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Westmorland County Council.

ANNUAL REPORT

OF THE

County Medical Officer
of Health.

THE YEAR 1923.

THE UNIVERSITY OF CHICAGO

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Westmorland County Council.

ANNUAL REPORT

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Atkinson & Pollitt, Printers, Kendal.

CONTENTS.

County of Westmorland.

Public Health and Housing Committee of the County Council.

Chairman: MR. F. W. CREWDSON.
Vice-Chairman: MR. GORDON SOMERVELL.
MESSRS. LORD HENRY BENTINCK,
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P. W. RUDD,
H. A. T. SHEPHERD,
W. STALKER,
ED. THOMPSON,
W. H. WALLACE.

District Medical Officer of Health.

<i>Name.</i>			<i>Urban District.</i>
W. BARON COCKILL, M.D., D.P.H.		...	AMBLESIDE.
"	"	"	... APPLEBY.
"	"	"	... GRASMERE.
"	"	"	... KENDAL.
"	"	"	... KIRKBY LONSDALE.
"	"	"	... SHAP.
"	"	"	... WINDERMERE.
			<i>Rural Districts.</i>
"	"	"	... EAST
			WESTMORLAND.
"	"	"	... SOUTH
			WESTMORLAND.
"	"	"	... WEST WARE.

TO THE CHAIRMAN AND MEMBERS OF THE PUBLIC HEALTH AND
HOUSING COMMITTEE.

Gentlemen,

I have the honour to submit the Thirteenth Annual Report on the Health of the County of Westmorland during the year 1923.

Summary of Vital Statistics.

	1913.	1914.	1915.	1916.	1917.	1918.	1919.	1920	1921	1922	1923	1923	England and Wales. 1923	4
*Birth Rate	... 18.18...	17.63...	17.41...	15.23..	13.78.	13.5...	13.7...	21.6...	19.01 ...	18.3	17.6	19.7		
†Infantile Mortality Rate	... 107 ...	67 ...	74 ...	67 ...	68 ...	63 ...	79 ...	66 ...	73 ...	58 ...	60	69		
*Nett Death Rate	... 13.41...	11.97...	12.01...	14.34...	14.85...	17.9...	14.3...	13.9 ...	12.8 ...	13.1 ...	12.3	11.6		
*Phthisis Death Rate..	0.58...	0.44...	0.59...	0.58...	0.73...	1.04...	0.53...	0.74 ...	0.56 ...	0.59 ...	0.39	0.83		

†Per 1,000 births.

*Per 1,000 population.

ESTIMATED POPULATION FOR 1923.

The population for the Year 1923, as estimated by the Registrar-General, will be found in the following Table:—

DISTRICT.	Area in Acres: (Land and Inland Water).	POPULATION.		
		1921 Census.	Registrar General's estimate for 1923.	
URBAN.				
Ambleside ...	4,424	2,878	2,272	
Appleby	1,876	1,786	1,653	
Grasmere	7,332	1,173	878	
Kendal	2,700	14,149	14,230	
Kirkby Lonsdale	3,254	1,394	1,341	
Shap	2,082	1,005	1,004	
Windermere ...	9,907	6,495	5,242	
RURAL.				
East Westmorland	183,154	10,945	10,880	
South Westmorland	170,732	19,395	18,660	
West Ward ...	119,869	6,519	6,070	
Totals ...	505,330	65,739	62,230	

Birth Rate, 1923.

BIRTH RATE PER 1,000 POPULATION.

DISTRICT.	No. of Births 1923	Birth Rate, 1923.	Birth Rate, 1922.	Birth Rate, 1921.	Birth Rate, 1920	Birth Rate, 1919	Birth Rate, 1918	Birth Rate, 1917.	Birth Rate, 1916.	Birth Rate, 1915	Birth Rate, 1914.	Birth Rate, 1913
URBAN.												
Ambleside	26	11.04	18.8	12.1	19.2	11.91	10.91	7.6	11.1	10.7	11.3	14.8
Appleby	29	17.5	15.1	17.4	23.5	9.66	11.70	13.1	8.3	25.2	22.4	23.6
Grasmere	16	18.02	19.6	7.03	20.5	3.85	11.9	5.0	16.2	14.2	18.2	10.2
Kendal	248	17.4	18.5	22.1	22.9	12.29	12.19	11.6	14.9	18.3	20.9	20.7
Kirkby Lonsdale	24	18.1	14.7	14.6	16.7	13.07	8.37	15.5	14.4	15.25	15.3	15.3
Shap	26	26.0	28.1	30.2	19.4	18.85	16.6	19.8	21.5	16.84	22.8	23.8
Windermere	65	12.3	12.8	13.6	14.8	7.97	8.79	9.1	9.5	13.19	14.7	13.9
RURAL.												
East Westmorland	234	21.5	21.5	21.4	22.4	18.59	18.88	15.8	19.3	18.48	20.0	21.1
South Westmorland	320	17.1	16.9	17.5	21.8	14.63	12.71	14.8	15.4	18.03	15.2	15.3
West Ward	110	18.1	19.8	21.4	24.1	16.09	16.12	17.6	15.7	16.67	16.3	18.4
Westmorland	1,098	17.6	18.2	19.01	21.6	13.7	13.5	13.7	15.25	17.41	17.63	18.18
England and Wales	—	19.7	20.6	22.4	25.4	18.5	17.9	17.8	21.6	20.7	21.9	23.3

The births registered during recent years are as follows:—

Year.	...	1914.	1915.	1916.	1917.	1918.	1919.	1920.	1921.	1922.	1923.
No. of Births		1,121	1,058	966	832	829	829	1,304	1,180	1,129	1,098

Death Rate, 1923.

NETT DEATH RATE PER 1,000 POPULATION.

DISTRICT.	No. of Deaths 1923.	Death Rate, 1923.	Death Rate, 1922.	Death Rate, 1921.	Death Rate, 1920.	Death Rate, 1919.	Death Rate, 1918.	Death Rate, 1917.	Death Rate, 1916.	Death Rate, 1915.	Death Rate, 1914.	Death Rate, 1913.
URBAN.												
Ambleside ...	28	12.3	13.5	13.0	12.4	10.9	14.2	18.1	12.2	13.9	15.6	9.0
Appleby ...	25	15.1	6.6	10.8	15.7	16.4	30.8	20.7	14.5	10.5	9.2	11.5
Grasmere ...	10	11.4	9.2	4.6	16.7	14.7	21.4	8.4	17.6	11.6	11.4	7.9
Kendal ...	185	13.0	15.7	14.2	15.6	14.0	20.8	17.6	16.2	14.9	12.6	15.6
Kirkby Lonsdale	20	14.9	8.8	13.9	11.6	16.6	10.1	15.6	13.4	6.5	16.0	10.0
Shap ...	9	9.0	17.1	18.1	13.4	17.0	16.0	20.9	21.0	16.8	15.9	13.9
Windermere	52	10.0	14.5	10.9	11.1	11.7	14.9	11.3	12.7	10.5	11.2	14.5
RURAL.												
East Westmorland	145	13.3	12.5	14.4	12.7	16.5	18.7	13.0	15.4	15.2	12.4	14.9
South Westmorland	235	12.5	11.7	11.2	14.6	13.6	15.9	14.1	11.8	15.7	9.8	11.3
West Ward	62	10.2	12.4	13.1	13.4	14.3	18.4	14.2	13.7	13.4	14.2	14.7
Westmorland	771	12.3	13.1	12.7	13.9	14.3	17.9	14.8	14.3	13.9	11.9	13.4
England and Wales	—	11.6	12.9	12.1	12.4	13.8	16.1	14.4	14.0	15.1	13.3	13.1

In Appendix A will be found an analysis of the Causes of Deaths in the various Districts.

Infantile Mortality, 1923.

DEATHS OF INFANTS UNDER ONE YEAR PER 1,000 BIRTHS.

DISTRICT.	No. of Births in 1923.	No. of Deaths in 1923.	Death Rate in 1923.	Death Rate in 1922.	Death Rate in 1921.	Death Rate in 1920.	Death Rate in 1919.	Death Rate in 1918.	Death Rate in 1917.	Death Rate in 1916.	Death Rate in 1915.	Death Rate in 1914.	Death Rate in 1913.
URBAN.													
Ambleside ...	26	2	77.0	46	0	119	38	125	62	38	83	34	105
Appleby ..	29	0	0	0	0	102	62	50	181	66	23	179	48
Grasmere ...	16	0	0	59	0	0	0	0	0	0	90	0	0
Kendal ...	248	21	84.6	83	85	68	80	75	75	101	74	61	158
Kirkby Lonsdale	24	2	83.3	100	150	0	55	166	0	47	47	43	0
Shap ...	26	1	38.4	107	100	105	190	66	176	50	125	83	125
Windermere	65	2	30.7	45	98	75	93	40	81	37	98	78	13
RURAL.													
East Westmorland	234	13	55.5	30	57	71	145	52	91	72	83	93	101
South Westmorland	320	20	62.5	60	70	63	44	60	26	45	58	37	82
West Ward	110	5	45.4	58	77	41	31	68	88	87	105	85	159
Westmorland	1098	66	60.1	58	73	66	79	63	68	67	74	67	101
England and Wales		—	69.0	77	83	80	89	94	97	91	98	93	96

Infantile Mortality according to Age. 1923.

DISTRICT.	1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total under 1 year.
Amleside	1	—	—	—	1	—	—	1	—	2
Appleby	—	—	—	—	—	—	—	—	—	—
Grasmere	—	—	—	—	—	—	—	—	—	—
Kendal	6	2	—	3	11	1	4	2	3	21
Kirkby Lonsdale	2	—	—	—	2	—	—	—	—	2
Sha	1	—	—	—	1	—	—	—	—	1
Windermere	—	—	—	—	—	1	—	—	1	2
E. Westmorland	4	1	—	—	5	4	1	3	—	13
S. Westmorland	10	2	—	1	13	3	2	1	1	20
West Ward	3	—	—	—	3	—	—	1	1	5
Total	27	5	—	4	36	9	7	8	6	66

From the Registrar-General's Statistical Review for the Year 1923.

LOCALITY.	MORTALITY PER MILLION CIVILIAN POPULATION AT ALL AGES.																MORTALITY PER 1,000 BIRTHS.							
	Small-pox.		Enteric Fever.		Tuberculosis All Forms.		Tuberculosis of Respiratory System.		Measles.		Whooping Cough.		Scarlet Fever.		Diphtheria.		Total Deaths under One Year.		Diarrhoea and Enteritis (under 2 years).		Childbirth (Mothers).		Puerperal Sepsis.	
	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.	1922.	1923.
England and Wales ...	1	0	12	12	1121	1062	889	836	149	138	167	108	36	26	107	71	77	69	6.58	8.12	2.43	2.52	1.38	1.30
County of Cumberland	—	—	9	5	947	965	728	660	92	228	622	59	9	41	96	155	100	74	8.43	9.90	4.11	4.95	1.03	0.65
„ „ Lancashire	1	—	22	21	991	938	771	705	200	74	123	117	50	33	83	54	86	80	7.68	7.11	3.03	3.06	1.75	1.37
„ „ Westmorland	—	—	32	—	726	611	597	386	—	64	97	96	—	16	16	32	58	60	3.54	2.73	7.09	2.73	—	—
Administrative Counties (including London)	1	0	13	13	1030	976	816	764	123	116	159	96	34	22	116	69	71	64	5.63	6.74	2.51	2.47	1.25	1.24

The disturbing figure in this table is to be found under Westmorland in the fourth column counting from the right where we have for 1922 a death rate of mothers nearly three times in excess of the average for England and Wales. Mercifully there is a marked improvement for 1923.

As regards the mortality rate from Tuberculosis, all forms, and for Tuberculosis of the Respiratory System, Westmorland has the lowest rate in England and Wales with the single exception of Rutlandshire.

As regards the Infant Mortality rate we stand 30th in order of merit out of the 62 Counties, and for Diarrhoea and Enteritis 6 Counties have a lower rate.

Statistical Review for the Year 1923.

MORTALITY AT ALL AGES									
LOCALITY.	1921	1922	1923	1924	1925	1926	1927	1928	1929
England and Wales	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1
County of Cumberland	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1
" Lancashire	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1
" Westmorland	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1
Administrative Counties (including London)	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1	10.1

The following figures are taken from the Registrar-General's Statistical Review for the Year 1923. The figures are given in the form of rates per 1,000 of the population. The figures for the County of Cumberland are taken from the Registrar-General's Statistical Review for the Year 1923. The figures for Lancashire and Westmorland are taken from the Registrar-General's Statistical Review for the Year 1923. The figures for the Administrative Counties (including London) are taken from the Registrar-General's Statistical Review for the Year 1923.

ANALYSIS OF CAUSES OF DEATHS OF INFANTS UNDER ONE YEAR IN 1923.

DISTRICT.	Measles	Whooping Cough	Diarrhoea	Gastritis.	Convulsions	Bronchitis	Pneumonia	Injury at Birth.	Atelectasis.	Prematurity	Atrophy, Debility and Marasmus	Congenital Malformation	Other Causes	TOTAL	Deaths in order of Fatality.
URBAN.															
Ambleside	—	1	—	—	—	—	—	—	—	1	—	—	—	2	Marasmus .. 17
Appleby ...	—	—	—	—	—	—	—	—	—	—	—	—	—	0	Prematurity .. 15
Grasmere	—	—	—	—	—	—	—	—	—	—	—	—	—	0	Congenital Malformation 9
Kendal ...	—	—	—	—	2	3	2	—	—	4	5	2	3	21	Pneumonia .. 7
Kirkby Lonsdale	—	—	—	—	—	—	—	—	—	2	—	—	1	2	Bronchitis .. 6
Shap ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	Other Causes .. 5
Windermere	—	—	—	—	—	1	1	—	—	—	—	—	—	2	Convulsions .. 3
RURAL.															
E. Westmorland	—	—	—	—	—	1	2	—	—	4	3	2	1	13	Whooping Cough .. 2
S. Westmorland	—	1	—	1	1	1	1	—	—	2	9	4	—	20	Diarrhoea .. } 1
West Ward	—	—	1	—	—	—	1	—	—	2	—	1	—	5	Gastritis .. }
Total :	—	2	1	1	3	6	7	—	—	15	17	9	5	66	

MATERNITY AND CHILD WELFARE.

In 1923 the nurses employed by 27 Nursing Associations acted as Infant Welfare Visitors, as School Nurses, and as Tuberculosis After-care Visitors. In this work they are supervised by Dr. Dorothy Potts, the Assistant County Medical Officer of Health, who also visits mothers and infants in the remoter districts where no district nurse is available.

The main activity is home visiting. There are few communities large enough to call for a Welfare Centre. There are, however, centres held once a month at Windermere and at Bowness-on-Windermere, at both of which Dr. Potts attends.

The following is a brief statement of the ground covered:—

	By Nurses.	By Dr. Potts.	Total.
Expectant Mothers Visited ...	349	6	355
Total Visits ...	1,292	10	1,302
Infants Visited ...	461	154	615
Total Visits ...	5,286	501	5,787
Children 1-5 years, total			
Visits ...	2,966	294	3,260

In addition to the above, under the Borough of Kendal Maternity and Child Welfare Scheme, a Maternity and Child Welfare Centre is held one afternoon per week. It is conducted by the Medical Officer of Health for Kendal. The following summary indicates the valuable work accomplished:—

KENDAL CENTRE.

Number of times the Centre has been open	...	52
„ „ Babies under 1 year attending	...	63
„ „ Children between 1-5 years attending	...	74
		137
„ „ Consultations for Children	...	836
„ „ „ „ Mothers	...	147
		983
Average Number of Children attending per Session	...	16
„ „ Mothers „ „	...	2.8
		18.8

The Kendal Health Visitor made the following home visits:—

Expectant Mothers Visited	...	...	53
Total Visits	...	...	94
Infants Visited	...	...	230
Total Visits	...	...	1,518
Children 1-5 years, total Visits	...	...	486

Thus, in the Administrative County in 1923, 408 expectant mothers and 845 infants were visited.

With regard to children of school age, the nurses paid 3,440 visits to the homes and 3,169 visits to the schools in connection with children found defective at school medical inspections.

1,704 children had dental treatment, 6,737 had dental inspection, and 438 had their eyes tested by refraction.

41 Sessions were attended by nurses for dental work with the School Dental Officer.

As Tuberculous After-care Visitors the nurses paid 2,234 home visits.

Twenty-nine children were in residence at the Ethel Hedley Orthopædic Hospital, Calgarth Park, in 1923. Monthly After-care Clinics have been held at Calgarth, Kendal, and Kirkby Lonsdale, at which the nurses have rendered much help. In addition several Westmorland cripple children have been periodically seen at their homes or at the After-care Clinic at Penrith. This After-care Scheme, organised from Calgarth as a base, is doing excellent work.

Maternal Mortality.

As will be seen in the inserted Table on page 11, this rate (the number of mothers dying from diseases of pregnancy and accidents of child-birth per 1,000 births) has fallen in 1923 to about the average for the country. But for many years our rate has been the highest in England. This very distressing fact has been receiving the anxious consideration of your Committee. An endeavour has been made to reduce this mortality (1) by encouraging by means of annual grants from the County Council existing Nursing Associations to employ trained maternity nurses and by helping the creation of new Associations; (2) by the supervision of the midwives by Dr. Dorothy Potts, the Assistant County Medical Officer of Health; (3) by extending the ante-natal visiting, and (4) by the provision of a maternity block at the County Hospital, Kendal.

Dr. Janet Campbell, Senior Medical Officer for Maternity and Child Welfare, Ministry of Health, visited this County to investigate our maternal mortality, and at her request particulars were furnished by me for a report she was preparing. This report, entitled "Maternal Mortality," has now been published by the Ministry of Health and calls for most earnest study by all Health Authorities.

The report surveys very thoroughly the problem as it affects various localities in England and Wales, special attention being given to areas with a high maternal mortality rate. It concludes with the following recommendations:—

“The following is a brief summary of the suggestions submitted for consideration with a view to securing a reduction in puerperal mortality and morbidity through a complete and effective midwifery and maternity service:—

(1) An improvement in the quality of the professional attendance, adequate education of the medical student in the principles and practice of obstetrics and gynaecology as recommended by the General Medical Council, and the better training of midwives by means of a lengthened period of teaching prior to certification, and of periodical post-certificate courses of instruction.

The employment of the trained midwife for maternity nursing, with the consequent disappearance of ‘nursing’ by the unqualified handy-woman, should be promoted; and also closer co-operation between the medical practitioner and the midwife, and between the professional attendants and the Local Authority.

(2) Action through the Public Health Department of the Local Authority.

Preventive midwifery under the Local Authority should comprise the *ante-natal and post-natal care* of all pregnant women, by the professional attendant as far as possible, but also through the establishment of *maternity centres*; and the provision, directly or by means of a subsidy, of *maternity beds* (including observation and isolation beds) for the treatment of complicated cases of midwifery and for the accommodation of women whose circumstances do not enable them to be confined safely and suitably at home.

For the benefit of women confined in their homes there should be a *sufficient service of competent midwives*, the adequacy of which service may be secured by paying, when necessary, the whole or part of the salaries of midwives in sparsely populated districts, or by assisting the formation of district nursing associations; the attendance of a midwife, the assistance of a trained nurse, and the advice and treatment of a medical practitioner should be available for all necessitous patients requiring such services.

There should be *investigation* by the Medical Officer of Health of all maternal deaths due to childbirth and of all cases of puerperal infection, whether fatal or not. In view of the unsatisfactory results of the present notification of puerperal fever, it should be considered whether amendments are desirable in the existing legal provisions for notification in order to increase its practical utility, a matter on which it would be useful to consult a competent medical body such as the Obstetrical Section of the Royal Society of Medicine.

(3) Social and Educational Measures.

Among these may be included:—

The provision of suitable nourishment for necessitous expectant and nursing mothers.

Consideration whether an extension or modification of sickness benefit during pregnancy under the National Health Insurance Act is desirable.

Widespread educational propaganda through official and voluntary agencies, with the purpose of instructing the women themselves, and of forming an enlightened public opinion as to the importance of proper attention to health at the time of pregnancy, childbirth, and lactation.

Many of these suggestions are already in operation, though often to a partial and imperfect degree. It is recognised that the establishment of a comprehensive and efficient Maternity Service designed steadily to improve the standard of midwifery, and thus to eliminate the avoidable risks of childbearing, is largely a matter of administration and finance."

The situation in this County is such that by every means in our power we must save the lives of the mothers. If we cannot all at once carry out these recommendations we must re-double our efforts along lines which are immediately practicable. To this end ante-natal supervision must be extended and made more real. In this connection Dr. Campbell at her recent visit made some practical suggestions which have been adopted. The provision of maternity beds, thanks to the Governors of the County Hospital, Kendal, has been secured, and several mothers have been successfully confined therein. The hearty thanks of your Committee are due not only to the Governors of this Hospital, but to the Medical Staff as well, who have encouraged and supported the provision of the maternity block.

MIDWIVES ACTS, 1902 & 1918.

Dr. Dorothy Potts, who acts as Inspector of Midwives, kindly furnishes the following report:—

Twenty-two certified Midwives notified their intention to practise as Midwives during 1923. Of these 22, one notified her intention to practise in September, and 3 others were only practising for a very short period, that is about one or two months in the year.

Five bona-fide Midwives notified their intention to practise as Midwives during 1923. Only 2 of these actually practised, 2 notifying in case of emergency only, and one being unfit to work through illness.

Thirty-eight routine visits were paid to the Midwives, and one special visit by the County Medical Officer.

INFECTIOUS DISEASE.

As will be seen in the following Table, except for Scarlet Fever and Pneumonia the year under review has had a light incidence of infectious disease as compared with the average of the last 10 years.

INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1923.

DISEASE.			Total Cases Notified.	Average Notified during Previous 10 years.	Cases admitted to hospital.	Total Deaths.
Small-pox	...	...	—	—	—	—
Diphtheria	...	...	22	62.3	18	2
Scarlet Fever	...	...	133	118.4	125	1
Enteric Fever (including Paratyphoid)	...	...	2	10.1	1	—
Puerperal Fever...	...	...	1	1.9	—	—
Pneumonia	...	...	113	60	4	32
Pulmonary Tuberculosis			76	88.7	56	24
Encephalitis Lethargica			3	—	—	1
Erysipelas	...	...	9	—	—	—
Cerebro Spinal Meningitis			1	—	—	1
Malaria	...	...	1	—	—	—
Poliomyelitis	...	...	1	—	—	—

An indication of the incidence of some of these diseases in this County as compared with the Administrative Counties as a whole will be gathered from the sub-joined Table. Save for Scarlet Fever, this County emerges very favourably in the comparison.

CERTAIN INFECTIOUS DISEASES. CASES NOTIFIED AND RATES PER 1,000 POPULATION, 1923.

AREA.	Scarlet Fever.		Diphtheria.		Enteric Fever.		Puerperal Fever.		Erysipelas.	
	Cases.	Rate.	Cases.	Rate.	Cases.	Rate.	Cases.	Rate.	Cases.	Rate.
England and Wales (Administrative Counties excluding London) ...	41643	2.00	16112	0.77	1990	0.10	808	0.04	5477	0.26
Westmorland ...	133	2.12	22	0.35	1	0.02	1	0.02	10	0.16

TUBERCULOSIS.

In 1923 there were 99 notifications—77 of pulmonary, 22 of other forms of Tuberculosis. The figures for previous years are as follows:—

NOTIFICATIONS OF TUBERCULOSIS.

	1923.	1922.	1921.	1920.	1919.	1918.	1917.	1916.	1915.	1914.
Pulmonary	77	67	113	72	105	88	90	68	78	103
Other Forms of Tuberculosis	22	19	12	19	19	21	17	12	10	9

SANATORIUM BENEFIT.*1. Residential Treatment.*

In 1923 there were 65 admissions to the Westmorland Sanatorium, Meathop. Of these, 29 were males and 36 were females. Of the males 6 were ex-servicemen, for whose maintenance the Ministry of Pensions was responsible. Of the 65 patients 23 were children under 16 years.

The 65 patients admitted came from the following districts:—

Kendal	...	...	...	...	19
South Westmorland	...	...	...	...	22
West Ward	...	...	...	...	4
East Westmorland	...	...	...	...	9
Windermere	...	...	...	...	4
Kirkby Lonsdale	...	...	...	...	1
Appleby	...	...	...	...	1
Shap	...	...	...	...	2
Grasmere	...	...	...	...	1
Ambleside	...	...	...	...	2
					<hr/> 65 <hr/>

During 1923, 5 patients died in the Sanatorium.

Sixty-one patients were discharged during the year 1923. Their condition on discharge was as follows:—

Disease arrested or quiescent	...	...	37
Disease active	...	...	18
Improved	...	...	49
Not Improved	...	...	12
Fit for work on discharge	...	...	21
Not fit for work on discharge	...	...	23
Fit for school on discharge (children)	...	...	15
Not fit for school on discharge (children)	...	...	2

2. *Dispensary.*

The main Dispensary at Kendal is in use one forenoon per week. Here in 1923 the County Tuberculosis Officer examined 112 new cases, re-examined 122 old cases, and made in all 586 examinations.

3. *Domiciliary.*

Valuable work is done by the Tuberculosis Officer in domiciliary visiting and in bedside consultations with the patients' medical attendant. In this connection he made 102 visits in 1923.

4. *After-care Visiting.*

This is undertaken by the Dispensary nurse and by the District nurses acting as part-time health visitors.

In 1923, 2,234 after-care visits were made.

In addition, there is a Voluntary After-care Committee for Kendal, which is organised by the Kendal branch of the C.O.S.

Miss Martindale, the Secretary, kindly furnishes the following report:—

AFTER-CARE REPORT FOR 1923.

"The work of After-care continues to be done unostentatiously by the Visitors, who take a real interest in their patients, and are able to cheer and help them by their friendly visits. During the year 464 reports were sent to the Superintendent, and between 700 and 800 visits paid. 115 patients were under our care during the year.

There was therefore a slight increase in the number of patients on the previous year.

Special nourishment and other help was given or organised for such returned patients as required it, and several were sent to Convalescent Homes, under medical advice, to save them from a relapse.

In addition, 8 persons were assisted to obtain the necessary outfit for admission to the Sanatorium."

**REPORT BY TUBERCULOSIS OFFICER,
C. FERGUSON WALKER, B.A., M.D., B.S., D.P.H.**

WESTMORLAND TUBERCULOSIS SCHEME.

The Medical Staff of the Westmorland Sanatorium, Meathop, Grange-over-Sands, carries out the clinical work of the Westmorland County Tuberculosis Scheme, the Medical Superintendent being the Chief Tuberculosis Officer, and his assistant the Assistant Tuberculosis Officer. The County Medical Officer of Health is the Administrative Officer.

A feature of the work is the consultative examination of patients referred by the medical men throughout the county to the Tuberculosis Officer. They are examined either at their homes or at the consulting room of the medical attendant, or at the weekly dispensary clinic in Kendal where they may be kept under observation and X-rayed if desirable. Specimens of sputum from patients within the county are examined at the Sanatorium laboratory and reported on free of charge; other examinations carried out at the Kendal Health Office are reported to the Tuberculosis Officer, who in every case writes a letter to the medical attendant offering to examine the patient in consultation with him, with a view to Sanatorium treatment or otherwise.

Altogether 77 county specimens were examined at Meathop under this arrangement during 1923, of which 16 proved to be positive and 61 negative for T.B. Of the patients whose sputum was so examined, 10 were subsequently recommended for, and persuaded to accept, Sanatorium treatment.

The total number of Westmorland patients recommended for Sanatorium treatment during 1923 was 69, of whom 67 were subsequently admitted to Meathop, 14 being ex-service men. Three other ex-soldiers were undergoing concurrent training and treatment, two at Englethwaite Training Colony in Cumberland and one at the Middleton-in-Wharfedale Sanatorium Training Section in Yorkshire.

The following are the statistics of the results of Sanatorium treatment of Westmorland patients:—

Discharged during 1923, 62		Died, 6	
Stage of disease:			
Class 1 (observation cases)	8
Class 2 (early cases)	28
Class 3 (intermediate cases)	14
Class 4 (advanced cases)	8
Non-pulmonary	4

Tubercle Bacilli were found in 16 cases.

Condition on discharge:—

Arrested or quiescent on discharge, 43; not quiescent, 14; fit for work on discharge, 22; fit for school on discharge (children), 15.

The following are the figures for the Kendal Dispensary work in 1923:—

New cases examined	...	...	112
Total patients examined	...	...	234
Total examinations made	...	...	586
Total Nurse's Visits	...	...	1417
Domiciliary visits by Tuberculosis Officer (all Westmorland)	...	...	102

AFTER-CARE.

Patients discharged from Meathop are regularly visited by the district nurses, who send quarterly reports to the Tuberculosis Officer. The latter consults from time to time with the patients' medical attendant, and if desirable, visits the patient to advise as to home treatment or further Sanatorium treatment.

The 11 Shelters provided for home treatment are doing good work, the majority are occupied by ex-service patients. They are located as follows: Kendal (2), Shap (2), Endmoor, Grasmere, Great Asby, Winton, Bampton, Windermere, Storth (1 each).

Thanks are due to the medical men within the County, who by their cordial co-operation with the Tuberculosis Officer, and their readiness to avail themselves of his services, have largely contributed to the success of the County Tuberculosis Scheme.

HOUSING.

In the following Table will be found a brief statement of the position obtaining in each of the Districts at the end of 1923. The information is summarised from the Annual Reports of the Medical Officer of Health of the Combined Districts.

Housing, 1923.

DISTRICT.	Total Dwelling Houses.	Total Working-class Houses	New Working-class Houses erected.	Estimated Shortage of Houses.	REMARKS.
URBAN.					
Ambleside ...	609	300	4	very slight	No Scheme.
Appleby ...	454	324	0	10	Scheme in abeyance.
Grasmere ...	192	116	4	Nil	No Scheme by Council. Private enterprise is erecting houses required.
Kendal ...	3483	2394	24	112*	The Local Authority has Schemes submitted for building 44 new houses, 8 of which are in course of erection. Private enterprise is now erecting 22 houses, whilst 8 additional ones are in contemplation.
Kirkby Lonsdale	395	174	0	25	No building scheme.
Shap ...	226	220	0	20	Building Scheme formulated but in abeyance.
Windermere ...	1207	742	3	70	8 houses are now in course of erection by the Council.
RURAL.					
East Westmorland	2685	1321	2	60	Building Scheme formulated but in abeyance.
South Westmorland	4323	2575	5	26	No building Scheme.
West Ward ...	1594	750	0	Nil†	No Scheme in contemplation.

*And in addition 200 needed to replace existing houses.

† " " " " " " " " " " " "

PUBLIC HEALTH (VENEREAL DISEASES) REGULATIONS, 1916.

Westmorland patients have been treated at the Clinics at Barrow-in-Furness, Carlisle, and Manchester.

During 1923, 5 patients were treated at the Barrow-in-Furness Clinic. At the Carlisle Clinic one patient was treated. One patient was treated at the Preston Clinic, and one at South Shields.

In necessitous cases the railway fare was paid by the County Council in terms of the County Scheme.

Outfits for the taking and dispatch of specimens are supplied free of cost to doctors. These specimens are examined and reported on at the Department of Pathology, Manchester University.

During 1923, 32 blood specimens were examined at the above Department for Wasserman reaction, of which 12 were found positive and 20 negative. In addition, 2 specimens for gonococcus were examined at the Westmorland Combined Districts Laboratory in Kendal.

SALE OF FOOD AND DRUGS ACTS.

COUNTY OF WESTMORLAND.

I am indebted to the County Chief Constable for the following summary showing number of Samples, etc., purchased and submitted for analysis during the year 1923:—

Description of Sample	No of Samples Submitted for Analysis	No. Certified. Genuine.	Number Adulterated.	" Appeals to Cow."	Persons Summoned & Result.
APPLEBY DIVISION :					
New Milk ...	19	18	1	2	1 (Case dismissed).
Arrowroot ...	1	1			
Baking Powder ...	1	1			
Cocoa ...	4	4			
Coffee ...	1	1			
Condensed Milk ...	3	3			
Cream Tartar ...	1	1			
Custard Powder ...	1	1			
Ground Almonds ...	1	1			
Ground Ginger ...	1	1			
Sponge Cakes.	2	2			
Total for Division ...	35	34	1	2	1
KENDAL DIVISION :					
New Milk ...	21	21			
Cocoa ...	1	1			
Coffee ...	1	1			
Condensed Milk ...	1	1			
Cinnamon ...	2	2			
Dessicated Cocoanut	1	1			
Ground Almonds ...	2	2			
Ground Rice ...	1	1			
Preserved Cream ...	5	5			
Sponge Cakes ...	4	4			
White Bread ...	1	1			
Total for Division ...	40	40			
Total for County ...	75	74	1	2	1

LABORATORY REPORT.

The Medical Officer of Health for the Westmorland Combined Districts kindly supplies the following report on the bacteriological and analytical work carried out by him in his Laboratory, which is maintained by the Combined Districts. As will be seen from the Table much valuable work has been done to the great convenience of the general practitioners, for results can reach them with as little delay as possible.

Blood specimens for the Wassermann test are dealt with at the Pathological Department, University of Manchester, as part of the County Scheme under the Public Health (Venereal Diseases) Regulations, 1916.

In addition to the 63 specimens of sputum examined at the above Laboratory, 77 specimens were examined at the Laboratory of the Westmorland Sanatorium, Meathop. (See p. 21).

INSTRUCTION ON HEALTH TOPICS.

This work has been continued and extended during 1923. Health lectures have been given all over the County at meetings of the Women's Institutes. I gladly take this chance to thank the County Federation of Women's Institutes for their kind invitation to take part in their meetings.

The young people, too, have been kept in mind. Every Medical Inspection is rounded off with a homely talk on the art of healthy living.

I have the honour to be,

Your obedient Servant,

W. E. HENDERSON,

County Medical Officer of Health.

APPENDIX A.
DISTRICT DEATHS CLASSIFIED ACCORDING TO DISEASES. (REGISTRAR GENERAL'S FIGURES.)—THE YEAR 1923.

NAME OF DISTRICT	Enteric Fever.	Smallpox	Measles.	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Encephalitis Lethargica	Meningococcal Meningitis	Tuberculosis of Respiratory System	Other Tuberculous Diseases	Cancer, malignant disease	Rheumatic Fever	Diabetes	Cerebral Hemorrhage, etc.	Heart Disease	Arterio-sclerosis	Bronchitis.	Pneumonia (all forms)	Other Respiratory Diseases.	Ulcer of Stomach or Duodenum.	Diarrhoea, &c., (under 2)	Appendicitis and Typhlitis	Cirrhosis of Liver.	Acute and Chronic Nephritis.	Puerperal Sepsis.	Other Accidents and Diseases of Pregnancy and Parturition.	Congenital Debility and Malformation, Premature Birth.	Suicide	Other Deaths from Violence.	Other defined diseases.	Causes ill-defined or unknown	TOTALS																	
URBAN																																																		
Ambleside	...	-	-	-	-	1	-	-	1	1	1	2	-	-	2	6	-	1	4	-	-	-	-	1	-	-	-	-	1	-	-	6	1	28																
Appleby	...	-	-	-	-	-	3	-	-	-	-	4	-	1	3	9	2	-	1	1	-	-	-	-	-	-	-	-	-	-	1	-	25																	
Grasmere	...	-	-	-	-	-	3	-	-	-	-	2	-	-	-	2	-	-	1	-	-	-	1	-	-	-	-	-	-	-	1	-	10																	
Kendal	...	-	-	2	1	1	-	-	1	6	4	23	-	4	23	31	3	11	8	2	1	-	3	-	6	-	-	-	11	1	5	37	1	185																
Kirkby Lonsdale		-	-	-	-	-	1	-	-	-	3	2	-	-	2	1	-	-	-	-	1	-	-	-	-	-	-	2	-	8	-	-	20																	
Shap	...	-	-	-	-	-	-	-	-	1	-	2	-	-	1	-	1	-	-	-	-	-	-	-	1	-	-	1	-	2	-	-	9																	
Windermere	...	-	-	-	-	-	1	-	-	-	-	7	-	-	4	10	1	2	1	-	4	-	1	1	1	-	-	1	1	2	15	-	52																	
RURAL.																																																		
East Westmorland		-	-	1	-	1	-	4	-	4	3	18	1	1	14	29	3	11	7	3	-	-	1	-	1	-	-	-	8	2	4	27	2	145																
South Westmorland		-	-	-	-	2	2	1	-	10	2	31	-	2	15	39	12	7	12	3	1	2	5	1	6	-	3	10	5	7	54	3	235																	
West Ward	..	-	-	1	-	1	-	3	-	2	1	10	-	1	6	14	1	1	1	2	-	1	-	-	1	-	-	4	1	1	10	-	62																	
TOTALS		-	-	4	1	6	2	16	1	1	24	14	101	1	9	70	141	23	33	35	11	7	3	11	3	16	-	3	38	10	21	159	7	771																

DISTRICT DEATHS CLASSIFIED ACCORDING TO DISTRICT

DISTRICT	NAME	Infants	Children	Adults	Total	Male	Female
URBAN							
...	Ambleside	-	-	1	1	1	0
...	Appleby	-	-	3	3	3	0
...	Grasmere	-	-	3	3	3	0
...	Kendal	-	2	1	3	3	0
...	Kirkby Lonsdale	-	-	1	1	1	0
...	Shap	-	-	-	-	-	-
...	Windermere	-	-	1	1	1	0
RURAL							
...	East Westmorland	-	1	4	5	5	0
...	South Westmorland	-	-	1	1	1	0
...	West Ward	-	1	3	4	4	0
TOTALS		4	4	16	24	24	0

APPENDIX B.

CASES OF INFECTIOUS DISEASES NOTIFIED IN EACH DISTRICT, WITH THE NUMBER
REMOVED TO HOSPITAL.—THE YEAR 1923.

NAME OF DISTRICT	NOTIFIED.													REMOVED TO HOSPITAL.									
	Enteric Fever	Scarlet Fever	Diphtheria	Erysipelas	Phthisis	Other Forms of Tuberculosis	Pneumonia	Encephalitis Lethargica	Poliomyelitis	Cerebro- Spinal Meningitis.	Puerperal Fever	Ophthalmia Neonatorum	Malarial Fever	Enteric Fever	Scarlet Fever	Diphtheria	Erysipelas	Phthisis	Other forms of Tuberculosis.	Pneumonia	Poliomyelitis	Ophthalmia Neonatorum.	
URBAN																							
Ambleside ...	-	2	1	-	1	1	7	1	-	-	-	-	-	-	1	1	-	2	-	1	-	-	
Appleby ...	-	5	-	-	1	1	9	-	-	-	-	-	-	-	5	-	-	1	-	-	-	-	
Grasmere ...	-	3	-	-	2	1	4	-	-	-	-	-	-	-	3	-	-	1	-	-	-	-	
Kendal ...	-	49	4	-	16	6	19	1	-	1	-	-	-	-	49	4	-	15	4	2	-	-	
Kirkby Lonsdale	1	2	1	-	2	3	1	-	-	-	-	-	-	1	2	1	-	1	-	-	-	-	
Shap ...	-	5	-	-	1	-	-	-	-	-	-	-	-	-	5	-	-	2	-	-	-	-	
Windermere ...	-	2	-	-	2	-	3	1	-	-	-	-	-	-	2	-	-	4	-	-	-	-	
RURAL.																							
East Westmorland	-	14	-	1	15	6	33	-	-	-	1	-	1	-	10	-	-	7	2	-	-	-	
South Westmorland	-	41	15	8	32	2	34	-	1	-	-	-	-	-	39	11	-	20	2	1	1	-	
West Ward ...	1	10	1	-	4	1	3	-	-	-	-	-	-	-	9	1	-	3	1	-	-	-	
TOTALS		2	133	22	9	76	21	113	3	1	1	1	-	1	1	125	18	-	56	9	4	1	-

THE CASES OF DANGEROUS DISEASES
IN THE YEAR 1891.

DISTRICT									
NAME OF DISTRICT	Smallpox	Scarlet Fever	Dysentery	Cholera	Typhoid	Typhus	Epidemic	Other	Total
URBAN									
Ambleside	1	...	...	...	...	...	...	...	1
Apleby	1
Grasmere	1
Kendal	10
Kirkby Lonsdale	3
Shap	1
Windermere	3
RURAL									
East Westmorland	13
South Westmorland	34
West Ward	4
TOTALS	12	133	123	123	123	123	123	123	121



