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183 Euston Road
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WEST SUFFOLK COUNTY COUNCIL.

REPORT OF THE MEDICAL OFFICER OF HEALTH

For the Year 1921.

A. H. BYGOTT, M.D., Lond., D.P.H.,

Barrister-at-law.

VITAL STATISTICS, &c.

Figures in brackets refer to corresponding figures for preceding years (as 1920-19-18-17).

RAINFALL.—The total rainfall for 1921, 11·98 (21·49in.-27·08-28·96). Number of wet days 112 (176-184-174).

POPULATION OF THE COUNTY.—1921 Census. 108,982, *i.e.*, Municipal Boroughs and Urban Districts 41,305; and Rural Districts 67,677; as compared with 1911 Census 116,905, *i.e.*, Municipal Boroughs and Urban Districts 43,855; and Rural Districts 73,050.

BIRTHS.—Number of registered births 2,254 (2,671-1,827-1,685-1,595), *viz.*, Urban Districts 812 (1,018-643-613-576), Rural Districts 1,442 (1,653-1,184-1,072-1,019). Birth Rate, 20·6 (24·2-16·5-15·5-14·5), *viz.*, Urban Districts 19·5 (24·0-15·2-15·3-14·3), Rural Districts 21·3 (24·3-17·3-15·5-14·6).

NOTIFICATION OF BIRTHS ACTS, 1907 AND 1915.—Number of notifications received 2,192 (1,530-1,884). Number of visits paid by Health Visitors and District Nurses 2,116 (2,609-1,385), number of revisits 9,845 (7,078-3,596).

Neglects to Notify.—Total number 82 (116-121), *viz.*, Sudbury 5 (4-4); Haverhill 2 (4-1); Newmarket 4 (8-4); Brandon 8 (12-12); Cosford 10 (7-19); Melford 11 (13-13); Mildenhall 4 (8-14); Moulton 2 (1-3); Thedwastre 8 (11-16); Thingoe 15 (14-14); Bury St. Edmund's 1 (18-10); Clare 10 (14-8); Glemsford Nil (1-Nil); Hadleigh 2 (1-3).

Still Births.—Total number 72 (74-61-66-44). Number attended by midwives 15 (16-22-24-14).

DEATHS.—Number of deaths 1,361 (1,267-1,457-1,670-1,486), *viz.*, Urban Districts 524 (461-546-649-546), Rural Districts 837 (806-911-1,021-940). Death Rate 12·4 (11·5-13·7-17·2-15·08), *viz.*, Urban Districts 12·5 (10·9-13·4-18·1-15·1), Rural Districts 12·3 (11·8-13·9-16·6-15·03).

INFANT MORTALITY.—Total number of deaths under 1 year 128 (153-146-123-129). Rate 56·7 (57·3-66·2-62·9-80·8), *viz.*, Urban Districts 66·5 (54·0-69·0-55·4-71·1), Rural Districts 51·2 (59·8-64·1-67·1-86·3).

INQUESTS.—There are four Coroners in the County of West Suffolk. The nomination to these appointments for the Sudbury and Newmarket districts is by the County Council; for the Borough of Bury St. Edmund's by the Borough Council; and the rest of the County, with a population of about 70,000, by the Lord of the Liberty of Bury St. Edmund's, under an ancient charter. The salaries and expenses of these appointments, except those for Bury St. Edmund's, are paid by the County Council, and are as follows:—

Sudbury.—Salary of Coroner £12 12s. per annum; number of inquests held 1921, 2. Costs £3 16s.

Newmarket.—Salary of Coroner £12 12s. per annum; number of inquests held 1921, 5. Costs £9 0s. 1d.

Rest of the County (excluding Borough of Bury St. Edmund's).—Salary £175 per annum; number of inquests held 1921, 34. Costs £75 1s. 6d.

Bury St. Edmund's (1920).—Coroners fees £11 7s. 8d.; number of inquests held 7. Costs £12 9s. 8d.

ZYMOTIC DISEASES.—Total number of deaths 30 (24-110-331-48), *viz.*, Diphtheria 3 (7-7-4-8), Small-pox nil (nil-2-nil), Erysipelas nil (2-1-3-2), Influenza 13 (9-82-303-29), Measles nil (4-4-9-2), Scarlet Fever 2 (1-2-1-2), Whooping Cough 12 (1-12-9-5).

CANCER.—Total number of deaths 170 (194-171-150-146); rate per thousand 1·5 (1·7-1·6-1·5-1·4).

TUBERCULOSIS.—Deaths: Total number 150 (110-134-145-140), viz., Pulmonary cases 118 (89-105-113-112), Non-Pulmonary 32 (21-29-32-28), Rate .99 (1.3-1.4-1.4). Total number of notified deaths, all forms, 136 (103-127-152-126).

Sanatorium: Number of beds 20, females 4, males 16 (two of the latter are transferable).

Admissions and Discharges.—Number of admissions during 1921 73 (61-78-73); number of discharges 72 (55-75-68); total number of days spent by patients in the Sanatorium 6,302 (5,478-5,983-4,859); average number of days for each patient 86 (89-76-71-92).

Dental Surgeon's Work.—Number of visits 13, patients treated 36, under general anaesthetic 11, local anaesthetic 21, sealings 2, extractions without anaesthesia 3. Five Patients attended at Surgeon's residence for fillings, etc.

Cost of Administration of Sanatorium for the year ended 31st March, 1922, £2,069 (£1,927-£1,959-£1,735), including salaries and wages £333 (£318-£256-£210); rates, taxes and insurances £24 (£25-£22-£17); provisions £879 (£893-£805-£769); fuel and light £66 (£128-£106-£80); drugs and appliances £141 (£119-£123-£99); laundry, hardware, linen, crockery and other establishment expenses £260 (£120-£318-£385); repairs, alterations, etc., £254 (£24-£29-£175); gardener's wages, £112.

Domiciliary Treatment.—Number of persons visited by the Tuberculosis Officers 150 (165-84-127-99); total number of visits paid 411 (382-161-233-163); total number of visits paid by Health Visitors to Tuberculosis patients 535 (341-371-691).

Cost of Administration of Tuberculosis Scheme.—Year ending March 31st, 1922:—£3,059 (£2,483-£2,168-£2,183). Amount received for Government Grant and for treatment of Ex-service men, £2,581. Other Receipts £38.

INFECTIOUS DISEASE.—Deaths from the following diseases were notified to the County Medical Department by the Local Registrars at a cost of 6d. for each notification:—Various forms of Tuberculosis 136 (103-127-152-126), Pneumonia and Influenza 33 (23-78-316-50), Diphtheria 2 (7-4-4-6), Cerebro-Spinal Meningitis 1 (2-1-2-3), Gastro-Enteritis 9 (5-7-4-7), Gastritis 1 (4-2-4-1), Meningitis 3 (4-3-2-5), Enteritis 1 (2-5-1), Premature Birth 22 (22-15-nil), Marasmus 2 (5-2-nil), Bronchitis 7 (6-7-4), Puerperal Septicæmia 1 (1-2-nil), Broncho-Pneumonia 8 (3-nil), Convulsions 10 (6-nil), Congenital Syphilis 2 (5-nil), Cardiac Failure 4 (1-nil), Pleurisy 1 (nil), Whooping-Cough 4 (nil), Scarlet Fever 2 (nil), Inanition 4 (nil), Encephalitis Lethargica 1 (nil), Malnutrition 2 (nil), Senile Dementia 2 (nil), Thrombosis 1 (nil), Accidental (burns) 1 (nil), other Diseases 18 (35-17-17-12), total 278 (243-282-510-217); total cost £6 19s. 0d. (£6 1s. 6d.-£7 1s. 0d.-£12 15s. 0d.-£5 8s. 6d.).

The following notifications of Notifiable Diseases were received from the Medical Officers of Health, Anthrax nil (1-nil), Diphtheria 86 (71-69-59-92), Dysentery 1 (3-4-nil), Encephalitis Lethargica 7 (1-3-1-0), Enteric Fever 6 (6-3-3-2), Erysipelas 29 (36-28-34-30), Malaria 1 (18-71-nil), Measles and Rubella nil (210-532-1,021-495), Ophthalmia Neonatorum 9 (16-11-8-2), Pneumonia 18 (31-56-nil), Cerebro-Spinal Fever nil (4-nil), Chickenpox nil (13-30-nil), Puerperal Fever 1 (5-4-2-3), Scarlet Fever 108 (95-126-112-138), Tuberculosis 188 (148)—Pulmonary 139 (111-150-165-143), other Tuberculosis 49 (37-61-74-65).

During 1921 1,542 (2,986-3,174-5,540-1,553) children were excluded from school by head teachers on account of infectious diseases, including Chickenpox 300 (443-302-337-285), Diphtheria 47 (58-45-32-31), Influenza 102 (124-466-3,713-57), Measles and Rubella 96 (1,502-952-655-488), Mumps 175 (163-172-46-344), Scarlet Fever 149 (126-136-56-57), Whooping Cough 575 (299-460-439-120).

Twenty-seven (56-82-194-27) schools were closed on account of infectious disease during 1921.

LABORATORY.—The following material was examined by the County Medical Officers, at the Laboratory, during the year 1921:—Nose and Throat Swabs 418 (298-272-189-306), positive 87 (91), sputa 199 (122-86-100-126), positive 53 (29), hairs for Ringworm 138 (148-153-125-56), positive 23 (28). The value of these examinations, as charged in other Laboratories, charging the moderate fee of 2s. 6d. per specimen, would have amounted to £94 7s. 6d. (£71 0s. 0d.-£51 7s. 6d.-£51 15s. 0d.-£61 0s. 0d.). It is an advantage for these examinations to be made in the County, as it enables the medical department to be fully aware of the type of disease that is being dealt with.

ISOLATION HOSPITALS.—The following provision for cases excluding Small-pox is made in the County in Isolation Hospitals:—Bury St. Edmund's, 42 beds; Sudbury, 10 beds; Haverhill, 28 (8 cots); Newmarket and Moulton (combined with Newmarket Rural), 28 beds; Clare (combined with Bumpstead), 4 beds. Thedwastre patients are sent to Stowmarket.

VENEREAL DISEASES.—During 1921, 64 West Suffolk new patients were treated:—26 at the Bury St. Edmund's Clinic, 8 suffering from Syphilis and 10 Gonorrhœa; 8 conditions other than Venereal; Cambridge Hospital 13; Syphilis 5, Gonorrhœa 5, conditions other than Venereal 3; Ipswich Hospital 5; Syphilis 3, Gonorrhœa 3.

Total number of attendances made during 1921—Bury St. Edmund's 179, Cambridge 106, Ipswich 81.

Cost of V.D. Scheme for 1921, Bury St. Edmund's, £125 5s. 6d. (£143 7s. 5d.); Cambridge, £107 15s. 2d. (£229 11s. 7d.); Ipswich, £35 (£48).

SANITARY ADMINISTRATION, &c.

District.	Total Inspections.	House Inspections.	Verbal Notice.	Preliminary Notice.	Statutory Notice.	Closing Orders.	Houses Closed.
Bury St. Edmund's	2719	176	—	—	2104	—	—
Glensford ...	216	—	48	15	—	—	—
Hadleigh ...	397	—	—	49	4	2	1
Newmarket ...	1223	—	33	65	78	—	—
Sudbury ...	213	—	—	28	22	—	—
Melford ...	2436	—	—	23	—	5	1
Mildenhall ...	372 + 364	—	—	—	—	—	—
	H. & T.P. Acts	—	—	132	—	—	—
Thedwastre ...	576	—	—	78	—	—	—
Thingoe ...	1273	—	—	118	60	1	1

HOUSING.—The following new houses under the Council Scheme are in the course of erection, or have been erected during the past eighteen months:—Bury St. Edmund's 50; Glensford 10; Hadleigh 34; Haverhill 10; Newmarket 20; Sudbury 10; Brandon 56; Clare 12; Cosford 20; Melford 124; Mildenhall nil; Moulton nil; Thedwastre 9; Thingoe 6. Total 361.

SALE OF FOOD AND DRUGS ACT, 1875 to 1890.—The Police are sampling officers, and the cost of the administration of these Acts in the County for the year 1921-22 was £55 (£69 9s. 0d.-£57 1s. 7d.-£39 1s. 4d.-£44 3s. 9d.), including:—Expenses of Superintendents of Police taking Samples, £5 (£7 14s. 0d.-£6 16s. 7d.-£3 17s. 10d.-£4 5s. 9d.); County Analyst Retaining Fee, £10 10s. (£10 10s.-£10 10s.); Ditto, Analysis of Samples, £39 10s. 0d. (£45 0s. 0d.-£39 15s. 0d.-£24 13s. 6d.-£29 8s. 0d.); Legal Expenses Nil (£6 5s. 0d.-Nil).

The Annual Return of the Chief Constable showed that during the year 1921 52 (47-56-60) samples had been taken—New Milk 31 (42-37-39), Butter 7, Baking Powder 4, Vinegar 2, Honey 6, Lard 1, Olive Oil 1, 49 (43-50-53) were found to be genuine, 2 (4-5-4) samples of New Milk, and 1 of Vinegar were reported to be adulterated, of which cases, in 3 Prosecutions, 1 sample of Milk was dismissed, and cautions administered in the cases of the remaining sample of New Milk and 1 sample of Vinegar.

Bury St. Edmund's is a separate Authority for the purpose of the administration of these Acts. Twenty-eight (22-24-13-26) samples were examined:—Milk 9 (14-17-13-13), Butter 2, Margarine 5; Cream 2, Bun Flour 1, Sponge Mixture 1, Vinegar 2, Pork Sausages 1, White Pepper 2, Cocoa 2, Sugar 2; none of which were found to be adulterated.

MIDWIVES ACT, 1902, AND MATERNITY AND CHILD WELFARE.—The cost of administration for year ended March 31st, 1922, £2,028 (£868), including:—Medical Staff £80, Health Visitors' Salaries £540 (£229), Travelling Expenses £118 (£116), Nursing Association Grants and Fees £607 (£165), other Expenses £407 (£278), Medical Fees £208, Orthopaedic Treatment £68.

Staff.—One County Superintendent of Nurses, 3 whole-time Health Visitors, and 33 District part-time Health Visitors.

Midwives.—Notifications of intention to practise received 48 (57-58-63); cases attended by Midwife as Midwife 835 (753-720-667), as Monthly Nurse 374 (219-242-203), Doctor sent for in respect of mother 145 (79-82-63), in respect of child 35 (20-21-15); deaths of mother 3 (4-4-7), of child 26 (8-7-11).

Total amount of Doctors' Fees £166 18s. 0d. (£188 0s. 0d.-£125 19s. 6d.), amount recovered by the end of the year £96 6s. 3d. (£76 16s. 0d.-£14 5s. 0d.). (The periods during which the fees were earned and recovered do not correspond).

Maternity and Child Welfare Centres.—Centres are held at Bures, Bury St. Edmund's, Hadleigh, Newmarket, Exning, Sudbury and Haverhill. An important feature of the work of this Department is the sale of Dried Milk 2,502 (1,325-494) lbs. were sold during 1921.

District Nursing Committees.—Grants amounting to £557 18s. 0d. were paid by the County Council to the following District Nursing Committees:—Hundon £22 16s. 0d., Cavendish £29 4s. 0d., Boxford £20 12s. 0d., Bideston £22 16s. 0d., Long Melford £22 16s. 0d., Thurston £23 12s. 0d., Newton £22 6s. 0d., Lavenham £23 8s. 0d., Pakenham £22 16s. 0d., Stowlangtoft £22 16s. 0d., Elmswell £23 16s. 0d., Waldingfield £22 16s. 0d., Wickhambrook £22 16s. 0d., Culford £27 4s. 0d., Walsham (starting) £20, Bury St. Edmund's (special) £25 0s. 0d., Brandon £22 16s. 0d., Barrow £23 8s. 0d., Felsham £24 0s. 0d., Hadleigh £8 0s. 0d., Horringer £24 0s. 0d., Icklingham £23 0s. 0d., Rattlesden £13 0s. 0d., Stradishall £21 0s. 0d., Walsham £24 0s. 0d.

Five Nursing Scholarships were awarded by the Education Committee to nominees of the Suffolk Nursing Association during 1921 at a cost of £210 9s. 0d.

BLIND PERSONS ACT, 1920.—The following are the numbers of Blind Persons in the County:—Under 5 1, 5-10 1, 10-15 3, 15-20 1, 20-30 8, 30-40 8, 40-50 16, 50-60 16, 60-70 9, 70-80 15, 80-90 5, 90-100 1. Total 84.

VOLUNTARY MEDICAL CHARITY.

HOSPITAL ACCOMMODATION.

West Suffolk General Hospital, Bury St. Edmund's.—Established 1825. Number of beds, 100. Patients treated 1921: In-patients 909 (819-810-1,079); Out-patients 2,100 (1,995-1,878-1,655); cost of administration £11,153 17s. 10d. (£10,180 6s. 9d.-£7,533 17s. 0d.-£7,597 7s. 4d.)

St. Leonard's Hospital, Sudbury.—Established 1869. Number of beds, 20. Number of In-patients treated in 1921, 226 (228-219); Out-patients, 83 (50-32); cost of administration £1,755 18s. 11½d. (£1,671 1s. 6d.—£1,439 16s. 10d.—£1,256 18s. 5d.).

Mildenhall Cottage Hospital.—Established 1868. Number of beds, 8. Cost of administration, £312 6s. 2d. (£298 3s. 8d.—£254 4s. 8d.—£213 8s. 7d.).

NATIONAL HEALTH INSURANCE ACT.—Approximate number of insured persons in the County, 42,600. Number of Medical Practitioners on the Panel, 60. Cost of (a) Treatment £21,622 0s. 0d., (b) Drugs and Appliances £4,414 0s. 0d., (c) mileage £3,266 0s. 0d.

MEDICAL TREATMENT OF DISABLED SOLDIERS AND SAILORS.

From figures supplied by the West Suffolk War Pensions Committee, the average number of cases dealt with in each of the four quarters in 1921 was 518, at a total cost of £57,803 19s. 7d., including medical fees, hospital charges, travelling expenses, and allowances to men and their families while under treatment.

OBSERVATIONS.

The arrangement of this report is in accordance with the recommendations of the Ministry of Health Circular, 1921, which differs from those of previous years.

POPULATION.—This in West Suffolk, shows a drop of 7,923 as compared with 1911 figures, details of which are given in the table. If this decrease was regular, it means, practically that the population of a very large village such as Bures, with about 792 people, has disappeared every year. Other counties in England and Wales showing marked decreases are Cornwall (320,559), a decrease of 7,359 against the 1911 figures, and Rutlandshire (18,368), with a decrease of 1,978. In East Suffolk there was a rise of 13,851, largely because of its connection with populous centres and seaside resorts, so that if the whole geographical county had been considered there would not have been a fall, but a rise of 5,928. This depopulation of rural areas must be regarded seriously, as in this way we are lessening elements of population, which can ill be spared. Agriculture must always remain the primary industry of all communities, as it produces food.

INFECTIOUS DISEASES.—There were no serious outbreaks of infectious disease in the County during the year.

ARRANGEMENTS FOR THE TREATMENT OF THE SICK.—*Non-infectious diseases.*—These in the centre of the County are dealt with at the West Suffolk General Hospital with 100 beds. The average number of occupied beds in this Institution for 1921 was 66.9. As many of the small towns and villages are on the edges of the County, other patients seek assistance from Addenbrooke's Hospital, Cambridge, with 190 beds; East Suffolk and Ipswich Hospital, with 300 beds; Norfolk and Norwich Hospital, with 300 beds; and Essex County Hospital, with 120 beds.

Infectious diseases.—No changes have taken place in the Isolation Hospitals during the year. The medical reports are silent as to the numbers of patients suffering from infectious disease treated in the various hospitals, and the cost, important information which we hope will appear next year. Considering the improvements in transport, one Isolation Hospital for the whole County, with a skeleton staff, would increase the efficiency and economy of this service.

TUBERCULOSIS.—The County Council provides a mixed institution of twenty beds for the treatment of cases of tuberculosis. As a rule there is no waiting list; it deals with early and apparently curable cases in a very satisfactory way. Some provision ought to be made for the treatment of advanced cases, both in the interests of humane treatment to the patients and to prevent infection. The County Council have at different times tried to secure this accommodation in or as near the locality as possible, but up to now they have only been able to make arrangements with Sanatoria at Huntingdon, and Papworth in Cambridgeshire for the treatment of female and male patients. These institutions are very inaccessible to West Suffolk, and friends often refuse to have the patients removed, as they are unable to visit them.

Some provision should be made for the treatment of children, so that they may continue their education. In a few cases children have been admitted to the County Sanatorium, but space as a rule does not permit this to be done, and accommodation in a special institution is most desirable.

CANCER.—Owing to the distribution of hospitals, it is practically impossible to ascertain how many residents in West Suffolk received surgical assistance for cancer. From the excellent report of the West Suffolk General Hospital for 1921, it will be seen that apparently 36 patients were treated in the Institution during the year, including two cases of cancer of the breast and two of cancer of the uterus. The only chance a person has of recovery from this disease is by its early recognition and operation, which may involve very elaborate technique.

VENEREAL DISEASE.—No alteration has been made in these arrangements during the year.

MENTAL DISEASES.—Persons of Unsound Mind.—From the Medical Superintendents' returns there appear to be 121 males and 164 females inmates at St. Audrey's Hospital, 17 males and 29 females in the Ipswich Borough Asylum, and 8 males and 16 females in institutions under the Mental Deficiency Act, all of whom are residents of West Suffolk. It would be a great advantage in administration if all persons suffering from mental disease were dealt with together, and the arbitrary dividing line between mental deficiency and insanity were dispensed with. Mental Defectives are dealt with by a Joint Committee for East and West Suffolk, assisted by a Voluntary Society, which publishes a balance sheet, in which the total receipts are given as £283 13s., of which £200 is a grant from the County Council and £75 from the Board of Control; and the total expenditure as £255 13s. 10d., of which £195 0s. 10d. is paid to the Organising Secretary for salary, subsistence, travelling expenses, etc. There may be advantages in employing a Voluntary Society when it is able to collect subscriptions, but in this case, apparently, only one subscription, £3 3s. (from a Board of Guardians), has been received by this Society. Considering the very able manner in which St. Audrey's Hospital is administered by the County Councils, involving as it did in 1921 an expenditure of £68,281 13s. 6d. for maintenance, building, and repairs, the necessity for this Society is not obvious.

MATERNITY AND CHILD WELFARE.—No alterations took place during the year, but the services are becoming increasingly popular. It was once somewhat difficult for Health Visitors to secure admission to people's houses; frequently now, it is difficult to get away from them. The Clinics in the County are all flourishing, except Sudbury, which has apparently suffered from a change in location. It is hoped it will soon improve.

Owing to the number of unemployed persons, more co-operation has been necessary between this Department and the various Boards of Guardians, so that supplies of milk have only been granted by the County Council in a few instances, where the necessity appeared to be temporary, and the persons were not accustomed to receive relief from the Guardians.

Every effort is made to maintain natural feeding. In some cases children are weighed before and after feeding; when it is found the quantity supplied by the mother is insufficient, the mother's supply is supplemented after each feed, usually by dried milk, and the gain to the infant is most apparent. Without this method, the mother often weans the baby, and tries first one food and then another, inflicting great damage to the child.

More Nursing Districts are required, and it is hoped that the whole County will soon be covered by good midwives, as the village nurse should be regarded as absolutely necessary. There is a growing demand for lying-in hospital accommodation, and institutional treatment for young children.

An Orthopaedic Scheme for dealing with the crippling defects of children under five years of age has been started. The cost of the Scheme (Maternity and Child Welfare) for 1921-22 was £68 4s. 3d. For details of the scheme, reference must be made to the Annual Report of the School Medical Officer for 1921. It is hoped that in future, all cases will be dealt with under this part of the scheme, and that the treatment will not be deferred until they reach school age.

BLIND PERSONS ACT, 1920.—Children under 5 are dealt with by the Maternity and Child Welfare Committee and between 5 and 15 by the Local Education Authority. Special attention should be given to persons between the ages of 16 and 50; of these there are 49 in the County, 20 of whom are being or have been educated so as to enable them to earn something, and the problem, at present unsolved, is to obtain a market for the goods produced by these persons. As an illustration: a blind person knitting 12 pairs of stockings per week, would necessitate selling 600 pairs a year, which it would be impossible to dispose of locally, but the difficulty might be met if Government Departments, Local Authorities, or large firms would use the work of blind persons, and so prevent the setting up of very expensive machinery for disposing of it, especially as it is by no means certain that the goods would be sold, even if the suggested depôts were provided.

WATER SUPPLY.—In spite of the dryness of the season, no serious complaint was made as to the shortage of water in any of the small towns, although the supply had to be restricted. Some trouble was caused in villages where the supply was from wells.

The most important event of the year was the promotion in Parliament of the **South-East Essex Water Bill**, which was opposed by the District Councils of Clare, Haverhill, Melford and Cosford. Its chief object was to obtain an adequate supply of water for Southend-on-Sea. The South Essex Water Company supplying a large population in Essex of London over the border took part in the scheme, owing to the lessening of the supplies from their wells and fearing that they would soon be inadequate to meet the demands of their large and increasing population. The supply, if it had been obtained, would have been required for an area of 300 square miles, and a present population of 400,000—increased by 100,000 during the summer holiday season.

The scheme provided for a reservoir, pumping stations and filters at Langham, just outside the County of West Suffolk, and was estimated to cost £2,004,000. It was anticipated that 13 million gallons per day could be taken from the Stour, leaving at least 5 million to flow down the river. The intake was above the mouth of the Bret. During dry weather, some of the Bret water might flow up to the intake in the Stour, so that any increased purity required for the Stour would also be required for the Bret. Provision was made for any Essex Authority through which pipe lines passed to take water to the extent of one and a half million gallons

per day, but no provision was made for any Suffolk Authority to receive any water from this source at all. Considerable discussion took place as to the length of time that the water should be stored before distribution, the Ministry of Health suggesting fourteen days, and the Water Company five. This was important, as the shorter the period of storage the greater must be the purity of the water taken from the river.

Various experts were examined, including Dr. Thresh, Mr. Lincoln Sutton and Mr. Hawkesley, the Engineer. The water schemes for Norwich and Yarmouth were quoted as precedents for the short storage of water. The C.M.O. visited Norwich and Yarmouth and made a survey of the sources of the water supplies of these two towns. The conditions on the Wensum were not comparable at all to those on the Stour, especially as there appeared to be no villages on the banks. In the case of the Bure, the water passed through a large broad which formed a natural reservoir where sedimentation could take place. The villages and inhabited houses were not so numerous in the course of the Bure as in the course of the Stour—the Bure is a much larger river.

Considerable discussion took place on Clause 38, in which the Water Companies wished to take powers to supersede County and District Councils in preventing the pollution of the river, and they claimed as a precedent, the powers which were given the Company promoting the Yarmouth Water Bill. These powers, the Committee would apparently have hesitated to confer. On perusal of the evidence before the Committee dealing with the Yarmouth Bill, it transpired that there was no County Council Public Health Authority at that time to interest itself in the pollution of the river. Now, the County Councils have expert assistance and are given a *locus standi* in dealing with all water undertakings in their areas.

Numerous analyses were put forward comparing the condition of the Stour with that of the Thames, but they were not taken for a sufficient length of time to enable proper comparisons to be made. The Bill was finally disposed of by the Committees, on the ground that the water was not necessary at that time for South Essex. The following points must be emphasised:—

- (a) That from the evidence given in this case, there is no doubt that the supplies from the wells for the South Essex Area will be insufficient to maintain a satisfactory permanent water supply for that area, as the yield from the wells is getting much less.
- (b) That the Stour is apparently the nearest river which would furnish a satisfactory supply, as there are disadvantages connected with Blackwater and the Chelmer.
- (c) That this shortage will be likely to be accentuated by dry seasons.
- (d) That as a river water supply from the Thames has been found quite satisfactory for London, there is no doubt that other populous areas will eventually obtain their supplies in a similar manner.

It is practically certain that at some time this scheme will be revived. If so, it should be borne in mind that the Metropolitan Water Board pay the Thames Conservancy £50 per million gallons taken from the river, for which the Conservancy takes measures to secure the purity of the water, and it would only be fair that some payment on similar lines should be made by Authorities taking water from this Suffolk river.

- (e) That at present, the river is polluted by sewage from places in the neighbourhood, which pollution is apparently difficult to remedy, and the money from this source could be used to prevent this pollution. At the same time, the Authorities responsible for the sanitation in these areas ought not to remain satisfied with the disposal of sewage in these villages, and that schemes should as soon as possible be thought out, having regard to economy, for preventing crude sewage entering the river. The ground on the banks of the Stour has a clay sub-soil. It is as a rule heavily cultivated and there must be pollution from manured land, sources of impurity which might easily be attributed to the drainage from villages in a way which might be entirely undeserved.

POLLUTION OF THE RIVER STOUR FROM EFFLUENT DISCHARGED FROM THE FLAX FACTORY AT GLEMSFORD.—An enquiry on this subject took place at the Town Hall, Sudbury, on February 2, 1921, to support the application of the Melford Rural District Council to take proceedings against the Company for polluting the Stour. This industry was set up in Glemsford during the War for dealing with flax grown in the area, an old factory being adapted for the purpose. Unfortunately, inadequate consideration was given to the disposal of the flax liquor, and as Glemsford has a clay sub-soil, it was not a satisfactory district to dispose of the liquor on land. Flax liquor in many respects resembles a strong sewage—difficult to break up. It should be disposed of either in a large sewerage works, in a large tidal river, or on suitable land, where it has some manural value. It is not satisfactory to dispose of it in a small river like the Stour. It was attempted to prove by the defendant's solicitors that no definite illness was caused by this discharge into the river. It was finally decided that the Flax Works should instal the Rossi process and to wait to see if any improvement took place. Some attempt was made, from evidence from Belgium, to prove that the pollution of the river from flax may be only slight. In those streams flax rets slowly in the water, on the other hand, where modern retting is done in tanks, a process which in an open river takes place only in the course of several days breaking down the flax fibre, it is completed in a few hours, and a very strong liquor is produced. Similar trouble might have arisen in Bury St. Edmund's, but fortunately the Corporation required these liquors to enter their sewers. In 1922, there has been less complaint, but this may be due to the fact that owing to the stagnation of trade, the activity of these Works is reduced. The liquor produced by the Rossi process may not differ materially from that produced in other ways.

HOUSING.—361 new houses have been erected in the County under housing schemes, the numbers varying considerably in different districts. Some of them are erected close to main roads, where they will be exposed to dust, and it is difficult to visualize some as units in a properly planned village. It would have been better to have secured the tenants before building the houses, which cost roughly about £1000 each.

Owing to the high rents asked, difficulty has been experienced in letting houses to persons with large families. The average number of persons per house in Bury St. Edmund's is 3·3. The unsolved state of the problem of finding accommodation for such officers as district nurses, school teachers, etc., in spite of the large sums of money which have been spent by the District Councils in erecting houses, is illustrated by the following case. There is a village in the south of the County, the inhabitants of which are anxious to employ a district nurse. One of the new cottages was let to an occupier without family, who during the summer months is able to let part of his house on good terms to casual visitors from large towns. Under these circumstances, it does not pay him to take in the district nurse. The only other house which is said to be available for the nurse is one, the property of the School Managers, which was formerly occupied by a school teacher. As a retired London policeman is now living in this house, and no other accommodation has been found for the nurse, the district is at present without one. Instances given of the types of occupiers of other houses, show that one is a retired London policeman, and another a bank clerk. One house was let by a District Council to a London resident in receipt of Poor Law relief, suffering from tuberculosis, who had to return to London.

The *Bury Free Press* of July 15, 1922, reported a letter from the Clerk of the Melford R.D.C. to the Ministry of Health, dated June 13, 1922, dealing with houses at Lawshall, containing the following extracts:—"It will be seen from this report that five parlour-type houses have been vacant from one to five months, and another becomes vacant on the 29th prox. Your attention is also drawn to the third paragraph of the report, with regard to agricultural labourers declining to occupy these houses because they cannot afford the rent. . . . Now that these wages have been very much decreased, the result is practically illustrated by the Agent's report referred to. Labourers cannot occupy them and they continue to live in houses, or rather hovels, which are condemned. The result is that the section of the community which most required to be benefited by improved accommodation is being slowly but surely deprived of that accommodation, which is vitally necessary for all social and moral improvement in their conditions. And, thus, Local Authorities who are desirous of improving the standard of living within their area again have their hands tied. Surely under such anomalous circumstances as these, Local Authorities have a right to look to the Ministry for guidance; but if the attitude reflected by the letter under reply be maintained, it appears that they must look in vain."

In a word, some of these houses, erected at enormous cost, are now unoccupied or are occupied by "good tenants"—middle-class people with small or no families—and the workman with children remains just as he was. Few houses being vacated by tenants of the new ones, as formerly some of them were not householders in the County. If rural depopulation continues as at present, it will settle the housing question.

Another aspect of the housing question is well shown from the following extract from the report of a district nurse: "I think I must bring to your notice the state of overcrowding in . . . To begin with, the houses, which belong to . . . of this village, are in a shocking condition, the roof in one cottage leaking, and the floors all being bad. An old man died there last week, and when they placed him in his coffin the floor gave way and the head of the bedstead went through. The house occupied by . . . is bad, and they are overcrowded, there being five adults and five children and another one coming; five of these are earning, and although there is a new cottage to let, they refuse to move into it."

As the result of the C.M.O.'s observations and reports from the Visiting Staff, more systematic inspection is necessary to keep existing houses in repair. Roofs, lath and plaster walls, troughing, and spouts if allowed to decay, soon ruin a dwelling. Internal decorations may often be left to the tenant. There is urgent need for better inspection, although it has been suggested that this is unnecessary, as the landlord cannot afford to undertake repairs. The real truth is that we cannot afford to continue this neglect, otherwise many houses capable of being occupied for some time will become totally unfit for habitation, and incapable of repair.

GENERAL.—The following figures on page 81 of the County Council's Agenda for March, 1922, showing the amount of rates required for certain purposes, are instructive:—Main Roads and Bridges, 24·30d.; Elementary Education, 24·0d.; Higher Education, 4·0d.; Police, 10·24d.; Asylum (Interest and Repayment of Loans, and Buildings), 2·31d.; Public Health, 58d.; Sanatoria and Dispensaries, 40d.; Maternity and Child Welfare, including Orthopaedic Treatment, 40d.; Blind Persons Act, 55d.; Mental Deficiency Act, 33d.; Diseases of Animals Act, 42d.

These figures should be closely studied by the pseudo-economist, who appears to think that the cutting down of the expenditure on Health Services would effect serious economies in the local rates. The population has been lessened during the last ten years apparently by the yearly loss of a very large village in the County. Considerable improvements have been effected by the expenditure of these small sums of money, as must be apparent to anyone who likes to study this question. The profession of a doctor is sometimes regarded as a noble one, because of the opportunities which he has in individual cases of relieving suffering and restoring working capacity. Public bodies and those who elect them should be reminded that by taking part in some necessary reforms affecting the welfare of large numbers of people, that they may do by one act of their own, possibly more in the public interest, than a busy doctor is able to accomplish in a life time. What is more necessary than anything at the moment, is to awaken in everyone a true and proper sense of responsibility.

