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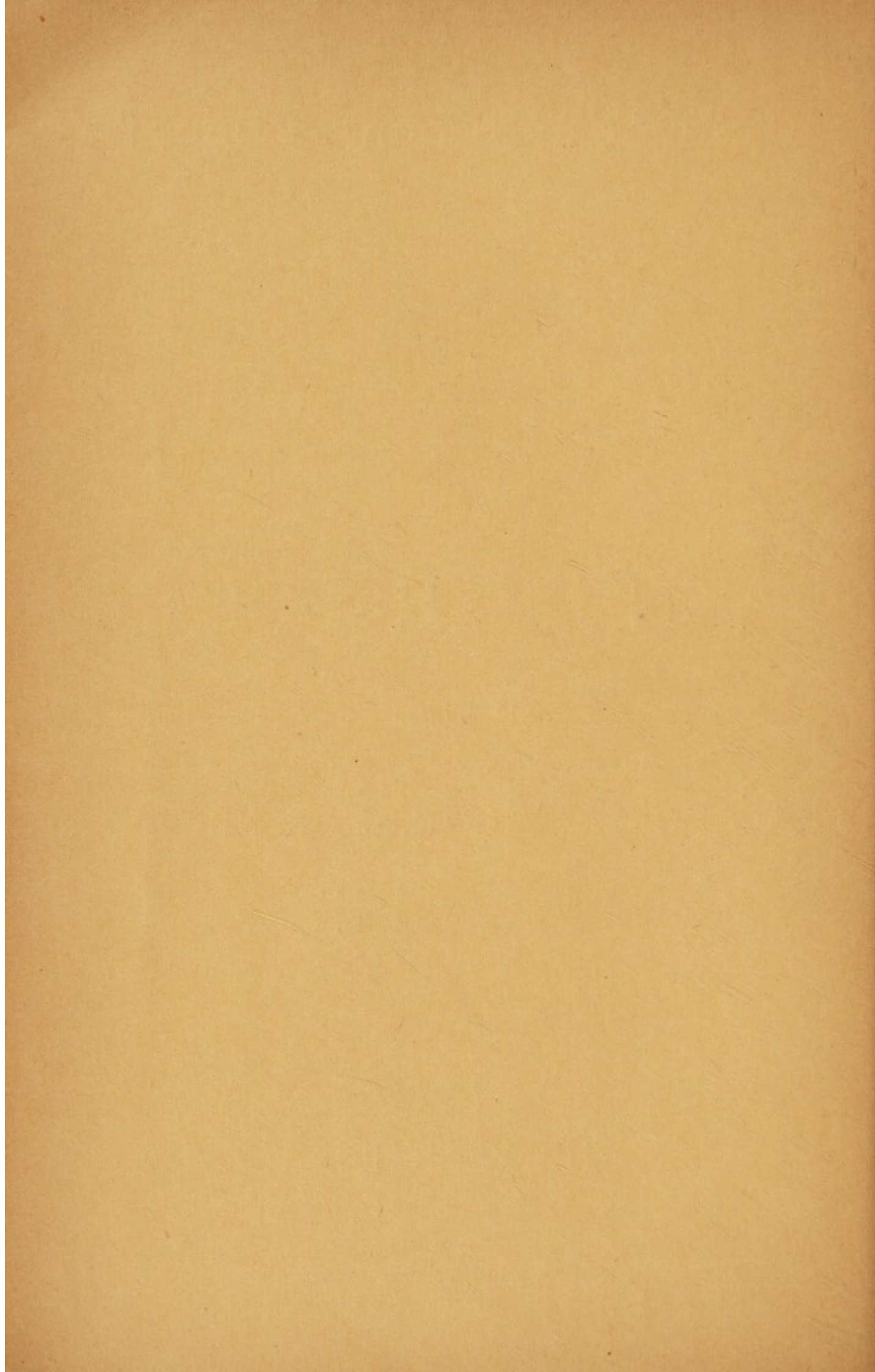


ANNUAL REPORT

OF THE

County Medical Officer
of Health.

THE YEAR 1931.



Westmorland County Council



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CONTENTS.

	Page
Members of Public Health Committees	3—5
Public Health Officers of the Authority	4
Statistics and Social Conditions of the Area	7
Population	8
Birth Rates	9
Death Rates	10
Infantile Mortality	11—13
Maternity and Child Welfare	14—18
Infant Life Protection	17
Midwives Act (1902—1918)	18
Clinics and Treatment Centres	18
Maternal Mortality	19
Public Assistance Out-relief	20
Laboratory Facilities	20—21
Ambulance	22—23
Housing	23—27
Food & Drugs Acts—Report of County Analyst	28—32
Notifiable Diseases	33—34
Public Health (V.D. Regulations)	34
Blind Persons Act	36
Tuberculosis	37—43
Vaccination Acts	43—44
Cancer Research	45
Health Education	46—47

County of Westmorland.

Public Health and Housing Committee of the County Council.

Chairman : J. W. CROPPER, ESQ.

Messrs. DR. J. L. COCHRANE.

J. CROSBY,
 R. W. DENT,
 H. L. GROVES,
 F. W. HARRISON,
 R. W. HAYES,
 W. HEWERTSON,
 REV. W. KING,
 R. W. LAMBERT,
 W. MASON.
 S. A. MOOR,
 J. PARKIN,
 G. H. PATTINSON,
 G. N. PATTINSON,
 H. A. T. SHEPHERD,
 W. STALKER,
 G. E. THOMPSON.
 E. W. WAKEFIELD.
 W. H. WALLACE.
 C. S. WEBB.

Maternity and Child Welfare Committee of the County Council.

All the members of the Public Health and Housing Committee compose this Committee with the following representatives of Maternity and Child Welfare Work :—

MRS. J. W. CROPPER,
 MRS. CROSSLAND,
 MRS. DAWSON.
 MRS DENT,
 MRS. GADDUM.
 MRS. ANTHONY LOWTHER,
 MRS. ROBINSON.

and in addition the following representatives of the medical practitioners:—

DR. T. H. GIBSON,
DR. J. COCHRANE HENDERSON.

Special Sanatorium Benefit Sub-Committee.

Representatives appointed by the County Council:—

Messrs. J. W. CROPPER,
R. W. DENT,
C. E. GREENALL,
H. L. GROVES (Chairman),
A. PATTINSON,
W. H. WALLACE,
DR. J. L. COCHRANE.

Appointed by the Westmorland County Insurance Committee:—

DR. CRAIG,
MRS. E. A. CUMBERLAND,
D. GRAHAM.

Blind Persons Act Committee.

Chairman: S. A. MOOR, ESQ.

Appointed by Westmorland County Council:—

Col. W. D. CREWDSON,
Messrs. R. M. DEIGHTON,
G. DUGUID,
C. E. GREENALL,
J. T. GREGORY,
H. L. GROVES,
F. W. HARRISON,
W. HEWERTSON,
J. STALKER,
C. S. WEBB.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

Name.	Qualifications.	Office.	Whole or Part Time.	Other Offices.
W. E. Henderson	M.A., M.B., Ch.B., D.P.H.	County Medical Officer	Part	School Medical Officer, County of Westmorland and Borough of Kendal.
J. M. L. Wright	L.R.C.P., L.R.C.S., D.P.H.	Assist. do.	"	Assist. do. M. & C.W. & Inspector of Midwives.
J. Munro Campbell ..	M.B., Ch. B., D.P.H.	Tuberculosis Officer	"	Medical Superintendent, Meathop Sanatorium.
John Irvine	L.D.S.	County School Dental Surgeon.	"	School Dental Surgeon for Borough of Kendal.
A. Brownlie	M.B., Ch.B.	Dist. Medical Officer (Poor Law) and Public Vaccinator.	"	Private Practitioner.
A. E. Cochrane	M.B., Ch.B.	"	"	"
A. Wight	M.B., Ch.B.	"	"	"
G. A. Johnston	M.D., F.R.C.S.I.	"	"	"
R. G. Mathews	B.A., M.B., Ch.B.	"	"	"
J. R. Caldwell	M.B., Ch.B.	"	"	"
W. H. Robertson	M.B., C.M.	"	"	"
J. R. K. Thomson	M.R.C.S., L.R.C.P.	"	"	"
I. Bainbridge	M.B., B.S.	"	"	"
T. H. Gibson	M.D., M.B., C.M.	"	"	"
T. S. King	M.B., Ch.B.	"	"	"
C. H. Thackrah	L.R.C.P., L.R.C.S., L.F.P.S.	"	"	"
C. B. Byrd	M.R.C.S., L.R.C.P.	"	"	"
R. N. Gibson	M.D., M.B., Ch.B.	"	"	"
H. F. W. de Montmorency	L.R.C.P., L.R.C.S., L.F.P.S.	"	"	"
J. S. Prentice	M.B., Ch.B.	"	"	"
J. Graham	L.R.C.P., L.R.C.S., L.F.P.S.	"	"	"
W. P. Reid	M.R.C.V.S.	Veterinary Surgeon	"	Veterinary Surgeon.
W. Scott	M.R.C.V.S.	"	"	"
R. C. Bickerton	M.R.C.V.S.	"	"	"
W. S. Walker	M.R.C.V.S.	"	"	"
J. Brennan	M.R.C.V.S.	"	"	"
O. Stinson	M.R.C.V.S.	"	"	"
J. A. Edwards	O.B.E., M.R.C.V.S.	"	"	"
C. J. H. Stock	B.Sc., F.I.C.	County Analyst. Vaccination Officer	"	Public Analyst. Registrar, etc.
J. Bateman	—	"	"	"
J. Hodgson	—	"	"	"
E. S. Jackson	—	"	"	"
A. O. Reed	—	"	"	"

PUBLIC HEALTH OFFICERS OF THE A

Name	Qualifications, Office
E. Henderson	M.A., M.B., Ch.B., D.P.H. County Medical Officer
M. L. Wright	L.R.C.P., L.R.C.S., D.P.H. Asst. to Inspector & W.C. & M.
Munro Campbell	M.B., Ch.B., D.P.H. Assistant District Officer
John Irvine	L.D.S. County School Dental
Brownlie	M.B., Ch.B. District Medical Officer (Poor Law) and Public Vaccinator
E. Cochran	M.B., Ch.B.
Wright	M.B., Ch.B.
A. Johnston	M.B., Ch.B.
G. Mathews	R.A., M.B., Ch.B.
R. Caldwell	M.B., Ch.B.
H. Robertson	M.B., Ch.B.
R. K. Thomson	M.R.C.S., L.R.C.P.
Bainbridge	M.B., Ch.B.
H. Gibson	M.B., Ch.B.
S. King	M.B., Ch.B.
H. Thackrah	L.R.C.P., L.R.C.S.
B. Byrd	L.R.C.P.
H. Gibson	M.R.C.S., L.R.C.P.
F. W. de Montmorency	M.D., M.B., Ch.B.
Prentice	L.R.C.P., L.R.C.S.
Statham	L.R.C.P., L.R.C.S.
F. Reid	L.R.C.P.
Scott	M.R.D.V.S.
Bickerton	M.R.D.V.S.
S. Walker	M.R.D.V.S.
rennan	M.R.D.V.S.
tinson	M.R.D.V.S.
Edwards	M.R.D.V.S.
H. Stock	O.B.E., M.R.C.V.S.
ateman	B.Sc., F.I.C.
odgson	—
Jackson	—
Reed	—

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Nominated by :

Kendal Town Council : S. A. MOOR.

Appleby Town Council : A. E. P. SLACK.

Carlisle Workshops for the Blind : REV. CANON GARDNER.

Barrow and District Society for the Blind : F. H. ROBINSON.

Westmorland Public Assistance Committee : REV. W. KING and MRS. SOMERVELL.

Ex-Officio :

Chairman of Education Committee (A. H. WILLINK), and
Chairman of Public Health Committee (J. W. CROPPER).

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 District.</i>
” ” ”	... EAST WESTMORLAND.
” ” ”	... SOUTH WESTMORLAND.
” ” ”	... WEST WARD.

**To the Chairman and Members of the Public Health and
Housing Committee.**

Gentlemen,

I have the honour to present the following Annual Report on the Health of the Administrative County of Westmorland during the year ended 31st December, 1931.

The Report follows the lines indicated by the Ministry's Circular 1206 as to the contents of the Annual Reports of Medical Officers of Health. In view of the additional duties placed upon the County Council by the Local Government Act, 1929, my Annual Report for 1930 dealt in detail with certain subjects, such as the various hospitals in the County, Medical Relief and Public Vaccinators' Districts, etc. It has not been thought necessary to repeat these details in the present report.

I have the honour to be,

Your obedient servant,

WILLIAM ELMSLIE HENDERSON.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	504,917
Registrar-General's estimate of resident population 1931	64,250
No. of inhabited houses (end of 1931) according to Rate Books	17,150
Rateable Value as on 1st April, 1931	£374,552
Estimated product of a Penny Rate (General County) for the financial year 1931-32	£1,481 8 6

There are 7 Urban Districts and 3 Rural Districts in the County of Westmorland their respective acreage and population will be found in the table on page 8.

In pursuance of the Local Government Act, 1929, the County Council and the Urban and Rural District Councils have been in conference as to a re-arrangement of the County Districts, and a scheme to that end has been drafted.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total	M.	F.	
Live Births—(Legitimate)	860 ...	441 ...	419	
(Illegitimate)	62 ...	28 ...	34	
Birth Rate	...	...		14.3
Still Births	40	Rate per 1,000 total births		41.5
Deaths	878	Death Rate		13.6
Deaths from Diseases and Accidents of pregnancy and childbirth :—				
From Sepsis	2	From other causes		6
Death Rate of Infants under 1 year of age :—				
All infants per 1,000 live births	...	...	...	68.3
Legitimate infants per 1,000 legitimate live births	...	...	...	65.1
Illegitimate infants per 1,000 illegitimate live births	...	...	...	112.5
Deaths from Measles (all ages)	...	...	...	1
„ „ Whooping-cough (all ages)	...	...	...	3
„ „ Diarrhoea (under 2 years of age)	...	...	...	5

POPULATION

DISTRICT.	Area in Acres: (Land and Inland Water).	Population.	
		Census 1931.	Registrar General's estimate for 1931.
URBAN.			
Ambleside ...	4,425	2,343	2,248
Appleby	1,877	1,618	1,575
Grasmere	7,333	988	798
Kendal	2,700	15,575	15,570
Kirkby Lonsdale	3,254	1,370	1,385
Shap	2,081	1,227	1,190
Windermere ...	9,902	5,701	5,464
RURAL.			
East Westmorland	183,771	10,717	10,620
South Westmorland	169,702	18,954	18,580
West Ward ...	119,872	6,905	6,820
Westmorland ...	504,917	65,398	64,250

BIRTH RATE, 1931.

Birth Rate per 1,000 population.

District.	No. of Births 1931.	Birth Rate 1931.	Birth Rate 1930.	Birth Rate 1929.	Birth Rate 1928.	Birth Rate 1927.
Urban.						
Ambleside	19	8.4	11.7	9.1	11.5	8.2
Appleby	15	9.5	12.8	9.8	12.2	14.2
Grasmere	7	8.7	13.9	12.8	12.6	12.6
Kendal	235	15.0	15.5	14.2	15.8	17.2
Kirkby Lonsdale ..	21	15.1	12.0	23.2	21.8	15.9
Shap	22	18.4	20.6	22.5	24.7	28.1
Windermere	51	9.3	9.6	15.2	10.9	16.3
Rural.						
East Westmorland ..	176	16.5	20.6	18.7	18.4	16.9
South Westmorland	256	13.7	12.9	12.6	15.8	15.5
West Ward	120	17.5	17.4	20.0	17.2	15.1
Westmorland	922	14.3	15.1	15.1	15.9	16.1
England & Wales ..		15.8	16.3	16.3	16.7	16.7

The births registered in the above 5 years were as follows:—

Year	...	1927	1928	1929	1930	1931
No. of Births	...	995	1002	957	954	922

DEATH RATE, 1931.

Net Death Rate per 1,000 population.

District:	No. of Deaths 1931.	Death Rate 1931.	Death Rate 1930.	Death Rate 1929.	Death Rate 1928.	Death Rate 1927.
Urban.						
Ambleside	42	18.6	14.3	12.2	11.1	11.3
Appleby	16	10.1	15.3	13.5	14.0	18.8
Grasmere	12	15.0	11.6	8.1	16.1	14.9
Kendal	226	14.5	13.8	13.2	12.5	14.5
Kirkby Lonsdale	21	15.1	10.3	24.0	13.1	15.9
Shap	19	15.9	15.8	20.6	13.3	8.7
Windermere	84	15.3	12.3	12.3	15.2	15.5
Rural.						
East Westmorland	151	14.2	14.9	14.0	14.7	12.0
South Westmorland	224	12.0	10.6	12.6	12.3	13.2
West Ward	83	12.1	11.1	11.0	10.5	14.6
Westmorland	878	13.6	12.7	13.1	12.9	13.6
England & Wales	—	12.3	11.4	13.4	11.7	12.3

The attached table is a copy of one supplied by the Registrar-General. It gives the causes of deaths at age periods in the administrative county in 1931.

The chief causes of death in 1931 in order of fatality were:—

Cause.	No. of Deaths.
Heart Disease	210
Cancer	113
Cerebral Hæmorrhage	63
Other Circulatory Diseases	47
Congenital Debility	43
Bronchitis	39
Tuberculosis of Respiratory System	31
Other Deaths from Violence	30
Nephritis	28
Pneumonia (all forms)	28

Of the 878 deaths, 504 were in respect of persons of 65 years and over.

It will be observed that "other deaths from Violence" now appears in the list. This refers to violence other than suicide and has reference, among other fatal accidents, to the "toll of the roads."

INFANTILE MORTALITY, 1931.

DISTRICT.	No. of Births in 1931	No. of Deaths in 1931.	Infant Mortality Rate in 1931.	Infant Mortality Rate in 1930.	Infant Mortality Rate in 1929.	Infant Mortality Rate in 1928.	Infant Mortality Rate in 1927.
Urban.							
Ambleside	19	0	0	148	143	0	0
Appleby	15	0	0	143	0	0	45
Grasmere	7	0	0	0	0	91	0
Kendal	235	28	119	61	62	57	103
Kirkby Lonsdale	21	0	0	0	37	40	105
Shap	22	2	90	136	0	0	69
Windermere	51	1	19	0	87	53	12
Rural.							
E. Westmorland	176	10	57	80	49	65	54
S. Westmorland....	256	13	51	48	58	49	27
West Ward	120	9	75	55	32	28	43
Westmorland	922	63	68	63	54	50	53
England & Wales	—	—	66	60	74	65	69

AGE INCIDENCE OF INFANTILE MORTALITY, 1931.

DISTRICTS.	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.
URBAN										
Ambleside	—	—	—	—	—	—	—	—	—	—
Appleby	—	—	—	—	—	—	—	—	—	—
Grasmere	—	—	—	—	—	—	—	—	—	—
Kendal	13	2	—	1	16	3	4	1	4	28
Kirkby Lonsdale	—	—	—	—	—	—	—	—	—	—
Shap	—	—	—	—	—	1	—	1	—	2
Windermere	1	—	—	—	1	—	—	—	—	1
RURAL										
E. Westmorland	7	—	—	—	7	1	1	1	—	10
S. Westmorland	5	2	1	—	8	3	2	—	—	13
West Ward	4	—	—	—	4	3	2	—	—	9
Westmorland.....	30	4	1	1	36	11	9	3	4	63

Analysis of Causes of Deaths of Infants under 1 year in 1931.

DISTRICT.	Gastritis.	Convulsions	Bronchitis	Pneumonia	Prematurity	Atrophy, Debility and Marasmus.	Congenital Malformation	Other Causes	TOTAL	Deaths in order of Fatality.
URBAN.										
Ambleside	—	—	—	—	—	—	—	—	—	Prematurity .. 19
Appleby ...	—	—	—	—	—	—	—	—	—	
Grasmere	—	—	—	—	—	—	—	—	—	
Kendal ...	3	3	1	3	10	1	1	6	28	} 9
Kirkby Lonsdale	—	—	—	—	—	—	—	—	—	
Shap ...	—	—	1	—	—	1	—	—	2	} 8
Windermere	—	—	—	—	1	—	—	—	1	
RURAL.										
E. Westmorland	—	1	2	—	4	—	2	1	10	} 4
S. Westmorland	—	4	—	1	3	2	2	1	13	
West Ward	1	1	—	—	1	2	3	1	9	
Westmorland	4	9	4	4	19	6	8	9	63	

MATERNITY AND CHILD WELFARE.

In 1931, under Dr. J. Wright's efficient and careful supervision, the nurses employed by 29 District Nursing Associations engaged in the duties of part-time health visitors. These duties include Maternity and Child Welfare visiting, school nursing, after-care visiting in connection with the County Tuberculosis Scheme, etc. For these services the County Council, through the County Nursing Association, made annual payments amounting to £1,714, during 1931-32.

Maternity and Child Welfare Centres are held once a month at Windermere, Bowness-on-Windermere, Ambleside, Shap and Burneside, at all of which Dr. Wright attends. All the centres are undertaken on a voluntary basis. The various voluntary workers well deserve the hearty thanks of your Committee. The centre at Burnbanks has been discontinued owing to the partial closing down of the Manchester Corporation Waterworks Scheme at Haweswater.

The County Nursing Association continues its good work in encouraging the formation of additional district nursing associations, in helping district nursing associations to secure nurses, in getting together the nurses from isolated areas at conferences and lectures and sending nurses to post-certificate training courses.

By kind permission of Mrs. Gaddum, the Honorary Secretary of the County Nursing Association, the following extracts from her annual report for 1931 are included:

“ Three new District Nursing Associations started work in the Spring. These are Tebay-with-Orton, Langdale, and Skelsmergh-with-Selside and Grayrigg. All have adopted the provident contributory scheme of public support and very good accounts have been received of the work done in these Districts in the six months that they have worked.

In addition to these, arrangements have been made with the Sedbergh and District Nursing Association by which Dillicar, Killington and Firbank are included in their area.

The Levens, Brigsteer and District and the Crosthwaite Nursing Associations have also been approached and have offered to extend their boundaries so as to include the parish of Underbarrow.

The Barton, Martindale and Pooley Bridge Nursing Association is restarting, and a Nurse has been engaged to start work at once.

There are now seven Associations with cars, and three with motor cycles in the County.

A Nurses' Reunion was held at Appleby in June, 1931, at which 13 Nurses were present as well as Secretaries of Associations and other social workers. A most interesting address was given by Dr. Campbell, from Meathop Sanatorium."

Mrs. Gaddum includes in her report a short summary prepared by Dr. Wright on the Public Health Work of the District Nurses during 1931. In the course of this summary Dr. Wright reports :

"There are now 29 district nurses working in Westmorland and the inspection of their records of Child Welfare and Maternity work reveals highly satisfactory results.

The general health and development of infants and young children are improving steadily under the constant supervision of the nurses, and the care of expectant mothers is being undertaken willingly and skilfully, although there is room for more co-operation on the part of the expectant mothers in this very important branch of the work.

Many of the nurses have a very large population to serve, and are greatly to be commended in that, however arduous and urgent their sick nursing duties, they have realised the necessity for, and have been able to keep up, the constant visitation of the mothers and infants, and so further the aims of preventive medicine."

The figures for 1931 as to visits by nurses and by Dr. Wright in the County (excluding the Borough of Kendal) are as follows :

VISITS UNDER THE COUNTY MATERNITY AND CHILD WELFARE SCHEME.

	By Nurses.	Dr. Jessie Wright.	Total.
Expectant Mothers visited	382	7	389
Total visits	2,049	7	2,056
Infants visited	570	94	664
Total visits	5,190	234	5,424
Children, 1-5 years			
Total visits	4,233	378	4,611

In addition to the above figures, I am able, through the kindness of Dr. Cockill, the Medical Officer of Health for the Westmorland Combined Districts, to add those for the Borough of Kendal. Under the Borough of Kendal Maternity and Child Welfare Committee a very efficient centre, conducted by Dr. Cockill, is held weekly at Abbot Hall, Kendal.

The following is his report :

No. of times the Centre has been open	...	52	
„ „ babies under one year attending	...	124	
„ „ children 1—5 years	...	116	
		—	240
„ „ consultations for babies	...	1305	
„ „ „ „ children	...	647	
„ „ „ „ mothers	...	296	
„ „ „ „ expectant mothers	...	109	
		—	2357
Average no. of babies attending per session	...	25.1	
„ „ children „ „	...	12.4	
„ „ mothers „ „	...	5.7	
„ „ expectant mothers „ „	...	2.1	
		—	45.3
No. of expectant mothers admitted to Hospital under the Maternity and Child Welfare Act		..	

Summary of Nurse Petersen's Work (Kendal Health Visitor).

First visits to infants under 12 months	...	217
Subsequent visits	...	950
Visits to children 1—5 years of age	...	387
First visits to expectant mothers	...	69
Subsequent visits	...	88
Still birth enquiries	...	8
Infant death enquiries	...	23
Attendance at Centre	...	49
Visits to Institutions	...	10
		— 1801

Summary of Nurse Hughes' Work (Kendal Nurse).

Visits to cases of Puerperal Fever ...	...	0
" " " Pyrexia ...	...	70
" " Ophthalmia Neonatorum ...	...	45
		— 125

CHILDREN ACT, 1908. — PART 1.**Infant Life Protection**

During 1931 there were 32 infants and 30 homes under supervision. There are 5 infant protection visitors; 4 of them are relieving officers, while in the Borough of Kendal Nurse Petersen acts in this capacity. Your Committee has under consideration the securing of voluntary women visitors to co-operate with the present staff.

The figures for the County are as follows:—

Number of infants on Registers on 1-1-31	...	...	24
New cases in 1931	...	...	8
Returned to parents	...	...	5
Adopted	...	...	nil.
Died	...	...	nil.
Attained 7 years of age	...	...	1
Left County	...	...	4
Transferred to Public Assistance Institutions	...	...	nil.
Number of unsatisfactory cases	...	...	nil.
Total infants under supervision in 1931	...	...	32
Number of homes	...	...	30
Total visits paid in 1931	...	...	185

School Children.

The work of the School Medical Service may well be called Child Welfare Work. In 1931, including the Borough of Kendal, the nurses paid 4,126 visits to the homes in connection with children found defective at school medical inspection. 3,375 children had dental treatment, 7,372 had dental inspection, 670 had their eyes tested by refraction and 3,182 had medical inspection. Nine children had institutional treatment at the Westmorland Sanatorium, Meathop, and 19 were in residence at the Ethel Hedley Orthopædic Hospital, Windermere. After-care is a very important element in a scheme for cripples, and 50 children are on the registers of the after-care clinics and come up for periodic examination.

Nursing in the Home.

Thirty District Nursing Associations employ Nurses for this work. It is the aim of the County Council, through the County Nursing Association, to encourage by annual grants, the formation of nursing associations so that the services of a nurse may be available over as much of the County as possible. In the remoter areas one of the chief difficulties is that of the transport of the nurse. Several District Nursing Associations have provided their nurse with a motor car, which has proved of the utmost value when the wide and hilly nature of the nursing areas is considered.

MIDWIVES ACTS, 1902 & 1918.

Dr. Jessie Wright, the Assistant County Medical Officer, who acts as Inspector of Midwives, reports as follows:—46 Midwives notified their intention to practise in the County in 1931. Of these, 26 were District Nurses, 4 practised in the Maternity Department of the County Hospital, Kendal, 3 at St. Monica's Maternity Home for unmarried mothers at Kendal, two at the Poor Law Institution, and one was employed by the Manchester Corporation at Mardale. The remaining 10 were in private practice, 2 of them being bona-fide midwives.

The following notifications from Midwives were received in 1931:—

Form of Notification of sending for Medical Aid	...	75
" " Still Birth	... ..	1
" " Artificial Feeding	... ..	5
" " Laying out dead body	... ..	10
" " Liability to be a source of infection	... ..	8
" " Notification of Death	... ..	1

THE PUBLIC HEALTH (NOTIFICATION OF PUERPERAL FEVER AND PUERPERAL PYREXIA) REGULATIONS, 1926.

Under the above Regulations, 10 cases of Puerperal Pyrexia and 5 cases of Puerperal Fever were notified in 1931.

The services of Dr. Douglas Smith, Gynæcologist, Carlisle, are available for any notifying practitioner, as well as the provision of trained nursing and laboratory facilities.

CLINICS AND TREATMENT CENTRES.

Name.	Situation.	Accommodation.	Provided by.
School Clinic ..	Town Hall, Kendal ..	Waiting Room, Consulting Room, Dark Room.	Borough of Kendal.
School Dental Clinic ..	Abbot Hall, Kendal ..	Waiting Room, Operating Room, Recovery Room.	County of Westmorland and Borough of Kendal.
Orthopaedic Clinic ..	.. ..	Waiting Room, Consulting Room, Plaster Room.	County of Westmorland and Borough of Kendal.
.. ..	Penrith ..	..	By arrangement with Cumberland County Council.
.. ..	Ethel Hedley Hospital, Calgarth Park, W'dermere	..	Ethel Hedley Hospital Governors.
Tuberculosis Dispensary.	Fellside, Kendal. ..	Waiting Room, Consulting Room, Weighing Room, 3 Dressing Rooms.	County of Westmorland.
.. ..	Meathop, Grange-over-Sands.	Consulting Room, Treatment Room, Waiting Room, X-ray Room.	Governors of Westm'l'd Sanatorium, Meathop.
.. ..	Battlebarrow, Appleby.	Consulting Room, Waiting Room.	County of Westmorland.
Maternity & Child Welfare Centre.	Abbot Hall, Kendal ..	Waiting Room, Consulting Room, Weighing Room.	Borough of Kendal.
.. ..	Ambleside ..	Waiting Room, Consulting Room.	Voluntary—subsidised by County.
.. ..	Windermere ..	..	..
.. ..	Bowness ..	..	..
.. ..	Shap ..	..	..
.. ..	Burneside ..	..	..

CLINICS AND TREATMENT CENTRES

Name.	Situation.	Accommodation.
School Clinic	Town Hall, Kendal	Waiting Room, Gents Room, Park Room.
School Dental Clinic	Abbot Hall, Kendal	Waiting Room, Operatory, Recovery Room.
Orthopaedic Clinic	.. ..	Waiting Room, Gents Room, Plaster Room.
.. ..	Penrith	.. ..
.. ..	Ethel Hedley Hospital, Calgarth Park, Windermereside	.. ..
Tuberculosis Dispensary.	Fellside, Kendal	Waiting Room, Gents Room, Weighing Room, Dressing Rooms.
.. ..	Methop, Grange-over-street, Sands.	Consulting Room, Waiting Room, X-ray Room.
.. ..	Batterbarrow, Appleton	Consulting Room, Waiting Room.
Maternity & Child Welfare Centre.	Abbot Hall, Kendal	Waiting Room, Gents Room, Weighing Room.
.. ..	Amlscliffe	.. ..
.. ..	Windermereside	.. ..
.. ..	Bowness	.. ..
.. ..	Sharp	.. ..
.. ..	Burnscliffe	.. ..

MATERNAL MORTALITY.

In 1931, 2 deaths were registered as caused by puerperal sepsis and 6 as due to other puerperal causes, of whom 3 died from eclampsia, 2 from shock following hæmorrhage, and one from obstructed labour.

One of the deaths due to sepsis occurred outside the County, but as the patient's usual residence was in South Westmorland the death was assigned to that area.

The final report of the Departmental Committee on Maternal Mortality and Morbidity has been issued recently. This exceedingly important report is having our careful consideration, and we shall endeavour to carry out the recommendations therein contained. Your Committee has sought, through the County Nursing Association, to increase the number of qualified maternity nurses throughout the County by encouraging the formation of additional District Nursing Associations, and has secured Maternity Hospital Accommodation for abnormal cases or for mothers from unsuitable or remote homes. Dr. Wright, who acts as Inspector of Midwives, is devoting special attention to the extension of antenatal supervision.

CO-OPERATION WITH THE NATIONAL HEALTH INSURANCE.

Your Council is in touch with the National Health Insurance Work by means of the Sanatorium Benefit Sub-Committee, which consists of seven members (of the County Council) appointed by the County Council and of three representatives appointed by the County Health Insurance Committee.

This Sub-Committee determines the nature and extent of the Sanatorium Benefit which shall be provided for the patients. The County Tuberculosis Officer is in attendance to advise on the extent and character of the treatment indicated for each patient and to report on the progress of the patients in whose welfare the Sub-Committee takes a close and practical interest.

Representatives of the County Health Committee and the County Insurance Committee together serve on the Governing Body of the Westmorland Sanatorium at Meathop, which is a voluntary institution.

POOR LAW MEDICAL RELIEF.

As this subject was dealt with in some detail in my Annual Report for 1930 it is not necessary to repeat the information. It will be recalled that previous to the operation of the Local Government Act there were three Poor Law Unions in the County, namely, the West Ward Union, the East Ward Union, and the Kendal Union.

Under this Act the County has been divided into two areas for Public Assistance Administration, namely, North Westmorland and South Westmorland. While there has been no change in the areas assigned to the various district Medical Officers, there has been a change in the medical personnel in two districts.

Dr. King has been appointed to succeed the late Dr. Stevenson in the Kirkby Thore district, and Dr. Caldwell succeeds the late Dr. MacLeod in the Milnthorpe district.

Dr. Stevenson was greatly beloved and respected in North Westmorland. He had a very extensive practice and was trusted by all as a skilled physician, and as a man of culture endowed to an unusual extent with social gifts.

Dr. MacLeod leaves many a sorrowing friend in Milnthorpe and district. He, too, was greatly loved by his many patients. He never spared himself in his ministrations to the sick, to whom he brought cure and comfort by his skill and his sympathetic insight.

LABORATORY FACILITIES.

The Medical Officer of Health for the Combined Districts kindly supplies the following table of the work carried out by him at the laboratory maintained by the Combined Districts of Westmorland. The facilities provided are greatly appreciated by the General Practitioners.

The examination of sputum for the Tubercle Bacillus is also undertaken at the Laboratory at the Westmorland Sanatorium, outfits being supplied to Practitioners under the County Tuberculosis Scheme.

Specimens taken under the Public Health (V.D.) Regulations are examined at the Public Health Laboratory of Manchester University.

Work under the Sale of Food and Drugs Acts is conducted by the County Analyst in his laboratory at Darlington.

LABORATORY REPORT, 1931.

DISTRICT.	Diphtheria.	Enteric Fever.	Paratyphoid.	Puerperal Pyrexia.	Organisms.	Tubercle (Sputum).	Anthrax.	Gonococcus.	Vaccine Culture.	Cyto-diagnosis.	Blood Diseases.	Urine.		Water.			Milk.		TOTALS.	
												Bacilluria.	Deposit.	Analysis.	B. Coll.	Deposit.	Bacterial Count.	B. Coll.		
URBAN.																				
Ambleside	3	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	5
Appleby	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13
Grasmere	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	2
Kendal	106	3	2	1	2	30	2	4	1	1	10	16	2	2	24	1	9	9	9	225
Kirkby Lonsdale	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Shap	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Windermere	77	2	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	84
RURAL.																				
East Westmorland	6	1	-	-	-	2	-	-	-	-	-	1	-	3	4	-	-	-	-	17
South Westmorland	83	5	4	-	1	4	-	2	-	3	2	4	-	10	12	-	16	16	16	162
West Ward	14	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	-	-	18
TOTALS	304	11	7	1	4	37	2	8	1	4	15	23	2	17	42	1	25	25	25	529

AMBULANCE FACILITIES.

(a) For Infectious Patients.

In connection with the Isolation Hospital at Kendal, the Kendal Corporation own two motor ambulances. The area covered includes the Borough of Kendal, the Urban Districts of Ambleside, Grasmere, Kirkby Lonsdale, Carnforth and Grange-over-Sands, and the Rural District of South Westmorland.

The Urban District Council of Windermere uses a horse ambulance for the transport of infectious patients in their area to the Isolation Hospital at Windermere.

The rest of the County is served by a motor ambulance stationed at the Ormside Joint Infectious Hospital, near Appleby, which is the property of the Ormside Joint Hospital Board and is available for the transport of infectious patients from the Borough of Appleby, the Urban District of Shap and the Rural Districts of East Westmorland and the West Ward.

(b) For Non-Infectious and Accident Patients.

For many years Kendal has held, and still holds, a very fine record for Ambulance Work of all kinds. The Kendal Division of the St. John Ambulance Brigade has won the highest awards in local and national competitions. This is due to the able leadership of Dr. Cockill, who for many years has trained these teams and holds the responsible position of Commissioner for the N.W. District. As a result the ambulance facilities centering on Kendal are of the highest efficiency. By co-operation between the Corporation of Kendal and the Kendal Division a rota of Ambulance men and Sisters is available for transport duty by night as well as by day. The area covered is that of Kendal and South Westmorland south of Windermere. The Kendal Corporation supplies the motor-driver.

In the Windermere and Ambleside districts the Windermere and Ambleside Divisions of the St. John Ambulance each maintain a motor ambulance and provide a like personnel.

The rest of the County is served by the motor ambulance of the Penrith District Joint Ambulance Committee.

When one considers the volume of traffic passing through Kendal, making for the Lakes or over Shap summit, and that this volume is enormously increased during the Bank holiday times, one is thankful that provision is available for rendering first-aid to and transporting the victims of road accidents.

The Ambulance workers set the whole County an example of unselfish service, their work is wholly voluntary and they give up all thought of holidays for themselves by taking post at dangerous points or being within call.

The St. John Ambulance Division well deserve our thanks, our interest and our practical support.

HOUSING.

During the year under review your Committee, in pursuance of Part IV of the Housing Act, 1930, and the Housing (Rural Authorities) Act, 1931, instructed the County Housing Inspector to confer with the Housing Inspectors of the Rural Districts of South Westmorland, East Westmorland and West Ward as to the housing needs of rural workers and to report thereon.

The County Housing Inspector reported as follows:—

“ To the Chairman and Members of the
Public Health Committee.

Gentlemen,

Housing (Rural Workers) Act,

I beg to submit the following interim report:—

I have had interviews with two of the three Inspectors of the Rural District Councils as to the number of houses in their respective districts which are in need of re-conditioning, and have ascertained that it is the opinion of the Inspector of the South Westmorland Rural District Council that very few, if any, are in need of any extensive repairs or are likely specimens for compulsory closure. In various parts of East Westmorland there would appear to be at least fifty houses which are in urgent need of structural alterations to conform with present-day needs of sanitation and healthy living.

So far as I can form an opinion, many landlords are not conversant with the conditions required by the Act, and are adverse to entering upon an undertaking which they do not understand.

In South Westmorland particularly, there are several owners of cottages who will not tie themselves to the conditions attached to the Loan or Grant and prefer to keep themselves open to accept the highest rent possible from, as Dr. Henderson terms them, "Cottage Snatchers."

In East Westmorland, however, there appears to be little understanding of the provisions of the Act, and the Inspectors assure me that they will do their utmost to make these known to anyone to whom they have cause to issue an Order for repairs. Applications for at least five schemes are about to be forwarded from East Westmorland in the near future, and it is felt that some sort of advertisement in the newspapers would tend to make the Scheme extensively known; also, a questionnaire to the Clerks of the various Parish Councils as to the structural needs or alterations to any of the cottages in their District might be of great use in getting first-hand information in a quiet way.

I have not yet been able to interview the West Ward Inspector, as he has been away on holiday and does not return until after this report has been made.

Yours faithfully,

P. S. CORBETT,

Housing Inspector."

29, Lowther Street, Kendal,
21st July, 1931.

To the Chairman and Members of the
Public Health Committee.

Gentlemen,

Housing (Rural Workers) Act,

Further to my report dated 21st July, 1931, I would state that I have now had an interview with the Inspector of the West Ward and completed my inquiries.

I find that, as in East Westmorland, knowledge of the provisions of the Act is very limited, and, in order to make

the matter more widely known, the Inspector suggests that the following paragraph be printed on the back of the next Rate Demand Notes :—

“ Housing (Rural Workers) Act, 1926.”

“ This Act provides for financial assistance towards the cost of the reconstruction and improvement of houses and other buildings to promote the provision of housing accommodation for agricultural workers and others whose economic condition is substantially the same.

Grants are shared equally by the Local Authority and the Government, and may, subject to maximum and certain conditions, amount to two-thirds of the estimated cost of the works.

Applications for grants have to be made to the County Council. The West Ward Rural District Council is desirous that the Act should be taken full advantage of in the District with a view to the avoidance of costly housing schemes, and is prepared to advise Owners and to give all possible assistance in connection with any proposed application for a grant.”

The adoption of this by all the Authorities would cause the matter to be known to all responsible parties, and might produce more applications than the Committee may care to deal with in the present state of financial stringency.

I have had an extensive tour of the East Ward with the Inspector, and I saw in a good many instances properties where advantage could be taken of the provisions of the Act.

I might say that I have had every assistance and help from the several Inspectors, who are only too willing to co-operate, and would wish to thank them for their courtesy and aid.

Yours faithfully,

P. S. CORBETT,

Housing Inspector.

29, Lowther Street, Kendal,
29th October, 1931.

These reports were considered by your Committee on the 4th November, 1931, when it was resolved :—“ That in lieu of having notice printed on the back of demand notes, the County Council

be recommended to print the notice on separate slips, and supply them to any rating authority in a rural area who will undertake to issue them with the demand notes."

At the same meeting an application under the Housing (Rural Authorities) Act, 1931, by the West Ward Rural District Council for a grant referred to your Committee by the County Council was considered. The number of new houses proposed was as follows :

Parish.	No. of New Houses proposed.		
	For Agric. Workers.	For persons of substantially same economic conditions.	Others.
Bampton	2	1	1
Bolton	1	1	—
Brougham	2	—	—
Cliburn	1	2	1
Clifton	2	2	2
Crosby Ravensworth	—	2	2
Lowther	—	1	1
Morland	1	2	1
Patterdale	—	5	5
Sockbridge & Tirril...	1	2	1
Great Strickland	1	1	—
Little Strickland	1	1	—
Yanwath & Eamont Bridge	—	2	2
	—	—	—
	12	22	16
	—	—	—

"The houses required for the accommodation of the Agricultural population is thus given as 34 on which a contribution of at least £1 per annum is required by the Act to be made by the County Council whilst a similar grant in respect of the houses for other persons is optional. The District Council desire that the contribution to be borne by their rates shall be limited to £3 15s. per house per annum for forty years, less any contribution paid by the County Council."

It was resolved :—

“ That the Ministry be informed that the Westmorland County Council concur in the application, and in view that the 34 houses are required for the accommodation of the Agricultural population, and are prepared to contribute for a period of 40 years at the rate of £1 per house payable in respect of so many of the houses provided with the approval of the Ministry as are occupied by members of the agricultural population for a period or periods exceeding 9 months in each year in accordance with section 34 s.s. (2) of the Housing Act, 1930.”

In 1931, in pursuance of the Housing (Rural Workers) Act, 1926, the following action was taken:—

1. At Ravenstonedale—conversion of a barn into a dwelling-house.

Grant of £75 made.

2. At Ravenstonedale—additions to a dwelling-house and sanitary accommodation for three other dwelling-houses:

Grant of £100 offered but not accepted.

3. Kirkby Thore—enlargement of 4 existing cottages and sanitary improvements.

Grant of £300 made.

4. Milnthorpe—conversion of a barn into dwelling-house.

Grant of £75 made.

5. Kings Meaburn—conversion of barn into cottage.

Grant of £100 made.

6. Cliburn—application for grant for water supply and sanitary accommodation for two cottages.

Application not granted as the circumstances did not comply with the terms of the Act.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The Analyst for the County (excluding the Borough of Kendal) is Mr. C. J. H. Stock, B.Sc., F.I.C., and the sampling is in the hands of the County Police. The County Analyst kindly furnishes the following report for the year 1931:—

County Analyst's Office,
Darlington,
29th December, 1931.

1. During the 12 months ending 31st December, 1931, I have analysed 76 samples of Food and Drugs submitted by the Inspectors appointed under the Food and Drugs (Adulteration) Act, 1928, for the County of Westmorland, viz. :—

From the Appleby Division	...	...	36
From the Kendal Division	...	...	40
			—
Total	...	...	76
			—

This number of samples is less by 3 than the total number submitted during 1930.

2. The result of the analyses of these samples is briefly summarised in the following table, from which an indication of the action taken in connection with those samples which were found not to be of genuine quality may be gathered:—

Number of Milk samples submitted	...	...	51
Number of samples of other articles submitted	...	...	25
			—
Total	...	...	76
			—

Number of samples adulterated or below standard	...	...	5
Number of samples of doubtful quality	...	...	0
Number of appeal samples	...	...	1
Number of samples taken in course of delivery as reference samples	...	...	0
Number of persons cautioned	...	...	0
Number of persons summoned	...	...	1
Number of persons convicted	...	...	0
Number of persons discharged	...	...	1
Number of persons to pay costs	...	...	0

Number of cases in which no action taken	...	...	4
Number of cases pending at end of year	...	...	0
Amount of Fines	...	...	None
Amount of Costs	...	...	None

3. The percentage of adulteration for the year is 6.66; for the 12 months ended the 31st December, 1930, it was 12.00. In each case all samples which had been reported as otherwise than genuine are included, but appeal samples and reference samples are not included.

4. Proceedings were instituted in only one case, but the information was dismissed; the case in question was one in which a sample of milk disclosed a deficiency of 11.00% of Fat when compared with the standard of 3.00% set up in the Sale of Milk Regulations, 1901; when judged by figure for Fat in the appeal sample the actual deficiency amounted to 20.00%.

5. Of the 51 samples of Milk submitted during the 12 months 5 were returned as being adulterated or below standard and 1 sample was taken as an appeal sample from the cow.

Excluding these 6 samples the average composition of the 42 genuine Milks was as follows:—

Non-fatty Solids	...	...	8.83%
Fat	...	...	3.53%

For the previous 12 months the average figures were:—

Non-fatty Solids	...	...	8.81%
Fat	...	...	3.61%

These figures afford a useful index of the steady level maintained by the Non-fatty Solids in the milk produced in the County, but a slight drop has taken place in the Fat content as compared with 1930.

The percentage of adulteration for Milk during the past year was 10.00% and for the previous 12 months the figure was 16.00%; in neither case are appeal or reference samples included.

6. Other Samples.

Apart from Milk, articles falling under this heading were 18 in number represented by 25 samples, the nature of which will be apparent from the following table:—

Almonds, Ground	...	1
Baking Powder	...	1
Butter	...	2
Cinnamon, Ground	...	1
Cocoa	...	2
Cocoanut, Desiccated	...	1
Coffee	...	1
Cream, Tinned	...	3
Cream of Tartar	...	1
Custard Powder	...	2
Lard	...	1
Margarine	...	1
Milk, Condensed	...	1
Oatmeal	...	1
Pepper	...	1
Rice, Ground	...	1
Sponge Mixture	...	3
Sweets	...	1

With the exception of the sample of Sweets the whole of the rest of these articles complied with the requirements of the Food and Drugs (Adulteration) Act, 1928, while the former sample was covered by the provisions of the Public Health (Preservatives, etc., in Food) Regulations.

(Signed) CYRIL J. H. STOCK.

In the Borough of Kendal the Inspector under this Act is the Borough Sanitary Inspector, and the Borough Analyst is Mr. W. H. Roberts, M.Sc., F.I.C., Liverpool.

The Medical Officer of Health in his Annual Report for 1931 states :—

“ The following articles were taken and submitted for analysis :—

Article.	No. of samples.	Result.	Remarks.
Milk	44	Genuine.	
Milk	2	Genuine.	
Milk	1	2.32% Milk Fat. 9.45% Non-fatty Solids.	Vendor warned and further sample taken later.
Milk	1	2.40% Milk Fat. 8.72% Non-fatty Solids.	"
Milk	1	1.60% Milk Fat. 9.64% Non-fatty Solids.	"
Milk	1	2.32% Milk Fat. 9.45% Non-fatty Solids.	"
Milk	1	2.20% Milk Fat. 9.45% Non-fatty Solids.	"
Milk	1	3.95% Milk Fat. 8.05% Non-fatty Solids.	"
Milk	1	1.50% Milk Fat. 9.46% Non-fatty Solids.	"
Cream	1	46.5% Fat. Genuine.	
Cream	1	47.9% Fat. Genuine.	
Cream	1	57.8% Fat. Genuine.	
Butter	7	Genuine.	
Margarine	1	Genuine.	
Sausages	10	Genuine.	
Sausages	1	Genuine. Contained S.O.2.	Declaration re preservatives on wrapper.
Sausages	1	Genuine. Contained S.O.2.	Declaration re preservatives posted in shop.

The average percentage of milk fat and non-fatty solids in all milks (genuine and non-genuine) was 3.64% and 8.99%.

The highest fat content was 8.60% and the highest non-fatty content was 9.64%.

There were good reasons why prosecutions should not be taken in all the cases where the quality fell below the presumptive standard, and there is one case which is worth recording, viz. :—Three informal samples were taken on the same morning of a milk from one source. The first sample, taken from the producer, who is also a retailer, contained 8.60% milk fat and 8.55% non-fatty solids; the second, from a retailer supplied by the same producer, contained 3.9% milk fat and 8.65% non-fatty solids; and the third, from another retailer also supplied by the same producer, contained 1.50% milk fat and 9.46% non-fatty solids. A formal sample, taken three days later from the third retailer, contained 1.50% milk fat and 9.46% non-fatty solids. A further formal sample was taken six days later from the producer at the place of delivery to the third retailer, and this was found to contain 2.32% milk fat and 9.45% non-fatty solids. The producer was asked for an explanation, and it was found that he supplied the milk to this particular retailer from a tap at the bottom of the churn without any preliminary stirring. At a later date two samples taken from the same churn, one from the bottom and one from near the top, showed 2.20% and 3.90% milk fat respectively. The producer was warned to stir his milk, and further samples taken proved satisfactory.”

In the County (including the Borough of Kendal) in 1931, 104 samples of milk and 6 samples of cream were examined for preservatives. In none of these samples were preservatives found.

PUBLIC HEALTH (VENEREAL DISEASES) REGULATIONS.

(a) Arrangements are in force whereby Westmorland patients are treated at the V.D. Clinics at the North Lonsdale Hospital, Barrow-in-Furness; at the Cumberland Infirmary, Carlisle, and at the Preston Royal Infirmary (occasionally).

There is a maternity home for unmarried mothers in Kendal (St. Monica's); all patients before admission have the Wassermann test applied. Should any prove positive they are transferred to the Hope Hospital, Leeds, for obstetric and venereal treatment.

(b) Diagnosis.

All Medical practitioners are supplied, free of cost to them, with special outfits (blood and smears) for sending specimens to the Pathological Department of the University of Manchester.

(c) Attendance at V.D. Clinics.

In necessitous cases the scheme provides for the payment of the railway fares to the Clinics.

(d) Supply of Approved Drugs.

The Medical practitioners who have had previous experience in the administration of approved drugs have been supplied with these drugs.

The distance of the Clinics is a disadvantage, but the incidence of venereal disease in this County does not warrant the opening of a centre.

All practitioners have been informed about the Scheme and the facilities offered, and they frequently make use of the diagnosis outfits.

By means of the Westmorland Branch of the Social Hygiene Council special lectures have been given as detailed in previous reports.

During 1931, 67 blood specimens were sent to the Public Health Laboratory, Manchester, of which 16 gave a positive result, and 51 were negative.

Six other specimens were all negative for gonococci.

In 1931, 12 patients underwent treatment at the Clinics.

Notifiable Diseases,* 1931.

DISEASES.	Total	Under 1 year	Age Group												Admitted to Hospital.	Deaths	Under 1 year	Age Group											
			1	2	3	4	5	10	15	20	35	45	65 and over	1				2	3	4	5	10	15	20	35	45	65 and over		
Diphtheria	24	1	—	1	—	1	10	6	2	2	1	—	—	19	4	—	1	—	—	—	2	1	—	—	—	—	—		
Scarlet Fever	64	1	2	1	5	4	26	13	2	9	—	1	—	60	1	—	—	—	—	—	1	—	—	—	—	—			
Pneumonia	93	3	1	2	5	4	11	5	3	18	10	16	15	3	23	2	—	—	1	1	—	—	—	1	3	5	10		
Erysipelas	26	—	—	—	—	1	—	—	—	10	—	11	4	—	—	—	—	—	—	—	—	—	—	—	—	—			
Enteric Fever... ..	2	—	—	—	—	—	—	—	1	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—			
Puerperal Pyrexia ...	10	—	—	—	—	—	—	—	—	9	1	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—			
Puerperal Fever ...	5	—	—	—	—	—	—	—	1	4	—	—	—	1	1	—	—	—	—	—	—	—	—	1	—	—			
Cerebro-Spinal Fever	1	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—			
Encephalitis Lethargica	2	—	—	—	—	—	—	1	—	1	—	—	—	1	1	—	—	—	—	—	—	—	—	1	—	—			
Ophthalmia Neonatorum	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			

*Excluding Tuberculosis.

Notifiable Diseases

DISEASE	Total	Under 1 Year				
		1	2	3	4	5
Diphtheria ...	24	1	1	—	1	10
Scarlet Fever ...	64	1	1	2	4	26
Pneumonia ...	93	3	2	2	4	11
Erysipelas ...	26	—	—	—	—	1
Enteric Fever ...	2	—	—	—	—	1
Paratyphoid Pyrexia	10	—	—	—	—	—
Paratyphoid Fever	2	—	—	—	—	—
Cerebro-spinal Fever	1	—	—	—	—	1
Roseola Infantilis	2	—	—	—	—	1
Ophthalmia Neonatorum	3	3	—	—	—	—

*Excluding Tuberculosis

**PREVENTION OF BLINDNESS.
OPHTHALMIA NEONATORUM.**

Districts.	Notified	Cases.		Vision un-impaired.	Vision impaired.	Total Blindness.	Deaths.
		Treated.					
		At Home.	In Hospital.				
Urban.							
Ambleside ..	2	2		2			
Appleby ..							
Grasmere ..							
Kendal ..							
Kirkby Lonsdale ..							
Shap ..							
Windermere ..							
Rural.							
East Westmorland ..							
South Westmorland ..	1		1	1			
West Ward ..							
Westmorland ..							

It is gratifying to observe that in no case was vision impaired.

BLIND PERSONS ACT, 1920.

This Act is administered by an ad hoc Committee appointed under a Scheme of date 1st January, 1932.

The constitution of this Committee will be found on pages 4—5. It represents the various people and agencies who have the welfare of the Blind at heart.

The Scheme provides for the registration, the care of the blind children under school age, workshop and home employment, home teaching and training, etc. These activities are carried out in Mid and South Westmorland in conjunction with the Barrow, Furness and Westmorland Society for the Blind, and in North Westmorland through the Cumberland and Westmorland Home and Workshops for the Blind, Carlisle.

The certification previous to registration of a blind person is in the hands of Dr. Wright, the Assistant County Medical Officer, who is an expert in Ophthalmology.

There are 71 blind persons on the County Register.

TUBERCULOSIS.

In the following Table are the figures for the notifications of, and deaths from, Tuberculosis in 1931:—

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	1	—	—	—	1	—
1—	—	—	—	1	—	—	—	—
5—	3	—	2	2	—	—	—	—
10—	1	2	—	1	—	—	—	—
15—	3	5	1	—	2	2	1	1
20—	10	5	1	1	6	3	—	1
25—	6	9	—	3	4	3	—	—
35—	6	3	—	—	3	1	—	—
45—	5	2	—	1	2	—	—	1
55—	3	2	—	—	1	2	—	1
65—	1	1	1	—	1	1	1	—
Totals	38	29	6	9	19	12	3	4

Total Notifications.

	Year 1931.	Average 1926-30.	Average 1921-25.
Pulmonary	... 67	56	81
Non-Pulmonary	... 17	14	17

Total Deaths.

Pulmonary	... 31	33	35
Non-Pulmonary	... 7	8	9

In 1931, 40 patients suffering from Tuberculosis received institutional treatment at the Westmorland Sanatorium, Meathop, and in addition 10 observation cases were in residence.

Dr. J. Munro Campbell, the County Tuberculosis Officer, who is also Medical Superintendent of the Westmorland Sanatorium, Meathop, kindly furnishes the following report for 1931. In his report will be found interesting details of the work undertaken at the Tuberculosis Dispensary and at the Westmorland Sanatorium. The treatment available for the patients under his care is most efficient and up-to-date. In the excellently equipped treatment room and X-ray department at the Sanatorium the latest approved methods are employed under Dr. Campbell's expert supervision.

**REPORT OF THE CLINICAL TUBERCULOSIS OFFICER.
THE YEAR 1931.**

The Kendal Dispensary, held at the Fellside School, is the main centre for the County, though there are two branch Dispensaries at Appleby and Meathop.

The usual weekly session held on Friday morning at Kendal has been augmented during the latter part of the year by an evening session between 6 p.m. and 7 p.m. on the first Tuesday of each month, and though this is a recent innovation, appreciation of it has been shown already, particularly by those whose occupation, either at home or outside, renders a morning visit inconvenient. It was found that the Appleby Dispensary only supplied a very limited district, so that now there is only one session held every three months, though in common with any other district, special visits or consultations are made on request. Meathop is used also as a Dispensary, but only when an appointment is made.

Nurse Johnston, the District Nurse for Levens, has carried out the duties of Dispensary Nurse and Tuberculosis Visitor for Kendal conscientiously and well during the year, and the same may be said for Nurse Downen, who acts in a similar capacity for Appleby. Throughout the various areas the District Nurses act as Tuberculosis Visitors, and I am glad to have the opportunity of recording my appreciation of their work in keeping me in touch with tuberculous patients.

The Ministry of Health forms have undergone several modifications for the returns concerning 1931, and several extracts are printed in the ensuing tables, as covering the work done under the County Tuberculosis Scheme.

Table XIII.

Diagnosis.	Pulmonary.				Non-pulmonary.				Total.				Grand Total
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts):													
(a) Definitely tuberculous ..	21	13	1	—	2	2	1	3	23	15	2	3	43
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	1	1	1	—	3
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	11	13	2	7	33
B.—Contacts examined during the year:—													
(a) Definitely tuberculous ..	3	2	1	1	—	1	—	—	3	3	1	1	8
(b) Diagnosis not complete ..	—	—	—	—	—	—	—	—	1	—	—	1	2
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	2	2	3	2	9
C.—Cases written off the Dispensary Register as													
(a) Recovered ..	—	—	—	—	1	—	—	1	1	—	—	1	2
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	13	15	7	9	44
D.—Number of Persons on Dispensary Register on Dec. 31st:—													
(a) Definitely tuberculous ..	82	58	4	12	5	7	7	8	87	65	11	20	183
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	2	1	1	1	5

1. Number of cases on Dispensary Register on January, 1st 159	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 9
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" 11	4. Cases written off during the year as Dead (all causes) 21
5. Number of attendances at the Dispensary (including Contacts) 308	6. Number of Insured Persons under Domiciliary Treatment on the 31st December 4
7. Number of consultations with medical practitioners: (a) Personal 35 (b) Other 45	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) 172
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes 1073	10. Number of :— (a) Specimens of sputum, examined 94 (b) X-Ray examinations made 35 in connexion with Dispensary work.
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above —	12. Number of "T.B. plus" cases on Dispensary Register on December 31st 83

All cases who desired Sanatorium treatment under the Scheme of the Public Authority were admitted to Westmorland Sanatorium, and it is satisfactory to note that the average length of stay of those discharged (excluding observation cases) was 219.6 days, and also the increase of observation cases is a satisfactory feature, illustrating a greater willingness to be admitted under this heading.

The table (XV) shows that of the 10 cases admitted for observation, 5 were discharged as non-tuberculous.

The results of treatment of the Westmorland patients is shown in Table XIV. and expresses the condition on discharge.

Table XIV.

Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residential Treatment in the Institution.													
		Under 3 months.			3-6 months.			6-12 months.			More than 12 months.			Total.	
		M.	F.	Ch	M.	F.	Ch	M.	F.	Ch	M.	F.	Ch		
Pulmonary Tuberculosis	Class T.B. minus. 14 cases.	Quiescent	2	1	-	1	3	1	1	1	-	-	-	-	10
		Not Quiescent	-	-	-	1	-	-	1	-	-	-	1	-	3
		Died in Institution ..	1	-	-	-	-	-	-	-	-	-	-	-	1
	Class T.B. plus Group 1. 4 cases.	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-
		Not Quiescent	-	1	-	1	-	-	1	-	-	1	-	-	4
		Died in Institution ..	-	-	-	-	-	-	-	-	-	-	-	-	-
	Class T.B. plus Group 2 14 cases.	Quiescent	-	-	-	-	-	-	1	2	-	-	-	-	3
		Not Quiescent	-	-	-	2	1	-	2	2	-	1	1	-	9
		Died in Institution ..	-	1	-	-	-	-	-	-	-	1	-	-	2
	Class T.B. plus Group 3 4 cases.	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-
		Not Quiescent	1	-	-	-	-	-	1	-	-	-	-	-	2
		Died in Institution ..	2	-	-	-	-	-	-	-	-	-	-	-	2
Non-Pulmonary Tuberculosis 4 cases.	Quiescent	-	-	-	-	-	-	-	1	-	-	-	-	1	
	Not Quiescent	-	-	-	-	1	-	1	-	1	-	-	-	3	
	Died in Institution ..	-	-	-	-	-	-	-	-	-	-	-	-	-	
TOTAL ..													40		

The results of treatment of the Westmorland patients shown in Table XIV, and expresses the condition on discharge

Table XIV.

Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residence in the Institution						
		Under 3 months		3 to 6 months		Over 6 months		
		M.	F.	M.	F.	M.	F.	
Primary tuberculosis	Died in Institution	..	..	..	..	..	..
		
		
	Class T.B. plus Group 1. 4 cases.	Died in Institution	..	..	..	..	..	..
		
		
	Class T.B. plus Group 2. 14 cases.	Died in Institution	..	..	..	..	..	..
		
		
	Class T.B. plus Group 3. 4 cases.	Died in Institution	..	..	..	..	..	..
		
		
Non-primary tuberculosis	Died in Institution	..	..	..	..	..	..
		
		

OBSERVATION CASES.

Table XV.

Diagnosis on discharge from observation.	For Pulmonary Tuberculosis.						For Non-Pulmonary Tuberculosis.						Totals.		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Tuberculous ..	-	2	-	-	1	-	-	-	-	-	-	2	-	3	2
Non-Tuberculous	-	1	-	-	2	2	-	-	-	-	-	-	-	3	2
Doubtful .. 3.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	-	3	-	-	3	2	-	-	-	-	-	2	-	6	4

Table XVI.

			In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year	Died in the Institution	In Institutions on Dec. 31.
Number of Patients.	Adults	M.	13	20	17	4	12
		F.	10	14	16	1	7
	Ch'd'n	M.	1	2	2	—	1
		F.	—	4	—	—	4
Number of Observation Cases.	Adults	M.	—	—	—	—	—
		F.	—	6	6	—	—
	Ch'd'n	M.	—	2	2	—	—
		F.	—	2	2	—	—
Total		24	50	45	5	24	

Dental treatment continues to prove a very necessary part of treatment, and the following work to 21 patients was carried out while at the Sanatorium:—

				1931.
Extractions	..	..	..	139
Fillings	..	..	..	-
Scalings	..	..	..	-
Dentures Repaired	..	..		2
Dentures (part) supplied			..	3
Dentures (full) supplied			..	11
Consultations	..	..		84

The nine shelters provided by the Westmorland County Council to suitable patients continue to be much appreciated and in all cases are used throughout the year. The shelters at Milnthorpe, Bonningate, Grasmere, Pooley Bridge, Yanwath and Brampton, remain in the hands of the same occupants as the previous year, but the shelters at Staveley, Kendal and Clifton were transferred during 1931 to patients at Arnside, Heversham and Askham respectively.

After-care is effected by the usual dispensary supervision and domiciliary visits by Tuberculosis Officer and nurses. The Sanatorium Benefit Sub-Committee have the power to grant extra nourishment when considered necessary in suitable cases or help with the travelling expenses to or from the Sanatorium, etc. The Kendal Charity Organisation Society have helped ex-patients or their families in various ways, and also carry out a regular visitation of patients in the Kendal district.

I would conclude by expressing my gratitude for the helpful and co-operative spirit of not only Dr. Henderson, but of all the practitioners in the County, and would assure them of my desire to serve them to the best of my ability."

BOVINE TUBERCULOSIS.

The Tuberculosis Order, 1925, is carried out by the co-operative action of the Agricultural Officer, the County Police, and the County Veterinary Inspectors.

In 1931, 106 animals were destroyed.

In the Borough of Kendal all the herds within the Borough are examined once every quarter by a Veterinary Surgeon.

The protection of the milk from Tubercle Bacilli has been receiving the consideration of your Committee. A Sub-Committee, under the Chairmanship of Dr. J. L. Cochrane, was appointed, which recommended that the biological examination of milk be systematically applied and that a sum not exceeding £300 per annum be expended on the work.

VACCINATION ACTS.

The Public Vaccinators number 17, and there are 4 Vaccination Officers. (See page 4).

In the following Table will be found the various vaccination districts, and the figures are compiled from the returns of the Vaccination Officers respecting the vaccination of children whose births were registered from 1st January to 31st December, 1930.

Consideration of these figures shows that after allowing for the children who died unvaccinated, for postponement, and for removals, only 46 per cent. of the children born in 1930 had been vaccinated by the end of 1931.

Clearly there is need for improvement here by a fuller realisation by parents of the protection against Smallpox conferred by vaccination. The fortunate absence of Smallpox in the County for many years may have created a false sense of security. Yet it has to be remembered that Smallpox during recent years has made its appearance not so very far away from our doors.

Registration Sub District comprised in Vaccination Officer's District.	No. of Births registered from 1st January to 31st Dec., 1930	Successfully Vaccinated.	No. Statutory Declarations of Conscientious Objection.	Died Un-vaccinated.	Number of these births which on 31st January, 1932, remained un-entered in the Vaccination Register on account of:—			Number of these births remaining on 31st Jan., 1932, neither duly entered in the Vaccination Register nor temporarily counted for in the Report in the Book.
					Postponement by Medical Certificate.	Removal to Districts the Vaccination Officers of which have been duly appraised.	Removal to places unknown, or which cannot be reached; and cases not having been found.	
Milnthorpe ..	121	85	26	4	—	—	4	
Kirkby Lonsdale ..	66	45	14	3	—	—	3	
Ambleside ..	126	72	41	5	4	—	2	
Kendal ..	291	81	155	17	7	1	26	
Lowther ..	51	28	7	4	—	2	9	
Morland ..	72	17	41	2	—	2	10	
Appleby ..	104	37	52	10	—	1	—	
Kirkby Stephen ..	75	23	44	6	—	—	—	
Orton ..	59	12	39	6	1	—	—	
Total ..	965	400	419	57	12	6	54	

CANCER RESEARCH IN WESTMORLAND.

The sudden death of Dr. Sambon just as he was engaged in preparing his report on his two years epidemiological survey of Cancer incidence in Westmorland is a severe blow to the Voluntary Committee who co-operated with him in his Field Research. The Committee feel they have lost in Dr. Sambon a man of wide learning, intuition and originality.

An excellent example of team-work among the medical men, the veterinary surgeons and the general public, this voluntary effort received not only generous financial aid but help in all directions.

Dr. Sambon first inquired into the geographical distribution of cancer as recorded in the available death certificates reaching back many years. He mapped out on the spot the distribution of the cases. In certain selected areas, with the aid of experts from the British Museum, he investigated the ecology of these areas whereby much work was done in the study of the fauna and their external and internal parasites. This survey revealed a high incidence of cancerous growths not only among domesticated animals and fowls but in rats, voles, frogs and wild birds.

Dr. Sambon had collected a large amount of material, had isolated various parasites, especially of the order of Acarida, and was working out their possible role as animate irritants suspected to be playing a part in setting up a cancerosis, when he was taken suddenly from his labours.

Dr. Cockill, who is Hon. Secretary of the above Committee, in his Annual Report as Medical Officer of Health for the Westmorland Combined Districts, thus refers to Dr. Sambon's investigations :—

“ The report of the Westmorland Field Commission for Cancer has not yet been completed ; the death of Dr. Sambon, who directed the investigations and was engaged in preparing the report, leaves the Committee in an unfortunate position ; it will be difficult to find anyone who will be able to utilise the mass of material which has been collected and prepared. That Cancer might be combated in a similar manner to that employed for certain infectious diseases was a theory which Dr. Sambon was trying to establish and other

workers have produced considerable evidence that it is quite possible that the "cell theory" on Cancer may have to be modified; Drs. Gye and Purdy summarise their recent work in these words:— 'Cancer is a cell reaction to a living intracellular virus, the reaction manifesting itself in cell growth.' This opinion, though not generally held, was entertained by Dr. Sambon as a probability and he approached the question from a different standpoint, seeking for further light on the subject."

HEALTH EDUCATION.

The Ministry in Circular 1206, Section 4 (c), ask for:—

- (c) A statement of any special action taken during the year in the area to arouse public interest in the prevention of ill-health.

The outstanding feature of the year 1931 has been the very important advances that have been made in the study of dietetics, especially in connection with the protective properties of certain accessory food factors known as Vitamins.

The Committee of the Medical Research Council on Dental Disease has published an interim report on "The influence of Diet on Caries in Children's Teeth" in which are detailed the remarkable results of Mrs. Mellanby's investigations and experiments.

These experiments point the way to the prevention of dental disease in children's teeth and to the dietetic ways and means whereby children may build up strong teeth which defy decay.

So far-reaching and important are these findings that in conference with the County Dental Surgeon and the Medical Officers of the Infant Welfare Centres we decided to concentrate on dietetics on our health education work.

One of the vitamins—Vitamin D—the calcifying vitamin, has been proved to play an important part in the development of strong teeth and even in the arrest of decay. It is found in certain food stuffs. The substance which is richest in this vitamin is Cod Liver Oil. Recently it has been isolated and can be obtained in pure form as Ergosterol.

The lesson to be learned and applied by these discoveries is that the expectant mother should be given foods rich in Vitamin D and that the infant and small child should have such foods in their dietary.

Consideration has been given also to the value of Vitamin A, which has the power of helping the body to ward off infection.

To put these findings of recent research and discovery into words understandable by the people and to see that the new teaching is applied has been the main activity in our health teaching during 1931 and is being continued and extended.

Thanks to the County Federation of Women's Institutes this Organisation is wide-spread in the County so that the majority of the women resident in the County have access to local Institutes. The Medical Officers of the County Public Health Staff and the Medical Officer of Health for the Westmorland Combined Districts are on the rota of lecturers.

This provides these Officers with a ready-made audience keenly interested in health matters. In 1931 among other health topics that of "Food and Your Money's Worth" was dealt with, when the nutritional and economic aspects of food were considered.

SURVEY BY MEDICAL OFFICERS OF MINISTRY OF HEALTH.

While this report was being prepared, a survey of the County was made by Dr. Maitland of the Ministry of Health assisted by Dr. Isabella Cameron. We had the valued help of Dr. Maitland from 28th June to 9th July.

The various health activities were inquired into, hospitals and institutions were visited and most helpful conferences were held with District Medical Officers, Governors of Voluntary Hospitals and Members of the Public Health Committee. The Chairman of your Committee and the Clerk of the County Council took part in conferences throughout the survey. The Local Government Act, 1929, has far-reaching effects and has largely extended the duties entrusted to the County Council so that Dr. Maitland's presence at this juncture was of the utmost value.

The time which Dr. Maitland most kindly gave to his survey enabled him to visit many parts of our mountainous area and to appreciate the local circumstances under which the work is carried out. I desire to thank Dr. Maitland for his help and guidance, his understanding insight and his many valued suggestions.

I gladly take this chance to thank Dr. Wright, the Assistant County Medical Officer, for her valuable help, involving many long journeys when supervising midwives, conducting welfare centres or visiting mothers and infants in lonely homes difficult of access.

I desire also to record my appreciation of the capable services of Miss Garnett whose clerical help ranges over a wide field, greatly extended in view of the Local Government Act, 1929.

To Dr. Cockill, the Medical Officer of Health for the Westmorland Combined Districts, to Dr. J. Munro Campbell, the County Tuberculosis Officer and to the Doctors practising in the County, my sincere thanks are due for their helpful co-operation.

I am greatly indebted to my Chairman and to you the members of the Public Health Committee for your interest in, and wise guidance of, the work of your County Health Department.

I am,

Your obedient servant,

W. ELMSLIE HENDERSON.

