

A close scrutiny of all requests for non-emergency transport has been maintained and the satisfactory results have only been obtained by this constant vigilance.

The policy has been to operate from eight main depots with superintendents who are in daily contact with the hospitals and general practitioners in their particular area, and to whom full power has been given to deal with and co-ordinate all routine requests, thus preserving the individuality of each depot and developing a mutual understanding between all concerned. Other routine requests, for example, out of County hospital cases, prolonged treatment cases, journeys by train, have been dealt with by the Central Administrative Staff.

During the year there have been no major changes of policy. The administrative problems arising from the 1946 Act and the 1949 Amendment Act have gradually been sorted out and in July, 1951, a directive was issued by the Ministry of Health on the Ambulance Service, with special reference to the Control of Use of the Service, the Scope of Local Health Authorities' Obligations, and the Supplementary Training of Ambulance Staff.

The Minister viewed with concern the increased demands on the ambulance service in general, particularly in relation to the transport of sitting cases, and expressed the belief that something could be done to limit these demands and possibly lighten them without denying the help of the service to anyone for whom it is genuinely necessary.

In this County many of the recommendations and suggestions had already been put into practice as a result of the close daily co-operation maintained with the staffs of hospitals, general practitioners and our own Central Administrative Staff and the Depot Superintendents.

The number of patients carried during the year was as follows:-

	County	W. V.S.
	Ambulance	Hospital
	Service.	Car Service.
1st January-30th June, 1951	 43,849	 1,923
1st July-31st December, 1951	 69,600	 3,653

It will be observed that the figures for the last six months of the year are considerably higher than those quoted for the first six months, but this is attributable to the Ministry of Health's new intrepretation on the term "patient." For the second period an Out-patient, who is conveyed to and from hospital on the same day, is recorded as two patients.

The two special vehicles allocated for treatment cases at the Pump Rooms, Leamington Spa, have proved by their special design and assembly to be most suitable. The vehicles are equipped to carry seven patients and are heated. The seats have been designed to take the grossest deformity.

Health Education.

Many members of the staff have helped with the health education of the public during the year, although there is still room for expansion of this important work.

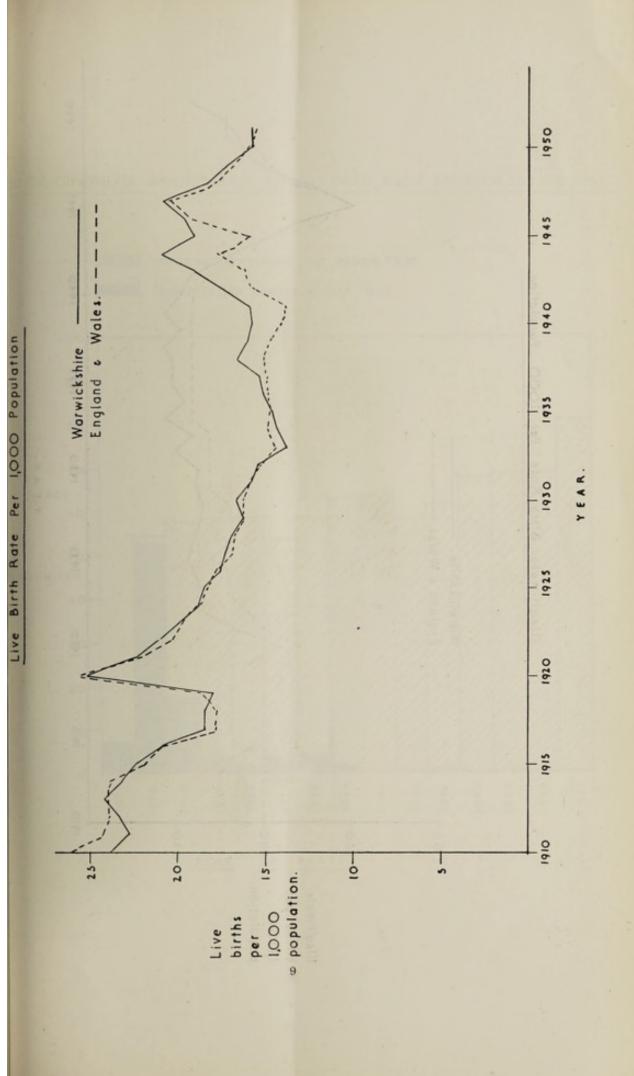
Full use has been made of the opportunities afforded in the child welfare centres, by the display of posters and other exhibits and by special talks to groups of mothers. A similar opportunity has been seized by arranging talks for expectant mothers at the ante-natal clinics.

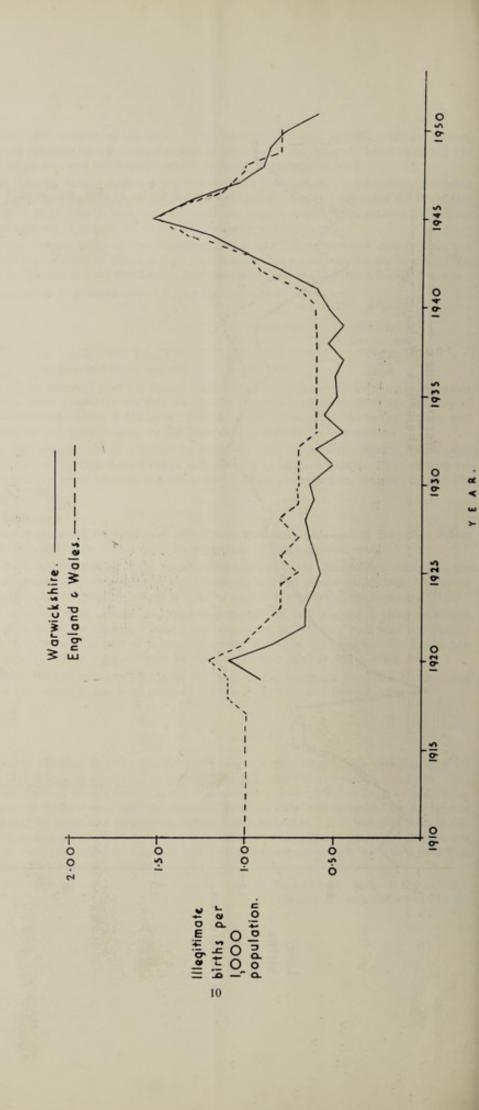
To carry the work outside the clinics is more difficult, but progress is being made in a number of areas of the County. Talks have been given to Women's Institutes and Parent-Teachers' Associations, as well as to student nurses, Red Cross Societies and St. John's Ambulance groups. Films, supplemented by talks, have been used in the Eastern Area.

Health Departments can play a leading part in the campaign for Food Hygiene and help with the campaign has been given in the North Eastern and Central Areas.

There is evidence that the general public are becoming more health conscious and are realising that disease is something to be overcome and mastered and not just endured. The cost of the National Health Service is now approximately £400 million in England and Wales. Both from the humanitarian and the economic point of view it is essential that no type of disease which we know how to prevent should be left unchecked. It is true that there is still a mass of disease of which we have as yet insufficient knowledge to prevent, but I do not think that even now sufficient emphasis has been placed on prevention, with the result that preventable disease is still occurring.

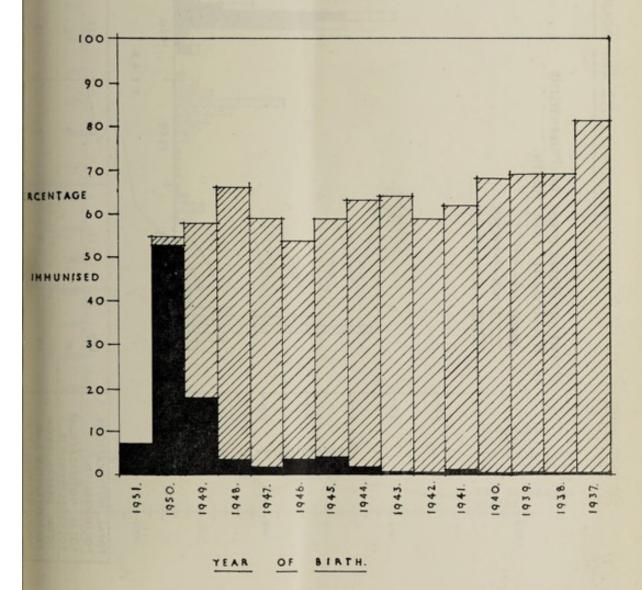
S. W. SAVAGE, M.A., M.D., D.P.H., County Medical Officer of Health.





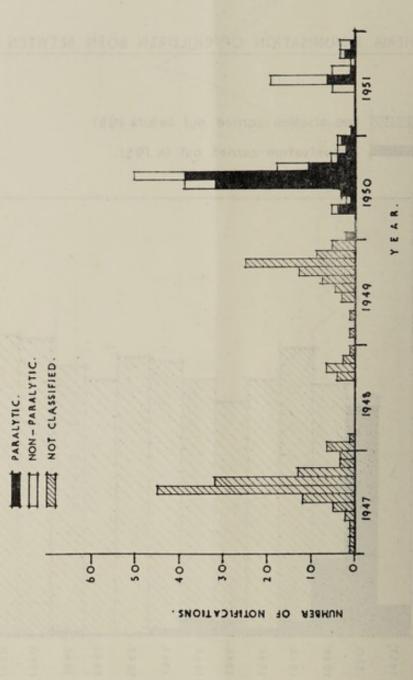
Illegitimate Birth Rate Per 1,000 Population.

Immunisation carried out before 1951.

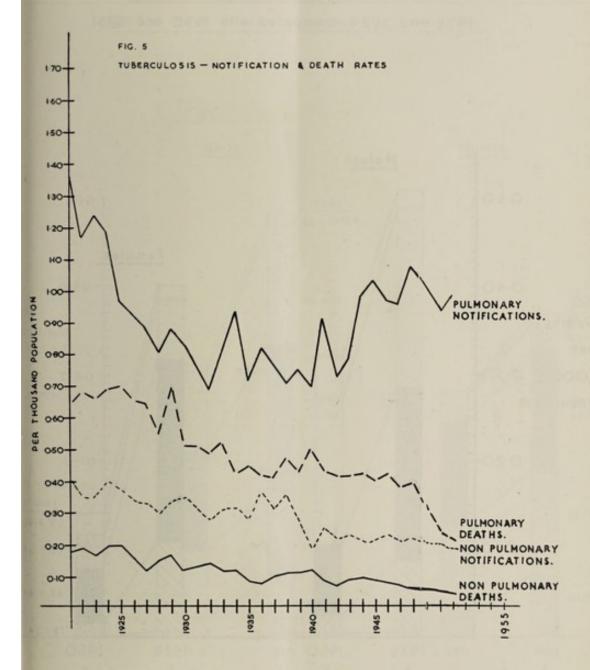


NUMBER OF NOTIFICATIONS OF POLIOMYELITIS

IN WARWICKSHIRE EACH MONTH.

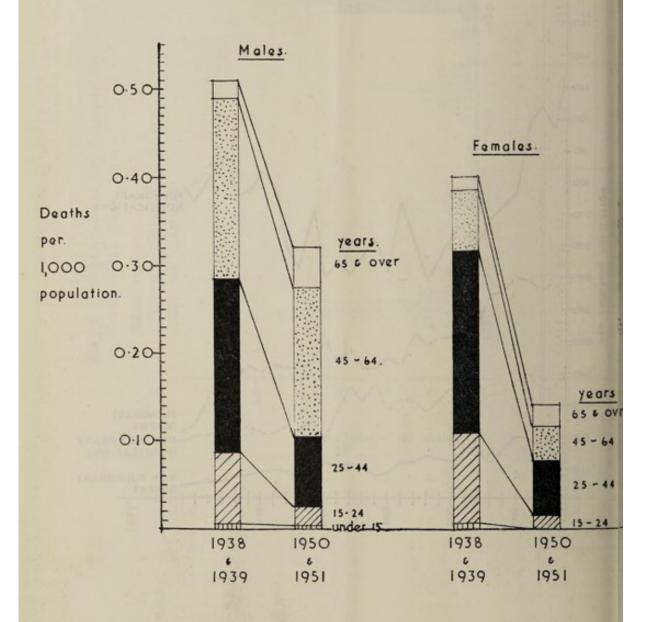


POLIOHYELITIS.	123	17 %	99	133	37
TOTAL NOTIFICATIONS POLIDENCEPHALITIS.	"	DAG -	•	7	
POLIOMYELITIS AND	01	2-	1	13	

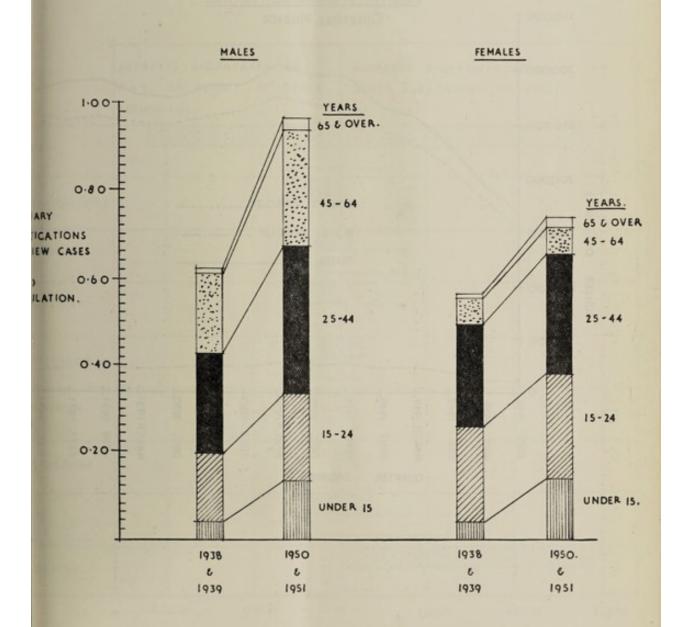


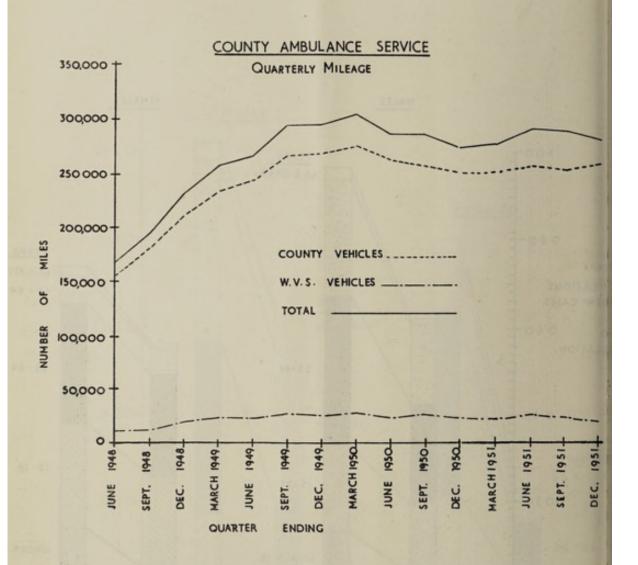
Deaths from Pulmonary Tuberculosis.

1938 and 1939 compared with 1950 and 1951



PRIMARY NOTIFICATIONS OF NEW CASES OF RESPIRATORY TUBERCULOSIS





COUNTY AMBULANCE SERVICE



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100000	2,0	000 1,0	000	Man !	1,000	2,000	3,000

STAFF OF THE COUNTY HEALTH SERVICE

(at time of going to press).

County Medical Officer of Health and School Medical Officer: Dr. S. W. SAVAGE, M.A., M.D. (Cantab.), D.P.H.

Deputy County Medical Officer of Health and School Medical Officer: Dr. G. H. TAYLOR, M.D. (Lond.) D.P.H.

Area.	Medi	cal Officer.	Assistant County Medical Officer.
1 Sutton Co		PRESTON, B.Sc., h.B., F.R.F.P.S., (Glas.)	Dr. DORIS I BUCKBY, M.R.C.S. (Eng.), L.R.C.P. (Lond.).
2 North Eas	M.A. (C	KERSHAW, antab.), M.R.C.S. L.R.C.P. (Lond.),	Dr. GWENDOLEN COOTE, M.B., B.S. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.). Dr. W. E. RIGBY, M.B., Ch.B. (Manch.), C.P.H. (appointed 18/7/52). Dr. MARGARET STEANE, M.B., Ch.B. (Birm.). Dr. L. S. STEPHENS, M.B., Ch,B. (Birm.). D.R.C.O.G. (Lond.), D.P.H. (Liv.).
3 Eastern.		JONES, B.Sc., h.B., D.P.H	Dr. C. ELEANOR FERGUSON, M.B., B.Ch. (Dublin). Dr. AGNES YOUNG, M.B., Ch.B., D.P.H. (Glas.).
4 North We	Ch.B.,	KNIGHT, M.B., D.P.H. (Leeds). ted 15/7/52).	Dr. W. D. H. McFARLAND, M.B., Ch.B. B.A.O. (Belf.), D.P.H. (Lond.). Dr. MATILDA THOMSON, M.B., Ch.B. (Glas.)
5 Solihull.	L R.C.I	McLACHLAN, P.I. and L.M., S.I. and L.M., S.I., D.P.H. (Ire-	Dr. J. HENDERSON, M.B., Ch.B. (Glas.), D.P.H. Dr. ELIZABETH THOMPSON, M.B., Ch.B. (Edin.), D.P.H. (Edin. and Glas.)
6 Central.	STONE B.Chir.	M. LIVING- C, B.A., M.B., (Cantab.). P. (Lond.), D.C.H. D.P.H.	Dr. MYRTLE W. RICHARDS, M.B., Ch.B. (Edin.), D.C.H. (appointed 18/7/52). Dr. KATHERINE SCOTT, M.B. Ch.B. (Glas.). Dr. D. SUTCLIFFE WILLIAMS, L.R.C.P. and S. (Edin.), L.R.F.P. and S. (Glas.).
7 Southern.		BRAMWELL, i.B., B.Ch. (C'tab.)	Dr. ELIZABETH THOMAS, M.B., B.Ch., B.A.O. (Belf.), D.P.H. Dr. W. M. WALKER, M.C., M.B., B.Ch., B.A.O. (Belf.).

Senior Dental Officer.

G. J. S. LITTLEFIELD, L.D.S. (Dunelm).

Assistant Dental Officers.

North-Eastern (Area 2) ... V. L. L. HALL, L.D.S., R.C.S. (Eng.) (until 30/6/52).

Eastern (Area 3) ... P. VIGANTS, D.D.D. (Univ. Latvia).

North Western (Area 4) ... W. DOUGLAS, L.D.S. (St. Andrew's).

Southern (Area 7) ... H. J. BASTOW, L.D.S. (Birm.)

There are, in addition, a number of part-time Dental Officers, 7 whole-time Dental Attendants, and 1 part-time Dental Attendant.

County Sanitary Inspector.

F. H. LEGGAT, F.R.SAN.I., A.M.I.S.E., M.S.I.A.

Assistant County Sanitary Inspector. K. L. SPENCE, Cert.R.S.I.

County Analyst:

F. G. D. CHALMERS, M.A., B.Sc., F.R.I.C.

County Ambulance Officer: C. L. JONES. (From 1-4-51).

Superintendent Nursing Officer:

Miss B. SHENTON, M.B.E., S.R.N., S.C.M., H.V. Cert.

Supervisor of Midwives:
Miss D. M. KETTLE, S.R.N., S.C.M.

Social Worker:

Miss J. A. SUTCLIFFE, S.R.N., H.V. Cert.

Statistical Officer.

Miss M. E. BROWN, B.A. (Oxon.)

Chief Clerk:

L. J. ALLEN.

	Area.	District Nursing.	District Nursing and Midwifery combined.	District Nursing, Mid- wifery and Health Visit- ing combined.	Health Visiting.	Midwifery.
	Sutton Coldfield. Area Nursing Officer. MacDiarmid, Miss M.	GLOVER, Miss S.	BAUM, Miss D. E. BRITLAND, Miss K. COTTINGHAM, Mrs. L. M. HISCOX, Miss E. M. JONES, Miss B. L. WHITMORE, Miss L. E. WILLIAMS, Miss B.		DRESSLER, Mrs. D. G. FORRESTER, Miss A. GREEN, Miss V. F. KIRK, Miss E. O'RIORDAN, Miss E.	
The state of the s	2. North Eastern. Area Nursing Officer. FOSTER, Miss M. I.	AINSWORTH, Miss J. HICKEY, Miss B. O'DONNELL, Miss V. TURNER, Miss W.	Armstrong, Miss M. Cameron, Miss S. Davies, Miss K. Dutfield, Miss D. Fulluck, Miss I. Harding, Mrs. A. Harvey, Mrs. E. M. Pedley, Miss M. E.	Reid, Miss L.	CUNNINGHAM, MISS A. M. DAVIES, MISS K. N. DILCOCK, MISS G. DONALD, MISS R. EMERSON, MISS L. M. FITZPATRICK, MISS C. FLYNN, MISS K. T. HALLSWORTH, MISS M. A. MALCOLM, MIS. C. SNAPE, MISS I. BOFF, MIS. L. W. (School Nurse).	BOURNE, Mrs. D. CROSSAN, Miss N. C. HARRES, Mrs. A. HARVEY, Miss W. E. MCLEAN, Mrs. M. W. E. STACEY, Mrs. L. TAYLOR, Mrs. S. A. WALLBANKS, Mrs. S. M. WATSON, Mrs. M. S.
The same of the sa	3. Eastern. Area Nursing Officer. WARD, Miss N. M.	MERRICK, Miss D. M.	Anderson, Miss M. Boden, Mrs. C. Brady, Miss P. A. Carter, Miss M. J. Hall, Miss E. Mansergh, Miss C. Meredith, Miss E. Metcalfe, Miss D. Robson, Mrs. M. Slater, Miss H.	ROBERTS, Miss E. A.	NUTTING, Miss M. ROBERTS, Mrs. M. P. MARTIN, Miss J. E. MCILWAINE, Miss M. WAITE, Miss J. D.	
100	4. North Western. Area Nursing Officer. BEESTON, Miss V. E.		ALEXANDER, Miss J. ANKRETT, Mrs. M. CONNOLLY, Miss M. DAVIS, Mrs. R. DOLAN, Miss D. GARDNER, Miss H. HARPER, Miss R. HARTWELL, Miss B. HOBSON, Miss A. B. HOPKINS, Miss L. W. KELLY, Mrs. A. P. MANIFOLD, Miss B. MACLENNAN, Mrs. G. M. PRITCHARD, Miss K. M. WADE, Miss B. YOUNG, Mrs. C. E.	SHEPHERD, Miss J.	ADAMS, MISS E. S. CUNNINGHAM, MISS A. M. EDWARDS, MISS B. GOODING, Mrs. C. HUMPHRIES, MISS E. M.	
	5. Solihull. Area Nursing Officer. LAMB, Miss E. J.		CATHERWOOD, Miss F. A. HALL, Mrs. B. L. HALL, Mrs. L. HARTSHORNE, Miss W. M. HUGHES, Miss S. JONES, Miss C. KNIGHT, Mrs. W. PILKINGTON, Miss B.		AGUTTER, Miss M. E. ATKINSON, Miss M. G. BALL, Miss M. A. GRANT, Miss A. MACNAMARA, Miss M. MANTON, Miss D. A. MORGAN, Miss F. E. SMITH, Mrs. I. F. WHITING, Mrs. V. M.	TAYLOR, Miss M.
	6. Central. Area Nursing Officer. NORMINGTON, Miss L. A.	LANE, MISS F. M. WARR, MTS. N. WILKINSON, MTS. H. M.	Anstiss, Miss D. Beck, Miss M. Bigley, Miss P. Griffiths, Miss A. J. Hartshorne, Miss M. Harris, Mrs. M. E. Hillman, Miss E. A. Mares, Miss M. Marshall, Miss E. Paynes, Miss A. Stachowiak, Miss E. C. Tibomas, Miss M. Tompkins, Miss M. I. Veel, Mrs. E. Walker, Mrs. R. A.		BAYLIS, MISS K. M. BROWN, MIS. G. O. CORBALLY, MISS M. DALTON, MIS. H. M. DAVIE, MISS M. C. DUNLOP, MISS A. GODLEY, MISS M. GRIFFITHS, MISS M. HUFTON, MISS M. MALARKEY, MISS S. PRIESTLEY, MISS M.	PICKERING, Mrs J. P. LEWIS, Miss D. G.
	7. Southern. Area Nursing Officer. STANSFIELD, Miss D. EMERGENCY NURSES (all areas). BAKER, Miss E. LLOYD, Miss W. TAIT, Miss W.		BAILY, Miss P. M. BUCKLY, Miss M. FORREST, Miss M. GALE, Mrs. R. GLEW, Miss M. HARRIES, Miss E. HUNT, Mrs. E. KNIGHT, Mrs. C. QUINN, Mrs. G. REDSHAW, Miss S. SHERWOOD, Mrs. P.	ANTHONY, Miss B. CHADWICK, Miss D. FIFE, Miss E. T. SCHOFIELD, Miss E.	BUTTERWORTH, Miss P. CLARKE, Miss D. M. DEAKIN, Miss B. M. EVERITT, Mrs. A. M. IDLE, Mrs. N. B. JAMES, Mrs. M. M. LAPHAM, Miss N. G.	Brown, Miss A.

GENERAL STATISTICS.

200	TABLE 1.						WICK	WARWICKSHIRE-1951.	561-3	1.		Fills						
			Popul	Population.	Line L	Births.	Stillb	Srillbirths.	Dra	4. Deaths.	5. Tuberculosis, Pulmonary.	alosis,	Tuberculosis, Other Forms.	nlosis, Forms.	Infant Mortality.	and ditty.	Maternal Mortality.	rna!
	Area, and County Districts.	Acres.	Mid- 1950.	Mid. 1951.	No.	Birth Rate (adjusted) (per 1000 population)	No.	Stillbirth Rate. (per 1000 total bierda)	No.	Death Rate. (adjusted) (per 1000 population)	No. of Deaths.	Death Rate. (per 1000 population)	No. of Deaths.	Death Rate. (per 1000 population)	Infant Deaths.	Death Rate. (per 1000 Nee births)	No. of Deaths.	Death Rate. (per 1000 total births)
Sut	Sutton Coldfield. M.B.	13,978	47,440	47,790	849	13.41	00	12.19	292	11.14	10	0.10	-	0.03	10	15.43	-	1.62
NANA	North-Eastern, Nuneaton M.B Bedworth U.D Atherstone R.D	11,757 7,851 21,945	53,940 24,540 23,700	54,120 25,080 23,580	917 466 397	18.02	20 16 5	21.34 33.19 12.43	2722	13.08	300	0.22	es es	0.05	25.57	23.99 55.79 35.26	111	111
	TOTALS	41,553	102,180	102,780	1,780	17573	41	22.51	1135	12.60	27	0.26	9	0.02	62	34.83	1	1
E HH	Ragby M.B Rugby R.D	6,992 80,631	46,780	45,850	694 319	15.13	66	26.64	532	12.18	11 4	0.24	400	0.08	818	25.93	1	3.04
	TOTALS	87,623	67,010	089'99	1,013	15.60	888	26.89	743	11.75	15	0.22	1	0.10	26	25.66	1	0.96
N	Meriden R.D Tamworth R.D	61,775	36,990	37,950	590	16.31	19	31.19	390	11.01	401	0.10	eo	0.07	120	33.89	-1	1.65
	Totals	83,817	52,880	53,990	857	16.30	25	28.34	585	11.84	9	0.11	+	0.07	32	37.33	1	1.13
Sol	Solihuli U.D	20,189	67,640	67,980	991	13,55	55	89 55	676	11.13	11	0.15	01	0.03	68	29.26	-	0.98
STERMS	Central. Learnington Spa M.B Warwick M.B. Southam R.D. Warwick R.D.	2,833 5,057 62,527 55,407	36,370 15,360 10,550 12,870 19,670	36,520 15,550 10,610 12,700 19,940	235 170 170 238	15.00 15.71 15.53 20.10 11.57	820040	27.26 44.71 11.62 17.38 32.52	200 1180 1138 171	12.49 11.78 11.96 10.20 9.49	01 ∞ 01 — 01	0.32 0.51 0.07 0.10	11-1-	0.09	¥81-00	24.51 12.76 41.17 26.54 25.21	11111	11111
	TOTALS	131,791	94,820	95,320	1,440	15.58	17	27.68	1138	11.18	25	0.26	01	0.03	36	25.00	1	1
80 < 00	Stratf'd-upon-Avon M.B. Alcester R.D Shipston-on-Stour R.D. Stratford-on-Avon R.D.	6,900 37,524 53,339 81,996	14,930 13,140 8,230 20,310	14,700 13,260 8,110 20,390	262 218 139 357	17.82 16.76 18.50 19.07	E- E- 01 00	26.02 31.11 14.19 8.33	174 133 235 235	10.08 9.02 11.64 11.05	401-1-	0.27 0.15 0.12 0.34	111-	1 0.04	10100103	19.08 22.93 14.38 33.61	1111	1111
	Totals	179,759	56,610	56,460	976	18.03	19	19.09	899	10.44	14	0.24	-	10.0	22	24.59	1	1
5	COUNTY TOTALS	558,710	488,580	491,000	7,705	15.84	185	23.44	2509	11.55	103	0.21	65	90.0	219	28.42	7	0.50
ı																		

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TABLE 2. STATISTICAL REVIEW, 1922-1951.

Year.	Birth Rate.	Death Rate.	Pulmonary Tubercu- losis Death Rate	Cancer Death Rate	Infant Mortality.	Still-births per 1,000 total births.	Maternal Mortality per 1,000 live births
1922.	21.16	11.04	0.68	1.03	60		5.01
1923.	19.75	10.29	0.66	1.11	60	-	2.80
1924.	18.76	10.98	0.69	1.25	60	-	4.30
1925.	18.46	11.15	0.70	1.31	62	-	5.00
1926.	17.52	10.52	0.65	1.38	54	-	3.30
1927.	17.30	11.25	0.64	1.36	66	-	2.90
1928.	16.83	10.13	0.55	1.33	55	-	4.59
1929.	16.29	12.70	0.70	1.30	60	-	4.20
1930.	16.63	10.82	0.51	1.43	49	42	4.50
1931.	15.69	11.06	0.51	1.42	55	35	4.30
1932.	15.38	11.52	0.49	1.47	55	35	3.70
1933.	13.71	11.42	0.52	1.53	54	35	5.20
1934.	14.31	10.71	0.42	1.43	48	34	4.97
1935.	13.44	9.60	0.45	1.45	47	40	3.68
1936.	15.08	10.56	0.42	1.51	52	33	5.21
1937.	15.32	11.25	0.41	1.57	50	35	3.17
1938.	16.63	10.17	0.47	1.45	48	30	2.87
1939.	16.18	10.19	0.43	1.54	45	32	2.26
1940.	15.83	12.69	0.50	1.51	51	35	2.82
1941.	15.94	11.69	0.43	1.55	53	33	2.99
1942.	17.38	10.26	0.41	1.55	39	32	2.14
1943.	18.98	10.62	0.41	1.55	42	28	2.70
1944.	20.88	10.64	0.42	1.66	35	25	1.50
1945	18.95	10.45	0.40	1.57	42	25	1.56
1946.	19.64	10.61	0.42	1.67	40	22	1.46
1947.	20.77	10.68	0.38	1.64	34	20	0.83
1948.	18.24	9.62	0.39	1.67	31	20	1.50
1949.	17.22	10.78	0.30	1.65	29	19	0.85
1950.	15.72	10.48	0.24	1.55	27	19	0.39
1951.	15.84	11.55	0.21	1.67	28	23	0.50

TABLE 3.

MORTALITY STATISTICS.

				Age (iroup.		NO. THE
Cause of death.	Under 1	1—	5	15—	45	65—	Total.
Heart and Circulatory Diseases	1	1	1	36	311	1,558	1,908
Malignant Neoplasms		4	1	60	279	480	824
Vascular lesions of Nervous							- Jan
System	0	0	0	12	128	589	729
Pneumonia	24	1	0	4	44	180	253
Bronchitis	1	0	0	4	49	223	277
Violent Deaths	10	8	12	70	62	89	251
Congenital Malformations	33	2	0	5	3	2	45
Respriatory Tuberculosis	0	2	0	38	46	17	103
Non-Respiratory Tuberculosis	1	5	1	8	2	6	23
Nephritis and Nephrosis	0	1	0	9	20	20	50
All other diseases	149	25	19	73	212	568	1,046
Totals	219	49	34	319	1,156	3,732	5,509

TABLE 4. LIVE BIRTHS AND INFANT DEATHS.

		Males.	Females.	Total.	Birth Rate.	Deaths of Infants under 1 Year.	Infant Mortality Rate.
LIVE BIRTHS :-							
Legitimate	 100	3,805	3,609	7,414	15.25	201	27.1
Illegitimate	 	157	134	291	0.59	18	61.8
TOTALS	 	3,962	3,743	7,705	15.84	219	28.4

TABLE 5.

STILLBIRTHS.

	Males.	Females.	Total Stillbirths.	Stillbirth Rate.
STILLBIRTHS :— Legitimate	81	92	173	22.8
Illegitimate	9	3	12	39.6
TOTALS	90	95	185	23.4

TABLE 6.

PREMATURE BIRTH RATES AND PERCENTAGE SURVIVAL OF PREMATURE BIRTHS.

(From Birth Notifications).

		1950	1951
Total notified birth adjusted)	s (live and still,	7,847	7,827
Premature Live Births.	Number notified	440	483
Live Dirths.	Rate per 1,000 total Notified Births Number of Deaths	56	61
	Number of Deaths	60	81
	Percentage survival	86.4	83.2
Premature	Number Notified	82	105
Stillbirths	Rate per 1,000 total Notified births	10	13

TABLE 7.

PREMATURE BIRTHS, 1951. Total Notified Births—7,827.

W. L. C.		ber of e Births.	Number those dy	No. Sur-	Per centa survii		
Weight Group.	Born Alive.	Born Dead.	Died 1st day.	Died 2—7 days.	Died 8—28 days,	viving.	Liv. Birth
2lbs. 3ozs. or less	18	16	13	3	2	-	1
Over 2lbs. 3ozs. and up to 3lbs. 4ozs	31	36	11	8	2	10	32
Over 3lbs, 4ozs, and up to 4lbs, 6ozs,	88	22	11	4	2	71	80
Over 4lbs. 6ozs. and up to 4lbs. 15ozs	99	13	4	5	-	90	90
Over 4lbs. 15ozs. and up to 5lbs. 8ozs	247	18	9	4	3	- 231	93
TOTALS	483	105	48	24	9	402	83

TABLE 8.

STILLBIRTHS AND INFANT MORTALITY.

Area and County Districts.	Still	Neo-natal deaths.				tal ant ths.	Stillbirth Rate per 1,000 total births.		Neo-natal mortality per 1,000 live births.		Total Infant mortality per 1,000 live births.	
	1951	1950	1951	1950	1951	1950	1951	1950	1951	1950	1951	1956
1. Sutton Coldfield M.B	8	13	10	8	10	9	12.2	19.5	15.4	12.2	15.4	13.8
2. Nuneaton M.B Bedworth U.D Atherstone R.D	20 16 5	30 10 7	16 15 8	11 10 6	22 26 14	16 16 12	21.3 33.2 12.4	32.7 23.5 17.4	17.4 32.2 20.1	12.4 24.0 15.1	24.0 55.8 35.3	18.6 38.1 30.1
Totals	41	47	39	27	62	44	22.5	26.9	21.9	15.9	34.8	25.9
3. Rugby M.B Rugby R.D	19 9	14 5	13 6	7 7	18 8	14 10	26.6 27.4	19.0 13.2	18.7 18.8	9.7 20.8	25.9 25.1	19.4 29.8
Totals	28	19	19	14	26	24	26.9	17.6	18.7	13.2	25.7	22.7
4. Meriden R.D Tamworth R.D	19 6	12	12 6	21 4	20 12	30 6	31.2 22.0	18.2 14.8	20.3 22.5	32.5 15.0	33.9 44.9	46.4
Totals	25	16	18	25	32	36	28.3	17.2	21.0	27.4	37.3	39.0
5. Solihull U.D	23	14	22	19	29	29	22.7	13.3	22.2	18.3	29.3	28.0
6. Leamington Spa M.B Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	16 11 2 4 8	15 2 - 5 1	9 2 6 5 5	12 4 1 4 6	14 3 7 6 6	17 5 2 7 11	27.2 44.7 11.6 17.4 32.5	25.2 8.2 22.8 3.7	15.8 8.5 35.3 22.1 21.0	20.6 16.6 6.8 18.7 22.3	24.5 12.8 41.2 26.5 25.2	29.3 20.3 13.4 32.3 40.5
Totals	41	23	27	27	36	42	27.7	15.6	18.8	17.9	25.0	28.5
7. Stratford-upon-Avon M.B. Alcester R.D Shipston-on-Stour R.D Stratford-on-Avon R.D	7 7 2 3	5 3 2 6	4 5 1 11	3 5 2 4	5 5 2 12	3 6 5 9	26.0 31.1 14.2 8.3	23.2 13.7 14.6 19.1	15.3 22.9 7.2 30.8	13.8 23.1 14.8 13.0	19.1 22.9 14.4 33.6	14.3 27.3 37.0 29.3
TOTALS	19	16	21	14	24	23	19.1	18.1	21.5	16.1	24.6	26.5
COUNTY TOTALS	185	148	156	134	219	207	23.4	18.9	20.2	17.4	28.4	26.9

TABLE 9. CAUSES OF NEO-NATAL DEATHS, 1951 and 1950.

Cours of death	With prematurity.		Without prematurity.		Total.		
Cause of death.		1951	1950	1951	1950	1951	1950
Prematurity		53	31	-		53	31
Asphyxia, Atelectasis Congenital malformations :		18	17	17	10	35	27
Alone	***	4)	2)	137	197	17)	21
With Asphyxia		->	->	6 >	2 }	6 >	2
With Pneumonia		-]		3	1	3	1
Totals	***	4	2	22	22	26	24
Birth injury	***	6	6	9	10	15	16
Haemolytic Disease	***	1	-	6 5	12	7	12
Bronchitis and Pneumonia	***	3	2	5	8	8	10
Misadventure	***	-	1	3	3	3	4
Other		4	2	5	8	9	10
TOTALS		89	61	67	73	156	134

TABLE 10. CAUSES OF DEATH OF INFANTS ONE MONTH TO ONE YEAR 1951 and 1950.

Cause of death.	With bronchitis or pneumonia.		Without bronchitis or pneumonia.		Total.	
	1951	1950	1951	1950	1951	1950
Bronchitis and Pneumonia	24	19	_	_	24	19
Congenital malformations	8	6	9	11	17	17
Gastro Enteritis	2	-	3	11	5	11
Whooping Cough	2	1	1	1	3	2
Tuberculous diseases	-	_	1	2	1	2
Misadventure	-	_	7	4	7	4
Central Nervous System infections	-	-	2	6	2	6
Other	- 1	2	3	10	4	12
TOTALS	37	28	26	45	63	73

					c	HILD WELFARE	CENTRES.	-5.5	27 MARS		400000000000000000000000000000000000000			
Г				1							on Register	No. 11	We of	1
	trea	Area.	Centre.	C. or	Where held.	When held (all meetings at 2 p.m.	Medical Officer.	at Juni	attendance.	22 7168	of year.	No. of Attend-	No. of	ı
	No.	Area.	Court.	¥.		unless otherwise stated)			Over 1 and		Over 1 and	distort.	decre.	ı
								I year.	under 5 yrs.	1 year.	under 5 yes.	1951	1950	1
	1	SUTTON COLDSHILD	Boldmere	C.	Britwell Hall,	Every Wednesday	Dr. D. I. Buckby	118	58	81	248	2,483	2,620	1
	30					Alt, Weds. (Toddlers) 10 a.m.	Dr. E. M. Stockwin	-	-		-	-	-	ı
			Four Oaks	C.	All Saints' Ch. Hall	Every Toesday	Dr. E. M. Stockwin	61	16	58	124	T.121	1,140	ı
-			Misworth		The Green	Alternate Wed's	Dr. E. M. Stockwin	26	18	24	74	537	472	ı
_			Bannersgate	C.	Bannersgate Rd.	Every Friday	Dr. D. L. Buckby Dr. E. M. Stockwin	59	17	43	191	1,739	1,834	ı
						10 a.m.								ı
			Sutton Coldfield	6	49, Holland Street Walmley Road	Every Monday Every Thursday	Dr. D. I. Buckby Dr. D. L. Buckby	10t 112	21 77	91 85	169 258	2,110	2,393	ı
			Walmley		Magney Ross	Every toursaly	art. Dr. L. Distally	112	"	- 00	200	1,000	TO THE REAL PROPERTY.	ł
	2	NORTH-EASTERN.	Ansley		Church Hall	Every Wednesday	Dr. L. S. Stephens Dr. C. V. Spark	81 92	27	55 63	96 180	1,685	1,764	ı
			Atherstone Baddesley Ensor		Church Hall	Every Wednesday Alternate Fridays	Dr. L. S. Stephens	39	1	29	34	291	214	ı
			Bodworth	V.	Saunders Avenue	Every Monday and	Dr. M. Steame	232	86	195	319	4,876	5,075	ı
			Bulkington	v.	Council Offices	Thursday Every Wednesday	Dr. M. Steane	59	9	59	71	1,421	1,437	ı
			Dordon	V.	Church Hall	Alternate Mondays	Dr. A. Lindsay	51	-	50	63	1,000	883	ı
			Nuneaton	C	Riversley Park Clinic, Coton Road	Every Monday, Tuesday and Wed-	Dr. M. J. Kelly	432	92	421	618	6,186	7,336	ı
					Coton Boss	nesday								ı
-			Polesworth	C.	Parish Hall Cross Street Clinic	Alternate Tuesdays Every Monday and	Dr. C. A. Courie Dr. G. K. Coote	167	53	150	83 272	3,817	3,073	ı
			Stockingford	-	Cross Surect Canac	Wednesday	Dr. G. B. Contr	1000	- 10	1,000			-	ı
-		V	When	V.	Church House	1st & 3rd Wed,	Dr. A. H. M. Young	78	29	50	144	924	951	ı
	3	EASTERN.	Bilton Binley	C.	Village Hall	2nd & 4th Wed.	D. H. A. H. Summers	26	19	20	51	347	933	
			Brinklow	V.	Church Room	1st & 3rd. Wed.	Dr. H. A. H. Summers Dr. A. H. M. Young	32 31	10	25 22	80 78	729 499	764 469	ı
			Dunchurch Hilimorton	V.	W.I. Hall Dorothy Fenwick	2nd & 4th Thursday 2nd & 4th Monday	Dr. A. H. M. Young	42	5 8	32	52	454	596	
				v	Memorial Hall		Dr. H. A. H. Summers	- 44			-	477	658	
			Long Lawford	V.	Church Hall, Chapel St.	Let & 3rd Tuesday	Dr. H. A. H. Sammers	39	11	25	60			
			Newbold	C	Church Rooms. Wesleyan Chapel,	1st & 3rd Friday. Every Wednesday	Dr. H. A. H. Summers Dr. R. E. Smith	35 102	3 15	30 85	40 127	587 1,448	478 2,001	
			New Bilton		Lawford Road									
			Rugby	N.	F.A.P. Temple St.	Every Toesday and Friday	Dr. A. H. M. Young	212	14	185	273	4,327	4,497	
			Stretton-on-Duns-	C.	Village Hall	his & 3rd Thursday	Dr. H. A. H. Summers	22	3	26	59	568	521	
			more Wolston	C.	Oddfellows Hall	4th Thurs, in month	Dr. H. A. H. Summers	13	2	11	29	159	252	
			Wolvey	C.	Village Hall, Sharpe St.	2nd & 4th Tuesday	Dr. H. A. H. Summers	48	8	36	- 88	611	624	
			Clifton-on-Dunsmore		Townsend Memorial	2nd Thursday	Dr. H. A. H. Summers	-	-	-	-	-	-	
			(Opened June, 1962)		Hall									ı
	-			*			F. M. W.	-		-		867	748	ı
	4	NORTH-WESTERN	Amington	V.	The Band Room	Alternate Wednes- days	Dr. M. Thomson	24	= =	24	74	1000	160	ı
			Arley	V.	Miners' Welfare Hall	Alternate Wednes-	Dr. M. Thomson	55	8	44	116	1,007	1,193	ı
			Balsall Common	C.	Women's Institute	days 3rd Wednesday	Dr. W. D. McFarland	19	_	19	32	174	303	ı
			Berkswell	C. V.	Reading Room	Every 4th Tuesday	Dr. J. Gaston	126	22 20	105	38 133	1,129	1,454	ı
			Castle Bromwich Coleshill	v.	Victory Hall Town Hall	Every Toesday Every Monday	Dr. W. D. McFarland Dr. W. D. McFarland	54	13	47	135	994	1,470	ı
			Fillougley	0	Village Hall Girls Old School,	First Friday Ist & 3rd Thursdays	Dr. M. Thomson Dr. W. D. McFarland	21 22	3	19	33 35	195 400	223	ı
			Hampton-in-Arden	183	High St.	The state of the s	The state of the s							ı
			Keresley Kingsbury	V.	Welfare Centre Hut Methodist School	Every Thursday Alternate Tuesdays	Dr. M. Thomson Dr. M. Thomson	90 43	34 6	78 30	160 84	2,385	2,472	ı
8				100	Room			1 200						ı
			Marston Green Meriden	00	Free Church Hall Village Hall	1st & 3ed Fris.(10 a.m. Alternate Mondays	Dr. W. D. McFarlane Dr. W. D. McFarlane		7	27 26	44 55	479 495	576 508	ı
			Nether Whitacre	C.	Methodist School	3rd Friday	the bit Whomeson	8	1	10	26	110	130	ı
			Newton Regis	V.	Room The Institute	Alternate Wednes-	Dr. M. Thomson	18	8	14	-48	402	218	ı
	_			100		days		-			-	578	519	ı
			Water Orton	V.	Church Hall	Alternate Wednes- days	Dr. W. D. McFarlane	28	8	21	71	210	210	ı
			Wilnecote	V.	Parish Hall	Alternate Mondays	Dr. J. V. L. Grant	54	5	45	79	1,056	1,134	ı
	-			-				-		1000	-	-		ı
	8	SOLINULL.	Hockley Heath Knowle	V.	The Institute Women's Institute,	Alternate Tuesdays 1st & 3rd Thursdays	Dr. E. A. Galbraith Dr. M. E. Rowe	12	1	8	41	337	443	ı
					Station Road		Dr. J. L. Whatley	69	48	55	138	955	1,311	ı
			Olton	C	Congregational Church Room	Every Thursday	1	127	12	109	173	2,236	2,122	
			Sheldon	C.	Wagon Lane	Every Tuesday and	Dr. J. Henderson	169	36	146	245	2,500	2,611	
	- 1		Shirley	V.	The Institute,	Friday Every Tuesday and	Dr. E. Thompson	220	111	219	390	4,625	4,675	
				v.	Church Rd. Out-Patients' Dept.,	Wednesday Every Monday	1	123	62	500	218	1,964	2,813	1
			Southers	1	Soliball Hospital			144	1		100	STATE OF	P. C.	1
		A CONTRACTOR OF THE PARTY OF TH		100					-					1
	6	CENTRAL	Barford	C.	Village Hall	3rd Wednesday,	Dr. K. Scott	10	3	9	29	199	297	1
			Bishops Itchington	V.	Memorial Hall	2nd & 4th Wednes	Dr. D. S. Williams	37	6	32	80	697	775	1
		100000	Cubbington	V.	Methodist Sunday	days Alternate Tuesdays	Dr. P. Whitfield	26	2	19	71	613	565	1
			000000000000000000000000000000000000000	133	School	The state of the s		1 000	1000	1	1			1
			Kenilworth Lapworth	200	Parochial Hall The Cadé	Every Friday 4th Tuesday,	Dr. C. E. Ferguson Dr. C. E. Ferguson	109	17	89	142	1,539	1,493	1
				1	THE REST OF THE PARTY OF THE PA	10-12 noon		100		3				1
			Learnington Spa	-	4, Holly Walk	Every Wednesday and Friday	Dr. K. Soott	349	57	304	497	5,214	5,427	1
		1000	Lillington	C	Men's Club	Course Whenches	Dr. C. E. Ferguson	71	22	49	166	1,537	1,643	1
		1	Long Itchington		Village Hall		Dr. D. S. Williams	23	2	15	37	200	170	1
		1000	Napton Southam	307	The Victory Hut		Dr. D. S. Williams Dr. K. Soutt	13 35	2	13	43 61	361 586	361 567	
			Stockton	C.	Village Hall	4th Monday	Dr. D. S. Williams	21	1	16	27	198	154	1
			Stoneleigh Warwick		The Institute Lakin Road	Mr. 1882 N. 18	Dr. C. E. Ferguson Dr. P. Whitfield	173	6 29	16 160	47 301	3,760	3,233	1
						and Friday	Dr. Jean Boyd						458	1
			Whitnash Wroxall		Village Hall The School	No. of Street, Street, Street,	Dr. D. F. L. Croft Dr. K. Scott	26 18	12 4	26 12	55	601 143	136	1
						10-12 noon								
		2-700		-		1000		-	-	-	-	-	-	1
	7	SOUTHERN.	Alcester Bearley	V.	Baptist School Women's Institute	Alternate Fridays 2nd & 4th Monday	Dr. E. S. Thomas Dr. W. Walker	37 15	3 5	28 12	75 39	502 235	688 120	
			Bidford-on-Avon	V.	Welfare Hut	Every Toesday	. Dr. W. Walker	35	3	41	47	1,057	1.010	
			Earlswood Henley-in-Arden	V.	Village Hall Public Hall	2nd & 4th Mondays Alternate Mondays		22 46	1 2	15	49 77	351 918	639 756	
			Kineton	V.	The Village Hall	Alternate Fridays	Dr. W. Walker	307	6	29	113	984	992	
			Lower Brailes Shipston-on-Stour	C. V.	Church Institute The Hostel	1st & 3rd Tuesdays	Dr. W. Walker	56	12	11 38	100	1,157	201 989	
			Stratford-upon-Avor	C	#Health Dept., Arden Street	Every Tuesday and Wednesday			20	197	274	3,651	3,844	
			Studley		Baptist Hall	Alternate Thursday		. 81	3	-51	72	1,065	645	
			Tanworth-in-Arden Welford-on-Avon		Muntz Memorial Hall Memorial Hall	I 1st Wednesday 4th Wod'day, 10 a.	Dr. E. A. Galbruith m. Dr. W. Walker	6 23	3 16	13	26	185	155 158	
		1	Wellesbourne	C	Conservative Club	3rd Thursday	Dr. W. Walker	. 34	-	36	39	233	270	3
		41 11 11	Whitchurch	C	The Hut	6th Wednesday	Dr. W. Walker		1	10		178	135	=
								5,333	1,308	4,500	8,835	94,306	98,088	
			5 Hold, at Tyler 5	-						-				gar.

MIDWIFERY.

At the end of 1951, there were	217 midwi	ives practi	sing in	the Cour	nty, as f	ollows :	-
Domiciliary.							
Employed by County Coun-	cil					95	
In private practice					***	13	
						_	108
Institutional.							
Employed by the Hospita		ment Con	nmitte	es		100	
Employed by Nursing Hon	nes				***	9	*00
							109
							217
The number of cases attended	during the	year was	as foll	ows:-			
	Domi	iciliary.		Instit	utional.		
	1951.	1950.		1951.	1950.		Total.
As Midwives	2,166	2,314		5,018	5,892		1951.
As Maternity Nurses with	2,100	2,011		0,010	0,002		
Doctors	386	481		2,668	1,000		
	-	_			_		
Totals	2,552	2,795		7,686	6,892		10,238
	_			-	_		-
Number of cases in which do	miciliary						
Midwives sought medical	aid 551	475					
Adjusted Number of Notific		1050					
Live Births	1951.	1950.					
Carrier at	7,662 165	7,713					
Stillbirths	100	104					
*	7,827	7,847					
	1951.	1950.					
Total along the state of	67%	64%					
Institutional confinements							

HEALTH VISITING.

At the end of 1951 the County employed 50 Health Visitors, who combined health visiting with school nursing, and 5 who combined health visiting with school nursing, district nursing and midwifery. The following is a summary of visits made by them during the year:—

				First	Total
				Visits.	Visits.
Ante-natal				1,127	2,609
Post-natal		***	311	793	795
Children under 1 yea	ır			7,555	42,737
Children 1-5 years				769	59,965
Tuberculosis		***	***	565	4,123
Geriatric				295	1,142
Home Help				186	1,216
School Nursing:					
Personal hygien	e foll	ow up			1,724
Other follow up					6,064
Other			***		3,574
TOTAL		***			123,949

HOME NURSING.

15 nurses were employed full-time and 89 part-time on home nursing in the County at the end of 1951; the majority of the nurses employed part-time combined home nursing with midwifery. 9,303 cases were attended during the year and a total of 194,684 visits were paid.

SCHEME FOR THE CARE OF THE ILLEGITIMATE CHILD AND ITS MOTHER.

TABLE 11. New Cases Referred in Year ended 31st December, 1951.

				NAME OF BRIDE	Number of case	es referred.	manufacture of the last of the
Source of	Referen	ce.		Requiring ante-natal or post-natal accommoda- tion, help and advice.	Requiring help and advice only.	Not requiring help.	Total.
Moral Welfare Societ	ies			21	11		32
Medical Officers, Nu	rses an	d Mid	wives	29	44	64	137
General Practitioners	S			21	11	1	33
Probation Officers			***	6	2	-	8
Hospital Almoners		***		5	4	2	11
Self-referred		***	***	17	26	-	43
Miscellaneous Source	s		***	4	. 2		6
Tot	TALS			103	100	67	270
Age distribution :							
17 and under				12	12	2	26
18, 19, 20	***	***		32	20	7	59
21 to 25	***			30	28	16	74
26 to 30		***		18	15	14	47
31 to 40		***		10	19	17	46
41 to 50				1	2	3	6
Unknown	***	***	***	-	4	8	12
					P-1015-11	LA STREET	STATE OF THE PARTY

The marital state of these women was as follows :-

Single	***	***	204
Married			15
Widowed			11
Divorced			14
Separated			25
Not known			1

Of the 204 single women, 42 had previously borne children. (52 babies).

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-		THE PARTY OF THE P					
atal.	No. of att- endances.	∞ 01 ∞ - vo	76	8 1 8	4	123	297
Post-natal.	No. of women who attended during 1951.	6 6 6 4	14	12 1 12	4	1 8	243
natal.	No. of att- endances.	8 0 1 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	1,290	315	. 89	2,360	5,216
Ante-natal	No. of women who attended during 1951.	22 4 7 7 7	312	105	88	598	1,412
	Medical Officer.	Dr. E. M. Stockwin Dr. E. M. Stockwin	Dr. D. W. HENDRY Dr. D. W. HENDRY	Dr. D. W. HENDRY Dr. J. R. OWEN	Dr. M. Thomson	Dr. A. Field	TOTALS
	When held.	Alt. Tuesdays 10 a.m. Every Tuesday 2 p.m. Alt. Wednesdays 10 a.m. Alt. Wednesdays 2 p.m. Alt. Fridays a.m. Every Thursday 2 p.m.	Every Tuesday 10 a.m. 2nd & 4th Thursdays and 5th Mondays 2 p.m.	1st & 3rd Thursdays 2 p.m. Every Wednesday 2 p.m. 3rd Thursday 2 p.m.	1st Wednesday 10 a.m.	Every Monday p.m. and Wednesday a.m. 2nd & 4th Fridays 10 a.m.	
And maked	or Or Post-natal.	A.N. & P.N. A.N. & P.N. A.N. & P.N. A.N. & P.N. A.N. & P.N.	A.N. & P.N. A.N. & P.N.	A.N. & P.N. A.N. P.N.	A.N. & P.N.	A.N. P.N.	elfare Centres.
	Clinic.	1. Sutton Coldend 49, Holland Street *Church Hall, Four Oaks Britwell Hall, Boldmere *The Green, Minworth Bannersgate Clinic *Walmley Clinic	2. NORTH EASTERN. Child Welfare Centre, Bedworth. Riversley Park Clinic, Nuneaton.	Cross St., Stockingford 3. Eastern. Temple St., Rugby	4. NORTH WESTERN. Welfare Centre Hut, Keresley.	7. Southern. †Health Department, Arden St., Stratford- on-Avon.	* Combined with Child Welfare Centres.

^{*} Combined with Child Welfare Centres.

† This clinic has now been taken over by the
Regional Hospital Board.

DAY NURSERIES.

Nursery.	Ν	io. of pla	ices.	Average daily attendance during 1951.
Leamington Tachbrook Road		40		27
Nuneaton, Merevale Avenue		40		23
Rugby, Holbrook Avenue		40	***	27
Shirley, Marshall Lake Road		40		26
Warwick, Priory Road		40		24
				-
		200		127

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN.

TABLE 12. NUMBERS PROVIDED WITH DENTAL CARE.

EXPECTANT AND NURSING MOTHERS.

Area.		-	Examined 1951.	Needing Treatment.	Treated. *	Made Den- tally fit.	
1. SUTTON COLDFIELD			1	1	1	1	
2. North Eastern			76	60	52	33	
3. Eastern				1 -		-	
4. North Western	1110		1-	-	-	-	
5. Solihull			-	-	-	1 -	
6. Central			25	25	8	2	
7. Southern			- 5	-	-	-	
COUNTY TOTALS			102	86	61	35	

CHILDREN UNDER FIVE.

Area.			Examined 1951.	Needing Treatment.	Treated. *	Made Den- tally fit.
I. SUTTON COLDFIELD			76	69	75	64
2. North Eastern		***	181	169	178	137
3. Eastern	***		2	2	2	-
4. North Western			2	2	2	2
5. Solihull			3	3	3	1
6. Central			80	70	73	68
7. Southern			61	14	15	13
COUNTY TOTALS			405	329	348	285

^{*} Including cases carried over from 1950.

TABLE 13. FORMS OF DENTAL TREATMENT PROVIDED.

EXPECTANT AND NURSING MOTHERS.

2 2 making to	Extrac-	General	No. of	Scalings or scaling	Other	Dentures	Dentures provided.	
Area.	tions.			and gum treat- ment.	Treat- ments.	Complete.	Partial.	
1. SUTTON COLDFIELD	5	1	_	-	-	_	-	
2. North Eastern	62	3	42	15	21	1	3	
3. Eastern	-	-	-	-	-	_	-	
4. North Western	-	_	-	-	_	_	-	
5. Solihull	-	-	-	-	-	-	-	
6. CENTRAL	29	10	17	5	23	1	3	
7. SOUTHERN	-	1 =	-	-	_	_	-	
COUNTY TOTALS	96	14	59	20	44	2	6	

CHILDREN UNDER FIVE.

AREA.	Extractions.	General Anaesthetics.	No. of teeth filled.	Other Treatments.
1. SUTTON COLDFIELD	122	53	16	17
2. North Eastern	342	117	80	64
3. Eastern	_	-	7	6
4. North Western	4	2	-	2
5. SOLIHULL	-	-	-	2
6. CENTRAL	186	60	51	40
7. SOUTHERN	13	-	4	15
COUNTY TOTALS	667	232	160	146

REGISTRATION OF NURSING AND MATERNITY HOMES.

TABLE 14. NURSING AND MATERNITY HOMES ON REGISTER, 31st DECEMBER, 1951.

Area.		No. of Beds.			
Area.	Home.	Maternity.	Other.	Total.	
1. Sutton Coldfield.	"Woodleigh" N.H., 315, Birmingham Road, Wylde Green.	- "	14	14	
	"Highfield" N.H., Boldmere Road, Sutton Coldfield.	8	3	11	
5. Solihull.	Francis Way N.H., Bentley Heath, Knowle.	30	-	30	
	" Moville" N.H., 667, Haslucks Green Road, Shirley.	-	5	5	
6. Central.	" Moorlands," Warwick Road, Kenilworth.	4	6	10	
	"River Park," Blackdown, Learning- ington Spa.	10	14	24	
	"Priors" N.H., 51, Lillington Road, Leamington Spa.	6	7	13	
	"Breton Lodge," Holly Walk, Leamington Spa.	5	5	10	
	" Priory Lodge," Priory Terrace, Leamington Spa.	2	3	5	
	"Grasmere," Avenue Road, Leamington Spa.	5	4	9	
	*" Eversleigh" N.H., 2, Clarendon Place, Leamington Spa.		19	19	
	Levens N.H., 1, Warwick New Road, Leamington Spa.	-	12	12	
7. Southern.	Avon Cottage, Ryon Hill, Stratford- on-Avon.	2	-	2	
	Mrs. B. Stevens, Kinwarton Road, Alcester.	2	-	2	
	County Totals	74	92	166	

^{*} Registered, July, 1951.

DIPHTHERIA IMMUNISATION.

TABLE 15. NUMBER OF IMMUNISATIONS CARRIED OUT DURING 1951.

Area.		Number of children who completed a full course of primary immunisation. Age at final injection.					
Area.	Age						
	Under 5.	5—14	Total.	injection.			
1. Sutton Coldfield	. 548	22	570	313			
2. North Eastern	. 1,237	466	1,703	1,913			
3. Eastern	. 930	35	965	421			
4. North Western	. 706	84	790	454			
5. Solihull	. 891	74	965	1,417			
6. Central	. 1,129	160	1,289	1,631			
7. Southern	. 1,023	96	1,119	914			
County Totals	. 6,464	937	7,401	7,063			
1950 Totals	. 3,839	602	4,441	4,502			
1949 Totals	. 5,456	883	6,339	5,002			
1948 Totals	. 5,988	1,047	7,035	3,276			
1947 Totals	. 5,447	990	6,437	1,188			

TABLE 16.—NUMBER OF CHILDREN WHO HAVE BEEN IMMUNISED AT ANY TIME BEFORE 31st DECEMBER, 1951.

Age at					Approx % of all				
31st Dec., 1951			County Totals.						
	1	2	3	4	5	6	7	I mais.	children.
14	271	1,343	642	610	564	867	192	4,489	81
13	281	1,164	595	575	644	739	272	4,270	69
12	290	945	554	634	664	872	294	4,253	69
11	300	1,147	497	613	673	766	253	4,249	68
10	286	1,090	665	607	708	572	290	4,218	62
9	303	1,056	725	687	674	711	303	4,459	59
8	330	1,120	848	809	780	950	316	5,153	64
7	343	1,272	801	942	957	958	364	5,637	63
6 5	272	1,017	528	784	789	930	469	4,789	59
5	328	955	698	711	845	930	228	4,695	54
4	538	957	794	792	929	1,053	557	5,620	59
3	531	1,137	725	781	852	1,093	680	5,799	66
2	416	914	729	609	673	797	711	4,849	58
. 1	376	756	635	487	532	761	615	4,162	55
Under 1	43	83	84	47	51	72	122	502	7
All ages under 15	4,908	14,956	9,520	9,688	10,335	12,071	5,666	67,144	60
Total pop. under 15 mid-1951	10,267	25,666	15,031	13,718	16,826	20,518	12,079	114,105	_
Percentage Immunised	48	58	63	71	61	59	47	60	_

TABLE 17. DIPHTHERIA CASES AND DEATHS.

Area and County Districts.	Number	in 1951.	Number complete course of isation i	immun-
08-	Cases.	Deaths.	Cases.	Deaths.
1. SUTTON COLDFIELD. Sutton Coldfield M.B.	_	_	_	-
2. North Eastern. Nuneaton M.B Bedworth U.D Atherstone R.D	1 	1 	1 	===
TOTALS	1	1	1	-
3. Eastern. Rugby M.B Rugby R.D	1	_	=	
Totals	-	-	-	-
4. NORTH WESTERN. Meriden R.D Tamworth R.D		_		1-1
TOTALS	-	-		10-20
5. Solihull Solihull U.D	2	1	1	-
6. CENTRAL. Learnington Spa M.B. Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	1 3 1 1	- - - - 1	- - 1 1	11111
TOTALS	7	1	2	-
7. SOUTHERN. St'ford-upon-Avon M.B. Alcester R.D Shipston-on-Stour R.D. Stratford-on-Avon R.D.	=======================================		===	1111
TOTALS	-	-	-	-
COUNTY TOTALS	10	3	4	-
Age Groups. Under 1 1 to 5 5 to 15 15 to 25 Over 25	- 3 5 2	- 1 2 - -	1 3 -	11111

TABLE 18.

VACCINATION 1951.

			IN	MBER OF	PERSONS VA	CCINATED	OR RE-VAC	CINATED D	NUMBER OF PERSONS VACCINATED OR RE-VACCINATED DURING YEAR.	R.		
Age at date of Vaccination.	Und	Under 1.	1	4	2	5—14	15 or	15 or over.	Total 1951.	1921.	Total 1950.	1950.
Area.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.
1. Sutton Coldfield	426	1	表	0	13	00	94	102	519	115	357	140
2. North Eastern	169	I	52	1	27	00	48	09	296	63	192	80
3. Eastern	299	1	49	8	22	17	169	52	539	72	258	66
4. North Western	252	1	35	60	17	7	12	117	313	127	210	82
5. Solihull	525	1	87	-	25	16	47	126	684	143	574	16
6. Central	464	1	28	2	30	10	98	128	632	143	520	137
7. Southern	310	1	49	4	25	12	39	195	423	211	334	142
TOTALS	2,445	1	364	21	156	73	441	780	3,406	874	2,445	177

TABLE 19. NOTIFICATION OF INFECTIOUS DISEASES.—Summary of Returns of Medical Officers of Health for the year ended 31st December, 1951.

For notification of Tuberculosis see Table 21.

			100																			201
Area, and County Districts.	Estimated Population Mid-1951.	Small Pox,	Chicken-Pox.	Diphtheria"	Scarlet Fever.	Measles (ex- cluding Ger- man Measles).	Whooping Cough,	Erystpelas.	Cerebro- Spinsl Fever.	Acute Polio-myelitis,	Acute Polio-en- cephalitis,	Encephalitis Lethargica,	Pneumonia,	Puerperal Pyrexia.	Ophthalmia Neonatorum.	Stated to be contracted in M this Country.		Enteric Fever (Typhoid)	Paratyphoid	Dysentery.	Food Poisceing.	Meningococcal
1. SUTTON COLDFIELD.		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Sutton Coldfield M.B.	47,790	-	-	-	58	560	117	5	-	4	_	-	36	2	-	-	-	-	_	28	6	
2. North-Eastern. Nuneaton M.B Bedworth U.D Atherstone R.D	54,120 25,080 23,580	111	_ _ _	1 -	57	516 329 230	48 47 69	4 1		10 2 1		111	74 21 51	2 3 —	111	111	-1-1-	111		27 19 2	_ 5 _	
Totals	102,780	-	2	1	144	1075	164	5	-	13		-	146	5	-	-	-	-	-	48	5	
3. Eastern. Rugby M.B. Rugby R.D.	45,850 20,830			=	50 10	469 110	291 61	8		1 1	_	_	87 28	1 7	1	_	-	-	=	5 2	10	1
Totals	66,680	-	1	-	60	579	352	9	-	2	-	-	115	8	1	-	-	-	-	7	10	1
4. North-Western. Meriden R.D Tamworth R.D	37,950 16,040	-	32	=			231 206	8	11	8	1	1 1.	78 19	20 1	2			John	11	25 5	28	1
Totals	53,990	-	32	-	49	742	437	9	_	9	1	-	97	21	2	-	-	-	-	30	28	1
5. Solihull U.D	67,980	_	_	2	34	1263	154	6	-	2	-	_	84	10	2	-	_	-	2	10	2	-
6. CENTRAL. Leamington Spa M.B. Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	36,520 15,550 10,610 12,700 19,940			1 3 1 1 1	4	244 519 336 44 155	42 75 34 14 22	2 1 - 2	11111	1 1 - 4	11111	11111	27 14 68 2 52	36 1 - 1	11111	11111	11111	_ _ _ 1	-1	1 4 11 	_ _ _ 3	1111
TOTALS	95,320	_	_	7	36	1298	187	5	-	6	-	-	163	38	-	-	+	1	1	41	4	
7. SOUTHERN. S'ford upon-Avon M.B. Alcester R.D. Shipston-on Stour R.D. S'ford-on-Avon R.D.	13,260			==	9	243 281 143 253	107 95 63 27	1 2 -	1114	1	1111	1111	21 23 18 4	7 2 - 3	1111	1111		1111	1111	2 - 1	1 = =	1 1
TOTALS	56,460	-	-	-	32	920	292	4	-	1	-	-	66	12	-	-	-	-	-	3	1	
COUNTY TOTALS	491,000		35	10	413	6437	1703	43	-	37	1	-	707	96	5	-	-	1	3	167	56	10
1950	488,580	_	54	14	629	5347	1578	61	_	133	2	2	450	32	9	-	_	3	2	51	42	1
1949	484,760	-	18	20	684	2988	1235	77	12	60	4	THE REAL PROPERTY.	420	29	15	ol mi	-	1.81	8	167	35	1

NUMBER OF DEATHS FROM INFECTIOUS DISEASES, 1941-51. TABLE 20.

Disease.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1948.	1949.	1950.	1951.
Diphtheria	29	15	1	9	6	3	3	12	1	1	3
Scarlet Fever	2	2	4	2	1	1	_	100	_		_
Measles	23	1	6	4	12	3	4	3	2	_	3
Whooping cough	25	3	13	7	12	5	10	2	5	4	7
Poliomyelitis and En- cephalitis.	1	2	2	-	1	4	10	4	7	13	-
Pneumonia	254	210	251	217	204	219	273	199	271	228	253
Tuberculosis (Pulmon- ary).	202	187	184	188	175	192	179	186	146	122	103
Tuberculosis (Other forms).	45	34	41	47	40	39	36	31	31	27	23

TABLE 21.

POLIOMYELITIS, 1951.

				P	ARALYT	IC.				NON-PAR	ALYTIC.	
	Area.		Age in yes	ars.			Some residual	No residual	Age	in years.		Total.
		0-4	5—14	15 and over.	Total.	Died.	paralysis.	Paralysis.	0-4	5—14	15 and over.	I ovas.
1.	Sutton Coldfield.	110-	1	1	2	-	2	11-	-	2	-	2
2.	North Eastern.	3	2	2 75	5	-	3	2	2	2	4	8
3.	Eastern.	-	-	-	-	-	-	-		1	1	2
4.	North Western.	-	-	-	-	-	-	-	3	6	_	9
5.	Solihull.	11/22	1	-	1	-	1	-	-	1	-	1
6.	Central	-	1	1	2	-	2	-	1	2	1	4
7.	Southern	11	-	1	1	-	-	1	_	-	-	-
	TOTALS	3	5	3	11	_	8	3	6	14	6	26

TUBERCULOSIS STAFF AND CLINICS.

These clinics are the responsibility of the Regional Hospital Board. The County Council pays a proportion of the salaries of the Chest Physicians, and the Health Department's Health Visitors attend at the clinics.

Area.	Chest Physicians.	Assistant Chest Physicians.	Chest Clinics.
 Sutton Coldfield. North Eastern. Eastern. North-Western. 	Dr. A. O. Bech.	Dr. E. M. CALVEY.* Dr. W. E. ZUNDEL.* Dr. R. B. ILLING.*	School Clinic, Sutton Coldfield (school children only). 1.—Riversley Park, Nuneaton.† 2.—5. Market Street, Atherstone. Board Room, St. Luke's Hostel, Rugby.†
5. Solihull, 6. Central. 7. Southern.	Dr. P. G. Arblaster.	Dr. L. E. Burkeman.	I, Lode Lane, Solihull. Warneford Hospital, Leamington Spa. Health Department, Arden Street, Stratford-on-Avon.†

^{*} These officers are placed against the clinics in which they mainly work.

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[†] Moved to this address since the end of 1951.

Dr. Bech is also responsible for Coventry County Borough.

Dr. I. E. James and Dr. L. G. MacLachlan work entirely in the Coventry Chest Clinic, but the County Council pays a small proportion of their salaries as they see Warwickshire patients.

TABLE 22.

TUBERCULOSIS, 1951.

				PRIM.	ARY No	TIFIC	ATIO	NS.			-	Отне	R Not	IFICAT	IONS.			N			AT TI								DE	ATHS.				М	ORTALITY RATES.	
Area.	County Districts.		Pulm	onar	y.	0	Other	Forn	15.		Puln	nonar;	y.	0	ther	Form	8.		Puln	nonar	y.		Other	Forn	NS.		Pulmo	nary	ν.		Other	For	W.S.		MAIRS.	
		M.	F.	Ch.	Total.	M.	F.	Ch.	Total	M.	F.	Ch.	Total.	M.	F.	Ch.	Total.	M.	F.	Ch.	Total	M.	F. (Ch.	Total.	M.	F. (Ch.	Total.	M.	F.	Ch.	Total	Pul- monary.	Other forms.	Total
1. SUTTON COLD- FIELD.	Sutton Coldfield M.B.	9	10	6	25	1	1	3	5	3	2	-	5	-	-	-	-	75	62	14	151	13	12	14	39	5	-	-	5	-	-	1	1	0.10	0.02	0.12
2. North-Eastern	Nuneaton M.B Bedworth U.D Atherstone R.D	28 13 19		10 10 2	64 40 25		3 3 1	5 2 4	8 5 7	4 1 2	2		6 1 2		-	=	_			86 32 15	470 197 132	11		36 13 15	87 45 40	9 5 4		1	12 8 7	2 - 1	- 2	1 -	3 3	0.22 0.31 0.29	0.05 	0.27 0.31 0.42
	TOTALS	60	47	22	129	2	7	11	20	7	2	-	9	-	1	-	1	362	304	133	799	41	67	64	172	18	8	1	27	3	2	1	6	0.26	0.05	0.32
3. Eastern.	Rugby M.B Rugby R.D	29 5	16 5	13 2	58 12	2	2 3	5	9 4	1	4 2	2	10 3	=		_		178 47	129 26	34 10	341 83		27 12	25 13	76 36	5	5 4	1	11 4	1 2	1	1	4 3	0.24 0.19	0.08 0.14	0.32
	TOTALS	34	21	15	70	2	5	6	13	5	6	2	13	-	2	-	2	225	155	44	424	35	39	38	112	5	9	1	15	3	3	1	7	0.22	0.10	0.32
4. NORTH-WEST- ERN.	Meriden R.D Tamworth R.D	22 4	11 2	4	37 7	2	1	9	12 3	4	1	=	8	1	=		2	79 27	73 18	7 3	159 48	20 8	14 4	36 15	70 27	1 2		-	4 2	_	=	2	3	0.10 0.12	0.07 0.06	0.18 0.18
	Totals	26	13	5	44	3	2	10	15	4	5	-	9	1	-	1	2	106	91	10	207	28	18	51	97	3	3	-	6	1		3	4	0.11	0.07	0.18
5. SOLIHULL.	Solihull U.D	31	19	10	60	=	2	2	4	5	1	-	6	1	-	1	2	144	95	22	261	16	3	13	32	8	3	-	11	-	1	1	2	0.16	0.03	0.19
6. CENTRAL.	Leamington Spa M.B Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	9 8 1 2 6	5 6 2 6 6	E	17 14 3 8 13	1 -	- 1 - 1	2 - 1 3	2 2 1 2 3	1 - 4	2 4 - 3 3	- - -	6 6 - 3 7	1 -1 -	11111	=	1 1 -	87 51 19 23 50	27	11 13 1 1 10	143 91 33 48 95	2 4 5 7 2	3 -7	11 1 1 7 18	17 8 6 21 24	7 5 2 -	3		12 8 2 1 2	- - 1	11111	11111	- - 1	0.32 0.51 0.18 0.08 0.10	0.09 0.05	0.32 0.51 0.28 0.08 0.15
	TOTALS	26	25	4	55	2	2	6	10	9	12	1	22	2	-	-	2	230	144	36	410	20	18	38	76	15	10	-	25	2	-	-	2	0.26	0.02	0.28
7. Southern.	S'tford-upon-Avon M.B. Alcester R.D Shipston-on-Stour R.D. Stratford-on-Avon R.D.	3 5 4 12	2 3 3 1	-	6 8 8 13	- 2 1 -	- - -	- 2 1 -	2 4 2 -	1 - 1	1 -		· 2/2	1111	HIII	1111	1111	15 28 14 37	11 8	5 3 3 4	31 42 25 58	5 5 7	3 2 4 2	2 10 4 2	10 17 13 11	3 2 1 6	-	=	4 2 1 7	= -	1111	1111	= -	0.27 0.15 0.12 0.34	0.04	0.27 0.15 0.12 0.39
	TOTALS	24	9	2	35	3	2	3	8	3	2	-	5	-	-	-	-	94	47	15	156	22	11	18	51	12	2	-1	14	1	-	-	1	0.24	0.01	0.26
	COUNTY TOTALS	210	144	64	418	13	21	41	75	36	30	3	69	4	3	2	9	1236	898	274	2408	175	168 2	36	579	66	35	2	103	10	6	7	23	0.21	0.04	0.25
	TOTALS FOR 1950	191	158	58	407	19	24	47	90	35	20	6	61	5	-	1	6	1127	763	245	2135	151	151 2	18	-	84		1	122	10	8	9	27	0.24	0.05	0.30
	TOTALS FOR 1949	219	148	64	431	18	19	46	83	44	18	4	66	4	3	8	15	1069	703	167	1939	150	159 2	39	548	90	54	2	146	10	6	15	31	0.30	0.06	0.37

TABLE 23. NEW NOTIFICATIONS OF PULMONARY TUBERCULOSIS, 1951.
CLASSIFICATION OF STAGE OF DISEASE.

Stage of disease at time of	Una	ler 15.	15 24		25 3-		35 4	to 4.	45 ove	and
diagnosis.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Early (T.B. —) Early (T.B. +)	20 —	21 1	26 5	20 5	11 4	12 2	6 5	3	4 8	1
Intermediate (T.B.—) Intermediate (T.B.+)	1 1	2	7 10	10 6	6 12	9 12	5 6	5 4	5 15	2 2
(Late (T.B.—) Late (T.B.+)	-	1	3 6	2 3	3 4	3 8	3 9	_	1 16	1
TOTAL CLASSIFIED	22	26	57	46	40	46	34	12	49	6
TOTAL UNCLASSIFIED	6	11	5	16	6	5	8	7	12	6

CARE AND AFTER-CARE.

TABLE 24.

LOAN SCHEME.

			Items is	sued in	1951.			T	otal iten	us issue	d in	Items
			County	Area 1	Vumber.			1951	1950	1949	1948 from	still on loan 31st
	1	2	3	4	5	6	7				July 5th.	Dec. 1951
Beds and Bedding. Beds, Hospital and other types Air Beds Adult Cots Dunlopillo Mattresses Other type Mattresses Pillows	1 - 1 2 4	8 - - 3 9 10	4 - 10 3 6	1 1 2	4 - - 3 6 10	19 — — 12 15 8	7 1 - 5 7	44 1 34 43 40	27 — 12 25 41	15 2 1 2 15 38	3 - - - 3 3	55 1 1 20 49 57
Lumbar Pillows Blankets Sheets Pillowcases Plastic Pillowcases Rubber Sheeting (yds.)	6 6 5 -	22 31 20 4	7 11 9 - 4	9 20 15 —	8 23 16 - 2	19 16 10 — 13	14 9 5 -6	85 116 80 — 30	1 47 90 55 6 14	51 66 73 —	10 16 5 —	1 124 166 122 6 28
Bed Accessories. Back rests Bed Pans Bed Boards Bed Blocks Hot Water Bottles Bed Tables Urine Bottles Bed Cradles Lifting Poles Draw Sheets	3 3	9 4	7 3 2 1 -3 3	5	1	9 16 4 — — 11 7 13 2	2 1 1 2 - 1 1 2 3	36 28 5 2 2 6 17 14 22 5	9 6 4 — 1 6 1 7 6	4 1 2 - 1 1 - 6	2 - 1 4 - -	21 15 2 2 2 3 12 10 18
Orthopaedic Accessories. Spinal Carriages Invalid Chairs Crutches (pairs)	3	4 3 1	- 8 -			2 9 1		6 44 4	2 14 1	_ _ 3		3 37 3
Miscellaneous. Air Rings Dunlopillo Cushions Commodes Dressing pails Fireguards Electric Fires Towels	3 1 - - - -	5	5 1 1 - -	1 - - - 4	1	4 4 2 - 1 -	1 2 2 - - 2	20 14 5 - 1 -6	16 -2 - - 1 13	5 - 1 1 - 2	= = = = 10	19 10 3 — 2 1 16

As in 1950, free extra rations were provided for necessitous tuberculosis cases.

TABLE 25. NUMBER OF CASES ADMITTED TO CONVALESCENT HOMES IN 1951.

		Me	и.	Wor	nen.	Pre-S Child		Total	al.
Area.			Total Weeks.	The state of the s	Total Weeks.	The second second	Total Weeks.	No. of Cases.	Total Weeks.
1. Sutton Coldfield		1	2	9	19	-	-	10	21
2. North Eastern		15	44	15	39	1	2	31	85
3. Eastern		3	7	7	20	-	-	10	27
4. North Western		2	5	10	26	4	11	16	42
5. Solihull		2	4	17	40	-	-	19	44
6. Central		6	18	7	22	1	8	14	48
7. Southern		3	9	3	8	-	-	6	17
Totals		32	89	68	174	6	21	106	284
Average stay in wee	eks	2.	7	2.	5	3.	5	2.	6

DOMESTIC HELP SCHEME.

TABLE 26. NUMBER OF DOMESTIC HELPS AND CASES ATTENDED.

	Area.		Domestic employ 31st Dec	ed at	(Cases atten	ded in 195	51.	Total cases
			Whole- time.	Part- time.	Matern- ity.	Tuber- culosis.	Others.	Total.	in 1950.
1.	Sutton Coldfield		3	17	109	1	156	266	269
2.	North Eastern		1	31	4	1	45	50	45
3.	Eastern	***	1	17	37	7	96	140	150
4.	North Western	***	-	13	17	2	27	46	25
5.	Solihull	***	1	9	83		75	158	210
6.	Central		-	41	20	5	124	149	123
7.	Southern		6	28	40	5	79	124	79
То	TALS		12	156	310	21	602	933	901
To	TALS, 1950		25	122	336	34	531	901	-

VENEREAL DISEASES.

TABLE 27. New Cases dealt with at Clinics during the Year ended 31st December, 1951.

Clinic.	Syp	hilis.	Gonos	rhoea.	Total	V.D.	Vei	Not nereal ease.
Girnic.	M.	F.	M.	F.	M.	F.	M.	F.
Warneford Hospital Coventry and Warwickshire Hosp-	8	10	12	3	20	13	34	29
ital	4	7	14	2	18	9	56	15
General Hospital, Birmingham	6	5	17	4	23	9	85	12
Hospital of St. Cross, Rugby	4	3	7	4	11	7	30	11
Nuneaton V.D. Clinic	2	5	15	8	17	13	63	18
TOTALS	24	30	65	21	89	51	268	85
Totals for year 1950	56	42	68	14	124	56	308	108
1949	49	49	110	18	161	67	283	113
1948	64	55	121	34	185	89	291	91
1947	90	70	141	54	231	124	293	138

COUNTY AMBULANCE SERVICE.

TABLE 28.

DETAILS OF DEPOTS AND MILEAGE.

	St	aff.	Establis	shment of	Total	Total	
Depot.	S/L.	D/ Att	Ambs.	Sitting Case Cars.	Clinic Type Vehicles.	Mileage 1951.	Mileage 1950.
ATHERSTONE (A). Supt.: Mr. S. BURNETT	3	12	4	2	774	92,523	84,558
BEDWORTH (B). Supt.: Mr. J. H. BOTTRILL	1	5	3	1	_	45,736	44,509
COLESHILL (A). Supt.: Mr. W. C. CHAPMAN	3	14	4	2	_	114,251	118,603
NUNEATON (A). Supt.: Mr. J. P. MELVIN	3	21	6	3	1	126,217	121,690
RUGBY (A). Supt.: Mr. A. J. BURTON	3	16	7	2	_	121,533	123,272
Solihull (A). Supt.: Mr. M. Ross	3	18	6	2	1	143,383	145,523
Stratford-on-Avon (A). Supt.: Mr. E. T. Saul	3	18	5	2	_	110,160	127,453
SUTTON COLDFIELD (A). Supt,: Mr. E. Towers	3	16	4	2	_	69,024	73,592
Two Gates (B). Supt.: Miss B. D. Smith	_	4	1	1	_	44,810	42,133
Warwick (A). Supt.: Mr. G. D. Whiting	3	23	7	2		150,660	152,060
ALCESTER (C)	-	1	1	_	_	17,004	11,773
RESERVE VEHICLES	_	-	8	2*	_	_	-
COUNTY TOTALS	25	148	56	21*	2	1,035,301	1,045,166

^{*} Including one car awaiting sale.

A-24 Hourly Service. B-Day-time Service only. C-Emergency Service only.

UPTAKE OF VITAMIN PRODUCTS.

TABLE 29.

AVERAGE WEEKLY ISSUE DURING 1951.

(Compiled from Ministry of Food (Midland Region) Returns).

Area and District.	Orange Juice.	Cod Liver Oil.	Vitamin A and D Tablets.
	% of potential.	% of potential.	% of potential.
1. SUTTON COLDFIELD M.B	37.2	29.3	40.5
2. North Eastern.	01.5	04.0	21.0
Nuneaton M.B Bedworth U.D	21.7 21.7	24.9 22.0	31.9 25.8
Atherstone R.D	17.8	22.5	23.5
11110101010 1007	****	-	
3. Eastern.			
Rugby M.B	30.2	24.7	37.0
Rugby R.D	00.2	21.1	07.0
4. NORTH WESTERN.			
Meriden R.D	22.5	23.6	20.9
			-
5. Solihull U.D	35.6	29.2	32.4
		La	10-20 006 6
6. CENTRAL.			S. Common
Leamington M.B. Warwick R.D	26.6	23.7	40.5
Kenilworth U.D	33.3	23.1	35.2
Southam R.D	19.2	18.0	17.5
Warwick M.B	33.1	26.4	44.1
		1	137
7. Southern.		0	000
Stratford-on-Avon M.B.	25.3	21.7	36.3
and R.D. Alcester R.D	17.2	16.8	22.8
Shipston-on-Stour R.D.	36.3	29.2	23.0

The Ministry of Food wish to make two points in connection with these figures, one is that the figures for some districts, particularly rural ones, may be higher than actually shewn, owing to persons buying the foods outside the district in which they live, and the second is that the figures do not indicate the percentage of eligible persons who take part only of their entitlement. Thus 50% of eligible persons might take half their entitlement giving a percentage of potential uptake of 25.

INSPECTION AND SUPERVISION OF FOOD.

MILK AND DAIRIES ADMINISTRATION.

The principal acts and regulations now in force relating to the production, processing and sale of milk, are as follows:—

Food and Drugs (Milk and Dairies) Act, 1944.

Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950.

Milk and Dairies Regulations, 1949.

Milk (Special Designation) (Raw Milk) Regulations, 1949.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

In addition there are various amendments and other minor regulations and circulars from the Ministries of Agriculture, Food, and Health.

Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950.

Section 8. Tuberculous and Other Infected Milk.

Milk sampling for biological examination has proceeded during the year in accordance with the scheme agreed with County District Authorities during 1950.

The volume of milk subject to pasteurisation, and the number of Attested herds and licences for Tuberculin Tested milk, continue to increase, and our efforts are directed to the sources of supply where the risk still remains.

Special investigations are comparatively few as records from routine sampling are built up, and when the need for an investigation arises there is now a milk sample record already in existence in the majority of cases.

Pasteurised milk is sampled from the plant at about quarterly intervals as part of the routine check as to the efficiency of the plant.

Tuberculin Tested milks are also submitted to biological examination at yearly (or slightly longer) intervals.

The officers of the County Borough of Coventry are collaborating, and the same system and methods are being used within the County Borough and in the County with mutual advantage. In the Boroughs of Sutton Coldfield and Rugby, and the Urban District of Solihull, the routine sampling has been carried out by arrangement by the officers of those authorities. The Department's own officers undertake the sampling in all other districts.

From Table I it will be observed that a total of 980 samples were submitted, of which 31 were infected; all these were from Accredited and non-graded milks. No samples from T.T. or Pasteurised Milk were found to be infected.

Table I. FOOD AND DRUGS (MILK, DAIRIES & ARTIFICIAL CREAM) ACT, 1950. SECTION 8.

TUBERCULOUS MILK INVESTIGATIONS—ROUTINE MILK SAMPLES FOR BIOLOGICAL EXAMINATION DURING THE YEAR 1951.

NO. OF SAMPLES.

Health Area.	Local Authority Area where sample	Past- eurised.		Tuberculin Tested. (Past).		Tuberculin Tested.		Accredited and Non-graded.	
Area.	taken.	Total.	No. Pos.	Total.	No. Pos.	Total.	No. Pos.	Total.	No. Pos.
1. Sutton Coldfield.	Sutton Coldfield* Borough.	1	nil.	-	-	1	nil.	26	1
2. North Eastern.	Nuneaton Borough. Bedworth Urban. Atherstone Rural.	8 -	nil.		=	- 2 4	nil.	50 30 65	1 2 6
3. Eastern.	Rugby Borough* Rugby Rural	18	nil.	=	-	13 2	nil.	42 120	2 2
4. North Western.	Meriden Rural. Tamworth Rural.	1 -	nil.	=	-	- 3	nil.	110 49	2 5
5. Solihull.	Solihull Urban.*	3	nil.	-	_	-	-	27	3
6. Central.	L'ton Spa Borough. Warwick Borough. Kenilworth Urban. Southam Rural. Warwick Rural.	4 4	nil.			- - 5 1	- - nil. nil.	6 5 8 85 77	nil. nil. 1
7. Southern.	Stratford-on-Avon Borough.	4	nil.	778	-	-	-	1	nil.
Alcester Shipston Rural.	Alcester Rural. Shipston-on-Stour. Rural. Stratford-on-Avon	3	nil.	2 - 4	nil.	7 3	nil. nil.	41 80 59	nil.
Totals	Rural.	50	nil.	6	nil.	43	nil.	881	31

^{*} Samples taken by the Chief Sanitary Inspectors of the Local Authorities for the County Council.

II. FOOD AND DRUGS (MILK, DAIRIES & ARTIFICIAL CREAM) ACT, 1950.

SECTION 8.

RESULTS OF INVESTIGATIONS OF TUBERCLE INFECTED MILK SUPPLIES DURING YEAR 1951.

		6	1	11	79	2	76	5	7	2	3
FOTALS		31	30	605	574	152	124	34	23	11	12
1	Stratford-on-Avon Rural.	3	3	56	81	17	17	2	5	1	-
	Shipston-on-Stour. Rural.	-	1	-	11	-	3	-	1	-	-
	Alcester Rural.	1	2	7	21	3	9	-	-	2	-
Southern.	Stratford-on-Avon Borough.	-	_	-	_	_	-	_	-	_	_
	Warwick Rural.	2	-	40	-	7	-	1	-	-	-
	Southam Rural.	1	-	10	_	1	_	1	_	_	_
	Warwick Borough. Kenilworth Urban.	_	_	_	=	=	_	_	_	_	_
Central.	Leamington Spa Borough.	1	-	21	-	14	-	2	-	-	-
Solihull.	Solihull Urban.	2	1	17	10	5	4	1	1	_	_
North Western.	Meriden Rural. Tamworth Rural.	2 5	13	80 142	279 55	11 38	53 12	1 12	6 5	3	9 2
Eastern.	Rugby Borough. Rugby Rural.	4	=	80	_	25	_		_	1	_
	Atherstone Rural.	6	7	117	117	21	26	9	5	-	1
North Eastern.	Nuneaton Borough Bedworth Urban.	1 2		6 26	-	2 6	Ξ	1		1	=
Sutton Cold- Coldfield.	Sutton Coldfield Borough.	1	-	3	-	2	-	1	-	-	-
		A.	В.	A.	В.	A.	В.	A.	В.	A.	В.
Health Area.	Local Authority Area in which infection occurred.	No. of investiga- tions.		Cows examined.		Milh samples for diagnostic purposes.		Cows slaughtered under T.B. Order.		Cows removed from herds during invest igations, and which may have been infected.	

A - Cases found on routine sampling in the County.

B — Cases reported by neighbouring County Authorities.

Table 2 shows that in addition to the 31 infections found as the result of routine sampling, 30 were notified from neighbouring County and County Borough Authorities from milk sent from Warwickshire. All these 61 cases were dealt with and the results are shown in the Table.

Compared with 1950 when 13 (2.3%) positive samples were found, there were 31 (3.52%) in 1951. Positive samples reported from other authorities were 35 in 1950 and 30 in 1951.

The substantial increase in positive samples found does not necessarily indicate increased infection, but suggests a greater efficiency in sampling methods now that the scheme initiated in 1950 has had time to develop.

The collaboration between the Divisional Veterinary Officer's Department and mine continues to be excellent.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

Dealers' (Pasteurisers') licences for the seven dairies granted in 1950 were renewed for 1951, and one new licence was granted during the year. One dairy business was sold during the year and a licence was granted to the new owner.

At the beginning of the year improvements agreed were outstanding at three dairies, and these were all completed during the year. At two dairies entirely new pasteurising plant was installed together with other improvements; at the third a new building was added—in this way the floor space which was greatly increased was occupied by new equipment,

In December, 1951, the application for the renewal of one Dealer's (Pasteuriser's) licence for 1952 was refused. Deterioration of plant and particularly management had been observed throughout the year, and repeated warnings were disregarded.

During the year a number of enquiries on licencing conditions were received and work was in progress on several new dairies. It is anticipated that at least five new processing dairies will come into operation in 1952.

Each pasteurising dairy was visited at frequent intervals and the records, temperature charts and methods, observed. Samples were submitted to the prescribed tests with the results stated:—

Samples from Licensed Pasteurisation Plants.

Col. No	No of	No of	Test failed :-					
Code No. of Dairy.	No. of Samples.	No. of Failures.	Phosph: & M.B.	Phosph: only.	M.B. only.			
2/10/1	85	3	_	3				
2/10/2	46	1	-	-	1			
3/4/1	95	-	_	-	-			
6/18/1	60	4	-	3	1			
6/18/1	22	1	-	1	_			
(new owner)		1						
6/11/1	93	5	_	5	-			
7/7/1	49	-	-	_	-			
7/8/1	59	-	-	_	-			
7/16/1	98	1	-	-	1			
TOTALS	607	15	_	12	3			

These results again show that no sample failed both tests. The phosphatase test, which is designed to show the efficiency of pasteurisation, failed in only 12 instances of a total of 607. This equals 1.98% failure against 4.0% in 1950, and is a remarkably good achievement on the part of the dairies as a whole. Still more remarkable is the fact that five of the eight dairies had no phosphatase failures, and one a completely satisfactory record on both tests.

Only three methylene blue failures were recorded, equal to 0.49% as against 1.4% for 1950. This is mainly a "keeping quality" test and is without doubt affected to some extent by the weather.

Milk in Schools Scheme.

Milk is supplied free of charge for pupils in grant-aided schools, the source and quality of which must be approved by the Medical Officer of Health.

In practice, supplies are obtained and supervised by consultation between the Health and Education Departments, with assistance from the Area Milk Officer of the Ministry of Food. Two grades of milk normally are approved, namely, Pasteurised and Tuberculin Tested; in a very small number of schools where it is impossible to obtain either of these grades of milk, the best alternative available is temporarily approved. Supervision by the Health Department includes visits to dairies and schools, and examination of milk supplies, in addition to knowledge of supplies gained from the Department's other activities in connection with Milk and Dairies.

All supplies of milk to schools are the subject of visits and samples at least once in every school term.

The following is a summary of the number of schools, the suppliers and grade of milk supplied, and samples taken during the year:—

Designation of milk supplied.	No. of Schools.	No. of Suppliers.	No. of Samples.	No. of unsatis- factory samples.
Pasteurised	227	59	652	59
" Tuberculin Tested "	15	11	60	4
" Accredited " and Non- graded.	5	3 .	16	1
TOTALS	247	73	728	64

It will be observed that 8.8% of milk samples are classed as "unsatisfactory," compared with 20% in 1950.

For convenience and economy all samples are taken after delivery, and therefore under more exacting conditions. The majority of "failures" were methylene blue test for keeping quality. Although some changes were made during the year to obtain improved supplies, and for other reasons, none were made necessary by reason of unsatisfactory samples, and the action taken in this connection was limited to advice and caution.

It is not without difficulty that the Milk in Schools Scheme is maintained. Whatever the merits or otherwise of price control may be, the fact is that many dairymen will not undertake the school milk supply and some have given it up because the business is unremunerative, and in some instances, shows a loss.

The price paid for milk in schools is the basic price for ordinary milk, with no addition, but the service requires provision of three times as many bottles and caps, extra labour to handle and wash the greater number of bottles, the provision of drinking straws, and to some extent, special equipment and delivery service. This may be balanced by the semi-wholesale character of the business in large towns, but in rural areas which are our concern, heavy cost of transport must be added, and it is obviously not attractive business. The result is that we are limited in choice of supplier, not always able to secure the "best available source" and sometimes have to take the only supply that offers, and for a few schools it is impossible to obtain a supply of any kind.

Risk from Glass Splinters in Milk Bottles.

Complaints were made from time to time of glass splinters in milk bottles, and enquiry was made as to the extent of the risk to school children.

The Director of the Public Health Laboratory devised a reliable method of filtering milk for the discovery of fragments, and 121 samples of dairy-filled bottles were submitted from a number of schools suppliers over a period of thirteen weeks. In 120 cases there was no powdered glass or fragments; in one bottle one fragment of glass measuring approximately 1½ m.m. in size was found.

These results can only be regarded as an indication of the risk involved. They do not suggest that the incidence is frequent, or any practical means of eliminating the risk. There is a certain degree of risk for so long as glassware is used for the packaging of milk, or indeed, of any other article of food, but it is so small (according to the results obtained) that no more can be done than the exercise of continued vigilance.

Mechanised dairies where the risk is greatest are giving considerable attention to this, and one or more workers are employed solely on inspection work to detect the risks from glass splinters.

We are indebted to the Director of the Public Health Laboratory for this work, and I would like to record my appreciation not only for the work in his laboratory but for much consideration and advice.

Miscellaneous.

Samples of milk are taken on behalf of the Ministry of Health from hospital dairy farms (54); from supplies made under contract to hospitals on behalf of the Regional Hospital Board (74); and for various enquiries necessary in the Department (10); a total of 138 during the year.

MENTAL HEALTH.

1 Administration.

(1) Constitution and Meetings of Mental Health Sub-Committee.

The functions of the Council relating to the Mental Health Service remain delegated to the Mental Health Services Sub-Committee of the Health Committee. Four meetings of the Sub-committee, which consists of 15 members, were held during the year.

(2) Staff employed in the Mental Health Service.

The Chief Administrative Officer of the Mental Health Services Sub-Committee is the Mental Health Officer, Mr. H. J. Kotch, who has supplied this section of my report. Dr. Henry Brougham Leech, B.A.B.S., M.D., B.A.O., has continued to act as Medical Adviser to the Committee. The medical staff of this Department have, of course, also been available when required in connection with the Mental Health Service.

Eight Duly Authorised Officers are engaged in the County, one of these Officers being located in each of the seven areas of the County, with the remaining officer located at head-quarters. In addition, the assistant to one of these officers is authorised to take action under the Lunacy and Mental Treatment Acts.

The visitation of mental defectives in the County is undertaken by a female Visitor and by the Duly Authorised Officer at headquarters.

The Council's Occupation Centres are staffed in each case by a Supervisor, and Assistant Supervisor, with part-time assistance for domestic duties and guiding the patients. One of the Supervisors holds the Diploma of the National Association for Mental Health.

(3) Co-ordination with Regional Hospital Boards and Hospital Management Committees. The Council's Officers have continued to assist Hospital Management Committees in the supervision of mental defectives who have been placed on licence within the County. There were thirty-eight patients on licence under supervision in the County at the end of the year. In addition, home conditions reports have been supplied to institutions for mental defectives in connection with holiday leave applications, licence applications and the reconsideration of orders for detention.

(4) Training of Mental Health Workers.

All members of the staff engaged in the care, supervision or training of mental defectives, with one exception, have now attended appropriate courses of training. Facilities are offered to the staff to attend refresher courses from time to time.

2 Work undertaken in the Community.

(1) National Health Service Act, 1946; Prevention, Care and After-Care.

The Psychiatric Out-Patient Clinics arranged and staffed by Specialists of the Birmingham Regional Hospital Board have continued to be held at hospitals within the County. The Social Workers on the staff of the Central Hospital, Hatton, have undertaken the after-care of patients discharged from that hospital and the Council's officers have also assisted.

The Local Health Authority has continued to assist in the maintenance of certain patients placed in After-Care Homes through the Mental After-Care Association after treatment in mental hospitals or out-patient clinics.

(2) Lunacy and Mental Treatment Acts, 1890-1930-Work undertaken by Duly Authorised Officers.

The following is a summary of the cases dealt with by the Duly Authorised Officers in the County during the year:—

Patients dealt with unc	er the Lu	nacy	Acts					207
Patients dealt with und	ler Section	I of	the Me	ental 7	[reatmen	t Act,	1930	
(Voluntary)								144
Patients dealt with unc	ler Section	5 of	the Me	ental 7	reatmen'	t Act,	1930	
(Temporary)				***				10
								361

(3) Mental Deficiency Acts, 1913-1938.

(i) Ascertainment.

The majority of cases reported to the authority continue to be ascertained through the school medical services. In addition, cases are ascertained through the Courts, Probation Officers and other social workers.

(a) Number of defectives.

The number of cases ascertained as at the 31st December, 1951, excluding patients maintained in, or on licence from, institutions for mental defectives, was as follows:—

		M.	F.	T.
Under guardianship	 	26	F. 35 — 150 77 13 81	61
In " Places of Safety "	 	_	_	-
Under statutory supervision	 7	160	150	310
Under voluntary supervision	 	105	77	182
Under investigation	 	13	13	26
In the Central Hospital, Hatton	 	79	81	160
		383	356	739

(b) Cases reported during the year.

There were seventy-four new cases reported to the Committee during the year and these were dealt with as follows:—

	M.	F.	T.
Admitted to institutions	6	5	11
Placed under statutory supervision	12	15	27
Placed under voluntary supervision	4	3	7
Died or removed from area	3	4	7
Found not to be defective	1	2	3
Remaining under investigation at end of year	10	9	19
	36	38	74

(c) Defectives awaiting vacancies in institutions.

There were sixty-eight patients awaiting admission to institutions for defectives at the end of the year. Many of these cases are of an urgent nature.

(ii) Guardianship and supervision.

The patients under guardianship in the County and those on licence from institutions or under statutory or voluntary supervision are regularly visited by the Committee's officers. It is generally found that such visits and the advice which can be given, are welcomed by relatives and patients.

(iii) Training.

The Council's Occupation Centres for the training of defectives at Nuneaton and Warwick, continued successfully during the year. Defectives from surrounding areas were able to take advantage of public transport services to attend the centres. At the end of 1951 there were forty-five defectives in attendance at these two Centres.

An annual coach outing was again organised for the defectives from the Centres.

The Committee have considered the desirability of providing additional training facilities and will give further consideration to the question of opening other centres when accommodation is available.



