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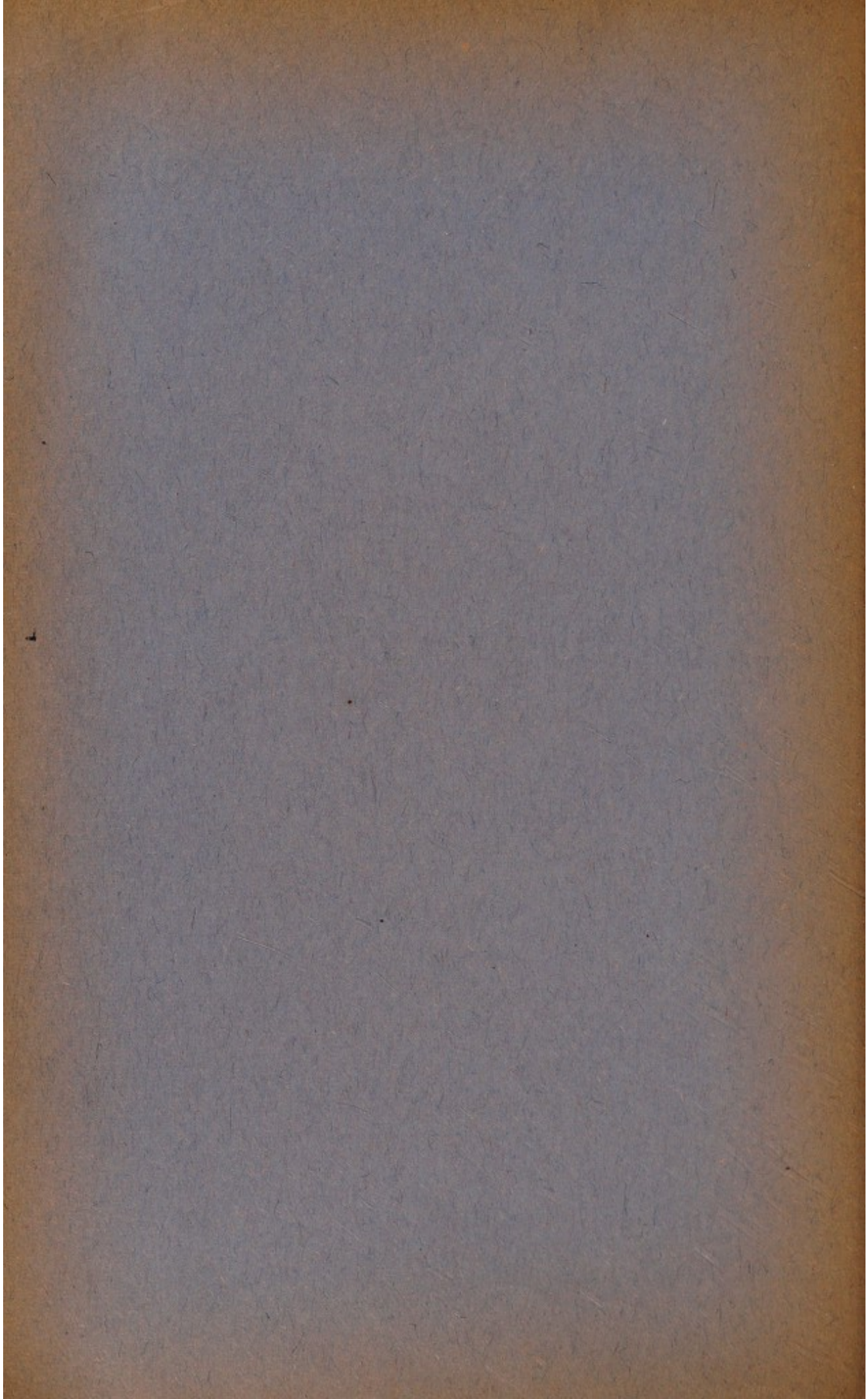


ANNUAL REPORT

of the

COUNTY MEDICAL
OFFICER OF HEALTH

THE YEAR 1932



Westmorland County Council



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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.

J. T. GREGORY.

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.

LADY MAUREEN STANLEY.

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. R. J. 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.

DR. J. L. COCHRANE.

C. E. GREENALL.

H. L. GROVES.

F. W. HARRISON.

W. H. WALLACE,

Appointed by the Westmorland County Insurance Committee :—

Messrs. DR. CRAIG.

D. GRAHAM.

Mrs. CUMBERLAND.

Blind Persons Act Committee.

Chairman : S. A. MOOR, Esq.

Appointed by Westmorland County Council :—

Col. W. D. CREWDSON,

Messrs. 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.	"	Public Analyst.
J. Bateman	—	Vaccination Officer	"	Registrar, etc.
J. Hodgson	—	"	"	"
E. S. Jackson	—	"	"	"
A. O. Reed	—	"	"	"

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. W. H. 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>
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.**

I have the honour to present the following Annual Report on the Health of the Administrative County of Westmorland for the year ended 31st December, 1932.

The Report follows the directions of the Ministry of Health Circular (1269) as to the contents of the Annual Reports of County Medical Officers of Health. The main feature of the year under review has been the consolidating of the plans for discharging the additional duties placed on the County Council by the Local Government Act, 1929.

I have the honour to be,

Your obedient servant,

WILLIAM ELMSLIE HENDERSON.

County Medical Officer.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	504,917
Population (Census 1931)	65,398
Population (Reg. General's estimate, 1932) ...	64,480
Reduced Rateable Value as on 1st April, 1932 ...	£384,399
Estimated product of a Penny Rate (General County) for the financial year 1932-33	£1,496

Seven urban and 3 rural districts are comprised within the administrative County of Westmorland. Together they form the Combined Westmorland Districts and employ one whole-time Medical Officer of Health. Their respective acreage and population will be found on page 8.

In terms of the Local Government Act, 1929, a re-arrangement of these Districts has been considered by the County Council in conference with the various Districts, and the proposals of the County Council have now been lodged with the Ministry of Health.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total.	Males.	Females.
Live Births—(Legitimate	841	428	413
(Illegitimate)	55	30	25
Birth Rate	...	...	13.9
Still Births	46	Rate per 1,000 total births	48.8
Deaths	885	Death Rate	13.7
Deaths from Diseases and Accidents of pregnancy and childbirth:—			
From Sepsis	3	From other causes	1
Death Rate of Infants under 1 year of age:—			
All infants per 1,000 live births	...	...	67
Legitimate infants per 1,000 legitimate live births	...	...	69
Illegitimate infants per 1,000 illegitimate live births	...	...	36
Deaths from Measles (all ages) ... ..	...	...	4
„ „ Whooping Cough (all ages) ... ..	...	...	4
„ „ Diarrhoea (under 2 years of age) ... ..	...	...	2

POPULATION, 1932.

DISTRICT.	Area in Acres: (Land and Inland Water).	Population.	
		Census 1931.	Registrar General's estimate for 1932.
URBAN.			
Ambleside ...	4,425	2,343	2,288
Appleby	1,877	1,618	1,610
Grasmere	7,333	988	804
Kendal	2,700	15,575	15,790
Kirkby Lonsdale	3,254	1,370	1,477
Shap	2,081	1,227	1,201
Windermere ...	9,902	5,701	5,640
RURAL.			
East Westmorland	183,771	10,717	10,600
South Westmorland	169,702	18,954	18,660
West Ward ...	119,872	6,905	6,410
Westmorland ...	504,917	65,398	64,480

THE CENSUS OF 1931.

In April 1933, the detailed analysis for Cumberland and Westmorland (Part 1) was published.

The following are some of the main facts revealed :—

In the past intercensal period, a decrease of 338 persons in Westmorland (or 0.5 per cent.) occurred simultaneously with an increase of 5.5 per cent. in the Country as a whole.

“ It must be borne in mind,” writes the Registrar General, “ that intercensal comparisons may be subject to reservation in respect of seasonal differences in the circumstances attending the respective Censuses . . . at the Census of 1921 the populations of many holiday and health resorts were inflated by visitors drawn from industrial and residential areas.”

The 1931 Census called for a return of the “ usual residence ” of each individual irrespective of the address at which he or she was enumerated. As showing the attraction of Westmorland as a tourist resort, the visitors numbered 14 per 1,000 enumerated. Grasmere stands highest with a rate of 150 visitors per 1,000 enumerated, followed by Windermere with 26, and South Westmorland with 25 per 1,000 enumerated.

As regards housing the dwellings in the County now number 16,788 as compared with 15,207 in 1921, so that the net effect of all new building, structural alteration, demolition and conversion to other uses during the 10 years has resulted in an increase of 1,581 or 10.3 per cent. of the earlier figure.

Table 11 of the Analysis provides interesting information as follows :—

	Cumberland (with associated C.B.)		Westmorland		England and Wales
	1931	1921	1931	1921	1921
Rooms per dwelling (occupied and vacant)	4.79	4.92	5.37	5.71	5.15
Private families per occupied dwelling ..	1.02	1.03	1.01	1.01	1.12
Rooms occupied per family	4.69	4.79	5.28	5.63	4.55
Persons per room ..	.84	.92	.71	.73	.91
Persons per private family	3.94	4.40	3.74	4.11	4.14

BIRTH RATE 1932.

Birth Rate per 1,000 population.

District.	No. of Births 1932.	Birth Rate 1932.	Birth Rate 1931.	Birth Rate 1930.	Birth Rate 1929.	Birth Rate 1928.
Urban.						
Ambleside	25	10.9	8.4	11.7	9.1	11.5
Appleby	14	8.7	9.5	12.8	9.8	12.2
Grasmere	14	17.4	8.7	13.9	12.8	12.6
Kendal	220	13.9	15.0	15.5	14.2	15.8
Kirkby Lonsdale ..	20	13.5	15.1	12.0	23.2	21.8
Shap	29	24.1	18.4	20.6	22.5	24.7
Windermere	62	10.9	9.3	9.6	15.2	10.9
Rural.						
East Westmorland ..	189	17.8	16.5	20.6	18.7	18.4
South Westmorland	221	11.8	13.7	12.9	12.6	15.8
West Ward	102	15.9	17.5	17.4	20.0	17.2
Westmorland ..	896	13.9	14.3	15.1	15.1	15.9
England & Wales ..		15.3	15.8	16.3	16.3	16.7

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

Year	...	1928	1929	1930	1931	1932
No. of Births	...	1002	957	954	922	896

DEATH RATE, 1932.

Net Death Rate per 1,000 population.

District:	No. of Deaths 1932.	Death Rate 1932.	Death Rate 1931.	Death Rate 1930.	Death Rate 1929.	Death Rate 1928.
Urban.						
Ambleside	23	10.1	18.6	14.3	12.2	11.1
Appleby	21	13.0	10.1	15.3	13.5	14.0
Grasmere	14	17.4	15.0	11.6	8.1	16.1
Kendal	237	15.1	14.5	13.8	13.2	12.5
Kirkby Lonsdale	24	16.2	15.1	10.3	24.0	13.1
Shap	21	17.5	15.9	15.8	20.6	13.3
Windermere	74	13.1	15.3	12.3	12.3	15.2
Rural.						
East Westmorland	152	14.3	14.2	14.9	14.0	14.7
South Westmorland	232	12.4	12.0	10.6	12.6	12.3
West Ward	87	13.6	12.1	11.1	11.0	10.5
Westmorland	885	13.7	13.6	12.7	13.1	12.9
England & Wales	—	12.0	12.3	11.4	13.4	11.7

The chief causes of deaths in 1932, in order of fatality, were as follows:—

Cause.	No. of Deaths in 1932.	Average 1927-1931.
Heart Disease ...	195	177
Cancer ...	91	106
Cerebral Haemorrhage ...	75	71
Pneumonia ...	48	34
Other Circulatory Diseases ...	42	38
Other Deaths from Violence ...	37	28
Bronchitis ...	37	32
Congenital Debility ...	35	31
Tuberculosis of Respiratory System ...	33	33
Nephritis ...	31	33

INFANTILE MORTALITY, 1932.
Rate per 1,000 Births.

DISTRICT.	No. of Births in 1932	No. of Deaths in 1932.	Infant Mortality Rate in 1932.	Infant Mortality Rate in 1931.	Infant Mortality Rate in 1930.	Infant Mortality Rate in 1929.	Infant Mortality Rate in 1928.
Urban.							
Ambleside	25	1	40	0	148	143	0
Appleby	14	1	71	0	143	0	0
Grasmere	14	0	0	0	0	0	91
Kendal	220	19	86	119	61	62	57
Kirkby Lonsdale	20	3	150	0	0	37	40
Shap	29	3	103	90	136	0	0
Windermere	62	2	32	19	0	87	53
Rural.							
E. Westmorland	189	9	48	57	80	49	65
S. Westmorland....	221	12	54	51	48	58	49
West Ward	102	10	98	75	55	32	28
Westmorland	896	60	67	68	63	54	50
England & Wales	—	—	—	—	—	—	—

AGE INCIDENCE OF INFANTILE MORTALITY, 1932.

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	1	—	—	—	1	—	—	—	—	1
Appleby	1	—	—	—	1	—	—	—	—	1
Grasmere	—	—	—	—	—	—	—	—	—	—
Kendal	8	1	—	—	9	2	3	3	2	19
Kirkby Lonsdale	2	—	—	—	2	—	—	1	—	3
Shap	1	—	—	—	1	1	1	—	—	3
Windermere	1	—	—	—	1	—	1	—	—	2
RURAL										
E. Westmorland	5	1	—	—	6	2	—	1	—	9
S. Westmorland	7	1	—	—	8	2	1	1	—	12
West Ward	3	1	1	—	5	1	1	1	2	10
Westmorland.....	29	4	1	—	34	8	7	7	4	60

Analysis of Causes of Deaths of Infants under 1 year in 1932.

DISTRICT.	Gastritis.	Convulsions	Bronchitis	Pneumonia	Atrophy, Debility and Marasmus.	Congenital Malformation	Prematurity	Other Causes	TOTAL	Deaths in order of Fatality.
URBAN.										
Ambleside	—	—	—	—	—	—	—	1	1	} 18
Appleby ...	—	—	—	—	—	—	—	1	1	
Grasmere	—	—	—	—	—	—	—	—	—	} 9
Kendal ...	2	—	—	6	2	1	5	3	19	
Kirkby Lonsdale	—	—	—	1	—	2	—	—	3	} 8
Shap ...	—	—	—	1	—	1	—	1	3	
Windermere	—	1	—	—	—	—	1	—	2	} 3
	—	—	—	—	—	—	—	—	—	
RURAL.										
E. Westmorland	—	—	1	—	—	1	5	2	9	} 12
S. Westmorland	—	—	—	1	1	2	3	5	12	
West Ward	—	—	—	—	—	1	4	5	10	} 60
Westmorland	2	1	1	9	3	8	18	18	60	

MATERNITY AND CHILD WELFARE.

Thanks to the County Nursing Association, with its keenly interested Committee and able Honorary Secretary, the ground covered by District Nurses is increasing.

30 District Nursing Associations make available the services of their nurses as school nurses, health visitors and after-care visitors in connection with the County Tuberculosis Scheme. For these services the County Council, through the County Nursing Association, made annual payments amounting in all to £1,801 during 1932-33.

In addition to the Maternity and Child Welfare Centre held weekly in Kendal (see page 19), there are now 7 Centres held once a month. These are held at Windermere, Bowness-on-Windermere, Ambleside, Burneside, Shap, Burn Banks and Brough. Dr. Jessie Wright, the Assistant County Medical Officer, attends all these Centres, which are on a voluntary basis. Our hearty thanks are due to the various voluntary workers for their interest and practical help.

In 1932 the County Nursing Association arranged for the attendance of several nurses at post-certificate training courses. An interesting conference of nurses was held at the Ethel Hedley Orthopædic Hospital, Windermere, when the methods employed in nursing orthopædic patients were demonstrated and an interesting and helpful address was given by Mr. Platt, the Senior Orthopædic Surgeon.

Mrs. Gaddum, the Hon. Secretary of the County Nursing Association, has kindly allowed me to include the following extracts from her annual report for 1932 :—

“ In January, 1932, the Barton, Martindale and Pooley Bridge Nursing Association restarted after being in abeyance for five years, and this year the Association has kindly undertaken to extend their boundary so as to include the Westmorland part of Eamont Bridge, where the services of a nurse should be particularly appreciated.

The Appleby Association has also extended its area, and now includes Hoff, Drybeck and Burrells.

A Nursing Association has been formed at Bampton, and it is hoped to start work there in May. This will include Burn Banks and Mardale, and will fill the un-nursed area between Shap and

Askham. Up to Christmas, 1932, the Manchester Corporation had employed a nurse at Burn Banks for the benefit of their employees, and when the work there was stopped and the nurse removed she was greatly missed. This has largely been responsible for the formation of a Nursing Association in this area.

There is now only the Brough-Warcop-Asby district and Arnside unnursed in the County.

The Association is glad to notice that two local Associations have in the past year exchanged their motor cycles for motor cars. There are now 11 Associations with motor cars and 3 with motor bicycles.

Three nurses were sent by the Association to a post-graduate midwifery and ante-natal course in Liverpool last May, and the Association received the most appreciative letters from these nurses, all of them saying that they felt they returned to their districts with renewed interest in their work. One nurse has been trained and one largely assisted in her training for their C.M.B. Certificates.

A Nurses' Re-union was held in July at the Ethel Hedley Orthopædic Hospital, Calgarth Park, Windermere, by the kind permission of the Medical Director; 25 nurses were present, as well as many secretaries and social workers. Mr. Hough welcomed the nurses, and a most interesting afternoon was spent in the wards. After tea Mr. Platt, the visiting surgeon, gave a short address, which caused great pleasure.

The Association has been approached by the Central Bureau of Industrial Nursing with regard to the nursing of sick persons who are insured in the Industrial Companies for which they act. The only concern at present affected in Westmorland is the Ribble Bus Company. Their Benevolent Fund has been taken over by the Central Bureau of Industrial Nursing.

The Association has decided to co-operate with them, and local Associations have been circularised to this effect.

The Association regrets to report that during the past year two nurses have had to retire on account of ill-health, Nurse Craggs, who has been at Staveley for over 16 years, and Nurse Martindale, who has been at Burnside for over 10 years. Both nurses have always taken the greatest interest in their Public Health work, and the Association would like to take this opportunity of

expressing their appreciation of the work of these nurses. Nurse Mitchell, of Windermere, has also been ill since October and been in hospital, but the Association is glad to report that she is better and hopes to resume work at the end of March."

Mrs. Gaddum includes in her report a statement prepared by Dr. Wright on the work of the District Nurses as regards health visiting. In this statement Dr. Wright reports as follows:—

"Of the 30 District Nurses at work in Westmorland in 1932, 22 registered as midwives, but only 17 practised regularly as midwives.

In addition to their work among the sick, every one of these Nurses acts as Health Visitor to infants and pre-school children, ante-natal cases and tuberculosis cases; she is also the School Nurse. In this way 550 infants have been kept under observation and 5,150 visits have been made to them. This indicates an average of 9 visits per infant, which signifies a very satisfactory supervision of infant life in these areas. 4,804 visits were paid to children over 1 year and under the school age; 1,920 ante-natal visits were made, and 374 expectant mothers were kept under observation.

In 130 maternity cases District Nurses acted as midwives, and in 262 cases as maternity nurses in conjunction with a doctor. All these figures approximate closely to the corresponding figures for the previous year.

Visits to cases of tuberculosis numbered 1,169.

With regard to school visiting, 510 visits in respect of cleanliness were made in homes, 701 visits were made to schools, and 3,116 following-up visits were made for the purpose of encouraging and assisting the parents to carry out the suggestions made at the School Medical Inspections.

All this work is an important link in the chain of preventive medicine, and in a populous district should occupy a considerable proportion of the Nurse's time. The need for special experience in health visiting should be borne in mind by Nursing Associations when engaging new nurses, and in districts where there is a large and scattered population it is very necessary that a satisfactory means of transport should be available for the Nurse if she is to keep up to the ideal standards of health visiting as well as sick nursing.

At the six Infant Welfare Clinics organised so admirably by voluntary local committees I greatly appreciate the assistance of the Nurses. 310 children attended at these centres.

Acting as Supervisor I paid 78 visits to District Nurses, and in the course of my visit inspected the records of work, and in many cases paid health visits with the Nurse. In addition I make a quarterly inspection of the Nurse's records of all infants.

I have found a very excellent standard of nursing efficiency throughout the County.

In areas still un-nursed the wish for a District Nurse is often expressed to me. During the year when acting as Health Visitor in these areas I paid 267 visits to children under 5 years; 120 of these visits were to infants.

In two unnursed areas, Burn Banks and Brough, I have instituted infant clinics for observation and advice on feeding and management. In both cases I am greatly indebted to the local organising committees and to the Hon. Secretary of the County Nursing Association for her very practical help at Brough.

In May, 1932, I attended in London a Conference of Inspectors of Midwives. This Conference, which lasted a week, was concerned chiefly with recent developments in ante-natal work, and many Maternity Hospitals, Ante-natal Clinics, etc., were visited. Our Nurses have been much interested in hearing about these methods."

The following table gives the figures for 1932 as regards visits by the Nurses in connection with Maternity and Child Welfare in the County.

VISITS UNDER THE COUNTY MATERNITY AND CHILD WELFARE SCHEME.

	By Nurses.	Dr. Jessie Wright.	Total.
Expectant Mothers visited	374	2	376
Total visits	1,920	2	1,922
Infants visited	550	67	617
Total visits	5,150	120	5,270
Children, 1-5 years			
Total visits	4,804	147	4,951

In addition to the above, the figures for the Borough of Kendal, as kindly furnished by Dr. Cockill, the Medical Officer of Health of the Westmorland Combined Districts, are added as follows :—

No. of times the Centre has been open	...	52
No. of babies under one year attending	...	114
No. of children 1-5 years ...	...	115
		— 229
No. of consultations for babies	...	1223
No. of consultations for children	...	820
No. of consultations for mothers	...	291
No. of consultations for expectant mothers	...	141
		— 2475
Average no. of babies attending for session	...	23.3
Average no. of children attending for session	...	15.7
Average no. of mothers attending for session	...	5.6
Average no. of expectant mothers for session	...	2.7
		— 47.3
Number of expectant mothers admitted to hospital under the Maternity and Child Welfare Act	...	16

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

First visits to infants under 12 months	...	206
Subsequent visits	...	841
Visits to children 1-5 years of age	...	367
First visits to expectant mothers	...	64
Subsequent visits	...	84
Still birth enquiries	...	11
Infant Death	...	11
Attendance at Centre	...	48
Visits to Institutions	...	7
		— 1659

Summary of Nurse Hughes' Work (Kendal District Nurse).

Visits to cases of Ophthalmia Neonatorum ... 120

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

There are 5 Infant Protection Visitors ; 4 of them are Relieving Officers, while in the Borough of Kendal Nurse Petersen acts in this capacity.

The figures for the County are as follows :—

Number of Persons receiving children for reward at the end of the year 1932 ...	...	...	15
Number of children on the Registers :			
(1) At the end of the year ...	...	...	16
(2) Who died during the year ...	...	...	0

It has been arranged that as from the 1st July, 1933, the work of the Infant Protection Visitors be transferred to the District Nurses.

School Children.

The work of the School Medical Service is in reality Child Welfare Work. In 1932, including the Borough of Kendal, the Nurses paid 3,956 visits to the homes in connection with children found defective at school medical inspection. 2,741 children had dental treatment, 7,566 had dental inspection, 703 had their eyes tested by refraction and 3,778 had medical inspection. Twelve 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 104 children are on the register of the after-care clinics and come up for periodic examination.

Nursing in the Home.

Thirty District Nursing Associations employ Nurses for this work. The County Nursing Association encourages, 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. Eleven District Nursing Associations have provided their nurse with a motor car, which has proved of the utmost

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 ..	"	"
" ..	Burnside ..	"	"
" ..	Brough ..	"	"
" ..	Burnbanks ..	"	"

CLINICS AND TREATMENT CENTRE

Name.	Situation.	Accommodation
.. ..	Town Hall, Kendal	Waiting Room, Dark Room, Room
.. ..	Abbot Hall, Kendal	Waiting Room, Recovery Room, Room
.. ..	"	Waiting Room, Plaster Room, Room
.. ..	Penrith	Waiting Room, Room
.. ..	Ethel Hedley Hospital, Calcarth Park	Waiting Room, Room
.. ..	Fellside, Kendal	Waiting Room, Dressing Room, Room
.. ..	Methop, Sands	Waiting Room, X-ray Room, Room
.. ..	Bottlebarrow	Waiting Room, Room
.. ..	Abbot Hall, Kendal	Waiting Room, Room
.. ..	Ambleside	Waiting Room, Room
.. ..	Windermere	.. ..
.. ..	Bowness	.. ..
.. ..	Shap	.. ..
.. ..	Harneside	.. ..
.. ..	Brough	.. ..
.. ..	Burnbank	.. ..

value when the wide and hilly nature of the nursing areas is considered, while the use of such a car helps to extend the nursing area.

MIDWIVES ACTS, 1902 & 1918.

Dr. Jessie Wright, the Assistant County Medical Officer, who acts as Inspector of Midwives, reports as follows:—52 Midwives notified their intention to practise in the County in 1932. Of these 30 were District Nurses, 6 practised in the Maternity Department of the County Hospital, Kendal, 4 at St. Monica's Maternity Home for unmarried mothers at Kendal, one at the Poor Law Institution. The remaining 11 were in private practice, 2 of them being bona-fide midwives.

The following notifications from Midwives were received in 1932:—

Form of Notification of sending for Medical Aid	...	88
„ Still Birth	... ..	4
„ Artificial Feeding	... ..	5
„ Laying out dead body	... ..	12
„ Liability to be a source of infection		4
„ Notification of Death	... ..	3
„ Attending for more than 10 days		1

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

Under the above Regulations, 9 cases of Puerperal Pyrexia and 1 case of Puerperal Fever were notified in 1932.

MATERNAL MORTALITY.

In 1932 there were 4 deaths from diseases of pregnancy and parturition.

To combat this mortality the Maternity and Child Welfare Committee have through the County Nursing Association increased the number of District Nursing Associations employing trained nurses with the C.M.B. certificate, extended the ante-natal supervision and have met the cost of nurses attending refresher courses

as well as the cost of training for the C.M.B. certificate. The Maternity Department at the County Hospital, Kendal, continues to fulfil a useful purpose.

The accommodation for unmarried mothers has been extended and improved. The Carlisle Diocesan Moral Welfare Association has taken over and equipped Dalton House, Kendal, which provides increased accommodation both as to wards, day-rooms and nurseries, while the extensive grounds afford greater seclusion.

NURSING HOMES REGISTRATION ACT, 1927.

Under the above Act there were in 1932, 9 registered Homes, of which 6 were for Maternity and general nursing and 3 for maternity only. During 1932 one application for registration as a Maternity Home was received. The application, after inspection of the premises, was granted. The registration in this case was subsequently cancelled at the request of the applicant who had found it impossible to continue the Home.

CO-OPERATION WITH THE NATIONAL HEALTH INSURANCE.

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, is in close touch with the work of the National Health Insurance.

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.

Under the Local Government Act, 1929, the County has been divided into two areas for Public Assistance Administration, namely, North Westmorland and South Westmorland. There has been no change in the personnel of the various District Medical Officers, nor in the districts assigned to them.

LABORATORY FACILITIES.

The examination of sputum for the Tubercle Bacillus is 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.

As will be seen on page 40, milk samples are examined bacteriologically and biologically at the Pathological Laboratory, Cumberland Infirmary, Carlisle.

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

LABORATORY REPORT, 1932.

DISTRICT.	Diphtheria.	Enteric Fever.	Paratyphoid.	Tubercle (Sputum).	Gonococcus.	Organisms.	Meningococcus.	Blood Organisms.	Anemia.	Cyto-diagnosis.	Vaccine Culture.	Urine.			Water.		Milk.		TOTALS.
												Bacilluria.	Glycosuria.	Deposit.	Analysis.	B. Coll.	Bacterial Count.	B. Coll.	
URBAN.																			
Ambleside ...	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Appleby ...	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3
Grasmere ...	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3
Kendal ...	156	-	-	25	8	-	1	1	9	1	3	23	2	1	226	11	11	280	
Kirkby Lonsdale	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5
Shap ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Windermere ...	58	-	-	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	62
RURAL.																			
East Westmorland	13	-	-	-	-	-	-	-	-	-	-	1	-	-	4	5	-	-	23
South Westmorland	57	1	4	11	3	2	-	2	13	2	1	1	-	-	12	11	17	154	
West Ward ...	10	1	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-	14
TOTALS	302	4	5	36	13	5	1	3	22	3	4	27	2	2	18	42	28	28	545

HOSPITAL ACCOMMODATION.

In my Annual Report for 1930 detailed information was given as to the various Hospitals and Institutions available for the infectious sick, for medical and surgical patients, for mental illness, etc. It is unnecessary to repeat this information in the present report. Your Committee is at present in conference with the Local Health Authorities as to the provision of Isolation Hospital Accommodation in the County.

MENTAL DEFECTIVES.

Increased accommodation has, during 1932, been secured for Mental Defectives owing to the extensions at Dovenby Hall Colony in Cumberland. The present certified accommodation is 185, as follows:—

Medium to High Grade females	over 16	...	40
do.	do.	under 16	...
			25
Medium to High Grade Males	over 16	...	60
do.	do.	under 16	...
			60

Dovenby Hall, in its extensive grounds, has been transformed into an excellently equipped Colony with tailor's, shoemaker's and joiner's shops, farm and gardening activities, etc. Colonists are of the medium and high grade trainable type.

MILNTHORPE MENTAL HOME.

The type in residence is the low grade defective. The accommodation reserved is as follows:—

Females	under 16	...	...	22
do.	over 16	...	...	24
Males	under 16	...	...	15
do.	over 16	...	...	24

THE ROYAL ALBERT INSTITUTION, LANCASTER.

No definite number of places is reserved in this Institution. There are at present 20 cases maintained here by the Joint Committee. The Joint Committee for the Mentally Defective represent the Counties*of Cumberland and Westmorland and the City of Carlisle.

ORTHOPÆDIC TREATMENT.

The Ministry ask for particulars of the arrangements made for the prevention, treatment and after-care of crippling conditions.

In 1920, through the generosity of Mr. O. W. E. Hedley, of Briery Close, Windermere, this excellently equipped Orthopaedic Hospital at Calgarth Park, Windermere, became available for children from the Counties of Westmorland, Cumberland and parts of Lancashire.

At this Hospital prevention of crippling is aimed at by the treatment at the earliest possible moment of, for example, congenital club-foot, or of acute Poliomyelitis as soon as diagnosed. The treatment at this Hospital is conducted by visiting Orthopaedic Surgeons from Manchester, while after-care is secured at the various after-care centres which are regularly visited by a team from the Hospital.

AMBULANCE FACILITIES.

1. Infectious Diseases.

In the Southern section of the County, the Corporation of Kendal owns a motor ambulance for the transport of such cases to the Kendal Isolation Hospital. To this hospital cases are admitted from Kendal, Grasmere, Ambleside, Windermere (Diphtheria only), South Westmorland, Grange and Carnforth. The Urban District Council of Windermere own a horse-drawn ambulance for the transport of cases of Scarlet Fever to the Windermere Isolation Hospital. In the Northern area, the Ormside Isolation Hospital Joint Board own a motor ambulance for the transport of infectious cases from Appleby and Shap Urban Districts and from the West Ward and East Westmorland Rural Districts.

2. Non-Infectious and Accident Cases.

The transport of the sick and accident cases to the County Hospital, Kendal or to the Westmorland Sanatorium, Meathop, and other Hospitals is most efficiently organised. This is due to the fine work of the Kendal, Windermere and Ambleside Divisions of the St. John Ambulance Brigade. Thanks to Dr. Cockill, the Commissioner for the N.W. District, the Kendal Division of the St. John Ambulance can rightfully claim a very high record for efficiency.

In the more populous areas of South Westmorland, Kendal, Windermere and Ambleside, through which an enormous motor traffic passes, there is available motor ambulance transport centred at Kendal, Windermere and Ambleside.

The members of the St. John Ambulance Divisions, both men and women, give their voluntary services to aid in the transport of the sick and accident cases.

The thanks of the whole community are due to these "serving brothers and sisters" for timely aid to the sick and injured.

HOUSING.

In my report for the year 1931 an account was given as to work done by Mr. Corbett, the County Housing Inspector, in pursuance of Part IV of the Housing Act, 1930, and the Housing (Rural Authorities) Act, 1931.

During 1932 the following works were completed under the Housing (Rural Workers) Act, 1926 :—

Four cottages reconditioned at Kirkby Thore. Roofs raised, windows enlarged, separate wash-houses, conversion of earth closets into water closets, new drainage connecting to sewer.

Grant of £300 made.

Four cottages reconditioned at Ravenstonedale. New bedrooms provided, also scullery and pantry. Separate privies for each house. Two wash-houses built. New drains. Yard paved. Walls picked and pointed.

Grant of £100 made.

An old house at Sockbridge had its walls raised; new timbers for roof, bedrooms improved, windows enlarged, sanitary improvements.

Grant of £100 made.

A grant of £75 was made towards the cost of the conversion of a stable and barn into a dwellinghouse. The owner considering the grant inadequate has not proceeded with the scheme.

A scheme for the reconditioning of two cottages at Soulby is in progress.

Your Committee sees to it that the aim of this Act is carried out so that the tenants who will benefit are genuine agricultural workers and not the "week-end cottage" folk.

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 1932 :—

County Analyst's Office,
Darlington,
3rd January, 1933.

1. During the 12 months ended the 31st December, 1932, I have analysed 79 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	...	...	37
From the Kendal Division	...	...	42
			—
Total	...	...	79
			—

The number of samples shows an increase of 3 over the total number submitted during the year 1931.

2. The result of the analysis 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 is shown :—

No. of milk samples submitted	...	...	54
No. of samples of other articles submitted	...	...	25
			—
			79
			—
No. of samples adulterated or below standard	...	...	11
No. of samples of doubtful quality	...	...	0
No. of appeal samples	...	...	4
No. of samples taken in course of delivery as ref. samp.	...	...	0
No. of persons cautioned	...	...	4
No. of persons summoned	...	...	0
No. of cases in which no action taken	...	...	7
No. of cases pending at end of year	...	...	0

As no persons were summoned in connection with any offence under the Food and Drugs (Adulteration) Act, 1928, the question of fines and costs does not arise.

3. The percentage of adulteration for the year is 14.66; for the 12 months ended 31st December, 1931, it was 6.66. In each case all samples which have been reported otherwise than of genuine quality are included but appeal samples and reference samples are not included.

4. Of the 54 samples of milk submitted during the 12 months, 11 were returned as being adulterated or below standard, and 4 samples were taken on appeal to the cow in connection with 4 of these.

Excluding these 15 samples, the average composition of the 39 genuine milk was as follows :

Non-fatty solids	...	...	8.77%
Fat	...	...	3.80%

For the previous 12 months the average figures were :

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

These figures are of interest in showing how constant is the quality of the milk produced in the County from year to year, particularly so far as the Non-fatty Solids are concerned; with regard to the figures for Fat, there is a marked increase.

In 4 cases out of the 11 samples reported against there was found to be a deficiency in Non-fatty Solids, while the other 7 samples were deficient in Fat.

Further investigation of 4 cases resulted in 4 appeal samples being submitted, and of these 2 samples were deficient in Non-fatty Solids and 2 samples were genuine.

The percentage of adulteration for Milk during the past year was 22.00 and for the previous 12 months the figure was 10.00; in neither case are appeal or reference samples included.

5. Other Samples.

Altogether 25 samples, representing 18 articles falling under this heading were submitted for analysis during the year, the nature and number of which are given in the following table:—

Almonds, Ground	...	1
Arrowroot, Ground	...	1
Cinnamon, Ground	...	1
Cocoa	...	1
Cocoanut, Desiccated	...	1
Coffee	...	2
Cream	...	2
Cream of Tartar	...	1
Custard Powder	...	1
Lard	...	2
Margarine	...	2
Milk, Condensed	...	1
Oatmeal	...	1
Pepper	...	1
Rice, Ground	...	2
Sugar	...	1
Sweets	...	1
Tea	...	3

The whole of these samples complied with the requirements of the Food and Drugs (Adulteration) Act, 1928; it is noteworthy that in no case was the addition of any preservative detected.

(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 1932, states:—

“The following articles were taken and submitted for analysis :

Article.	No. of samples	Result.	Remarks.
Milk	43	Genuine.	
Milk	1	1.95% Milk Fat. 9.08% Non-fatty Solids.	Deprived of 35% milk fat. Vendor warned
Milk	1	2.80% Milk Fat. 8.90% Non-fatty Solids.	Contained 6% of added water. Vendor warned
Milk	1	2.90% Milk Fat. 8.61% Non-fatty Solids.	Deprived of 3.4% Milk Fat
Cream	7	Genuine.	Free from Preservative and thickening substance
Butter	9	Genuine.	
Brawn	3	Genuine.	Free from preservative.
Pork Sausage ..	4	Genuine.	"
Pork Sausage ..	1	Genuine. Contained 220 parts of S.O.2.	Declaration re preservative on wrapper.
Beef Sausage ..	3	Genuine.	Free from preservative.
	73		

The highest fat content was 11.70 per cent. and the highest non-fat content was 9.35 per cent.

The average percentage of milk fat and non-fatty solids in all milks (genuine and non-genuine) was 3.99 per cent. and 8.59 per cent.

PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912.

	No. of samples examined for presence of preservatives.	No. of samples in which preservative was found to be present.
Milk	45	Nil.
Cream	7	Nil.

PUBLIC HEALTH (VENEREAL DISEASES) REGULATIONS.

(a) Arrangements are in force whereby Westmorland patients are treated at the V.D. Clinic 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 (S. 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 1932, 54 blood specimens were sent to the Public Health Laboratory, Manchester, of which 6 had a positive result, 43 were negative, 4 doubtful and one was not examined.

Six other specimens were examined for gonococci of which one was positive, and the remaining 5 negative.

In 1932, 8 patients underwent treatment at the Clinics.

PREVENTION OF BLINDNESS.

Ophthalmia Neonatorum.

In 1932 one case of Ophthalmia Neonatorum was notified from Kendal. The infant was treated at home successfully, and no impairment of vision resulted.

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.

NOTIFIABLE DISEASES, 1932.

Disease.	Ambleside.	Appleby.	Grasmere.	Kendal.	Kirkby Lonsdale.	Shap.	W'mere.	E. West'd.	S. West'd.	W. Ward.	Total 1932.	Average Notified 1926-30.
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	6	—	—	1	1	4	1	13	24
Scarlet Fever	3	1	—	35	—	—	13	11	23	18	104	175
Enteric Fever	—	—	—	—	—	—	—	—	1	—	1	2
Erysipelas	—	—	—	3	—	—	1	3	2	3	12	23
Pulmonary Tuberculosis	3	2	—	21	1	—	3	6	11	5	53	56
Other forms of Tuberculosis	3	—	—	6	—	—	1	2	3	1	16	14
Pneumonia	2	3	1	17	—	—	4	17	38	13	95	94
Encephalitis Lethargica	—	—	—	1	—	—	—	1	1	—	3	4
Cerebro-Spinal Fever	—	—	—	1	—	—	—	—	2	1	4	4
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	1
Puerperal Pyrexia	—	—	—	4	1	—	—	2	2	—	9	(1927-1930) 6
Puerperal Fever	—	—	—	—	—	—	—	1	—	—	1	3
Ophthalmia Neonatorum	—	—	—	1	—	—	—	—	—	—	1	1
Malaria	—	—	—	—	—	—	—	—	—	—	—	8
Paratyphoid	—	—	—	—	—	—	—	—	1	—	1	—

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 73 blind persons on the County Register.

TUBERCULOSIS.

In the following Table are the figures for the notifications of, and deaths from, Tuberculosis in 1932 :—

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	—	—	—	—	—	—
1—	—	—	—	—	—	—	—	—
5—	4	1	1	2	2	1	1	—
10—	—	—	—	—	—	—	—	—
15—	5	9	2	1	3	1	—	—
20—	—	—	—	—	—	—	—	—
25—	2	6	—	3	4	5	—	—
35—	3	5	2	—	4	2	1	—
45—	3	7	—	1	4	2	—	2
55—	4	—	2	2	3	—	—	—
65—	2	1	—	—	2	—	—	—
Totals	23	29	7	9	22	11	2	2

Total Notifications.		Year 1932.	Average 1926-30.	Average 1921-25
Pulmonary	...	52	56	81
Non-Pulmonary	...	16	14	17
Total Deaths.				
Pulmonary	...	33	33	35
Non-Pulmonary	...	4	8	9

In 1932 47 patients suffering from Tuberculosis and 8 observation cases were admitted to the Westmorland Sanatorium, Meathop.

There were three deaths of persons who had not been previously notified as suffering from Tuberculosis. One was a meningeal case. The other two cases had both been notified in other districts, so the necessity for further notification was overlooked; neither had been resident for any length of time in the area.

The ratio of non-notified tuberculosis deaths to total tuberculosis deaths is as 1 to 12.7.

No action has been necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, nor under Section 62, Public Health Act, 1925.

Dr. J. Munro Campbell, the Clinical Tuberculosis Officer, who is also the Medical Superintendent of the Westmorland Sanatorium, Meathop, furnishes the following report for 1932, in which will be found interesting accounts of his work at the Dispensaries and at the Sanatorium. Of particular interest is his research into the condition which he calls "hay-dust" disease. This Institution is equipped for the most up-to-date methods of treatment and a new pavilion to accommodate 20 male patients was opened by Dr. Paget-Tomlinson in June, 1933.

REPORT OF THE CLINICAL TUBERCULOSIS OFFICER THE YEAR 1932.

Dispensaries.

Fellside School, Kendal—Every Friday, 11 a.m. to 12 noon.

Fellside School, Kendal—1st Tuesday in each month, 6 p.m. to 7 p.m.

Briardene, Appleby—1st Saturday in February, May, August and November, from 1-30 p.m. to 3 p.m.

Meathop, Grange-over-Sands—By appointment.

Consultations are carried out at any time, by arrangement.

There is no whole time tuberculosis nurse for the County, but the work of home visiting and reporting is carried out very satisfactorily by the various district nurses in whose area the patients may reside. Miss Hinde, the District Nurse for Levens, attends at the Kendal Dispensary, and also does all the Tuberculosis work in Kendal. Miss Downen, District Nurse for Appleby, helps at the Dispensary there and does the necessary visiting also. To the two nurses mentioned and to all the others who so kindly keep me in touch with the patients in their districts and carry out their duties with keenness and tact, I am deeply indebted. Though I do a comparatively large part of my work visiting patients at their homes, it would be impossible to control such a scattered area unless I had the co-operation of the various nurses.

It will be seen from the following report that Tuberculosis Officers and Nurses visits have increased very materially during the past year, being 251 compared to 172, and 1,237 compared to 1,078, respectively. The total number of patients on the Dispensary Register at the end of the year showed an increase of eight as compared to December, 1931, but the general figures of new cases are very similar to last year except for an increase of cases which proved to be non-tuberculous. In this connection it is of interest to record a series of cases which were seen during the period April to June, 1932, and which, for the want of more detailed information, have been labelled "hay dust" cases. Most of these cases were in the Appleby and Milnthorpe districts and were characterised by the acute onset of most severe dyspnoea, with slightly febrile temperature, irritating cough and feeling of oppression in the chest. In a few hours the patients became very cyanosed and appeared almost "in extremis." This dyspnoea disappeared very gradually, taking about 3 months to permit the person's return to work. The attacks were definitely associated with working with very dusty hay in which mould was very prevalent and though some shortness of breath had been noticeable for some considerable period, in most cases, the climax was reached by some specific act, such as clearing out the remaining hay from a barn. Unfortunately the actual causative agent has so far eluded us but it seems possible that it might be a mould infection.

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 ..	20	19	3	—	2	4	—	1	22	23	3	1	49
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	1	2	—	—	3
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	26	18	6	7	57
B.—Contacts examined during the year:—													
(a) Definitely tuberculous ..	—	1	1	1	—	—	—	—	—	1	1	1	3
(b) Diagnosis not complete ..	—	—	—	—	—	—	—	—	—	—	—	1	1
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	1	7	5	2	15
C.—Cases written off the Dispensary Register as													
(a) Recovered ..	4	1	—	3	—	—	1	—	4	1	1	3	9
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	29	28	12	10	79
D.—Number of Persons on Dispensary Register on Dec. 31st:—													
(a) Definitely tuberculous ..	81	62	7	8	6	12	6	10	87	74	13	18	192
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	1	2	—	1	4

The results of treatment of the Westmorland patients are 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. 9 cases.	Quiescent	-	-	-	-	1	-	1	-	-	-	-	-	2
		Not Quiescent	1	1	-	-	2	-	-	1	-	-	-	-	5
		Died in Institution ..	1	1	-	-	-	-	-	-	-	-	-	-	2
	Class T.B. plus Group 1. 1 case.	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-
		Not Quiescent	-	1	-	-	-	-	-	-	-	-	-	-	1
		Died in Institution ..	-	-	-	-	-	-	-	-	-	-	-	-	-
	Class T.B. plus Group 2 20 cases.	Quiescent	-	-	-	1	-	-	-	-	-	1	-	-	2
		Not Quiescent	1	-	-	2	5	-	2	3	-	1	-	-	14
		Died in Institution ..	-	-	-	-	-	-	2	1	-	1	-	-	4
	Class T.B. plus Group 3 8 cases.	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-
		Not Quiescent	1	-	-	-	-	-	-	1	-	-	-	-	2
		Died in Institution ..	1	1	1	1	-	-	2	-	-	-	-	-	6
Non-Pulmonary Tuberculosis	8 cases.	Quiescent	-	-	1	-	2	-	-	-	3	-	-	-	6
		Not Quiescent	-	-	-	1	-	-	-	-	-	1	-	-	2
		Died in Institution ..	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL ..													46		

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

Table XIV.

Duration of Residential Treatment in the Institution.										Condition at time of discharge.	Classification on admission to the Institution.				
Total	More than 12 months			8-12 months			3-6 months				Under 3 months.	Died in Institution	8 cases.	Non-Pulmonary Tuberculosis	
	M.	F.	Cp.	M.	F.	Cp.	M.	F.	Cp.						M.	F.	Cp.	Class T.B. plus Group 3	8 cases.
2	-	-	-	-	-	-	1	-	-	-	-	-	Quiescent ..	Class T.B. minus 9 cases.	Pulmonary Tuberculosis
5	-	-	-	-	1	-	-	2	-	-	1	1	Not Quiescent ..	Class T.B. plus Group 1. 1 case.	
2	-	-	-	-	-	-	-	-	-	-	1	1	Died in Institution	Class T.B. plus Group 2 20 cases.	
-	-	-	-	-	-	-	-	-	-	-	-	-	Quiescent ..	Class T.B. plus Group 3 8 cases.	
1	-	-	-	-	-	-	-	-	-	-	-	1	Not Quiescent ..	Quiescent ..	
-	-	-	-	-	-	-	-	-	-	-	-	-	Died in Institution	Quiescent ..	
2	-	-	1	-	-	-	-	-	1	-	-	-	Quiescent ..	Non-Pulmonary Tuberculosis	
14	-	-	1	3	2	-	2	2	-	-	1	1	Not Quiescent ..	8 cases.	
4	-	-	1	1	2	-	-	-	-	-	-	-	Died in Institution	8 cases.	
-	-	-	-	-	-	-	-	-	-	-	-	-	Quiescent ..	8 cases.	
2	-	-	-	1	-	-	-	-	-	-	1	1	Not Quiescent ..	8 cases.	
6	-	-	-	-	2	-	-	-	1	1	1	1	Died in Institution	8 cases.	
6	-	-	-	3	-	-	-	2	-	-	-	-	Quiescent ..	8 cases.	
2	-	-	-	-	-	-	-	-	1	-	-	-	Not Quiescent ..	8 cases.	
-	-	-	-	-	-	-	-	-	-	-	-	-	Died in Institution	8 cases.	
TOTAL .. 48															

1. Number of cases on Dispensary Register on January, 1st 188	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 7
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" 12	4. Cases written off during the year as Dead (all causes) 27
5. Number of attendances at the Dispensary (including Contacts) 322	6. Number of Insured Persons under Domiciliary Treatment on the 31st December 2
7. Number of consultations with medical practitioners: (a) Personal 53 (b) Other 64	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) 251
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes 1237	10. Number of :— (a) Specimens of sputum, examined 133 (b) X-Ray examinations made 73 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 87

All Westmorland cases, who desired institutional treatment under the public authority, were admitted to the Westmorland Sanatorium and the average length of stay of the 46 patients discharged was 192.6 days.

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 ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-Tuberculous	5	-	1	-	1	-	-	-	-	-	-	-	5	1	1
Doubtful	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	5	-	1	-	1	-	-	-	-	-	-	-	5	1	1

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.	12	21	12	8	13
		F.	7	21	17	3	8
	Ch'd'n	M.	1	2	1	1	1
		F.	4	3	4	—	3
Number of Observation Cases.	Adults	M.	—	5	5	—	—
		F.	—	1	—	—	1
	Ch'd'n	M.	—	1	1	—	—
		F.	—	1	1	—	—
Total		24	55	41	12	26	

Dental treatment carried out on patients admitted to the Sanatorium is shown in the following table:—

Table XVII.

				1932.
Extractions	..	..	..	78
Fillings	..	..	..	-
Scalings	..	..	..	8
Dentures Repaired	..	..		4
Dentures (part) supplied			..	4
Dentures (full) supplied			..	4
Consultations	..	..		51

The nine shelters belonging to the Westmorland County Council are in regular use and are situated in the following districts:—Milnthorpe, Bonningate, Grasmere, Yanwath, Brampton, Arnside, Heversham, Askham and Bowness. Except for the last mentioned which was transferred from Pooley Bridge, the shelters remain with the same tenants as last year.

In conclusion, I would once again acknowledge by indebtedness to Dr. W. E. Henderson, County Medical Officer of Health, and all other members of the medical profession, for their help and co-operation at all times.

BOVINE TUBERCULOSIS.

The Tuberculosis Order, 1925, is carried out by the Agricultural Officer, the County Veterinary Inspectors and the County Police acting in co-operation.

In 1932, 86 animals were destroyed as follows:—

Cows in milk	...	...	17
Other Cows or Heifers	...	...	68
Other Bovines	...	...	1
			86

The total compensation paid in 1932 to owners was £240 17s. 6d.

From July 1st, 1926 (when the Act came into force) to December 31st, 1932, 561 animals have been destroyed.

BACTERIOLOGICAL AND BIOLOGICAL EXAMINATION OF MILK.

In order to secure an extended control of Bovine Tuberculosis your Committee approved of the systematic sampling of milk produced for sale in the County to ascertain the Bacterial Count and the presence of the *Bacillus Tuberculosis* in the milk.

A Sub-Committee under the chairmanship of Dr. J. Lang Cochrane worked out the details of the scheme, which briefly are as follows:—A sum of £300 per annum to be expended on the undertaking. Bulk samples from the various producers to be collected by the various Sanitary Inspectors and sent in sterilized bottles to the Pathological Laboratory, Cumberland Infirmary, Copies of Bacterial Count results to be sent to the Medical Officer of Health for the Combined Districts who, through the Sanitary Inspectors, reports the results to the Producer and instructs them as to clean milk-production precautions. On receipt of report as to a sample proved to contain *Bacillus Tuberculosis* the Producer is at once notified, the herd is inspected by the Veterinary Inspector when the milk of any animal suspected is excluded from the supply, individual samples of milk are taken from such animals and at the same time a bulk sample of the milk from the rest of the herd is also taken. These "follow up" samples are tested for the presence of *Bacillus Tuberculosis*. Any cow proved to be giving such milk is dealt with under the Tuberculosis Order.

This scheme was set in force towards the end of the year under review and a full report falls to be recorded in my report for 1933, meanwhile it may be of interest to give the results so far to hand.

BIOLOGICAL EXAMINATION OF MILK.

	No. of Cows.	Samples reported on.	T.B.	
			Neg.	Pos.
14th Nov., 1932 to 10th May, 1933	1636	133	128	5
10th May—19th July, 1933	486	51	51	0
	<u>2122</u>	<u>184</u>	<u>179</u>	<u>5</u>

BACTERIOLOGICAL EXAMINATION OF MILK.

	No. of Bulk Samples.	Total Cows.	Organisms per c.c.			B.Coli Present in		
			Below 30,000.	Above 30,000	Neg. for B.Coli.	$\frac{1}{10}$ c.c.	$\frac{1}{100}$ c.c.	$\frac{1}{1000}$ c.c.
14th Nov., 1932, to 10th May, 1933 ...	176	2011	120	56	88	49	20	19
10th May,—19th July, 1933 ...	39	450	11	28	12	4	11	12
	215	2461	131	84	100	53	31	31

VACCINATION ACTS.

The Public Vaccinators number 17 while there are 4 Vaccination Officers (see page 4). Overleaf will be found a table compiled from the returns of the Vaccination Officer as to the vaccination of infants whose births were registered from 1st January to 31st December, 1931. Allowing for the infants who died unvaccinated, for postponement, and for removals the percentage of successful vaccinations to births registered is about the same as last year (45.5). The high number of unprotected infants and young children resulting from this reluctance on the part of parents to submit their children to vaccination is a matter of grave concern to the Health Authorities in the County.

Registration Sub District comprised in Vaccination Officer's District.	No. of Births registered from 1st January to 31st Dec., 1931	Successfully Vaccinated.	No. Statutory Declarations of Conscientious Objection.	Died Un-vaccinated.	Number of these births which on 31st January, 1933, remained un-entered in the Vaccination Register on account of:—			Number of these births remaining on 31st Jan., 1933, neither duly entered in the Vaccination Register nor temporarily accounted for in the Report 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	105	69	24	7	1	1	1	1
Kirkby Lonsdale	58	33	19	2	—	—	—	2
Ambleside	125	159	187	22	2	10	1	42
Kendal	300							
Lowther	74	33	15	5	—	5	6	10
Morland	65	19	33	5	1	—	2	5
Appleby	100	34	51	5	5	3	2	—
Kirkby Stephen	57	19	36	2	—	—	—	—
Orton	31	9	21	1	—	—	—	—
Total	915	375	386	49	9	21	12	60

HEALTH EDUCATION.

The Ministry of Health asks for "a statement of any special action taken during the year in the area to arouse public interest in the prevention of ill-health."

During 1932, 28 lectures, 10 of them by Dr. Wright, were given in various localities on such subjects as "Health in the Home," "Prevention of Accidents in the Home," "Diet and Teeth," "Food Values," etc. These lectures and demonstrations were given to audiences convened under various Organisations, such as the Women's Institutes, Mothers' Union, Nursing Associations, Citizens Associations, etc.

In addition, thanks to Mrs. Oxley Ingham, County Commissioner Girl Guides, lectures and demonstrations, with models and diagrams, were given at various schools by Miss de Beaumont, one of the lecturers of the Dental Board. These practical talks on the care of the teeth aroused much interest among the school children and evening meetings attended by Guides and Scouts and adolescents were also held.

The excellent posters issued by the Health and Cleanliness Council and by the Dental Board have been much appreciated by teachers and scholars in the schools where they have been displayed.

As mentioned in my annual report as School Medical Officer, medical inspection day concludes with a health talk to encourage the children to practise the health habits taught in their Hygiene lessons.

I desire again to thank very heartily my colleagues for their valued help. (Dr. Wright as Assistant County Medical Officer has conducted welfare centres in 6 widely separated localities, has supervised nurses and midwives and visited mothers and infants in remote localities. These duties she has carried out with great efficiency and has earned the confidence and esteem of the nurses.

I wish too to thank Dr. Munro Campbell for his able service as County Tuberculosis Officer and Medical Superintendent of the Westmorland Sanatorium. In him we have a helpful and courteous colleague.

As in previous years so now we work in close co-operation with the Westmorland Combined Districts. This is due to Dr. Cockill, the Medical Officer of Health for the Combined Districts, to whom our hearty thanks are due for his ever-ready help.

To the benefactors we add the doctors practising in the County whose co-operation and help we gratefully acknowledge.

The thanks of your Committee are due to Miss Garnett for her untiring industry in her many clerical duties.

I am,

Your obedient servant,

WILLIAM ELMSLIE HENDERSON.

