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The Urban District Council of Wellingborough.

Annual Report

OF THE

Medical Officer

For the Year 1925

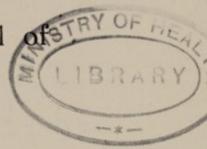
BY

J. ARTHUR, M.D.

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The Urban District Council Wellingborough.



REPORT

of the Medical Officer of Health.

TO THE URBAN DISTRICT COUNCIL OF WELLINGBOROUGH.

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to herewith present to your notice my report on the health of the District during the year 1925.

I wish to take this opportunity of thanking the officials of the Council to whom I am greatly indebted for their courtesy and help in carrying out this work of the Department.

In particular I am much indebted to your Sanitary Inspector, Mr. W. E. Hall, who carries out his duties single handed with so much ability.

I am, Gentlemen.

Your obedient Servant,

J. ARTHUR,
MEDICAL OFFICER OF HEALTH.

CHIEF FIGURES FOR 1925.

Population (Census 192	21)					20,365
Estimated Population,	1925					20,530
Birth Rate						16.99
Death Rate						11.39
Infantile Mortality						54.4
Death Rate from Pulm	nonary	Tuberc	ulosis			0.53
Total Births:—						
Legitimate					332	
Illegitimate					17	
						349
Total Deaths from all	Causes					234
Total Deaths of Infan	nts und	der One	e Yea	r:		
Legitimate					17	
Illegitimate					2	
•						19
Area of District in Acr	es (land	d and in	nland	water)		4,265
Number of Inhabited						4,686
Average Number of Pe				21)		4.3
Rateable Value (1925)						£96,005
Sum represented by a						£316/9/9
Sum represented by a	Permy				-	

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area.—The Urban District of Wellingborough covers an area of 4,265 acres.

Population.—The 1921 Census return gave a population in this district of 20,365. The estimated population at mid-year 1925 was 20,530, which is an increase on the Census figure, but a slight decrease on 1924 when the estimated population was 20,610.

Physical Features and General Character of the District.—
The country is undulating in character and the town is situated on a slope which runs down to the Nene Valley on the South and the Valley of the Ise Brook on the East. The highest point of the town is about 280 feet above sea level, while the Nene Valley is little more than 100 feet, so that the slope is considerable, and in consequence the town receives a maximum of sunshine, and drainage is facilitated. The subsoil is chiefly clay on the top of ironstone and the district abounds in springs.

Number of Inhabited Houses.—According to the Census returns of 1921 the number of inhabited houses was 4,686, giving an average of 4.38 persons per house. It is interesting to note that in the 1911 census the number of inhabited houses was 4,689, that is three more than in 1921, and the average number of persons per house was 4.2.

Rateable Value.—The Rateable Value of the area is now £96,005, compared with £93,602 in 1924, an increase of £2,400, and the sum represented by a penny rate is now £316 9s. 9d.

Social Conditions.—There is a certain amount of agricultural land in the district, but the bulk of the population lives in the town, which is an industrial one. The staple trade is the Boot and Shoe industry, but the manufacture of Clothing is also a large and increasing trade. There are several engineering works, and the mining and smelting of ironstone is an important occupation.

As practically all the factories obtain their power from gas or electricity there is an absence of the smoke nuisance which is such a problem in many industrial towns.

There have been no new industries of note established in the district during the last five years. On the whole, the various industries are carried on in healthy surroundings and there is no evidence that any particular occupation has any influence on the public health. There is a wide-spread impression that boot and shoe operatives are more liable to consumption than workers in other trades, but I have always had my doubts on this point. During the last five years the average number of deaths from respiratory tuberculosis has been 18, equal to a rate of 0.7 per 1000, which is lower than the rate for England and Wales. There are many industrial towns in England and Wales which have no boot factories but have a higher tuberculosis death rate than Wellingborough or Northampton.

Vital Statistics.

Births.—The total number of births registered during the year was 349, compared with 330 in 1924. Of the total 181 were males and 168 females, and for the first time since 1921 the males predominated. The birth rate works out at 16.99 per 1,000, and is a slight improvement on 1924 (16.0). The rate for England and Wales is 18.3.

Illegitimate Births.—There were 17 illegitimate births registered during the year compared with 14 in 1924, 15 in 1923 and 17 in 1922. The illegitimate birth rate therefore remains more or less stationary and is equal to nearly one illegitimate in every twenty births.

Deaths.—The nett deaths registered during the year numbered 234 compared with 255 in 1924. For the first time since 1922 cancer heads the list as the disease responsible for the greatest number of deaths from any one cause, with 37 deaths. This is the greatest number of deaths from cancer recorded in this district, so far as my records show, the average for the previous six years being 26. Second on the list comes heart disease with 33 deaths and respiratory disease (excluding tuberculosis) third with 25 deaths. Respiratory tuberculosis caused 11 deaths which I believe is the lowest on record. There were 12 deaths from influenza compared with 16 in 1924. Puerperal sepsis accounted for one death and it is noteworthy that this is the first death recorded from this disease for several years. Among Zymotic diseases there were three deaths, one each from measles, whooping cough and diphtheria.

The local death rate works out at 11.39 per 1,000, and the corrected death rate is 10.33 per 1,000. The death rate for

England and Wales is 12.2.

Infantile Mortality.—The deaths of infants under one year numbered 19 of which two were illegitimate. Of the total, 11 were due to congenital debility and premature birth. There were no deaths from epidemic diarrhoea, which is so frequently the cause of many infantile deaths. The infantile mortality rate is 54.4 per 1,000 births, and is the second lowest on record. The rate for England and Wales is 75.

Poor Law Relief and Hospital.—I have no figures available to shew the amount of Poor Law Relief granted during the year, but it is increasing. As regards hospital and other forms of gratuitous medical relief, the Cottage Hospital is becoming more and more utilized every year, and a good number of cases are treated at the Northampton General Hospital. The Union Infirmary is of great service in the treatment of chronic diseases of poor persons who cannot be nursed in their own homes.

During the year there were no causes of sickness or invalidity which have been specially noteworthy, with the possible exception of scarlet fever which is dealt with below; nor were there any conditions of occupation or environment which appear to have had a prejudicial effect on health.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Hospitals provided by the Local Authority or the County Council.—There are only two, the Isolation and the Small-Pox Hospitals. These are both wholly supported by the Urban Council.

The Isolation Hospital is situated in a good position on the outskirts of the town. It consists of administration, scarlet-fever, and diphtheria blocks, and two observation wards, with a total of 32 beds. It is administered by a fully trained Matron, Miss O'Neill, and nurses, and the work is very efficiently carried out. Occasionally cases from neighbouring districts are admitted if and when accommodation is available. During the year 172 cases were admitted, of which 8 were from other areas. Details are given on page 28. There were no deaths during the year.

The Small-pox Hospital is situated at Spike Island, which is outside the area, and a mile from the town. Equipment for six patients is stored in readiness, and thanks to the organising ability of the Sanitary Inspector, the Hospital can be in readiness to receive patients in less than three hours.

There is no Institutional provision for unmarried mothers, illegitimate infants and homeless children except the Union.

Ambulance facilities. (a) Infectious cases are removed to hospital by the Council's ambulance.

(b) Non-infectious and accident cases are transported by the St. John Ambulance Brigade, which runs a very efficient service.

Clinics and Treatment Centres.—These are all under the administration of the County Council.

The Public Health Staff consists of a part time Medical Officer of Health, and a whole time Sanitary Inspector. The latter is a Sanitary Inspector and Meat and Foods Inspector of the Royal Sanitary Institute. In addition he holds the Fellowship Certificate of the Institute of Sanitary Engineers; Clerk of Works Certificate and a F.R.M.S. In the case of both officials, half the salary is contributed by Exchequer Grants.

Professional Nursing in the Home.

- (a) General. There are three District Nurses working in the area. One is a private nurse and the other two are provided by the County Nursing Association and are in no way connected with the Local Authority.
- (b) Infectious Cases. Nurses for Measles, etc., are provided by the County Council as and when required.

Midwives are under the supervision of and responsible to the County Council.

Legislation in force. The following Acts, etc., are in force in the area:—

The Public Health Act, 1890.
Infectious Diseases (Prevention) Act, 1890.
Public Health Act, 1907, (Parts of).
Baths and Wash Houses Acts.
Notification of Births Act, 1907.

Bye-laws with respect to New Buildings and Streets (Model Bye-laws) were sanctioned by the Ministry of Health on 17th March, 1925.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.—The supply of Water is chiefly obtained from wells situated at Bushfield, about 1½ miles N.W. of the town. A supplementary supply is obtained from Hardwick, 1½ miles from Bushfield in the same direction. The geological formation is the same in both places and is known as the Northampton Sand, which embraces the Lower Estuarine Beds and the Ironstone Series below.

The water contains 33 degrees of hardness, but after being subjected to a softening process carried out on the continuous system, is reduced to 15 degrees, 12.5 degrees of which are permanent.

The water is filtered and pumped into service Reservoirs, from which the town is supplied by gravitation. The supply is constant, abundant and pure, and is free from contamination.

The total quantity consumed during the year was 88,052,324 gallons, which is equal to an average daily consumption of 11.8 gallons per head of the population.

Except for a few houses in the outlying parts of the district, practically the whole population is supplied with water from the town supply.

Rivers and Streams. There have been no complaints of any pollution of rivers and streams in the district during the year.

Drainage and Sewerage.—The drains of practically every property in the district are connected with the town sewers. The sewage is treated by broad irrigation on a Sewage Farm about 400 acres in extent, situated within the adjoining Urban District of Irthlingborough. The sewage is discharged from the main outfalls into open tanks from which it is pumped direct to the various parts of the Farm as required. The irrigation is well managed and the effluent is quite satisfactory. The outfall is not sufficiently adequate, and there is some trouble during thunderstorms.

Closet Accommodation.—This it is satisfactory to note is entirely on the water carriage system, there being now no privies, the remainder of the latter being abolished in 1915. There is, however, room for considerable improvement in the closet system. The majority in the cottage property are of the long hopper type and hand flushed. With an abundant water supply there is no reason, except that of expense (a considerable

matter in these days), why hand flushing should not be abolished. It is seldom properly carried out, and people will not give the necessary time and trouble to it, the frequent result being choked drains. It is to be hoped that owners of property will do their best to instal flushing cisterns at the earliest opportunity.

Owing to the expansion of the town, and the scarcity of building sites adjacent to sewer connections, there are a few houses built, or in the course of being built, with cesspits. The question of sewerage is still under consideration, and it will be very unfortunate if the town is going back to the cesspit principle.

Scavenging.—There are no ashpits or privies. House refuse is stored in moveable receptacles of sorts, and collected once a week in the Council's covered wagons.

The ash-bins are most unsatisfactory, any old receptacle being used; the sanitary dust-bin with a TIGHT-FITTING cover being the exception and not the rule. It is essential in the interests of public health that dust-bins should have a tight fitting cover, otherwise in the summer-time they become breeding places for flies. Also in Summer there are few domestic fires and much of the rubbish which in winter is burnt goes into the ash-bin adding considerably to the bulk of the refuse.

It is for this reason that I have advocated the bi-weekly collection of refuse during the Summer months, but the suggestion has been turned down on account of expense.

Prior to 1920, house refuse was burned in an incinerator, but that arrangement being terminated, the retrograde method of dumping it in a tip was resorted to. There was much trouble over these tips, as was to be expected, leading up to a Ministry enquiry in November, 1922. The present tip is an improvement in many ways on its predecessors, but there is only one sanitary way of dealing with refuse, and that is burning.

Street Scavenging is not what it was. In the old pre-war days the streets of Wellingborough were kept as clean as any town in the country. Since the war there has been a marked deterioration in this direction. Although motor traffic has increased enormously it would not appear from the condition of the streets that there has been any diminution in the amount of horse transport. Possibly there has been a diminution in the number of amateur street scavengers. The chief cause

of untidiness in the streets, however, is the amount of paper, etc., that blows about the town. The fish and chip saloon patrons are largely to blame, but they are not the only ones. It might be advisable to introduce receptacles attached to lamp posts wherein papers, cartons and match boxes might be dropped and which are quite successful in other towns.

Sanitary Inspection of the Area.—The area has been regularly and systematically inspected and I attach the Sanitary Inspector's Report.

SANITARY INSPECTOR'S REPORT.

FROM 1st JANUARY, 1925 to 31st DECEMBER, 1925.

Summary of Inspections.

Dwelling-houses and other Pr	emise	s		1320
Bake-houses			 	55
Slaughter-houses			 	1080
Dairies, Cowsheds, Milkshops			 	40
Factories and Workshops			 	76
Infectious Cases Investigated			 	217
Rooms Disinfected			 	256
Re-Inspections, etc			 	216
				3260

SUMMARY OF NUISANCES AND INFRINGEMENTS.

A tabular statement of the work performed by the Sanitary Inspector during the year 1925, supplied in pursuance of Article XX. (16) of the Sanitary Officers (outside London) Order, 1910.

Nature,	Found	Informal Notices	Statutory Notices	Reme- died	Work in hand
Rooms of Houses Insanitary	45	45	1	45	
Houses Dilapidated	36	36	1	36	
Houses Overcrowded	6	6		3	3
Drains Defective	26	26		26	
Drains Choked	26	26		26	
W.C. Defective	13	13		13	
Rainwater Guttering Defective	25	25		25	
Accumulation of Refuse	12	12		12	
Bakehouses Limewashing required	15	15		15	
Offences under Factory Acts		11		11	
Miscellaneous	32	32		32	
	247	247	2	244	3

FOODS CONDEMNED.

Beef		 	9 cwts.		9 lbs.
Mutton		 		2 ,,	
Pork		 	19 ,,	1 ,,	
Other Food	ls	 	1 ,,	2 ,,	
			1 ton 10 cwts.	1 qr.	9 lbs.

W. E. HALL, Sanitary Inspector. Smoke Abatement.—Fortunately this question hardly concerns this area, as with one or two exceptions the industries are supplied with gas or electric power.

Premises and Occupations controlled by Bye-laws and Regulations.—There has been no difficulty in dealing with these. One lodging house was closed. There are no underground sleeping rooms in the area.

Schools.—The Public Elementary Schools are under the administrative control of the County Council.

HOUSING.

I.—General Housing Conditions of the Area.

- 1. These, I think, compare very favourably with the conditions in other similar sized industrial towns, and are indeed superior to many. Comparatively speaking, there are very few bad areas, the majority of the houses having been erected during the last thirty years. There has been no great increase in the population, so the difficulty is not so acute as in some areas, but in common with the rest of the country, we suffer from a shortage of houses, and there is still a lot of leeway to be made up in the provision of houses.
- 2. (a). When the Housing Survey took place in 1919, it was estimated that to meet the unsatisfied demand of the population, 200 new houses would be required in the next three years. By the end of 1923, 41 new houses had been built! There was an improvement after that, so that by the end of 1925 the total number of new houses built was 277.
- (b). Probably another 150 houses are required before the supply will exceed the demand. At the end of 1925 there were a total of 50 houses in the course of erection, 20 of which were Council houses, and provision has been made for a total of 44 to be built by the Local Authority and completed before the end of 1926.
- 3. The population remains more or less stationary, and no important changes are anticipated in the immediate future.

II.—Overcrowding.

1. It is very difficult to say to what extent overcrowding exists. No complaints on this score were received during the year, and in the course of inspection there were only a few houses found to be actually overcrowded. Approximately 150

houses contain more than one family, but in many of these one cannot say that overcrowding exists.

- 2. As regards the cause of overcrowding the chief difficulty is the house shortage. There are, as I have mentioned, many houses where two families are living, and in probably the majority of these the second family consists of a newly married couple, or a couple and one child. On the other hand, there are families with several children in houses that are too small, but as no other houses are available they have to remain where they are.
- It has been impossible to deal with overcrowding in the circumstances until more houses are available.
- 4. One case of overcrowding was dealt with officially during the year.

III.—Fitness of Houses.

- 1 (a). The general standard of housing in the district is very good. Of the working class houses three-quarters of the total number, or 75%, are houses containing parlour, living room, scullery and three bedrooms. There are no tenements in block buildings, and only 17 houses with less than four rooms.
- (b). Defects found are chiefly minor ones. The chief defect is dampness, due to the heavy sub-soil and the absence of damp proof courses. As regards other defects a reference to the Sanitary Inspector's Report will show which are the most frequent.
- (c). As will be seen from the Sanitary Inspector's Report it was only necessary to serve two Statutory Notices during the year. If this is any criterion, there is not much lack of supervision by owners. Many defects could be remedied by the tenants if they took more interest in their houses.
 - 2. General action taken as regards unfit houses:-
- (a). Under the present Public Health Acts, as will be seen from the Inspector's Report, out of 247 cases it was only necessary in two instances to serve a statutory notice. I think this speaks well for the relations between the officials of the Council and the owners.
 - (b). No action was taken under the Housing Acts.
- 3. The chief difficulty in remedying existing defects is simply a question of ways and means. Repairs are being

carried out as rapidly as possible under the circumstances. We have no unfit back-to-back houses.

4. Conditions so far as they affect housing, as regards water supply, closet accommodation, and refuse disposal, have been already dealt with under the sanitation of the district.

IV .- Unhealthy Areas.

There are none.

V.—Bye-laws relating to Houses, to Houses let in lodgings, and to Tents, Vans, Etc.

New Model Bye-laws dealing with New Streets and Buildings were approved in March, 1925. The old bye-laws dated back to 1859. It is too soon to speak as to the working of the new bye-laws.

There are no bye-laws dealing with houses let in lodgings, tents, vans, etc., though if the housing difficulty lasts much longer it may be necessary to adopt them.

VI.—General and Miscellaneous.

No action has been taken under this heading during the year.

HOUSING STATISTICS FOR THE YEAR 1925.

Number	r of New Houses erected during the year :-	
(a)		119
	(i.) By the Local Authority	109*
	(ii.) By other bodies or persons	-
1.—U	Inspection :—	
1.	Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)	376
2.	Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations 1910	_
	* Subsidy Houses.	

2 Number of descline houses found to be in a	
3. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	_
4. Number of dwelling-houses (exclusive of those referred to under the preceding subheading) found not to be in all respects reasonably fit for human habitation	221
2.—Remedy of Defects without service of Formal Notice	es.
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	221
3.—Action under Statutory Powers.	
A. Proceedings under Section 3 of the Housing, Act, 1925	Nil
B. Proceedings under Public Health Acts	Nil
(1). Number of dwelling-houses in respect of which Notices were served requiring defects to be remedied	221
(2). Number of dwelling-houses in which defects were remedied after service of formal notices	_
(a) By Owners (b) By Local Authority in default of owner	221
C. Proceedings under 11, 14 and 15 of the Housing, Act, 1925:	
(1). Number of representations made with a view to the making of Closing Orders	_
(2). Number of dwelling-houses in respect of which Closing Orders were made	_
(3). Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	
(4). Number of dwelling-houses in respect of which Demolition Orders were made	_
(5). Number of dwelling-houses demolished in	_

INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.—Generally speaking, the Milk Supply in this area is ample and compares favourably with similar districts. Most of the Milk is produced within the area or in the Rural district. There is great room for improvement in the methods of supply and distribution of this staple food. It will be noted from the Veterinary Inspector's Report, a copy of which is attached, that there is still much needed improvement as regards general cleanliness in the cowsheds and dairies, and the handling of milk.

It will also be noted that in the course of inspection it was found that 0.47 per cent. of the dairy cows were found to be tuberculous. As regards tuberculosis in fat stock, there is no

difficulty with the butchers.

No action was taken during the year under the Milk Order.

A welcome advancement from the public health point of view as regards Milk Supply, has been made by the local Cooperative Society, which is establishing a new hygienic Milk depot. The building is in course of erection, and will be installed with the most modern plant for supplying clean, pure milk. Briefly the process is as follows: the milk on arrival at the depot will first gravitate from a Receiving Tank to the Prewarmer and then it is centrifuged to remove dirt and sediment. The next step is pasteurization, to destroy the harmful bacteria, after which it is cooled according to the requirements of the Ministry of Health, to a temperature of 45°F. It is then bottled by an automatic machine and the filled bottles are stored in the cold room until delivered to the consumer.

The Society is to be congratulated on its enterprise, and when the public are sufficiently educated to realize the importance of pure, clean milk, such enterprise will receive its reward.

Appended is the Report of the Veterinary Inspector.

To the Joint Committee of the Urban and Rural Districts of Wellingborough.

VETERINARY INSPECTOR'S SIXTH ANNUAL REPORT. Gentlemen,

I have the honour to present my Annual Report for the year ending 31st December, 1925.

During the last twelve months, three inspections have

been made of the premises in the occupation of the registered cowkeepers, and an individual examination of the dairy cows contained therein, special attention being paid to the udders.

The general sanitary condition of the cowsheds shows improvement, but there is still room for more. Strict supervision has to be exercised over limewashing and manure accumulations. The cleanliness of the floors, the cows' udders and extremities, and often the milkers' hands, do not receive sufficient attention.

The general condition of the cows throughout the year, with very few exceptions, has been most satisfactory. Fewer old cows are retained in the sheds; younger and consequently more healthy cows are taking their place.

On 1st September, The Milk and Dairies Consolidation Act and The Tuberculosis Order 1925 came into force. When these are properly applied and enforced, a great improvement should take place in the production of milk. Under the former Act, all Districts should eventually have their cows and cowsheds systematically inspected.

The number of cows inspected, the condition of their udders receiving special attention, is 3551, of which 3530 or 99.40 per cent., showed no clinical derangement. The udders found to be abnormal, whether from benign or serious affections, numbered 21 or .59 per cent., and were in a condition calculated to render the milk harmful for human consumption. Of these, 17, or .47 per cent. of the total number of cows, were affected with tuberculosis, the remainder being cases of either acute or suppurative mastitis.

The cowkeepers continue to display willingness to act on my suggestions, and to abate the various nuisances when pointed out.

Attached is a Tabular Statement of the Inspections, Nuisances, etc., for the year, showing the total figures for the whole area, and for the Urban and Rural areas respectively: also, for comparison, the figures for last year, when, owing to the prevalence of foot and mouth disease, only two inspections were made.

I am, Gentlemen,

Your obedient Servant,

(Signed) E. W. PARKS, Lt.-Col. M.R.C.V.S.

Veterinary Inspector.

31st December, 1925.

	TO	TOTAL.	UR	URBAN.	RU	RURAL.
	1925	1924	1925	1924	1925	1924
No. of Cowkeepers	101	102	14	15	87	87
No. of Properties inspected	310	184	39	27	271	157
Accumulation of Manure in too close proximity to Cowsheds	1	.1	1	1	1	1
Keeping Swine in Cowsheds	1	1	1	1	1	1
Insanitary and not satisfactory floors	61	20	1	-	61	4
Neglect of Limewashing	26	7	60	00	23	4
No. of cows inspected	3551	2076	489	338	3062	1738
No. of Healthy Udders	3530 or 99.40%	2058 or 99.13%	488 or 99.79%	334 or 98.81%	3042 or 99.34%	1724 or 99.19%
No. of abnormal Udders secreting harmful milk	21 or .59%	18 or	1 or .20%	4 or 1.18%	20 or .65%	14 or .80%
*No. of tubercular Udders	14 or .39%	16 or	1 or .20%	4 or 1.18%	13 or .42%	12 or68%

* The No. of Tubercular Udders is also included in the No. of Abnormal Udders.

- (b) Meat.—There is no public abattoir as yet, and apparently no prospect of one so far as can be seen. Butchers buy in the open market and kill in their own private slaughter houses and as there are nineteen of these, there is a good deal of travelling to do by the Inspector.
- (i.) Meat inspection is carried out thoroughly and efficiently. Under the 1924 Regulations, the butchers have intimated fixed days and hours for killing, and if there is any departure from these times, notice is sent at once to the Inspector.
- (ii.) All shops, butchers and grocers, have fixed windows, and stalls and vehicles are fitted with glass fronts and partitions. There was some difficulty, naturally, in introducing these Regulations, for both purveyors and the public are conservative in these matters. One wishes that the latter would take more interest in matters pertaining to their own welfare with regard to the handling and distribution of food. The following is a tabular statement of the slaughter-houses of the area.

Devistand	In 1920.	In January 1925.	In December 1925.
Registered Licensed	20	19	19
Total	20	19	19
	_		-

(c). Other Foods.—During the year a strict watch has been kept on the quality of the various other foods. It will be noted that the quantity of these foods condemned during the year amounted to 1 cwt. 2 quarters.

Premises where foods are manufactured, prepared, stored, or exposed for sale, have been regularly inspected and have been found on the whole to be satisfactory and to comply with existing regulations.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

Infectious Diseases Generally.

Scarlet Fever.—The most note-worthy event as regards infectious diseases was the prevalence of Scarlet Fever throughout the year. It was on the whole, a very mild type of the disease, as has been the case in recent years. There were, however, several severe cases, but there were no deaths. One hundred and seventy cases were notified, the figures for the previous four years being respectively 20, 62, 155, and 22. On another page will be seen the number of notifications received each week and month, and also the age incidence. There was quite an outbreak in February, then it declined somewhat to become more prevalent during the Autumn months. As was to be expected, the majority of cases occurred during school age, no less than 119 cases being children over four years of age and under fifteen. In the majority of cases the symptoms were slight, there was little constitutional disturbance, and as usual quite a number were not discovered until they were in the peeling stage. 155 cases were removed to the Isolation Hospital. There were two possible "return" cases during the year.

Diphtheria.—Since 1921, there have been few cases of diphtheria notified. 8 cases were notified in 1925, the figures for the four previous years being respectively 32, 2, 1, 1. With one exception all the cases were treated in the Isolation Hospital and there was one death. In all cases prompt use was made of anti-toxin which is supplied to practitioners on request.

Small-pox was prevalent in the County during the year, but fortunately this district escaped, although there were many contacts. It was thought advisable to make chicken-pox notifiable and 59 cases were notified.

There is not much to add about other diseases. There was one case of opthalmia neonatorum, which made a good recovery. Two cases of enteric fever were notified, and in both cases it was found that they had contracted the infection elsewhere. There were no cases of encephalitis lethargica or cerebro-spinal fever notified. The total number of cases of the former disease notified in the last five years has been three, and two of the latter.

It is doubtful if the notifications under the Regulations of 7th January, 1919, are of much value. Not all cases of pneumonia are notified. It will be noted that only 13 cases were notified, while there were 12 deaths.

Bacteriological Work.—Specimens are sent to the Pathological Laboratory of the General Hospital, Northampton. During the year 87 specimens were examined composed of 73 throat swabs, 12 sputa, and one each of blood and cerebrospinal fluid.

No use has been made of the Schick and Dick tests during the year and there have been no vaccinations under the Public Health (Small-pox prevention) Regulations 1917.

Non-notifiable Diseases.—Influenza was not particularly prevalent during the year, yet there were twelve deaths certified as due to that disease. For information regarding non-notifiable diseases one is chiefly dependent on the school reports.

Whooping Cough was prevalent during the early part of the year affecting infants and young children chiefly. There was one death. A few cases of Measles appeared, also with one death.

In June Rubella commonly known as German Measles, began among young children, and before the end of the year became epidemic. Many adults were attacked, but the disease was very mild, the majority of cases being afebrile.

Disinfection.—The Sanitary Inspector supervises the disinfection of any premises and articles exposed to infection. The latter are sterilized by steam if possible. There are no facilities available for the cleansing of verminous persons, except at the Union Infirmary.

I append tables showing the incidence of infectious disease during the year.

Notifiable Diseases (other than Tuberculosis) During the Year 1925.

	•	-	-	-	_												-
Disease.	D .	Under 1 year	1	61	ಣ	4	10	5 10	10	15 20	20 35	35	45 65	over 65	Total	Admitted to Hospital	Dths.
Small-pox	:														Nil		
Diphtheria	:					67	-	ಣ	1		-				∞	7	-
Scarlet Fever	:		1	4	9	15	10	46	48	25	15				170	155	1
Enteric Fever	:										1	1			61	61	1
Puerperal Fever	:														Nii		
Malaria Fever	:										1				1		1
Pneumonia	:				-					63	63	9	-	-	13	1	12
Erysipelas	:											ಣ	9	0.1	==	1	1
conatorum	:	1													1	1	1
Chicken Pox	:		63	ಣ	9	17	10	12	1	67					59	1	1
														- 1	265	164	13
					-										-	TOTAL PROPERTY.	-

TUBERCULOSIS.

New Cases and Mortality during 1925.

		NEW C	ASES			DEA	THS.	
	Pulme	onary	Non.	-Pul.	Pulm	onary	Non	-Pul.
	М.	F.	М.	F.	М.	F.	М.	F.
Under 1 year	 _	-	_	-	-	_	-	_
1	 -		-	-	-			-
5	 2	2	1	-	-	-	_	-
01	 	2	1	-	-	-	2	
15	 2	1	3	-	-	1	-	
20	 6	2	-	_	-	2	-	-
25	 5	1	1	2	1	2	-	-
35	 2	2	-	-	-	2	1	-
15	 -	3	_	-	1 2			1
55	 		-	-	-		-	1
35 upwards	 -	-	-	-	-	1		-
Totals	 17	13	6	2	3	8	3	2

Four of the sixteen tuberculosis deaths had not been previously notified, a ratio of 1 to 4. All the non-notified deaths were non-pulmonary. The efficiency of notification of tuberculosis in this area is very good, though there is a natural reluctance to label a case as tuberculosis until the diagnosis is confirmed. There have been no cases of wilful neglect or refusal to notify in this area.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

There has been no necessity to take any action under these Regulations during the year.

Public Health Act, 1925, Section 62.

No action was necessary, as no difficulties arose in removing cases to Hospital.

ANALYSIS OF CAUSES OF DEATH.

During the Year 1925.

	Cause of Death.	TOTAL.	M	ALES.		FEMALES
1.	Enteric Fever			_		_
2.	Small-pox	-		-		
3.	Measles	1		1		-
4.	Scarlet Fever			-		_
5.	Whooping Cough	1		1		_
6.	Diphtheria	1				1
7.	Influenza	12		3	***	9
8.	Encephalitis lethargica	-		-		-
9.	Meningococcal meningitis			-		-
10.	Tuberculosis of respiratory					
	system	11		3		8
11.	Other tuberculous diseases	5		3		2
12.	Cancer, malignant disease	37		18		19
13.	Rheumatic Fever	1		-		1
14.	Diabetes	2		-		2
15.	Cerebral hæmorrhage, &c	7		3		4
16.	Heart Disease	33		17		16
17.	Arterio-sclerosis	6		2		4
18.	Bronchitis	10		7		3
19.	Pneumonia (all forms)	12		7		5
20.	Other respiratory diseases	2		2		_
21.	Ulcer of stomach or duodenum	1		1		_
22.	Diarrhoea, &c. (under 2 yrs.)					
23.	Appendicitis and typhlitis	2		1		1
24.	Cirrhosis of liver	_				-
25.	Acute and chronic nephritis	9		3		6
26.	Puerperal sepsis	1				1
27.	Other accidents and diseases of					
	pregnancy and parturition	-		_		
28.	Congenital debility and malfor-					
	mation, premature birth	11	***	8		3
29.	Suicide	3		1		2
30.		6		4		2
31.		60		28		32
32.	Causes ill-defined or unknown	-		-	•••	-
	Total	234		113		121

Comparison of Local Vital Statistics with those of the Whole Country.

1925	Birth Rate per 1000 total pop.	Deaths	Deaths under 1 year to 1000 births
England and Wales	18.3	12.2	75
105 Great Towns, including London	. 18.8	12.2	79
157 Smaller Towns	. 18.3	11.2	74
London	. 18.0	11.7	67
Wellingborough Urban District	. 16.9	11.3	54

Comparison of Birth Rate, Death Rate, and Infantile Mortality Rate for the last nineteen years.

Year	Birth Rate	Death Rate	Infantile Mortality
1907	20.6	10.9	74.9
1908	21.8	12	103.8
1909	22.5	10.9	78.7
1910	20.7	10.5	96.2
1911	19.7	11.7	109.7
1912	18.7	11.03	103.7
1913	20.1	9.38	69
1914	20.38	11.1	74.87
1915	15.79	14.13	95.97
1916	17.23	13.02	
1917	16.01	13.16	76.23
1918	12.48	13.14	74.07
1919	15.33		61.59
1920	20.35	13.13	82.8
1921	21.1	10.69	83.3
1922		11.5	98.6
1923	18.01	11.2	69.3
1923	17.23	10.52	50.3
1924	16.0 16.99	12.3 11.39	60 54.4

Notifications and Deaths from Tuberculosis

During the last thirteen years.

Year	Total Notifi- cations	Pulmon- ary	Non- Pulmon- ary	Total Deaths	Pulmon- ary	Non- Pulmon- ary
1913	55	43	12	26	21	5
1914	57	47	10	23	20	3
1915	69	57	12	33	28	5
1916	49	37	12	29	29	-
1917	58	_	-	31	31	-
1918	69	52	17	30	18	12
1919	59	41	18	24	20	4
1920	47	35	12	27	22	5
1921	39	30	9	29	26	3
1922	31	27	4	19	15	4
1923	31	28	3	19	15	4
1924	28	26	2	28	23	5
1925	38	30	8	16	11	5

SCARLET FEVER. 1925.

Week end	ing		Week endin	g	
January		_	July	4	1
January	10	_	3 3	11	3
	17			18	2
	24	2		25	4-10
	31	1-3	August	1	1
Februar		5	0	8	2
2 002 000	14	8		15	11
	21	8		22	3
	29	5—26		29	4-21
March	7	5—26 2 1	September	5	3
	14	1		12	3
	21	3		19	1
	28	6		26	3-10
April	4	4	October	3	4
	11	3		10	3
	18	6		17	3 5
	25	13		24	4
May	2	_		31	7-23
	9	_	November	7	
	16	2		14	2 4
	23	1		21	9
	30	1-4		28	10-25
June	6	3	December	5	5
	13	1		12	6 .
	20	3 2— 9		19	5
	27	2- 9		26	3—19
		_	1926		
		61	January	2	1-1
					170

WELLINGBOROUGH ISOLATION HOSPITAL.

REPORT FOR YEAR ENDING 31ST DECEMBER, 1925.

Number of Patients in Hospital on December 31st, 1924:-

		Scarlet Fever	Diphtheria	Enteric	Total
Urban		4	1	_	
Rural		3	-	-	8
Admitted during	the year	1925 :-	-		

Urban	 155	7	2	
Rural	 7	-	-	
Finedon	 1	-		172

Discharged during the year 1925 :-

Urban	 131	8	2	
Rural	 10	_	_	
Finedon	 1			152

Remaining in Hospital on December 31st, 1925 :--

Urban ... 28 — — 28

There were no deaths during the year.

Tracheotomy was performed on one diphtheria case.

Beds were occupied 7,001 days.

There was no infectious disease amongst the staff during the year.

M. O'NEILL,

MATRON.



