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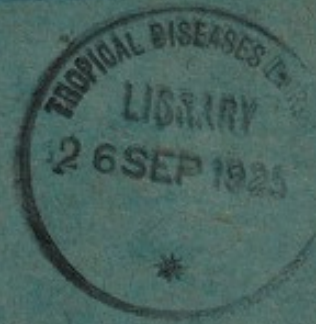
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ANNUAL REPORT

ON THE

HEALTH

OF THE

COUNTY BOROUGH OF WIGAN

FOR THE YEAR 1924.

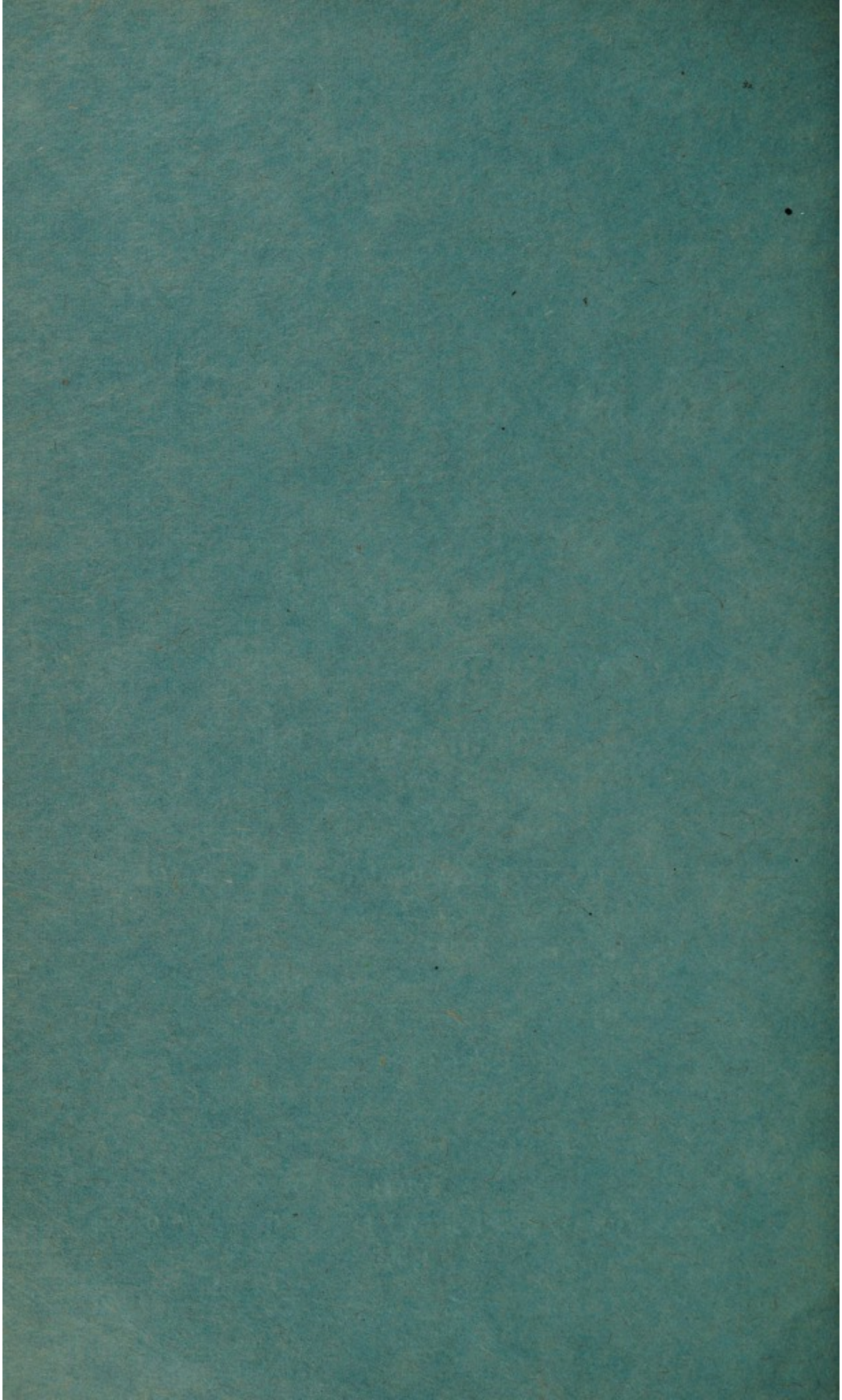


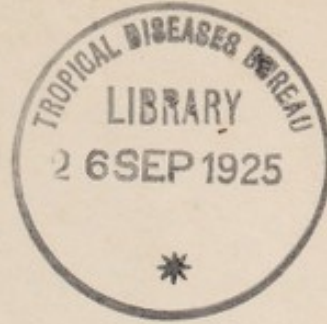
HENRY WHITEHEAD, M.D., D.P.H. (VICT.), M.B., B.S. (LOND.),
MEDICAL OFFICER OF HEALTH,
CHIEF TUBERCULOSIS OFFICER,
SUPERINTENDENT SCHOOL MEDICAL OFFICER,
MEDICAL SUPERINTENDENT OF CORPORATION
HOSPITALS, &c.

WIGAN :

THOMAS WALL AND SONS LIMITED, PRINTERS, "OBSERVER" OFFICE.

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

PUBLIC HEALTH OFFICE,

MUNICIPAL BUILDINGS,

LIBRARY STREET,

WIGAN,

June, 1925.

*To the Mayor, Aldermen and Councillors of the County Borough
of Wigan.*

I have the honour to present my Annual Report on the health of the Borough, and on the work of the Health Department, for the year 1924.

Although the death rate is higher than that of last year, it is one of the lowest recorded, namely 14·3. There has been a general rise in the average death rate for the 105 great towns, this figure being 12·3.

A severe epidemic of measles which occurred in Wigan during the latter part of the year was in a large measure responsible for the increased death rate, as 78 persons died from the disease and its complications. In 1923 there was only one death from this cause.

The infant mortality figure was adversely affected in the same way, and 107 deaths per thousand births is the rate for 1924. A greater rate of increase is recorded for the 105 great towns, being 80 in 1924, as compared with 72 in 1923.

The birth rate shows a decrease: it is 21·9, which is, however, well above the average for the country. It is worthy of notice that the birth rate in England and Wales for 1924 is the lowest ever recorded, 18·8, with the exception of war years. Sir George Newman, in his Annual Report for the year states that, "It is highly probable that the crude mortality rate is now

at or near its lowest point and will hereafter increase. This is inevitable, owing to the change in the distribution of age groups of the population; a declining birth rate implies an increase in the average age of the population."

Excellent work has been done in all branches of the Department. The four Maternity and Child Welfare Centres are well attended, and the records show great increases in attendances. Ante-natal work is gradually developing, and will still more increase as the public begin to realise its importance.

Wigan has proved itself progressive in attempting to secure a pure milk supply. As a result of propaganda, an up-to-date pasteurising plant was established in the town, and on June 27th, 1924, the Health Committee recommended that the supply of free milk under the Maternity and Child Welfare Scheme, should in future be in the form of pasteurised milk in bottles, and that the Borough Hospitals should be supplied with pasteurised milk in sealed kits. This is a great reform, and should stimulate the general public to insist on a pure, safe milk supply in bottles. As far as I am aware, this Borough is the first Authority to supply free milk in this form.

The extensive scheme for the conversion of all the privies and pails to closets on the water-carriage system is going on very satisfactorily. Additional water-closets are being provided by owners of property in order that each house may have its own convenience. This necessary sanitary reform is bound to make the town healthier and cleaner. Its effect will be still more apparent when the adjacent authorities carry out a similar scheme. (See Page 64).

The housing shortage continues to be very acute, and no definite progress can be made in dealing effectively with either insanitary areas or insanitary dwellings until the displaced persons can be housed. (See page 75).

Great efforts are being made to render fit for habitation property which is capable of being so dealt with. (See page 75).

At the Infectious Diseases Hospital, Whelley, and the Tuberculosis Hospital, Pemberton, an excellent year's work has been done.

This year, the Health and Baby Week, held from 5th October to 11th October, was very successful. The voluntary Committee was

awarded a special Certificate of Merit by the National Baby Week Council (See page 59).

My thanks are warmly extended to all the members of my staff for their loyal support and good work, and to all the voluntary helpers at the Child Welfare Centres, and those who willingly gave their services during Health and Baby Week.

I am indebted to the chief officials for their willing co-operation on all occasions.

I must also record my appreciation of the continued support and confidence of the Chairman of the Health Committee (Ald. M. Benson), and of the Chairman of the Hospital Sub-Committee (His Worship the Mayor, Councillor T. Holland), and I thank the Members of the Health Committee, and of the various Committees under whom I serve, for their courtesy and consideration.

I have the honour to be,

Your obedient Servant,

HENRY WHITEHEAD.

STATISTICAL SUMMARY FOR 1924.

	1924.	1923.
Population estimated July 1st	91,180	91,640
<i>Births</i> —Males 1016 {	Total 1,997	2,057
Females 981 }		
Annual rate of births per 1,000 on Registrar General's estimated population for 1924	21·90	22·44
Ditto for England and Wales.. .. .	18·8	19·7
Illegitimate births 71 or ·77 per 1,000 of population, a percentage of	3·55	3·74
<i>Deaths</i> —Males 670 {	Total 1,304	1,228
Females 634 }		
Corrected Death-rate, on Registrar General's estimated population	14·30	13·40
Ditto in England and Wales	12·2	11·6
Death-rate in 105 great towns	12·3	11·6
Excess of registered births over deaths	693	829
Maternal Death-rate	6·00	2·43
Total deaths from seven principal Zymotic Diseases	115	13
*Total deaths from all Zymotic Diseases	170	65
Annual rate of mortality from seven principal Zymotic Diseases	1·26	·19
Total deaths from Diarrhœa and Enteritis under two years	18	14
Death-rate (per 1,000 births) from Diarrhœa and Enteritis	9·01	6·80
Infantile-rate (deaths per 1,000 births)	107	101
Ditto for England and Wales	75	69
Ditto for 105 great towns	80	72
Deaths of infants under 1 day old (number)	16	29
Ditto 1 year (legitimate)	203	197
Ditto 1 year (illegitimate)	11	11

*Including Erysipelas and Influenza.

Acreage.—With an acreage of 5,082, and a civil population estimated at 91,180, we have 17·94 persons per acre.

The Birth-rate and Death-rate are calculated on the figures supplied for these purposes by the Registrar-General, namely, 91,180.

Births.—The number of births registered during 1924 is 1,997 (males 1,016, females 981), the rate per 1,000 of the population being 21·90. The birth-rate compared with 1923 is ·54 lower. The illegitimate births number 71 or 3·55 per cent.

The Mortality-rate.—The deaths for 1924 number 1,304 (males 670, females 634), being an excess of 36 males over females. The recorded rate per 1,000 of the population per annum is 14·30; in 1923 13·40. The increase in the number of deaths as compared with 1923 was 76—equal to a rate of ·90 per 1,000.

1.—GENERAL STATISTICS.

Area (acres)	5,082
Population (1924)	91,180
Number of inhabited houses (1921 Census)	17,747
Number of families or separate occupiers (1921 Census)..	20,368
Rateable value (1924)	£411,914 2s. 6d.
Sum represented by a penny rate.	£1,550

2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total.	M.	F.	
<i>Births</i> —(Legitimate) ..	1926	984	942	} Birth rate per 1,000 population, 21·90.
(Illegitimate) ..	71	32	39	
	<hr/> 1,997	<hr/> 1,016	<hr/> 981	
	Total.	M.	F.	
<i>Deaths</i> —	1,304	670	634	— Death-rate per 1,000 population. 14·30.
Number of women dying in, or in consequence of child-birth				{ from sepsis .. 4 from other causes.. 8
Maternal Mortality				6·00
Deaths of Infants under one year of age per 1,000 births :—				
Legitimate	105	Illegitimate	154	Total 107
Deaths from Measles (all ages)				78
„ „ Whooping Cough (all ages)				31
„ „ Diarrhoea (under two years of age)				18

INQUESTS AND UNCERTIFIED DEATHS.

The number of Inquests for 1924 is 95, against 99 for 1923, and 127 for 1922, and the following verdicts have been recorded:—

1.	Natural Causes	26
2.	Accidents—burnt	2
	„ scalded	1
	„ colliery	19
	„ falls	6
	„ drowned	2
	„ railway	2
	„ knocked down	14
	„ others	6
3.	Suicides—poison	3
	„ drowned	2
	„ cut throat	1
4.	Others	10
5.	Murders	1
		95

There were no uncertified deaths in 1924, against 1 in 1923 and 2 in 1922.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1924 AND PREVIOUS YEARS.
Name of District—Wigan County Borough.

Year.	Pop'tion estimated to middle of each year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Un-corrected number.	Number.	Rate.	Number.	Rate.	of Non-residents registered in the District.	of Residents registered in the District.	Under 1 year of age.	At all ages.	Rate	
1	2	3	4	5	6	7	8	9	Number	Rate per 1,000 nett births.	Number	Rate
1920..	90,866	2,791	2,782	30.61	1,512	16.63	123	58	346	124	1,447	15.92
1921..	91,200	2,518	2,531	27.75	1,249	13.69	93	147	296	116	1,303	14.28
1922..	91,750	2,056	2,060	22.45	1,280	13.95	109	137	221	107	1,308	14.25
1923..	91,640	2,039	2,057	22.44	1,182	12.89	91	137	208	101	1,228	13.40
1924..	91,180	1,995	1,997	21.90	1,273	13.96	107	138	214	107	1,304	14.30

* Calculated on Registrar-General's Estimated Population, July 1st, 1924—91,180;

Area of District in Acres (land and inland water), 5,082.

At Census, 1921: Total population at all ages, 89,447.

No. of separate sets of premises intended or used for habitation, 17,747.

TABLE OF DEATHS DURING THE YEAR 1924 IN THE COUNTY BOROUGH OF

Causes of Deaths.	Deaths at the sub-joined ages of "Residents" whether occurring in or beyond the District.												
	All Ages.	Under 1 year.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.	65 and over.
Enteric Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Small-Pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	78	7	38	17	8	2	6	..	..	..	..	..	..
Scarlet Fever	2	..	..	1	..	..	..	1	..	..	..	..	..
Whooping Cough	31	16	9	3	1	2	..	..	..	..	..	..	..
Diphtheria and Croup	4	..	1	1	..	..	1	1	..	..	..	..	..
Influenza	54	1	2	2	..	..	2	2	2	7	5	22	9
Erysipelas	1	..	..	..	..	..	..	..	..	1	..	..	..
Phthisis (Pul. Tub.)	60	..	..	..	..	..	4	2	9	17	13	13	2
Tuberculous Meningitis	10	1	..	2	..	..	3	2	1	1	..	..	..
Other Tubercular Diseases	14	..	2	..	2	..	2	1	..	5	1	1	..
Cancer (Malignant Disease)	69	..	..	..	..	..	..	..	..	2	8	43	16
Rheumatic Fever	8	..	..	..	..	..	1	1	1	2	1	2	..
Meningitis	12	1	4	1	2	..	..	1	1	2	..	..	..
Organic Heart Disease	84	1	1	..	..	..	1	1	3	5	5	31	36
Bronchitis	144	26	13	1	..	2	1	..	..	3	5	39	54
Pneumonia (All Forms)	137	31	36	10	10	3	1	2	1	6	12	17	8
Other Diseases of Respiratory Organs	17	1	1	..	..	..	..	..	2	1	3	5	4
Diarrhoea and Enteritis (under 2 years)	18	11	7	..	..	..	..	..	..	..	..	..	..
Appendicitis and Typhlitis	5	..	..	..	..	..	..	1	1	1	1	1	..
Cirrhosis of Liver	5	..	..	1	..	..	..	..	..	1	..	3	..
Alcoholism .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Nephritis & Bright's Disease	19	1	..	..	1	..	..	1	..	1	3	8	4
Puerperal Fever	4	..	..	..	..	..	..	..	..	3	1	..	..
Other Accidents & Diseases of Pregnancy & Parturition	8	..	..	..	..	..	..	..	..	6	2	..	..
Congenital Debility & Malfor- mation, Inc.: Prema'e Birth	86	86	..	..	..	..	..	..	..	..	..	..	..
Violent Deaths, Excl'g Suicide	36	..	1	..	2	..	2	2	1	13	6	6	3
Suicides	7	..	..	..	..	..	..	..	1	2	1	2	1
Other Defined Diseases	348	26	10	1	1	1	7	3	6	23	8	86	176
Diseases Ill-defined or Un- known	43	5	7	2	1	..	..	..	..	3	1	19	5
TOTALS	1304	214	132	42	28	10	31	21	29	105	76	298	318

WIGAN, CLASSIFIED ACCORDING TO DISEASES, AGES AND LOCALITIES.

Deaths at all Ages of "Residents" belonging to Localities, whether occurring in or beyond the District.

St. George Ward.	Lindsay Ward.	St. Catharine Ward.	St. Patrick Ward.	St. Thomas Ward.	Poolstock Ward.	Victoria Ward.	St. Andrew Ward.	Swinley Ward.	All Saints Ward.	West Pen-ber-ton Ward.	North Pen-ber-ton Ward.	Central Pen-ber-ton Ward.	South Pen-ber-ton Ward.	Total Deaths whether of Residents or Non-Residents in institutions in the district.
..
..
9	2	7	11	7	5	10	2	4	2	3	11	1	4	78
..	1	..	..	..	..	..	..	..	1	..	..	..	..	2
1	1	8	12	2	..	1	4	..	..	..	2	..	..	31
..	..	..	..	..	..	..	1	..	1	..	1	1	..	4
1	2	..	4	3	2	6	9	5	..	5	8	7	2	54
..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
3	4	2	5	4	2	4	12	5	4	3	5	1	6	60
3	1	..	4	..	..	1	..	..	..	..	..	..	1	10
1	..	..	3	..	3	..	2	1	..	..	1	..	2	14
3	6	7	10	2	3	1	7	6	5	4	5	5	5	69
..	..	..	..	..	1	..	1	1	..	2	3	..	..	8
..	..	1	1	..	2	..	1	..	1	..	4	..	2	12
8	3	5	13	2	12	5	10	8	6	..	1	8	3	84
13	15	14	15	8	11	10	17	6	9	1	8	10	7	144
10	7	19	18	14	10	12	12	7	6	5	7	4	6	137
..
3	..	3	..	..	1	..	2	2	..	1	3	..	2	17
..
1	2	..	..	5	1	1	1	..	..	1	2	1	3	18
..	..	..	..	3	..	..	..	2	..	..	..	..	..	5
..	1	..	..	..	..	1	1	..	..	1	..	1	..	5
..
2	2	..	5	2	2	1	1	1	..	..	1	..	2	19
1	..	..	..	1	1	1	..	..	..	..	..	..	..	4
..
1	1	..	..	..	..	..	3	1	..	..	1	1	..	8
..
9	3	11	9	10	7	9	7	4	3	2	6	2	4	86
4	4	3	4	3	2	3	4	..	..	3	5	..	1	36
..	..	1	1	..	..	..	3	1	1	..	..	..	..	7
24	17	36	45	22	17	18	40	26	8	19	30	26	20	348
..
5	7	7	5	5	2	2	3	4	1	1	1	..	..	43
102	79	124	165	93	85	86	143	84	48	52	105	68	70	1304

DEATH-RATE FOR WIGAN DURING THE LAST TEN YEARS.

1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
19·17	15·42	16·18	18·45	16·79	15·92	14·28	14·25	13·40	14·30

AVERAGE FOR TEN YEARS, 15·81.

NUMBER OF DEATHS IN DIFFERENT WARDS IN WIGAN, 1924.

Ward.		Census Population.	Death Totals.	Death Rate.
St. George	1	4,746	102	21·49
Lindsay	2	5,151	79	15·33
St. Catherine	3	7,858	124	15·78
St. Patrick	4	9,574	165	17·23
St. Thomas	5	4,552	93	20·43
Poolstock	6	5,275	85	16·11
Victoria	7	5,042	86	17·05
St. Andrew	8	12,473	143	11·46
Swinley	9	7,503	84	11·19
All Saints	10	3,175	48	15·11
West Pemberton	11	4,307	52	12·07
North Pemberton	12	7,390	105	14·20
Central Pemberton	13	6,245	68	10·88
South Pemberton	14	6,156	70	11·37
Totals .. .. .	..	89,447	1,304	*14·30

*Death Rate is based on the Registrar General's estimated Population of 91,180.

ZYMOTIC DISEASES.

The Mortality from the seven principal Zymotic Diseases, namely. Small-pox, Scarlet Fever, Measles, Whooping Cough, Enteric Fever, Diphtheria, and Typhus Fever, gives us a rate of 1·26 per 1,000 of the Population, against ·19 in 1923.

The deaths numbered 115 as against 18 in 1923.

The Zymotic-rate, 1.26, is made up as follows:—

								DEATH-RATES PER 1,000.—	
								1923	1924
Small-pox	..	..	..	..	..	..	..	..	..
Scarlet Fever	..	..	..	..	..	..	..	.02	.02
Measles	..	..	..	..	..	..	..	.01	.85
Whooping Cough	..	..	..	..	..	..	..	.12	.33
Typhus Fever	..	..	..	..	..	..	..	..	..
Enteric Fever	..	..	..	..	..	..	..	.01	..
Diphtheria	..	..	..	..	..	..	..	.03	.04

The Zymotic-rate during each of the four quarters was:—

								1923	1924
1st Quarter	..	..	..	..	..	..	..	.08	1.05
2nd „	..	..	..	..	..	..	..	.21	.43
3rd „	..	..	..	..	..	..	..	.26	.13
4th „	..	..	..	..	..	..	..	.20	3.37

Although the death rate and infant mortality are comparatively low for this Borough, there is ample scope for improvement. There is no doubt that a steady decline is taking place, temporarily impeded, unfortunately by unemployment and consequent poverty, the aftermath of the Great War.

Many local improvements and developments will have to be made before there is any appreciable fall in the death rate. Economy is doubtless essential, but it is a short-sighted policy to save at the expense of health. This is as true for a municipality as it is for an individual.

It was observed in the 1923 Annual Report that it was not wise to be too optimistic concerning the record low death rate as this particular year was a phenomenal one as regards low death rates.

The zymotic death rate of 1.26 for 1924, compared with that of 1923, namely, .19, shows an increased rate of 1.07. This big increase is accounted for by the severe measles epidemic which caused 78 deaths. Only one death from measles occurred in 1923.

If the zymotic death rates are deducted from the general death rates for 1923 and 1924 respectively, the figures are 13.21 and 13.04. Thus the rate for 1924 from diseases other than zymotic is less than that for 1923. Measles is extremely difficult to control. It is very highly infectious, and contrary to the common belief, it is, in fact, the most fatal disease of childhood. Many deaths are due to bad nursing and bad home conditions. A large staff of nurses for home nursing and the admission of the most severe cases into hospital, would do a great deal to lessen the death rate from this acute and often fatal disease.

Many measures to improve the health of the people have been recommended from time to time, and progress is being made in some directions.

1. *Conversions of privies and pails to closets on the water carriage system.*—The Corporation Scheme is being carried out very satisfactorily indeed. There is a fairly large area in the Borough which cannot be dealt with owing to the condition of the sewers. Efforts should be made in the near future to carry out the necessary alterations so that the area may have the benefit of improved sanitation.
2. *Provision of more and better receptacles for the storage of general household refuse, and more frequent removal.*—There has been a marked improvement in this direction. More and more standard bins are being provided, and the frequency of emptying has been increased. There should be no accumulation of refuse in back yards.
3. Carting of refuse and treatment before tipping. (See pages 15 & 61)
4. Development of Maternity and Child Welfare, and School Medical services (See page 43)
5. Better housing of the people. (See page 75.)
6. Better facilities for controlling food supplies. (See page 61.)
7. Education of the people in Health matters.

The object of National Health and Baby Week is to point out as vividly as possible the value of knowledge of the laws of health, and to demonstrate in an interesting manner how by obeying these laws disease is prevented. Nowadays it is possible for all babies to escape the danger of improper feeding, and to be protected from the diseases conveyed by dirty and tuberculous raw milk.

School children are all medically examined three or more times during school life, and parents begin to realise how important it is that early disease or abnormality should be discovered.

The Medical Officers, the Health Visitors, School Nurses, and Sanitary Inspectors all carry out propaganda work daily, both at the clinics and in the homes.

Efforts such as these are bound to have results.

There is no doubt that personal habits of the people affect the death rate. In fact, it is often possible, within limits, to pick out the areas inhabited by people with dirty or careless habits, and where vice is prevalent in any large industrial town, by observing the death rate in various districts.

Cleanliness is especially important in caring for infant life.

Excesses of various kinds shorten life.

Ventilation in homes is still neglected. The value of fresh air, sunshine, and exercise, is not sufficiently appreciated.

It must be added, however, that many people in this Borough have to live in houses which cannot be called "homes." Such unfortunate people are constantly fighting against their environment, and it is most difficult in these circumstances—over-crowded, closely packed, insanitary dwellings—to carry out what they may have learnt of the laws of health.

REMOVAL OF REFUSE.

Some progress is being made in this direction, although most of the vehicles in use are still of a high type, and rubbish blows from these about the streets. A more up-to-date method is desirable.

INFANT MORTALITY, 1924. NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER 1 YEAR OF AGE.
Name of District—Wigan County Borough.

Cause of Death.	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks & under 3 months	3 months & under 6 months	6 months & under 9 months	9 months & under 12 m'ths	Total Deaths under 1 year
All Causes—Certified	38	10	7	8	63	44	32	39	36	214
Uncertified	..	..	..	..	..	..	..	..	..	..
Small-pox ..	..	..	..	..	..	..	..	..	..	..
Chicken-pox ..	..	..	..	..	..	..	..	..	1	1
Measles ..	..	..	..	..	..	..	..	3	4	7
Scarlet Fever ..	..	..	..	..	..	..	..	..	..	..
Whooping Cough ..	..	..	..	1	1	4	5	2	4	16
Diphtheria and Croup ..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	..	..	..	..	..	..	..	..	..	..
Tuberculous Meningitis ..	..	..	..	..	..	..	..	1	..	1
Abdominal Tuberculosis ..	..	..	..	..	..	..	..	..	..	..
Other Tuberculous Diseases ..	..	..	..	..	..	..	..	..	..	..
Meningitis (<i>not Tuberculous</i>) ..	..	..	..	..	..	1	..	..	..	1
Convulsions ..	1	..	..	..	1	1	3	2	..	7
Laryngitis ..	..	..	..	..	..	..	..	..	..	..
Bronchitis ..	..	..	3	..	3	4	4	10	5	26
Pneumonia (<i>all forms</i>) ..	..	..	..	2	2	6	3	10	10	31
Diarrhoea ..	..	..	..	..	..	..	1	..	..	1
Enteritis ..	..	..	1	..	1	3	3	1	1	9
Gastritis ..	..	..	..	..	..	..	1	..	..	3
Syphilis ..	..	..	..	1	1	..	1	..	..	2
Rickets ..	..	..	..	..	..	..	..	..	..	..
Suffocation, overlying ..	..	..	..	..	..	..	..	..	..	..
Injury at Birth ..	..	..	..	..	..	..	..	..	..	..
Atelectasis ..	1	..	..	..	1	..	..	..	..	1
Congenital Malformations ..	2	1	..	..	3	1	2	..	..	6
Premature Birth ..	25	6	..	3	34	1	..	1	..	36
Atrophy, Debility and Marasmus	8	2	2	1	13	16	7	4	4	44
Other Causes ..	1	1	1	..	3	5	2	5	7	22
TOTAL ..	38	10	7	8	63	44	32	39	36	214

Nett Births registered during the calendar year—Legitimate, 1,926; Illegitimate, 71.
Nett Deaths registered during the calendar year—Legitimate Infants, 203; Illegitimate Infants, 11.

The death-rate for each quarter is as follows :—

1924	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.
All Causes ..	15.17	14.06	7.73	13.39
Zymotics ..	1.95	.48	.74	3.50

The Zymotic-rate, 1.26, shows an increase of 1.07 for 1924.

The rate for the previous year was .19.

DEATH RATES, 1924.

Disease.	No. of Deaths.	Rate.
Enteric Fever .. .. .	..	..
Small-pox .. .. .	..	..
Measles	78	.85
Scarlet Fever.. .. .	2	.02
Whooping Cough	31	.33
Diphtheria and Croup	4	.04
Influenza	54	.58
Erysipelas	1	.01
Phthisis (Pulmonary Tuberculosis)	60	.66
Tubercular Meningitis	10	.10
Other Tubercular Diseases	14	.15
Cancer, Malignant Disease	69	.75
Rheumatic Fever	8	.08
Meningitis	12	.13
Organic Heart Disease	84	.91
Bronchitis	144	1.56
Pneumonia (all forms)	137	1.49
Other Diseases of Respiratory Organs	17	.18
Diarrhoea and Enteritis (under 2 years)	18	.19
Appendicitis and Typhlitis.. .. .	5	.05
Cirrhosis of Liver	5	.05
Alcoholism .. .. .	..	..
Nephritis and Bright's Disease	19	.20
Puerperal Fever	4	.04
Other Accidents and Diseases of Pregnancy and Parturition	8	.08
Congenital Debility and Malformation (including Premature Birth)	86	.93
Violent Deaths (excluding Suicides)	36	.39
Suicide	7	.07
Other Defined Diseases	348	3.79
Diseases ill-defined or unknown	43	.46
Total	1,304	14.30

Number of Notifications, compared with other years:—

Disease.	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
Small-pox	0	0	0	0	0	0	0	0	0	0
Typhus	0	0	0	0	0	0	0	0	0	0
Scarlet.. .. .	1608	820	231	174	339	188	245	183	95	77
Enteric	45	89	29	31	21	10	28	5	25	19
Continued Fever	0	0	0	0	3	0	1	0	0	0
Diphtheria	37	37	40	29	46	64	47	73	41	25
Puerperal	4	6	4	5	7	3	3	3	1	2
Cholera	0	0	0	0	0	0	0	0	0	0
Erysipelas	83	60	48	43	66	59	73	81	52	40
Ophthalmia Neonatorum	1	13	23	13	26	29	19	7	6	5
Acute Poliomyelitis	1	0	3	3	1	1	0	0	0	0
Cerebro-Spinal Meningitis	0	0	2	3	2	1	3	0	0	1
Measles	0	285	2907	1055	126	264	0	0	0	0
Pulmonary Tuberculosis	233	178	188	197	139	136	183	195	130	123
Other Forms of Tuberculosis	107	92	134	84	70	37	59	62	72	76
Pneumonia	0	0	0	0	110	135	73	186	234	257
Influenzal Pneumonia	0	0	0	0	60	7	9	13	15	41
Dysentery	0	0	0	0	6	2	0	0	0	2
Malaria	0	0	0	0	48	25	5	9	3	0
Chicken-pox	0	0	0	0	2	3	57	338	489	547
Encephalitis Lethargica	0	0	0	0	2	1	4	0	1	7
Meningitis	0	0	0	0	0	0	1	0	0	0
Total	2151	1580	3609	1637	1074	965	810	1155	1164	1222

ANALYSIS OF NOTIFICATIONS, 1924.

Disease.	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sept.	Oct.	Nov.	Dec.	Tot.
Scarlet Fever	6	0	5	4	8	8	3	8	12	12	6	5	77
Enteric Fever	0	0	0	0	2	3	8	3	1	0	2	0	19
Diphtheria	0	3	3	3	2	4	3	1	2	4	0	0	25
Puerperal Fever	1	1	0	0	0	0	0	0	0	0	0	0	2
Erysipelas	3	1	4	5	5	3	6	0	4	1	2	6	40
Cerebro-Spinal Meningitis.. .. .	0	0	0	0	0	0	0	0	0	1	0	0	1
Ophthalmia Neon.	0	0	1	0	0	0	0	1	1	2	0	0	5
Acute Poliomyelitis.. .. .	0	0	0	0	0	0	0	0	0	0	0	0	0
Meningitis	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis	7	14	12	6	13	11	15	7	6	13	11	8	123
Other Tubercular Diseases	10	6	10	2	10	9	6	4	7	6	4	2	76
Pneumonia	31	31	28	39	13	18	8	4	13	18	19	35	257
Influenzal Pneumonia	2	0	11	16	4	2	3	0	0	3	0	0	41
Dysentery	0	0	0	0	1	0	0	0	1	0	0	0	2
Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0
Continued Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
Chicken-pox.. .. .	85	39	65	61	60	48	26	18	20	28	43	54	547
Encephalitis Lethar- gica	0	0	2	2	1	1	0	1	0	0	0	0	7
Total	145	95	141	138	119	107	78	47	67	88	87	110	1222

OPHTHALMIA NEONATORUM.

No. Notified	Cases.		Vision Unimpair'd	Vision Impaired	Total Blindness	Deaths
	Treated					
	At Home	In Hospital				
5	5	—	5	—	—	—

For a town of over 90,000 population, this small number of Ophthalmia cases is very creditable. The instructions, as set out below, are being carried out by the Midwives, hence the above excellent results.

Instructions :—

- 1.—As soon as the head is born, thoroughly cleanse the eyelids and eyelashes with clean swabs, and warm boracic lotion, using separate swabs for each eye.
- 2.—When the baby is born, put one drop of a one per cent. solution of silver nitrate in the hollow between the nose and the eye, open the lids, and tilt the head and see that the fluid runs on to the surface of the eyeball. Repeat the same process with the other eye. Silver nitrate solution may be obtained free of charge by Midwives by applying to the Health Offices.
- 3.—Allow a few minutes to elapse and then swab with warm boracic lotion, using separate swabs as before.
- 4.—Don't use the silver nitrate solution again in the same case.

Every case of Ophthalmia Neonatorum is visited at once by a Health Visitor, a smear taken of discharge, if any, to be examined for gonococci or other organisms, and a report made to the Medical Officer of Health. There was no Bacteriological evidence of gonococcal infection in the above 5 cases.

These cases are visited until cured.

SMALL POX.

No cases of this disease occurred during 1924. As a precautionary measure, Chicken Pox was compulsorily notifiable throughout the whole year. Each case was visited immediately by a Medical Officer of the Department, in order to confirm the diagnosis, and was again visited later by a School Nurse (in cases of school age) and a re-admission certificate issued when the child was free from infection.

Five hundred and forty-seven cases of Chicken Pox were notified. The inspecting and visiting of these cases entails a considerable amount of work, but is a very necessary control as long as Small Pox is prevalent.

Fourteen notified cases were found to be suffering from various skin lesions and were not Chicken Pox.

ENTERIC FEVER.

19 cases were notified, 14 cases were removed to hospital.

There were no deaths.

INCIDENCE OF ENTERIC FEVER FOR TEN YEARS.

	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
Notified Cases	67	45	89	29	31	21	10	28	5	25	19
Deaths	17	10	19	-	8	3	3	8	1	1	-
Death rate per 1,000 ..	.18	.11	.22	-	.09	.03	.03	.08	.01	.01	-

AGE INCIDENCE—YEARS.

1-4	5-9	10-14	15-19	20-24	25-29	30 and Over
3	4	-	6	2	3	1

Total Cases, 19.

Although this disease is said to be fast dying out in this country owing to better sanitation, improved water supply, and more efficient control, a fair number of cases still occur in Wigan and surrounding districts. In 1924 there were 19 cases, mostly of a severe type.

Every case is enquired into carefully by the Medical Officer of Health, the Chief Sanitary Inspector, and the Inspectorial Staff, with a view to ascertaining the source of infection.

It is interesting to record briefly.

A MILK-BORNE OUTBREAK OF PARATYPHOID B, WHICH OCCURRED IN THE BOROUGH.

“ Within a period of about ten days eight cases of paratyphoid B occurred in the Borough, and were admitted into hospital. The usual careful enquiries were made into the source of infection. It was found that the houses concerned were supplied by two milkmen. The milk was obtained by these milkmen from the same farm several miles outside the Borough. The farm was visited immediately, and in the course of a conversation with the farmer it was ascertained that five years previously he had been in hospital with typhoid fever. His three daughters had not been well; one was convalescent, and the other two were ill at the time with ‘Influenza.’

The Medical Officer of Health of the district was communicated with, and it was suggested that he should ask the practitioner attending the daughters to have a widal test done in each case, and also of the father. This was carried out and all four were returned strongly positive para-typhoid B. From a sample of faeces from the farmer B para-B. was isolated.

This man was a "carrier," and had been for five years; and he and his daughters did the milking. The daughters may have contracted the disease from the milk or perhaps from the father directly or indirectly through food of some kind.

In any case it is obvious that the father was the source of the trouble.

Milkers then may be "carriers" of such diseases or may be suffering from them in a mild form. It has been suggested that frequent, say weekly examinations of milkers be carried out. This would be an enormous and expensive affair, and even then would not lead to the detection of "carriers" who are the chief danger.

If the milk from this farm had been efficiently pasteurised no outbreak would have occurred.

No definite source of infection could be found in the other cases, and they had no connection with each other that could be traced.

It is possible in a mining district such as this that Enteric is contracted in some instances by direct contamination by the urine or fæces of a mild case or a carrier.

It is well known that, although conveniences are provided at certain points in the mines, not much attempt is made to use them, and so the workings get to a certain extent fouled with urine and excreta. It is easy to understand how a man may get infected from such deposits if there should be a carrier or a mild case about.

SCARLET FEVER.

The type as a whole has been mild. There were 77 cases notified, 68 of which were admitted to hospital, and 2 died.

During 1924 there were no return cases. This is a good index of efficiency of hospital isolation, especially with regard to condition on discharge.

DIPHTHERIA.

The number of cases notified was 25, or 16 less than in 1923, and the number of deaths 4. All cases are examined bacteriologically and have two negative swabs before discharge from hospital. 23 cases were removed to hospital, 1 of whom died.

Anti-toxin can be obtained free of charge by practitioners at:—

The Pemberton Hospital. (Tel. Pemberton 14.)

The Pemberton Police Stations.

The Wigan Police Station.

Whelley Sanatorium (Telephone 691.)

Public Health Department (Telephone 125.)

TREATMENT OF LARYNGEAL DIPHTHERIA.

Tracheotomy was performed in four cases. Three made a good recovery; one died, a baby of 12 months, who was moribund on admission, and was suffering from pneumonia as well as laryngeal obstruction.

CEREBRO-SPINAL FEVER.

Three cases of the above disease were notified, two of which were not suffering from Cerebro Spinal Fever.

ENCEPHALITIS LETHARGICA.

Seven cases were notified during the year; four were males aged 30, 38, 42 and 45 years, and three were females aged 14, 15 and 34 years.

ERYSIPELAS.

Number of cases notified	..	..	..	..	40
Number of deaths	..	..	..	..	1
Mortality per 1,000 of population	..	..	..	..	.01

PUERPERAL FEVER.

Number of cases notified	..	..	..	..	2
Number of deaths	..	..	..	..	4
Mortality per 1,000 of population	..	..	..	..	.04

TUBERCULOSIS.

The number of deaths from Pulmonary Tuberculosis is 60, against 73 in 1923, and 89 in 1922. The number of deaths from other tubercular affections is 24, against 14 in 1923, and 25 in 1922.

The rates are as follows:—

Pulmonary Tuberculosis	..	..	.65 per 1,000 of population.
Other Tuberculous Diseases	..	.26	„ „

If taken together as tuberculous affections, we have 84 deaths, or a rate of .92 per 1,000 of the population.

It is interesting to note that the incidence rate of tuberculosis continues to decline, as does also the mortality rate.

The present system of dealing with this obstinate disease is having a marked effect.

Mr. Townend, the School Dentist, devotes one session per week to cases suffering from tuberculosis.

The deaths occurred in the following Wards:—

Wards.	Pulmonary Tuberculosis.	Other Tubercular. Diseases.	Total.
No. 1—St. George	2	4	6
No. 2—Lindsay	4	1	5
No. 3—St. Catharine.. .. .	2	—	2
No. 4—St. Patrick	3	6	9
No. 5—St. Thomas	4	—	4
No. 6—Poolstock	2	3	5
No. 7—Victoria	3	1	4
No. 8—St. Andrew	9	2	11
No. 9—Swinley	4	1	5
No. 10—All Saints	4	—	4
No. 11—West Pemberton	3	1	4
No. 12—North Pemberton	5	1	6
No. 13—Central Pemberton	1	—	1
No. 14—South Pemberton	6	2	8
Transferable Deaths	8	2	10
Totals	60	24	84

The following table shows the Comparative figures for 1920, 1921, 1922, 1923, and 1924, as regards Pulmonary cases:—

	1920	1921	1922	1923	1924
Number of Notifications	136	183	195	133	123
Deaths	76	97	89	73	60
Fatality-rate per cent.	55·88	53·00	45·64	56·15	48·00
Death-rate per 1,000	·83	1·06	·97	·79	·65

	Total Cases Notified	Total Deaths
Pulmonary :—Males	69	28
Females	54	32
Total	123	60
Non-Pulmonary :—Males	38	10
Females	38	14
Total	76	24

Fatal Cases of Tuberculosis :—

Notified Cases	..	..	..	..	71
Non-notified ..	..	..	..	..	13
Total deaths	..	..	..	..	<u>84</u>

The ratio of non-notified deaths from Tuberculosis to notified is as 13 is to 71, or 15.47% of the total.

(Faint, illegible table with multiple columns and rows, likely a detailed mortality or health statistics table.)

REVIC HSTTB (LEBENSLONGE) REGISTRIERUNG 1913

STATISTISCHES BUREAU DER KÖNIGLICHEN REGIERUNG

SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM 30TH DECEMBER, 1923 TO 3RD JANUARY, 1925.

Age Periods.	Number of Notifications on Form A.												Total Notifications (i.e., including cases previously notified by other doctors)	Number of Notifications on Form B.			Number of Notifications on Form C.	
	Primary Notifications.													Total Notifications (i.e. including cases previously notified by other doctors)	Poor Law Institutions.	Sana- toria.		
	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 & up- wds.	Tot.					un- der 5	5 to 10	10 to 15	Tot
Pul. Males ..	..	2	2	6	7	4	15	18	8	2	3	67	69	..	..	..	2	94
" Females ..	1	1	5	3	9	8	18	9	2	1	..	57	59	..	..	..	1	46
Non-pul. Males ..	2	6	4	10	5	1	1	2	1	..	..	32	35	..	3	3	3	26
" Females..	1	3	9	6	3	4	3	..	..	2	..	31	33	..	5	5	..	14

SUPPLEMENTAL RETURN.

NEW CASES OF TUBERCULOSIS COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH DURING THE PERIOD 30TH DECEMBER, 1923, TO THE 3RD JANUARY, 1925, OTHERWISE THAN BY NOTIFICATION ON FORM "A" OR "B" UNDER THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

Age Periods.	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total Cases.
Pulmonary Males ..	-	-	-	-	-	-	-	2	-	-	-	2
Females ..	-	-	2	-	-	-	-	-	-	-	-	2
Non-Pulmonary: Males ..	-	2	1	-	1	-	-	-	-	-	-	4
Females ..	-	1	-	-	-	-	-	1	-	-	-	2

CASES OF TUBERCULOSIS (ALL FORMS) NOTIFIED IN 1924.

Wards.	Population, Census 1921	Pulmonary Tuberculosis	Other forms of Tuberculosis.	Totals
No. 1—St. George	4746	9	9	18
No. 2—Lindsay	5151	7	5	12
No. 3—St. Catharine	7858	5	5	10
No. 4—St. Patrick	9574	22	8	30
No. 5—St. Thomas	4652	6	1	7
No. 6—Poolstock	5275	6	5	11
No. 7—Victoria	5042	10	2	12
No. 8—St. Andrew	12473	22	9	31
No. 9—Swinley	7503	9	8	17
No. 10—All Saints	3175	3	4	7
No. 11—West Pemberton..	4307	5	9	14
No. 12—North	7390	8	3	11
No. 13—Central	6245	6	5	11
No. 14—South	6156	5	3	8
Totals	89,447	123	76	199

NUMBER OF CASES DEALT WITH DURING THE YEAR 1924.

Number of Deaths	84
Left the District	18
Found not suffering from Tuberculosis	124
Number of cases still under supervision at end of year ..	565
Notified Pulmonary	351
Notified Non-Pulmonary	175
Observation Cases	39

Sputum results:—

Positive	209
Negative	259
No Sputum	277

Treatment Received:—

Sanatorium	139
Infirmery (in-patient)	16
Extra Nourishment	145
Dispensary Supervision	774

Result of Treatment at end of year:—

Improved	258
Not Improved	109
Stationary	198
Fit for Work	256
Not fit for Work	309

ACTUAL WORK DONE DURING 1924.

Number of Notifications :	Pulmonary	..	..	..	123
" "	Non-Pulmonary	..	..	..	76
Number of Deaths	..	..	..	..	82
Number of Examinations at Dispensary :	New Cases	..	..	..	295
" "	Old Cases	..	..	..	1,358
Number of Contacts examined	..	..	..	..	239
Number of Tuberculosis Officer's visits to patients	..	..	..	..	120
Number of Nurses' visits to patients Homes	..	..	..	..	2,181
Number of Sputum examinations :	Positive	..	..	..	102
" "	Negative	..	..	..	496
Number of Disinfections	..	..	..	..	184

NUMBER OF RECOMMENDATIONS FOR TREATMENT.

Dispensary Supervision only	..	..	..	..	648
Dispensary Supervision with Extra Nourishment	..	..	..	..	203
Pemberton Hospital	..	..	..	..	95
Wigan Infirmary	..	..	..	..	16
Pendlebury	..	..	..	..	36
Other Hospitals	..	..	..	..	96
Number of Patients admitted to Pemberton	..	..	..	..	67
" " discharged from Pemberton	..	..	..	..	67
Number of Patients admitted to other Hospitals	..	..	..	..	103
" " discharged from other Hospitals	..	..	..	..	76
Number of Patients in Pemberton Hospital, Male	..	..	..	..	11
" " " Female	..	..	..	..	11
Number of Patients in other Hospitals, Male	..	..	..	..	22
" " " Female	..	..	..	..	10
Number of Cases Treated by Dentist	..	..	..	..	129
" " Examined by Dentist	..	..	..	..	217
Number of X-ray examinations at R. A. E. Infirmary, Pulmonary	65				
" " " Non Pulmonary	34				

Number of Ex-service men in whose case tuberculosis has been accepted as aggravated by or attributable to service in the Great War :—

Number 49 (included in total.)

NOTIFIED CASES ON REGISTER AT END OF YEAR 1924.

WARD	Pulmonary					Non-Pulmonary					Grand Total
	Adults		Children under 16.		Total	Adults		Children under 16.		Total	
	M.	F.	M.	F.		M.	F.	M.	F.		
St. George's ..	7	6	1	4	18	3	3	6	3	15	33
Lindsay ..	9	4	2	1	16	4	2	2	2	10	26
St. Catherine ..	17	5	2	2	26	3	4	7	3	17	43
St. Patrick ..	25	10	2	4	41	4	7	4	3	18	59
St. Thomas ..	18	7	4	4	33	2	2	2	2	8	41
Poolstock ..	10	6	3	2	21	5	2	2	2	11	32
Victoria ..	18	14	3	3	38	4	2	6	2	14	52
St. Andrew ..	26	16	5	4	51	3	2	8	3	16	67
Swinley ..	12	7	—	1	20	2	—	5	4	11	31
All Saints ..	8	3	1	—	12	1	1	4	—	6	18
Pemberton W.	5	5	1	2	13	3	3	5	3	14	27
Pemberton N.	15	7	3	3	28	3	2	3	3	11	39
Pemberton C.	8	4	2	2	16	2	4	4	5	15	31
Pemberton S.	7	7	2	2	18	2	2	4	1	9	27
Totals ..	185	101	31	34	351	41	36	62	36	175	526

The large plot of land known as the "Bottling Wood Site," has been definitely reserved for the purpose of erecting houses thereon. It was the wish and policy of the Health Committee that this land should be left as an open space adjoining the Infectious Diseases Hospital and a possible future sanatorium for the treatment of tuberculosis.

During the year, the Ministry of Health sanctioned the use of two additional beds at Pemberton Hospital, making a total of 28, and 14 additional beds in outside institutions when required. The Council granted a supplementary estimate for the latter purpose.

These added facilities will enable more cases to be treated, and more prolonged treatment for all cases. This is good, not only from the point of view of the patient, but also from the point of view of infection of others in the homes.

Pemberton Hospital, Billinge Road, is inadequate, both in size and structure for the treatment of pulmonary tuberculosis in a town of this population. Moreover, the building is badly affected by subsidence.

NON-PULMONARY TUBERCULOSIS.

A limited number of adult cases are sent to the Wigan Infirmary for treatment.

Four beds are reserved at Leasowe Hospital, which is an ideal hospital for the treatment of children suffering from surgical tuberculosis. Most of the patients have a prolonged stay, which gives such cases as spinal caries, hip disease, etc., a chance of recovery.

Some types of cases are sent to the Manchester Children's Hospital, Pendlebury.

THE TUBERCULOSIS DISPENSARY, RODNEY STREET.

This Dispensary is used jointly by the County Council and the County Borough of Wigan.

The function of a Tuberculosis Dispensary is that of a "clearing station" for cases of tuberculosis. Here all new cases are examined for the purpose of diagnosis, and future treatment; contacts are examined, and old cases visited at various periods for examination, treatment, and advice.

In order that this important and difficult work may be carried out satisfactorily, the following conditions should be complied with:—

1. A Tuberculosis Dispensary must be central. The present building fulfils this condition, but in other respects it is absolutely unsuitable.

2. It must be as free from noise as possible. The diagnosis of tuberculosis of the lungs often depends on the detection of small differences in the quality of the breathing sounds, and fine crepitations, etc., which cannot be accomplished satisfactorily in a noisy room. The Dispensary is at the corner of Rodney Street and Library Street, where there is constant traffic. Besides the ordinary traffic, it is estimated that 10 trams pass the Dispensary during the examination of a difficult early case. A pause has to be made in the examination until each tram has passed some distance beyond. This means an unnecessarily long exposure of the patient, a corresponding waste of time for the staff, and the difficulty of diagnosis is greatly increased. These conditions are constantly remarked upon by general practitioners who visit the Dispensary to examine the patients in consultation with the Tuberculosis Officer.

3. The construction of a dispensary must be suitable for dealing with this disease. In the present building the waiting rooms and the consulting rooms cannot be arranged on the ground floor. Some chest cases find it an effort to climb the stairs, and some who are unable to climb are examined in the waiting room downstairs after all the other patients have left.

4. The condition of the building must be such as will enable thorough and frequent washing down with disinfectants. The Rodney Street premises are old, and the fabric is worn out in places. The Engineer's Department have carried out temporary repairs to prevent bricks falling on to the footpath. In such buildings thorough cleansing is not possible and dust is liable to accumulate, and this increases the danger of infection.

5. Efficient ventilation and a maximum amount of natural light are essential. Propaganda work is one of the functions of a Dispensary. Ample ventilation and a maximum of natural light are essential for the prevention of tuberculosis and for the improvement of persons already suffering

from the disease. It is futile to preach such doctrines in premises where the light and ventilation are far below the standard for an ordinary dwelling house. This year, a building was erected in the yard of the Dispensary by the Electricity Department, which constitutes an obstructive building as it is almost as high as the Dispensary Buildings, and is only 7 feet from the back walls. Before this was built the ventilation and lighting of the building were not what they should have been, but now the lighting of the rooms at the back of the Dispensary is extremely bad and the ventilation considerably interfered with. Artificial light has to be constantly used in these rooms. In addition to this, light and air are very effectively shut out from the yard and back premises by a very high hoarding.

In rooms such as these, and the other rooms in the Dispensary which are indirectly involved, there is likely to be concentrated infection from the large number of patients who are continually being examined there, and any person who has to work in this building has not a fair chance of avoiding infection, although every precaution is taken against it.

When the Electrical Sub-station was erected in the yard of the Dispensary the Health Committee was assured that other accommodation would be provided at the earliest possible moment, and it was understood that when the housing of the Education Department was considered, this matter would be dealt with at the same time. It is for the Health Committee to consider what is to be offered in the way of provision for a suitable Dispensary.

It has been suggested that buildings at the far end of Rodney Street would be suitable, but again these are noisy and unsuitable. In providing Dispensary premises, the above important points should be taken into consideration, and in addition to that, it is essential that Wigan should progress with the times and provide the best treatment possible for patients suffering from this disease, and also to facilitate accurate diagnosis in the way mentioned, and by installing an X-ray plant. The provision of artificial sunlight treatment is well worth the consideration of the Committee concerned, as this form of treatment is very successful in curing or improving all kinds of tubercular infection.

WIGAN AFTER-CARE COMMITTEE

The Wigan After-Care Committee continue to do very good work. The following is an extract of the Annual Report of the Honorary Secretary, Miss L. K. Dawson, which gives the objects of the Committee. Briefly these are :—

- (1). To provide extra nourishment, mainly in the form of milk.
- (2). To help in providing extra clothing needed by patients when they go to a sanatorium ; also to provide clothing for necessitous tuberculous cases at home.

- (3). To loan bedsteads, bedding, etc., where, in the opinion of the Officers of the Committee this is desirable, either for the greater comforts of the patients or for better isolation.
- (4). In exceptional cases to assist dependents.
- (5). To help in securing suitable work, for those sufficiently recovered to undertake it.
- (6). Visiting and friendly advice.
- (7). Any other help required by tuberculous persons.
- (8). To assist in educating public opinion in matters of Health, especially in regard to tuberculosis.

During the year the average number of persons in receipt of milk per day was 72, as against 62 last year. 136 persons received extra nourishment, as against 134 last year. This increase is due mainly to the greater poverty now existing, also to the fact that a number of pre-tubercular children have been granted extra nourishment in the hope of preventing the development of the disease.

18 persons have been assisted with clothing. Of the Committee's beds 18 are on loan to patients. Bedding was provided in 12 cases, and 9 air cushions and 1 water bed loaned. During the year parcels of clothing were sent to the Pemberton Pulmonary Hospital for the use of patients there.

4.--CAUSES OF SICKNESS.

MEASLES.

During 1924 there were 78 deaths from Measles. Measles was not a notifiable disease, but 1,124 cases were reported from schools and other sources.

The micro-organism which causes measles has not yet been discovered, so prophylactic vaccine treatment is not possible.

Recent research has shown that blood serum of a convalescent case, when injected into another child, prevents infection for a certain period, and if injected into a child already suffering, reduces the severity of the disease. Although much has been done, there is not yet an acceptable preventative measure available. Even if there were such a boon, it would require public opinion to back it up.

Seeing that there are still many people antagonistic to vaccination against small pox, which is a sure preventative, it is not likely that a preventative of measles which is but in the experimental stage will be accepted by the general public.

However, knowledge is steadily growing, and the time will surely come when measles and other infectious diseases will be prevented by prophylactic inoculation of infants.

In the meantime, other methods have to be tried. Efforts are made to lessen the spread by closing the schools, Sunday schools, and places of entertainment (for children up to a certain age), and isolation of individual patients, either at home or in hospital.

It was recognised that home nursing by experienced persons would help considerably, and would result in the saving of lives. Accordingly, in October, two nurses from the Whelley Infectious Diseases Hospital were detailed to visit the cases and nurse the worst ones. A third nurse commenced this work in November. These nurses were very successful in their work, and there were many wonderful recoveries.

As measles was not at that time notifiable, other sources of information had to be relied upon.

The following pamphlet was circulated during the epidemic.

PRECAUTIONS AGAINST MEASLES.

1. Measles is a very fatal disease. In the twenty years 1903-1922, the total number of deaths from measles in Wigan was 1,027, six times the number from scarlet fever.

2. It is very highly infectious, especially in the early stage for several days before the rash appears. The early signs of the disease are coughing, sneezing, and redness of the eyes, with some degree of illness.

3. A child at school with such marks of illness should be at once sent home, and the teachers, particularly in the Infant Department, should be on the outlook for the first signs of illness if measles has made its appearance in the school or neighbourhood. The occurrence in a school of any catarrhal illness in a child, if measles has made its appearance in the school, should be considered sufficient reason for sending the child home till the nature of the illness has become plain.

4. A child suffering from measles should not be allowed to return to school until 3 weeks have passed after the appearance of the eruption.

5. Any one attacked by measles should, if possible, be placed in a separate room upstairs with a good fire burning in the room, and the window open sufficiently to admit fresh air without allowing the room to get cold. The bed should be placed in that portion of the room, not lying between the window and the fire, in which there is least draught. In summer the fire should not be large, but should not be absent. Where a separate room cannot be provided the same procedure should be carried out.

7. In view of the high mortality from the disease, parents are advised in every instance to seek medical advice.

8. Children, other than those attacked, must not attend an Infant Class until three weeks have elapsed from the date of occurrence of the measles rash in the last child attacked.

Children attending higher classes, who are not themselves suffering, must stay at home for the same period unless they have at some time had the disease, in which case they are at liberty to attend.

The same rules apply to the attendance of children at any public meeting, such as Church, Sunday School, Children's Treat, Picture Palace, etc.

9. Where a case of measles has occurred in a house, a careful outlook should be kept on the other children, so that, on the first appearance of illness, they may be kept at home and properly treated.

10. When a child at any house is suffering from measles, no neighbour's child or neighbour accompanied by a child must be admitted, nor must the child ill with measles be allowed to play with other children for 3 weeks after the appearance of the rash.

11. DISINFECTION.—Before the child attacked returns to school the following measures should be carried out. All articles of clothing worn by the sick child and the bedding and hangings of the sick room should be washed and put out to air for some days. All washable articles of furniture in the room should be washed. The walls should be cleaned down, and, if not papered, the walls should be whitewashed. In all cases the ceiling should be whitewashed. The floor should be thoroughly scrubbed. The window should be left open for several days, and the window curtains removed so as to admit as much light as possible. The skin of the child who has been ill should be thoroughly cleansed by several washings with soap and warm water.

WHOOPING COUGH.

31 Deaths occurred from this disease in 1924, and 154 cases were reported from schools and other sources.

The following pamphlet is circulated when whooping cough is prevalent.

PRECAUTIONS AGAINST WHOOPING COUGH.

1. Whooping cough is a very fatal disease. In the twenty years 1902-1922 deaths from whooping cough in Wigan were 549, or three times the number of those due to scarlet fever.

2. It is a highly infectious, and, when fully developed, is characterised by the well-known crowing sound. At the commencement of the disease there may be nothing to indicate that it is coming on, except some degree of feverish cold, taken along with the fact that it has been preceded by whooping cough in other children. Sometimes frequency of cough announces its approach.

3. A child at school, in whom there is reason to believe that whooping cough is showing itself, or who has the disease well marked, should be at once sent home, and the teachers should be on the outlook for fresh cases. Any illness in the Infant Department following on the occurrence of whooping cough should be viewed with suspicion, and the child sent home.

4. In looking for the occurrence of whooping cough among children under their charge, teachers are particularly requested to observe that this disease may be ushered in by no observable symptoms, except perhaps coughing, and that any appearance of illness should be considered sufficient grounds for sending a child home for a few days once the disease has made its appearance in the school.

5. When a child at any house is suffering from whooping cough, no child or neighbour accompanied by a child must be admitted into the house; nor should the child with whooping cough be allowed to return to school or play with other children until the "whoops" have ceased to be observed.

6. A child attacked by whooping cough should, if possible, be isolated in a room upstairs, with a fire burning in the room, and the window opened sufficiently to admit fresh air without allowing the room to get cold.

7. When one child in a house has been attacked with whooping cough the others should be watched, and any appearance of illness, especially with coughing, should be regarded as probably indicating whooping cough, and the child treated in the same manner as the one first attacked.

8. Children, other than those attacked, must not attend an Infant Class until the last child attacked has ceased coughing.

The same rules apply to the attendance of children at any public meeting, such as Church, Sunday School, Children's Treat, Picture Palaces, etc.

9. The matter coughed or spat up by the sick child must be regarded as infectious, and should be received into pieces of rag, which should be at once burned. Discharges from the nostrils should be treated in the same manner.

10. In all cases of whooping cough, medical advice should be obtained until the child is out of danger.

11. DISINFECTION.—Before the child attacked returns to school the following measures should be carried out:—All articles of clothing worn by the sick child and the bedding and hangings of the sick room should be washed and put out to air for some days. All washable articles of furniture in the room should be washed. The walls should be cleaned down, and, if not papered, the walls should be whitewashed. In all cases the ceiling should be whitewashed. The floor should be thoroughly scrubbed. The window should be left open for several days, and the window curtains removed so as to admit as much light as possible.

INFANTILE DIARRHOEA.

No cases of this Disease were notified. Posters warning the public of the danger of flies and giving instructions on the proper protection of food were displayed in prominent places all over the town.

There were 18 deaths. Enquiries were made in each of these cases.

VENEREAL DISEASES.

The treatment of Venereal Diseases is still being carried out at the R. A. E. Infirmary under this Authority's scheme. The following figures are in respect of the year 1924:—

	<i>Borough.</i>		<i>County.</i>		<i>Others.</i>	
	1923.	1924.	1923.	1924.	1923.	1924.
<i>(a) Number of persons from each area dealt with during the year at or in connection with the Out-Patient Clinic for the first time and found to be suffering from:—</i>						
Syphilis	55	29	43	33	1	1
Soft Chancre	—	—	—	—	—	—
Gonorrhœa	48	30	14	35	—	1
Conditions other than Venereal.	1	13	1	10	—	1
Total	104	72	58	78	1	3
<i>(b) Total number of attendances of all patients residing in each area</i>						
	1488	1787	814	1378	7	36
<i>(c) Aggregate number of "In-patient days" of all patients residing in each area</i>						
	296	240	118	100	—	—
<i>(d) Number of doses of arsenobenzol compounds given to patients residing in each area in the:—</i>						
(1) Out-patient Clinic	519	316	245	279	8	—
(2) In-patient Department	13	13	9	3	—	—

HOSPITAL FOR ACUTE INFECTIOUS CASES, WHELLEY.

76 Beds.

RESIDENT STAFF IN 1924.

Matron.

1 Sister.	1 Cook.
2 Charge Nurses.	2 Ward-maids.
11 Probationers.	1 Kitchen-maid.
1 Laundress.	1 Gardener.
1 House-maid	1 Assistant Gardener.
1 Waitress.	1 Boilerman.

The Medical Officer of Health personally attends the patients.

	Notifications	Removed to Hospital		Died in Hospital	
		Wigan patients.	Out-dist. patients.	Wigan patients.	Out-dist. patients.
Scarlet Fever	77	68	6	2	..
Enteric Fever	19	14	10	1	..
Diphtheria and Memb. Croup ..	25	21	2	1	..
Pneumonia	257	2	..	1	..
Influenzal Pneumonia	41	..	..	..	..
Malaria .. .. .	..	..	..	..	..
Chicken-pox	547	..	..	..	..
Erysipelas	40	1	..	..	..
Cerebro-Spinal Meningitis ..	1	2	..	1	..
Ophthalmia Neonatorum	5	..	..	..	..
Pulmonary Tuberculosis	123	..	..	..	..
Other forms of Tuberculosis ..	76	3	..	3	..
Encephalitis Lethargica	7	5	..	1	..
Puerperal Fever	2	..	..	5	..
Measles .. .. .	..	13	..	..	..
Others	2	9	..	4	..
Totals	1222	138	18	19	..

NOTE:—Death from Enteric Fever occurred on December 31st, 1924, and was registered during the week ending 3rd January, 1925.

Whelley Hospital.	Diphtheria.	Scarlet.	Enteric.	Others.	Total.
In-patients, Jan. 1, 1924 ..	3	9	2	1	15
Admitted in 1924	23	74	24	34	155
Discharged	25	76	23	18	142
Died	1	2	1	13	17
In-patients, Jan. 1, 1925 ..	0	5	1	5	11

**HOSPITAL FOR CASES OF PULMONARY TUBERCULOSIS,
PEMBERTON.**

28 BEDS.

(13 Males. 15 Females.)

(Four beds are reserved for the Lancashire County Council.)

RESIDENT STAFF, 1924.

Matron (also acts as Matron at Whelley Sanatorium).

1 Sister.	Cook.
Night Nurse.	Kitchen Maid.
Nurse.	Gardener.
Probationer.	Porter.
Ward Maid.	

The Clinical Tuberculosis Officer attends the patients.

**REVISIONS OF DIAGNOSES OF CASES TREATED AT
WHELLEY SANATORIUM.**

<i>Admitted as suffering from :</i>	<i>Revised diagnosis :</i>
Cerebro-spinal fever	Measles.
" " " " " "	"
" " " " " "	Tubercular Meningitis.
Diphtheria	Follicular tonsilitis.
" " " " " "	"
" " " " " "	"
" " " " " "	"
" " " " " "	Tonsilitis.
" " " " " "	"
" " " " " "	"
" " " " " "	Acute suppurative tonsilitis.
" " " " " "	Scarlet fever.
" " " " " "	Acute septic scarlet fever.
Influenza	Acute lobar pneumonia.
Scarlet fever	Erythema.
" " " " " "	"
" " " " " "	"
" " " " " "	Measles.
" " " " " "	"
" " " " " "	Impetigo-scalp.

<i>Admitted as suffering from :</i>	<i>Revised diagnosis :</i>
Scarlet fever	Not scarlet fever.
"	"
"	"
"	"
"	"
Typhoid fever	Lobar pneumonia.
"	"
"	Influenza.
"	Peritonitis.
"	Cerebral hæmorrhage.
"	Diarrhœa.

5.—SUMMARY OF NURSING ARRANGEMENTS ; HOSPITALS AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

Professional Nursing in the Home.—There are two Voluntary Nursing Organisations in the district, namely, the Wigan Nursing Association and the Pemberton Nursing Association. These are supported by local charities and donations. During 1924 the Wigan Nursing Association and the Pemberton Nursing Association each employed one nurse.

Pemberton Colliery Co. Ltd., also employ a nurse.

Midwives.—No midwives are employed by the Corporation. Midwives' fees are paid by the Corporation in necessitous cases only, and where Maternity Benefit under the National Health Insurance Acts is not payable. Strict enquiries are made into each case.

There were 47 midwives practising in the district on 1st January, 1924.

Clinics and Treatment Centres.—The following Clinics and Treatment Centres are provided by the Corporation :—

1. Maternity and Child Welfare Centre, Municipal Buildings, Library Street, Wigan. Mainly consultative ; treatment to a very limited extent. Open Tuesday and Thursday afternoons. School for mothers Wednesday afternoons. Five rooms and a bathroom. The Dentist attends on Tuesday afternoons for examination and treatment of expectant and nursing mothers and infants.

- | | | |
|----|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. | Maternity and Child Welfare Centre, Billinge Road, Pemberton. | Mainly consultative ; treatment to a very limited extent. Open Monday afternoons. School for mothers on Monday afternoons. |
| 3. | Maternity and Child Welfare Centre, Platt Lane Mission Room. | Mainly consultative ; treatment to a very limited extent. Open Friday afternoons. School for mothers held on Tuesday afternoons. |
| 4. | Maternity and Child Welfare Centre, Wesleyan Chapel, Worsley Mesnes. | Mainly consultative ; treatment to a very limited extent. Open Wednesday afternoons. School for mothers also held on Wednesday afternoons. |
| 5. | School Clinic, Municipal Buildings, Library Street, Wigan (See No. 1). | For minor ailments. A dentist is in attendance three mornings each week for inspection and treatment of school children. |
| 6. | Tuberculosis Clinic, 14, Rodney Street, Wigan. | Also used by County Council. Open Tuesday, Wednesday and Friday mornings and Tuesday evenings, as required, for Borough cases. A dentist is in attendance on Wednesday mornings for the inspection and treatment of tuberculous persons. Six rooms. |
| 7. | Venereal Disease Clinic, Royal Albert Edward Infirmary, Wigan. | Open Tuesdays and Fridays, 4-30 to 7, males and females. "Irrigations" by arrangement. "In-patient" treatment is also available. |

Hospitals Provided or Subsidised by the Local Authority.—The following hospitals are provided by the Local Authority within the district :—

- | | |
|---------------------|-----------------------------------------------------------------------------------------------------------------|
| Pemberton Hospital | For treatment of pulmonary tuberculosis, 28 beds, four of which are reserved for the Lancashire County Council. |
| Whelley Sanatorium. | For Infectious Diseases (other than smallpox and venereal diseases), 76 beds. |

The following hospitals and institutions are subsidised by the Local Authority, either by way of (a) an annual grant, or (b) payment for beds reserved for cases sent by this Authority.

- | | | |
|----|-----------------------------------------------|----------------------------------------------------------------------------------------|
| 1. | Sankey Small Pox Hospital
Near Warrington. | For treatment of smallpox. Payment
of £275 per annum. |
| 2. | Bowden Sanatorium,
Frodsham. | Two beds reserved for treatment of
tuberculosis. £2 10s. 0d. per
bed per week. |
| 3. | Crossley Sanatorium,
Kingswood. | Two beds reserved for treatment of
tuberculosis. £2 10s. 0d. per bed
per week. |
| 4. | Leasowe Hospital. | Four beds reserved for treatment of
surgical tuberculosis. £2 per
bed, per week. |

Other Hospitals Available for the District :—

- | | |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Royal Albert Edward Infirmary,
Wigan. | General Hospital. 152 beds. Replete
with massage, electrical, ortho-
paedic and X ray Departments.
A certain number of cases of non-
pulmonary tuberculosis are treated
there, for which payment is made
by this Authority. |
| Billinge Infirmary, Billinge. | For medical, surgical, male phthisis,
maternity and mental cases. 360
beds. There is no resident
medical officer. Under the con-
trol of the Poor Law Authorities. |
| Wigan Union. | A number of beds are available
chiefly for infirm people. There
is also a ward for infectious dis-
eases, such as venereal diseases,
scabies, etc. There is no resident
medical officer. Under the control
of the Poor Law Authorities. |

Institutional Provision for Unmarried Mothers :—

- | | |
|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| St. Margaret's Home, Goose Green,
Wigan. | Supported by charities and donations.
Grant made by Ministry of Health
and Local Authority. Accommo-
dation for eight babies and 12
girls. |
|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

Ambulance Facilities :—

- | | |
|-------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (1). For Infectious Cases. | One motor ambulance is owned by the
Health Department. |
| (2). For Non-infectious Cases
and Accidents. | Two motor ambulances owned by
Local Authority. One ambulance
owned by Royal Albert Edward
Infirmary. Two ambulances
owned by Poor Law Authori-
ties. |

Several improvements have been made at Whelley Hospital. Two bathrooms and water closets were erected, one on the Phillips' block and one on the Barnish block.

Up-to-date sanitary fittings have replaced some that were old and inefficient.

The repair, widening, and macadamising of the roads has been commenced.

6.—MATERNITY AND CHILD WELFARE.

The two new Centres established in 1923 have proved very successful. The attendances at all four centres has increased considerably. The total attendances of babies being 8,907 against 5,301 in 1923.

The primary attendances of babies were 1,274 against 1,073 in 1923. Ante-natal work is being developed and more expectant mothers are presenting themselves at the clinics.

The four schools for mothers are well attended.

The infant mortality is 107 per thousand against 101 in 1923. Of the total of 214 deaths under 1 year, 86 were due to congenital debility, malformation and premature birth, 57 due to bronchitis and pneumonia, 16 whooping cough and 7 measles.

Sir George Newman in his annual report for 1924 states "The problem of infant mortality will perhaps never be completely solved. The young of all animals pass through a perilous stage, longer or shorter. But much may be done both to reduce the peril and shorten the stage. Part of the solution of the problem is dependent upon the whole function of maternity—the health and upbringing of girls, the safe-guarding of the mother and the provision for her of all that is necessary for healthy pregnancy and safe childbirth, her post-natal hygiene and the maintenance of her health during and after the nursing period, her education and assistance in the great and vital art of mothercraft. Part of the solution is dependent upon the direct application of the principle of preventive medicine to the welfare of the infant."

It will be noticed in this report and in previous ones and indeed in all statistics that the infant mortality of illegitimate children is very much higher than the legitimate mortality rate.

As Sir George Newman points out of the alleged contributory causes the following are the most likely to be operative (1) less ante-natal care, (2) inattention at birth, (3) lack of breast feeding, (4) lack of knowledge of mothercraft.

The important fact which emerges on comparison of the figures is that adverse conditions are present from the very first day which prove disadvantageous to illegitimate children.

The Maternal Mortality is fairly high, being 6 per thousand births. Four died from puerperal sepsis, three from placenta prævia and hæmorrhage, the remaining five from eclampsia, pneumonia, pulmonary embolism,

hæmorrhage, and constant vomiting. These causes are for the most part avoidable, which clearly shows the necessity of ante-natal supervision and the establishment of a maternity home.

The health visitors visit expectant mothers in their homes, and strongly advise them to attend an ante-natal centre for examination or advice by the Medical Officer.

The difficulty here as in other places is to get information about these cases. The midwives are constantly being requested to co-operate with the Health Department in this matter.

The Health Visitors made 162 primary visits to expectant mothers during 1924.

The most striking facts to be observed from the statistics on page 16 are (1) there were 38 deaths occurring in the *first week* of life out of a total of 214, or practically one-sixth; (2) 63 deaths occurred in the *first month* of life, or over one-third,

A similar proportion was recorded in previous years. Apart from this Neo-natal period (*i.e.*, very early age) there has been a progressive steady decline in the infant mortality.

This means that more attention must be paid to the care of expectant mothers; better conditions must be provided for confinement; and more supervision must be made possible for babies in the first few months of life.

All through the country, and indeed all over the world, the Neo-natal mortality is comparatively high, and moreover shows very little signs of being reduced.

A maternity home is badly needed in Wigan, as many confinements have to take place under wretched conditions. More Health Visitors are essential if more supervision is to be provided for very young babies.

More attention is already being given to expectant mothers, and it is to be hoped that midwives will co-operate with the Department in this matter and send expectant mothers to the Clinics.

It must not be forgotten, however, that the care of babies at this very tender age is very largely an individual and personal matter, and many lives are lost by ignorance or carelessness of mothers. Many more mothers and expectant mothers should attend the School for Mothers, where they will be taught the right way. Mothercraft should be a compulsory subject for the older girls in every school. This is the time when teaching and propaganda are the most useful; this is the age when the mind is receptive and the memory retentive.

In Wigan National Health Week and Baby Week were celebrated together. A Health and Child Welfare Exhibition was held in the Old Council Chamber, and a large number of talks were given to the older school girls by the Assistant Medical Officer, and the Health Visitors. More details are given later. (See page 59.)

A great gathering of mothers and babies was held in the Drill Hall, which was opened by the Mayor, Councillor Cavey, J.P. Tea and entertainment were provided, and various certificates and prizes distributed by the Mayoress.

A monthly summary of work done by this branch of the Health Department is submitted at each meeting of the Maternity and Child Welfare Committee.

SUMMARY OF VISITS PAID BY THE HEALTH VISITORS DURING THE YEAR 1924.

No. of primary visits to births	..	..	..	..	2058
„ visits to infants under one year	..	..	..	..	3744
„ „ infants over one year and under two years	..	..	..	..	2970
„ „ infants over two and under three years	..	..	..	..	3006
„ „ infants over three and under four years	..	..	..	..	2819
„ „ infants over four and under five years	..	..	..	..	3077
„ „ expectant mothers	..	..	..	..	162
„ „ cases of Ophthalmia Neonatorum	..	..	..	..	1
„ „ cases of Measles	..	..	..	..	53
„ „ cases of Diarrhoea	..	..	..	..	34
„ „ re deaths from Diarrhoea	..	..	..	..	34
„ „ re deaths under one year	..	..	..	..	122
„ „ still births	..	..	..	..	65
„ „ to midwives	..	..	..	..	110
„ other visits	..	..	..	..	731

The following is a summary of the attendances at the Clinics during the year 1924.

Clinic.	Children		Total.	Mothers.	Expect mothers.	Primary cases.	Cases examined by medical attendant.
	under 12 mths.	over 12 mths.					
Central	1566	1642	3208	2619	113	644	1626
Platt Lane ..	1278	972	2250	1945	48	283	1106
Billinge Road ..	952	780	1732	1419	24	223	862
Worsley Mesnes	801	916	1717	1478	25	124	751
Totals	4597	4310	8907	7461	210	1274	4345

SCHOOLS FOR MOTHERS.

3,431 Attendances were made by mothers during the year 1924.

Dr. Aileen Williams now spends two-thirds of her time in Maternity and Child Welfare Work.

The scheme of hours of attendance is given below.

Dr. Williams now personally supervises the Midwives.

The following Centres are open from 2-30 p.m. to 4-30 p.m. on the days mentioned in the table below :—

<i>Centre.</i>	<i>Time open.</i>
Wigan Central Clinic, Municipal Buildings, Library Street	Tuesday and Thursday of each week. School for Mothers on Wednesday.
Pemberton Clinic, 15, Billinge Road ..	Monday of each week. School for Mothers on Monday.
Platt Lane Mission Room	Friday of each week. School for Mothers on Tuesday.
Wesleyan Chapel, Worsley Mesnes ..	Wednesday each week, and also School for Mothers on that day.

It will be noticed from the statistics of Infant mortality on page 16 that 38 babies died under one week, and 63 under four weeks old. Of these 63 deaths, 34 were certified as dying from Premature birth, 1 from Enteritis, and 13 from marasmus or wasting. A fair percentage of deaths from these causes ought to be preventable. 3 deaths were due to Congenital Malformation.

It is well known that the practice of taking drugs &c., with the object of producing abortion or miscarriage is prevalent in this town and throughout the country.

If abortion is not brought about in this way, premature births may occur, often resulting in the death of the child. The danger of death or permanent injury of the mother is very considerable.

The sale of any drugs, &c., likely to cause the above results should be controlled.

Ante natal work, and Infant welfare generally, should be developed to the utmost extent. No cutting down of expenses in this direction is economy.

55 deaths occurred among children attending Clinics. Of these 20 attended regularly. The 55 deaths are made up as follows: 27 deaths under 12 months, 1 from Diarrhoea and 26 from other causes. 28 over 12 months: 1 from Diarrhoea, and 27 other causes. There were 29 deaths of children receiving free milk.

5 cases of Ophthalmia Neonatorum were notified, and careful instruction was given to the mothers as to the correct way to carry out the Doctor's treatment.

The following Table shows particulars of Notifications of Births received, which were notified by Doctors and Midwives:—

	Doctors.	Midwives.		Total.
		Qualified.	Un-qualified.	
No. of Births attended	196	1,547	234	1,977
Percentage	9.91	78.24	11.83	—
No. of Medical Aid Forms received	—	374	62	436
No. of Still-births notified.. ..	10	67	10	87

Of the 47 Midwives, 12 reside outside the Borough.

MEDICAL AID.

The reasons for sending for Medical Aid, as far as can be ascertained, were as follows:—

(1) COMPLICATIONS OF PREGNANCY.

Abortion	13
Incomplete abortion	1
Threatened abortion	2
Rigor during pregnancy	1
Miscarriage	8
Prematurity	20
Total	45

(2) ABNORMAL PRESENTATIONS 22

(3) COMPLICATIONS OF LABOUR.

Retained Membranes	3
Delayed labour	115
Contracted pelvis	6
Uterine inertia	4
Ante-partum hæmorrhage	6
Post-partum hæmorrhage	7
Adherent placenta	9
Ruptured perineum	58
Prolapsed cord	2
Placenta prævia	3
Retained placenta	5
Fits	1
Concealed hæmorrhage	4
Cord presentation	1
Persistent Occipito Posterior	10
Obstructed labour	7
Rise of temperature	5
Breech presentation	4
Illness	7
Excessive sickness	4
Total	261

(4) COMPLICATIONS OF PUERPERIUM AND OTHER ILLNESSES OF PATIENT.

Rise of Temperature	5
Patient ill (undefined)	8
Bad leg and white leg	3
Rigor	2
Weak chest	1
Pain in breast	2
Cracked nipples	1
Enlarged breast and rash	1
Collapse	1
Diphtheria	1
Varicose veins	1
Total	26

(5) ILLNESS AND ABNORMALITIES OF CHILD.

Malformation	7
Baby ill (undefined)	13
Icterus Neonatorum	1
Pemphigus	1
Skin rash	7
Discharging eyes	10
Baby's mouth	1
Tight foreskin	1
Weakness	11
Swollen penis	1
Premature birth	6
Bronchitis	1
Sore buttocks and rash	1
Vomiting	1
Still baby	1
Dead baby	1
Baby not using arm	1
Uterine inertia	1
Hernia	2
Tongue tie	1
Jaundice	1
Ophthalmia	1
Talipes	1
Abnormal baby	3
Total	56

MIDWIVES' ACT, 1918.

It is the duty of all Midwives to forward to a Medical Practitioner, a special form, requesting him to render aid in the case of any complication or danger arising at the time of a birth, and further, a copy of this form must be sent to the local authority. (Special forms are supplied to all Midwives.)

Any Medical Practitioner who attends a case of emergency at the request of a Midwife, may, if he so desires, forward an account for this service to the local authority, and the authority may, if circumstances allow, reclaim the amount from the person who is responsible for the patient who has been attended by the Medical Practitioner.

On receipt of a form from a Midwife, stating she has called in medical aid, the practise observed, is to forward Form 1 (see page 50), which is partially filled in, and which the Medical Practitioner completes if he intends to claim the fee for his service from the local authority.

On receipt of Form 1 (see page 50), Form 3 is partially filled in and forwarded to the Borough Treasurer, a member of whose staff visits the home of the person who has received medical attention, and makes the necessary enquiries to complete the remainder of this form.

Under the Maternity and Child Welfare Scheme, in the County Borough of Wigan, Midwives are allowed to make claims for their services in cases which are proved to be necessitous.

Form 2 (see page 51) is provided for this purpose.

On receipt of Form 2, a similar procedure is adopted as in Form 1, *i.e.*, Form 3 is sent to the Borough Treasurer.

All cases for which claims are made under the above Act by a Medical Practitioner are submitted to a sub-committee of the Maternity and Child Welfare Committee, who decide whether the income of the person who may be responsible for payment is above or below the scale fixed by the Maternity and Child Welfare Committee, on which they base their decision as to whether the fee shall be reclaimed or not. In the case of Midwives' claims, the sub-committee decide whether the case is a necessitous one, and if it is proved to the satisfaction of the Committee, that the case is a necessitous one, the authority pay the Midwives' fee. On the other hand, if it is found that the case is not a necessitous one, the midwife is responsible for collecting her own fee. It has been held that any person receiving maternity benefit under the National Health Insurance Act, cannot be considered to be a necessitous case.

FORM 1.

MIDWIVES' ACT, 1918.

CLAIM FOR FEE FOR ATTENDANCE AT CONFINEMENT.

by Dr.

Address

Name of Patient

Address

Name of Midwife summoning Assistance :

.....

Date

Time of Arrival

Condition of Emergency

.....

£ s. d.

Fee claimed for operation

Nature of Operation

.....

Fee—Non-operative

Fee—Administration of Anæsthetic

by Dr.

Total £

To DR. H. WHITEHEAD,
Public Health Office,
Library Street, Wigan.

FORM 2.

MIDWIVES' ACT, 1918.

MIDWIFE'S CLAIM FOR FEE FOR ATTENDANCE AT CONFINEMENT.

NECESSITOUS CASES ONLY.

Name of Midwife

Address of Midwife

Name of Patient

Address of Patient

Date

Time of Arrival.....

Family Circumstances
proving necessity

.....

.....

.....

Fee claimed.....£ s. d.

Dr. WHITEHEAD,

Medical Officer of Health.

WIGAN.

FORM 3.

PUBLIC HEALTH DEPARTMENT.
LIBRARY STREET, WIGAN.

—————
MIDWIVES' ACT, 1918.
—————

Name

Address

Name of Midwife

Nature of Emergency

Name of Doctor

Date of Attendance

Amount of Fee

No. of Persons in Family

No. Working

Where Employed

Total Wages

Income from other sources, if any

If Mother is an Insured Person

If Maternity Benefit is payable

Rent of House

Date

PUERPERAL FEVER.

Two cases of Puerperal Fever were notified. There were 4 deaths from this disease, as compared with 1 case and no deaths in 1923.

MIDWIVES' ACT, 1902.

Forty-seven midwives were registered, as practising within the Borough, all of whom have been regularly visited at their homes, and followed when out to their cases. Their bags and appliances were also examined.

Infantile Mortality.—The number of deaths of children under one year is 214, or 107 per 1,000 births, and of children over one year and under five years 212, or 2·32 per 1,000 of the population.

These figures compare with 208 deaths under one year, a rate of 101 per 1,000 in 1923.

An analysis of these 214 deaths show that they may be grouped under the following headings:—

Premature Birth, Congenital Debility, Malnutrition, and Congenital Malformations	86
Diarrhœa and Enteritis	11
Bronchitis.. .. .	26
Measles	7
Pneumonia	31
Whooping Cough	16
Meningitis.. .. .	1
Other causes	36

SUPPLY OF MILK TO NURSING AND EXPECTANT MOTHERS AND INFANTS UNDER FIVE YEARS OF AGE.

The instructions issued in Circular 185, of May, 1921, by the Ministry of Health, are still being carried out with this modification, that free milk is limited to children under 12 months old. Special cases over this age up to 5, are granted free milk at discretion of Medical Officer of Health.

The average number of families who were supplied with free milk under the Maternity and Child Welfare Scheme during the year 1924 was 176.

Free milk is only supplied after an application has been made on Form A, as set out on page 55, this form is examined by a clerk on the Maternity and Child Welfare Staff, and if approved, the applicant is requested to fill in Form B. (See page 56.) A copy of the application on Form A is forwarded to the Borough Treasurer, and a member of his staff makes an

investigation as to whether the statements made on the form are correct. All applications are considered later by a Sub-Committee of the Maternity and Child Welfare Committee, which meets twice a month. Should the income of the applicant be found to be below a scale fixed by the Maternity and Child Welfare Committee, the application is granted. Prior to October 16th, 1924, ordinary cows milk was supplied with the exception of a few special cases, who were supplied with dried milk; after the above mentioned date, bottled pasteurised milk was substituted for ordinary cows milk. All liquid milk is supplied in exchange for coupons. A coupon (see page 56) is issued for every pint of milk supplied. A person entitled to free milk may obtain supplies in exchange for coupons from any retailer who can supply bottled pasteurised milk.

The Maternity and Child Welfare Committee, after consultation with the retail purveyors in this town have come to an arrangement for milk to be supplied for this purpose, at a cost below the prevailing retail price of bottled pasteurised milk.

Retailers return all coupons to the Borough Treasurer, together with their account, they are requested to see that the coupon bears the name of the person who is supplied with the milk, and the date on which the milk is supplied.

SUPPLY OF MILK TO NURSING AND EXPECTANT MOTHERS AND INFANTS UNDER FIVE YEARS OF AGE.

The instructions issued in Circular 165 of May 1921, by the Ministry of Health, are still being carried out with the modification that free milk is limited to children under 12 months old. Special cases over this age up to 5 are granted free milk at discretion of Medical Officer of Health.

The number of families who were supplied with free milk under the Maternity and Child Welfare Scheme during the year 1924 was 116.

Free milk is only supplied after an application has been made on Form A, as set out on page 55. The form is completed by a clerk on the Maternity and Child Welfare Staff, and if approved the applicant is requested to fill in Part B (See page 56). A copy of the application on Form A is submitted to the Borough Treasurer and a receipt of his name and

FORM A.

Case No.....

PUBLIC HEALTH DEPARTMENT, WIGAN.

NOTICE.—For making False Statements Persons are liable to be prosecuted.

APPLICATION FORM.

(This Form must be duly completed by the Head of the Family.)

Name

Address

No. in Family No. of Lodgers

Adults (all persons in family over 16)

Children between 3 and 16 Children under 3

Amount of money coming into House

From Family From Trade Union Funds

„ Lodgers..... „ Board of Guardians

„ Insurance (National Health) „ Other Sources

„ „ (Unemployment) „ Pension.....

Regiment „ Allowance.....

Regimental No.....

Number Working	Names	Where Employed
.....
.....
.....
.....

If in Pit, No. of Pit Tally No.....

Name of Underlooker

Rent and Rates of House per Week

Signature of Applicant.....

Date.....

Signature of Employer

Date.....

Should Applicant be unemployed, this Form may be signed by some responsible Ratepayer who is acquainted with the Applicant's present circumstances.

FORM B.

Case No.....

HEALTH DEPARTMENT, WIGAN.

MATERNITY AND CHILD WELFARE.

Date.....192..

I, THE UNDERSIGNED, hereby acknowledge that all FREE MILK or Milk at half price (Fresh or Dried) which shall at any time be supplied to me by the Wigan Corporation is supplied and accepted by me for the express purpose of being used only for the persons specifically named below :—

- 1.....
2.....
3.....
4.....

I clearly understand that if I use, or permit to be used, the said (Free or Half Price) Milk, for any purpose other than that for which it is supplied, as aforesaid, I render myself liable to prosecution.

I also clearly understand that the said (Free or Half Price) Milk must not be sold or given away in any circumstances, and that if any of such Milk is sold or given away I render myself liable to prosecution.

In the event of the said (Free or Half Price) Milk, or any part of it, not being used for the purpose for which it is supplied, as aforesaid, I undertake to return (without delay) to the Infant and Maternity Clinic..... the Milk not so used.

I undertake to inform the Medical Officer of Health immediately of any change of income.

Signed,.....

Address

MILK COUPON.

(FRONT.)

(BACK.)

Name.....
Date.....192 No.....
COUNTY BOROUGH OF WIGAN.
HEALTH DEPARTMENT.
FREE BOTTLED PASTEURISED MILK.
Coupon for 1 Pint. (See back.)

To THE MILK RETAILER.
Only the person named in the coupon must be supplied with Bottled Pasteurised Milk.

The causes of high infant mortality in this town are in my opinion as follows:—

1. The existence of large numbers of privies, pail closets, and enormous accumulations of human excreta at Miry Lane Depot.
(These are being dealt with at the present time).

2. Unsatisfactory system of storing and removal and tipping of household refuse.

The above conditions are undoubtedly causes of infantile diarrhoea and other infectious diseases, and mean death to large numbers of babies.

3. The limited scheme of Maternity and Child Welfare work, at present being developed and greatly improved.

4. The unsatisfactory conditions under which milk is produced and distributed, and lack of proper care and storage in the homes.

5. Insanitary and overcrowded houses.

6. Ignorance and carelessness of parents.

TABLE SHOWING METHOD OF FEEDING OF 214 INFANTS UNDER ONE YEAR WHO DIED DURING 1924.

SAID TO BE—

123	Entirely Breast-fed.
10	Partly Breast-fed.
6	Condensed Milk.
26	Cow's Milk.
10	Dried Preparations.
3	Miscellaneous.
28	No feeding (lived 1-2 days only).
8	Not known.

MILK.

In order to render milk safe as a food for human beings, it is necessary: (1) To kill or render inert, tubercle bacilli, which are present in one-fifth of the milk sold to-day. (2) To kill or render inert the pathogenic organisms which may find their way into the milk: (a) From the cow. (b) From "Carriers." (c) Persons actually suffering from any particular disease. (d) Any other source.

Seeing that about 30 per cent. of milch cows are tubercular, there is absolutely no hope of getting tubercle-free herds throughout the country.

It is not possible to prevent other pathogenic organisms being conveyed to milk by carriers or other infected persons.

The advantages of pasteurisation and bottling are enormous, and the disadvantages almost negligible. At the same time, the production of milk should be carried out on hygienic lines, as a matter of common decency.

The best solution to the problem is to make it compulsory by law that all milk must be efficiently pasteurised and bottled, and that a certain standard of cleanliness, based on bacteriological tests, must be attained before pasteurisation.

The following is recent information from the Chief of the Division of Milk Inspection, Department of Health, New York, "The regulations of this department define pasteurised milk and milk products as milk, cream, etc., which has been heated to a temperature of at least 142 degrees Fahrenheit and held thereat for not less than 30 minutes. Through laboratory tests and experiments with commercial pasteurisers, it has been found that the tubercle bacilli are destroyed, when heated and held at such a temperature, and for such a length of time. If milk is properly pasteurised it should contain no live tubercle bacilli"

For several years prior to 1912, this department became convinced that no amount of sanitary inspections would properly safeguard the milk supply of the city. Accordingly, on January 1st, 1912, pasteurisation of part of the milk supply was insisted upon. During 1912 and 1913, outbreaks of typhoid fever, traceable to the use of milk from infected sources, continued, and on January 1st, 1914, this department insisted that all milk which did not comply with the exacting requirements for Grade A Raw Milk, must be pasteurised. At the present time it is estimated that approximately 3,000,000 quarts of milk are consumed daily in New York, and of this amount all is pasteurised except 60,000 quarts, which are sold as Grade A Raw Milk. Most of this last mentioned milk is certified. Because of our experiences it is obvious that in order to make the milk supply for a large city safe it must be pasteurised.

It is doubtful that it is possible to eliminate all tubercular cattle in a country such as ours, where there are so many dairy animals producing milk which is sold not only in the form of milk and cream, but is manufactured into butter, cheese, and other by-products.

Moreover, it is desirable that other dangerous bacteria be eliminated from milk. The tuberculin test is a very valuable one when attempting to eliminate bovine tuberculosis; however, it is in no sense of the work a substitute for pasteurisation."

The statistics showing the decrease in deaths from infantile diarrhoea, and decline in infant mortality since pasteurisation was introduced in New York City are very remarkable and convincing.

In 1910 there was no pasteurisation. Death-rate from Diarrhoea in children under five years calculated on population under five was 11.6. Infant mortality 126.

1912, partial pasteurisation introduced. Diarrhoea death-rate 8.0. Infant mortality 105.

1914, compulsory pasteurisation of all milk except Grade A Raw. Diarrhoea death-rate 6.7. Infant mortality 98.

1924, Diarrhoea death-rate 1.9. Infant mortality 68.

BACTERIOLOGICAL EXAMINATION OF PASTEURISED MILK.

7 Samples of pasteurised milk taken from a local pasteurisation plant have been submitted for bacteriological examination since 1st July, 1924, and in no case has *B. Coli* been found in the milk. The bacteria count for these samples has varied between 1,000 and 10,000. On one occasion, a sample of milk was taken from a float on its return to the dairy, after it had been conveyed round the town. The milk had been pasteurised the previous day, and stored in the special cold room overnight. The bacteria count on this occasion was found to be as low as 1247 per 1 c.c., and *B. Coli* was not found.

Three samples of milk were taken for bacteriological examination at a local pasteurising plant. The first sample was of mixed milk, immediately after having been placed in the tank. The second sample was the same milk after it had passed through the centrifugal clarifier. The third sample was the same milk after it had been pasteurised, and at the same time a sample of the slime taken from the centrifugal clarifier was submitted for bacteriological examination. The mixed milk was found to contain *B. Coli* in .01 c.c., and T.B. was also present. This milk had a bacteria count of 72,700. In the clarified milk *B. Coli* was present in .01 c.c., and the bacteria count was 70,000. In the pasteurised milk the bacteria count had been reduced to 1,000 and neither *B. Coli* nor T.B. was found. In the slime taken from the centrifugal clarifier, the bacteria count was so great that it was impossible to estimate, and *B. Coli* was found in 1-10,000,000 part of a gramme.

HEALTH AND BABY WEEK.

This was held during the week 5th October to 11th October, 1924, and proved very successful indeed.

An interesting experiment was tried this year by arranging for five minutes voluntary speakers on health subjects every half-hour at the Exhibition. Large numbers of people attended these "talks," and were very interested in the subjects discussed. Notes for the guidance of speakers were issued by the Health Department.

The Health and Baby Week Committee was awarded a Certificate of Merit by the National Baby Week Council, the press campaign being exceptionally good.

The following is briefly the programme for the week:—

Sunday: Sermons in all places of worship of all denominations on health matters.

On Monday, 6th October, a Health Exhibition was opened at the Town Hall, by Mr. J. Allen Parkinson, Member of Parliament for the Borough.

The following is a list of the stalls:—

Stall	No.	Description
1	1	Preparation and care of food.
2	2	Precautions necessary for prevention of infectious diseases.
3	3	Care of milk from farm to consumer.
4	4	Hygiene of the teeth.

*Stall
No.*

- 5 Hygiene of ear, nose, and throat.
- 6 Exhibits of successful competitors.
- 7 Tuberculosis.
- 8 Playground.
- 9 Baby's Bath.
- 10 Place of sunshine in daily life.
- 11 The prevention of rickets.
- 12 The Welfare Centre.
- 13 Baby's habits.
- 14 Venereal diseases.
- 15 The hygiene of the expectant mother.
- 16 Ventilation.
- 17 Clothing.
- 18 Flies.
- 19 Cradles, cots, perambulators.
- 20 Domestic refuse disposal.

The exhibition was open to the public during the whole of the week, admission being free, and approximately 7,000 persons visited it. Five minute talks were given by various persons, on the following subjects:—

- Pasteurisation of milk.
- Value of sunshine in personal hygiene.
- Fresh air.
- Clothing.
- The care of teeth.
- Child discipline in the home.
- Position and prospects in relation to child life.
- Handling of babies.
- The care of the expectant mother.
- Fly danger.
- Child habits.
- The family.
- Cleanliness of the home.
- Practical ventilation.
- Method of killing flies.
- Training and habits.
- Health and cleanliness.
- Milk in the home.
- Temperance.
- Dust.
- Refuse disposal.

The following Lantern Lectures were given during the week at various halls in the town.

“Health and Some of its Potent Factors” by Dr. William Stirling, late Professor of Physiology, Manchester University.

“The Child and the Parent” by Dr. Aileen Williams, Assistant Medical Officer.

"Fresh Air and Sunshine" by Dr. A. D. MacMahon, Deputy Medical Officer of Health and Clinical Tuberculosis Officer.

"Infectious Disease and Bacteriology" by Dr. Henry Whitehead, Medical Officer of Health.

Films on the following subjects: "Where Flies go in the Winter Time," "Zoo Babies," and "The Shadow" (the latter being a film on venereal diseases), were shown at the cinemas in the town, and the public were admitted free of charge. These films were seen by 2,500 adults, and 7,500 children.

On Wednesday of Health Week, 800 mothers and babies who attended regularly at the Child Welfare Clinics, were entertained to tea at the Drill Hall, and a certificate of attendance at the Clinics was presented to each mother by the Mayoress.

Various competitions were held during the week, each one tending to stimulate interest in Health and Child Welfare matters.

A dance and whist drive was organised with a view to meeting the expenditure which could not be properly made a charge on the rates. This proved to be a great social and financial success.

TIPPING OF REFUSE.

In Wigan crude refuse from ashtubs, bins and privies is frequently tipped in various places direct from the collecting carts. Refuse should either be treated before tipping by passage through a destructor or precautions should be taken after tipping as suggested by the Ministry of Health, which involve depositing in layers of a certain thickness, and covering each layer with a certain depth of earth, steps being taken to prevent light material such as paper, etc., from blowing about.

Crude refuse contains all kinds of organic material which is liable to putrefaction; paper and all kinds of foul substances get blown about and become a serious nuisance. Moreover, such collections of rubbish form an admirable breeding ground for flies which invade the neighbouring houses and carry the filth and disease with them.

Several examples of invasion of houses by flies have come to the notice of this Department, and have been traced to tips.

Knowledge of the causes of disease is absolutely no use unless it is practically applied.

PREPARATION OF FOOD.

At the present time we have no compulsory powers to enforce the registration of all places where food for human consumption is prepared for sale.

It is no uncommon occurrence for the officers of Health Departments to find that food for sale is being prepared in insanitary and unclean premises, and on occasions by unclean persons. Further, it has been found that the

contents of certain foods have contained ingredients which are dangerous to health. Adequate protection and control is quite impossible unless all premises where food is prepared for sale are enforced by law to be registered.

WIGAN WATER SUPPLY.

A complete inspection was made in 1922 by the Health Department of the three gathering grounds, namely: Worthington, Pemberton (Edgwood), and Bispham respectively.

A great amount of pollution is occurring on each of these gathering grounds where sewage is finding its way either directly or indirectly into the main streams.

The Medical Officer of Health made certain recommendations to the Water Committee in order to prevent such pollution and at the time of writing the three supplies from the above gathering grounds are being chlorinated and efforts are being made to remedy the worst pollutions.

COMPENSATION CLAIMS AND MEDICAL EXAMINATIONS.

Medical Examinations of Corporation Employees under Workmen's Compensation Acts, 71.

Medical examinations of applicants for employment on Wigan Corporation Tramways, 20.

Examinations of other persons claiming compensation from the Corporation, 4.

LIST OF ADOPTIVE ACTS, BYE-LAWS, & LOCAL REGULATIONS

Relating to the Public Health, in force in Wigan, with date of adoption.

Small Dwellings Acquisition Act, 1899.

The Infectious Disease (Prevention) Act, 1890.

The Public Health Acts Amendment Act, 1890 (Part 3).

The Housing of the Working Classes Act, 1890.

The Public Health Acts Amendment Act, 1907.
(Section 27, 33, 51, and Part 6.)

The Notification of Births Act, 1907.

Local Government Board Provision Orders Confirmation No. 7 Act, 1888.

Wigan Improvement Act, 1874 and 1880.

Wigan Corporation Acts, 1889, 1893, 1898, 1902, 1905, and 1921.

Bye-laws with respect to Water Closets and Waste Water Closets, 27th day of November, 1905.

Regulations with respect to Dairies, Cowsheds, and Milkshops, adopted 1st August, 1900.

Bye-laws with respect to Slaughter-houses, 2nd September, 1891.

Bye-laws with respect to Houses Let-in-Lodgings, 7th December, 1887.

Bye-laws with respect to Common Lodging-houses, 1st July, 1891.

Bye-laws with respect to New Streets and Buildings, 21st September, 1903.

Bye-laws with respect to New Streets and Buildings, 6th January, 1892.

Bye-laws with respect to Alteration of Buildings, 6th January, 1892.

Bye-laws with respect to Nuisances, 7th December, 1887.

Bye-laws regulating the Employment of Children, 8th March, 1921.

Bye-laws with respect to Tents, Vans, Sheds, and Similar Structures used for Human Habitation, 11th November, 1913.

Bye-laws as to Sanitary Conveniences, 1st June, 1892.

Bye-laws relating to Offensive Trades, 2nd September, 1914.

Bye-laws with reference to Spitting, 20th October, 1915.

7.—LABORATORY WORK.

	<i>Positive.</i>	<i>Negative.</i>	<i>Doubtful.</i>	<i>Not examined.</i>
Swabs for diphtheria	21	105	—	—
Widal tests for enteric	32	40	—	1
Cerebro-spinal fluid	2	—	1	—
Wassermann	87	217	21	20
Gonococci	—	17	—	—
Fæces	3	15	—	—
Urine	—	15	—	—
Hairs (spores of ringworm)	2	—	—	—
Milk (T.B.)	—	10	—	—
Milk (bacteria count) .. .. .	..	..	7	examinations.
Water (bacteriological) .. .. .	..	..	5	..
Water (chemical) .. .. .	..	..	16	..

Total examinations, 637.

8.—SANITARY ADMINISTRATION.

Mr. Martlew, Chief Sanitary Inspector, submits the following remarks, with a summary of work done by the Sanitary Inspectors :—

I beg to submit the Annual Report of the work done by the Inspectorial Staff of the Health Department for the year 1924.

CONVERSION OF PAIL CLOSETS AND PRIVY MIDDENS.

The scheme for the conversion of the whole of the pail closets and privy middens within the Borough was commenced early in the year 1923. During that year, 681 notices were served for the conversion of 1,002 pail closets, and 1,205 privy closets. 565 pail closets and 450 privy closets were converted to the water-carriage system and one pail closet was abolished, a total of 1,016. 51 notices were also served for the provision of 106 water-closets, for premises where the closet accommodation was insufficient, and 76 additional water-closets were provided during that year.

During the year 1924, notices were served for the conversion of 2,689 pail closets, and 649 privy closets, a total of 3,338. 1,908 pail closets and 1,138 privy closets were converted. In addition, 59 pail closets, and 21 privy closets were abolished, a total of 3,126. 105 notices were served for the provision of 230 additional water closets, for premises where the closet accommodation was insufficient, and 152 additional water-closets were provided. To carry out this work, no less than 24,460 visits were paid. The total number of notices which had been served prior to January 1st, 1925, was 1,827, for the conversion of 3,691 pail closets, and 1,854 privy closets. A total of 5,545 closets. 2,473 pail closets, and 1,588 privy closets had been converted, and 60 pail closets, and 21 privy closets had been abolished, making a total of 4,142 closets which had been dealt with. 156 notices had been served for the provision of 336 additional water closets, and 228 additional water-closets had been provided. Although the number of conversions which were carried out during the year 1924, was approximately three times the number carried out during the year 1923, I am pleased to state that the number being converted at the time of writing is even greater than the year 1924, and I am of opinion that the progress of this scheme is quite satisfactory.

NUISANCES.						1923.	1924.
Houses and premises inspected and visited <i>re</i> nuisances							
and complaints						1610	1651
Nuisances discovered						3011	2848
Nuisances abated						2534	2309
Notices issued (preliminary)						886	977
" " (formal)						605	559
Re-visits to nuisances						5021	5200
Other visits made						1167	976
Visits to premises (testing of drainage)						93	140
Letters issued <i>re</i> nuisances						416	415

DESCRIPTION OF NUISANCES DEALT WITH.

Houses with defective roofs	358
" with damp and defective walls	456
" with defective gutters and down-spouts	311
" requiring gutters or down-spouts	15
" with defective windows	287
" with defective ceilings	76
" with defective floors	100
" with unclean walls and ceilings	475
" with defective slopstones or waste-pipes	48
" requiring slopstone waste-pipes	9
" in a filthy condition	3
" with filthy closets	1
" with filthy yards and passages	3
" overcrowded	6
Defective surface of yards and passages	37
" drains	50
Blocked drains	224
Defective and foul gullies	61
" or blocked water-closets	32
" water-closet flushing apparatus	30
Want of water supply to water-closet	7
Defective soil-pipes and connections	6
" or blocked waste-water-closets	31
" closets (structure)	30
" ash-houses	2
" middensteads	2
Accumulation of manure and refuse	14
Animals kept so as to be a nuisance	13
Miscellaneous	161

CANAL BOATS ACT, 1877 AND 1884.

No. of Boats that have been registered at Wigan.. .. .	312
" still in use or available.. .. .	47
" not in use	23
" broken up	111
" that cannot be traced, sold, or dispensed with	83
" re-registered with other Authorities	15
" re-registered at Wigan	27
" registered but not legally required	6
" Applications for registration and re-registration during the year	2
" Applications granted	2
" Boats re-registered	2
" Inspections	50
" Notices issued	1
" Notices complied with	-
" Contravention of regulations	1
" Letters sent out	13

SMOKE NUISANCES.

During the year 59 smoke observations have been taken. In six instances the time limit was exceeded, two warning letters were sent to the persons responsible for the nuisances, and one formal notice was sent. Twenty-five visits were made to premises and instructions given to the stokers in charge of the steam raising apparatus. A circular letter was also forwarded to 54 firms, and 65 placards were enclosed giving hints to stokers.

FACTORY AND WORKSHOPS ACT.

No. of Workshops on register	255
„ Bakehouses on register	124
„ Domestic workshops on register	65
„ visits to outworkers premises	30
„ visits to factories	93
„ visits to workshops	561

The following defects were dealt with :—

Unsuitable or defective sanitary accommodation ..	8
Sanitary accommodation (not separate for sexes) ..	1
Requiring limewashing and cleansing	83
Insufficient ventilation	1
Other nuisances	10
Total	103
Other offences	1
No. of defects remedied	101
„ notices received from H.M. Inspector	8
„ letters sent out	35
„ underground bakehouses being used	5

SHOPS ACTS, 1912 AND 1913; SHOPS (EARLY CLOSING) ACT, 1920.

No. of shops on register	2314
„ visits to shops (day)	234
„ visits to shops <i>re</i> (Early Closing) Act, 1920 (day) ..	1095
„ visits to shops <i>re</i> (Early Closing) Act, 1920 (night) ..	294
„ observations (day)	623
„ observations (night)	1330
„ visits, Meat Closing Order	163
„ observations, Meat Closing Order	771

REPORT OF OFFENCES, 1921.

Not exhibiting closing notice	51
„ „ form (assistants' half-holiday)	8
<i>Re</i> assistants' half-holiday	5
Letters for serving customers during prohibited hours ..	8
Employing young persons after working under F. and W.A. .	3

COMMON LODGING HOUSES AND HOUSES LET-IN-LODGINGS.

The common lodging houses and houses let-in-lodgings have been regularly visited, and are kept in a satisfactory condition.

COMMON LODGING HOUSES.

No. of common lodging-houses in the Borough	11
„ lodgers allowed nightly	481
„ visits	669
„ lodgers reported as being received (per returns)	113,941
„ letters sent out	12
„ houses on register end of 1924	11
„ houses remaining on register end of 1924	11

HOUSES-LET-IN-LODGINGS.

No. of houses on register	13
„ visits	86

PLACES OF ENTERTAINMENT.

All these have been inspected and reports made before the renewal of licences.

INFECTIOUS DISEASES (PREVENTION) ACTS, etc.

A high-pressure disinfectant is used for the purpose of the disinfection and disinfection of clothing, bedding, and other articles.

No. of houses disinfected	355
„ rooms disinfected	503
„ beds disinfected	430
„ mattresses disinfected	200
„ sheets and quilts disinfected	920
„ other articles disinfected	1,793
„ premises cleansed and limewashed after infectious disease	70
„ visits to houses <i>re</i> limewashing and cleaning, &c.	91
„ „ „ infectious disease	312
„ letters sent out <i>re</i> infectious disease	162
„ „ „ limewashing	8
„ library books disinfected	73
„ schools disinfected	18

RATS AND MICE (DESTRUCTION) ACT, 1919.

Mr. E. Richardson who devotes a portion of his time as Administrative Officer under the above Act, reports as follows:—

No. of premises under observation on 1st January, 1924	50
No. of premises found to be infested during 1924	24
No. of premises reported to be free from rats or mice during 1924	37
No. of premises under observation on 31st December, 1924	37
Total number of visits made during 1924 ..	235

The occupiers of premises still infested are carrying out the requirements of the Act. During Rat Week, held in November, 1924, a special effort was made to exterminate rats and mice. 760 baits were prepared and distributed free of charge to persons in occupation of premises infested. Satisfactory results were reported.

**SALE OF FOOD AND DRUGS ACTS; MARGARINE ACTS;
PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912-17.**

205 samples were taken under the above statutes. All were submitted to the Public Analyst; 20 samples proved to be below the standard required. Of these 17 were milk, 8 were formal samples, 9 were informal samples. Of the 8 formal samples No. 1 contained only 2·8 per cent. fat, and a warning was issued in this case. Nos. 2 and 3 were purchased from the same vendor, and contained 2·85 per cent. and 2·76 per cent. of milk fat respectively. Both were morning's milk, and a series of "Appeal to the Cow" samples were taken, 8 being found to be below the standard for milk fat of 3 per cent. (these are included in the nine informal samples found to be below the standard). No. 4 was found to contain only 2·6 per cent. of milk fat, and a warning letter was issued in this case. No. 5 was found to contain only 2·88 per cent. of milk fat, and a warning letter was issued in this case. No. 6 was found to contain 9·1 of added water; an informal sample was taken from the same source of supply during transit, and this was found to contain 8·2 per cent. of added water; later Nos. 7 and 8 were taken from the same source of supply, in course of transit, and these were found to contain 8·8 per cent. and 7·6 per cent. of added water respectively; legal proceedings were taken and the vendors were fined £5 in each case.

Two samples of Sweet Spirits of Nitre were found to be deficient in Ethyl Nitrate to the extent of 70 per cent. and 20 per cent. respectively; the first was an informal sample, the second was a formal sample from the same vendor. In this case a warning letter was issued.

One sample of Margarine was found to contain 17 per cent. of water, or 1½ per cent. in excess of the quantity allowed, and a warning letter was issued in this case.

<i>Article.</i>	<i>Samples.</i>	<i>Genuine.</i>	<i>Adul- terated.</i>	<i>Not Formal.</i>	<i>Appeal to Cow Samples not Formal.</i>
New Milk	157	139	17	48	45
Butter	7	7	-	1	-
Margarine	5	4	1	1	-
Dripping	3	3	-	3	-
Jam	2	2	-	2	-
Preserved Cream	3	3	-	-	-
Tea	5	5	-	1	-
Coffee	4	4	-	1	-
Baking Powders	2	2	-	-	-
Whiskey	3	3	-	3	-
Rum	3	3	-	3	-
Sweet Spirits of Nitre ..	3	1	2	2	-
Condensed Milk	7	7	-	7	-
Oil of Garlic	1	1	-	1	-
Totals	205	184	20	73	45

BOARD OF AGRICULTURE

Report for the year ended 31st December, 1924.

1. Milk and Cream not sold as Preserved Cream.

	(a.) <i>Number of Samples examined for the presence of a Preservative.</i>	<i>Number in which preservative was reported to be present, and percentage of Preserva- tive found in each Sample.</i>
Milk	157	Nil.
Cream	-	-

2. Cream sold as preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct.

(i.) Correct statements made	3
(ii.) Statements incorrect	Nil.

Total 3

The following animals were examined as to their fitness for sale :—

	Condemned.	Part passed and part condemned.	Passed, but <i>offal</i> condemned
Beasts ..	21	2	959
Calves	8	—	2
Sheep	6	—	1
Pigs	11	—	4

FERTILISERS AND FEEDING STUFFS ACT, 1906.

No samples of feeding stuffs were taken during the year.

FOOD CONDEMNED, 1924.

No. of oxen condemned	22
" of which a portion was condemned	3
" calves condemned	6
" pigs condemned	11
" sheep condemned	8
Beef condemned	3840 lbs.
Imported beef condemned	548 lbs.
Pork condemned	145 lbs.
Canned meat condemned	18 lbs.
Sausage condemned	26 lbs.
Rabbits condemned	2045
Hares condemned	5
Fowl condemned	5
Wet fish condemned	50½ boxes- 2 bags.
Dry fish condemned	70 boxes.
Canned fish condemned	4 tins.
Fruit condemned	144 barrels. 139 baskets. 115 boxes. 10 crates. 7 bunches.
Canned fruit condemned	41 tins.
Vegetables	90 bags. 54 boxes. 3 crates.
Milk condemned	34 gallons.
Condensed milk condemned	177 tins.
Canned cream condemned	4 tins.

REPORT OF THE PUBLIC ANALYST FOR THE YEAR 1924.

The Borough Analyst (Mr. S. E. Melling) submits the following report:—

SALE OF FOOD AND DRUGS ACT.

During the year I have analysed 205 samples of food and drugs as enumerated in the following table:—

<i>Articles.</i>	<i>Number analysed.</i>	<i>Number adulterated.</i>
Milks	157	9
Butters	7	—
Condensed milks	7	—
Tea	5	—
Margarine	5	1
Coffee	4	—
Sweet spirit of nitre	3	2
Preserved cream	3	—
Dripping	3	—
Whisky	3	—
Rum	3	—
Jam	2	—
Cream of tartar	2	—
Oil of garlic	1	—
	—	—
	205	12
	—	—

Of the 157 milks examined, 9 were reported against, viz.: Five were deficient in fat to the extent of 4, 5, 6·6, 8·0 and 13·3 per cent., whilst the remaining four contained added water in amount equal to 7·6, 8·2, 8·8 and 9·1 per cent. respectively. All samples were examined for preservatives and colouring matter with wholly negative results. Two samples of sweet spirit of nitre were found to be deficient in Ethyl nitrite—the medicinally active constituent—to the extent of 20 and 70 per cent. respectively, this was no doubt due to age and loss in Ethyl nitrite by volatility. One sample of margarine contained 17 per cent. of water, *i.e.*, one per cent. in excess of the statutory limit.

The various drugs conformed to the requirements of the British Pharmacopœia, and all samples of food-adjuncts and groceries were of sound commercial quality.

FERTILISERS AND FEEDING STUFFS ACT.

No samples were submitted during the year.

WATER SUPPLY.

The usual monthly control samples of water from both the Wigan and Pemberton areas have been examined and, apart from slight variations in the amount of fermentable organic matter present, there is little necessity for comment. From a chemical standpoint the supplies have been consistently satisfactory.

REPORT ON THE INSPECTION OF DAIRIES AND COWSHEDS FOR 1924.

Mr. Woods, Veterinary Surgeon, submits the following report:—

The usual routine inspections of the cowsheds and cattle have taken place during the year, I have discovered no cases suspicious of udder tuberculosis. This is very satisfactory, but not conclusive that there have been no cases. What it does indicate is that where a cowkeeper finds anything wrong with a cow's udder he passes the animal at once along to the butcher which is the best thing he can do, both in his own and the public interest. Last year I drew attention to the ease, which, with a little system, grade A milk could be produced by any cowkeeper in the district, and tabulated a few simple rules, necessary for the purpose, which would only add fractionally to the cost of production. I understand there has been some demand for copies of these rules, which really are not my rules at all, but are recommendations of the Reading Clean Milk Society. This society deserves great credit; it has held demonstrations at the larger Agricultural Shows, and its propaganda work ought to be very useful, but so far there have been no applications from any of the cowkeepers for registration as producers of Grade A milk, and I doubt whether there will be, until there is a public demand for it. The term Grade A milk is unfortunate and seems to indicate that it must be very difficult to produce, whereas, as a matter of fact, it is the lowest grade on the register and, I repeat, can be produced at very little extra expense. It is method that is wanted, and if there is a public demand for it, it will be produced. The pasteurising plant mentioned last year as in course of erection, is now in full working order, and anyone desiring this milk need have no difficulty in obtaining it.

9.—PUBLIC HEALTH STAFF, 1924.

Medical Officer of Health.

Medical Superintendent of Sanatoria.

Superintendent School Medical Officer,

Administrative Tuberculosis Officer :

* HENRY WHITEHEAD, M.D., D.P.H., Vict., M.B., B.S. Lond.

Deputy Medical Officer of Health,

Clinical Tuberculosis Officer :

* A. D. MACMAHON, M.B., D.P.H.

Assistant Medical Officer—Maternity and Child Welfare :

(Miss) M. A. WILLIAMS, M.R.C.S., L.R.C.P.

Clinical V.D. Officer (part time) :

* HENRY BARDSLEY, M.R.C.S., L.R.C.P.

Veterinary Surgeon (part time) :

WILLIAM WOODS, F.R.C.V.S.

Public Analyst (part time) :

S. ERNEST MELLING, F.I.C.

Chief Sanitary Inspector :

* FREDERICK MARTLEW (a) (b).

Sanitary Inspectors :

J. ASHTON (a) (b), W. J. LOE (a) (b), G. YATES (a) (b).

E. RICHARDSON (a).

Factory, Workshops, and Shops Inspector :

F. G. BISHOP.

Matron of Sanatoria :

* MISS M. MOSS.

Lady Health Visitors :

* B. CROMPTON (c) (d), * E. RICHARDSON (a) (c), * L. LEE (a) (c),

* M. GOLD (a) (c), * M. LUCKET (c) (d) (e).

Tuberculosis Nurse :

* L. WEST (a).

School Dentist and Tuberculosis Dentist (part time) :

* J. R. TOWNHEND.

Clerks :

A. BYERS, * T. MCKNIGHT, J. ROUGHAN,

* M. M. WHITTLE (resigned 22-10-22), * A. FAIRHURST,

* M. MILLER (from 20-10-24).

Steam Disinfector Attendant :

J. RISLEY.

Disinfectors :

G. CROSTON,

J. ARROWSMITH,

A. MACKENZIE.

Motor Driver :

L. HILTON.

(a) Sanitary Inspector's Certificate.

(b) Meat Inspector's Certificate.

(c) Certificate, Central Midwives' Board.

(d) Health Visitor and School Nurse's Certificate, Royal S.I.

(e) Hospital Trained.

*Salary contribution made under Public Health Acts or by Exchequer grants.

10.—HOUSING.

Although more houses were built in 1924 than in 1923, namely, 74, compared with 23, the housing shortage is becoming more and more acute.

In these circumstances, insanitary areas and insanitary dwellings cannot be dealt with except in a very temporary manner. The Government assisted schemes were inaugurated to accomplish the clearing of slum areas, and the demolition of insanitary dwellings, and there is no reason why the worst areas should not be proceeded with at once.

The members of the Insanitary Houses Committee have visited the various insanitary areas of the Borough, and are, therefore, aware of the bad conditions which exist.

It has been shown in previous reports, that when houses are packed close together, the death-rate from respiratory diseases is greater in those districts. Overcrowding and bad sanitary conditions cause disease and increase the death-rate.

In previous years I have repeatedly called attention to the shortage of houses, and given figures of the approximate requirements.

Number of new Houses erected during the year :—

(a) Total	74
(b) As part of a Municipal Housing Scheme ..	50

1.—*Unfit Dwelling-Houses :*

Inspection (1) Total number of dwelling houses inspected for housing defects under Public Health or Housing Acts	2101
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulation, 1910..	1875
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	11
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ..	1358

2.—*Remedy of Defects without Service of Formal Notices :*

Number of defective dwelling-houses rendered fit in consequence of informal action by Local Authority or their Officers.. .. .	893
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3.—Action under Statutory Powers :

(a) Proceedings under section 28 of the Housing, Town Planning, &c., Act, 1919.

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| (1) Number of dwelling houses in respect of which notices were served requiring repairs | Nil. |
| (2) Number of dwelling-houses which were rendered fit :— | |
| (a) by Owners | Nil. |
| (b) by Local Authority in default of Owners | Nil. |
| (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declaration by owners of intention to close | Nil. |

(b).—Proceedings under Public Health Acts :—

- | | |
|----------------------------------------------------------------------------------------------------------------|-----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 383 |
| (2) Number of dwelling houses in which defects were remedied :— | |
| (a) by Owners | 343 |
| (b) by Local Authorities in default of Owners | — |

(c).—Proceedings under section 17 and 18 of the Housing, Town Planning, &c., Act, 1909 :—

- | | |
|----------------------------------------------------------------------------------------------------------------------------------|------|
| (1) Number of representations made with a view to the making of Closing Orders | 4 |
| (2) Number of dwelling-houses in respect of which Closing Orders were made | 17 |
| (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-house having been rendered fit .. | Nil. |
| (4) Number of dwelling-houses in respect of which Demolition Orders were made .. | Nil. |
| (5) Number of dwelling-houses demolished in pursuance of Demolition Orders | Nil. |

Note.—Five dwelling-houses were demolished voluntarily by owner on account of their dangerous condition.

LEGAL PROCEEDINGS TAKEN DURING 1924.

<i>Case No.</i>	<i>Date.</i>	<i>Nature of Case.</i>	<i>Results.</i>
1925.			
1.	Apr. 17	Slaughtering an animal on unlicensed premises	Ordered to pay costs.
2.	May 27	Selling after prescribed closing time (Shops Act)	Fined 10/- and costs.

LEGAL PROCEEDINGS TAKEN DURING 1924

Case No.	Name of Case	Result
1025		
1	Apr 17 - Plaintiff vs an animal on defendant's premises	Order to pay costs
2	May 27 - Plaintiff after prescribed showing	Found 10% and costs

[The following text is extremely faint and largely illegible due to the quality of the scan. It appears to be a continuation of a list or a detailed account of legal proceedings.]



